

**The HIV-1 Gag and Protease:
Exploring the coevolving nature and
structural implications of complex drug
resistance mutational patterns in
subtype C**

By

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Preface

The work described in this thesis was carried out at the HIV Pathogenesis Programme and KwaZulu-Natal Research Innovation and Sequencing Platform, Nelson R Mandela School of Medicine, University of KwaZulu-Natal, Durban, South Africa, from July 2015 to March 2019, under the supervision of Dr. Michelle Gordon.

This work has not been submitted in any form for any degree or diploma to any tertiary institution. Where use has been made of the work of others, it is duly acknowledged in the text.

Signed

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Veronna Marie

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Date

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Dr. Michelle Gordon

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Date

Declaration

I, **Miss Veronna Marie** declare that:

1. The research reported in this dissertation, except where otherwise indicated, is my original research.
2. This dissertation has not been submitted for any degree or examination at any other university.
3. This dissertation does not contain other scientists' data, pictures, graphs or other information, unless specifically acknowledged as being sourced from other scientists.
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5. This dissertation does not contain text, graphics or tables taken from the internet, unless specifically acknowledged, and the source being detailed in the dissertation and in the reference section.

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Veronna Marie

Presentations

Part of the findings observed in this study was presented at the following conferences or symposia:

1. Oral presentation at the **College of Health Sciences (CHS) Research Symposium**, 8th–9th September 2016, Nelson R Mandela School of Medicine (UKZN), Durban, South Africa.
2. Oral presentation at the **7th International Bioinformatics Congress**, 24th–25th October 2016, Rome, Italy.
3. Poster presentation at the **WGC Advanced Course: Computational Molecular Evolution**, 8–19th May 2017, Wellcome Genome Campus, Hinxton, Cambridge, United Kingdom.

To my parents, this title is yours.

I also dedicate this thesis to all the nerds out there that continue to search
for answers to questions we have not yet asked.

And to all those that conspire against me,
I will destroy you.

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I would like to express my sincere gratitude to my supervisor, Dr. Michelle Gordon. Through this sometimes-daunting process, you have inspired me to always remain positive and to complete any task that I undertake with the greatest of efforts I can afford.

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To my beautiful niece and handsome nephew, you are the reason for my random smiles and bursts of happiness. You calm my mind when nothing else can.

God, for his guidance and allowing me to bring to fruition my most treasured thoughts.

Abstract

Due to the high prevalence of HIV-1 subtype C infection coupled with increasing antiretroviral (ARV) drug treatment failure, the elucidation of complex resistance mutational patterns arising through protein coevolution is required. Despite the inclusion of LPV and DRV in second- and third-line, many patients still fail treatment. In this study, protease (PR) inhibitor resistance mutations were identified by comparing treatment versus naïve sequences datasets in Gag and PR. Thereafter, to investigate Gag-PR coevolution and pathways to LPV resistance, phylogenetic analyses and Bayesian networks were constructed. Following this, structural analyses combining homology modelling, molecular docking and molecular dynamic simulations were carried out on specific patterns of protease resistance mutations (PRMs). To complement these analyses, the structural impact of a mutated Gag cleavage site on PR resistance dynamics was also evaluated. Accordingly, this study identified 12 major PRMs and several resistance combinations. Of these, the M46I+I54V+V82A pattern frequently occurred. The second most frequently recurring pattern included L76V as a fourth mutation to the above triplet. Coevolution analyses revealed correlations between positions 10, 46, 54 and 82 in PR. Of these, minor PRM L10F occurred in 6.4% of the dataset and was involved in pathways to LPV resistance. Additionally, Gag cleavage site (CS) mutation A431V was also correlated with L10F and the major PRMs. Distinct changes in PR's active site, flap and elbow regions due to the PRMs (L10F, M46I, I54V, L76V, V82A) were found to alter LPV and DRV drug binding. When the PRMs were combined with the mutant Gag CS binding was greatly exacerbated. While the A431V Gag CS mutation coordinated several amino acid residues in PR, the L76V mutation was found to have a significant role in substrate recognition rather than directly inhibiting the drugs. These data show that the co-selection of mutations in Gag-PR greatly contributes to resistance outcomes and that our understanding on drug resistance is largely lacking, particularly where structure is concerned.

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Abbreviations

2D	Two-dimensional
3D	Three-dimensional
AA	Amino acid
AIC	Akaike information criterion
AIDS	Acquired immune deficiency syndrome
AMBER	Assisted model building with energy refinement
APV	Amprenavir
ARV	Antiretroviral
BI	Bayesian inference
BNL	Bayesian network learning
CA	Capsid; p24
CAPS	Coevolution analysis for protein sequences
CDC	Centre for Disease Control and Prevention
CRF	Circulating recombinant form
CS	Cleavage site
CTD	C-terminal domain
DRV	Darunavir
DRV/r	Darunavir boosted with ritonavir
FDA	Food and Drug Administration
FI	Fusion inhibitor
HAART	Highly active antiretroviral therapy
HIV	Human immunodeficiency virus
HIV-1	Human immunodeficiency virus type I
HIV-2	Human immunodeficiency virus type II
HTLV-III	Human T-lymphotropic virus type III
INSTI	Integrase strand transfer inhibitors
KZN	KwaZulu-Natal
LAV	Lymphadenopathy-associated virus
LPV	Lopinavir
LPV/r	Lopinavir boosted with ritonavir
LRT	Likelihood ratio test
LTR	Long terminal repeat

MA	Matrix; p17
MD	Molecular dynamics
MDR	Multi-drug resistant
MHR	Major homology region
ML	Maximum-likelihood
MM-GBSA	Molecular mechanics-generalized born surface area
MM-PBSA	Molecular mechanics-poisson boltzmann surface area
NC	Nucleocapsid; p7
NFV	Nelfinavir
NNRTI	Non-nucleoside reverse transcriptase inhibitors
NPT	Constant pressure and normal temperature
NRTI	Nucleoside reverse transcriptase inhibitors
ns	Nanoseconds
NTD	N-terminal domain
NVT	Constant volume and normal temperature
p1	Spacer peptide two
p2	Spacer peptide one
PAI	Post-attachment inhibitor
PCS	Protease cleavage site
PDB	Protein Databank
PI	Protease inhibitor
PIC	Pre-integration complex
PK	Pharmacokinetic enhancers
ps	Picoseconds
PR	Protease
PRMs	Protease resistance mutations
RTV	Ritonavir
SCF	Self consistent field
SIV	Simian immunodeficiency virus
United States	US
vdW	van der Waals
WT	Wild-type

Symbols

α	Alpha
β	Beta
\AA	Angstroms
$C\alpha$	Alpha carbon
K	Kelvin
kcal	Kilocalories
mol	per mole
π	pi

Chapter one

Literature review

1.1 History of the human immunodeficiency virus

In June 1981, a group of clinical experts based at the Centre for Disease Control and Prevention (CDC) documented that five relatively healthy patients between the ages of 29 and 36 all contracted a rare respiratory infection called *Pneumocystis carinii* pneumonia¹ (PCP) in their Morbidity and Mortality Weekly Report. Additionally, whilst all five men confessed to having sexual relations with other men and used inhalant drugs, three patients had defective lymphocyte proliferation coupled with considerably low T cell counts (CDC, 1981). Following the CDC's initial report, several cases all leading into the year of 1982 described larger groups of homosexual men showing the same symptoms, with mortality steadily increasing. By September 1982, the CDC had concluded that given the clinical manifestations and nature of the emerging infectious disease, this new illness would be known as acquired immune deficiency syndrome (AIDS). Later AIDS would be identified in various groups, including patients receiving blood transfusions, injection drug users, Haitian individuals residing in the United States (US) and in children of parents with AIDS (Goedert and Gallo, 1985). This implied that this unidentified etiological agent was transmitted via blood-borne, vertical and sexual means and was not limited to homosexuals.

In 1983, Françoise Barré-Sinoussi and Luc Montagnier isolated a retrovirus from the lymph node of a 33-year-old French homosexual patient. Since the virus was only able to infect T cells, they concluded that the patient was infected with a T cell-tropic retrovirus and was subsequently named lymphadenopathy-associated virus (LAV) (Barré-Sinoussi et al., 1983). Although the link between AIDS and LAV remained uncertain at this time, Luc Montagnier and Barré-Sinoussi would go on to win the Nobel Prize for initially isolating and characterizing HIV in 2008. Elsewhere, Robert Gallo and colleagues had isolated a virus from 48 patients in 1984. These patients included those with AIDS, a healthy homosexual male, mothers with AIDS and patients with symptoms of pre-AIDS². After multiple tests, Gallo's team coined the virus human T-lymphotropic virus type III (HTLV-III) and suggested its role as the causative agent of AIDS (Gallo et al., 1984).

It was eventually revealed that LAV and HTLV-III were in fact the same virus and was subsequently renamed the human immunodeficiency virus (HIV) in 1986 (Coffin et al., 1986).

¹ PCP is a rare, serious infection of the lungs that are usually seen in severely immunocompromised individuals.

² Pre-AIDS is referred to as symptoms that precede the CDC's official definition of AIDS, e.g. lymphadenopathy.

1.2 Classification and origin of HIV

HIV belongs to the Lentivirus genus within the *Retroviridae* family (Williams and Burdo, 2009) and is classified into two main types, namely, HIV type I (HIV-1) and HIV type II (HIV-2). Although both types share structural similarities, HIV-1 is responsible for the global pandemic seen today (Xiao et al., 2017). However, while HIV-2 was initially localized to West Africa, it has since traversed to the United States, Europe, India and other parts of Africa (Campbell-Yesufu and Gandhi, 2011).

HIV-1 is divided into groups M (main), N (non-M; non-O), O (outlier) and P. Group M is further subdivided into nine subtypes (A–D, F–H, J and K) (Lau and Wong, 2013) and about 98 circulating recombinant forms³ (CRFs). Of these, group M subtype C is currently the most prevalent form of HIV-1, globally (Castley et al., 2017). HIV-2 is divided into eight groups, namely A–H, where groups A and B are the most frequent and likely the only pathogenic ones (Eberle and Gürtler, 2012). Both HIV-1 and HIV-2 originated from independent zoonotic events when a simian immunodeficiency virus (SIV) jumped species from non-human primates to humans (Peeters et al., 2010). Two distinct SIVs were involved in cross-species transmission for the main groups of HIV-1 to arise. As such, the natural viruses found in chimpanzees (SIVcpz) led to the genetic development of HIV-1 groups M and N whilst those found in gorillas (SIVgor) led to the HIV-1 group O variants. Similarly, the natural sooty mangabey⁴ virus (SIVsmm) is the closest genetic relative of HIV-2 (Pandrea et al., 2008).

Interestingly, Kalish et al. (2004) showed that people hunting primates for bushmeat in Central Africa were often exposed to SIV infection. Nevertheless, the weak nature of SIV allows for the human immune system to fully suppress the virus within weeks of acquisition. Therefore, several successive infections from person-to-person and the presence of high-risk transmission networks were required for SIV to mutate into HIV. Consequently, the turn of the 20th century which led to the collapse of colonialism, increased trade with global proprietors, sociopolitical reform and an increase in prostitutes provided the perfect channel for HIV to develop and spread. A study conducted by Faria et al. (2014) on the transmission network of HIV-1 concluded that group M utilized the behavioural and socioeconomic changes to establish and maintain future transmissions (Parrish et al., 2008) in what would become one of the “most devastating infectious diseases” to emerge in human history (Sharp and Hahn, 2011).

³ CRFs are combinations of different HIV-1 subtypes, e.g. CRF08_BC is a combination of subtypes B and C.

⁴ The sooty mangabey (*Cercocebus atys*) are old world monkeys indigenous to West Africa.

1.3 Geographical distribution of the HIV-1 subtypes

According to a report published in 2018 by the Joint United Nations Programme on HIV/AIDS, there were 36.9 million people living with HIV, globally. In addition, there were 1.8 million new infections and 940,000 AIDS-related deaths (UNAIDS, 2018). An estimated 20% of the population of Lesotho, South Africa, Zimbabwe and Botswana are HIV-positive (Chin, 2017). In South Africa alone, there is an estimated 7.52 million individuals currently living with HIV (STATS SA, 2018). One of the most challenging issues faced currently is preventing the transmission of HIV-1 (Kurth et al., 2011). Finding ways to control the epidemiological spread of HIV-1 can not only prevent further increases in the number of new HIV infections but can also reduce the economic burden faced by many developing countries.

Thus far, universal efforts in generalizing the pandemic is hindered by the worldwide geographical heterogeneity of the HIV-1 subtypes (Buonaguro et al., 2007) as seen in Figure 1.1. Due to the diversity of HIV-1 in Southern Africa, several HIV-1 subtypes and CRFs are found in Cameroon and in the Democratic Republic of Congo. Accordingly, subtype C is endemic to Eastern and sub-Saharan Africa, the south of Brazil and the Indian Pacific whereas subtype B is mostly prevalent in the US, Japan, Europe and Northern Africa (Chin, 2017). CRF01_AE (recombinant between HIV-1 subtypes A and E) and CRF02_AG (recombinant between subtypes A and G) accounts for 5% and 8% of global HIV infections and are prevalent in Southeast Asia and West Africa (Daw et al., 2017). Interestingly, the idea that a single virus preferentially introduced into a dense population which rapidly transmitted, or otherwise known as the founder-effect was suggested to play a role in the geographical distribution of the HIV-1 subtypes seen today (Buonaguro et al., 2007; Chin, 2017).

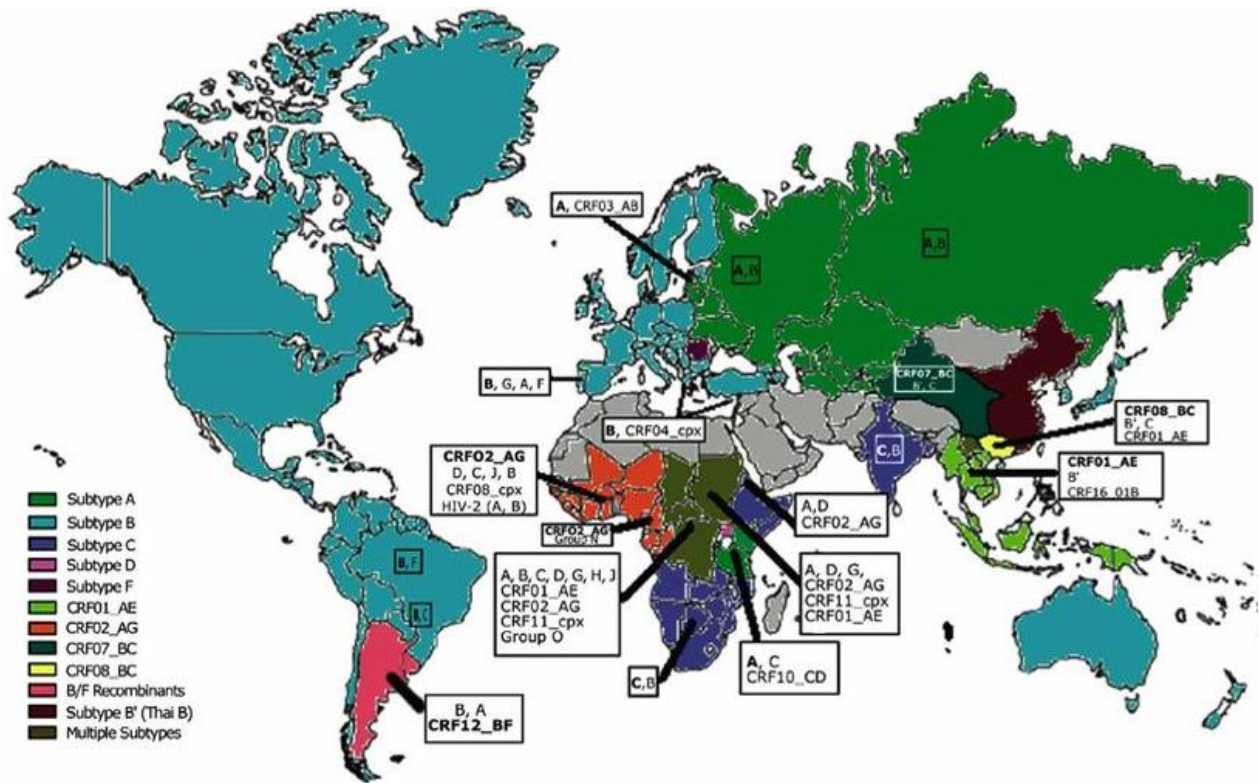


Figure 1.1 Worldwide geographical distribution of the HIV-1 subtypes and CRFs. Illustration taken from Butler et al. (2007).

1.4 Clinical manifestations of HIV infection

Over the years several mathematical models have been used to breakdown the clinical progression from HIV infection to AIDS. Though differences exist between patients, a general trend was outlined as seen in Figure 1.2. Accordingly, this trend encompassed three distinct stages known as the acute infection, chronic infection and AIDS phase (Alizon and Magnus, 2012). During acute infection, flu-like symptoms including headache, cough and fever occurs within 2–4 weeks (Robb et al., 2016). Additionally, weight loss, oral and genital ulcers, skin rash as well as fatigue have also been associated with the early stage of HIV infection. Importantly, individuals in acute stage have high viral turnover rates and can easily transmit to non-infected people quickly. Consequently, 38–50% of all new infections occur at the acute HIV infection stage (Henn et al., 2017).

With the onset of flu-like symptoms during acute HIV infection, the body's immune response kicks in. The cellular immunity or cell-mediated immune response⁵ which is mediated by lymphocytes known as T-cells is activated after 1–2 weeks of infection. This is followed by the humoral response⁵ (or antibody-mediated humoral response which sequesters specific B-cells to form plasma cells to secrete antibodies into the lymph and blood) 4–8 weeks post-infection (Alizon and Magnus, 2012). Through the activation of immune responses, viral copy numbers decrease with lower levels of replication keeping the viral load constant. This is referred to as the viral load set point and is the chronic infection stage (Dykes and Demeter, 2007). Since host CD4 T-cells are actively targeted by the virus (Douek et al., 2002), its numbers are greatly reduced, which leads to the AIDS stage (Dykes and Demeter, 2007). This stage is the most severe and is characterized by extremely low CD4 T-cell count (usually <200 per μL), high viral copies and damaged immune systems. Furthermore, the frailty of the immune system results in the acquisition of several opportunistic infections (Friedman-Kien et al., 1981).

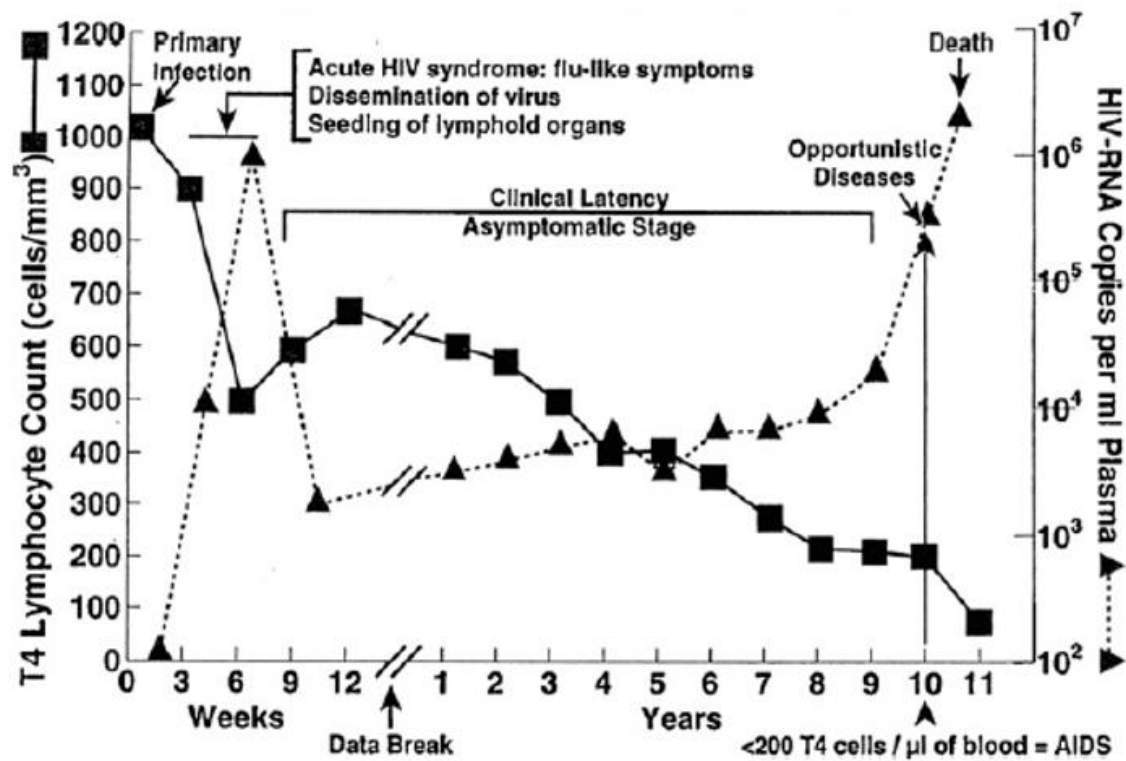


Figure 1.2 The typical three clinical stages observed in untreated HIV-1 infected individuals with axes showing the viral load and CD4 T-cell count. Illustration taken from Landi et al. (2008).

⁵ Information on immune responses adapted from Nauta J. 2011. Humoral and cellular immunity. In Nauta J. (eds), *Statistics in Clinical Vaccine Trials*. Springer-Verlag Berlin Heidelberg, pp. 13–17.

1.5 Genetic and physical characteristics of HIV

In general, all retroviruses possess similar physical and genetic characteristics. One of the main features that make retroviruses unique is that the virus comprises two positive-sense RNA strands (Kieken et al., 2002). Each strand comprises nine genes over three reading frames as shown in Figure 1.3 below. Of these, the *gag*, *pol* and *env* genes encode the virus's main structural and enzymatic components. The last six include regulatory genes *tat* and *rev* as well as the *vif* (viral infectivity factor), *vpu* (viral protein U), *vpr* (viral protein R) and *nef* (negative regulation factor) accessory proteins. The *gag* gene encodes the virus's main structural components, matrix, capsid and nucleocapsid while *pol* encodes for the viral protease, reverse transcriptase and integrase enzymes. The surface envelope glycoprotein is encoded with the *env* gene (Watts et al., 2009). Importantly, these genes are flanked by identical 5' and 3' long terminal repeats (LTRs). Transcription regions within the LTRs can activate and repress factors that influence the rates of gene expression (Burnett et al., 2009; Shah et al., 2014).

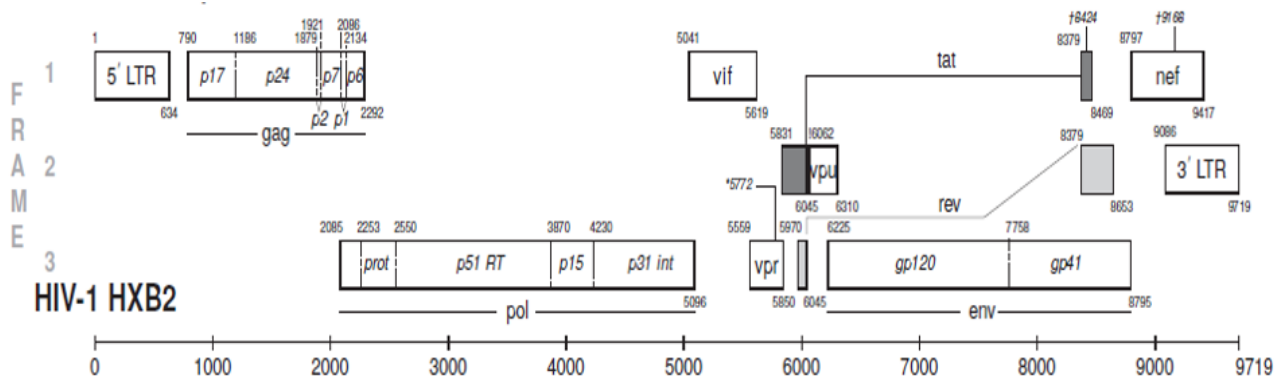


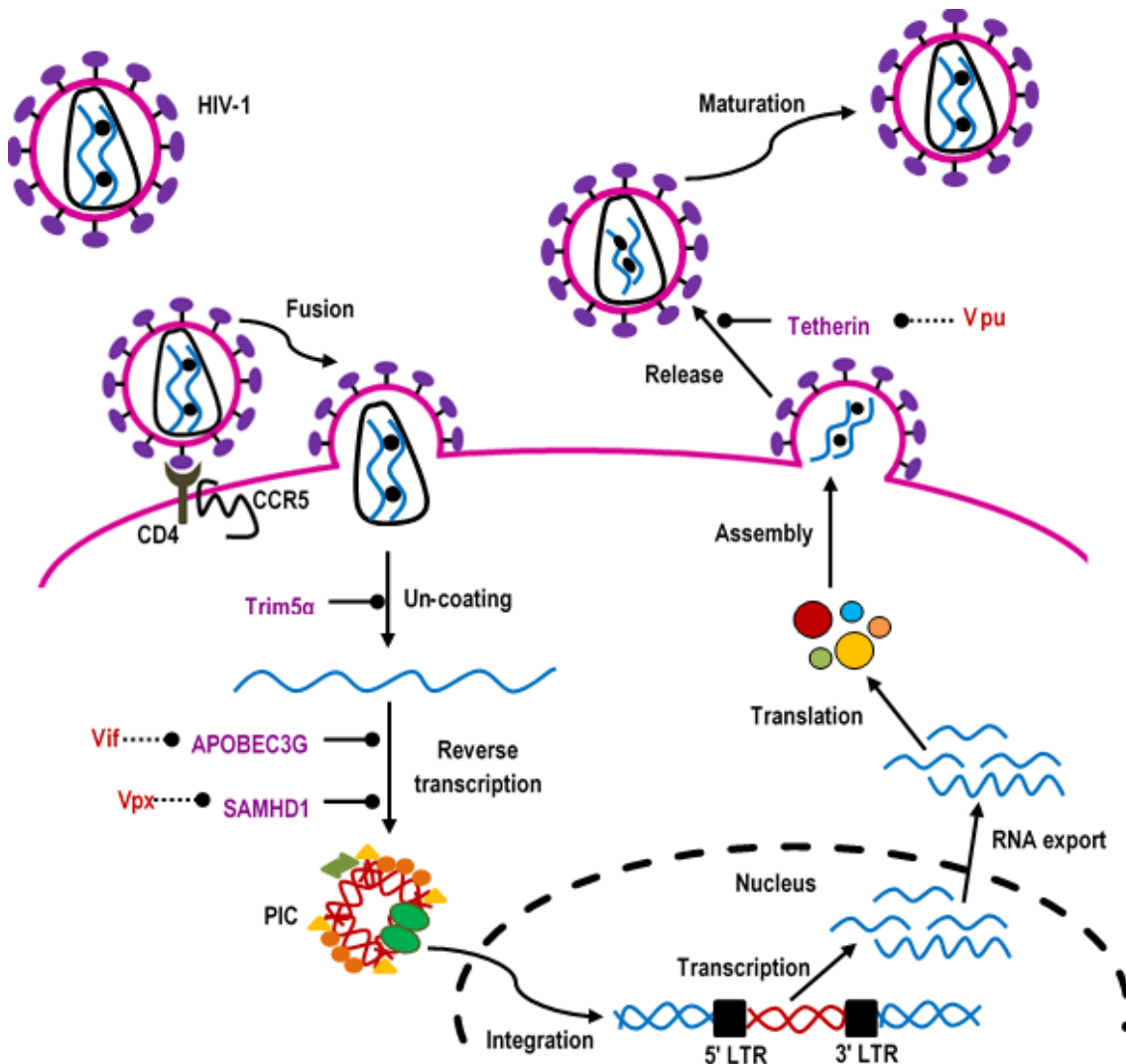
Figure 1.3 Genetic map of HIV-1 showing the three reading frames, the virus's nine genes and the 5' to 3' long terminal repeat (LTR) regions. Image taken from Foley et al. (2017).

Physically, the HIV-1 virion⁶ is approximately 100 nm in size and spherical in shape. The viral envelope contains 72 spikes which are composed of trimers of envelope's (Env) gp120 and gp41 surface and transmembrane glycoproteins, respectively (Gelderblom et al., 1987). The HIV-1 matrix (MA; p17) protein which is a thin layer lining the inner surface of the virion lipid bilayer helps hold the Env proteins together after maturation has occurred (Gelderblom et al., 1987). Furthermore, in a mature virion, the HIV capsid (CA, p24) protein oligomerizes to form a shell around the virus's RNA and core-associated proteins (Freed, 1998).

⁶ A structurally and genetically complete infectious virus particle as it exists outside a host.

1.6 The HIV-1 lifecycle

The replication cycle of HIV-1 comprises two distinct phases: (a) the early phase where virions bind to the host cells followed by cDNA integration and (b) the late phase in which viral gene expression occurs to allow for maturation and release of the now infectious viral particles (Nisole and Saïb, 2004). Several steps occur (Figure 1.4) to produce mature, infectious virus: (i) binding of HIV to its receptor (CD4) and preferred co-receptor⁷ (ii) fusion with the host cell membrane, (iii) un-coating of the viral capsid and subsequent nucleic acid release, (iv) reverse transcription of viral RNA, (v) integration into host cell's DNA, (vi) transcription and translation, (vii) assembly of the immature virions and budding from cells and (viii) final maturation of immature viral particles to fully infectious virions (reviewed in Barré-Sinoussi et al., 2013).



⁷ Co-receptors are a group of chemokine proteins. In the HIV-1 lifecycle, R5 and X4 viruses interact with CCR5 or CXCR4 co-receptors, respectively.

Figure 1.4 Diagram of the HIV-1 lifecycle. Replication begins when HIV-1 binds the CD4 receptor and its co-receptors following which fusion of the virion to the host membrane occurs. After HIV's capsid is uncoated the viral proteins and RNA are released into the cytoplasm. Thereafter, the virus's RNA is reverse-transcribed into DNA and the pre-integration complex (PIC) is formed and translocated into the nucleus. At this stage, the viral DNA is integrated with the host's genetic material and encoded into new viral proteins and RNA. These components are then transported to the cell surface where they are assembled into immature virus particles. These progeny viruses are subsequently released. Finally, the protease cleaves the virus's structural polyprotein, Gag to form fully, infectious HIV virions. **Note:** restriction factors (tetherin, APOBEC3G, tripartite motif-containing 5 α (TRIM5 α) and SAMHD1; purple) and the virus's regulatory proteins (Vpu, Vif and Vpx; red) are also shown. **Abbreviations:** CCR5 = CC-chemokine receptor 5 (Illustration adapted from Barré-Sinoussi et al., 2013).

1.7 HIV-1 antiretroviral therapy

The elucidation of the HIV-1 lifecycle provided invaluable information for the development of several drugs designed to actively target specific steps in the virus's replicative process (Gu et al., 2014). Zidovudine, a reverse-transcriptase inhibitor was the first antiretroviral (ARV) drug approved for HIV treatment by the Food and Drug Administration (FDA) (Warnke et al., 2007). Since then, it has become apparent that a combination of ARV drugs is more effective against the virus than a single inhibitor. This approach is often referred to as highly active antiretroviral therapy or HAART (Cohen, 2006; Arts and Hazuda, 2012). Since its inception, HAART is generally able to reduce the viral load to undetectable numbers (Fang et al., 2007) whilst extending patient life expectancy by several years (Smith et al., 2013; Meintjes et al., 2017).

There are over 26 FDA approved ARV drugs that belong to eight drug classes (NIH, 2018). These are the nucleoside reverse transcriptase inhibitors (NRTIs), non-nucleoside reverse transcriptase inhibitors (NNRTIs), CCR5 antagonist, fusion inhibitor (FI), post-attachment inhibitor (PAI), integrase strand transfer inhibitors (INSTIs), pharmacokinetic enhancers (PKs) and the protease inhibitors (PIs) as seen in Table 1.1 below. Briefly, the NRTIs are considered chain terminators as they block reverse transcriptase from producing DNA via its incorporation into the process. Contrastingly, NNRTIs binds to reverse transcriptase thereby changing the flexibility of the enzyme (Tang and Shafer, 2012). The CCR5 antagonist blocks the CCR5 co-receptor thus preventing virus entry into the cell (Lopalco, 2010) whilst the FIs prevent HIV-1 from entering the CD4 cells (Falkenhagen and Joshi, 2018). Contrastingly, the PAIs are monoclonal antibodies that bind the receptive CD4 cells to block HIV-1 entry (Henrich and Kuritzkes, 2013). The INSTIs are a class of drugs that inhibits the HIV-1 integrase enzyme thus preventing it from making more copies of itself. The PKs are used in HIV-1 therapy to pharmacokinetically enhance or boost the

effectiveness of ARVs (Arts and Hazuda, 2012). Lastly, the PIs are a class of competitive inhibitors that target the HIV-1 protease enzyme during maturation (Yang et al., 2012) and will be further discussed in section 1.9.3 as they are the focus of the current study.

Table 1.1 List of commonly used ARV drugs approved by the FDA.

DRUG CLASS	GENERIC NAME	TRADE NAME
Nucleoside reverse transcriptase inhibitors	Abacavir	ZIAGEN
	Tenofovir alafenamide	VEMLIDY
	Emtricitabine	EMTRIVA
	Tenofovir disoproxil fumarate	VIREAD
	Lamivudine	EPIVIR
	Zidovudine	RETROVIR
Non-Nucleoside Reverse Transcriptase Inhibitors	Doravirine	PIFELTRO
	Efavirenz	SUSTIVA
	Etravirine	INTELENCE
	Nevirapine	VIRAMUNE VIRAMUNE XR
	Rilpivirine	EDURANT
Pharmacokinetic Enhancers	Cobicistat	TYBOST
	Ritonavir*	NORVIR
Post-Attachment Inhibitor	Ibalizumab-uiyk	TROGARZO
Fusion Inhibitor	Enfuvirtide	FUZEON
Protease Inhibitors	Atazanavir	REYATAZ
	Lopinavir/Ritonavir	KALETRA
	Nelfinavir	VIRACEPT
	Darunavir	PREZISTA
	Saquinavir	INVIRASE
	Tipranavir	APTIVUS
	Fosamprenavir	LEXIVA
	Amprenavir	AGENERASE
	Indinavir	CRIXIVAN
	Integrase Strand Transfer Inhibitors	Bictegravir	BIKTARVY#
Dolutegravir		TIVICAY
Elvitegravir		STRIBILD#
Raltegravir		ISENTRESS
CCR5 Antagonists	Maraviroc	SELZENTRY

* Ritonavir is a protease inhibitor, however, it serves as a pharmacokinetic enhancer or booster.

Available as part of a fixed dose combination pill only.

In South Africa, the classes of drugs currently available include the NRTIs, NNRTIs, PIs and INSTIs (NDOH, 2019). Drugs from these classes are administered in three varying regimens depending on the patient's age, weight, secondary infections and even gender. In the first-line treatment regimen, one NNRTI and two NRTIs are administered as a fixed dose combination

tablet. However, recent guidelines have also stipulated the use of an INSTI drug, namely Dolutegravir, in first-line treatment regimens (NDOH, 2019). Currently, Dolutegravir is administered as a fixed dose combination with Tenofovir and Lamivudine and is prescribed to clients > 10 years of age and > 35 kg, and as a standard dose in adolescents, adults and children > 20 kg. In second-line, the regimen consists of two NRTIs and a PI whilst third line regimens consists of a PI, NNRTI and an INSTI (NDOH, 2019). An overview of the available ARVs used in the three treatment regimens are described in Table 1.2.

