

1 **Inclusion of antibodies to cell culture media preserves the integrity of genes encoding**
2 **RL13 and the pentameric complex components during fibroblast passage of human**
3 **cytomegalovirus**

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24 **Abstract**

25 Propagation of human cytomegalovirus (CMV) in cultured cells results in genetic
26 adaptations that confer improved growth *in vitro* and significant attenuation *in vivo*. Mutations in
27 *RL13* arise quickly during cell culture passage, while mutations in the *UL128-131A* locus emerge
28 later during fibroblast passage and disrupt expression of a glycoprotein complex that is important
29 for entry into epithelial and endothelial cells. As *in vivo* CMV replicates in the context of host
30 antibodies, we reasoned that antibodies might mitigate the accumulation of adaptive mutations
31 during cell culture passage. To test this, CMV in infant urine was used to infect replicate
32 fibroblast cultures. One lineage was passaged in the absence of CMV-hyperimmunoglobulin
33 (HIG) while the other was passaged with HIG in the culture medium. The former lost epithelial
34 tropism and acquired mutations disrupting *RL13* and *UL131A* expression, whereas the latter
35 retained epithelial tropism and both gene loci remained intact after 22 passages. An
36 epitheliotropic *RL13*⁺/*UL131A*⁺ virus was isolated by limiting-dilution in the presence of HIG
37 and expanded to produce a working stock sufficient to conduct cell tropism experiments. Thus,
38 culture in the presence of antibodies may facilitate *in vitro* experiments using viruses that are
39 genetically more authentic than has been previously possible.

40

41 *Keywords: cytomegalovirus, cell culture, antibodies, adaptation*

42 Introduction

43 Human cytomegalovirus (CMV) causes a spectrum of diseases in immune compromised
44 patients, including retinitis in HIV patients, pneumonitis in transplant patients, and serious birth
45 defects characterized by sensorineural hearing loss and severe mental retardation when acquired
46 during pregnancy. Available options for treating CMV infections are limited, and are hampered
47 by dose-limiting toxicities and the development of resistance. These therapeutic limitations have
48 fostered continued efforts toward the development of effective vaccines, the identification and
49 exploitation of novel targets for antiviral interventions, and the development of passive
50 polyclonal or monoclonal antibody therapeutics.

51 Since CMV was first isolated in 1957 from clinical samples using cultured human
52 fibroblasts [1], cell culture models of viral propagation and experimentation have made major
53 contributions to our understanding of CMV molecular biology, replication, immunology, and
54 pathogenesis. Many of these contributions were achieved using virus strains that were
55 extensively cell culture passaged, and are now known to contain substantial genetic deletions,
56 rearrangements, and gene disruptions that were presumably acquired due to selective passage
57 conditions, as well as stochastic genetic changes. Recent research has relied increasingly on the
58 use of "clinical-like" strains that lack large deletions or rearrangements but retain certain changes
59 associated with cell culture propagation.

60 Two such changes have been demonstrated to occur consistently during cell culture
61 passage: mutations disrupting the *RL13* open reading frame (ORF) occur irrespective of the cell
62 type used, while mutations in the *UL128-131A* locus emerge during passage in fibroblasts [2]. As
63 the latter disrupt a complex that is necessary for infection of epithelial and endothelial cells,
64 *UL128-131A* mutations do not occur during culture in epithelial or endothelial cells [2]. There

65 may also be additional adaptive mutations that occur less consistently, cause amino acid
66 substitutions, or impact noncoding gene-regulatory regions.

67 Given that CMV replication *in vivo* generally occurs in the context of CMV-specific
68 antibodies, we reasoned that cell culture virus propagation would more accurately model
69 replication *in vivo* if CMV-specific antibodies were present in the culture medium.

70 Consequently, the accumulation of certain adaptive mutations might also be mitigated. Here we
71 report that a CMV clinical isolate serially passaged more than twenty times in fibroblasts
72 cultured in the presence of CMV-hyperimmunoglobulin (HIG) retained epithelial tropism and
73 lacked mutations disrupting *RL13* or genes in the *UL128-131A* locus. Moreover, a clonal virus
74 retaining the genotypic and phenotypic properties of the parental stock was isolated by limiting-
75 dilution and expanded to produce working stocks with titers sufficient to conduct cell tropism
76 studies.

