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CD8+ T Cells in Trypanosoma cruzi Infection

Rick L. Tarleton

Center for Tropical and Emerging Global Diseases and Department of Cellular Biology, University of Georgia, Athens, GA 30602, 706-542-3362, 706-542-3582 (fax)

Rick L. Tarleton: tarleton@uga.edu

Abstract

Trypanosoma cruzi infection and Chagas disease remains among the most neglected of the neglected tropical diseases. Despite this, studies of the immune response to *T. cruzi* have provided new insights in immunology and guidance for approaches for prevention and treatment of the disease. *T. cruzi* represents one of the very best systems in which to study $CD8^+$ T cell biology; Mice, dogs, and primates (and many other mammals) are all natural hosts for this parasite, the robust T cell responses generated in these hosts can be readily monitored using the full range of cutting edge techniques, and the parasite can be easily modified to express (or not) a variety of tags, reporters, immune enhances and endogenous or model antigens. The infection in most hosts is characterized by vigorous and largely effective immune responses, including CD8⁺ T cells capable of controlling *T. cruzi* at the level of the infected host cells. However this immune control is only partially effective and most hosts maintain a low level infection for life. This review addresses the interplay of highly effective CD8⁺ T cell responses with elaborate pathogen immune evasion mechanisms, including the generation and simultaneous expression of highly variant CD8⁺ T cell targets and a host cell invasion mechanisms that largely eludes innate immune detection.

Keywords

CD8⁺ T cells; Trypanosoma cruzi; Chagas disease; immunodominance; PAMPs; DAMPs

Introduction

Trypanosoma cruzi is the agent of Chagas disease, the Americas' highest impact infectious disease and world's dominant cause of infectious myocarditis. In infected mammals, extracellular trypomastigotes of *T. cruzi* circulate in the bloodstream, potentially carrying the infection to all parts of the body and providing a mechanism for transmission of infection to appropriate blood-feeding insects. However *T. cruzi* parasites spend the vast majority of their time in mammals as amastigote forms, replicating in the cytoplasm of a range of host cell types. Consequently, CD8⁺ T cells capable of recognizing *T. cruzi* – infected cells are absolutely essential for control of the infection; deleting or inhibiting CD8⁺ T cells results in uncontrollable parasite load early in infection and an exacerbation of

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infection in chronically infected hosts (1–3). The host's ability to control *T. cruzi* infection is substantial but only partially effective: most hosts tightly limit parasite numbers but fail to completely clear *T. cruzi* infection. The available data suggest that this failure to achieve parasitological cure is not a result of a suppressed or disregulated immune response but instead reflects the success of *T. cruzi* in evading host immune responses. This review will focus primarily on recent advances in our understanding of the role of CD8⁺ T cells in immunity during *T. cruzi* infection and the mechanisms utilized by *T. cruzi* to evade that response. There will be only brief mention of foundational data; Please refer to previous reviews for more detailed discussion of earlier data (4–6).

Generation and target specificity of T. cruzi – specific CD8+ T cells

The ability of T. cruzi-infected cells to process and present parasite-encoded molecules for recognition by CD8⁺ T cells was initially demonstrated using transgenic expression of the model antigen chicken ovalbumin (OVA) by T. cruzi and OVA-specific T cells (7). Concurrent experiments examining known, amastigote-secreted proteins indicated that selected members of the trans-sialidase (ts) gene family were natural targets for T. cruzi infection-induced CD8⁺ T cells (8–10). But it was not until completion of the first whole genome sequencing (11) and proteome analysis (12) of T. cruzi was obtained that a full evaluation of potential targets was possible, revealing an incredibly biased and potent response to a relatively small number epitopes encoded by multiple ts genes (13). The activity of enzyme-active ts family members is required for the survival of T. cruzi in mammals, since without the ability of the parasite to acquire sialic acid from host molecules, T. cruzi tyrpomastigotes invade host cells poorly and are highly sensitive to host complement-mediated lysis (14). In addition to the production of a small set of enzymeactive ts proteins (encoded by < 20 genes), the *T. cruzi* genome also contains 1000's of genes encoding full length and partial non-enzymatically active ts molecules, the exact function of which is not clear (11)(Weatherly, et all, unpublished). While ts molecules are not the only targets of T. cruzi – specific CD8⁺ T cells, ts epitopes appear to be by far the most immunodominant, in some cases occupying >30% of the entire CD8 compartment at the peak of the response in mice (13) and an undetermined but significant proportion of the response in humans (15).