Table 1.2 Overview of the ARV drugs employed in the three drug regimens in South Africa (adapted from the NDOH, 2019 guidelines).

First-line regimen: Two NRTIs + one NNRTI	Emitricitabine (FTC)	NRTI
	Tenofovir (TDF)	
	Lamivudine (3TC)	
	Abacavir (ABC)	
	Efavirenz (EFV)		NNRTI
Nevirapine (NVP)		
Second-line regimen: Two NRTIs + one PI	Tenofovir (TDF)	NRTI
	Lamivudine (3TC)	
	Zidovudine (AZT)	
	Emitricitabine (FTC)	
	Abacavir (ABC)	
Third-line regimen: One NNRTI + one PI + one INSTI	Lopinavir (LPV)*	PI
	Atazanvir (ATV)	
	Etravirine (ETR)	NNRTI
	Darunavir (DRV)*	PI
	Raltegravir (RAL)	INSTI

* LPV and DRV are boosted with ritonavir (r): LPV/r and DRV/r

1.8 ARV drug resistance

Due to the low proof-reading capability of the HIV-1 reverse transcriptase enzyme, the virus can accumulate numerous mutations in the genome (Hu and Hughes, 2012). Although most of these mutations adversely affect enzymatic function, the trade-off between reduced fitness and the virus's ability to evade ARVs allow some of these mutations to gain an evolutionary advantage (Richman et al., 2004). Hence, these mutant strains continue to replicate and will eventually predominate thereby rendering treatment ineffective as seen in Figure 1.5 below. Although the success of ARV therapy cannot be disputed, the development of ARV drug resistance remains a serious concern (Dudley et al., 2014; Silver et al., 2018). Even though these drug resistance mutations exhibit different trends for different drugs, certain mutations are often enough to resist

multiple inhibitors belonging to the same family or class. This is known as cross-resistance and has been observed in several studies (Condra et al., 1995; Hertogs et al., 2000; Race, 2001; Rhee et al., 2010; Diphoko et al., 2018; Penrose et al., 2018).

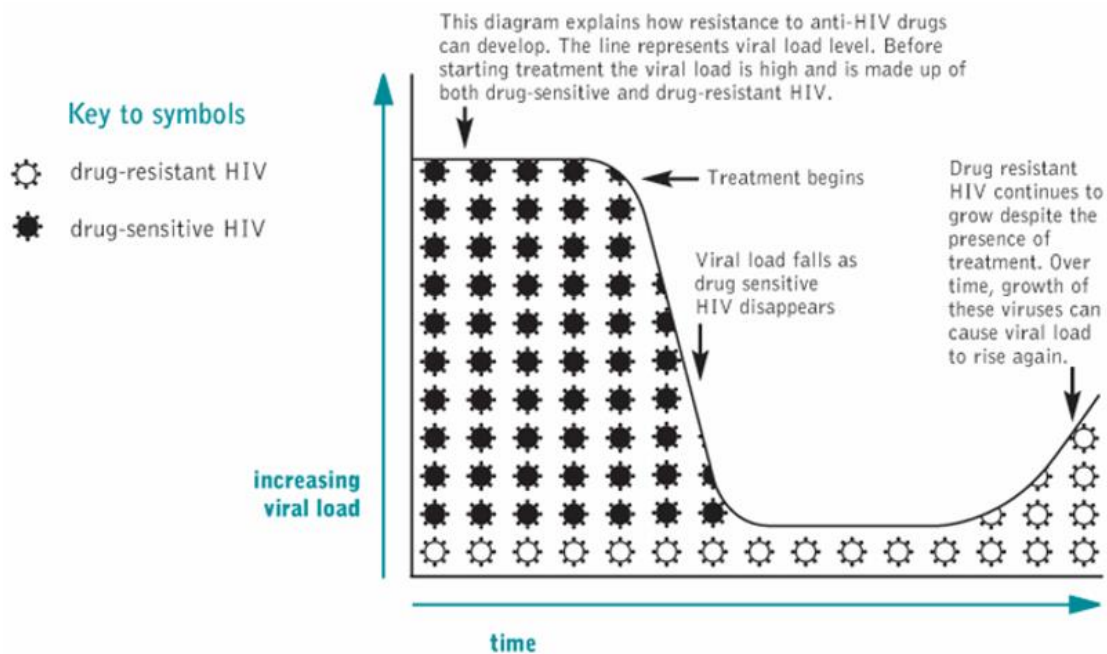


Figure 1.5 Diagram showing the development of drug resistant viruses over time (Image taken from AIDSMAP, 2014).

Usually, to ensure the drug regimens are effective, patients are carefully monitored (Iacob et al., 2017). Patient monitoring includes a sequence of steps from initial diagnosis to treatment and are assessed by stages. These stages are diagnosis, linkage to medical care, initiating ART, adherence to treatment regimens and viral suppression to undetectable levels in the blood (HIV. gov, 2019) through the monitoring of CD4 cell counts and viral load data (WHO, 2006). Although genotyping the viral sequences can provide invaluable information on which resistance mutations are present, the relationship between resistance mutations are complicated (Zhang et al., 2010). Currently, clinical decisions on the selection of drug regimens are based on predictive algorithms such as the HIVdb algorithm on the Stanford HIV Drug Resistance Database (Sing and Däumer, 2006; Shen et al., 2016). Since the focus area of this study is to evaluate the mechanism by which mutations in protease (PR) and its natural substrate Gag work to evade the PIs, the enzyme, substrate and its associated resistance will be discussed in detail in the following sections.

1.9 Protease structure, function, inhibitory drugs and resistance

1.9.1 Structure

The HIV-1 PR belongs to a family of aspartic proteases that is symmetrically structured to form a homodimer consisting of two identical subunits each comprising 99 amino acids (AAs) (Kato et al., 1987; Yang et al., 2012). Each PR subunit is composed of a single α -helix and nine β -sheets. Of these, four β -sheets that run anti-parallel relative to each other form the conserved dimer interface (Todd et al., 1998; Velazquez-Campoy et al., 2003) as shown in Figure 1.6. Structural studies indicate that residues 1–4 and 96–99 in each subunit of the four anti-parallel β -sheets forms the dimer interface of PR (Choudhury et al., 2003). The dimer interface results in the formation of the hydrophobic active site cavity consisting of PR's catalytic triad D25-T26-G27 from both monomers (Wlodawer et al., 1989; Zhang et al., 2008). More so, the anti-parallel β -sheets restrict access to the substrate cavity by forming two flexible flaps to cover the active site region. In a ligand-free state, PR assumes a semi-open conformation whereas a PR-ligand complex induces a closed conformation. Two models have been proposed for flap opening and closing states (Yang et al., 2012). The first theorizes that a collision complex between the ligand and PR occurs when the flaps are fully opened which then induces a closed conformation as the substrate approaches the active site (Scott and Schiffer, 2000). The second model proposes that the ligand first approaches a semi-open state which then prompts the flaps to fully open as it enters the substrate cavity. The flaps then extend over the substrate to adopt a closed conformation for proteolysis (Collins et al., 1995; Toth and Borics, 2006). While the flaps are indispensable for catalysis of the viral PR, their exact conformational states during cleavage is debatable (Soares et al., 2016).

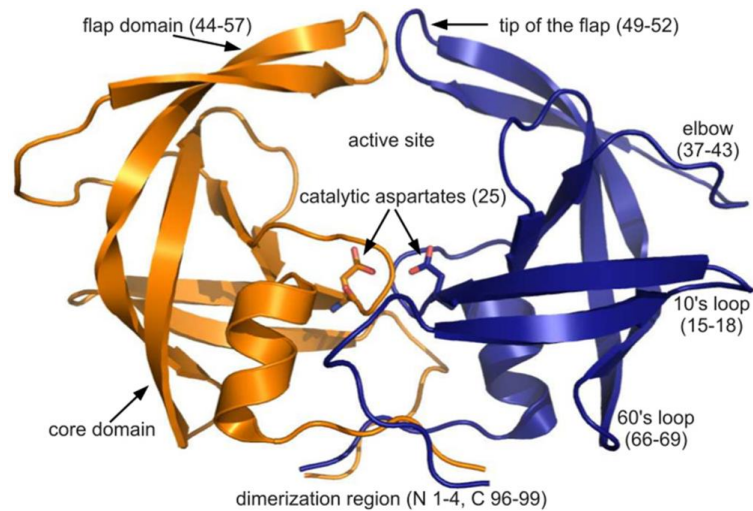


Figure 1.6 Structural representation of the HIV PR showing its active site, flap and identical subunits. Image take from Venkatakrishnan et al. (2012).

1.9.2 Function

In nature, the role of the HIV-1 PR is to cleave the nascent polyproteins and is thus essential for viral replication (Adachi et al., 2009). Consistent with studies evaluating other non-viral PR's, it is recognized that the acid-base mechanism involving two important active site aspartic residues are essential for catalysis to occur (Brik and Wong, 2003). The widely accepted mechanism of catalysis was initially described by Suguna et al. (1987). The authors suggest that of the two aspartic acids, only one is unprotonated. Therefore, the negatively charged aspartic group activates the nucleophilic water located between the aspartic acids which then proceeds to attack the substrate's carbonyl group to generate an oxyanion tetrahedral intermediate. Finally, the substrate's amide nitrogen atom is protonated and rearranged to breakdown the intermediate leading to the formation of the hydrolysis products (Figure 1.7).

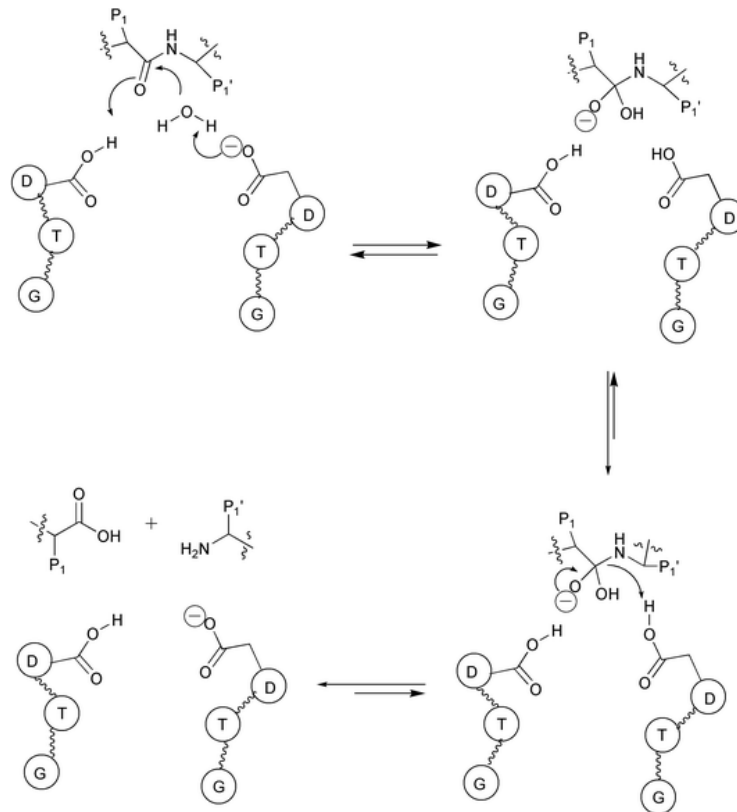


Figure 1.7 Chemical mechanism showing the proteolytic cleavage of the hydrolysis products. Image taken from Brik and Wong (2003).

In Gag, five cleavage sites (CSs) are recognized by PR during hydrolysis as depicted in Table 1.3 below. Although these regions share limited sequence similarity they are similarly structured. As such, it was proposed that the mechanism by which PR cleaves Gag also depends on the structure of the substrate. Moreover, while PR exhibits symmetry within its subunits, the Gag substrates are asymmetrical in size and charge of the AA residues (Prabu-Jeyabalan et al., 2002).

Table 1.3 WT sequences for the HIV-1 subtype C Gag CSs (adapted from De Oliveira et al., 2003).

CLEAVAGE SITES	SEQUENCE
Matrix-Capsid	VSQNY -- PIVQN
Capsid-p2	KARVL -- AEAMS
p2-Nucleocapsid	NTNIM -- MQKSN
Nucleocapsid-p1	ERQAN -- FLGKI
p1-p6	RPGNF -- LQSRP

1.9.3 Inhibitory drugs

As previously mentioned, the analogous structure of the PIs to the Gag CSs make them ideal inhibitors of HIV-1 maturation (Mudgal et al., 2018). As shown in Table 1.1 above, there are 10 FDA approved PIs currently available on market, nine of which are shown in Figure 1.8 below. In general, the mechanism of inhibition begins when the hydroxyl group of the PI interacts with the carboxyl group of the aspartic active site residues via hydrogen bonding. Consequently, binding to the active site AAs prevents the HIV-1 PR from successfully cleaving Gag. While several attempts have been made to modify the current PIs, none have been as successful as second-generation PIs Lopinavir (LPV) and Darunavir (DRV) which were modified from Ritonavir (RTV) and Amprenavir (APV), respectively (Lv et al., 2015).

In LPV, the 5-thiazolyl and the 2-isopropylthiazolyl of RTV's P2 and P2' groups are replaced with a phenoxyacetyl and six-membered cyclic urea, respectively. These substitutions have been shown to improve the potency against drug resistant variants (Sham et al., 1998). On the other hand, having been FDA-approved in 2006, DRV is the newest PI on market (Lv et al., 2015). The only difference between DRV and APV is the substitution of tetrahydrofuran with bis-tetrahydrofuran in the P2 group. Consequently, replacing APV's chemical moiety allows DRV to form more hydrogen bonds with PR. Due to these modifications LPV boosted ritonavir (LPV/r) and DRV boosted ritonavir (DRV/r) have high genetic barriers against the resistant PR variants in comparison to the other PIs (Doherty et al., 2011; Aoki et al., 2018).

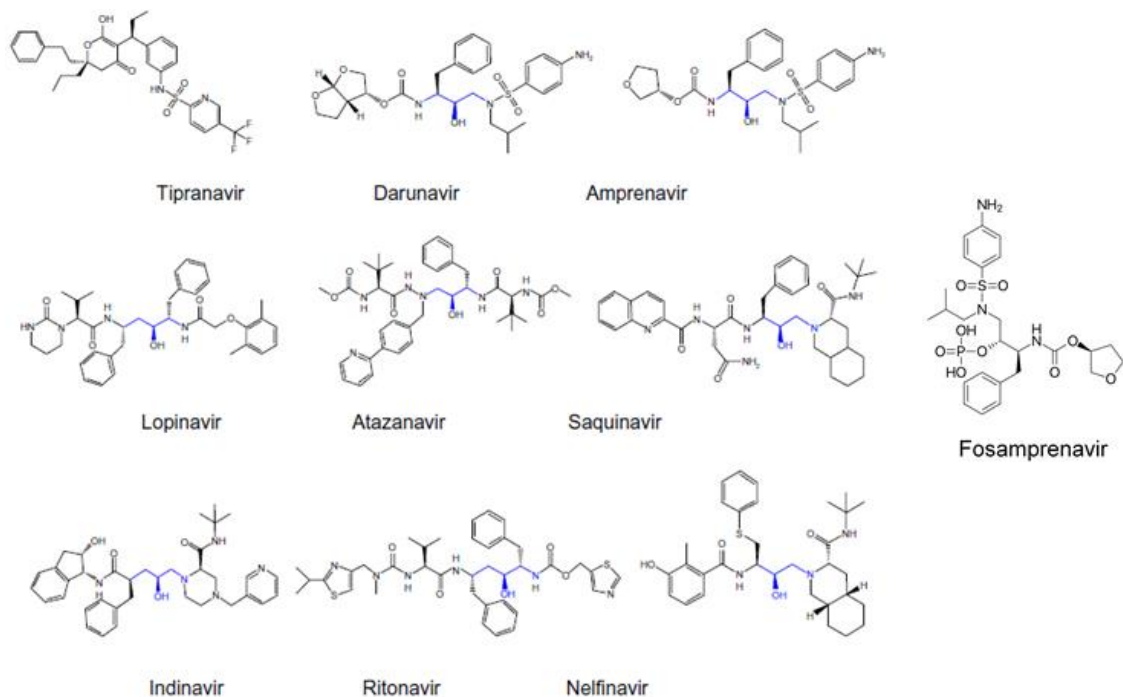


Figure 1.8 Chemical structures of the PIs. Image adapted from Lv et al. (2015).

1.9.4 Drug resistance

Despite their success, mutations arising in the viral PR have been associated with LPV and DRV drug resistance (Weber et al., 2015). In LPV, the most common resistance mutations include V32I, M46I/L, G48V/M, I54V/T/A/L/M, L76V, V82A/T/F/S, I84V and L90M (Lv et al., 2015) whilst V32I, L33F, I47V/A, I50V, I54L/M, L76V and I84V have been clinically associated with DRV resistance (Tremblay, 2008). Generally, resistance to the PIs occur when the viral PR accumulates several primary or major mutations in various regions of the enzyme (Wensing et al., 2010). Major mutations directly affect resistance by altering the structure of the catalytic site. This results in reduced contact between PR and the inhibitors. In addition, several secondary or minor resistance mutations emerge at a later stage to compensate for the changes induced by the major protease resistance mutations (PRMs) (Budambula et al., 2015). Therefore, this suggests that the way in which PR resists the PIs is dependent on complex evolutionary and resistance dynamics.

1.10 Gag structure, function and its role in PI resistance

1.10.1 Structure and function

The autocatalytic cleavage of the aspartyl protease enzyme from Gag-Pol (PR160) prompts the cleavage of both Gag-Pol and Gag (PR55) at predefined sites in the polyproteins (Weber and Agniswamy, 2009). Gag or group specific antigen is essential for viral infectivity and maintaining the structural integrity of HIV (Ning et al. 2016). The protein comprises four main domains, i.e. matrix, capsid, nucleocapsid and p6 (Bharat et al., 2014). In addition to these domains, two small spacer peptides (p2 and p1) that assist in the regulation of structural changes accompanying maturation are also found within Gag (Sundquist and Kräusslich, 2012). For successful maturation of the virions, the proteolytic cleavage of Gag occurs in a very precise and ordered manner as seen in Figure 1.9 below.

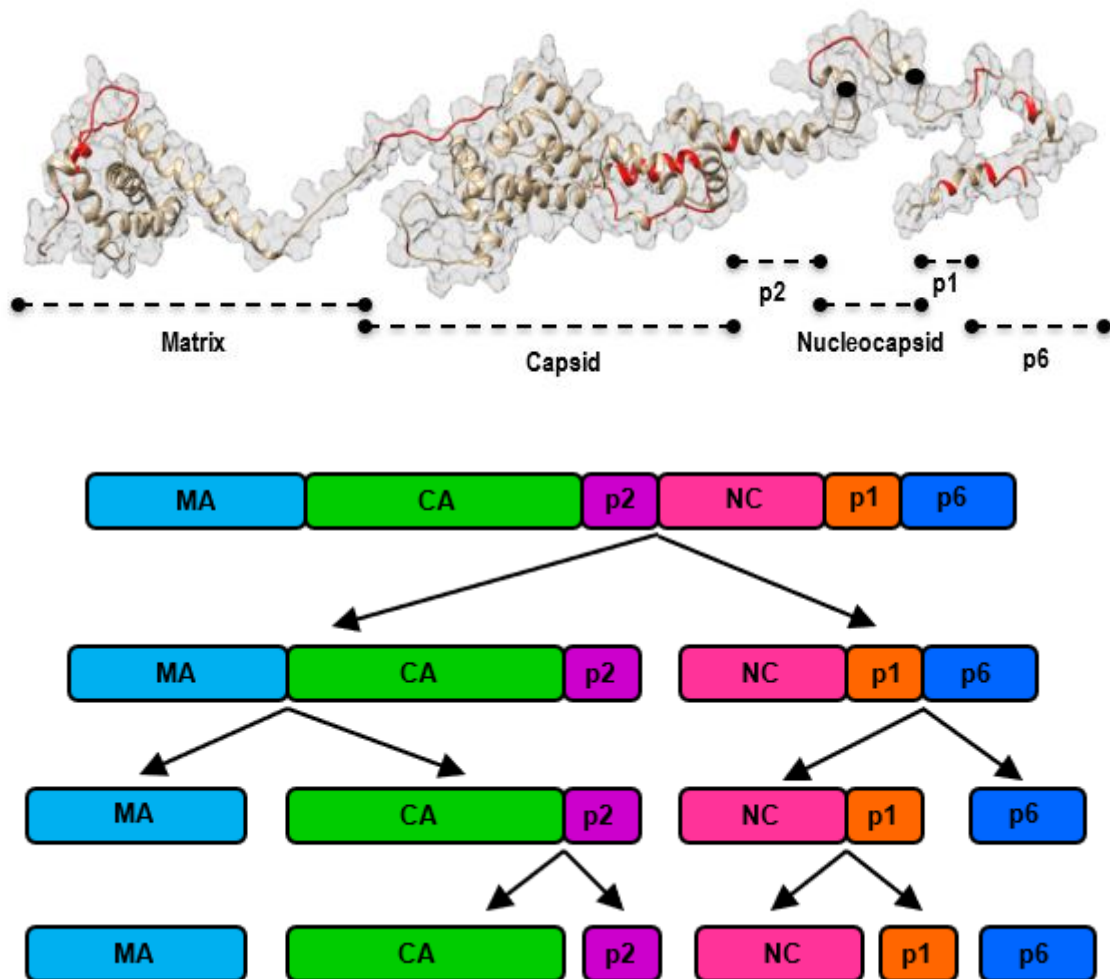


Figure 1.9 Diagram showing the proteolytic cleavage of Gag by PR. The first site of cleavage is between p2 and nucleocapsid. This is followed by cleavage at the matrix-capsid and p1|p6 sites. Finally, the small spacer peptides are cleaved from capsid and nucleocapsid. **Abbreviations:** MA

= matrix, CA = capsid and NC = nucleocapsid. **PDB codes:** 2H3I (Matrix), 1L6N (N-terminal Capsid), 1A43 (C-terminal Capsid), 1U57 (p2), 1A1T (Nucleocapsid) and 2C55 (p6).

1.10.1.1 Matrix

The HIV-1 matrix (MA; p17) protein is a thin layer lining the inner surface of the virion lipid bilayer after maturation (Doherty et al., 2005). Structurally, the 132 amino acid protein (Hill et al., 1996) consists of an amino-terminal (N-terminal) globular head and a flexible carboxyl-terminal (C-terminal) tail. Globular structures are typically spherical or “globe-shaped” water soluble proteins. In matrix, the head is composed of a 3_{10} helix (Freed, 2015) and four alpha helices that is capped by a 3-stranded beta sheet. A 5th α -helix connects the capsid and MA domains (Freed, 2015), projecting away from the β -sheet to expose the C-terminal residues and forms the tail (Fiorentini et al., 2006). Based on the ionic strength and concentration of the protein buffer, MA may exist as either monomers, dimers, trimers or oligomers of monomers, dimers and trimers (Forster et al., 2000).

Functionally, MA facilitates the targeting of Gag-Pol and Gag to the plasma membrane via myristoylation and PIP2 signals⁸. Additionally, MA is also involved in the nuclear import of the pre-integration complex (PIC) (Freed, 1998). The PIC is a large nucleoprotein composed of several viral and cellular proteins that allows integration during replication (Thierry et al., 2015). Interestingly, MA also has cytokine-like functions that act on pre-activated human T cells encouraging proliferation, viral replication after p17R host cellular receptor binding and pro-inflammatory cytokine release. Therefore, MA may have an important role in the virus- and host-derived factors that contribute to favourable HIV-1 infection and replication (Fiorentini et al., 2006).

1.10.1.2 Capsid

In a mature virion, the HIV capsid (CA, p24) protein oligomerizes to form a shell around the virus's RNA and core-associated proteins (Freed, 1998). All morphological variances of the CA domain are derived from a collection of hexameric (rings) CA monomers (Maillard et al., 2011) that has the same tertiary structure (Ganser-Pornillos et al., 2007). CA comprises two separate domains: the N-terminal domain (NTD 1–145) and the C-terminal domain (CTD 146–231) (Gitti et al., 1996), connected by a flexible linker (Lingappa et al., 2014). Structural studies revealed

⁸ Plasma membrane-specific phosphatidylinositol-4,5-bisphosphate (PIP2) and myristoylation facilitates Gag membrane targeting to the plasma membrane.

that CA is predominantly composed of α -helices, with seven and four α -helices in the NTD and CTD, respectively (Bharat et al., 2012). Moreover, the NTD of CA contains an amino-terminal β -hairpin and resembles an arrowhead whereas the globular CTD comprises one 3_{10} helix (Berthet-Colominas et al., 1999). Extensive intermolecular NTD-NTD interactions and to a lesser extent NTD-CTD interactions stabilize the hexameric rings. This stabilization occurs predominantly between helices 8–11 on the C-terminal side and 4–7 on the N-terminal side. Flexible CTD-CTD interactions link the adjacent hexameric rings, allowing for the formation of the curved lattice (Fassati, 2012) while inter-hexamer angle variation between the longitudinal or lateral positions or at the broad and narrow ends of CA has been suggested. Furthermore, the asymmetrical structure infers that no two CAs are identical (Zhao et al., 2013). Therefore, the flexibility and complex molecular interactions supports a variety of conformations that contribute to structural variation in CA (Gres et al., 2015).

Additionally, each CA domain has a different function in HIV-1 morphogenesis. Although the NTD of CA is not necessary for immature virion assembly, it is indispensable for mature core formation (Borsetti et al., 1998). Contrastingly, the CTD of CA is important for both the formation of the core and in virion assembly (McDermott et al., 1996). Additionally, all retroviruses comprise a conserved region of 20 AAs known as the major homology region (MHR) which is located in the CTD of CA (Wills and Craven, 1991). While this region is not clearly understood (Bell and Lever, 2013), its presence has been suggested to have a role at post-assembly and during assembly stages (Cairns and Craven, 2001). The entire MHR region forms a compacted strand turned helix stabilized by hydrogen bonds (Gamble et al., 1997). The MHR has been suggested to have a role CTD dimerization contributing to the stability of the viral shell (Ivanov et al., 2005). As such, mutations in this region may affect viral assembly.

1.10.1.3 Nucleocapsid

The 55 amino acid nucleocapsid (NC; p7) protein (Bell and Lever, 2013) packages two copies of the viral RNA genome into the assembling virions (Berkowitz et al., 1996). A prominent feature of NC is the presence of two highly conserved Cys-X2-Cys-X4-His-X4-Cys (CCHC) signatures that resemble zinc-finger motifs. The zinc-fingers, each containing an aromatic residue (F16 in the N-terminal zinc finger and W37 in the C-terminal zinc finger) (Darlix et al., 2011) coordinate a zinc ion (Lingappa et al., 2014) and are divided by a RAPRKKKG basic domain linker (Godet et al., 2012). These separately folded zinc-fingers resemble beads attached to a string (Summers et al., 1992).

Functionally, in addition to genome packaging, NC can renature nucleic acids with catalytic rates of about four orders of magnitude. In reverse transcription, NC can also stimulate tRNA^{Lys} binding to the primer binding site found at the N-terminal region of the genome, initiate reverse transcription from the bound tRNA^{Lys} and partake in strand transfer (Rodriguez-Rodriguez et al., 1995; Guo et al., 1997; Freed, 1998). Furthermore, annealing by NC enhances the formation of the converted loop-loop interaction into a stable duplex and the formation of RNA dimers (Lu et al., 2011).

1.10.1.4 p6

The C-terminal region of Gag comprises a proline-rich (Freed, 1998), 52 amino acid p6 domain (Votteler et al., 2011) where two amino acid sequences are translated, the -1 frameshift Gag-Pol p6 and the in-frame Gag p6 domain (Bell and Lever, 2013). Although the structure of the p6 domain of Gag remains unclear (Freed, 2015), it is known that the domain displays little, if any secondary structure (Stys et al., 1993), instead serving as a flexible docking site for cellular host factors (Gottlinger et al., 1991). The p6 domain is also necessary for the incorporation of viral accessory protein, Vpr into the virions (Solbak et al., 2013). Vpr is associated with transactivation of the LTR, import of the pre-integration complex (PIC) in non-dividing cells, the induction of apoptosis⁹ and cell halt at the G2/M transition pathway¹⁰.

1.10.1.5 p2 and p1 spacer peptides

The 14 amino acid p2 peptide is found wedged between the N-terminal MA and C-terminal NC proteins (Bell and Lever, 2013). The C- and N-termini of the CA and p2 domains respectively, were shown to form two parts of an α -helix. Electron cryotomography analyses show that p2 forms a six α -helical bundle that stabilizes Gag hexamers in immature virus particles (Wright et al., 2007). As a result, cleavage of p2 from NC is necessary for the formation of ribonucleoprotein within RNA and condensation of the CA domain. The late cleavage of CA|p2 allows morphogenesis through the cadence of CA-CA interactions. The importance of the integrity of the CA|p2 segment in formation of immature CA was shown in an electron microscopic study (Gross et al., 2000).

The 16 amino acid p1 peptide lies between the CTD of NC and the NTD of p6. This peptide contains two highly conserved proline residues, namely P445 and P439. Hill et al. (2007)

⁹ Programmed cell death

¹⁰ The G2/M transition is a point in the cell's lifecycle where after the second growth phase (G2) and DNA replication (S phase), mitosis occurs (M phase) to separate the cell into identical daughter cells.

implicated the importance of p1 for Pol and Gag incorporation into the virus particles. The “slippery site” involved in the Gag-Pol ribosomal frameshift overlaps with the end of p1 leading to potentially complex effects of mutations at this site (Bell and Lever, 2013). The substitution of either proline (P445 and P439) by leucine results in lower stability of the NC-RNA complex and rescinds infectivity (Hill et al., 2002). Moreover, mutations at the cleavage sites at either end of p1 have discrepant effects. For example, mutations in NC|p1 have no effect on proviral integration, whereas mutations at the C-terminal that produces p15 (NC|p1|p6) or p8 (p1|p6) peptides decreases the amount of integrated provirus on subsequent infection. This differential effect may suggest the role of NC|p1 in proviral integration as opposed to p15 and p8 (Coren et al., 2007).

1.10.2 Resistance

The collection of resolved structures on individual Gag domains contributes to the intrinsic and functional behaviour of Gag at the molecular level (Novikova et al., 2018). As a result, it is now evident that Gag and its individual domains have significant roles in the lifecycle and perseverance of HIV (Freed, 1998; Mailler et al., 2016; Tomasini et al., 2018). Even so, an extensive review by Fun et al. (2012) highlights several Gag mutations within and outside the CSs that are associated with drug resistance or exposure. Mutations in Gag, particularly at NC|p1 and p1|p6 CSs have been extensively reported (Borman et al., 1996; Nijhuis et al., 1999; Maquire et al., 2002; Prado et al., 2002; Dam et al., 2009). Additionally, while mutations in Gag can restore substrate processing (Myint et al., 2004; Tamiya et al., 2004; Ho et al., 2008; Parry et al., 2009), it has also been shown that Gag can confer resistance in the absence of mutations in the viral PR (Nijhuis et al., 2007; Gupta et al., 2010).

1.11 Molecular mechanisms of drug resistance

The molecular mechanisms of drug resistance are commonly elucidated through structural comparisons of the wild type and mutant proteins. In the HIV-1 PR, several structural changes associated with single amino acid substitutions have been identified: i) direct active site mutations that alter the interactions of PR with the substrate or inhibitor, ii) mutations occurring at the dimer interface affecting PR stability and iii) distal mutations showing an assortment of structural affects, such as mutations occurring at the flaps and those without direct contacts with inhibitors (Weber and Agniswamy, 2009). Whilst several mutations at the Gag CSs can be co-selected along with resistance mutations in the viral PR, the molecular mechanism by which these mutations contribute to resistance is unclear. However, it has been shown that Gag CS mutations can enhance the van der Waals interactions between the mutant PR and substrate (Özen et al., 2014).

As Gag is a large protein in nature, the mechanisms behind the structural synergistic effects of Gag and PR mutations requires further investigation (Su et al., 2019).

1.12 Variability in HIV-1 subtype C

Genomic variability differs across the subtypes. These discrepancies are based not only on the subtype but also the genomic region. Therefore, specific, functionally important regions in HIV are conserved across the subtypes, such as the CD4 binding sites (Alexandre et al., 2011). HIV-1 subtype C exhibits high sequence variability (Lynch et al., 2009) which has been attributed to several distinct genetic features including three NF- κ B binding sites at the long terminal repeats (Rodenburg et al., 2001), as well as a truncated Rev (Ndung'u et al., 2001, Gordon et al., 2003) and a five AA insertion in the Vpu protein. While the truncated Rev protein and the additional NF- κ B binding sites may alter gene expression by influencing viral replication (Iordanskiy et al., 2010), the enlarged Vpu protein may impact subtype C virulence via the regulation of Vpu functions including enhancing virion release and/or CD4 degradation (McCormick-Davis et al., 2000). Interestingly, some mutations associated with drug resistance in other subtypes have been identified as natural polymorphisms in subtype C (Lynch et al., 2009). Examples of these signature mutations include PR's M36I in non-B subtypes and I93L in subtype C (Santos and Soares, 2010). Contrastingly, some studies have reported the contribution of polymorphic residues in drug resistance (Bessong, 2008; Wainberg and Brenner, 2012). Furthermore, a higher level of diversity exists in subtype C Gag CSs in comparison to other group M subtypes (Li et al., 2013). This diversity may arise through ARV drug selection pressure, mutations or as natural polymorphisms (Verheyen et al., 2009).

1.13 Proteins

Proteins are the macromolecular machines of life as they perform complex molecular processes with rapid efficiency and accuracy. These processes are usually dependent on the protein's ability to bind other small molecules (Chica, 2018). Specifically, proteins form the abundance of cellular dry mass and is imperative for regulating biological function and molecular structure. Some of these functions include cellular messaging, maintenance of cell shape, catalytic reactions and the transport of small molecules. Although, these macromolecules exhibit great diversity in shape and size, all proteins are comprised from 20 common AAs (Janke et al., 2019). Together with these AAs, proteins display primary, secondary, tertiary structures that will be discussed in the subsequent sections of this chapter.

1.13.1 Primary structure

Simply, the primary structure of a protein is a linear chain of AAs (Farhadi, 2018). Large polypeptide chains are formed when the carboxyl and amino groups of two different AAs form a peptide bond thus linking them together (Janke et al., 2019). Importantly, while the amino and carboxyl groups are conserved across all the AAs, the individual side chains are different. These side chains are what distinguishes AAs from each other (Farhadi, 2018).

In nature, the amino acids that form specific proteins is dependent on an RNA template which is transcribed from a DNA sequence. The template codes for the AAs as triplet of bases, also referred to as a codon, from adenine, cytosine, guanine or uracil. As such, AAs can be identified based on either a three letter or single code (Wright, 2011). Since proteins form complex structures in nature, which is known as folding, the sequence of AAs plays a role in the conformation of the final structure. Furthermore, the AA side chains can also adopt numerous conformations referred to as rotamers. Specific conformational rotamers adopt the lowest energy. This energy is determined by the conformation of the backbone, the side chain the rotamer is interacting with and the environment (Wright, 2011).

