

# VIROLOGY

## **Virus cultivation and assay 2**

## Virus assay: **Quantitative virology**

- Measurement of infectious units
- Measurement of virus particles and their components

## Measurement of infectious units

- Plaque assay
- Immunoreactive focus assay
- Infectious center assay
- Transformation assay
- Endpoint dilution

# The third revolution in Animal Virology

## 1952 – Introduction of the Plaque Assay

R. Dulbecco & M.Vogt. Some problems of animal virology as studied by the plaque technique. *Cold Spring Harb Symp Quant Biol* 18: 273-279. 1953



*PRODUCTION OF PLAQUES IN MONOLAYER TISSUE CULTURES BY SINGLE PARTICLES OF AN ANIMAL VIRUS*

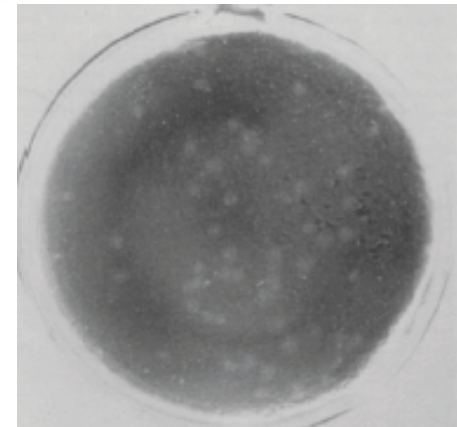
BY RENATO DULBECCO

CALIFORNIA INSTITUTE OF TECHNOLOGY, PASADENA, CALIFORNIA

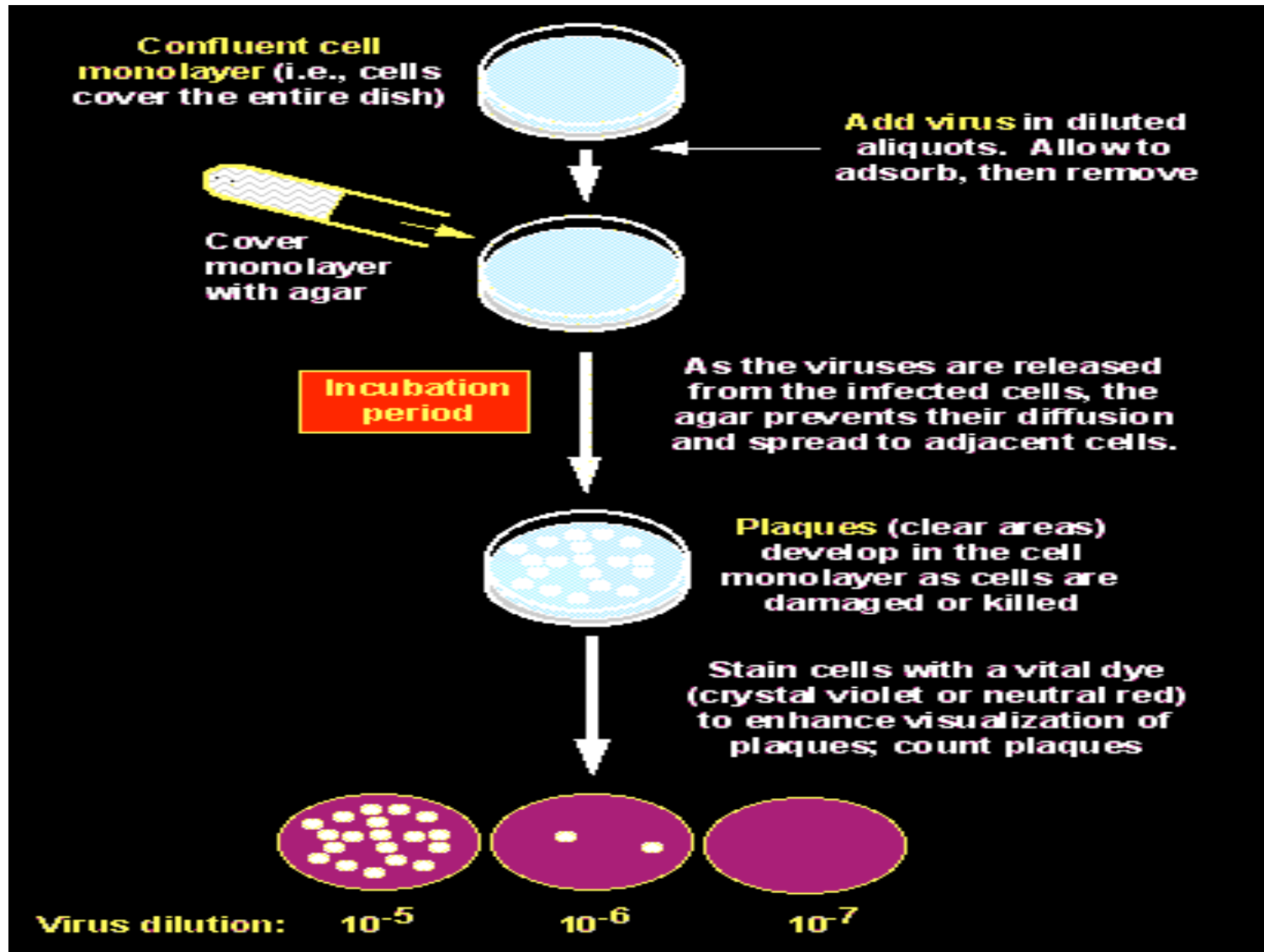
Read before the Academy, April 29, 1952

Research on the growth characteristics and genetic properties of animal viruses has stood greatly in need of improved quantitative techniques, such as those used in the related field of bacteriophage studies.

The requirements for a quantitative virus technique are as follows: (1) The use of a uniform type of host cell; (2) an accurate assay technique; (3) the isolation of the progeny of a single virus particle; and (4) the separate isolation of each of the virus particles produced by a single infected



