

# Targeted mutations in IFN $\alpha$ 2 improve its antiviral activity against various viruses

Zehra Karakoese,<sup>1,2</sup> Vu-Thuy Khanh Le-Trilling,<sup>1</sup> Jonas Schuhenn,<sup>1</sup> Sandra Francois,<sup>1</sup> Mengji Lu,<sup>1,3</sup> Jia Liu,<sup>3,4</sup> Mirko Trilling,<sup>1,3</sup> Daniel Hoffmann,<sup>3,5</sup> Ulf Dittmer,<sup>1,2,3</sup> Kathrin Sutter<sup>1,2,3</sup>

**AUTHOR AFFILIATIONS** See affiliation list on p. 17.

**ABSTRACT** During viral infections, type I interferons (IFN) are induced and play a key role in counteracting initial viral spread. Twelve different human IFN $\alpha$  subtypes exist that bind the same receptor; however, they elicit unique host responses and display distinct potencies of antiviral activities. Our previous studies on human immunodeficiency virus (HIV) and hepatitis B virus (HBV) demonstrated that the clinically used IFN $\alpha$ 2 is not the most effective one among the IFN $\alpha$  subtypes. By sequence modeling, we identified a region in helix B with mainly conserved residues at the outside facing IFNAR1, but variable residues at the inside facing the core of IFN $\alpha$ , potentially representing a putative tunable anchor to tune pleiotropic IFN responses. Using site-directed mutagenesis, various mutations were introduced into the IFN $\alpha$ 2 backbone targeting sites which are important for binding to IFNAR1 and IFNAR2, the putative tunable anchor, or outside these three regions. Selected mutations were based on sequence differences to high antiviral subtypes IFN $\alpha$ 6 and IFN $\alpha$ 14. Treatment assays against HBV and HIV identified several critical residues for the antiviral activity of IFN $\alpha$  mainly in the IFNAR1 binding region. Combined mutations of the IFN $\alpha$ 2 IFNAR1/2 binding sites or the IFNAR1 binding region plus the putative tunable anchor by those of IFN $\alpha$ 14 further augmented activation of different downstream signaling cascades providing a molecular correlate for the enhanced antiviral activity. We describe here important functional residues within IFN $\alpha$  subtype molecules, which enabled us to design novel and innovative drugs that may have the potential to be used in clinical trials against a variety of different viral infections.

**IMPORTANCE** The potency of interferon (IFN) $\alpha$  to restrict viruses was already discovered in 1957. However, until today, only IFN $\alpha$ 2 out of the 12 distinct human IFN $\alpha$  subtypes has been therapeutically used against chronic viral infections. There is convincing evidence that other IFN $\alpha$  subtypes are far more efficient than IFN $\alpha$ 2 against many viruses. In order to identify critical antiviral residues within the IFN $\alpha$  subtype sequence, we designed hybrid molecules based on the IFN $\alpha$ 2 backbone with individual sequence motifs from the more potent subtypes IFN $\alpha$ 6 and IFN $\alpha$ 14. In different antiviral assays with HIV or HBV, residues binding to IFNAR1 as well as combinations of residues in the IFNAR1 binding region, the putative tunable anchor, and residues outside these regions were identified to be crucial for the antiviral activity of IFN $\alpha$ . Thus, we designed artificial IFN $\alpha$  molecules, based on the clinically approved IFN $\alpha$ 2 backbone, but with highly improved antiviral activity against several viruses.

**KEYWORDS** interferons, hepatitis B virus, antiviral therapy, IFNAR, human immunodeficiency virus

The importance of interferons (IFNs) in fighting viruses was first discovered in 1957 by Isaacs and Lindenmann showing the potential of IFNs to inhibit virus replication

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Address correspondence to Kathrin Sutter, Kathrin.sutter@uk-essen.de, or Ulf Dittmer, ulf.dittmer@uk-essen.de.

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(1). Later, it became apparent that the biological properties of IFNs are much more comprehensive than only their antiviral activity including antiproliferative and immunomodulatory activities. The interferons are clustered into three different types based on sequence homology, receptor usage, and downstream signaling cascades. Even though all IFNs play a crucial role in the fight against viral infections, only type I IFNs are clinically approved and are therapeutically applied to treat chronic viral infections, like hepatitis B virus (HBV) and at least in the past hepatitis C virus (HCV) (2, 3). Type I IFNs can be affiliated to a multigene cytokine family encoding numerous genes for IFN $\alpha$ , but only a single gene for IFN $\beta$ , IFN $\epsilon$ , IFN $\kappa$ , and IFN $\omega$ . The overall 13 human IFN $\alpha$  genes express 12 different proteins (subtypes) which share a highly conserved protein sequence with up to 95% identity (4, 5). However, they differ markedly in their biological activities (6–11). Interestingly, all IFN $\alpha$  subtypes evoke their full biological spectrum through binding to the same receptor complex, composed of the two transmembrane proteins IFNAR1 and IFNAR2. Downstream signaling is initiated by IFN binding to the high-affinity subunit IFNAR2, which further recruits IFNAR1 to form a ternary complex (12, 13). Different binding affinities to both receptor subunits, as well as the membrane surface concentration of the receptor subunits, and the equilibrium between binary (IFNAR2-IFN) and ternary (IFNAR2-IFN-IFNAR1) complexes on the surface determine the diverse biological response of the different subtypes (12–14). In addition, the diversity of the type I IFN-mediated responses might be further modulated by the type of cell, the microenvironment, and the timing relative to other stimuli, e.g., T cell receptor triggering and basal expression of signal transducers and activators of transcription (STAT) proteins (15, 16). The ligation of the ternary complex leads to the activation of the classical Janus kinase (JAK)-STAT pathway which induces the transcription of hundreds of IFN-stimulated genes (ISGs). However, several other pathways, including the mitogen-activated protein kinase (MAPK) pathway, the phosphoinositide 3-kinase (PI3K) pathway, and the NF- $\kappa$ B cascade, are also activated upon IFN binding, which further tune the pleiotropic IFN response (17). However, the interplay of the IFN $\alpha$  subtype binding, the complex downstream signaling events, and the subsequent biological activities have not been sufficiently investigated yet.

Type I IFNs can be classified as helical cytokines. Their structure consists of five  $\alpha$ -helices from the N-terminus helix A to the C-terminus helix E- which are associated by an overhand loop (AB loop) and three short segment loops (BC, CD, and DE loops) (18, 19). The core of type I IFNs including all helices as well as parts of the AB loop is defined by conserved structures. However, significant structural distinctions exist within the AB loop, helix B, and BC regions among the IFN $\alpha$  subtypes, potentially explaining their varying biological functions.

In previous studies, we could show that IFN $\alpha$ 6 and IFN $\alpha$ 14 had superior antiviral activity against HBV and HIV compared with IFN $\alpha$ 2 (9, 11, 20). Especially, IFN $\alpha$ 14 has predominant immunomodulatory capacities against HIV by activating effector T and NK cell functions *in vitro* and *in vivo* (7, 11). Furthermore, during HBV infection, IFN $\alpha$ 14 can activate both type I and type II IFN signaling pathways, resulting in the expression of an enlarged pattern of IFN gamma-activated sites (GAS)- and IFN-stimulated response element (ISRE)-driven ISGs (9) which define the biological activity.

To improve the antiviral activity of IFN $\alpha$ 2b, we identified critical residues within the IFN $\alpha$  subtypes which might be potentially important for an augmented antiviral activity. Using site-directed mutagenesis, various amino acids from IFN $\alpha$ 6 or IFN $\alpha$ 14 were introduced into the IFN $\alpha$ 2b backbone. Antiviral assays against HBV and HIV could manifest the importance of certain regions within the IFN $\alpha$  structure. Furthermore, IFN $\alpha$ 2-mutants increased the activation of various downstream signaling pathways making these critical residues potential target regions to improve IFN-mediated responses.