1.13.2 Secondary structure

Secondary structures are formed due to repeated regular conformations of a polypeptide chain (Anfinsen et al., 1961; Zhang et al., 2018). The arrangement of peptide bonds results in the formation of specific structural elements in various regions of the proteins. The most common being α -helices and β -sheets (Eisenberg, 2003; DeBenedictis and Keten, 2019). Briefly, α -helices are formed when the phi and psi angles exhibit constant displacement between the nitrogen and α -carbon of N-C α , C α and carbonyl carbon of C α -C and C-N. Furthermore, there are 3.7 AA residues per turn (Haimov and Srebnik, 2016). Contrastingly, β -sheets are formed from consecutive strands separated by turns. Varied hydrogen bond networks can form depending on the orientation of the strands. In essence, β -sheets can assume parallel, anti-parallel and mixed orientations (Craveur et al., 2013).

1.13.3 Tertiary structure

Tertiary structures are formed when specific regions known as loops and the secondary structural elements adopt a satisfactory three-dimensional (3D) state during protein folding. Since loops rarely have hydrogen bonds between residues, they exhibit high flexibility and are therefore less ordered (Subramani and Floudas, 2012). Moreover, folding is dependent on the hydrophobic packing of residues, dispersion of hydrophobic and hydrophilic residues in water and the non-

covalent interactions between AA side chains. Additionally, regions of a protein that can independently fold into a stable 3D structure are referred to as domains (Wright, 2011), for example the individual Gag domains discussed in section 1.10.

1.13.4 Quaternary structure

Simply put, the quaternary structure of proteins refers to the 3D structure of several protein subunits such as dimers, trimers and tetramers (Godbey, 2014). These structures are bound by non-covalent bonds, salt linkages and disulfide bonds. Since these bonds are considered weak, dissociation of the individual protein subunits can occur (Pelley, 2007). As such, quaternary structures allow proteins to provide substrate binding sites, perform specialized functions and create concise spatial arrangements for the catalysis of chemical reactions (Veenhoff et al., 2002).

1.13.5 Relationship between protein sequence and structure

In 1973, Christian Anfinsen postulated that the 3D conformation, corresponding to the native structure of a protein depends on the AA sequence and has since become known as Anfinsen's dogma. In essence, this meant that given optimal conditions, the specificity of an AA sequence results in a stable native structure. Contrastingly, Levinthal (1968) hypothesized that the tertiary structure of proteins relies on complex pathways based on their environment and chemical properties. This hypothesis has since been coined Levinthal's paradox (Wright, 2011).

Furthermore, proteins display great structural dynamics as they are not static even during equilibrium (Argudo et al., 2017; Chen and Makhatadze, 2017). Still this inherent flexibility is essential for proteins to accurately and efficiently perform their regular functions (Teilmann et al., 2009). Coupled with this, it is simpler to generate sequence data experimentally than to predict its native structure. This is especially highlighted by Levinthal's paradox. Therefore, many software accommodate this complexity in their predictions of 3D protein structures (Wright, 2011). An overview of the method used to predict and assess protein dynamics is discussed in the subsequent sections.

1.14 Computational methods to predict protein interactions

1.14.1 Homology modelling

While the collection of protein structures is slowly gaining momentum, the structure of numerous proteins remains unsolved. Though it is impossible to solve all protein structures in existence, innovation into the computational prediction of protein tertiary structures is slowly filling this

gap. One such method includes homology modelling. Homology or comparative modelling is a method used to predict the tertiary structure of proteins from its AA sequence. The notion is that the structures exhibits greater stability and evolves more slowly over time. As such, homology modelling assumes that while similar sequences will adopt an almost identical structure, distant sequences will also retain a high level of similarity. Consequently, the method relies on a template of a known structure to compare against and predict the unknown structure (Muhammed and Aki-Yalcin, 2018). Several steps are involved in homology modelling, namely, template selection, alignment of the template and target sequences, model building, model optimization and validation. Currently, several homology modelling software are available, however, the two most commonly used software include MODELLER and Swiss-Model. Unfortunately, a drawback of homology modelling is that these theoretical tertiary structures cannot be predicted if the corresponding template's structure of a protein in the same family has not been solved (e.g. NMR or X-ray crystallography) (Chenug and Yu, 2018). Despite this, homology modelling is considered highly accurate, fast and low cost with clearly defined steps (Muhammed and Aki-Yalcin, 2018).

1.14.2 Molecular docking

Proteins do not act in an independent manner in complex biological processes. In fact, proteins often interact with small molecules or ligands to complete important functional tasks (Salmaso, 2018). This phenomenon has since attracted a great many scientists in the drug industry. The ability to accurately predict binding modes and interpret these data can provide invaluable information for the development of novel drug binding ligands (Salmaso and Moro, 2018). These methods have since been referred to as molecular docking. Since molecular docking estimates the best binding pose of a ligand and its associated protein, it requires an experimental or theoretical predicted tertiary structure (Salmaso, 2018).

Molecular docking occurs in two stages, i.e. the search for conformation or binding poses and the scoring function that correlates a score to each binding pose generated (Kitchen et al., 2004; Huang and Zou, 2010). During conformational searches, the algorithm should accurately evaluate the specified conformation space outlined by the free energy landscape whereas the binding scores should be associated with the global minimum energy of the hypersurface¹¹ (Salmaso and Moro, 2018). In general, two approaches can be considered during docking, i.e. rigid and flexible docking. In the first approach, the independent protein and ligand are bound based on shape and

¹¹ A physical space that considers the Nth dimension instead of only 2D and 3D models.

volume. The second approach assumes flexible docking in which binding is accomplished based on reciprocal effects of both the ligand and protein (Prieto-Martínez et al., 2018). Based on these approaches, there are currently several molecular docking software currently available for commercial and research purposes (Ciemny et al., 2018). Importantly, while molecular docking is fervently employed in the drug industries, this approach has been used to evaluate the interactions of existing protein-ligand systems, such as in HIV (Tong et al., 2017; Tarasova et al., 2018; Vora et al., 2019).

1.14.3 Molecular dynamics

Since protein-ligand interactions play vital roles in key biological processes, studying these interactions is an important approach in understanding the basis of protein functionality (Fu et al., 2018). A popular approach to evaluate these interactions is molecular dynamics (MD). Simply put, a MD simulation is a method used to compute the behavior of atoms and molecules over time (Lipkowitz, 1990). Briefly, the atomic particles are modelled with a specified charge and mass. The electrostatic force field, calculated from the atomic charge is used to estimate the force on each atom in the system. The force is then used to update the positions of the atoms and evolve the system over time. Consequently, MD simulations provide useful information on protein conformation and dynamics (Frenkel and Smit, 2002). This method has gained enormous popularity over the years due to software upgrades that has vastly improved the speed of calculations (Perricone et al., 2018).

MD software include Chemistry of HARvard Macromolecular Mechanics (CHARMM), GRONingen Machine for Chemical Simulations (GROMACS) and Assisted Model Building with Energy Refinement (AMBER). Apart from classical MD simulations, these packages also provide useful tools for protein assessment, including predicting the binding-free energy scores of protein-ligand systems as discussed below.

1.14.4 Predicting protein-ligand binding-free energies

As previously discussed, the recognition of ligands by proteins drive many biological processes. The strength of this recognition is characterized by binding affinities (Jiao et al., 2008). The two most popular methods used to determine binding-free energies are the Molecular Mechanics-Poisson Boltzmann and Generalized Born Surface Area calculations (MM-PBSA and MM-GBSA). The MM-P(G)BSA approach to estimate binding-free energies are based on thermodynamics as shown in equation (1) (Case, 2014). The equation shows that the binding-free energy is the difference between the solvated complex, ligand and protein.

$$\Delta G_{bind,solv} = \Delta G_{com,solv} - (\Delta G_{rec,solv} + \Delta G_{lig,solv}) \quad (1)$$

Each of these components are calculated based on the trajectory of the complex as well as the atomic interactions. Thus, equation (1) can also be written as equation (2):

$$G = E_{bnd} + E_{el} + E_{vdW} + G_{pol} + G_{np} - TS \quad (2)$$

In equation (2) the first three terms (E_{bnd} , E_{el} , E_{vdW}) are standard MM terms corresponding to bond, electrostatic and van der Waals (vdW) interactions. The polar and non-polar contributions are represented by G_{pol} and G_{np} . In the MM-P(G)BSA calculations, the polar contributions are estimated either using the GB model or PB equation. Contrastingly, the non-polar contribution is estimated by the solvent accessible surface area (SASA). The TS term refers to the absolute temperature (T) multiplied by the entropy (S). Entropy calculations are estimated using the normal mode analysis (Genheden and Ryde, 2015). Normal mode analyses have a large margin of error therefore introducing significant uncertainty. Additionally, these calculations are computationally expensive (Graham et al., 2013). As a result, entropy calculations can be omitted if comparisons are being made between ligands binding to the same protein.

1.15 Sequence-based methods in predicting protein interactions

In addition to the structural approach, sequence-based methods have also been employed to evaluate protein interactions (Rao et al., 2014). These methods are usually applicable to larger protein datasets since sequence information is available for most proteins as opposed to their structure (Sael et al., 2012) as discussed in 1.13.1. Additionally, a vast majority of protein functional information is maintained in the sequence databases (Sael et al., 2012). Examples of sequence-based methods include gene cluster methods, phylogenetic reconstruction, coevolution analyses and network-related methods (Liu et al., 2012).

In this study, we employed the use of phylogenetic reconstruction, coevolution analyses and Bayesian networks to evaluate various co-evolutionary resistance pathways in Gag-PR (chapter three).

1.16 Study significance, hypothesis and research aims

South Africa has one of the largest ARV programs, globally that is unfortunately coupled with limited access to third-line treatment regimens (NDOH, 2019). An important challenge of this

consequence is the development of ARV drug resistance. Consequently, the emergence of acquired drug resistance in South Africa is on the rise (Chimukangara et al., 2019). With two PIs, i.e. LPV and DRV on the forefront of second- and third-line treatment regimens, respectively, the emergence of PI resistance mutations is concerning as is the evidence supporting the accumulation of resistance mutations in Gag (Fun et al., 2012). More so, information regarding the way in which Gag-PR mutational patterns are evolutionarily selected and interact on a structural level is limited (Zhang et al., 2010). Additionally, in spite of the large amount of structural information available on subtype B proteins, limited studies have focused on subtype C itself (Costa et al., 2014).

Thus, the focus of this study was to elucidate the mechanisms by which Gag-PR coevolution can affect LPV and DRV resistance in HIV-1 subtype C. In doing so, we did not only evaluate the pathways to resistance but also the structural implications of complex resistance patterns in evading drug selection pressure.

1.16.1 Hypothesis

It is hypothesized that Gag-PR coevolution drives the accumulation of complex drug resistance mutational patterns. It is further hypothesized that interactions of these patterns of mutations can alter the molecular structure of Gag-PR to evade drug binding and maintain enzymatic function.

1.16.2 Research aims

Based on the hypothesis, two main aims were evaluated in this study:

- i.** To determine Gag-PR coevolution under drug selection pressure.
- ii.** To evaluate the structural mechanisms by which complex, coevolving resistance mutational patterns affect PI drug binding and Gag cleavage.

1.17 Thesis outline

This thesis is presented in six chapters as follows:

- **Chapter one** provides a literature review of the HIV discovery, diversity and ARV treatment with focus on PR and its natural substrate, Gag. This section also highlights several concepts surrounding protein structure and function.
- **Chapter two** highlights the drug resistance mutations in Gag and PR using sequences from a South Africa cohort and public databases. This chapter also pinpoints patterns of PRMs.

- **Chapter three** investigated Gag-PR coevolution and describes the probable pathways to LPV/r resistance using combination of phylogenetic methods and Bayesian network learning.
- **Chapter four** describes the structural implications of a pattern of PRMs on LPV and DRV binding in two South Africa viral PR sequences.
- **Chapter five** investigated the coevolutionary impact between the mutant A431V NC|p1 Gag CS and PRMs described in chapter four. The focus of this chapter was to elucidate the mechanism by which the CSs are favoured over the drugs.
- **Chapter six** provides a general discussion and conclusion highlighting the main findings observed in chapters two to five. It also provides a list of study limitations and future recommendations.

Chapter two

Detecting drug resistance mutations in Gag and protease

2.1 Introduction

The PIs are amongst some of the most potent ARVs currently used to treat HIV-1 infected patients (Midde et al., 2016). Although the success of PIs cannot be disputed, the development of drug resistance mutations can increase the risk of therapy failure (Kožíšek et al., 2012; Baxter et al., 2016; Tsai et al., 2017). Therefore, the selection of protease resistance mutations (PRMs) can limit the options available for treatment while possibly allowing for resistance to develop in the other drug classes within the treatment regimen (Barber et al., 2012). Hence, the identification and effective characterization of PRMs can aid in pre-treatment screening processes that can possibly lead to the reduced risk of treatment failure.

Whilst mutations in the viral PR are widely known to inhibit the effects of PIs (Shafer, 2017), mutations in Gag have been documented to do the same (Tamiya et al., 2004; Dam et al., 2009; Clavel and Mammano, 2010; Li et al., 2014). Though mutations in Gag are noted, their presence has not been considered in the selection of drug regimens for the current PIs. The ability of Gag and PR to behave as “partners in resistance” (Fun et al., 2012) emphasizes our disregard on the selection of Gag mutations in resistance outcomes. Moreover, as with PR, certain known PI-resistance or exposure associated mutations in Gag have been linked to certain PIs (Cote et al., 2001; Prado et al., 2002; Mo et al., 2007; Larrouy et al., 2010). This suggest that Gag follows a similar trend to PR when selecting mutations under drug selection pressure.

Although information for patient sequences, drug regimens with their predictive efficaciousness and genotyped data indicating PI-resistance is publicly available, this information is primarily based on subtype B (Li et al., 2013). As previously mentioned in section 1.2 of the literature review, subtype C is currently the most predominate subtype (Günthard and Scherrer, 2016). Although subtype associated differences in the development of drug resistance is still debatable (Lessells et al., 2012), subtype genetic diversity (Wainberg and Brenner, 2012; Santoro and Perno, 2013) and discrepancies in the selection of mutations between subtypes (Grossman et al., 2004; Sui et al., 2014) is still important to consider.

Here we assessed the prevalence of drug resistance mutations in Gag and PR in HIV-1 subtype C PI-treatment associated datasets from publicly available repositories combined with sequences from a KZN cohort. It should be noted that some of these data was previously analyzed by Singh (2015) and is being reassessed here to confirm former observations made in our lab as well as to contextualize later chapters.

2.2 Methods

2.2.1 Sequence dataset

The dataset consisted of HIV-1 viral sequences genotyped from South African patients failing a PI-inclusive treatment regimen. To increase the sample size of the dataset, Gag and PR sequences were also retrieved from two HIV public databases, as described below.

2.2.1.1 PR Cleavage Site (PCS) cohort

The PCS cohort consisted of patients recruited between 2009–2013 at McCords and King Edward VIII hospitals in Durban, South Africa. All PCS study participants were on a LPV/r-inclusive treatment regimen for at least six months at the time of enrolment. These participants had a viral load of >1,000 copies/mL. The median CD4 cell count was 135 cells/ μ L prior to treatment. CD4 data following drug therapy was not available for these patients. The number of PR and Gag sequences included in the dataset was dependent on whether the samples were successfully sequenced by previous students (Pillay, 2015; Singh, 2015). Consequently, 86 Gag and 130 treatment exposed PR sequences were included in the final dataset.

This retrospective study was approved by the Biomedical Research Ethics Committee (BE446/15) and can be viewed in Appendix E.

2.2.1.2 Sequences obtained from public databases

A total of 44 Gag and 2,316 treatment exposed PR sequences from HIV-1 subtype C infected patients were obtained from the HIV Stanford Drug Resistance (<https://hivdb.stanford.edu/>) and Los Alamos Sequence (<http://www.hiv.lanl.gov>) databases. To ensure confidence in the study observations, the patients had to be on at least one PI to be included in the dataset.

The control groups, obtained from the Los Alamos database comprised 2,610 and 7,303 HIV-1 subtype C Gag and PR sequences, respectively. The dataset obtained for the control groups followed a stringent search criterion where all sequences had to be ARV naïve.

2.2.2 Sequence analysis

Each Gag and PR treatment associated dataset was grouped separately for sequence alignment and downstream analyses. For quality control purposes, duplicates and sequences with hypermutations were detected using the Los Alamos ElimDupes and Hypermut tools (<http://www.hiv.lanl.gov>) and subsequently removed (Li et al., 2013) as shown in Figure 2.1 below. The Gag and PR sequences were then aligned against a drug naïve patient-derived subtype C reference sequence (accession number: AY772699) and the subtype B HXB2 reference strain (accession number: K03455) in MAFFT v.7.402 (Kato and Standley, 2013) and manually edited in BioEdit v.7.2.5 (Hall, 1999).

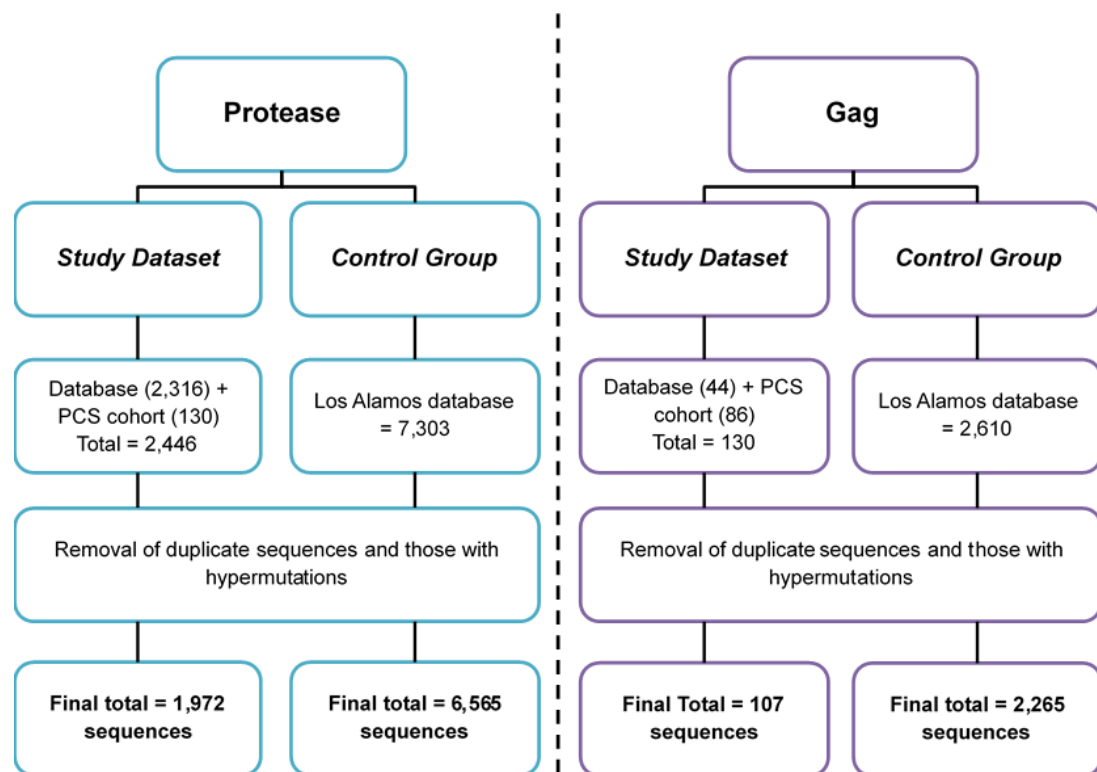


Figure 2.1 Overview of the study dataset and control groups utilized in this study for PR and Gag.

The RegaDB sequence analysis tool (www.rega.kuleuven.be/cev/regadb) was used to perform a codon-by-codon analysis on the sequence datasets. The sequence analysis tool compared each sequence to the reference sequences and calculated the presence or absence of a mutation at each amino acid (AA) position. The frequency of mutations at each AA position was then calculated per the following formula:

$$F (\%) = \frac{S}{N} \times 100$$

- F* : Frequency of each mutation
S : Sum of mutation
N : Total number of sequences at each position

Thereafter, the Stanford Resistance HIVdb algorithm (<http://hivdb.stanford.edu/>) was used to identify and interpret the PR drug resistance mutations. Mutations in Gag found associated with PI drug resistance or exposure was identified based on Fun et al. (2012).

2.2.3 Statistical analysis

The Fisher's exact test was performed to assess proportional differences of mutations between the treatment exposed and naïve Gag and PR sequence datasets. A p-value of <0.01 was considered statistically significant. The statistical tests were performed in SPSS v.25 (SPSS Inc., Illinois).

2.3 Results

2.3.1 Drug resistance mutations in PR

From the data analysis, 12 major PRMs and 20 amino acid variants were identified as seen in Figure 2.2. Overall, the highest percentage of mutations were identified at position 82 (25%). This was followed by positions 54 (23%) and 46 (19%). Interestingly, variation at these positions indicate that certain AAs are selected at a greater frequency than others. For example, mutation V82A (n=221; 23%) occurred at a higher frequency than V82C/M/S/T (n=23; 2%). This could also be seen for I54V (n=211; 22%) and M46I (n=157; 16%). Contrastingly, all other variants occurred at much lower frequencies (<3%), excluding L76V (n=70; 7%) and L90M (n=138; 14%). Of note, D30N, V32I, G48V, L76V, I84V, N88S and L90M were the only variants observed at these positions.

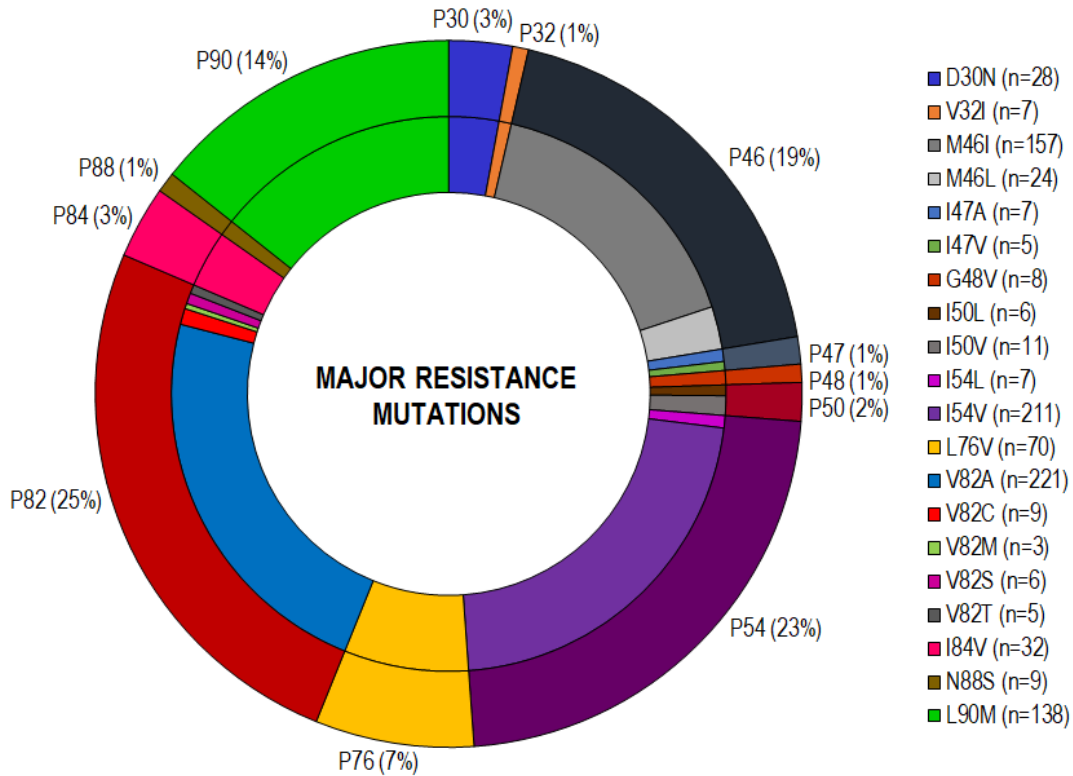


Figure 2.2 Proportion of position and specific major resistance mutations identified in the PR sequence dataset (only 964 out of the 1,972 PR sequences had major PRMs). **Outer ring:** Percentage (%) of overall mutations at a specific position. **Inner ring:** Proportion of specific amino acid variants. **Abbreviations:** P = position and n = total number of mutations at specific amino acid positions. **Note 1:** All amino acid variants were found significantly ($p < 0.01$) higher in the treated vs naïve groups. Only I47V ($p = 0.026$) and V82M ($p = 0.011$) were non-significant ($p > 0.01$). **Note 2:** Data from the naïve sequence dataset not shown.

Interestingly, several combinations of mutations ranging between one and six were observed amongst the major PRMs (Table 2.1). Apart from the mutations that occurred alone, one of the most commonly occurring combinations was M46I+I54V+V82A (red). In addition, this recurring pattern was also observed in many of the other combinations (i.e. combinations of 4–5) as highlighted in red in Table 2.1, including the most frequent combination of four M46I+I54V+L76V+V82A (purple). All other combinations varied and depicted no observable mutational pattern.

Table 2.1 Combinations of major resistance mutations identified in the 964 protease sequences. **Note:** Combinations ranged from one to six.

COMBINATIONS	n	COMBINATIONS	n	COMBINATIONS	n
ONE					
L90M	43	I50L	5	I47V	1
V82A	35	M46L	4	V82T	1
D30N	23	I47A	2	I84V	1
M46I	8	L76V	2	V82T	1
I54V	6	N88S	2		
TWO					
I54V+V82A	35	N88S+L90M	2	M46I+I84V	1
M46I+L90M	10	M46I+L76V	2	M46L+I47A	1
V82A+L90M	4	M46I+N88S	2	I47A+N88S	1
D30N+L90M	4	L76V+V82A	2	M46L+V82A	1
I54V+L90M	3	V32I+V82A	1	I54L+L90M	1
I54V+I84V	3	M46I+I50L	1	V32I+I47A	1
I84V+L90M	3	M46I+I50V	1	I54V+V82M	1
M46I+V82A	2	M46I+I54V	1	V82M+L90M	1
G48V+V82A	2	V32I+I47V	1	L76V+V82C	1
THREE					
M46I+I54V+V82A	43	I54V+V82S+L90M	2	M46I+V82A+L90M	1
I54V+V82A+L90M	13	M46I+I54V+L90M	2	M46I+L76V+L90M	1
M46L+I54V+V82A	7	I54V+V82A+I84V	2	G48V+I54V+V82T	1
I54V+L76V+V82A	5	M46I+I47A+I84V	1	I54L+I84V+L90M	1

M46L+V82A+L90M	4	V32I+I47A+V82A	1	V82A+I84V+L90M	1
M46I+I84V+L90M	3	M46I+L76V+V82A	1	D30N+I54V+V82A	1
I54V+I84V+L90M	3	M46I+N88S+L90M	1	I54V+V82C+L90M	1
M46I+I54L+L90M	2	M46L+I47A+N88S	1		
FOUR					
M46I+I54V+L76V+V82A	35	M46I+I54V+L76V+I84V	2	M46I+I54V+L76V+V82M	1
M46I+I54V+V82A+L90M	8	M46L+G48V+I54V+V82S	1	M46I+I50V+I54V+L90M	1
M46I+I50V+I54V+V82A	6	V32I+ M46I+I54V+V82A	1	M46L+I54V+V82C+L90M	1
M46I+I54V+I84V+L90M	2	G48V+I54V+V82T+L90M	1	I54V+V82T+I84V+L90M	1
M46I+I54L+L76V+I84V	2	M46I+I54V+V82C+I84V	1	V32I+I54L+L76V+V82A	1
G48V+I54V+V82S+L90M	2	M46I+I54V+V82T+L90M	1		
M46L+I54V+L76V+V82A	2	I54V+V82A+I84V+L90M	1		
FIVE					
M46I+I54V+L76V+V82A+L90M	8	M46I+I50V+I54V+L76V+V82A	1	V32I+M46I+I54V+L76V+I84V	1
M46I+I50V+I54V+V82A+L90M	2	M46I+I47V+I54V+L76V+V82A	1	M46L+G48V+I54V+V82S+L90M	1
M46I+I54V+L76V+V82C+I84V	2	M46I+I47V+I54V+V82C+L90M	1		
M46I+I54V+V82A+I84V+L90M	1	M46I+I47V+I54V+L76V+V82C	1		
SIX					
M46I+I54V+L76V+V82C+I84V+L90M	2				

Note: n – frequency of occurrences observed within the study group.

Additionally, several resistance-associated mutations occurred at varying frequencies as seen in Figure 2.3. Of these, 12 were classified as non-polymorphic, minor resistance mutations and four as other, polymorphic PI accessory mutations by the HIVdb algorithm. Excluding positions 10 (16%), 20 (5.9%), 71 (6.1%) and 74 (16.8%), variation at the remaining positions were infrequent, occurring at 2.1% or less. The most common variants at these positions included L10F (n=126; 6.4%), L10I (n=107; 5.4%), A71V (n=111, 5.6%) and T74S (n=311; 15.8%).

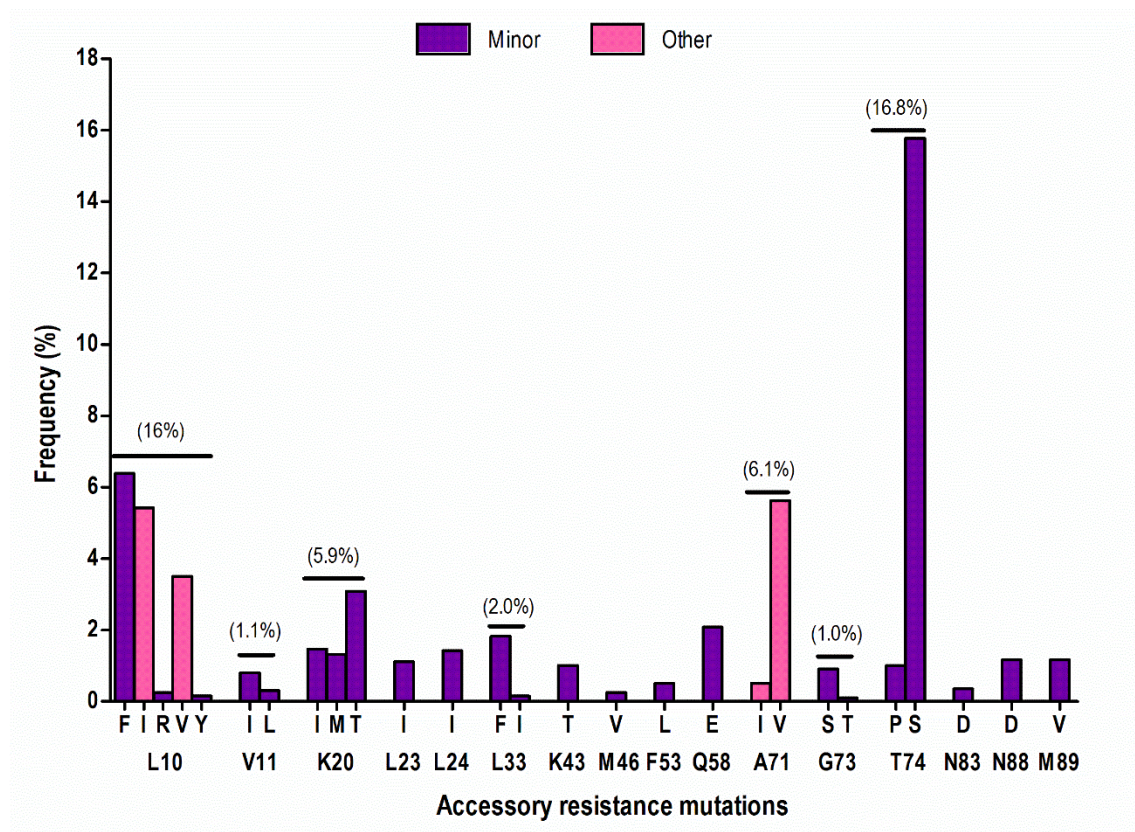


Figure 2.3 Frequency of accessory resistance mutations¹² identified in the viral PR with known, non-polymorphic, minor mutations represented by the purple bars and other, polymorphic mutations identified during drug resistance represented by the pink bars. **Note 1:** For those with multiple amino acid variants, the cumulative percentage is displayed above the coloured bars. **Note 2:** All amino acid variants were found significantly ($p < 0.01$) higher in the treated ($n = 1,972$) vs naïve ($n = 6,565$) groups except for L10V ($p = 0.000$), V11I ($p = 0.270$), K20M ($p = 0.000$) and T74S ($p = 0.000$) which occurred more frequently in the control groups. **Note 3:** Data from the naïve control dataset not shown.

¹² The Stanford HIVdb algorithm classifies PR's accessory resistance mutations in two ways: i) non-polymorphic, accessory/minor resistance mutations that are associated with reduced susceptibility to PI drugs and as ii) other, polymorphic, accessory mutations that can increase viral replication with PI-resistance mutations.

2.3.2 Gag mutations associated with PI resistance/exposure

As the concept of PI drug resistance associated with mutations in Gag is still gaining momentum, there are currently no software-based tools that can identify resistance mutations in Gag based on the sequence dataset. Consequently, manual methods of identification are required based on previously published works. The review conducted by Fun et al. (2012) provides a comprehensive list of resistance associated mutations in Gag that were determined based on *in vitro* studies. The paper also goes on to classify these mutations as either resistance associated, i.e. they were found to directly impact PI resistance, or exposure associated (those that arose as a result of PI exposure but may not have had a significant impact of drug resistance). Therefore, based on Fun et al. (2012), a total of 30 Gag mutations were identified in the Gag treated sequence dataset. These mutations were further grouped into two categories, comprising 11 resistance and 19 exposure associated mutations.

The resistance associated mutations included R76K, Y79F, T81A, V128I, Y132F, A431V, K436R, I437V, L449F/P/V, R452K and P453L/T as shown in Figure 2.4. Amongst these, CS mutations A431V (NC|p1), L449F (p1|p6) and R452K (p1|p6) revealed significantly ($p < 0.01$) higher frequencies in the treated versus naïve groups whilst the remaining mutations occurred at comparable, non-significant ($p > 0.05$) frequencies in both sequence datasets.

This suggests that unlike the CS mutations which occurs to actively play a role in drug resistance (i.e. genetic selection), the other resistance-associated mutations possibly occur more randomly but aids in resistance when present under drug selection pressure.

