

Chapter 2

HBV Genome and Life Cycle



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Abstract Chronic hepatitis B virus (HBV) infection remains to be a serious threat to public health and is associated with many liver diseases including chronic hepatitis B (CHB), liver cirrhosis, and hepatocellular carcinoma. Although nucleos(t)ide analogues (NA) and pegylated interferon- α (Peg-IFN α) have been confirmed to be efficient in inhibiting HBV replication, it is difficult to eradicate HBV and achieve the clinical cure of CHB. Therefore, long-term therapy has been recommended to CHB treatment under the current antiviral therapy. In this context, the new antiviral therapy targeting one or multiple critical steps of viral life cycle may be an alternative approach in future. In the last decade, the functional receptor [sodium-taurocholate cotransporting polypeptide (NTCP)] of HBV entry into hepatocytes has been discovered, and the immature nucleocapsids containing the non- or partially reverse-transcribed pregenomic RNA, the nucleocapsids containing double-strand linear DNA (dsLDNA), and the empty particles devoid of any HBV nucleic acid have been found to be released into circulation, which have supplemented the life cycle of HBV. The understanding of HBV life cycle may offer a new instruction for searching the potential antiviral targets, and the new viral markers used to monitor the efficacy of antiviral therapy for CHB patients in the future.

1 Introduction

Hepatitis B virus (HBV) belongs to *Hepadnaviridae* family and is the causative factor of chronic hepatitis B (CHB). Worldwide, 257 million people are chronically infected with HBV, and 887,000 people annually die of HBV infection-related end-stage liver disease, such as liver cirrhosis, liver failure, and liver cancer [1–3].

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Currently, there are two kinds of antiviral agents used for CHB treatment, including nucleos(t)ide analogues (NA) and pegylated interferon (Peg-IFN- α), and neither of them can directly target and efficiently clear the covalently closed circular DNA (cccDNA) which persists in the nuclei of the infected hepatocytes [4, 5]. Since cccDNA is the main cause that CHB is difficult to cure, the eradication of cccDNA is an ideal goal for the cure of CHB. Unfortunately, it is almost impossible via the currently available antiviral therapies. Alternatively, the functional cure, a state characterized with serum HBsAg loss, has been suggested. Since functional cure is also difficult to achieve, the long-term NA therapy has been recommended in almost all the guidelines for CHB management [6–9]. However, the long-term therapy may bring a series of problems, such as side effects, costs, and compliance.

Recent discoveries allow a better understanding of HBV life cycle and pave the way for identifying the multiple new therapeutic targets for CHB, as well as provide the new viral markers for guiding the clinical practice. Firstly, the HBV entry inhibitors are being developed after the discovery of NTCP as a major functional receptor of HBV infection [10–12]. Meanwhile, the approaches specifically targeting cccDNA are being explored in experimental models when the gene editing technologies discovered, such as the systems of zinc-finger nucleases, TAL effector nucleases, and CRISPR-associated (cas) nucleases [13–20]. Moreover, other antiviral agents for CHB treatment are being developed, such as the uses of RNA interference to inhibit HBV replication, capsid assembly modulators (CAMs) to inhibit pgRNA encapsidation and block HBV DNA synthesis, and immune modulatory therapies [21–29]. In the future, the combination of the current and the newly developed antiviral agents targeting the different steps of viral life cycle may be an alternative approach for achieving the eradication of HBV infection and the clinical cure of CHB. Besides, several serum viral markers, including hepatitis B core-related antigen (HBcrAg), HBV RNA, and dsDNA, are going to be the potential viral markers for monitoring the efficacy and prognosis of antiviral therapy for CHB patients [30–39].

2 HBV Genome

HBV has a genome of approximately 3.2 kb and partially double-stranded, relaxed circular DNA (rcDNA) which is composed of a complete coding minus strand (–) and an incomplete noncoding plus strand (+) with a fixed 5' end and a variable-size 3' end [40, 41]. As shown in Fig. 2.1, the relaxed circular configuration of HBV genome is maintained by the cohesive end regions containing two direct repeats (DRs) of 11 nucleotides (TTCACCTCTGC) termed DR1 (nt 1824–1834) and DR2 (nt 1590–1600) [42]. Both DR1 and DR2 play the important roles in viral replication, and the integration of HBV DNA sequences into host cell genome [43]. The coding minus strand contains four overlapping open reading frames (ORFs) (preC/C, P, preS/S, and X), four promoters [core promoter (CP, 1613–1849) consists of the upper regulatory region (URR, nt1613–1742) and the basic core promoter

