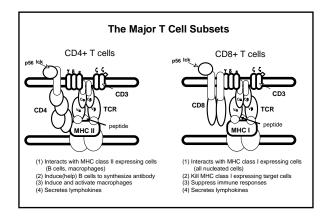
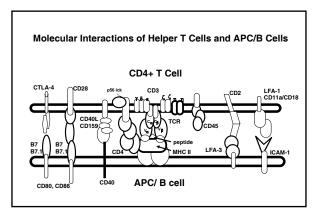
# T Cell Effector Mechanisms I: B cell Help & DTH

Ned Braunstein, MD

# Implications/Overview

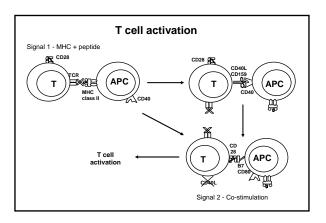
- T cell activation is highly regulated and involves both antigen plus context
  - APC
    - MHC molecule
      - antigen processing & presentation
    - · Other cell surface molecules
      - accessory molecules and co-stimulators
  - Cytokines (and chemokines)



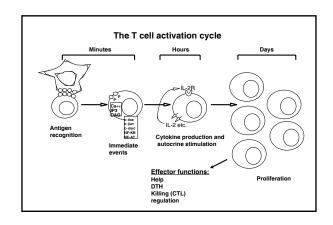


# Observations

- T cells responses to foreign proteins are readily made in setting of infection
  - Immunization to foreign protein provided outside the setting of infection requires adjuvant
- T cells capable of responding to self MHC + plus peptide can be readily identified in healthy individuals
  - Autoimmune disease is rare



Naïve T cells are activated by DCs presenting antigen in LNs where they mature into effector cells

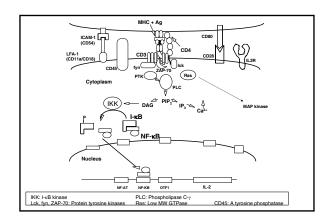


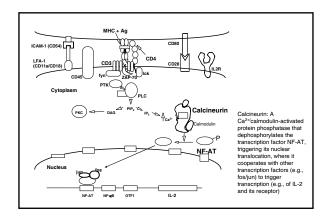
# The Biology of Dendritic Cells: Antigen capture and presentation to T cells

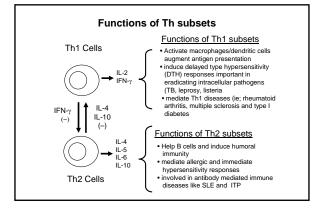


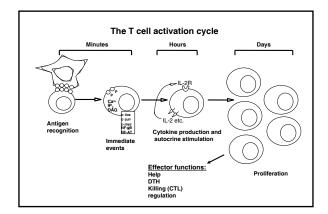
Antigens are captured by DCs in peripheral tissues and processed to form MHC-peptide complexes. As a consequence of antigen deposition and inflammation, DCs begin to mature, expressing molecules that will lead to binding and stimulation of T cells in the T-cell areas of lymphoid tissues. If the antigen has also been bound by B cells, then both B and T cells can cluster with DCs. After activation, B blasts move to the lining of the intestine, the bone marrow, and other parts of the lymphoid tissue with some becoming antibody-secreting plasma cells. T blasts leave the blood at the original site of antigen deposition, recognizing changes in the inflamed blood vessels and responding vigorously to cells that are presenting antigen. This limits the T-cell response to the site of microbial infection. Banchereau, J. and Steinman, R. Nature 392, 245 - 252 (1998)

Primed effector T cells can be restimulated in tissue by antigen + MHC without requiring costimulation

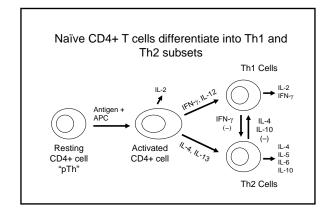


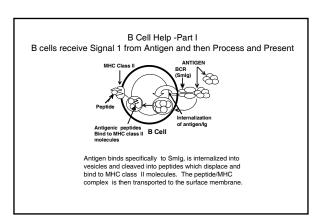


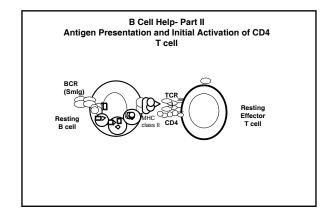


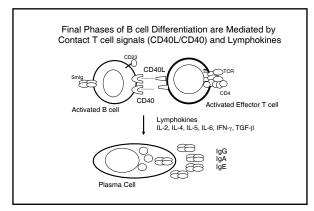


# Major Functions of T Lymphocytes (1) Induction and Activation of B cells (Help)required for most antibody responses (2) Delayed Type Hypersensitivity (DTH) - important in elimination of intracellular pathogens (virus, fungi and mycobacteria) (3) Cell mediated Cytotoxicity (Killer function)important in the immune response to virus infected cells and cancer cells (4) Suppressor Cell Functionregulates the cell mediated and antibody responses









