From: diann e@aol.com

Date: Tue, 23 Aug 2005 09:56:17 EDT Subject: CA PRI and NF2

To: smg8@colum bia.e du

Dear Dr. Greenberg,

As I read more and more about NF2, and Rac, Ras and Cdc42, it would seem CAPRI would have some role in NF2. What are your thoughts about that? Could you email me your article on CAPRI? I was only able to access the abstract.

My son has NF2. He is half blind and half deaf and is fighting many more brain and spinal tumors, which are progressing.

I've been following Pak inhibitors for NF2.

Please help me save my son.

NF2: Neurofibromatosis 2, an inherited autosomal dominant disease characterized by multiple CNS tumors (schwannomas, meningiomas, and ependymomas) resulting from mutations in merlin

Merlin: An actin binding protein that inhibits Ras-induced foci-formation and associated AP-1 activity. Merlin blocks Ras-induced Rb phosphorylation, and inhibits the increase in cyclin D1 levels.

Rac, Ras, Cdc42: GTPases involved in cell signaling. Ras activates the MAP kinase pathway. Rac and Cdc42 activate cytoskeletal alterations and activation of the protein kinase, PAK

PAK: A protein serine/threonine kinase

CAPRI: An adaptor protein for Rac

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The NF2 Tumor Suppressor Gene Product, Merlin, Inhibits Cell Proliferation and Cell Cycle Progression by Repressing Cyclin D1 Expression

Guang-Hui Xiao, ¹ Ryan Gallagher, ¹ Justin Sheller, ¹ Kristine Skele, ¹ Deborah A. Altomare, ¹ Richard G. Pestell, ² Suresh Jhanwar, ³ and Joseph R. Testa ¹* MAGRATTA U., FESCHI, SHIGHMINWAF, MILOVANDER R. EASIN Human Genetics Program For Chine Cancer Coster, Pathological, Pennelyhumid; Populment of Oncology, Londonlin Comprehensive Cancer Center, Geograms University, Washington, D.C.; and Department of Medicine, Mesonod Shoun Kettering Cancer Center, New York, New York; Received 14 September 2004Rentrucle for modification 25 Orober 2004Accepted 7 December 2004

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The Problem of Biological Complexity and "Information Overload"

Analogy: Structural Programming

In 1968 computer scientist Edsger Dijkstra wrote a nowclassic short note entitled: "GOTO Considered Harmful." (Dijkstra (1968) Comm. ACM 11(3):147-148).

In it he criticized programming constructs that allowed undisciplined jumps in flow of control leading to so-called 'spaghetti code,' which made larger programs unwieldy



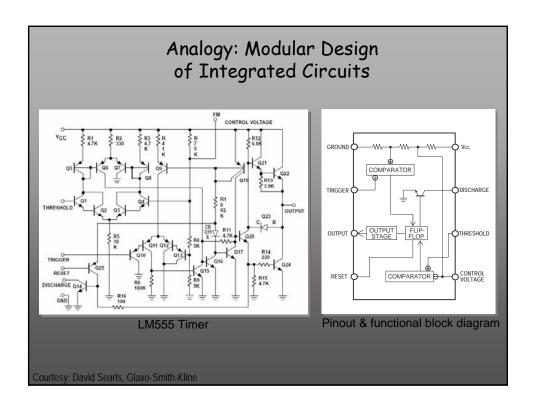
Courtesy: David Searls, Glaxo-Smith-Kline

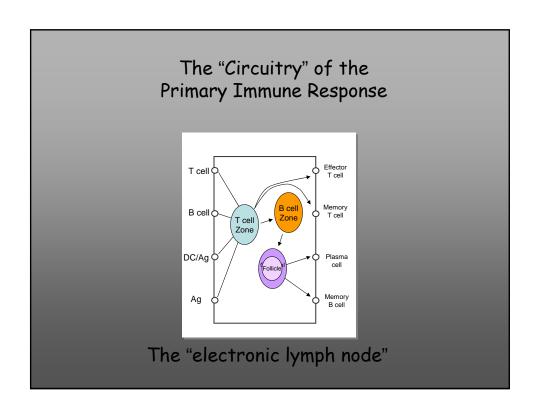
Analogy: Structural Programming

He helped to launch the structured programming movement, which enforced a strictly nested modularity for more manageable growth, debugging, modification, etc.



