



# Phenotypic and Functional Analysis of Human NK Cell Subpopulations According to the Expression of FcεR1γ and NKG2C

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Human memory-like NK cells are commonly defined by either a lack of FcεR1γ or gain of NKG2C expression. Here, we investigated the heterogeneity of human CD56<sup>dim</sup> NK cell subpopulations according to the expression of FcεR1γ and NKG2C in a large cohort ( $n = 127$ ). Although the frequency of FcεR1γ<sup>-</sup> and NKG2C<sup>+</sup> NK cells positively correlated, the FcεR1γ<sup>-</sup> and NKG2C<sup>+</sup> NK cell populations did not exactly overlap. The FcεR1γ<sup>+</sup>NKG2C<sup>+</sup>, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup>, and FcεR1γ<sup>-</sup>NKG2C<sup>-</sup> NK cell populations were only evident after HCMV infection, but each had distinct characteristics. Among the subpopulations, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup> NK cells exhibited the most restricted killer immunoglobulin-like receptor repertoire, suggesting clonal expansion. Moreover, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup> NK cells exhibited the lowest Ki-67 and highest Bcl-2 expression, indicating the long-lived quiescent memory-like property. Functionally, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup> NK cells had weak natural effector function against K562 but strong effector functions by CD16 engagement, whereas FcεR1γ<sup>+</sup>NKG2C<sup>+</sup> NK cells had strong effector functions in both settings. Anatomically, the FcεR1γ<sup>+</sup>NKG2C<sup>+</sup>, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup>, and FcεR1γ<sup>-</sup>NKG2C<sup>-</sup> NK cell populations were present in multiple human peripheral organs. In conclusion, we demonstrate the heterogeneity of memory-like NK cells stratified by FcεR1γ and NKG2C and suggest both markers be utilized to better define these cells.

**Keywords:** memory, NK cell, NKG2C, FcεR1γ, human, cytomegalovirus

## INTRODUCTION

NK cells are cytotoxic innate lymphocytes responsible for early immune reactions to viral infections and tumors (1). Although immunological memory is a characteristic of adaptive immunity, emerging data indicate that NK cells can also acquire immunological memory (2, 3). Human NK cells can be classified in immature CD56<sup>bright</sup> and mature CD56<sup>dim</sup> cells (4, 5). Within the CD56<sup>dim</sup> NK cell population, a subset of NK cells that gain NKG2C or lose FcεR1γ expression have been suggested as memory-like NK cells, which exhibit features of long-term persistence and unique epigenetic profiles (6, 7).

These memory-like NK cells are found exclusively in people infected with human cytomegalovirus (HCMV), and UL40 peptides have been described as specific antigens for the expansion of memory-like NK cells (6, 8). These memory-like NK cells can constitute a large proportion of the total NK cell population and persist for several years (6, 9). The role of these cells in human physiology is yet to be identified, but they are suggested to serve as effectors for controlling HCMV (10).

Memory-like NK cells have been studied more extensively in mouse models than human subjects. Although mouse and human memory-like NK cells share some characteristics, they also have distinct properties, including an absence of Fc $\epsilon$ RI $\gamma$ <sup>-</sup> cells in the mouse memory-like NK cell population (2, 6). Therefore, human-specific studies are required to better understand the biology of memory-like NK cells in humans. Although the expression of NKG2C and loss of Fc $\epsilon$ RI $\gamma$  have been suggested to be key features of memory-like NK cells in humans (6, 7), NKG2C<sup>+</sup> and Fc $\epsilon$ RI $\gamma$ <sup>-</sup> cells do not overlap exactly and are occasionally dissociated, implying heterogeneity within memory-like NK cells (11).

In the present study, we recruited a large cohort of adult donors to investigate the heterogeneity of human memory-like NK cells according to Fc $\epsilon$ RI $\gamma$  and NKG2C expression. Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup>, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup>, and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells were only evident in HCMV-seropositive donors. Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup>, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup>, and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells exhibited distinct characteristics, both phenotypically and functionally. The Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> NK cell population had the most restricted killer cell immunoglobulin-like receptor (KIR) repertoire of all other subpopulations. Moreover, these cells exhibited characteristics of long-lived quiescent memory-like cells. Although Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells exhibited weak natural effector functions, Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup> NK cells showed strong natural effector functions. However, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> NK cells exerted strong effector functions by CD16 engagement. The memory-like NK cell subpopulations were detected in multiple human peripheral organs, but were less frequent in secondary lymphoid organs. These findings demonstrate the heterogeneity within memory-like NK cells and suggest that combining both markers may better define memory-like NK cells.

## MATERIALS AND METHODS

### Human Subjects and Sample Collection

Human peripheral blood samples were collected from 127 Koreans who were recruited from subjects initially registered in the Yonsei Cardiovascular Genome cohort. The median age was 62 years (range, 20–81 years) and 81 were males. This study received prior approval from the Institutional Review Board of the Yonsei University College of Medicine (IRB number: 4-2001-0039, 4-2010-0500). All subjects gave written informed consent in accordance with the Declaration of Helsinki. Among the cohort, 123 subjects were seropositive for HCMV. Serial peripheral blood was obtained from an adult healthy donor with acute HCMV infection. Pre-infection peripheral blood mononuclear cells (PBMCs) were also

available from this donor. Liver perfusates were obtained from healthy donor livers during liver transplantation, liver tissues from hepatitis B virus-infected explanted livers during liver transplantation, pleural fluid from patients with tuberculosis, tonsils were obtained during tonsillectomy, and lymph nodes without tumor involvement and tumor tissues were obtained during surgery for non-small cell lung cancer. PBMCs and liver sinusoidal lymphocytes (LSLs) were isolated from peripheral blood and liver perfusates, respectively, using standard Ficoll-Paque (GE Healthcare, Uppsala, Sweden) density gradient centrifugation. Tissues were dissociated into single cells using a gentleMACS dissociator (Miltenyi, Bergisch Gladbach, Germany) as described previously (12). The serological status for CMV, HSV1, HSV2, and EBV was measured using virus-specific ELISA kits (IBL International, Hamburg, Germany). All participants provided informed consent before enrollment.

