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1 Self-Peptidome Variation Shapes Individual Immune Responses

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14

15 Abstract

The relationship between human genetic variation and disease has not been fully 16 elucidated. According to the present view on infectious diseases pathogen resistance is 17 18 linked to Human Leukocyte Antigen (HLA) class I/II variants and their individual capacity to present pathogen-derived peptides. Yet, T cell education in the thymus occurs though 19 negative and positive selection, and both processes are controlled by a combination of 20 21 HLA class I/II variants and peptides from the self. Therefore, the capacity of given HLA class I/II variants to bind pathogen-derived peptides is only one part of the selective 22 process to generate effective immune responses. We thus propose that peptidome 23 variation contributes to shaping TCR repertoires and hence individual immune 24 responses, and that this variation represents Inherent Modulator Epitopes. 25

Introduction: disease resistance/susceptibility is linked to Inherent Modulator Epitopes (IME)

28 Despite the rapidly increasing availability of genetic data, the impact of genetic variation 29 disease resistance/susceptibility is not fully elucidated [1]. In humans. on resistance/susceptibility to pathogens was linked to Human Leukocyte Antigen (HLA) 30 31 class I and II molecules because of their capacity to present pathogen-derived peptides 32 to induce immune responses. Therefore, a major research focus was to study the genetic diversity of HLA class I/II molecules and the individual capacity of the variants to 33 34 bind pathogen-derived peptides. This research supported the view that HLA class I and II genetic diversity impacts disease resistance/susceptibility and that this diversity 35 evolved to meet the challenges of the pathogens encountered in different geographical 36 areas [2, 3]. 37

We propose here that this conclusion is incomplete and that polymorphism in the 38 peptides derived from the self also impacts disease resistance/susceptibility, playing a 39 role as Inherent Modulator Epitopes (IME). T cell education in the thymus is done 40 through positive and negative selection. First, a positive selection of T cells capable of 41 antigen recognition and then **negative selection** (see Glossary) to eliminate T cells 42 displaying high affinity for the combination of HLA class I/II plus self-peptide (self-antigen 43 tolerance) [4]. While the shaping of T Cell Receptor (TCR) repertoires is a complex 44 process involving different mechanisms, some of them still not well described or 45 understood, it is accepted that these two selection steps rely, in part, on peptide pools 46 derived from the self (peptidome) [5]. Peptide polymorphisms can thus impact TCR 47 repertoires and modulate the capacity of these repertoires to recognize pathogen-48

derived peptides. This would also explain differences in disease resistance/susceptibility
 for individuals that display the same sets of HLA class I/II variants.

The first part of this opinion article corresponds to a brief state-of-the-art regarding HLA class I/II and TCR structural biology, in particular in the context of thymic selection. We then discuss how thymic selection impacts HLA class I/II polymorphism selection. We then proceed to elaborate on how peptide pools vary between individuals and how such variation can impact immune responses. Finally, we will conclude with the proposal that some of these polymorphic peptides represent IME.

57

58 **Diversity in the interaction between the** HLA class I/II-peptide complex **and the TCR** 59 The central interaction in cell-mediated adaptive immunity occurs between the $\alpha\beta$ TCR 60 ($\alpha\beta$ TCR) and the HLA class I/II-peptide complex (Box 1).

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62 HLA class I/II-peptide complex *diversity*

HLA class I/II genes are highly polymorphic with over 15,000 allotypes encoded by the five most polymorphic genes (*HLA-A/-B/-C/-DRB1/-DQB1*) [6]. The polymorphism is concentrated around the peptide-binding cleft of the HLA class I/II protein and thus distinct HLA class I/II allotypes typically have distinct peptide-binding preferences that are determined by anchor residues that reside within the PBD [7]. HLA class I/II variants can each present thousands of peptides [8], with an overlap between these peptides that is positively correlated with PDB similarity [9].

