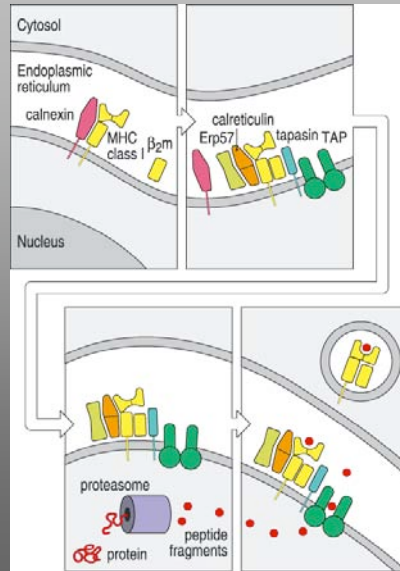
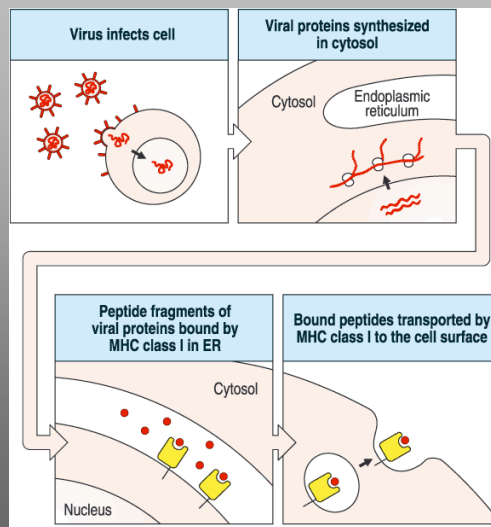


## Peptide Loading on MHC Class I in the ER



## What Cells Do When the Blitz is On



## Antigen Presentation Pathways;

Two Old:

MHC Class I presentation of peptides

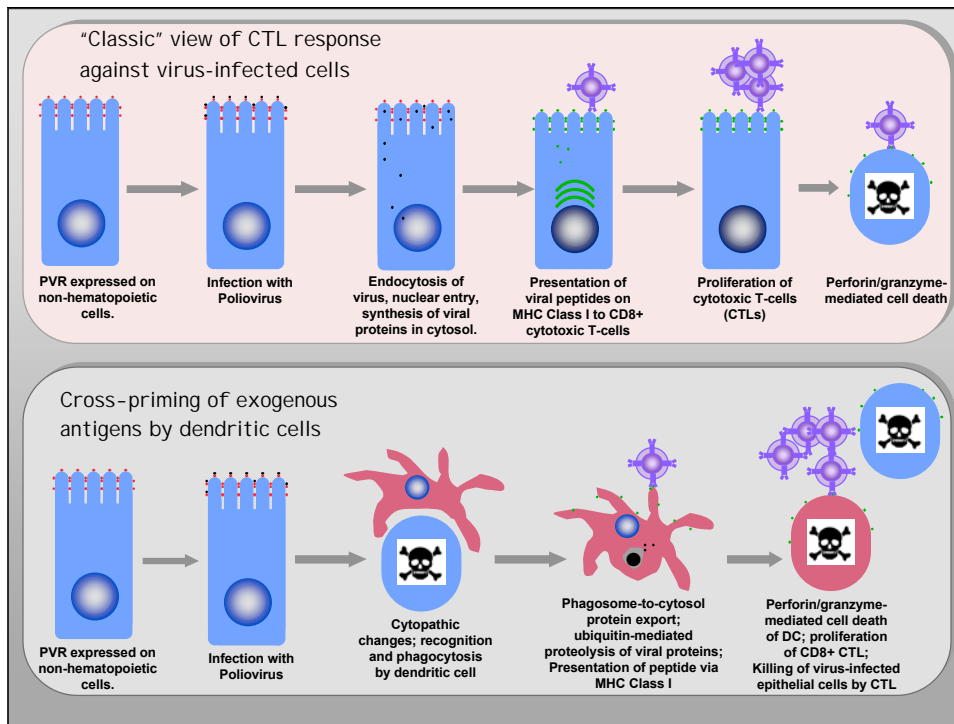
MHC Class II presentation of peptides

and Two New:

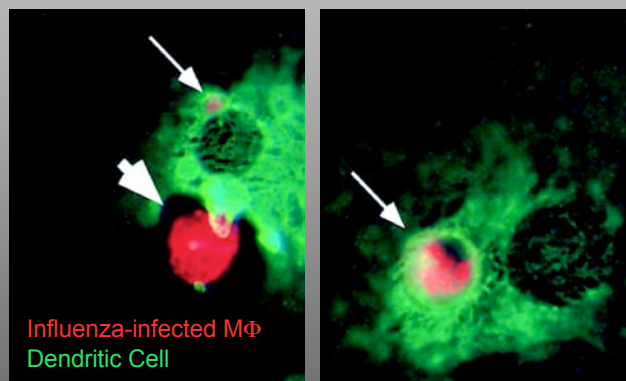
Cross-priming of exogenous peptides (MHC Class I)

