

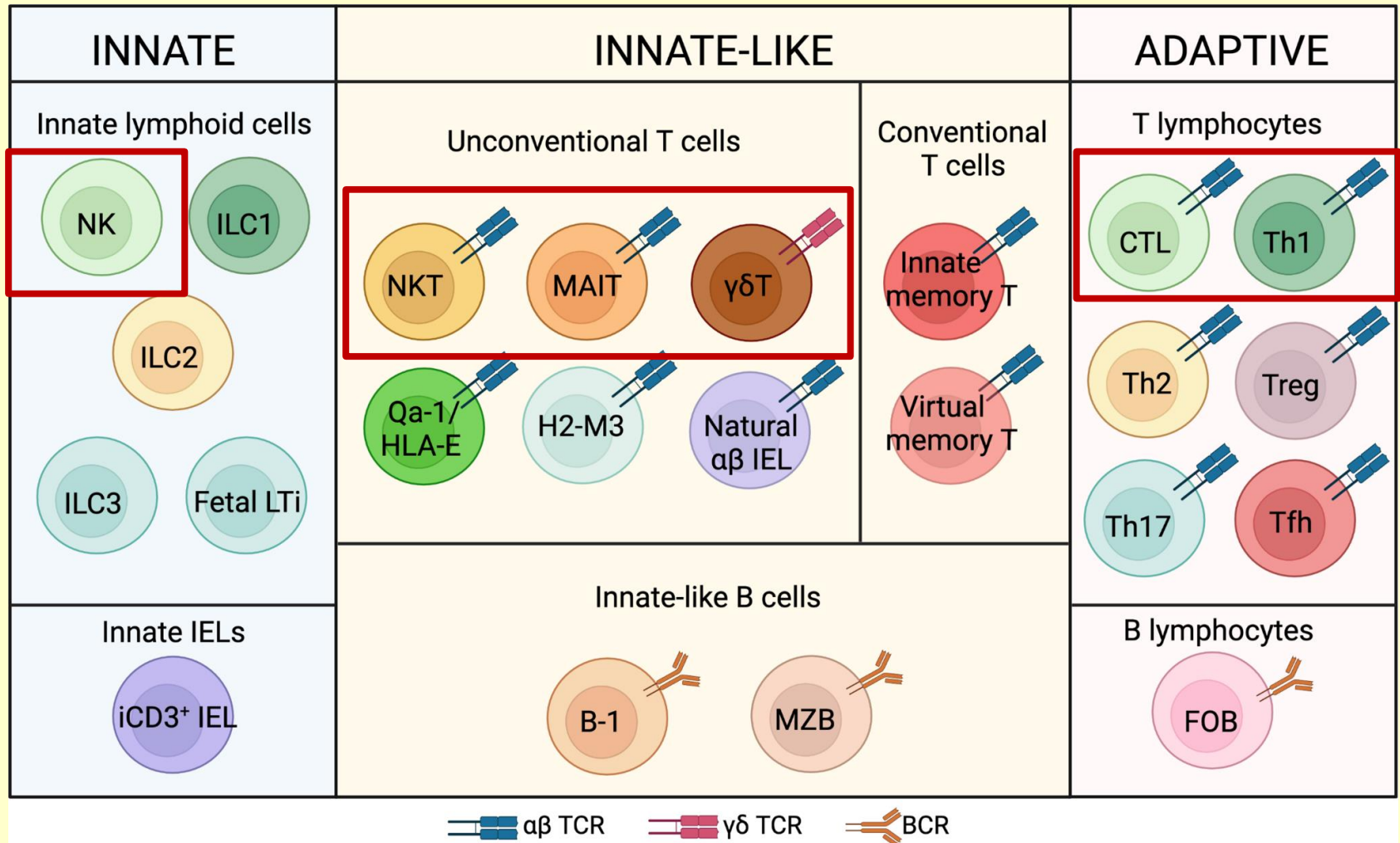
Basic Immunology

Lecture 17

Effector mechanisms of cell-mediated immune responses (CMI):

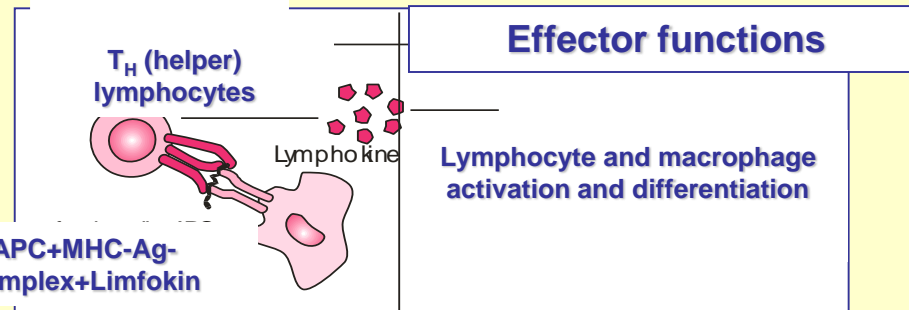
Innate, natural and adaptive effector lymphocytes