In contrast to HLA class I/II diversity, TCR diversity is generated during T cell ontogeny 71 in the thymus, via random rearrangements of variable (V), diversity (D) and joining (J) 72 73 gene segments from TCR β loci, and random re-arrangement of V and J gene segments from the TCR α gene loci (Box 2). Yet, while this diversity is initially randomly generated, 74 selection of $\alpha\beta$ TCR cells in the thymus involves immature thymocytes being subjected to 75 both positive and negative selection [4] (Figure 1). The first step is the positive selection 76 resulting in the survival of thymocytes that undergo intrathymic migration. This step 77 ensures that the thymus produces T cells capable of antigen recognition. This selection 78 is done in the thymus cortex where the self-peptide involved in positive selection seems 79 to be generated by the thymoproteasome, a specialized type of proteasome [10, 11]. 80 81 The second step is the negative selection that ensures that T cell development produces functional thymocytes that are tolerant to self-antigens. This step occurs in the thymus 82 medulla. The selection is carried out by eliminating the high binding T cells and keeping 83 only T cells that can recognize the HLA class I/II-peptide complex with low-to-medium 84 affinity. Because all genes are likely expressed in the thymus tissues, the whole 85 peptidome thus plays a role at both the positive and negative selection steps. 86

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88

89 The HLA class I/II-peptide complex impacts TCR repertoires

The role played by HLA class I/II molecules on the resistance/susceptibility to pathogens is twofold: first, through their capacity to bind pathogen-derived peptides and present them to T cells and second, through their effect on T cell education in the thymus with the presentation of self-peptides. While the former was extensively discussed (for example [2, 3, 12], the latter is not typically considered when discussing disease resistance/susceptibility in light of HLA class I/II variation.

Yet, negative thymic selection prunes T cells that are strongly self-reactive and 96 recognize with high affinity HLA **allotypes** presenting peptides from the self. While this 97 process does not eliminate all self-specific T cells [13], it does impact TCR 98 repertoires. Similarly, positive thymic selection selects TCR that can recognize self 99 peptide-HLA class I/II complexes with enough affinity. It should be noted that there is 100 101 uncertainty regarding how the strength of the affinity between HLA class I/II ligands and peptides, and between HLA class I/II-peptide complex and TCR could impact the 102 selection. 103

Hence with both types of thymic selection, the nature of the peptides from the self (immunopeptidome) contributes to the shaping of TCR repertoires. In the next section, we show that some of these peptides can be polymorphic and such variability thus leads to distinct TCR repertoires and adaptive immune responses.

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Impact of the polymorphism of the immunopeptidome on the immune function: the case of the Minor Histocompatibility Antigens

The importance of the polymorphism of the immunopeptidome is best illustrated by the 112 113 Minor Histocompatibility Antigens (MHA) [14, 15] that were first discovered when HLA class I/II identical donors and recipients gave immunological responses during 114 bone marrow transplants. HLA class I/II molecules are a major factor associated with 115 graft rejection as distinct HLA class I/II allotypes present distinct sets of peptides to 116 educate T cells in the thymus and such TCR repertoire differences lead to allograft 117 rejections [16]. Similarly, graft rejection can occur even in autologous situations (same 118 HLA class I/II allotypes) because of the peptides that are polymorphic between these 119 individuals and hence can lead to a differential pruning of TCRs that recognize with high 120 affinity the combination of HLA class I/II allotypes and peptides from the self [17]. 121

Several polymorphic peptides acting as MHA have long been described (see for 122 example [17]) but more and more are being discovered thanks to extensive genome 123 sequencing and the development of high throughput approaches to predict or elute HLA 124 class I/II peptides [18, 19]. In particular, discovery of new MHA is ensured by either 125 "forward immunology" or "reverse immunology" approaches. The former includes the 126 isolation of alloreactive clones from the patient and subsequent inference of 127 immunogenic missense nucleotide polymorphisms [18, 20]. The latter is based on mass 128 129 spectrometry (MS) analysis of HLA-eluted peptides, or by in silico predictions. The 130 peptides detected by MS are then linked to polymorphic genomic regions [19, 21].

The question that arises here is whether immunopeptidome polymorphisms have a role that goes beyond graft transplants and affect more generally resistance/susceptibility to diseases.

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135 Peptidome polymorphism and Inherent Modulator Epitopes

The previous section illustrates how peptidome polymorphisms impact T cell education 136 137 in the thymus and can lead to histocompatibility. To understand this effect, it is important 138 to re-emphasize how each HLA class I/II allotype presents its own set of peptides and that combinations of HLA class I/II plus self-peptide define T cell repertoires. 139 140 However, due to thymic negative selection, mature T cells can display a depleted 141 repertoire that does not fully recognize certain HLA class I/II plus pathogen-derived 142 peptide combinations, even if in theory the HLA class I/II molecules could present such peptides. The same reasoning can be applied to the polymorphic immunopeptidome and 143 144 such polymorphic peptides that affect T cell repertoires can be referred to as Inherent Modulator Epitopes (IME). These IME can also drive thymus positive and negative 145 selection and select TCR that will recognize pathogen-derived peptides presented by 146 147 HLA class I/II [10, 11].

