

The Binary Protease Inhibitor, Darunavir, Has a High Genetic Barrier to the Emergence of Resistant HIV-1 Variants

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Introduction

Dimerization of HIV protease monomer subunits is essential for protease's acquisition of proteolytic activity, which plays a crucial role in HIV replication. We have identified a group of compounds including darunavir (DRV) and tipranavir (TPV), which inhibit the catalytic activity and dimerization process of HIV protease (Figs. 1 & 3). In the present study, we examined the effects of various amino acid substitutions within protease on its dimerization process and attempted to elucidate the mechanisms of the emergence of HIV variants resistant against DRV and TPV.

Methods

To assess whether wild-type and mutant protease monomer subunits dimerize in the presence or absence of a test compound, the intermolecular fluorescence resonance energy transfer (FRET)-based HIV-expression assay that employs cyan and yellow fluorescent protein-tagged HIV protease monomer subunits (FRET-HIV system) was used (Fig. 2). A variety of amino acid substitutions were made to HIV protease and such a mutant protease was introduced to the FRET-HIV system.

Results

A single mutation (P1A, Q2A, T4A, D25N, D30N, or N98A) allowed protease to undergo dimerization, which DRV effectively inhibited, suggesting that these amino acids are not significantly involved in the binding of DRV to the monomer subunit (Fig. 4). We found that four specific mutations, V32I, L33F, I54M and I84V, are present in common among mutations in various highly DRV-resistant clinical HIV isolates and newly generated DRV-resistant laboratory HIV variants (Table 1 & Fig. 5). Each of the four mutations allowed dimerization, which DRV effectively blocked (Fig. 6). DRV also blocked dimerization of protease carrying V32I/L33F, V32I/I84V, V32I/L33F/I84V, or V32I/L33F/I54M. However, DRV failed to block the dimerization of protease containing all four mutations (Fig. 7), suggesting that these four mutations are associated with the loss of DRV's dimerization inhibition activity in clinical setting. In contrast, TPV failed to block the dimerization of protease containing either of three mutations (L24M, L33I, L33F), all of which are often seen in TPV-resistant clinical HIV variants (Fig. 8). No single mutation (L24M, L33F, I54M, or I84V) conferred resistance to DRV or TPV on HIV as examined in the conventional p24 production inhibition assay (Table 2).

