Antigen processing

	Cytosolic pathogens	Intravesicular pathogens	Extracellular pathogens and toxins
	°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°	° macrophage	B cell
Degraded in	Cytosol	Endocytic vesicles (low pH)	Endocytic vesicles (low pH)
Peptides bind to	MHC class I	MHC class II	MHC class II
Presented to	CD8 T cells	CD4 T cells	CD4 T cells
Effect on presenting cell	Cell death	Activation to kill intravesicular bacteria and parasites	Activation of B cells to secrete Ig to eliminate extracellular bacteria/toxins

Figure 5-2 Immunobiology, 6/e. (© Garland Science 2005)

Class I Ag processing

- TAP= transporters associated with antigen processing
- Transport peptides into ER



Figure 5-3 part 1 of 2 Immunobiology, 6/e. (© Garland Science 2005)

Proteosome degrades cytosolic proteins

- Large, multi-subunit complex
- Degrades foreign and self protein
- LMP2, LMP7 and MECL-1 induced by γ-Interferon
 - Preferential proteases for class I peptides
 - Cleaves after basic, hydrophobic amino acids



Figure 5-4 Immunobiology, 6/e. (© Garland Science 2005)

MHC class I Ag processing pathway



Figure 5-6 Immunobiology, 6/e. (© Garland Science 2005)

Pathogen evasion of class I Ag presentation

- Herpes simplex
 - Inhibition of antigen transport by TAP
- Adenovirus, Cytomegalovirus
 - Decreased MHC class I expression by retaining class I in ER
- Plasmodium
 - No Ag presentation since no MHC expression on RBCs

MHC class II Ag processing



Figure 5-7 Immunobiology, 6/e. (© Garland Science 2005)

MHC class II

- Invariant chain=
 - Binds in class II groove in endoplasmic reticulum
- CLIP peptide=
 - Stabilizes class II
 - Prevents loading of peptide until fusion with phagolysozome



Figure 5-8 part 1 of 2 Immunobiology, 6/e. (© Garland Science 2005)

Cleavage of Invariant chain



Figure 5-8 part 2 of 2 Immunobiology, 6/e. (© Garland Science 2005)

Class II Ag processing pathway

li is cleaved in an acidified

endosome, leaving a short

peptide fragment, CLIP, still

bound to the MHC

class II molecule

Cytosol





munshieless fie In Cadead Calessa 2005)

Invariant chain (li) forms a

complex with MHC class II

molecule, blocking the

binding of peptides and

misfolded proteins

Endoplasmic reticulum

MHC and peptide stability

- Very stable binding
- Peptide not lost or gained by diffusion into groove
- ⇒Allows rare peptides to be presented
 ⇒MHC only present at surface with peptide in cleft

MHC locus



Figure 5-12 Immunobiology, 6/e. (© Garland Science 2005)

A diversity of peptides can be presented by the MHC

- Polygeny
- Codominant expression of MHC genes
- Polymorphism across population

Polygeny





Figure 5-11 Immunobiology, 6/e. (© Garland Science 2005)

Polygeny

- Class I=
 - -3α chains: HLA-A, HLA-B, HLA-C
 - α chain pairs with $\beta 2$ microglobulin
- Class II=
 - -3α , β pairs= HLA-DR, HLA- DP, HLA- DQ
 - Extra β chain in HLA-DR
- ⇒Total= 3 class I, 4 class II molecules encoded on each chromosome

Codominant expression



Figure 5-14 Immunobiology, 6/e. (© Garland Science 2005)

Polymorphism= different α,β alleles in population



Figure 5-13 Immunobiology, 6/e. (© Garland Science 2005)



Figure 5-15 Immunobiology, 6/e. (© Garland Science 2005)

Class I variability



Figure 5-16 part 1 of 2 Immunobiology, 6/e. (© Garland Science 2005)

Class II variability



Figure 5-16 part 2 of 2 Immunobiology, 6/e. (© Garland Science 2005)

Importance of MHC diversity

- Within population, allows presentation of some antigenic peptides from pathogen
- Problems with MHC homogeneity
 - Epstein-Barr in Papua, New Guinea
 - HIV immune evasion
 - Inbred mice

Mouse immunology vocabulary

- Isogenic= genetically identical at all loci
 C57BL/6, BalbC
- Congenic= genetically identical at all loci except one

- Transgenic=
 - extra copy of gene that may be normal, altered, or different allele
 - can have tissue-specific expression
- Knock-out=
 - specific gene is deleted by homologous recombination
- Knock-in=
 - specific gene is replaced by altered form by homologous recombination
- Knock-down=
 - specfic mRNA is decreased by RNA interference (RNAi)
 - can have tissue-specific expression



