

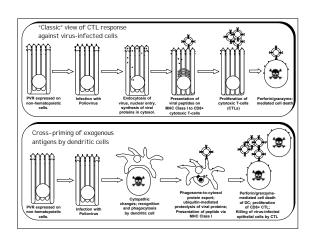
Antigen Presentation Pathways; Two Old:

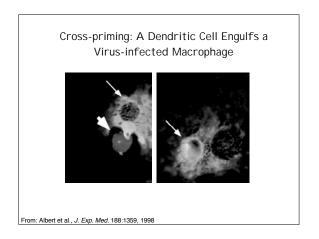
MHC Class I presentation of peptides MHC Class II presentation of peptides

and Two New:

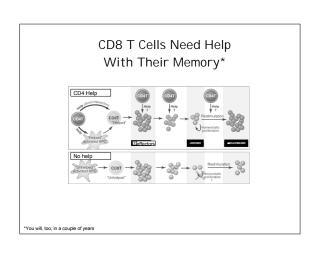
Cross-priming of exogenous peptides (MHC Class I) CD1-mediated presentation of glycolipids

Question: How do viruses that don't infect "professional APCs" such as dendritic cells elicit a primary immune response? After all, virally-infected cells normally don't traffic to 2° lymphoid organs





Question: Does development of the cytotoxic T cell response require "help" from CD4 cells (analogous to help for B cells)?

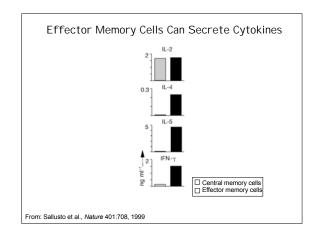


From: Hammarlund et al., Nature Med. 9:1131, 2003

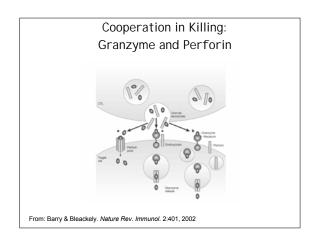
Differences	Betweei	n Selected T Cell Subsets
Phenotype	Naïve	
Migration	LN, spleen	
Cell cycle	-/+	-
Cytokine secretion	-	-
Peripheral LN homing (L-Selectin; CD62L)	+++	
Adhesion Molecules (Integrins, CD44)	+	-
Chemokine Receptors (partial list)	CCR7	
IL-2 Receptor (CD25)	-	-
FasL		_

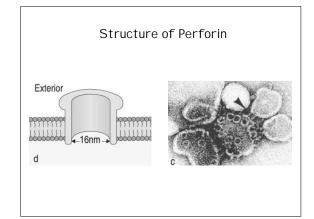
Phenotypic Differences Between Selected T Cell Subsets

Dhanatuna	Naïve	F	Memory	
Phenotype		Effector	Central	Effector
Migration	LN, spleen	Inflamed tissue	LN	Inflamed tissue
Cell cycle	-/+	++	+	++
Cytokine secretion	-	+++	-	+++
Peripheral LN homing (L-Selectin; CD62L)	+++	-	+++	-
Adhesion Molecules (Integrins, CD44)	+	+++	+++	+++
Chemokine Receptors (partial list)	CCR7	CCR5 CXCR4	CCR7	CCR5 CXCR4
IL-2 Receptor (CD25)	-	++	+	+/-
FasL	-	+++	-	+++

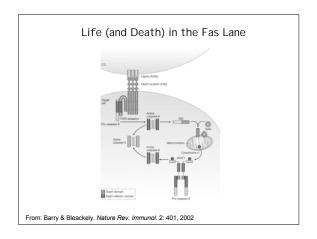


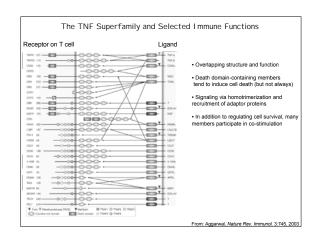
CYTOTOXIC T-LYMPHOCYTE:
A specialized white blood cell
responsible for eliminating
unwanted body cells (e.g.
cancer) is killing a cell infected
with the influenza virus