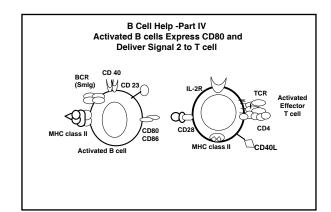
# B Cell Help -Part III B Cells Receive Signal 2 From T Cells via CD40 CD40 Activated B Cell Triggering of B cell proliferation Rescue from apoptosis Induction of Ig isotype class switching Up-regulation of CD80 and CD86 Germinal center formation Up-regulation of CD23 Downregulation of CD23 Downregulation of CD20

# The Hyper IgM Syndrome (HIM)

The Hyper IgM Syndrome (HIM) is an X chromosome-linked Ig deficiency characterized by low serum levels of IgG, IgA and IgE with normal numbers of circulating IgM expressing mature B cells. Germinal centers and splenic follicles due not develop.

Affected patients (usually males) are susceptible to pyogenic infections, autoimmune disease and lymphoproliferative disease. In addition, patients are also susceptible to Pneumocystis carini infections.

The genetic defect in the majority of HIM patients is associated with mutations in the gene encoding CD40L and can be corrected functionally by soluble CD40 ligand, in wirro. A few HIM patients have normal CD40L but defects in CD40 signaling.

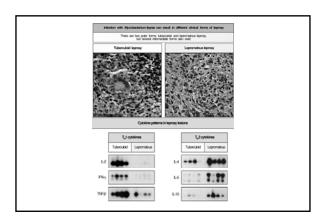


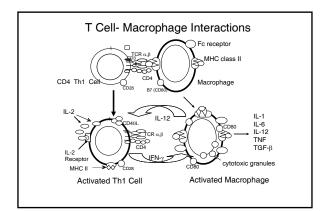
# Major Functions of T Lymphocytes

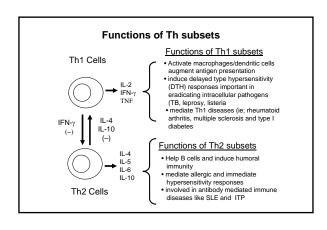
- (1) Induction and Activation of B cells (Help)required for most antibody responses
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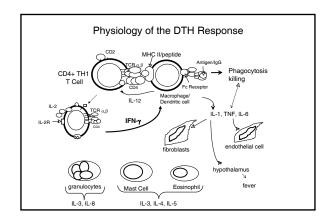
# Delayed Type Hypersensitivity (DTH)

- a. DTH is initiated principally by CD4+ Th1 cells and is the primary defense mechanism against intracellular parasites including the mycobacteria (TB), fungi and intracellular bacteria (listeriae monocytogenes).
- b. The cognitive phase of DTH involves CD4+ T cell macrophage/dendritic cell (MHC class II/peptide) interaction resulting in the local secretion of lymphokines.
- c. The effector phase of DTH is effected by lymphokines which activate macrophages to secrete lysozyme, TNF, IL-1 and IL-12 as well as chemotactic and migration inhibitory factors restricting granulocytes, macrophages and eosinophils to the site of inflammation.









# Summary

- To cells are activated by APCs; MHC Class I activates CD8+ T cells and MHC Class II activates CD4+ T cells. Among the functions of these cells are helping B cells (Th cells), secreting cytokines (CD4+ and CD8+ T cells), and mediating cytotoxicity (CD8+ T cells, only).
- 2. The molecular basis of T cell help to B cells is CD40 on the B cells interacting with CD40 L on the T cells, and the secretion of cytokines (e.g., IL-4) from the T cells. This occurs in secondary lymphoid organs.
- 3. The signal transduction of T cells is complex, but involves early signals (protein tyrosine kinases, Rasactivated MAP kinases, and PLC. PLC is required for the production of IP<sub>3</sub>, which triggers Ca<sup>3+</sup>-dependent activation of calcineum and NF-AT, and DAG, which activates PKC and, ultimately, NF-kB.
- Th cells can be polarized into Th1 or Th2 subtypes, defined by the cytokines they secrete. Learn these cytokines.
- 4. Delayed type hypersensitivity (DTH) is mediated by activated macrophages, and results in the secretion of Th1 cytokines (e.g., IFN-γ and IL-2). It is involved in many disease states, such as tuberculosis and tuberculoid leprosy.