

Pre-existing immunity to human parainfluenza virus (hPIV) does not affect rSIV.F/HN-mediated transduction efficiency.

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Lentiviral vector pseudotyped with the Sendai virus envelope proteins F and HN (rSIV.F/HN) transduces lungs efficiently, and can be repeatedly administered. These features make the virus a suitable vector for a range of diseases including cystic fibrosis (CF). Sendai virus has significant sequence homology with hPIV₁ and ~80% of adults carry anti-hPIV₁ antibodies. In preparation for a first-in-man CF trial we assessed whether hPIV₁ antibodies inhibit rSIV.F/HN transduction efficiency. We passively immunised mice with human immunoglobulins (IVIg) administered either intraperitoneally (400 µl) or intranasally (100 µl) and showed that, using these doses, the concentration of hPIV₁ antibodies in mouse serum and broncho-alveolar lavage fluid (BALF) was as high as or higher than in human serum and BALF. Next we transduced mice with rSIV.F/HN-lux intranasally 24 hrs after immunisation and showed that transduction efficiency was not affected by the presence of hPIV₁ antibodies. To confirm results in human samples we performed in vitro transduction inhibition assays in serum positive or negative ($n = 4$ /group) for hPIV₁ antibodies and showed that both groups inhibited rSIV.F/HN transduction, whereas rSIV.VSVG control virus was significantly ($p < 0.01$) less affected. Subsequently we quantified hPIV₁ IgG and IgA antibodies in BALF, grouped them into positive and negative cohorts and performed a transduction inhibition assay to address whether hPIV₁ antibodies in epithelial lining fluid (ELF) inhibit rSIV.F/HN efficiency. There was no significant difference between the groups, suggesting that hPIV₁ antibodies in ELF do not inhibit rSIV.F/HN transduction. The data suggest that hPIV₁ antibodies will not inhibit rSIV.F/HN transduction in human lung.