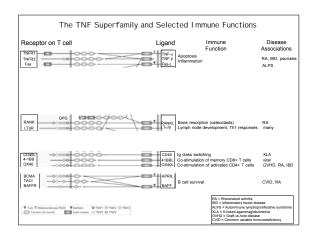


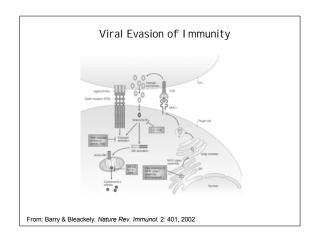


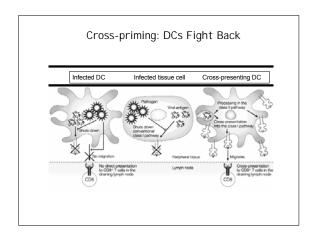
Human Diseases Involving Defective Granule Killing*					
Disease	Gene	Clinical Manifestations			
Chediak-Higashi Syndrome	CHS1	Lysosomal inclusions in all leukocytes Recurrent bacterial infections Decreased NK cell function Oculocutaneous albinism (melanosome defect) Bleeding (platelet storage granule defect)			
Griscelli Syndrome	Rab27a	Partial albinism Hepatosplenomegaly (lymphohistiocytic infiltration) Decreased NK cell function			
Hermansky-Pudlak Syndrome	HPS1	Oculocutaneous albinism (melanosome defect) Bleeding (Platelet storage granule defect) Pulmonary fibrosis (Type II cell surfactant body inclusions)			
Familial Hemophagocytic Lymphohistiocytosis	Perforin (30% of cases)	Hepatosplenomegaly (accumulation of activated T-cell and macrophages) Decreased NK cell function Pancytopenia			
*Do <u>not</u> memorize this list					

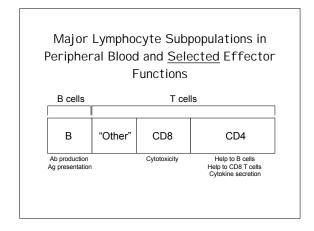


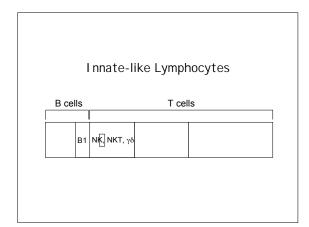


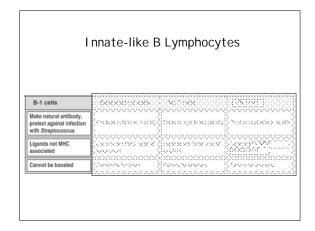


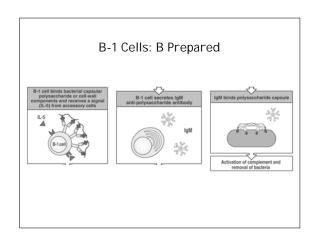


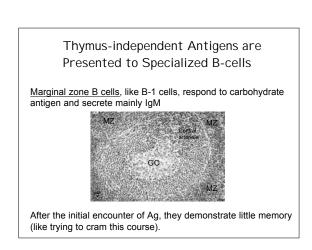


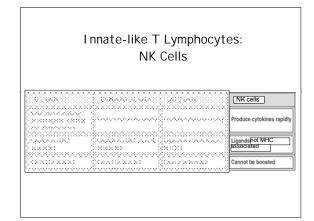


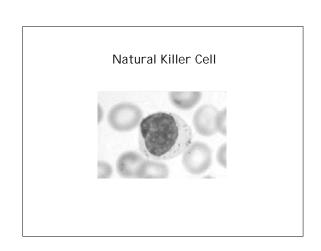




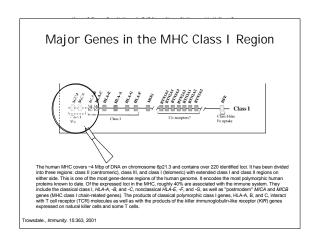


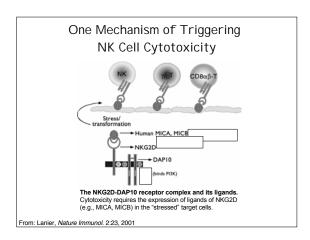


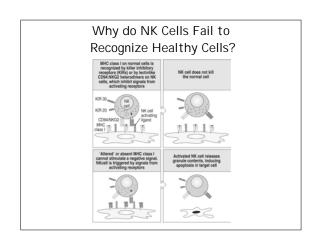


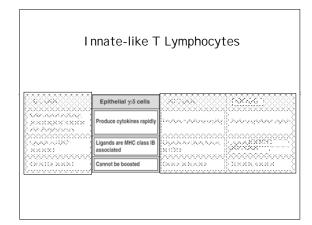


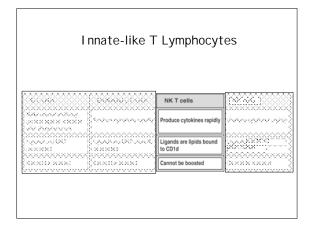
How do NK Cells Recognize Their Targets?

