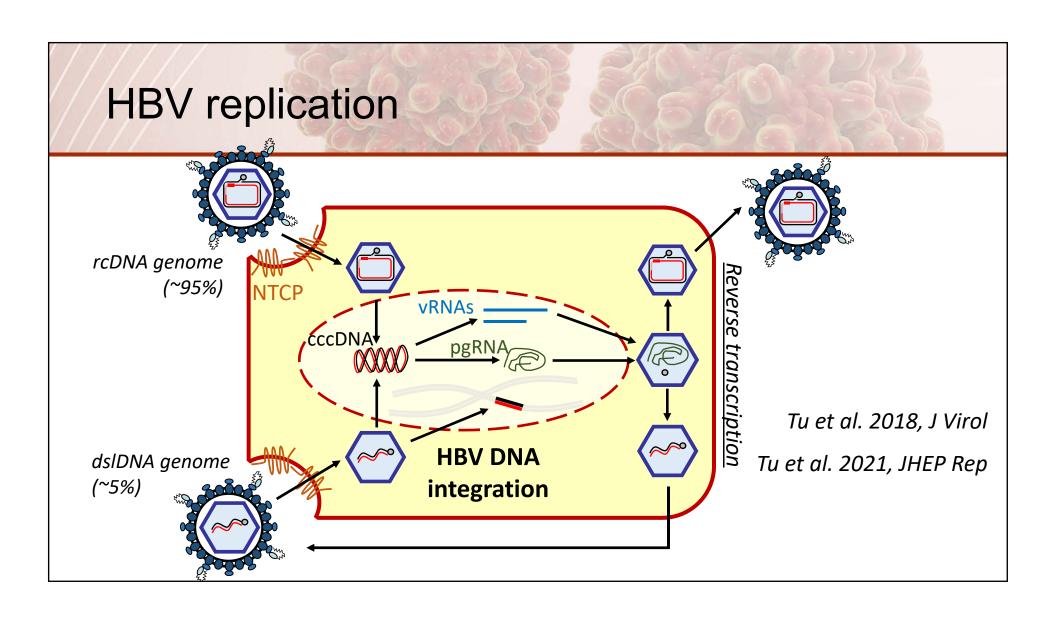


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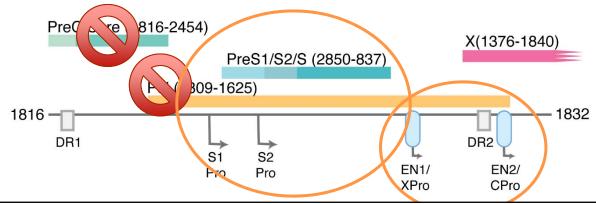


HBV DNA integration

- Random site in host genome at low rates (1 per 10⁴ cells)
- Integrated HBV DNA is linked with HCC (>60% tumours)
 - Can drive expression of downstream genes -> cis-activation
 - May code for mutated proteins -> trans-activation

Tu et al. 2015, Liver Int.; Tu et al. 2017, Biol. Chem.

Integrated dsIDNA (replication-deficient)

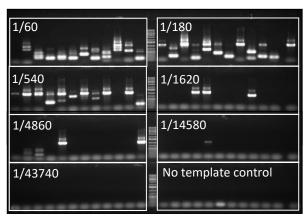


Tu et al. 2018, Viruses

Inverse nested PCR to detect HBV integration

Extract & sequence bands to confirm virus-cell junction

Quantitative



Unique junctions = clonal fingerprint

Repeated integration sites = clonal expansion

Yang and SurGe electrophoresis

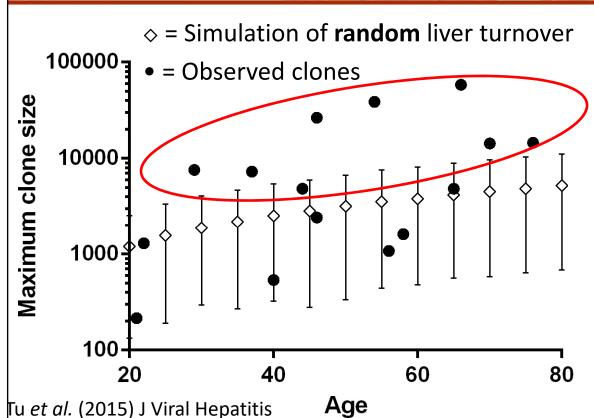
Mason et al. 2010, JVI Integration, frequency

