

# A subset of human plasmacytoid dendritic cells expresses CD8 $\alpha$ upon exposure to herpes simplex virus type 1

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Classical and plasmacytoid dendritic cells (DC) play important roles in the defense against murine and human infections with herpes simplex virus (HSV). So far, CD8 $\alpha$  expression has only been reported for murine DC. CD8 $\alpha$ <sup>+</sup> DC have prominent cross-presenting activities, which are enhanced by murine CD8 $\alpha$ <sup>+</sup> PDC. The human orthologue of murine CD8 $\alpha$ <sup>+</sup> DC, the CD141 (BDCA3)<sup>+</sup> DC, mainly cross-present after TLR3 ligation. We report here the serendipitous finding that a subset of human PDC upregulates CD8 $\alpha$  upon HSV-1 stimulation, as shown by gene array and flow cytometry analyses. CD8 $\alpha$ , not CD8 $\beta$ , was expressed upon exposure. Markers of activation, migration, and costimulation were upregulated on CD8 $\alpha$ -expressing human PDC. In these cells, increased cytokine and chemokine levels were detected that enhance development and function of T, B, and NK cells, and recruit immature DC, monocytes, and Th1 cells, respectively. Altogether, human CD8 $\alpha$ <sup>+</sup> PDC exhibit a highly activated phenotype and appear to recruit other immune cells to the site of inflammation. Further studies will show whether CD8 $\alpha$ -expressing PDC contribute to antigen cross-presentation, which may be important for immune defenses against HSV infections *in vitro* and *in vivo*.

**Keywords:** dendritic cells, plasmacytoid, virus, HSV, human, murine

## Introduction

Since Ralph Steinman first described a new subset of cells characterized by tree-like processes in 1973 (Steinman and Cohn, 1973), knowledge about dendritic cells (DC) in mice and humans has grown exponentially. These cells were originally identified as important players in the defense against “foreign” pathogens, but it turns out that they are similarly crucial in initiating immune responses against tumor-associated antigens (Vacchelli et al., 2013). Immature DC engulf extracellular antigens, but in the absence of appropriate danger signals, they induce peripheral tolerance. Only after appropriate activation, DC release cytokines and chemokines, undergo a maturation process, and migrate toward secondary lymphatic tissues to induce cytotoxic responses by other immune cells (Palucka and Banchereau, 2012; Merad et al., 2013).

In this perspective paper, we will focus on the role of CD8 $\alpha$ -expressing DC. CD8 serves as useful subset marker for murine DC, which are highly efficient in cross-presenting foreign, self, and—most

**Abbreviations:** DC, dendritic cells; HSV, Herpes simplex virus; IFN, interferon; IL, interleukin; PBMC, peripheral blood mononuclear cells; PDC, plasmacytoid dendritic cells.

likely—tumor-associated antigens, although evidence is lacking that CD8 expression plays any role in the development and function of these cells (Shortman and Heath, 2010). So far, CD8 expression on human DC has not been reported (Naik, 2008). However, we report here a serendipitous finding of CD8 $\alpha$  expression on human plasmacytoid dendritic cells (PDC) after stimulation with herpes simplex virus type 1 (HSV-1), which characterizes a highly activated subset of PDC. We will discuss how the knowledge about CD8 $\alpha$ -expressing murine DC may translate into functions of CD8 $\alpha$ -expressing human PDC. For the background of this topic, the reader is referred to excellent review articles by respected colleagues (Villadangos and Young, 2008; Shortman and Heath, 2010; Joffre et al., 2012; Nierkens et al., 2013; Bedoui and Greyer, 2014; Boltjes and van Wijk, 2014).