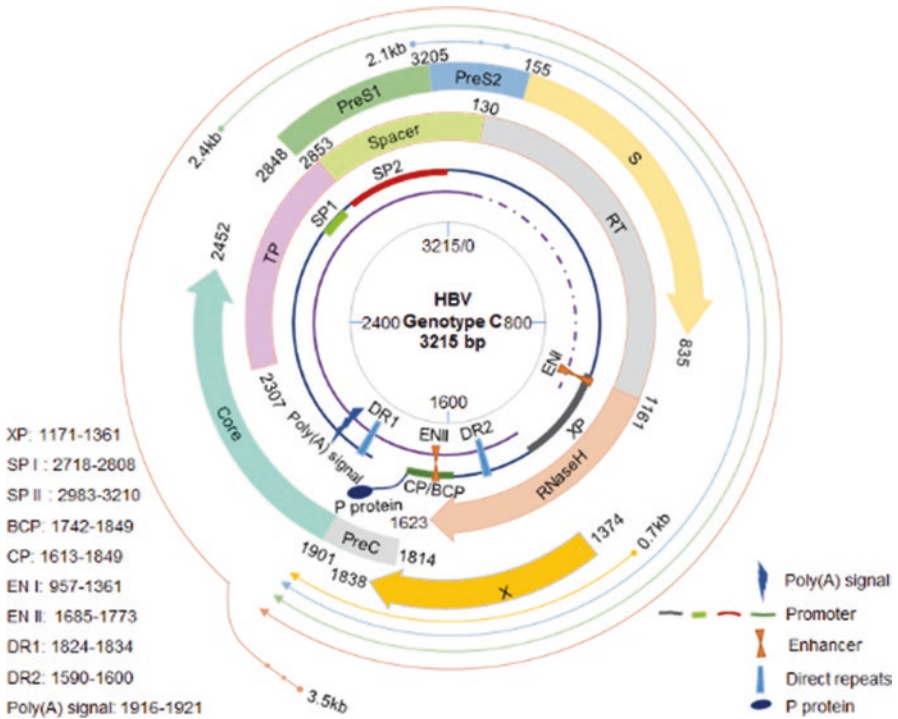


Fig. 2.1 The circular diagram of HBV genome. The locations of ORFs and important regulatory elements refer to genotype C HBV genome [45, 46]. XP, X promoter; SP I, PreS1 promoter; SP II, PreS2 promoter; BCP, Basic core promoter; CP, Core promoter; EN I, Enhancer I; EN II, Enhancer II; DR1, Direct repeat 1; DR2, Direct repeat 2; Poly(A), Polyadenylation

(BCP, nt 1742-1849), PreS1 promoter (SP I, nt 2718-2808), PreS2 promoter (SP II, nt 2983-3210), and X promoter (XP, nt 1171-1361)], and two enhancers [Enhancer I (EN I, nt 957-1361) and Enhancer II (EN II, nt 1685-1773)], as well as polyadenylation [poly(A)] signal (nt 1916-1921) [44, 45]. Under the regulation of four promoters and two enhancers, the 3.5, 2.4, 2.1, and 0.7 kb polyadenylated HBV RNAs are generated, respectively [46, 47].

The preC/C ORF and P ORF overlap each other partially: the former encodes hepatitis B e antigen (HBeAg) and core protein, and the latter is responsible for the synthesis of HBV DNA polymerase (P protein). Core protein and P protein are translated from pregenomic RNA (pgRNA), while HBeAg is translated from pre-core mRNA. Both pgRNA and pre-core mRNA are transcriptionally regulated by CP in which the URR regulates the promoter activity and the BCP regulates the transcriptions of both pgRNA and pre-core mRNA [48, 49]. Core protein self-assembles to form the viral capsid and binds with cccDNA to participate in its epigenetic modifications [50], while P protein consists of four pivotal domains including terminal protein (TP) domain, spacer region, reverse transcriptase (RT) domain, and