## RESULTS

### Human IFN $\alpha$ subtypes: sequences and structure

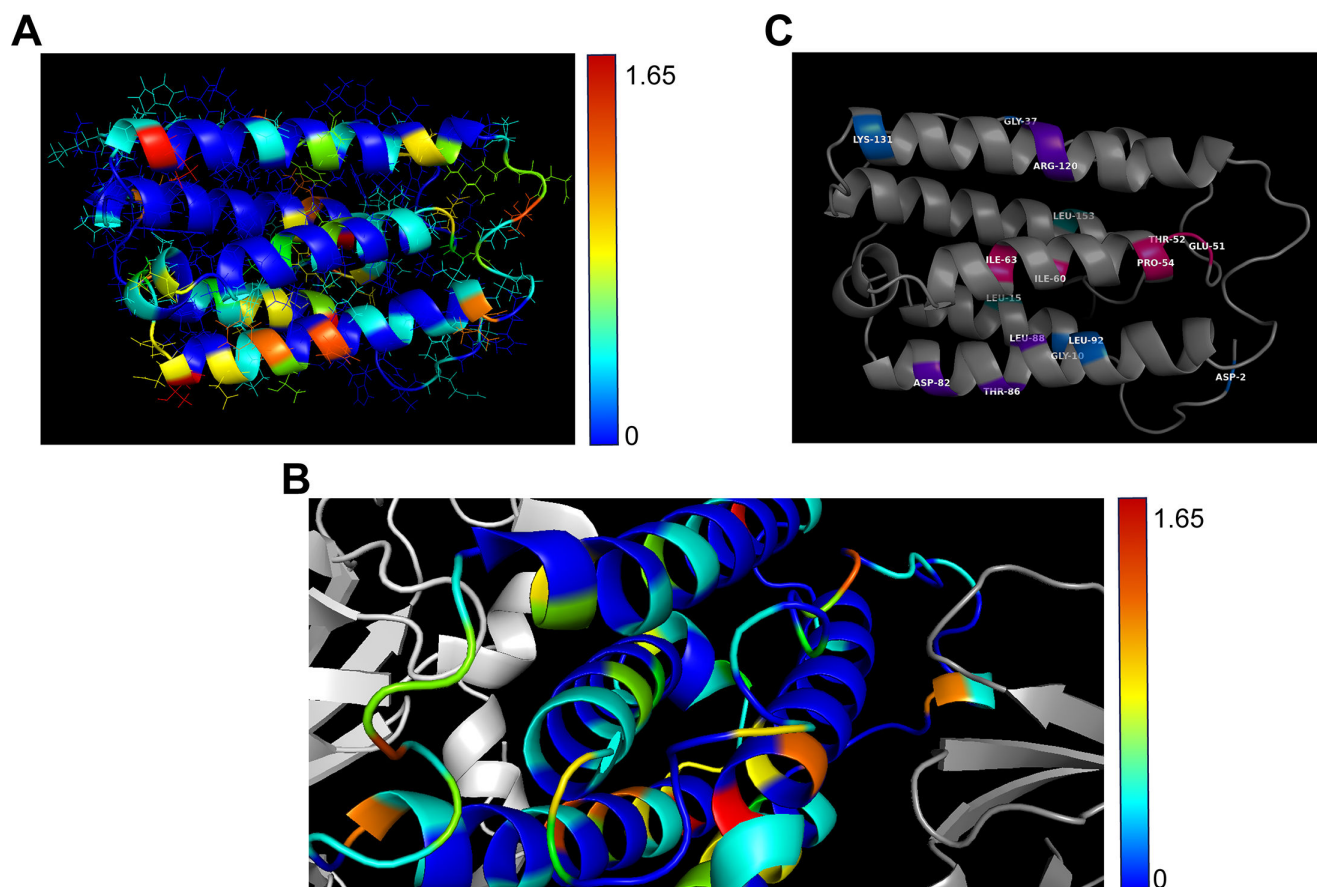
The type I IFN family is composed of multiple IFN $\alpha$  subtypes with non-redundant biological activities. So far, only IFN $\alpha$ 2a/b has been approved for clinical treatment, however, with narrow treatment options and a variety of undesirable side effects (21).

To identify critical residues within the IFN $\alpha$  subtypes which might be potentially important for clinical application, we aligned all IFN $\alpha$  subtypes with multiple alignments using fast Fourier transform (MAFFT) (22). Thereby, we aimed to identify potential mutable motifs within the protein structure which could be modified to improve the effector function of IFN $\alpha$ 2. The alignment of all human IFN $\alpha$  variants showed, in 190 total positions, 93 identical positions (\*\*; 49%), 46 conserved substitutions (':), and 12 semi-conserved substitutions ("), resulting in a high total homology of 79% (Fig. S1). The root-mean-square deviations (RMSDs) between tested three-dimensional (3D) structures of different IFN $\alpha$  subtypes (here IFN $\alpha$ 1/13 and IFN $\alpha$ 2) were around 1 Å. The smallness of deviations between 3D structures (low RMSDs) was not surprising, given the high sequence homology. To see whether the sequence deviations were associated with 3D structural positions, we mapped the sequence entropies computed for the multiple sequence alignment onto the IFN $\alpha$ 2 structure [Protein Data Bank (PDB) entry 1itf, selected model 1 (19)] (Fig. 1A; Table S1). The highest entropies (orange and red) were associated with positions that were solvent exposed. The lowest entropies (deep-blue) were at positions that were dispersed throughout the structure, with a few remarkable clusters, namely, the two C-terminal helices. Interestingly, not only buried positions had low entropies but also exposed positions, probably a conserved anchor position involved in receptor binding. Conversely, not all higher entropy positions were exposed, but some were buried, e.g., T14 or F151, possibly tuning the overall IFN $\alpha$  structure.

We also mapped the IFN $\alpha$ 1/13 structure with entropies onto the IFN $\alpha$ 2 structure in the ternary complex with a partial IFNAR1 and IFNAR2 complex (RMSD between IFN $\alpha$ 1/13 and IFN $\alpha$ 2: 1.1 Å) to address if especially conserved parts of the IFN $\alpha$  were in contact with the two receptor subunits (Fig. 1B). We did not observe a simple relation between parts of IFN $\alpha$  in contact with the receptors and sequence entropy: contacts can be formed by conserved parts (blue) or by variable parts (yellow, orange, or red). Two remarkable helices were identified. First, the helical region C138-S150, close to the C-terminus (Fig. 1B), is completely conserved in all human IFN $\alpha$  subtypes, and it bridges IFNAR2 with the core of the IFN $\alpha$  molecule. This could be a conserved "anchor." Second, there was a helix, about T52-L66, with a surprising conservation pattern, namely, conserved residues (blue) at the outside but more variable (cyan) at the side facing the core of IFN $\alpha$ . This is a putative "tunable anchor" (TA), i.e., while the binding site with IFNAR1 is conserved, its position and fine structure can be tuned by mutations in the core. Mutations in the putative tunable anchor region of IFNs might positively affect the binding affinity to the IFNAR1/2 receptor and thereby improve their biological activity.

### Targeted mutations in IFN $\alpha$ 2 to augment antiviral activity

From the multiple sequence alignment and the analysis of the 3D structure of IFN $\alpha$  within the ternary complex, we identified conserved and variable positions in the receptor binding domains of IFN $\alpha$  as well as a putative tunable anchor which might change the fine structure of IFN $\alpha$  by single or combined amino acid changes (highlighted in Fig. 1C). This might have functional consequences for the IFN $\alpha$  subtypes, especially for their antiviral potential. Since we observed amino acid differences in these regions between IFN $\alpha$  subtypes and previously described differences in their antiviral activities (9, 11, 20), we addressed the question if amino acid exchanges in these regions between subtypes influence antiviral properties. Thus, we produced a variety of different, not naturally occurring IFN $\alpha$ 2-mutants, which were all based on the IFN $\alpha$ 2b sequence, with specific single or multiple mutations in either the receptor binding site to IFNAR1 (shown in purple), to IFNAR2 (shown in teal), the putative tunable anchor (shown in pink), or



**FIG 1** Structural analysis of IFN $\alpha$  subtypes. (A) Entropies encoded as rainbow colors from 0 (blue, complete conservation) to 1.65 (red, highly variable) were mapped on experimental structure of IFN $\alpha$ 2 (19). (B) Close-up of ternary complex of IFNAR1 (left, light-gray), IFN $\alpha$ 2 (middle, after optimal superposition with IFN $\alpha$ 2), and IFNAR2 (right, dark-gray). Colors on IFN $\alpha$ 2 mark entropy as in (A) based on PDB entry 3se3 (13). Right of the center lies the conserved anchor helix C138-S150 (blue) that bridges IFN $\alpha$  and IFNAR2 (dark-gray). The helix left of the center is the putative tunable anchor with the conserved (blue) outside facing IFNAR1 (light-gray) and the variable (green) side facing the core of IFN $\alpha$ . (C) Structure of IFN $\alpha$ 2 with key amino acids highlighted in purple (IFNAR1), teal (IFNAR2), pink (putative tunable anchor), or blue (outside).

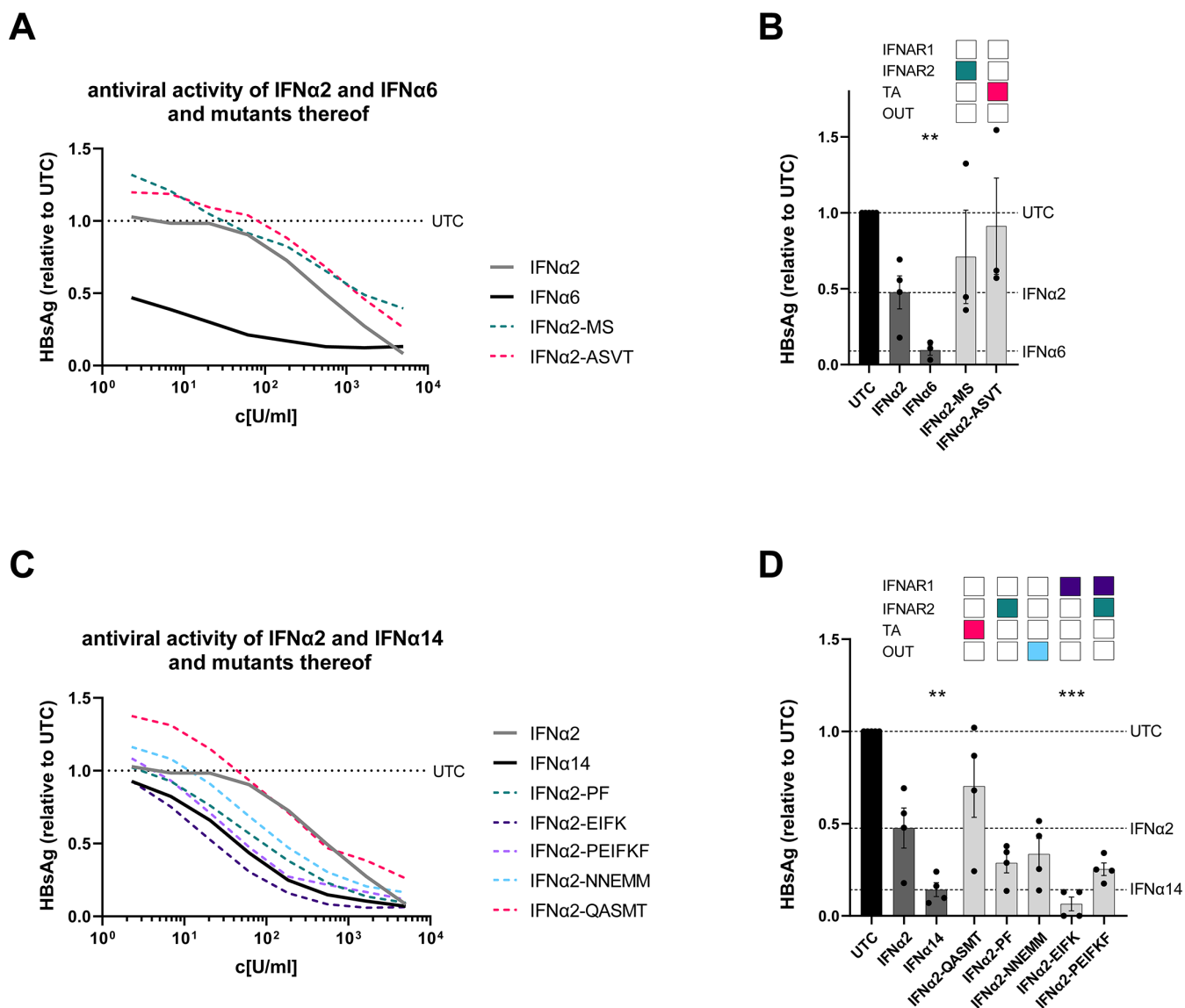
outside of these defined regions “outside” (shown in blue) (Table 1; Fig. S1). Since IFN $\alpha$ 6 and IFN $\alpha$ 14 were the most potent antiviral subtypes in our previous studies (6, 9, 11, 20), we replaced the IFN $\alpha$ 2b sequence in the regions mentioned above using site-directed mutagenesis with that from these two potent subtypes, with the goal to augment IFN $\alpha$ 2 activity.

