



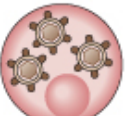



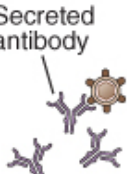
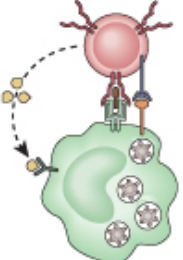
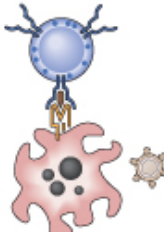
Basic Immunology

Lecture 16

Effector mechanisms of cell-mediated immune responses (CMI):

1. Cytotoxicity
2. T_H –cell mediated macrophage activation
(Delayed type hypersensitivity = DTH.)

The type of pathogens determine the type of immune response

	Humoral immunity	Cell-mediated immunity	
Microbe	 Extracellular microbes	 Phagocytosed microbes in macrophage	 Intracellular microbes (e.g., viruses) replicating within infected cell
Responding lymphocytes	 B lymphocyte	 Helper T lymphocyte	 Cytolytic T lymphocyte
Effector mechanism	 Secreted antibody		
Transferred by	Serum (antibodies)	Cells (T lymphocytes)	Cells (T lymphocytes)
Functions	Block infections and eliminate extracellular microbes	Activate macrophages to kill phagocytosed microbes	Kill infected cells and eliminate reservoirs of infection

Effector functions of lymphocyte populations

Th1

T_H (helper) lymphocytes

APC+MHC-Ag-complex+Lymphokine



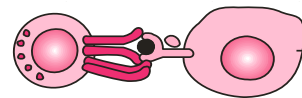
Effector functions

Lymphocyte and macrophage activation and differentiation

CTL

T_C (cytotoxic) lymphocytes

Target cell (APC)+MHC-Ag-complex+Lymphokine

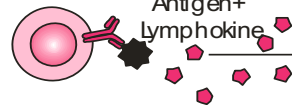


Cell killing

Th2

B lymphocytes

Antigen+Lymphokine

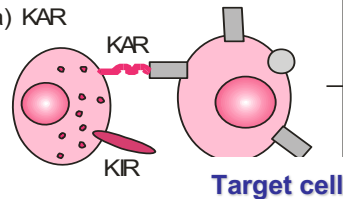


Antibody production

NK

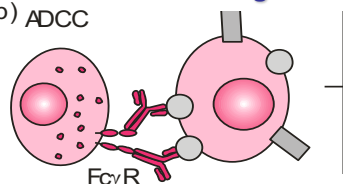
NK (natural killer)

a) KAR



Cell killing

b) ADCC



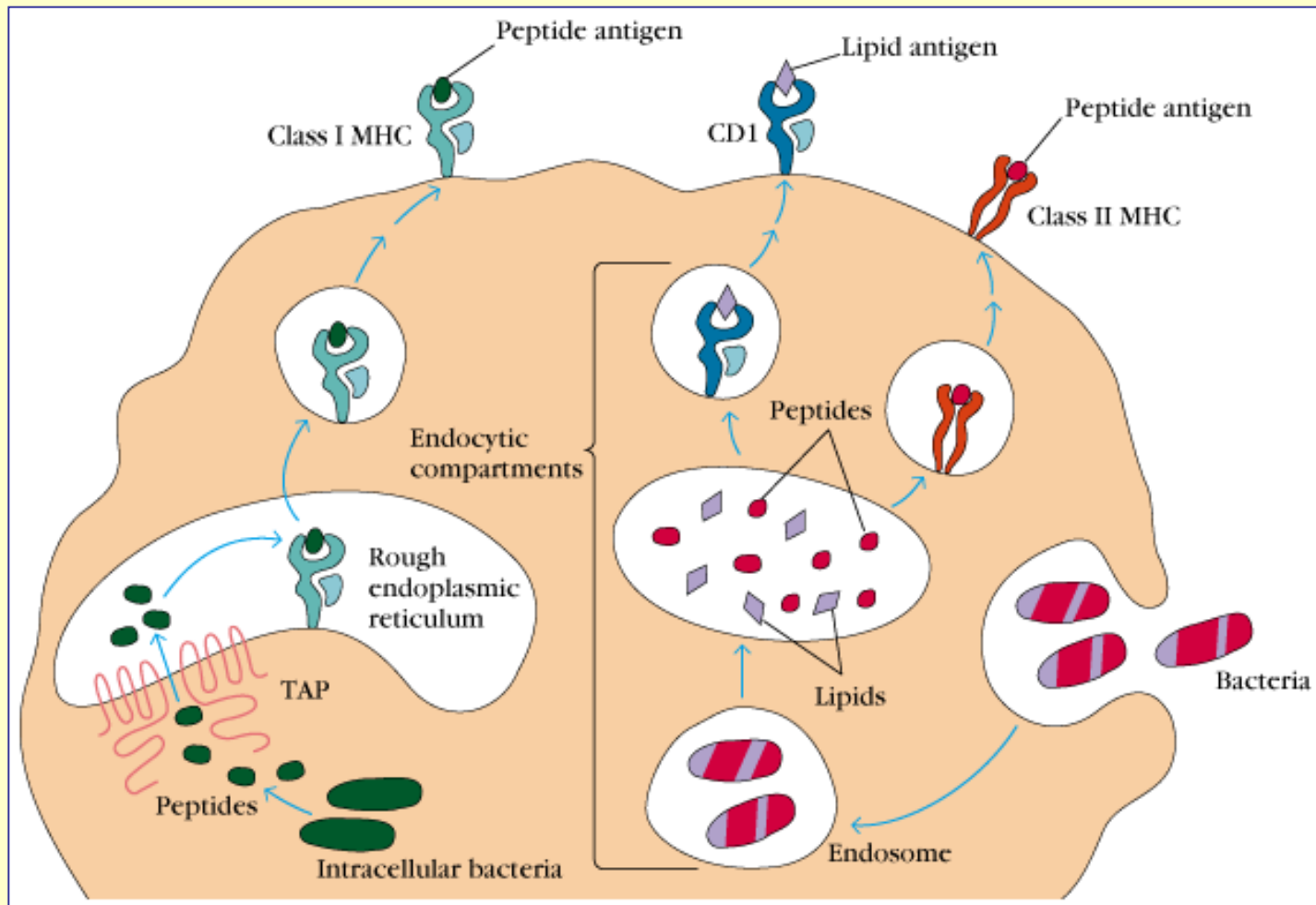
Cell killing

Target cell

Cell-mediated immuneresponse (CMI)

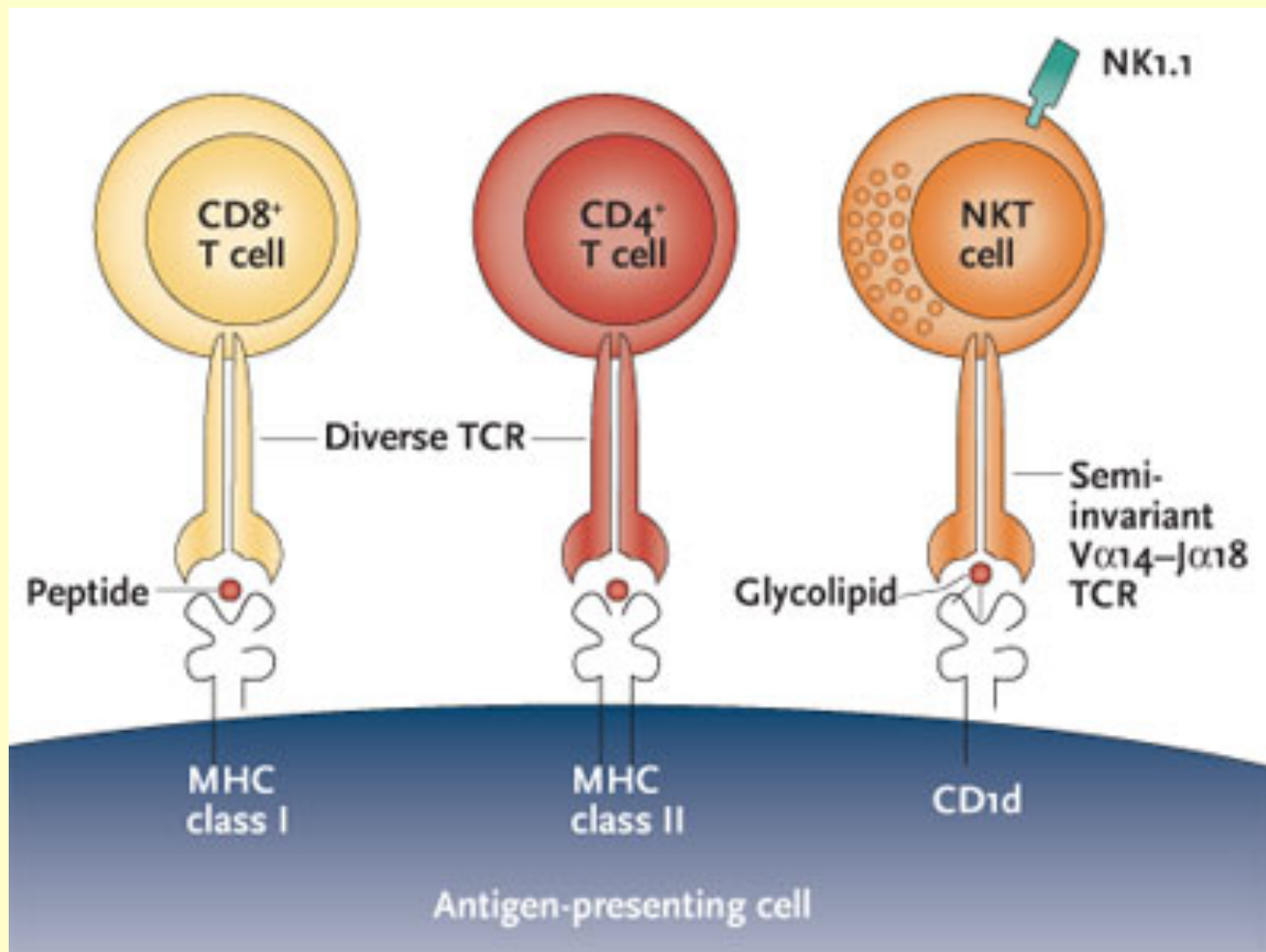
<u>Cytotoxicity</u>	<u>DTH</u>
<p><u>Effector cells</u> direct cytotoxic activity:</p> <ul style="list-style-type: none">- CTL (CD8+ Tc),- $\gamma\delta$ T cells- NK cells,- Macrophages	<p><u>Effector cells</u> cytokine production:</p> <ul style="list-style-type: none">- T_{DTH} cells = Th1 cells- Macrophages
<p><u>Target cell (cytosolic antigen):</u></p> <ul style="list-style-type: none">- allogeneic cells (transplantation minor histocompatibility antigen)- malignant cells- virally infected cells- chemically modified cells	<p><u>Antigen in phagolysosome:</u></p> <ul style="list-style-type: none">- intracellular bacterium, fungi, parasite, virus- contact antigens (small molecules (haptén) skin protein complexes)