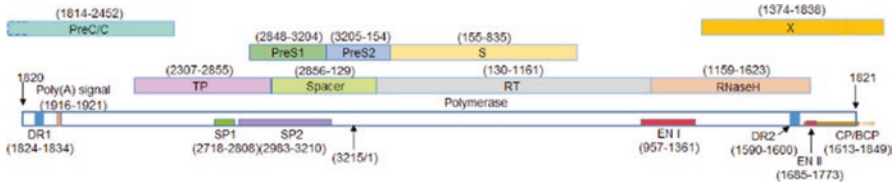


Fig. 2.2 The linear diagram of HBV genome

RNase H domain, which is anchored on the 5' terminus of the minus-strand DNA and has many functions in the viral life cycle, such as viral RNA binding, pgRNA encapsidation, protein priming, reverse transcriptase activity, DNA polymerase activity, and RNase H activity [51–54]. The precursor of HBeAg undergoes proteolytic processing in the endoplasmic reticulum (ER) and generates the mature HBeAg [55]. Although HBeAg is not essential for the viral replication and infection, such a secretory protein has immune regulatory functions. For example, HBeAg can inhibit host innate immunity and mediate immune evasion by inducing T cell tolerance [56, 57]. The preS/S ORF is located within P ORF and uses three different in-frame AUG start codons to encode three envelope glycoproteins including large (L), middle (M), and small (S) surface antigens (HBsAg). L-HBsAg is translated from the 2.4 kb HBV RNA transcriptionally regulated by SP I, and the latter two envelope glycoproteins are translated from 2.1 kb HBV RNA transcriptionally regulated by SP II [58]. The X ORF encoding X protein (HBx) is the smallest ORF and overlaps with P ORF. HBx is translated from the 0.7 kb HBV RNA which is transcriptionally regulated by XP (Figs. 2.1 and 2.2).

In addition to the promoter elements, the expressions of these viral genes are also modulated by two enhancer elements, EN I and EN II. EN I is located between ORF S and X and is consisted of a 5' modulatory element, a central core domain with actual enhancer activity and a 3' domain that overlaps with X ORF [59, 60]. EN II is located at the upstream of CP and partially overlaps with BCP and URR, which comprises region IIA and IIB potent enhancer elements [47, 48]. Both EN I and EN II have the ability to upregulate the activities of the HBV promoters in an orientation-independent manner, in which EN I preferentially upregulates the activities of CP/BCP and XP but has a modest effect on the activities of SP I and SP II, while EN II preferentially upregulates the activities of the SP I, SP II, and XP [48, 49, 61, 62].

3 Viral Entry

HBV is highly species-specific and hepatotropic. This species specificity is partly dependent on the expression pattern of HBV entry receptors. As shown in Fig. 2.3, HBV has been identified to firstly attach to heparan sulfate proteoglycans (HSPGs) on hepatocyte membrane with low affinity, which is mediated by the antigenic loop (AGL) present in the S domain of all HBsAg [63]. Subsequently, PreS1 region of