### Modified IFNAR binding sites increased antiviral activity of IFN $\alpha$ 2 against HBV

We could previously show that IFN $\alpha$ 6 and IFN $\alpha$ 14 had superior antiviral activity against HBV compared with IFN $\alpha$ 2a (9). IFN $\alpha$ 14 concurrently activates the type I and type II IFN signaling pathways resulting in the expression of an enlarged pattern of GAS- and ISRE-driven ISGs (9). To define which specific motifs of the protein influence its antiviral activity against HBV, we infected fully differentiated HepaRG cells with HBV and treated the cells with different parental IFNs (IFN $\alpha$ 2b, IFN $\alpha$ 6, or IFN $\alpha$ 14) or the described mutants. In line with our previous results, we observed a strong reduction in HBsAg levels after treatment with IFN $\alpha$ 6, whereas IFN $\alpha$ 2b had only a minor effect on HBV replication (Fig. 2A and B). Amino acids that are important for binding to IFNAR1 are identical between IFN $\alpha$ 2b and IFN $\alpha$ 6; thus, only IFN $\alpha$ 2-mutants carrying the amino acids of IFN $\alpha$ 6 at the IFNAR2 binding site or the putative tunable anchor were analyzed. IFN $\alpha$ 2-MS

TABLE 1 List of IFNa2 mutants

Name	aa from IFNa	IFNAR1		IFNAR2		Tunable anchor					Mutations			
						T52A	P54S	M60V	I63T				Outside	
IFNa2-ASVT	6													
IFNa2-E	14													G37E
IFNa2-EIFK	14	D82E	T86I	Y89F	R120K									
IFNa2-F	14			Y89F										
IFNa2-I	14		T86I											
IFNa2-K	14				R120K									
IFNa2-60M	14							I60M					L92M	
IFNa2-92M	14													
IFNa2-131M	14													K131M
IFNa2-MS	6					L15M								
IFNa2-2N	14												D2N	
IFNa2-10N	14												D2N	G10N
IFNa2-NN	14												D2N	G10N
IFNa2-NNE	14												D2N	G10N
IFNa2-NNEMI	14		T86I										D2N	G10N
IFNa2-NNEMIF	14		T86I	Y89F									D2N	G10N
IFNa2-NNEMIFM	14		T86I	Y89F				I60M					D2N	G10N
IFNa2-NNEMIFMM	14		T86I	Y89F				I60M					D2N	G10N
IFNa2-NNEMMM	14												D2N	G10N
IFNa2-NNEMMMM	14												D2N	G10N
IFNa2-PEIFKF	14	D82E	T86I	Y89F	R120K								D2N	G10N
IFNa2-PF	14												D2N	G10N
IFNa2-PFK	14				R120K								D2N	G10N
IFNa2-QASMT	14								E51Q	T52A	P54S		D2N	G10N
														I63T



**FIG 2** The antiviral activity of IFN $\alpha$ 2-mutants against HBV. Differentiated HepaRG cells were infected with HBV at a multiplicity of infection (MOI) of 500 genome equivalents (geq) and treated with different concentrations of IFN $\alpha$ 2, IFN $\alpha$ 6, IFN $\alpha$ 14, or IFN $\alpha$ 2-mutants. (A, C) IFN $\alpha$ 2, IFN $\alpha$ 6, IFN $\alpha$ 14, and IFN $\alpha$ 2-mutants were serially diluted to measure dose-dependent anti-HBV effects after 8 days by quantifying HBsAg. (B, D) dHepaRG were pre-treated with 555 U/mL of the designated IFNs and IFN $\alpha$ 2-mutants to perform a screening for their anti-HBV activity by quantifying the amount of HBsAg after 4 days. (A, C)  $n = 3$ ; (B, D)  $n = 4$ ; mean  $\pm$  SEM is plotted. Kruskal-Wallis test was performed against untreated control (UTC). Statistical significance is depicted as \*\*\*\* $P < 0.0001$ , \*\*\* $P < 0.001$ , and \*\* $P < 0.01$ . TA, putative tunable anchor; OUT, outside.

(with IFNAR2 binding sites from IFN $\alpha$ 6) and IFN $\alpha$ 2-ASVT (mutated in the putative TA region) had no improved anti-HBV activity compared with the parental IFN $\alpha$ 2 indicating that modulating the IFNAR2 binding site or the putative tunable anchor alone was not sufficient to enhance the antiviral properties of IFN $\alpha$ 2 to the potency of IFN $\alpha$ 6.

Next, we tested IFN $\alpha$ 2-mutants harboring distinct amino acids from IFN $\alpha$ 14 for the treatment of HBV infection. Again, differentiated HepaRG cells were infected with HBV and stimulated with different concentrations of the IFN $\alpha$ 2-mutants, which were mutated in their binding region to IFNAR1 (IFN $\alpha$ 2-EIFK) or to IFNAR2 (IFN $\alpha$ 2-PF) or both (IFN $\alpha$ 2-PEIFKF), the putative tunable anchor (IFN $\alpha$ 2-QASMT), or outside of these regions (IFN $\alpha$ 2-NNEMM). Stimulation with IFN $\alpha$ 14 significantly reduced HBsAg levels [ $IC_{50}$ (U/mL): 34.1] in contrast to the low activity of IFN $\alpha$ 2 [ $IC_{50}$ (U/mL): 514.1] (Fig. 2C and D). Similar to

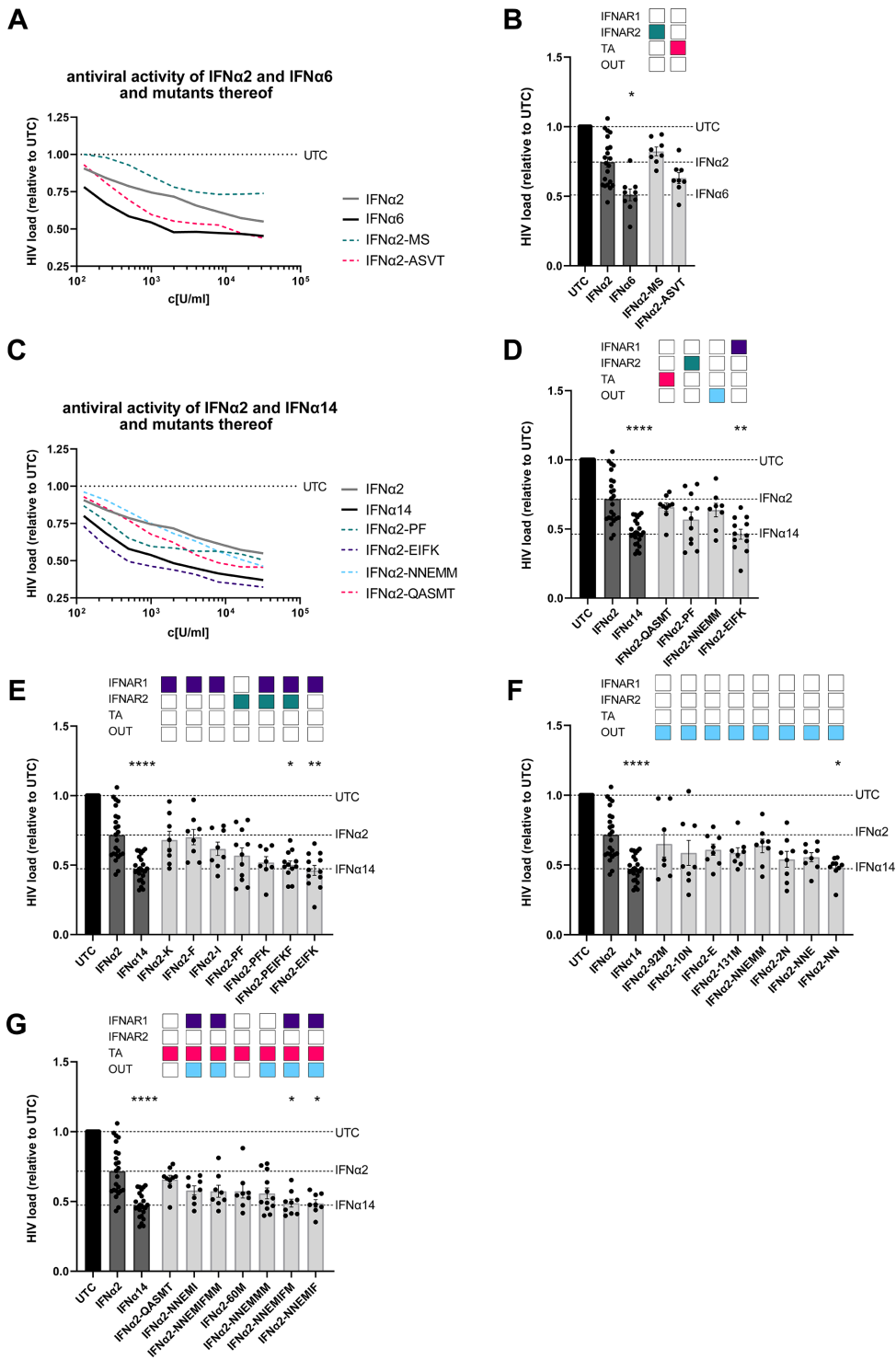
previous results, we measured the highest antiviral activity with IFN $\alpha$ 2-EIFK [IC<sub>50</sub>(U/mL): 8.2] in which four amino acids were changed that are required for optimal binding to IFNAR1 (9). Interestingly, site-directed mutagenesis of the region outside of the receptor binding sites and the putative tunable anchor region also improved the anti-HBV activity of IFN $\alpha$ 2 [IFN $\alpha$ 2-NNEMM; IC<sub>50</sub>(U/mL): 59.8], whereas modification in the putative tunable anchor region alone had no effect on the antiviral activity of IFN $\alpha$ 2 [IFN $\alpha$ 2-QASMT; IC<sub>50</sub>(U/mL): 96.19].