# Outline of Viral Plaque Assay

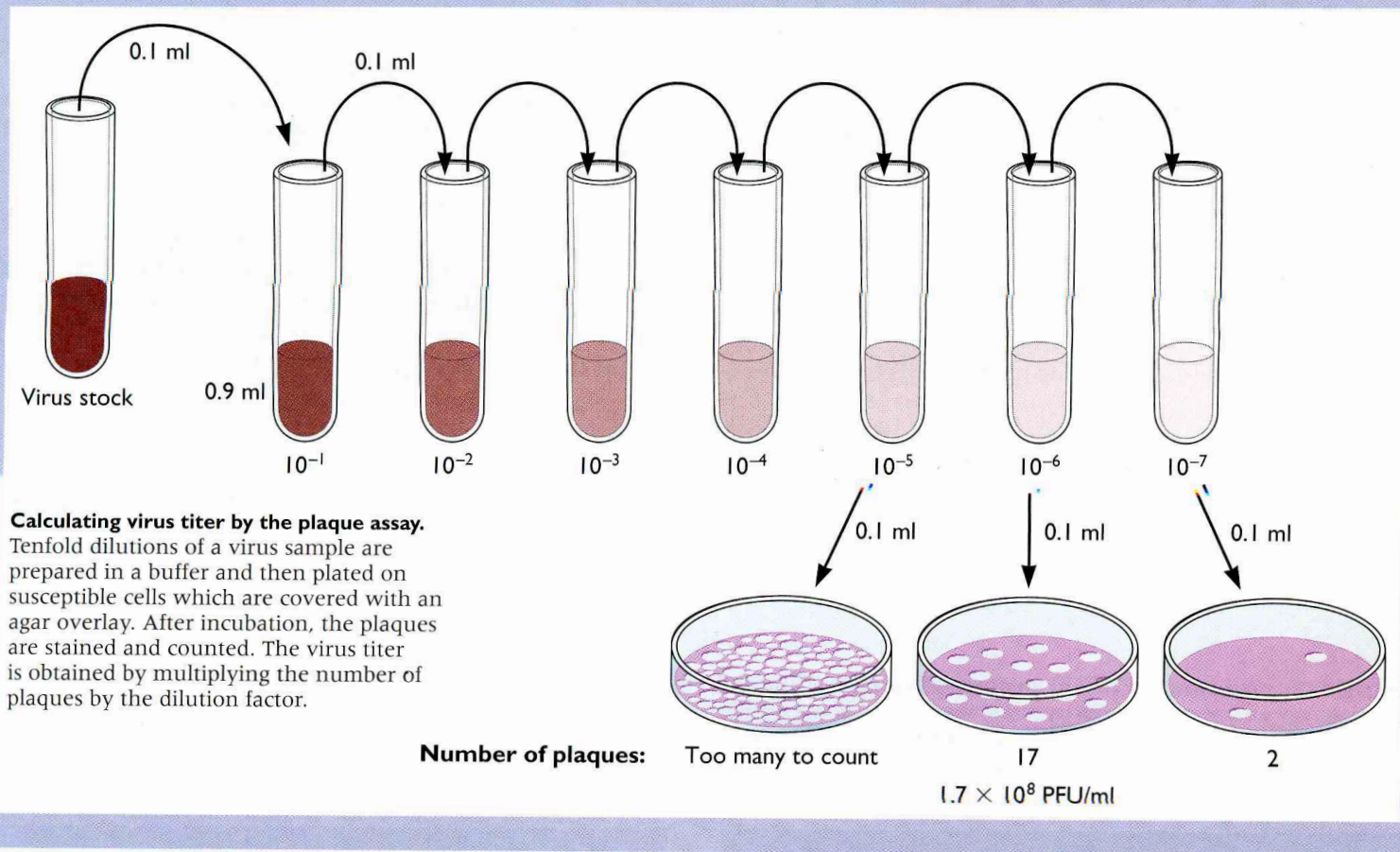


**BOX  
2.5****METHODS****Calculating virus titer from the plaque assay**

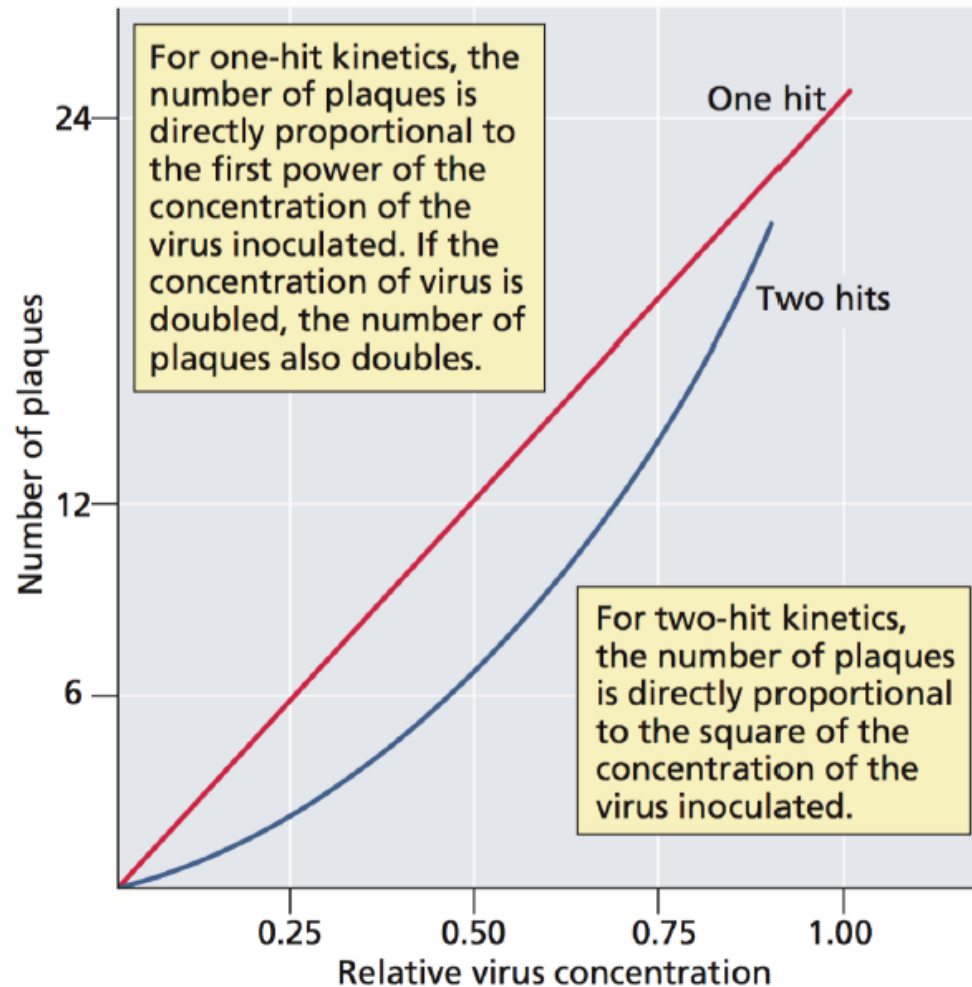
To calculate the titer of a virus in plaque-forming units per milliliter, 10-fold serial dilutions of a virus stock are prepared, and 0.1-ml aliquots are inoculated onto susceptible cell monolayers (see figure). After a suitable incubation period, the monolayers are stained and the plaques are counted. To minimize error in calculating the virus titer, only plates

containing between 10 and 100 plaques are counted, depending on the area of the cell culture vessel. According to statistical principles, when 100 plaques are counted, the sample titer varies by  $\pm 10\%$ . For accuracy, each dilution is plated in duplicate or triplicate (not shown in the figure). Plates with more than 100 plaques are generally not counted because the plaques

may overlap, causing inaccuracies. In the example shown in the figure, 17 plaques are observed on the plate produced from the  $10^{-6}$  dilution. Therefore, the  $10^{-6}$  dilution tube contains 17 PFU per 0.1 ml, or 170 PFU per ml, and the titer of the virus stock is  $170 \times 10^6$  or  $1.7 \times 10^8$  PFU/ml.

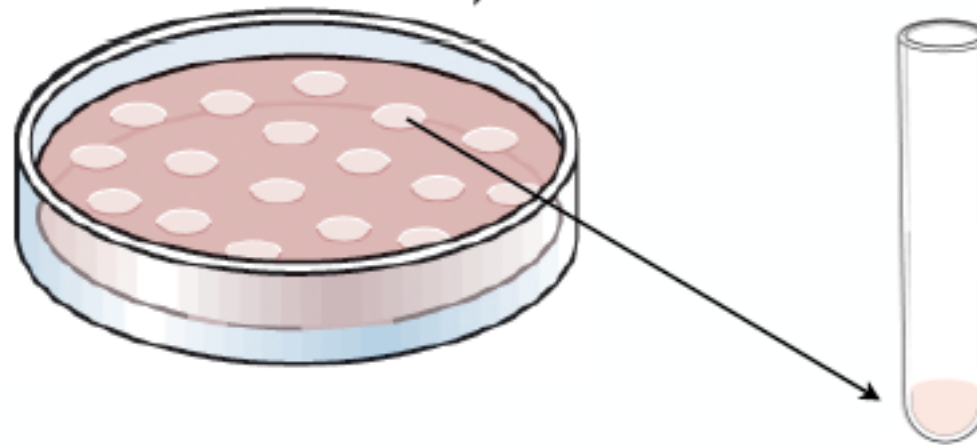


## The dose-response curve of plaque assay



For the majority of animal viruses there is a linear relationship between the number of infectious particles and the plaque count. One infectious particle is therefore sufficient to initiate infection, and the virus is said to infect cells with **one-hit kinetics**.

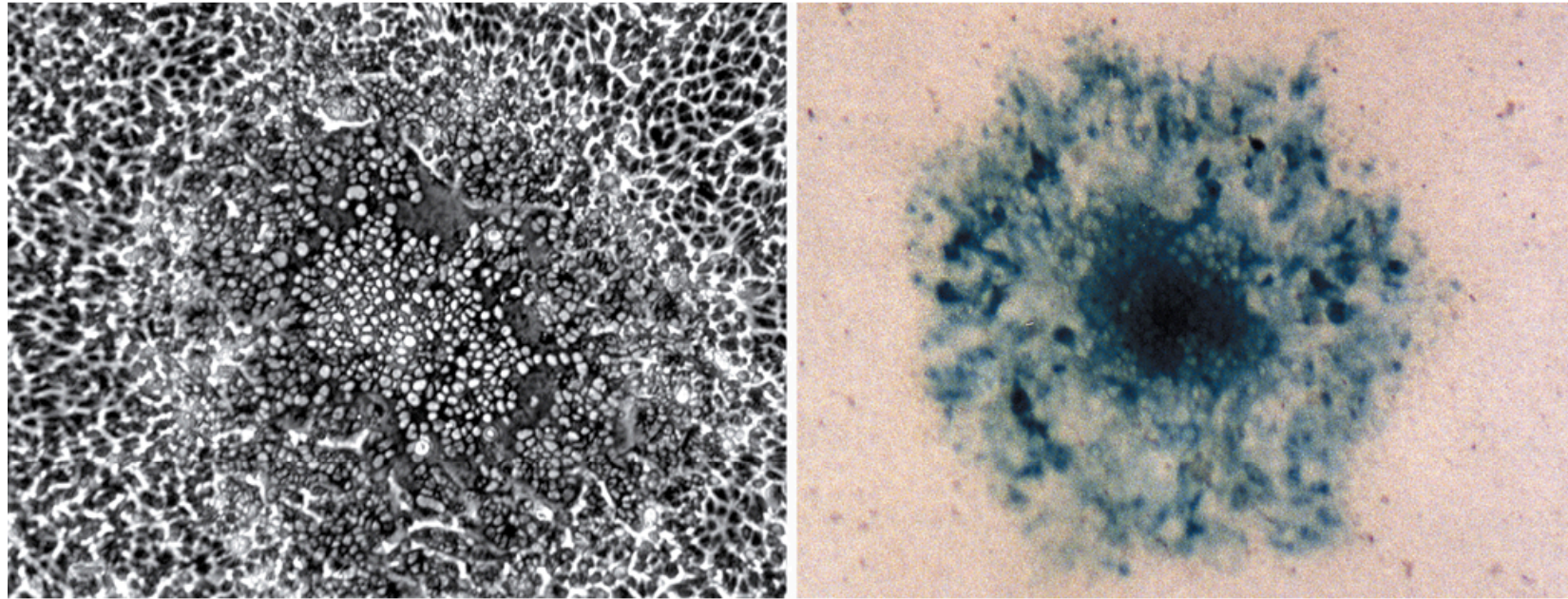
# Plaque purification



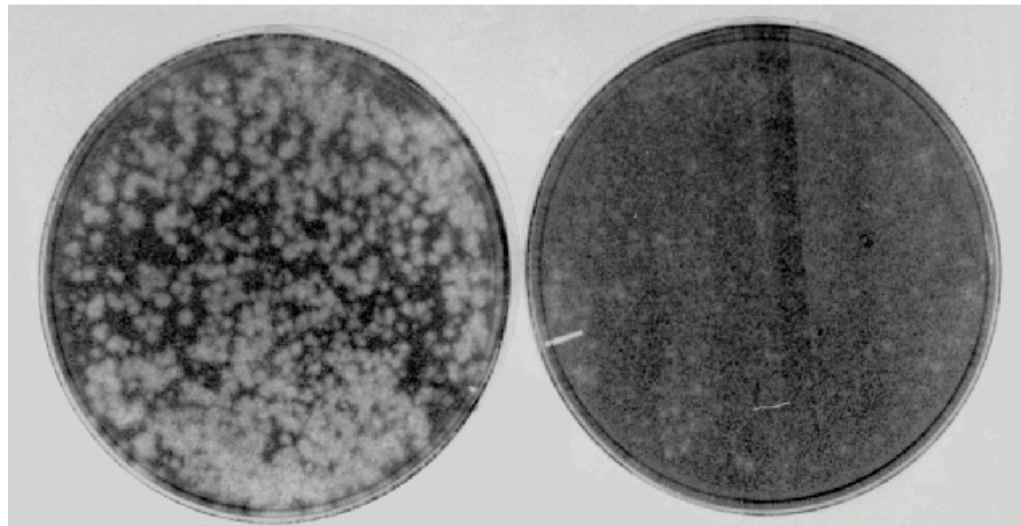
A method for obtaining clonal virus stocks. Usually it is performed three times consecutively



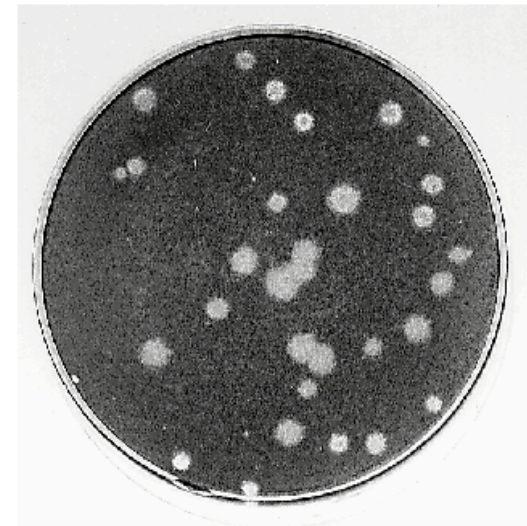
**A** Plaques formed by different animal viruses