Such a potent and highly directed response is easy to track using MHC multimers, and these reagents have made possible very detailed studies of the *T. cruzi*-specific CD8⁺ T cell responses. One of the first observations we made was that despite the numerical strength of the *T. cruzi*-specific T cell response, this response is relatively slow to develop, with the detection of *T. cruzi* –specific CD8⁺ T cells not evident until 8–9 days post-infection (13, 16). These studies enumerating *T. cruzi*-specific CD8⁺T cells using MHC-tetramers were complemented with measurements of cellularity, chemokine and cytokine production and cell proliferation at the infection site and the draining lymph nodes to document that the introduction of *T. cruzi* into the skin of mice failed to trigger any systemic recognition of infection until a minimum of 5–6 days post-infection (16). It is well-documented that in most host cell types in vitro, *T. cruzi* completes multiple rounds of replication, and emerges from host cells between 4 and 5 days after infection, each cell yielding 100's of newly converted trypomastigotes. We have recently confirmed via whole animal imaging that the

in vivo timing of parasite infection of and release from host cells in the skin is similar, with the emergence of motile trypomastigotes on ~day 5 post-infection (Padilla, unpublished). Thus, the first round of host cell death and parasite release coincides with the initiation of immune detection of *T. cruzi*, strongly suggesting that the stimulus for initiation of CD8⁺T cell activation is not the initial infection of host cells soon after infection, but rather occurs 4–5 days *after* infection. In short, *T. cruzi* fails to trigger innate immune sensors at the time of host invasion, and thus gets a 'free pass' for the first 5 days of the infection. This short head start – time to expand up to 500-fold and then disperse throughout the body without restriction by the immune system - may be essential for the establishment of what will become a lifelong infection in most hosts.

The relative failure on the part of *T. cruzi* to strongly activate host cells upon initial host cell infection is evident from the rather paltry changes that occur in host gene expression upon in vivo or in vitro infection (17, 18). Essentially, infection seems to elicit production of type I IFN and subsequently, the activation of IFN-response genes, but little more. And this response is not sufficient to recruit and activate inflammatory cells to the infection site nor the movement of antigen-presenting cells carrying *T. cruzi* antigen to the draining lymph nodes (16).

We attribute the weak response of host cells to T. cruzi infection to the absence of triggers for innate immune sensors, the pathogen associated molecular patterns (PAMPs). This conclusion seems a bit paradoxical considering that T. cruzi has been a model among protozoans for the study of triggers of host pattern recognition receptors (PRR) (reviewed in (5)). However these previously studied T. cruzi PAMPs are not known to be exposed on intact parasites either during or after cell invasion and thus would not be capable of interacting with host PRR. Further, we recently demonstrated that immune detection and activation of CD8⁺ T cell responses can be both accelerated and enhanced by the transgenic expression in T. cruzi of the well-characterized bacterial PAMPs Salmonella typhimurium flagellin and Neisseria meningitidis porin (19). Constitutive expression of these exogenous PAMPs by T. cruzi also allowed for the generation of a persistently potent adaptive immune response that extends for the full length of the infection and is associated with improved pathogen clearance and complete parasitological cure in some cases (19). Thus the lack of PAMPs in T. cruzi seems to have consequences not only with respect to the timing of the initial activation of immune responses, as is typically considered the role for innate immune signaling, but indeed throughout the infection. Notably, the ability to boost immunity to T. cruzi using transgenic expression of bacterial PAMPs argues that it is the absence of natural PAMPs in this parasite, rather than an active suppression of host PAMP signaling pathways, that is responsible for the generally poor innate and slow adaptive response to T. cruzi infection. This understanding may be useful for vaccine development (see below).