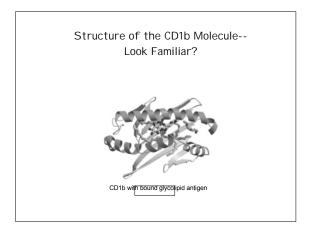




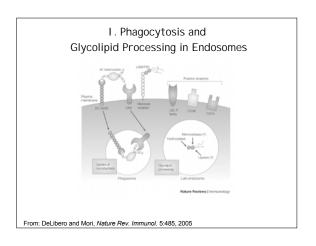


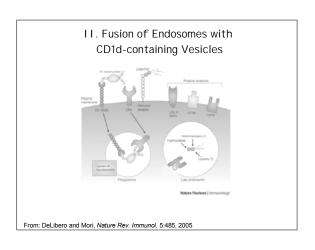


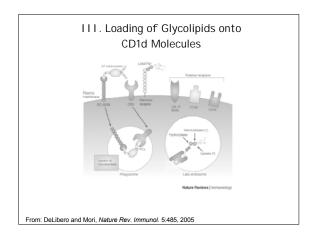


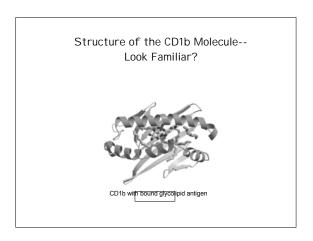


Processing of Glycolipid Antigens from *M. tuberculosis* by APCs:

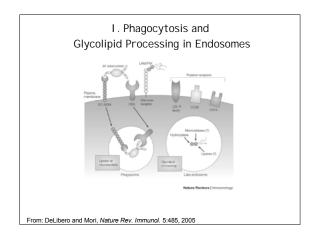


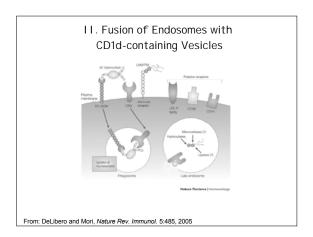


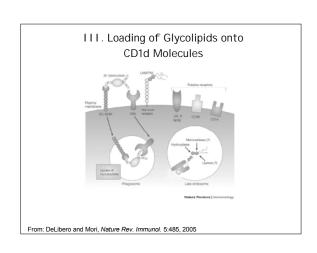


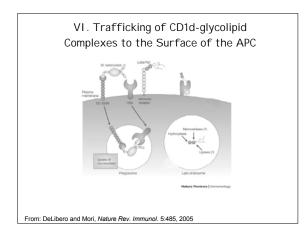


Processing of Glycolipid Antigens from *M. tuberculosis* by APCs:









Question: Do lymphocytes of the acquired immune system even care about lymphocytes of the innate immune system?

Innate Immune Lymphocytes Trigger Dendritic Cell Maturation Expanded innate Immune Lymphocytes Trigger Dendritic Cell Maturation Expanded innate Indian In

From: Munz et al., J. Exp. Med. 202:203, 2005

Summary

- For cytotoxic CD8 T-cells, ligation of the TCR by MHC l/peptide + co-stimulation results in release of granzymes and perforin and/or FasL, leading to apoptosis of the target cells.
- Viruses evade host defense, in part, by down-regulating MHC Class I. Uninfected dendritic cells circumvent this by "cross-priming": phagocytosis of virus-infected cell and presentation of "exogenous" viral antigens on MHC Class I.
- $3.\,CD8$ T cells can function without CD4 help, but need CD4 help to develop into effective memory cells. CD4 memory cells live for years; central memory cells home to lymph nodes and effector memory cells home to inflamed tissue.
- 4. NK cells lack TCRs, but instead express both activating and inhibitory (e.g., KIRs) receptors at their surfaces. The relative expression and ligation of these receptors determines the outcome (i.e., killing or not) of the NK effector response.
- 5. Innate immune B-cells (e.g., B-1 cells and marginal zone B cells) recognize carbohydrate antigens, secrete IgM, and are not long-lived.
- 6. Innate immune T-cells (γ 8 T-cells, and NK T cells) recognize non-peptide antigens in non-classical MHC-like molecules. They mediate cytotoxicity, rapid cytokine secretion, and trigger maturation of DCs (and therefore initiate acquired immunity).