## Murine CD8 $\alpha$ <sup>+</sup> DC: Prominent Cross-presentation

In the murine system, several different DC populations exist: lymphoid-organ resident CD8 $\alpha$ <sup>+</sup> or CD8 $\alpha$ <sup>-</sup> DC; migratory dermal CD103<sup>+</sup> or CD103<sup>-</sup> DC, which migrate to lymphatic tissue; Langerhans cells in the skin; inflammatory DC, which develop from monocytes; and PDC (Vremec et al., 1992; Bursch et al., 2007; Ginhoux et al., 2007, 2009; Leon et al., 2007; Poulin et al., 2010; Joffre et al., 2012). CD8 $\alpha$  is a marker for lymphoid tissue-resident DC, which make up roughly 20% of spleen DC and 70% of thymic DC, whereas only 0.2% of peripheral blood mononuclear cells are CD8 $\alpha$ <sup>+</sup> DC (Crowley et al., 1989; Vremec et al., 2000; Donnenberg et al., 2001; Henri et al., 2001; Shortman and Heath, 2010). These cells express a CD8 $\alpha\alpha$  homodimer rather than the CD8 $\alpha\beta$  heterodimer on T cells (Vremec et al., 1992, 2000). Precursors of CD8 $\alpha$ <sup>+</sup> DC may lack CD8 expression (Martinez del Hoyo et al., 2002). Apart from the classical CD8 $\alpha$ <sup>+</sup> DC population, this molecule is expressed by murine PDC in the spleen (O’Keeffe et al., 2002) and other migratory DC after activation (Anjuere et al., 1999, 2000; Merad et al., 2000; Henri et al., 2001). Mice with a knock-out for interferon regulatory factor (IRF) 8 neither develop CD8 $\alpha$ <sup>+</sup> DC nor PDC (Schiavoni et al., 2002; Aliberti et al., 2003; Tsujimura et al., 2003), whereas Batf3-deficient mice are only deficient in CD8 $\alpha$ <sup>+</sup> DC (Hildner et al., 2008; Edelson et al., 2010).

Amongst other receptors, the murine CD8 $\alpha$ <sup>+</sup> DC subset expresses CD11c, CD24, CD36, Necl2, MHC-II, the integrin CD103, the lectins CD205, CLEC9A, CLEC12A, and langerin (CD207) (Shortman and Heath, 2010). CLEC9A and CD36 are both involved in recognizing late apoptotic or necrotic cells (Albert et al., 1998; Caminschi et al., 2008; Huysamen et al., 2008; Sancho et al., 2009). Murine CD8 $\alpha$ <sup>+</sup> DC also express TLR3 and TLR9 (Edwards et al., 2003), and respond to TLR stimulation with proinflammatory IL-12 secretion and at least some type I interferon production (Hochrein et al., 2001). Upon stimulation, CD8 $\alpha$ <sup>+</sup> DC upregulate costimulatory markers CD40, CD80, and CD86 as well as CD25, CD62L, and MHC-II (Wilson et al., 2003).

CD8 $\alpha$ <sup>+</sup> DC are most efficient in antigen cross-presentation, a process in which extracellular antigen is not presented on MHC-II to CD4<sup>+</sup> T cells, but instead shunted to MHC-I with subsequent induction of CD8<sup>+</sup> T cells. Cross-presentation occurs through

the cytosolic or vacuolar pathway (Joffre et al., 2012). The former involves proteasomal degradation with subsequent transport of peptides into the endoplasmic reticulum via transporter associated with antigen processing 1 (TAP), whereas the latter is based on lysosomal proteolysis with subsequent loading of peptides onto MHC-I molecules (Joffre et al., 2012).

In this respect, CD8 $\alpha$ <sup>+</sup> DC, but not CD8 $\alpha$ <sup>-</sup> DC, were shown to cross-prime using a TAP-dependent pathway (den Haan et al., 2000; Pooley et al., 2001; Schnorrer et al., 2006; Lin et al., 2008). CD8 $\alpha$ <sup>+</sup> DC have been reported to selectively engulf dying cells *in vitro* and *in vivo* and present on MHC-I via a proteasome-dependent pathway (Iyoda et al., 2002; Schulz and Reis e Sousa, 2002). In these cells, endosomal acidification is limited (Savina et al., 2009), which fosters limited antigen degradation and efficient transport of the antigen to the cytosol (Delamarre et al., 2005). Overexpression of MHC-I loading complexes (Dudziak et al., 2007) by CD8 $\alpha$ <sup>+</sup> DC and expression of chemokine receptor XCR1, whose ligand XCL1 is secreted by activated CD8<sup>+</sup> T cells, contribute to antigen cross-presentation and differentiation of cytotoxic T cells (Dorner et al., 2009).