The contribution of ts proteins and PAMP recognition to immune evasion by *T. cruzi*

If *T. cruzi* is so deficient in endogenous PAMPs one might ask how the infection can elicit such a potent $CD8^+$ T cell response. As noted, the timing of the initiation of inflammation and immune activation (6, 16) suggests that the release of trypomastigotes at 4–5 days after

infection is the trigger for immune activation. This first round of parasite release appears to be nearly synchronous (although subsequent rounds are not) and includes the destruction of the cells formally hosting the parasites as well as the release of parasite byproducts from the intracellular period. Collectively the damage-associated molecular patterns (DAMPs) from the destroyed host cell and any released parasite PAMPs from dead parasites or degraded parasite products, presumably act as the triggers of inflammation and the initiators of adaptive immune responses. The result is an extremely robust, although significantly delayed induction of CD8⁺ T cell immunity. The targets of this robust response are the parasite antigens exposed at the time of host cell rupture – most prominently the ts family proteins. Most ts-family proteins contain a GPI-anchor addition site that provides for their targeting to the parasite surface plasma membrane. However ts proteins are also secreted from both trypomastigotes and amastigotes when the ts fail to receive a GPI anchor – and this happens frequently (7, 20). Thus, with the lysis of host cells, ts proteins produced by the formally intracellular amastigotes and perhaps also by the newly released trypomastigotes, become the earliest and most abundantly presented T. cruzi proteins at the time of initiation of T cell responses, facilitating their immunodomiance.

Unfortunately for immune control of *T. cruzi*, the immunodominance of ts proteins focuses the CD8⁺ T cell response on a set of variant epitopes that are also not normally presented until late in the host cell infection process. Many of the >3000 full and partial length ts genes appear to be expressed simultaneously, essentially flooding the immune system with a massively complex array of antigen variants. These genes are also undergoing constant rearrangement events to generate new variants within a lineage and a distinct set of ts genes in each parasite isolate (13, 21)(Weatherly et al, unpublished). Interestingly, despite this enormous repertoire of variant ts epitopes, the CD8⁺ T cell response observed in H2-K^b mice to a very highly restricted set of ts epitopes (13). This results is probably a coincidence of an overlap between the H2-K^b binding motif with the most sequence-restricted region of the ts molecule (6). In other mouse strains and in humans, a much less focused ts-specific response occurs (13, 15). Further, even in the H2-K^b system, this focused response is not necessary for immune control since the induction of tolerance to these epitopes has almost no impact on infection dynamics (22).

In addition to its massive variation, the ts proteins are also suboptimal as $CD8^+$ T cell targets because of their timing of expression in infected host cells. In contrast to $CD8^+$ target epitopes encoded by paraflagellar rod proteins, which are detected in association with host cell surface MHC I within 6 hrs post-infection, the ts family epitopes are expressed relatively late in the infection cycle in host cells and are not visible to ts-specific T cells until between 24 and 48 hours post-infection (23). Thus, not only is the dominant $CD8^+T$ cell response focused on a constantly changing and strain-variant array of targets but these targets are also expressed late in the host cell infection process, once again providing time for parasite expansion prior to target cell recognition. It is of little surprise that despite the enormous dominance of ts-specific responses in the *T. cruzi*-specific CD8⁺ T cell response, the CD8⁺ T cells with these particular specificities are totally dispensable for control of the infection (22).

