

# PD-1<sup>+</sup> memory phenotype CD4<sup>+</sup> T cells expressing C/EBP $\alpha$ underlie T cell immunodepression in senescence and leukemia

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Although altered T cell function plays a part in immunosenescence, the mechanisms remain uncertain. Here we identify a bona fide age-dependent PD-1<sup>+</sup> memory phenotype (MP) CD4<sup>+</sup> T cell subpopulation that hardly proliferates in response to T cell receptor (TCR) stimulation and produces abundant osteopontin at the cost of typical T cell lymphokines. These T cells demonstrate impaired repopulation in Rag2<sup>-/-</sup> mice, but a homeostatic proliferation in  $\gamma$ -ray-irradiated mice. These T cells also reveal a unique molecular signature, including a strong expression of C/EBP $\alpha$  normally expressed in myeloid-lineage cells, with diminished c-Myc and cyclin D1. Transduction of *Cebpa* in regular CD4<sup>+</sup> T cells inhibited the TCR-mediated proliferation with c-Myc and cyclin D1 repression and caused a striking activation of *Spp1* encoding osteopontin along with concomitant repression of T cell lymphokine genes. Although these T cells gradually increase in number with age and become predominant at the senescent stage in normal mice, the generation is robustly accelerated during leukemia. In both conditions, their predominance is associated with the diminution of specific CD4<sup>+</sup> T cell response. The results suggest that global T cell immunodepression in senescence and leukemia is attributable to the increase in PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells expressing C/EBP $\alpha$ .

immunosenescence | osteopontin

Elderly persons may exhibit a substantial diminution in specific immune response against infection, a reduced efficacy for vaccination, and a proinflammatory trait, a condition known as immunosenescence (1, 2). In T-lineage cells, a prominent effect of aging is thymic involution, resulting in decreased T cell production and export (3). But the total number of peripheral T cells is unaffected by aging in both humans and mice, owing in part to the homeostatic proliferation of memory phenotype (MP) T cells (4–6); consequently, the T cell population shows a progressive shift from naïve to MP cells with age. Such a shift in T cell composition is considered to contribute significantly to immunosenescence. This may result in contraction of the T cell repertoire, leading to an increased incidence of poor responsiveness to new antigens (7). It also is recognized that CD4<sup>+</sup> T cells in the elderly are qualitatively altered, including a number of defects in the T cell receptor (TCR)-mediated signaling pathways, reduced immunologic synapse formation with antigen-presenting cells, diminished cognate helper function for B cells, and altered lymphokine production patterns (8–11). These effects may be attributed primarily to the cellular changes in T cells rather than to the host environment (12).

The homeostatic maintenance of MP T cells for prolonged periods may involve multiple factors, including environmental antigens, such as commensal bacteria, low-affinity self-ligands, and homeostatic cytokines (4, 13, 14). The eventual fate of MP T cells remains elusive, however. In most somatic tissue cells, programmed cell differentiation is tightly coupled with the control of cell proliferation, leading to the terminal differentiation with loss of proliferation capacity and limited life span. In myeloid-lineage cells,

for instance, a bZIP family transcription factor, C/EBP $\alpha$ , plays a crucial role in controlling the homeostatic differentiation and the quiescence of terminally differentiated cells (15, 16). But expression of *Cebpa* is repressed during T-lineage cell commitment from hematopoietic progenitors, and mature T cells hardly express C/EBP $\alpha$  (17). How the balance between proliferation and quiescence of MP T cell clones is controlled to maintain the homeostasis for prolonged periods remains unclear.

In the present study, we identified a bona fide age-dependent MP CD4<sup>+</sup> T cell population defined by a constitutive expression of PD-1, which is induced only transiently on activation in regular T cells (18). The PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells hardly proliferate in response to TCR stimulation but produce large amounts of a proinflammatory cytokine, osteopontin (OPN), at the cost of typical T cell lymphokines. We suggest that the functional features of these cells are attributable in part to an unusual expression of C/EBP $\alpha$ . Moreover, in addition to senescence, the generation of equivalent PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells is robustly accelerated during leukemia. We provide evidence that the predominance of these unique T cells underlies the global depression of T cell immune response both in senescence and during leukemia.

## Results

**Identification of Age-Dependent PD-1<sup>+</sup> MP CD4<sup>+</sup> T Cells With Defective TCR-Mediated Proliferation.** We found that increasing proportions of splenic CD4<sup>+</sup> T cells in normal B6 mice constitutively expressed PD-1 as they aged (Fig. 1A, Upper). The PD-1<sup>+</sup> CD4<sup>+</sup> T cells were confined to a CD44<sup>high</sup> CD62L<sup>low</sup> (MP) population, and most of them exhibited CD69 with little CD25 expression (Fig. 1A, Lower). Purified CD4<sup>+</sup> T cells from aged mice showed a significantly diminished TCR-mediated proliferation compared with those from young mice (Fig. 1B). Among the CD4<sup>+</sup> T cells in aged mice, however, both the naïve and PD-1<sup>-</sup> MP populations exhibited a response comparable to that in young mice; in stark contrast, the PD-1<sup>+</sup> MP population exhibited no detectable proliferation, despite normal expression of  $\alpha\beta$ TCR/CD3 (Fig. 1B). They showed no annexin V staining, indicating that they were not dying cells in vivo [supporting information (SI) Fig. S1A]. Costimulation with anti-CD28 antibody or IL-2 restored the proliferation only marginally (Fig. S1B). Furthermore, these T cells revealed negligible production of typical T cell lymphokines in response to optimal TCR stimulation (Fig. S1C). PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells showed a severely impaired repopulation