### Flow Cytometry

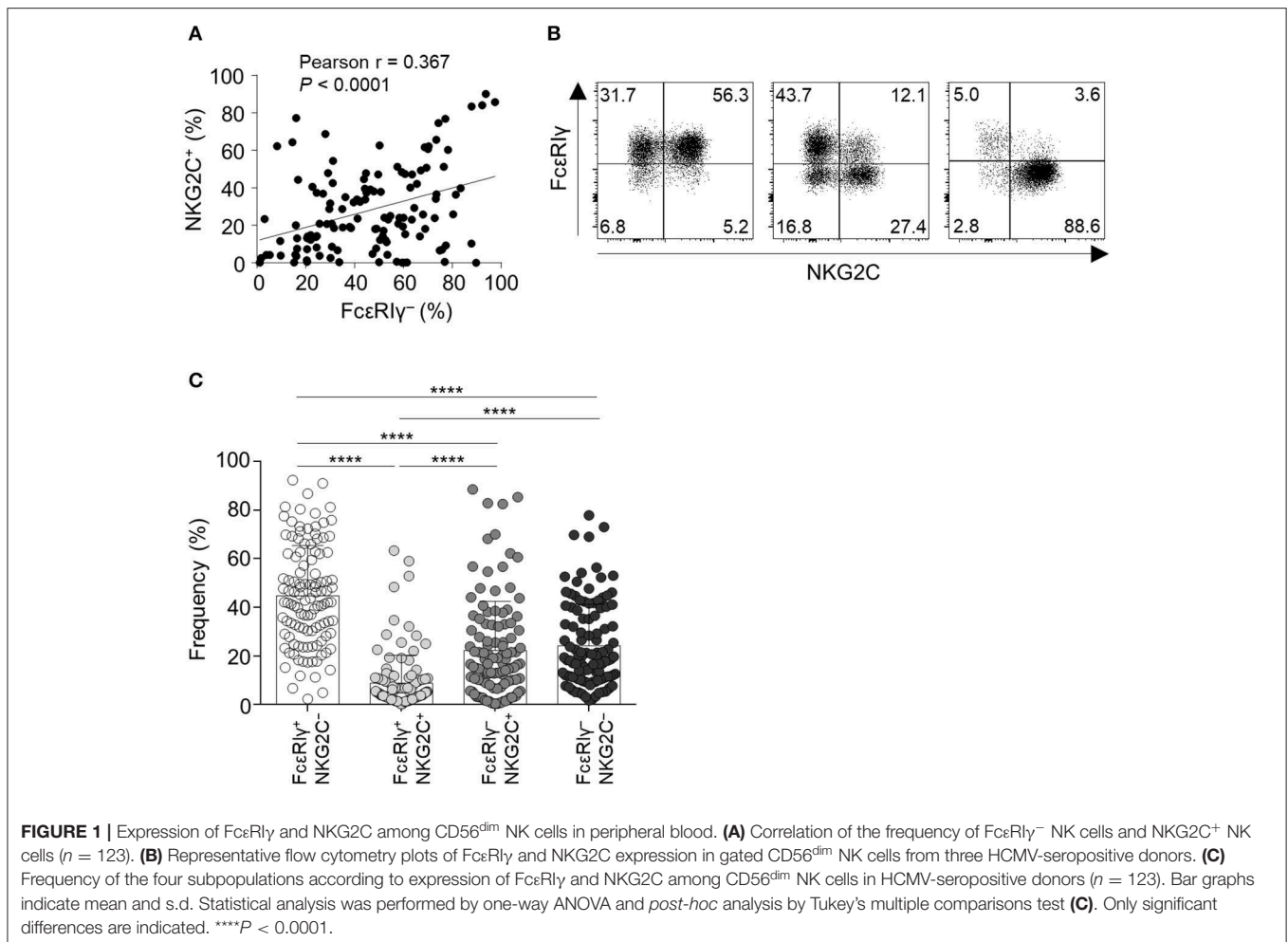
Antibodies to the following surface molecules were used for cell staining: CD3 (HIT3a), CD56 (NCAM16.2), CD158b (CH-L), CD14 (M $\phi$ P9), CD19 (HIB19) (all from BD Biosciences, San Jose, CA), NKG2C (134591), CD158a (143211) (all from R&D Systems, Abingdon, UK), CD158e1 (DX9), Bcl-2 (100), Ki-67 (Ki-67) (all from BioLegend, San Diego, CA), CD57 (TBO1, eBioscience, San Diego, CA), and Fc $\epsilon$ RI $\gamma$  (Merck Millipore, Billerica, MA). Dead cells were excluded using the LIVE/DEAD Fixable Red Dead Cell Stain Kit (Invitrogen, Carlsbad, CA). Intracellular staining for Ki-67, Bcl-2, and Fc $\epsilon$ RI $\gamma$  was performed using a FoxP3 transcription factor staining buffer set (eBioscience, San Diego, CA) and specific antibodies. All samples were acquired on an LSR II cytometer and analyzed using FlowJo software version 10.4.0 (Treestar, San Carlos, CA).

### Functional Assays

PBMCs were thawed and rested overnight in RPMI supplemented with 10% fetal bovine serum and 1% penicillin/streptomycin. The PBMCs were co-cultured with K562 cells or anti-CD16-coated P815 cells for 12 h at an effector to target ratio of 10:1 in the presence of anti-CD107a (H4A3, BD Biosciences, San Jose, CA). Brefeldin A and monensin were added 1 h after co-incubation. For the anti-CD16 coating, P815 cells were incubated at 37°C with 10  $\mu$ g/mL anti-CD16 antibody for 30 min. Cytokine production was detected by intracellular staining using antibodies to IFN- $\gamma$  (B27) and TNF- $\alpha$  (Mab11) (all from BD Biosciences, San Jose, CA).

### Statistical Analysis

Statistical comparisons were performed as indicated in the figure legends. To quantify the diversity of KIRs, the inverse Simpson index was calculated, in which a lower value indicates less diversity. Two-sided  $P < 0.05$  were considered significant. All statistical analyses were performed in Prism software version 6.0 (GraphPad, La Jolla, CA).