Immune exhaustion during chronic T. cruzi infection

In many persistent infections, the constant presence of antigen results in exhaustion of pathogen-specific CD8⁺ T cells. However this does not appear to be the case with respect to *T. cruzi*-specific T cells. In the blood and lymphoid tissue of chronically infected mice, most *T. cruzi* –specific CD8⁺ T cells are CD62L^{lo}, indicative of an effector phenotype (24, 25). However up to 20% have the phenotype and function of a central memory population that has not recently seen antigen and is independent of antigen for long-term survival (24). Furthermore, the *T. cruzi*-specific CD8⁺ T cell population in chronically infected mice generally does not express the markers of exhaustion such as PD-1 (Pack et al, unpublished) and when infections are cured in the long-term infected animals by drug treatment, a stable and persistent memory CD8⁺T cell population is evident (26). Combined with the fact that depletion of CD8⁺ T cells during the chronic stages of infection ((3) and Pack, et al, unpublished) results in increasing parasite load, these data support a conclusion that CD8⁺ T cells in *T. cruzi* infection remain a highly functional and critical contributor to parasite control throughout the infection. In short, the long-term persistence of *T. cruzi* in infected hosts does not appear to be due to a deficit in or loss of CD8⁺ T cell function.

Nevertheless, there are circumstances under which T. cruzi –specific CD8⁺ T cell responses exhibit signs of exhaustion. In mice exposed to a highly virulent challenge, PD-1 expression and/or other signs of T cell exhaustion are evident (27, 28). Such high dose and acutely lethal infections are also associated with other immunological anomalies (29). However high dose infections are not the norm in humans and thus these particular experimental systems do not model well the majority of T. cruzi infections in humans. A more pertinent situation is that of very long-term infections in humans, where despite the apparently well-controlled and low -level parasite load decades into infection, a decay in T cell function becomes evident (15, 30-34). In contrast to shorter length experimental infections and T. cruzi infection in younger human subjects (with consequentially shorter infection length), longterm chronically infected individuals with have a substantially reduced number of T. cruzi – responsive T cells and a higher fraction of mono-functional T cells (32) that are dependent on antigen for persistence (35). Both in the peripheral blood and in cardiac tissue, T. cruzi specific T cells in long-term infected adults also have a higher proportion of less differentiated cells, indicative of more recent recruitment into the response (30, 31, 34). Importantly, an antigen-independent, polyfunctional population of T. cruzi-specific T cells emerges in a significant proportion of these subjects after successful treatment (35) and Laucella, unpublished). Collectively these results show that either very high acute antigen load (as in experimental mouse infections) or very long term low level infection (in humans) can degrade the immune response to T. cruzi and suggest that a decaying T cell response to T. cruzi is more often the result of persistent or high level antigen rather than the cause of that persistence.

CD8⁺ T cells in vaccine-induced protection

Just as CD8⁺ T cells are crucial for immune protection in *T. cruzi* infection, they are also integral to the induction of protective immunity by anti-*T. cruzi* vaccines (reviewed in (36, 37). Unfortunately, no anti-*T. cruzi* vaccine developed to date generates immune protection

that is as good as, much less better than that achieved by the active infection. We have recently used an infection and cure model to study the development of immune protection in mice infected with fully virulent wild-type *T. cruzi* followed by drug-induced cure of that infection (38). Previous studies using benznidazole treatment to cure *T. cruzi* infection in mice demonstrated the development of central memory (Tcm) T cells in the cured mice that

infection (38). Previous studies using benznidazole treatment to cure *T. cruzi* infection in mice demonstrated the development of central memory (Tcm) T cells in the cured mice that were capable of transferring a degree of early protection from *T. cruzi* infection to recipient mice (26). However, subsequent studies employing multiple rounds of infection and drug cure showed that the protection afforded by this "vaccination" protocol (where Tcm CD8⁺ T cells dominate) was always inferior to that provided by an active chronic infection where T effector (Teff) cells dominate (38). One interpretation of these studies is that the Teff cells in actively infected mice (24, 25) are more protective than the exclusively Tcm CD8⁺ T cells retained in mice cured of infection. If this hypothesis is true, then effective vaccination against *T. cruzi* infection may require methods that can maintain a stable level of Teff cells in the absence of active infection – a substantial challenge. A similar scenario indicating a requirement for Teff cells has been proposed and supported experimentally for CD4⁺ - mediated immune protection in the related protozoan, *Leishmania major* (39).