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



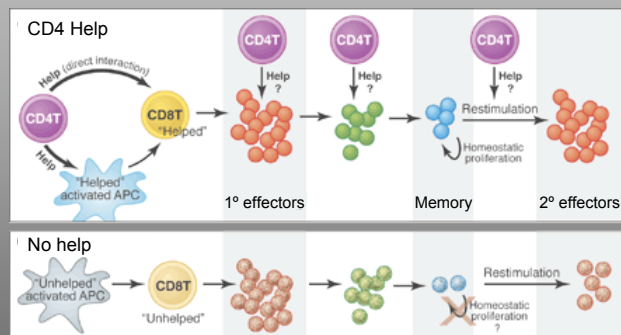
## Cross-priming: A Dendritic Cell Engulfs a Virus-infected Macrophage



From: Albert et al., *J. Exp. Med.* 188:1359, 1998

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

### CD8 T Cells Need Help With Their Memory\*



\*You will, too, in a couple of years

## Memory T-cells Don't Forget

**Table 1 Estimated survival of virus-specific T-cell memory after smallpox vaccination**

Vaccinations	Volunteers with CD4 <sup>+</sup> T-cell memory <sup>a</sup>			<i>t</i> <sub>1/2</sub> of CD4 <sup>+</sup> T cells <sup>f</sup>
	20–30 years <sup>b</sup>	31–50 years	51–75 years	
1	100% (16/16)	89% (70/79)	52% (23/44)	10.6 (0–17)
2	83% (10/12)	78% (29/37)	57% (4/7)	8.3 (0–14.1)
3–14	82% (23/28)	91% (29/32)	ND <sup>d</sup>	12.4 (0–20.5)
Vaccinations	Volunteers with CD8 <sup>+</sup> T-cell memory			<i>t</i> <sub>1/2</sub> of CD8 <sup>+</sup> T cells
	20–30 years	31–50 years	51–75 years	
1	50% (8/16)	49% (39/79)	50% (22/44)	15.5 (0–27.1)
2	42% (5/12)	38% (14/37)	57% (4/7)	8.1 (0–16.9)
3–14	46% (13/28)	50% (16/32)	ND	9.0 (0–18.1)

<sup>a</sup>Percentage of volunteers with vaccinia-specific T-cell memory is based on the proportion of immunized participants with >10 IFN- $\gamma$ /TNF- $\alpha$ <sup>+</sup> T cells per 10<sup>6</sup> CD4<sup>+</sup> or CD8<sup>+</sup> T cells, respectively. This cutoff provides 100% sensitivity at 1 month after vaccination or revaccination and 92–96% specificity, based on the vaccinia-induced IFN- $\gamma$  response in T cells from unvaccinated volunteers. <sup>b</sup>Years after the last smallpox vaccination. <sup>c</sup>Estimated half-life (*t*<sub>1/2</sub>) in years (and 95% confidence interval in parentheses) is based on linear regression analysis using data from Figures 1 and 2. N.D., not determined.

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

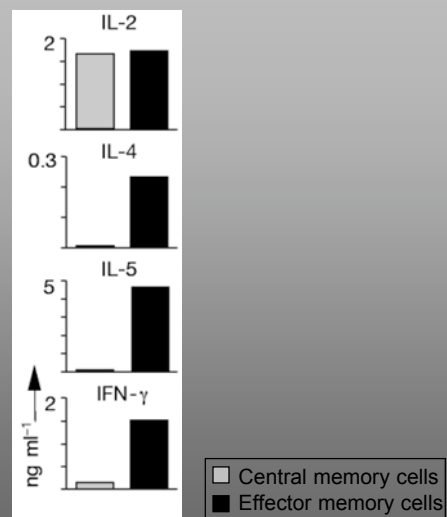
## Differences Between Selected T Cell Subsets

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

Phenotype	Naïve	Effector	Memory	
			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	-	+++	-	+++