## RESULTS

### Expression of FcεRIγ and NKG2C in Peripheral Blood CD56<sup>dim</sup> NK Cells

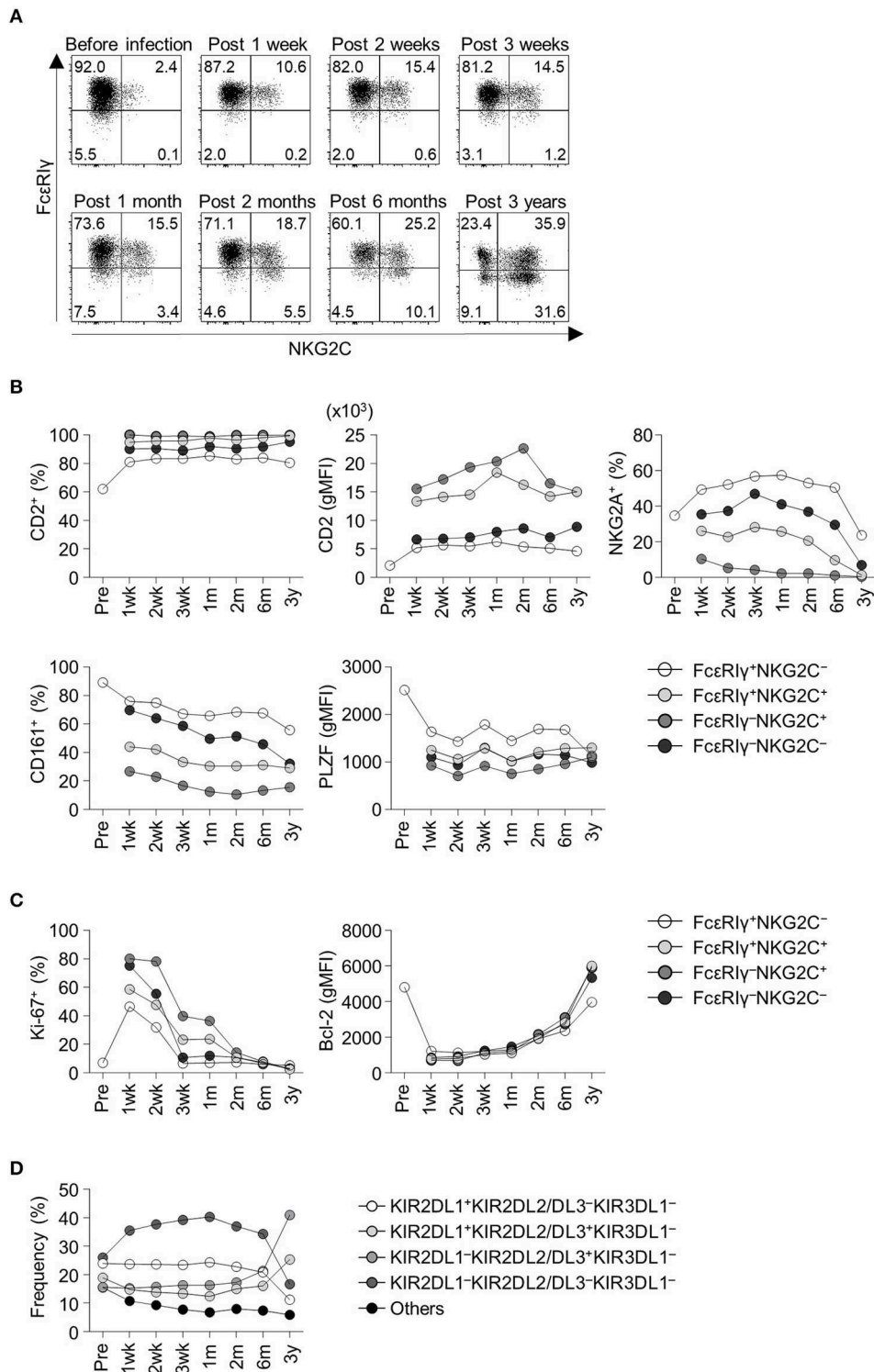
First, we examined the expression of FcεRIγ and NKG2C in live CD56<sup>dim</sup>CD3<sup>-</sup>CD14<sup>-</sup>CD19<sup>-</sup> cells (CD56<sup>dim</sup> NK cells) among PBMCs from 123 HCMV-seropositive donors. The percentage of FcεRIγ<sup>-</sup> NK cells significantly correlated with the percentage of NKG2C<sup>+</sup> NK cells (**Figure 1A**). However, FcεRIγ<sup>-</sup> cells were not always NKG2C<sup>+</sup> and vice versa (**Figure 1B**). Among CD56<sup>dim</sup> NK cells, the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> population was most frequent and FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> population least frequent, whereas the FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> populations had similar frequencies (**Figure 1C**). In summary, the FcεRIγ<sup>-</sup> and NKG2C<sup>+</sup> populations overlap to some degree but are dissociated.

### FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK Cells Are Clonally Expanded From FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> NK Cells

We obtained serial peripheral blood from a healthy adult donor who experienced acute HCMV infection. Pre-infection PBMCs from this donor were also available from storage. Before HCMV infection, the donor had a low frequency of FcεRIγ<sup>-</sup>

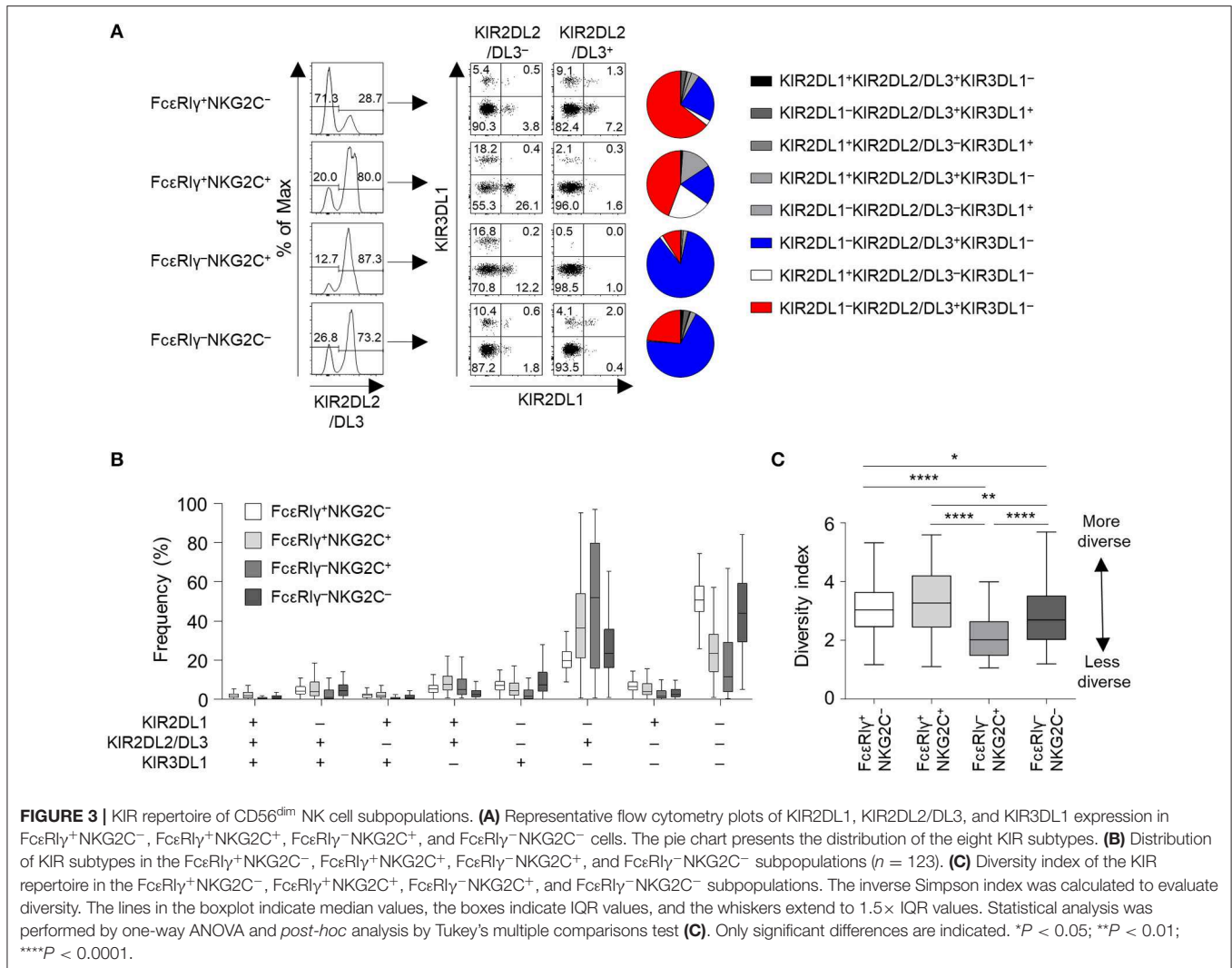
NK cells and NKG2C<sup>+</sup> NK cells (**Figure 2A**). Following acute HCMV infection, the FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> population appeared first, followed by the FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> population (**Figure 2A**). The frequency of FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> cells continuously increased for 3 years post-infection. The frequency of FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> cells also slightly increased. This representative example indicates that FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> cells first acquire NKG2C expression, and then subsequently lose FcεRIγ expression following acute HCMV infection.