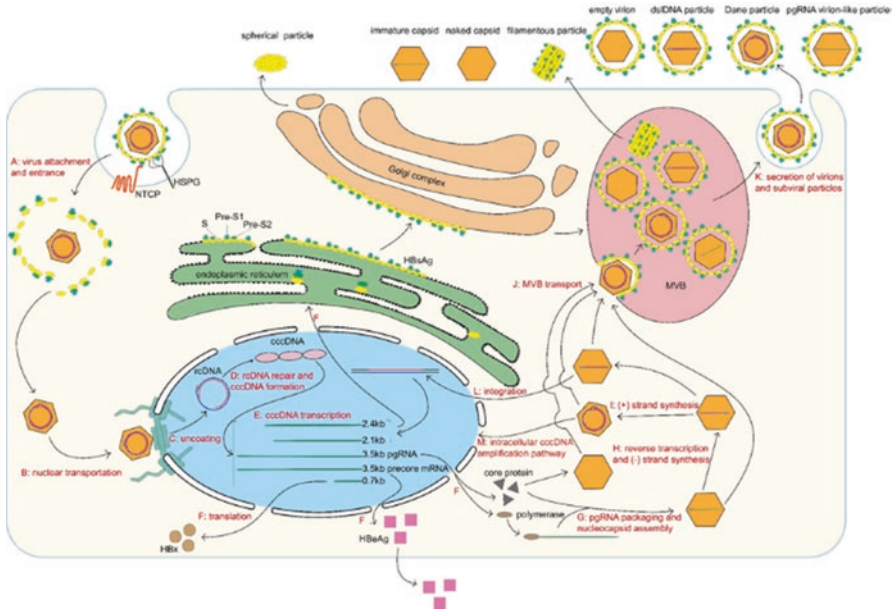


Fig. 2.3 HBV life cycle. (a): The entrance of HBV Dane particles into hepatocyte via the binding of L-HBsAg to NTCP and binding of S-HBsAg to HSPG on the membrane of hepatocyte. (b): The release of nucleocapsid and the transportation of nucleocapsid into nucleus where the uncoating takes place. (c): The release of rcDNA from the nucleocapsid into nucleus of hepatocyte. (d): The conversion of rcDNA to cccDNA which serves as the template for viral transcription. (e): The transcriptions of cccDNA to HBV RNAs. (f): The translations of HBV RNAs result in the productions of HBeAg, core protein, P protein, L-HBsAg, M-HBsAg, S-HBsAg, and HBx protein. (g): The binding of P protein to ϵ region of pgRNA and the recruitment of core proteins to assemble nucleocapsid. (h): The reverse transcription and the synthesis of HBV minus (-) strand DNA using pgRNA as the template. (i): The accurate translocation of P protein and the synthesis of HBV plus (+)-strand DNA. (j): The envelopment of the nucleocapsid via MVB transport pathway. (k): Secretion of virions and subviral particles. (l): Incorrect translocation of P protein resulting in formation of dsDNA and the integration of dsDNA into the host genome. (m): Nuclear translocation and uncoating of newly formed nucleocapsids to replenish cccDNA pool

L-HBsAg, predominantly the 2-48 N-terminal amino acids (aa), binds to NTCP on the basolateral membrane of hepatocytes with high affinity [64]. The myristoylation of the N-terminal PreS1 facilitates virus infection through enhancing the capability of receptor recognition [65–67]. NTCP composed of 349 aa is a conjugated bile acid transporter, and the aa 84-87 and 157-165 of NTCP are critical for viral entry into hepatocytes [10, 68]. Next, the viruses are internalized through endocytosis, including the caveolae- and clathrin-mediated endocytosis [69–71]. The subsequent endosomes are translocated by a common vesicle traffic pathway relying on cytoskeleton and are regulated by Rab, small guanosine triphosphatases of the Ras superfamily, to deliver the endosomes to different cellular compartments [72, 73].

During this process, the translocation of vesicle is accompanied by a pH decrease from about 6.2 in early endosomes to approximate 5.5 in late endosomes, resulting in the fusion of the viral envelope with the endosomal membrane to release nucleocapsids [74]. However, pH-independent entry and sequential endosomal sorting seems to be the major determinants in the infection of duck hepatitis B virus (DHBV) [75]. Besides, the cholesterol on viral membrane is required for the above endosomal escape of the virus into the cytosol [76]. The nucleocapsids are transported by motor proteins along microtubules toward the nucleus [77]. The nucleocapsids are directed to nucleus pore complex (NPC) by nuclear localization sequence (NLS) of core proteins and then are arrested at the nuclear basket by Nup153, a component of NPC [78, 79]. Finally, the nucleocapsids disassemble, followed by HBV rcDNA and some core proteins releasing into nucleus [80].

4 The Conversion of rcDNA to cccDNA

Once rcDNA enters the nucleus, it will go through a series of biochemical steps to be converted to covalently closed circular DNA (cccDNA), which is the crucial intermediate that serves as the template of HBV replication during HBV life cycle (Fig. 2.3) [81]. Many host factors, such as DNA repair devices, participate in the conversion of rcDNA to cccDNA [82, 83]. Firstly, P protein anchored on the 5' terminus of the minus-strand HBV DNA may be removed by human tyrosyl DNA phosphodiesterase-2 (TDP2) which is a host repair enzyme that can remove topoisomerase (TOP)-DNA covalent complexes [84–87]. Except for TDP2, this deprotonization reaction may also be achieved by an endonucleases-mediated nucleolytic pathway [87]. Meanwhile, a capped and 18 nucleotide-long RNA oligomer at the 5' end of plus-strand DNA and the 9 or 10 nucleotide-long terminally redundant segment (r sequence) at the 5' end of minus-strand DNA are removed by flap structure-specific endonuclease 1 (FEN1) which specifically cleaves the 5'-flap structure formed by RNA oligomer or r sequence [88–90]. However, other host factors other than FEN1 may also participate in removing the flap structure in rcDNA [90]. Next, the plus-strand DNA which is variable in length is extended not only by P protein but also host cellular polymerases, such as DNA polymerase κ (POLK) [88, 91, 92]. POLK is a key host cellular polymerase supporting HBV infection, while other host DNA polymerases, such as DNA polymerase L (POLL) and H (POLH), also participate in this step [92]. Finally, to converse rcDNA to cccDNA, both linear strands are mainly ligated by host cellular DNA ligase (LIG) 1 and 3 after the extension of plus-strand DNA [93]. Besides, LIG4 has been considered to participate in the formation of cccDNA from double-strand linear DNA (dslDNA) through the nonhomologous end joining (NHEJ) DNA repair pathway [93–95].