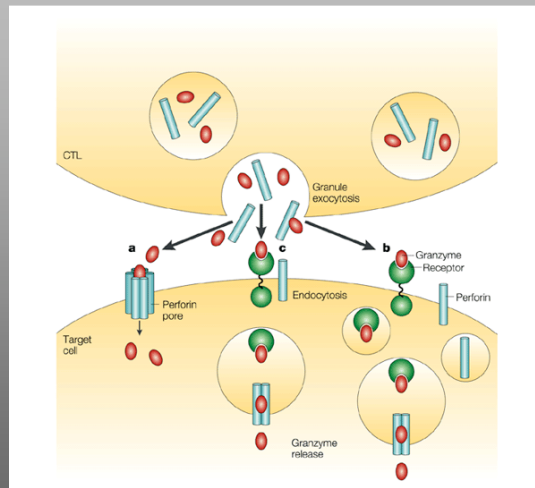
## Effector Memory Cells Can Secrete Cytokines



From: Sallusto et al., *Nature* 401:708, 1999

**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

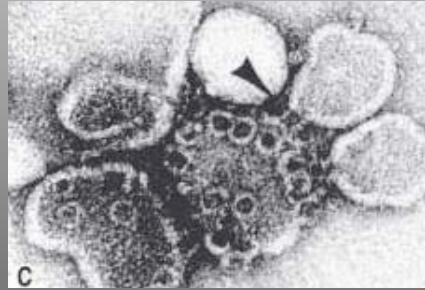
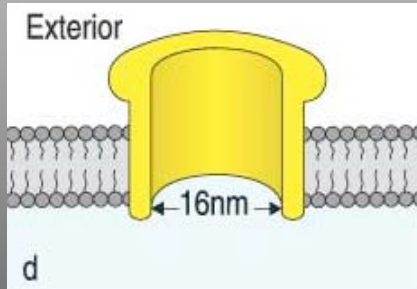
## Cooperation in Killing: Granzyme and Perforin



From: Barry & Bleackley. *Nature Rev. Immunol.* 2:401, 2002



## Structure of Perforin

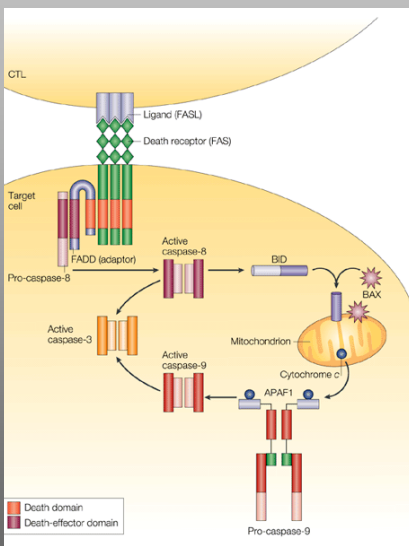


## Human Diseases Involving Defective Granule Killing\*

Disease	Gene	Clinical Manifestations
Chediak-Higashi Syndrome	CHS1	Lysosomal inclusions in all leukocytes Recurrent bacterial infections <b>Decreased NK cell function</b> Oculocutaneous albinism (melanosome defect) Bleeding (platelet storage granule defect)
Griscelli Syndrome	Rab27a	Partial albinism Hepatosplenomegaly (lymphohistiocytic infiltration) <b>Decreased NK cell function</b>
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) <b>Decreased NK cell function</b> Pancytopenia