Presentation of intracellular and extracellular antigens



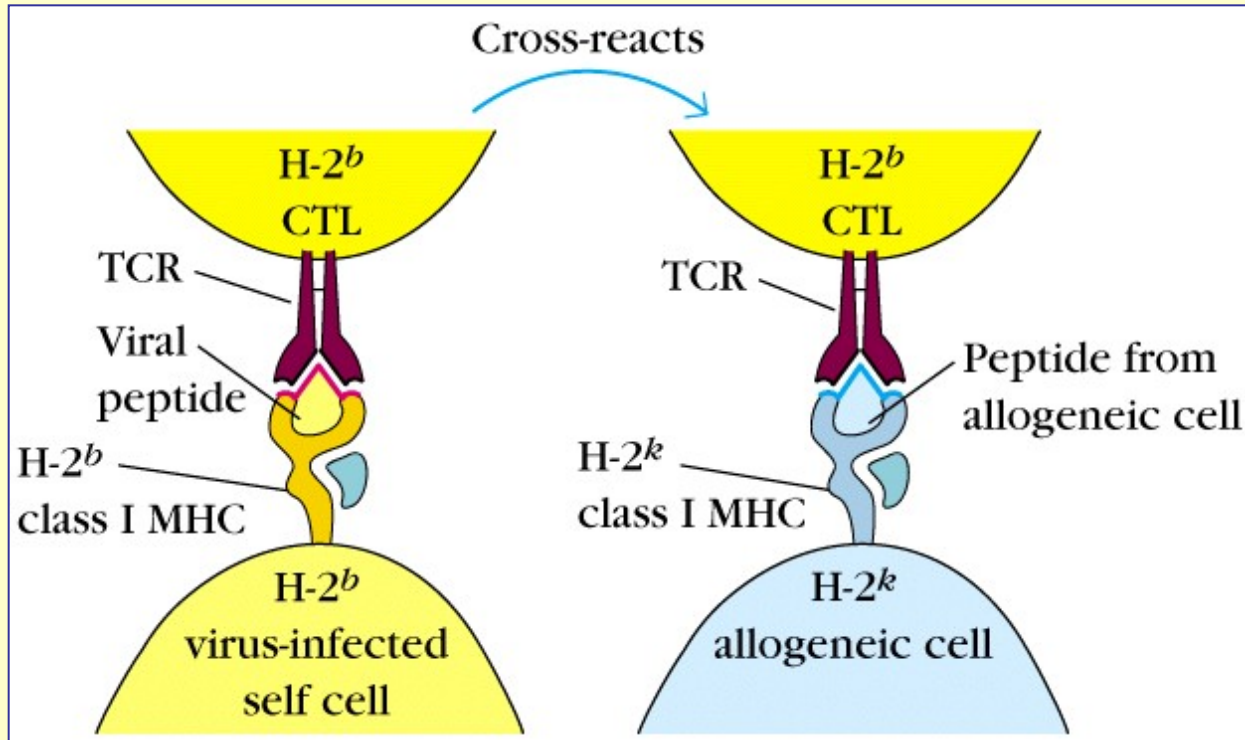
Cytosolic way

Phagolysosomes



Cytotoxicity

Antigen recognition of cytotoxic T cells

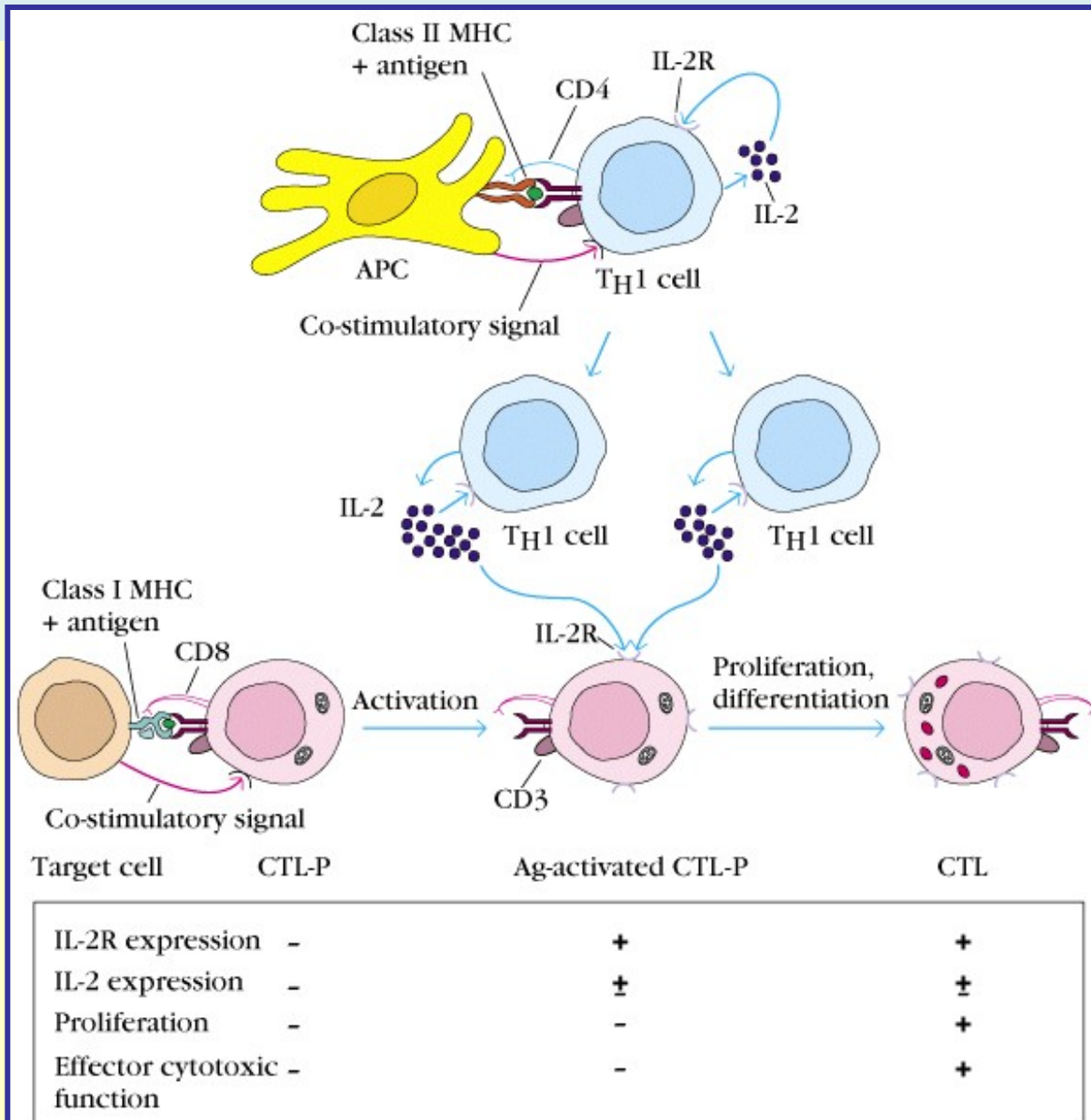


Activated Tc cells = effector CTL

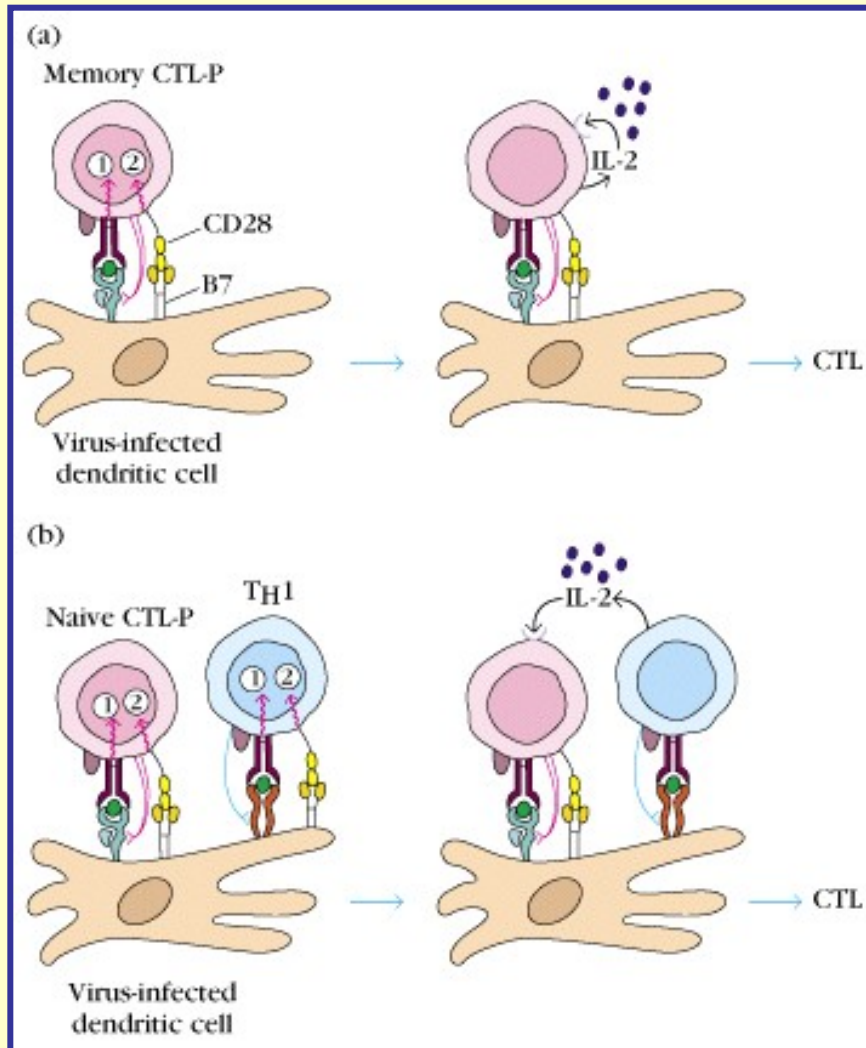
TcR $\alpha\beta$, CD8⁺ cells

Antigen specific recognition with MHC- I restriction

Naive Tc cell → effector CTL



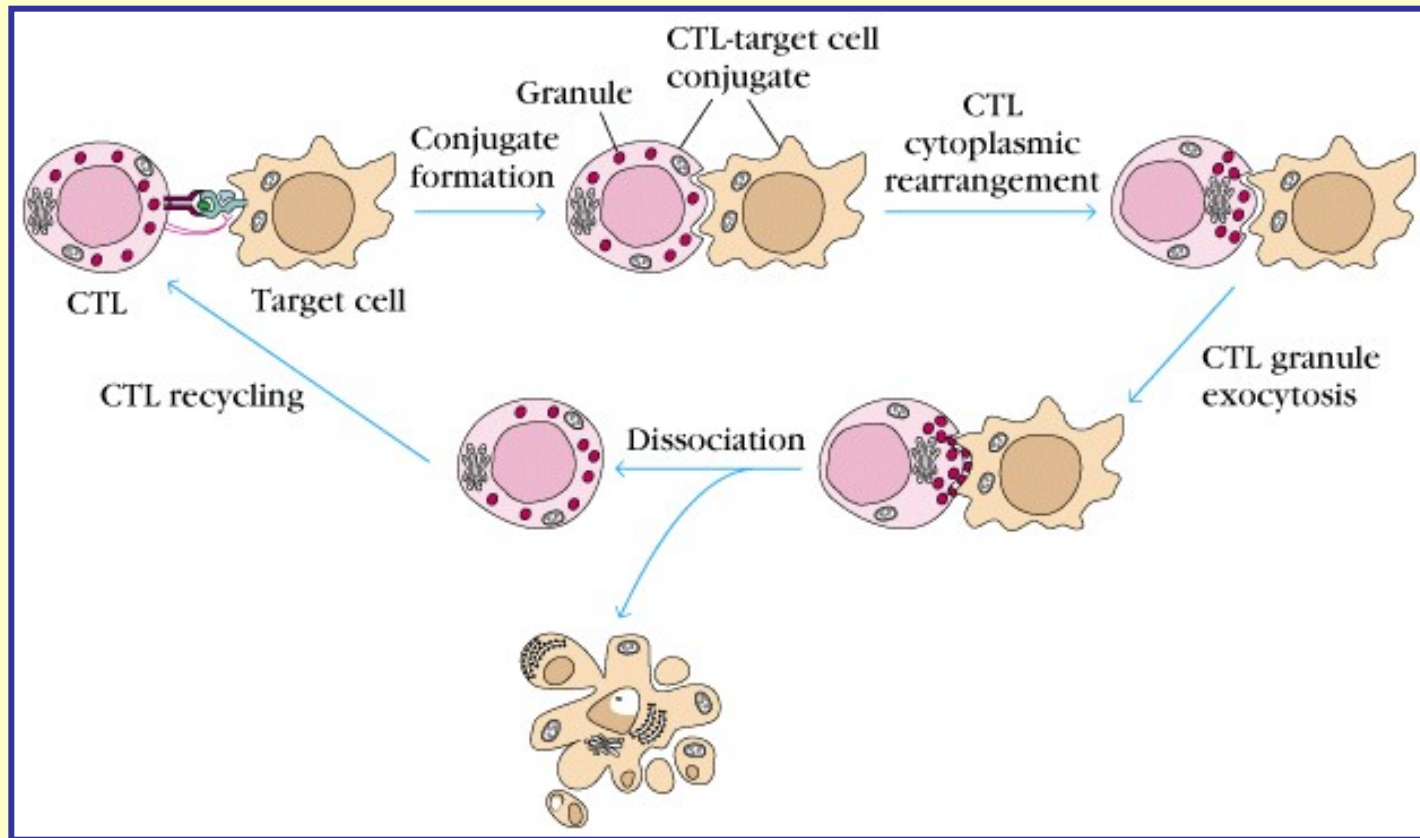
Activation of memory CTL doesn't require Th1 help