### Combined mutations in IFNAR1 binding sites, the putative tunable anchor region, and outside these regions influenced the anti-HIV activity of IFN $\alpha$ 2

We previously reported a significantly higher anti-HIV potency of IFN $\alpha$ 14 and IFN $\alpha$ 6 in comparison to IFN $\alpha$ 2 (11, 20). Thus, we determined the impact of critical IFN residues on HIV replication in TZM-bl cells.

Titration experiments with parental IFN $\alpha$ 2 and IFN $\alpha$ 6 showed a stronger antiviral effect of IFN $\alpha$ 6 [IC<sub>50</sub>(U/mL): 64.99] than IFN $\alpha$ 2 [IC<sub>50</sub>(U/mL): 2001] (Fig. 3A and B). Next, we used the IFN $\alpha$ 2-mutants IFN $\alpha$ 2-MS (mutated in the IFNAR2 binding sites) and IFN $\alpha$ 2-ASVT (mutated in the putative TA region) in the same assay. Only targeted modifications of the putative tunable anchor region of IFN $\alpha$ 2 (IFN $\alpha$ 2-ASVT) slightly improved the antiviral activity of IFN $\alpha$ 2 against HIV [IC<sub>50</sub>(U/mL): 363.4], but this was not statistically significant. Insertion of the IFN $\alpha$ 6 residues which are important for IFNAR2 binding had no effect on the inhibition of HIV replication compared with parental IFN $\alpha$ 2.

Next, we evaluated potential critical residues in IFN $\alpha$ 14, to improve the anti-HIV activity of IFN $\alpha$ 2. As depicted in Fig. 3C and D, stimulation with the IFN $\alpha$ 2-mutants, which are mutated in their binding region to IFNAR1 (IFN $\alpha$ 2-EIFK), to IFNAR2 (IFN $\alpha$ 2-PF), the putative tunable anchor (IFN $\alpha$ 2-QASMT), or outside of these regions (IFN $\alpha$ 2-NNEMM) showed differential antiviral activities. Targeted mutations of the whole IFNAR1 binding site (D82E, T86I, Y89F, and R120K) of IFN $\alpha$ 2 significantly improved the antiviral activity against HIV, whereas mutations outside the three described regions or at the IFNAR2 binding site alone had only minor, non-significant effects on the suppression of HIV replication (Fig. 3C and D). We further analyzed single or multiple mutations in the IFNAR1/2 binding region (Fig. 3E), outside of the described protein motifs (Fig. 3F), and combinations of mutations targeting IFNAR1, the putative tunable anchor, and the outside regions together (Fig. 3G). Single mutations at the IFNAR1 binding sites (IFN $\alpha$ 2-K, IFN $\alpha$ 2-F, and IFN $\alpha$ 2-I) did not enhance the anti-HIV activity of IFN $\alpha$ 2 (Fig. 3E). Only the mutation of all IFNAR1 binding sites (D82E, T86I, Y89F, and R120K) and the combination with the two IFNAR2 binding sites (L26P; L153F) resulted in a significant reduction in HIV replication (Fig. 3E), which was also confirmed by lower IC<sub>50</sub> values compared with the parental IFN $\alpha$ 2 [IC<sub>50</sub>(U/mL): 88.73 (IFN $\alpha$ 2-EIFK); 41.56 (IFN $\alpha$ 2-PEIFKF); 761.5 (IFN $\alpha$ 2); Fig. S2]. Of note, residues 2 (D) and 10 (G) might also be important for the regulation of the anti-HIV activity of IFN $\alpha$ 2, as the combined amino acid changes D2N and G10N outside of the defined regions of interest significantly reduced HIV loads, whereas stimulation with parental IFN $\alpha$ 2 had no significant effect on HIV loads measured by Renilla luciferase activity (Fig. 3F; Fig. S2). We also analyzed combinations of mutated residues critical for IFNAR1 binding, the putative tunable anchor, and outside regions. Changing at least six amino acids in IFN $\alpha$ 2 to amino acids from IFN $\alpha$ 14 (D2N, G10N, G37E, I60M, T86I, and Y89F) completely converted the antiviral activity of IFN $\alpha$ 2 to the much stronger IFN $\alpha$ 14 activity [Fig. 3G; Fig. S2; IFN $\alpha$ 2-NNEMIF(M)]. Our data suggest that for the antiviral activity of IFN $\alpha$  against HIV, the residues critical for binding to IFNAR1 are the most important. In addition, also the two residues close to the N-terminus of IFN $\alpha$ 2 (Asp 2; Gly 10), which are outside the three defined regions of interest, strongly influence the anti-HIV activity of IFN $\alpha$ .



**FIG 3** The antiviral activity of IFNα2-mutants against HIV. TZM-bl cells were infected with a R5-HIV-1<sub>NL4-3-IRES-Ren</sub> reporter virus at a MOI of 0.02 and treated with IFNα2, IFNα6, IFNα14, or IFNα2-mutants. (A, C) IFNα2, IFNα6, IFNα14, and IFNα2-mutants were serially diluted starting at a concentration of 32,000 U/mL to measure dose-dependent anti-HIV effects at 3 days post infection. (B, D–G) TZM-bl cells were treated with 2,000 U/mL of the designated IFNs and IFNα2-mutants to screen for their anti-HIV activity by quantifying luciferase activities. (A, C)  $n = 6$ ; (B, D–G)  $n = 8–20$ ; mean  $\pm$  SEM is plotted. Kruskal-Wallis test was performed against untreated control (UTC). Statistical significance is depicted as \* $P < 0.05$ , \*\* $P < 0.001$ , and \*\*\*\* $P < 0.0001$ . TA, putative tunable anchor; OUT, outside.



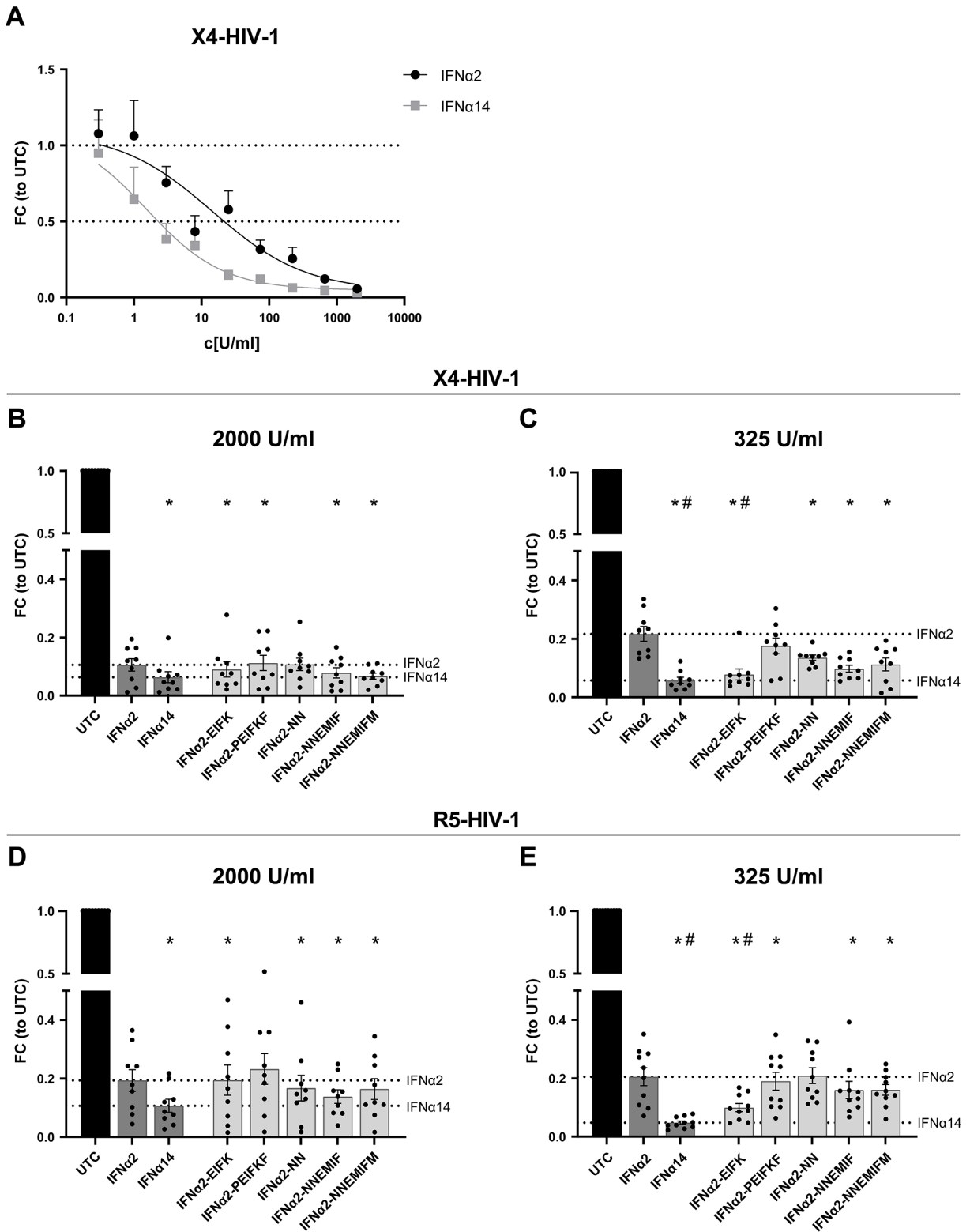
## Combined mutations in the IFNAR1 binding sites, putative tunable anchor region, and outside of these defined regions are required for potent activation of downstream signaling cascades in PBMCs