Gene deletion by homologous recombination

Locus of interest in the genome Introduction of a foreign sequence and deletion of a part of the gene Homologous recombination Rearranged locus : the gene is no more expressed

http://www.genoway.com/

Gene insertion by homologous recombination

Locus of interest in the genome

Introduction of a transgene in the locus of interest

Homologous recombination

Rearranged locus : the transgene B is expresed



transgene

DNA pronuclear injection

Ovocytes -



DNA micro-injection

Transplantation in a surrogate mother



Screening of newborn mice for transgene detection



Transgene

Southern Blot

Founders breeding

http://www.genoway.com/

ES based technologies: generation of gene targeted mice



Blastocyst injection



Genetically modified ES cells

Transplantation in a surrogate mother

Birth of chimeric mice

Generation of Hetrozygous and Homozygous mice

http://www.genoway.com/



Figure A-42 Immunobiology, 6/e. (© Garland Science 2005)

Creating a gene knockout

- *neo*=
 - resistance to drug G418
- HSV-tk=
 - expression in presence of ganciclovir is lethal



Figure A-44 Immunobiology, 6/e. (© Garland Science 2005)

Knockout mice



L. monocytogenes infection

- Mutant mice with a defined genetic defect in the beta 2-microglobulin or the H2-I-A beta chain
- Virtually devoid of functional CD8 or CD4 alpha beta T cells
- The lethal dose of L. monocytogenes was lower, but were able to resolve low dose infection
- The course of disease was exacerbated and clearance was markedly delayed
- Granuloma infection increased

George Snell's experiment

MHC restriction



Figure 5-17 Immunobiology, 6/e. (© Garland Science 2005)

Superantigens: Disrupting MHC restriction

- Bacterial or viral in origin
 - Bacterial: Staphylococcus, Streptococcus, Mycoplasma
 - Viral: MMTV
- Bind to $V\beta$ of TCR
 - Has specificity for certain $V\beta$ genes
 - Away from CDRs
- Binds to outer portion of MHC
 - Binds to many different MHC molecules
 - Away from peptide groove

Superantigens



The effect of superantigens

- Stimulates 2-20% of all T cells
- Overexpression of T cell cytokines
 - IL-2: T cell proliferation
 - TNF- α : You should know!
- ⇒Can lead to shock when too many cytokines are expressed
- ⇒Can lead to immunosupression
 - Deletion by apoptosis?
 - T cells anergy?
 - Bone marrow suppression?

 \Rightarrow Can lead to immune system diversion

The problem with transplant rejection: T cell alloreactivity



Figure 5-18 Immunobiology, 6/e. (© Garland Science 2005)



Figure 13-35 Immunobiology, 6/e. (© Garland Science 2005)

Minor histocompatability antigens



Figure 13-36 Immunobiology, 6/e. (© Garland Science 2005)

Recipient APC present minor histocompatability Ag



Polymorphic self proteins that differ in amino acid sequence between individuals give rise to minor H antigen differences between donor and recipient

Figure 13-37 Immunobiology, 6/e. (© Garland Science 2005)



Figure 13-38 Immunobiology, 6/e. (© Garland Science 2005)

Transplant rejection

- Initial damage due to CTL response
- Helper T cell cytokines cause long-term inflammatory response



Figure 13-39 Immunobiology, 6/e. (© Garland Science 2005)

Hyperacute rejection

- Complement mediated rejection
- Preformed Ab to blood group, MHC molecules
- Problem with xenografting (α-Gal)



Figure 13-40 Immunobiology, 6/e. (© Garland Science 2005)

Preventing transplant rejection

- Match MHC alleles
- Immunosupression

Donor matching

- Blood type matching
- Microcytotoxicity test
- Mixed lymphocyte reaction

Microcytotoxicity testing



T cell proliferation assay



CTL assay



Figure A-38 Immunobiology, 6/e. (© Garland Science 2005)

Mixed lymphocyte reaction



Figure 13-42 Immunobiology, 6/e. (© Garland Science 2005)

Immunosuppressive drugs

Prednisone

increases IkB production

Azathioprine/MMF

Az:purine analog that inhibits DNA synthesis MMF:binds enzyme to prevent purine synthesis Cyclosporin, Tacrolimus:

interferes with T cell proliferation by binding calcineurin

Rapamcyin:

interferes with serine threonine kinase, limiting costimulatory response



Source: Duke University Medical Center

Date: 2005-10-13

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Immune Therapy Could Treat Leukemias, Autoimmune Diseases, Transplant Rejection

DURHAM, N.C. -- In studies with mice, treatment with a new monoclonal antibody that targets immune system B cells has shown considerable promise for treating leukemias, autoimmune diseases and transplant rejection, according to immunologists at Duke University Medical Center.