Figure 1 Structures of darunavir and tipranavir



Figure 2 FRET-based HIV-1 expression system

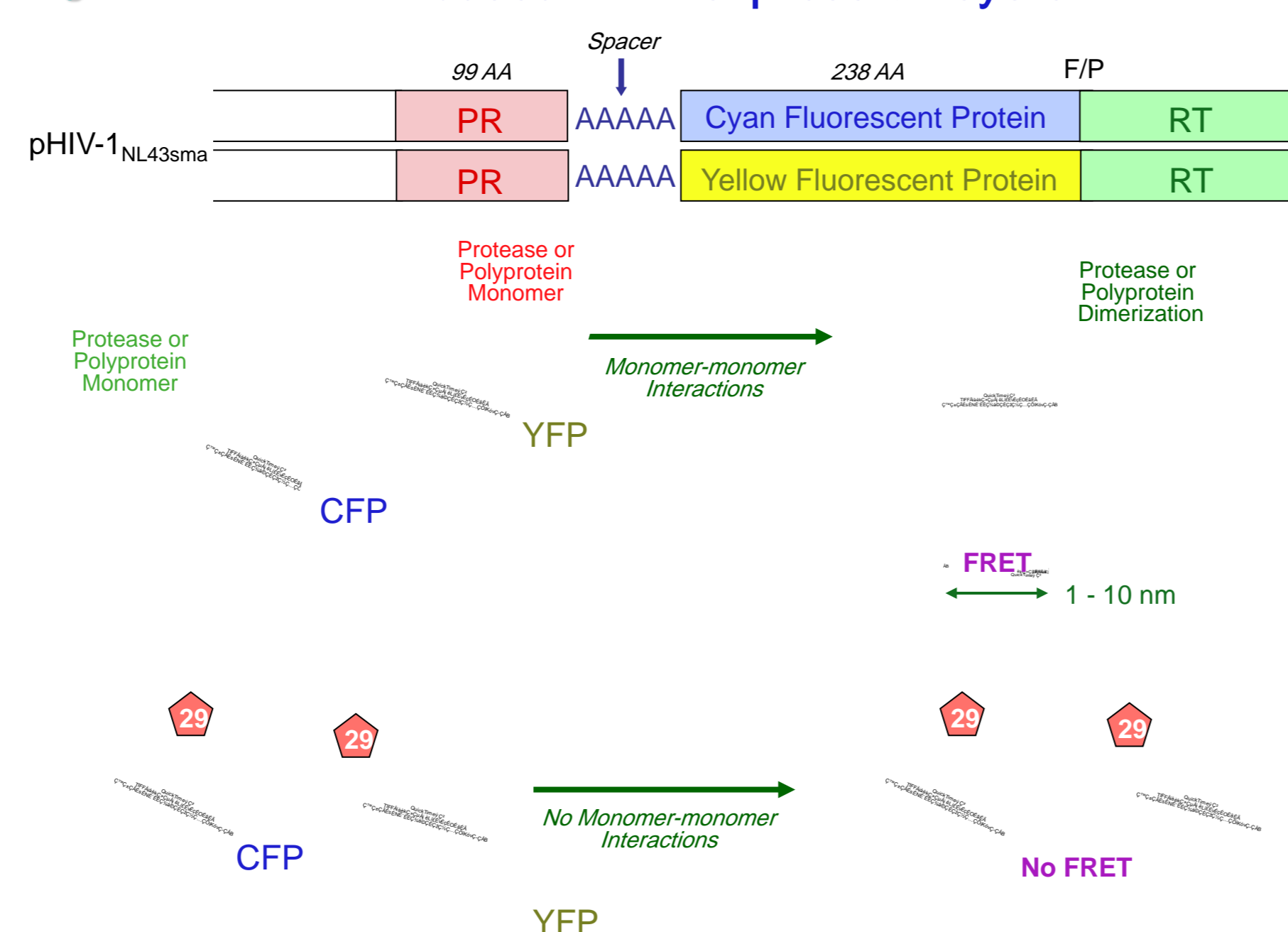