To elucidate their antiviral effects and molecular signaling pathways in primary cells, IFN $\alpha$ 2 mutants, which significantly reduced HIV loads in infected TZM-bl cells (IFN $\alpha$ 2-PEIFKF, IFN $\alpha$ 2-EIFK, IFN $\alpha$ 2-NN, IFN $\alpha$ 2-NNEMIF, and IFN $\alpha$ 2-NNEMIFM), were further analyzed in primary HIV target cells. In order to further scrutinize the biological effects of type I IFNs during HIV infection, we utilized peripheral blood mononuclear cells (PBMCs) from healthy individuals and infected these cells *in vitro* with a Renilla luciferase expressing X4- or R5-tropic HIV<sub>NL4-3</sub> which resulted in comparable infection levels (data not shown). Firstly, titrations with parental IFN $\alpha$ 2 and IFN $\alpha$ 14 were performed to determine the appropriate concentrations. As depicted in Figure 4A, a dose-dependent inhibition of HIV was evident, with IFN $\alpha$ 14 exhibiting stronger inhibition compared with IFN $\alpha$ 2. Next, HIV-infected cell cultures were directly stimulated with two different concentrations (325 U/mL and 2,000 U/mL) of parental IFN $\alpha$ 2, IFN $\alpha$ 14, or IFN $\alpha$ 2-mutants and the IFN-mediated effects on viral loads were analyzed 3 days post infection (dpi) (Fig. 4B through E). According to the infections of TZM-bl cells (Fig. 3), IFN $\alpha$ 2-EIFK, in which IFNAR1 binding sites were introduced from IFN $\alpha$ 14, as well as the combination of mutated residues at the IFNAR1 binding sites, putative tunable anchor region, and mutations outside of these defined motifs significantly reduced HIV infection in PBMCs compared with IFN $\alpha$ 2 (Fig. 4C and E). Both the parental IFNs and the IFN $\alpha$ 2-mutants exhibited similar antiviral efficacy in X4- and R5-tropic virus infections (Fig. 4B through E).

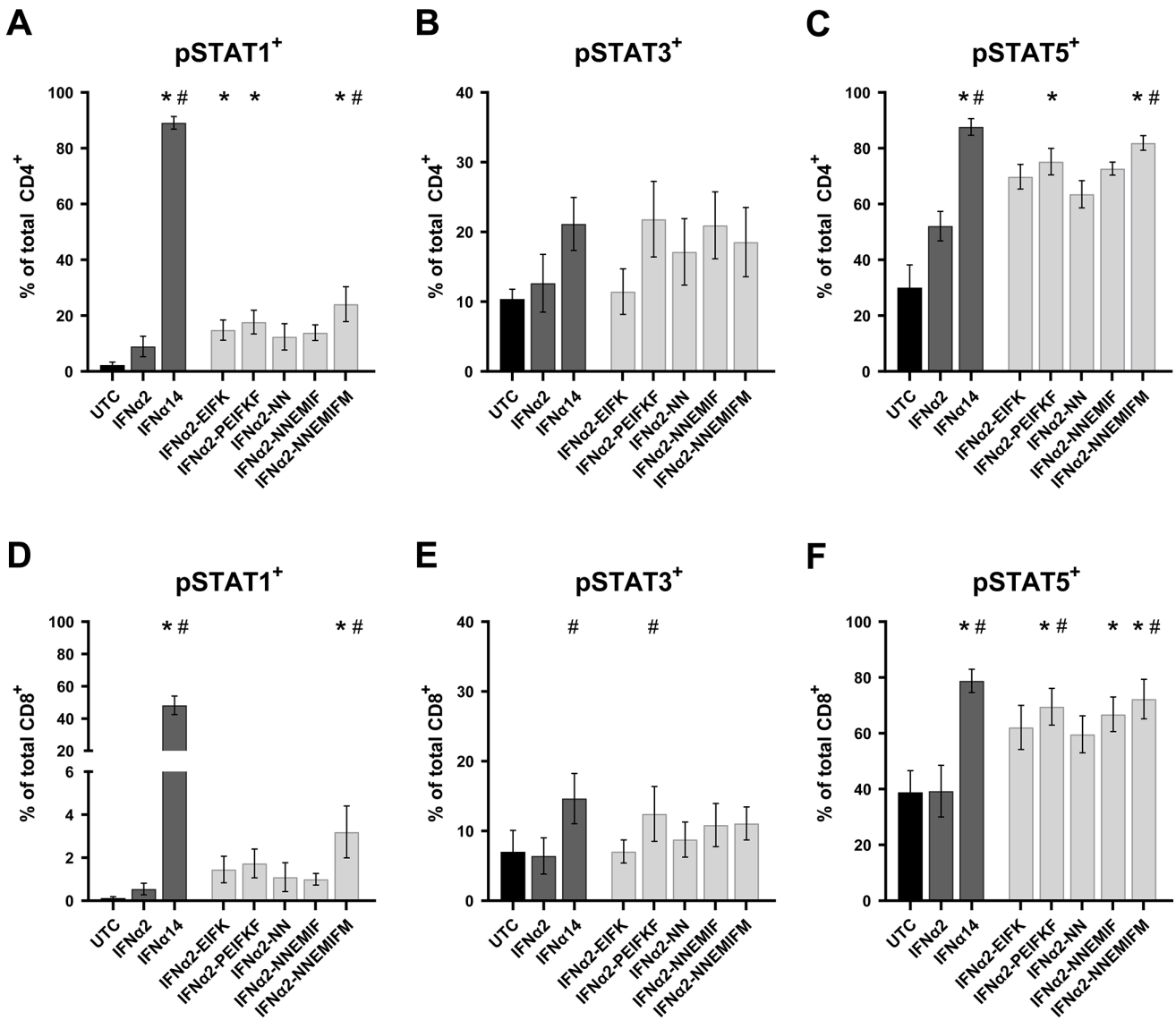
As binding of type I IFNs to their receptors leads to the induction of multiple signaling pathways (17, 23), we performed phosphoflow analysis to elucidate the underlying molecular mechanism of the different effector responses after IFN $\alpha$  treatment of HIV-infected PBMCs. To this end, we stimulated PBMCs from healthy individuals with the different parental IFN $\alpha$  subtypes and IFN $\alpha$ 2-mutants for 15 min and analyzed the phosphorylation of the immune cell signaling molecules STAT1, STAT3, and STAT5 in CD4<sup>+</sup> and CD8<sup>+</sup> T cells. Treatment with IFN $\alpha$ 14 strongly increased the frequencies of phosphorylated STAT1<sup>+</sup> T cells, which increased only slightly after stimulation with IFN $\alpha$ 2. All IFN $\alpha$ 2-mutants increased the frequencies of pSTAT1<sup>+</sup> CD4<sup>+</sup> and CD8<sup>+</sup> T cells compared with IFN $\alpha$ 2; however, significance was only reached for the IFN $\alpha$ 2-NNEMIFM molecule (Fig. 5A and D). For STAT3 phosphorylation in T cells, we solely observed a significant increase in percentages for IFN $\alpha$ 14- and IFN $\alpha$ 2-PEIFKF-treated CD8<sup>+</sup> T cells compared with untreated controls (Fig. 5B and E), indicating that certain IFN $\alpha$  residues influence the activation of specific downstream signaling pathways. We also determined the frequencies of pSTAT5<sup>+</sup> T cells after stimulation with different IFNs. Similar to the results observed for pSTAT1 (Fig. 5A and D), treatment with IFN $\alpha$ 14 resulted in significantly increased percentages of pSTAT5<sup>+</sup> T cells, which was only slightly influenced by the parental IFN $\alpha$ 2 (Fig. 5C and F). Again, stimulation with IFN $\alpha$ 2-PEIFKF and IFN $\alpha$ 2-NNEMIFM significantly enhanced the frequencies of pSTAT5-expressing T cells comparable with the results with IFN $\alpha$ 14. These data nicely demonstrate that the combined modulation of the IFNAR1/2 binding sites (IFN $\alpha$ 2-PEIFKF) or the IFNAR1 binding site and the putative tunable anchor and motifs outside these regions (IFN $\alpha$ 2-NNEMIFM) resulted in an augmented activation of important downstream signaling cascades, even those that are distinct from the canonical type I IFN signaling pathway STAT1/STAT2. This further highlights the importance of certain amino acid motifs for the different biological activities of the IFN $\alpha$  subtypes. Such critical residues may be responsible for the qualitative differences of the numerous IFN $\alpha$  subtypes.