Memory CTL: autokrin IL-2 production

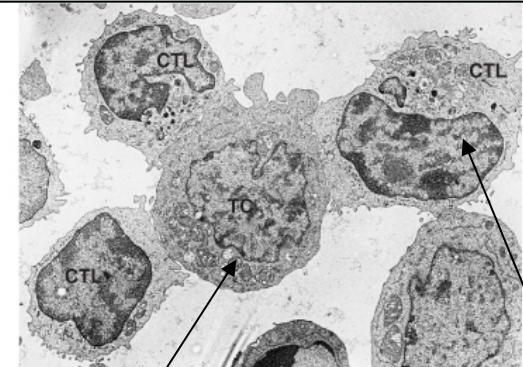
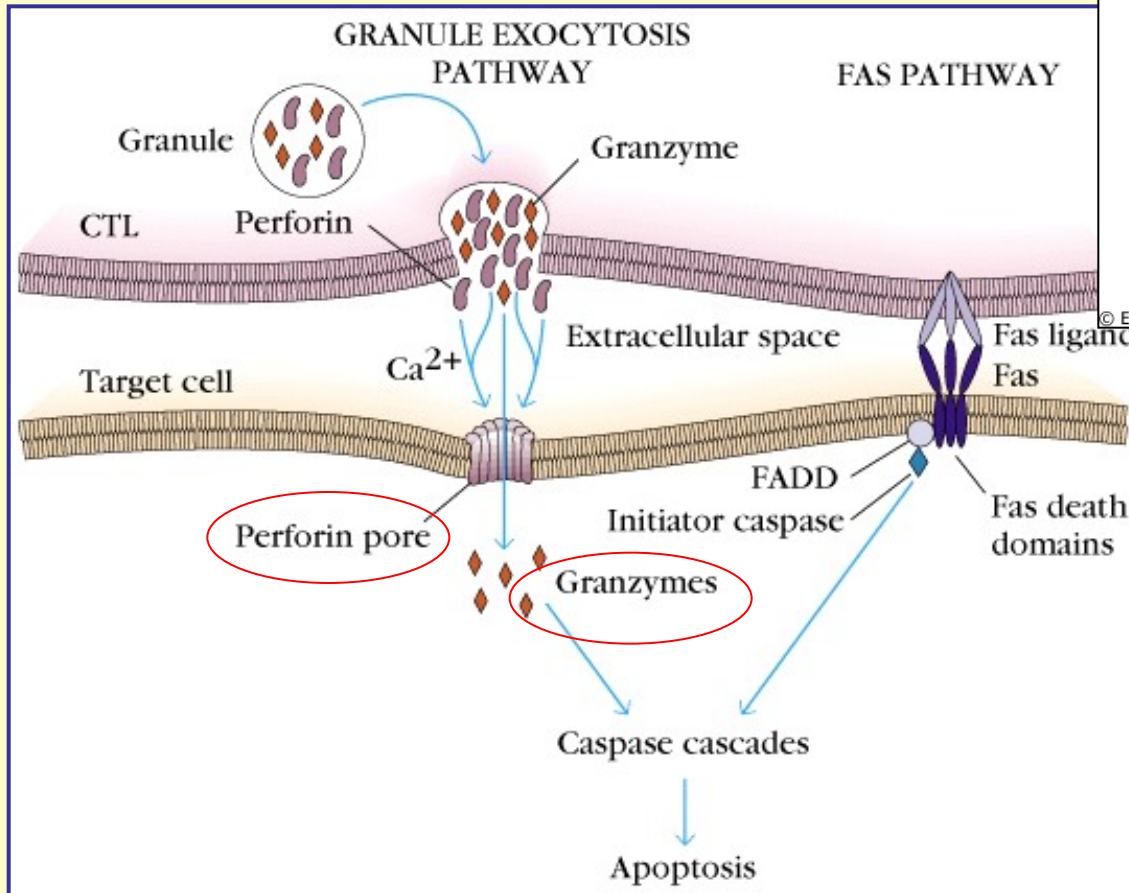
Naiv CTL: Th1 produces IL-2

CTL-mediated target cell killing:



1. Antigen recognition
2. Conjugation
3. CTL cytoplasmic rearrangement
4. CTL degranulation
5. Target cell apoptósis
6. Dissociation

Mechanisms of CTL induced apoptosis:



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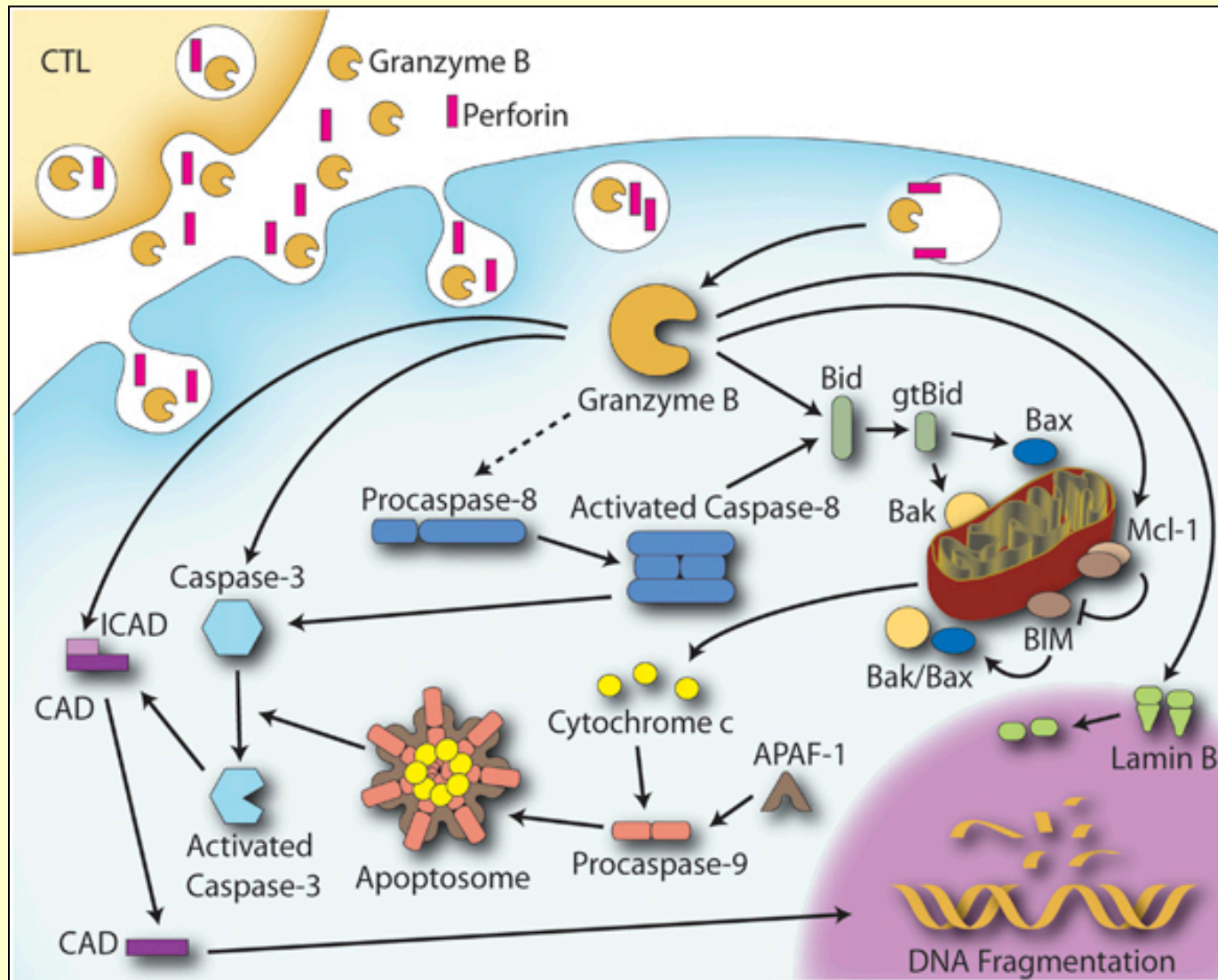
Target cell

Cytotoxic T-cell

Soluble effector molecules: perforins and granzymes

Membrane-bound effector molecules: Fas/Fas ligand (FAS-L)

The secretory mechanism of apoptosis

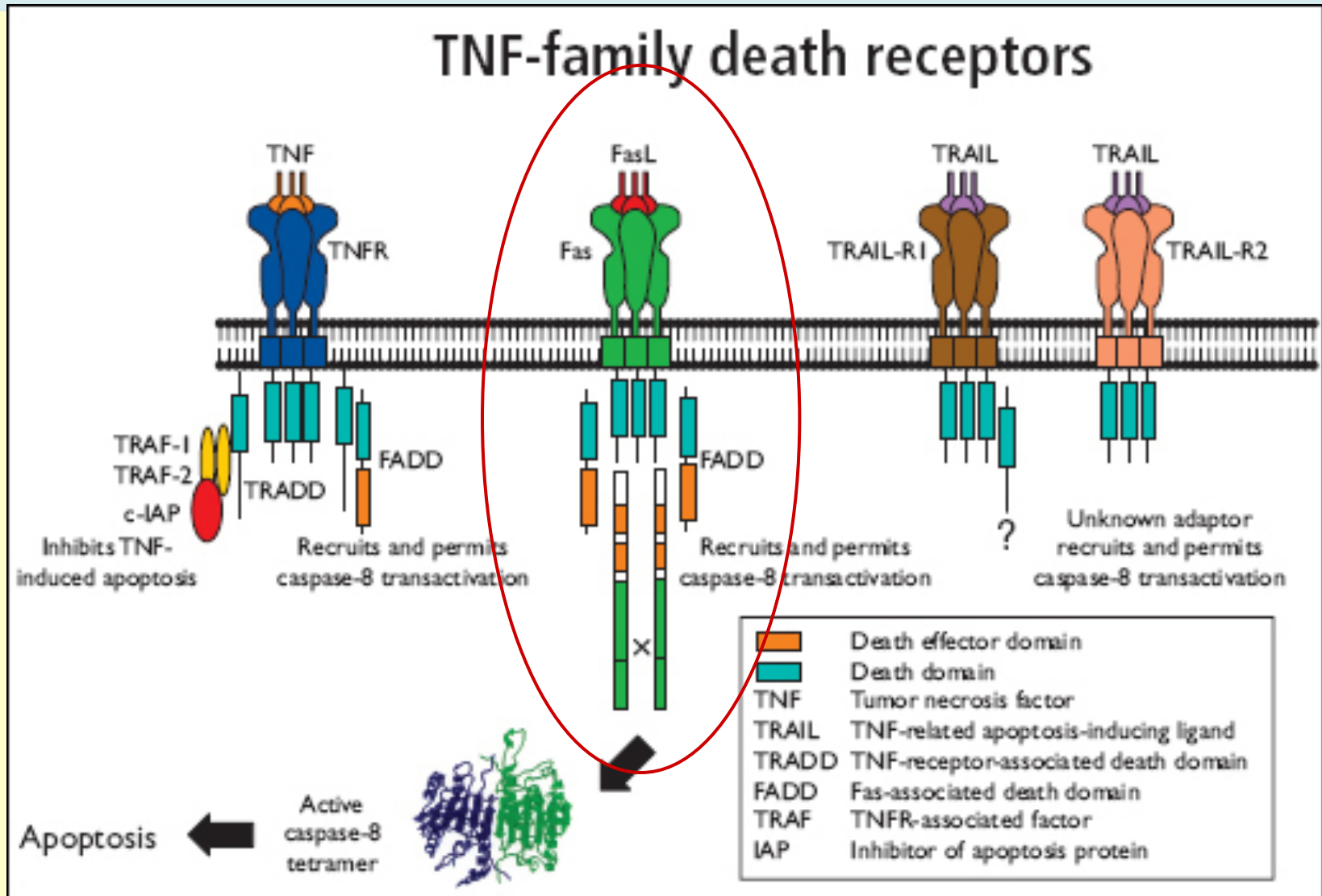


Granzyme B:

Induction of
Apoptosis

Granzyme A:
DNA-
Fragmentation

Extrinsic Apoptosis pathway



Caspase Activated Deoxyribonuclease (CAD)

