

# Assessing donor Anellovirus transmission and persistence in pediatric kidney transplant recipients.

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## Background

- ❖ Balancing rejection, infection, PTLD prevention and drug toxicity remains difficult in pediatric kidney transplantation.
- ❖ Plasma drug levels only fail to reflect individual immune status
- ❖ Better tools are required to assess individual immune function.
- ❖ *Alphatorquevirus* (TTV) is a marker of immune activity in kidney transplant recipients
- ❖ High TTV loads indicate reduced immune activity

## Primary objective

To assess changes of the anellome in children post-transplantation,

## Hypothesis

1. That anelloviruses will be introduced with the donor kidney
2. That donor anelloviruses colonize and persist in the recipient.

## Methods

N = 6 living-unrelated donor-recipient pairs.

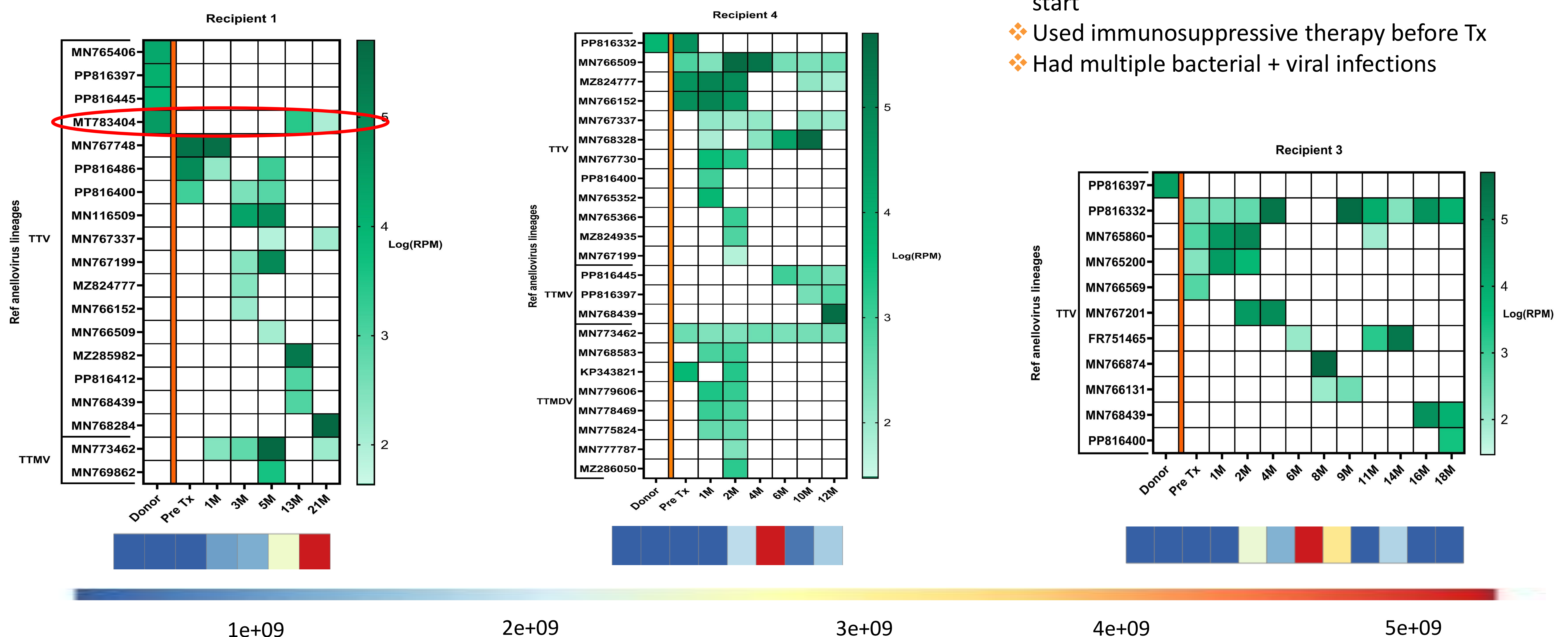
Recipients → 2 years post transplantation,  
Donors → just before donation.

- ❖ **Samples source:** DNA from serum or plasma
- ❖ **Amplification:** qPCR and rolling circle amplification [1]
- ❖ **Library preparation:** Illumina protocol [1]
- ❖ **Sequencing:** Performed on Illumina platforms
- ❖ **Data Analysis:** SCANellome V2 to study the anellome [2]

## Results

- ❖ 3 out of 6 donors positive for anelloviruses
- ❖ Comparison of composition and development of anellome in recipients.
- ❖ Recipient 3 and 4 → no detectable donor lineages

- ❖ Recipient 1 → one of 15 lineages identical to a donor lineage
- ❖ High anelloviral DNA ( $>10^{10}$  copies/mL) from start
- ❖ Used immunosuppressive therapy before Tx
- ❖ Had multiple bacterial + viral infections



**Figure 1:** Heatmap of the anelloviruses lineages in reads per million (RPM). qPCR determined TTV-loads per sample in copies/mL are shown in the multicolored heatmap below the anellome heatmap.

## Conclusion and discussion

- ❖ **Recipient 1:** presumable donor derived lineage, suggesting a more impaired immunity.
- ❖ **All recipients:** multiple lineages visible, including new lineages → unclear if it is donor or recipient derived.
- ❖ **More donor/recipient pairs, including living-related pairs, will be screened to explore these findings.**
- ❖ **Follow-up of TTV loads after kidney transplantation shall give more insight on the balance between immunosuppression and individual immunity.**

## References

1. Kaczorowska J, Deijls M, Klein M, Bakker M, Jebbink MF, Sparreboom M, Kinsella CM, Timmerman AL, van der Hoek L. Diversity and Long-Term Dynamics of Human Blood Anelloviruses. *J Virol*. 2022 Jun 8;96(11):e0010922. doi: 10.1128/jvi.00109-22. Epub 2022 May 16. PMID: 35575554; PMCID: PMC9175625.
2. Laubscher F, Kaiser L, Cordey S. SCANellome V2: Update of the Primate Anellovirus Reference Sequences Database. *Viruses*. 2024 Aug 23;16(9):1349. doi: 10.3390/v16091349. PMID: 39339826; PMCID: PMC11435895.