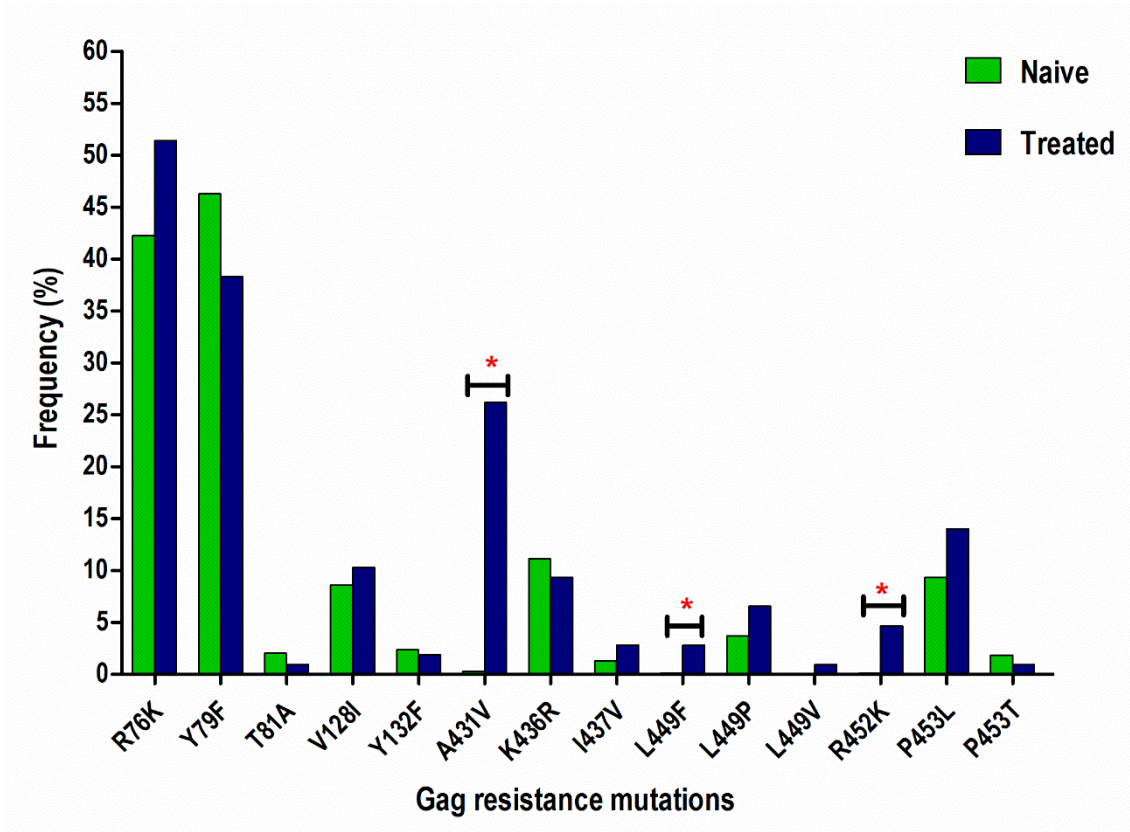


Figure 2.4 Frequency of Gag resistance-associated mutations in the treated (n=107) versus naïve (n=2265) sequence datasets. Significant differences ($p < 0.01$) are denoted by the red asterisks (*).

Figure 2.5 provides an overview of the known PI exposure associated Gag mutations identified in the sequence dataset. Accordingly, mutations K62R, N373P, I401V, R409K and S451T were significantly ($p < 0.01$) higher in the treated versus naïve group. Additionally, apart from N373P and S451T which are p2|NC and p1|p6 CS mutations, respectively, all other mutations were detected at non-CS positions.

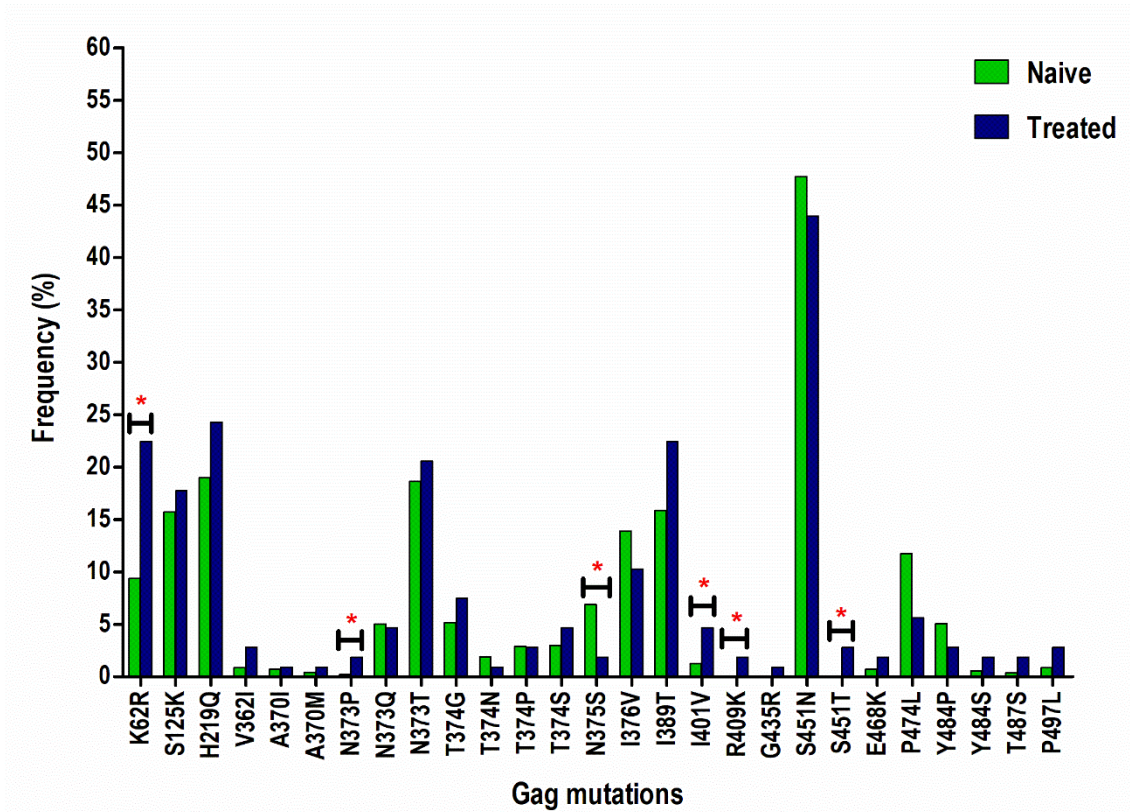


Figure 2.5 Frequency of Gag exposure-associated mutations in the treated (n=107) versus naïve (n=2265) sequence datasets. Significant differences ($p < 0.01$) are denoted by the red asterisks (*).

2.3.3 Identification of presumptive Gag resistance associated mutations

To identify presumptive Gag resistance-associated mutations, the frequencies of mutations in the treated versus naïve groups were compared. Accordingly, mutations that occurred significantly ($p < 0.01$) greater than 10% in the treated versus naïve group were considered resistance associated mutations.

Twelve presumptive Gag mutations were identified in the sequence dataset, as depicted in Figure 2.6. Interestingly, these mutations were only found at non-CSs. Of the 12 mutations, six (T53N, S54A, Q69K, D122T, S125D and N126E) were identified in matrix (p17), four (D260E, I256V, D319E and R335K) in capsid (p24) and two (P485A and L498S) in p6. No mutations were identified in the NC domain.

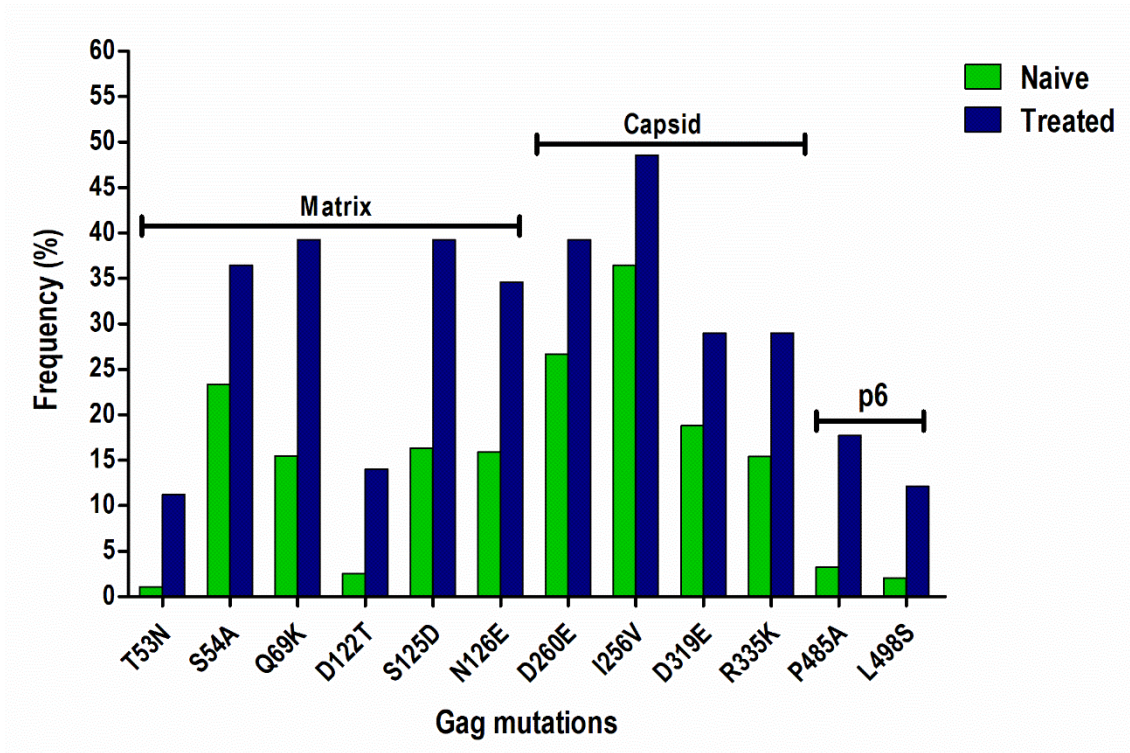


Figure 2.6 Frequency of presumptive Gag resistance-associated mutations identified in the treated (n=107) versus treatment naive (n=2265) sequence datasets.

2.4 Discussion

Using a large HIV-1 subtype C dataset comprised of publicly available sequences and those of patients recruited in KZN, this study identified various PI-resistance mutations previously linked to both PR and Gag. Additionally, several presumptive Gag mutations associated with PI-resistance/exposure were also identified.

These data revealed that out of the 1,972 PR sequences, only 964 (49%) harboured major PRMs. As such, more than half (51%) of the PR sequence dataset did not present with drug resistance mutations, suggesting that non-adherence is a prominent factor in the development of resistance mutations, as reported by other studies (Levison et al., 2011; Wallis et al., 2011; Court et al., 2016; Kyaw et al., 2017).

In this study positions 82, 54 and 46, having the highest percentage of variation, are in the active site (82) and flap regions (46, 54) of the viral PR and are therefore integral for substrate cleavage (Saleh et al., 2017). As such, mutations at these positions can aid the virus in outcompeting the inhibitor for more efficient cleavage and subsequently escape drug selection pressure (Liu et al.,

2008; Weber and Agniswamy, 2009; Yu et al., 2015). Additionally, the selection of specific mutational variants (M46I, I47A, G50V, I54V, V82A) over others (M46L, I47V, G50L, I54L, V82CMST) at these positions suggests that AA selection also has an important role in maintaining protein functionality when resistance is induced. Dwyer (2001) showed that the electronic characteristics¹³ of an AA could be comparable to the effect of hydrophobicity on the conformational preferences during protein folding. In this study, the frequently occurring triplet of M46I+I54V+V82A are described as common PI-resistance mutations by the Stanford Drug Resistance Database in ATV/r¹⁴, FPV/r, IDV/r, LPV/r² and NFV/r (Appendix D; Figures 1–2). Moreover, the selection of L76V in conjunction with the above mutations, as observed in this study, has been shown to not only enhance LPV/r resistance (Young et al., 2010) but also allows for low-level DRV/r resistance to occur (HIVdb algorithm; Appendix D; Figure 3).

Whilst several accessory PI mutations were observed in this study, the most prevalent included L10F/I, A71V and T74S. The L10F/I mutations have been linked to reduced susceptibility and/or increased replication capacity to numerous PIs when found associated with other resistance mutations (Prado et al., 2002; Rhee et al., 2010; De Luca et al., 2016; Aoki et al., 2018). The polymorphic A71V mutation has been found in association with other PI-resistance mutations in numerous studies (Shafer et al., 2007; Lopes et al., 2015; Huang et al., 2017; Pessôa and Sanabani, 2017). Although the role of A71V is largely unknown (Gonzalez et al., 2008), a study conducted by Chang and Torbett (2011) revealed that in combination with I84V, A71V restored the structural stability of the PR to within 1°C of the WT¹⁵. The high prevalence of T74S observed in this study was consistent with other studies investigating the selection of drug resistance mutations in patients receiving a PI-inclusive treatment regimen (Taylor et al., 2011; Etta et al., 2017; Lu et al., 2017). Although T74S is polymorphic in most non-B subtypes (Deforche et al., 2006), its presence in treatment-associated outcomes suggests that it provides a selective advantage and can either improve or maintain viral replication capacity in the presence or absence of PR resistance mutations, respectively.

¹³ Electronic characteristics refers to the physico-chemical nature of the amino acid side chains such as the hydrophobicity, pKa, steric effects (bulk of the side chain), etc. Thus, these characteristics were used to provide a scale: O (strong electron donor), U (weak donor), Z (ambivalent), B (weak electron acceptor) and X (strong acceptor) (Dwyer, 2001).

¹⁴ High-level drug resistance.

¹⁵ In other words, there was only a 1°C difference in the melting temperature between the WT and mutant when measured using Differential Scanning Calorimetry. Therefore, the mutant is comparatively stable.

Of the 11 resistance-associated Gag mutations, only the A431V (NC|p1), L449F (p1|p6) and R452K (p1|p6) mutations were found significantly higher in the treatment exposed versus naïve sequence dataset (Figure 2.4). The A431V mutation has been linked to several PIs, including LPV/r (Mammano et al., 1998; Cote et al., 2001; Mo et al., 2007; Nijhuis et al., 2009). In this study, the A431V mutation was found in 26% (n=107) of the viral Gag sequences. It has been shown to confer resistance in the absence of major PRMs (Dam et al., 2009; Nijhuis et al., 2009) and act in a compensatory manner when PRMs are present by improving viral fitness (Mammano et al., 2000; Cote et al., 2001). This mutation often occurs with major PRMs, V82A (Bally et al., 2000; Malet et al., 2007) and M46I/L (Myint et al., 2004). A study conducted by Nijhuis et al. (2009) on subtype B infected patients receiving a LPV/r-inclusive treatment regimen revealed that A431V was also selected in viruses comprising an M46I+L76V PR double mutant, increasing LPV/r resistance by 10.6-fold and improving viral replication capacity by 10%. Contrastingly, Myint et al. (2004) revealed that A431V had deleterious effects on the replication capacity of D30N, N88D and L90M PR mutants suggesting that A431V is synergistically co-selected with specific PRMs.

Unlike A431V, the L449F mutation increased viral replication capacity in the PR mutants observed in the Myint et al. (2004) study. This mutation has been shown to reduce the susceptibility of various PIs when combined with major PRMs D30N/N88D and with V82A or L90M in subtype B (Fun et al., 2012). However, unlike A431V, L449F cannot confer resistance alone (Fun et al., 2012), and instead acts in a solely compensatory role (Yates et al., 2006; Girnary et al., 2007; Kolli et al., 2009). Recently, in a structural study investigating the effects of p1|p6 CS mutations on an I50V+A71V subtype B PR mutant, Özen et al. (2014) demonstrated that L449F increased the van der Waals forces in the enzyme-substrate complex, thereby restoring PR's active site dynamics. Similar to L449F, the R452K Gag mutation, frequently occurring with D30N/N88D, I84V and I50V, has a compensatory role during PI-selection pressure (Kolli et al., 2009).

Additionally, several Gag mutations associated with PI exposure were identified in this study, five (G62R, S373P, I401V, R409K and S451T) of which occurred at significantly higher frequencies in the treated dataset (Figure 2.5). Although the G62R mutation occurred in 22% of the Gag sequence dataset in this study, its role in resistance is not yet understood (Koh et al., 2009). In a study investigating a novel PI (GRL-02031) against a multi-drug resistant PR, Koh et al. (2009) observed that G62R along with three other Gag mutations developed upon a 37th passage after exposure to GRL-02031 on MT-4 cell lines. Interestingly, one of the other mutations

found in the Koh study included NC mutation, R409K. Despite evidence linking R409K to APV/r (Gatanaga et al., 2002; Aoki et al., 2009), these studies did not report changes to APV susceptibility *in vitro*. As such, its role in PI-resistance is unclear. However, Stray et al. (2013) reported that R409K together with five other Gag mutations was able to reduce the efficacy of a novel PI (GS-8374) by 14-fold after >300 days of passage on MT-2 cell lines. This study suggests that since only one polymorphism was selected in PR, the Gag mutations were selected to confer resistance, playing a role as primary resistance mutations. In a similar manner to R409K, NC mutation I401V has been linked to treatment failure (Myint et al., 2004), however the mechanism by which it acts is not understood.

This study identified two Gag CS PI-exposure associated mutations (S373P and S451T). Codon 373 of the p2|NC CS is highly variable and comprises three mutational variants (S373P/Q/T) that are associated with PI-exposure (Fun et al., 2012). The S373P mutation has been linked to LPV studies in subtype B (Mckinnon et al., 2011; Sutherland et al., 2014) and in CRF02_AG (Teto et al., 2017). The S451T mutation in the p1|p6 region has been associated with LPV in subtype B (Masse et al., 2007) and DRV in the POWER¹⁶ trials (Dierynck et al., 2007).

Finally, 12 presumptive resistance associated mutations spanning the MA, CA and p6 regions of Gag were also observed (Figure 2.6). Previous data from our lab identified only two of the 12 presumptive Gag mutations, namely, Q69K and I256V (Singh, 2015). However, the dataset was considerably smaller (954 subtype C naïve and 54 acutely infected individuals vs. 80 PI-treated individuals) than what was used in the current study. While mutations outside the Gag CSs have been linked to drug resistance (Gatanaga et al., 2002; Callebaut et al., 2011; Parry et al., 2011), the numerous functional roles of MA, CA and p6 as discussed in section 1.10 of the literature review, suggests that mutations in these domains arise to maintain proper function at various stages in the virus's lifecycle rather than affecting resistance in a more direct manner, like the CS mutations (van Maarseveen et al., 2012).

2.5 Conclusions

The aim of this chapter was to identify the selection of drug resistance mutations in Gag and PR in treatment vs naïve groups. In this study, several major PRMs, mostly associated with LPV/r were identified. Using a large dataset, these data supported previous findings observed in our lab

¹⁶ The POWER trials were clinical trials used to evaluate the efficacy and safety of Darunavir with low dose Ritonavir in comparison to other PIs.

(Singh, 2015) on the selection of M46I+I54V+V82A as well as several studies reported elsewhere (Van Zyl et al., 2013; Grossman et al., 2014). Moreover, the inclusion of L76V to this triple combination was not only a prominent feature of the findings observed in this study but also of those reported by Singh (2015). Additionally, these data indicated that certain Gag mutations, specifically A431V, appears to play a role in treatment associated outcomes. Therefore, chapter three investigated Gag-PR coevolution to evaluate how mutations in PR and Gag interact in pathways leading to LPV/r resistance.

Chapter three

Evaluating the coevolving nature of the HIV-1 Gag-protease proteins under ARV drug selection pressure

--This chapter was adapted from our research publication entitled “*Gag-protease coevolution shapes the outcome of Lopinavir-inclusive treatment regimens in chronically infected HIV-1 subtype C patients*”.

V. Marie and M. Gordon, *Bioinformatics*, Published Ahead of Print, doi:
10.1093/bioinformatics/btz076

3.1 Introduction

As mentioned previously (see section 1.9.4 of chapter one), LPV/r and DRV/r are two HIV-1 PIs that have the highest genetic barriers, requiring at least three mutations in LPV/r and more in DRV/r for high-level drug resistance to occur (Doherty et al., 2011). Consequently, the multi-step mechanism and high genetic barrier of these PIs results in a complex combination of mutational pathways leading to drug resistance (Rabi et al., 2013). Although many combinations of PI mutations occur, some are more frequent than others suggesting that these patterns of mutations are not occurring at random (Zhang et al., 2010).

However, recognizing Gag-PR coevolution and its role in facilitating alternative pathways to PI resistance is crucial. Despite our knowledge on the impact of PRMs on therapy failure, the introduction of Gag mutations with PR remains largely unclear (Li et al., 2014). Since protein coevolution can result in mutations at functionally important sites (Chakrabarti and Panchenko, 2010), the intimate interactions of Gag and PR during viral maturation can allow these proteins to coevolve and subsequently escape drug selection pressure (Giandhari et al., 2016). Therefore, it is important to understand these resistance dynamics to fully elucidate the pathways leading to drug resistance and ultimately therapy failure.

Here we used Bayesian network learning (BNL), which is a statistical model that describes the conditional independencies between a set of variables (Pearl, 1998), to elucidate pathways leading to LPV/r failure. To identify the sites at which coevolving Gag and PR residues occur, we utilized a coevolution sequence analysis tool and conducted a positive selection analysis. Finally, using these data we evaluated the multivariable effect of Gag and PR mutations. To the best of our knowledge, this is the first study used to explore the combined effects of Gag and PR mutations in pathways to LPV/r resistance.

3.2 Methods

3.2.1 Sequence dataset

Fifty-Eight complete Gag and PR sequences were retrieved from the PCS cohort as described in section 2.2.1.1 of chapter two. Noteworthy, unlike the other 57, one patient was on another PI (i.e. Ritonavir) during first-line before switching to LPV/r and failing second-line treatment, like the other 57 patients. Prior to concatenation, the Gag, PR and reference sequences were aligned

and manually edited as described in chapter two, section 2.2.2. The final concatenated sequence alignment length was 1,797 nucleotides.

3.2.2 Phylogenetic reconstruction

Phylogenetic trees were constructed in MrBayes v.3.2 (Ronquist et al., 2012) for Bayesian inference (BI) and RaxML v.8.1.17 (Stamatakis, 2014) for maximum-likelihood (ML) estimation. Prior to tree generation, the best-fitting nucleotide substitution model was determined according to the Akaike Information Criterion (AIC) using jModelTest. The GTR+I+G model selected by AIC, together with the likelihood calculations, was used to modify the following parameters in the MrBayes block: revmatpr = dirichlet (1.9444, 6.2812, 1.0534, 1.0472, 8.3907, 1.0000), statefreqpr = dirichlet (0.3750, 0.1868, 0.2374, 0.2008), shapepr = fixed (0.6600) and pinvarpr = fixed (0.3860). Tracer v.1.5 (<http://beast.bio.ed.ac.uk/software/tracer>) was used to assess the prior and posterior distributions, following which 25% of the samples were discarded as burn-in and a consensus tree was generated. The RaxML trees were generated via 1000 steps of rapid bootstrapping and a ML search with model parameters estimated up to 0.001. FigTree v.1.4.3 (<http://tree.bio.ed.ac.uk/software/figtree/>) was used to observe the topology of the phylogenetic trees and the Java-based application Compare2Trees (<http://www.mas.ncl.ac.uk/~ntmwn/compare2trees/index.html>) was used to compare tree topology between the two methods.

3.2.3 Identifying positive selection

To examine the selection pressure in Gag-PR, the rate ratio of non-synonymous to synonymous (ω) substitutions were estimated using the CodeML program in the PAML 4.0 package (Yang, 2007). Accordingly, $\omega < 1$, $\omega = 1$, $\omega > 1$ assumes purifying, neutral and positive selection, respectively. The ω value and likelihood estimates were calculated for three pairs of site models: M0 (one ω) vs M3 (discrete), M1a (nearly neutral) vs M2a (positive selection) and M7 (beta) vs M8 (beta & $\omega > 1$). Using the likelihood ratio test (LRT), the statistical significance between pairs of site models were used to assess the model fit to the data and indicate positive selection. Briefly, the LRT is twice the log-likelihood difference between each pair of models [$2\Delta\ell = 2(\ell_1 - \ell_0)$]. Since the LRT follows an asymptotically chi (χ^2) distribution with the number of degrees of freedom calculated in the difference of free parameters, it can be used to test if the null model is accepted against the alternative model (p-value). Thereafter, the Bayes Empirical Bayes method was used to identify specific sites under positive selection.

3.2.4 Evaluating the coevolving nature of Gag-PR

The Coevolution Analysis for Protein Sequences (CAPS) program (Fares and Travers, 2006) was used to evaluate Gag-PR coevolution. Briefly, the time-dependent evolutionary variation identifies the coevolving AA sites e and k by comparing the transition of AAs at sequences i and j ($\theta_{ek}ij$). The evolutionary variation is estimated using a blocks substitution matrix (BLOSUM) and the transitions of AAs are corrected by calculating the divergence time of sequences i and j . The comparison of 5000 randomly sampled estimates were used to identify the coevolving codons. Furthermore, CAPS corrects for multiple tests of non-independence data by a step-down permutation procedure.

3.2.5 Mapping resistance pathways with BNL

BNL was performed using the B-Course software (Myllymäki et al., 2002). The BNL dataset consisted of an equal amount of HIV-1 subtype C PI-naïve sequences of Gag-PR (obtained from the Los Alamos Database). Only mutations greater than a 10% prevalence in the treatment exposed and naïve sequence datasets were included in the network. Two networks were generated, one independently constructed for PR whilst the second incorporated variables from Gag-PR to observe a compounded effect. The robustness of the networks was assessed with a non-parametric bootstrap analysis of 5,000 replicates calculated in R. Additionally, for every resampled dataset, BNL was performed again in B-course to ensure the dependencies observed in the networks remained unchanged after multiple comparisons. In the networks, nodes are the colour coordinated variables while arcs are the arrows connecting them. Variables belonging to the same position are grouped together. While BNL implies bi-directionality wherein the presence of a mutation affects the prevalence of another mutation, arc direction does not indicate causality. Instead, arc direction allows a multivariable effect to be observed based on individual mutation conditional dependencies (Deforche et al., 2006).

3.3 Results

3.3.1 Tree reconstruction and the detection of positively selected Gag-PR sites

To evaluate the selection pressure and coevolution of Gag and PR, phylogenetic trees were inferred using ML and BI methods. Tree topologies for both the ML and BI methods were similar with an overall topological score of 93.67% as observed in Figure 3.1.

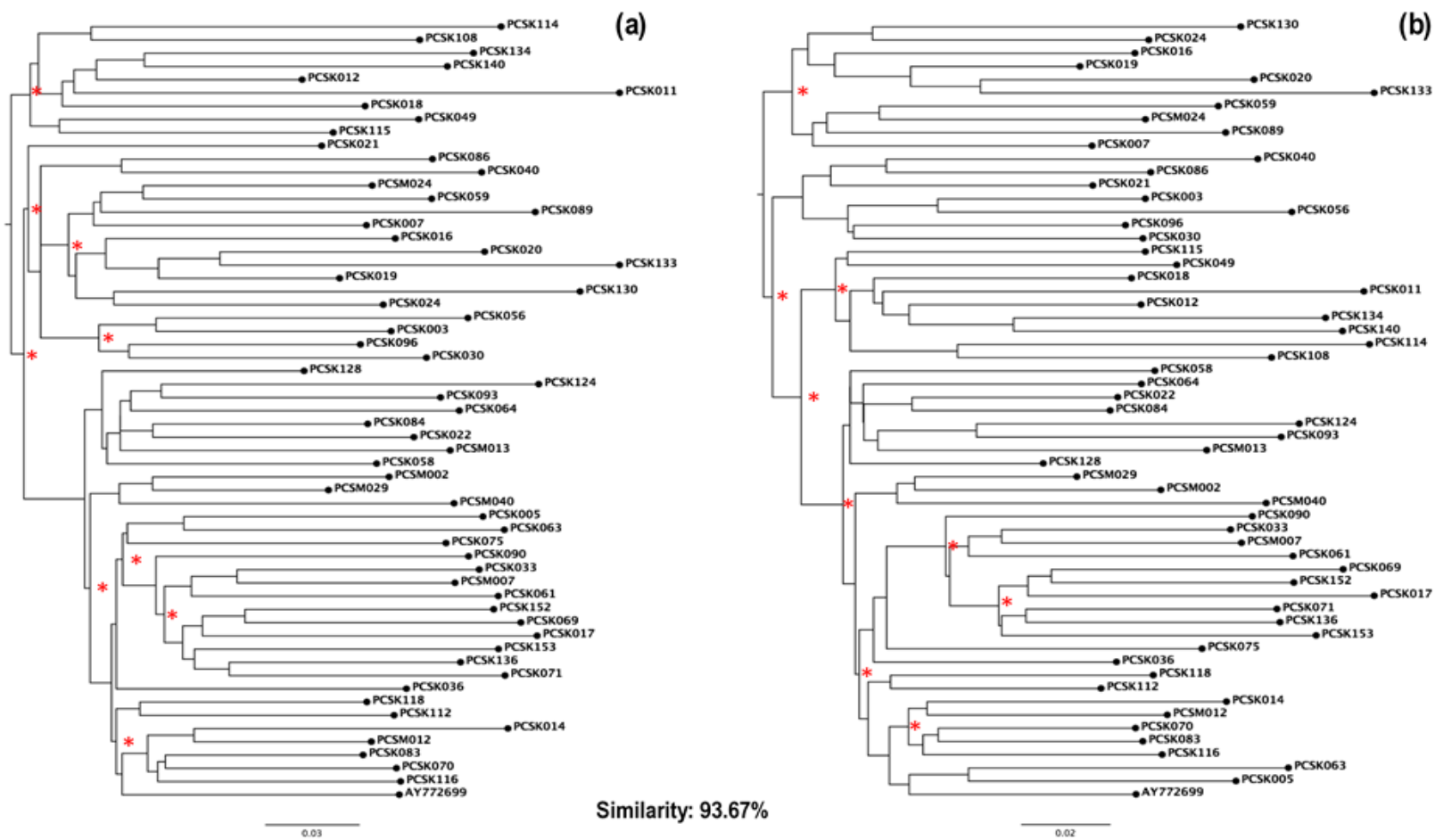


Figure 3.1 Phylogenetic reconstruction of the Gag-PR sequences showing (a) maximum-likelihood (ML) and (b) Bayesian inference (BI) trees. Bootstrap support from 1000 replicates (ML) and posterior probabilities (BI) >70% are shown by the red asterisks (*). Similarities between the trees as computed by the Java-based application Compare2trees is indicated below the figure.

The PAML package identified 24 positively selected sites at the posterior probability level of greater than 99% as seen in Figure 3.2. Out of the 24 positively selected sites, three were from PR, namely codons L10, L63 and V82. While codons 10 and 82 are sites at which drug resistance mutations occur, codon 63 is regarded as one of the most variable sites in PR. In Gag, 21 positively selected sites were identified including eight in MA, seven in CA, three between the p2 and NC regions as well as three in the p6 domain. Interestingly, four codons linked to PI exposure associated mutations, namely A62, N374, S381 and P474 were identified (Figure 3.2) while only one PI resistance associated codon (Y79) was selected by the CodeML analysis.

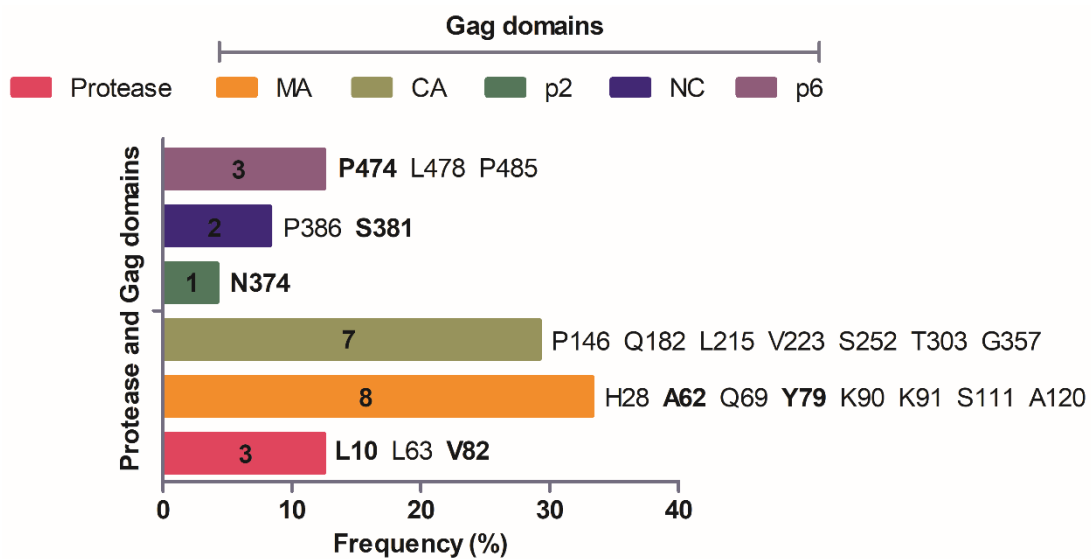


Figure 3.2 Frequency of the positively selected amino acid codons in Gag and PR. The numbers within the coloured bars indicate the number of codons selected at a specific region. **Note:** Bold font – sites associated with drug resistance/exposure mutations.

3.3.2 Gag and PR coevolution

Similarly, to previously reported studies (Travers et al., 2007; Codoñer et al., 2017), we used CAPS to identify several coevolving Gag-PR residues under drug selection pressure. Our analyses revealed significant correlations in PR between codons at which minor (10, 24 and 58) and major (46, 54 and 82) PRMs occur. Furthermore, an overlapping coevolving codon group of 10, 46, 54 and 82 was also observed. Interestingly, out of these codons, 10 and 82 was also positively selected by PAML (Figure 3.2). Finally, Table 3.1 describes the PRMs identified by the CAPS analysis and their structural location in PR.

Table 3.1 Protease amino acid codons identified in the coevolution analysis.

Residue in Protease	Structural Position	Classification ^a	Common Mutations ^b
10	10's loop	Minor	L10F/I/R/V/Y
16	10's loop	Other	?
20	Core domain	Minor	K20I/M/R/T/V
24	Active site region	Minor	L24F/I
33	Core domain	Minor	L33F/I/V
46	Flap region	Major	M46I/L/V
54	Flap region	Major	I54A/L/M/S/T/V
58	Core domain	Minor	Q58E
63	60's loop	Other	L63P
71	Core domain	Other	A71I/L/T/V
77	Core domain	Other	V77I
82	Active site region	Major	V82A/C/F/I/L/M/S/T
90	Core domain	Major	L90M

^a Mutations were classified accordingly: *major* or primary resistance mutations are known to directly cause drug resistance, *minor* or accessory resistance mutations arise at a later stage to compensate for the changes associated with major mutations, and *other* refers to mutations or polymorphisms classified as neither a major or minor resistance mutation.

^b Mutations obtained from the Stanford HIV drug resistance list.

Several codons in Gag found associated with PI resistance and/or located at the Gag CSs including E365, S373, A374, A431, R452 and Q474 were identified. Of interest was codon 431 which is commonly associated with Gag CS resistance mutation A431V (see chapter two, Figure 2.3). Although A431 only correlated with polymorphic codon 77 in PR, it had a significant role in a pathway leading to LPV/r failure which is discussed in the Gag-PR network below.

3.3.3 Most probable network in PR

Using BNL we determined the most probable network for PR under drug selection pressure (Figure 3.3A). Twenty variables including the LPV/r treatment node were present in the final dataset. Of these, six were LPV-associated resistance mutations and 14 were WT/polymorphic AA residues. The BNL revealed two probable pathways to LPV/r resistance. The first pathway involved a direct association between treatment and 54V as parent. Through 54V, the pathway revealed direct associations between 10F and 82A+46I, with the combination 46I+54V+82A commonly seen in LPV failure. A direct inverse connection between resistance mutation 76V and

WT L24 as well as an indirect inverse connection between 82A and WT Q58 connects 76V to triple combination 46I+54V+82A. The second pathway connected 82A with LPV/r via the subtype C signature mutation L93 as child.

3.3.4 Most probable network for Gag-PR

The most probable Gag-PR network comprised 35 variables including the LPV/r treatment node (Figure 3.3B). Together with the six PRMs described in Figure 1A, 10 variables from Gag was included in the final dataset. Interestingly, instead of altering the interactions observed in PR (Figure 3.3A), the Gag mutations added to the existing network and mostly correlated with other Gag mutations. In terms of resistance pathways, a direct association was observed between LPV and 54V via P63 (through an inverse association with 63L). While 54V maintained its association with 46I+82A, Gag mutation 431V correlated with this combination. Moreover, a strong direct association linked 10F with 431V. Unlike its dependency on Q58 and L24 in the PR network, L76V was also found associated with 46I, occurring after the 46I+54V+82A combination. Noteworthy was Gag polymorphic variable 69K which formed a parent arc with the LPV treatment node.