77 **Materials and Methods**

78 **Human subjects and clinical sample collection.** A CMV culture-positive urine sample
79 designated KG was obtained from a congenitally infected newborn seen at the University of
80 Minnesota Medical Center. Urine KG was clarified of cellular debris by centrifugation at 2600 x
81 g for five minutes, then adjusted to 100 mM sucrose, aliquoted, and stored under liquid nitrogen.
82 Informed consent was obtained from the guardian, and protocols were approved by the
83 Committees for the Conduct of Human Research at Virginia Commonwealth University and
84 University of Minnesota.

85 **Cells.** Human MRC-5 fetal lung fibroblasts (ATCC CCL-171) and ARPE-19 retinal
86 pigment epithelium cells (ATCC CRL-2302) were obtained from ATCC and propagated in high
87 glucose Dulbecco's modified Eagle medium (Gibco-BRL) supplemented with 10% fetal calf
88 serum (HyClone Laboratories), 10,000 IU/L penicillin, and ten mg/L streptomycin (Gibco-BRL)
89 (medium). Normal oral keratinocytes (NOK cells) were a gift from Karl Munger [3] and were
90 propagated using Keratinocyte-SFM medium supplemented with human epidermal growth factor
91 and bovine pituitary extract (Invitrogen).

92 **Virus.** Two T25 flasks of confluent MRC-5 cells were inoculated with equal volumes of
93 KG urine to establish parallel lineages passaged under different culture conditions. One lineage,
94 designated ϕ -KG, was serially passaged using a conventional protocol [4]. The cultures were
95 monitored visually for cytopathic effect (CPE) until large foci were observed. For the first two
96 passages, cells were trypsinized and half were mixed with 2.5×10^5 trypsinized uninfected cells
97 and returned to the T25 flask. For subsequent passages the cells were trypsinized, sonicated on
98 ice, recombined with the culture medium, then added in progressively decreasing amounts to
99 T25 flasks containing uninfected confluent MRC-5 cells: five ml for five passages, two ml for

100 two passages, and one ml thereafter. Culture times for each passage were approximately one
101 week.

102 The second lineage, designated Ig-KG, was serially passaged by transferring one-half of
103 the trypsinized infected cells or cell sonicates to T25 flasks containing uninfected confluent
104 MRC-5 cells. One day after each passage the medium was replaced with medium containing two
105 mg/ml HIG (CytoGam®). Culture media were not transferred, as they contained neutralizing
106 antibodies and lacked detectable infectious virus. Culture times for each passage were two to
107 three weeks.

108 Virus stocks were prepared from infected MRC-5 cultures as infected-cell sonicates or
109 culture media supernatants that were clarified by centrifugation at 500 x g for ten minutes,
110 adjusted to 100 mM sucrose, aliquoted, and stored under liquid nitrogen. Stocks were titrated on
111 MRC-5 cells using a 32-well limiting-dilution method as previously described [5].

112 Single viruses were isolated from mixed stocks by limiting dilution. Ig-KG passage 22 and
113 ϕ -KG passage 13 stocks were ten-fold serially diluted, then each dilution was inoculated into 96
114 replicate wells containing confluent MRC-5 cells in 96-well plates. After incubation for one day,
115 the medium in wells inoculated with Ig-KG dilutions was replaced with medium containing two
116 mg/ml HIG, whereas wells inoculated with ϕ -KG dilutions were maintained in medium lacking
117 HIG. One CPE-positive well, designated ϕ -KG-B5, was selected from the plate that was
118 inoculated with the highest dilution of the ϕ -KG stock that produced CPE-positive wells. ϕ -KG-
119 B5 was expanded using MRC-5 cultures without HIG. A second CPE-positive well, designated
120 Ig-KG-H2, was selected from the plate that was inoculated with the highest dilution of the Ig-KG

121 stock that produced CPE-positive wells. Ig-KG-H2 was expanded using MRC-5 cultures
122 containing HIG, as described above.

123 **Detection of infected cells by Immunostaining.** Urine and virus stocks derived from urine
124 were inoculated onto MRC-5, ARPE-19, or NOK cell cultures in 96-well plates. CMV-infected
125 cells were detected by staining for the CMV immediate-early proteins 1 and 2 (IE1/2) using
126 previously described immunohistochemistry [6] or immunofluorescence [7] staining methods.