Polymorphic peptides could correspond to non-synonymous mutations on coding genes, but also to the presence/absence of genomic sequences that are potentially coding for proteins. Therefore, a wide variety of variation distributed along the genome can modify the immunopeptidome and hence impact TCR repertoires, and ultimately the ability of T cell to respond to diseases. Peptidome polymorphism can thus explain individual

variation in disease resistance/susceptibility through their impact on TCR repertoires 153 154 (Figure 2). This hypothesis could be tested by analysis of immunopeptidome variation individuals with the HLA types with different from same but disease 155 156 resistance/susceptibility phenotypes.

Interestingly, while HLA class I/II variation is driven by natural selection, the same could
be true for peptide polymorphisms that represent IME.

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Genomic plasticity increases peptidome variability: inventory of variation and detail of the common mechanisms of endogenization.

We describe here how the peptidome contributes to shaping TCR repertoires and thus immune responses. any genomic variation modifying the peptidome can potentially impact immune responses. Such variation could occur at different levels, starting with direct and simple non-synonymous mutations in protein-coding regions of the genome but potentially involving more indirect mechanisms like mutations impacting immunoproteome processing [22, 23].

Other genomic variation, such as presence/absence of genes or indels in coding regions will also change the peptidome repertoire by adding or suppressing specific peptides. Similarly, variations affecting transcription can play a role: alternative splicing events will produce new peptides for the same coding regions. The transcription step itself could be affected by genomic variation or be under the control of epigenetic factor that can modify peptide expression in the thymus [24]. Differences in peptide expression levels could

similarly modify T cell maturation, inducing a competition between peptides bound by HLA class I/II. In extreme cases, modulation of gene expression in the thymus could impact the peptidome just like gene absence/presence would. Non-coding regions and their variability could also affect the peptidome as some pseudogenes can be partially translated for example. Other genetic events, like genome rearrangement involving transposons could also lead to the expression of new peptides [25, 26].

Finally, endogenization of exogenous DNA is also potentially a phenomenon that could 180 impact immune responses. Indeed, endogenous viruses and transposon repertoires vary 181 between individuals [27-29], and such variation could generate IME. This phenomenon 182 has potential to enhance immune responses against exogenous retrovirus. This was for 183 example reported in mouse with endogenous retroviruses shaping T cell repertoires and 184 185 hence allowing specific responses against a closely related exogenous retrovirus [30] by cross reactivity. Two other adaptive systems are known to use endogenization to fight 186 pathogens: the Clustered regularly interspaced short palindromic repeats (CRISPRs) in 187 188 archaea and bacteria [31] and piRNA in eukaryotes [32]. In both cases foreign DNA prevents new infections [32, 33]. Here, we propose that endogenization could be a 189 widespread phenomenon that would lead to new IME and, through the resulting impact 190 on TCR repertoires, allow immune systems to better fight pathogens. 191

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193 Conclusion

194 The genetic basis for disease resistance/susceptibility is a complex mechanism but HLA 195 class I/II variation is commonly involved. Consistent with this, natural selection

commonly targets HLA class I/II molecules and they display a high level of 196 197 polymorphism in human populations. This point is important and necessary to understand the human genetic-based resistance and its variation between individuals 198 and populations, yet it does not explain all the differences in HLA-TCR biology. Indeed, 199 200 even if HLA polymorphism could be selected to favor binding of pathogen peptides, this 201 selection could not be efficient if T cells do not have adequate TCR to recognize these complexes between pathogen peptides and HLA class I/II. Hence, it is likely that 202 selection also occurs on T cell maturation during the positive and negative selection in 203 the thymus. The whole peptidome is involved in this maturation and thus plays a role in 204 shaping TCR repertoires. Therefore, we suggest that selection could also target the 205 peptidome and allow selection of TCR that can recognize HLA class I/II plus pathogen-206 derived peptides. 207

Currently, disease association studies target HLA class I/II variants [34] or use genome-208 wide association studies to isolate genomic polymorphisms [35-38]. Similarly to what 209 210 was done to isolate new MHA [39], analyses focused on peptidome such as immunopeptidome-wide association studies [40] could help explore the impact of 211 212 changes in self immuno-peptidome. Such analyses take into account both HLA variation and peptidome variation, in order to identify changes that could impact self-213 214 immunopeptidome due to an increased or a decreased number of self-peptides that can be presented by the HLA class I/II variants of one individual. This type of analysis could 215 hence lead to the discovery of IME and provide ways to test interesting hypotheses, 216 such as the possibility that gender specific differences in the immune response against 217 218 COVID-19 [41] could be explained by the Y chromosome specific immunopeptidome.