Conclusions and Future Prospects

Briefly summarizing the evidence discussed above, CD8⁺ T cells are highly effective in and crucial to control of *T. cruzi* infection, but these CD8⁺T cell responses in concert with other immune effectors fail to clear the infection. This failure is attributed to the slow initial development of immune responses in the infected host and to the concentration of these responses on highly variant and late-expressing parasite epitopes. Can these limitations in the adaptive response to *T. cruzi* be overcome and in the process, this information used to enhance the control of *T. cruzi* infection in hosts or to develop preventatives such as vaccines?

One clearly addressable issue is that of the most advantageous parasite epitopes against which CD8⁺ T cell responses should be directed. In addition to the "moving target" represented by constantly evolving but naturally immunodominant ts gene-encoded epitopes, these ts epitopes are also not presented by infected cells until relatively late in the infection cycle (23). The delay in ts epitope presentation may reflect the requirement for a sufficient number of ts-producing amastigotes to accumulate in the host cell cytoplasm and/or relate to huge number of ts variants being produced and thus competing for presentation by class I MHC molecules. A more favorable target for CD8⁺ T cells would be the strain invariant epitopes derived from flagellar proteins that are available for presentation within hours after infection of host cells, a result of the release of the trypomastigotes flagellum by T. cruzi via an asymmetrical cellular division process soon after host cell invasion (23). Indeed enhanced induction of CD8⁺ T cells specific for a flagellum-derived epitope is associated with significantly improved control of challenge infection (23). A similar enhanced protective capacity of CD8⁺ T cells recognizing "early" antigens on infected cells has also been demonstrated in several viral systems, providing additional support for the hypothesis that recognition of a pathogen-infected cell early in the infectious cycle has significant benefits in terms of immune control (40-43).

The issue of the silent invasion process, due to the failure of *T. cruzi* to trigger host PRR, is a bit more difficult address. As we have shown, the infection can be made "louder" by forcing the expression by *T. cruzi* of strong PAMPs and resulting in stronger and more protective immune responses (19). This approach could significantly impact the efficacy of live attenuated vaccines. However it seems unlikely that the host innate immune system can be easily tuned to be more sensitive to *T. cruzi* invasion. This delayed detection of *T. cruzi* in newly infected hosts would seem to make it virtually impossible to prevent infection by prophylactic vaccination – unless host cell invasion itself can be prevented (by blocking antibodies, for example). Like the other data reviewed above, this information should be integrated into the design and proposed use of anti-*T. cruzi* vaccines.

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References

- Tarleton RL. Depletion of CD8+ T cells increases susceptibility and reverses vaccine-induced immunity in mice infected with Trypanosoma cruzi. J Immunol. 1990; 144:717–24. [PubMed: 2104903]
- Tarleton RL, Koller BH, Latour A, Postan M. Susceptibility of beta 2-microglobulin-deficient mice to Trypanosoma cruzi infection. Nature. 1992; 356:338–40. [PubMed: 1549177]
- Tarleton RL, Sun J, Zhang L, Postan M. Depletion of T-cell subpopulations results in exacerbation of myocarditis and parasitism in experimental Chagas' disease. Infect Immun. 1994; 62:1820–9. [PubMed: 8168945]
- Martin D, Tarleton R. Generation, specificity, and function of CD8+ T cells in Trypanosoma cruzi infection. Immunol Rev. 2004; 201:304–17. [PubMed: 15361249]
- Tarleton RL. Immune system recognition of Trypanosoma cruzi. Curr Opin Immunol. 2007; 19:430–4. [PubMed: 17651955]
- Padilla AM, Bustamante JM, Tarleton RL. CD8+ T cells in Trypanosoma cruzi infection. Curr Opin Immunol. 2009; 21:385–90. [PubMed: 19646853]
- Garg N, Nunes MP, Tarleton RL. Delivery by Trypanosoma cruzi of proteins into the MHC class I antigen processing and presentation pathway. J Immunol. 1997; 158:3293–302. [PubMed: 9120286]
- Wizel B, Nunes M, Tarleton RL. Identification of a Trypanosoma cruzi trans-sialidase family member as a target of protective CD8+ Tc1 responses. J Immunol. 1997; 159:6120–30. [PubMed: 9550413]
- Low HP, Santos MA, Wizel B, Tarleton RL. Amastigote surface proteins of Trypanosoma cruzi are targets for CD8+ CTL. J Immunol. 1998; 160:1817–23. [PubMed: 9469442]
- Wizel B, Garg N, Tarleton RL. Vaccination with trypomastigote surface antigen-1-encoding plasmid DNA confers protection against lethal *Trypanosoma cruzi* infection. Infect Immun. 1998; 66:5073–81. [PubMed: 9784506]
- 11. El-Sayed NM, Myler PJ, Bartholomeu DC, Nilsson D, Aggarwal G, Tran AN, Ghedin E, Worthey EA, Delcher AL, Blandin G, Westenberger SJ, Caler E, Cerqueira GC, Branche C, Haas B, Anupama A, Arner E, Aslund L, Attipoe P, Bontempi E, Bringaud F, Burton P, Cadag E, Campbell DA, Carrington M, Crabtree J, Darban H, da Silveira JF, de Jong P, Edwards K, Englund PT, Fazelina G, Feldblyum T, Ferella M, Frasch AC, Gull K, Horn D, Hou L, Huang Y, Kindlund E, Klingbeil M, Kluge S, Koo H, Lacerda D, Levin MJ, Lorenzi H, Louie T, Machado