## DISCUSSION

Type I IFNs play a pivotal role in the host defense against infectious agents. In humans, the type I IFN family comprises IFN $\beta$ , IFN $\epsilon$ , IFN $\kappa$ , IFN $\omega$ , and 12 IFN $\alpha$  subtypes. The overall homology of the IFN $\alpha$  proteins ranges from 75% to 95% amino acid sequence identity. Despite binding to the same cellular receptor, consisting of the two subunits IFNAR1



**FIG 4** The anti-HIV activity of IFN $\alpha$ 2-mutants in primary cells. (A) PBMCs were infected with X4-HIV-1<sub>NL4-3-IRES-Ren</sub> at a MOI of 0.25. IFN $\alpha$ 2 and IFN $\alpha$ 14 were titrated starting at a concentration of 2,000 U/mL in a threefold dilution. (B, D) PBMCs were infected with a X4- or R5-tropic HIV-1<sub>NL4-3-IRES-Ren</sub> reporter virus at a MOI of 0.25 and treated with 2,000 U/mL or (C, E) 325 U/mL of the designated IFNs and IFN $\alpha$ 2-mutants. To evaluate the anti-HIV capacity, the luciferase activity was measured 3 days post infection. Mean values  $\pm$  SEM are shown for  $n = 9-10$ . Statistical analyses between the different groups were done by using non-parametric Friedman test and Dunn's multiple comparison test. Statistical significance is depicted as \* $P < 0.05$  against untreated control and # $P < 0.05$  against parental IFN $\alpha$ 2.



**FIG 5** Potency of IFNa2-mutants to phosphorylate STAT molecules. PBMCs were stimulated with 2,000 U/mL of the designated IFNs and IFNa2-mutants or without IFN (UTC) for 15 min in the presence of the surface markers anti-CD3, anti-CD4, anti-CD8, and the viability marker FVD. Cells were then fixed and permeabilized for phosphostaining with anti-STAT1 pTyr701 (A, D), anti-STAT3 pTyr705 (B, E), and anti-STAT5 pTyr694 (C, F). Mean values ± SEM are shown for *n* = 6. Statistical analyses between the different groups were done by using non-parametric Friedman test and Dunn’s multiple comparison test. Statistical significance is depicted as \**P* < 0.05 against untreated control (UTC) and #*P* < 0.05 against parental IFNa2.

and IFNAR2, their antiviral, immunomodulatory, and antiproliferative potencies differ considerably (6, 9–11). It is largely elusive why different IFNa proteins exhibit distinct effector functions. Different receptor affinities and/or interaction interfaces within the receptor have been discussed, which may account for the observed variability in the biological activity (24, 25). Furthermore, dosage, cell type, timing, and the present cytokine milieu might further affect the IFN effector response (15). In particular, the antiviral activity of clinically approved IFNa2 vs. other IFNs like IFNa14 or IFNa6 is rather low, which might explain the overall moderate outcome of IFNa2-therapy in chronic viral infections and the occurrence of severe side effects. Thus, new and safe IFN therapeutics with broad or target-specific antiviral activity have to be discovered.

Here, we focused on the structural differences between the highly antiviral IFNa subtypes IFNa6 and IFNa14 and the clinically approved IFNa2. IFNa6 expresses 21 different amino acids, compared with IFNa2b (Fig. S1), and only two of these different

residues are located in regions that are critical for receptor binding (IFNAR2). Although IFNAR1 binding regions (13) are identical between IFN $\alpha$ 2b and IFN $\alpha$ 6, their affinities to IFNAR1 differ strongly (3.8  $\mu$ M for IFN $\alpha$ 2b and 0.83  $\mu$ M for IFN $\alpha$ 6) (24), suggesting that other residues might also influence receptor binding. In contrast, the sequence of IFN $\alpha$ 14 harbors 28 variant amino acids compared with that of IFN $\alpha$ 2b with four differences in the IFNAR1 binding region (positions 82, 86, 89, and 120; IFN $\alpha$ 2 numbering) and two differences in the IFNAR2 binding region (13, 26–28) (positions 26 and 153; IFN $\alpha$ 2 numbering). These amino acid variations result in stronger binding affinity of IFN $\alpha$ 14 to IFNAR1 (0.68  $\mu$ M) and IFNAR2 (0.7 nM) compared with IFN $\alpha$ 2b (3.8  $\mu$ M and 1.3 nM, respectively) (24). Our structural analysis further yielded a region in helix B (T52-L66) within the IFN $\alpha$  protein with a surprising conservation pattern, mainly conserved residues at the outside facing IFNAR1 but more variable at the inside facing the core of IFN $\alpha$ . This could serve as a putative “tunable anchor,” i.e., while the binding site with IFNAR1 is conserved, its position and fine structure might be modified by targeted mutations in the core-facing region. In particular, antiviral activity against HIV, as well as phosphorylation of STAT1 and STAT5 (Fig. 4 and 5), significantly improved when a mutation (I60M) within the newly identified putative TA region in combination with mutations in the IFNAR1 binding region and mutations outside the regions of interest were inserted. Another IFN $\alpha$ 2-mutant (IFN $\alpha$ 2-YNS) was previously identified by phage display with very tight binding affinity against IFNAR1 (29). The YNS mutations (H57Y, E58N, and Q61S) were inserted at the conserved IFNAR1 binding site, which is in direct proximity of the more variable residues of the putative tunable anchor. A 60-fold increase in IFNAR1 binding and thus a 150-fold higher antiproliferative activity in human WISH cells as well as a strong anti-tumor effect *in vivo* were observed. The antiviral activity against vesicular stomatitis virus was only slightly increased, i.e., in particular, the antiproliferative activity of IFNs correlates with IFNAR1 binding affinity. Similar results were reported with the IFN $\alpha$ 2-mutant HEQ, where the positions mentioned above were mutated to alanine, resulting in an increased IFNAR1 binding affinity comparable with IFN $\beta$  and a corresponding enhanced antiproliferative activity, but only slightly increased antiviral potency (30). These data suggest that, especially the IFNAR1 binding region within the helix T52-L66 strongly affects the IFN response. Thus, a detailed analysis of the putative TA residues and their impact on antiproliferative and immunomodulatory effects is indispensable. In particular, the influence of the putative TA region on IFNAR1 and IFNAR2 binding affinities is mandatory to fully understand the biological role of this region within the IFN core. Of note, also other regions are critical for IFNAR1 binding, which have to be considered as regulators for the differences in biological activity between the different IFN $\alpha$  subtypes. Position 120, which belongs to the IFNAR1 binding region, was reported to be critical for the antiviral activity. This position is conserved in most subtypes (Arg 120), but IFN $\alpha$ 1/13, IFN $\alpha$ 14, and IFN $\alpha$ 21 express Lys at that position, and site-directed mutagenesis of R120K in IFN $\alpha$ 2 or IFN $\alpha$ 4 significantly increased the antiviral activity against Semliki Forest virus (31–33). In addition, amino acid region 81–95, which harbors multiple critical residues for IFNAR1 binding, was shown to be important for antiproliferative activity (34). Although IFN $\alpha$ 6 and IFN $\alpha$ 14 exhibit a comparable strong antiviral activity against HIV-1 and HBV, their amino acid sequence, especially at the important IFNAR1 binding site, differs strongly. Specifically, IFN $\alpha$ 6 possesses identical amino acids at the IFNAR1 binding site as IFN $\alpha$ 2, yet it exhibits significantly stronger binding affinity to IFNAR1 (24) and displays much higher antiviral activity than IFN $\alpha$ 2 (as shown in Fig. 2A and B and Fig. 3A and B). One possible explanation could be the minimal unique structural characteristics of each IFN $\alpha$  subtype, which may lead to distinct interactions with IFNAR1. These interactions could be influenced by the three-dimensional arrangement of critical amino acids within the binding site or the putative TA, causing variations in the strength of binding and subsequent downstream signaling pathways.

Further, we could show that different signaling cascades, including the classical STAT1, as well as non-classical STAT3 and STAT5, were strongly phosphorylated by