127 **Genetic sequencing.** One T75 flask of confluent MRC-5 cells was inoculated with 0.2 ml
128 ϕ -KG passage 12 stock. After eight days, eleven ml of culture medium from the ϕ -KG-infected
129 flask were transferred to a T225 flask of confluent MRC-5 cells. After nine days of incubation
130 the culture medium was removed and clarified by centrifugation at 500 x g for ten minutes. One
131 T75 flask of confluent MRC-5 cells was inoculated with two ml of Ig-KG passage 21 stock.
132 After incubation for one day the medium of the Ig-KG-infected flask was replaced with medium
133 containing two mg/ml HIG. Cells were trypsinized eleven days after inoculation and transferred
134 to a T225 flask containing confluent MRC-5 cells. The next day the medium was replaced with
135 medium containing two mg/ml HIG. Two weeks after infection the culture medium was removed
136 and clarified by centrifugation at 500 x g for ten minutes. Virion-associated DNA was isolated
137 by ultracentrifugation of virions from clarified culture supernatants followed by DNase I
138 treatment, phenol/chloroform extraction, and ethanol precipitation, as described previously [8].

139 Virion DNA (100 ng) purified from ϕ -KG or Ig-KG cultures was sheared, ligated to
140 barcoded adapters, and size-selected for products in the ~ 685 bp range, then PCR amplified 8-9
141 cycles and sequenced using an Ion S5 System. The two modal read lengths were 280-bp and
142 550-bp at > 5 Million reads per sample. Reads were *de novo* assembled using Newbler v2.9 and

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143 the resulting contigs mapped NC_006273/Merlin to yield a draft genome. All reads were re-
144 mapped to the draft genome and a consensus derived using Geneious v10.1.3. Median coverage
145 was > 500x. Differences between ϕ -KG and Ig-KG identified by whole genome sequencing were
146 confirmed by targeted PCR amplification of affected regions and Sanger sequencing (Eurofins)
147 of both strands.

148 **Results**

149 **HIG in the culture medium prevents loss of epithelial tropism during fibroblast**
150 **passage.** Serial fibroblast passage of CMV clinical isolates results in viral mutants that have lost
151 the capacity to infect epithelial and endothelial cells. This phenotypic change arises from
152 mutations that disrupt expression of one of three proteins, UL128, UL130, and UL131A, which
153 combine with glycoproteins H and L (gH and gL) to form a pentameric complex that is necessary
154 for efficient entry into epithelial and endothelial cells, but dispensable for entry into fibroblasts
155 [9-13]. Such mutants emerge at about passage 15 and become dominant within a few additional
156 passages [2].

157 To determine if antibodies can mitigate the selective pressures that promote the
158 emergence of these mutations, a CMV culture-positive urine from a congenitally infected infant
159 was inoculated into replicate flasks of MRC-5 fibroblasts. One lineage (designated ϕ -KG), was
160 serially passaged by a conventional protocol without CMV antibodies added to the culture
161 medium. The other (designated Ig-KG) was also serially passaged, but after each passage the
162 culture medium was replaced with medium containing two mg/ml of HIG. A decline in epithelial
163 tropism of the ϕ -KG lineage was evident by passage seven, and by passage 13 epithelial cell
164 entry was rare, while fibroblast entry was abundant (Fig. 1A, top). In contrast, even after 20
165 passages the Ig-KG lineage appeared to remain epitheliotropic (Fig. 1A, bottom). To directly
166 compare fibroblast and epithelial cell entry efficiencies, the ϕ -KG and Ig-KG stocks were three-
167 fold serially diluted, and matching amounts were added to MRC-5 and ARPE-19 cultures. The ϕ -
168 KG stock displayed a profound deficiency in epithelial entry compared to fibroblast entry (Fig.
169 1B, top), while the Ig-KG stock entered both cell types with similar efficiencies at each dilution
170 (Fig. 1B, bottom).