Figure 3 Inhibition of HIV-1 protease dimerization by DRV and TPV

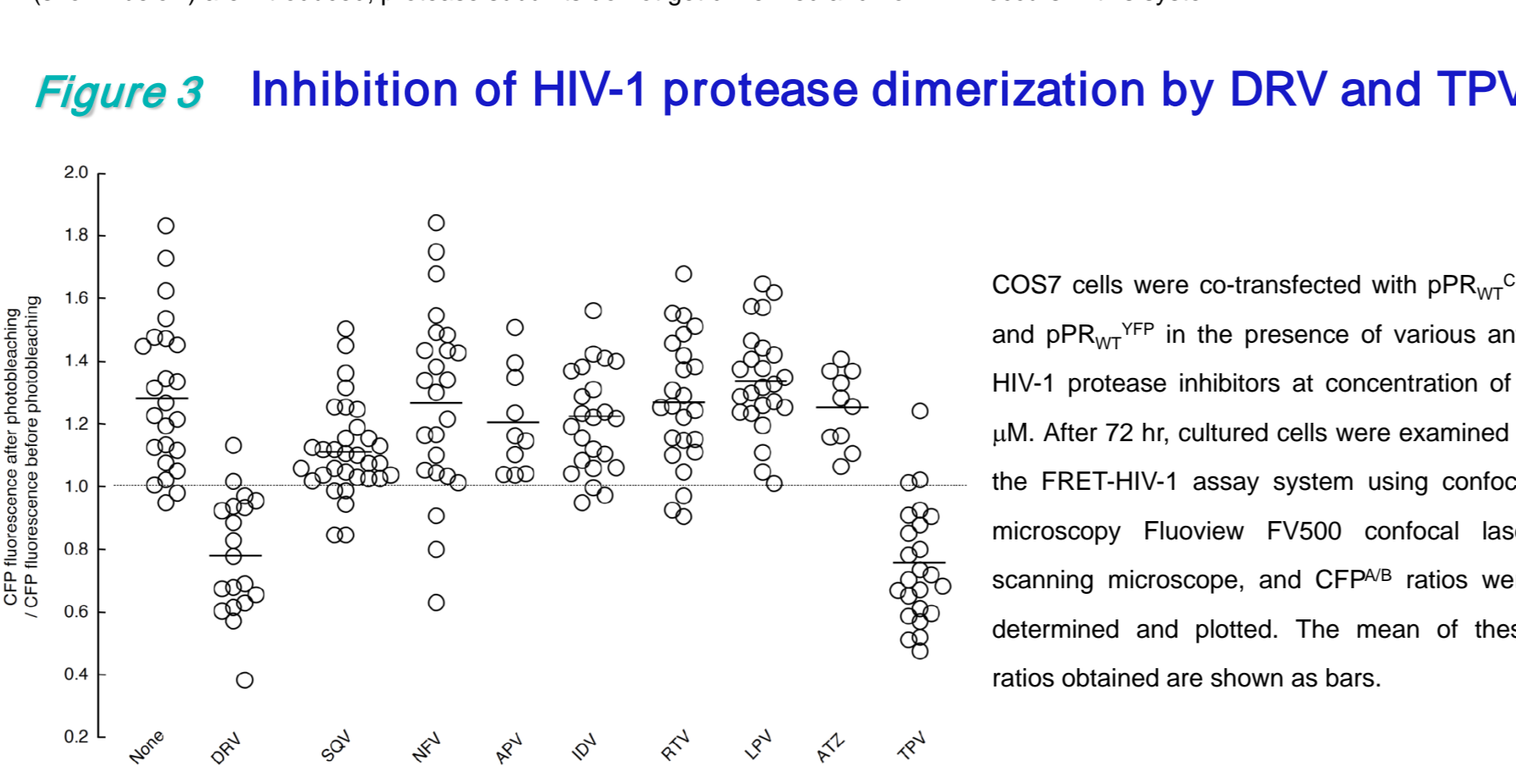
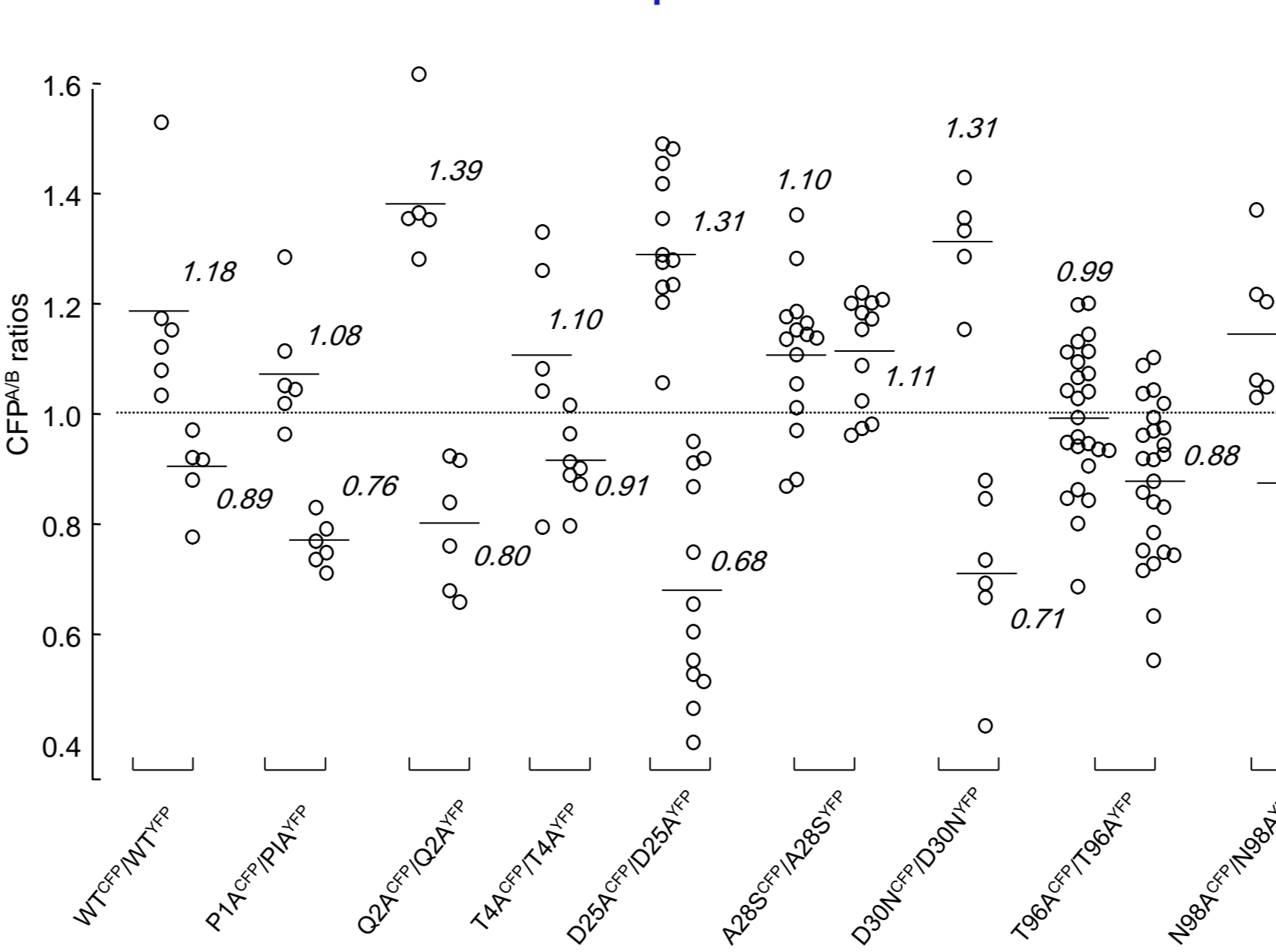