Tu adeterm?ined/by end-point

Tu et al. 2018, JVI Tu and Urban 2018 JVE

Serially dilute DNA prior to nested PCR

Cells with HBV integrations clonally expand



Clones quantified in nontumour liver of 18 HBV patients with invPCR

Clones with selection advantage detected

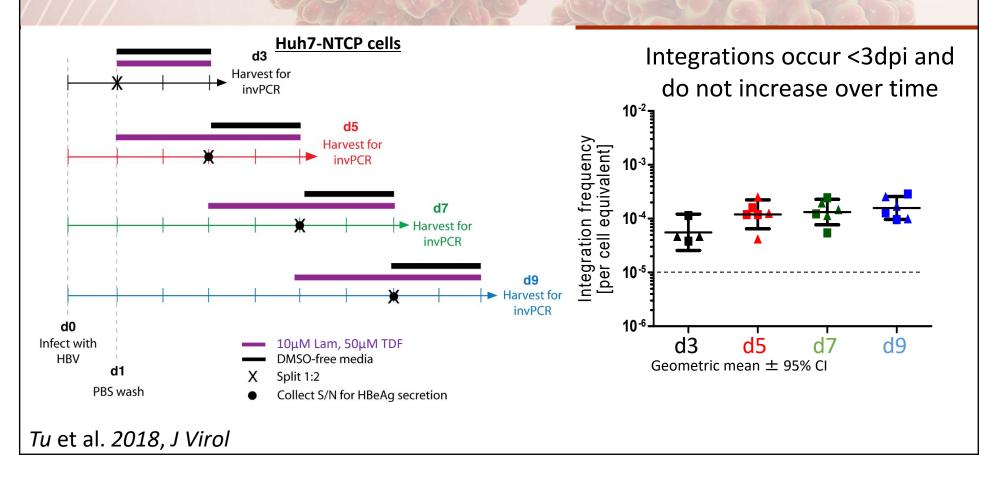
Likely risk factor for cancer

Hypotheses

Selection advantage of hepatocytes is driven by HBV DNA integrations via:

- 1) cis-mediated (site-dependent) mechanisms
- 2) trans-mediated (site-independent) mechanisms
- 3) Associative (not causative) mechanisms

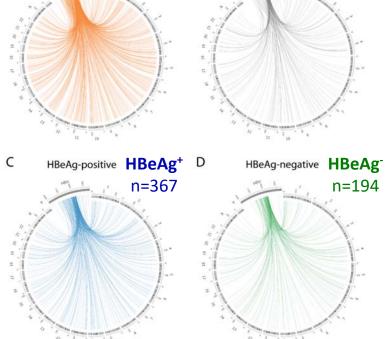
Null hypothesis: integrations before expansion



Expansion not likely due to <u>cis-mediated</u> mechanisms

No enrichment in:

- Expressed vs. nonexpressed genes
- Transcriptional start sites
- Functional pathways
 Where integrations
 occur does not play a
 role!