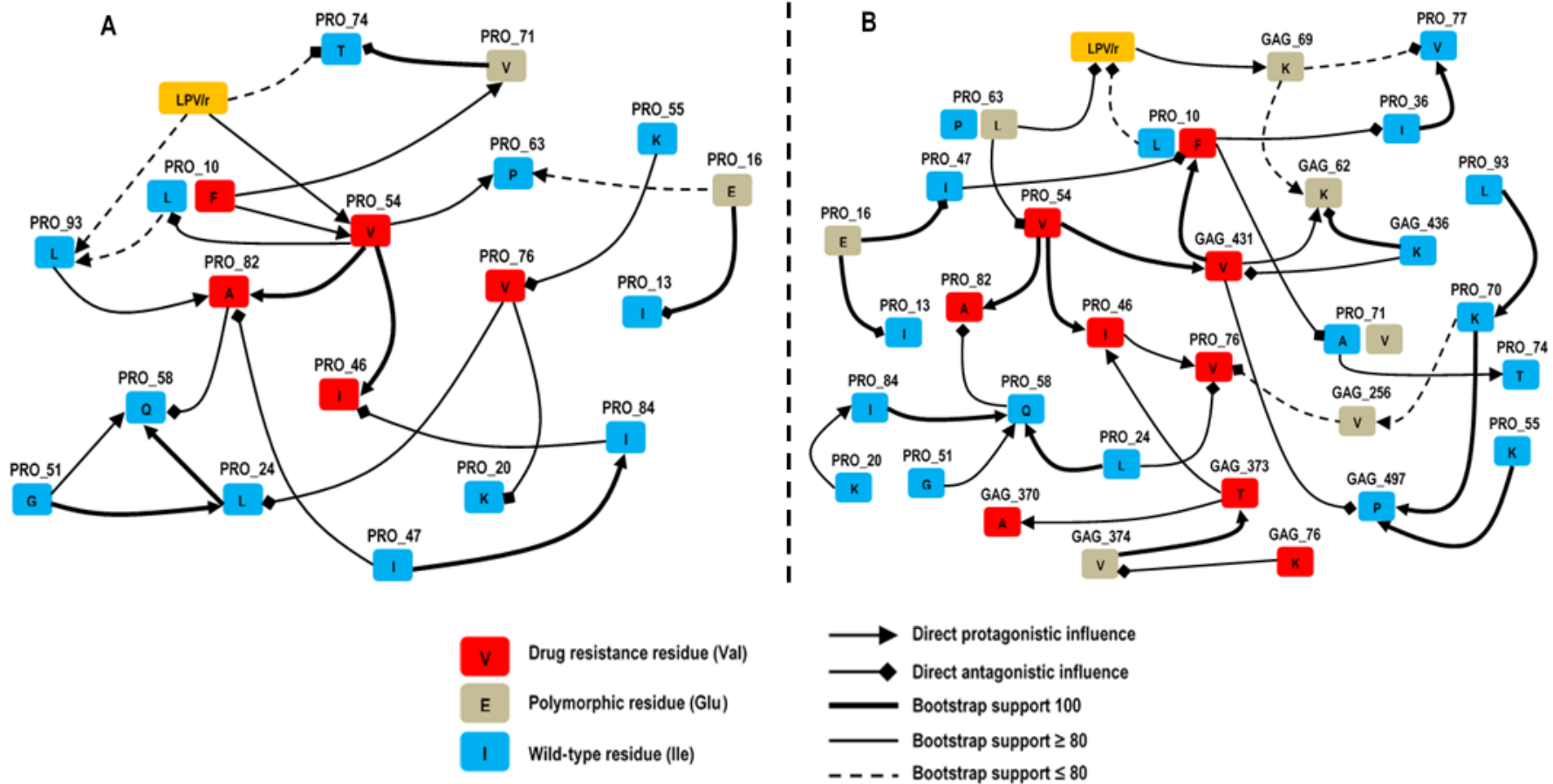


Figure 3.3 Most probable network showing associations between drug resistance mutations, polymorphisms, wild-type residues and Lopinavir (LPV/r) treatment in **(A)** protease and **(B)** Gag-protease. Arc thickness represents bootstrap support. **Note:** Arc direction does not represent the order of accumulation of mutations or causality but may indicate a multivariable effect in the network.

3.4 Discussion

Using a combination of phylogenetic and Bayesian statistical inferences, we identified several positively selected and coevolving Gag-PR sites under drug selection pressure and used this information to construct Bayesian networks to identify pathways to LPV/r resistance.

In the context of evolution, reconstructing ancestral phylogeny is crucial since phylogenetic trees can provide information on the evolutionary history of genes (Soltis and Soltis, 2003). Maximum-likelihood and Bayesian methods use probabilistic approaches to estimate tree topologies. Usually, statistical nodal support is calculated by random alignment resampling with replacement in a technique known as bootstrapping. Although acceptable, interpreting bootstrap values is challenging (Hassan et al., 2017). Instead of inferring the single most probable tree observed in ML, Bayesian methods produce a set of credible trees (0.95 CI¹⁷) that reflects the posterior probability topology given the data (Paraskevis et al., 2004; Hassan et al., 2017). In comparison to bootstrapping, Bayesian posterior probability has been suggested to be less biased in phylogenetic accuracy (Hassan et al., 2017). Therefore, in this study, both ML and BI methods were used to construct the phylogenetic trees. To obtain an effective sample size (ESS) >200 in BI, the Markov chain Monte Carlo (MCMC) length was set to 10,000,000. With only a 6.33% difference between the ML and BI topologies, the trees were considered acceptable for the positive selection and CAPS analyses as discussed below.

Positive selection is the acquisition of advantageous mutations. These signature mutational patterns contribute towards functional protein shifts (Qian et al., 2017) and has been widely studied using codon substitution models (Romero et al., 2016). In this study, a comparison of different site models revealed that models allowing for positive selection (M2a and M8) fit the data better than their counterparts (M1a and M7). Although most sites were under a strong purifying selection, several of the positively selected sites were mostly located in Gag. Similarly, CAPS revealed that most coevolving sites were found in Gag than PR. Taken together, this suggests that Gag can tolerate mutational changes better than PR. Interestingly, this theory was corroborated in a study conducted by Darapaneni et al. (2015) where 61% of the viral PR was conserved, particularly within the dimer interface, active site and flap regions. This suggests that AA changes are restricted to specified regions in PR to maintain the structural integrity of the enzyme during cleavage. Contrastingly, Gag displays high natural variability (Li et al., 2013), particularly at the CSs (Torrecilla et al., 2014). Prabu-Jeyabalan et al. (2002) demonstrated that

¹⁷ Confidence Interval

substrate recognition by PR is determined by the asymmetric structure of the CSs and not necessarily the AA sequence. This theory, coined the “substrate envelope” hypothesis was based on studies involving inactive PR variants complexed with peptide substrates (Prabu-Jeyabalan et al., 2002; Tie et al., 2005). Although few, codons located at the CSs including E365 (CA|p2), S373 (p2|NC) A431 (NC|p1) and R452 (p1|p6) were identified in this study. Additionally, Özen et al. (2014) showed that the “conserved dynamic behaviour” of PR’s active site, together with complimentary enzyme-substrate mutations increases substrate recognition. Considering the location of the PRMs identified in these sequences (Table 3.1), this suggests that PR and CS mutations work together to alter the substrate envelope of PR, increasing Gag proteolysis and providing a competitive advantage over the PIs.

To understand the resistance dynamics of specific mutations at various coevolving sites, we explored pathways to resistance in PR and observed the multivariable effect of what happens when Gag mutations are then introduced. In this study, the combination of M46I+I54V+V82A selected by PR is unsurprising since this is the three most common substitutions seen in LPV/r failure (Barber et al., 2012; Van Zyl et al., 2013; Grossman et al., 2014). As previously mentioned, in tandem with this combination, the introduction of L76V can also lead to DRV/r cross-resistance (Tang and Shafer, 2012). Although several studies have demonstrated the impact of genetic diversity on pathways to drug resistance (Sylla et al., 2008; Martinez-Cajas et al., 2009; Barber et al., 2012), the stepwise accumulation and multivariable interaction of mutations in pathways to resistance is largely unknown. In this study, two probable pathways in PR leading to LPV/r failure were described, one beginning with I54V and the other with V82A. Interestingly, Zhang et al. (2010) described a conditional structural independence between 46+54+82, where 46 and 54 are mutually independent given 82. Therefore, the authors posited that the sequential order of mutations would be either 46-82-54, 82-46-54 or 82-54-46. However, a separate study conducted by Zhang et al. (1997) described an order of 54-46-82 and 46-54-82. Although both studies reiterate these dependencies, our study suggests that the deciding factor as to whether I54V or V82A is selected first is dependent on L10F, where if I54V is selected first then L10F is also selected. However, if V82A is selected first followed by I54V then either the L10F mutation or the WT L10 could be favoured. Although more work would be required to confirm this theory, L10F could be functionally important. Previously, Martinez-Picado et al. (1999) showed that viruses harbouring the L10R mutation together with M48I+L63P+V82T+I84V replicated at the same rate as the WT, thereby suggesting its role in restoring viral fitness. However, the role of L10F when the M46I+I54V+V82A combination is selected together with L76V as seen in this study, is still unclear. Interestingly, Wong-Sam et al. (2018) showed that L76V reduces

hydrophobic contacts with I45/47 in PR's flaps and D30/T74 in PR's core, corresponding with protein instability. However, the authors postulated that reduced contacts caused by Val76 can allow for greater flap mobility. Furthermore, Louis et al. (2011) showed that the co-selection of M46I counteracts this instability by enhancing proteolytic cleavage in subtype B. This suggests that L76V occurs to modify flap dynamics to maintain cleavage with the altered Gag CSs whilst maintaining resistance to LPV/r.

Interestingly, the pathways to resistance changes significantly when other PIs are investigated. For example, Deforche et al. (2006) showed that though L10F, M46I and I54V were present in the network, only major PRMs D30N, N88S and L90M connected with the NFV node as parent. However, using a temporal nodes Bayesian network, Hernandez-Leal et al. (2000) showed that when IDV was present, a direct pathway existed between M46I, I54V and V82A through L90M as parent. Thus, the selection of specific mutations and intricate changes in the pathways to resistance are attributed to the drug itself. However, these networks may still change if Gag mutations are also introduced.

In the Gag-PR network a combination of L10F+M46I+I54V+V82A and A431V was observed. The A431V Gag mutation can cause resistance to all PIs except DRV (Fun et al., 2012) even in the absence of PRMs (Nijhuis et al., 2007). Moreover, its level of resistance is comparable to that of a single major PRM such as V82A (Nijhuis et al., 2009) and it can improve Gag cleavage regardless of the protease variant (Kolli et al., 2009). Although A431V has been associated with V82A (Prabu-Jeyabalan et al., 2004), a direct relationship was observed with I54V in this study. This could suggest that A431V and its link to V82A is dependent on the presence of I54V and M46I. This is consistent with the findings observed by Singh (2015) wherein A431V was mostly found in viruses with PRMs (M46I+I54V+V82A) than those without. This suggests that the if PRMs are selected, A431V serves to act in a structural compensatory role at a later stage.

Of note was non-CS mutation Q69K (chapter two; Figure 2.5). In this study, Q69K indirectly associated with A431V via G62K and V77 in PR. Singh (2015) reported that Q69K increased viral replication by 13% in the presence of A431V and M46I+I54V+V82A suggesting that it occurs to further compensate for changes associated with these mutations. Additionally, although CAPS identified the coevolving pair of 77 and 431, an indirect inverse association between these two codons was noted in the network. Interestingly, Gupta et al. (2015) demonstrated that a PR double mutant (V77I+L33F) resulted in a more stable structure with altered flap dynamics in the presence of Nelfinavir (NFV) in comparison to the WT. This could suggest that while A431V

works to restore cleavage, V77I works to stabilize the mutant PR by changing the open/closed conformation of the flaps to compensate for the modified CS. However, more work is required to elucidate the relationship between A431V+V77I in the presence of LPV/r.

3.5 Conclusions

Since mutations share unequal importance in drug resistance outcomes, the complexity of mutational patterns is challenging to interpret for treatment purposes. This study showed that strong dependencies exist between the evolutionary selection of PRMs and those identified in Gag. In particular, the combination of L10F+M46I+I54V+L76V+V82A together with A431V in Gag was shown to follow a specific pathway in patients receiving a LPV/r-inclusive treatment regimen. However, to fully understand the resistance dynamics between Gag and PR, a true understanding regarding the effects of PR's mutational patterns in the presence of PI drugs without Gag is first required. Therefore, the next chapter investigated the structural implications of two multi-drug resistant protease sequences in the presence of LPV as well as DRV (since DRV is administered in 3rd-line ARV therapy).

Chapter four

Examining DRV and LPV binding in the presence of multi-drug resistance mutational patterns in HIV-1

4.1 Introduction

As described in chapter one of the literature review (section 1.9.4), the HIV-1 PIs were developed to mimic the substrate transition state to inhibit Gag cleavage during maturation (Lv et al., 2015). However, PR's ability to acquire multiple resistance mutations at various positions can cause PI cross-resistance (Rhee et al., 2010). This phenomenon has led to suboptimal binding in several on-market drugs. Amino acid variation at positions 10, 46, 54, 82, 84 and 90 comprise some of the most commonly associated drug resistance mutations in the viral PR (Wensing et al., 2017).

In our study, BNL (section 3.3.3 of chapter three) found associations between mutations L10F, M46I, I54V, L76V and V82A. These mutations (L10F, M46I, I54V, V82A) have serious implications on LPV (Boender et al., 2016; Paredes et al., 2017) and DRV drug binding, particularly if L76V is simultaneously co-selected, as it can enhance the level of drug resistance (Young et al., 2010; Louis et al., 2011; Boender et al., 2016). Although phenotypic and genotypic tests can be employed to evaluate resistance mutations, these assays only provide information on the experimental or functional aspects of the virus (Hu et al., 2011). Consequently, information evaluating the structural impact of such a complex combination of mutations are not clearly understood.

Furthermore, since it has been shown that various mutations have distinct effects in subtype C versus subtype B (Kiguoya et al., 2017), and that certain AAs are selected more frequently than others, as shown in Chapter two of this study, the question arises as to why and how are mutations selected?

Therefore, the purpose of this chapter was to investigate the structural implications of a complex combination of PRMs on LPV and DRV binding in HIV-1 subtype C using MD simulations and binding-free energy scores.

4.2 Methods

4.2.1 Multi-drug resistant PR sequences

Two PR sequences comprising multi-drug resistant (MDR) phenotypes were retrieved from the PCS cohort. These sequences have specific resistance profiles and was selected based on the information obtained from the Bayesian networks in Chapter three as described in Table 4.1 below.

Table 4.1 Sequence identities with their specific resistance profiles.

Sequence Identity	Comment	Protease resistance profile
Wild-type	AY772699	None
PCS124	MDR; four PI mutations	L10F, M46I, I54V, V82A
PCS069	MDR; five PI mutations	L10F, M46I, I54V, L76V, V82A

Note: PCS124 (accession number: MK446206) and PCS069 (accession number: MK446189).

Additionally, both PCS069 and PCS124 was also selected because they possess the A431V Gag CS mutation which was shown to be important in the LPV resistance pathways in chapter three. However, for the purpose of this chapter, only the PR sequences together with the drugs (i.e. LPV and DRV) will be structurally explored. A graphical representation of the methods used to analyze the structural implications of the PI resistance mutations on drug binding is indicated in Figure 4.1 below.

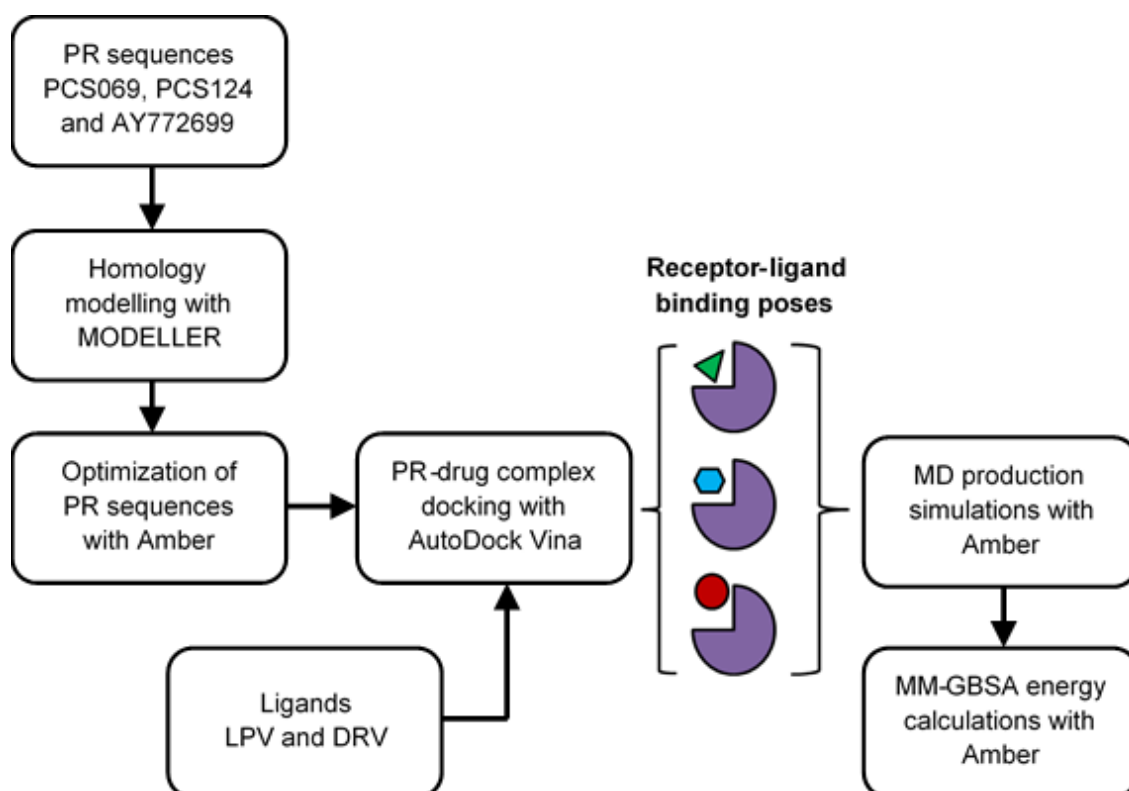


Figure 4.1 Illustration showing the sequential steps used to investigate the structural implications of resistance mutations on drug binding.

4.2.2 Homology modelling

Homology modelling of the viral PR was conducted in MODELLER v.9.16 (Webb and Sali, 2014). To construct the tertiary structures a suitable template was first selected. Accordingly, the atomic coordinates for an HIV-1 subtype C PR bound to NFV (PDB ID: 2R5Q) was retrieved from the PDB (Coman et al., 2008). The 2R5Q PR was resolved by X-ray diffraction to 2.3 Å and did not contain any PI drug resistance mutations. Prior to modelling, the ligand (NFV) was removed and the template and target sequences (viral PR) were aligned in MAFFT (Kato and Stadley, 2013).

4.2.3 MD optimization of the PR models

The PR sequences were optimized using the MD package Amber 14 (Case, 2014). Topology and coordinate files were generated using the Leap program. The ff03.r1 Amber force field for proteins was applied to the system. The system was explicitly solvated by the TIP3P water molecules with a margin of 12.0 Å. The SHAKE algorithm was used to restrain the covalent hydrogen bonds (Ryckaert et al. 1977) and the particle mesh ewald (PME) method with a 10.0 Å cutoff was used to calculate the Coulomb (electrostatic) interactions in the system (Darden et al. 1993). Prior to equilibration, a two-step minimization was performed as follows: (i) minimization of the waters with 3,000 steps of steepest-descent and 2,000 steps of conjugated gradient and (ii) minimization of the entire system with 7,000 steps of steepest-descent and 3,000 steps of conjugated gradient minimizations. Following minimization, the entire system was gradually heated to from 0 to 300 K over 50 picoseconds (ps) using the constant volume and normal temperature (NVT) mechanics. Thereafter, the system switched to the isothermal isobaric (constant pressure and normal temperature; NPT) mechanics for a further 50 ps. Finally, five nanoseconds (ns) of MD simulations were carried out. Additionally, the temperature of the system was monitored using the Langevin dynamics thermostat. Additionally, when force constraints were applied, the atomic residues were restrained at 2.0 kcal/mol.

4.2.4 Molecular docking

The optimized PR structures and ligands (DRV and LPV) were docked to generate the receptor-ligand complex and obtain the various binding poses. Molecular docking was carried out using AutoDock Vina (Trott and Olson, 2010). The binding poses with the lowest binding scores were selected for the final MD production simulations.

4.2.5 MD production simulations

Final MD production simulations were performed on the PR-drug complexes as described in section 4.2.3 with some modifications. Briefly, the ligands were parametrized using the AM1-BCC charges in Amber's Antechamber program. The General Amber force field (GAFF) was applied to the receptor-ligand system. Lastly, final simulations were carried out over 100 ns (10,000,000 cycles). Snapshots were taken every 5,000th generation to ensure that an ensemble of uncorrelated frames were obtained.

4.2.6 MM-GBSA calculations

The binding-free energies of the receptor-ligand complexes were calculated using the MM-GBSA method (Kollman et al., 2000) in Amber. Free-energies were calculated over 2,000 snapshots from the last 80–100 ns production trajectories. The energy calculations were used to compare the level of drug binding between the MDR and WT PRs. Therefore, entropy calculations were not included in our analyses as comparisons were made between the same proteins (i.e. the viral PR).

4.3 Results

4.3.1 Prediction of theoretical tertiary structures

The 2R5Q subtype C PR was shown to have a high sequence similarity to the consensus C (calculated using all the subtype C treatment exposed PR sequences with the Los Alamos Consensus Maker Tool) and the AY772699 reference sequence used in this study as shown in Figure 4.2 below. With a 92% sequence similarity between the AY772699 reference sequence and 2R5Q, the template was considered acceptable for molecular modelling of the MDR PR sequences. Additionally, the template had no gaps and therefore did not require any gap penalties or manual adjustments to be made.

```

      .....|.....| .....|.....| .....|.....| .....|.....| .....|.....|
      5          15          25          35          45
AY772699 PQITLWQRPL VSIKIGGQTR EALLDTGADD TVLEEINLPG KWKPKMIGGI
CONSENSUS .....V...IK .....
2R5Q      .....K... ..V...IK ..... ..I...A... R.....

      .....|.....| .....|.....| .....|.....| .....|.....| .....|.....|
      55          65          75          85          95
AY772699 GGFIKVRQYD QILIEICGKK AIGTVLVGPT PVNIIGRML TQLGCTLNF
CONSENSUS .....I..... .....
2R5Q      .....I..... .....

```

Figure 4.2 Codon alignment showing sequence similarity between the AY772699 reference sequence, consensus C and the 2R5Q template used for the prediction of the HIV-1 viral PR.

4.3.2 Assessing model refinement and the optimal binding poses

To assess the MD properties and level of equilibration, system energies and structural stability of the PR models were evaluated, as depicted in Figure 4.3 below. Accordingly, Figure 4.3a–c demonstrated that the kinetic, potential and total energies gradually increased, corresponding to the 50 ps heating phase from 0 to 300 K. Of note, the kinetic energy remained constant thus indicating that the thermostat, which monitors kinetic energy to assess temperature through the system was functional. Additionally, the potential and total energy initially increased during constant volume mechanics (NVT) and then decreased when the system switched to constant pressure (NPT) before stabilizing indicating equilibrium had been reached.

To evaluate the stability of the structures, a root mean square deviation (RMSD) calculation was performed for each PR model as shown in Figure 4.3d–f. Of the three models, the WT (Figure 4.3d) appeared the most stable with a relatively lower RMSD than the PCS124 (Figure 4.3e) and PCS069 (Figure 4.3f) models. Interestingly, the PCS124 PR model depicted greater stability over the five ns simulation in comparison to PCS069.

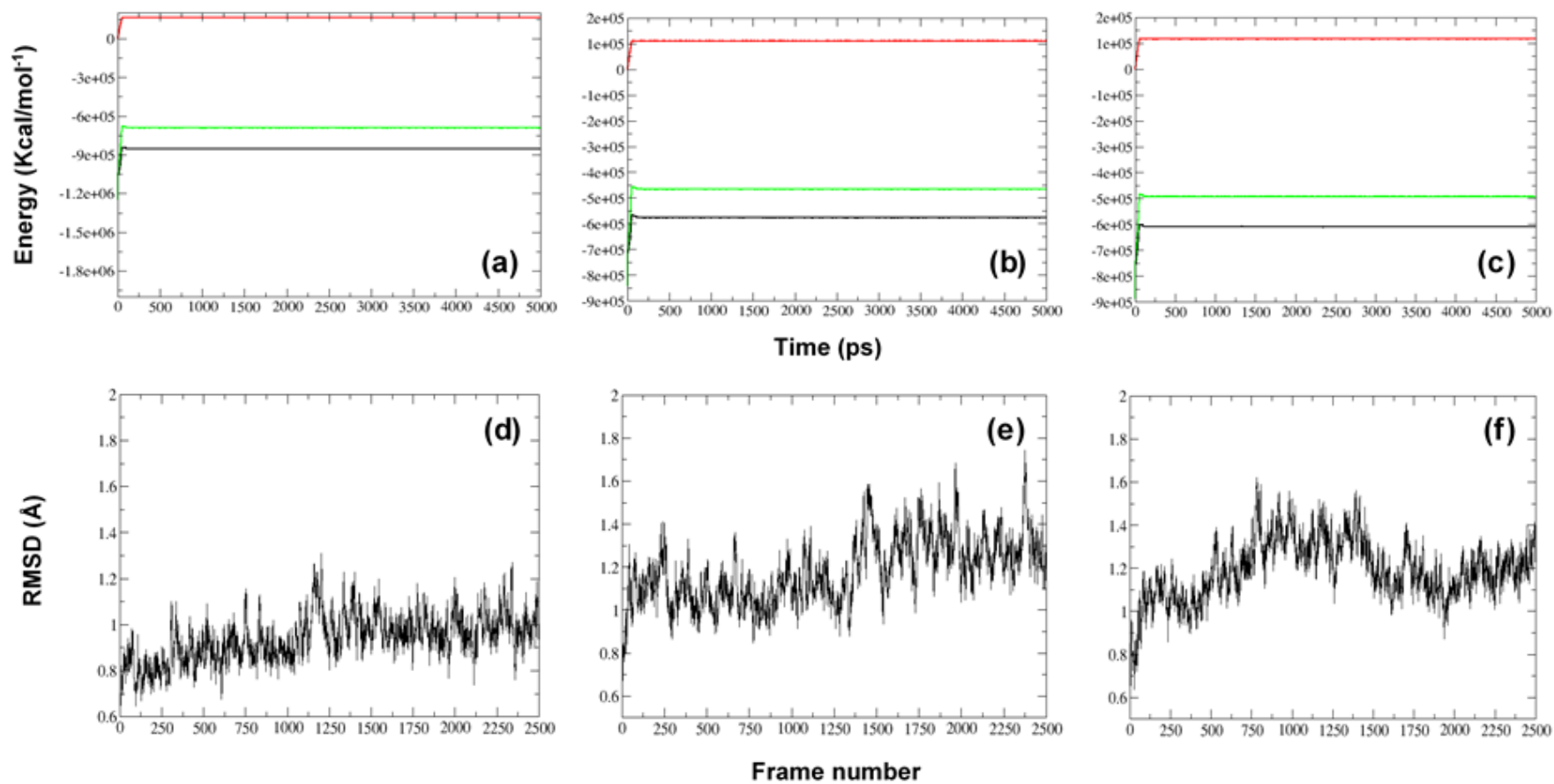


Figure 4.3 System and structural assessment of the HIV-1 WT and mutant PR models. Figure 4.3 (a)–(c) and (d)–(f) represents the energy terms and the RMSD for the wild-type (AY772699) and mutant protease (PCS124 and PCS069), respectively.

To generate the PR-drug complexes for the MD production simulations, we performed molecular docking analyses with AutoDock Vina. The search space evaluated eight different binding poses for each PR-drug complex with varying binding scores. Therefore, the models with the lowest binding scores were selected for downstream analyses. The binding scores for all models ranged from -7.4 to -9.8 kcal/mol. Furthermore, the ligands were flexibly docked and allowed for torsions and/or rotatable bonds to be considered. Consequently, the drugs were “neatly” docked into PR’s substrate cavity and varied through the WT and mutants as seen in Figure 4.4 below.

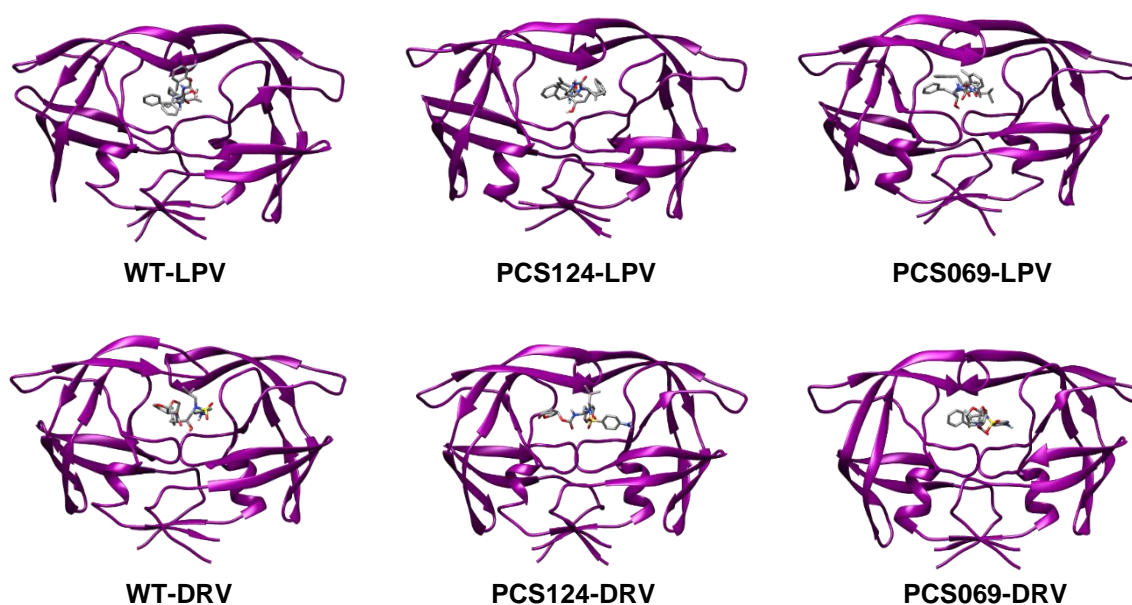


Figure 4.4 Binding poses generated for the HIV-1 LPV- and DRV-PR bound complexes over the 100 ns MD simulation.

4.3.3 Evaluating PR’s stability

To assess the structural stability of the PR-drug systems, RMSD plots were generated over the 100 ns simulation as depicted in Figure 4.5. Accordingly, the LPV complexes (Figure 4.5a) were most stable in comparison to the DRV-bound PR mutants (Figure 4.5b). However, when comparing the WT and mutants in both the LPV and DRV models, the WT complexes (black) displayed greater structural stability over the 100 ns (Figure 4.5a–b). Interestingly, between the LPV-bound mutants, the PCS124-LPV complex (red) displayed the closest structural stability to the WT whilst the PCS069-LPV mutant (green) only stabilized around 65 ns. Contrastingly, the DRV-bound PCS124 mutant only reached a relatively stable equilibrium around 80–100 ns. In the DRV-bound PCS069 mutant a plateau was observed between 35 and 55 ns as well as in the last 90–100 ns of the simulation.

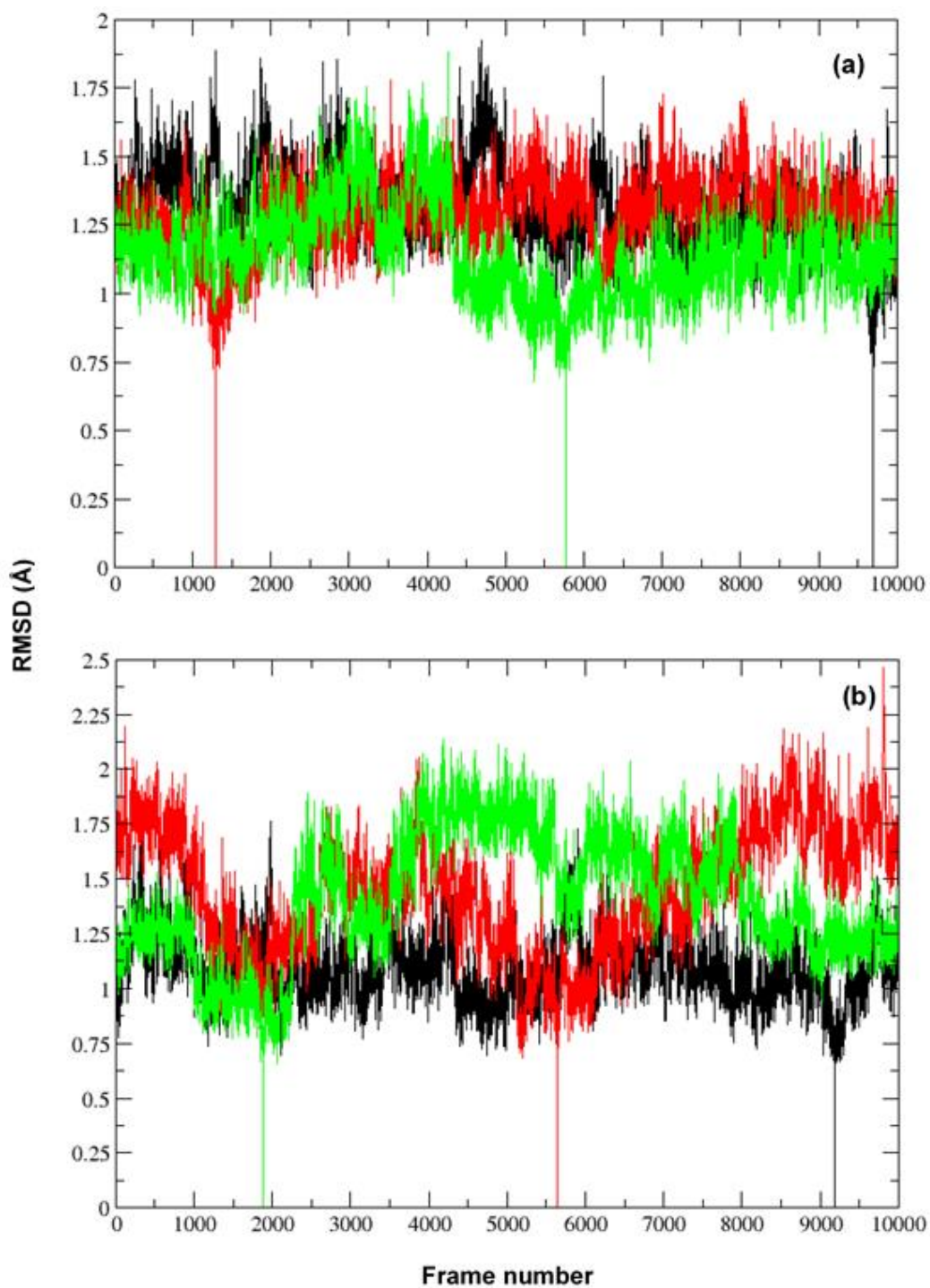


Figure 4.5 Time series RMSD plots of the (a) LPV- and (b) DRV-bound complexes. **Note:** the HIV-1 WT, PCS124 and PCS069 mutants are represented by the black, red and green lines, respectively.