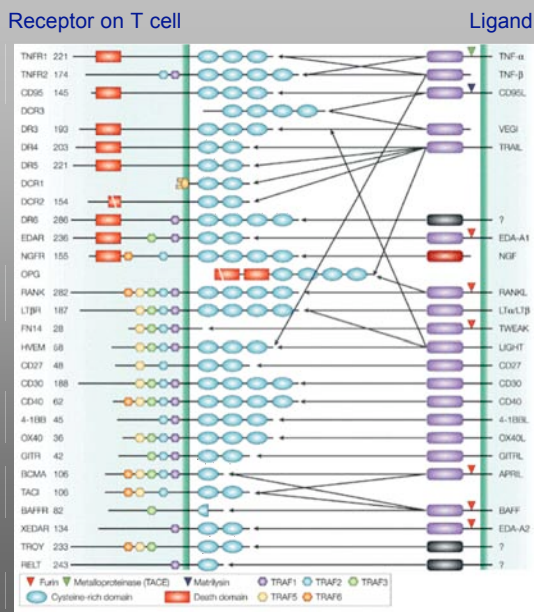
\*Do not memorize this list

## Life (and Death) in the Fas Lane



From: Barry & Bleackley. *Nature Rev. Immunol.* 2: 401, 2002

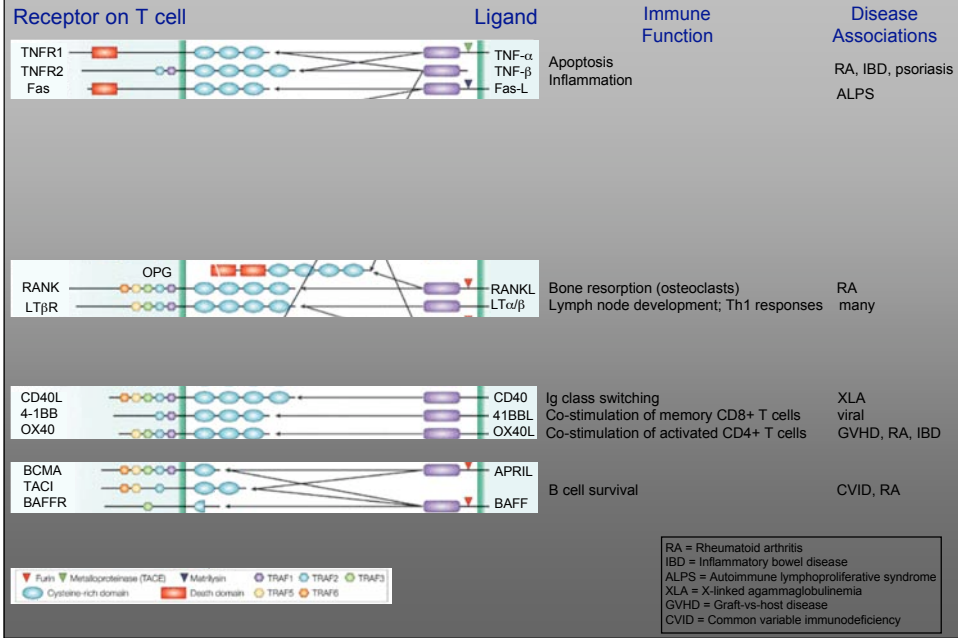
## The TNF Superfamily and Selected Immune Functions



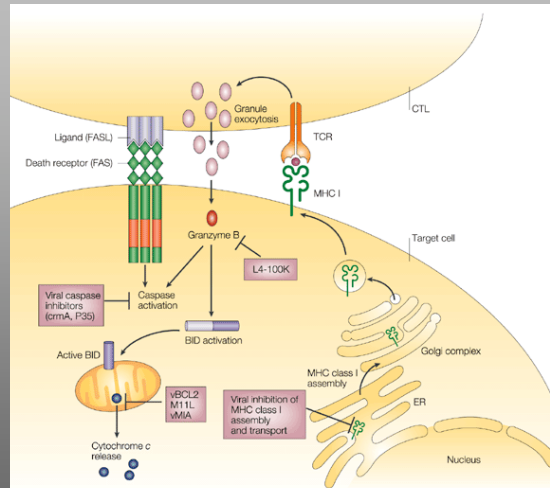
- Overlapping structure and function
- Death domain-containing members tend to induce cell death (but not always)
- Signaling via homotrimerization and recruitment of adaptor proteins
- In addition to regulating cell survival, many members participate in co-stimulation

From: Aggarwal, *Nature Rev. Immunol.* 3:745, 2003

## The TNF Superfamily and Selected Immune Functions

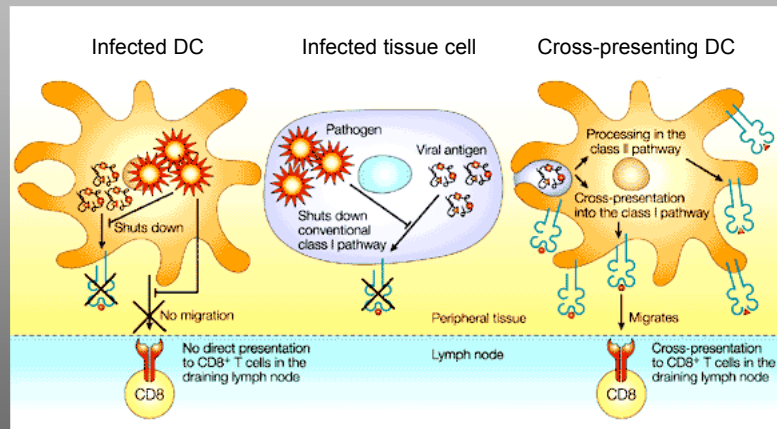


## Viral Evasion of Immunity



From: Barry & Bleackley. *Nature Rev. Immunol.* 2: 401, 2002

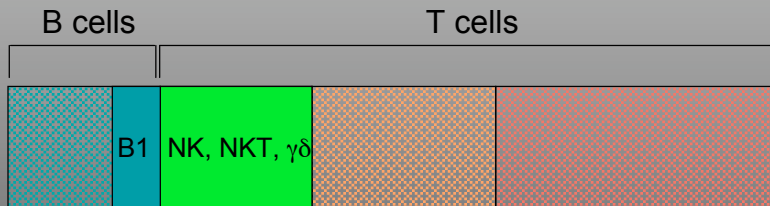
## Cross-priming: DCs Fight Back



## Major Lymphocyte Subpopulations in Peripheral Blood and Selected Effector Functions

B cells		T cells	
B	"Other"	CD8	CD4
Ab production Ag presentation		Cytotoxicity	Help to B cells Help to CD8 T cells Cytokine secretion

