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- HLA B17, B37, NYTPGPGVRYPLT, HLA B7; and GVRYPLTFGWGCK-LVP, HLA B18).
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- HLA-B\*57 is over-represented in slow progressors. HLA\*5801 is a closely related molecule, and while the defined anchor residues of HLA\*5801 can be used to predict epitopes in HIV-1 proteins, the CTL from HLA-B\*57 positive individuals have limited cross-presentation capacity with HLA\*5801 targets. In this paper five new HLA-B\*57 epitopes were defined.
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- antigen-specific CTL response compared to that with VC1-F alone. VC1-F plus IL-12 expression plasmid or VC1-F alone were inoculated to BALB/c mice twice at interval of 2 weeks. Two weeks after the second inoculation, spleen effector cells from these mice were examined. Stronger CTL responses against target cells were observed from the inoculation of VC1-F plus IL-12 plasmid than from that with VC-1F alone, but there was no difference in antibody induction. The inoculation of VC1 plus IL-12 plasmid also produced higher CTL activity than the inoculation of VC1 alone. These augmented CTL activities were not observed using target cells pulsed with non-HIV-specific peptides and different class I haplotype cells. These data demonstrate that co-inoculation of cell-mediated immune potent antigen and IL-12 plasmids can enhance the antigen-specific CTL response. This may be a potential approach for the induction of cellular immunization against HIV-1 and other diseases.
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min and the mucosal adjuvant cholera toxin induces peptide-specific CTLs and protection against tumor development *in vivo*. *J Immunol* **158**:834-41, 1997. (Medline: 97146054) Notes: To evaluate the ability of mucosal immunization protocols using peptide immunogens to induce CTL responses, BALB/c and C57BL/6 mice were immunized intranasally (i.n.) with peptides corresponding to a known CTL epitope in HIV-1 glycoprotein 120 or OVA, respectively, and the mucosal adjuvant cholera toxin (CT). Intranasal immunization of BALB/c mice with a 10- or 15-amino acid peptide corresponding to a CTL determinant in HIV-1 glycoprotein 120 and CT induced peptide-specific CTLs in spleen cells that persisted through 35 days after the last immunization. Intranasal immunization of C57BL/6 mice with the octameric OVA peptide and CT produced similar results with detectable peptide-specific CTL in both the cervical lymph node and spleen. To test whether CTL induced by i.n. immunization with OVA peptide and CT were functional *in vivo*, groups of C57BL/6 mice were injected with E.G7-OVA tumor cells that express the OVA protein and monitored for tumor growth. Animals immunized i.n. with OVA and CT were protected against tumor development as efficiently as animals immunized by the potent CTL induction protocol of i.v. injection with OVA-pulsed dendritic cells. Intranasal immunization with peptides corresponding to known CTL epitopes and CT provides a noninvasive route of immunization for the induction of CTL responses *in vivo*.

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- allogeneic CTL clones of each of the other haplotypes, whereas none of these cross-presents to H-2q CTL, nor do H-2q targets present to CTL of the other haplotypes. Here, we explore the critical amino acid residues for the cross-presentation using 10 variant peptides with single amino acid substitutions. The fine specificity examined using these mutant peptides presented by the same MHC class I molecule showed striking similarity among the CTL of each haplotype, expressing either V beta 8.1 or V beta 14. In contrast, the fine specificity is different between the distinct MHC class I molecules even for the lysis by the same CTL, as shown by reciprocal effects of the same substitutions. Thus, peptide fine specificity of a single TCR is influenced by changes in the class I MHC molecules presenting the Ag.
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- challenge with SHIV chimeric challenge stock. Not all immunized monkeys had a CTL response, probably due to the outbred nature of the animals and polymorphic MHC alleles. Two macaques had CTL to gag, and one macaque had CTL to the CD4 binding region, and one animal responded to gp120 pooled peptides; none had a response to the V3 peptide.
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- class I restricted, and can achieve complete elimination of detectable virus in infected cell cultures. Inhibition occurs even at high multiplicities of infection or at ratios of CTL to CD4 cells as low as 1:1,000. The other mechanism is mediated by soluble inhibitory factors which are triggered in an antigen-specific and HLA-restricted fashion but then act without HLA restriction.
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