219

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Figure 1: T cell selection depends on the affinity of its TCR to self peptide-HLA

class I/II complexes. If TCR affinity is low (orange), T cells are eliminated by positive

selection. If TCR affinity is too high, T cells are eliminated by negative selection (blue).

- 331 All others T cells are selected (green).
- 332
- Figure 2: Impact of self peptidome variation on the generation of T cell repertoires for the same HLA class I/II variants. A self-peptidome variation can impact the binding of a peptide to the HLA class I/II variants of a given individual. This change will affect the affinity of TCRs for the HLA-peptide complex (peptide variant #1 and #2) and hence directly impact TCR repertoires. Moreover, self-peptidome variation could also generate a peptide that cannot be presented so it will not be part of the immune-peptidome, and that will also impact TCR repertoires (peptide variant #3).
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Box 1: HLA class I/II proteins present peptide antigens to immune receptors

HLA class I molecules present peptides derived from the proteins that are synthesized 355 within the cell. The proteins are degraded by the proteasome into peptides in the cytosol 356 357 and short peptides are translocated to the Endoplasmic Reticulum (ER) by the transporter associated with antigen presentation (TAP) peptide transporter. Once in the 358 ER, the translocated peptides are loaded into the HLA groove (peptide-binding cleft) with 359 the help of chaperone proteins. These loaded peptides are typically 8-10 amino acid 360 long and have specific anchor residues; longer peptides are trimmed by the 361 aminopeptidase, ERAP1. Exocytosis of newly synthesized HLA class I molecules loaded 362 with peptides on the cell surface initiates the interaction with the TCR of CD8⁺ T cells. 363 CD8⁺ T cells are involved in cell-mediated immune responses that can directly induce 364 365 cytotoxicity in virus-infected cells as well as in tumor cells.

HLA class II molecules present peptides that are longer than those presented by HLA 366 class I molecules and that are derived from extracellular proteins degraded in the 367 endosomal pathway. HLA class II molecules are assembled in the ER with the invariant 368 chain li. li binds the HLA class II peptide-binding groove and directs the transport of HLA 369 370 class II molecules into the endosomal pathway, where they will encounter exogenous 371 peptides generated by proteases. Once in the endosomal pathway, li is degraded by proteases, leaving an invariant chain fragment (CLIP) inaccessible for proteases as it is 372 373 protected by the peptide-binding groove of HLA class II molecules. This CLIP fragment 374 will be replaced by higher affinity peptides with the help of the dedicated HLA class II-375 like chaperone DM, which locally opens the groove to release low-affinity peptides such 376 as CLIP then locks in place the high affinity peptide replacements. The HLA class II-

377 peptide complex will then translocate to the plasma membrane, where it can interact 378 with CD4⁺ T cells. These cells are "helper cells" that carry out multiple functions in 379 cellular immunity, including cytokine secretion, activation of innate immune cells, and 380 initiation of the adaptive immune responses.

381

Box 2: How TCR variability is built

The generation of the TCR occurs by random rearrangement of variable (V), diversity 383 (D), and joining (J) gene segments. Moreover, junctional diversity increases the TCR 384 repertoire by addition of non-template encoded nucleotides (N) at V (D) J Junctions. 385 386 V(D)J recombination is initiated early during lymphocyte development by a site-specific endonuclease: RAG1 and 2. The RAGs cleave at a conserved recombination signal 387 (RSS) that flanks each V, D, and J segments [42]. The random pairing of different 388 TCRα-chain and TCRβ-chains increases the repertoire further. In humans, according to 389 the number 42 V segments and 61 J segments are found for the TCR α -chain locus, 390 391 while 52 V, 2 D and 13 J genes in the case TCR β -chain locus[43]. Random rearrangements of genes encoding TCR α and TCR β and random pairing can 392 theoretically generate up to 1 × 10²⁰ different $\alpha\beta$ TCRs [44], although we note that the 393 expressed diversity in any given individual is closer to 5 × 10⁶ $\alpha\beta$ TCRs [45, 46]. 394 Combinations of HLA class I/II plus peptide interact with TCR hypervariable 395 396 complementarity-determining regions (CDRs). The germ line V genes encode the CDR1 and CDR2 regions and the V(D)J junction encodes the CDR3 region. CDR1 and CDR2 397

398	interact	with	the	HLA	class	1/11	molecules,	while	CDR3	interacts	with	the	peptide
399	presente	ed by	HLA	class	I/II mo	olecu	ıles [46].						
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416 **Glossary**

Allotype: A distinct variant at the protein level. Several allelic variants can code for the
same allotype.

