

# Basic Immunology

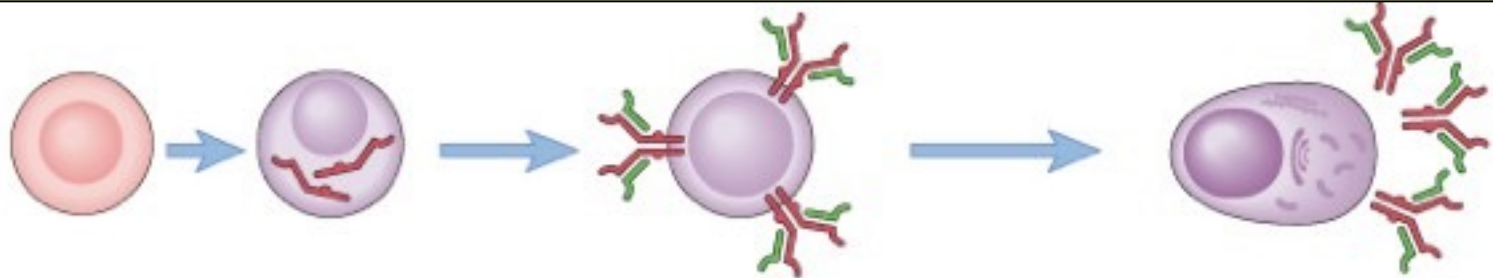
*15. lecture*

**Effector functions of immunoglobulins.**

**Antigen-antibody reactions.**

**IgE mediated immunoreactions.**

# B cell development and immunoglobulin expression



Stage of maturation	Stem cell	Pre-B cell	Immature B cell	Mature B cell	Activated B cell	Antibody-secreting cell
Pattern of immunoglobulin production	None	Cytoplasmic $\mu$ heavy chain	Membrane IgM	Membrane IgM, IgD	Low-rate Ig secretion; heavy chain isotype switching; affinity maturation	High-rate Ig secretion; reduced membrane Ig

# Phases of the humoral immune response

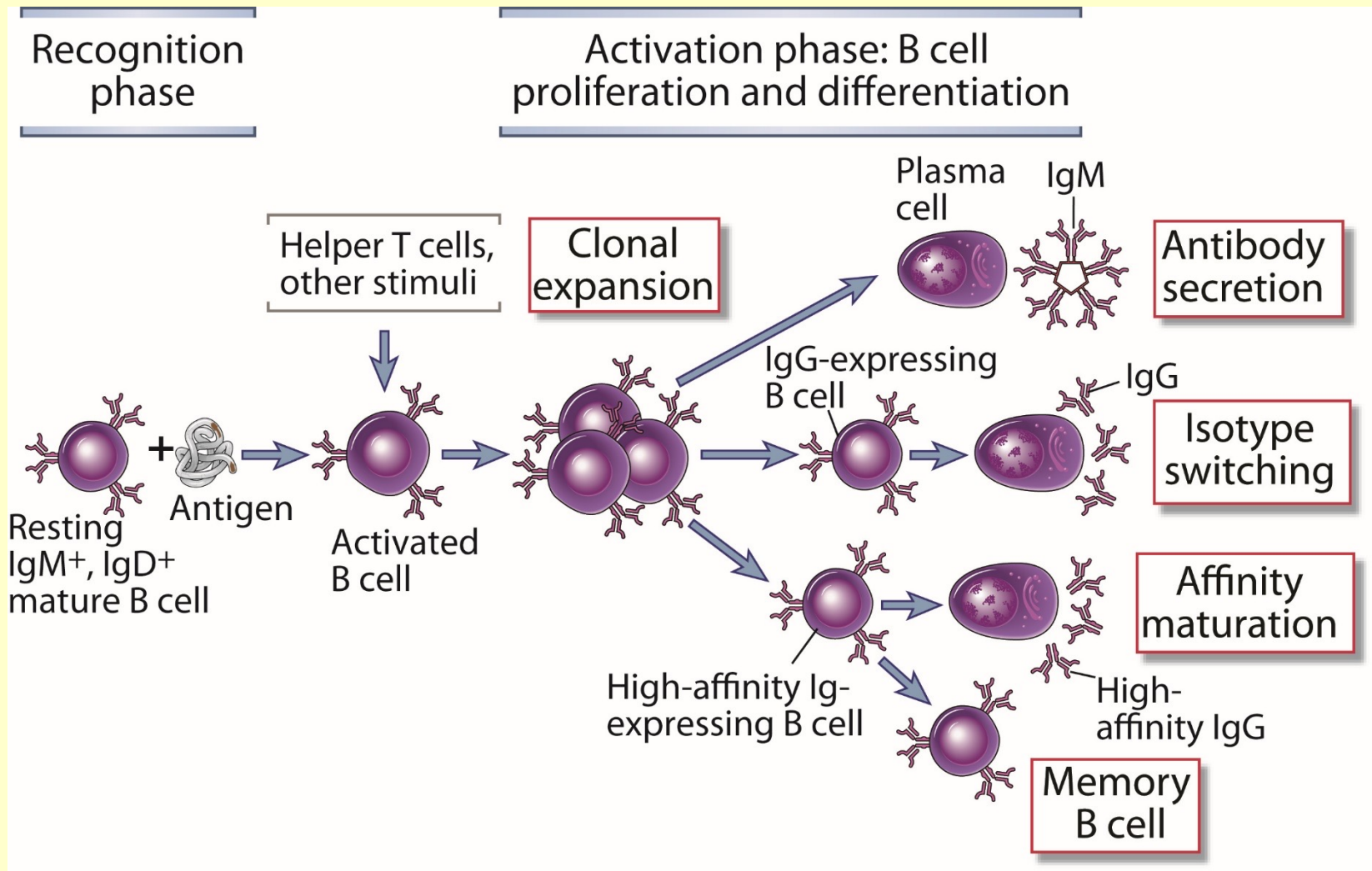


Fig. 11-1

# Antitest termelés

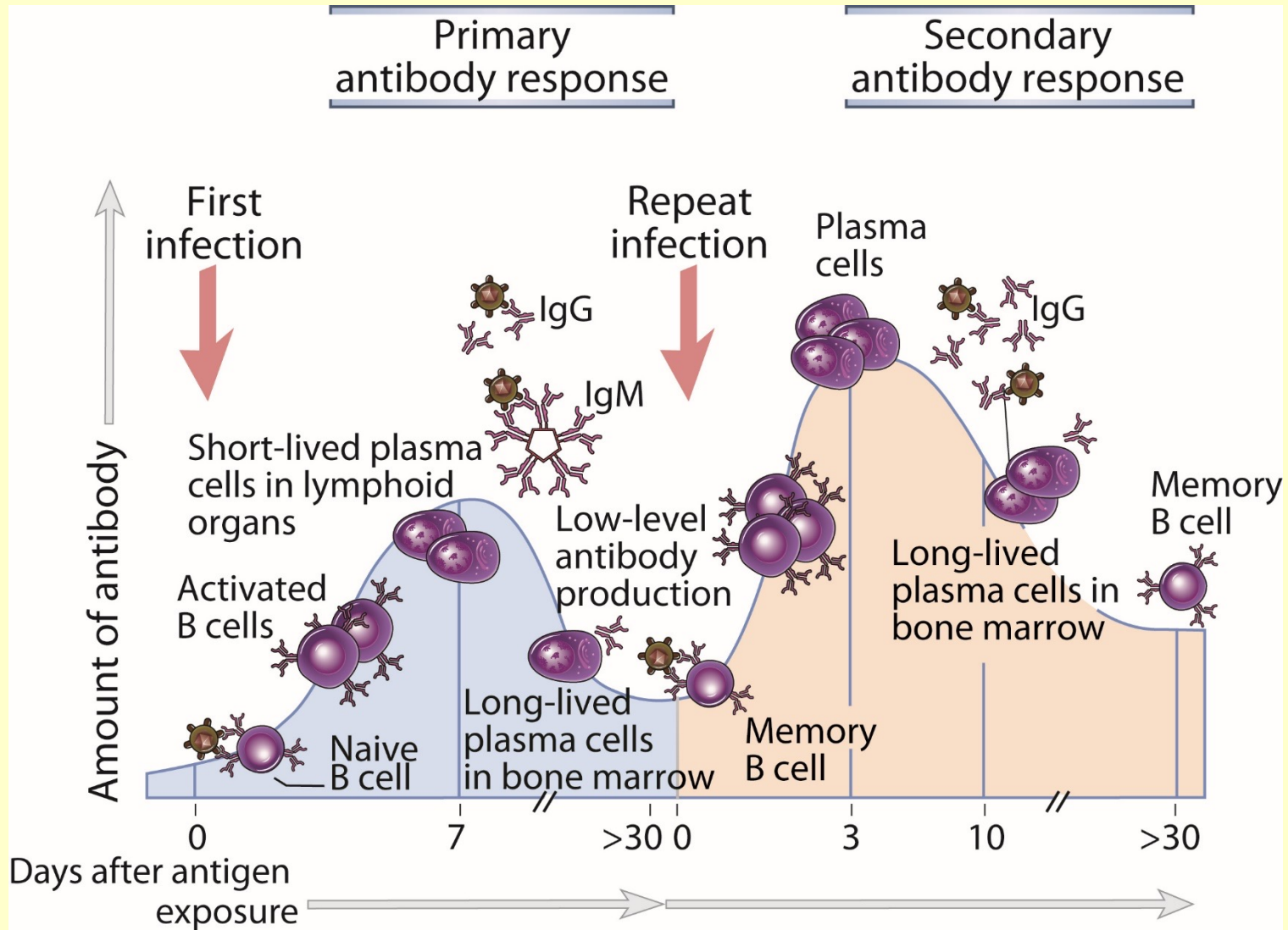
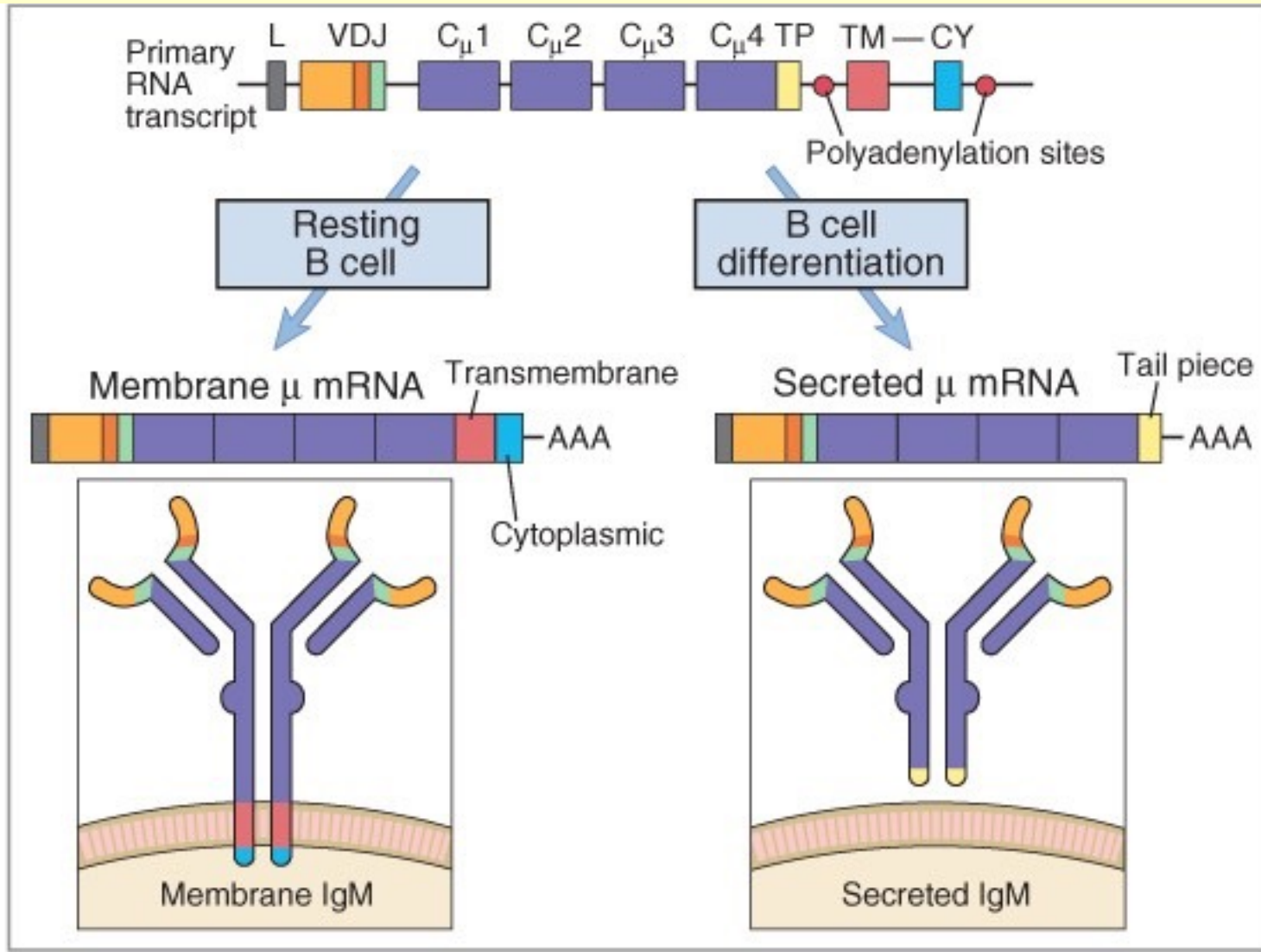