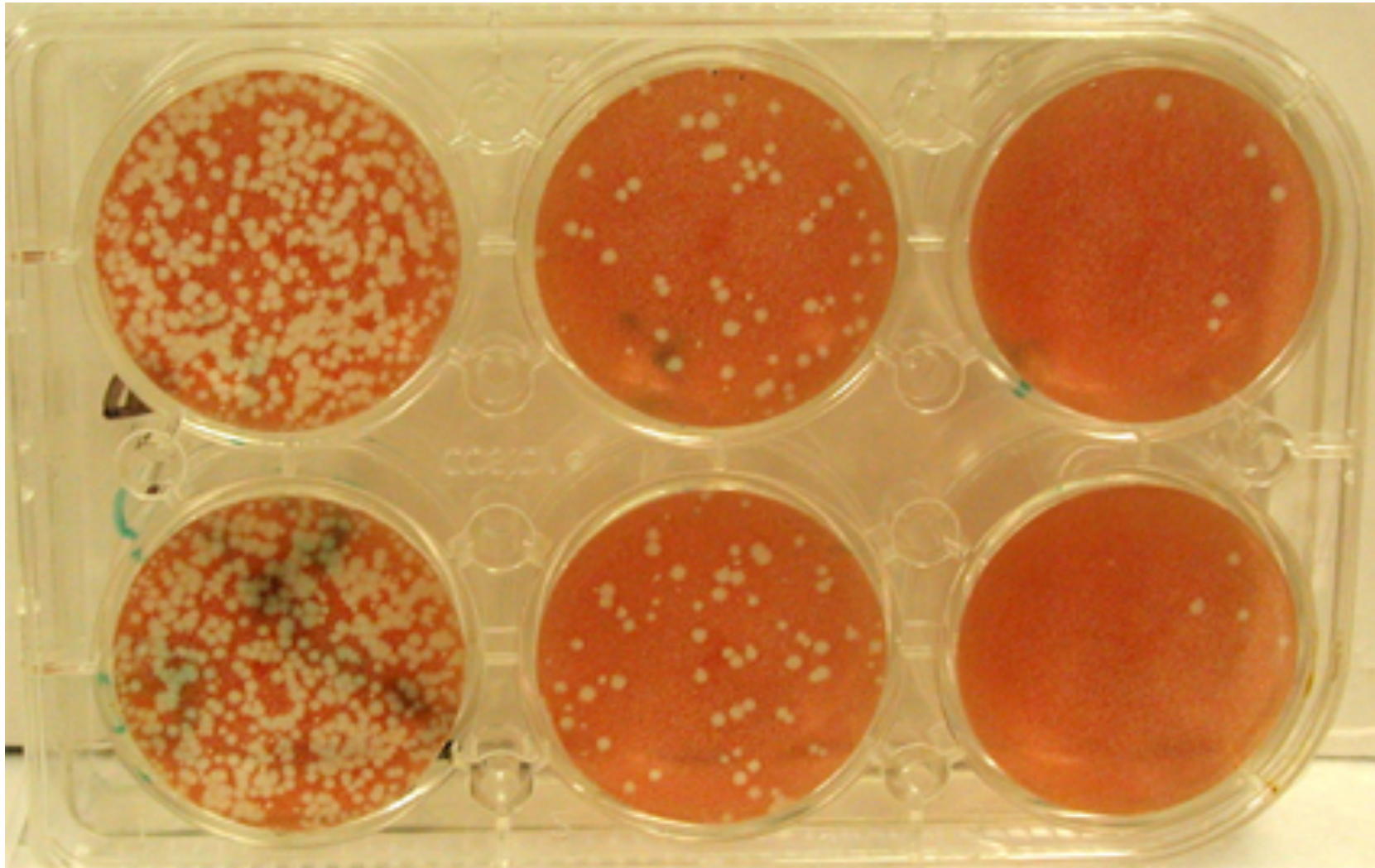
**B**

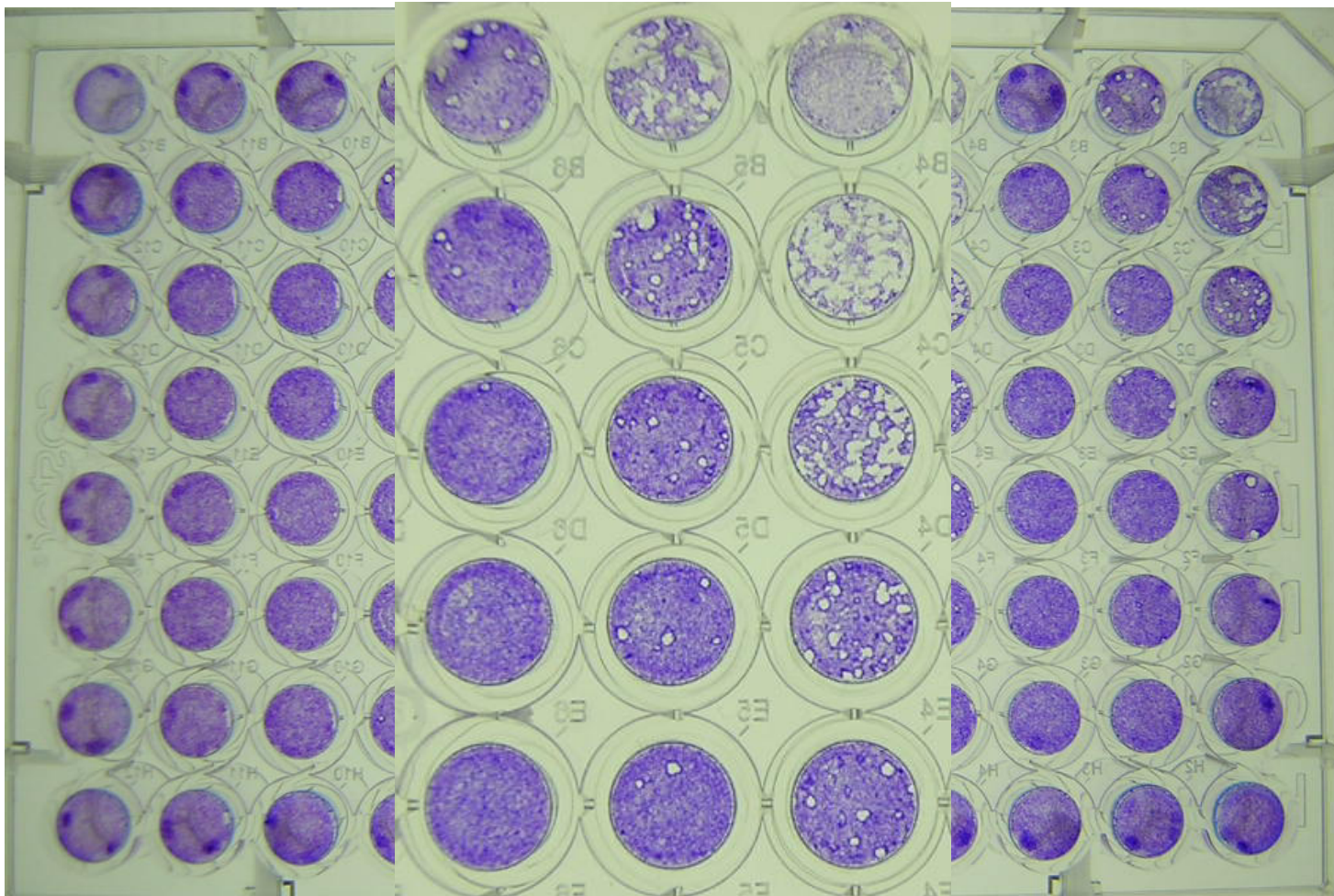


**C**

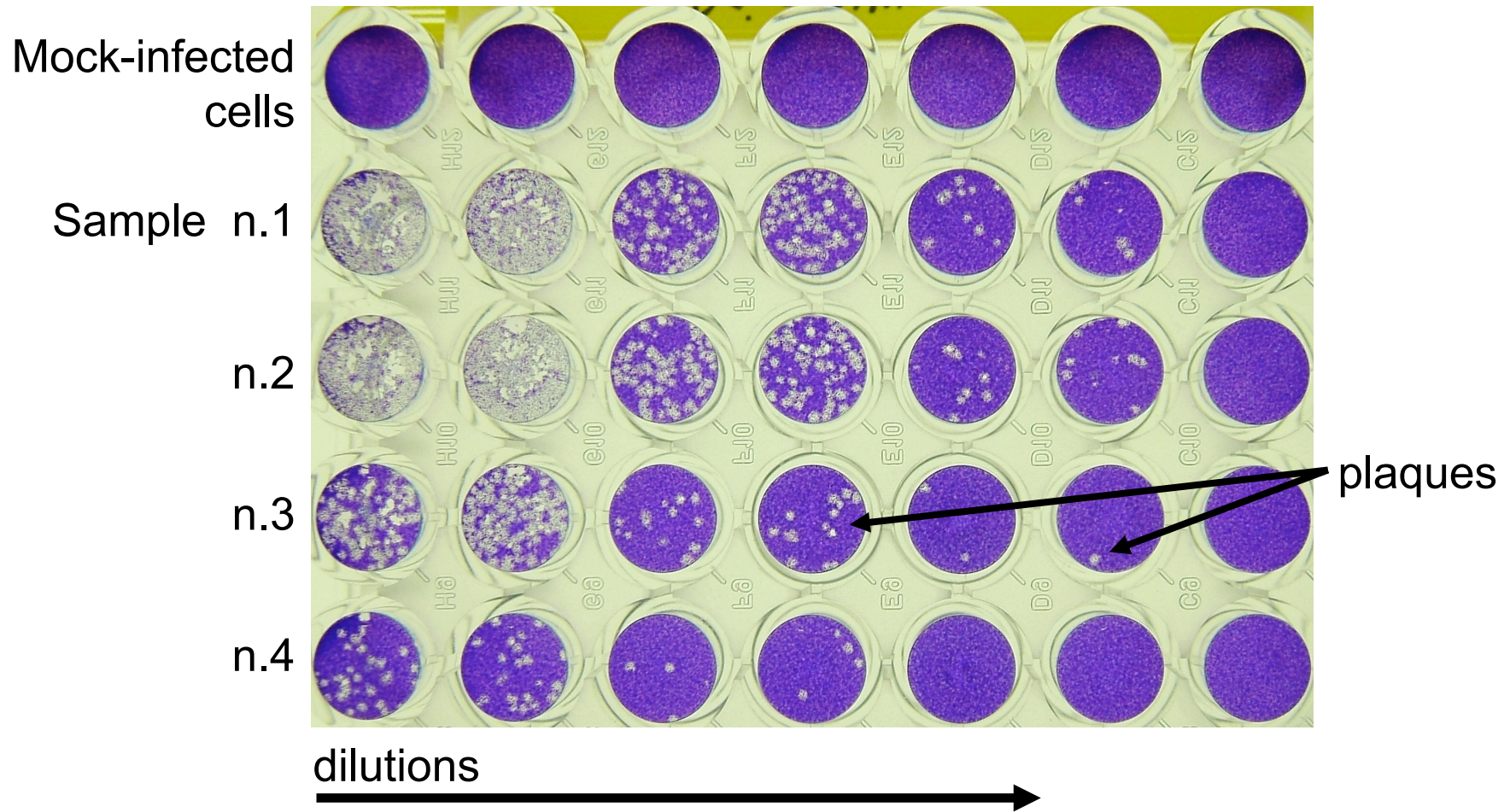


# An example of Plaque Assay



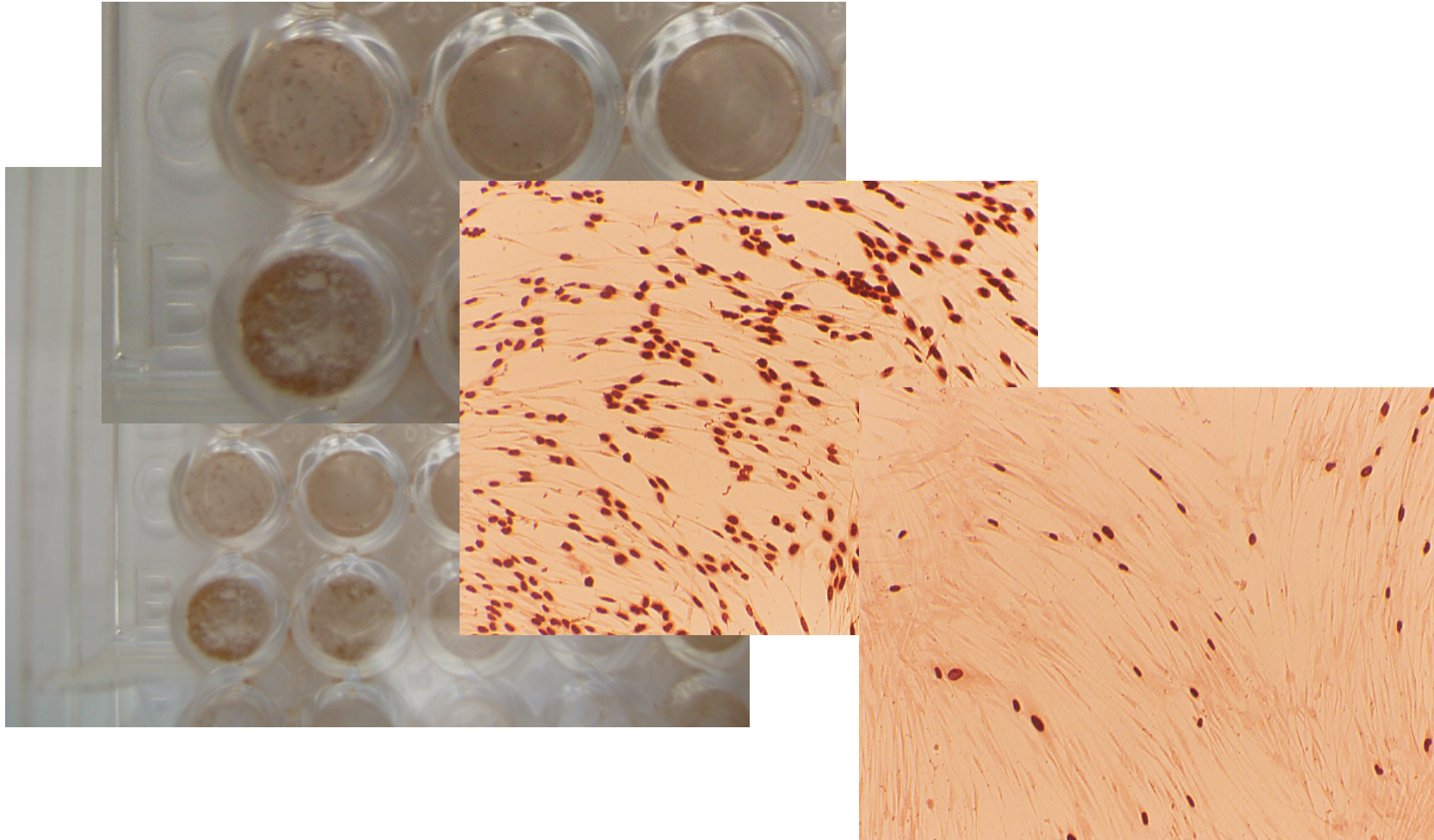


An example of Plaque Assay: MCMV

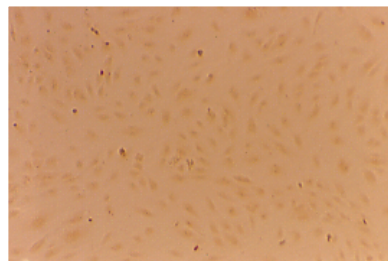


An example of Plaque Assay: HSV1

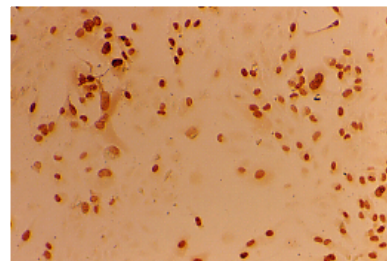
Titration of HCMV infectivity by quantitative IE  
proteins IPA staining (48 hpi):  
an example of immunoreactive focus assay



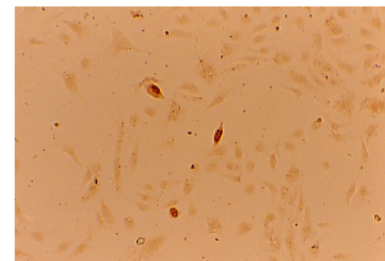
Immunoperoxidase staining of HCMV IE proteins at  
48 hpi in infected-HUVEC:  
as a quantitative assessment of the extent of virus  
replication



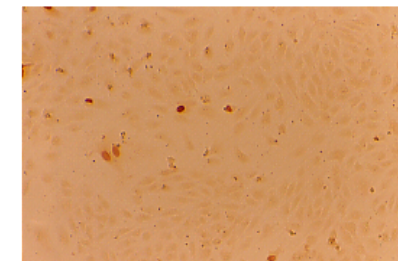
mock



VR1814

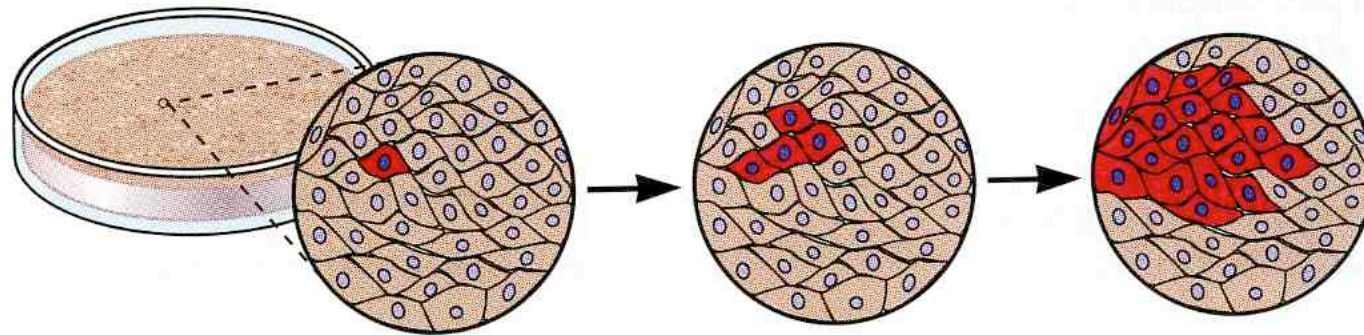


VR1814 +  
AS602868, 1 $\mu$ M