Once formed, cccDNA will be organized into a chromatin-like viral minichromosome and modified by host histone proteins, such as H3 and H4 histone proteins, as well as nonhistone proteins like viral HBx, core protein, and host epigenetics-related proteins, whereas the nucleosome spacing (repeat length) is 180 bp which is

different from the 200 bp repeat length for the chromatin of eukaryotic cells [96, 97]. HBV cccDNA can be epigenetically modified to regulate viral replication and viral gene expression, including DNA methylation and histone modifications [98].

5 The Expressions of Viral RNAs and Proteins

After rcDNA is being converted to cccDNA in the nucleus of hepatocyte, cccDNA is used as the template of HBV replication and then transcribed into the 3.5 kb, 2.4 kb, 2.1 kb, and 0.7 kb HBV RNAs [46, 81, 99–101]. As shown in Fig. 2.3, there are two kinds of the 3.5 kb HBV RNAs, the precore mRNA and pgRNA. The precore mRNA is mainly transcribed from 1783 nt of HBV genome and is longer than pgRNA which mainly transcribed from 1818 nt [102]. HBV RNAs share the same 3' end terminus using a classic poly(A) signal “UAUAAA” (nt 1916–1921) (Fig. 2.1) [36, 38, 46]. However, there is another cryptic poly(A) signal “CAUAAA” within the X ORF (nt 1788–1793), which can lead to the productions of the truncated HBV RNAs (trRNA) [38, 103].

As mentioned above, the transcriptions of HBV RNAs are regulated by four promoters (CP, SP I, SP II, and XP) and two enhancers (EN I and EN II) [101, 104]. CP is consist of BCP and URR. BCP contains four serial TATA-like box, in which the three ahead are used to control the transcription of precore mRNA and the fourth one is used for controlling the transcription of pgRNA [105, 106]. URR is consist of a positive regulatory element (nt 1613–1636) and a negative regulatory element (1636–1742), both of which regulate the transcriptional activity of BCP [107–109]. SP I initiates the transcription of 2.4 kb mRNA, and SP II initiates the transcription of 2.1 kb mRNA [110]. XP initiates the transcription of 0.7 kb HBV RNA [111]. EN I promotes the transcriptions of precore mRNA, pgRNA and 0.7 kb HBV RNAs, but has a modest effect on the transcriptions of the 2.4 kb and 2.1 kb HBV RNAs, while EN II preferentially promotes the transcriptions of the 2.4 kb, 2.1 kb, and 0.7 kb HBV RNAs [48, 49].

HBV pgRNA can be spliced by the formation of spliceosome which could remove introns like the cellular machineries [112, 113]. Just like the intron of heterogeneous nuclear RNA (hnRNA) which is composed a 5' donor site (“GU”), a 3' acceptor site (“AG”), a branch site (usually “A” base), and a polypyrimidine tract [113], the deleted HBV pgRNA sequences are also mainly shown a GU-AG manner [114]. The most abundant HBV pgRNA splicing variant is termed as SP1, with nearly one third of the HBV genome deleted (from nt 2447 to 489) [112]. There are also other forms of spliced pgRNA utilizing the different 5' donor site and 3' acceptor site [112]. Interestingly, the spliced pgRNAs can also be encapsidated and subsequently reversed transcribed [115–118]. Moreover, SP1 can be translated into HBV splicing-generated protein (HBSP) which is reported to influence cell viability, proliferation, and migration, as well as the TNF- α signaling pathway [119–123].