Figure 4 Dimerization profiles of single protease mutants in the presence of DRV



COS-7 cells were co-transfected with pHIV-PR_{WT}^{CFP} plus pHIV-PR_{mutant}^{YFP} (shown as WT^{CFP}/WT^{YFP}) or mutated pairs such as pHIV-PR_{P1A}^{CFP} plus pHIV-PR_{P1A}^{YFP} (shown as P1A^{CFP}/P1A^{YFP}) in the absence or presence of 1 μM of DRV. On day 3 after transfection, CFP^{+/+} ratios were determined. Average CFP^{+/+} ratio that is greater than 1 signifies a protease dimer, whereas a ratio that is less than 1 signifies disruption of protease dimerization.

Table 1 Reported DRV resistance associated mutations

DRV resistance associated mutations	References
V111, V32I, L33F, I47V, I50V, I54L/M, G73S, L76V, I84V, and L89V	De Meyer <i>et al.</i> <i>Antivir Ther</i> 2006; 11:S83.
	Mitsuya <i>et al.</i> <i>J Infect Dis.</i> 196:1177-9, 2007
V32I, L33F, I47V, I54L, and L89V	De Meyer <i>et al.</i> <i>AIDS Res Hum Retroviruses.</i> 24:379-88, 2008
V32I, I50V, I54L, I54M, L76V, and V82F	Marck <i>et al.</i> <i>J Virol.</i> 83; 9512-9520, 2009
V32I, L33F, I54M, V82I, and I84V	Koh <i>et al.</i> unpublished data