171 **Genetic analysis of ϕ -KG and Ig-KG.** Loss of epithelial tropism in the ϕ -KG lineage is
172 consistent with literature data reporting that viruses with mutations disrupting expression of
173 pentameric complex components emerge, and eventually dominate, during fibroblast passage [2].
174 The fact that the Ig-KG lineage remained epitheliotropic after 22 passages suggest that viruses
175 with pentamer mutations fail to emerge during passage in the presence of HIG. To confirm this
176 assumption, DNA was isolated from the supernatants of cells infected with ϕ -KG passage 13 or
177 Ig-KG passage 22 stocks, and subjected to Ion Torrent sequencing. Analysis of the ϕ -KG
178 genome sequence identified a single nucleotide insertion in *UL131A*, frame-shifting the amino-
179 acid sequence of the UL131A protein after amino acid 27. In the Ig-KG sequence *UL131A*, as
180 well as ORFs encoding the other two pentamer subunits, UL128 and UL130, were intact and
181 encoded full-length, wild type proteins. These results are consistent with the lack of epithelial
182 tropism of ϕ -KG, as the mutation in *UL131A* should prevent expression of UL131A and, hence,
183 assembly of a functional pentameric complex.

184 Examination of the *RL13* region in the ϕ -KG genome revealed the presence of a 10-bp
185 deletion, causing a frameshift and consequent truncation of RL13 after amino acid 164.
186 Surprisingly, the *RL13* ORF of Ig-KG lacked this deletion and was otherwise intact, suggesting
187 that KG virus passaged in the presence of HIG did not acquire mutations disrupting RL13
188 expression.

189 **Viruses isolated and expanded from mixed stocks retain parental genotypes and**
190 **phenotypes.** The above analyses used mixed stocks produced after 13 or 22 passages. To
191 improve uniformity, individual viruses were isolated from the mixed stocks by limiting-dilution
192 in 96-well MRC-5 cultures. Virus ϕ -KG-B5 was isolated from the ϕ -KG passage 14 stock and
193 expanded in the absence of HIG. Virus Ig-KG-H5 was similarly isolated and expanded from the

194 Ig-KG passage 22 stock in the presence of HIG. Resulting stocks, produced as clarified lysates of
195 infected cells from one T75 flask of MRC-5 cells, had a final volume of two ml. The ϕ -KG-B5
196 stock had a titer on MRC-5 cells of 6.3×10^5 pfu/ml, while the Ig-KG-H5 stock had a titer of 6.9
197 $\times 10^4$ pfu/ml.

198 The ϕ -KG-B5 and Ig-KG-H5 viruses recapitulated the epithelial tropisms of their mixed
199 parental stocks. Virus ϕ -KG-B5 infected epithelial cells with very poor efficiency compared to
200 fibroblasts, while Ig-KG-H5 infected both cell types with similar efficiencies (Fig. 2A). Ig-KG-
201 H5 foci appeared larger on MRC-5 cells compared to ARPE-19 cells, and counting the number
202 of IE1/2-positive nuclei per focus revealed that foci on MRC-5 cells were on average 1.35-fold
203 larger than foci on ARPE-19 cells (Fig. 2B). In addition, ϕ -KG-B5 appeared to form larger foci
204 on MRC-5 cells than Ig-KG-H5 (Fig. 2A) and counting IE1/2-positive nuclei confirmed that
205 MRC-5 foci of ϕ -KG-B5 were on average 1.46-fold larger than those of Ig-KG-H5 (Fig. 2B).
206 These results are consistent with improved replication efficiencies associated with mutations
207 disrupting expression of RL13 or of pentamer components [14]. Sequencing of ϕ -KG-B5 virion
208 DNA confirmed the presence of frame-shift mutations in *RL13* and *UL131A* identical to those
209 identified in the ϕ -KG parental stock, while sequencing of Ig-KG-H5 virion DNA confirmed that
210 both loci remained intact and wild type.

211 **Experimental use of CMV stocks propagated with HIG.** To show that stocks
212 generated in the presence of HIG can be used experimentally, a two-ml 4×10^4 pfu/ml stock
213 designated IgKG-mix was produced by combining and expanding several wells of virus isolated
214 by limiting-dilution from the Ig-KG passage 22 stock. The IgKG-mix stock was three-fold
215 serially diluted and added to replicate cultures of MRC-5 cells, ARPE-19 cells, and
216 undifferentiated NOK cells, used to assess viral tropism for epithelial cells derived from the oral

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217 mucosa. Entry efficiency, as assessed by IE1/2 staining, was highest in MRC-5 cells, about four-
218 fold lower in ARPE-19 cells, and eight-fold lower in NOK cells (Fig. 3A). Moreover, while the
219 IgKG-mix virus formed foci ten days after infection of MRC-5 cells and ARPE-19 cells, no
220 evidence of focus formation was observed in NOK cells (Fig. 3B).