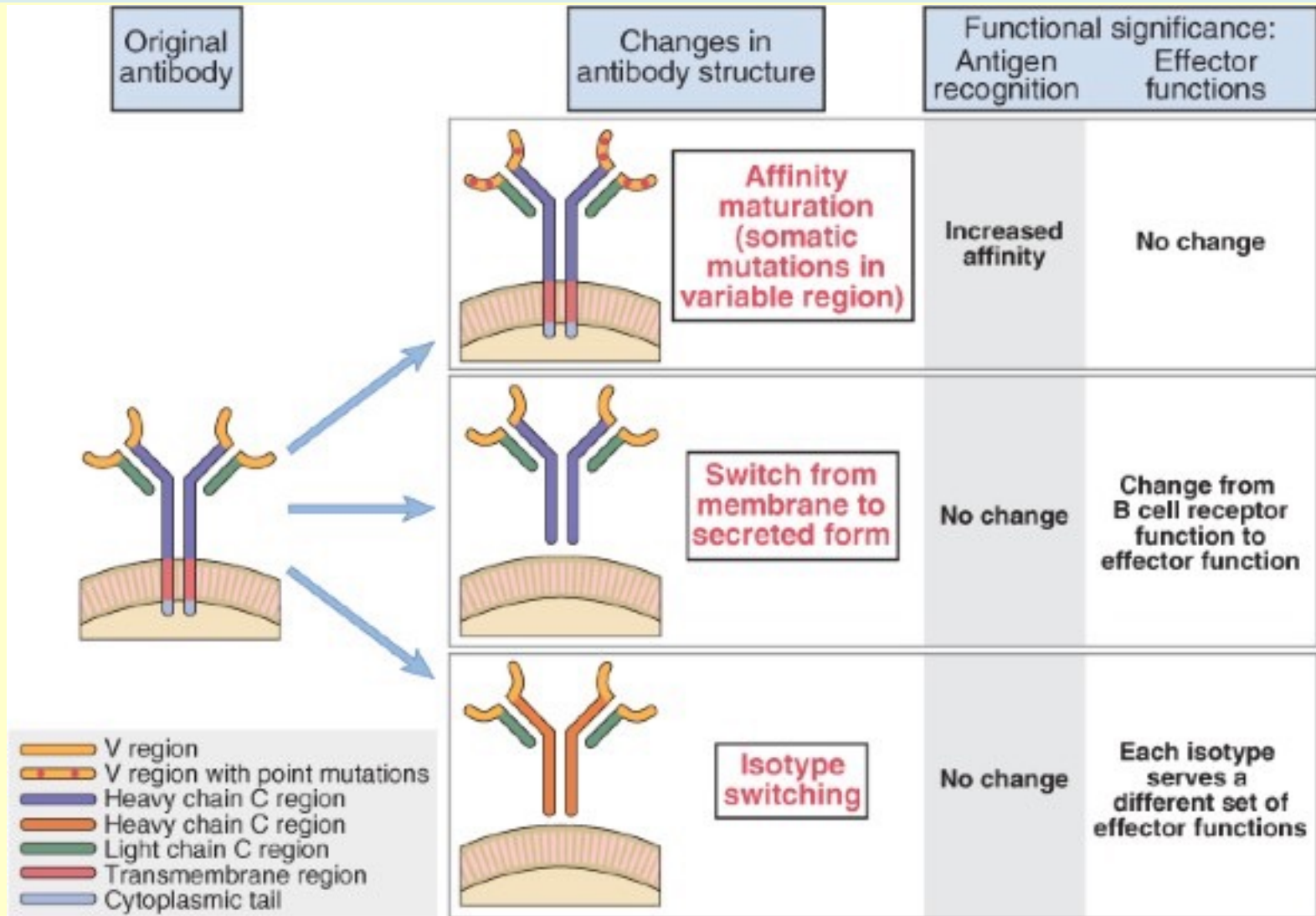
Fig. 11-2

# Membrane bound (mlg) and secreted (slg) immunoglobulin 2.

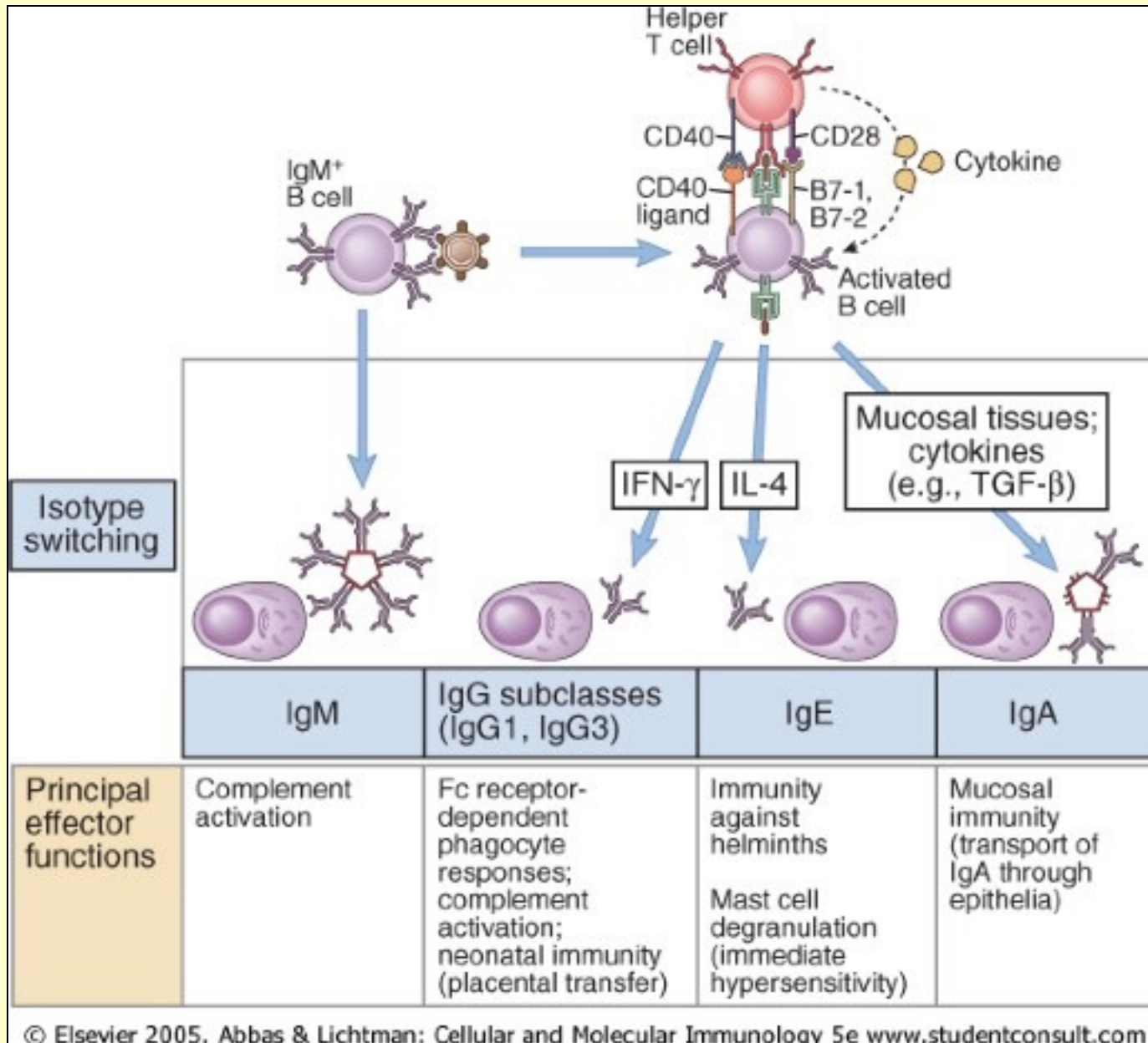




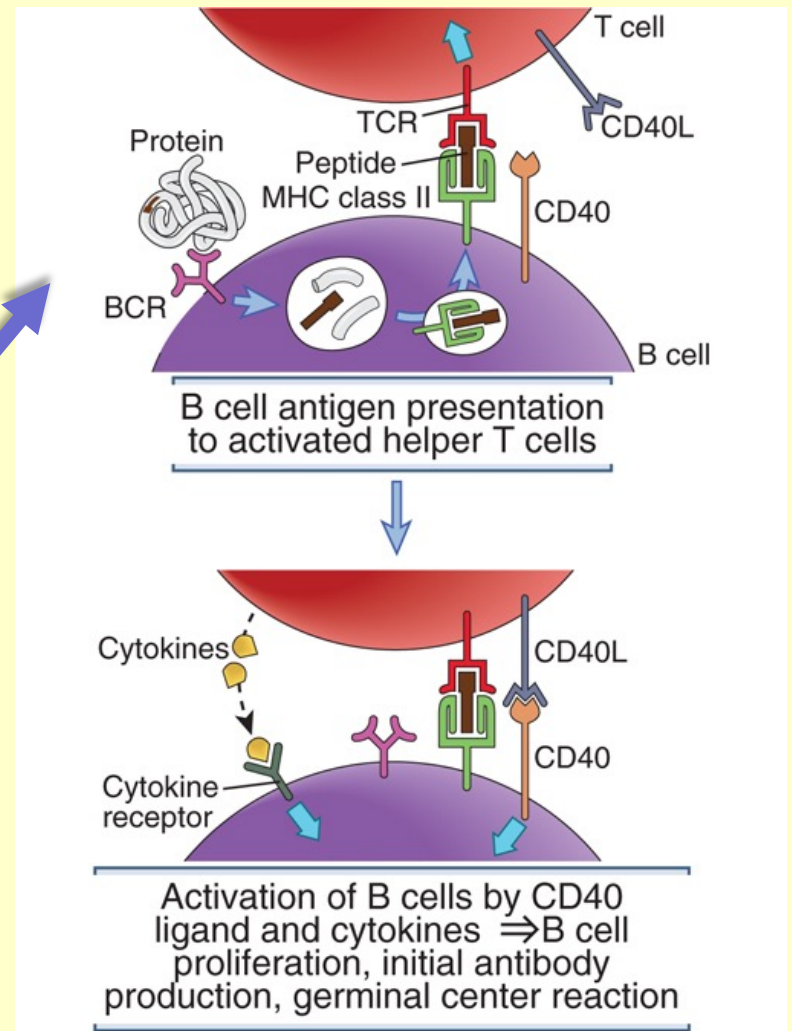
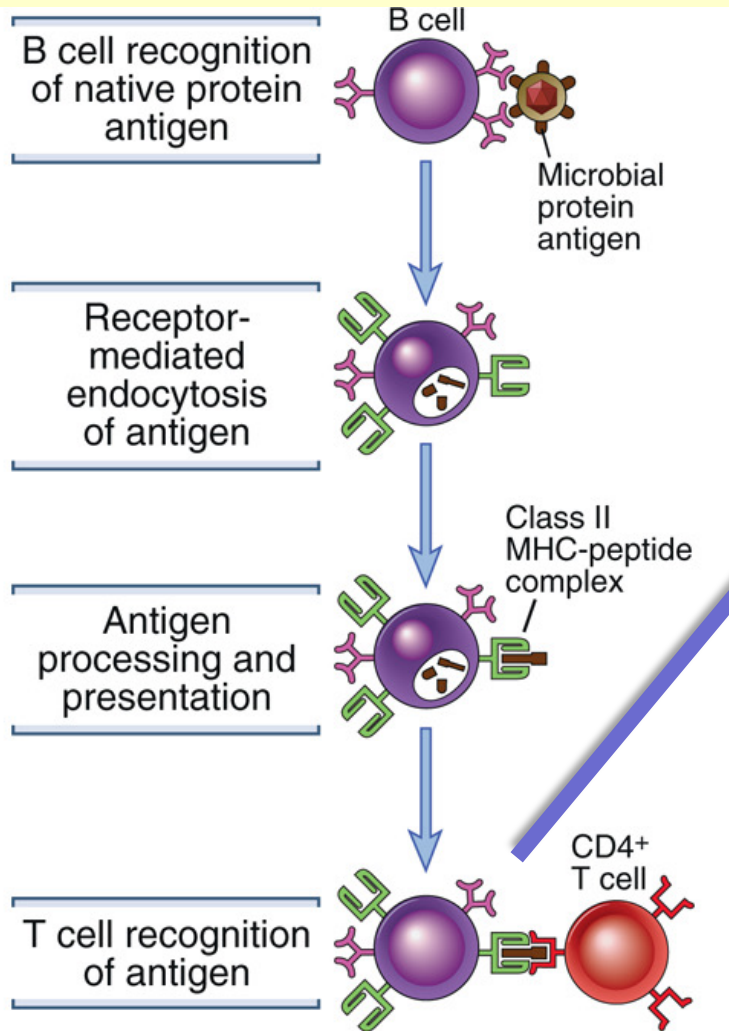
# Changes in the immunoglobulin molecule during the immune response