Figure 5 AA changes conferring DRV resistance on HIV-1

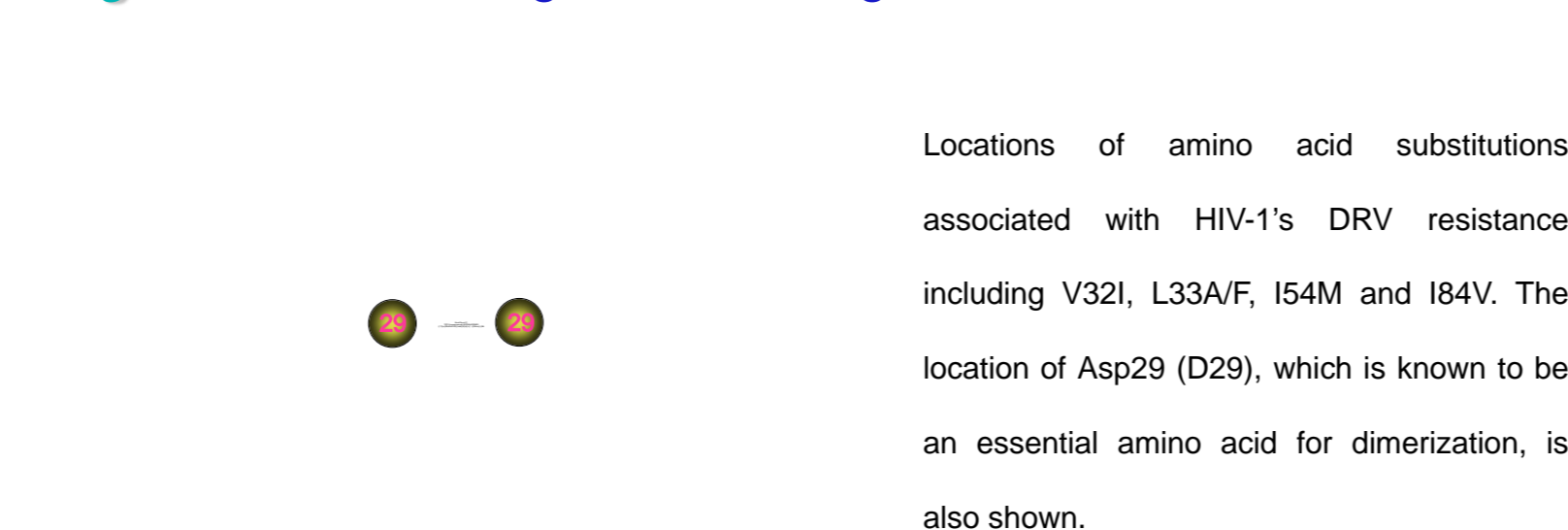
