


Comprehensive phenotyping of mouse regulatory T cells relevant to viral infections

Qian Chen^{1,2} | Mehdi Benamar^{1,2}  | Tsz Man Fion Chan^{1,2} | Muyun Wang^{1,2} | Talal A. Chatila^{1,2}

¹Division of Immunology, Boston Children's Hospital, Boston, Massachusetts, USA

²Department of Pediatrics, Harvard Medical School, Boston, Massachusetts, USA

Correspondence

Mehdi Benamar, Division of Immunology, Boston Children's Hospital, Boston, Massachusetts, USA.

Email: mehdi.benamar@childrens.harvard.edu

Abstract

Regulatory T (Treg) cells are a specialized subpopulation of CD4⁺ T cells that enforce peripheral immune tolerance. Treg cells act to suppress exuberant immune responses, limit inflammation, and promote tissue repair, thereby maintaining homeostasis and tolerance to self-antigens and those of the commensal microbial flora. Treg cells are characterized by the expression of the master regulator Foxp3, which plays a major role in Treg cells development and function. Under inflammatory conditions, Foxp3⁺ Treg cells may acquire effector T cell programs that modify their phenotype and function, reflecting their plasticity. During microbial infections, Treg cells act to limit the immunopathology triggered by the host immune response to pathogens albeit at the potential risk of pathogen persistence. In this review, we will discuss the influence of Treg cells on the outcome of viral infection and will give an overview of the Treg phenotype at steady-state and in inflammatory conditions.

KEYWORDS

flow cytometry, phenotyping, regulatory t cells, viral infection

1 | INTRODUCTION

Regulatory T (Treg) cells expressing the intracellular transcription factor forkhead box P3 (Foxp3) play a requisite role in the maintenance of immunological homeostasis and prevention of self-tolerance breakdown [1]. In 1995, Sakaguchi first described a unique population of CD4⁺ T lymphocytes that express the IL-2R α chain (CD25) and suppress autoimmune disease in thymectomized mice and autoimmunity mice models [2]. Further studies revealed that these CD25⁺CD4⁺ T cells express Foxp3 [3, 4]. Mutation or deletion of Foxp3 induces a lethal autoimmune syndrome called IPEX (immune dysregulation polyendocrinopathy enteropathy X-linked syndrome) in human [3, 4]. Treg cells can be identified by the combination of different surface markers and the key lineage-defining transcription factor Foxp3 [5, 6]. They ensure peripheral immune tolerance by controlling autoreactive T cells that have escaped from thymic selection and their loss results in

autoimmune disease [7, 8]. They are a critical key player for self-tolerance establishment and control of pathology in various inflammatory responses to mediate immune homeostasis [9]. Treg cells accumulate at the inflammation site, most likely to control the magnitude and the excessive of the inflammation. They are essential for suppressing pro-inflammatory immune responses and protecting the host from immune-mediated pathology [10–14]. Treg cells integrate various environmental conditions to coordinate and adapt their effector activities in the sites of inflammation. In addition, Treg cells are considered to play a crucial role in several mouse infection disease models [15, 16].

1.1 | Treg cell maker expression and subsets

Treg cells can be divided into multiple sub-populations defined by their origin, the expression of cellular markers, and their mechanisms of function. They represent 5%–15% of total CD4⁺ T cells and express $\alpha\beta$ T cell receptors (TCR) [17]. Unlike human Treg cells, mouse Treg cells

Qian Chen and Mehdi Benamar authors contributed equally.