VR1814 +  
AS602868, 10 $\mu$ M

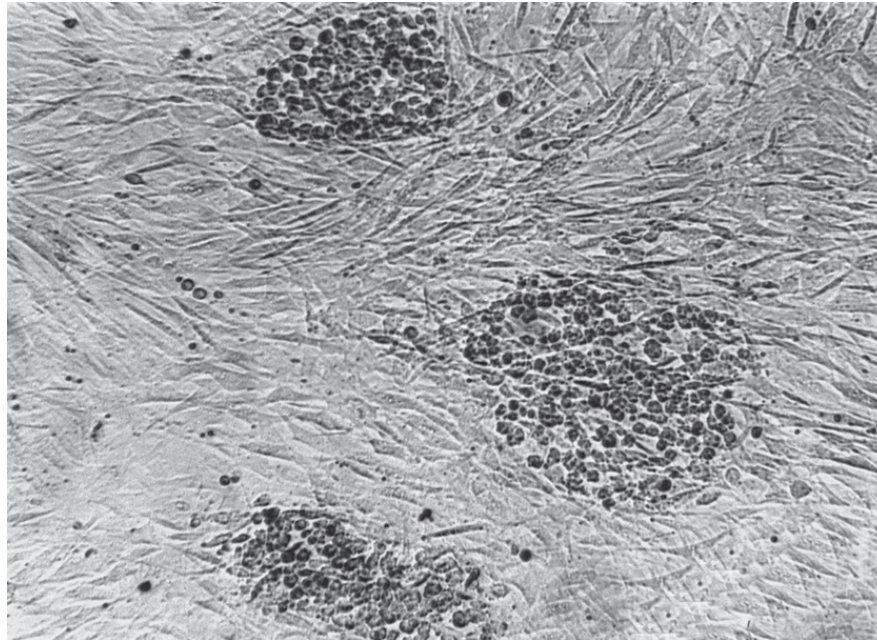
Infectious center assay:  
a quantitative assessment of the ability of virus to spread to  
an indicator culture



The **infectious center assay** allows one to determine the fraction of cells within a culture that are infected with virus. In this case, the infected cells are suspended, counted, and plated onto monolayers of susceptible cells (indicator cells), which are then overlaid with methylcellulose.

The number of plaques observed represents the number of infected cells in the original culture that harbored virus and infected the underlying indicator monolayer upon co-culture, thus allowing the quantitative evaluation of the **percentages of infected cells in the original culture able to spread virus** to the indicator culture.