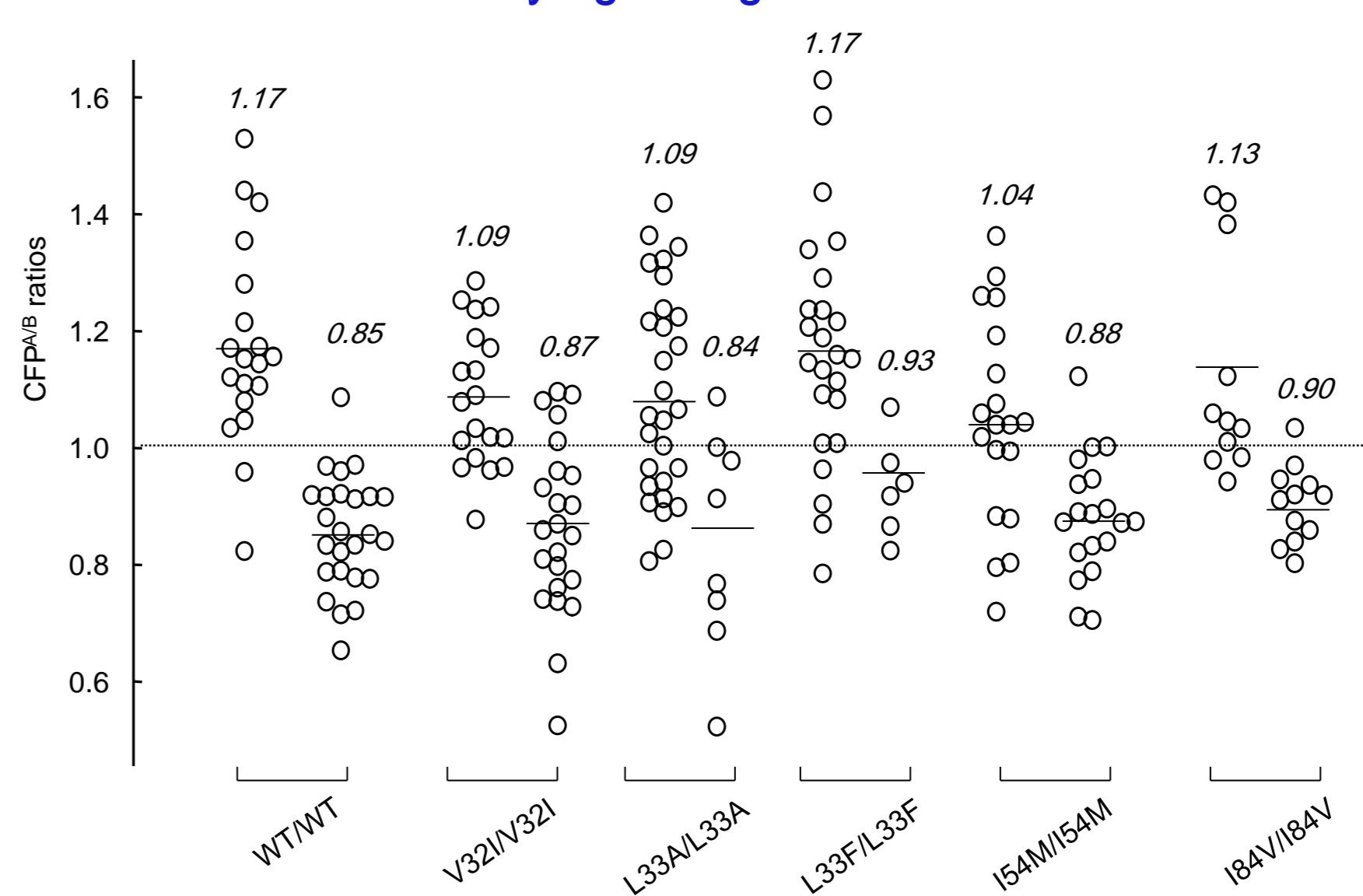
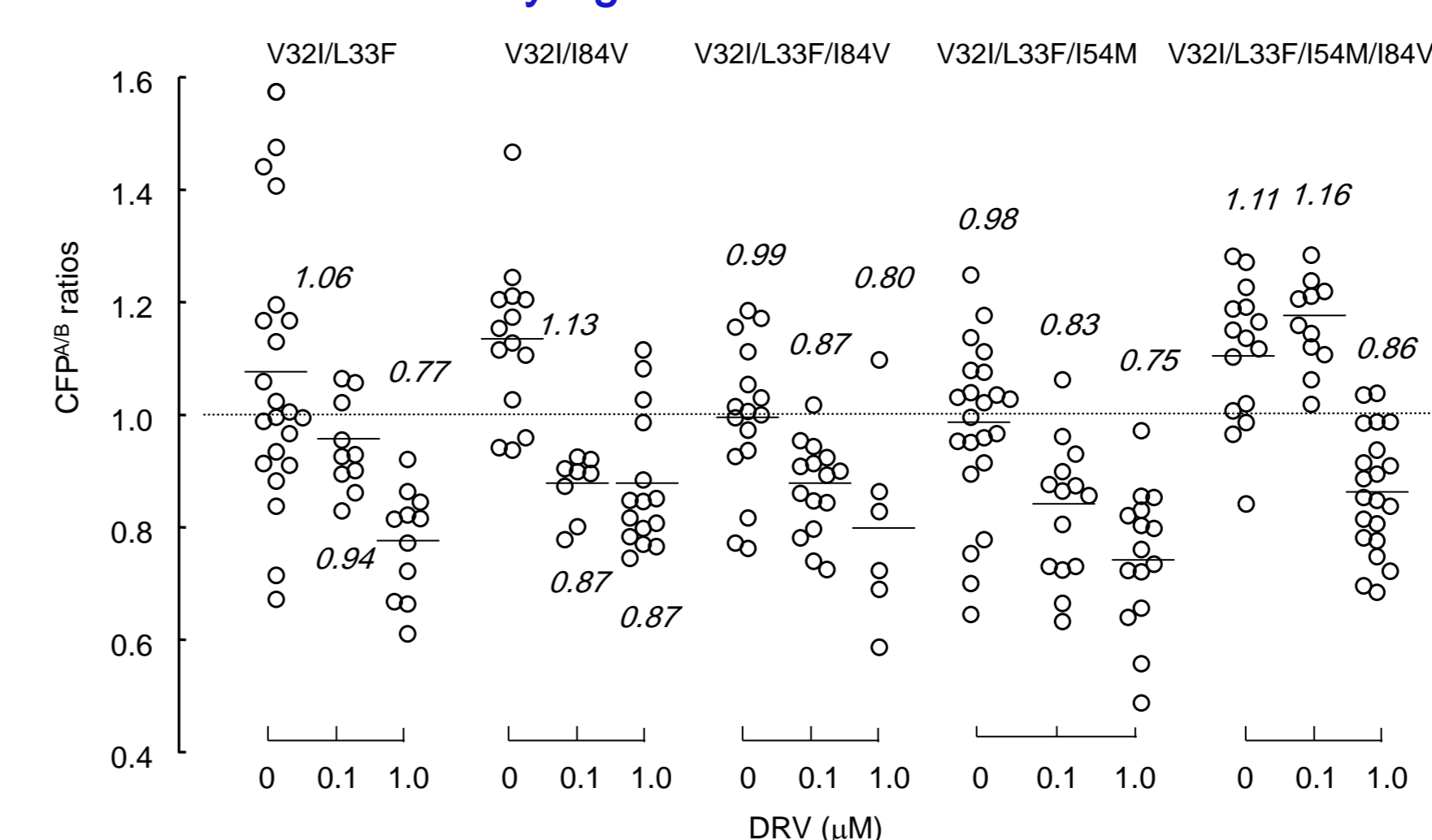