Interestingly, the DRV- to LPV-bound fluctuations in the PR mutants was further reiterated by the flexibility of PR's AA residues, as observed by the root mean square fluctuation (RMSF) plot

in Figure 4.6 below. In particular, the mutant-DRV complexes displayed greater particle flexibility in comparison to the WT. Contrastingly, in the LPV-bound WT model, greater fluctuations were observed around the flap (Figure 4.6a; dotted circles) and elbow regions. Additionally, particle variation between the PR's subunits were also seen (Figure 4.6a and b; purple circles).

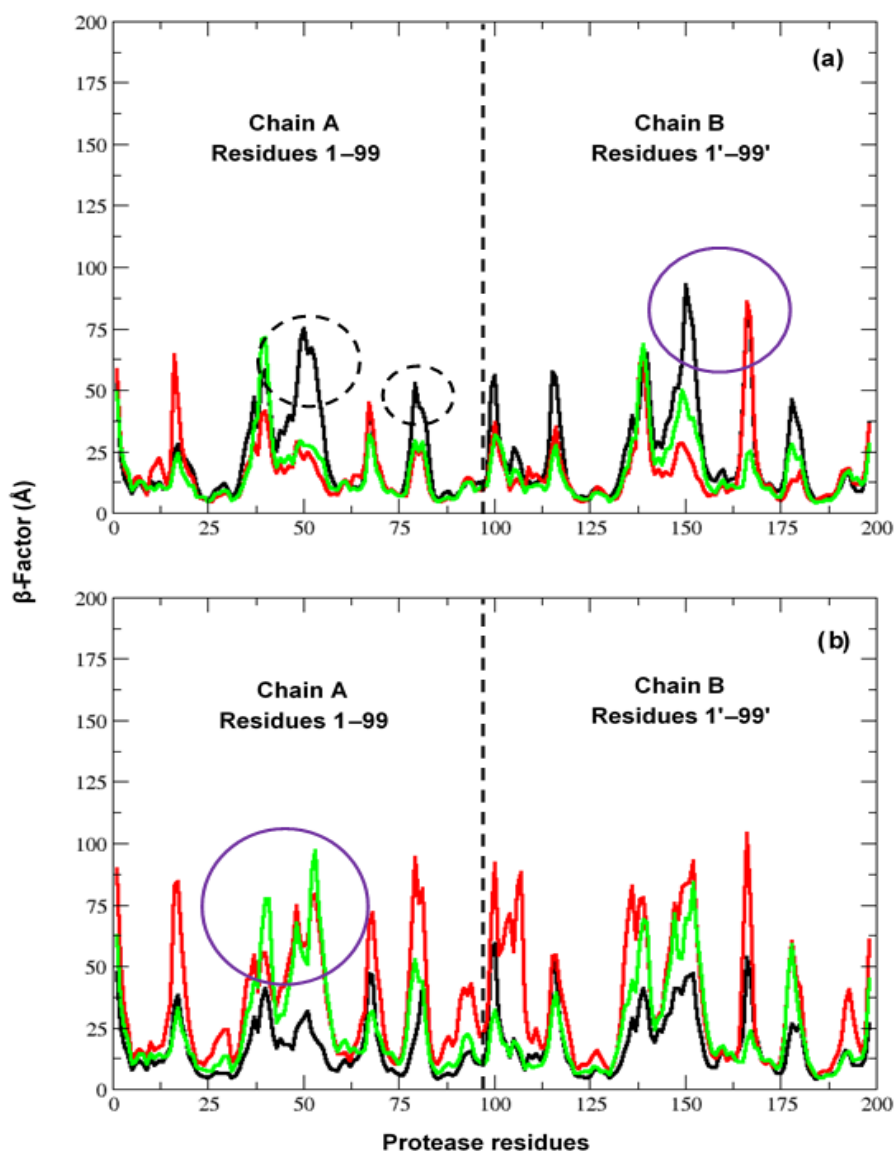


Figure 4.6 RMSF analysis of the (a) LPV- and (b) DRV-bound complexes. **Note:** the HIV-1 WT, PCS124 and PCS069 mutants are represented by the black, red and green lines, respectively.

In addition to residue fluctuations, the distance between the PRMs and active site residue D25 was altered as shown in Table 4.2. The LPV-bound PCS124 model displayed a greater distance with AA residues 46 (21.159 Å) and 82 (10.084 Å). Contrastingly, in the DRV-bound PCS124

model, residues 10 (8.745 Å), 46 (19.929 Å) and 82 (7.955 Å) were found at smaller distance when compared to the PCS069-DRV model (9.714 Å; 19.804 Å and 8.886 Å, respectively). Interestingly, when compared with the WT, the distance between the AAs in the WT and D25 was greater for most residues in both DRV-bound PR models. Contrastingly, only residues 54 and 82 in the LPV-bound PCS124 and PCS069 models, respectively displayed a smaller distance to the WT. Finally, the angles of the PRMs and thereby the rotation of the AA side chains between the models were also altered.

Table 4.2 Distance between active site residue D25 and the PRMs in the HIV-1 WT and mutant drug models (all measurements in Å).

Codons	Wild-type*		PCS124 [#]		PCS069 ^{#, †}	
	LPV	DRV	LPV	DRV	LPV	DRV
10	8.047	11.154	9.164	8.745 ^a	10.801	9.714 ^a
46	18.222	18.633	21.159	19.929	19.228	19.804
54	17.789	15.477	16.930 ^b	15.322 ^a	18.578	16.217
76	11.903	12.996	-	-	11.925	11.759 ^a
82	9.361	9.676	10.084	7.955 ^a	8.884 ^b	8.886 ^a

* Wild-type amino acids = L10, M46, I54, L76 and V82.

[#] Drug resistance amino acids = L10F, M46I, I54V, L76V and V82A.

[†] L76V in PCS069 only.

^a Wild-type distance is greater than the DRV mutants.

^b Wild-type distance is greater than the LPV mutants.

4.3.4 Predicted binding-free energies for the PR-drug models

To evaluate the level of drug binding when bound to the mutant PR, the overall binding-free energies for each complex was calculated as depicted in Table 4.3 below. In general, the LPV-bound PR complexes displayed lower binding energies and thus a stronger structural stability in comparison to the DRV-bound models. Interestingly, the greatest binding stability was observed for the PCS069-LPV model (-23.4128 kcal/mol) where a -0.9826 kcal/mol difference was seen between the mutant and WT. However, when compared with the PCS124 model, a -3.4417 kcal/mol energy difference was observed.

Contrastingly, the WT-DRV model (-19.3166 kcal/mol) depicted the strongest binding mode in comparison to the DRV-bound PR mutants. Similarly, to the LPV-PR models, the PCS069-DRV

model (-17.9286 kcal/mol) generated a further energetically-favourable binding mode than the PCS124-DRV bound model (-15.8152 kcal/mol).

Table 4.3 Binding-free energies of the HIV-1 PR-drug complexes calculated over 2,000 snapshots in kcal/mol.

Complex	ΔE_{VDW}	ΔE_{EEL}	ΔG_{GB}	ΔG_{SURF}	ΔG_{gas}	ΔG_{solv}	ΔG_{bind}
Lopinavir							
WT-LPV	-29.5581	-10.4458	21.4441	-3.8704	-40.0039	17.5737	-22.4302
PCS124-LPV	-29.1449	-2.6835	15.6074	-3.7501	-31.8283	11.8573	-19.9711
PCS069-LPV	-28.7231	-18.2620	26.7036	-3.1313	-46.9851	23.5723	-23.4128
Darunavir							
WT-DRV	-26.3212	-12.6814	23.2752	-3.5891	-39.0026	19.6861	-19.3166
PCS124-DRV	-24.9921	-3.1009	15.2767	-2.9989	-28.0930	12.2778	-15.8152
PCS069-DRV	-27.9972	-9.4031	22.6892	-3.2175	-37.4003	19.4717	-17.9286

Note: ΔE_{VDW} = van der Waals contributions; ΔE_{EEL} = electrostatic contributions; ΔG_{GB} = polar contributions; ΔG_{SURF} = non-polar contributions; ΔG_{gas} = free energy in gas phase; ΔG_{solv} = solvation free energy; ΔG_{bind} = binding free energy.

4.3.5 PR-drug interactions

To explore the interactions between the inhibitor and PR, we constructed two-dimensional (2D) interaction maps for each drug complex as shown in Figures 4.7–4.12 below. Expectedly, the WT-LPV model revealed a hydrogen bond between catalytic residue D25 and LPV (Figure 4.7). Moreover, three additional hydrogen bonds were seen with residues A28, G48 and G49. Of note, van der Waals (vdW) interactions with V82/V82' (V181)¹⁸ was observed. Additionally, three alkyl (V32, I47 and I84) and one π -alkyl (I50) interaction involving sites at which LPV-associated PRMs were noted.

¹⁸ In nature, one chain in PR contains 1–99 AAs. Therefore, chain two starts from 100–198. In practice, we can also refer to the second chain AA numbers as prime, for example V82A in chain A and V82A' in chain B.

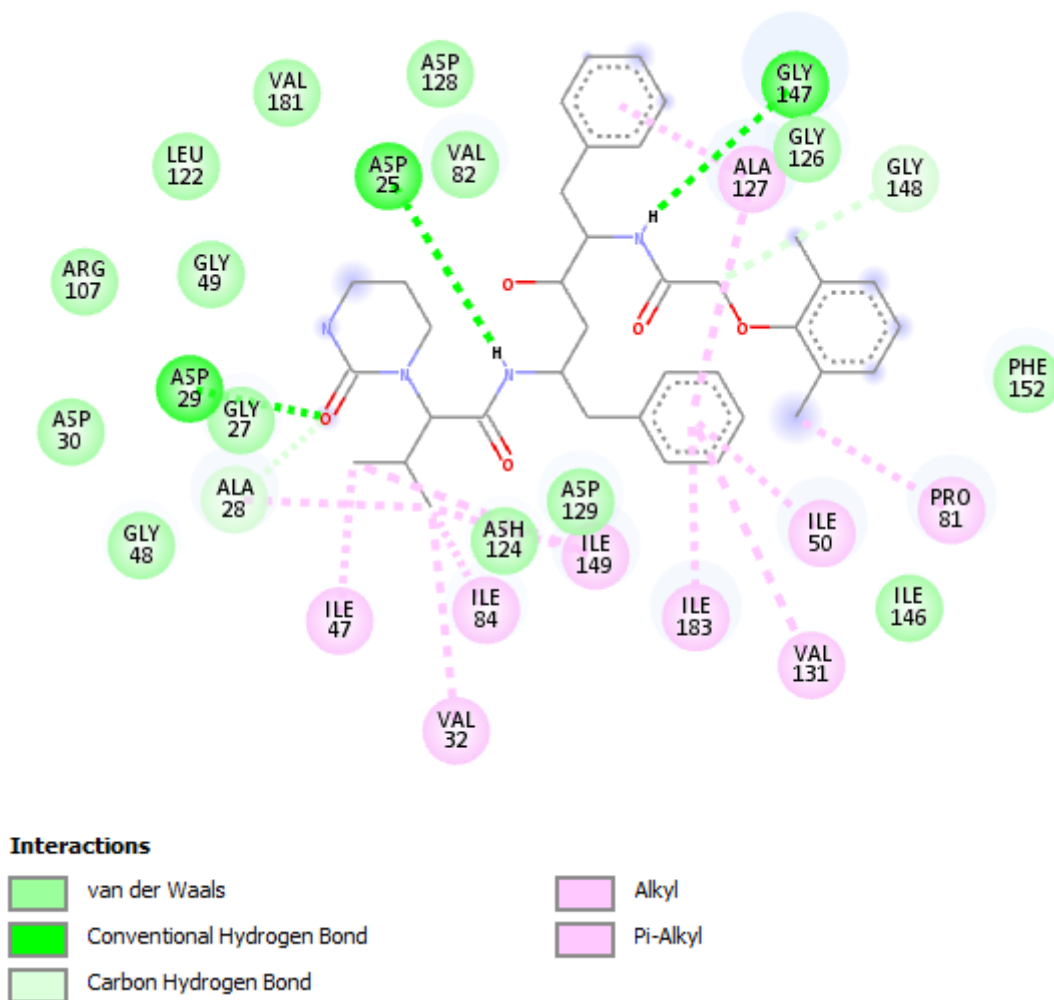


Figure 4.7 Amino acid interaction map of the HIV-1 WT complexed with LPV.

Figures 4.8 to 4.9 represent the PCS124-LPV and PCS069-LPV models, respectively. Interestingly, in the PCS124-LPV model (Figure 4.8), residues I50, G49 and catalytic triad AA G27 hydrogen bonded with LPV's oxygen atoms. Moreover, while V82A formed an alkyl bond with LPV, V82A' formed a π -alkyl bond with LPV's methylbenzene ring. In the PCS069-LPV model (Figure 4.9), conventional hydrogen bonds were seen with D25 and G48 whilst codon R8' (R107) formed a double hydrogen bond with two oxygen atoms in LPV. Notably, in addition to V82A/V82A', minor PRM L10F' (L109F) formed a π -alkyl interaction with the drug's methylbenzene. Interestingly, L10F in chain A was not involved in ligand binding.

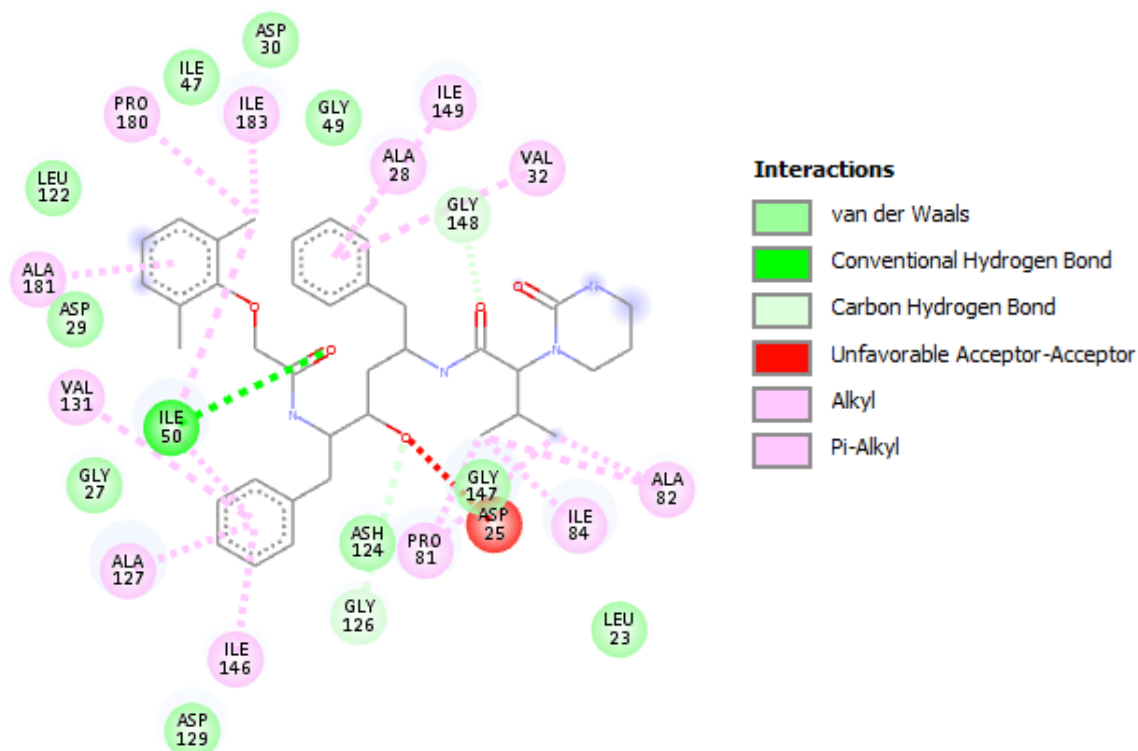


Figure 4.8 Amino acid interaction map of the HIV-1 isolate PCS124 complexed with LPV.

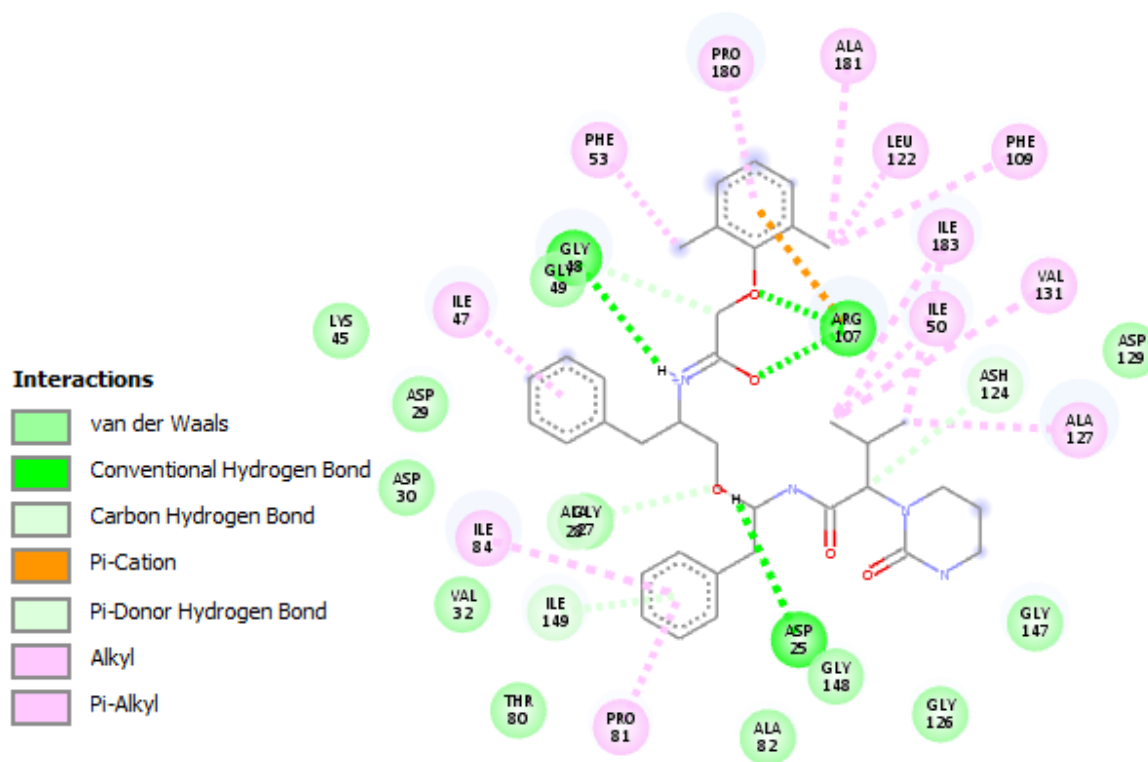


Figure 4.9 Amino acid interaction map of the HIV-1 isolate PCS069 complexed with LPV.

Unlike in the WT-LPV model, the D25 in the WT-DRV model (Figure 4.10) was attractively charged to a nitrogen atom in DRV. In addition, A28 and D29/30 formed hydrogen bonds with the 4-aminobenzenesulfonamide of DRV whilst G27' (G126) hydrogen bonded with the oxygen atom in the acetate group of the (3R,3aS,6aR)-Hexahydrofuro[2,3-*b*]furan-3-yl (bis-furyl) molecule. Similarly, to the WT-LPV model, resistance associated sites V32, I47, I50 V82 and I84 also interacted with DRV.

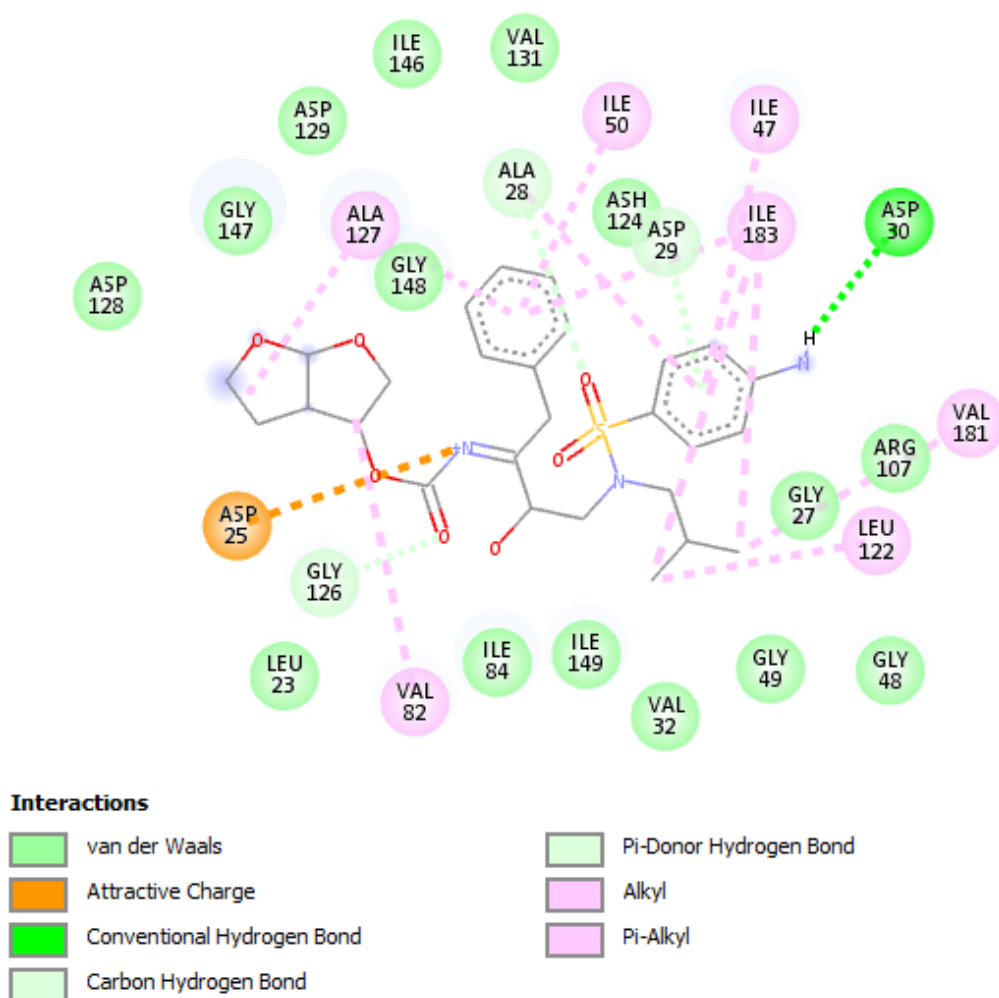


Figure 4.10 Amino acid interaction map of the HIV-1 WT complexed with DRV.

Interactions between DRV and the mutant PR models are depicted in Figures 4.11–4.12. Accordingly, in the PCS124-DRV model (Figure 4.11), R8 and G48' (G147) formed conventional hydrogen bonds with the 4-aminobenzenesulfonamide molecule and the nitrogen atom of the bis-furyl acetate. Furthermore, R8 also formed a π -cation interaction with the benzene ring of 4-aminobenzenesulfonamide. Residue I50 formed a π -donor hydrogen bond with DRV's aromatic

benzene. In comparison to the WT-DRV model, catalytic residue D25 lost its hydrogen bond and formed a vdW interaction with DRV instead. Moreover, only L10F and V82A formed vdW and π -alkyl interactions with DRV, respectively.

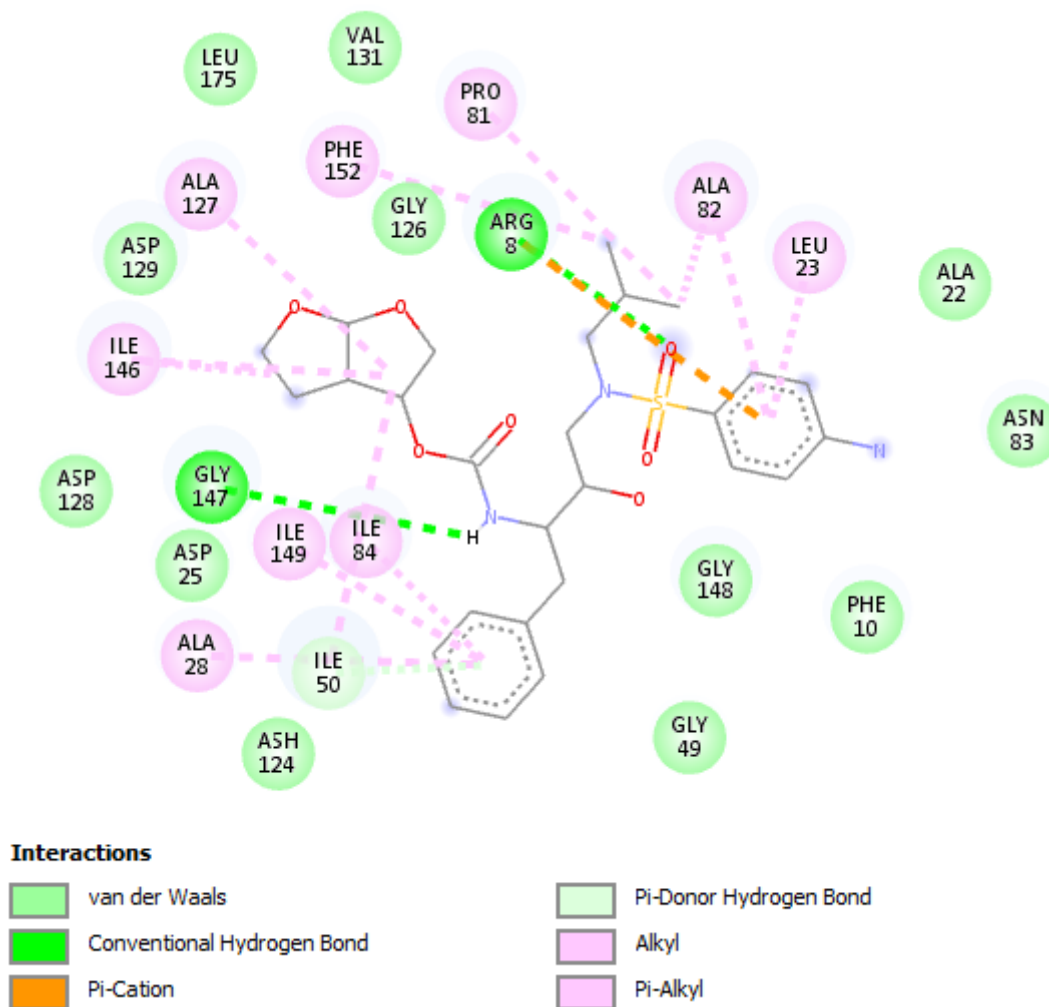


Figure 4.11 Amino acid interaction map of the HIV-1 isolate PCS124 complexed with DRV.

The PCS069-DRV model (Figure 4.12) revealed carbon hydrogen bonds with residues D30' (D129) and G48' (G147) as well as the heterocyclic furan of DRV's bis-furyl acetate. In a similar manner to the PCS124-DRV model (Figure 4.11), D25 only retained vdW interactions with DRV. Interestingly, the PCS069-DRV model was the only complex to have lost its interactions with codon 82 in PR. Contrastingly, it was also the only model to gain a vdW interaction with I54V.

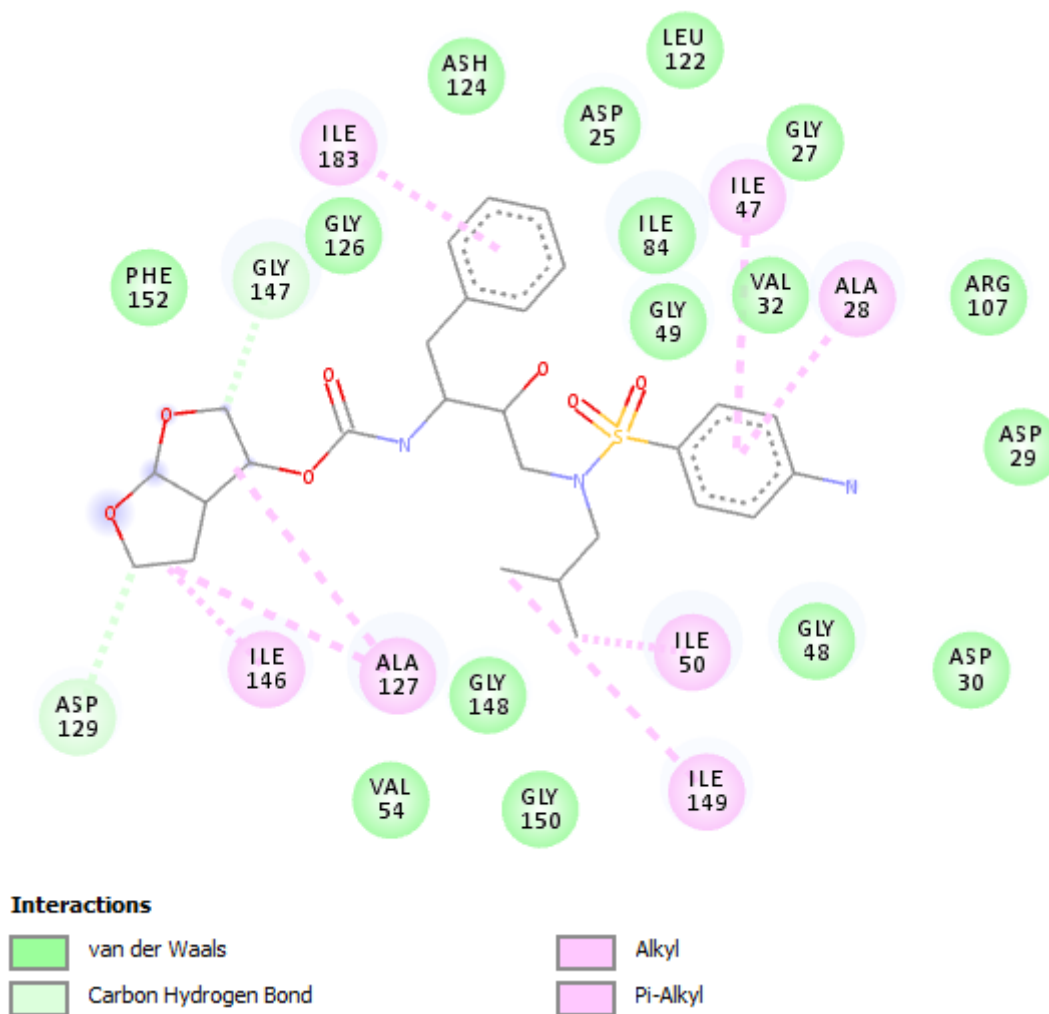


Figure 4.12 Amino acid interaction map of the HIV-1 isolate PCS069 complexed with DRV.

4.4 Discussion

Biological function is largely dependent on molecular dynamics of protein systems. Therefore, drug resistance mutations can alter the mechanism by which the HIV-1 PR cleaves in nature (Cai et al., 2014). Here, we predicted three molecular models corresponding to two PR mutants (PCS124 and PCS069) comprising major PRMs and a structure resembling the subtype C WT PR (AY772699). Homology modelling is an important tool that has been used to investigate molecular structural dynamics when experimental data is not available (Yuan and Xu, 2018) and several studies have used this approach to explore the dynamical behaviour of the HIV-1 PR (Lockhat et al., 2016; Amamuddy et al., 2018; Delino et al., 2018; Nayak et al., 2019).

Prior to docking experiments, the PR structures were refined to produce a favourable energy state. Therefore, we used explicit MD simulations to mimic the physiological state observed in nature. In this study the level of protein stability between the models appeared to be WT > PCS124 > PCS069. This is unsurprising since in the absence of drug therapy, the WT is functionally fit (Quiñones-Mateus and Arts, 2003; Hu and Kuritzkes, 2014). This suggests that the WT PR represents a “simpler”, thermodynamically stable form of PR in comparison the mutants when PIs are not present. Thereafter, AutoDock Vina generated favourable docking poses that were within the confines of PR’s substrate envelope. Additionally, subtle differences in the orientation of the ligands may be due to the flexible docking carried out by AutoDock. Flexible docking algorithms are more accurate in predicting binding modes since it allows movement of the rotatable bonds in the ligand (Pagadala et al., 2017). Therefore, as multiple AA side chains are affected by the movement of the backbone atoms of the protein (Pagadala et al., 2017), it is conceivable that the ligand should also be flexible enough to accommodate this movement allowing for greater binding affinity and more precise binding.

To evaluate the structural changes induced by the PRMs on drug binding, we performed 100 ns MD production simulations on the LPV- and DRV-bound PR models. Accordingly, the RMSD plots revealed that the WT models were significantly more stable than either of the drug-bound mutants. Proteins are dynamically flexible macromolecules that can exhibit large structural changes over of time (Haspel et al., 2010). Consequently, the PCS124/069 mutants may have folded into multiple alternative structures to continually find the optimal energy minima to evade drug binding while remaining active for Gag cleavage. In contrast, this suggests that the WT easily folded and maintained a stable native state since it did not comprise any mutational changes in the active site or flap regions and was thereby susceptible to drug binding in comparison to the mutants. Of interest was the discrepancy between the stability of the LPV- versus DRV-bound mutants. Here, the RMSD plots revealed greater stability with LPV rather than DRV. A study conducted by Dierynck et al. (2007) showed that MDR PRs comprising 10–14 PI resistance mutations resulted in reduced binding affinity coupled with limited antiviral activity for LPV. Contrastingly, for DRV, the study showed that weaker antiviral activity was not observed even with a 1,000-fold decrease in binding affinity. Consequently, this suggests that the LPV-associated PI mutations highlighted in this study displays greater structural evasiveness to LPV than DRV. Furthermore, the Dierynck study observed that the number of DRV-associated mutations also correlated with the level of drug binding. Therefore, this theory may also translate to the number of mutations selected by the mutants as observed with RMSD fluctuations between the quatro-PCS124 and penta-PCS069 PR models.

Furthermore, a link between the RMSD and RMSF plots regarding the DRV-bound mutants were also observed. In nature, active proteins can rapidly manipulate their local fluctuations, adopt a specific conformation and transition between conformations (Kmieciak et al., 2018). In this instance, the DRV-bound mutants showed larger fluctuations in PR's AA residues as compared to LPV. In the WT models, fluctuations at the flaps and elbow suggests that particle motion at these regions occurred to allow for the open/closed conformation of PR and to accommodate movement of the ligand and thereby binding through the 100 ns simulation. Generally, flap flexibility is restricted when PR is bound to an inhibitor (Trylska et al., 2007). However, Piana et al. (2002) showed that residues 24–30 and 45–55 in the viral PR correlated with substrate motion. Moreover, it has become acceptable that interaction of PR's flaps with a substrate influences the interval and frequency of flap opening (Trylska et al., 2007; Goldfarb et al., 2015; Yu et al., 2017). Interestingly, the RMSF plots also revealed a level of asymmetry between the two PR chains. This phenomenon has been previously observed in several studies evaluating the structural conformation of the HIV-1 PR (Lexa and Carlson, 2011; Huang et al., 2017; Paulsen et al., 2017). Cai et al. (2014) postulated that the asymmetrical ligand prompts asymmetry in the otherwise symmetrical PR. Thus, the two chains could behave differently in the mutant PRs to evade PI drugs. Moreover, differences in the interatomic distances between catalytic residue D25 and the mutant/WT models reiterate a mechanism for drug resistance. Specifically, reduced interatomic distance between D25 and the PCS069 model was consistent where the inclusion of L76V promoted reduced hydrophobic contacts and greater flexibility as an alternative mechanism for drug resistance (Wong-Sam et al., 2018). Contrastingly, the WT AA residues were distally located to D25. This discrepancy could be linked to the sequential accumulation of mutations in the PCS124/069 mutants and the positioning of AA side chains. For instance, as described in chapter three, if L76V is selected then there is a high probability of the co-selection of M46I to counteract the changes induced by the substitution of leucine to valine (Louis et al., 2011). Additionally, since torsion angles phi and psi are important factors in controlling protein folding (Saravanan and Selvaraj, 2017), suggesting that differences in the interatomic distance with the altered torsion angles occurred to maintain conformational flexibility of PR when the PRMs are present.

