Immune correlates of postexposure vaccine protection against Marburg virus

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37 Fig. S1: rVSV vector design and survival of treated rhesus macaques.

 a) rVSV∆G/MARV-Angola-GP (∆G) was generated by swapping the native VSV Indiana glycoprotein gene with a MARV-Angola glycoprotein gene via restriction enzyme-mediated integration. To maximize antigen expression, the MARV-Angola-GP or HIV gag gene was cloned into the first genomic position of rVSVN2CT1-MARV-Angola-GP (N2) or the

 rVSVN4CT1-HIVgag vector control. The N2 and control vectors were attenuated by shuffling the VSV nucleoprotein gene to the second or fourth position, respectively, and truncating the G cytoplasmic tail from 29 to 1 amino acid(s). The black and white-striped region within G denotes the amino acid substitution site. **b)** Kaplan-Meier survival curves of animals treated with rVSVΔG/MARV-Angola-GP (ΔG; solid blue line; N=9), rVSVN2CT1-MARV-Angola-GP (N2; 47 segmented blue line; N=5), and rVSVN4CT1-HIV gag (vector control; black line; N=1). Groups treated with rVSV vectors expressing MARV-Angola-GP were significantly different than the untreated control group (red line; N=3). Statistical significance was not calculated against the vector control due to a lack of biological replicates. Abbreviations: VSV (Vesicular stomatitis virus); rVSV (recombinant vesicular stomatitis virus); N (VSV nucleoprotein); P (VSV phosphoprotein); M (VSV matrix protein); G (VSV glycoprotein); CT1 (truncated cytoplasmic tail); L (VSV polymerase); Le (leader); Tr (trailer); ∆G (the native VSV G is absent); MARV (Marburg virus, variant Angola); GP (MARV glycoprotein); N4 (the rVSV N is at position 4 in the genome); N2 (the rVSV N is at position 2 in the genome); HIV (human immunodeficiency virus); gag (group-specific antigen); PFU (plaque-forming units); DPI (days post-infection); ns 57 (not statistically significant). Log-rank test ** $p \le 0.01$, *** $p \le 0.001$.

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Figure S2. Plasma levels of coagulation-associated analytes in macaque subjects.

61 Red line represents the fatal dataset; blue line represents the treated survivor dataset. 62 Abbreviations: PAI-1 (plasminogen activator inhibitor-1); PI (post-infection).

65 Table S1: Neutralizing antibody titers.

 Serum was evaluated for neutralizing antibody titers prior to challenge and terminally for untreated controls. Treated macaque sera were additionally evaluated on days 10 and 14 post-68 challenge. The reciprocal dilution titer of sera that neutralized \geq 50% of viral plaques (PRNT₅₀) value) is reported. Abbreviations: ∆G, referring to individual monkey treated with rVSV∆G/MARV-Angola-GP; N2, referring to individual monkey treated with rVSVN2CT1- MARV-Angola GP; N.D., not determined.

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74 Table S2: MARV viral load in tissues.

75 Samples from MARV-Angola-infected animals were normalized according to onset of viremia

76 (mid-disease). Late-disease corresponded to 0-2 days before the animal succumbed, at peak

77 viremia. The median time points for these disease stages were used to define mid-disease (6 DPI)

78 and late-disease (10 DPI) in the survivor dataset. $+$, \leq 8 logs; $++$, \geq 9 logs; $++$, \geq 10 logs; $++$, \geq 11 LOGS. Abbreviations: N.D., not detected; LN, lymph node.

 $>$ 11 LOGS. Abbreviations: N.D., not detected; LN, lymph node.

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82 Table S3: Normalization of samples for RNAseq, flow cytometry, and cytokine analyses.

83 Samples from MARV-Angola-infected animals were normalized according to onset of viremia

84 (mid-disease). Late-disease in the fatal group corresponded to 0-2 days before the animal died, at

85 peak viremia. The median time points for these disease stages for the survivor group were used

86 to define mid-disease (6 DPI) and late-disease (10 DPI).

90 Principal component analyses (PCAs) of **a)** fatal and **b)** treated survivor samples with inclusion

91 (right panels) or exclusion (left panels) of outliers (circled dots). No outliers were excluded from

92 our transcriptomic analyses for either cohort as we determined that inclusion of these did not

93 considerably skew these datasets. Baseline, mid-disease, and late-disease phases are represented

94 by red, blue, and green dots, respectively.

97 Fig. S4. Comparison of the most highly upregulated and downregulated DEGs at late-disease.

 Heatmap of DEGs observed at late-disease. DEGs were calculated using EdgeR against a pre- challenge baseline to establish the most highly expressed genes. A scaled heatmap based on RPKM values within that set of genes (red represents increased expression while blue represents decreased expression); each column represents the median RPKM values for each time point. Only human homologs and protein-coding genes were analyzed. *: statistically significant, FDR-103 corrected p-value of \leq 0.05.

106 Figure S5. ImmQuant comparative view analysis of the relative contribution of immune cell 107 subsets to differential gene expression within the control group.

108 ImmQuant uses a database based on genome-wide microarray expression profiling of human

109 immune cells from reported studies. Results were calculated using the Digital Cell Quantifier 110 (DCQ) algorithm with human-based FACS marker genes. The algorithm infers an increase or

111 decrease in cell-type quantities relative to a Dy 0 baseline."*" indicates statistically significant

112 putative changes in the cell subset frequency*.*

115 Figure S6. PBMC flow gating strategy.

 a) Monocytes were identified based on lack of CD3 (T-cell) and CD20 (B-cell) expression, and positive CD14 expression. The mean fluorescence intensity of HLA-DR was then calculated within this population. **b)** After live/dead staining, regulatory T-cells (Tregs) were positively selected for the following markers: CD3, CD4, CD25, and FOXP3. We confirmed expression of IL-10 within the Treg subset. Th2 cells were gated on within the CD3+CD4+IL-4+ cell population. **c)** To identify Th1 and CTL populations, cells were stained with CD3, CD4, CD8b, IL-2, IFN-gamma, and CD107a fluorochrome-conjugated antibodies. T helper 1 (Th1) cells were identified by their expression of CD3, CD4, IL-2, and IFN-gamma. The frequency of proliferating Th1 cells was determined using the Ki67 marker. CTLs were identified by their expression of CD3, CD8, and the degranulation marker, CD107. **d)** NK cells were identified based on lack of CD3, CD20, and CD14 expression, and positive CD8α expression. Percentages of CD16+ and granzyme B+ populations were then determined within this population **a b c d)** Approximately 200,000 events were collected on a BD FACS Canto II cytometer and analyzed using FACS Diva and FlowJo software.