# Isotype switch – development of functional diversity



# Helper T cell - B cell interaction





# Functions of immunoglobulins

***Monofunctional*** cell surface Ig (BcR) →  
specific antigen recognition and binding  
*Before* the antigen appears.

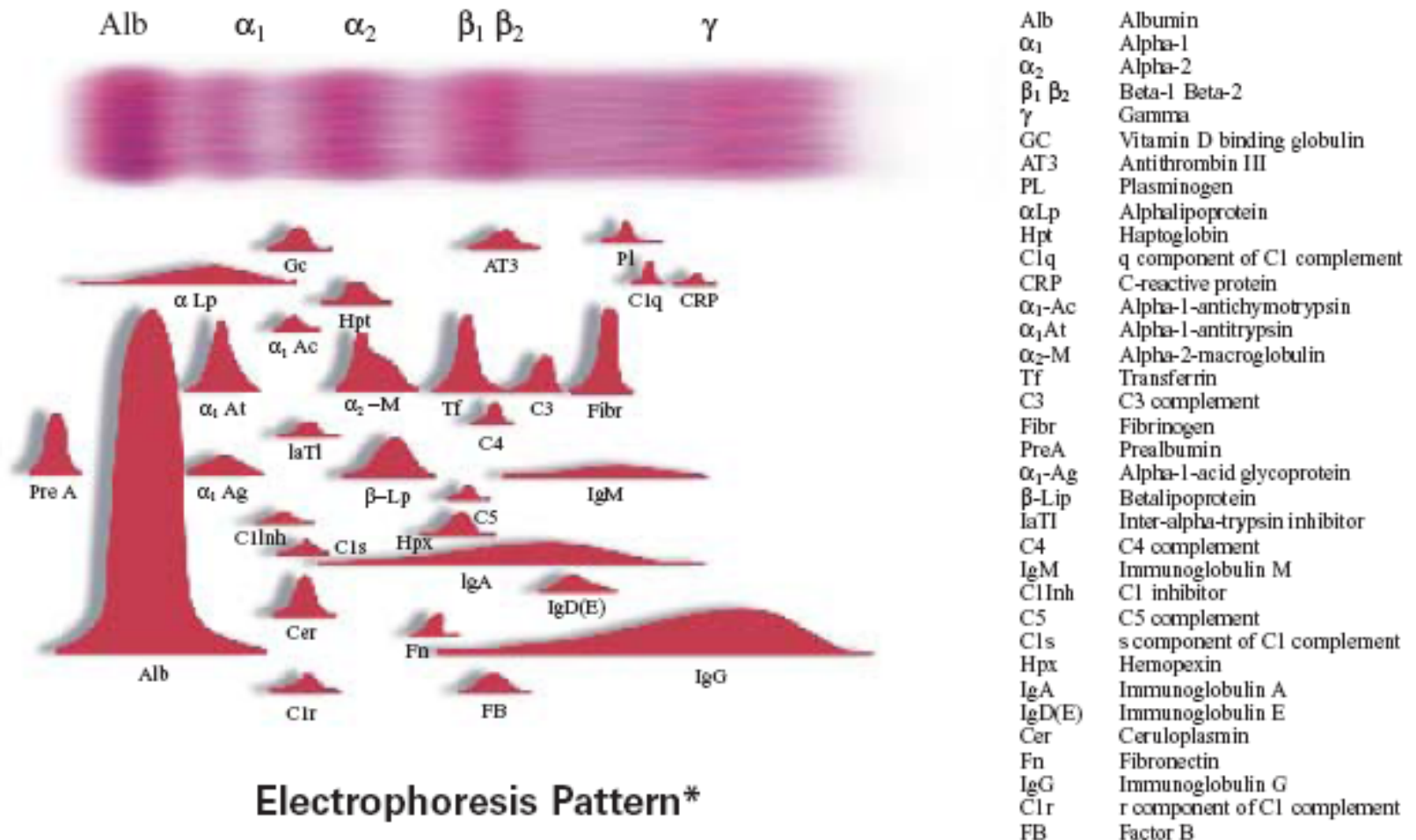
***Polyfunctional*** secreted Ig →  
After the antigen entry in effector functions: immunocomplex  
formation → neutralization, opsonization, complement  
binding and activation, Fc receptor binding, agglutination,  
etc. → helps to eliminate pathogens before an infection  
could begin

# Immunoglobulins of various isotypes act at different places in the body

Distribution	IgM	IgD	IgG1	IgG2	IgG3	IgG4	IgA	IgE
Transport across epithelium	+	-	-	-	-	-	+++ (dimer)	-
Transport across placenta	-	-	+++	+	++	+/-	-	-
Diffusion into extravascular sites	+/-	-	+++	+++	+++	+++	++ (monomer)	+
Mean serum level (mg ml <sup>-1</sup> )	1.5	0.04	9	3	1	0.5	2.1	3×10 <sup>-5</sup>

Figure 9-19 part 2 of 2 Immunobiology, 6/e. (© Garland Science 2005)

# Serum ELFO



Electrophoresis Pattern\*

\*Adapted from Laurell, C-B (11).

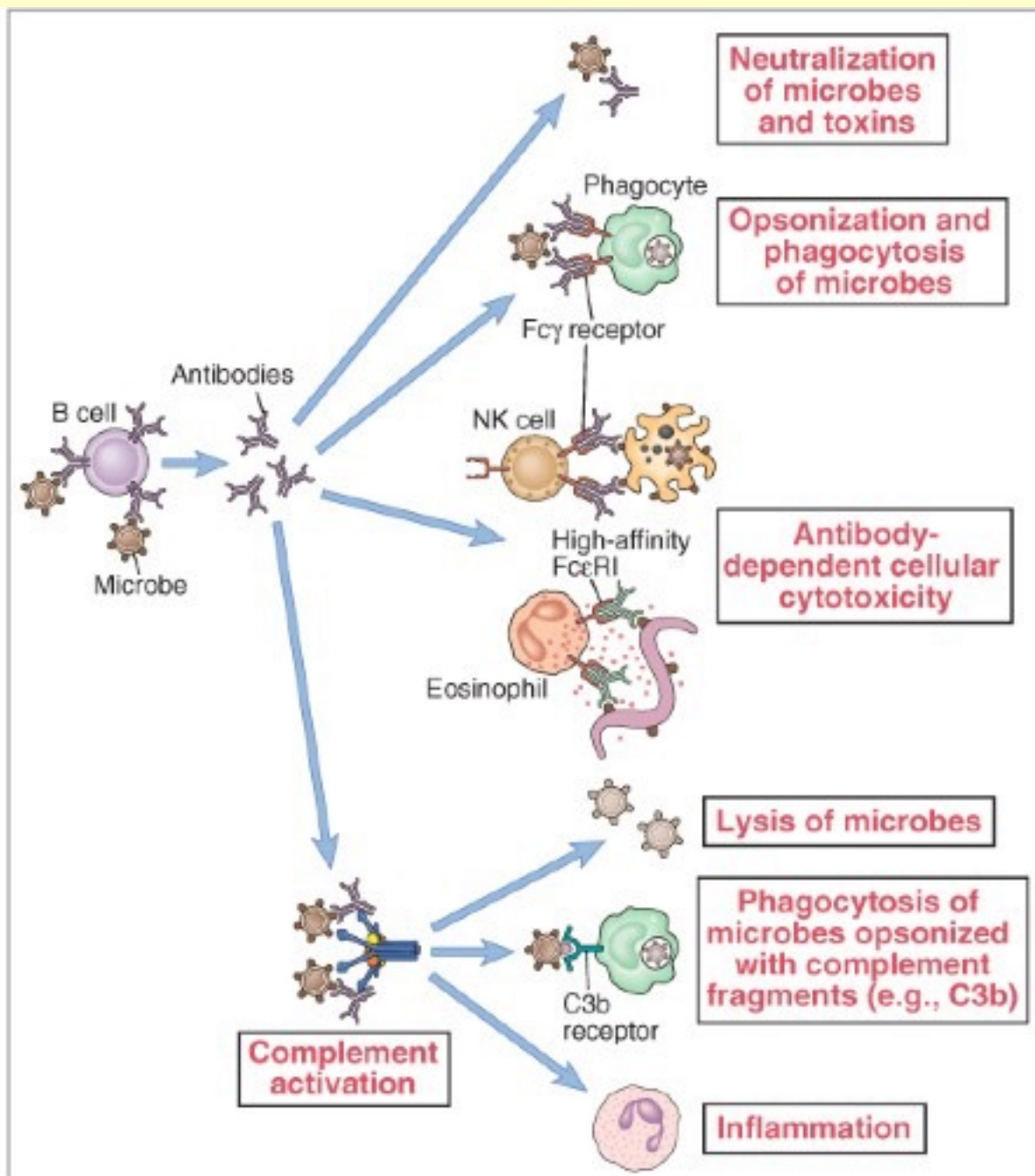
# Immunglobulin effector functions

I. Neutralization of the antigen

II. Complement activation

III. Immunocomplex binding to Fc receptor and enhancing phagocytosis (opsonization)

IV. Antibody dependent cell-mediated cytotoxicity (ADCC)





# Immunoglobulins of various isotypes have different functions

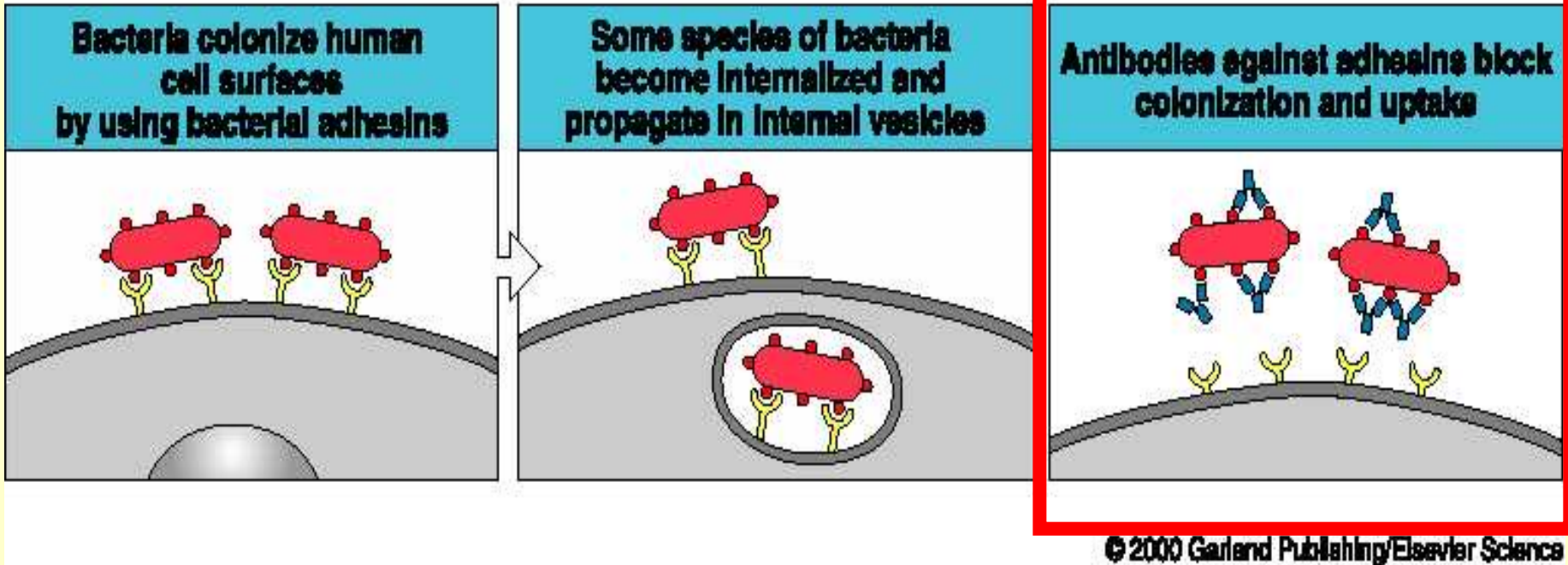
Functional activity	IgM	IgD	IgG1	IgG2	IgG3	IgG4	IgA	IgE
Neutralization	+	-	++	++	++	++	++	-
Opsonization	+	-	+++	*	++	+	+	-
Sensitization for killing by NK cells	-	-	++	-	++	-	-	-
Sensitization of mast cells	-	-	+	-	+	-	-	+++
Activates complement system	+++	-	++	+	+++	-	+	-