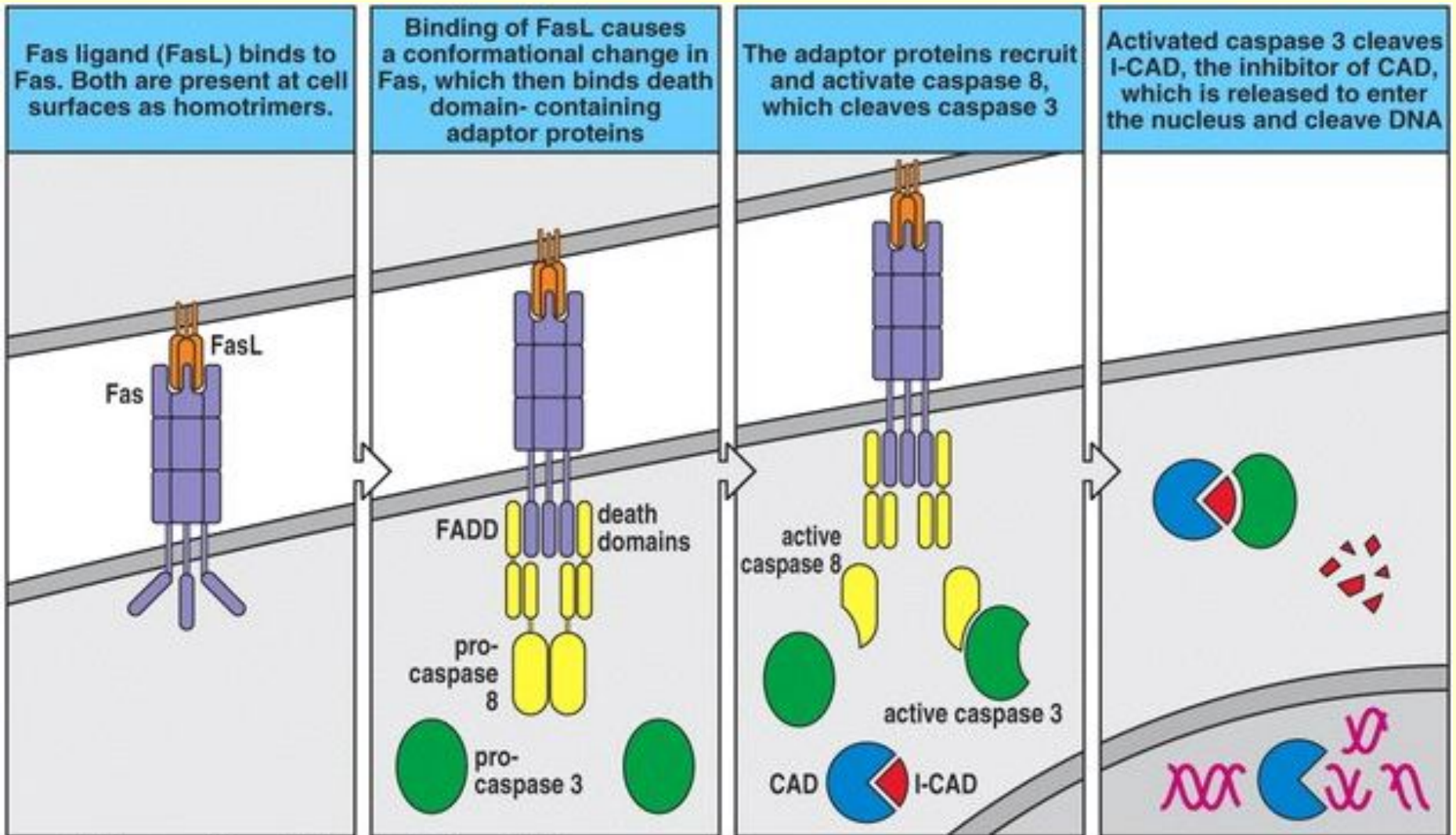


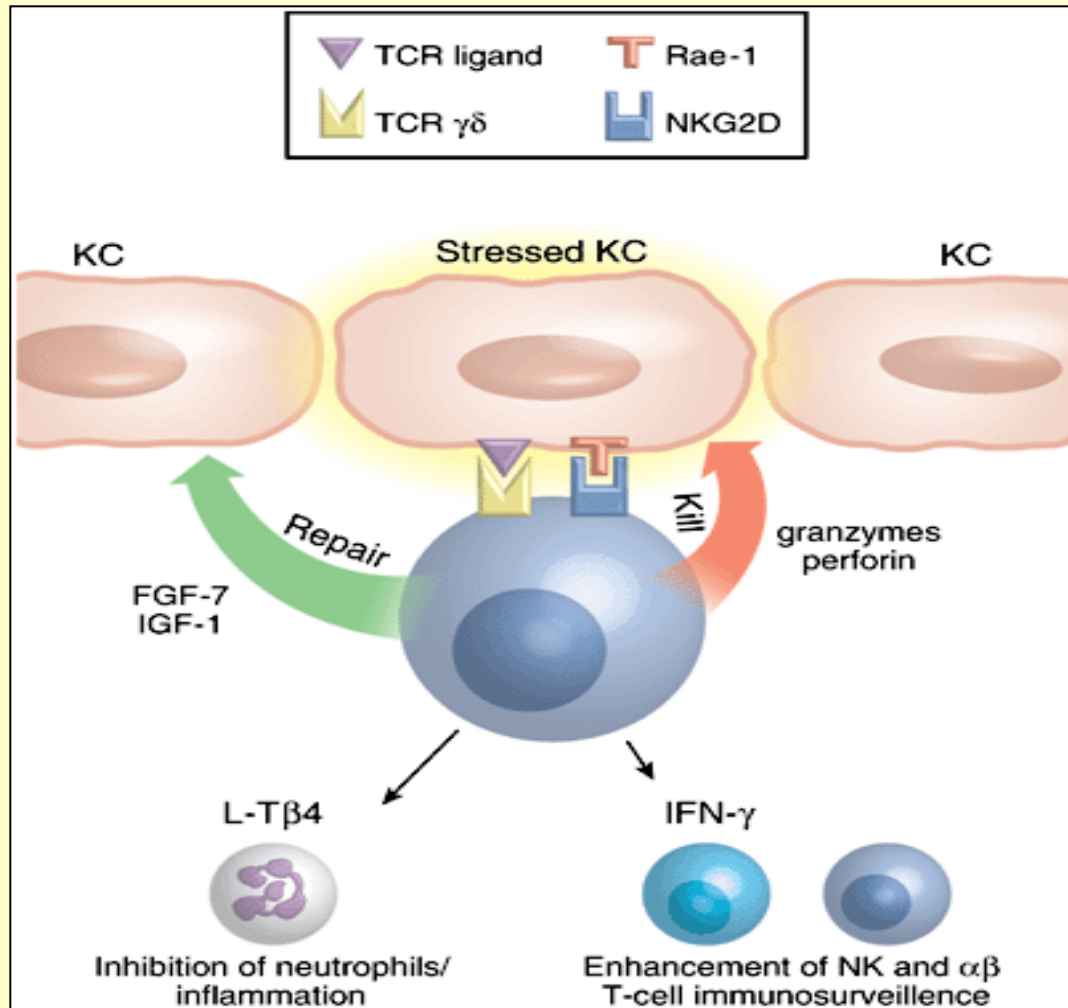
Figure 6-24 Immunobiology, 6/e. (© Garland Science 2005)

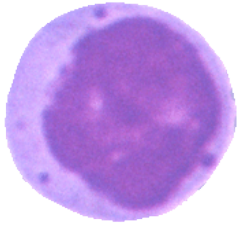
When activated by caspase-3, CAD is responsible for cleaving DNA into the characteristic ~200 bp fragments of apoptotic cells.

$\gamma\delta$ T cells

- 5 % of the T cells,
 - Intraepidermal lymphocytes: CD4- and CD8-
 - Intraepithelial lymphocytes: CD8+
 - Produced in embryonic life, no recirculation,
 - Limited, tissue specific TcR diversity → specialization to respond to certain antigens
-
- Ligand recognition: - non-MHC-restricted, but antigen specific
 - Antigens: viral proteins, surface heat-shock proteins (produced in inflammatory responses) bacterial lipids, phosphatids through CD1 molecule
 - Function: eliminate damaged cells and microbial invaders

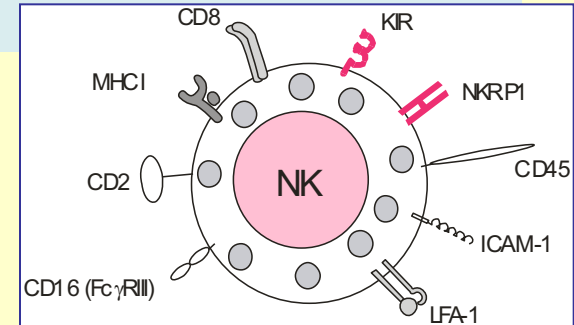
$\gamma\delta$ T cells





Natural killer cells (NK)

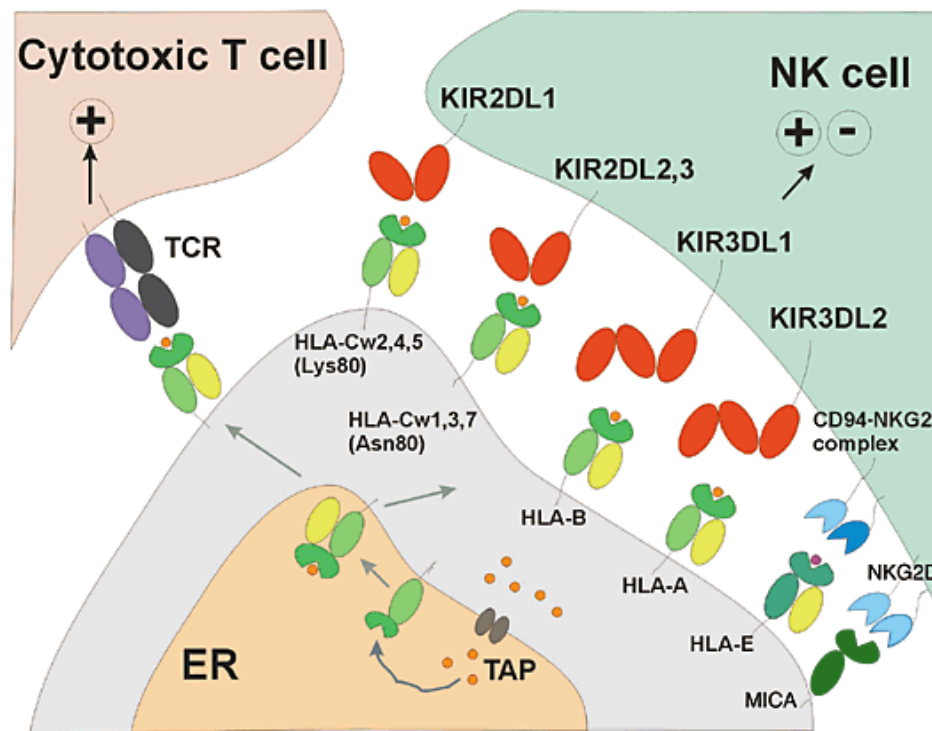
- 10-15% of lymphocytes = LGL cells
- **Phenotype:**
 - TcR- CD3-, CD4-, CD8+/-, CD2+, CD16+ (Fc γ RIII) CD56+,
 - They secrete cytokines: INF γ \rightarrow immune regulation (Th1)
- **Function: *early*** response to infection with certain viruses, intracellular bacteria and tumor cells



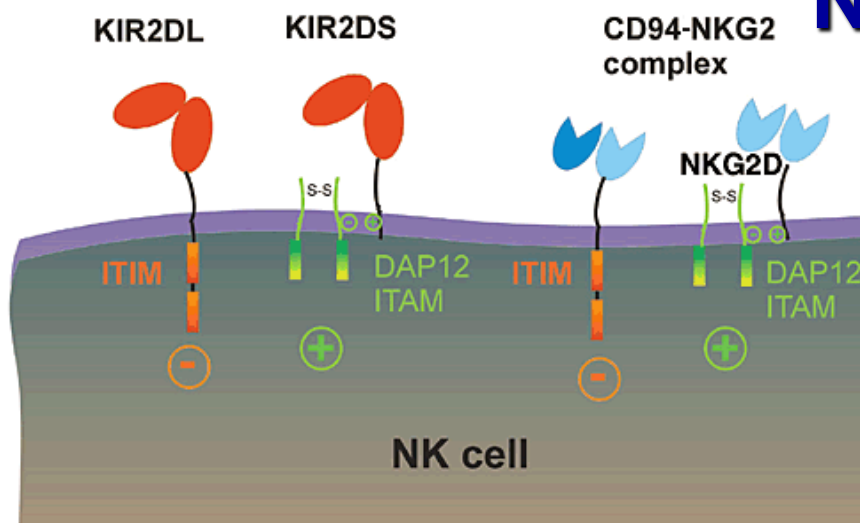
NK-cell receptors:

- **Killer inhibitory receptors (KIR):** recognize normal self MHC-I molecules
- **Killer activating receptors (KAR):** recognize aberrant glycosylation on tumor or virus infected cell surface

a

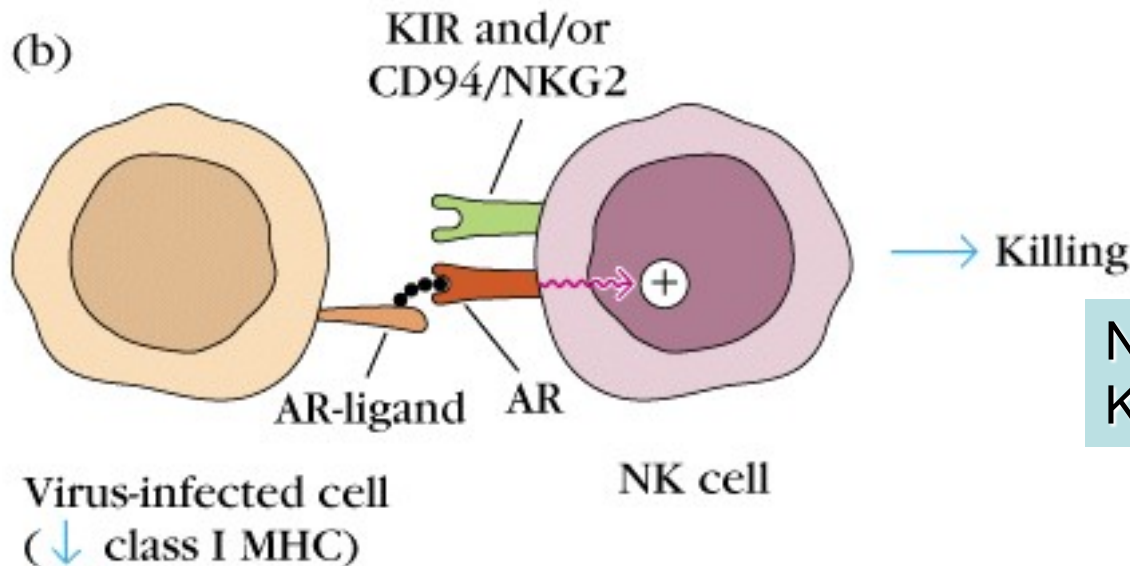
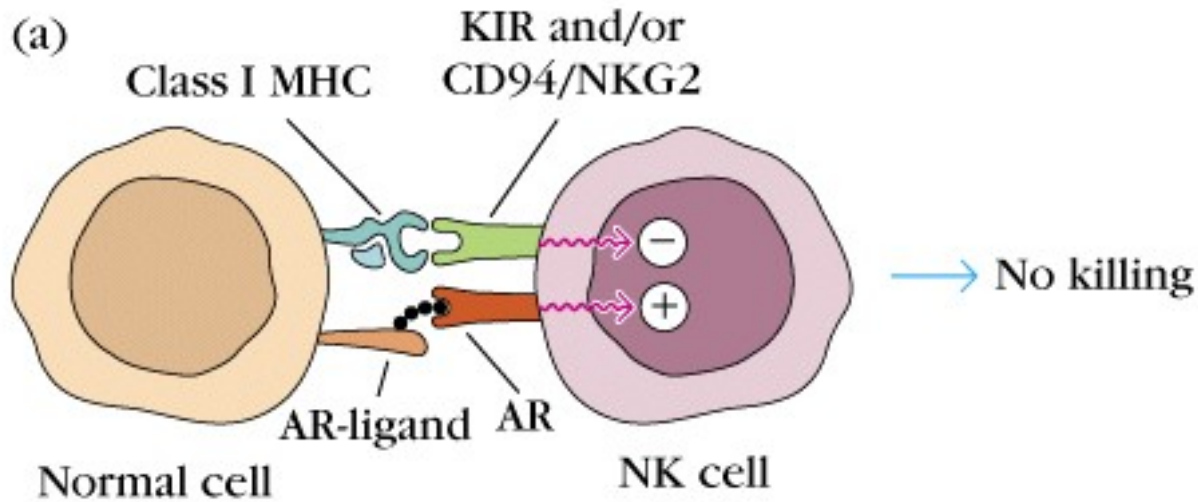