In HSV infections, CD8 $\alpha$ <sup>+</sup> DC are able to present viral antigens and prime naïve CD4<sup>+</sup> and CD8<sup>+</sup> T cells, which appears to be mediated by cross-presentation (Allan et al., 2003; Smith et al., 2003; Belz et al., 2004a,b; Wilson et al., 2006; Bedoui et al., 2009; Lee et al., 2009). It is still a matter of debate how the viral antigen is transported from peripheral infected tissue to the lymphoid-resident CD8 $\alpha$ <sup>+</sup> DC. In this process, mainly other (migratory) DC are reported to be involved (Zhao et al., 2003; Carbone et al., 2004; Allan et al., 2006; Bedoui et al., 2009; Jirmo et al., 2009). These migratory DC either capture viral antigens or are infected within the peripheral tissue, although reduced migratory capacity has been reported for HSV-infected DC (Jones et al., 2003; Eidsmo et al., 2009; Puttur et al., 2010). The transfer of viral antigen can occur via exosomes, gap junctions, or uptake of apoptotic material following death of migratory DC (Thery et al., 2009; Mazzini et al., 2014). Another option is “crossdressing”, i.e., the transfer of preformed MHC-I complexes loaded with peptides from infected cells to murine DC via secreted membrane vesicles or transfer of membrane fragments (troglodytosis) (Thery et al., 2009; Wakim and Bevan, 2011; Joffre et al., 2012).

## Murine CD8 $\alpha$ <sup>+</sup> PDC: Cross-presentation Help

Murine PDC were identified in the spleen of mice (Asselin-Paturel et al., 2001; O’Keeffe et al., 2003). Amongst other surface receptors, they express Ly6C, B220, and CD11c. Upon stimulation, type I interferons—and to a minor extent IL-12—are induced, and costimulatory markers CD40, CD69, CD80, and CD86 are upregulated (Asselin-Paturel et al., 2001; O’Keeffe et al., 2002; Lund et al., 2003). Unstimulated murine PDC express CD8 $\alpha$  only to a minor extent, while exposure to CpG or viruses enhances expression of this molecule (Nakano et al., 2001; O’Keeffe et al., 2002, 2003). When CD8 $\alpha$ <sup>+</sup> and CD8 $\alpha$ <sup>-</sup> PDC were separated and subsequently stimulated, they did not differ in cytokine production (O’Keeffe et al., 2002).

A few publications report TAP-dependent cross-presentation of soluble and particulate antigen by murine PDC after TLR ligation (Shinohara et al., 2006; Mouries et al., 2008; Kool et al., 2011). The majority of authors, however, deny cross-presentation by murine PDC (Chung et al., 2005; Janssen et al., 2006; Sapozhnikov et al., 2007; GeurtsvanKessel et al., 2008; Reboulet et al., 2010; Hennies et al., 2011). *In vitro* stimulation of murine PDC with HSV-1 or influenza allowed priming of CD8 $^+$  T cells (Belz et al., 2004a). In *in vivo* HSV-1 infections, however, PDC do not participate in active cross-presentation (Allan et al., 2003; Lee et al., 2009; Swiecki et al., 2013). Still, murine PDC appear to be important in enhancing cross-presentation by other DC. An explanation of this phenomenon could be that type I interferons increase cross-presentation by decreasing antigen degradation in endocytic compartments and stimulating the survival of CD8 $\alpha^+$  DC (Diamond et al., 2011; Fuertes et al., 2011; Lorenzi et al., 2011). In this respect, depletion of murine PDC was reported to impair CTL-mediated HSV-1 eradication in a CD2 $^-$ , CD40L $^-$ , and type I interferon-dependent manner (Yoneyama et al., 2005). Also in the lymphocytic choriomeningitis model, virus-induced type I interferons were required for cross-priming of CD8 $^+$  T cells (Le Bon et al., 2003). When PDC were depleted in CLEC4C-DTR mice, PDC proved to be important for inducing CD8 $^+$  T cell responses in systemic HSV-1 and HSV-2 infections (Swiecki et al., 2013). Further functions of PDC in murine HSV-1 and HSV-2 infections are reviewed in (Schuster et al., 2011).