221 **Discussion**

222 For several decades, cell culture-based studies of CMV relied heavily on standard
223 laboratory strains of CMV, such as Towne and AD169, which were adapted through extensive (>
224 100 times) serial passage in fibroblasts to replicate efficiently by releasing high levels (10^6 to 10^7
225 pfu/ml) of cell-free virus into the culture medium. In the 1990s it was discovered that AD169
226 and a common Towne variant had undergone substantial deletions in the *UL/b'* region: 15.2-kb
227 from AD169 and 13.1-kb from Towne [15, 16]. Additional frame-shift mutations disrupting
228 expression of the pentameric complex were later shown to drastically limit replication of these
229 strains in endothelial, epithelial, and certain myeloid lineage cells [9-13, 17].

230 More recent studies have trended toward the use of more genetically authentic CMV
231 strains that retain expression of the pentameric complex and/or an intact *UL/b'* region. Low
232 passage clinical isolates have also been employed, but pose significant technical challenges. In
233 the initial passages clinical isolates are highly cell associated and produce low viral titers (10^3 to
234 10^4 pfu/ml) in culture supernatants. After five or six passages, replication and release of virus
235 into the culture medium significantly improves [18]; however, because the properties of an
236 isolate can change significantly from one passage to the next, it can be difficult to predict the
237 degree of authenticity/extent of adaptation at any given passage.

238 While the mechanism remains unclear, mutations that disrupt *RL13* expression appear to
239 be a major contributor toward improved replication and increased release of cell-free virus
240 during cell culture adaptation [2, 14]. Disruptive *RL13* mutations appear rapidly during passage
241 and are not specific to one cell type but occur in fibroblast, epithelial, and endothelial cells [2,
242 14]. Mutations that disrupt expression of pentameric complex components also appear to

243 enhance the release of cell-free virus, but only arise during serial passage in fibroblasts; viruses
244 passed in epithelial or endothelial cells maintain an intact pentameric complex due to its required
245 role for entry into these cell types [2]. Thus, while it is possible to preserve expression of
246 pentameric complex components by propagating stocks of certain CMV strains in ARPE-19
247 epithelial cells, obtaining stocks of *RL13*+ CMV is challenging as even low passage isolates are
248 likely to contain a population of *RL13*-mutant viruses and the prevalence of *RL13* mutants
249 increases quickly with passage [14]. An elegant solution was to genetically modify the *RL13*
250 promoter so that, in appropriate host cells, RL13 expression can be conditionally regulated.
251 *RL13*+ stocks can thus be made under RL13-repressed conditions and phenotypes associated
252 with RL13 expression can be assessed under RL13-induced conditions [14].

253 In the current study, we demonstrate that, by adding antibodies to the culture medium,
254 CMV in clinical samples can be isolated, expanded, serially passaged, and sub-cloned in
255 fibroblasts without accruing mutations disrupting expression of RL13 or assembly of the
256 pentameric complex. Studies are in progress to determine if other adaptive mutations occur under
257 these conditions or, conversely, whether viruses isolated and expanded in the presence of HIG
258 maintain a fully wild type genome. While the mechanism by which HIG stabilizes CMV during
259 serial passage remains uncertain, it is probable that neutralization by HIG of virus released into
260 the culture medium forces virus amplification to occur exclusively by cell-to-cell spread, thereby
261 alleviating selective pressures favoring disruption of *RL13* or *UL128-131A*, which promote
262 release of cell-free virions. Analogous effects likely manifest *in vivo*.

263 Stocks produced from infected cell lysates reached moderate titers ($\sim 10^4$ - 10^5 pfu/ml) but
264 were sufficient for use in experiments that do not require high multiplicities of infection. Higher
265 stock titers may be achievable through further optimization, and additional studies are needed to

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266 determine the minimal concentration of HIG required and whether monoclonal antibodies can
267 substitute for HIG. It is possible that similar results can be achieved in the absence of antibodies
268 by passing only infected cells without any culture medium.