b



NK cell receptors:

KIR: killer inhibitory receptors and their ligand



NK-cells kill their target-cell K562 with perforin (white)

Antibody-dependent cellular cytotoxicity (ADCC)

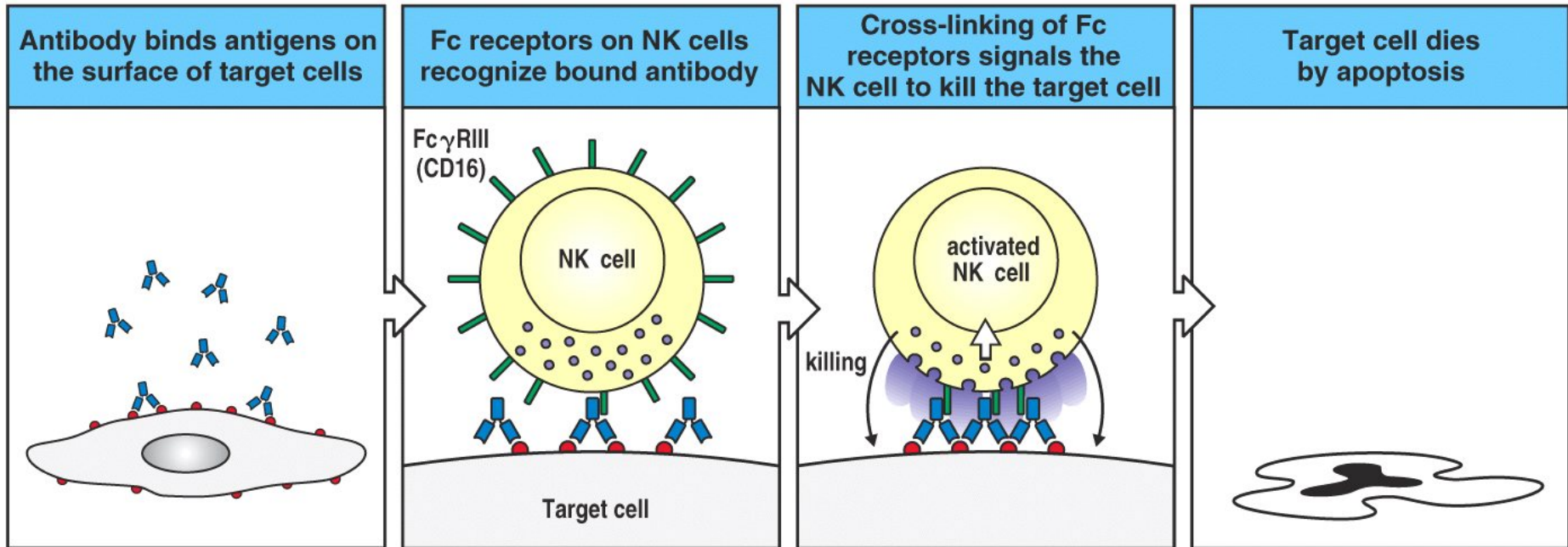
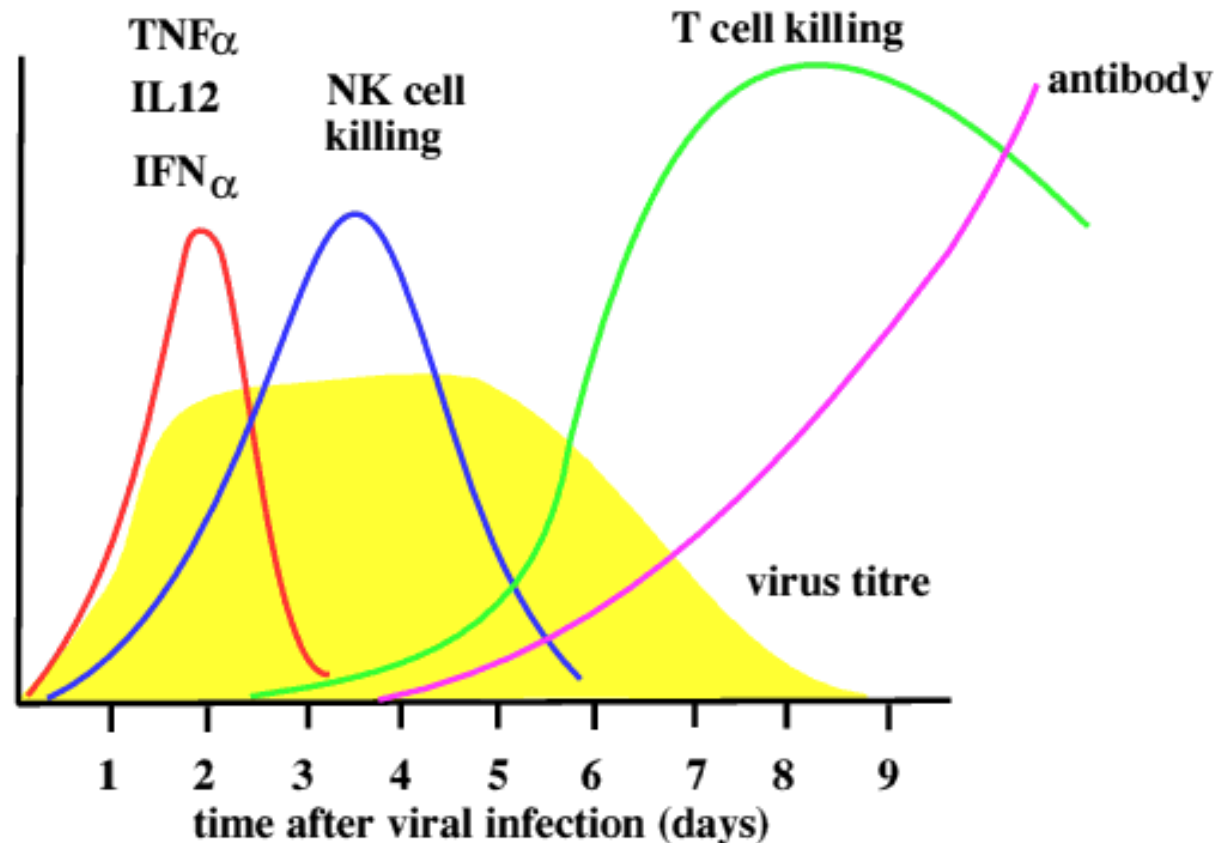


Figure 9-34 Immunobiology, 6/e. (© Garland Science 2005)

The time-kinetic of the immune response against viruses

Cytokines and NK cells combine to provide early defense against virus infections



Virus-infected host cells



IFN- α , IFN- β

Induce resistance to viral replication
in all cells

Increase MHC class I expression and antigen
presentation in all cells

Activate NK cells to kill virus-infected cells

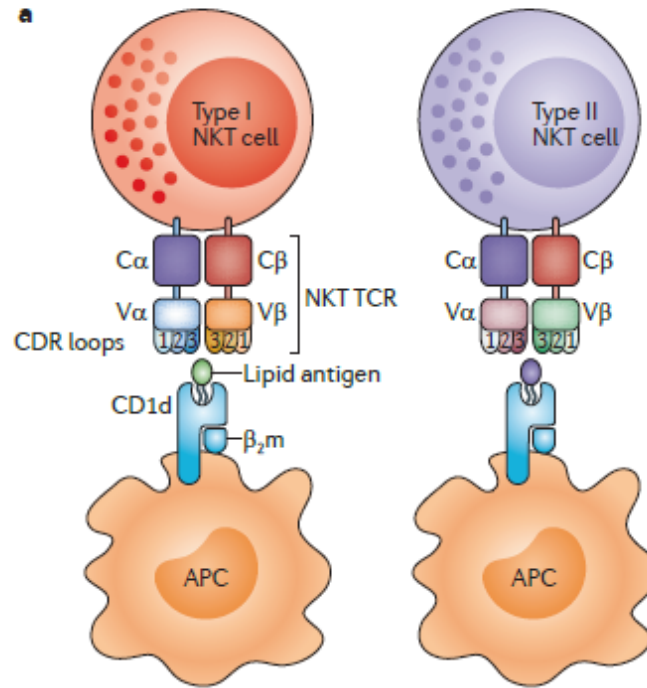
Natural Killer T cells = NKT

- 0,2% of the peripheral T cells
- Positive selection in the thymus on self phospholipid antigens
- **Antigen recognition:** microbial **phospholipids** and **glycolipids**, presented by the non-polymorphic **CD1d**
- **Markers:** invariant $\alpha\beta$ TcR (iV α 24-J α 18) with limited specificity, CD4 or DN or CD8 $\alpha\alpha$ + NK markers: NK1.1, CD56, CD16, CD161 (NKRP1)
- **Function:** fast cytokine production: IL-4, IFN γ , IL-10, IL-13, IL-17, IL- 21 TNF α

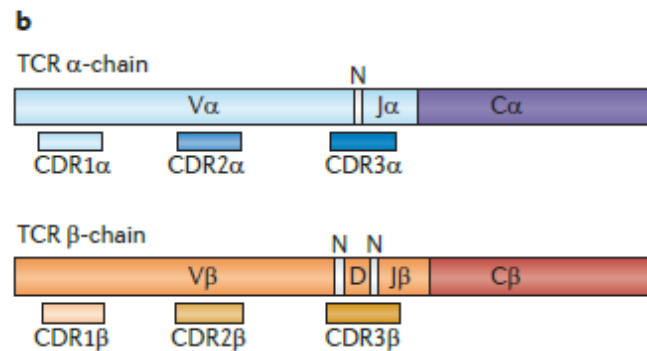
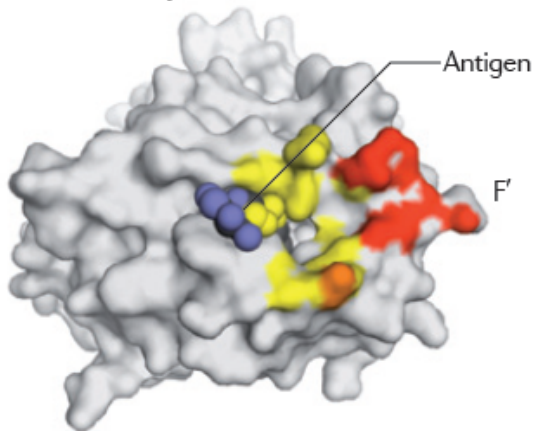
	V α 14 NKT	Conventional T
TCR	invariant V α 14	heterogenous TCR
Ligand	α -GalCer	peptides
MHC	monomorphic CD1d	polymorphic MHC
Major tissues	Liver, Spleen Bone marrow	Thymus, Spleen Lymph nodes
Development	GM-CSFR	no GM-CSFR