CR, McCulloch R, McKenna A, Mizuno Y, Mottram JC, Nelson S, Ochaya S, Osoegawa K, Pai G, Parsons M, Pentony M, Pettersson U, Pop M, Ramirez JL, Rinta J, Robertson L, Salzberg SL, Sanchez DO, Seyler A, Sharma R, Shetty J, Simpson AJ, Sisk E, Tammi MT, Tarleton R, Teixeira S, Van Aken S, Vogt C, Ward PN, Wickstead B, Wortman J, White O, Fraser CM, Stuart KD, Andersson B. The genome sequence of Trypanosoma cruzi, etiologic agent of Chagas disease. Science. 2005; 309:409–15. [PubMed: 16020725]

- Atwood JA 3rd, Weatherly DB, Minning TA, Bundy B, Cavola C, Opperdoes FR, Orlando R, Tarleton RL. The Trypanosoma cruzi proteome. Science. 2005; 309:473–6. [PubMed: 16020736]
- Martin DL, Weatherly DB, Laucella SA, Cabinian MA, Crim MT, Sullivan S, Heiges M, Craven SH, Rosenberg CS, Collins MH, Sette A, Postan M, Tarleton RL. CD8+ T-Cell responses to Trypanosoma cruzi are highly focused on strain-variant trans-sialidase epitopes. PLoS Pathog. 2006; 2:e77. [PubMed: 16879036]
- Dc-Rubin SS, Schenkman S. T rypanosoma cruzi trans-sialidase as a multifunctional enzyme in Chagas' disease. Cell Microbiol. 2012; 14:1522–30. [PubMed: 22747789]
- Alvarez MG, Postan M, Weatherly DB, Albareda MC, Sidney J, Sette A, Olivera C, Armenti AH, Tarleton RL, Laucella SA. HLA Class I-T Cell Epitopes from trans-Sialidase Proteins Reveal Functionally Distinct Subsets of CD8 T Cells in Chronic Chagas Disease. PLoS Negl Trop Dis. 2008; 2:e288. [PubMed: 18846233]
- Padilla AM, Simpson LJ, Tarleton RL. Insufficient TLR activation contributes to the slow development of CD8+ T cell responses in Trypanosoma cruzi infection. J Immunol. 2009; 183:1245–52. [PubMed: 19553540]
- Chessler AD, Unnikrishnan M, Bei AK, Daily JP, Burleigh BA. Trypanosoma cruzi triggers an early type I IFN response in vivo at the site of intradermal infection. J Immunol. 2009; 182:2288– 96. [PubMed: 19201883]
- Vaena de Avalos S, Blader IJ, Fisher M, Boothroyd JC, Burleigh BA. Immediate/early response to Trypanosoma cruzi infection involves minimal modulation of host cell transcription. J Biol Chem. 2002; 277:639–44. [PubMed: 11668183]
- 19. Kurup SP, Tarleton RL. Perpetual expression of PAMPs necessary for optimal immune control and clearance of a persistent pathogen. Nat Commun. 2013; 4:2616. [PubMed: 24149620]
- Garg N, Tarleton RL, Mensa-Wilmot K. Proteins with glycosylphosphatidylinositol (GPI) signal sequences have divergent fates during a GPI deficiency. GPIs are essential for nuclear division in Trypanosoma cruzi. J Biol Chem. 1997; 272:12482–91. [PubMed: 9139697]
- 21. Minning TA, Weatherly DB, Flibotte S, Tarleton RL. Widespread, focal copy number variations (CNV) and whole chromosome aneuploidies in Trypanosoma cruzi strains revealed by array comparative genomic hybridization. BMC Genomics. 2011; 12:139. [PubMed: 21385342]
- Rosenberg CS, Martin DL, Tarleton RL. CD8+ T cells specific for immunodominant transsialidase epitopes contribute to control of Trypanosoma cruzi infection but are not required for resistance. J Immunol. 2010; 185:560–8. [PubMed: 20530265]
- Kurup SP, Tarleton RL. The Trypanosoma cruzi Flagellum Is Discarded via Asymmetric Cell Division following Invasion and Provides Early Targets for Protective CD8(+) T Cells. Cell Host Microbe. 2014; 16:439–49. [PubMed: 25299330]
- Bixby LM, Tarleton RL. Stable CD8+ T cell memory during persistent Trypanosoma cruzi infection. J Immunol. 2008; 181:2644–50. [PubMed: 18684955]
- Martin DL, Tarleton RL. Antigen-specific T cells maintain an effector memory phenotype during persistent Trypanosoma cruzi infection. J Immunol. 2005; 174:1594–601. [PubMed: 15661921]
- Bustamante JM, Bixby LM, Tarleton RL. Drug-induced cure drives conversion to a stable and protective CD8+ T central memory response in chronic Chagas disease. Nat Med. 2008; 14:542– 50. [PubMed: 18425131]
- 27. Gutierrez FR, Mariano FS, Oliveira CJ, Pavanelli WR, Guedes PM, Silva GK, Campanelli AP, Milanezi CM, Azuma M, Honjo T, Teixeira MM, Aliberti JC, Silva JS. Regulation of Trypanosoma cruzi-induced myocarditis by programmed death cell receptor 1. Infect Immun. 2011; 79:1873–81. [PubMed: 21357717]