Next, we analyzed relevant markers for memory-like NK cells during the course of acute HCMV infection in the healthy donor. Memory-like NK cells have been reported to have higher expression of CD2 (13) and lower expression of NKG2A, CD161, and PLZF (6, 7, 14). FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> cells exhibited high CD2 expression, low NKG2A<sup>+</sup> and CD161<sup>+</sup> cell frequency, and low PLZF expression early after acute HCMV infection (**Figure 2B**). During acute HCMV infection, all NK cell subpopulations showed a robust increase in the frequency of proliferating Ki-67<sup>+</sup> cells and downregulation of Bcl-2 (**Figure 2C**). Among the subpopulations, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup>, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup>, and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> cells, showed higher frequencies of Ki-67<sup>+</sup> cells and higher expression of Bcl-2 than FcεRIγ<sup>+</sup>NKG2C<sup>-</sup>



**FIGURE 2 |** Frequency and phenotypes of CD56<sup>dim</sup> NK cell subpopulations before and following acute HCMV infection. **(A)** Sequential change in FcεR1γ and NKG2C expression among CD56<sup>dim</sup> NK cells in an adult healthy donor before and after acute HCMV infection. Time points indicate time from symptom onset. **(B)** Frequency of CD2<sup>+</sup> cells, geometric mean fluorescence intensity (gMFI) of CD2, frequency of NKG2A<sup>+</sup> cells, CD161<sup>+</sup> cells, and gMFI of PLZF in FcεR1γ<sup>+</sup>NKG2C<sup>-</sup>, FcεR1γ<sup>+</sup>NKG2C<sup>+</sup>, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup>, and FcεR1γ<sup>-</sup>NKG2C<sup>-</sup> cells before and following acute HCMV infection. **(C)** Frequency of Ki-67<sup>+</sup> cells and gMFI of Bcl-2 in FcεR1γ<sup>+</sup>NKG2C<sup>-</sup>, FcεR1γ<sup>+</sup>NKG2C<sup>+</sup>, FcεR1γ<sup>-</sup>NKG2C<sup>+</sup>, and FcεR1γ<sup>-</sup>NKG2C<sup>-</sup> cells. **(D)** Frequency of KIR combinations before and following acute HCMV infection among CD56<sup>dim</sup> NK cells.





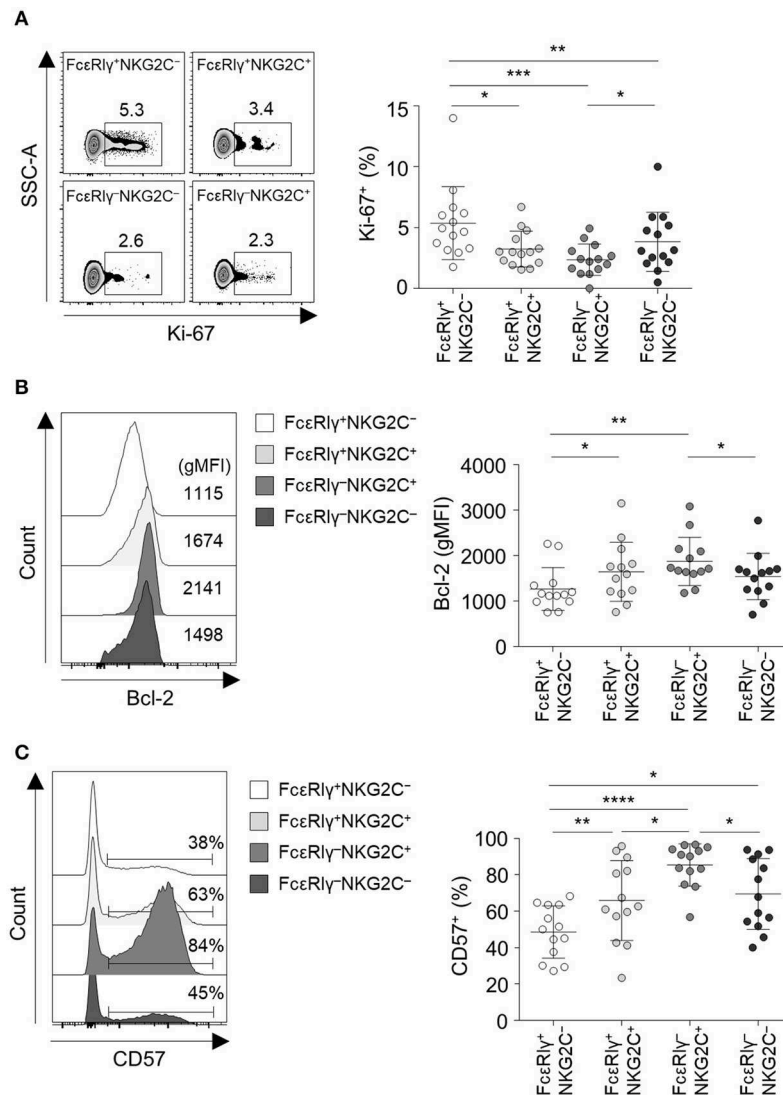
cells (Figure 2C). We also analyzed the change in KIR repertoire during acute HCMV infection. KIRs are expressed on the surface of NK cells through a stochastic process, and the expression is maintained through DNA methylation (15, 16). This creates a diverse repertoire of NK cell clones characterized by individual combinations of KIRs. We investigated the expression of three commonly expressed KIRs, KIR2DL1, KIR2DL2/L3, and KIR3DL1, which resulted in eight KIR combinations. The KIR repertoire was skewed toward KIR2DL1<sup>-</sup>KIR2DL2/DL3<sup>+</sup>KIR3DL1<sup>-</sup> within the CD56<sup>dim</sup> NK cells, which was the dominant combination in the FcεRI<sup>-</sup>NKG2C<sup>+</sup> subpopulation, following HCMV infection (Figure 2D).