269 The culture conditions described herein should be amenable to extending current CMV
270 genetic systems for evaluation of CMV mutants in an *RL13*+ background. For example, it should
271 be feasible to derive bacterial artificial chromosome (BAC) clones of new *RL13*+ CMV isolates,
272 or to use *E. coli* genetics to repair *RL13* in established BAC-cloned CMV strains. Additional
273 mutants could then be constructed and reconstituted by transfection of fibroblasts in the presence
274 of antibodies. Alternatively, mutations in non-essential genes could be engineered directly using
275 CRISPR/Cas9 without the need for BAC cloning. Studies of this nature should help elucidate the
276 mechanisms underlying the repressive role(s) played by RL13 during CMV replication in
277 established cell culture systems such as fibroblasts or ARPE-19 cells, and may prove crucial for
278 identifying positive, perhaps essential roles for RL13 in other cell types or *in vivo* that are
279 currently in their nascent stages of investigation.

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283

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Figure Legends

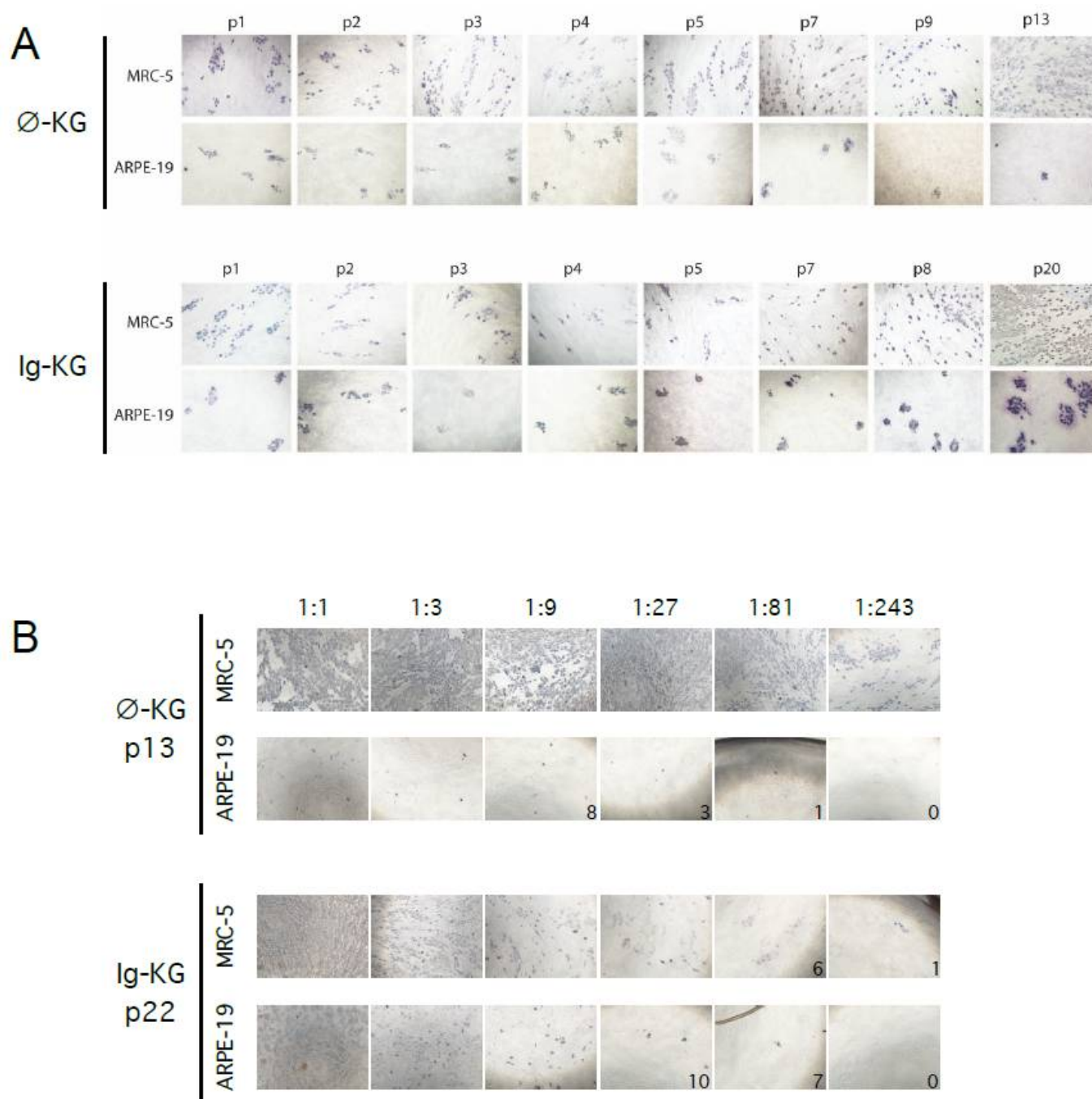


Fig. 1. A clinical CMV isolate passed in the presence of antibodies retains epithelial entry tropism.