Immunopeptidome: The complete set of peptides encoded by a particular genome, or
present within a particular cell type or organism that can be presented by HLA class I/II
molecules.

Inherent Modulator Epitopes (IME): epitopes of the self-proteome whose polymorphism can affect the negative or positive selection of T Cells and can thus contribute to the shaping of immune system responses (resistance, immunotolerance).

HLA: The Human Leukocyte Antigen (HLA) region is a ~4Mb genomic region on chromosome 6 (6p21.3) that contains a set of highly polymorphic genes named *HLA class I* and *class II*. These genes encode cell surface proteins essential for the adaptive immune system because of their capacity to present peptide antigens to immune receptors and hence discriminate 'self' versus 'non-self'.

430 Minor Histocompatibility Antigens (MHA): peptides of the self that differ between
431 patients and donors, that are presented by HLA molecules at the cell surface, and that
432 give rise to graft rejection in the context of bonne marrow transplantation (stem cells).

Negative selection: (i) evolution: natural selection removing deleterious alleles; (ii)
 immunology: deletion of T cells whose TCR recognizes with a high affinity HLA class I/II self-peptide complex complexes of peptides-HLA class I/II molecules.

436 Polymorphism: A distinct variant of the same element. In the context of peptides,
437 polymorphism means two peptides originating from the exact same part of a protein but
438 with a distinct sequence.

439 **Peptidome**: The complete set of peptides encoded by a particular genome, or present
440 within a particular cell type or organism.

441 Positive selection: (i) evolution: natural selection increasing frequencies of
442 advantageous mutations; (ii) immunology: retention of T cells whose TCR recognizes
443 complexes of self peptides-HLA class I/II.

T cell receptor (TCR): receptor of T cells that recognizes complexes of peptide-HLA
 class I/II. It is coded by V, D, and J genes: through somatic recombination, these genes
 produce a vast number of distinct variants in each individual.

Highlights

T Cell Receptor (TCR) repertoires emerge in the thymus in each individual as T cells undergo positive and negative selection.

T cell education is controlled by the combination of Human Leukocyte Antigen (HLA) class I/II molecules and their peptide pools (peptidome).

HLA class I/II molecules are highly plastic in human populations but the peptidome is also a source of variation. Hence combined diversity of HLA class I/II molecules and of self-peptides shapes individual immune responses.

Self-peptide variants that affect T cell repertoires represent Inherent Modulator Epitopes.

Outstanding Questions

- What is the respective contribution of IME vs HLA class I/II for TCR repertoires?
- Could some MHA also play a role as IME?
- Could some IME be involved in the development of autoimmune diseases by selecting TCR that can recognize with sufficient affinity self-peptides?
- What is the part of the genome that could be under selection to preserve IME?
- How to investigate the impact of IME on immune responses?

TCR affinity for self peptide-



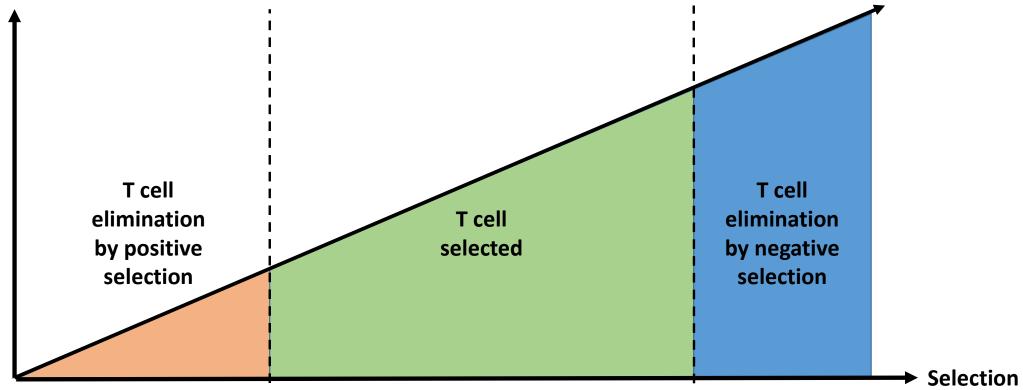


Figure2_new