## Human Orthologue of CD8 $\alpha^+$ DC: Cross-presentation Following Activation

The conventional human blood DC population consist of three subsets specifically expressing CD1c (BDCA1), CD16, or CD141 (BDCA3) (Dzionek et al., 2000; MacDonald et al., 2002). Evidence is accumulating that the CD11c $^+$  CD141 $^+$  DC subset represents the human orthologue of murine CD8 $\alpha^+$  DC. These cells can be detected in lymphatic tissues such as lymph nodes, tonsils, bone marrow, spleen, and also liver (Galibert et al., 2005; Lindstedt et al., 2005; Velasquez-Lopera et al., 2008; Bamboat et al., 2009; Poulin et al., 2010). Genome-wide expression analyses revealed a similar transcriptomal signature between CD141 $^+$  human DC and murine CD8 $\alpha^+$  DC (Robbins et al., 2008). Both subsets express Necl2 (Galibert et al., 2005), CLEC9A (Caminschi et al., 2008; Huysamen et al., 2008; Sancho et al., 2009; Jongbloed et al., 2010; Schreiber et al., 2012), TLR3 (Edwards et al., 2003; Lindstedt et al., 2005; Jongbloed et al., 2010), as well as CD207, Batf3, and IRF8 (Poulin et al., 2010). BDCA3 $^+$  DC also express the chemokine receptor XCR1 and respond to respective ligands (Bachem et al., 2010; Crozat et al., 2010). Similar to murine CD8 $\alpha^+$  DC, human BDCA3 $^+$  DC respond to TLR3 ligation with production of lambda interferons (Lauterbach et al., 2010). In contrast to murine CD8 $\alpha^+$  DC, human BDCA3 $^+$  DC do not express TLR9 (Jongbloed et al., 2010).

Lymphoid tissue-derived human BDCA3 $^+$  DC were shown to be at least equivalent to other human DC subsets in cross-presenting soluble or cell-associated antigens, even in the absence of activation (Segura et al., 2012, 2013). This process can be enhanced by stimulation with TLR3 ligands, inducing superior

cross-presenting activity by blood-derived BDCA3 $^+$  DC with induction of CD8 $^+$  T cell responses (Poulin et al., 2007; Bachem et al., 2010; Crozat et al., 2010; Jongbloed et al., 2010). There is evidence that cross-presentation by myeloid DC plays a role in human herpes virus infections (Bosnjak et al., 2005), but the importance of BDCA3 $^+$  DC needs to be further clarified.