From: *Innate and Innate-like Effector Lymphocytes in Health and Disease*

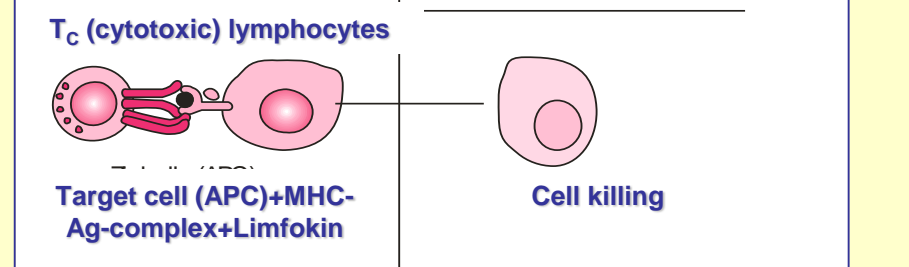


Effector functions of lymphocyte populations

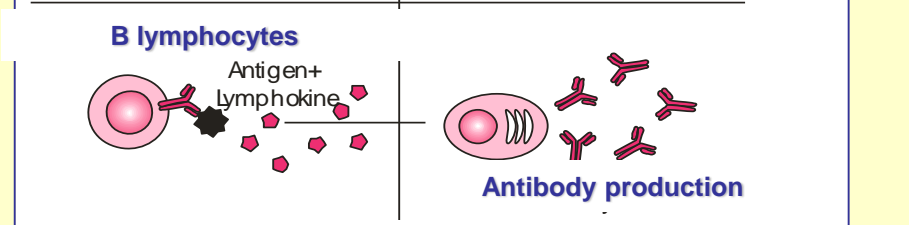
CD4+ Th1



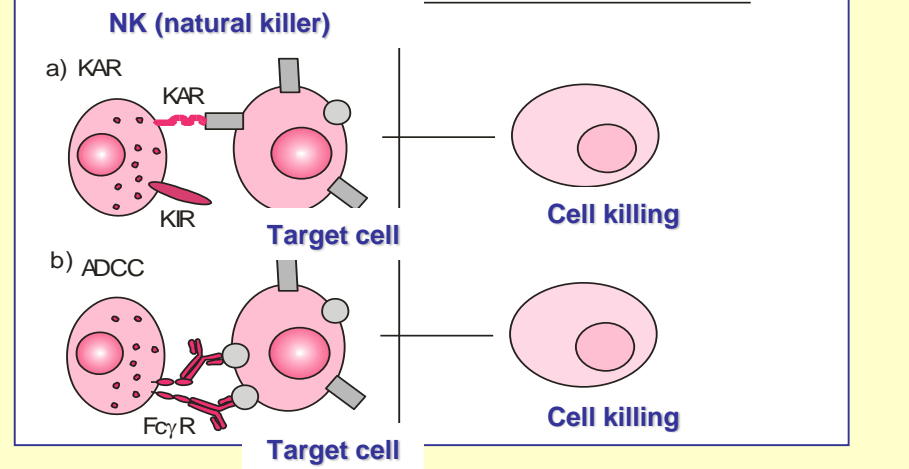
CD8+T_C → CTL



Th1 or Th2



NK cells





Types of T Cell–Mediated Immune Reactions

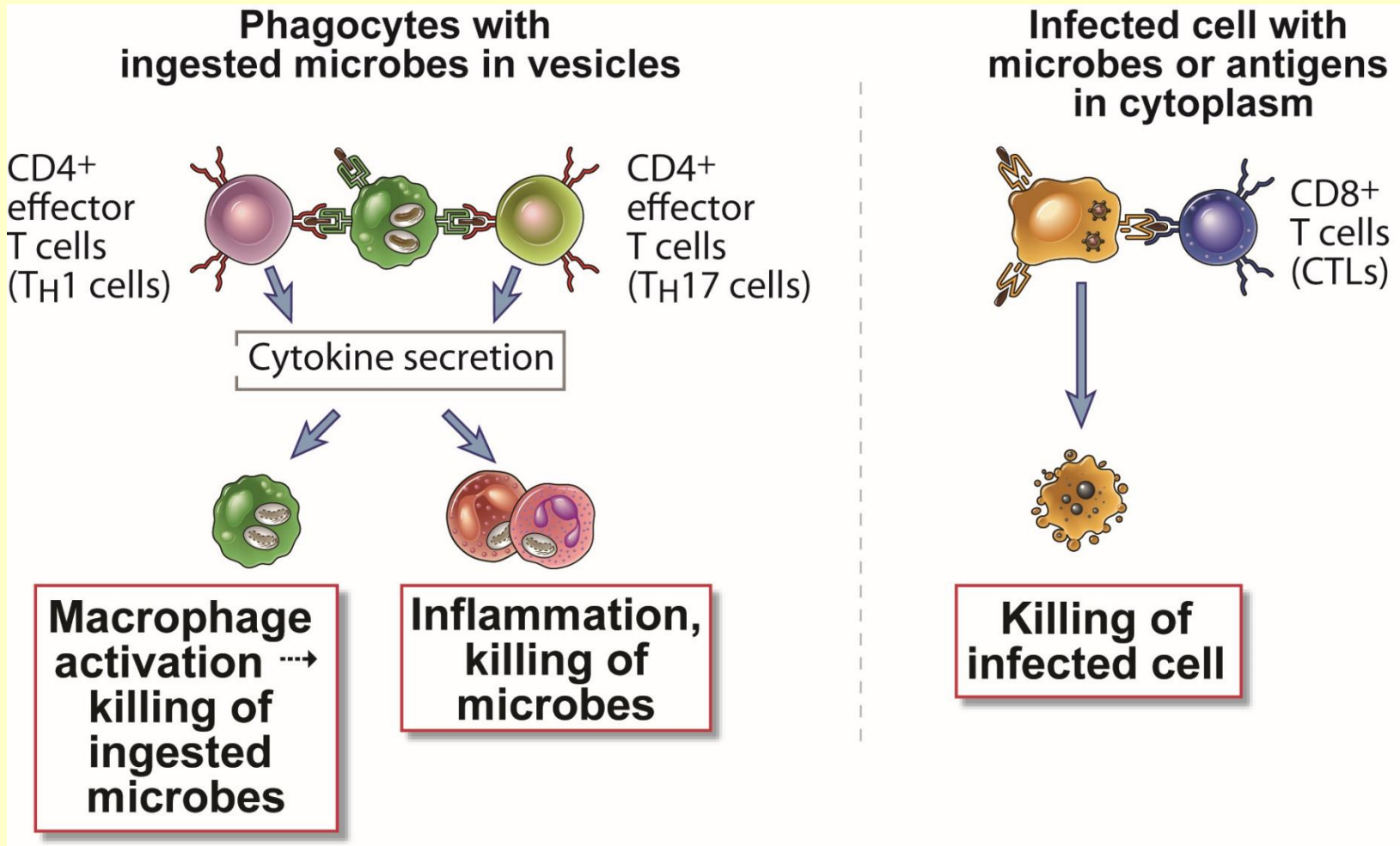


Fig. 10-1

Cell-mediated immune response (CMI)

Cytotoxicity

Effector cells direct cytotoxic activity:

- CD8+Tc → CTL
- $\gamma\delta$ T cells
- NK cells,
- Macrophages

Target cell (cytosolic antigen):

- allogeneic cells (transplantation minor histocompatibility antigen)
- malignant cells
- virally infected cells
- chemically modified cells

Th1 mediated macrophage activation

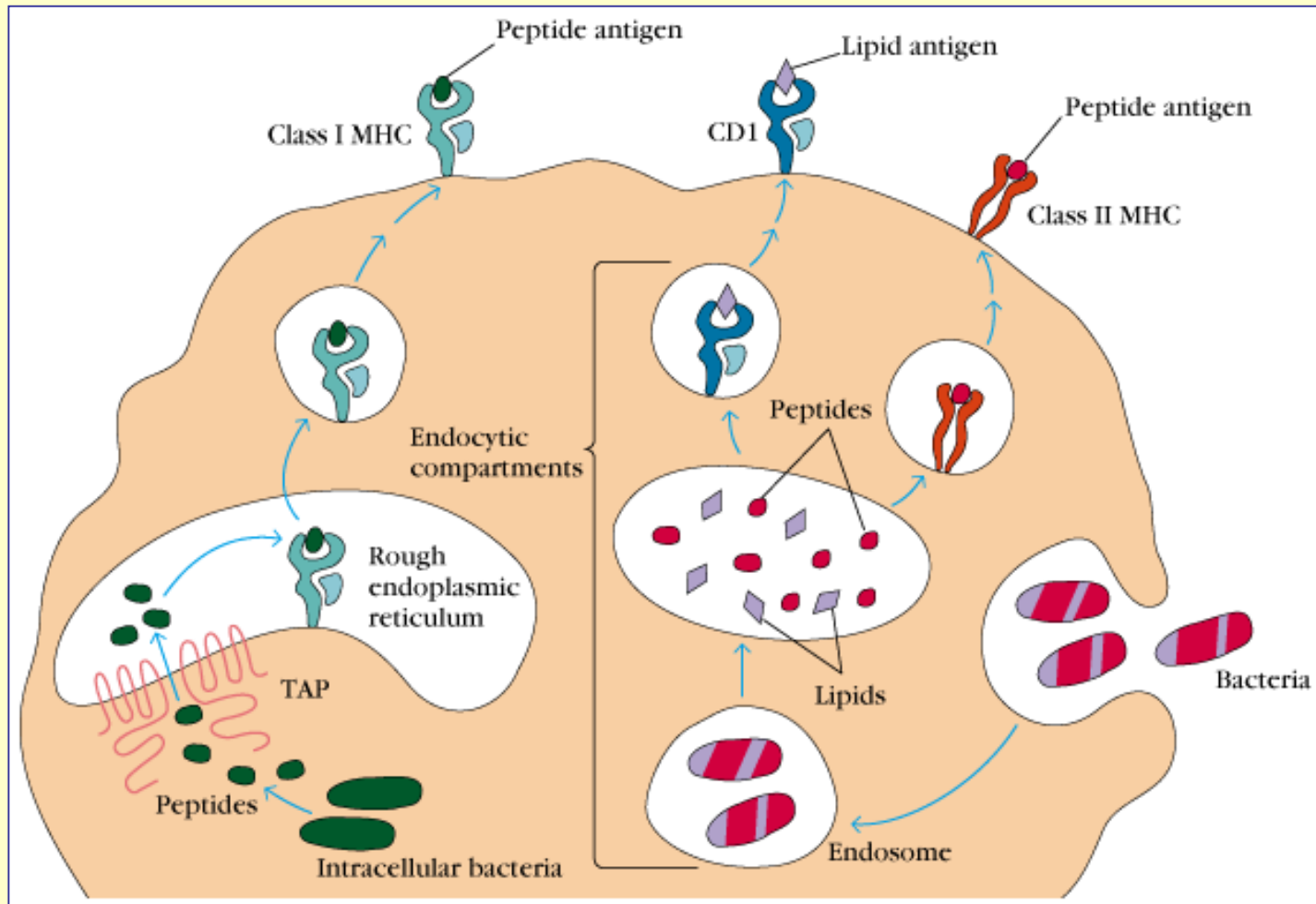
Effector cells cytokine production:

- T_{DTH} cells = Th1 cells
- Macrophages

Antigen in phagolysosome:

- intracellular bacterium, fungi, parasite, virus
- contact antigens (small molecules (haptén) skin protein complexes)

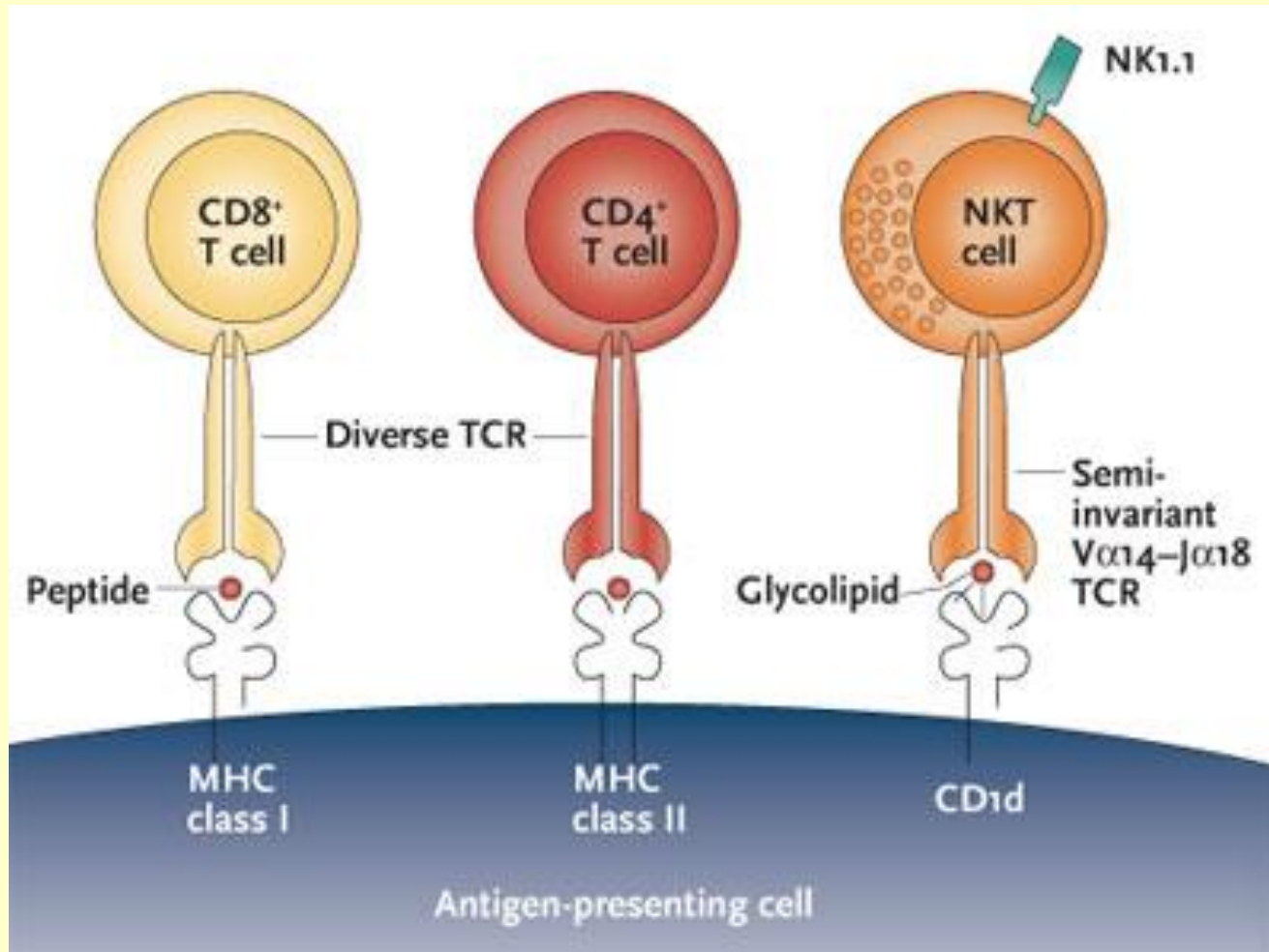
Presentation of intracellular and extracellular antigens