We then analyzed the KIR repertoire in the four subpopulations of CD56<sup>dim</sup> NK cells of the cohort of 123 HCMV-seropositive subjects. In a representative HCMV-seropositive donor, the KIR repertoire was most restricted in the FcεRI<sup>-</sup>NKG2C<sup>+</sup> subpopulation, and the KIR2DL1<sup>-</sup>KIR2DL2/DL3<sup>+</sup>KIR3DL1<sup>-</sup> combination predominated (Figure 3A). In the whole cohort, the four subpopulations had distinct patterns of KIR repertoire

(Figure 3B). The KIR2DL1<sup>-</sup>KIR2DL2/DL3<sup>-</sup>KIR3DL1<sup>-</sup> combination was more common in the FcεRI<sup>+</sup>NKG2C<sup>-</sup> and FcεRI<sup>-</sup>NKG2C<sup>-</sup> subpopulations, whereas the KIR2DL1<sup>-</sup>KIR2DL2/DL3<sup>+</sup>KIR3DL1<sup>-</sup> combination was more common in the FcεRI<sup>-</sup>NKG2C<sup>+</sup> and FcεRI<sup>+</sup>NKG2C<sup>+</sup> subpopulations (Figure 3B). Furthermore, FcεRI<sup>-</sup>NKG2C<sup>+</sup> cells exhibited the most restricted KIR diversity compared to the other subpopulations (Figure 3C). The FcεRI<sup>-</sup>NKG2C<sup>-</sup> subpopulation also exhibited restricted KIR diversity compared to the FcεRI<sup>+</sup>NKG2C<sup>-</sup> subpopulation. Taken together, the results indicate that FcεRI<sup>-</sup>NKG2C<sup>+</sup> NK cells may acquire their characteristics early after HCMV infection and may be clonally expanded from FcεRI<sup>+</sup>NKG2C<sup>-</sup> NK cells.

### FcεRI<sup>-</sup>NKG2C<sup>+</sup> NK Cells Exhibit Features of Long-Term Memory and Terminal Differentiation

We further investigated the phenotype of the four different CD56<sup>dim</sup> NK cell subpopulations. Long-lived memory CD8<sup>+</sup> T cells are quiescent and apoptosis-resistant cells characterized



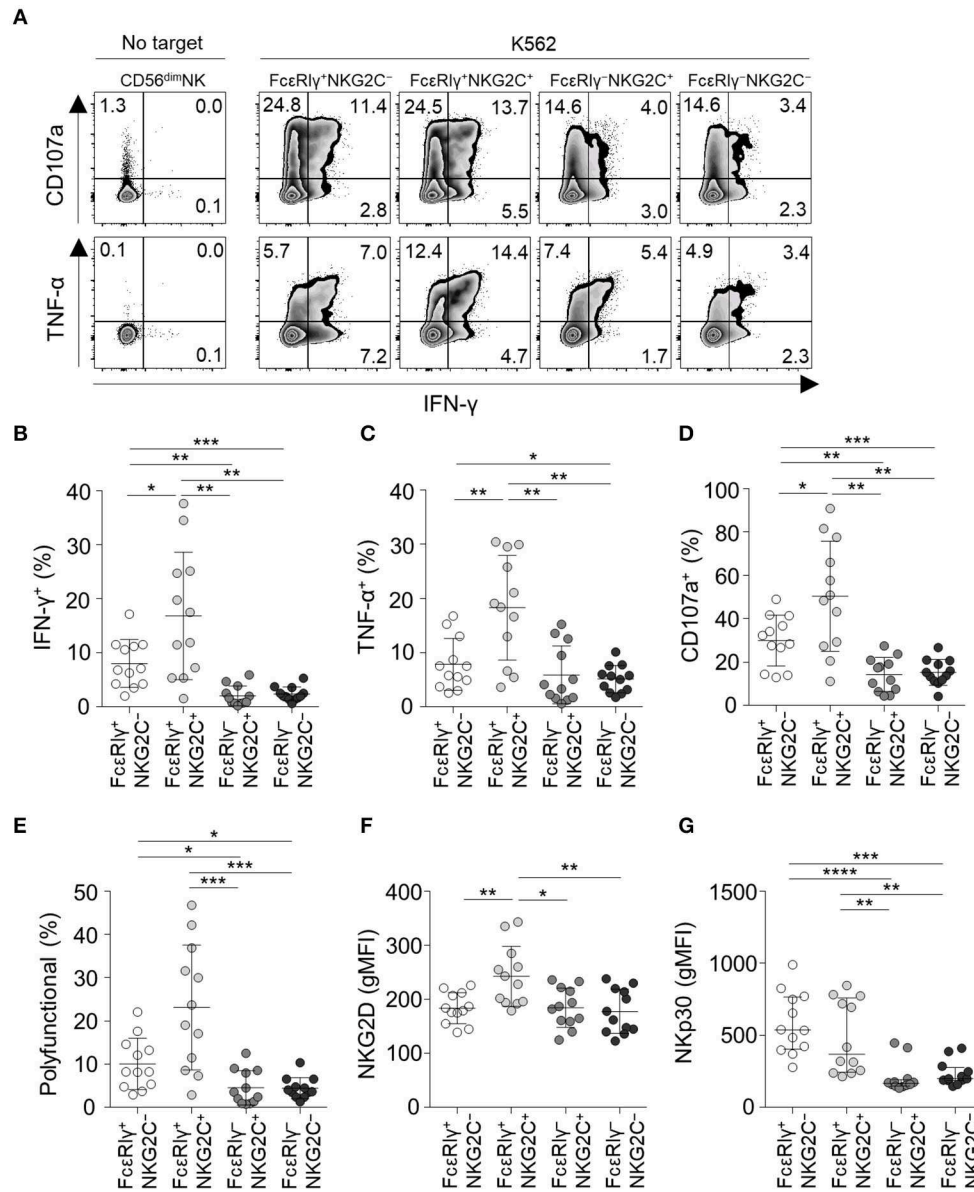
**FIGURE 4** |  $Fc\epsilon RI\gamma^{-}NKG2C^{+}CD56^{dim}$  NK cells exhibit features of long-term memory and terminal differentiation. **(A)** Percentage of Ki-67<sup>+</sup> cells among the  $Fc\epsilon RI\gamma^{+}NKG2C^{-}$ ,  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$ ,  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$ , and  $Fc\epsilon RI\gamma^{-}NKG2C^{-}$  subpopulations ( $n = 13$ ). **(B)** Geometric mean fluorescence intensity (gMFI) of Bcl-2 among the  $Fc\epsilon RI\gamma^{+}NKG2C^{-}$ ,  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$ ,  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$ , and  $Fc\epsilon RI\gamma^{-}NKG2C^{-}$  subpopulations ( $n = 13$ ). **(C)** Percentage of CD57<sup>+</sup> cells among the  $Fc\epsilon RI\gamma^{+}NKG2C^{-}$ ,  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$ ,  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$ , and  $Fc\epsilon RI\gamma^{-}NKG2C^{-}$  subpopulations ( $n = 13$ ). Representative FACS plots are presented on the left (**A–C**). Data are presented as mean  $\pm$  s.d. Statistical analyses were performed by one-way ANOVA and *post-hoc* analysis by Tukey's multiple comparisons test (**A–C**). Only significant differences are indicated. \* $P < 0.05$ ; \*\* $P < 0.01$ ; \*\*\* $P < 0.001$ ; \*\*\*\* $P < 0.0001$ .

by low Ki-67 and high Bcl-2 expression (17, 18). Similar to memory CD8<sup>+</sup> T cells,  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$  NK cells exhibited lower expression of Ki-67 (**Figure 4A**) and higher expression of Bcl-2 (**Figure 4B**) compared to the other subpopulations.  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$  and  $Fc\epsilon RI\gamma^{-}NKG2C^{-}$  NK cells also exhibited lower expression of Ki-67 (**Figure 4A**), and  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$  NK cells exhibited higher expression of Bcl-2 (**Figure 4B**) compared to  $Fc\epsilon RI\gamma^{+}NKG2C^{-}$  NK cells. Furthermore,  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$  NK cells had the highest expression of CD57, which is a marker of highly mature and terminally differentiated NK cells (19), although  $Fc\epsilon RI\gamma^{+}NKG2C^{+}$  and  $Fc\epsilon RI\gamma^{-}NKG2C^{-}$  NK cells had upregulated CD57 expression compared to  $Fc\epsilon RI\gamma^{+}NKG2C^{-}$  NK cells (**Figure 4C**). These data

indicate that  $Fc\epsilon RI\gamma^{-}NKG2C^{+}$  NK cells are more terminally differentiated than the other subpopulations and have features of long-lived memory cells.