Courtesy: David Searls, Glaxo-Smith-Kline





Immunology-The Whirlwind Tour

Ontogeny of the Acquired Immune System

Step 1. Lymphocytes develop in the bone marrow and thymus

Step 2. Naïve lymphocytes circulate in the blood and lymph

Step 3. The primary immune response occurs in the lymph nodes and spleen

Step 4. Lymphocytes exit the lymph nodes and spleen and become effector lymphocytes--they produce antibody (B cell-derived plasma cells) and become competent to produce cytokines, particularly CD4+ T cells, and kill (CD8+ T cells)

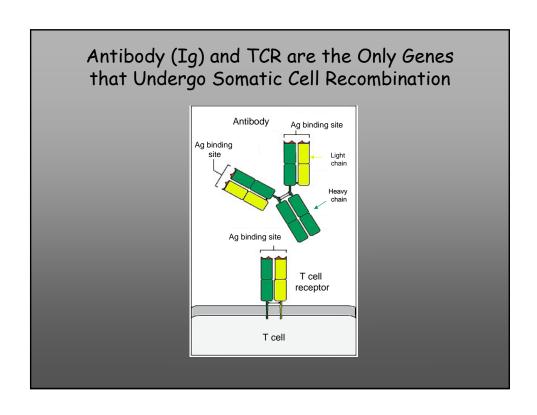
Stages in the Development of a Primary Immune Response

Step 1. Lymphocytes develop in the bone marrow and thymus

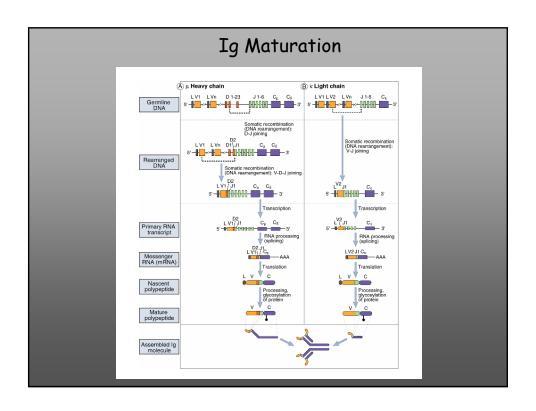
The immune repertoire develops

Lymphocytes develop early in life in the 1° lymphoid organs (bone marrow and thymus). They are competent to respond to a broad array of antigens. Diversity in antigen recognition is accomplished by random rearrangements of the **immunoglobulin (lg) gene** in B cells and the **antigen receptor gene** in T cells (**TCR**).

Those lymphocytes that survive do so through **positive** selection. Unproductive or inefficient interactions between lymphocyte and antigen results in death by **negative selection**.



How is Diversity in Antigen Recognition Achieved?



What Happens in the Thymus?

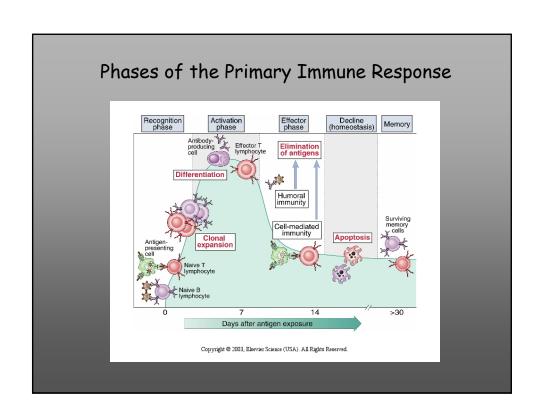
Ordered TCR gene rearrangement and TCR expression

Ordered expression of surface molecules, including the TCR, CD4 and CD8

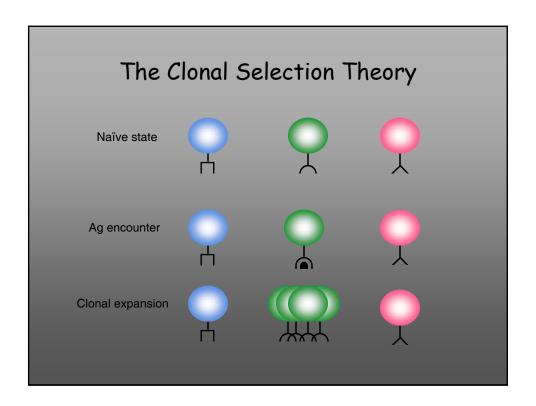
Thymocyte Education: Selection of the T cell repertoire through negative selection and positive selection