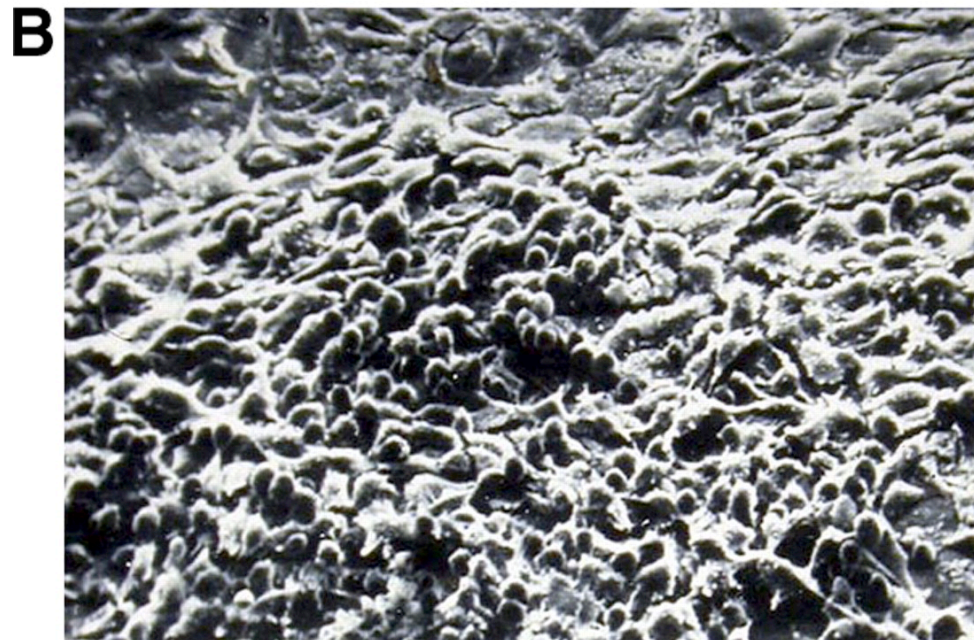
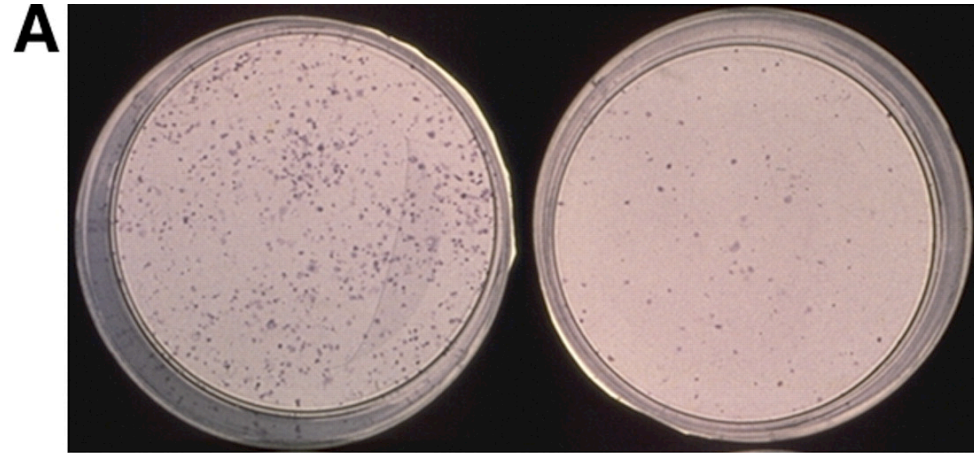
# Transformation Assay



CEFs transformed by RSV



**Cell transformation by RSV. (A) The RSV focus assay of transformed cells in a chick embryo fibroblast monolayer as described by Temin and Rubin (1958) showing a 1:100 and 1:1000 dilution of the virus stock.**



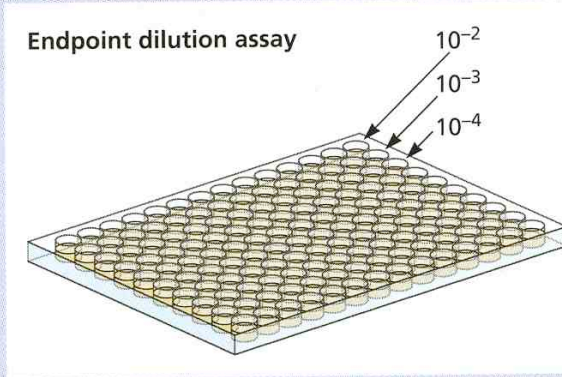
## Virus assay: **Endpoint Methods**

- How to quantitate viruses that cannot be adapted to either a plaque or a focus assay?
- The infectious dose 50 concept ( $ID_{50}$ )
- Tissue culture infective dose 50 ( $TCID_{50}$ )
- Egg infectious dose 50 ( $EID_{50}$ )
- Lethal dose 50 ( $LD_{50}$ )

## BOX 2.6

### METHODS

#### End-point dilution assays



Virus dilution	Cytopathic effect									
10 <sup>-2</sup>	+	+	+	+	+	+	+	+	+	+
10 <sup>-3</sup>	+	+	+	+	+	+	+	+	+	+
10 <sup>-4</sup>	+	+	-	+	+	+	+	+	+	+
10 <sup>-5</sup>	-	+	+	-	+	-	-	+	-	+
10 <sup>-6</sup>	-	-	-	-	-	-	+	-	-	-
10 <sup>-7</sup>	-	-	-	-	-	-	-	-	-	-

End-point dilution assays are usually carried out in multiwell plastic plates (see the figure). In the example shown in the first table, 10 monolayer cell cultures were infected with each virus dilution. After the incubation period, plates that displayed cytopathic effect were scored +. Fifty percent of the cell cultures displayed cytopathic effect at the 10<sup>-5</sup> dilution, and therefore the virus stock contains 10<sup>5</sup> TCID<sub>50</sub> units.

In most cases, the 50% end point does not fall on a dilution tested as shown in the example; for this reason, various statistical procedures have been developed to calculate the end point of the titration. In one popular method, the dilution containing the ID<sub>50</sub> is identified by interpolation between the dilutions on either side of this value. The assumption is made that the location of the 50% end point varies linearly with the log of the dilution. Because the number of test units used at each dilution is usually small, the accuracy of this method

is relatively low. For example, if six test units are used at each 10-fold dilution, differences in virus titer of only 50-fold or more can be detected reliably. The method is illustrated in the second example, in which the lethality of poliovirus in mice is the end point. Eight mice were inoculated per dilution. In the method of Reed and Muench, the results are pooled, as shown in the table, which equalizes chance variations (another way to achieve the same result would be to utilize greater numbers of

animals at each dilution). The interpolated value of the 50% end point, which in this case falls between the 5th and 6th dilutions, is calculated to be 10<sup>-6.5</sup>. The virus sample therefore contains 10<sup>6.5</sup> LD<sub>50</sub>s. The LD<sub>50</sub> may also be calculated as the concentration of the stock virus in PFU per milliliter (1 × 10<sup>9</sup>) times the 50% end-point titer. In the example shown, the LD<sub>50</sub> is 3 × 10<sup>2</sup> PFU.

Reed LJ, Muench H. 1938. A simple method of estimating fifty per cent endpoints. *Am J Hyg* 27:493-497.

Dilution	Alive	Dead	Total alive	Total dead	Mortality ratio	Mortality (%)
10 <sup>-2</sup>	0	8	0	40	0/40	100
10 <sup>-3</sup>	0	8	0	32	0/32	100
10 <sup>-4</sup>	1	7	1	24	1/25	96
10 <sup>-5</sup>	0	8	1	17	1/18	94
10 <sup>-6</sup>	2	6	3	9	3/12	75
10 <sup>-7</sup>	5	3	8	3	8/11	27

## Endpoint Method: Data for ID<sub>50</sub>

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Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
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-4

-5

-6

-7

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## Endpoint Method: Data for ID<sub>50</sub>

Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
-4	10/10				
-5	7/10				
-6	4/10				
-7	0/10				

## Endpoint Method: Data for ID<sub>50</sub>

Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
-4	10/10	21			
-5	7/10	11			
-6	4/10	4			
-7	0/10	0			

## Endpoint Method: Data for ID<sub>50</sub>

Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
-4	10/10	21	0		
-5	7/10	11	3		
-6	4/10	4	9		
-7	0/10	0	19		

## Endpoint Method: Data for ID<sub>50</sub>

Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
-4	10/10	21	0	21/21	
-5	7/10	11	3	11/14	
-6	4/10	4	9	4/13	
-7	0/10	0	19	0/19	



## Endpoint Method: Data for ID<sub>50</sub>

Logs of virus dilution	Infected test units	Cumulative infected (A)	Cumulative uninfected (B)	Ratio of A/(A+B)	Percent infected
-4	10/10	21	0	21/21	100
-5	7/10	11	3	11/14	78.5
-6	4/10	4	9	4/13	30.7
-7	0/10	0	19	0/19	0.00

## Endpoint Method: calculation of TCID<sub>50</sub>

$$\text{I} = h \frac{(\% \text{ positive above } 50\%) - 50\%}{(\% \text{ positive above } 50\%) - (\% \text{ positive below } 50\%)}$$

h = dilution factor (10)

$$\text{I} = (78.5\% - 50\%) / (78.5\% - 30.7\%) = 0.8$$

$$50\% \text{ endpoint titer} = 10^{[\log \text{ dilution} > 50\% - (\text{I} \times \log h)]}$$

$$\text{ID}_{50} = 10^{-5 - (0.8 \times 1.0)} = 10^{-5.8}$$

# Particles vs. Infectious Particles (particle to-PFU-ratio)

- ✓ # of physical particles : # of infectious particles
- ✓ A single particle *can* initiate infection
- ✓ Not all viruses are successful:
  - Damaged particles
  - Mutations
  - Complexity of infectious study
- ✓ Complicates study