Figure 6 Profiles of DRV's dimerization inhibition of protease carrying a single AA substitution



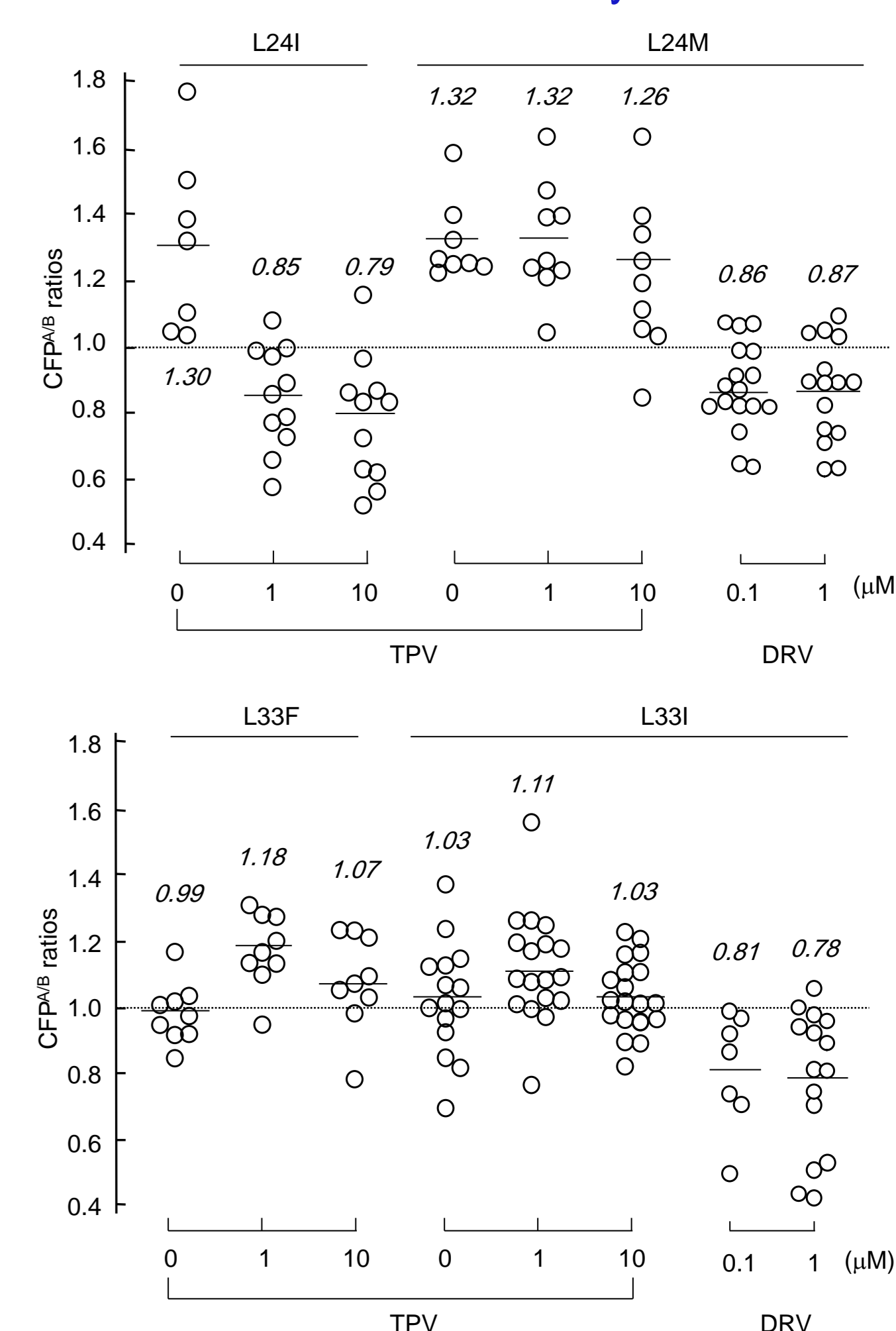
COS7 cells were co-transfected with a pair of HIV-PR^{CFP} plus HIV-PR^{YFP} carrying wild-type protease or a single AA substitution such as V32I, L33F, I54M or I84V, each of which was found to be associated with the development of HIV-1 resistance to DRV, in the presence of 1 μM DRV, further cultured, and the CFP^{+/+} ratios were determined. Note that none of the AA substitutions introduced blocked the dimerization of protease.