Cytosolic way

Phagolysosomes

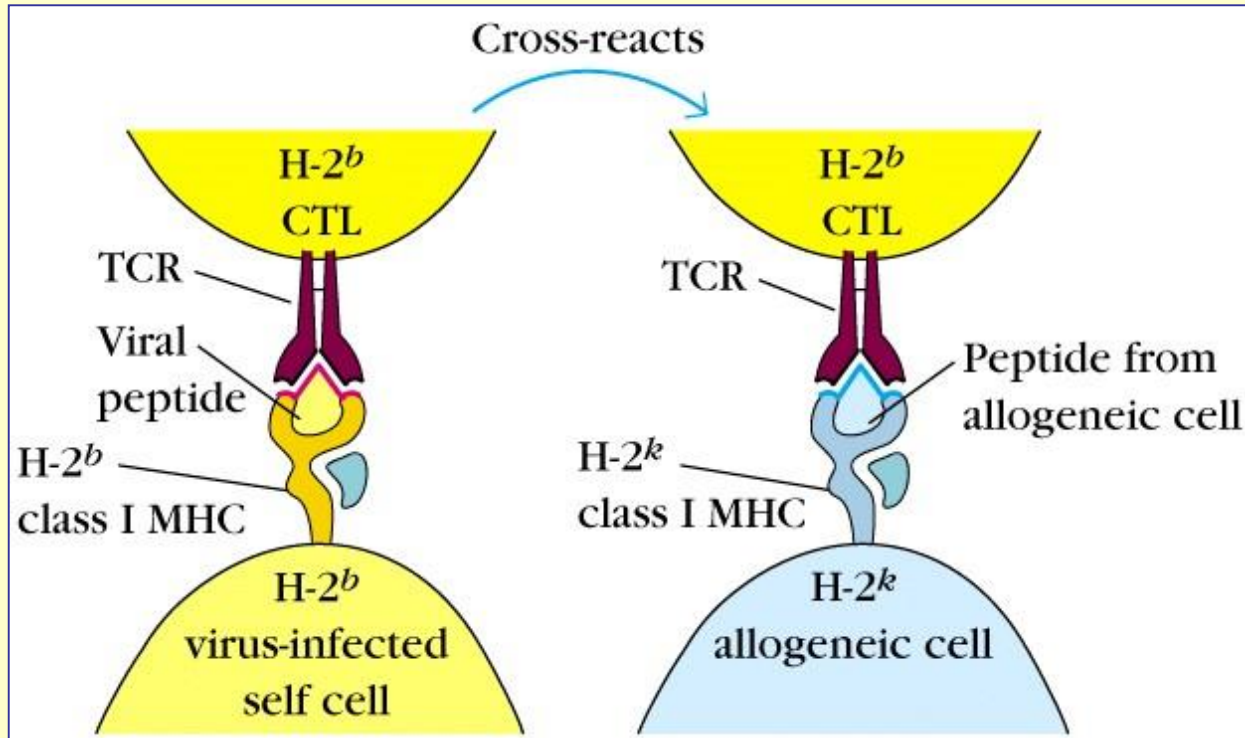
Antigen recognition of T and NKT cells



Cytotoxicity

1. **CD8+ T cytotoxic cells**
2. $\gamma\delta$ T cells
3. NKT and MAIT cells
4. NK cells

Antigen recognition of cytotoxic T cells



Activated Tc cells = effector CTL

TcR $\alpha\beta$, CD8⁺ cells

Antigen specific recognition with MHC- I restriction



Phases of T Cell Responses

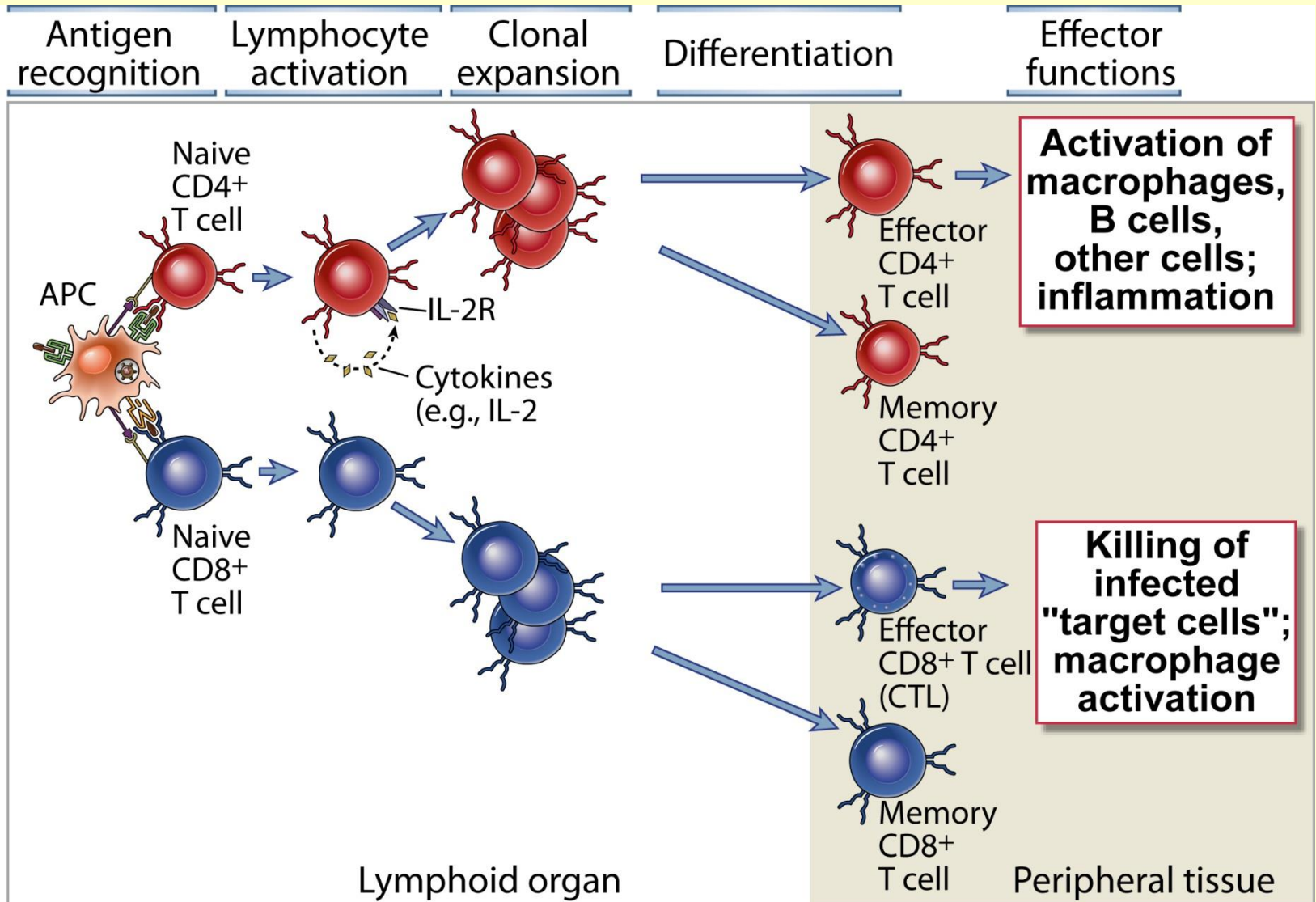
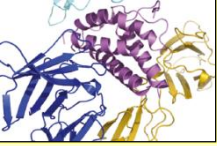