# Particles vs. Infectious Particles

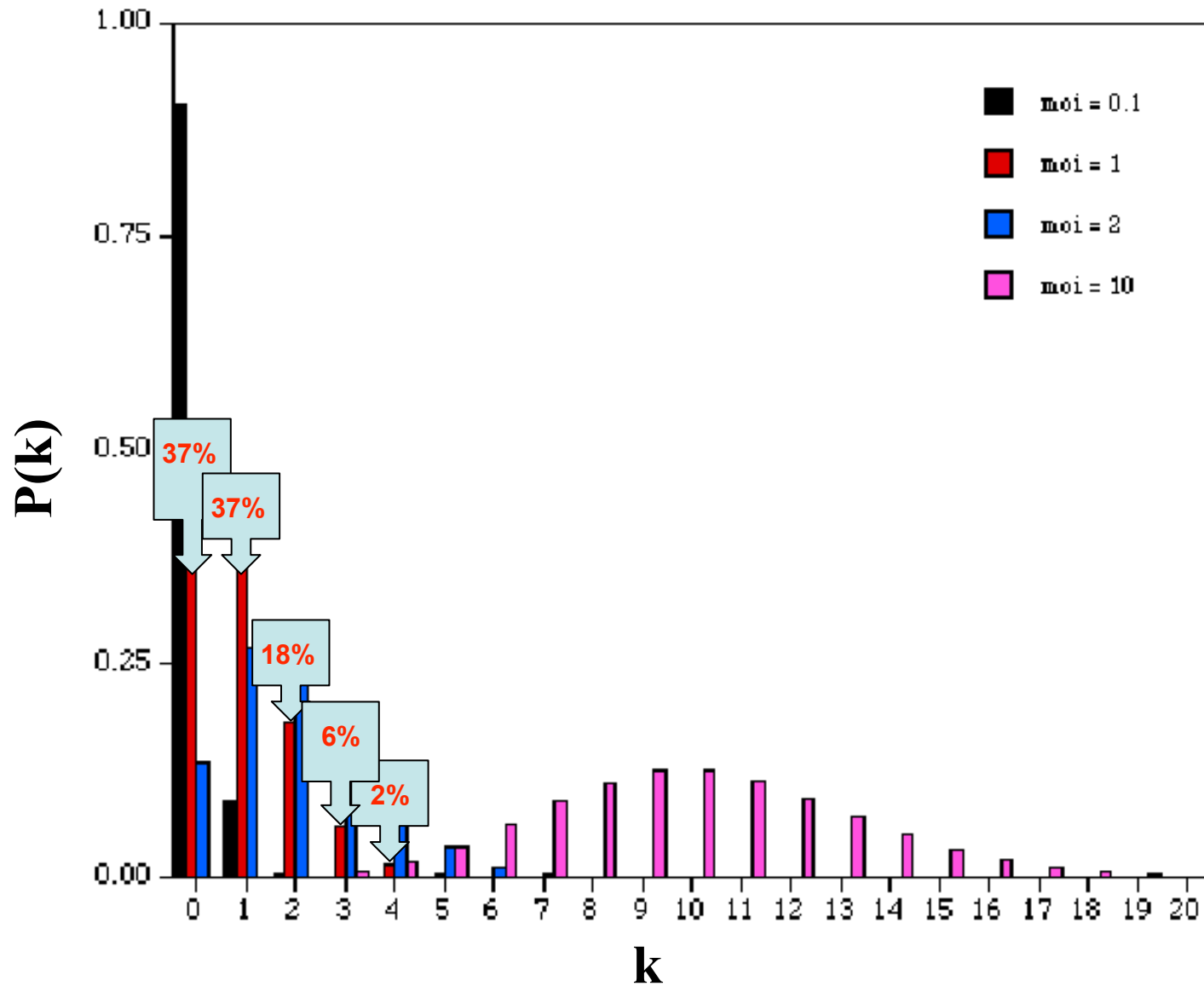
**Table 2.2** Particle-to-PFU ratios of some animal viruses

<b>Virus</b>	<b>Particle/PFU ratio</b>
<i>Adenoviridae</i>	20–100
<i>Alphaviridae</i>	
Semliki Forest virus	1–2
<i>Herpesviridae</i>	
Herpes simplex virus	50–200
<i>Orthomyxoviridae</i>	
Influenza virus	20–50
<i>Papillomaviridae</i>	
Papillomavirus	10,000
<i>Picornaviridae</i>	
Poliovirus	30–1,000
<i>Polyomaviridae</i>	
Polyomavirus	38–50
Simian virus 40	100–200
<i>Poxviridae</i>	1–100
<i>Reoviridae</i>	
Reovirus	10

## The Multiplicity of Infection (MOI)

- ✓ Number of infectious particles **ADDED** per cell
- ✓ Not the number of infectious particles each cell receives
- ✓ Adding  $10^7$  virus particles to  $10^6$  cells – MOI of 10 –each cell does **NOT** receive 10 virions
- ✓ Infection depends on the random collision of virions and cells
- ✓ When susceptible cells are mixed with virus, some cells are uninfected, some receive one, two, three or more particles
- ✓ The distribution of virus particles per cell is best described by the *Poisson distribution*

# The Poisson distribution: values of $P(k)$ for various values of MOI and $k$



## The Multiplicity of Infection (MOI)

➤  $P(k) = m^k e^{-m}/k$

- **m** = multiplicity of infection (MOI);
- **K** = number of virus infecting a cell;
- **P(k)** = fraction of cells infected by **k** virus
- **m** is calculated from the proportion of uninfected cells  $P(0)$
- If **k** is made 0 then,  $P(0) = e^{-m}$  and **m** =  $-\ln P(0)$

MOI (m)	1	3	5	10
% uninfected cells	0.37	0.05	0.01	0.00

## The Multiplicity of Infection (MOI)

Examples:

**If  $10^6$  cells are infected at MOI of 10:**

45 cells are uninfected

450 cells receive 1 particle

The rest receive  $> 1$  particle

**If  $10^6$  cells are infected at MOI of 1:**

37% of the cells are uninfected

37% of the cells receive 1 particle

26% receive  $> 1$  particle

**If  $10^6$  cells are infected at MOI of 0.001:**

99.9% of the cells are uninfected

0.099% of the cells receive 1 particle

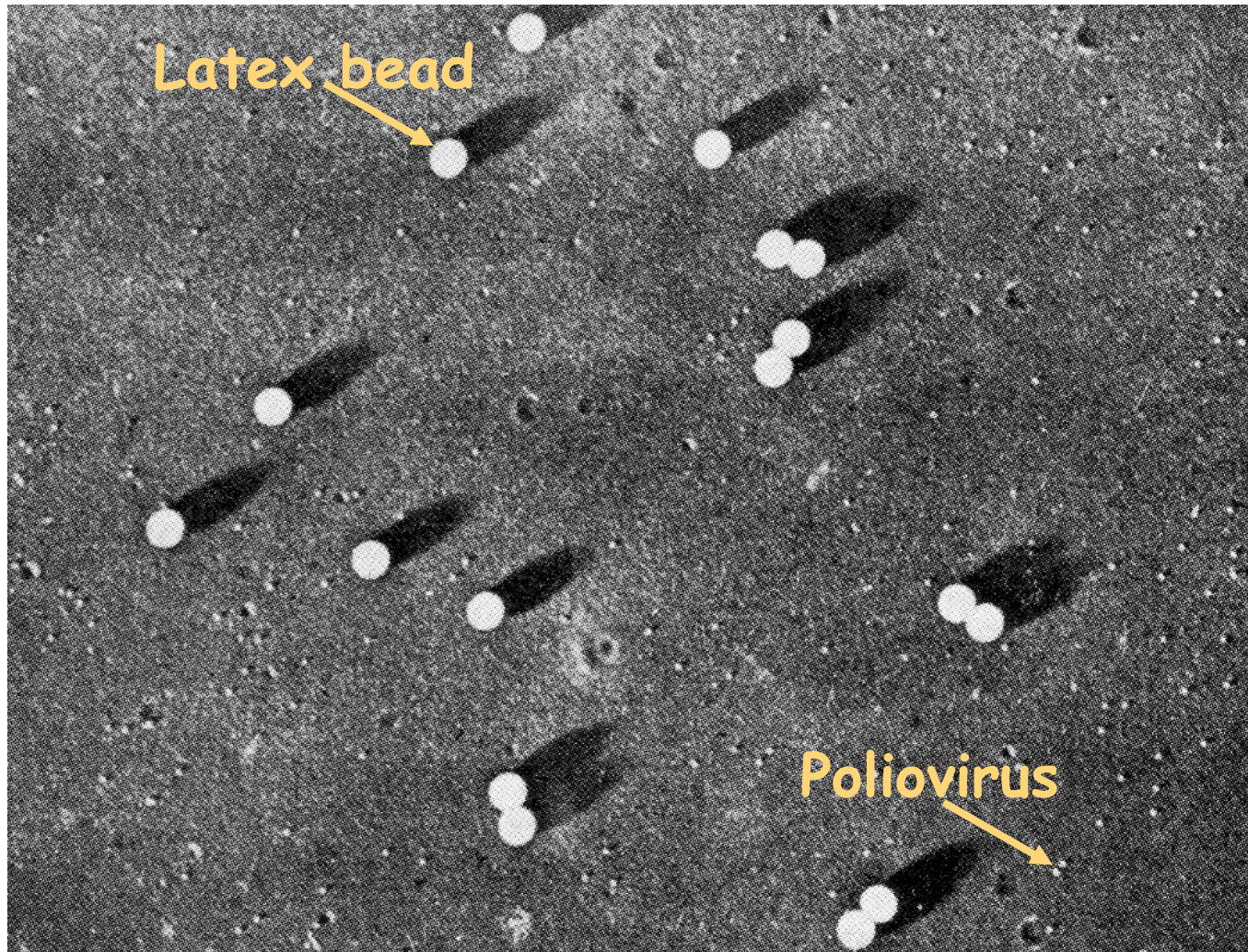
0.0001% receive  $> 1$  particle



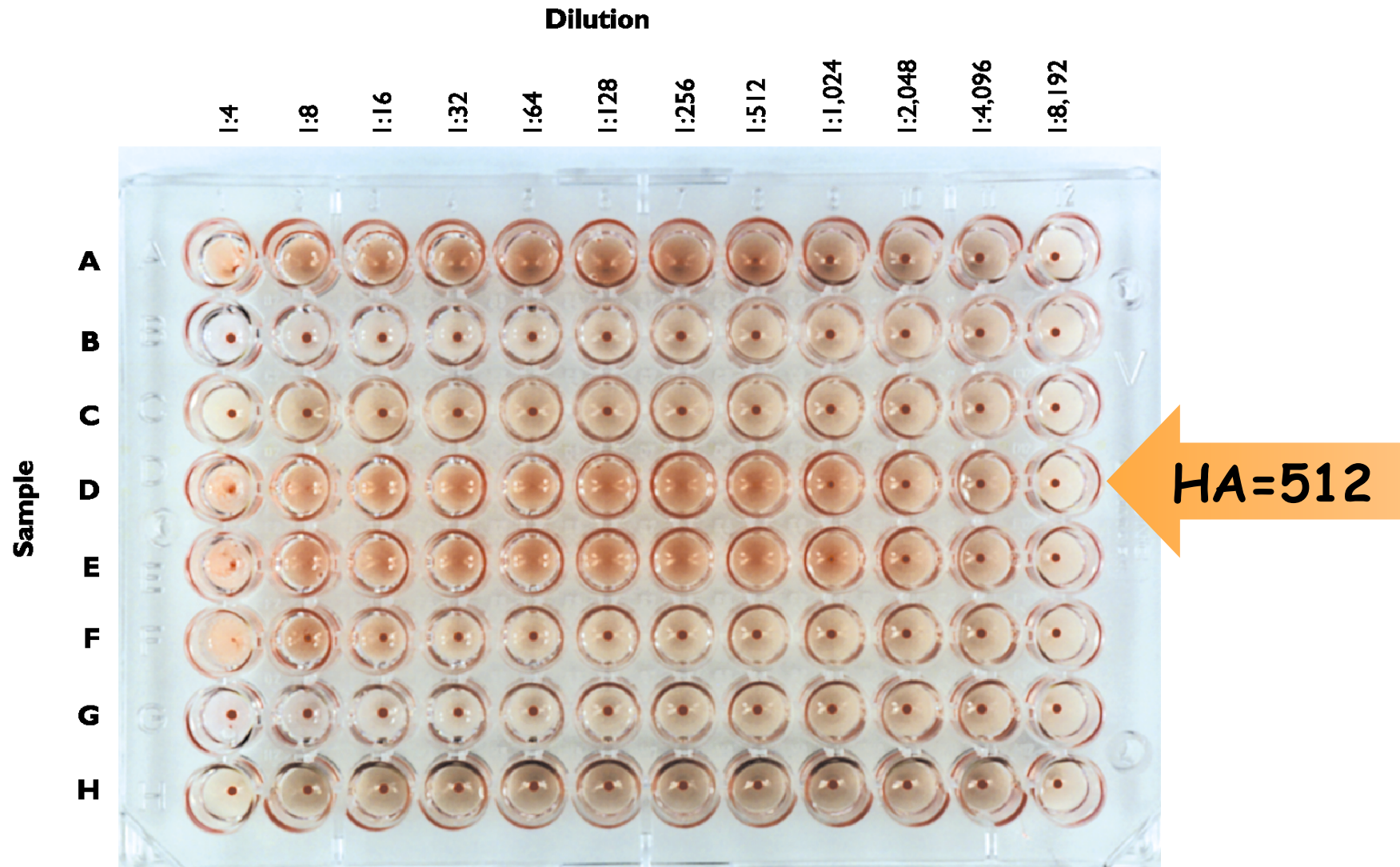
## Measurement of virus particles and their components