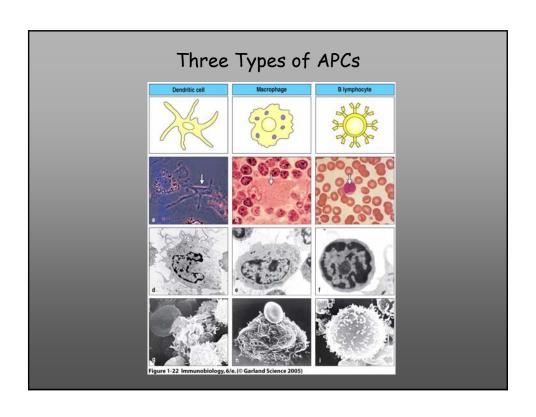
The Primary Immune Response

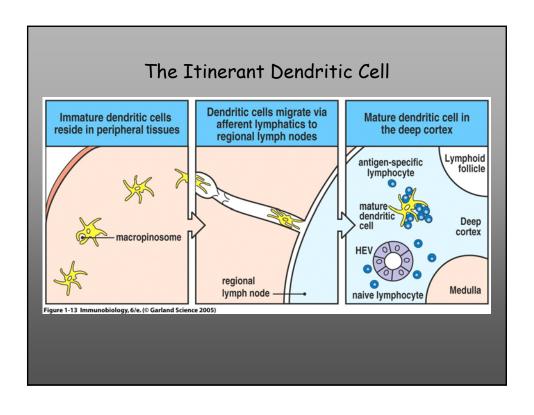
Input: Ag-loaded APCs and naïve lymphocytes Output: Effector and memory lymphocytes

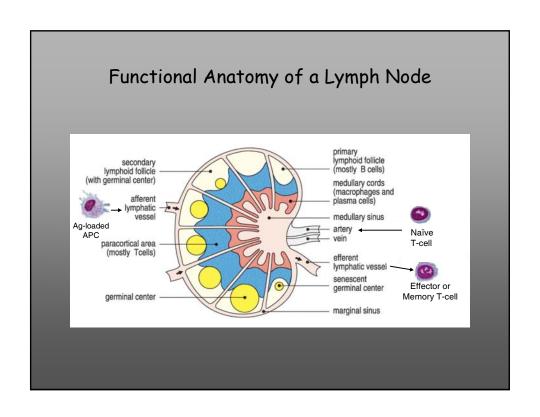


How Do the Relevant Lymphocytes "Know" to be Activated?

