# Hypergammaglobulinemia in treated and untreated people with HIV



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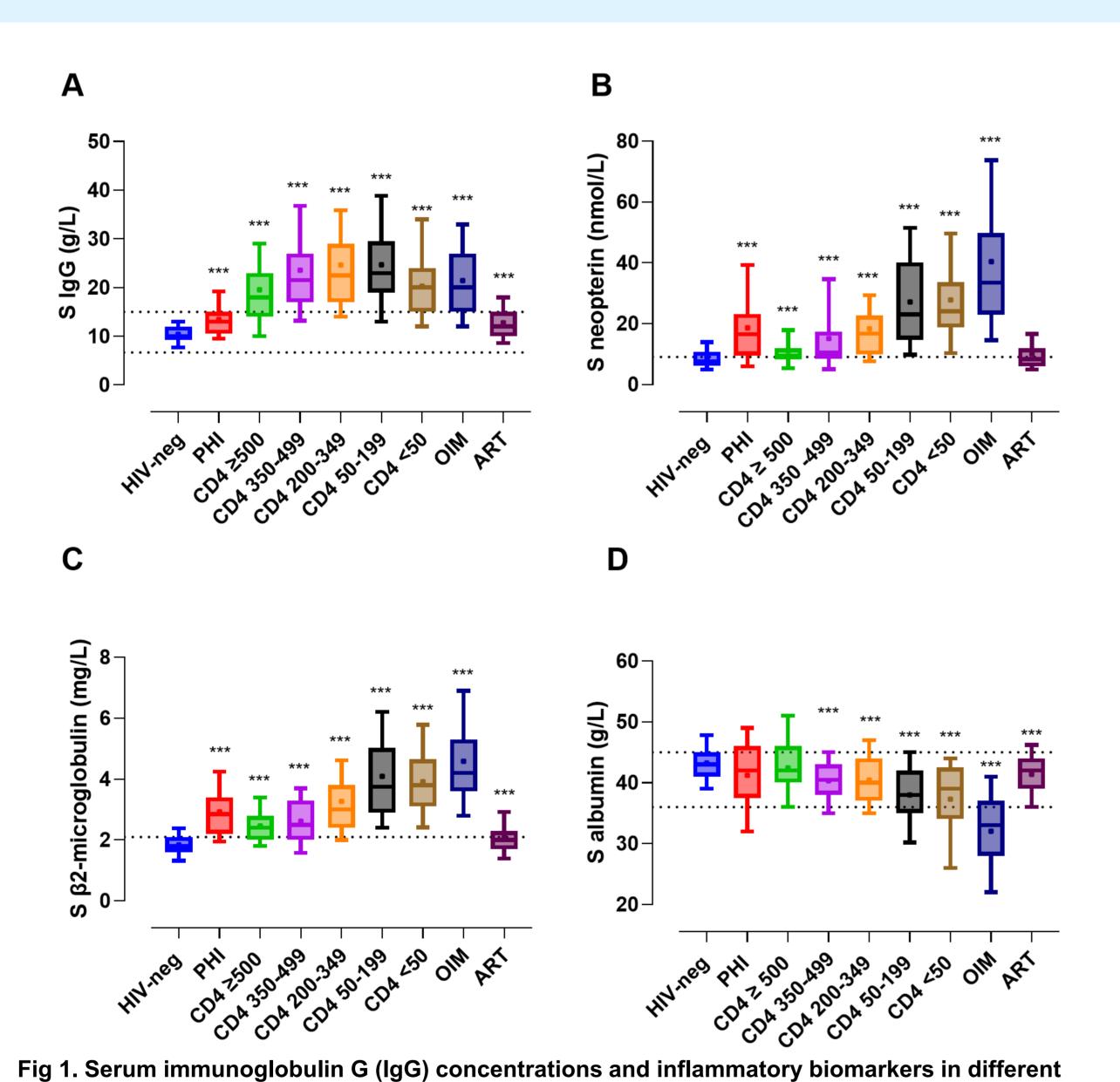
### Background

B cell abnormalities are an early feature of HIV infection, resulting in elevated immunoglobulin G (IgG) levels. These antibodies are largely non-specific and do not represent a virus-specific humoral response.

We evaluated plasma levels of IgG and inflammatory biomarkers in a large cohort of people with HIV (PWH).

#### Method

The study is a cross-sectional analysis of 750 blood samples, of which 267 were collected from virologically suppressed participants on antiretroviral therapy (ART) and 483 from untreated participants. The HIV-negative control group consisted of 44 individuals receiving HIV preexposure prophylaxis (PrEP) with tenofovir disoproxil fumarate (TDF)/emtricitabine (FTC) and 27 participants without PrEP.



**study groups.** PHI, primary HIV-1 infection; OIM, ongoing infection or malignancy; ART, antiretroviral treatment. The dotted horizontal lines indicate the reference interval (A, D) and the upper reference level (B, C), respectively. \*\*\* P < 0.001.

#### Results

The most pronounced hypergammaglobulinemia was seen in participants with low CD4<sup>+</sup>T cell counts (50-349 cells/ $\mu$ L). Elevated IgG concentrations prevailed in 24 % of participants on ART. Women had higher IgG levels than men in both treated and untreated study groups. The inflammatory biomarkers neopterin and  $\beta$ 2-microglobulin were abnormally elevated in one-third of ART suppressed participants.