(A) MRC-5 fibroblasts or ARPE-19 epithelial cells were infected with replicate virus stocks from the indicated passages of ϕ -KG or Ig-KG stocks and stained for CMV IE1/2 after 5 (MRC-5) or 12 (ARPE-19) days. (B) The passage 13 stock of ϕ -KG and passage 22 stock of Ig-KG were three-fold serially diluted,

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added to MRC-5 fibroblasts or ARPE-19 epithelial cells, and stained for CMV IE1/2 antigen after four

days. The number of IE1/2-positive cells in photographic images was manually counted from enlarged prints

and is reported in the bottom right corner of panels in (B).

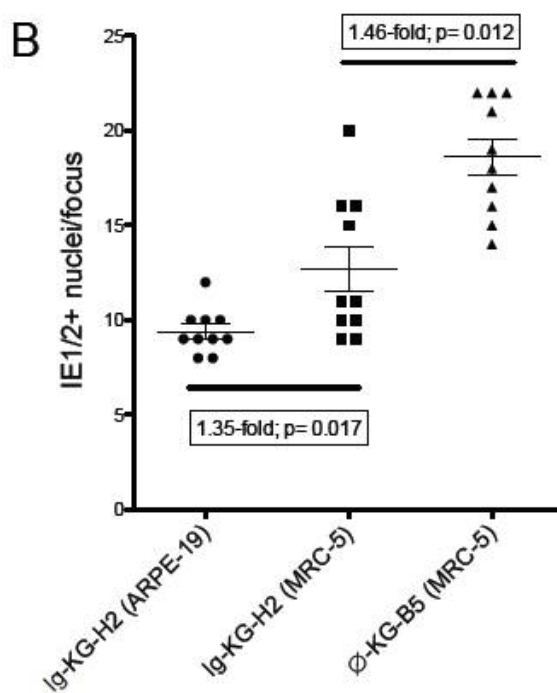
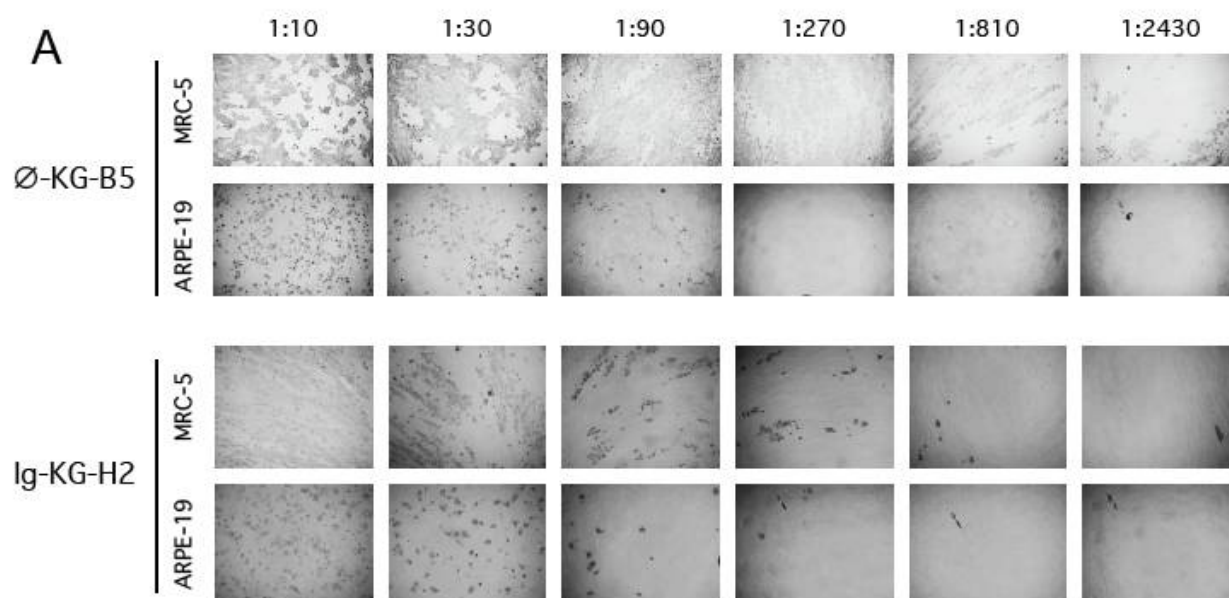