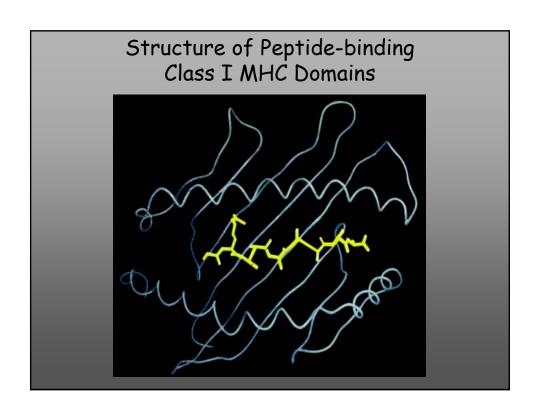


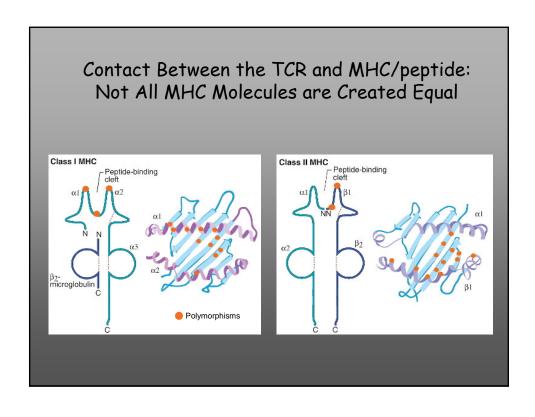






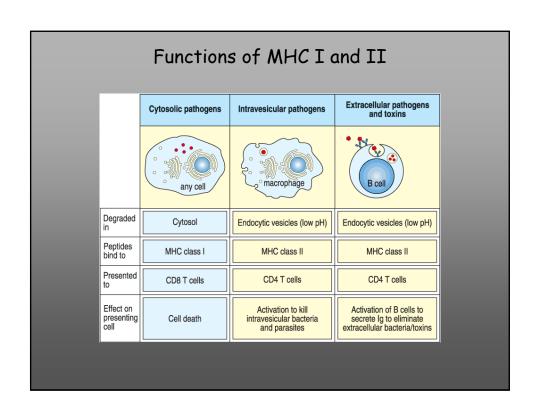
The Antigen "Vetting" Process: Who Decides Which Antigens are Presented

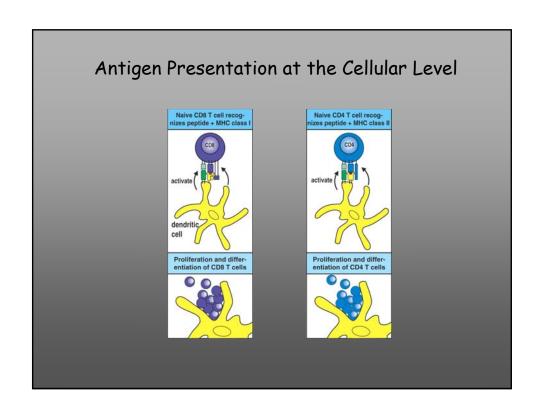


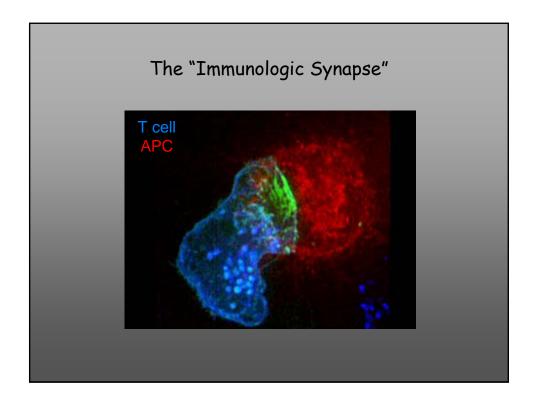


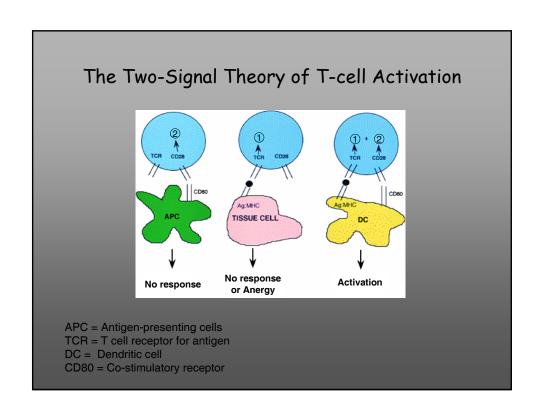
The "Fit" Between MHC Molecules and Peptide Defines MHC Restriction

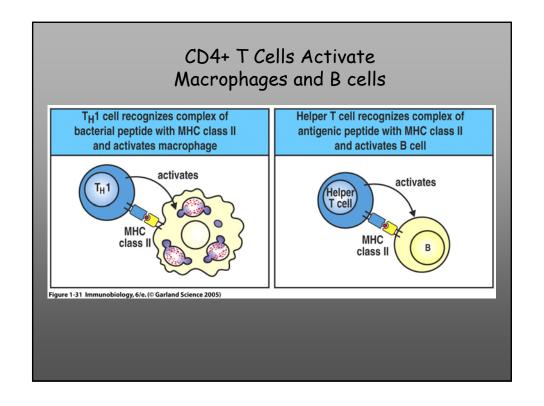
Polymorphisms (allelic differences within a population) of the MHC loci account for the variability of the immune response between individuals

