

HIV Subtypes, Strains and Recombinant Forms

Human Immunodeficiency Virus (HIV) is a **retrovirus** that targets and destroys the **CD4+ T-helper cells**, leading to **progressive immune suppression**. If untreated, HIV infection progresses to **Acquired Immunodeficiency Syndrome (AIDS)**.

Transmission of HIV

HIV is primarily transmitted through:

- **Sexual contact** (most common route globally)
- **Mother-to-child transmission (MTCT)** :
 - During **pregnancy**, **delivery**, or **breastfeeding**
- **Parenteral exposure** :
 - Sharing contaminated **needles or syringes**
 - **Transfusion** of infected blood products
 - Accidental **needlestick injuries** (healthcare settings)

Note: HIV is **not transmitted** via casual contact, insect bites, or respiratory droplets.

Classification of HIV

There are **two major types** of HIV:

1. HIV-1

- **Most prevalent** worldwide
- Origin: **Chimpanzees** (Pan troglodytes troglodytes)
- Associated with **faster disease progression**
- Highly transmissible

2. HIV-2

- **Primarily found in West Africa**
- Origin: **Sooty mangabey monkeys**
- **Less transmissible**
- **Slower progression** to AIDS
- Lower plasma viral loads

Both HIV-1 and HIV-2 belong to the **Retroviridae** family, **Lentivirus** genus.

HIV-1 vs HIV-2: Key Differences

| Feature | HIV-1 | HIV-2 |
|-----------------------|----------------------|---------------------------------------|
| Global prevalence | High (worldwide) | Low (mostly West Africa) |
| Disease progression | Faster | Slower |
| Viral load | Higher | Lower |
| Transmission rate | Higher | Lower |
| Detection challenges | Most tests detect it | Some require specific kits |
| Kaposi's sarcoma risk | Common in AIDS | Rare |
| Dual infections | Possible with HIV-2 | Does not protect against HIV-1 |

Origin and Evolution of HIV

HIV-1 Origin

- Believed to have crossed species from **chimpanzees** to humans.
- The **Simian Immunodeficiency Virus (SIV)** in chimpanzees is genetically related to HIV-1.

HIV-2 Origin

- Originated from **sooty mangabey monkeys** .
- Transmitted to humans through hunting and consumption of bushmeat.

Genetic Groups and Subtypes of HIV-1

HIV-1 Groups

- **Group M (Major):** ~90% of global infections
- **Group O (Outlier):** 1–5%, mostly in West-Central Africa
- **Group N (Non-M, Non-O):** Rare, mostly in Cameroon
- **Group P:** Extremely rare, discovered in Cameroon

HIV-1 Group M Subtypes (Clades):

- At least **10 known subtypes** (A–K, skipping E and I)
- Subtypes differ in **geographic distribution** , **transmissibility** , and **response to treatment** .

| Subtype | Location |
|---------|--|
| A | East and Central Africa |
| B | Americas, Europe, Australia, Middle East |
| C | Sub-Saharan Africa, India, Brazil |
| D | Central and Eastern Africa |
| F | South America and Romania |
| G | West and Central Africa |
| H, J, K | Africa, Middle East |

Subtype B is the most common in the **United Kingdom, Europe, and the Americas** .

Circulating Recombinant Forms (CRFs)

- When a person is infected by **two or more subtypes** , viral recombination can occur.
- This leads to the formation of **CRFs – Circulating Recombinant Forms** .
- CRFs are prevalent in regions with high subtype diversity.
- Example: **CRF01_AE** , **CRF02_AG**

CRFs can complicate diagnostic testing and antiretroviral therapy due to genetic variability.

Subtypes of HIV-2

HIV-2 is classified into **eight subtypes** (Groups A–H):

- **Group A and B** :
 - Most **prevalent** and **clinically significant**
 - Associated with **pathogenic infections**
- Groups C–H:
 - **Rare**
 - Primarily detected in isolated cases

Clinical Implications

- **Diagnosis:** Many commercial kits are designed to detect **HIV-1** only; HIV-2 requires specific assays.
- **Treatment:** Some **antiretroviral agents** are **less effective** against HIV-2 (e.g., NNRTIs).
- **Epidemiology:** Understanding subtype and group is critical for public health tracking, vaccine design, and therapy.

High-Yield Points

HIV-1: More transmissible, faster progression, globally prevalent

HIV-2: Slower progression, confined mainly to West Africa

HIV is a **retrovirus** – uses **reverse transcriptase** to replicate
 CD4+ T-cell destruction ? immunodeficiency

Subtypes and CRFs impact transmission and treatment response

Group M, subtype B is dominant in the Western world

Always test for both HIV-1 and HIV-2 in endemic areas