

Antiviral T cell immunity in HIV-infected children on long-term antiretroviral therapy

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Conclusions

The preliminary data suggest that T cells against the chronic viruses CMV and EBV were significantly altered in both the CD4 and CD8 T cell compartment, exhibiting higher functional capacity in primarily the CD8 T cells of HIV-infected children. In contrast, the CD4 T cell responses against common cold viruses OC43 and RSV, though fewer in number, were comparable to age-matched controls.

Future perspectives

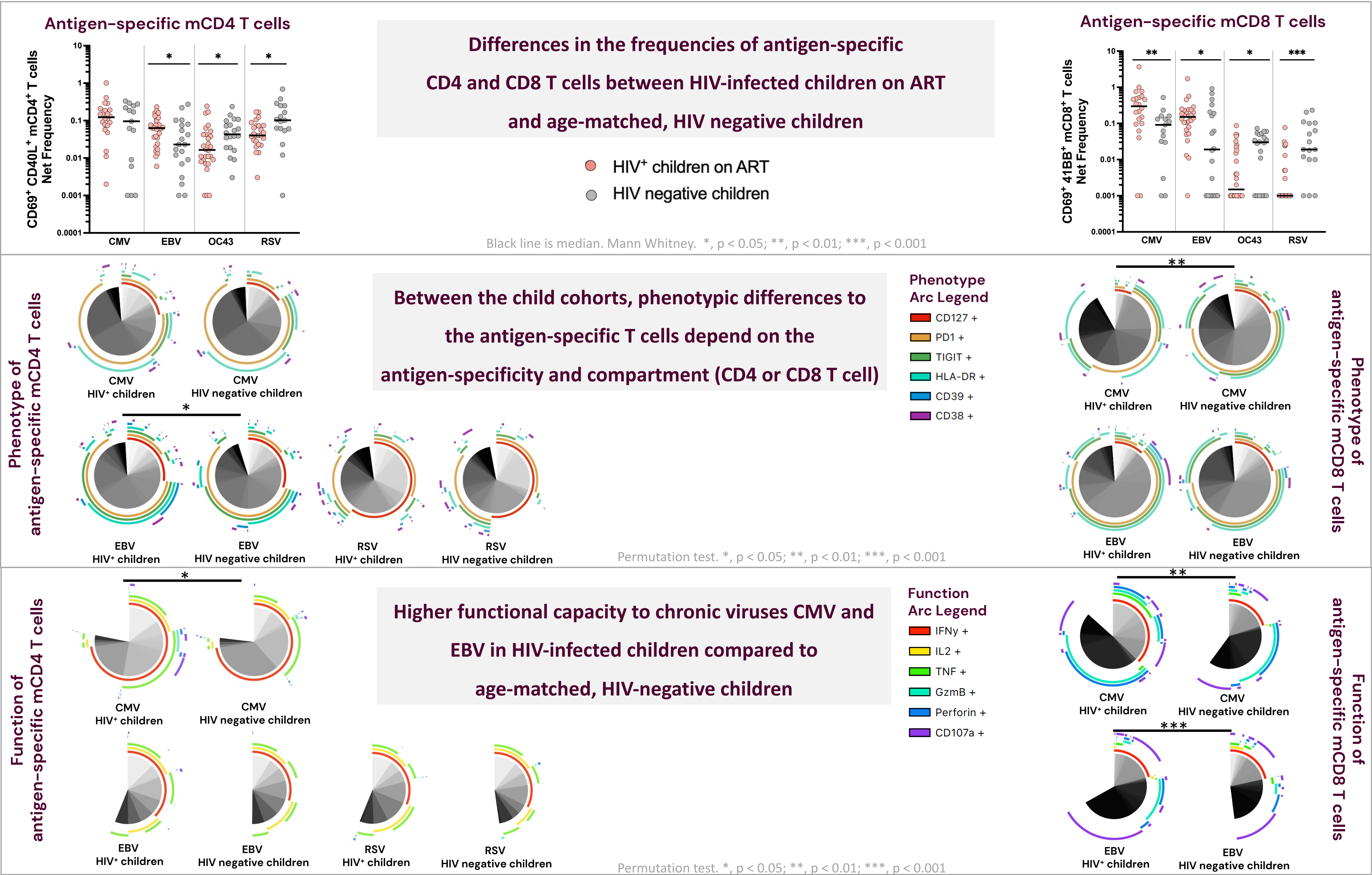
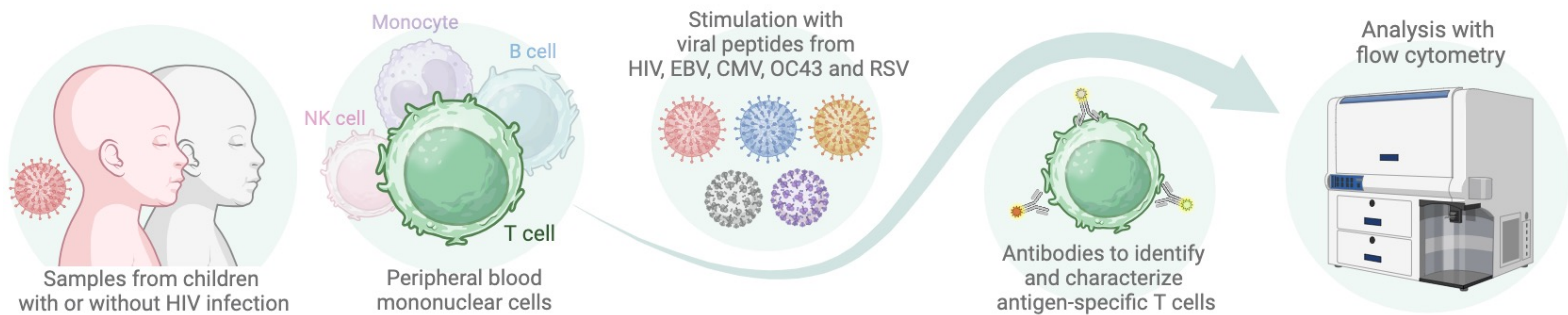
These findings will be further explored with an additional flow cytometry panel focusing on T cell exhaustion, TCR sequencing using single-cell RNA sequencing and serology analysis.

Introduction

Over 90 % of children with human immunodeficiency virus (HIV) are infected during gestation, delivery or infancy. Today, effective antiretroviral therapy (ART) can limit the deleterious effects of HIV on the immune system. However, challenges with treatment adherence and drug resistance affects the ability to control virus activity in pediatric HIV. Furthermore, how early and long-term exposure to ART and HIV affect the development of the antiviral immune system is understudied.

Aim

Our aim is to study the immune recovery and antiviral T cell responses in HIV-infected children on ART compared to and age-matched, healthy children.



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