### **$Fc\epsilon RI\gamma^{-}NKG2C^{+}$ NK Cells Have Reduced Activity Against K562 Target Cells but Enhanced CD16-Mediated Effector Functions**

To investigate the functionality of the four different subpopulations of CD56<sup>dim</sup> NK cells, we measured cytokine production (IFN- $\gamma$  and TNF- $\alpha$ ) and degranulation (CD107a) in each subpopulation when co-cultured with K562 target cells

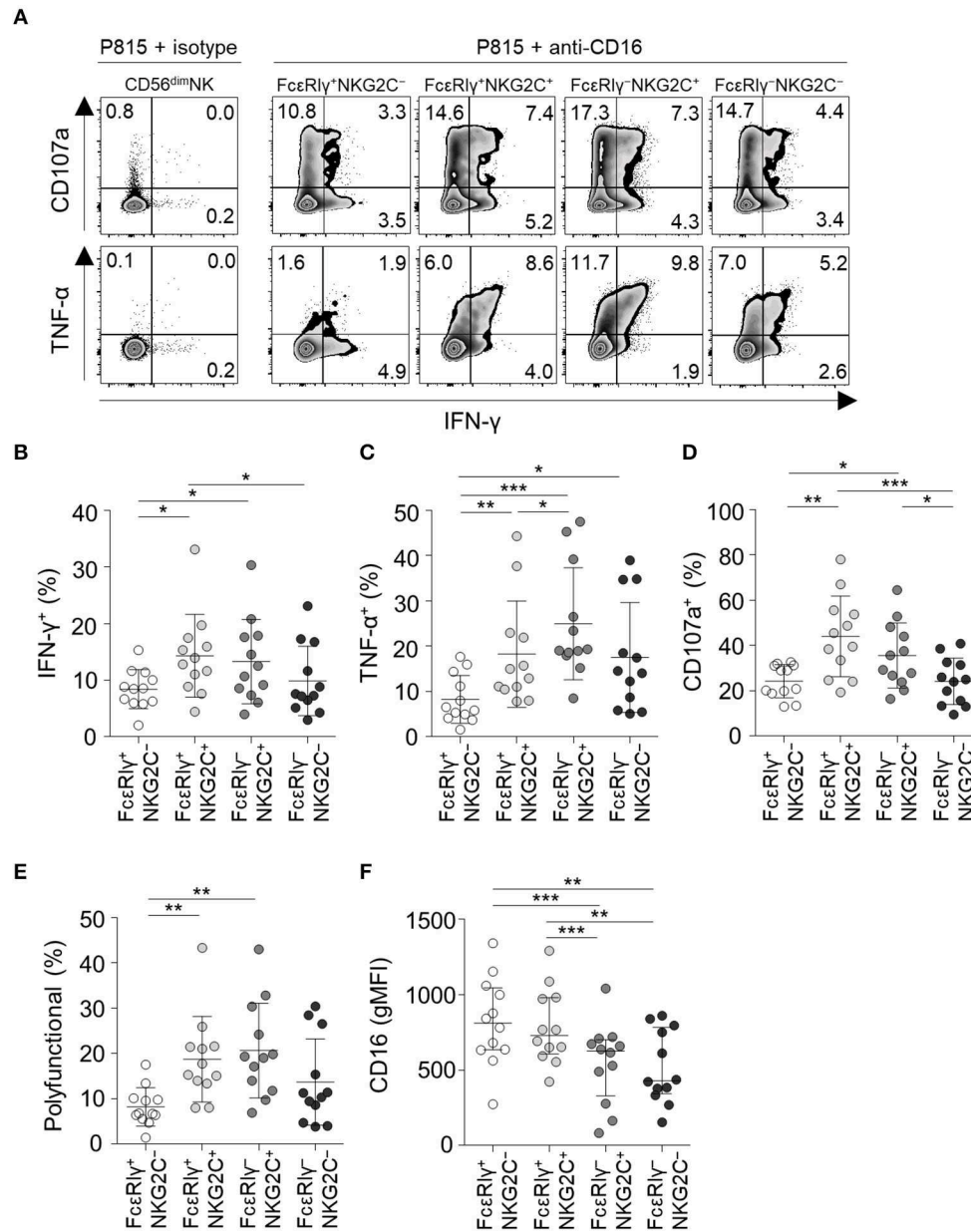


**FIGURE 5 |** Effector functions of CD56<sup>dim</sup> NK cell subpopulations in response to K562 target cells. **(A)** Representative flow cytometry plots of IFN- $\gamma$  and TNF- $\alpha$  production, and CD107a expression after co-culture with K562 cells for 12 h among the Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>-</sup>, Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup>, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup>, and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> subpopulations. **(B–D)** Percentage of IFN- $\gamma$ <sup>+</sup> **(B)**, TNF- $\alpha$ <sup>+</sup> **(C)**, and CD107a<sup>+</sup> **(D)** cells among the Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>-</sup>, Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup>, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup>, and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> subpopulations ( $n = 12$ ) after co-culture with K562 cells. **(E)** Percentage of polyfunctional cells that co-express IFN- $\gamma$ , TNF- $\alpha$ , or CD107a. **(F,G)** gMFI of NKG2D **(F)** and NKp30 **(G)** among the Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>-</sup>, Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup>, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup>, and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> subpopulations. Statistical analyses were performed by one-way ANOVA and *post-hoc* analysis by Tukey's multiple comparisons test **(B–G)**. Only significant differences are indicated. \* $P < 0.05$ ; \*\* $P < 0.01$ ; \*\*\* $P < 0.001$ ; \*\*\*\* $P < 0.0001$ .

**(Figure 5A).** Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells exhibited weak cytokine production and degranulation in response to K562 target cells **(Figures 5A–D)**. In addition, Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells had minimal polyfunctionality, defined as cells simultaneously positive for IFN- $\gamma$ , TNF- $\alpha$ , and/or CD107a **(Figure 5E)**.

Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup> NK cells had the highest functionality against K562 target cells. NKG2D receptor, which

mediates the cytolytic activity of NK cells against target cells expressing NKG2D ligands (20), was most highly expressed in Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup> NK cells, and expressed at significantly lower levels in Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>+</sup> and Fc $\epsilon$ RI $\gamma$ <sup>-</sup>NKG2C<sup>-</sup> NK cells compared to Fc $\epsilon$ RI $\gamma$ <sup>+</sup>NKG2C<sup>+</sup> NK cells **(Figure 5F)**. In addition, NKp30, which also has been documented in its function in killing B7-H6 expressing tumor cells (21), was more highly expressed



**FIGURE 6 |** CD16-mediated effector functions of CD56<sup>dim</sup> NK cell subpopulations. **(A)** Representative flow cytometry plots of IFN-γ and TNF-α production, and CD107a expression after co-culture with anti-CD16-coated P815 cells for 12 h among the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup>, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup>, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup>, and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> subpopulations. **(B–D)** Percentage of IFN-γ<sup>+</sup> **(B)**, TNF-α<sup>+</sup> **(C)**, and CD107a<sup>+</sup> **(D)** cells among the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup>, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup>, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup>, and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> subpopulations ( $n = 12$ ) after co-culture with anti-CD16-coated P815 cells. **(E)** Percentage of polyfunctional cells that co-express IFN-γ, TNF-α, or CD107a. **(F)** gMFI of CD16 among the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup>, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup>, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup>, and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> subpopulations. Statistical analyses were performed by one-way ANOVA and *post-hoc* analysis by Tukey's multiple comparisons test **(B–F)**. Only significant differences are indicated. \* $P < 0.05$ ; \*\* $P < 0.01$ ; \*\*\* $P < 0.001$ .

in FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> and FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> NK cells **(Figure 5G)**.

Next, we analyzed NK cell functionality following co-culture with anti-CD16-coated P815 cells **(Figure 6A)**. FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells had the highest TNF-α production among all subpopulations **(Figure 6C)** and

higher IFN-γ production **(Figure 6B)** and degranulation activity **(Figure 6D)** than the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> subpopulations. Moreover, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells exhibited the highest polyfunctionality **(Figure 6E)**. FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> NK cells also had higher cytokine production, degranulation, and polyfunctionality than





$Fc\epsilon RI\gamma^+NKG2C^-$  NK cells (Figures 6B–E). However,  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells exhibited higher TNF- $\alpha$  production than  $Fc\epsilon RI\gamma^+NKG2C^-$  NK cells (Figure 6C). Although the majority of CD56<sup>dim</sup> NK cells express CD16,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  subpopulations exhibited lower mean fluorescence intensity of CD16 (Figure 6F). Taken together, the results indicate that  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells have diminished K562-induced natural effector functions but enhanced CD16-mediated effector functions compared to other subpopulations.

## Virological, Demographic, and Anatomical Factors Associated With $Fc\epsilon RI\gamma^-NKG2C^+$ NK Cells

To gain insights into the context in which the subpopulations of CD56<sup>dim</sup> NK cells emerge, we investigated the correlation between the frequency of each subpopulations and virological and demographical factors in 127 donors.  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells were not present in HCMV-seronegative individuals, whereas individuals seronegative for other herpesviruses had significant amounts of these populations. Among the 122 donors that were seropositive to HSV1, 121 were seropositive to HCMV and one donor that was seropositive to HSV1 but seronegative to HCMV had 2.68, 0.02, and 0.67% of  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  cells among CD56<sup>dim</sup> NK cells, respectively. All donors that were seropositive to HSV2 or EBV were seropositive to HCMV. These data suggest that HCMV drives the generation of  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells (Figure 7A). Chronological aging has been shown to correlate with decreased naïve T-cell pools and increased memory T cells (22), but none of the CD56<sup>dim</sup> NK cell subpopulations significantly correlated with age (Figure 7B).

Next, we examined the frequency of the four different CD56<sup>dim</sup> NK subpopulations in peripheral organs (Supplementary Figure 1).  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells were present at multiple sites, such as the liver sinusoid (Figure 7C), tonsils (Figure 7D), lymph nodes (Figure 7E), liver tissues (Figure 7F), pleural fluid (Figure 7G), and tumor tissues (Figure 7H). Matched PBMCs and LSLs were available from three donors, and the frequencies of  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells were similar between the two compartments (Figure 7C). However, in tonsil tissues, the frequency of  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells was lower than in the matched PBMCs (Figure 7D). In addition, the frequency of  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells was relatively low in lymph nodes (Figure 7E).  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells were also detected in liver tissues (Figure 7F), pleural fluid (Figure 7G), and tumor tissues (Figure 7H). These data suggest that  $Fc\epsilon RI\gamma^+NKG2C^+$ ,  $Fc\epsilon RI\gamma^-NKG2C^+$ , and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells are present in various human peripheral organs, and that  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells are preferentially present in non-lymphoid organs.

## DISCUSSION

In the present study, we focused on the heterogeneity of human memory-like NK cells according to  $Fc\epsilon RI\gamma$  and NKG2C expression and characterized these subpopulations. Although loss of  $Fc\epsilon RI\gamma$  (6, 23, 24) and gain of NKG2C expression (25–27) have been suggested as markers of human memory-like NK cells in humans, we found that  $Fc\epsilon RI\gamma^-$  NK cells and  $NKG2C^+$  NK cells do not exactly overlap and are rather dissociated, indicating the need for research based on both markers. Furthermore, we demonstrated that  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells exhibit typical features of long-lived quiescent memory-like cells with decreased function against K562 target cells but enhanced CD16-mediated effector capacity. The other subpopulations,  $Fc\epsilon RI\gamma^+NKG2C^+$  and  $Fc\epsilon RI\gamma^-NKG2C^-$  NK cells, exhibited intermediate characteristics between memory-like  $Fc\epsilon RI\gamma^-NKG2C^+$  and non-memory  $Fc\epsilon RI\gamma^+NKG2C^-$  NK cells.

The  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells had unique features compared to the other subpopulations. First, the  $Fc\epsilon RI\gamma^-NKG2C^+$  subpopulation was most clonally restricted in terms of the KIR repertoire. This is supported by a recent study demonstrating that  $NKG2C^+$  NK cells undergo clonal-like expansion by recognizing certain HCMV *UL40*-encoded peptides presented by HLA-E (25). Second, the  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells had the lowest Ki-67 expression and highest Bcl-2 expression, implying that this population has quiescent memory-like features. We also examined the expression of CD57, a marker of terminal differentiation (19, 28), and found that  $Fc\epsilon RI\gamma^-NKG2C^+$  cells most highly express CD57. The  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells were not only phenotypically unique, but also functionally unique. We found that the  $Fc\epsilon RI\gamma^-NKG2C^+$  subpopulation had strong CD16-mediated effector functions, especially in terms of TNF- $\alpha$  production and polyfunctionality. However,  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells exhibited weak cytokine production and degranulation activity against K562. These data from  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells coincide with previous results demonstrating that  $Fc\epsilon RI\gamma^-$  memory-like NK cells have an antibody-dependent, enhanced response to target cells (6, 7, 23, 24, 29). Overall, the phenotypical and functional analyses indicated that  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells are a proper memory-like NK cell population.