Fig. 2. Subcloned viruses retain the tropism of the parental stocks. (A) Viruses ϕ -KG-B5 and Ig-KG-H2 were isolated from ϕ -KG or Ig-KG stocks, respectively, then evaluated for entry into MRC-5 or ARPE-19

cells as described in the legend for Figure 1. (B) The numbers of IE1/2-positive nuclei in ten foci from ϕ -

KG-B5-infected or Ig-KG-H2-infected MRC-5 or ARPE-19 cultures were manually counted. Fold

differences in the means and p values (two-tailed t test) are indicated.

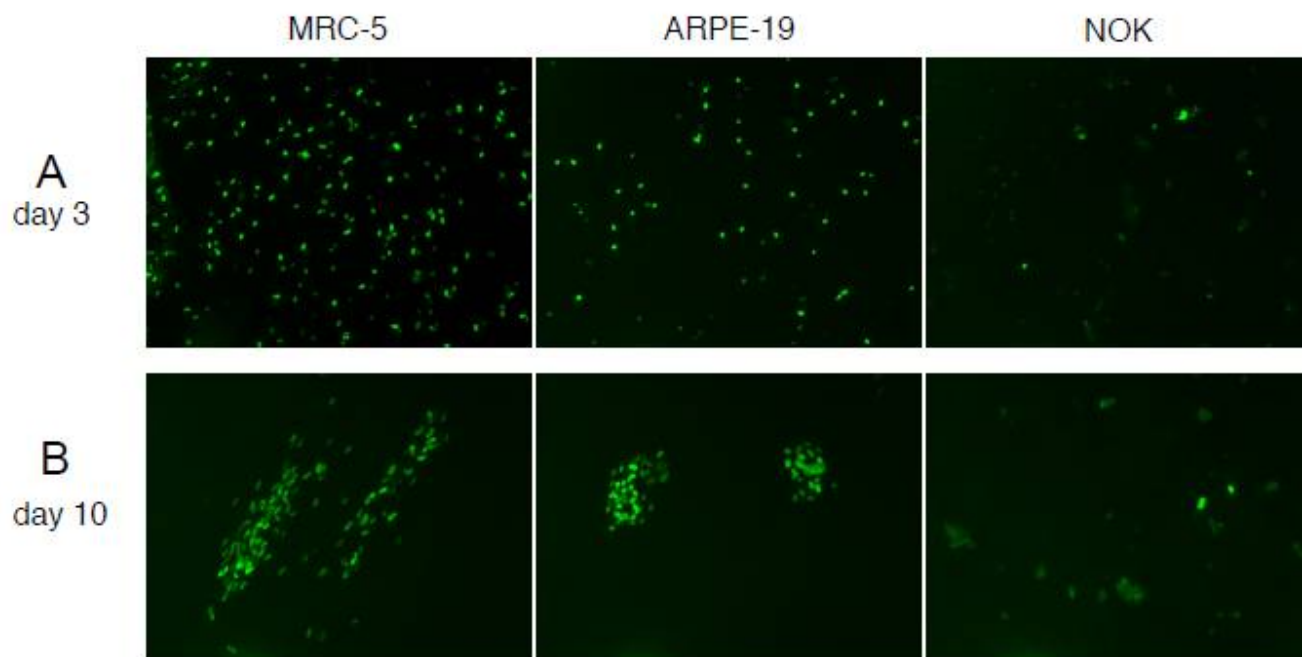


Fig. 3. Using Ig-KG to evaluate CMV tropisms for different cell types. (A) Replicate cultures of MRC-5, ARPE-19, or NOK cells in 96-well plates were infected with 1000 pfu of Ig-KG-mix (A) or with 28, 83, or 250 pfu Ig-KG-mix stock, respectively (B), and stained for IE1/2 proteins at the indicated times post-infection. Images were taken using a 5x (A) or 10x (B) objective and were false colored in green.