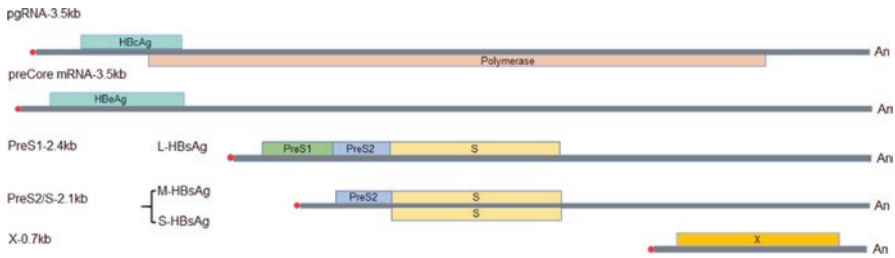


Fig. 2.4 The linear diagram of HBV RNAs and viral proteins

Subsequently, HBV RNAs are translocated into cytoplasm [99]. As shown in Fig. 2.4, the precore mRNA is firstly translated to precore polypeptide, of which the first 19 amino acids in the N-terminal region is a signal peptide trafficking precore polypeptide to the ER where the signal peptide and the 34 amino acids of C-terminal domain are removed to form the mature HBeAg [57, 124]. The mature HBeAg can be released directly into circulation [46]. Meanwhile, a part of pgRNAs are translated to core protein and P protein, and the other parts of pgRNAs are encapsulated into the nucleocapsid and serve as the templates for viral replication. The 2.4 kb HBV RNA is translated to L-HBsAg, and the 2.1 kb HBV RNA is translated to M- and S-HBsAg. Once L-, M-, and S-HBsAg are synthesized at ribosome, they will be sorted into the ER for processing and then be transferred to the Golgi apparatus for further processing. Subsequently, these HBsAg can form two kinds of subviral particles [125, 126]. The predominant subviral particles are spherical particles with a diameter of approximately 20 nm, which mainly contain S-HBsAg and are secreted via the Golgi pathway of host cells [125, 127, 128]. The other subviral particles are less numerous filamentous particles (almost 1% of the spherical particles) with a diameter of approximately 22 nm, which contain a majority of S-HBsAg proteins and equal amounts of M- and L-HBsAg [125, 127–131]. Unlike spherical particles, filamentous particles are secreted by the host cell endosomal sorting complexes required for transport (ESCRT) and the multivesicular bodies (MVB) pathway [132]. Besides, the 0.7 kb HBV RNA is translated to HBx [99, 133, 134]. HBx is a multifunctional protein that is known to activate viral and host gene transcriptions, affect DNA repair processes, as well as regulate cell growth and death [135, 136].

6 Viral Capsid Assembly, Reverse Transcription, and rcDNA Formation

P protein recognizes the epsilon (ϵ) stem-loop including a bulge and an apical loop near the 5' end of pgRNA, which is the encapsidation signal of pgRNA. A P- ϵ ribonucleoprotein (RNP) complex is formed by structural alterations of both pgRNA and P protein [137–140]. Meanwhile, chaperones and ATP may assist the RNP complex to be the right conformation for the subsequent encapsidation, and the

priming reaction occurs at this stage [141–143]. The RNP complex is recognized and encapsidated by core protein dimers to form core particles before or after the priming reaction, and the subsequent reverse transcription occurs inside the core particles [140]. However, there may be some other packaging signal-like RNA motifs termed as preferred site (PS) for core protein binding in pgRNA, which are found by RNA SELEX assays and share a purine-rich loop recognition motif-RGAG (R = purine) [144].

The hydroxyl group of tyrosine (Tyr) in the TP domain of P protein covalently binds with the first deoxyribonucleotide in the bulge region of ϵ stem-loop near the 5' end of pgRNA to initiate the reverse transcription (Fig. 2.5a) [140, 145–148]. Next, the first four (TGAA) or three nucleotides (GAA) of the nascent minus-strand DNA are originated from the bulge region of ϵ stem-loop, followed by translocating the oligomer covalently linked to the P protein from ϵ stem-loop to the DR1 at the 3' terminus of pgRNA and leading to the elongation of minus-strand DNA (Fig. 2.5b) [149–151]. Except for the Tyr residue in TP domain, the YMDD motif in RT domain of P protein are also required for the priming activity and are important to covalently link the first deoxyribonucleotide [146–148].