- E.M. particle counts
- Hemagglutination
- Viral enzyme activity
- Serological methods
- Nucleic Acid detection:
  - PCR
  - DNA microarrays
  - High-throughput sequencing

# Direct Particle count by EM



# Hemagglutination

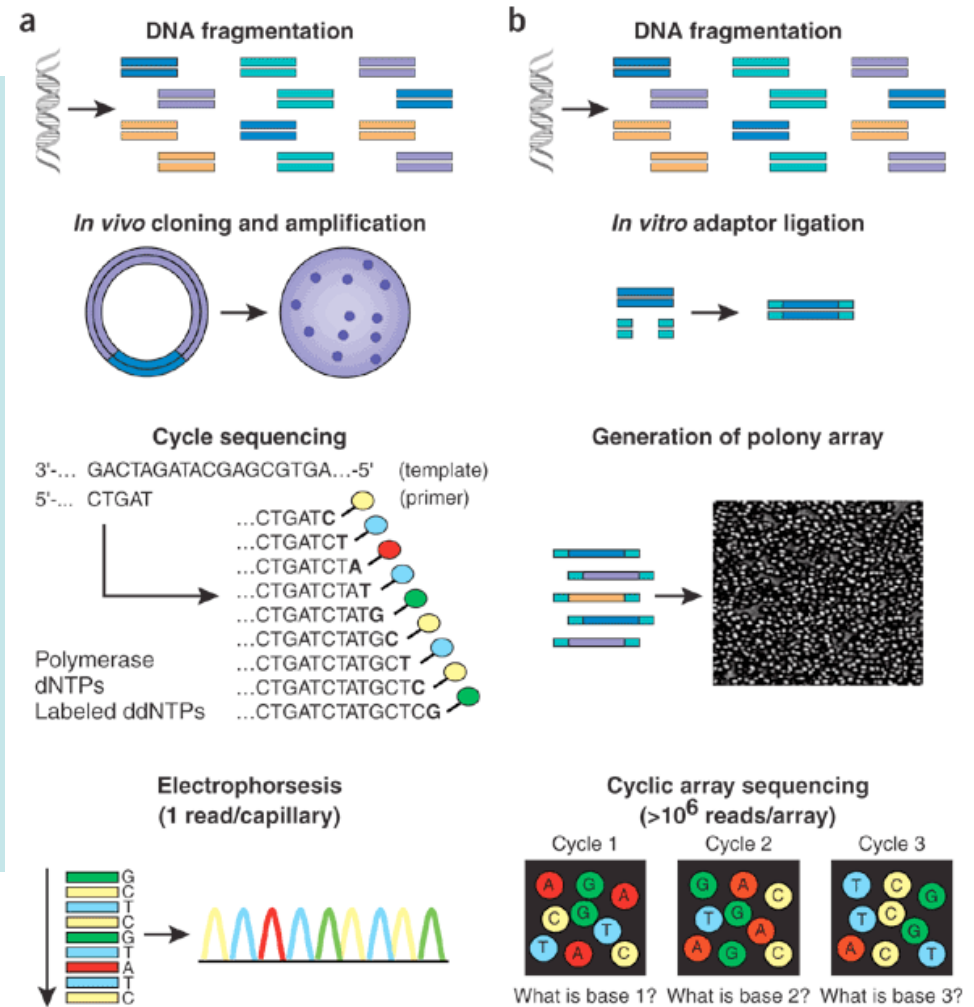


## Serological methods in Virology

- Virus neutralization
- Hemagglutination inhibition
- Complement fixation
- Immunostaining
- Immunoprecipitation and immunoblotting
- ELISA

# Deep, high-throughput sequencing (NGS)

- ✓ Metagenomics
- ✓ Identification of new viruses in environmental samples
- ✓ Identification of new pathogens
- ✓ Used to study the **virome**



Can techniques of genetic engineering facilitate the cultivation and assay of viruses?

# Genetically engineered cell lines to render them:

- more suitable hosts for viral replication
- more convenient substrates for rapidly detecting virus-infected cells

# Genetically modified cells in Virology

- to modify susceptibility and permissivity
  - expression of virus receptors
- to support replication of mutant viruses
- to increase lifespan of primary or diploid cell lines
  - hTERT immortalization
- to facilitate virus detection
  - indicator cell lines

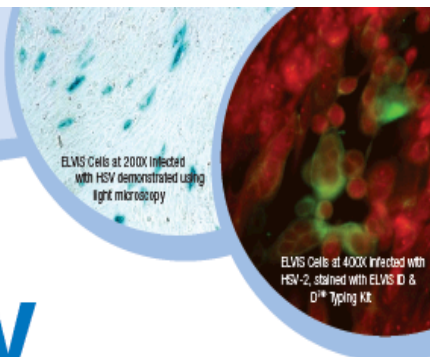


# Genetically engineered cell lines to detect Herpesviruses

- to perform simple, rapid, sensitive and specific assay for virus detection in clinical specimens
- to perform rapid antiviral drug susceptibility testing

# Genetically engineered cell lines that facilitate Herpesvirus detection: critical issues?

- the viral promoter
- the cell type
- the reporter gene



# ELVIS<sup>®</sup> HSV

## Sensitivity of a Ten-Day Cell Culture in Less Than One Day

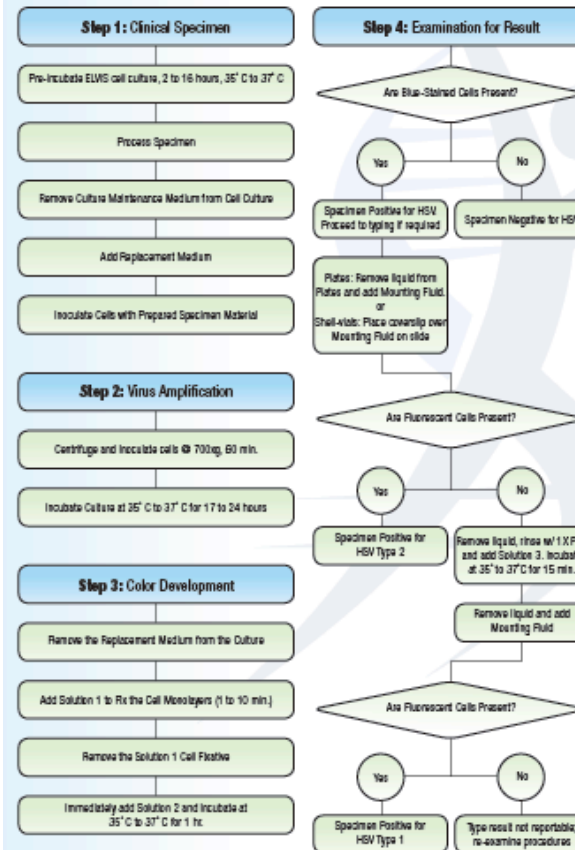
- Overnight HSV detection system for culture confirmation of positive OR negative HSV-1 and HSV-2 infections.
- No fluorescence required for non-typing assay.
- Typing can be done in a single vial through sequential staining applications.
- Uses patented engineered BHK cells which produce a detectable enzyme when infected and ONLY when infected with Herpes simplex.

**For Rapid Identification and Typing of Herpes Simplex Virus — 17-hour turnaround time for reporting both positive and negative results for HSV**



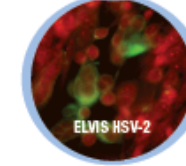
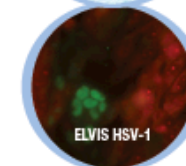
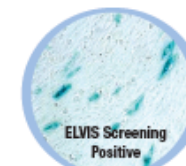
# ELVIS<sup>®</sup> HSV

## Flowchart of ELVIS Procedure



## ELVIS Product Codes

Catalog Code	Description
66-2406	24 Well Plate/6 fill
66-2412	24 Well Plate/12 fill
66-2418	24 Well Plate/18 fill
66-2424	24 Well Plate/24 fill
65-0101	1 Vial
65-0102	1 Shell Vial with Coverslip
SK-ELVIS-100	ELVIS ID Staining Kit (100)
SK-ELVIS-200	ELVIS ID Staining Kit (200)
SK-ELVIS-500	ELVIS ID Staining Kit (500)
SK-ELVIS-1000	ELVIS ID Staining Kit (1000)
SKT-ELVIS-60.V2	ELVIS ID & D* Typing / Staining Kit (60)
SKT-ELVIS-300.V2	ELVIS ID & D* Typing / Staining Kit (300)
10-220100	ELVIS Replacement Medium (100-mL)
10-220600	ELVIS Replacement Medium (500-mL)