Figure 9-19 part 1 of 2 Immunobiology, 6/e. (© Garland Science 2005)

# NEUTRALIZATION

# Neutralization: the antibody can inhibit the binding of bacteria to the host cells

Figure 7.21b



Secretory IgA inhibits binding to mucous membranes

Opsonization by IgG → enhanced phagocytosis

IgG & IgM → complement activation → lysis

Antibody-mediated agglutination → inhibits entrance into the host tissues

# Neutralization of bacterial toxins

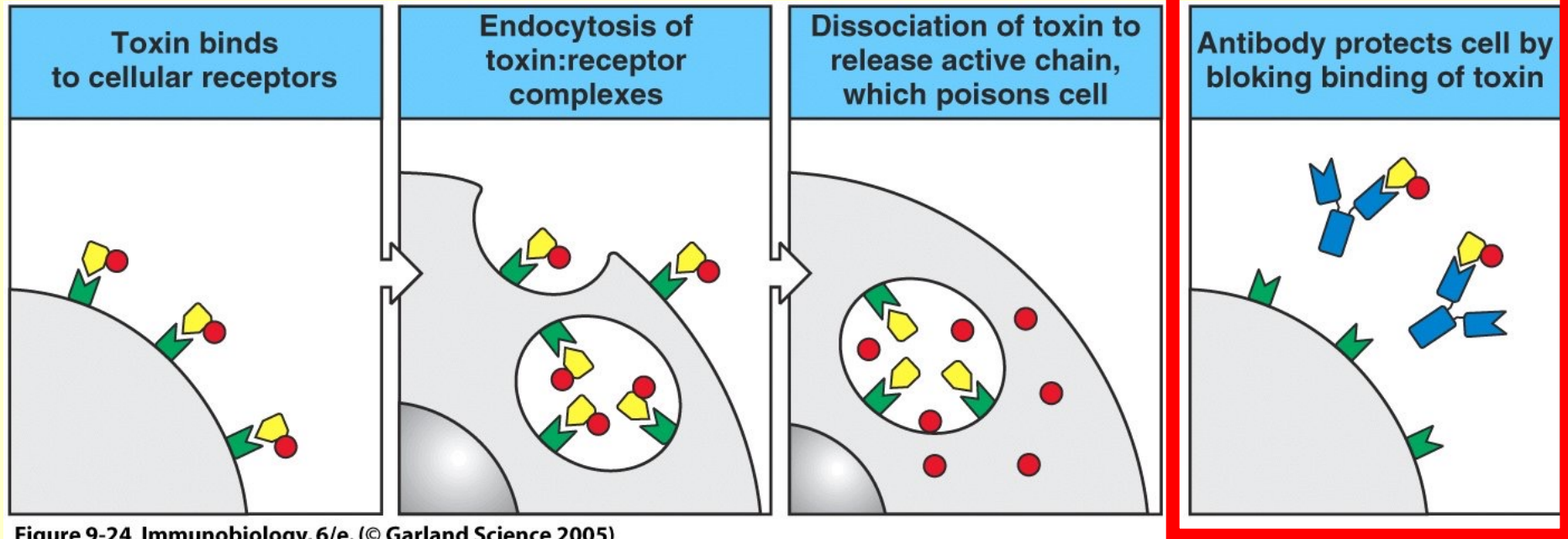


Figure 9-24 Immunobiology, 6/e. (© Garland Science 2005)

Diphtheria, Tetanus exotoxin → Toxoid (inactivated exotoxin) for vaccination

# Diseases caused by bacterial toxins

Disease	Organism	Toxin	Effects <i>in vivo</i>
Tetanus	<i>Clostridium tetani</i>	Tetanus toxin	Blocks inhibitory neuron action, leading to chronic muscle contraction
Diphtheria	<i>Corynebacterium diphtheriae</i>	Diphtheria toxin	Inhibits protein synthesis, leading to epithelial cell damage and myocarditis
Gas gangrene	<i>Clostridium perfringens</i>	Clostridial toxin	Phospholipase activation, leading to cell death
Cholera	<i>Vibrio cholerae</i>	Cholera toxin	Activates adenylate cyclase, elevates cAMP in cells, leading to changes in intestinal epithelial cells that cause loss of water and electrolytes
Anthrax	<i>Bacillus anthracis</i>	Anthrax toxic complex	Increases vascular permeability, leading to edema, hemorrhage, and circulatory collapse
Botulism	<i>Clostridium botulinum</i>	Botulinum toxin	Blocks release of acetylcholine, leading to paralysis
Whooping cough	<i>Bordetella pertussis</i>	Pertussis toxin	ADP-ribosylation of G proteins, leading to lymphoproliferation
		Tracheal cytotoxin	Inhibits cilia and causes epithelial cell loss
Scarlet fever	<i>Streptococcus pyogenes</i>	Erythrogenic toxin	Vasodilation, leading to scarlet fever rash
		Leukocidin Streptolysins	Kill phagocytes, allowing bacterial survival
Food poisoning	<i>Staphylococcus aureus</i>	Staphylococcal enterotoxin	Acts on intestinal neurons to induce vomiting. Also a potent T-cell mitogen (SE superantigen)
Toxic-shock syndrome	<i>Staphylococcus aureus</i>	Toxic-shock syndrome toxin	Causes hypotension and skin loss. Also a potent T-cell mitogen (TSST-1 superantigen)

Figure 9-23 Immunobiology, 6/e. (© Garland Science 2005)

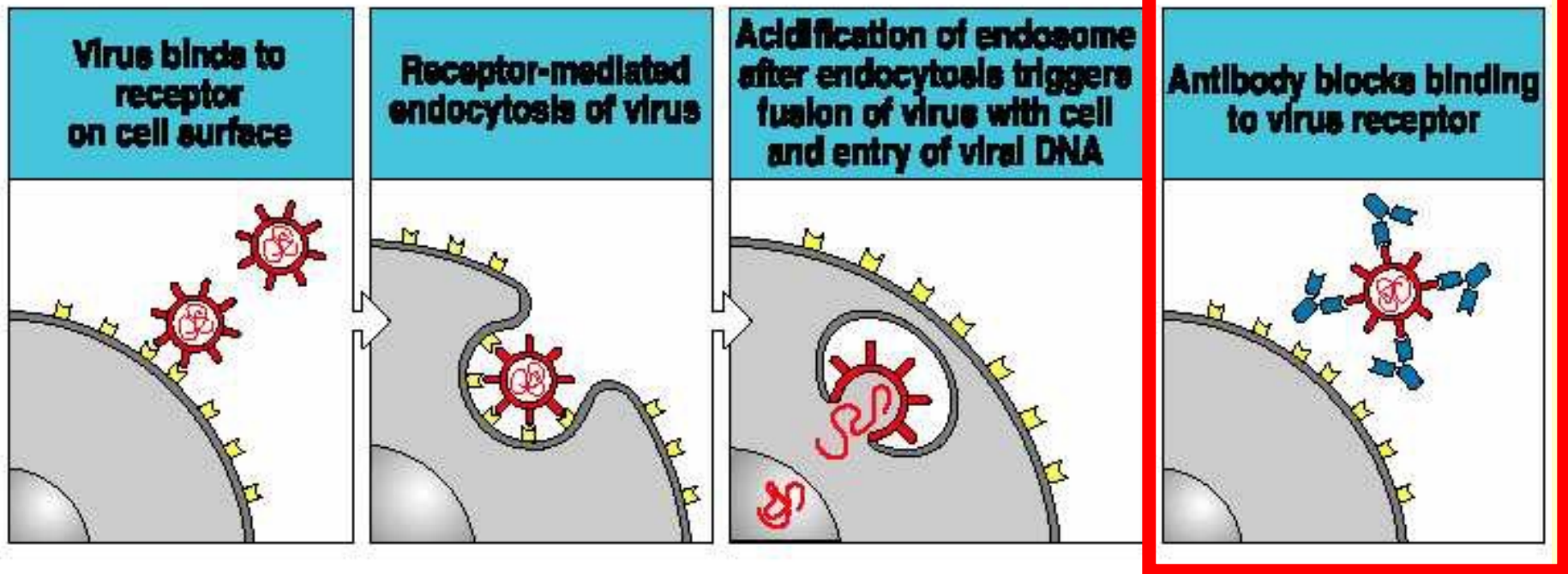


# Virus neutralization

Antibody inhibits the binding of the virus to the host cell and the infection:

- Influenza virus binds to sialic acid residues of cell membrane glycoproteins
- Rhinovirus bind to ICAM-1
- Epstein-Barr virus binds to CR2