Fig. 9-2



Clonal Expansion of T cells

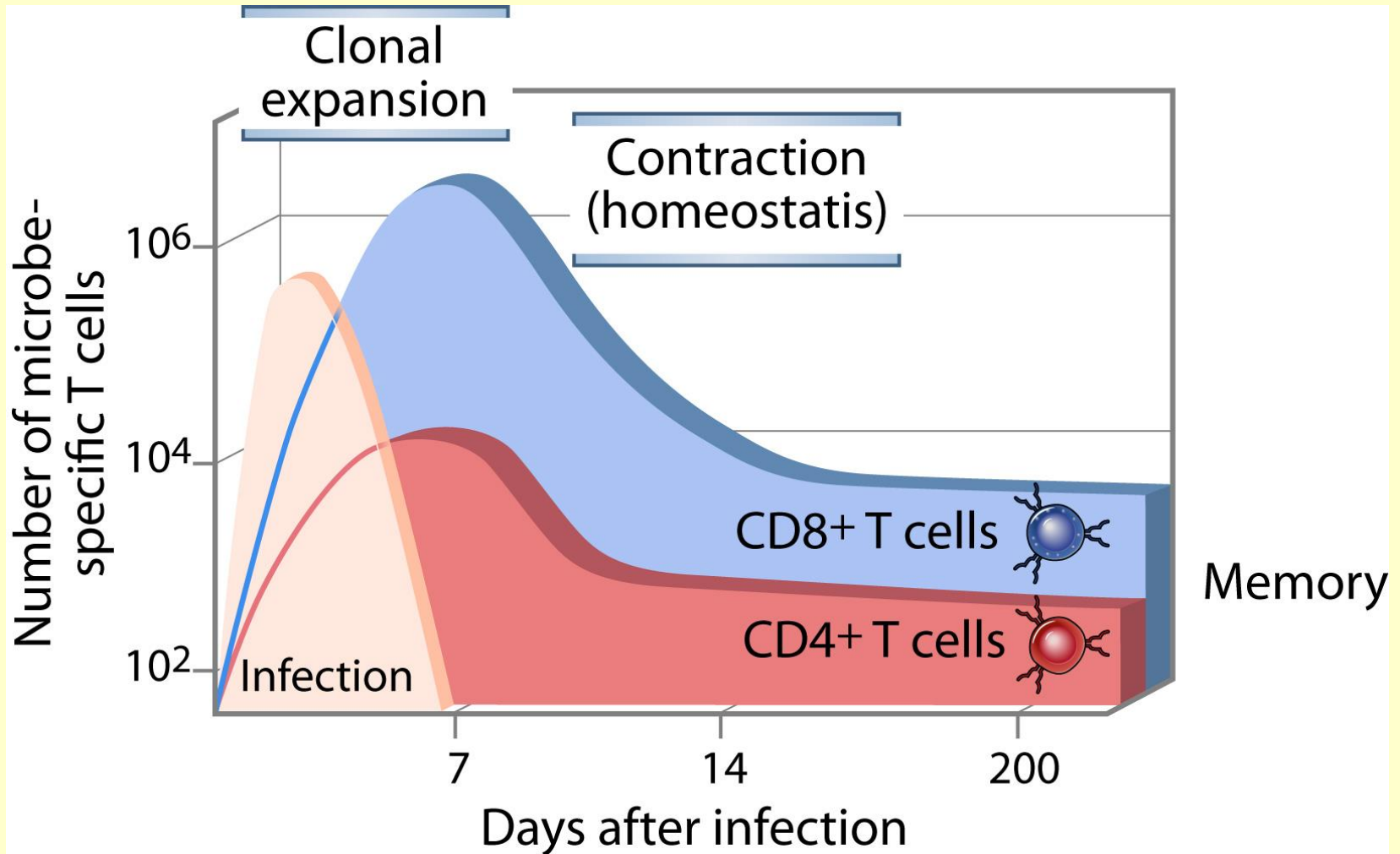
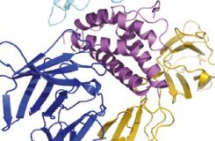
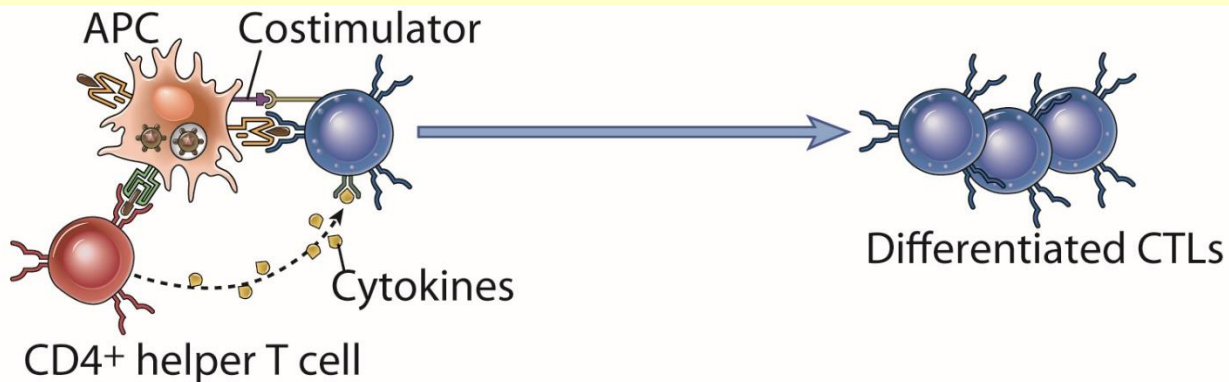