IFN $\alpha$ 14 in T cells. The combined modulation of the IFNAR1/2 binding sites (IFN $\alpha$ 2-PEIFKF) or the IFNAR1 binding site and the putative TA and motifs outside these regions (IFN $\alpha$ 2-NNEMIFM) resulted in an increased activation of important downstream signaling cascades in T cells (Fig. 5). The p-STAT response does not show significant differences among the various IFN mutants, despite variations in their antiviral responses. One possible explanation could be that the differences in antiviral activity between the IFN mutants are not solely mediated by the classical JAK-STAT signaling pathway. Other signaling pathways or alternative mechanisms may be involved in modulating the antiviral response, which are not directly reflected in the p-STAT1, 3, or 5 levels. Additionally, the antiviral activity of IFNs can also be influenced by factors beyond the JAK-STAT pathway, such as the distinct pattern of induced ISGs or the activation of other downstream effectors. These alternative pathways may contribute to the observed differences in antiviral responses among the IFN mutants. The IFN $\alpha$ 2-YNS mutant was previously analyzed for its potency to induce phosphorylation of STAT1, STAT3, and STAT5 molecules in PBMCs, as well as for its antiviral and antiproliferative activity (13). Again, the increase in antiviral activity of IFN $\alpha$ 2-YNS compared with IFN $\alpha$ 2 was low in contrast to the anti-proliferative effect, which was up to 1,000-fold increased. Although the potency to phosphorylate the different STAT molecules was comparable between the different IFNs (IFN $\alpha$ 2, IFN $\alpha$ 2-YNS, IFN $\alpha$ 7, and IFN $\omega$ ), the IFN $\alpha$ 2-YNS mutant had a lower EC<sub>50</sub> for STAT1 phosphorylation, implying that stronger binding to IFNAR1 leads to preferential activation of the classical JAK-STAT pathway. However, the influence of the YNS mutations within IFN $\alpha$ 2 on the antiviral activity was rather low and comparable with the effects on STAT phosphorylation. This further strengthens the hypothesis that modulation of the IFNAR1 binding region mainly impacts the so-called tunable activity of IFNs that are defined as antiproliferative and immunomodulatory activities of IFNs (35). The tunable activity may vary between different cell types and is often induced stronger by high-affinity binders and most likely requires higher IFN concentrations, longer times of IFN stimulation, and higher receptor surface concentrations (35, 36). In contrast, the antiviral activity of IFN $\alpha$  is defined as robust activity stimulated by low amounts of IFN $\alpha$ , low receptor surface expression, and a common program in all cells mainly mediated by the classical JAK-STAT-driven ISRE gene transcription. For both viral infections (HIV, HBV), we observed the highest improvements in antiviral activity when all four IFNAR1 binding sites (positions 82, 86, 89, and 120), which differ between IFN $\alpha$ 2 and IFN $\alpha$ 14, were mutated. The resulting mutant IFN $\alpha$ 2-EIFK exhibited an antiviral potency comparable with IFN $\alpha$ 14 (Fig. 2 and 4), which was not further improved by modulating the IFNAR2 binding sites. This supports data describing another IFN $\alpha$ 2-YNS mutant with an increased binding affinity to IFNAR2 by exchange of its C-terminal tail (IFN $\alpha$ 2-YNS- $\alpha$ 8tail) (37). This exchange further boosted the antiproliferative activity, whereas the robust antiviral activity was not affected at all. For the antiviral activity of IFN $\alpha$  subtypes, many residues (positions 30, 33, 77, 78, 123, 129, 130, 133, 134, 135, and 140; IFN $\alpha$ 2 numbering) were reported to be critical (38); however, these residues are all conserved in all IFN $\alpha$  subtypes. Up to now, the exact mechanism that regulates binding to IFNAR2 is not completely understood. Four conserved residues appear to be essential for the interaction with IFNAR2 (positions 30, 33, 148, and 149; IFN $\alpha$ 2 numbering), but it seems that small variations in close proximity to these positions modulate the IFNAR2 binding affinity (39).

Here, combining IFN $\alpha$  sequence variability and 3D structural data, we suggest how IFN $\alpha$  variants could achieve differential functions. While the overall binding can be fixed by a set of conserved anchors, other positions are more variable, allowing for a tuning of receptor affinities, or of on-/off-rates for complex formation of IFN $\alpha$  and receptor molecules. These data give rise to the development of new therapeutic IFN molecules with high antiviral activity against a variety of different viruses.

## MATERIALS AND METHODS

### Sequence and structural analysis of IFNs

Sequences of human IFN $\alpha$ 1 (NP\_076918.1), IFN $\alpha$ 2 (NP\_000596.2), IFN $\alpha$ 4 (NP\_066546.1), IFN $\alpha$ 5 (NP\_002160.1), IFN $\alpha$ 6 (NP\_066282.1), IFN $\alpha$ 7 (NP\_066401.2), IFN $\alpha$ 8 (NP\_002161.2), IFN $\alpha$ 10 (NP\_002162.1), IFN $\alpha$ 14 (NP\_002163.2), IFN $\alpha$ 16 (NP\_002164.1), IFN $\alpha$ 17 (NP\_067091.1), and IFN $\alpha$ 21 (NP\_002166.2) were aligned with MAFFT (22) using the FFT-NS-2 strategy.

To map sequence entropies on IFN $\alpha$ 2 structure [PDB entry 1itf (19)], the relevant parts of the above IFN $\alpha$  sequence alignment (including the signal peptide), namely, positions 24–66 and 68–189, were firstly extracted with 1 Emboss program extractalign, version 6.6.0.0 (40). Sequence entropies were computed for all positions of the extracted alignment with function entropy of R-package bio3d, version 2.4.0 (41), using the standard entropy  $H_j$  at alignment position

$$H_j = - \sum_{i=1}^{22} p_{ij} \cdot \log_2 p_{ij}$$

with relative frequencies  $p_{ij}$  of amino acid symbols  $i$  at position  $j$  and  $i = 1, 2, \dots, 22$  for the one-letter amino acid codes and additionally a letter for non-standard amino acids and a gap symbol. Entropies were mapped on IFN $\alpha$ 2 structure [PDB entry 1itf; NMR model 1 (19)], with R-script (42). Structure alignments and RMSD calculations were performed with pymol 1.8 (43).

### Site-directed mutagenesis and IFN production

Site-directed mutations were introduced using the primers listed in Table 2 and the QuikChange kit (Agilent) according to the manufacturer's instructions. All constructs were confirmed by sequence determination of the coding sequence.

Human IFN $\alpha$  subtype and mutant genes were optimized for expression in *Escherichia coli*. Isolated inclusion body proteins denatured with guanidine hydrochloride were refolded in arginine refolding buffer and purified by anion-exchange and size exclusion chromatography (29). Protein concentrations were determined using NanoDrop 2000c (Thermo Scientific, Wilmington, DE), and endotoxin levels were less than 0.0025 endotoxin units (EU)/mL (ToxinSensor; Genscript, Piscataway, NJ). These laboratory-produced proteins were used for all experiments.

Because the standard biological method to quantify interferons is with antiviral assays, we were concerned that the differential antiviral effects of the various interferon subtypes might produce aberrant results. Therefore, ISRE-luc reporter cells (11) were grown for 24 h before adding serial dilutions of our recombinant IFN $\alpha$  subtypes and commercially available IFN $\alpha$  subtypes (PBL Assay Science) for 4.5 h. The cells were lysed with lysis buffer (pjk), and Firefly luciferase activity was measured subsequently. Six experiments were done comparing the stated activities of commercially available IFN $\alpha$  subtypes (PBL Assay Science, Piscataway, NJ) with relative light units (RLU) obtained from our ISRE assay. All the units given in the text correspond to PBL units. PBL determines the activities of interferons using a cytopathic inhibition assay on the human lung carcinoma cell line A549 with encephalomyocarditis virus (EMCV).

### Isolation and cultivation of primary cells

HIV-negative blood samples ( $n = 6-9$ ) were donated by healthy individuals of the University Hospital Essen. Blood collection was approved by the Ethics Committee (No. 11-4715) of the University of Duisburg-Essen.

PBMCs were isolated from each blood sample by density gradient centrifugation as described elsewhere (7).

TABLE 2 Primers used<sup>a</sup>

Primer	Sequence	Mutation(s) introduced	Mutations concerning
IFNa2-QC-L26P	fw GATGCGTCGTATCTCTCCTTTCTCCTGCTTGAAGG rev CCTTCAAGCAGGAGAAAGGAGAGATACGACGCATC	L26P	IFNAR2
IFNa2-QC-L153F	fw GAAATCATGAGATCTTTTTCTTTTCAACAACTTGAAGAAAG rev CTTTCTTGAAGTTTGTGAAAAAGAAAAAGATCTCATGATTTC	L153F	IFNAR2
IFNa2-QC-DTYtoEIF	fw GATGAGACCCTCTAGAAAAATTCTACATTGAACTCTCCAGCAGCTGAATGAC rev GTCATTCAGCTGCTGGAAGAGTTCAATGTAGAATTTTCTAGGAGGGTCTCATC	D82E + T86I + Y89F	IFNAR1
IFNa2-QC-T86I + Y89F	fw CAAATTCTACATTGAACTCTCCAGCAGCTGAATGACC rev GGTCAATCAGCTGCTGGAAGAGTTCAATGTAGAATTTG	T86I + Y89F	IFNAR1
IFNa2-QC-Y89F + L92M	fw TGAACTCTCCAGCAGATGAATGACCTGGAAGCCTG rev CAGGCTTCCAGGTCATTCATCTGCTGGAAGAGTTCA	Y89F, L92M	IFNAR1 Outside
IFNa2-QC-D2N	fw GGAGGAATAACATATGTGTAATCTGCCGAGACTCAC rev GTGAGTCTGCGGCAGATTACACATATGTTATTCCTCC	D2N	Outside
IFNa2-QC-G10N	fw GCAGACTCACTCTCTGAATTCCTGCTACTCTGATG rev CATCAGAGTACGACGAGAATTCAGAGAGTGAGTCTGC	G10N	Outside
IFNa2-QC-G37E	fw GGACAGACATGACTTCGAATTTCCCAGGAGGAG rev CTCCTCTGGGGAAATTCGAAGTCATGTCTGTCC	G37E	Outside
IFNa2-QC-I60M	fw CTGTCCTCCATGAGATGATGCAGCAGATCTTCAATC rev GATTGAAGATCTGCTGCATCATCTCATGGAGGACAG	I60M	Putative TA
IFNa2-QC-T86I	fw CTCCTAGACAAATCTACATTGAACTTACCAGCAGC rev GCTGCTGGTAGAGTTCAATGTAGAATTTGTCTAGGAG	T86I	IFNAR1
IFNa2-QC-Y89F	fw CAAATTCTACTGAACTCTCCAGCAGCTGAATGACC rev GGTCAATCAGCTGCTGGAAGAGTTCAAGTGTAGAATTTG	Y89F	IFNAR1
IFNa2-QC-L92M	fw CTGAACTTACCAGCAGATGAATGACCTGGAAGCC rev GGCTTCCAGGTCATTCATCTGCTGGTAGAGTTTCCAG	L92M	Outside
IFNa2-QC-R120K	fw CTCATTCTGGCTGTGAAGAAATACTTCCAAAGAATCAC rev GTGATTCTTTGGAAGTATTTCTCACAGCCAGAATGGAG	R120K	IFNAR1
IFNa2-QC-K131M	fw GAATCACTCTCTATCTGATGGAGAAGAAATACAGCC rev GGCTGTATTTCTTCCATCAGATAGAGAGTGATTC	K131M	Outside
IFNa2-QC-L15M	fw GGGTTCTCGTCGTAATGATGCTGCTGGCTC rev GAGCCAGCAGCATCATAGTACGACGAGAACCC	L15M	IFNAR2
IFNa2-QC-E51Q + T52A + P54S	fw CCAGTTCCAAAAGGCTCAAGCCATCTCTGCTCCATGAGATG rev CATCTCATGGAGGACAGAGATGGCTTGAGCCTTTTGAAGTGG	E51Q + T52A + P54S	Putative TA
IFNa2-QC-I60M + I63T	fw GTCCTCCATGAGATGATGCAGCAGACCTTCAATCTTTCAGCAC rev GTGCTGAAGAGATTGAAGTCTGCTGCATCATCTCATGGAGGAC	I60M + I63T	Putative TA
IFNa2-QC-L153S	fw GAAATCATGAGATCTTTTTCTTTCAACAACTTGAAGAAAG rev CTTTCTTGAAGTTTGTGAAAGAAAAAGATCTCATGATTTC	L153S	IFNAR2
IFNa2-QC-T52A + P54S	fw CAGTTCCAAAAGGCTGAAGCCATCTCTGCTCCATGAGATG rev CATCTCATGGAGGACAGAGATGGCTTTCAGCCTTTTGAAGTGG	T52A + P54S	Putative TA
IFNa2-QC-M59V + I63T	fw CTGCTCCATGAGGATGATCCAGCAGACCTTCAATCTTTCAGCAC rev GTGCTGAAGAGATTGAAGTCTGCTGGATCACCTCATGGAGGACAG	M59V + I63T	Putative TA
IFNa2-QC-I63T	fw GAGATGATCCAGCAGACCTTCAATCTTTCAGCA rev TGCTGAAGAGATTGAAGTCTGCTGGATCATCTC	I63T	Putative TA