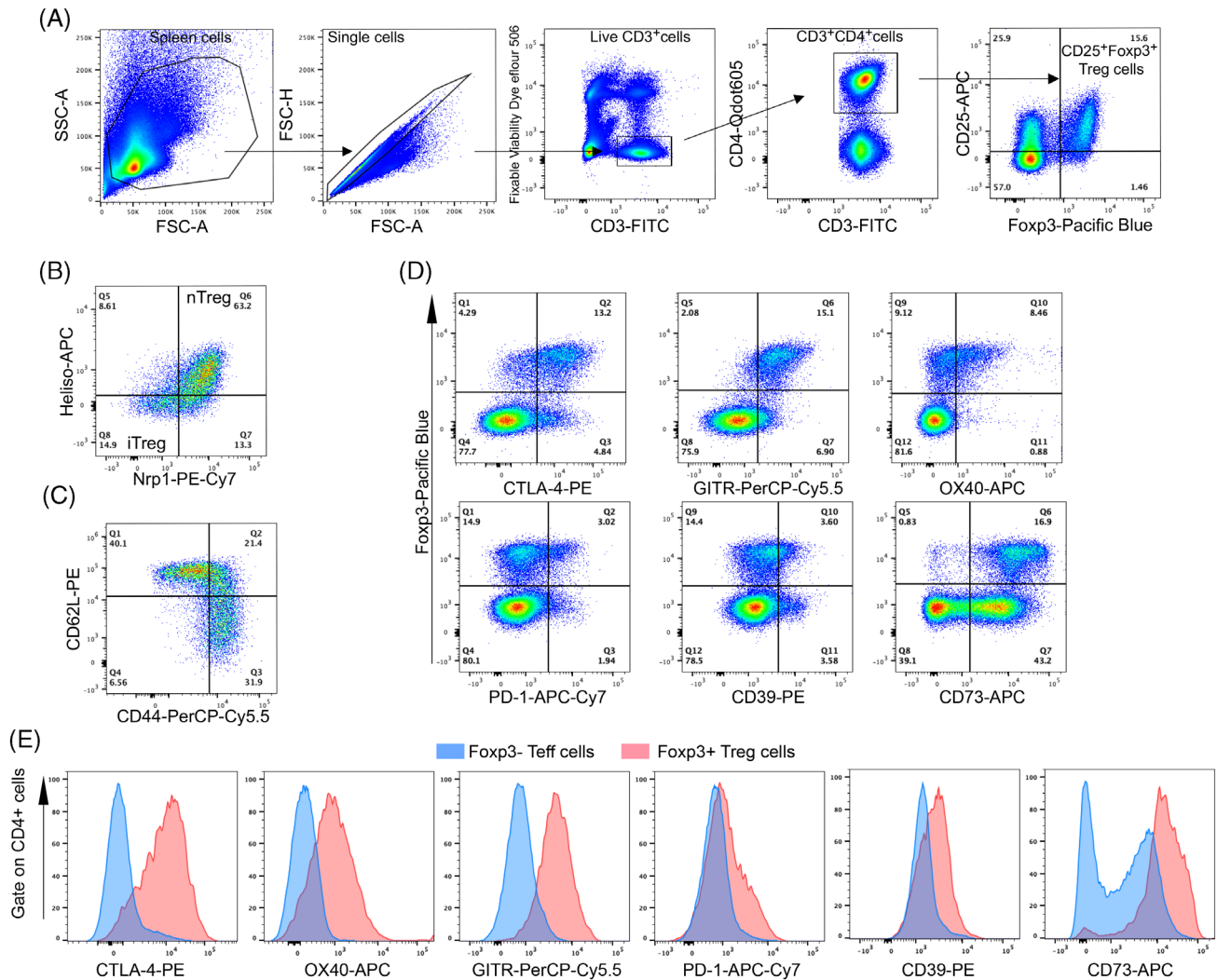


FIGURE 1 Flow cytometric detection of Treg cells population in mice spleen tissue (A) gating strategy of splenic Treg cells, Treg cells express CD3⁺ CD4⁺ CD25⁺ Foxp3⁺. (B) Define nTreg and iTReg population-based on Helios and Nrp-1 expression. nTreg (Helios⁺ Nrp-1⁺) and iTReg (Helios⁻ Nrp-1⁻). (C). Determine the naïve Treg and activated Treg cells by CD62L and CD44 marker expression. Naïve Treg (CD44^{lo}CD62L^{hi}) and activated Treg (CD44^{hi}CD62L^{lo}). (D) co-stimulatory molecules expression on Foxp3⁺ Treg cells and Foxp3⁻ effector T cells (Teff). (E) Overlaid shaded histograms of T cell-specific co-stimulatory markers expression on Foxp3⁺ Treg cells and Foxp3⁻ Teff cells. [Color figure can be viewed at wileyonlinelibrary.com]