Figure 7.21a

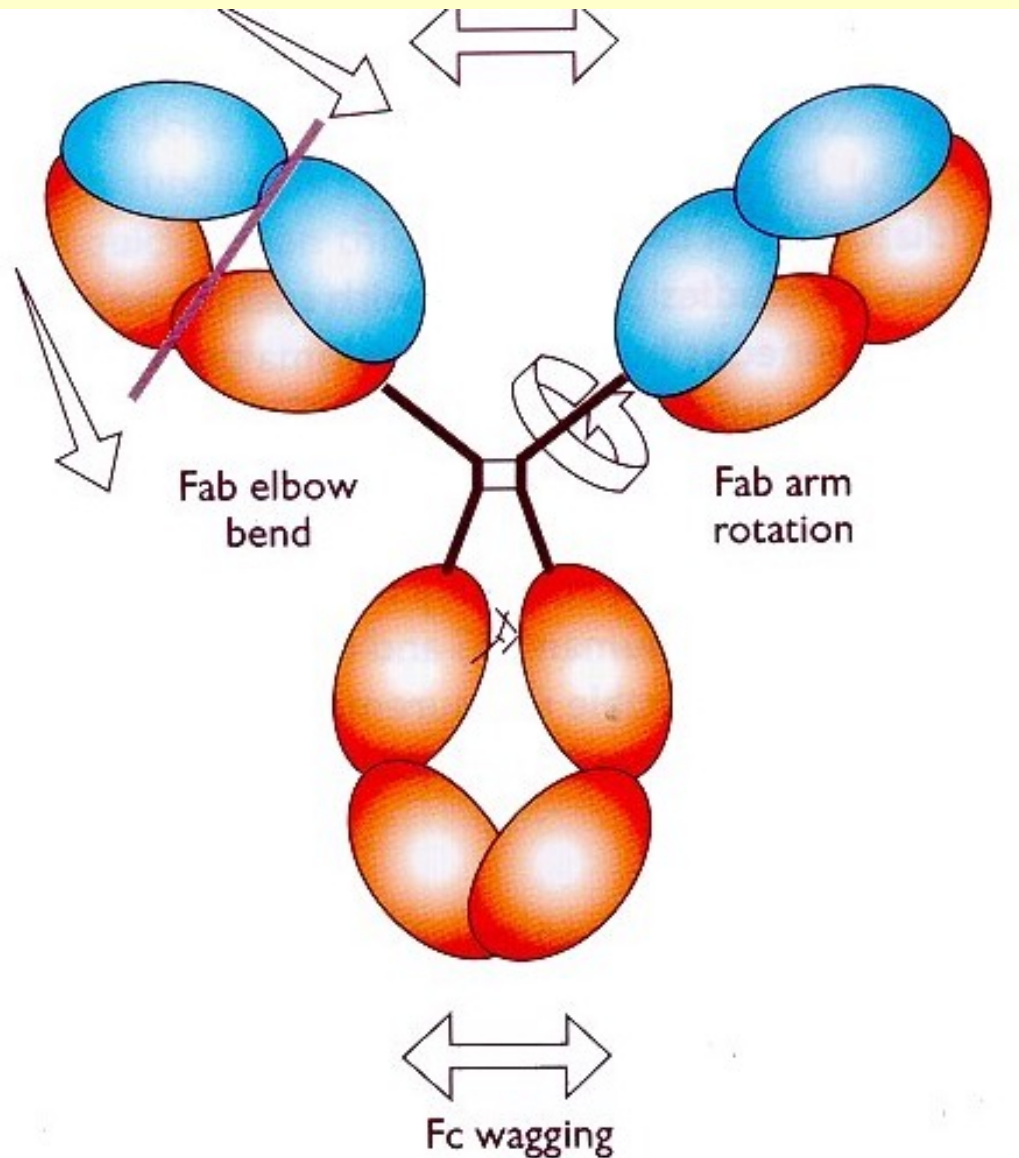


# Antiviral mechanisms of the humoral immune response:

- Secretory IgA – inhibits binding of the virus to the host cell and inhibits infection or reinfection
- IgG, IgM & IgA – inhibits the fusion of the viral envelope with the host cell
- IgG and IgM – opsonization → helps the phagocytosis of virus particles
- IgM – agglutination of virus particles
- Complement-activating IgG & IgM - further opsonization with C3b, then lysis by MAC

# Fc-RECEPTOR BINDING

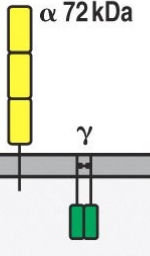
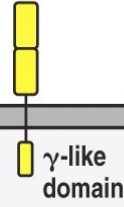
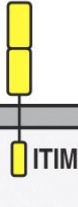
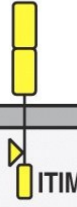
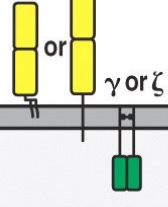
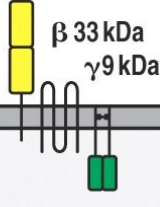
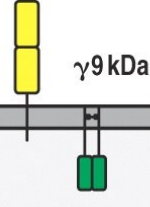
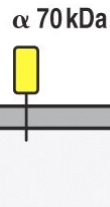
# IgG is a flexible molecule



**Antigen binding >  
Conformation change >  
Complement activation,  
FcR binding**

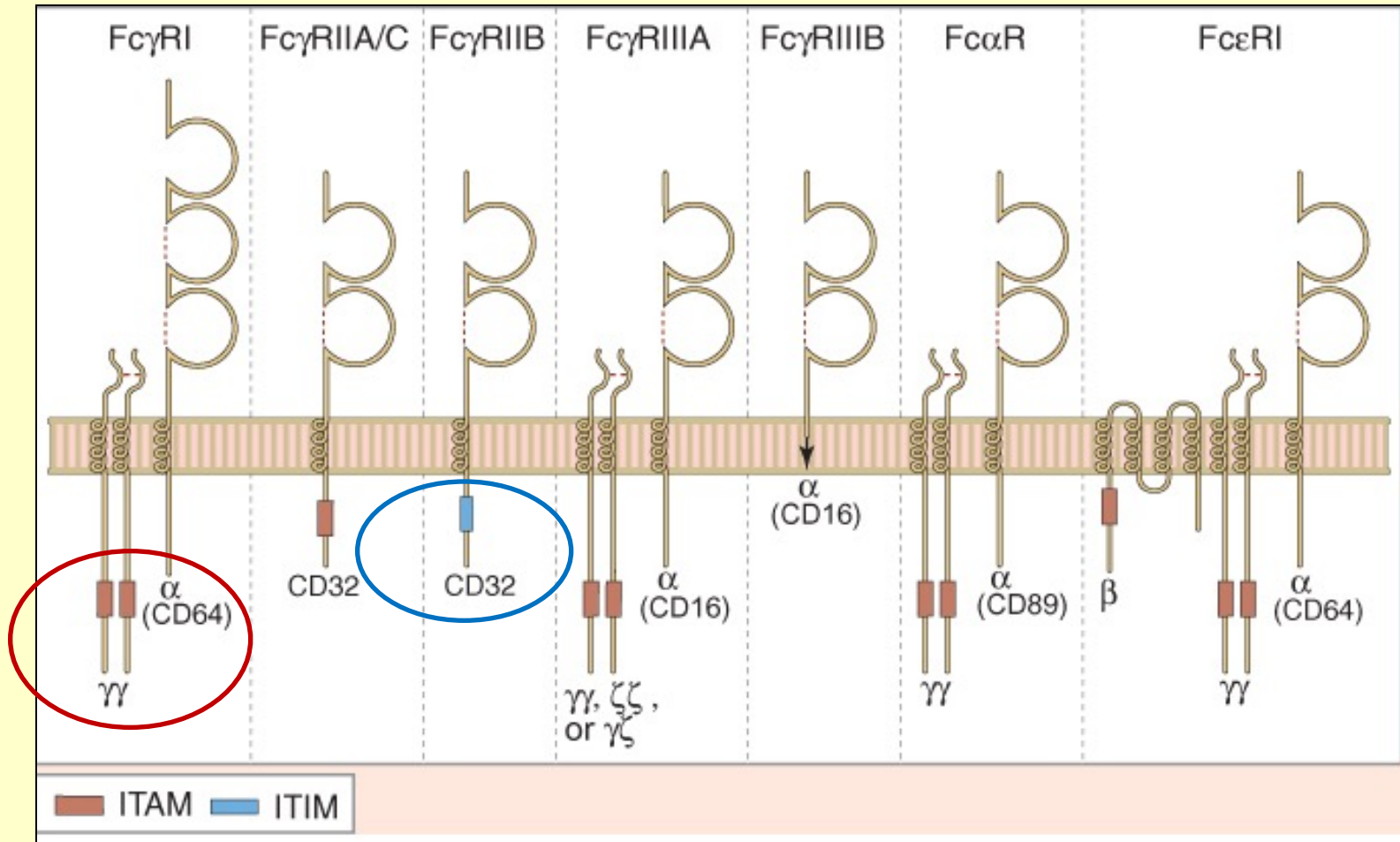
**Flexibility of  
immunoglobulins  
with various isotypes  
is different.**

# Fc receptors (FcR)

Receptor	FcγRI (CD64)	FcγRII-A (CD32)	FcγRII-B2 (CD32)	FcγRII-B1 (CD32)	FcγRIII (CD16)	FcεRI	FcαRI (CD89)	Fc α/μR
Structure								
Binding	IgG1 $10^8 \text{ M}^{-1}$	IgG1 $2 \times 10^6 \text{ M}^{-1}$	IgG1 $2 \times 10^6 \text{ M}^{-1}$	IgG1 $2 \times 10^6 \text{ M}^{-1}$	IgG1 $5 \times 10^5 \text{ M}^{-1}$	IgE $10^{10} \text{ M}^{-1}$	IgA1, IgA2 $10^7 \text{ M}^{-1}$	IgA, IgM $3 \times 10^9 \text{ M}^{-1}$
Order of affinity	1) IgG1=IgG3 2) IgG4 3) IgG2	1) IgG1 2) IgG3=IgG2* 3) IgG4	1) IgG1=IgG3 2) IgG4 3) IgG2	1) IgG1=IgG3 2) IgG4 3) IgG2	IgG1=IgG3		IgA1=IgA2	1) IgM 2) IgA
	NK cells Eosinophils Macrophages Neutrophils Mast cells	Mast cells Eosinophils <sup>†</sup> Basophils	Macrophages Neutrophils <sup>†</sup> Eosinophils <sup>†</sup>	Macrophages B cells				
	Induction of killing (NK cells)	Secretion of granules	Uptake Induction of killing	Uptake				



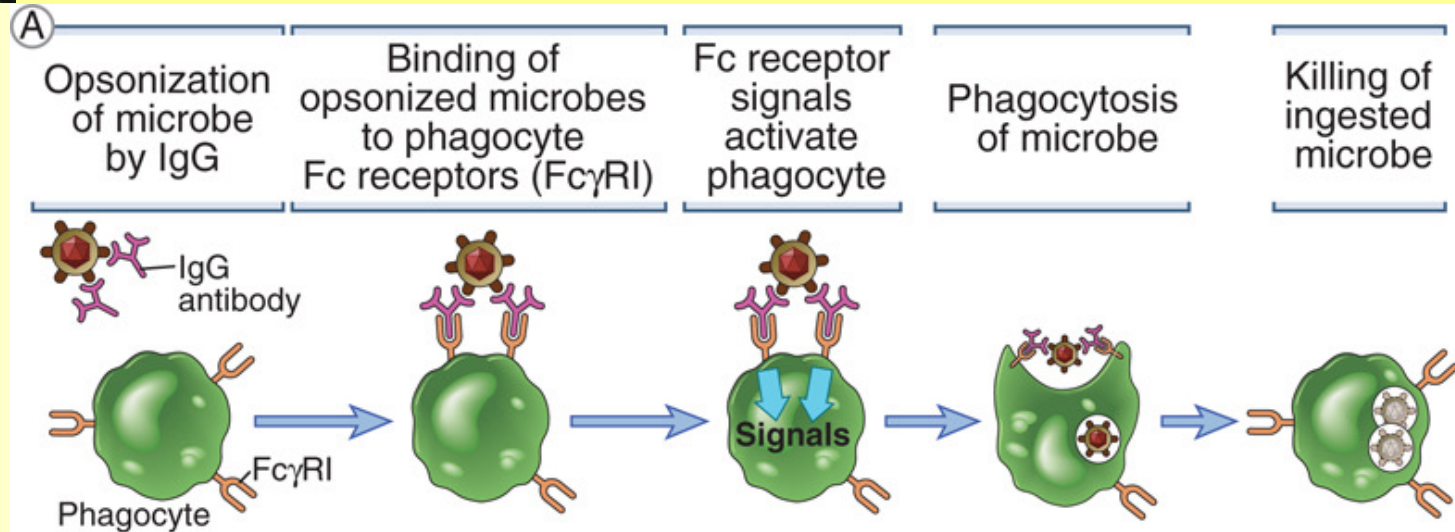
# Activatory and inhibitory role of Fc $\gamma$ Receptors



# The role of Ig constant domains in the effector functions

Receptor	Ig domen
<b>C1q binding sites</b>	<b>C<math>\gamma</math>2 or C<math>\mu</math>3</b>
<b>Fc<math>\gamma</math>RI (CD64)</b>	<b>C<math>\gamma</math>2</b>
<b>Fc<math>\gamma</math>RII (CD32)</b>	<b>C<math>\gamma</math>2 and C<math>\gamma</math>3</b>
<b>Fc<math>\gamma</math>RIII (CD16)</b>	<b>C<math>\gamma</math>2 and C<math>\gamma</math>3</b>
<b>Fc<math>\alpha</math>RI (CD89)</b>	<b>C<math>\alpha</math></b>
<b>Fc<math>\epsilon</math>RI</b>	<b>C<math>\epsilon</math>3</b>
<b>Fc<math>\epsilon</math>RII (CD23)</b>	<b>C<math>\epsilon</math>3</b>