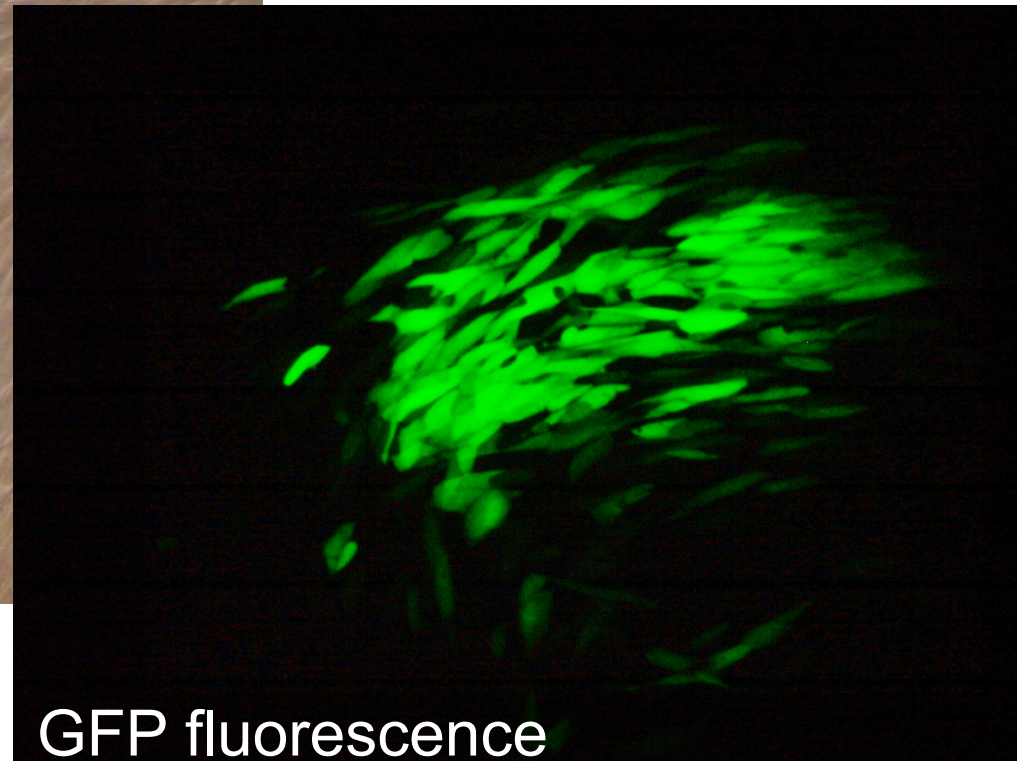
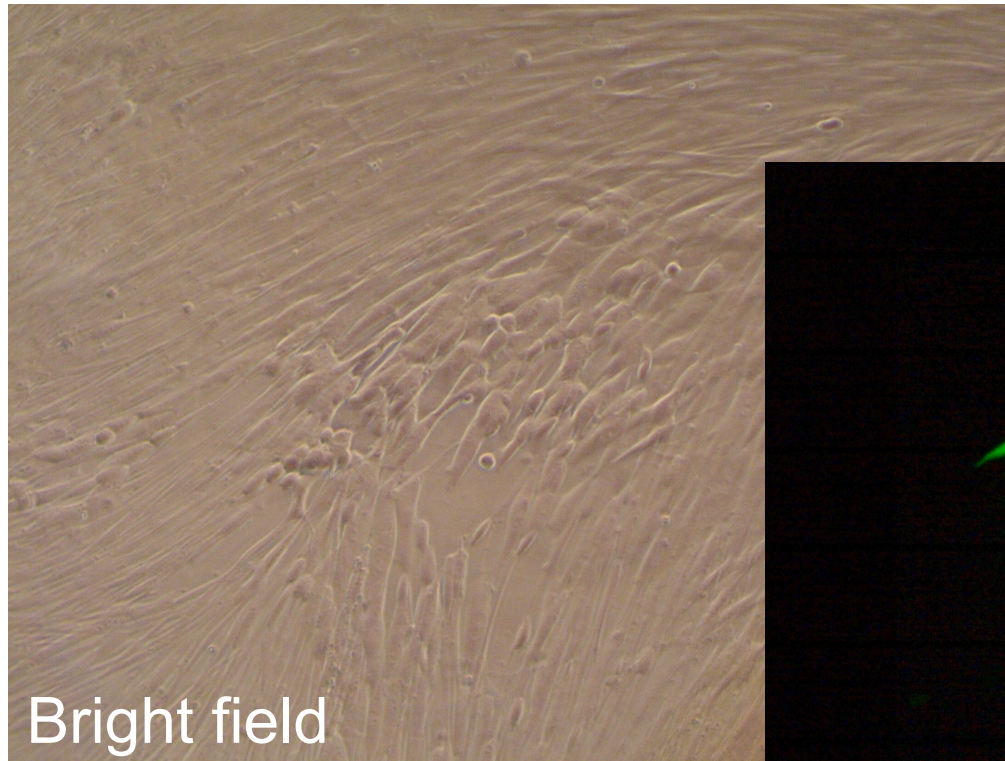


# Genetically modified viruses

## Aims?

- to characterize the functions of viral genes
- to facilitate virus detection
  - indicator virus strains

Plaque produced on HELFs by infection with  
a HCMV-GFP virus

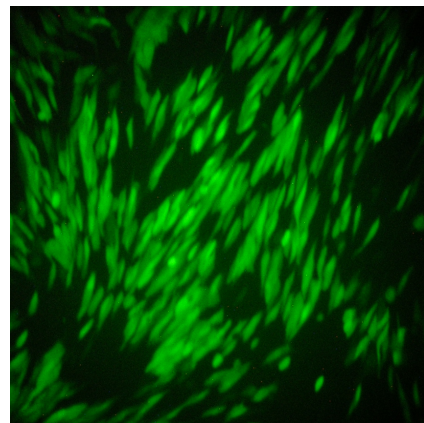


# GFP-based HCMV assays

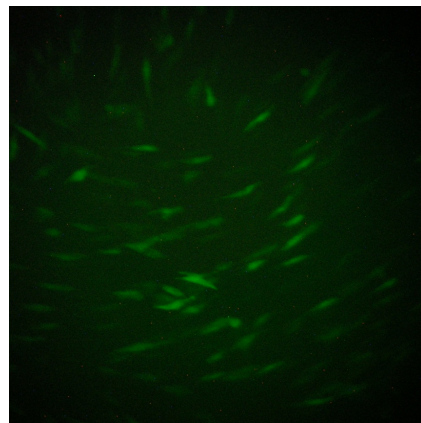
## Readout of GFP signals:

- GFP fluorescence microscopy
- Flow cytometry
- Automated fluorometry

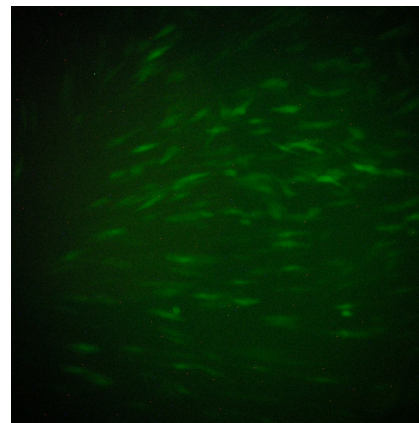
# HCMV-GFP as a tool for antiviral screening assays



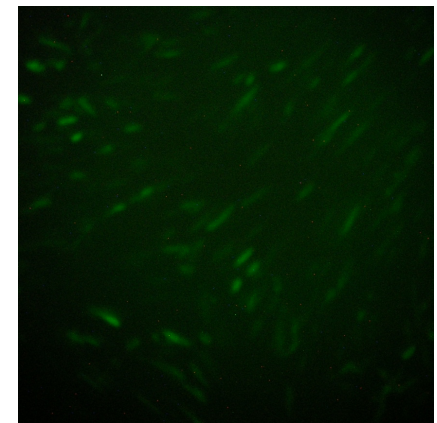
RCMV288



+GCV



+PFA



+AS602868

## GFP-based antiviral assays: **advantages**

- Faster than Plaque Reduction Assay (PRA)
- Easier to perform than PRA
- Reliable as PRA
- Adaptable for both screening (HTS) and confirmation tests



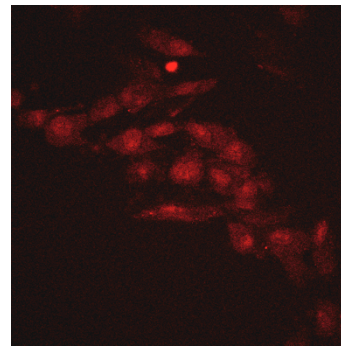
# CpG ODNs do not interfere with HCMV attachment

(Luganini et al., AAC 2008)

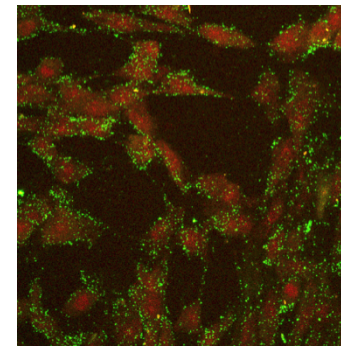


**HCMV TB40 UL32-EGFP**

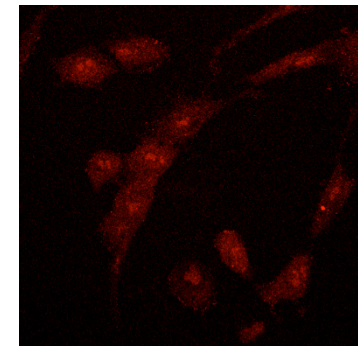
(Laib Sampaio et al., J. Virol. 2005)



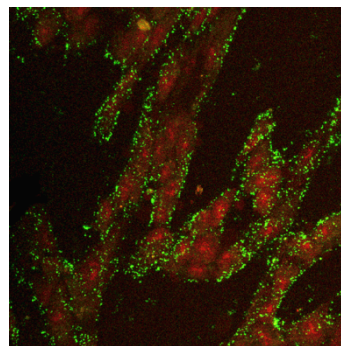
**Mock-infection**



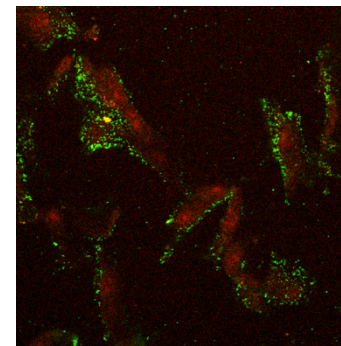
**Control infection**



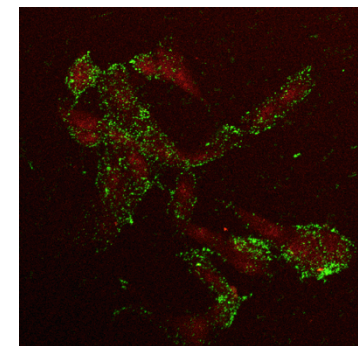
**Heparin**



**CpG 2006**



**ODN 2137**



**CpG 2007**