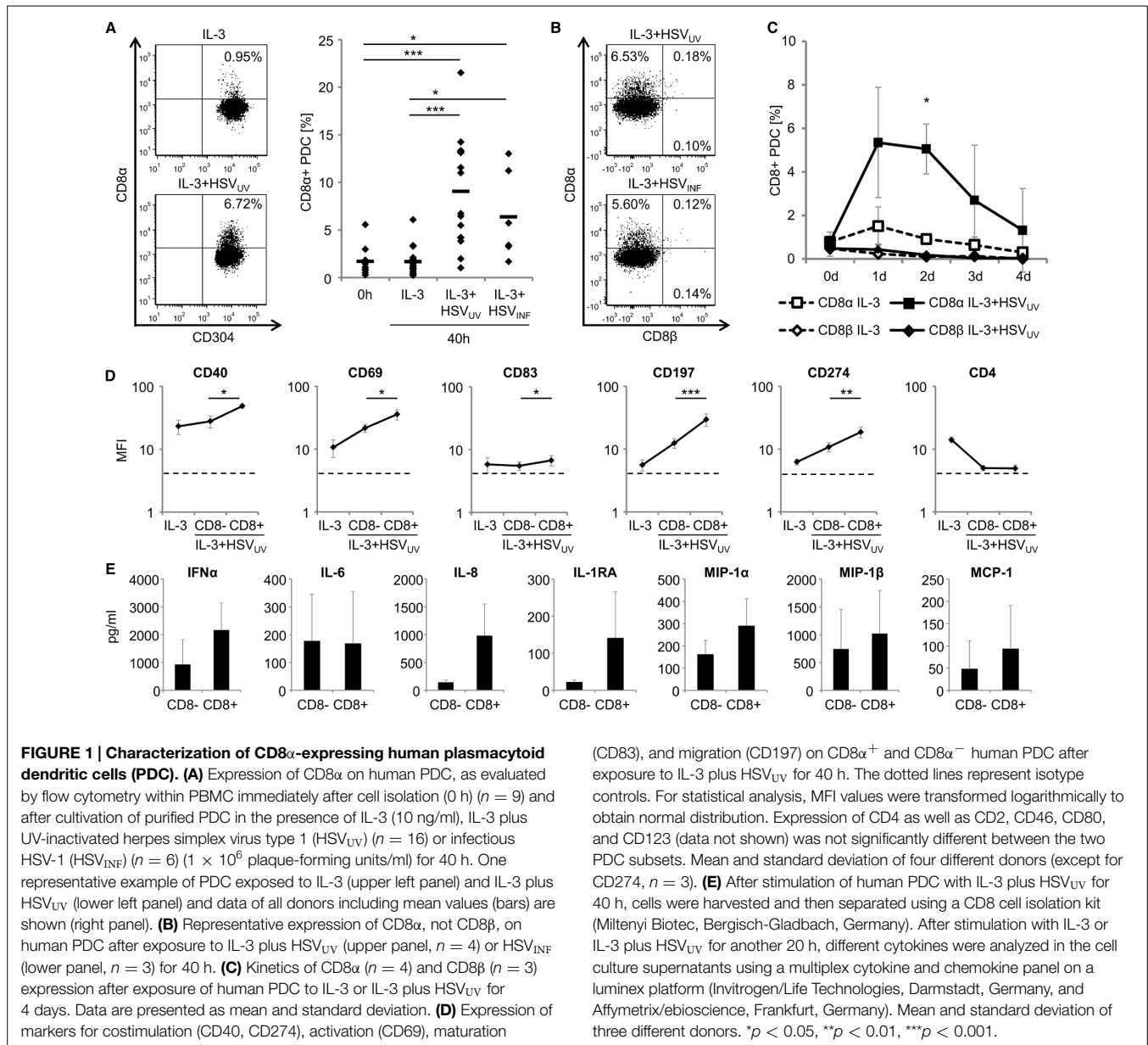
## Human CD8 $\alpha^+$ PDC: Cross-presentation Help Following Viral Activation?

In 1999, two independent groups identified human PDC as major producers of type I interferons in the blood (Cella et al., 1999; Siegal et al., 1999). Amongst other receptors, PDC express BDCA2 and BDCA4, MHC-II, the lymph node-homing receptors CD62L and CCR7 (CD197), and costimulatory molecules (CD40, CD80, CD86, CD270, CD274, CD275) (Cella et al., 2000; Dzionek et al., 2000; Ito et al., 2007; Jaehn et al., 2008; Donaghy et al., 2009; Schuster et al., 2010, 2011; Cabezon et al., 2011). PDC recognize single-stranded RNA and CpG molecules via TLR7 and TLR9, respectively (Kadowaki et al., 2001).

Whether human PDC can cross-present soluble or particulate antigens is still a matter of debate. Viral antigen derived from influenza, recombinant vaccinia, tick-borne encephalitis or human immunodeficiency type I virus infection was taken up into recycling endosomes, loaded onto MHC-I molecules, and presented to CD8 $^+$  T cells (Fonteneau et al., 2003a,b; Hoeffel et al., 2007; Di Pucchio et al., 2008; Lui et al., 2009; Mittag et al., 2011; Tel et al., 2012). In addition, antigen loaded on synthetic microparticles or soluble tumor-associated antigen was presented to CD8 $^+$  T cells by exposed PDC (Tel et al., 2010; Guillerme et al., 2013; Segura et al., 2013). In contrast, other groups report no or only minor cross-presenting capacities of human PDC (Schnurr et al., 2005; Bachem et al., 2010; Crozat et al., 2010).