It is proposed that the primer-P protein complex is arranged through a *cis*-acting element termed Phi (ϕ) and located between DR2 and 3' DR1 which is complementary

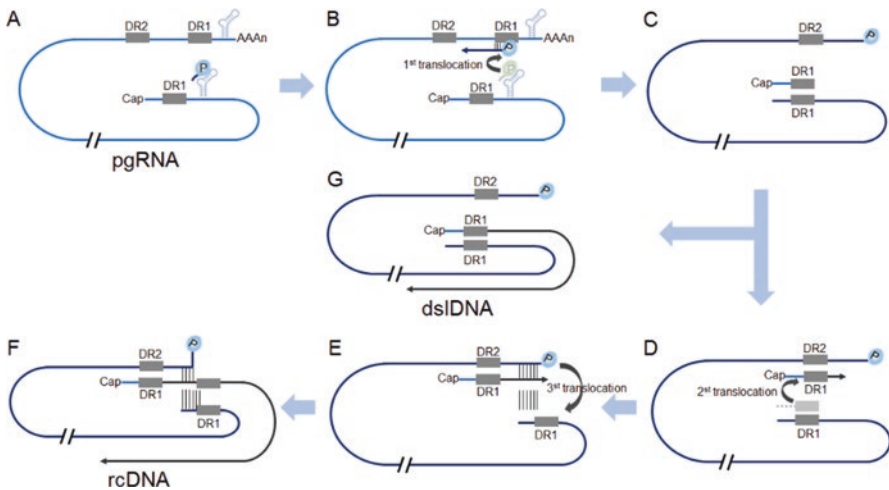


Fig. 2.5 The diagram for the formations of rcDNA and dsIDNA from pgRNA. (a): HBV P protein-mediated priming at the ϵ region near the 5' end of the pgRNA to initiate the reverse transcription process. (b): The first template translocation of the nascent DNA primer from ϵ to DR1 near the 3' end of pgRNA. (c): The synthesis of minus-strand DNA and pgRNA digestion mediated by RNaseH domain of P protein. (d): The second template translocation of the pgRNA primer from DR1 to DR2 in the synthesis of plus-strand DNA. (e): The synthesis of plus-strand DNA toward 5' end of minus-strand DNA and the third template translocation of the nascent plus-strand DNA from the 5' end to the 3' end of minus-strand DNA. (f): The formation of rcDNA in progeny virus with partial plus-strand DNA. (g): The formation of dsIDNA through in situ priming of plus-strand DNA at the 3' end of minus-strand DNA

to the half of 5' ϵ stem-loop, thus the 5' ϵ stem-loop and 3' DR1 are held in close proximity [152, 153]. In addition, another *cis*-acting element termed omega (ω) locates at the downstream of 3' DR1 and can anneal with ϕ , which is also thought to be important for minus-strand DNA synthesis [154]. Following the first translocation or switch, P protein extends the minus-strand to the 5' end of pgRNA. During the minus-strand elongation, the RNase H domain of P protein degrades pgRNA concomitantly from the pgRNA-DNA complex, whereas an oligoribonucleotide (16-18 ribonucleotides) of 5' terminal pgRNA is reserved when the synthesis of minus-strand DNA terminated at the 5' end of pgRNA (Fig. 2.5c) [155–157]. Notably, since the location of DR1 is within the large terminal redundancy of pgRNA, the de novo synthesized 3' terminal minus-strand also has a terminal redundancy termed r sequence, which plays an important role in the plus-strand DNA synthesis [158].

The oligoribonucleotide of the 5' end capped-pgRNA serves as the primer for plus-strand DNA synthesis [156, 159]. The capped-RNA oligomer (RNA primer) encompassing the DR1 sequence translocates (second switch) to the complementary DR2 sequences at the 5' end of minus-strand and starts the synthesis of plus-strand (Fig. 2.5d) [156, 159, 160]. Once the plus-strand extends to the 5' end of minus-strand DNA, the third translocation or switch from the 5' end to the 3' end of the minus-strand DNA will take place to continue the plus-strand DNA synthesis and form rcDNA (Fig. 2.5e and f) [54, 160]. Alternatively, without the successful second translocation, the RNA primer may remain at the 3' end of minus-strand DNA and carry out the in situ priming of plus-DNA to form dsIDNA (Fig. 2.5g) [54]. The dsIDNA is preferred to be integrated into the host genome and then serves as the transcription template for HBsAg, whereas its production is a minor pathway with an occurring frequency of about 5%-20% under the normal conditions [161, 162]. Besides, several studies suggest that other *cis*-acting sequences in the minus-strand DNA may also participate to help spatially juxtapose through base pairing for plus-strand DNA synthesis [163, 164].