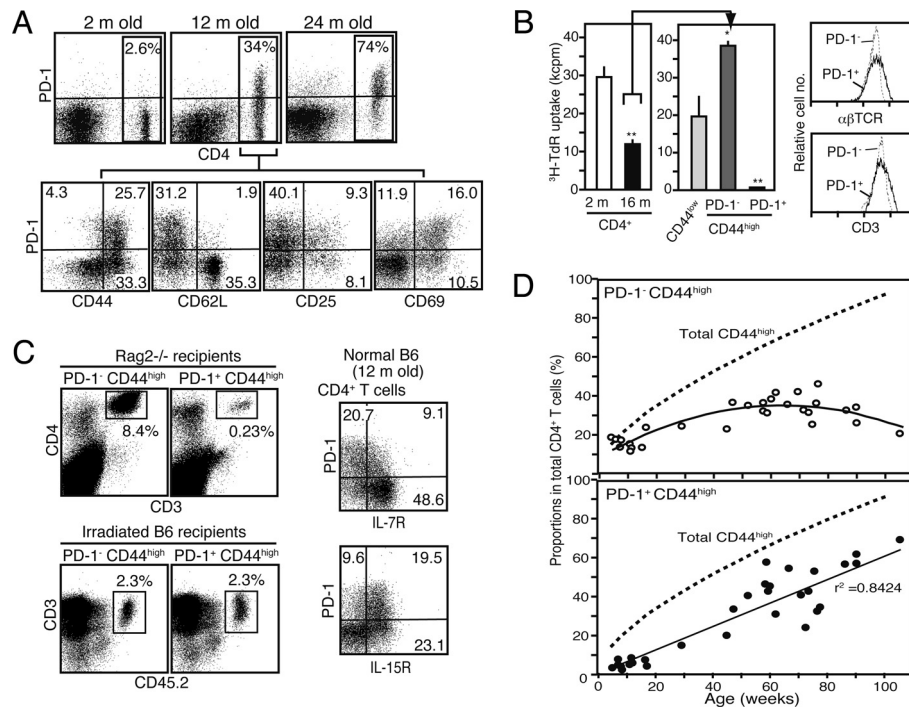
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**Fig. 1.** Age-dependent increase in PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells with defective TCR-mediated proliferation. (A) Spleen cells from normal B6 mice at various ages were 3-color-analyzed with the indicated antibodies. (B) CD4<sup>+</sup> T cells from 2-month-old (open column) and 16-month-old (solid column) mice were cultured in the presence of anti-CD3 antibody for 3 days and pulsed with <sup>3</sup>H-TdR (Left). CD4<sup>+</sup> T cells from 16-month-old mice were separated into CD44<sup>low</sup> (light-gray column), PD-1<sup>-</sup> CD44<sup>high</sup> (dark-gray column), and PD-1<sup>+</sup> CD44<sup>high</sup> (solid column) populations and cultured similarly (Middle). \**P* < .05; \*\**P* < .01. The latter 2 populations were analyzed for TCR $\beta$  and CD3 expression (Right). (C) Sorted PD-1<sup>-</sup> and PD-1<sup>+</sup> CD44<sup>high</sup> CD4<sup>+</sup> T cells from aged mice were transferred into Rag2<sup>-/-</sup> mice (Upper Left) or  $\gamma$ -ray-irradiated CD45.1 B6 mice (Lower Left) intravenously, and 6 days later the donor T cells (boxed) in the pooled lymphoid tissues were assessed. The percentage of donor cells out of the total and CD4<sup>+</sup> T cells in Rag2<sup>-/-</sup> and irradiated B6 recipients are indicated. Similar results were obtained in 3 recipients. T cells from normal aged B6 mice were 3-color-analyzed with the indicated antibodies (Right). (D) The proportions of total CD44<sup>high</sup> (dotted lines), PD-1<sup>-</sup> CD44<sup>high</sup> (open circles), and PD-1<sup>+</sup> CD44<sup>high</sup> (closed circles) T cells in the CD4<sup>+</sup> T cell population at various ages are plotted.