An early report by Fitzgerald-Bocarsly described the "interferon-producing cells" as being important for the lysis of HSV-infected fibroblasts (Feldman et al., 1992). PDC infiltrate herpetic lesions in the genital tract and tightly colocalize with NK and T cells (Donaghy et al., 2009). HSV-stimulated human PDC induce migration of activated T and NK cells via chemokine secretion (Megjugorac et al., 2004), and contribute to the activation of NK cells via IFN $\alpha$ - and TNF $\alpha$ -dependent mechanism (Vogel et al., 2014). In addition, HSV-exposed PDC were shown to prime IL-10 and IFN- $\gamma$  production by cytotoxic regulatory CD4 $^+$  T cells (Kadowaki et al., 2000; Kawamura et al., 2006).

So far, expression of CD8 on human PDC has not been reported. Since the expression of this molecule on the surface of human PDC may define new and yet unknown capacities of these cells, we investigated whether PDC might upregulate these molecules upon viral stimulation. Recently, we analyzed the expression profile of human PDC, which were purified from PBMC of six donors. After exposure to IL-3 or IL-3 plus UV-inactivated HSV-1 (HSV<sub>UV</sub>), RNA was extracted from these cells and hybridized to a Human Genome U133 Plus 2\_0 Array (Affymetrix, Santa Clara, CA, USA) (Schuster et al., 2010). In these analyses, we focused on the expression and regulation of surface receptors on PDC. Notably, the signal for CD8 $\alpha$  expression



increased from 57.2 to 100.1, which was slightly above the arbitrary threshold of 95, reflecting the expression signal of TLR9. In contrast, three probe sets for CD8 $\beta$  remained below this threshold. These data suggested a potential expression of CD8 $\alpha$  on PDC upon stimulation with HSV<sub>UV</sub>.

To corroborate these data, we isolated PDC from a total of 15 different donors, and investigated CD8 $\alpha$  expression on these cells in independent experiments after exposure to IL-3 ( $n = 16$ ), IL-3 plus HSV<sub>UV</sub> ( $n = 16$ ), or IL-3 plus infectious HSV-1 (HSV<sub>INF</sub>,  $n = 6$ ) for 40 h. Flow cytometry confirmed a distinct expression of CD8 $\alpha$  on a subset of HSV<sub>UV</sub>- and HSV<sub>INF</sub>-exposed PDC (Figure 1A). After stimulation with HSV<sub>UV</sub> or HSV<sub>INF</sub>, the percentage of CD8 $\alpha$ -expressing PDC was significantly higher compared to PDC within freshly isolated PBMC ( $n = 9$ ) ( $p < 0.001$  for HSV<sub>UV</sub> and  $p < 0.05$  for HSV<sub>INF</sub>, unpaired  $t$ -test) and purified

PDC that were cultivated in the presence of IL-3 only ( $p < 0.001$  for HSV<sub>UV</sub> and  $p < 0.05$  for HSV<sub>INF</sub>, paired  $t$ -test) (Figure 1A). CD8 $\alpha$  expression was not different between HSV<sub>UV</sub>- and HSV<sub>INF</sub>-exposed PDC ( $p = 0.27$ , n.s.). When we stained in parallel for CD8 $\alpha$  and CD8 $\beta$  expression, we confirmed expression of CD8 $\alpha$  by flow cytometry, while CD8 $\beta$  was neither detected on PDC exposed to HSV<sub>UV</sub> ( $n = 4$ ) nor HSV<sub>INF</sub> ( $n = 3$ ) (Figure 1B). These data indicated that PDC did not express a heterodimeric CD8 $\alpha\beta$  receptor upon stimulation. In further analyses, we investigated the kinetics of CD8 $\alpha$  expression ( $n = 4$ ). After exposure to HSV<sub>UV</sub>, the percentage of CD8 $\alpha$ -expressing cells increased by day 1, but reached significance by day 2 post stimulation, compared to PDC cultivated with IL-3 alone ( $n < 0.05$ , paired  $t$ -test). Expression of CD8 $\beta$  was not detected at any of the time points analyzed ( $n = 3$ ) (Figure 1C).