In silico B

n=1,024

In vitro

n=161

in vitro

Budzinska, ... Tu, 2018, Emer. Micro. & Infect. Budzinska, ... Tu, 2018, Genes

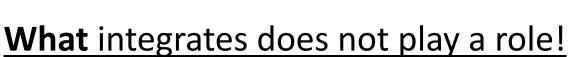
Magdalena Budzinska

PhD

Expansion not likely due to <u>trans-mediated</u> mechanisms

From 24 tumour and 63 non-tumour samples from HBV patients:

- Detected 43 integrations in total
- 6 and 7 highly clonal integrations in non-tumour and tumour
- Specific Sanger sequencing of integrated HBV DNA show no mutational differences between tumour and non-tumour





Monica
Pinkerton
Honours student

Tu et al., in preparation

HBV DNA integration frequency and HCC risk

- 33 anti-HBc+ and HBe⁻ patients (~20% on NA)
- Analysed non-tumour liver tissue

Group $1A = HBsAg^+ w/o HCC (n=3)$

Group $2A = HBsAg^+ w/ HCC (n=15)$

Group 1B = HBsAg⁻ w/o HCC (n=6)

Group $2B = HBsAg^- w/HCC (n=9)$

Hung-Wen Tsai

Ih-Jen Su

Chiao-Fang Teng

N.B. Liver from Groups 1A & 2B collected during resection of metastatic colorectal cancer.

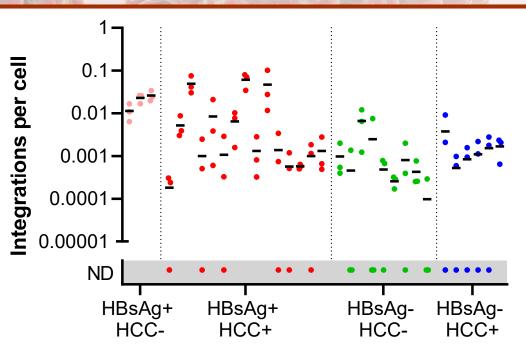
Tu et al., in preparation

Integration frequency not linked to HCC

Integration frequency in non-tumour liver not associated with:

- HBsAg-loss
- HCC occurrence

No clear associative link



Tu et al., in preparation

Are HBV integrations associated with phenotypical cellular changes?







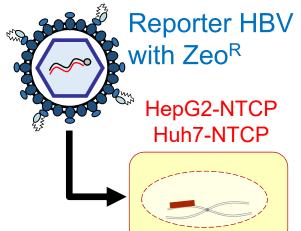
<u>Ulrike Protzer</u> Jochen Wettengel

Sally Coulter Research Officer

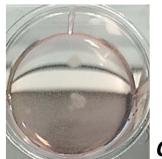


Vikki Ho Research Assistant

Q: Are cells with HBV integrations functionally different?



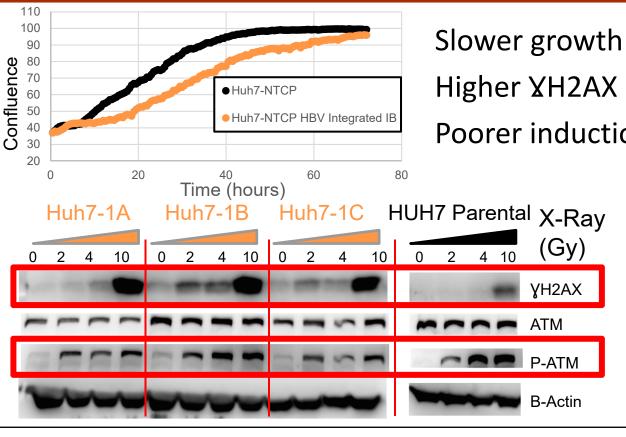
Zeocin selection



Characterise clones

Coulter et al., in preparation

Cells with integrations grow slower, show more DNA damage, and less DNA repair



Slower growth by live-imaging
Higher XH2AX (DNA damage)
Poorer induction P-ATM (DNA repair)

Q: Does phenotype occur before or after integration?

Coulter et al., in preparation

Conclusions

Extensive clonal expansion occurs in cells with integration

HBV integration site, form, or frequency in non-tumour tissue does not appear to be associated with HCC

Still open question as to why HCC appear to contain more HBV DNA integrations than general hepatocyte population

Are integrations more likely to occur in cells with oncogenic potential?

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Hung-Wen Tsai Ih-Jen Su Chiao-Fang Teng



<u>Ulrike Protzer</u> Jochen Wettengel