The  $Fc\epsilon RI\gamma^+NKG2C^+$  NK cell population exhibited different characteristics from the  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cell population, though both populations expressed NKG2C. Despite the similarity in the KIR repertoires between both populations,  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells exhibited lower diversity than  $Fc\epsilon RI\gamma^+NKG2C^+$  NK cells, indicating further clonal expansion of  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells from  $Fc\epsilon RI\gamma^+NKG2C^+$  NK cells. In a donor with acute CMV infection,  $Fc\epsilon RI\gamma^+NKG2C^+$  NK cells first appeared after acute HCMV infection, followed by the appearance of  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells.  $Fc\epsilon RI\gamma^-NKG2C^+$  NK cells exhibited a robust increase in proliferation following HCMV infection and showed the most restricted KIR repertoire, supporting the clonal-like expansion of these cells. In addition, we found that characteristics of memory-like NK cells, such

as high CD2 expression and low CD161, NKG2A, and PLZF expression (6, 7, 13, 14), were evident early after HCMV infection, suggesting that the epigenetic modification described in memory-like NK cells (6, 7) may take place during the early developmental period. Functionally, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> NK cells exerted the highest effector function against K562 target cells among the NK subpopulations. Collectively, our data suggest that FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> NK cells may be effector cells against HCMV-infected cells that precede FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells.

Although the detailed mechanisms underlying the unique properties of memory-like NK cells have not been fully elucidated, FcεRIγ<sup>-</sup> or NKG2C<sup>+</sup> NK cells were previously shown to have decreased expression of transcription factors (PLZF and Helios) and signaling molecules (SYK, EAT-2, and DAB-2) that are epigenetically regulated (6, 7). In the current study, we found a dissociation between the phenotypical and functional characteristics of NK subpopulations based on FcεRIγ or NKG2C expression. First, the weak K562-triggered effector function was more similar between the FcεRIγ<sup>-</sup> NK cell populations (FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup>), whereas strong CD16-mediated effector functions were more similar between the NKG2C<sup>+</sup> cell populations (FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>+</sup>). This implies that different mechanisms may be involved in the regulation of direct natural and antibody-dependent effector functions of memory-like NK cells. Notably, FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> NK cells, which had the highest activity against K562 cells, exhibited higher NKG2D and NKp30 expression, which are known to mediate K562 killing. The lower expression of NK receptors in FcεRIγ<sup>-</sup> NK cells was also documented in previous reports (7, 11). The expression of receptors responsible for each function may partially contribute to the distinct functionality of the NK subpopulations. However, FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells, which had the highest CD16-mediated effector functions, exhibited a relatively lower expression of CD16 compared to other subpopulations, which were also examined in a previous report (11). These findings suggest other mechanisms underlying its enhanced CD16-mediated effector functions. A possible explanation may be the lack of NK cell education, since lower fraction of the FcεRIγ<sup>+</sup>NKG2C<sup>-</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> were KIR<sup>+</sup>. In this context, it will also be helpful to examine the expression of NKG2A and monitor the functional responses in NKG2A<sup>+</sup> vs. NKG2A<sup>-</sup> cells expressing self or non-self KIRs.

The patterns of tissue localization of memory-like NK cells in humans have not been well-studied. However, in mouse models, the murine CMV (MCMV)-specific memory-like NK cells have been reported to be distributed in both lymphoid and non-lymphoid organs after MCMV infection (3). In human, CD49a<sup>+</sup>KIR<sup>+</sup>NKG2C<sup>+</sup> NK cells have been described in liver tissue, but the expression of FcεRIγ was not examined (30). Although the number of evaluated donors was small, we found that, in humans, the frequency of memory-like NK cells, especially FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells, tends to be smaller in secondary lymphoid organs, such as lymph nodes and tonsils, compared to peripheral non-lymphoid

organs. Notably, the frequency of FcεRIγ<sup>-</sup>NKG2C<sup>-</sup> NK cells in the secondary lymphoid organs was relatively high compared to FcεRIγ<sup>+</sup>NKG2C<sup>+</sup> and FcεRIγ<sup>-</sup>NKG2C<sup>+</sup> NK cells, supporting the heterogeneity of the subpopulations in terms of organ distribution.

The specific role of memory-like NK cells in humans remains unclear. It is possible that memory-like NK cells are physiologically relevant in some contexts. A previous study showed that NKG2C<sup>+</sup> NK cells expand in recipients of hematopoietic cell transplantation following HCMV reactivation (26). Moreover, memory-like NKG2C<sup>+</sup> NK cells have been shown to be involved in the control of HCMV in kidney transplant recipients, implying the role of memory-like NK cells in controlling HCMV infection after organ transplantation (25). Recently, the presence of memory-like NK cells in patients co-infected with HCMV and HBV was reported (24). The antibody-dependent NK-cell response was enhanced in patients with HBV infection compared to healthy donors, though the clinical significance of this phenomenon needs to be researched further. The role of memory-like NK cells in the context of cancer has also been proposed. Expansion of memory-like NK cells after HCMV reactivation was associated with a reduced risk of leukemia relapse (31), and adoptively transferred memory-like NK cells demonstrated a robust clinical response in patients with myeloid leukemia (32). Moreover, a recent study showed that memory-like NK cells exhibit resistance to regulatory T-cell-mediated suppression, whereas the canonical NK cells were suppressed (8). Further investigation of the function and relevance of memory-like NK cells in various human diseases is required, including viral diseases and cancers.

This study had some limitations. We were not able to correlate HCMV viremia with the change in NK phenotypes during acute HCMV infection due to the lack of data on the virus titer. In addition, although paired PBMCs were available for liver sinusoidal lymphocytes and tonsil tissues, we did not have paired PBMCs for other peripheral tissues. The serology data of HCMV was not available for the donors of peripheral organs, although more than 97% of the Korean population is known to be seropositive to HCMV (33). Furthermore, we were not able to analyze the expression patterns of KIRs in accordance to the HLA-C genotype.

In conclusion, this study demonstrated heterogeneity within memory-like NK cells. The results indicate that both FcεRIγ and NKG2C should be utilized as markers to better define memory-like NK cells. This was also the first study to provide evidence of memory-like NK cells in diverse human peripheral organs, which will facilitate further research of memory-like NK cells in various contexts of human physiology and pathology.

## DATA AVAILABILITY STATEMENT

All datasets generated for this study are included in the article/**Supplementary Material**.



## ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Institutional Review Board of the Yonsei University College of Medicine. The patients/participants provided their written informed consent to participate in this study.

## AUTHOR CONTRIBUTIONS

KK, HY, SK, and E-CS designed research. KK, HY, and IH performed research. KK, HY, SK, S-HP, and E-CS analyzed data. SP provided clinical samples. KK and E-CS wrote the paper.

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## SUPPLEMENTARY MATERIAL

The Supplementary Material for this article can be found online at: <https://www.frontiersin.org/articles/10.3389/fimmu.2019.02865/full#supplementary-material>

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**Conflict of Interest:** The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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