Fig. 9-12



How CD4⁺ T Cells Help CD8⁺ T Cells

CD4⁺ helper T cells produce cytokines that stimulate CTL differentiation



CD4⁺ helper T cells enhance the ability of APCs to stimulate CTL differentiation

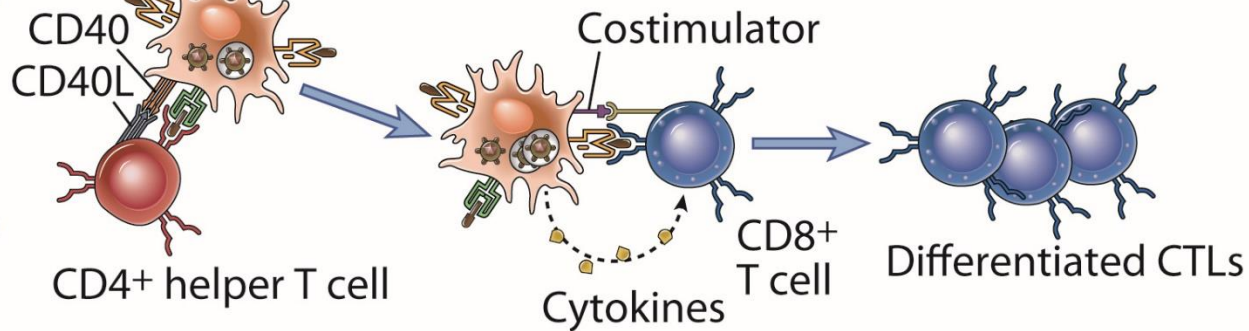
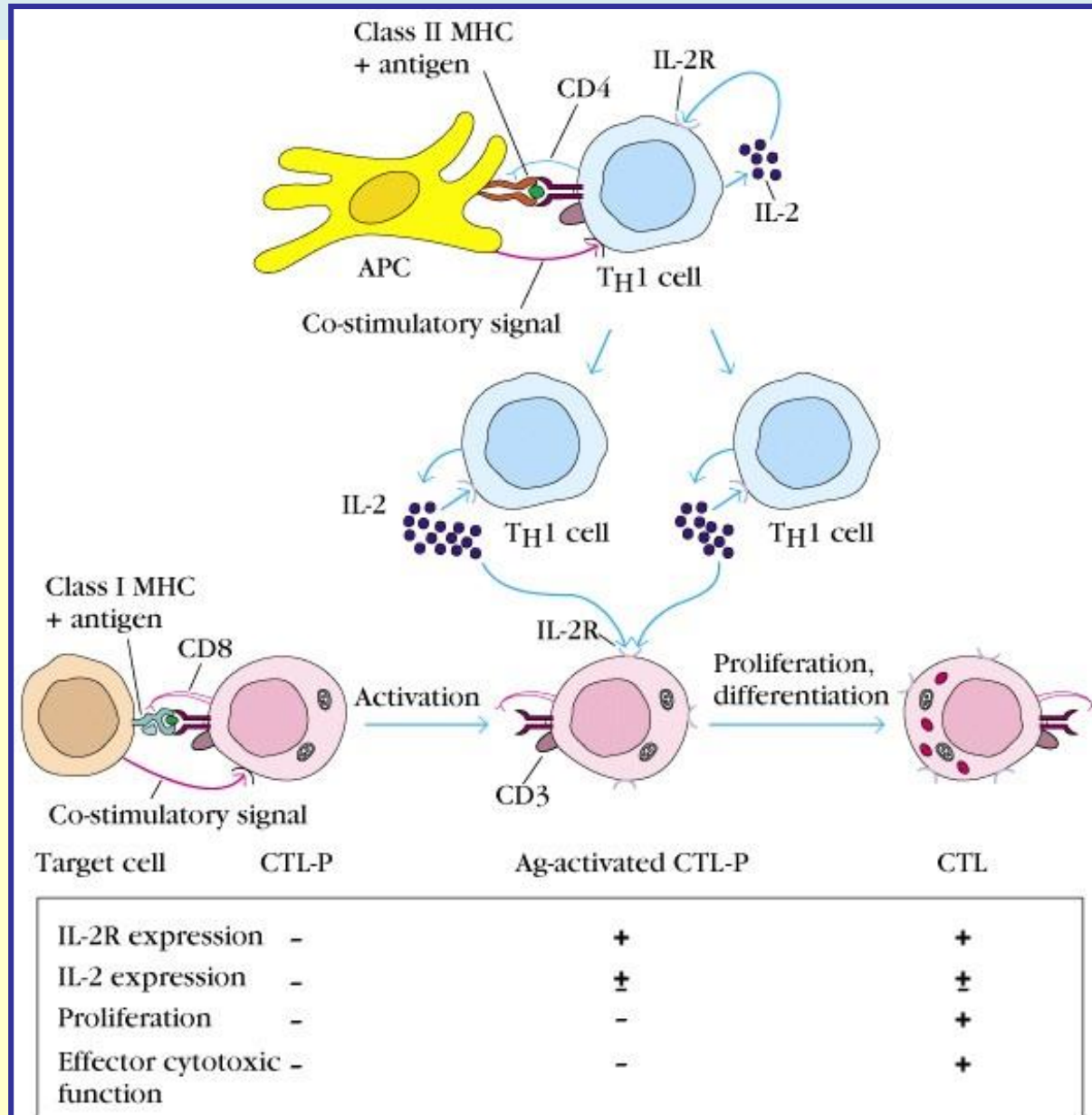
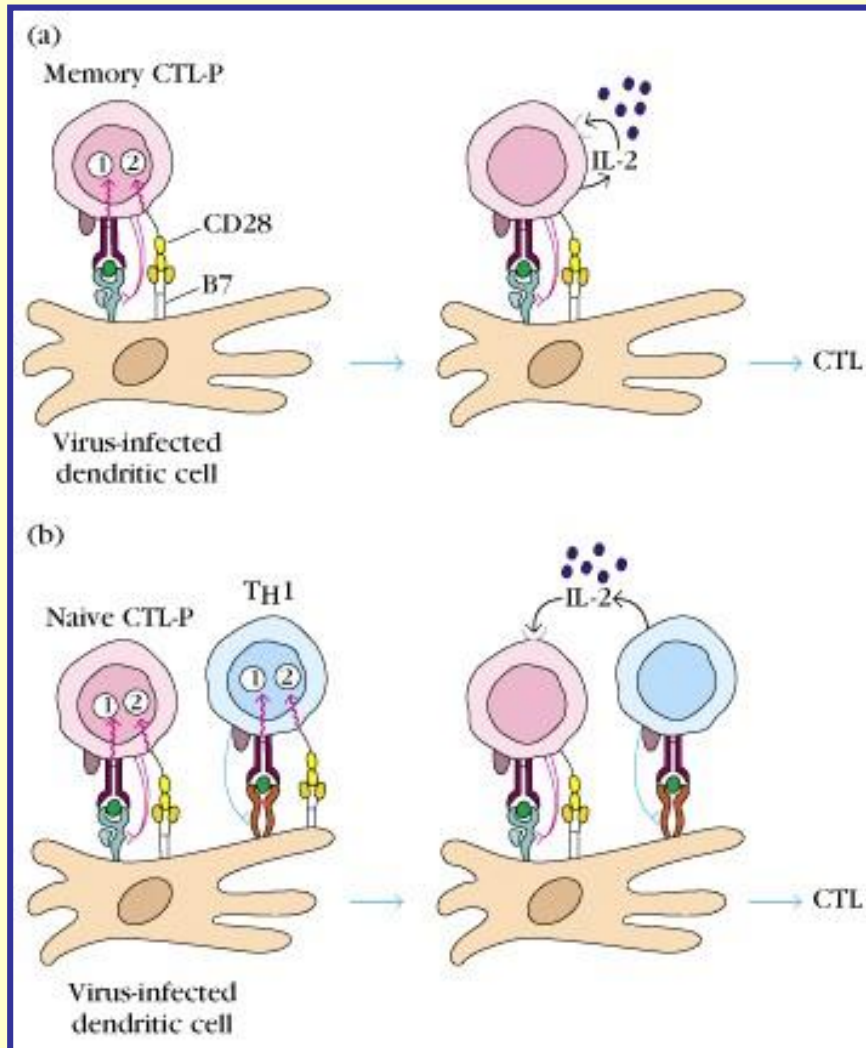


Fig. 9-18

Naive Tc cell activation



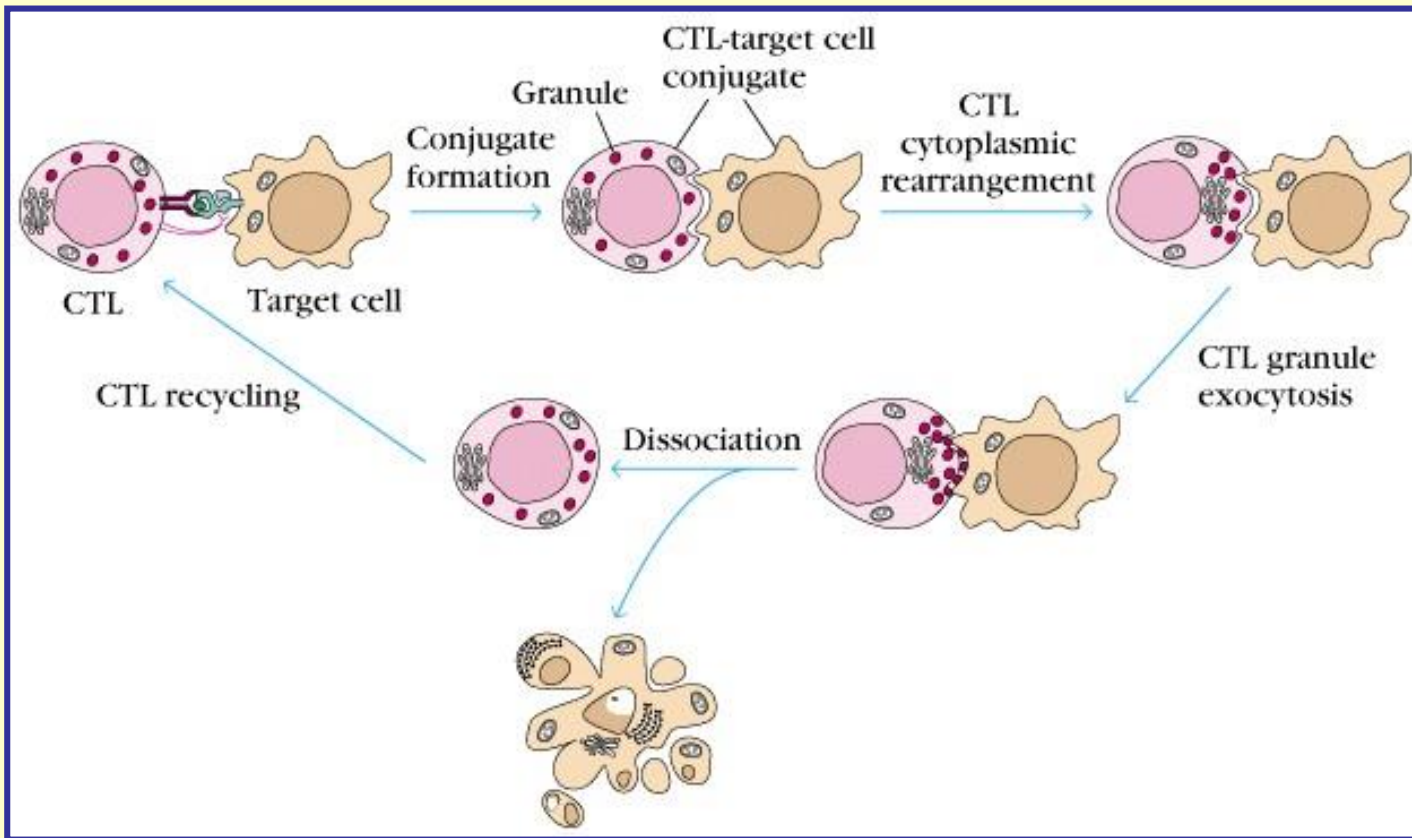
Activation of memory CTL doesn't require Th1 help