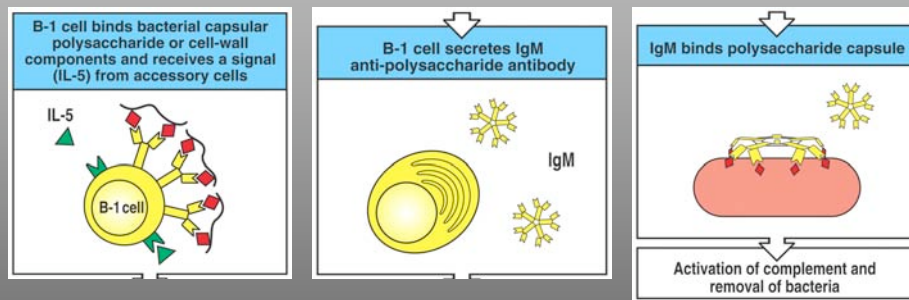
## Innate-like Lymphocytes



## Innate-like B Lymphocytes

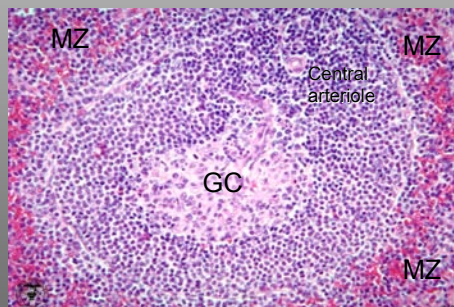
B-1 cells	Epithelial $\gamma\delta$ cells	NK T cells	NK cells
Make natural antibody, protect against infection with <i>Streptococcus</i>	Produce cytokines rapidly	Produce cytokines rapidly	Produce cytokines rapidly
Ligands not MHC associated	Ligands are MHC class II associated	Ligands are lipids bound to CD1d	Ligands not MHC associated
Cannot be boosted	Cannot be boosted	Cannot be boosted	Cannot be boosted

## B-1 Cells: B Prepared



## Thymus-independent Antigens are Presented to Specialized B-cells

Marginal zone B cells, like B-1 cells, respond to carbohydrate antigen and secrete mainly IgM

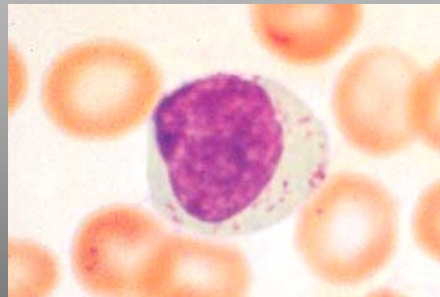


After the initial encounter of Ag, they demonstrate little memory (like trying to cram this course).

## Innate-like T Lymphocytes: NK Cells

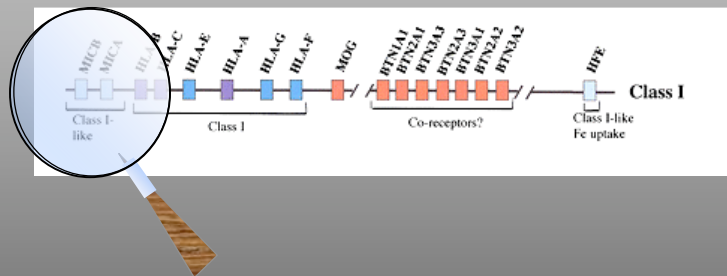
B-1 cells	Epithelial $\gamma\delta$ cells	NK T cells	NK cells
Make natural antibody, protect against infection with <i>Streptococcus</i>	Produce cytokines rapidly	Produce cytokines rapidly	<b>Produce cytokines rapidly</b>
Ligands not MHC associated	Ligands are MHC class II associated	Ligands are lipids bound to CD1	<b>Ligands not MHC associated</b>
Cannot be boosted	Cannot be boosted	Cannot be boosted	<b>Cannot be boosted</b>