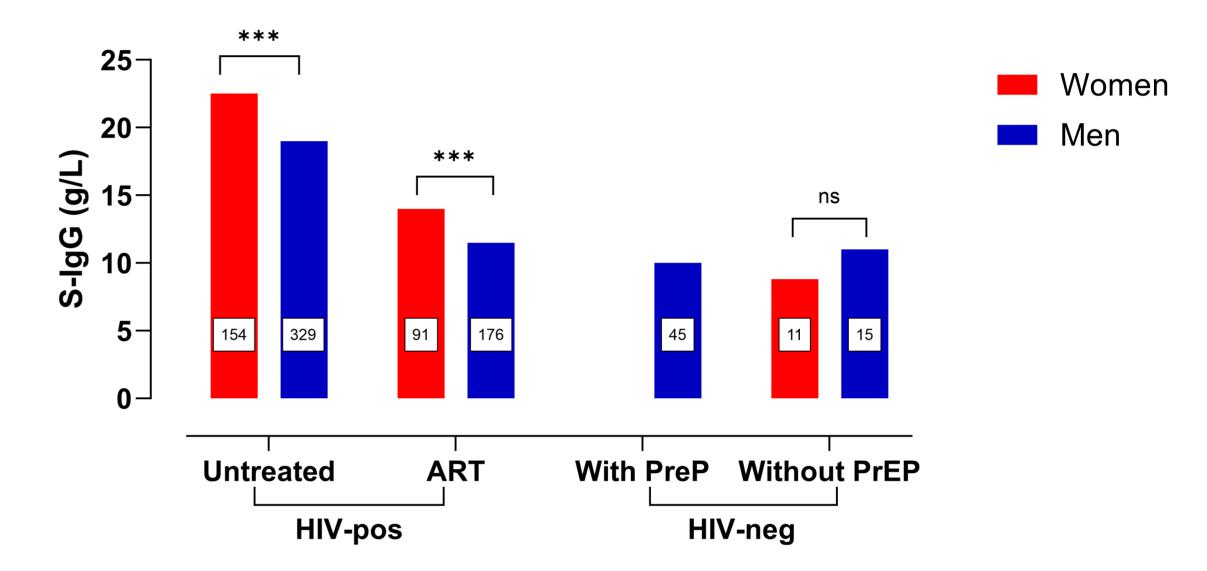
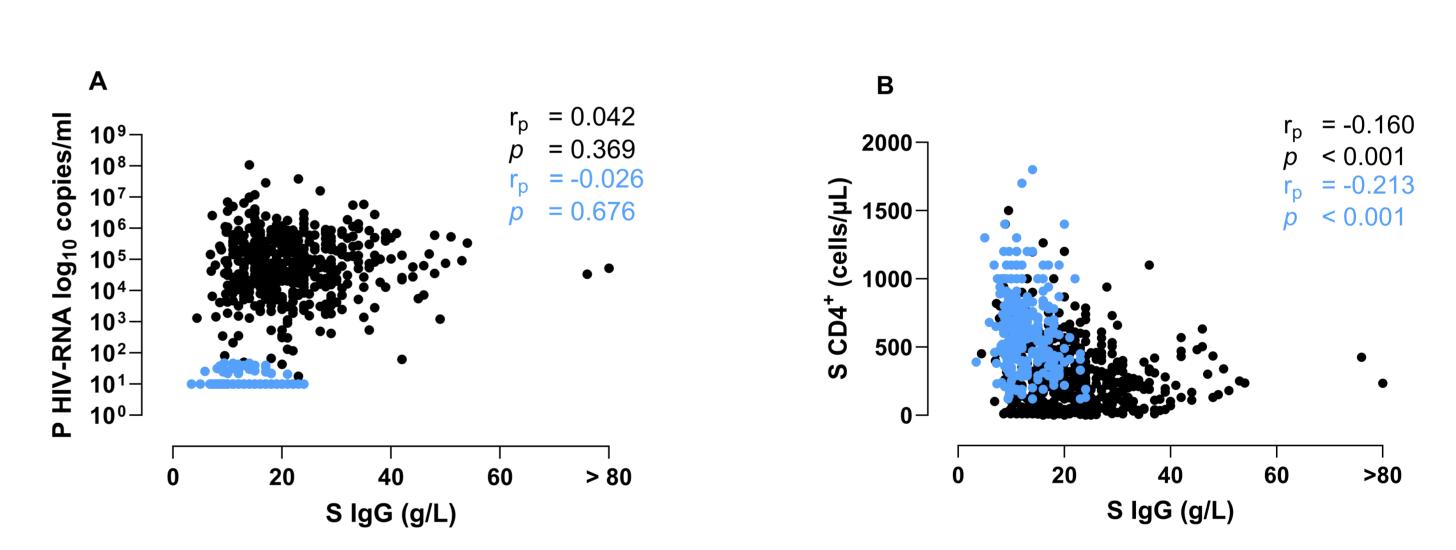


Fig 2. Median serum IgG concentrations in men and women. The number of participant samples is enclosed in the bars. \*\*\* P < 0.001.



**Fig 3. Correlations between serum IgG concentrations and HIV-RNA (A) and CD4<sup>+</sup> (B)** with partial correlation for age. Samples from participants on ART are indicated in blue, samples from participants without ART in black.

#### Conclusion

Although IgG levels were normalized in most participants on ART, hypergammaglobulinemia prevailed in about a quarter of cases. This, along with the findings of elevated inflammatory biomarkers despite ART suppression, enhances the picture of persisting inflammatory activity in virally suppressed PWH.

## Take home message

Hypergammaglobulinemia is commonly seen in PWH and may persist despite ART suppression.