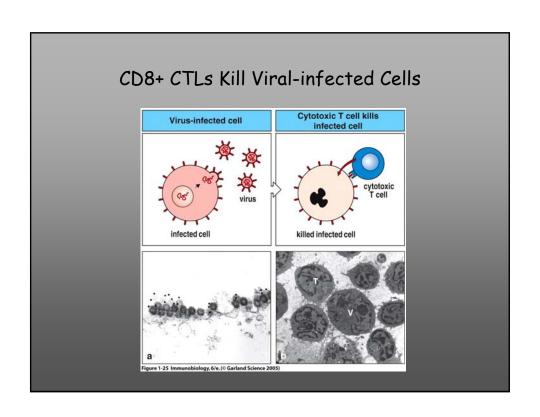


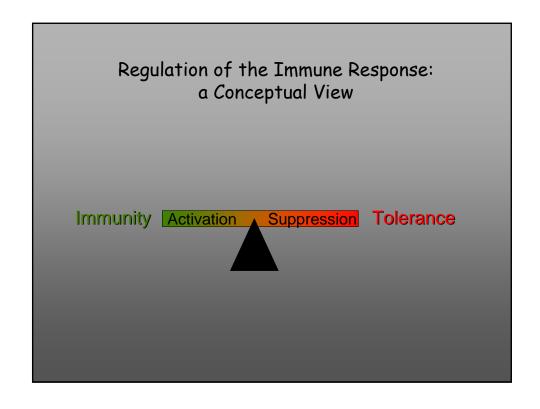


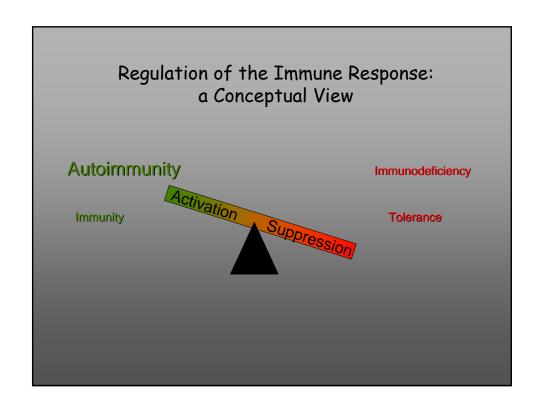


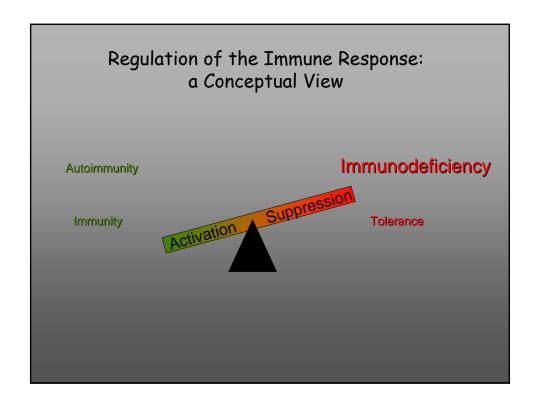
















Summary

- The immune system is complex. Try to understand it in terms of specific functional modules.
- 2. Diversity in antigen recognition is accomplished, in part, by rearrangements in the lg and TCR loci. This occurs in the bone marrow and thymus, respectively.
- 3. The T and B cell repertoire determines the spectrum of antigens that can be recognized in an individual's lifetime. The nature of this repertoire is determined by the Major Histocompatibility Complex (MHC), which binds peptide antigen.
- 4. In a primary immune response, antigen presenting cells (APCs) present antigen bound to MHC molecules to T cells in the lymph nodes and spleen. T cells "help" B cells to develop further and clonally expand in germinal centers of these organs.
- 5. Lymphocytes exit these organs to become effector or memory cells. Effector cells secrete Ab (plasma cells) or cytokines (CD4+ T cells) and kill virally-infected cells (CD8+ T cells). Memory cells re-circulate until they encounter Ag again.
- The immune system is tightly regulated. It exists in a delicate balance of immunity and tolerance. A lack of tolerance to self antigen coupled to excessive immune activation (or inadequate immune suppression) can lead to autoimmunity.