capacity in Rag2<sup>-/-</sup> mice (Fig. 1C, Upper Left). Because robust T cell expansion in Rag2<sup>-/-</sup> recipients mainly represents the response to exogenous antigens, such as commensal bacteria (13), these T cells are suggested to be defective in TCR-mediated proliferation *in vivo* as well. On the other hand, PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells exhibited a homeostatic expansion comparable with the PD-1<sup>-</sup> T cells in  $\gamma$ -ray-irradiated recipients (Fig. 1C, Lower Left); in agreement with this finding, a significant proportion of PD-1<sup>+</sup> CD4<sup>+</sup> T cells expressed IL-7R and/or IL-15R (Fig. 1C, Right). Although PD-1<sup>+</sup> cells represent a rare population in CD4<sup>+</sup> T cells until 6 months of age, their numbers increase linearly throughout later stages, and they eventually become a predominant population at the senescent stage (Fig. 1D). These T cells are found in most lymphoid tissues of aged mice, except for the peripheral blood (Fig. S1D), and the profile of TCR-V $\beta$  chain usage remains unchanged (Fig. S1E). Our DNA microarray analysis (see below) revealed that PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells overexpressed *Cd121b*, and that a portion of these T cells selectively expressed CD121b (Fig. S2A). PD-1<sup>-/-</sup> CD121b<sup>+</sup> CD4<sup>+</sup> T cells remained defective in TCR-mediated proliferation, suggesting that PD-1 expression might be irrelevant for the effect (Fig. S2A). Stimulation of PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells with phorbol myristate acetate (PMA) plus ionomycin bypassing TCR stimulation also failed to induce significant proliferation, despite nearly normal ERK activation (Fig. S2B). Finally, PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells with complete depletion of CD25<sup>+</sup> cells showed no TCR-mediated proliferation or inhibitory effect on the proliferation of normal CD4<sup>+</sup> T cells (Fig. S2C). These results suggest that the defect in TCR-mediated proliferation may be intrinsic.

**Unique Genetic Signature and Potent OPN Production.** Given the age-dependency, we examined the possibility that PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells might represent “senescent” T cells, using senescence-associated  $\beta$ -galactosidase (SA- $\beta$ -Gal) (19). Although CD4<sup>+</sup> T cells from 2-month-old mice rarely showed SA- $\beta$ -Gal staining, a significant proportion of MP, but not naïve, CD4<sup>+</sup> T cells from 18-month-old mice revealed positive staining; however, there was no significant difference in the frequencies and the intensities between the PD-1<sup>-</sup> and PD-1<sup>+</sup> MP fractions (Fig. 2A). We then compared the global gene expression profiles by DNA microarray analysis (Table S1). We selected 37 genes from the data set and compared their expression among naïve, PD-1<sup>-</sup> MP, and PD-1<sup>+</sup> MP fractions of CD4<sup>+</sup> T cells by qRT-PCR (Fig. 2B). Twenty-seven genes showed markedly increased expression in a PD-1<sup>+</sup> MP population, of which 17 genes, including *Pdcd1* and *Cd121b*, were overexpressed rather selectively and 10 genes exhibited decreased expression. PD-1<sup>+</sup> MP CD4<sup>+</sup> T cells were found only minimally in young mice (see Fig. 1A); however, the genetic signature of these cells highly coincided with those in aged mice (Fig. 2C), indicating that these T cells began to emerge early in life. The most overexpressed gene was *Spp1*, encoding OPN (also called Eta-1). In agreement, PD-1<sup>+</sup>, but not PD-1<sup>-</sup>, MP CD4<sup>+</sup> T cells spontaneously secreted significant amounts of OPN. Furthermore, these cells exhibited significantly enhanced OPN secretion on TCR stimulation associated with a robust increase in *Spp1* transcripts, whereas the induction of *Il-2*, *Ifn- $\gamma$* , and *Il-4* was significantly compromised (Fig. 2D). These T cells also showed abundant transcripts of *Sostdc-1*, encoding a secreted antagonist of anti-inflammatory bone morphogenic factor (Fig. 2D).









**SA-β-Gal Staining.** T cells were plated on polyL-lysine-coated cover slips, fixed with glutaraldehyde (0.5% in PBS), washed with Mg<sup>2+</sup>-containing PBS, and stained with X-Gal in PBS containing K<sub>3</sub>Fe(CN)<sub>6</sub>, K<sub>4</sub>Fe(CN)<sub>6</sub>, and Mg<sup>2+</sup>.

**Gene Transduction.** *Cebpa* cDNA, provided by Dr. Iwama (Tsukuba University), was subcloned into retroviral plasmid (pMCs IRES GFP; pMIG), provided by Dr. Kitamura, University of Tokyo. Recombinant retrovirus was produced in Plat-E packaging cells.

**DNA Microarray and Clustering Analysis.** Comprehensive DNA microarray analysis was performed with 3D-Gene (Toray Industries). Microarrays were

scanned with the ScanArray Lite Scanner (Perkin-Elmer) and analyzed using Cluster 3.0.

**Statistical Analysis.** All statistical analyses were performed using the 2-tailed Student *t* test.

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