Figure 7 Profiles of DRV's dimerization inhibition of protease carrying combined AA substitutions



COS7 cells were co-transfected with a pair of HIV-PR^{CFP} plus HIV-PR^{YFP} carrying combined AA substitutions such as V32I/L33F, V32I/I84V, V32I/L33F/I84V, V32I/L33F/I54M, or V32I/L33F/I54M/I84V. The COS-7 cells were further cultured in the continuous presence of 0, 0.1, and 1 μM DRV and the CFP^{+/+} ratios were determined at the conclusion of the 3-day period of culture.

Figure 8 Impact of L24M, L33F, and L33I on dimerization inhibition by DRV and TPV



COS7 cells were co-transfected with a pair of HIV-PR^{CFP} plus HIV-PR^{YFP} carrying L24M, L33F, and L33I. The COS-7 cells were further cultured in the continuous presence of 0, 1, 10 μM of TPV and 0.1, and 1 μM of DRV and the CFP^{+/+} ratios were determined at the conclusion of the 3-day period of culture.

Table 2 Sensitivity of infectious clones against DRV and TPV

Infectious clone	EC ₅₀ ± SDs, μM (fold change)	
	DRV	TPV
HIV _{NL4-3}	0.0031 ± 0.0002	0.33 ± 0.01
HIV _{NL4-3} ^{L24M}	Not done	0.029 ± 0.003(0.09)
HIV _{NL4-3} ^{L33F}	0.0028 ± 0.0008 (0.9)	0.32 ± 0.01 (1)
HIV _{NL4-3} ^{I54M}	0.0026 ± 0.0001 (0.8)	0.33 ± 0.01 (1)
HIV _{NL4-3} ^{I84V}	0.0035 ± 0.0001 (1)	0.33 ± 0.02 (1)

MT-4 cells (1x10⁶/ml) were exposed to 100 TCID₅₀ of infectious molecular HIV-1 clones and the inhibition of p24 Gag protein production by the drug was used as an endpoint on day 7 culture. All assays were performed in triplicate, and the values shown are representative of three independent experiments.

Conclusions

The present data show that the protease dimerization inhibition activity of DRV is in operation in its clinical use and that DRV has a high genetic barrier to the emergence of DRV-resistant HIV-1 variants.