- Sullivan NL, Eickhoff CS, Sagartz J, Hoft DF. Deficiency of Antigen-Specific B Cells Results in Decreased Trypanosoma cruzi Systemic but Not Mucosal Immunity Due to CD8 T Cell Exhaustion. J Immunol. 2015; 194:1806–18. [PubMed: 25595788]
- Borges DC, Araujo NM, Cardoso CR, Lazo Chica JE. Different parasite inocula determine the modulation of the immune response and outcome of experimental Trypanosoma cruzi infection. Immunology. 2013; 138:145–56. [PubMed: 23113506]
- Albareda MC, Olivera C, Laucella S, Alvarez MG, Fernandez ER, Lococo B, Viotti R, Tarleton R, Postan M. Chronic human infection with T. cruzi drives CD4+ T cells to immune senescence. J Immunol. 2009; 183:1675–84. [PubMed: 19592652]
- 31. Arguello RJ, Vigliano C, Cabeza-Meckert P, Viotti R, Garelli F, Favaloro LE, Favaloro RR, Laguens R, Laucella SA. Presence of antigen-experienced T cells with low grade of differentiation and proliferative potential in chronic Chagas disease myocarditis. PLoS Negl Trop Dis. 2014; 8:e2989. [PubMed: 25144227]
- 32. Albareda MC, De Rissio AM, Tomas G, Serjan A, Alvarez MG, Viotti R, Fichera LE, Esteva MI, Potente D, Armenti A, Tarleton RL, Laucella SA. Polyfunctional T cell responses in children in early stages of chronic Trypanosoma cruzi infection contrast with monofunctional responses of long-term infected adults. PLoS Negl Trop Dis. 2013; 7:e2575. [PubMed: 24349591]
- 33. Arguello RJ, Albareda MC, Alvarez MG, Bertocchi G, Armenti AH, Vigliano C, Meckert PC, Tarleton RL, Laucella SA. Inhibitory receptors are expressed by Trypanosoma cruzi-specific effector T cells and in hearts of subjects with chronic Chagas disease. PLoS One. 2012; 7:e35966. [PubMed: 22574131]
- 34. Albareda MC, Laucella SA, Alvarez MG, Armenti AH, Bertochi G, Tarleton RL, Postan M. Trypanosoma cruzi modulates the profile of memory CD8+ T cells in chronic Chagas' disease patients. Int Immunol. 2006; 18:465–71. [PubMed: 16431876]
- 35. Laucella SA, Mazliah DP, Bertocchi G, Alvarez MG, Cooley G, Viotti R, Albareda MC, Lococo B, Postan M, Armenti A, Tarleton RL. Changes in Trypanosoma cruzi-specific immune responses after treatment: surrogate markers of treatment efficacy. Clin Infect Dis. 2009; 49:1675–84. [PubMed: 19877967]