## Natural Killer Cell



## How do NK Cells Recognize Their Targets?

### Major Genes in the MHC Class I Region

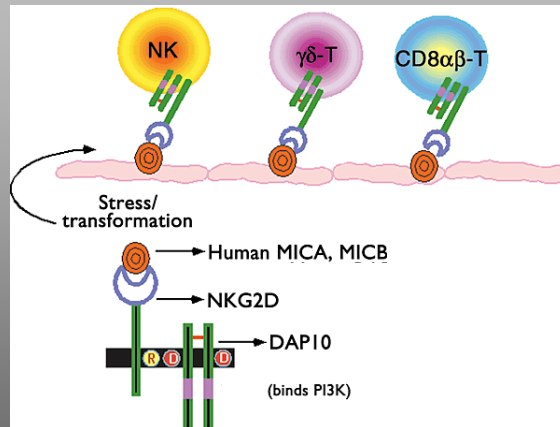


The human MHC covers ~4 Mbp of DNA on chromosome 6p21.3 and contains over 220 identified loci. It has been divided into three regions: class II (centromeric), class III, and class I (telomeric) with extended class I and class II regions on either side. This is one of the most gene-dense regions of the human genome. It encodes the most polymorphic human proteins known to date. Of the expressed loci in the MHC, roughly 40% are associated with the immune system. They include the classical class I, *HLA-A*, *-B*, and *-C*, nonclassical *HLA-E*, *-F*, and *-G*, as well as "postmodern" *MICA* and *MICB* genes (MHC class I chain-related genes). The products of classical polymorphic class I genes, *HLA-A*, *B*, and *C*, interact with T cell receptor (TCR) molecules as well as with the products of the killer immunoglobulin-like receptor (*KIR*) genes expressed on natural killer cells and some T cells.

Trowsdale., *Immunity*, 15:363, 2001



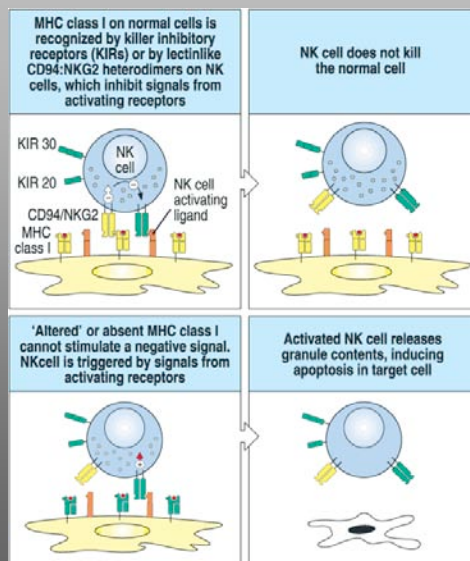
## One Mechanism of Triggering NK Cell Cytotoxicity



**The NKG2D-DAP10 receptor complex and its ligands.** Cytotoxicity requires the expression of ligands of NKG2D (e.g., MICA, MICB) in the "stressed" target cells.

From: Lanier, *Nature Immunol.* 2:23, 2001

## Why do NK Cells Fail to Recognize Healthy Cells?



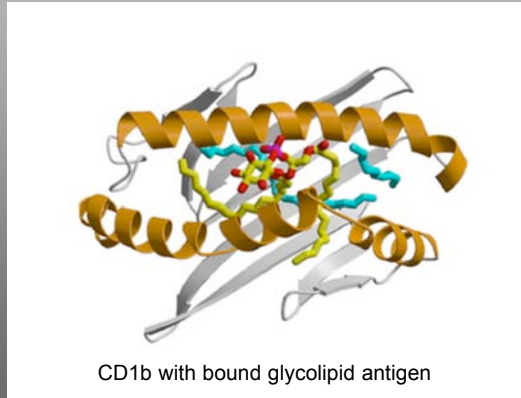
## Innate-like T Lymphocytes

B-1 cells	Epithelial $\gamma\delta$ cells	NK T cells	NK cells
Make natural antibody, protect against infection with <i>Streptococcus</i>	<b>Produce cytokines rapidly</b>	Produce cytokines rapidly	Produce cytokines rapidly
Ligands not MHC associated	<b>Ligands are MHC class IB associated</b>	Ligands are lipids bound to CD1d	Ligands not MHC associated
Cannot be boosted	<b>Cannot be boosted</b>	Cannot be boosted	Cannot be boosted