Natural Killer T cells = NKT

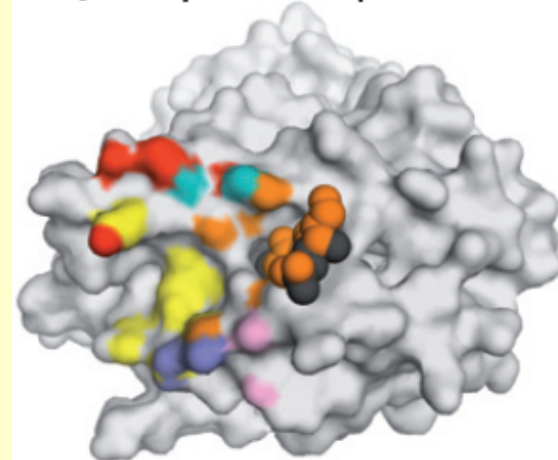
(iV α 24-J α 18) had been reported in human DN T cells



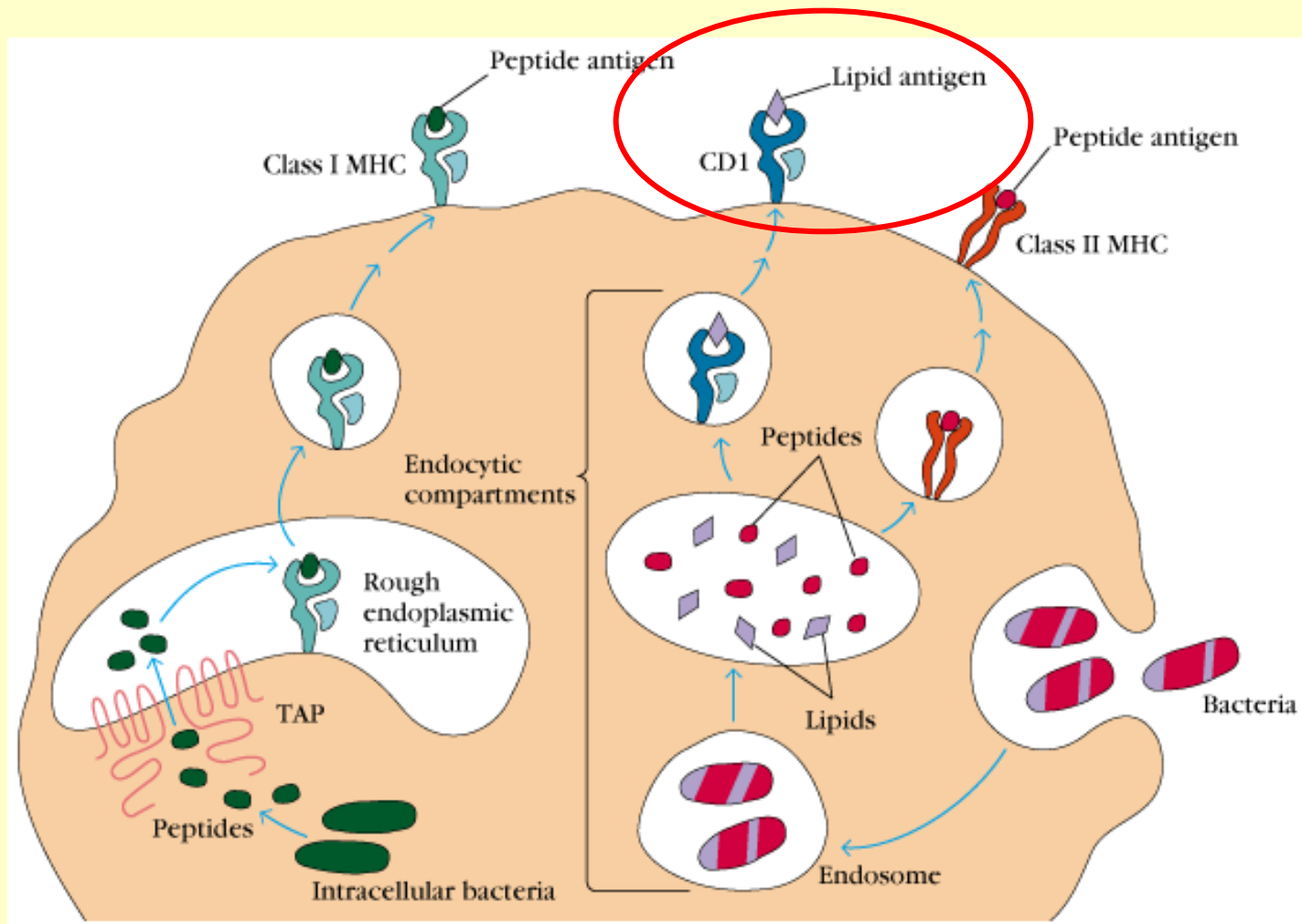
a V α 24J α 18-V β 11 TCR- α GalCer-CD1d