# Opsonization and Phagocytosis by Antibodies

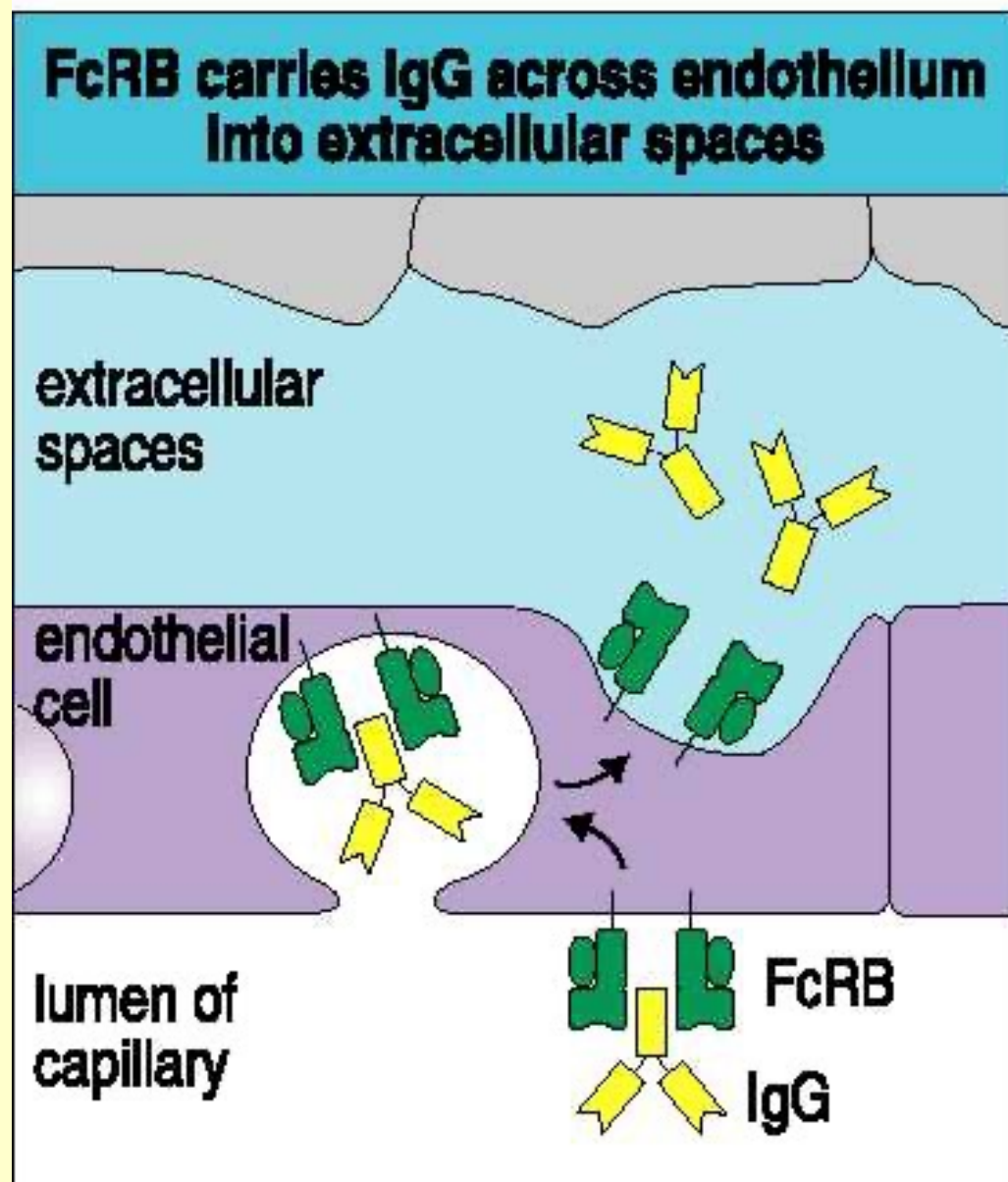


**B**

Fc Receptor	Affinity for Ig	Cell distribution	Function
Fc $\gamma$ RI (CD64)	High ( $K_d \sim 10^{-9}$ M); binds IgG1 and IgG3; can bind monomeric IgG	Macrophages, neutrophils; also eosinophils	Phagocytosis; activation of phagocytes
Fc $\gamma$ RIIA (CD32)	Low ( $K_d \sim 0.6\text{--}2.5 \times 10^{-6}$ M)	Macrophages, neutrophils; eosinophils, platelets	Phagocytosis; cell activation (inefficient)
Fc $\gamma$ RIIB (CD32)	Low ( $K_d \sim 0.6\text{--}2.5 \times 10^{-6}$ M)	B lymphocytes, DCs, mast cells, neutrophils, macrophages	Feedback inhibition of B cells, attenuation of inflammation
Fc $\gamma$ RIIIA (CD16)	Low ( $K_d \sim 0.6\text{--}2.5 \times 10^{-6}$ M)	NK cells	Antibody-dependent cellular cytotoxicity (ADCC)
Fc $\epsilon$ RI	High ( $K_d \sim 10^{-10}$ M); binds monomeric IgE	Mast cells, basophils, eosinophils	Activation (degranulation) of mast cells and basophils

Fig. 12-4

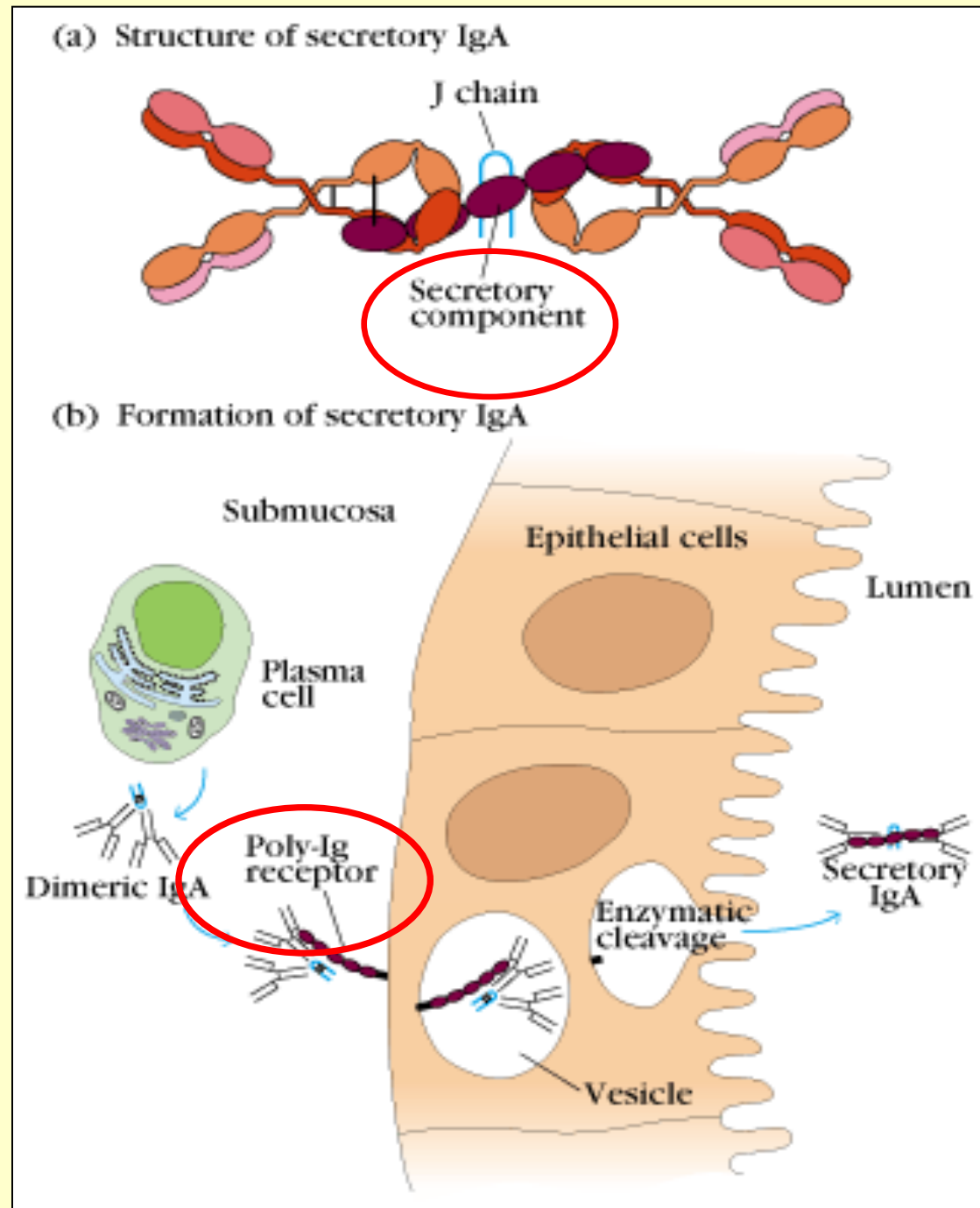
Figure 7.16



Fc $\alpha$ R

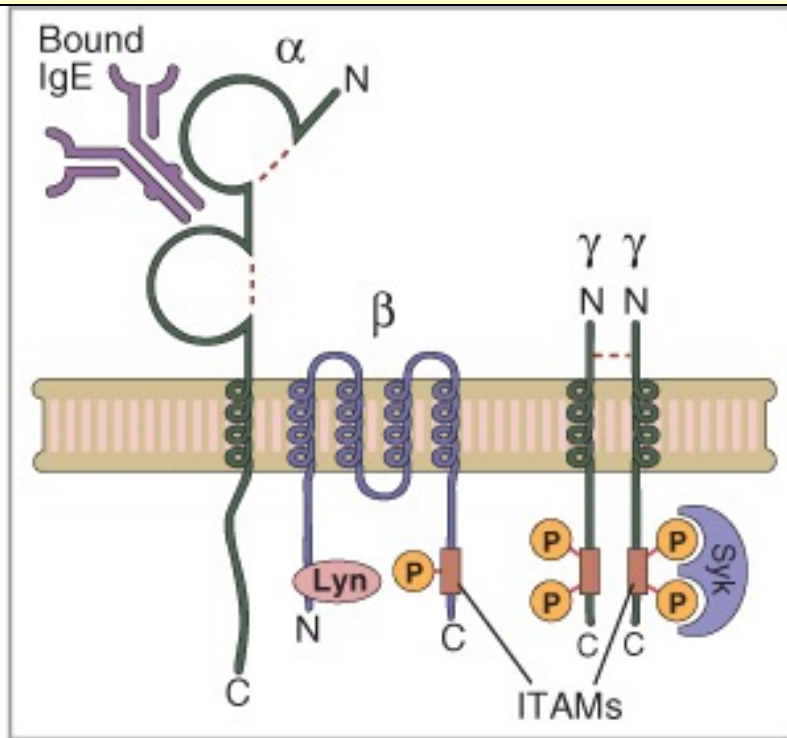
IgA/IgM transport

secretory  
component





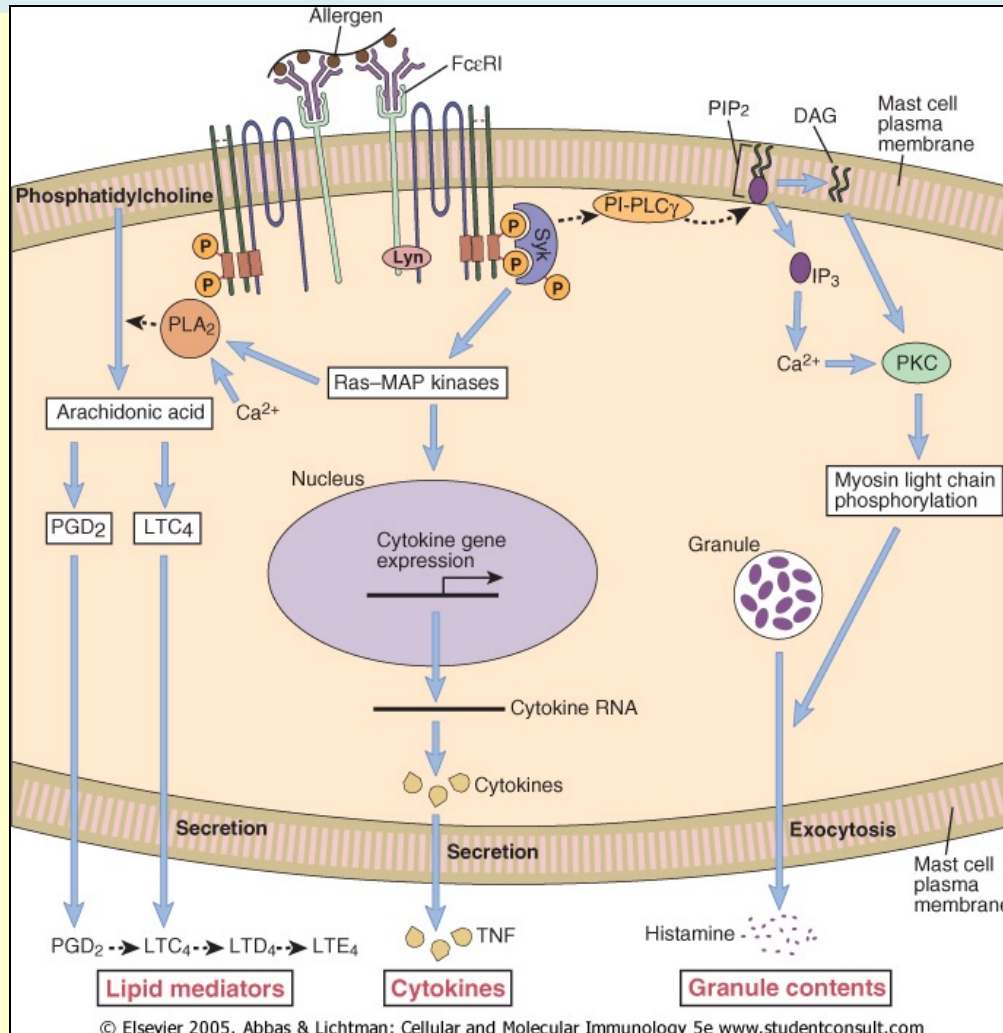
# High affinity IgE receptor (Fc $\epsilon$ R) binds free IgE