- Quijano-Hernandez I, Dumonteil E. Advances and challenges towards a vaccine against Chagas disease. Hum Vaccin. 2011; 7:1184–91. [PubMed: 22048121]
- Vazquez-Chagoyan JC, Gupta S, Garg NJ. Vaccine development against Trypanosoma cruzi and Chagas disease. Adv Parasitol. 2011; 75:121–46. [PubMed: 21820554]
- 38. Bustamante J, Tarleton R. Reaching for the Holy Grail: insights from infection/cure models on the prospects for vaccines for *Trypanosoma cruzi* infection. Mem Inst Oswaldo Cruz. 2015
- Peters NC, Pagan AJ, Lawyer PG, Hand TW, Henrique Roma E, Stamper LW, Romano A, Sacks DL. Chronic parasitic infection maintains high frequencies of short-lived Ly6C+CD4+ effector T cells that are required for protection against re-infection. PLoS Pathog. 2014; 10:e1004538. [PubMed: 25473946]
- 40. Sacha JB, Chung C, Rakasz EG, Spencer SP, Jonas AK, Bean AT, Lee W, Burwitz BJ, Stephany JJ, Loffredo JT, Allison DB, Adnan S, Hoji A, Wilson NA, Friedrich TC, Lifson JD, Yang OO, Watkins DI. Gag-specific CD8+ T lymphocytes recognize infected cells before AIDS-virus integration and viral protein expression. J Immunol. 2007; 178:2746–54. [PubMed: 17312117]
- 41. Baur K, Brinkmann K, Schweneker M, Patzold J, Meisinger-Henschel C, Hermann J, Steigerwald R, Chaplin P, Suter M, Hausmann J. Immediate-early expression of a recombinant antigen by modified vaccinia virus ankara breaks the immunodominance of strong vector-specific B8R antigen in acute and memory CD8 T-cell responses. J Virol. 2010; 84:8743–52. [PubMed: 20538860]
- 42. Kloverpris HN, Payne RP, Sacha JB, Rasaiyaah JT, Chen F, Takiguchi M, Yang OO, Towers GJ, Goulder P, Prado JG. Early antigen presentation of protective HIV-1 KF11Gag and KK10Gag epitopes from incoming viral particles facilitates rapid recognition of infected cells by specific CD8+ T cells. J Virol. 2013; 87:2628–38. [PubMed: 23255798]
- 43. Pereyra F, Heckerman D, Carlson JM, Kadie C, Soghoian DZ, Karel D, Goldenthal A, Davis OB, DeZiel CE, Lin T, Peng J, Piechocka A, Carrington M, Walker BD. HIV control is mediated in

part by CD8+ T-cell targeting of specific epitopes. J Virol. 2014; 88:12937–48. [PubMed: 25165115]