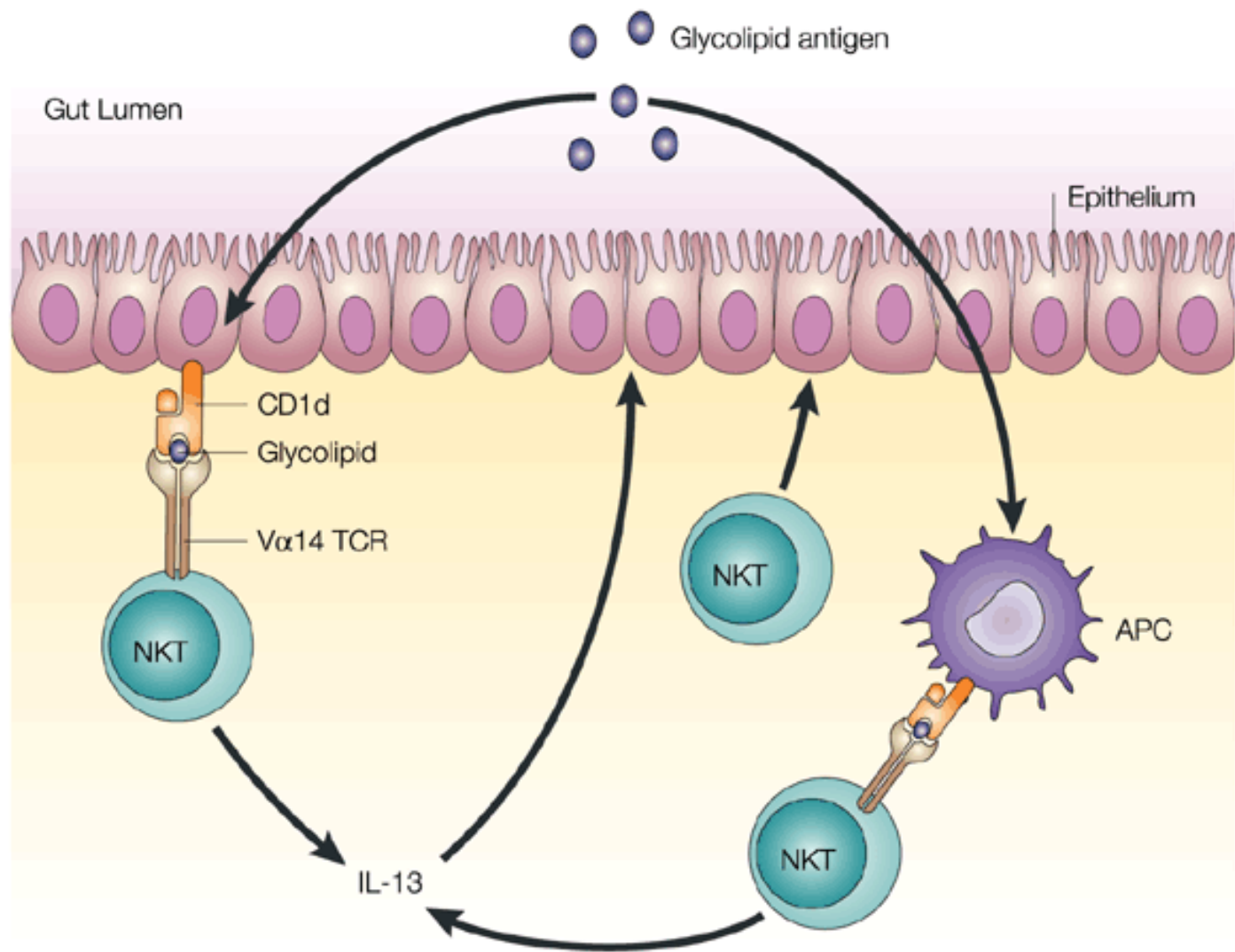


V α 1J α 26-V β 16 TCR-sulphatide-CD1d

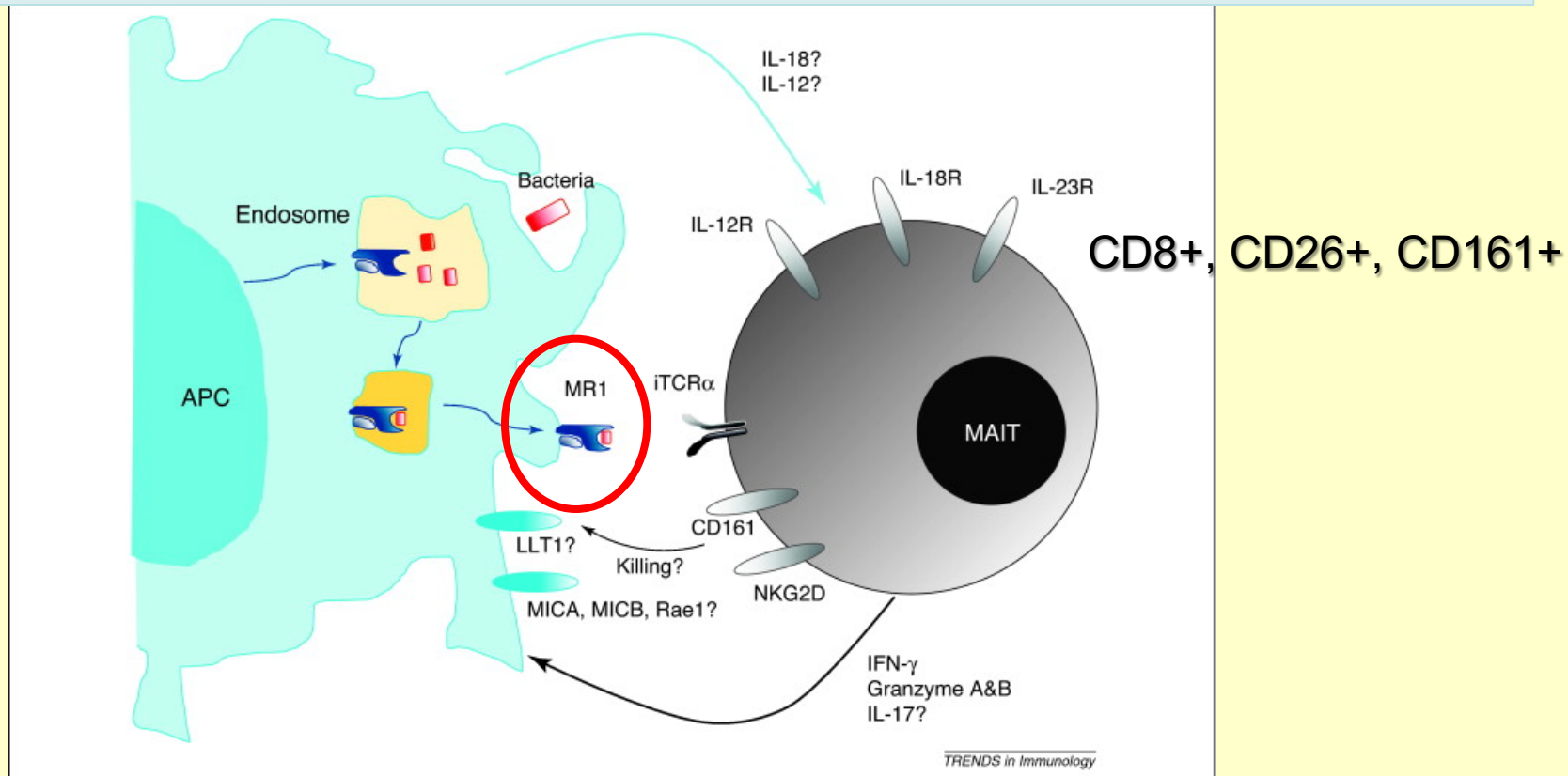


Bacterial lipid antigen presentation by CD1



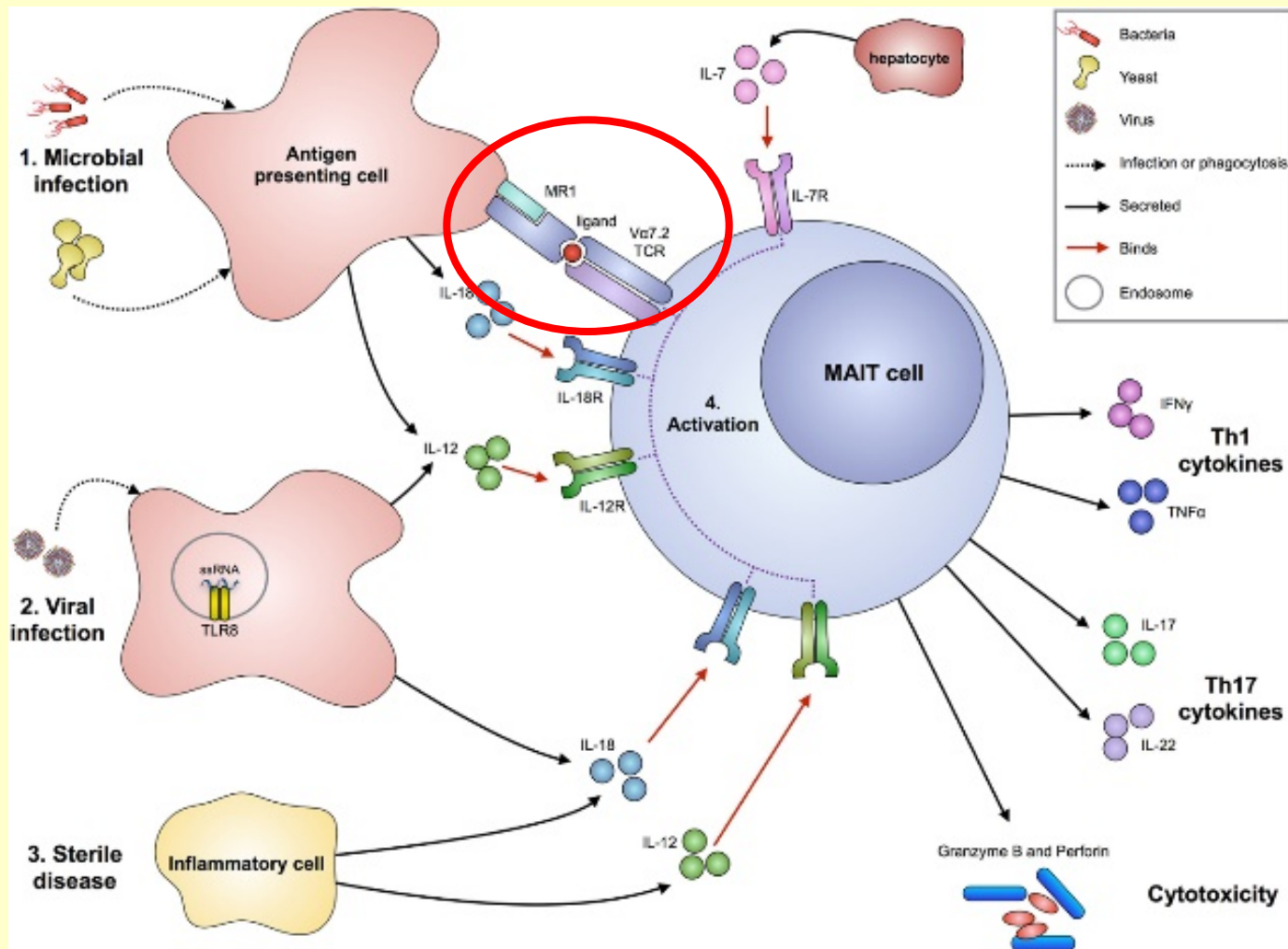


Mucosa-associated invariant T cells (MAIT)



1. MAIT cells arise from the thymus and are present predominantly in the gastrointestinal tract and associated organs such as MLNs and the liver.
2. In periphery by encountering the commensal flora, MAIT cells expand and acquire a memory phenotype.
3. They have antimicrobial function and help fight off bacterial infection by responding to infected cells and producing cytokines → Role in intestinal homeostasis.....
4. Innate sensors of infection as they accumulate early in infected tissues

Mucosa-associated invariant T cells (MAIT)



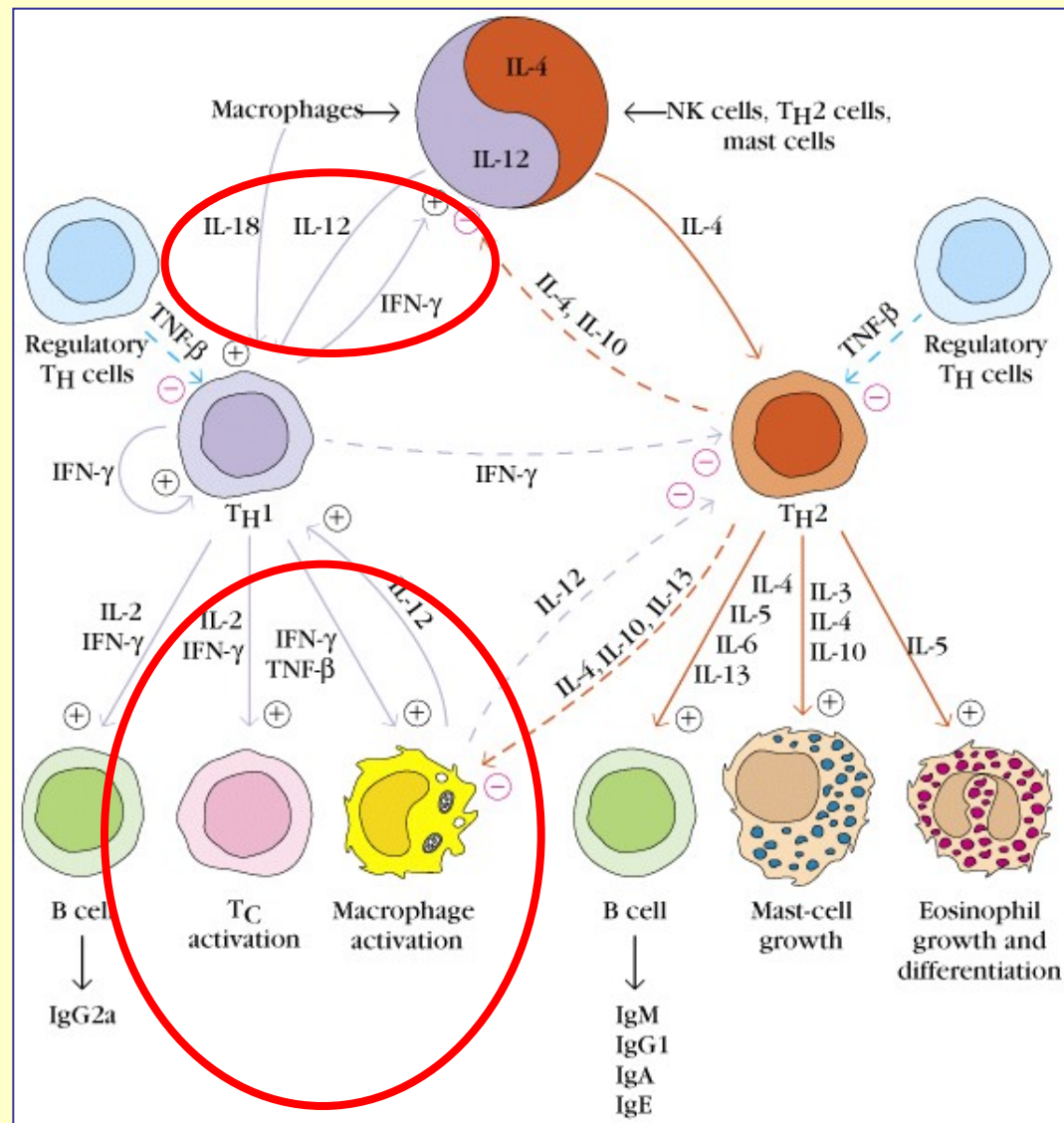
Mucosa-associated invariant T cells (MAIT)

- MAIT cells recognize MR1 and the associated microbial ligands on resident APCs, such as macrophages, dendritic cells or B cells, or directly on intestinal epithelial cells.
- In the absence of inflammation, MAIT cells participate in the control of the commensal flora or food-borne antigens by modulating APC function, or by regulating epithelial cell homeostasis and secretion of antimicrobial molecules.
- In case of bacterial invasion, however, the provision of the MR1-bound ligands to infected epithelial cells or APCs, in an inflammatory context (production of IL-18, IL-12 or IL-23, for which MAIT cells have receptors) induce production of IFN- γ by MAIT cells to prevent intracellular bacterial replication.
- Under certain conditions, MAIT cells can also secrete granzymes and other cytotoxic molecules to kill potential target cells, or IL-17 to activate innate immune cells such as neutrophils.