7 Viral Budding

The rc- or dsIDNA containing core particles are termed as nucleocapsids. Some of nucleocapsids shuttle back to the nucleus to maintain a relatively stable pool of cccDNA, and other nucleocapsids are enveloped by HBV envelope glycoproteins (Fig. 2.3) [165–167]. For the latter process, two cytoplasmic domains (matrix domains, MDs) of Golgi-processed HBsAg in the MVB membrane contact with nucleocapsids, and such contacts will order the envelope proteins into a tightly packed formation in the MVB membrane and subsequently drive the inward budding process [125]. Since MD1 is located at the boundary between preS1 and preS2 in L-HBsAg (aa 103 to 124), and MD2 is located at the C-terminal half of the cytoplasmic loop between transmembrane domain (TM) 1 and 2 in S-HBsAg, it is

indicated that both L- and S-HBsAg are necessary for the inward budding while M-HBsAg is not essential [168–172]. Finally, the inward-budded nucleocapsids are sorted into the ESCRT complexes of host cell to catalyze the membrane fission and subsequently release outside the cell [131].

As shown in Fig. 2.3, except for the mature nucleocapsids, the immature nucleocapsids containing the non- or partially reverse transcribed pgRNA may also be enveloped and secreted in a similar way to the mature nucleocapsids [34, 35, 173, 174]. Besides, the empty capsids, referring to the capsids devoid of any form of HBV nucleic acid due to the core dimers failing to package HBV pgRNA, can also be enveloped by contacting with MD2 of S-HBsAg and released outside the cell as empty virions. Unlike the mature nucleocapsids, core proteins in empty capsids are mostly phosphorylated and may be the aberrant core proteins [126, 144, 175, 176].

In addition, it has been reported that the naked capsids can also be directly released outside the cell, which may be depended on the interaction between the HBV core particles and the Bro1 domain of Alix which act as a regulator of capsid releasing but independent of the ESCRT machinery (Fig. 2.3). However, the detail mechanism of this pathway has not been elucidated yet [177–179].

8 Conclusion

With an enveloped 3.2 kb rcDNA genome, HBV belongs to *Hepadnaviridae* family [180]. HBV particles enter hepatocytes through a high-affinity binding of the myristoylated viral preS1 to NTCP and a low-affinity binding of S-HBsAg to HSPG [10, 127, 181]. Subsequently, rcDNA enters into the nucleus and is converted to cccDNA, which persists as a minichromosome to transcribe HBV RNAs through the cellular transcription machinery. Among HBV RNAs, pgRNA is reverse transcribed to form HBV minus-strand DNA and encodes core protein and P protein. The assembly of viral capsid is initiated by binding of P protein to pgRNA, and then the encapsidated pgRNA is reverse transcribed to minus-strand DNA, followed by incompletely synthesizing the plus-strand DNA to form rcDNA [182]. The synthesized rcDNAs can either re-enter the nucleus to replenish cccDNA pool or be enveloped and released as viral particles [165, 183]. Except for rcDNA, dsIDNA is generated when failing to translocate the RNA primer, which is often integrated into the host genome using the host enzymes [184, 185]. The integrated viral DNA fragments are frequently ended at the DR-1/2 regions of HBV genome [186, 187]. Since the intact ORF of S gene is present in the integrated viral DNA fragments, HBsAg can also be expressed from the integrated HBV DNA fragments [127, 188, 189]. Accordingly, HBsAg can be produced by either cccDNA or the integrated HBV DNA, and it has been reported that HBsAg may majorly originate from the integrated HBV DNA in HBeAg-negative HBV-infected individuals [127, 190, 191].

Like the nucleocapsids containing rcDNA, the nucleocapsids containing RNA, and the nucleocapsids containing dsIDNA, the immature nucleocapsids and the empty particles may also be enveloped and released by ESCRT-dependent pathway

in MVB, which provides supplement to the traditional HBV life cycle (Fig. 2.3). These new discoveries of HBV life cycle may provide the new viral markers used for predicting the efficacy of antiviral therapy and offer the instructions for developing the new antiviral approaches.

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