Types of antisera

- Polyclonal=
 - Collection of antibodies from the serum
 - Multiple binding specificities to many epitopes of one or more antigens
- Monoclonal=
 - Homogeneous preparation of antibody
 - Single binding specificity to one epitope on a single antigen

Polyclonal antibody



Figure A-10 Immunobiology, 6/e. (© Garland Science 2005)



Figure A-14 part 2 of 2 Immunobiology, 6/e. (© Garland Science 2005)

HGPRT= hypoxanthine:guanine phosphoribosyl transferase

HAT= hypoxanthineaminopterin-thymidine medium; lethal to cells in absence of HGPRT enzyme

Humanized monoclonal antibodies

- Variable region= murine
- Constant region= human
- CDRs from mouse cloned into human Ig
- Treatment:
 - Cancer
 - Transplantation
 - Autoimmune diseases
 - Inflammatory/allergic



Phage display



Figure A-15 Immunobiology, 6/e. (© Garland Science 2005)

Monoclonals as therapy



Figure 14-17 Immunobiology, 6/e. (© Garland Science 2005)

Her2 overexpression associated with some breast cancers

HER2 Preclinical Studies



In vitro studies demonstrated that a murine anti-HER2 monoclonal antibody, 4D5, inhibited the growth of the HER2-positive tumor cells.

Pietras, et al.

HER2 overexpression can be achieved by 1) gene alteration resulting in additional copies of the HER2 gene; 2) increased transcription of the HER2 gene, producing increased levels of HER2 mRNA; and/or 3) increased translation of HER2 mRNA. All three alterations can result in greater HER2 synthesis and expression on the cell surface as well as increased cell proliferation.



Normal Cell

In normal breast tissue cells, the HER2 gene produces a protein receptor on the cell surface. These growth factor-like receptors are thought to play a role in normal cell growth by signaling the cell to divide and multiply.

HER2 Overexpressing Cancer Cell

Cancerous breast tissue cells that overexpress (or overproduce) the HER2 gene produce extra protein receptors on the cell surface. The higher density of receptors triggers the cell to divide and multiply at an accelerated rate, thus contributing to tumor growth. Approximately 25-30% of all women with metastatic breast cancer overexpress the HER2 protein.





Herceptin® (Trastuzumab)

It is thought that Herceptin (a HER2 antibody) binds to numerous HER2 receptor sites found on the cell surface, blocking the receptor sites and possibly preventing further growth by interrupting the growth signal. As a result, the HER2 antibody may slow progression of the disease.



Herceptin increased efficiency of chemotherapy



*Chemotherapy = either doxorubicin or epirubicin plus cyclophosphamide, or paclitaxel.

Targeting radiation therapy

- Zevalin[®], Bexxar[®]
 - Binds to CD20 molecule on mature B cells (and lymphomas)
 - Zevalin conjugated to either indium-111 (111In) or yttrium-90 (90Y)
 - Bexxar conjugated to iodine-131 (131I)
 - Usually used in combination with Rituxan that also binds to CD20

Humanized Ab neutralize proteins of immune response



* Marketed as Zenapax[®] by Hoffmann-La Roche in kidney transplantation.

Multiple uses for a single antibody



Targeting TNF- α

- Humira (adalimumab)= binds TNF- α
- Remicade (infliximab)= binds TNF- α
- Etanercept= soluble decoy receptor for TNF- α (not an antibody)

REMICADE is a biologic treatment that has been used to treat over 634,000 people worldwide across all uses.

Learn About Treating:

- Ulcerative Colitis
- Crohn's Disease
- Ankylosing Spondylitis
- Rheumatoid Arthritis
- Psoriatic Arthritis

mAb to prevent transplant rejection

OKT3

 interferes with T cell proliferation by binding to CD3

Xenapax/Simulect

- interferes with T cell proliferation by binding to IL-2 receptor (α) subunit
- Daclizumab (Xenapax) is the humanized mAb and basiliximab (Simulect) is the chimeric mAb



Belatacept: Costimulation blockade



- soluble fusion protein of the B7-binding domain of CTLA4 and an Ig tail
- inhibits lymphocyte co-stimulation through CD28 for the potential treatment of solid organ transplant rejection.
- Belatacept is currently undergoing phase III clinical trials (Aug 2005)

Transplant survival rates

Tissue transplanted	5-year graft survival*	No. of grafts in USA (2002)
Kidney	65–75%	15,680
Liver	65–75%	5594
Heart	68%	2231
Pancreas	30%/80%#	1492
Lung	40%	1077
Cornea	~70%	~40,000†
Bone marrow	40%/60%	15,000‡

Figure 13-41 Immunobiology, 6/e. (© Garland Science 2005)

Fetal tolerance



Figure 13-44 Immunobiology, 6/e. (© Garland Science 2005)

- Placenta
 - Does not exhibit classical MHC molecules
 - Expresses HLA-G that inhibits NK cells
- Maternal induced T cell tolerance to paternal alloantigens
 - Responsiveness returns after pregnancy
- Placental secretion of cytokines (IL-4, TGF-β, IL-10) that promote less harmful TH2 response
- Placental tryptophan starvation suppresses T cell activation
 - Indoleamine 3-dioxygenase catabolizes tryptophan