Mast cells, basophils, eosinophils  
Langerhans cells, macrophages

IgE upregulate its expression on  
Mast cells

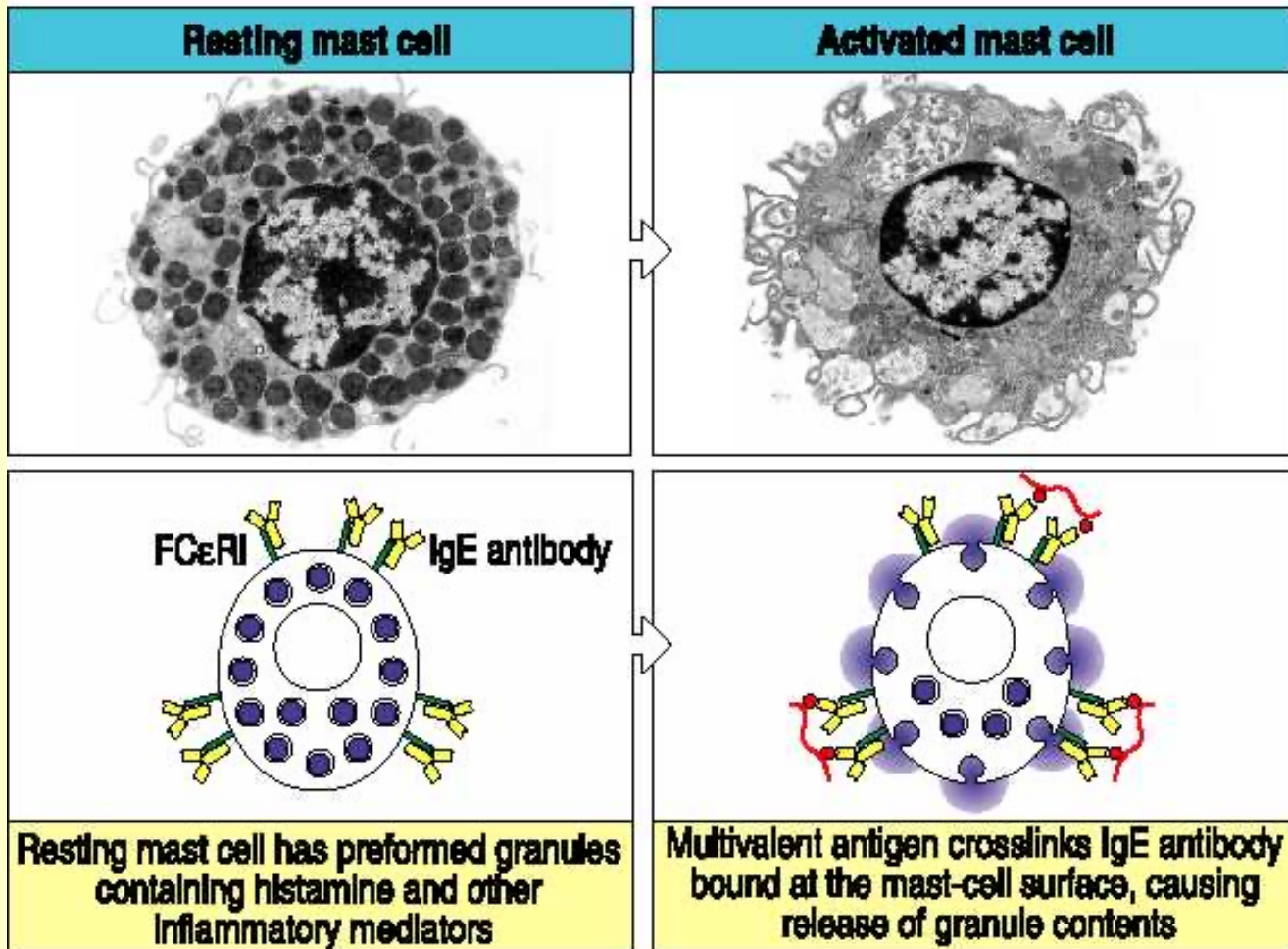
# Antigen crosslinking of the receptor activate the signal transduction → mast cell activation



Syk is critical for FcεR-mediated Ca<sup>2+</sup> mobilization, degranulation, production of cytokines, and arachidonic acid metabolites.

# IgE-mediated mast cell activation

Figure 7.24



**ADCC = antibody dependent  
cellular cytotoxicity**

# ADCC

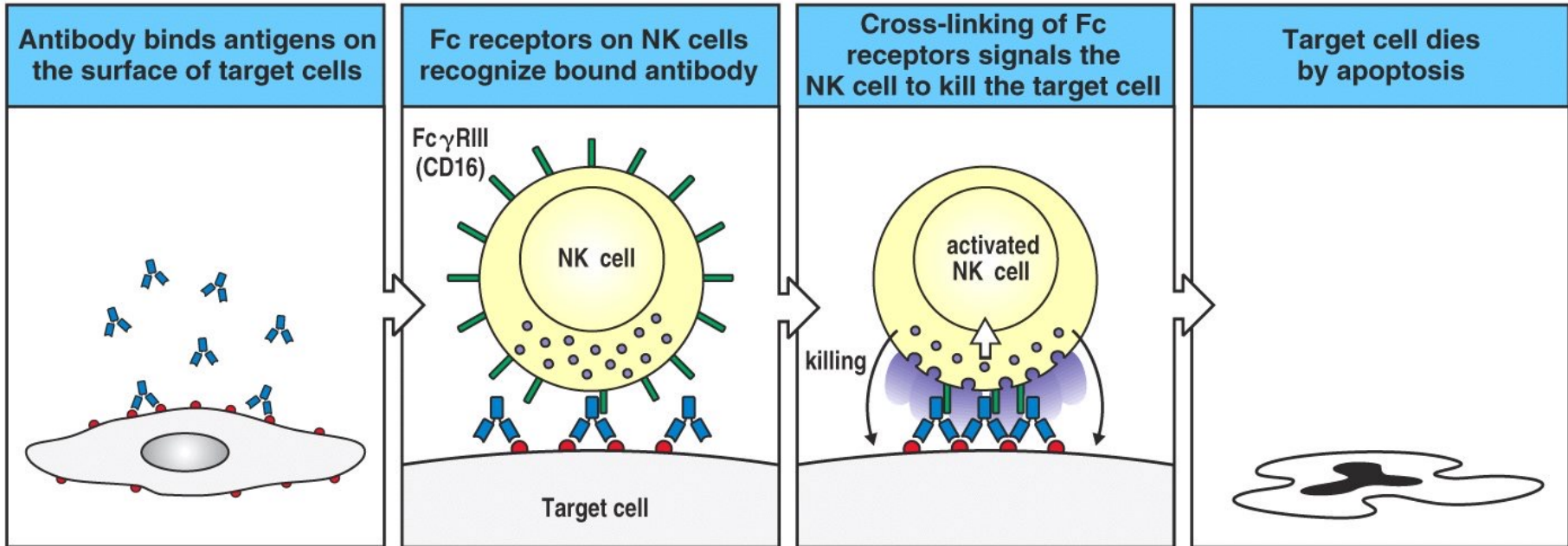
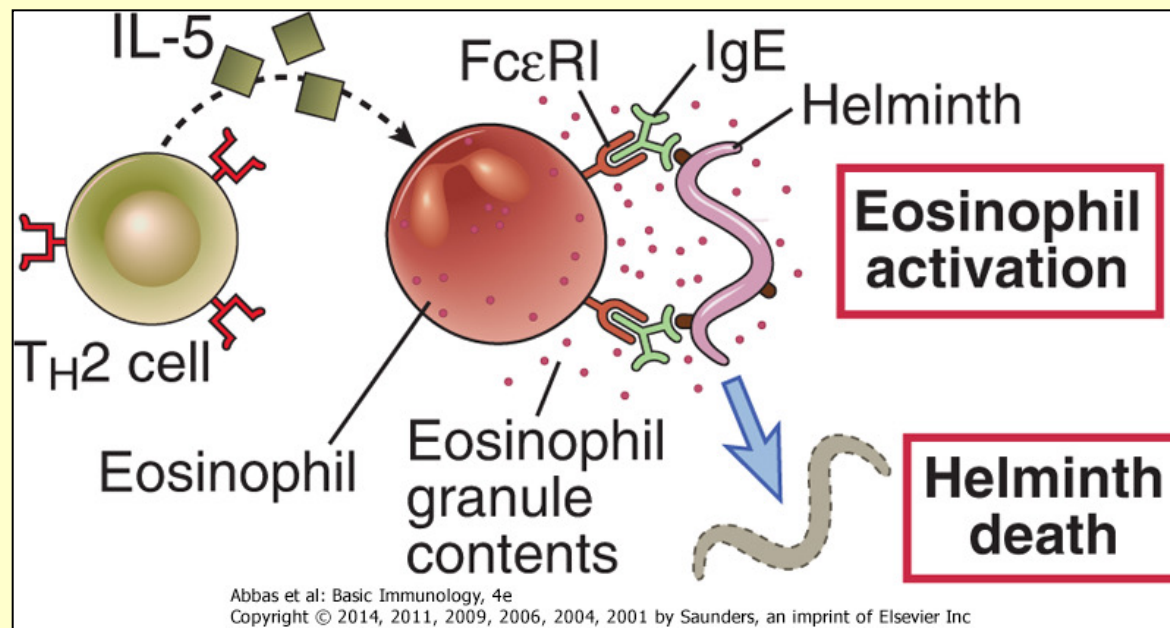
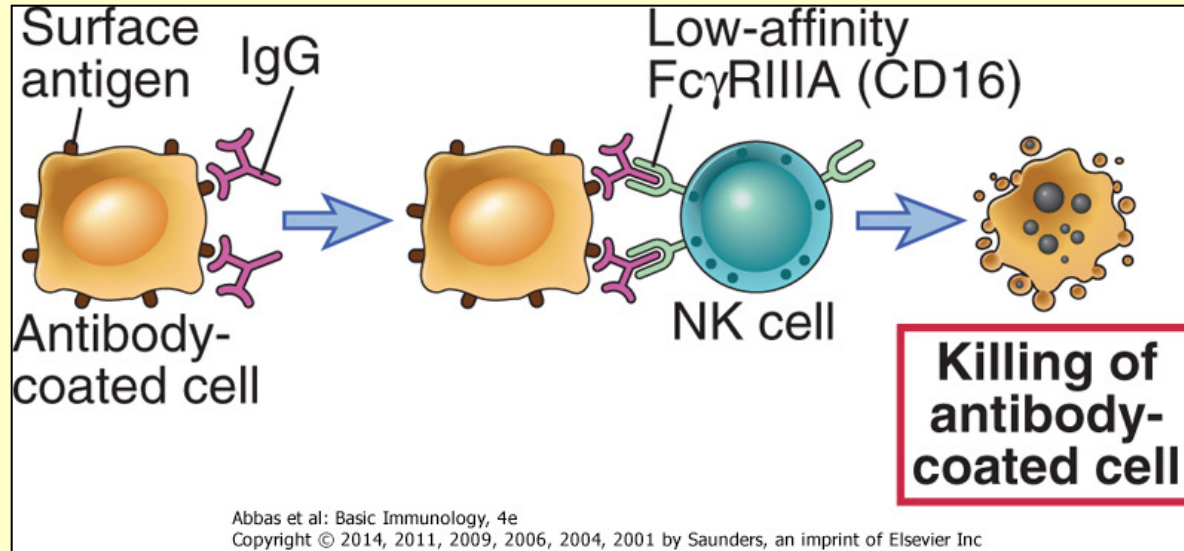