## Innate-like T Lymphocytes

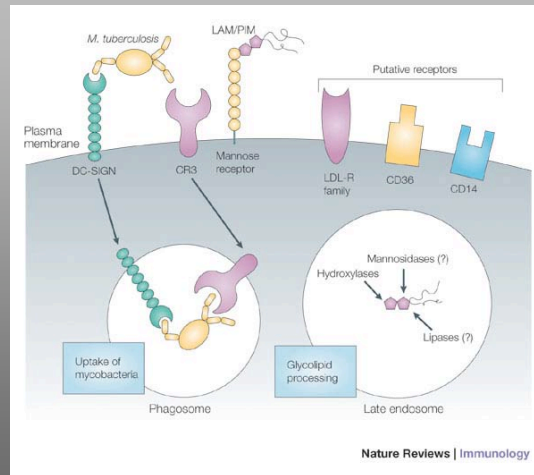
B-1 cells	Epithelial $\gamma\delta$ cells	NK T cells	NK cells
Make natural antibody, protect against infection with <i>Streptococcus</i>	Produce cytokines rapidly	<b>Produce cytokines rapidly</b>	Produce cytokines rapidly
Ligands not MHC associated	Ligands are MHC class IB associated	<b>Ligands are lipids bound to CD1d</b>	Ligands not MHC associated
Cannot be boosted	Cannot be boosted	<b>Cannot be boosted</b>	Cannot be boosted

Structure of the CD1b Molecule--  
Look Familiar?



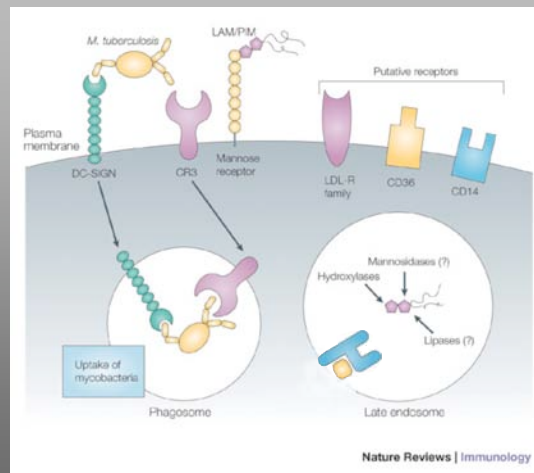
Processing of Glycolipid Antigens from  
*M. tuberculosis* by APCs:

## I. Phagocytosis and Glycolipid Processing in Endosomes



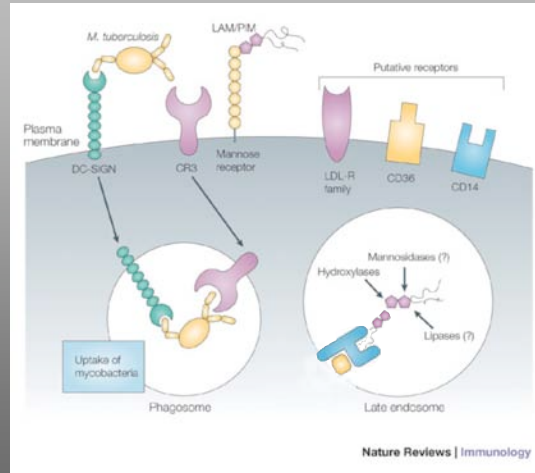
From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

## II. Fusion of Endosomes with CD1d-containing Vesicles



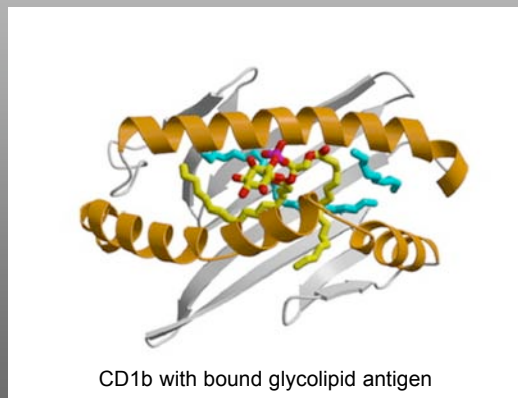
From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

### III. Loading of Glycolipids onto CD1d Molecules



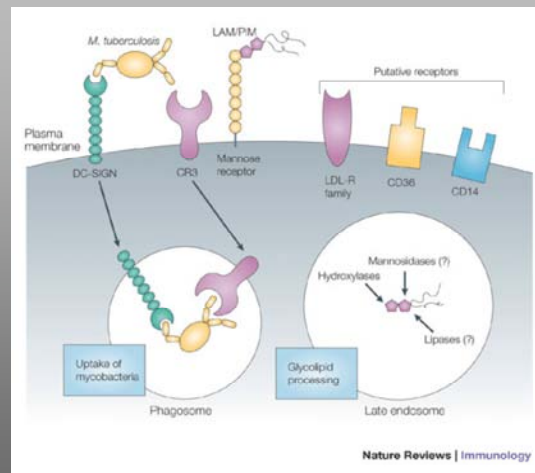
From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