**T_H –cell mediated macrophage
activation**

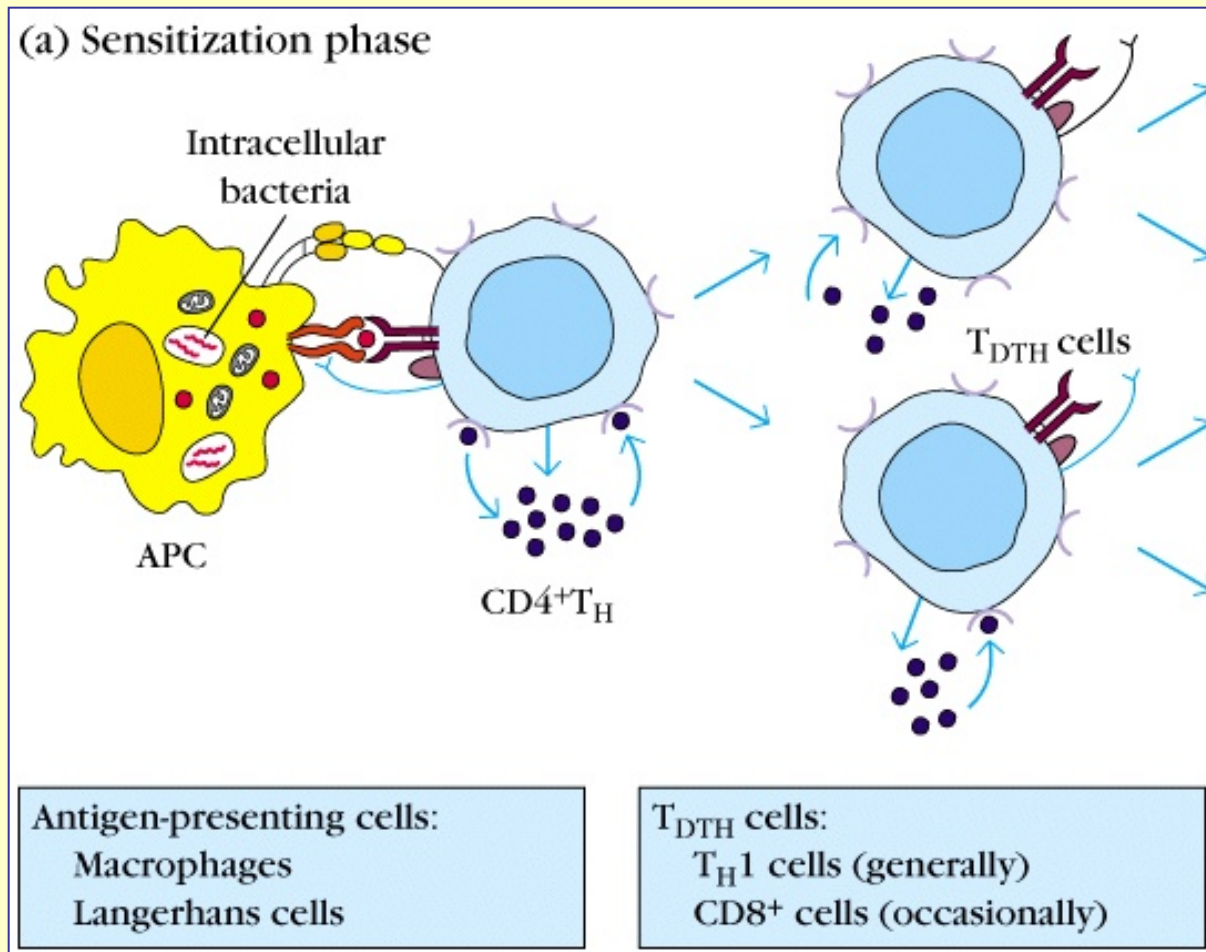
**Delayed type hypersensitivity
= DTH**

Th1 activates cellular immune responses



Immuneresponses against intravesicular microorganisms

I. Sensitization:



II. Effector phase

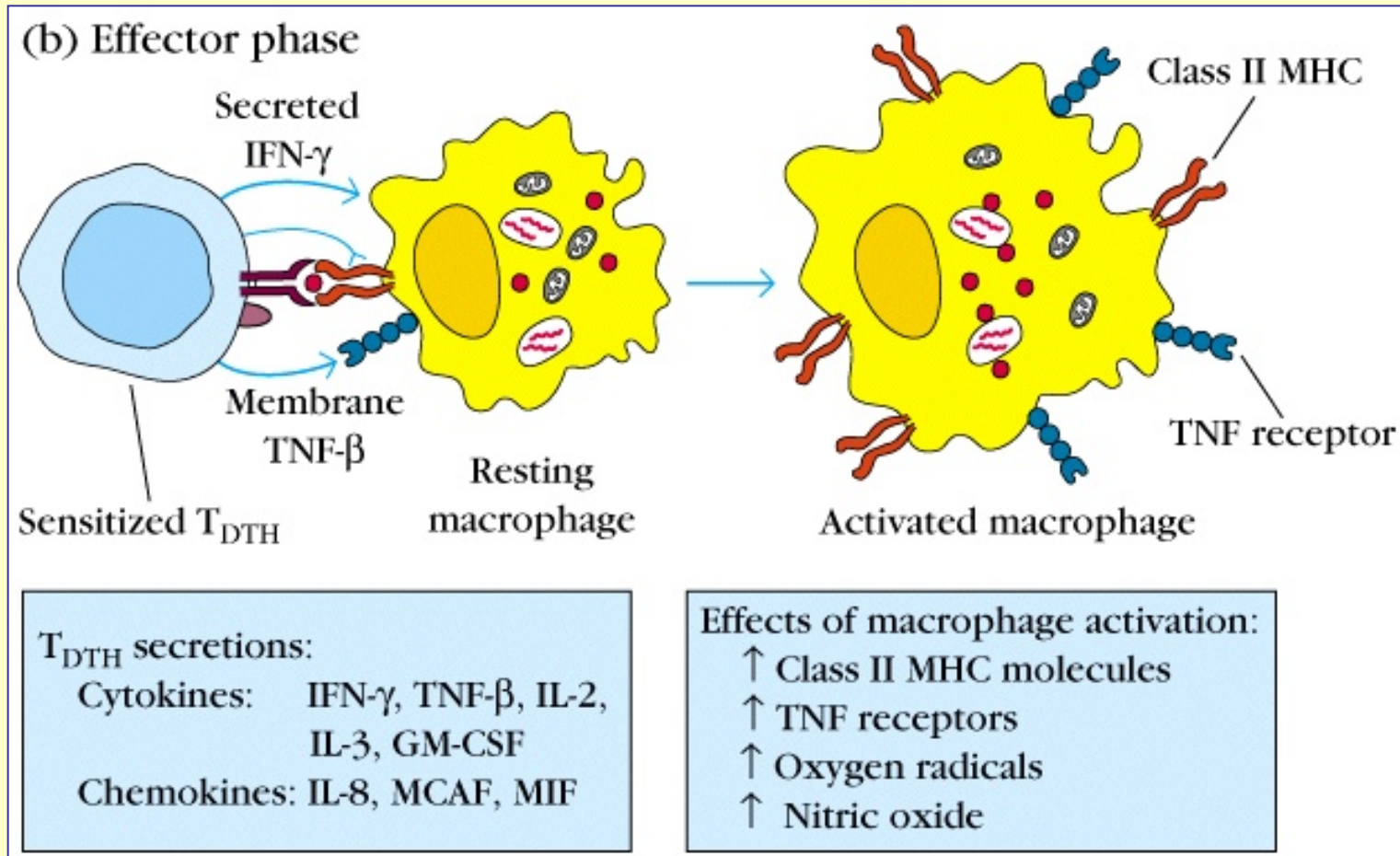
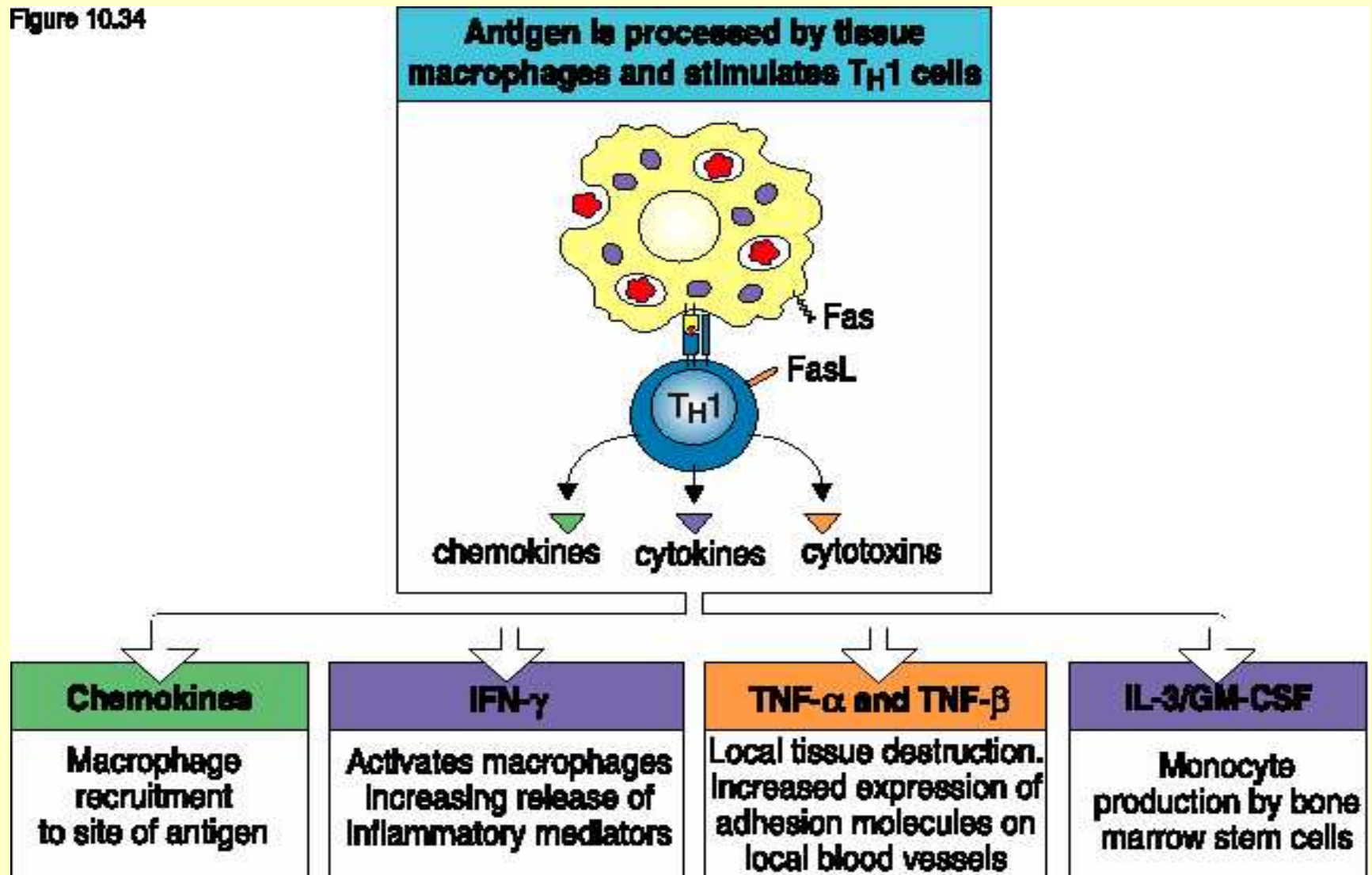
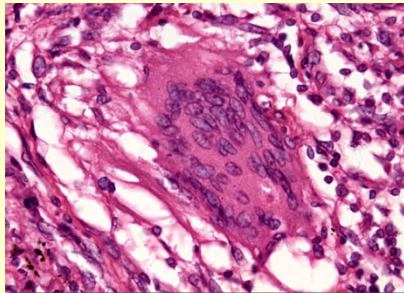
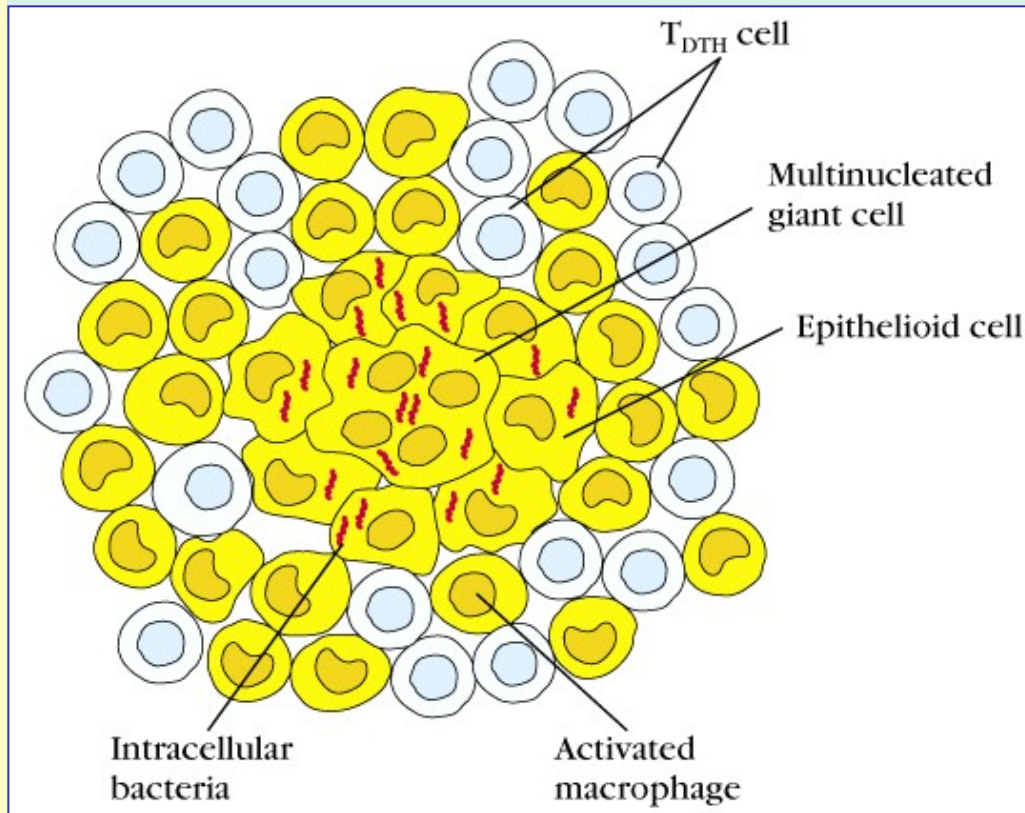


Figure 10.34

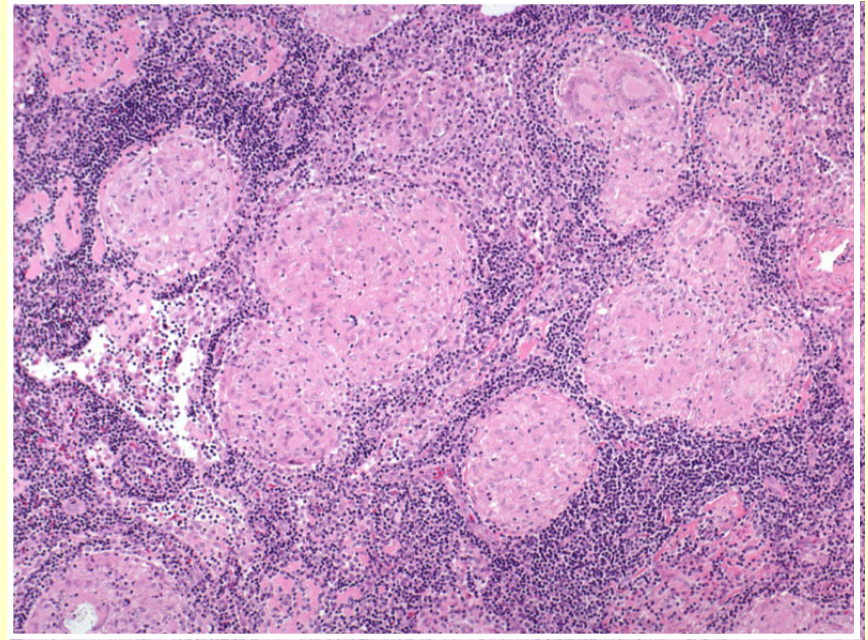


Prolonged DTH – granuloma formation



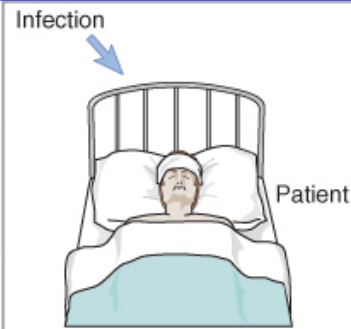
Miliaris tuberculosis

Prolonged DTH – granuloma formation



DTH

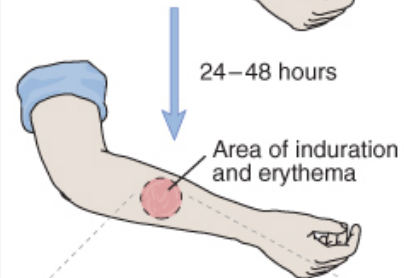
Sensitization:
primary
infection or
immunization



Elicitation:
challenge with
antigen



DTH reaction



**TABLE 14-3 INTRACELLULAR
PATHOGENS AND CONTACT ANTIGENS
THAT INDUCE DELAYED-TYPE
HYPERSENSITIVITY**

Intracellular bacteria

Mycobacterium tuberculosis

Mycobacterium leprae

Listeria monocytogenes

Brucella abortus

Intracellular fungi

Pneumocystis carinii

Candida albicans

Histoplasma capsulatum

Cryptococcus neoformans

Intracellular parasites

Leishmania sp.

Intracellular viruses

Herpes simplex virus

Variola (smallpox)

Measles virus

Contact antigens

Picrylchloride

Hair dyes

Nickel salts

Poison ivy

Poison oak

Effect of contact antigens