represent a more homogeneous population and are characterized by the expression of CD4, CD25, and the intracellular transcription factor Foxp3. They have been also revealed to express several co-stimulatory molecules such as CD28, CD40L, cytotoxic T lymphocyte antigen 4 (CTLA-4), glucocorticoid-induced TNF receptor (GITR), programmed cell death-1 (PD-1) and OX40 (CD134) [18]. CD28 and CD40L play a role in the maintenance of peripheral Treg homeostasis, whereas CTLA-4, GITR, PD-1, and OX40 are involved in the regulation of immunosuppressive activity [19–23]. Apart from that, Treg cells isolated from secondary lymphoid organs express the spleen/lymph node homing receptors CCR7 and CD62L [24]. In addition, CD39 is constitutively expressed on murine Tregs, which are closely associated with CD73, where it plays a central role in mediating the immunosuppression [25]. Treg cells also produce immunosuppressive cytokines including TGF- β , IL-10, and IL-35 [26]. According to their origin, Treg cell populations can

be divided into two main groups: natural Treg cells (nTreg cells) which develop in the thymus, and induced Treg cells (iTReg cells) which develop in the periphery from naïve conventional T cells [27–30]. Both nTreg cells and iTReg subsets have their roles in the immune system. The nTreg cells are mainly auto-specific and control autoimmune response, while iTReg cells develop in response to externally delivered antigens or commensal microbes. Helios, a member of the Ikaros transcription factor family is highly expressed in nTreg cells, but not in iTReg cells [27]. Similarly, neuropilin-1 (Nrp-1) also serves as an additional marker to distinguish between nTreg and iTReg. Indeed, Nrp-1 is highly expressed on nTreg cells but not on iTReg at steady-state [29, 30]. However, some studies have shown that iTReg cells in the context of inflammatory conditions can also express Nrp1 [30]. To conclude, Treg cells are a heterogeneous population, and a combination of surface and intracellular markers is mandatory to characterize these different subpopulations.

TABLE 1 Markers expressed on CD4⁺ T cells subset

	nTreg	iTreg	Naïve Tregs	Activated Treg	Naïve T effector cells	Activated T effector cells
CD3	+	+	+	+	+	+
CD4	+	+	+	+	+	+
CD25	+++	++	+++	+++	+	++
CD127	low	low	low	low	+	++
Foxp3	++	+	+	++	-	-
Helios	++	-	+	++	-	-
Nrp1	+	-	+	++	-	-
OX40	++	++	++	++	+/-	++
LAP	++	++	++	++	+/-	+
CD69	+	++	+	++	+	++
TIGIT	++	++	++	++	+/-	++
ICOS	++	++	++	++	low	High
CD44	low	high	low	high	low	high
CD62L	high	low	high	low	high	low
CTLA-4	++	+++	+	+++	+/-	++
GITR	++	+++	++	+++	+/-	++
Lag3+	++	++	++	++	+/-	++
PD-1	++	++	++	++	+/-	++
CD39	++	++	++	++	+/-	++
CD73	++	+++	++	+++	+/-	++

1.2 | Characterization of mouse Treg cells by flow cytometry

Flow cytometric analysis with a combination of specific surface and intracellular Treg cells markers helps to characterize Treg cells (Figure 1, Table 1). These analyses should be always preceded by a proper gating strategy, using a single cell gate, and identifying dead cells with a live/dead stain. Within the lymphocytes gate, Treg cells are defined as the CD3⁺CD4⁺CD25⁺Foxp3⁺ cell population (Figure 1A). This population can be further characterized as nTreg (Helios⁺Nrp1⁺) and iTreg (Helios⁻Nrp1⁻) (Figure 1B). Treg cells can be also subdivided into CD44^{lo}CD62L^{hi} 'naïve' Treg cells and CD44^{hi}CD62L^{lo} 'activated' Treg cells (Figure 1C). These activated Treg cells express higher levels of Treg effector molecules, such as cytotoxic T cell antigen 4 (CTLA4) compared to 'naïve' Treg cells, which likely contribute to increased their suppressive activity [31]. Some co-stimulatory/co-inhibitory molecules including CTLA-4, GITR, OX40, and CD73, which are crucial for the Treg cell's suppressive function, are highly expressed on Treg cells compared to Teff cells. (Figure 1D, E, Table 1). To conclude a combination of several markers can be used to better identify different functional subsets of Treg cells (Table 1).