### Structure of the CD1b Molecule-- Look Familiar?



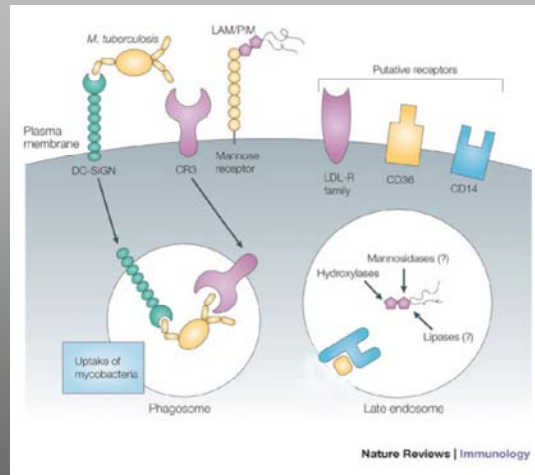
## Processing of Glycolipid Antigens from *M. tuberculosis* by APCs:

### I. Phagocytosis and Glycolipid Processing in Endosomes



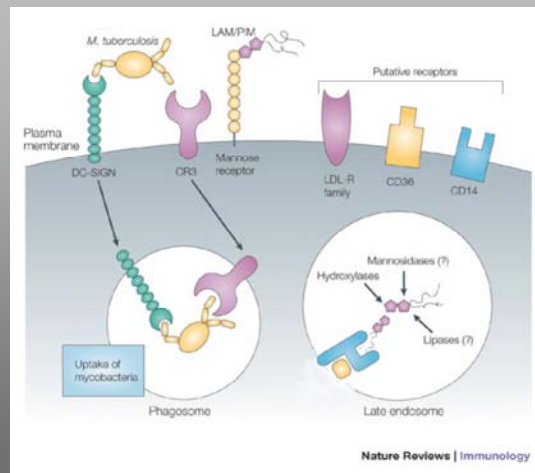
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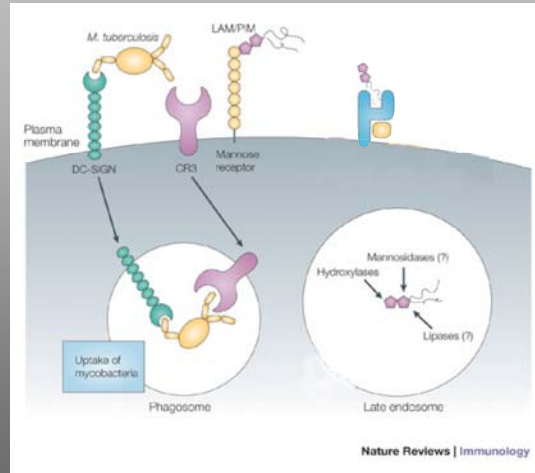
From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

## III. Loading of Glycolipids onto CD1d Molecules



From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

## VI. Trafficking of CD1d-glycolipid Complexes to the Surface of the APC

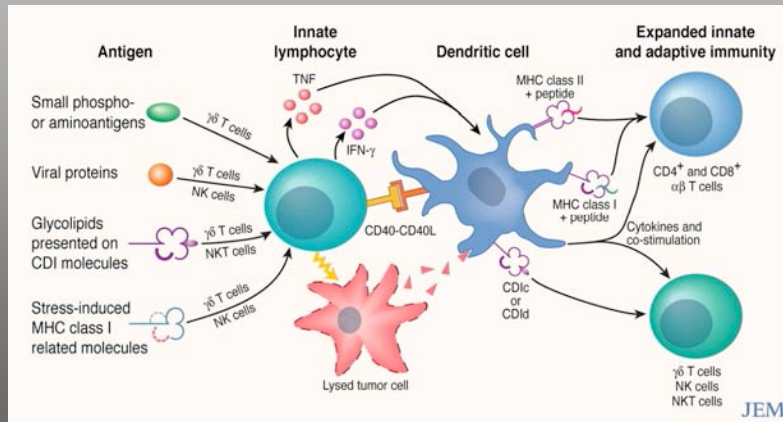


From: DeLibero and Mori, *Nature Rev. Immunol.* 5:485, 2005

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



## Innate Immune Lymphocytes Trigger Dendritic Cell Maturation



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

## Summary

1. For cytotoxic CD8 T-cells, ligation of the TCR by MHC I/peptide + co-stimulation results in release of granzymes and perforin and/or FasL, leading to apoptosis of the target cells.
2. 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 ( $\gamma\delta$  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).