Thereafter, we performed binding-free energy calculations to assess the level of drug binding. Considering the above observations, it was expected that DRV would bind to PR at a lesser extent than LPV. More specifically, with only a -2.4447 kcal/mol average energy difference between the two mutants relative to the WT, the PRMs did not have a significant effect on drug binding. Previous studies have shown that viral PRs with either 19 (Agniswamy et al., 2012) and 21 (Louis et al., 2011; Louis et al., 2013) mutations were required for a major reduction in the loss of

hydrophobic contacts to occur. However, this study showed that the PCS069 model portrayed lower binding energies in comparison to the PCS124 models. This infers that resistance comprising the L76V pattern could be due to specific AA interaction with the drug or it is substrate related.

Finally, to explore the detailed PR-drug interactions, several interaction maps were constructed to observe specific residues in PR involved in ligand binding. These analyses revealed that residues R8, D25, A28, G27, G48, G49 and I50 in the WT and mutants formed important hydrogen bonds with LPV. In the HIV-1 PR aspartic residue 25 deprotonates a water molecule to produce a tetrahedral intermediate while the second aspartic (D25') facilitates Gag cleavage (Chaudhury and Gray, 2009). Consequently, due to its catalytic activity mutational changes from D25 to A, Y, H or N eliminates PR's enzymatic activity (Huang and Chen, 2013). Thus, a strong hydrogen bond linking D25 to a ligand in the WT PR is expected. Outwardly, the unfavourable interaction observed between D25 and LPV in the PCS124 mutant (Figure 4.8) suggests that PR has "recognized its Trojan horse" and structurally conformed to directly inhibit enzymatic catalysis and drug binding. Apart from D25, it has been shown that residues R8 and G27 at the base of the active site and G49 at the flap tips stabilize the PR dimer (Weber, 1990; Wlodawer and Gustchina, 2000) while A28 and I50 are important AA residues for substrate recognition (Scott et al., 2000). Of note, Ceccherini-Silberstein et al. (2004) showed that apart from G16, G48 and G73, the remaining PR glycine residues are highly conserved. This suggests that binding to the glycine residues causes subtle rearrangements in the PR structure that are also complimentary to the changes induced by the PRMs.

Interestingly, codons V82/V82' were found to have vdW interactions in the WT-LPV complex, whereas alkyl/ π -alkyl interactions with LPV were observed in the PCS124 and PCS069 mutants. Other bond types including alkyl and π -alkyl bonds can improve the hydrophobic bonding between a receptor and ligand (Arthur and Uzairu, 2019). Therefore, the switch to alkyl/ π -alkyl bonds from vdW interactions in the mutants suggests a stronger association with the mutant alanine at position 82 than valine. Weber and Agniswamy (2009) demonstrated that in the presence of SQV, IDV and DRV, the alanine substitution shifted residues 81 and 82 to compensate for the loss of interactions induced by the smaller side chain. In addition, a study conducted by Liu et al. (2008) revealed that in a PR comprising a single I54V mutation, significant conformational changes observed in the flap region were coupled with structural changes in the 80's loop. In a similar manner, Nakashima et al. (2016) revealed that double PR mutant I47V/I50V induced structural flexibility to the enzyme. Since M46I is found in the PR's flaps, it

is sufficient to assume that this mutation can also influence PR flexibility. Therefore, in this study, the stronger bond coupled with the shift in main chain residues suggests that partial enzymatic rigidity was induced to inhibit the drug whilst retaining its ability to cleave Gag. Furthermore, this bonding effect could also be correlated with L10F which formed a π -alkyl bond with LPV in the PCS069 mutant. Agniswamy et al. (2013) showed that loss of contact between PR and novel PIs were due the displacement of a water molecule by L10F. Furthermore, since only one L10F residue was involved in ligand binding, this asymmetry could aid in maintaining PR's flexibility by not restricting the enzyme with phenylalanine's large bulky aromatic rings in both chains.

Like the LPV models, specific AA residues including R8, G27, A28, D29/30, G48 and I50 were all involved in DRV-PR interactions. Interestingly, in a study evaluating the binding differences between DRV and its structural analog APV, Hou et al. (2009) found that stable interactions were observed between specific AAs (A29, D30, G48) and the bis-furyl and 4-aminobenzenesulfonamide moieties of DRV. This agreed with the findings observed in the current study (Figures 10–12). Furthermore, the bis-furyl (or bis-THF) moiety was designed to produce a network of hydrogen bonds with the main chain atoms of the viral PR (Agniswamy et al., 2015). Our analyses revealed more vdW interaction instead, particularly in the L76V-PCS069 mutant corresponding to the binding-free energies. Contrastingly, in addition to several hydrogen (A28, D29/D30, and G27) and alkyl/ π -alkyl bonds (Figure 4.10), the WT-DRV model also revealed a strong attractive charge between D25 and DRV. This indicates that the level of drug binding in the WT is much stronger in comparison to the mutants which is also supported by our GBSA calculations. Further reiterating this point was the loss of strong bonds between DRV and D25 in both the PCS124 and PCS069 mutants as only vdW interactions were noted. Therefore, a loss of contact between PR and these chemical moieties (bis-furyl and 4-aminobenzenesulfonamide) is the main reason for DRV resistance (Raugi et al., 2016).

Finally, our study revealed a vdW interaction between I54V and the PCS069-DRV mutant (Figure 4.12). As vdW interactions are considered for short-ranges this suggests that the flaps were pulled down closer to the drug. This agreed with a study conducted by Agniswamy et al. (2019) where the flap tips curled downwards in a DRV-bound I54V PR mutant. Flap “curling” has been linked to the open/closed states of PR when DRV is present. Yu et al. (2015) demonstrated that flexible curling of the flap tips into PR induces an open state. This observation suggests that PR utilizes mutations in its flaps to induce a semi-open conformation coupled with a loss of contact to minimize atomic bonds and inhibit drug binding.

4.5 Conclusions

The native structure of proteins is complex where it can transition between several states to adapt to changes within the genome, or its environment (Gidalevitz et al., 2011). In this study we evaluated the structural implications caused by LPV and DRV resistance associated mutations L10F, M46I, I54V, L76V and V82A when complexed with the drugs. Our analyses indicate that these mutations cause significant structural flexibility to the viral PR particularly within the flap regions. Moreover, it was also seen that the viral PR was relatively more susceptible to LPV in comparison to DRV. Furthermore, since L76V contradicted itself by showing stronger drug binding when it was included, the impact of this mutation in this context was still unclear. Therefore, chapter five investigated the structural mechanism by which the mutant PR's cleave the NC|p1 Gag CS that comprised the A431V resistance mutation.

Chapter five

Structural impact of the HIV-1 NC|p1 A431V Gag cleavage site mutation on the PCS124 and PCS069 protease mutants

5.1 Introduction

As previously discussed in chapter two, under drug selection pressure pathogens can effectively and rapidly accumulate mutations in various drug targets (Hooper and Jacoby, 2015; Kennedy and Read, 2017; Nguyen et al., 2018). Whilst most drug resistance mutations are clustered close to the active site (King et al., 2004), the HIV-1 PR has been shown to acquire mutations in distal locations, such as the flexible flaps and substrate cleft to evade drug binding (Ragland et al., 2014; Flynn et al., 2017). Though these resistant PR's are functionally weaker, they are still able to cleave the substrate and thereby outcompete the inhibitor for hydrolysis (Kantor et al., 2002; Rhee et al., 2003).

Incidentally, mutations arising in other proteins, such as Gag are being frequently reported (Fehér et al., 2002; Dam et al., 2009; Pillay et al., 2014; Teto et al., 2017; Su et al., 2018; Williams et al., 2019). The NC|p1 A431V Gag mutation is of interest, since it is associated with patients failing PI therapy (Lambert-Niclot et al., 2008; Giandhari et al., 2015). Additionally, in agreement with other studies (Verheyen et al., 2006; Malet et al., 2007), our analyses revealed direct associations between major LPV PRMs and A431V (chapter three).

While Gag-PR coevolution has been reported (Doyon et al., 1996; Zhang et al., 1997; Kolli et al., 2006; Dam et al., 2009), the mechanism by which hydrolysis is restored and the molecular basis in which these Gag CS mutations are selected is unclear.

Therefore, continuing from chapter four, this chapter investigated the mechanism by which the A431V Gag CS mutation structurally interacts with the mutant PR to properly maintain enzymatic cleavage under drug selection pressure.

5.2 Methods

5.2.1 Modelling of the NC|p1 Gag CS viral sequences

To maintain consistency and gain insightful knowledge on the co-selection of mutations in Gag-PR, the PCS069 and PCS124 viral sequences utilized in Chapter four was carried forward. As previously discussed, these viral sequences co-selected the NC|p1 CS mutation, A431V. The template selected for homology modelling (PDB ID: 2FNS) was an HIV-1 WT NC|p1 substrate complexed with an inactive HIV-1 subtype B PR (Prabu-Jeyabalan et al., 2006). The sequence region spanned from residues R429 to G435 as shown in Figure 5.1 below.

While templates spanning the entire target region is advantageous, there are currently only two entries for the NC|p1 CS in the PDB¹⁹. Additionally, as this region is relatively smaller (10 AAs) and does not comprise any tricky loops in comparison to other proteins, the 2FNS template is considered acceptable for use.

	428	429	430	431	432	433	434	435	436	437
Subtype B	E	R	Q	A	N	F	L	G	K	I
AY772699	.	.	.	.	.	.	.	.	.	.
2FNS	-	.	.	.	.	.	.	.	-	-
PCS124	.	.	.	V	.	.	.	.	.	.
PCS069	.	.	.	V	.	.	.	.	.	.

Figure 5.1 Sequence alignment of the HIV-1 subtype B, AY772699 reference, the 2FNS template and the target sequences. **Note:** the PCS124 and PCS069 NC|p1 Gag cleavage sites only have the A431V resistance mutation.

Thereafter, sequence alignment and homology modelling were carried out as described in section 4.2.2 of chapter four.

5.2.2 Geometric optimization of the ligand

In comparison to the drugs (LPV and DRV), the Gag CSs are molecularly larger and somewhat bulkier due to the AA side chains. Furthermore, because these ligands were theoretically modelled, optimizing their tertiary structure is imperative. Therefore, to ensure that the Gag CSs are geometrically and stereo-chemically accurate, a geometric optimization was carried out. Briefly, the Gag CSs were optimized using a semi-empirical quantum mechanics (qm) simulation with the sqm program in AmberTools v.14 (Case, 2014). Simulations were optimized at the Hamiltonian level using the AM1 qm-theory. The number of self consistent field (SCF) iteration cycles required for the geometry to converge and stereo-chemical equilibration to be reached was 100. Thereafter, the Antechamber program was used to prepare the files for Leap.

5.2.3 Docking, MD simulations and binding-free energies

Once ligand optimization had been achieved, the docking, PR-Gag production simulations and calculation of binding-free energies were performed according to sections 4.2.4 to 4.2.6 of chapter four, respectively.

¹⁹ <http://www.rcsb.org/> : search criterion NC-p1

5.3 Results

5.3.1 Gag-PR conformational stability

The time series RMSD for the PCS124-A431V and PCS069-A431V models are depicted in Figure 5.2. As observed, the PCS124-A431V model maintained a relatively stable complex from 50–100 ns whilst the PCS069-A431V model showed greatest structural equilibrium at approximately 48–77 ns and then again from 88–100 ns. Although definitive equilibrium was reached at specific intervals, the overall A431V-bound PCS124 and PCS069 models depicted very similar RMSD values over the entirety of the production simulations.

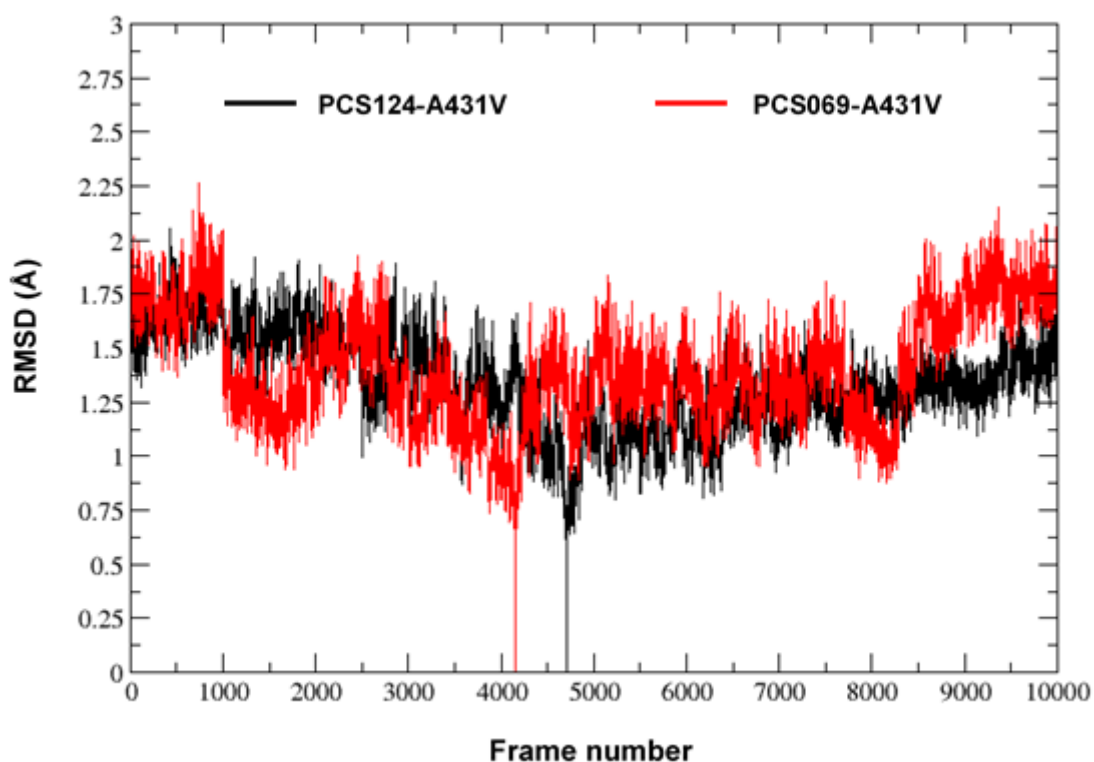


Figure 5.2 Time series RMSD plots of the HIV-1 isolate A431V-PR bound models.

To evaluate specific residue fluctuations in PR, we constructed RMSF plots as seen in Figure 5.3 below. Interestingly, similar trends in particle flexibility of the A431V-PR mutants was observed with the DRV-bound PR models (chapter four; Figure 4.6b) in comparison to the LPV-PR complexes (chapter four; Figure 4.6a). Moreover, the PCS069-A431V model displayed increased particle flexibility over more AA residues in chain B than A thus indicating a greater level of asymmetry in the L76V-inclusive mutant (Figure 5.3; dotted circle).

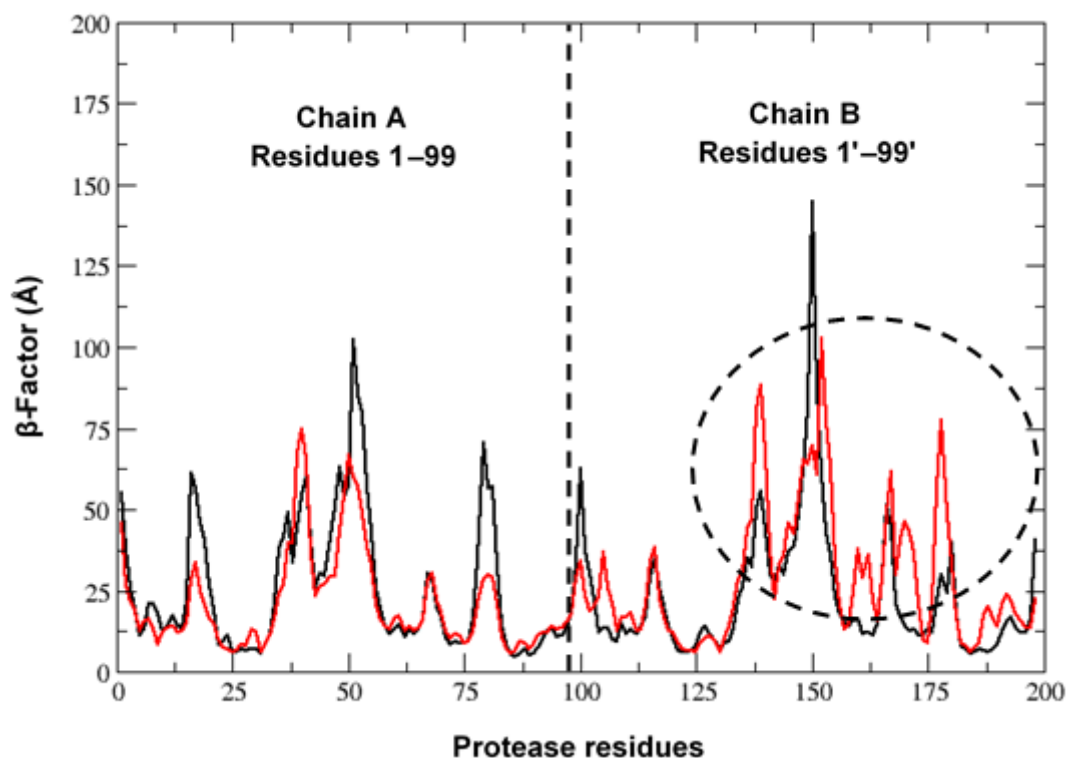


Figure 5.3 RMSF analysis of the A431V-PR bound mutants. **Note:** the HIV-1 PCS124-A431V and PCS069-A431V models are represented by the solid black and red lines, respectively.

5.3.2 NC|p1 binding to the PR mutants

Expectedly, the NC|p1 Gag CSs are stereo-chemically larger than their PI antagonists. As such, the CSs encompass a greater surface area within the PR's substrate cavity, as seen in Figure 5.4 below. Although, the NC|p1 CSs comprise several bulky side chains, such as phenylalanine's aromatic benzene ring at position 433, the AA side chains are rotatable as seen by the alternative conformations in the PCS124 and PCS069 mutant models (Figure 5.4).

The A431V NC|p1 mutants exhibited significantly stronger binding (Figure 5.4) as compared to the LPV- and DRV-bound PR mutants (chapter four; Table 4.3). Specifically, when comparing the most energetically-favourable binding mode, there was a 3-fold energy difference between the A431V mutant (-62.4605 kcal/mol) and the drug-bound mutant (PCS069-LPV: -23.4128 kcal/mol). Interestingly, the L76V-inclusive PCS069 model exhibited a greater binding affinity (-62.4605 kcal/mol) for the NC|p1 mutant in which a -12 kcal/mol energy difference was observed in comparison to the PCS124 model (-50.3386 kcal/mol).

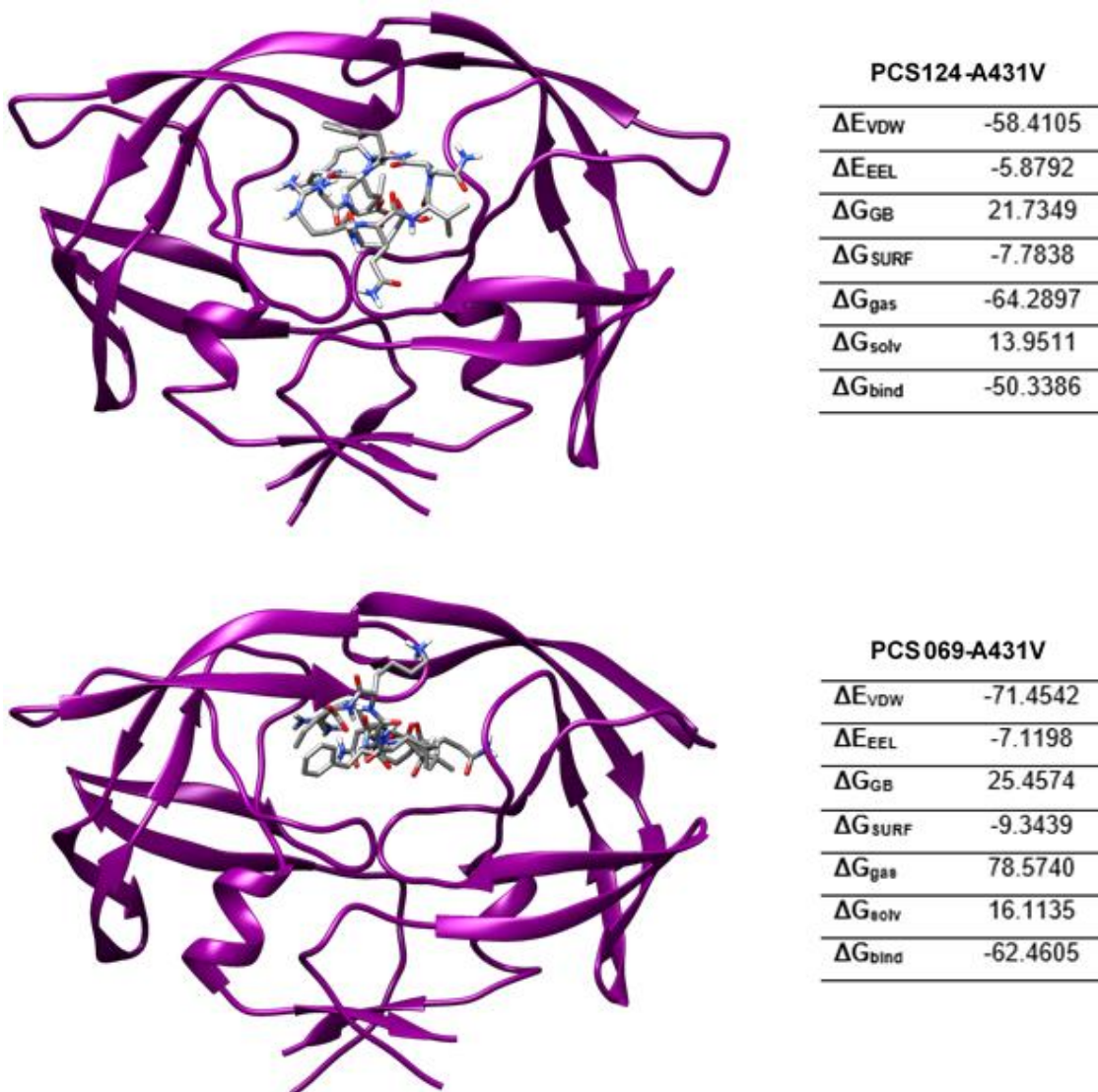


Figure 5.4 MM-GBSA binding-free energies of the A431V NC|p1 Gag CSs bound to the PCS124 and PCS069 HIV-1 PR mutants. **Note 1:** all predicted energies were calculated over 2,000 snapshots and are represented in kcal/mol. **Note 2:** ΔE_{VDW} = van der Waals contributions; ΔE_{EEL} = electrostatic contributions; ΔG_{GB} = polar contributions; ΔG_{SURF} = non-polar contributions; ΔG_{gas} = free energy in gas phase; ΔG_{solv} = solvation free energy; ΔG_{bind} = binding free energy.

5.3.3 Gag-PR interaction maps

To evaluate the specific interactions between the NC|p1 Gag CS and the PR mutants, we constructed Gag-PR interaction maps as depicted in Figures 5.5–5.6 below. Accordingly, the PCS124-A431V model revealed hydrogen bonds between residues A28_PR and K436_Gag, G48_PR and the nitrogen atom connecting residues L434_Gag and G435_Gag as well as a double hydrogen bond between PR's R8' (R107) and the oxygen atoms of Gag residues E428 and Q430.

Additionally, a hydrogen bond between D25_PR and the carbon atom of I437 in Gag was also observed. Moreover, residue D29 in PR was attractively charged to R429 in Gag. Of note, whilst L10F_PR formed an alkyl bond with A431V in Gag, G27 and I47 in PR also formed close vdW interactions with V431. In addition, major PRMs V82A' (V181A) and M46I formed vdW interactions with residues R429 and F433 in Gag, respectively. Furthermore, a π - π T-shaped stacking²⁰ was formed with F53 in PR and F433 in Gag. Interestingly, in addition to substrate cleft residue V32 in PR, L76_PR formed vdW interactions with K436_Gag whilst both I50/I50' (I149) formed close vdW interactions with each other, G48_PR, L76_PR and the NC|p1 substrate.

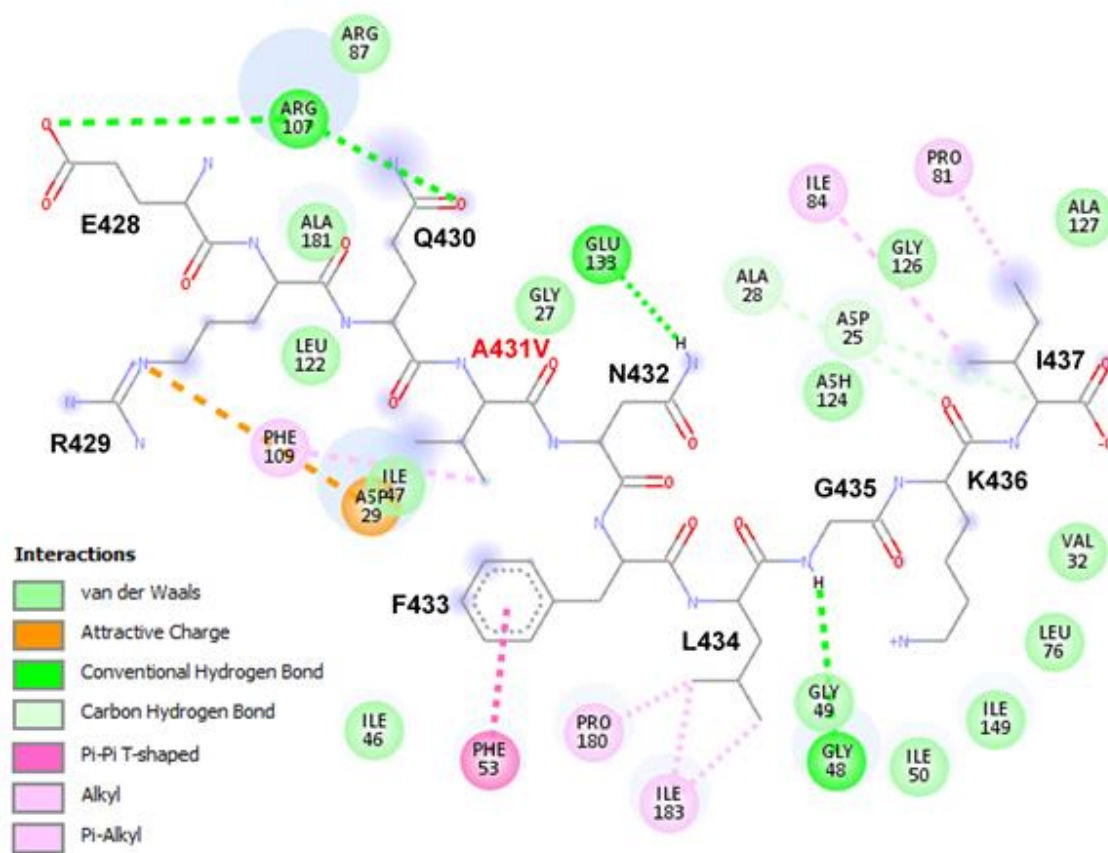


Figure 5.5 Amino acid interaction map showing the association between the HIV-1 isolate PCS124 protease and the mutated NC|p1 Gag cleavage site. **Note:** the A431V Gag mutation is indicated in red.

Figure 5.6 represents the interaction map for the PCS069-A431V model. When compared to the PCS124 substrate-bound model, it was evident that the PCS069 PR mutant formed significantly

²⁰ π -stacking refers to non-covalent, attractive interactions between two aromatic rings.

more interactions with the substrate. In particular, 12 hydrogen bonds were formed between the PCS069 residues and the NC|p1 CS. Of these, PR residue R8' formed three hydrogen bonds with the oxygen atoms in residues E428, R429 and Q430 in Gag. Interestingly, while D29_PR formed two hydrogen bonds with both oxygen atoms in Q430_Gag, D30_PR also formed an additional hydrogen bond with the second oxygen atom in Q430_Gag. Moreover, WT AA G48 in PR hydrogen bonded with the second oxygen atom in Q430_Gag. Finally, residues G49' (G148), I50' (I149) and P79' (P180) also hydrogen bonded with the mutated NC|p1 substrate.

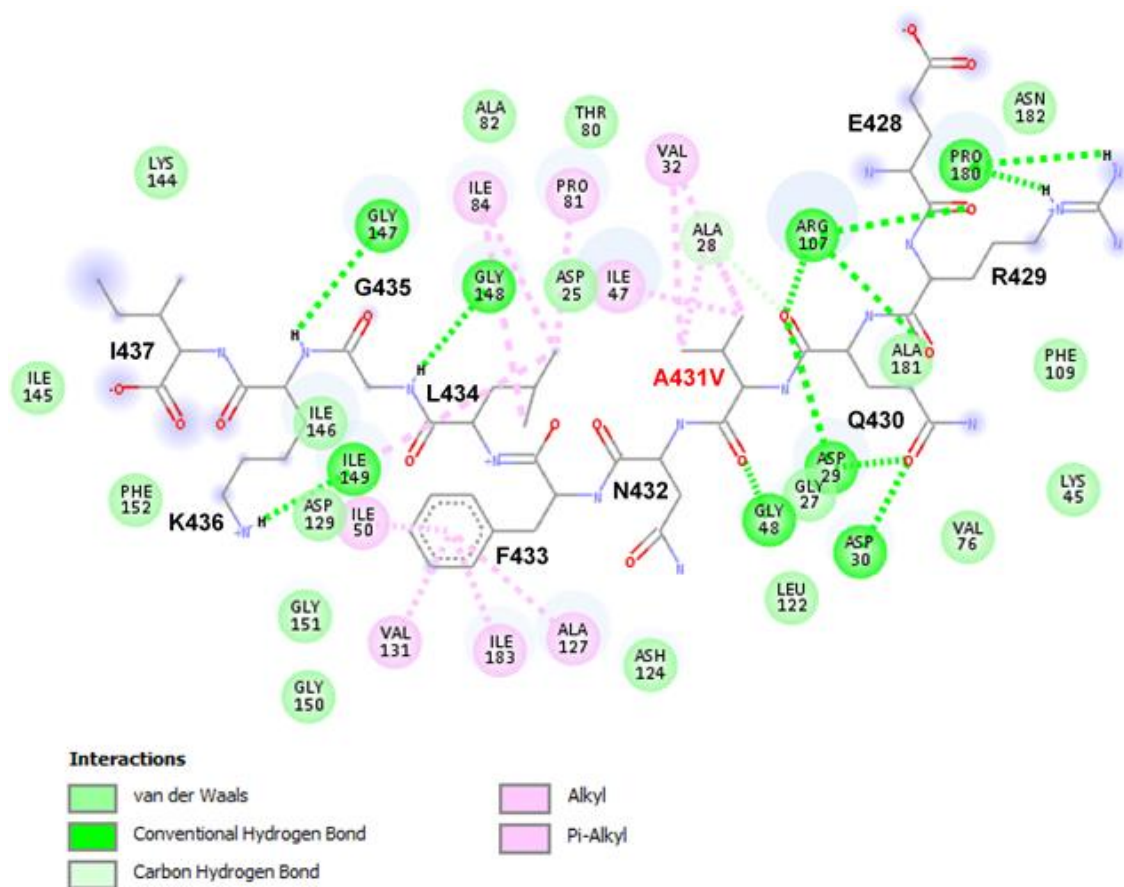


Figure 5.6 Amino acid interaction map showing the association between the HIV-1 isolate PCS069 protease and the mutated NC|p1 Gag CS. **Note:** the A431V Gag mutation is indicated in red.

Furthermore, whilst V82A also formed a vdW interaction with the substrate, V82A' (V181A) was proximal to residues R429 and Q430 in Gag (Figure 5.5). Moreover, minor PRM L10F' (L109F) was closely located to V82A'. Interestingly, the switch from leucine to valine of residue 76 in PR positioned the mutant valine closer to Q430_Gag instead of K436_Gag as seen in the PCS124-

A431V model. Additionally, several interactions were observed with A431V, namely, multiple alkyl bonds with WT residues V32 and I47 in PR. Finally, whilst D25 did not hydrogen bond with the mutated NC|p1 substrate, it formed close vdW interactions to I47 in PR which in turn was closely bonded to A431V in Gag.

5.4 Discussion

Generally, protein folding depends on a multiple factor process and elucidating the mechanism by which they fold provides a useful knowledge on their physiological role in nature (Wu et al., 2015). While our understanding on protein folding has vastly improved over the years, the exact mechanism by which folding occurs *in vivo* is not well understood (Clark and Ugrinov, 2009). Though “the protein folding problem” has proved to be a challenge for half a century²¹ (Li et al., 2017), the molecular structures of small proteins are well predicted by computational means (Dill et al., 2008). Here, we evaluated the RMSD and RMSF of the mutated Gag-PR complex over a 100 ns MD simulation. Our analyses revealed that although the PCS124/069 models did fold and re-fold to alternate structures, greater conformational stability was observed over the 100 ns, particularly for the PCS124-A431V model which maintained relative stability from 50 ns onwards. However, the PCS069-A431V model stabilized for 28 ns prior to re-folding and restoring stability in the last 12 ns of the simulation. Goodchild et al. (2011) theorized that proteins can alter their folding in response to the environment whilst regulating protein functionality. Furthermore, a study conducted by Porter and Looger (2018) identified several proteins from the PDB that switch folds, thus having more than one conformation. In this context, this suggests that apart from drastic changes that would render the enzyme inactive, PR can alter its conformation to adapt to its mutated substrate as well as the drug-pressured environment. Additionally, Alexander et al. (2009) observed that a single AA mutation can equate to two folded states of a protein. Therefore, it is highly plausible that the PCS mutants, having four to five PI mutations can exist in several states to acclimate to the drug-pressured environment. Moreover, Agozzino and Dill (2018) found that least stable proteins can rapidly adapt to changing conditions. This suggests that the changing stability of the PCS069 mutant, having five PI mutations at functionally important sites maintains a less favourable structural conformation to continually adapt in favour of the NC|p1 CS binding as opposed to the drugs.