1.3 | The role of Treg cells during pathogen infection

Pathogen infections have been suggested as triggers of autoimmunity and several autoimmune diseases show a strong correlation to certain

viral infections. Treg cells can directly modulate host immune responses to microbial infections. These Treg cells have both beneficial and adverse effects on disease outcomes during viral infections (Table 2) [32–34]. Several of these discoveries were made using animal models. Indeed, animal models make a major contribution to unraveling the host-pathogen interactions and physiopathology of infections and to better understanding the mechanism of action of those infections. During chronic viral infection, such as lymphocytic choriomeningitis virus, hepatitis C virus (HCV), hepatitis B virus (HBV), and Herpes simplex viruses, these persistence-inducing viruses can trigger massive proliferation of Treg cells that suppress effector T cell proliferation, inflammatory cytokine production and CD8⁺ T cells cytotoxicity functions [35–39]. In chronic HCV infection, CD25⁺Foxp3⁺ Treg cells contribute to limiting viral-specific CD4⁺ and CD8⁺ T cell antiviral immune response, which are important for viral clearance and thereby promoting pathogens persistence [39–41]. Simultaneously, Treg activity could be beneficial to the host due to a suppression of tissue damage mediated by virus-specific effector T cells. In chronic HIV infection, Tregs play both beneficial and detrimental roles. They modulate the immune system and limit the spread of the virus through the suppression of activated T cells, which were targeted by HIV. However, suppression of immune activation also reduces the viral clearance and promotes viral reservoir formation [42, 43]. This Treg-mediated suppression of HIV replication may base on IL-2 dependent Treg cells expansion or cell–cell contact suppression mechanism. Similarly, depletion of Treg cells in a retrovirus infection mouse model prevents murine acquired immunodeficiency syndrome

TABLE 2 The role of regulatory cells during chronic and acute infection

Virus strain	Function of Treg cells during chronic infection	Reference PMID
HCV	CD25+ FOXP3+ Treg population suppress HCV core-specific CD4+ and CD8+ T-cell immune responses	23,710,581
LCMV	Absence of IFNAR signaling in Tregs results in decreased CD8 ⁺ effector T cells, enhance T effector cell exhaustion, defective generation of antiviral memory CD8 ⁺ T cells, and enhanced LCMV persistence	29,672,594 24,711,580
HIV	Treg cells control HIV replication in activated T cells through a cAMP dependent mechanism	21,436,067
HBV	Selective depletion of Tregs significantly increase HBV-specific CD8+ T cell responses and accelerate viral antigen clearance The imbalance of Treg/Th17 may link to HBV disease progression	26,986,976 22,548,790
Murine AIDS	Timed ablation of Treg cells can prevent murine AIDS progression	15,067,071
HSV-1	CD25+ Treg cells play a beneficial role to minimize viral immunological lesions HSV infection results in increased Treg cells function with such cells able to suppress CD8+ T cell responses to both viral and unrelated antigens Treg cells play a critical role in both HSV-1 latency and reactivation via suppressing anti-viral CD8+ T cells	12,975,455 15,034,024 30,485,807
HSV-2	Tregs facilitate early protective responses to local viral infection by allowing a timely entry of immune cells into infected tissue CTLA-4 expression by Tregs is critical to promote proper DC migration from the infected tissues and initiating an appropriate antigen-specific CD4 T-cell response	18,436,744 27,007,674
Friend Retrovirus	CD4 + CD25+ regulatory T cells suppress CD8+ T cells function and contribute to viral persistence	16,517,701 16,981,182
Vaccinia virus	Treg cells influence CD8+ T cells immunodominance hierarchies	15,749,866
Virus strain	Function of Treg cells during acute infection	Reference
Influenza A virus (IAV)	Treg cells are critical for influenza A virus clearance in neonatal mice Treg depletion enhances CD8 T cells responses to influenza A virus infection Notch4 signaling limits regulatory T-cell-mediated tissue repair and promotes severe lung inflammation after H1N1 infection	26,501,792 15,749,866 33,915,108
Respiratory syncytial virus (RSV)	Neonatal RSV A2 infection rapidly induces Treg cells suppressive functions to dampen the Th2 and Tc2 responses Treg cells expressing granzyme B can control lung inflammation during acute infection RSV vaccination attenuates airway Treg cells responses to RSV Infection	33,909,707 2,223,699 2,338,220
West Nile virus (WNV)	Tregs control the development of symptomatic West Nile virus infection	19,855,131