To find out in how far CD8 $\alpha^+$  and CD8 $\alpha^-$  PDC differed from each other, we analyzed the expression of cell surface markers for costimulation (CD40, CD274), activation (CD69), maturation (CD83), and migration (CD197) on these two subsets. All these markers were significantly upregulated on CD8 $\alpha^+$  PDC compared to CD8 $\alpha^-$  PDC ( $p < 0.05$ , paired  $t$ -test) (**Figure 1D**), while five other surface molecules (CD2, CD4, CD46, CD80, and CD123) were not differently regulated after HSV<sub>UV</sub> stimulation. These data suggested that the subset of CD8 $\alpha^+$  PDC was particularly activated. Eventually, we exposed PDC of three donors to HSV<sub>UV</sub> for 40 h, separated these cells using a CD8 cell isolation kit, and exposed the CD8 $\alpha^+$  and CD8 $\alpha^-$  PDC to HSV<sub>UV</sub> for another 20 h. Subsequently, cell culture supernatants were analyzed using a multiplex cytokine bead assay. Of a total of 25 cytokines, we found IFN- $\alpha$ , IL-8, IL-1RA, MIP-1 $\alpha$ , MIP-1 $\beta$ , and MCP-1 upregulated in CD8 $\alpha$ -expressing PDC. In contrast, IL-6 secretion was not different between the two subsets, and other cytokines were either not induced (IL-1 $\beta$ , IL-17, IFN- $\gamma$ , GM-CSF, MIG, RANTES) or expressed only at very low levels (IL-2, IL-4, IL-5, IL-7, IL-12p40, IL-13, IL-15, eotaxin) (**Figure 1E**). IFN- $\alpha$  and IL-6 enhance T cell, B cell, and NK cell development and function; IL-8 recruits T cells and induces their degranulation; IL-1RA inhibits IL-1 induced T cell activation, and the chemokines MIP-1 $\alpha$ , MIP-1 $\beta$ , and MCP-1 recruit immature DC, monocytes, and Th1 cells. Altogether, these data indicate that a subset of PDC gradually upregulates a homodimeric CD8 $\alpha$  receptor upon HSV-1 stimulation, exposes a highly activated phenotype, and appears to be particularly active in recruiting other immune cells to the site of inflammation.

## Conclusion

This is—at least to our knowledge—the first report that a subset of human PDC is capable of expressing CD8 $\alpha$  at the cell surface upon HSV-1 stimulation. This subset is phenotypically different from the CD8 $\alpha^-$  PDC in expressing increased levels of markers

for activation, costimulation, and migration. In parallel, CD8 $\alpha^+$  PDC secrete enhanced levels of proinflammatory cytokines and chemokines. Therefore, this subset may play an important role in innate and adaptive immune defenses in HSV-1 infections. So far, it is unclear whether CD8 $\alpha^+$  PDC are just a more activated subset, which “does better” than CD8 $\alpha^-$  PDC, or whether they have additional or different functions, such as being actively involved in cross-presentation. Further studies are required to define the conditions under which PDC present antigen efficiently and which formulation of antigen fits best for PDC cross-presentation (Villadangos and Young, 2008). Notably, murine knockouts for IRF8 lead to deficiencies in PDC and lymphoid-resident CD8 $\alpha^+$  DC (Schivoni et al., 2002; Aliberti et al., 2003; Tsujimura et al., 2003). This phenomenon may point to a common link in development and possibly function of these two cell populations. Further analyses of human CD8 $\alpha$ -expressing PDC will delineate their role in the defense against viral infections, and—if viral vectors are used—also in anti-tumor responses.

## Author Contributions

PS, ST, and MW performed the experiments, JV contributed multiplex cytokine bead array data and performed proof-reading, and BS and PS wrote the manuscript.

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**Conflict of Interest Statement:** 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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