<sup>a</sup>Introduced mutations are in boldface. fw, forward; rev, reverse; TA, tunable anchor.

## Infection with HIV

X4-HIV-1<sub>NL4-3-IRES-Ren</sub> and R5-HIV-1<sub>NL4-3-IRES-Ren</sub> reporter viruses were produced by transfection of HEK293T cells with pNL4-3Ren. The TCID<sub>50</sub> were calculated by X-Gal staining of infected TZM-bl reporter cells.

PBMCs were cultivated at a density of  $1 \times 10^6$  cells/mL in RPMI 1640 supplemented with 10% FCS, 100 U/mL penicillin, 100 µg/mL streptomycin, 2 mM L-glutamine, and 10 mM HEPES. Additionally, PBMCs were activated with 1 µg/mL PHA in the presence of 10 ng/mL IL-2 (Miltenyi Biotec). PBMCs were mock treated or infected with a MOI of 0.25

via spinoculation at  $1,200 \times g$  for 2 h. Viral input was removed, and cells were washed with PBS. Cells were cultivated in fresh media containing 2,000 U/mL or 325 U/mL of the appropriate IFN $\alpha$  subtypes or IFN $\alpha$ 2-mutants at a density of  $1 \times 10^6$  cells/mL. Additionally, IFN $\alpha$ 2 and IFN $\alpha$ 14 were titrated on X4-HIV-1<sub>NL4-3-IRES-Ren</sub>-infected PBMCs starting at a concentration of 2,000 U/mL in a threefold dilution. Cells were lysed 3 dpi with lysis buffer (pjk) for the determination of viral loads.

### TZM-bl assay

TZM-bl cells were seeded at a density of 5,000 cells per well in a 96-well plate in DMEM containing 10% FCS, L-glutamine, 100 U/mL penicillin, and 100  $\mu$ g/mL streptomycin. Next day, cells were infected with a R5-HIV-1<sub>NL4-3-IRES-Ren</sub> reporter virus with a MOI of 0.02 and treated with 2,000 U/mL of the appropriate IFN $\alpha$  subtypes or IFN $\alpha$ 2-mutants for 72 h. Additionally, the indicated IFNs were titrated on TZM-bl cells starting at a concentration of 32,000 U/mL in a twofold dilution. The infection efficacy was then analyzed by a luciferase assay according to the manufacturer's standard protocol (pjk Renilla-Juice Luciferase Assay).

### Infection with HBV

Fully differentiated HepaRG cells (44) were infected with HBV genotype D at a MOI of 500 geq in inoculation media (differentiation media, 10% PEG8000), followed by 20-h incubation. Subsequently, the cells were washed twice with PBS and 300  $\mu$ L of differentiation media was added. Cells were stimulated on days 0, 1, 4, and 6 days post-infection. Supernatant was collected on day 8 post-infection.

### Hepatitis B surface antigen ELISA

The supernatants were analyzed using the Hepatitis B surface antigen Ab ELISA Kit (Abnova) according to the manufacturer's instructions. Serially diluted positive control (8 ng/mL) was used to generate a standard curve. The absorbance was measured at 450 nm with a reference wavelength of 620 nm using Spark 10M multimode microplate reader (Tecan).

A standard curve was generated using the Four Parameter Logistic (4PL) Curve Calculator (AAT Bioquest). The 4PL curve was used to calculate the amount of HBs in the supernatants.

### Phosphoflow analysis

For phosphoflow analysis, cells were stimulated with 2,000 U/mL IFN $\alpha$ 2, IFN $\alpha$ 14, IFN $\alpha$ 2-mutants, or left unstimulated for 15 min at 37°C. Surface staining was performed simultaneously to IFN $\alpha$  stimulation with the following antibodies: anti-CD3 (UCHT1, eBioscience), anti-CD4 (RPA-T4, BioLegend), anti-CD8 (RPA-T8, BioLegend), and Fixable Viability Dyes (FVD; Thermo Fisher Scientific) for exclusion of dead cells. After stimulation, cells were immediately fixated with pre-warmed Fixation Buffer (BioLegend) at 37°C. Cells were then permeabilized with pre-chilled TruePhos Perm Buffer (BioLegend) at  $-20^\circ\text{C}$  for 1 h. Subsequently, cells were washed twice with FACS Intracellular Staining Perm Wash Buffer and the following antibodies were added to the cells: anti-STAT1 pTyr701 (Miltenyi Biotec), anti-STAT3 pTyr705 (eBioscience), and anti-STAT5 pTyr694 (BioLegend). After a 30-min incubation, cells were washed twice with FACS Intracellular Staining Perm Wash Buffer and stored at 4°C until acquisition. Samples were acquired with a BD LSR II flow cytometer with a HTS module, and data were analyzed using FACSDiva and FlowJo Version 10.8.

### Statistical analysis

Experimental data were reported as means  $\pm$  SEM. Statistically significant differences between treated and untreated or IFN $\alpha$ 2-treated primary cells were analyzed using



the non-parametric Friedman test and Dunn's multiple comparisons test. Kruskal-Wallis one-way analysis of variance on ranks with Dunn's multiple comparisons procedure was used to monitor statistical differences in cell culture conditions. Dose-response analyses were performed to evaluate inhibitory concentrations (IC<sub>50</sub>). All analyses were performed using GraphPad Prism software v8 (GraphPad, San Diego, CA, USA).

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## AUTHOR AFFILIATIONS

<sup>1</sup>University Hospital Essen, University of Duisburg-Essen, Institute for Virology, Essen, Germany

<sup>2</sup>University Hospital Essen, University of Duisburg-Essen, Institute for Translational HIV Research, Essen, Germany

<sup>3</sup>Joint International Laboratory of Infection and Immunity, Huazhong University of Science and Technology, Wuhan, China

<sup>4</sup>Department of Infectious Diseases, Union Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China

<sup>5</sup>Research Group Bioinformatics, Faculty of Biology, University of Duisburg-Essen, Essen, Germany

## AUTHOR ORCIDs

Zehra Karakoese  <http://orcid.org/0009-0008-3775-2341>

Jia Liu  <http://orcid.org/0000-0002-8262-4997>

Ulf Dittmer  <http://orcid.org/0000-0001-9284-4849>

Kathrin Sutter  <http://orcid.org/0000-0001-6397-6551>

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## AUTHOR CONTRIBUTIONS

Zehra Karakoese, Data curation, Formal analysis, Investigation, Methodology, Visualization, Writing – original draft, Writing – review and editing | Vu-Thuy Khanh Le-Trilling, Methodology, Writing – review and editing | Jonas Schuhenn, Data curation, Formal analysis, Investigation, Methodology, Writing – review and editing | Sandra Francois, Methodology, Writing – review and editing | Mengji Lu, Resources, Writing – review and editing | Jia Liu, Methodology, Resources, Writing – review and editing | Mirko Trilling, Conceptualization, Resources, Writing – review and editing | Daniel Hoffmann, Data curation, Formal analysis, Investigation, Methodology, Software, Validation, Visualization, Writing – review and editing | Ulf Dittmer, Conceptualization, Funding acquisition, Project administration, Resources, Supervision, Validation, Writing – review and editing | Kathrin Sutter, Conceptualization, Funding acquisition, Methodology, Project administration, Resources, Supervision, Validation, Visualization, Writing – original draft, Writing – review and editing

## DIRECT CONTRIBUTION

This article is a direct contribution from Ulf Dittmer, a Fellow of the American Academy of Microbiology, who arranged for and secured reviews by Michaela Müller-Trutwin, Institut Pasteur, and Karin Peterson, RML, NIAID.

## ADDITIONAL FILES

The following material is available [online](#).

### Supplemental Material

**Fig. S1 (mBio02357-23-S0001.pdf).** Sequence alignment of IFN $\alpha$ 2, IFN $\alpha$ 6, IFN $\alpha$ 14, and IFN $\alpha$ 2 mutants.

**Fig. S2 (mBio02357-23-S0002.pdf).** Dose-response analysis for the half maximal inhibitory concentrations.

**Table S1 (mBio02357-23-S0003.pdf).** Sequence entropies computed for the multiple sequence alignment.

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