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# ADCC





# ADCC

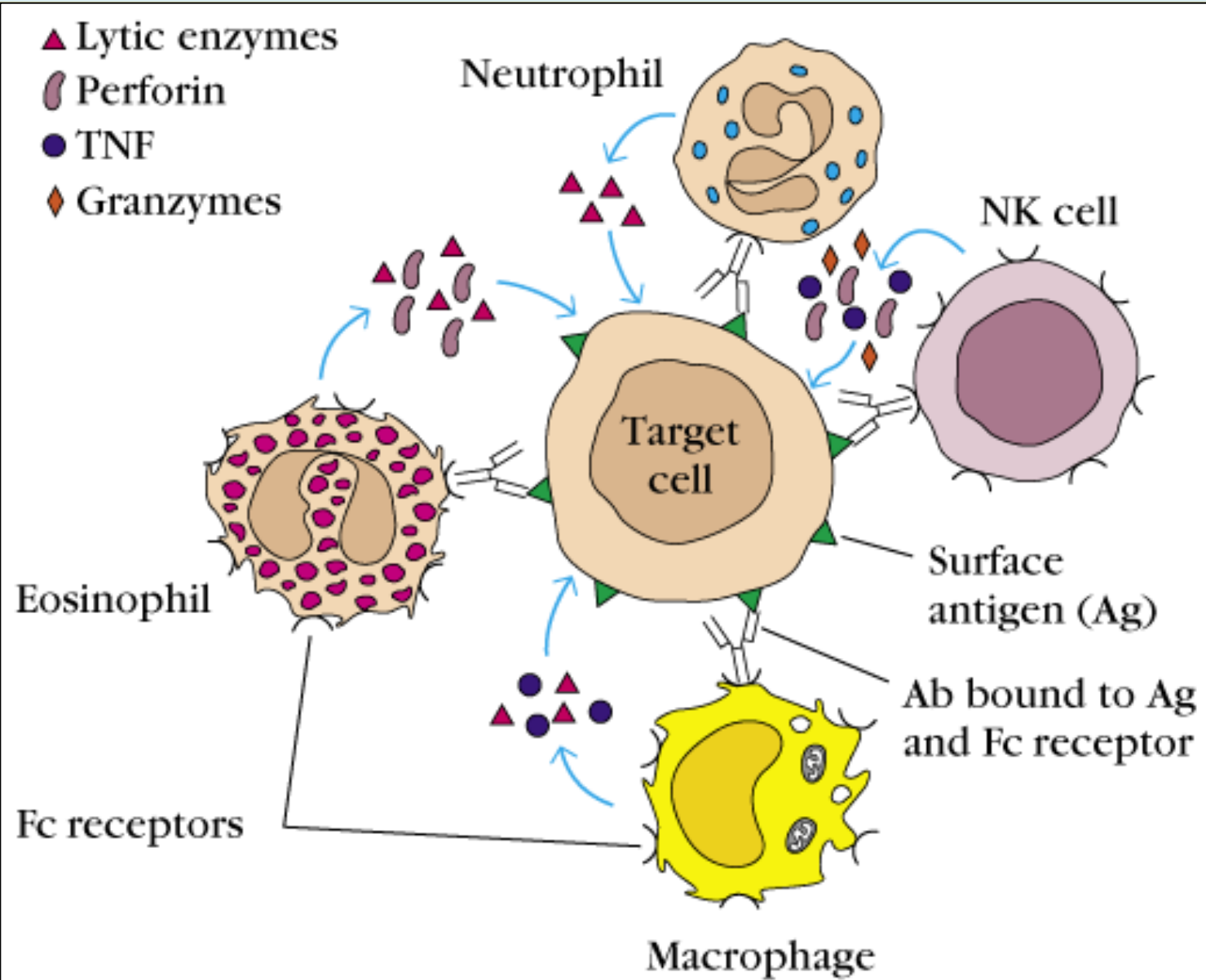
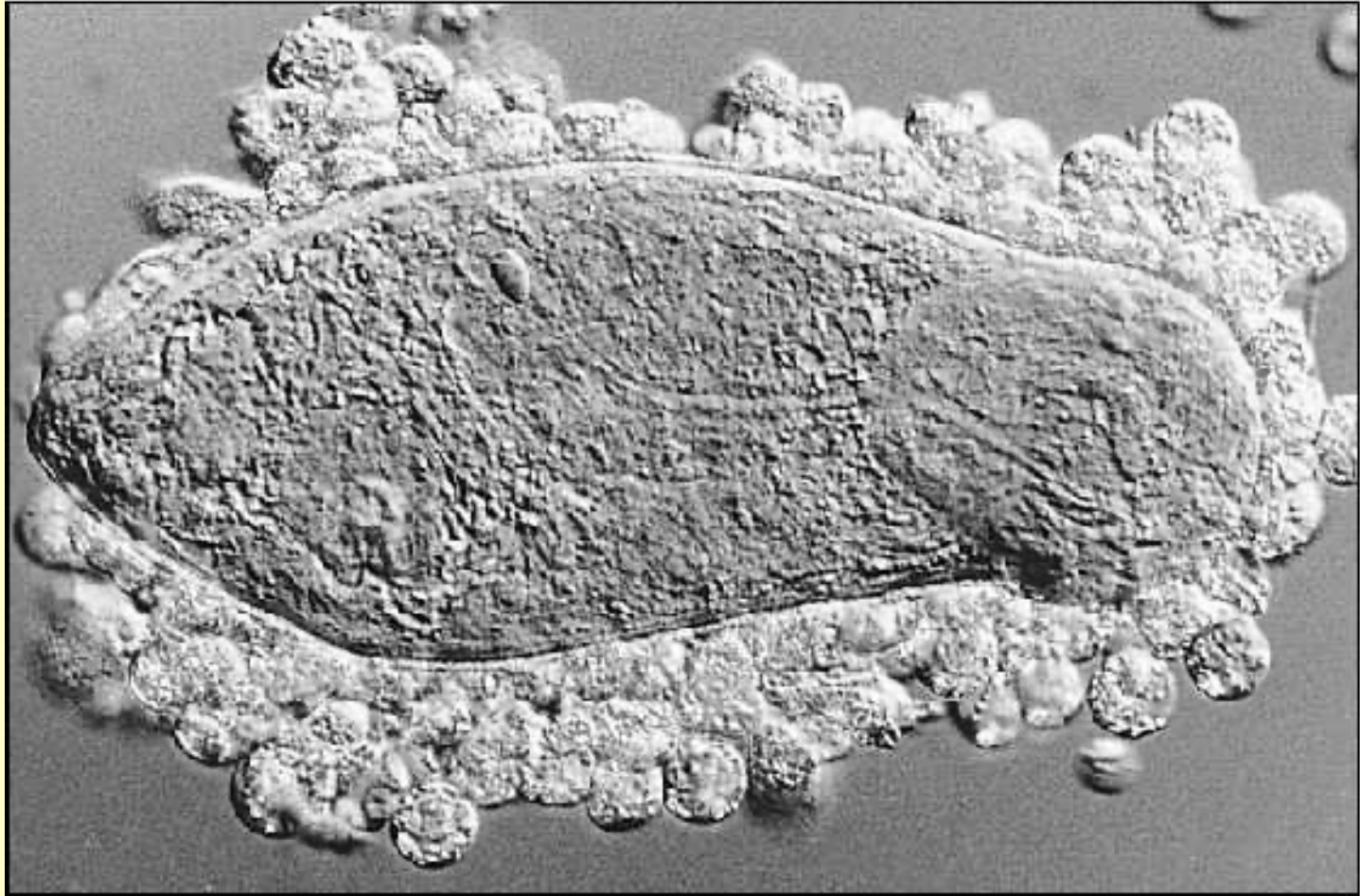


Figure 7.25



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Parasite covered by IgE > eosinophil activation > release of toxic granules

# COMPLEMENT ACTIVATION

# IgG & IgM antigen-antibody complexes activate complement

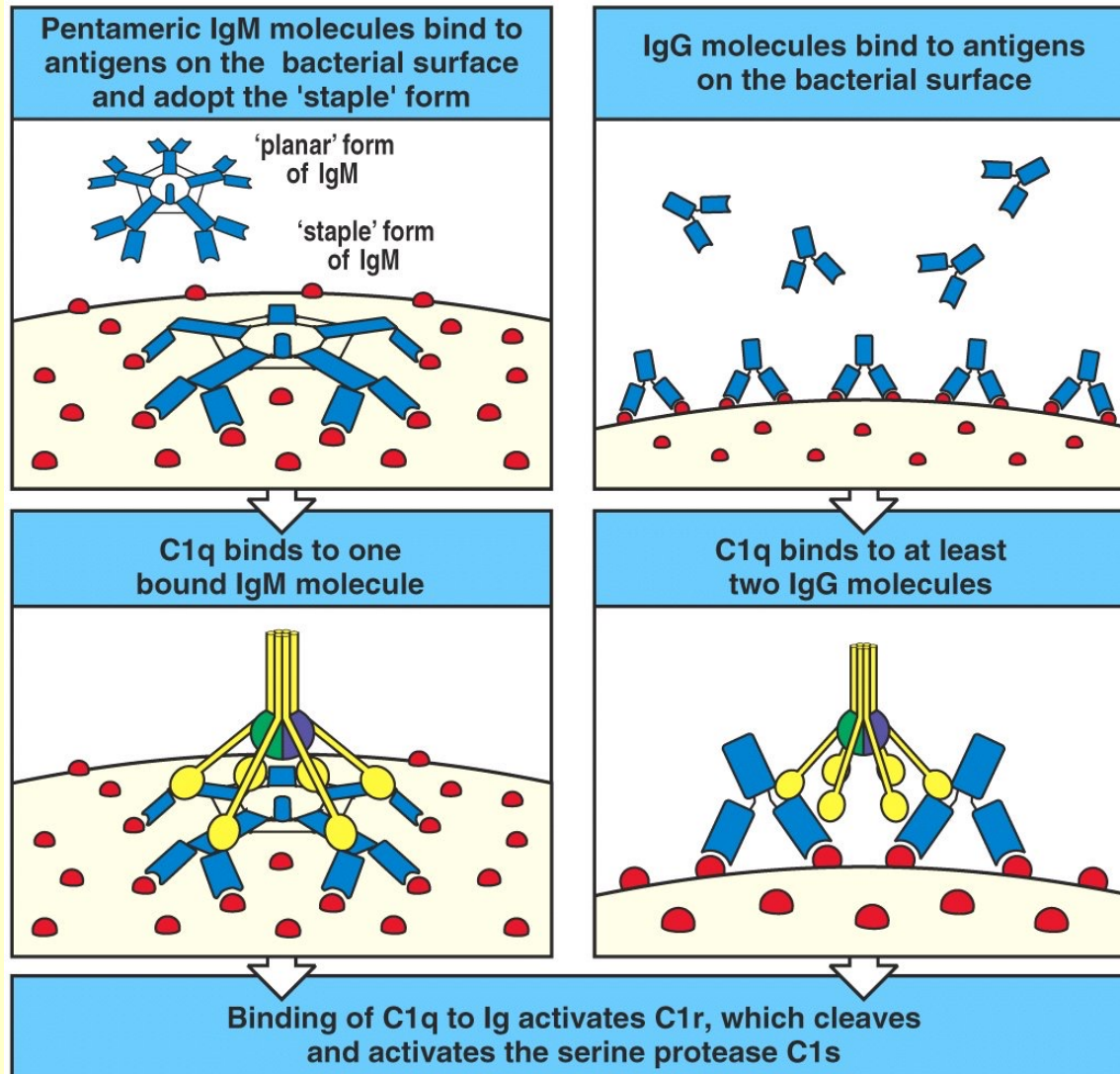


Figure 9-28 Immunobiology, 6/e. (© Garland Science 2005)