Interestingly, the RMSF data corroborates the RMSD findings and the aforementioned protein folding hypotheses. As greater particle flexibility was comparable to the DRV-bound PR models,

²¹ The protein folding problem questions how an AA sequence dictates the tertiary structure of protein.

this suggests that the same mechanism employed to evade drug binding is used to maintain substrate cleavage. Specifically, as previously discussed, changing the AA torsion angles can alter protein conformity (Thukral et al., 2007; Ponnuraj and Saravanan, 2017; Saravanan and Selvaraj, 2017). Additionally, the level of asymmetry in the PCS069 model indicates that each chain is rapidly regulated either to constrict or flex to allow movement for the highly rotatable, bulky Gag CS. Therefore, it is conceivable that the asymmetrical AA fluctuations in a homodimeric protein may evade drug binding through the rapid regulation of its subunits.

While it is known that Gag cleavage occurs over several sequential steps as discussed in chapter one, the exact structural mechanism for this process is debatable (Mattei et al., 2018). Even though the PIs were designed to out-compete the natural substrate (Spearman, 2016), the HIV-1 Gag, consisting of approximately 500 AAs (Fun et al., 2012), is a large protein in nature. Therefore, it is also likely that the 10 bulky AAs recognized by PR for cleavage is also molecularly large. Separate studies conducted by Prabu-Jeyabalan et al. (2002) and King et al. (2004) showed that the PR's substrates occupies a consensus volume within the binding cavity. Özen et al. (2011) hypothesized that the ability of the CSs to fit within the substrate envelope is also determined by the substrate size and dynamics. This suggests that PR's capability to incorporate Gag essentially depends on the peptide's rotamers and ultimately its flexibility. Furthermore, the G435 and K436 residues contributes to the fundamentally flexible nature of the NC|p1 substrate (Özen et al., 2012).

Additionally, this flexibility may also contribute to the stronger binding observed in the PCS-A431V complexes as compared to the drug-bound PR models. The increased binding affinity for the NC|p1 CS also reiterates that the PRMs were compatibly selected to accommodate Gag. Moreover, the 12 kcal/mol difference between the PCS124 and PCS069 models indicates a selective advantage to acquiring a 4th major PRM in favour of three (M46I+I54V+V82A). Therefore, it is accepted that via alternate mechanisms, patterns of mutations act synergistically to evade drugs (Agniswamy et al., 2016).

Lastly, to explore the intricate interactions between the mutated Gag and PR, 2D interaction maps were constructed. Our analyses revealed that key hydrogen bonds involving several Gag residues (E428, Q430, N432, L434 and G435) across the substrate was observed in the PCS124-A431V model. While substrate dynamical flexibility allows for its incorporation (Özen et al., 2011), this suggests that the formation of hydrogen bonds arose to stabilize the CS, keeping it relatively static for cleavage to occur. Furthermore, our analyses also revealed an important hydrogen bond with

PR's catalytic D25 and the carbon atom of isoleucine at position 437 in the NC|p1 Gag CS. This bond suggests that the CS rotated into and downwards of PR's substrate cavity to catalyze the reaction. Incidentally, this could be seen Figure 5.3 where the isoleucine extended down PR. Of note, Gag Q430, G435, K436 and I437 in Gag are also sites at which drug resistance/exposure associated mutations occur (Doyon et al., 1996; Gonzalez et al., 2004; Ghosn et al., 2011; Knops et al., 2011). As such, these regions in the substrate are variable and can therefore allow for alternate substrate poses to develop when PR is unable to actively accommodate the CS. Interestingly, the close interaction of the A431V Gag mutation with G27_PR and I47_PR indicate that the slightly larger valine substitution in place of alanine brings the active site and flaps closer together thus constricting the available space and allowing for greater binding affinity. Furthermore, the proximity of M46I in PR and the phenylalanine of F433 in Gag suggests that coordination between these two residues can regulate movement within the flaps. Of note was the interaction of the I50's to each other and the substrate. Tóth and Borics (2006) showed that the enzyme can exist in open, semi-open and curled conformations during a single MD simulation and that the distance between I50's (flap tips) indicate which conformation was favoured at the time. Finally, the bond between L10F_PR and A431V_Gag which was also observed in our Gag-PR BN (chapter three), suggests that coordination between these two residues are important for substrate recognition and linkage.

The increase of hydrogen bonds between the PCS069 PR and the NC|p1 substrate suggests that the L76V mutation in PR significantly contributes toward substrate recognition and favourable cleavage rather than evading drug binding directly. Generally, hydrogen bonds facilitate protein-ligand binding through the displacement of receptor water molecules (Chen et al., 2016). In essence, either the water molecules are displaced by the ligand or are subtly shifted (Huggins and Tidor, 2011). While water molecules are important mediators in protein-ligand binding (Brenk et al., 2006), Chen et al. (1998) showed that in an enzyme-inhibitor complex, the ligand displaced an active site water molecule which created favourable inhibitor orientation. Thus, in our study, the extensive formation of hydrogen bonds suggests that protein water displacement may have occurred to properly orient the ligand within the substrate cavity. Additionally, these data also revealed that the L76V PR mutation also closely interacted with Q430 in Gag. Incidentally, Q430_Gag was also involved in four out of the 12 hydrogen bonds. A study conducted by van Maarseveen et al. (2012) on NC|p1 CS efficiency on resistance revealed that AA position of the substrate significant correlated with the difference between the NC|p1 430–435 residues outside PR's cavity and within the active site. Therefore, Q430 as well as A431V in Gag can alter PR's active site dynamics for efficient substrate cleavage.

While the hydrogen bonds between the PCS069 PR and NC|p1 CS hold the substrate in place, the CS seemingly “sits” at the top, closer to PR’s flaps (Figure 5.3). This observation was pronounced by the hydrogen bond linking A431V in Gag to G48 in PR as well as the alkyl bond between I47_PR and A431V_Gag. Studies have shown that the positioning of PR’s flaps correlated with its sensitivity to the PIs (Wlodawer et al., 1989; Yedidi et al., 2014) suggesting that the same mechanism can be employed when bound to the mutated NC|p1 substrate. Additionally, a study conducted by Khan et al. (2018) suggested that switching between flap positioning during inhibitor binding requires additional changes in PR’s conformation which may result in significant energy fluctuations. In this study, conformational changes in other parts of PR were observed by interactions between PRMs L10F, V82A and L76V (Figure 5.5; dotted black lines). This suggests that when L76V is present together with A431V_Gag, the mutational dynamics between this PR resistance combination (L10F+M46I+I54V+V82A) changes to constrict these regions in PR and allow for efficient substrate processing in favour of drug binding. Contrastingly, the switch from hydrogen bonding to vdW interactions between D25_PR and the substrate indicates an indirect mechanism of cleavage which is consistent with studies evaluating L76V, as previously discussed (chapter four). Noteworthy, while vdW interactions are considered weak, these forces are often important in the interaction and shape of molecules (Atkins and de Paula, 2006). Therefore, in this instance, cleavage is coordinated by the flaps and strong vdW interactions rather than direct active site dynamics.

5.5 Conclusions

In summary, these data indicate that the mutated PR depicted great affinity for the NC|p1 Gag CS. Specifically, the A431V Gag mutation coordinated several PR residues to aid in substrate recognition and efficient binding. In addition, the PRMs actively work together to provide a compatible conformation that can accommodate Gag. Particularly, PRM L76V plays an important role in coordinating PR resistance dynamics, suggesting that its role is closely related to CS recognition rather than association with the drugs. Finally, these data revealed that constricting and flexing specific regions in PR while allowing flexible movement of the substrate can allow for multiple, complex mechanisms of resistance to occur.

Chapter six

General discussion, conclusions, future recommendations and study limitations

6.1 General discussion

With an estimated 1.8 million new HIV infections reported in 2017 equating to approximately 5,000 infections per day, HIV remains a serious public health risk (UNAIDS, 2018). Although more than a 55% reduction of AIDS-related deaths²² have been reported since 2004 due to ARV therapy (HIV.gov, 2019), drug resistance and thereby the virus's ability to actively replicate despite the drugs remains a serious challenge (Ngo-Giang-Huong and Aghokeng, 2019). While the PIs show effective potency against the virus (Titanji et al., 2013), PR is able to accumulate resistance mutations in various regions, thus thwarting drug binding (Henderson et al., 2011). Furthermore, several resistance associated mutations reported at cleavage and non-CS positions in PR's natural substrate Gag, have also been reported in several studies (Maguire et al., 2002; Verheyen et al., 2006; Kolli et al., 2009; Parry et al., 2011; Shibata et al., 2011). While these mutations can improve viral fitness in the presence of PRMs (Fun et al., 2012), they have also been shown to directly confer resistance in the absence of PRMs (Parry et al., 2011). Therefore, it is becoming increasingly apparent that Gag and PR share evolutionary mechanisms to synergistically act against PI binding.

Most studies have investigated subtype B viruses even though subtype C remains the most prevalent subtype globally (Alcalde et al., 2012; Costa et al., 2014; Castley et al., 2017). Though several studies based on functional assays have provided useful information on the effect of resistance mutations found in Gag and PR (Brann et al., 2006; Matsunaga et al., 2015; Zhu et al., 2015; Giandhari et al., 2016), the selection of combinations of resistance mutations and its impact on the structure is lacking (Zhang et al., 2010; Costa et al., 2014). It is therefore important to improve our understanding on the pathways to resistance and the complexities associated with treatment failure.

Therefore, the current study investigated Gag-PR coevolution under drug selection pressure and the structural implications of patterns of resistance mutations in HIV-1 subtype C. To do this, we first identified the selection and frequency of mutations in Gag and PR using 1,972 and 130 PR and Gag sequences, respectively. Thereafter, we performed positive selection and coevolution analyses to construct Bayesian networks for elucidating probable pathways to resistance. Lastly, using the knowledge gained from BNL, we investigated the structural changes induced by the combination of resistance mutations on PI and Gag CS binding using homology modelling, docking and MD simulations.

²² Globally, in 2018, approximately 770,000 people died as a result of AIDS-related deaths, compared to the 1.2 and 1.7 million deaths observed in 2010 and 2004, respectively.

Of the 1,972 PR sequences, only 964 had major PRMs. Site-wise, the highest percentage of mutations occurred at positions 46 (19%), 54 (23%) and 82 (25%). Additionally, certain AAs were selected more frequently over others, for example M46I occurred in 16% of the dataset as opposed to M46L (3%), thus suggesting the role of AAs in protein functionality. The same trend could be seen for I54V (22%) and V82A (23%). Incidentally, the M46I+I54V+V82A combination, which was also the most frequent pattern observed in this study, is commonly associated with failure to several PIs including the 2nd-line drug, LPV (Barber et al., 2012). Although, L76V only occurred in 7% of the dataset, it was part of the second most recurring combination (M46I+I54V+L76V+V82A) in this study. Amongst the minor PRMs, L10F/I, A71V and T74S were highly prevalent in the dataset. While the exact impact of minor resistance mutations on PR is arguably unclear (Nijhuis et al., 1999; Henderson et al., 2011; Wensing et al., 2017), it is accepted that their presence can either improve viral fitness or increase the level of drug resistance in the presence of other major PRMs (Scherrer et al., 2012).

Of the 30 Gag resistance/exposure associated mutations (Fun et al., 2012), only A431V, L449F, R452K, K62R, N373P, I401V, R409K and S451T occurred at significantly ($p < 0.01$) higher frequencies in the treatment associated dataset. Of these, A431V (NC|p1), L449F (p1|p6), R452K (p1|p6), N373P (p2|NC) and S451T (p1|p6) are Gag CS mutations. Furthermore, this study also identified several presumptive Gag resistance associated mutations across multiple Gag domains. These included T53N, S54A, Q69K, D122T, S125D and N126E in matrix, D260E, I256V, D319E and R335K in capsid as well as P485A and L498S in p6. While the selection of Gag CS mutations directly alters the CS thereby allowing for unhindered substrate processing (Fun et al., 2012), non-CS mutations allow for distal changes in the structure to occur (Özen et al., 2014). Since Gag has numerous functional roles (chapter one; section 1.10), it is conceivable that these mutations are selected to preserve Gag functionality rather than resistance development itself. These data provided useful information on the prevalence and patterns of resistance in PR and Gag. Bearing this in mind, we investigated the evolutionary pathways of resistance in chapter three.

To evaluate the pathways leading resistance, we firstly identified the positively selected and coevolving sites in Gag-PR. To do this, we compiled 58 complete Gag-PR sequences from the PCS cohort. Accordingly, an overlapping coevolving group of 10, 46, 54, and 82 was observed suggesting that these positions either directly or indirectly interact with each other. Moreover, of these, codons 10 and 82 were also positively selected indicating that mutations at these positions provide a selective advantage to the enzyme. While several Gag mutations (E365, S373, A374, A431, R452 and Q474) were identified in the coevolution analysis. Of note was the NC|p1 Gag

CS mutation A431V, since it also occurred in 26% of the Gag dataset. This mutation has been associated with V82A, M46I and L76V in previous studies (Bally et al., 2000; Myint et al., 2004; Nijhuis et al., 2009). In addition to conferring resistance alone (Dam et al., 2009), it has also been shown to improve viral fitness in the presence of PRMs in subtype B (Mammano et al., 2000; Cote et al., 2001).

To the best of our knowledge, the evaluation of Gag-PR resistance mutations in pathways to LPV resistance using BNL has not been shown before. This study proposed two probable pathways to LPV resistance. The first pathway connected I54V to L10F, M46I and V82A while inverse associations with L24 and Q58 connected L76V to M46I+I54V+V82A. The second pathway connected V82A with LPV via L93 in PR. We postulated that the deciding factor as to whether I54V or V82A is selected first in the pathway also depends on selection of L10F. Therefore, if L10F is selected then I54V is also selected. While conditional dependencies between 46, 54 and 82 have been observed (Zhang et al., 2010), a recent study conducted by Vasavi et al. (2017) revealed that in a double PR mutant comprising L10F/N88S, the binding affinity of PR to NFV was lowered in the presence of these mutations. This suggests that L10F may play an important role in regulating resistance in the presence of major PRMs. Interestingly, in the Gag-PR network, the interactions between the PRMs remained unchanged whilst the Gag mutations essentially added to the existing network. Of note, A431V correlated with M46I+V82A via I54V. It also interacted with L10F. This suggests that associations between A431V and V82A depends on the selection of M46I and I54V which in turn depends on L10F. With numerous studies highlighting Gag-PR coevolution (Shibata et al., 2011; Kolli et al., 2014; Deshmukh et al., 2016; Codoñer et al., 2017), it is evident that the basis on which resistance occurs is dynamic and complex. Consequently, the structural mechanism by which these resistance mutations act on resistance is certainly unclear (Lin, 2016). Particularly, in the context of this study, the structural changes of L10F+M46I+I54V+L76V+V82A in subtype C is elusive. Therefore, chapter four evaluated the structural implications of this combination on LPV and DRV binding.

Based on the data from chapter two and the BNL which especially highlights L76V as a 4th mutation, we selected two PR sequences, one with L76V (PCS069) and one without (PCS124) in addition to the L10F+M46I+I54V+V82A from the PCS cohort to study further. The MD simulations revealed that the LPV-bound PR mutants were relatively stable over the 100 ns simulation in comparison to the DRV-bound models. Expectedly, LPV revealed stronger binding to the PR mutants. Although DRV is considered extremely potent as it comfortably fits into PR's substrate envelope, resistance can occur through the accumulation of several PRMs (Lockbaum

et al., 2018). Our data revealed that a loss of contact between DRV's essential chemical moieties, bis-furyl and 4-aminobenzenesulfonamide contributes largely to DRV inefficacy which is consistent with findings observed elsewhere (Raugi et al., 2016). LPV resistance on the other hand seems to be readily affected by the direct structural changes induced by the drug resistance mutations as seen in this study. While it is evident that these dynamical shifts in PR can allow for a reduction in binding affinity of the drugs, it is unclear how these mutations would be advantageous during cleavage. Furthermore, the presence and link of the NC|p1 A431V Gag mutation to these PRMs in terms of structure is unclear. Therefore, chapter five investigated interactions of the mutant NC|p1 CS on the MDR PR models.

The structural interactions of these specific PRMs coupled with the mutated NC|p1 Gag CS (A431V) has not been shown prior to the current study. These data revealed that MDR PR models had a stronger affinity for the CS in comparison to the PI drugs. This was particularly evident from the binding scores where the PCS124 and PCS069 models had a binding energy of -50.3386 kcal/mol and -62.4605 kcal/mol, respectively. This was a 3-fold energy difference between the lowest binding score of drug-bound model. Furthermore, it was seen that A431V coordinated several residues in PR to improve substrate recognition and binding whilst the PRMs work to alter PR's conformation to accommodate Gag. Additionally, it was suggested that L76V in PR provides a mechanistic advantage for substrate recognition and binding as opposed to directly inhibiting the drug as shown in other studies (Louis et al., 2011; Wong-Sam et al., 2018). Therefore, this study highlights that L76V utilizes an additional novel approach in PI drug resistance. Lastly, to our best knowledge, docking of the theoretical PR and Gag CSs to evaluate drug resistance and substrate binding has not been previously shown.

6.2 Conclusions

The current study investigated the intimate interactions between complex resistance patterns in Gag and PR under drug selection pressure. As observed, Gag and PR readily accumulate mutations in various regions to outcompete the inhibitors in favour of substrate binding. Importantly, the selection of mutations is not random but rather advantageous to the structural complexity of the enzyme-substrate complex. In particular, the mutant PR overcomes drug binding by switching conformations through mutations in or near the active and flap regions. Consequently, a balance between enzyme rigidity and flexibility through mutations and chain asymmetry aids the virus in restoring cleavage. Further complicating the process is the role of the substrate. Additionally, proper incorporation of the A431V Gag CS within PR's cavity depended

on movement of the substrate. Consequently, the AA side chains can rotate to aid in substrate recognition. These data highlight that the functional aspects of resistance are highly correlated with the structural dynamics of the enzyme and substrate.

6.3 Future recommendations and limitations

Some aspects of this study were limited and are hereby recommended for future investigation:

1. The Gag dataset utilized in this study was small. However, it is accepted there are limited viral sequences available that were genotyped from patients receiving ARV therapy. Increasing the sample size to evaluate a larger picture of Gag resistance dynamics is needed.
2. Functional assays investigating the step-wise accumulation of the mutations reported in this study should be performed to present a complete picture on pathways to resistance.
3. As some subtype C signature mutations were present in the BNL, a study evaluating these signature mutations in subtype C vs subtype B should be performed to identify possible subtype differences in pathways to resistance.
4. This study only evaluated the A431V NC|p1 Gag CS mutation because of its importance in the Bayesian networks, however, mutations at the remaining Gag CSs should be further studied to elucidate their individual roles in resistance in the presence of the PRMs highlighted in this study.
5. As this study did not look at the WT, the NC|p1 CS should also be evaluated without the A431V mutation in the presence of the PRMs to elucidate how cleavage might occur without this mutation.
6. Since several non-CS mutations were identified in the Gag-PR BNL, such as Q69K and I256V, the structural impacts of these mutations should be studied further to identify its role in pathways to resistance.
7. Accelerated molecular dynamics should be performed on a millisecond scale to evaluate the folding of the mutant Gag-PR proteins.
8. Using the information obtained in this study as a foundation, a computer-based programme can be developed to predict viral replication capacity on a structural level.

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Appendix A: Publication

This paper was published as a Discovery Note in the journal *Bioinformatics*, btz079. It explored Gag-PR coevolution in pathways to resistance.

Sequence analysis

Gag-protease coevolution shapes the outcome of lopinavir-inclusive treatment regimens in chronically infected HIV-1 subtype C patients

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Abstract

Motivation: Commonly, protease inhibitor failure is characterized by the development of multiple protease resistance mutations (PRMs). While the impact of PRMs on therapy failure are understood, the introduction of Gag mutations with protease remains largely unclear.

Results: Here, we utilized phylogenetic analyses and Bayesian network learning as tools to understand Gag-protease coevolution and elucidate the pathways leading to Lopinavir failure in HIV-1 subtype C infected patients. Our analyses indicate that while PRMs coevolve in response to drug selection pressure within protease, the Gag mutations added to the existing network while specifically interacting with known Lopinavir failure PRMs. Additionally, the selection of mutations at specific positions in Gag-protease suggests that these coevolving mutational changes occurs to maintain structural integrity during Gag cleavage.

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Supplementary information: Supplementary data are available at *Bioinformatics* online.

Appendix B: Protease and Gag sequence accession numbers

Accession numbers for treatment exposed protease sequences

KF526221	KF135163	KF135023	JN132268	KC423757	JN638200	AY529558	KF135091
KF526227	AY529608	KF135139	JQ480293	KC423705	AY677427	KF134957	KF134930
KF526212	KF135033	KF135029	JN638132	KC423284	FJ445708	KF134958	AY900811
KF526218	AY677473	KF134948	JN638225	KC423763	KC423104	KF135149	KF135083
KF526207	AY529534	KC423753	KC423404	KC423440	KC423562	KC424259	KF135084
KF526220	KF135158	KF135015	KC951632	JN132390	JN132221	AY529578	KF135083
KF526226	KF135159	KF134985	KC423124	JN381594	JQ480163	AY529598	KF134938
AY677485	KF135092	KC423906	KC423703	KF135071	KC424241	AY529599	KF135165
AY529577	KF135150	AY529533	EU308099	KF135072	JN638092	JN700932	KF135162
JF960549	KC423127	KF135028	JQ480160	KF135031	KF134959	JN638218	AY900818
AY529541	KF135044	KF134951	JQ480224	KF135032	KF793146	AY529592	JN638106
AY529542	KF135045	KF134936	KC424212	AY529613	KC423799	KF793134	JN638215
AY529543	KF135046	AY900815	JF960548	KC422880	JN638162	KC423788	JN638070
AY529544	AY529582	AF358747	JF960554	KC423650	AY529554	KF135146	JQ480220
AY529545	KF135030	JN638156	KC423550	AY900795	AY529555	KF135106	KC423714
AY529573	KC423878	KC423388	KC423158	HM593308	AY901184	KF134949	JQ480222
KF134975	KF135066	KC423813	JQ480273	AY529581	AY529561	KF134935	AY529590
KF134994	KF134950	JN638193	KC424332	GU324863	AY529550	KF135120	KF134960
KF134963	KC424133	KC424143	KC423006	JN638208	AY529562	KF135121	JQ480274
MH568933	KC424348	KC422859	KC423841	KC424268	AY529563	KF135076	KF134988
KF135003	KF134953	KC423761	AY900794	JN381618	AY529549	KF135156	JQ480297
GU324870	KF135049	KC424273	AY589912	KC422999	AY529548	KF135157	AY677471
KF134941	KF135151	JQ480225	KC423893	AY090850	AY529567	AY529593	KC424322
KF134941	KF135152	AY090845	HM623531	FJ445712	AY529568	JN638207	KC423458
KF135040	KF135078	FJ445719	JF960579	KC423358	AY529569	KF134997	KC423099
KF135147	KF135001	AY589876	KC423437	AY900770	AY529610	AY529547	JN381572
KF135004	KF135055	HQ843636	KC423449	KC424150	AY529587	KC423644	KC423119
AF358760	KF134939	JQ480283	JN132295	KC424037	JN132219	JN087532	KC423957
AF358750	EF116342	JQ480287	JF960550	JQ480157	KF134969	EU854548	AY461494
KF241499	KF135009	KT032035	KC951639	JN638187	KC422967	EU854547	AY461495
AY677402	EF548178	EU854490	KC423376	AY461496	AY529529	EU854562	KC423384
KF134937	KF135068	EU854489	KT032022	FJ445727	KF135086	EU854561	KF135052
AY900745	KF135010	EU854488	JN638145	AY900805	AY529556	EU854546	KF135127
KF135138	AY529606	EU854487	KC951637	JN638077	AY529557	KF134929	KF135008
KC422954	JN393305	JQ480279	JN381576	EF186986	KF766541	JN132231	KC423688
KF135167	KC423340	KC423211	AJ577964	JN638167	DQ826648	KC422988	KC423140
KF135128	KC424059	KC422931	AJ577965	KT351807	EF186971	HM623520	KF793177
KF135129	KC423540	KC423359	KT032031	JN638096	JQ480275	AY090849	EU308093
KF135131	KC424306	KC424330	AY275752	KC424044	EF186966	AY677450	KC423243
KF135133	KC423491	KC423042	GQ401298	JN381596	JQ480210	JQ480162	JQ480227
JN638206	KC852928	KC423070	GQ401324	KC423565	KC423652	KC423883	KC424349
JN393296	AY677460	KC423483	JQ430823	KC424373	KC423064	KC423856	KC423153

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Accession numbers for naïve protease sequences

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Accession numbers for treated Gag sequences.

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Accession numbers for the naïve Gag sequences.

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EU293448	FJ606395	HM593297	JF704298	JF704585	KM048434	KM048719	KM192387
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EU293450	FJ606397	HM593299	JF704300	JF704587	KM048436	KM048721	KM192389
EU347706	FJ606398	HM593300	JF704301	JF704588	KM048437	KM048722	KM192390
EU347707	FJ606399	HM593301	JF704302	JF704589	KM048438	KM048723	KM192391
EU347708	FJ606401	HM593302	JF704303	JF704590	KM048439	KM048724	KM192392
EU673411	FJ606402	HM593303	JF704304	JF704591	KM048440	KM048725	KM192393
EU673428	FJ606403	HM593304	JF704305	JF704592	KM048441	KM048726	KM192425
EU673437	FJ606404	HM593305	JF704306	JF704593	KM048442	KM048727	KM192426
EU673443	FJ606406	HM593306	JF704307	JF704594	KM048443	KM048728	KM192427
EU673444	FJ606407	HM593307	JF704308	JF704595	KM048444	KM048729	KM192428
KM192429							

Appendix C: Molecular Dynamic Scripts

<p>Minimization of waters</p> <pre>&cntrl imin=1, maxcyc=5000, ncyc=3000, ntb=1, cut=10.0, ntp=5, ntr=1, restraintmask=':1-198', restraint_wt=2.0 &end /</pre>	<p>Minimization of the whole system</p> <pre>&cntrl imin=1, maxcyc=10000, ncyc=7000, ntb=1, ntr=0, cut=10.0, ntp=5 &end /</pre>
<p>Heating of proteins from 0K to 300K</p> <pre>&cntrl imin=0, irect=0, ntx=1, ig=-1, nstlim=25000, dt=0.002, ntc=2, ntf=2, cut=8.0, ntb=1, ntp=500, ntwx=500, ntt=3, gamma_ln=2.0, temp0=0.0, temp1=300.0, ntr=1, restraintmask=':1-198', restraint_wt=2.0, nmropt=1, ioutfm=1 / &wt TYPE='TEMP0', istep1=0, istep2=25000, value1=0.1, value2=300.0, / &wt TYPE='END' /</pre>	<p>Equilibrate the density</p> <pre>&cntrl imin=0, irect=1, ntx=5, nstlim=25000, dt=0.002, ntc=2, ntf=2, cut=8.0, ntb=2, ntp=1, taup=1.0, ntp=500, ntwx=500, ntt=3, gamma_ln=2.0, temp0=300.0, ntr=1, restraintmask=':1-198', restraint_wt=2.0, ig=-1, ioutfm=1 &end /</pre>
<p>Equilibrate</p> <pre>&cntrl imin=0, irect=1, ntx=5, nstlim=1000000, dt=0.002, ntc=2, ntf=2, cut=10.0, ntb=2, ntp=1, taup=2.0, ntp=1000, ntwx=1000, ntt=3, gamma_ln=2.0, temp0=300.0, ig=-1, ioutfm=1 &end /</pre>	

*The same scripts were used to optimize the protein structure and for the final 100 ns enzyme-substrate MD simulations. Only the “**restraintmask**” flag (bold) was altered for the addition of the inhibitor.

Appendix D: Supplementary information

Consensus	30	32	33	46	47	48	50	54	76	82	84	88	90
	D	V	L	M	I	G	I	I	L	V	I	N	L
ATV/r		I	F	IL	V	VM	L	VTALM		ATFS	V	S	M
DRV/r		I	F		VA		V	LM	V	F	V		
FPV/r		I	F	IL	VA		V	VTALM	V	ATSP	V		M
IDV/r		I		IL	V			VTALM	V	APTS	V	S	M
LPV/r		I	F	IL	VA	VM	V	VTALM	V	APTS	V		M
NFV	N		F	IL	V	VM		VTALM		APTS	V	DS	M
SQV/r						VM		VTALM		AT	V	S	M
TPV/r		I	F	IL	VA			VAM		TL	V		

Figure 1 Screenshot of the Stanford HIV Drug Resistance Database protease inhibitor (PI) resistance notes. The top row indicates the consensus amino acid and position. The following rows indicate each of the eight PIs and the major protease resistance mutations that occurs at a specific position.

Drug Resistance Interpretation: PR			
PI Major Resistance Mutations:	M46I, I54V, V82A		
PI Accessory Resistance Mutations:	None		
Other Mutations:	None		
Protease Inhibitors			
atazanavir/r (ATV/r)	High-Level Resistance		
darunavir/r (DRV/r)	Susceptible		
lopinavir/r (LPV/r)	High-Level Resistance		
Mutation Scoring: PR			
PI	ATV/r	DRV/r	LPV/r
<u>M46I</u>	10	0	10
<u>I54V</u>	15	0	15
<u>V82A</u>	15	0	30
<u>M46I + V82A</u>	10	0	10
<u>I54V + V82A</u>	10	0	10
Total	60	0	75

Figure 2 Screenshot of output from the HIVdb algorithm showing the effects of M46I, I54V and V82A on Atazanavir/Ritonavir (ATV/r), Darunavir/Ritonavir (DRV/r) and Lopinavir/Ritonavir treatment (LPV/r).

Drug Resistance Interpretation: PR

PI Major Resistance Mutations: **M46I, I54V, L76V, V82A**
 PI Accessory Resistance Mutations: None
 Other Mutations: None

Protease Inhibitors

atazanavir/r (ATV/r) High-Level Resistance
darunavir/r (DRV/r) Low-Level Resistance
lopinavir/r (LPV/r) High-Level Resistance

Mutation Scoring: PR

PI	ATV/r	DRV/r	LPV/r
<u>M46I</u>	10	0	10
<u>I54V</u>	15	0	15
<u>V82A</u>	15	0	30
<u>M46I + V82A</u>	10	0	10
<u>I54V + V82A</u>	10	0	10
<u>L76V</u>	0	20	30
<u>M46I + L76V</u>	0	0	10
Total	60	20	115

Figure 3 Screenshot of the output from the HIVdb algorithm showing the effects of M46I, I54V, L76V and V82A on Atazanavir/Ritonavir (ATV/r), Darunavir/Ritonavir (DRV/r) and Lopinavir/Ritonavir (LPV/r) treatment.

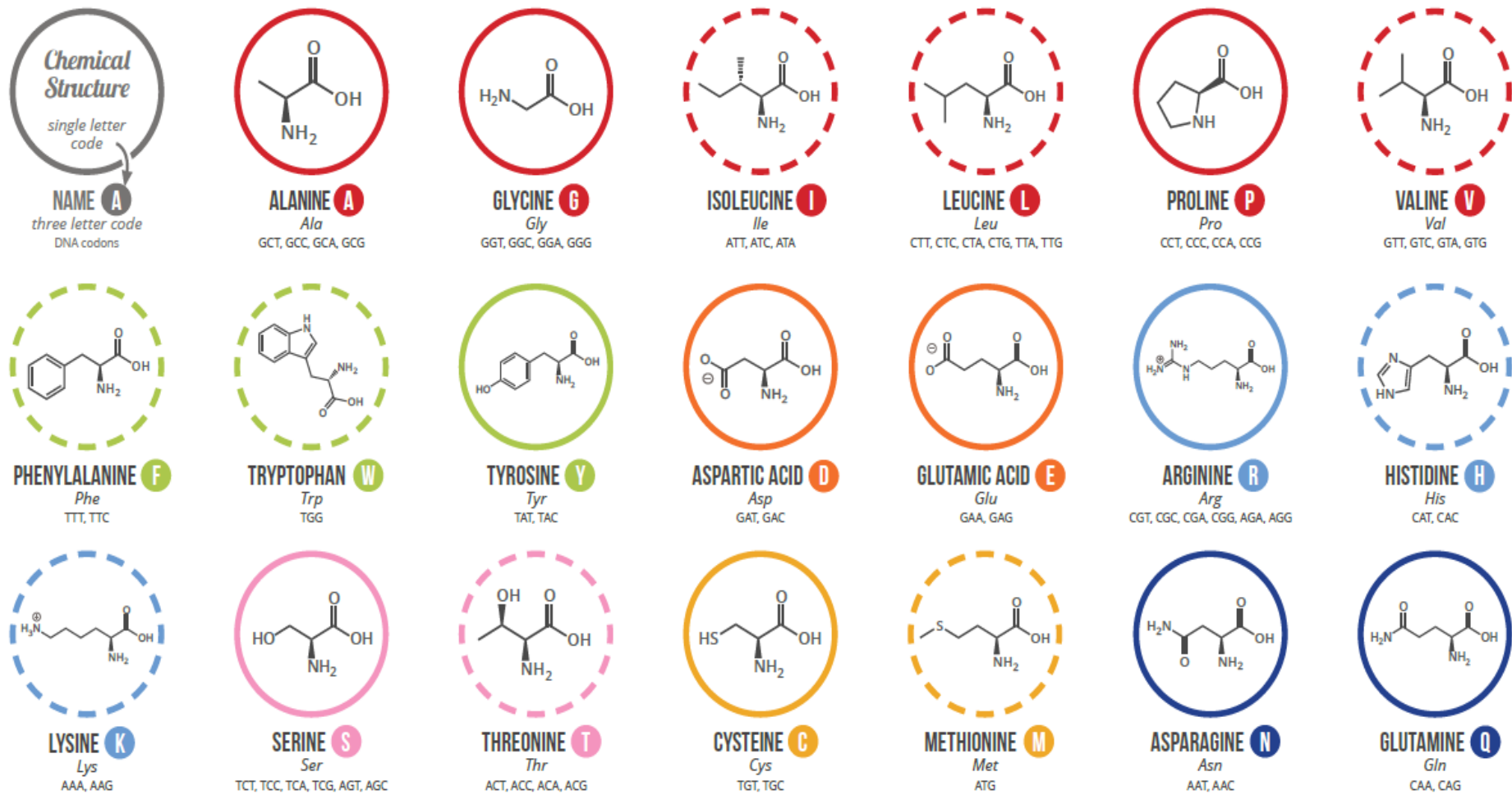


Figure 4 Illustration of the 20 common amino acids showing their structure, single and three letter code.

Appendix E: Ethics Certificate



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20 November 2018

Ms V Marie (209501382)
HIV Pathogenesis Programme
School of Laboratory Medicine and Medical Sciences
veronna.marie@gmail.com

Dear Ms Marie

Protocol: Functional and structural analyses of gag and protease substitution in treated and naive patients infected with HIV-1 subtype C. **Degree: PhD**
BREC reference number: BE446/15

RECERTIFICATION APPLICATION APPROVAL NOTICE

Approved: 08 January 2019
Expiration of Ethical Approval: 07 January 2020

I wish to advise you that your application for Recertification received 15 November 2018 for the above protocol has been noted and approved by a sub-committee of the Biomedical Research Ethics Committee (BREC) for another approval period. The start and end dates of this period are indicated above.

If any modifications or adverse events occur in the project before your next scheduled review, you must submit them to BREC for review. Except in emergency situations, no change to the protocol may be implemented until you have received written BREC approval for the change.

The committee will be notified of the above approval at its next meeting to be held on 11 December 2018.

Yours sincerely


Prof V Rambiritch
Chair: Biomedical Research Ethics Committee

cc: Leslie@ukzn.ac.za
cc: Pedzisai Gaza Gaza@ukzn.ac.za