(MAIDS) [44]. Moreover, the Treg/Th17 balance play important role in the occurrence, progression, and outcome of chronic HBV infection [45, 46]. All these studies demonstrated the role of Treg cells in the delicate balance between viral clearance and disease severity. For acute viral infection, most of the studies have focused on the role of Treg cells in influenza virus infection, where lesions are principally the consequence of direct effects of infection. During influenza virus infection, Treg cells depletion through treatment with anti-CD25 mAb significantly enhances CD8+ T cell responses to influenza A virus [47]. It's also has been shown that functional depletion of Treg cells resulted in increased proportions of activated CD4+ T cells in the infected lung tissue, but failure to clear influenza virus [48]. Distinct from their role in suppressing immunity and inflammation, Treg cells promote lung tissue repair and tissue permeability through amphiregulin production [49, 50]. Moreover, Treg cells upregulate Notch4 expression during influenza and SARS-CoV2 infection which was shown to promote lung inflammation due to an inhibition of amphiregulin production [49, 50]. By dampening effector immune responses, Treg cells mitigate immunopathology resulting from

exaggerated inflammation and tissue destruction during acute [51–54], or chronic infections ([55], [56–59]). In addition, Treg cells have been shown to support antiviral immunity by modulating T cell migration to the site of infection [53, 60]. Understanding the role of Treg cells in acute and chronic viral infections may provide targets for new therapeutic approaches that will limit tissue damage while maintaining immunity to these pathogens.

1.4 | Tricks and tips for the best characterization of Treg cells

Characterization of mouse regulatory T cells presents some challenges. In this paragraph we will present the tricks and tips for the best Treg cell characterization (see MiFloCyt):

- The first step is to smash and filter the spleen in a 70 mm filter to be able to prepare a cell suspension in RPMI.
- Red blood cells lysis is mandatory for Treg cell characterization.

- Surface staining should be done at 20×10^6 /ml in PBS/0.5%FCS.
- Cells should be fixed and permeabilized using eBioscience Fixation/Permeabilization for 30 min at 4°C.
- Intracellular staining should be done at 20×10^6 /ml in eBioscience Permeabilization buffer.
- Washing after each step is mandatory.
- Use single fluorochrome stained cells as control for compensation of spillover from one channel to another.

AUTHOR CONTRIBUTIONS

Qlan Chen: Conceptualization (equal); formal analysis (equal); investigation (equal); methodology (equal); project administration (equal); writing – original draft (equal); writing – review and editing (equal). **Mehdi Benamar:** Conceptualization (equal); formal analysis (equal); investigation (equal); methodology (equal); project administration (equal); validation (equal); writing – original draft (equal); writing – review and editing (equal). **TszMan Fion Chan:** Formal analysis (supporting); methodology (supporting). **Muyun Wang:** Formal analysis (supporting); methodology (supporting). **Talal A Chatila:** Conceptualization (equal); funding acquisition (lead); investigation (equal); project administration (lead); resources (lead); supervision (lead); writing – review and editing (lead).

CONFLICT OF INTEREST

Authors have no conflict of interest to declare.

DATA AVAILABILITY STATEMENT

The data of this study are openly available in Flow repository at <http://flowrepository.org/id/FR-FCM-Z5YQ>

ORCID

Mehdi Benamar  <https://orcid.org/0000-0003-1532-8642>

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