Memory CTL: autokrin IL-2 production

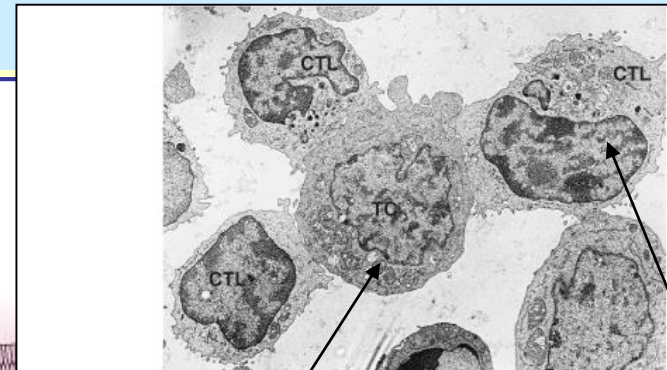
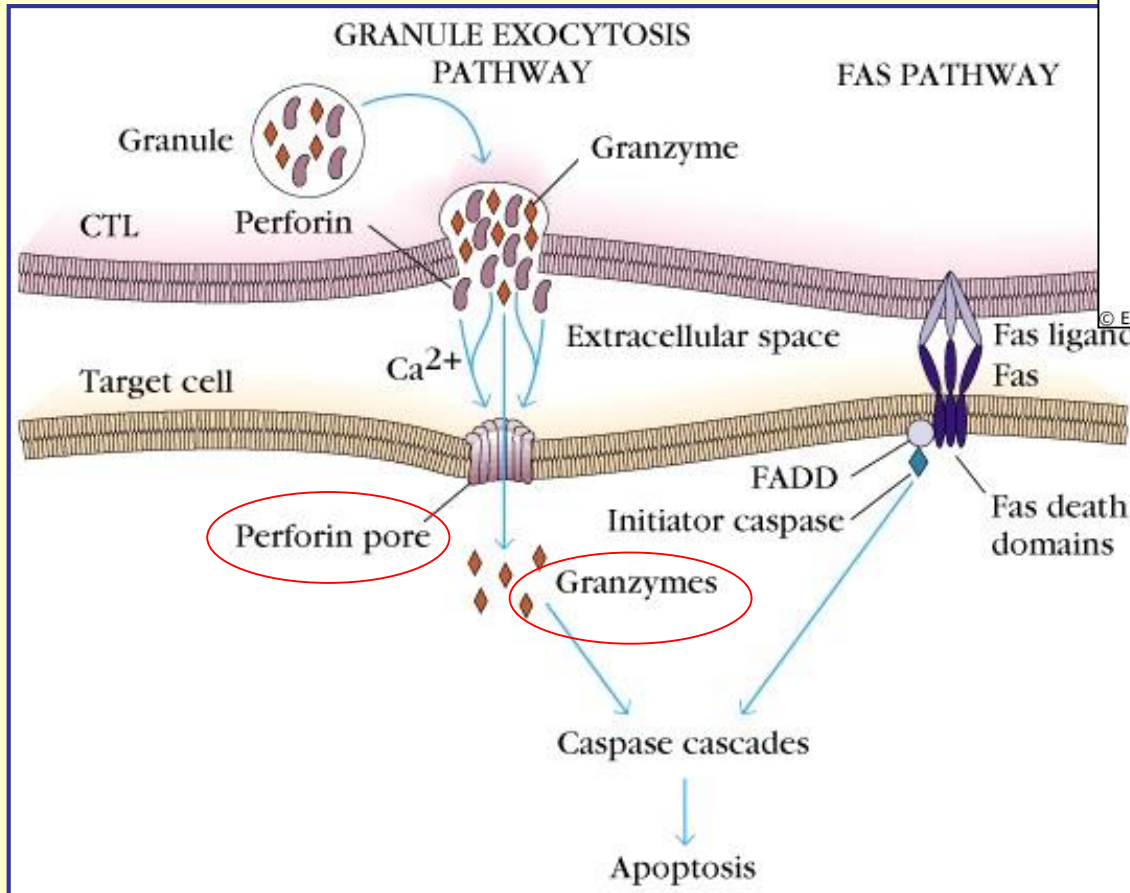
Naiv CTL: Th1 produces IL-2

Steps of CTL-mediated target cell killing



1. Antigen recognition
2. Conjugation
3. CTL cytoplasmic rearrangement
4. CTL degranulation
5. Target cell apoptosis
6. Dissociation

Mechanisms of CTL induced apoptosis:



© Elsevier 2005. Abbas & Lichtman, Cellular and Molecular Immunology

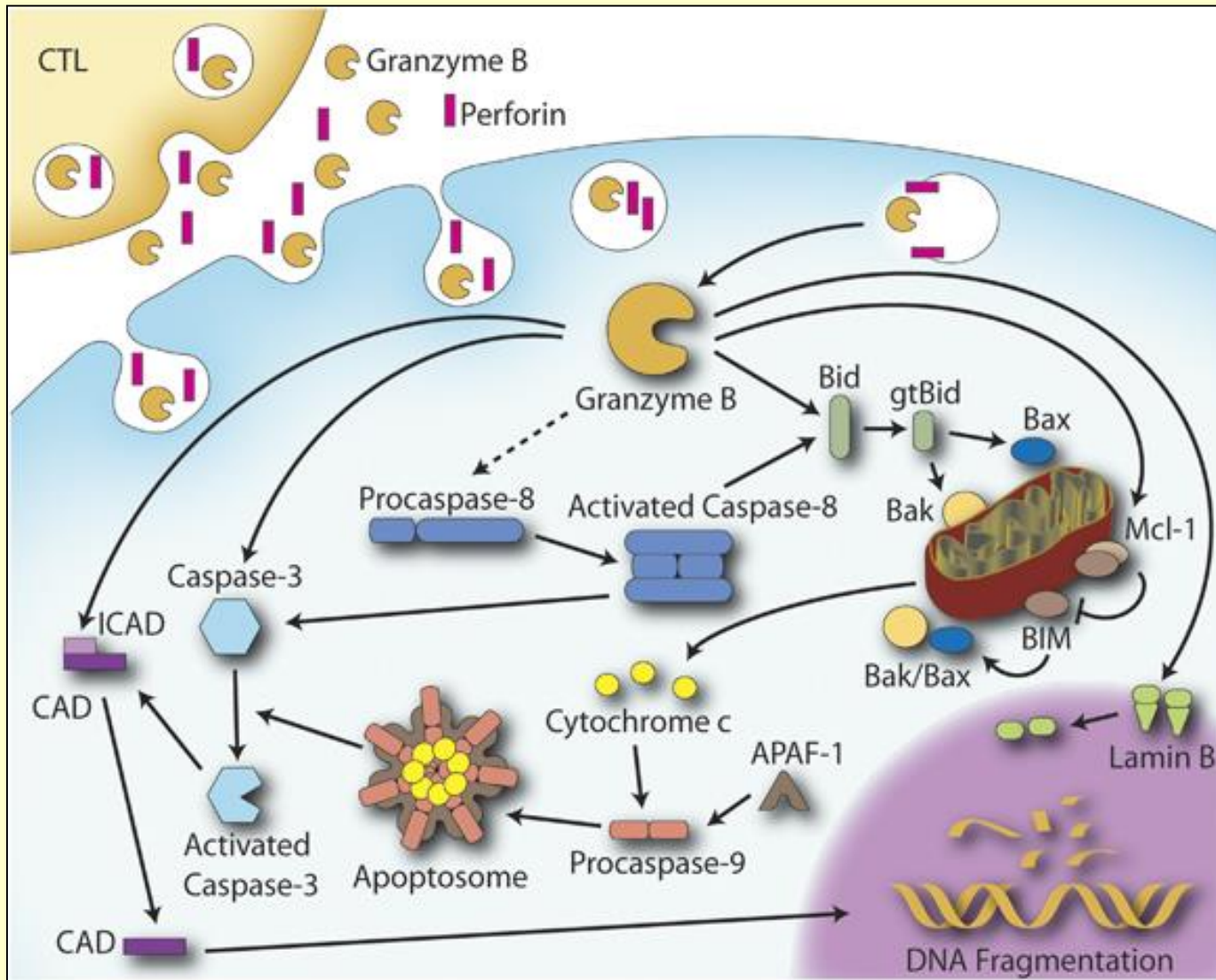
Target cell

Cytotoxic T-cell

Soluble effector molecules: perforins and granzymes

Membrane-bound effector molecules: Fas/Fas ligand (FAS-L)

The secretory mechanism of apoptosis



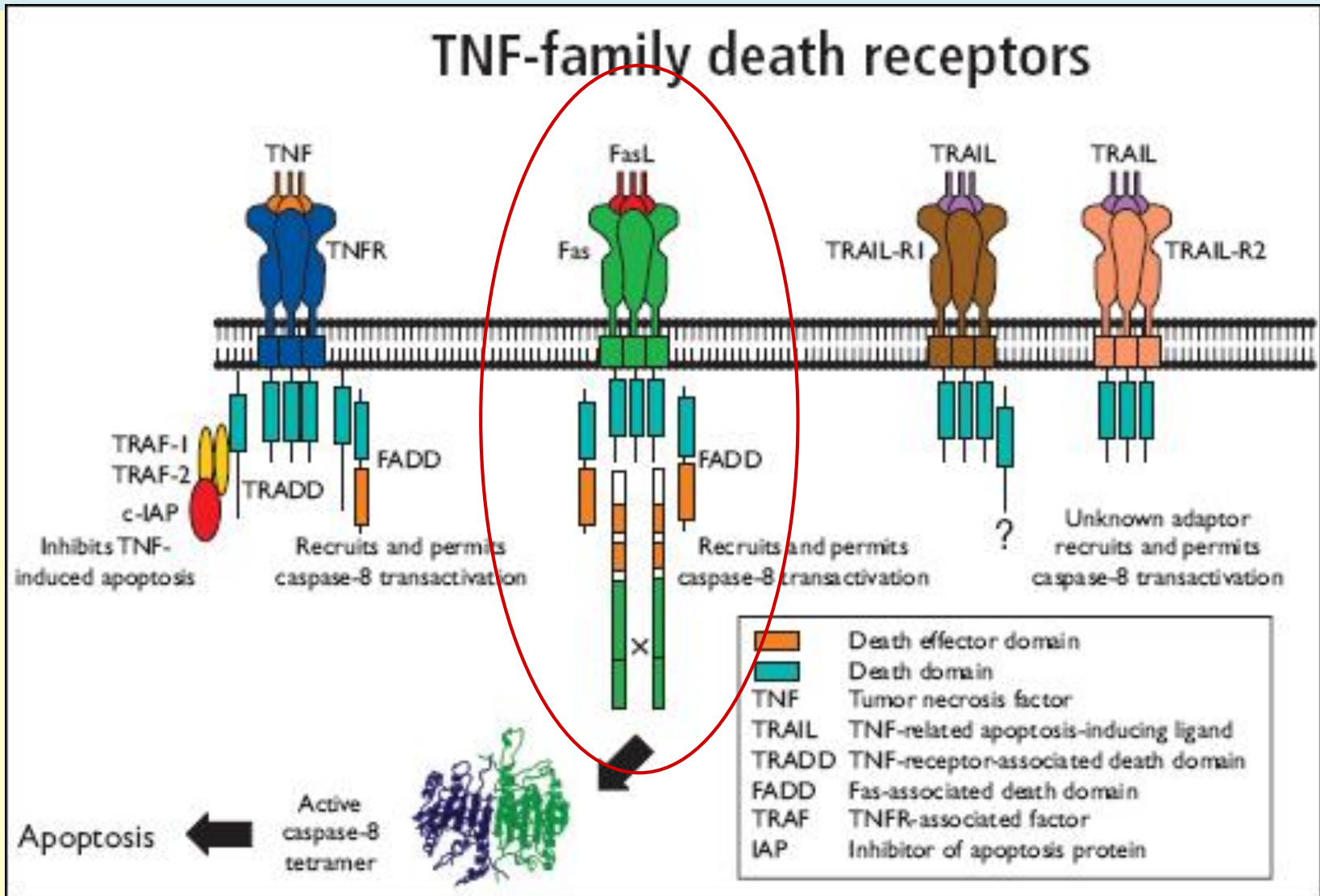
Granzyme B:

Induction of Apoptosis

Granzyme A:

DNA-Fragmentation

Extrinsic Apoptosis pathway

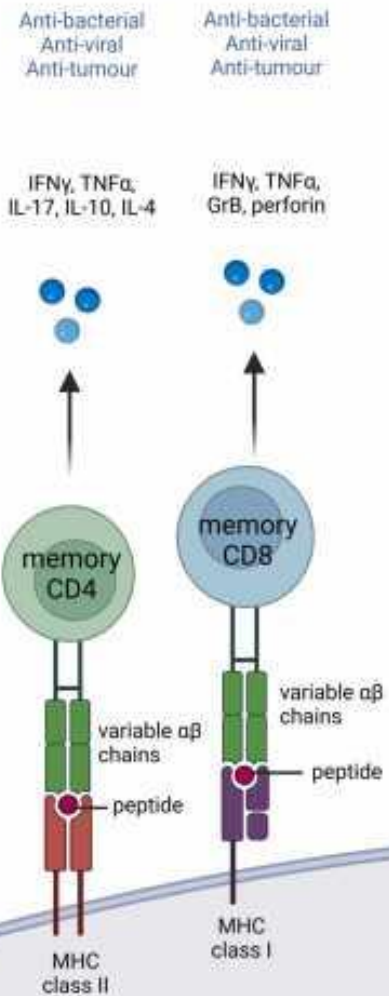


Cytotoxicity

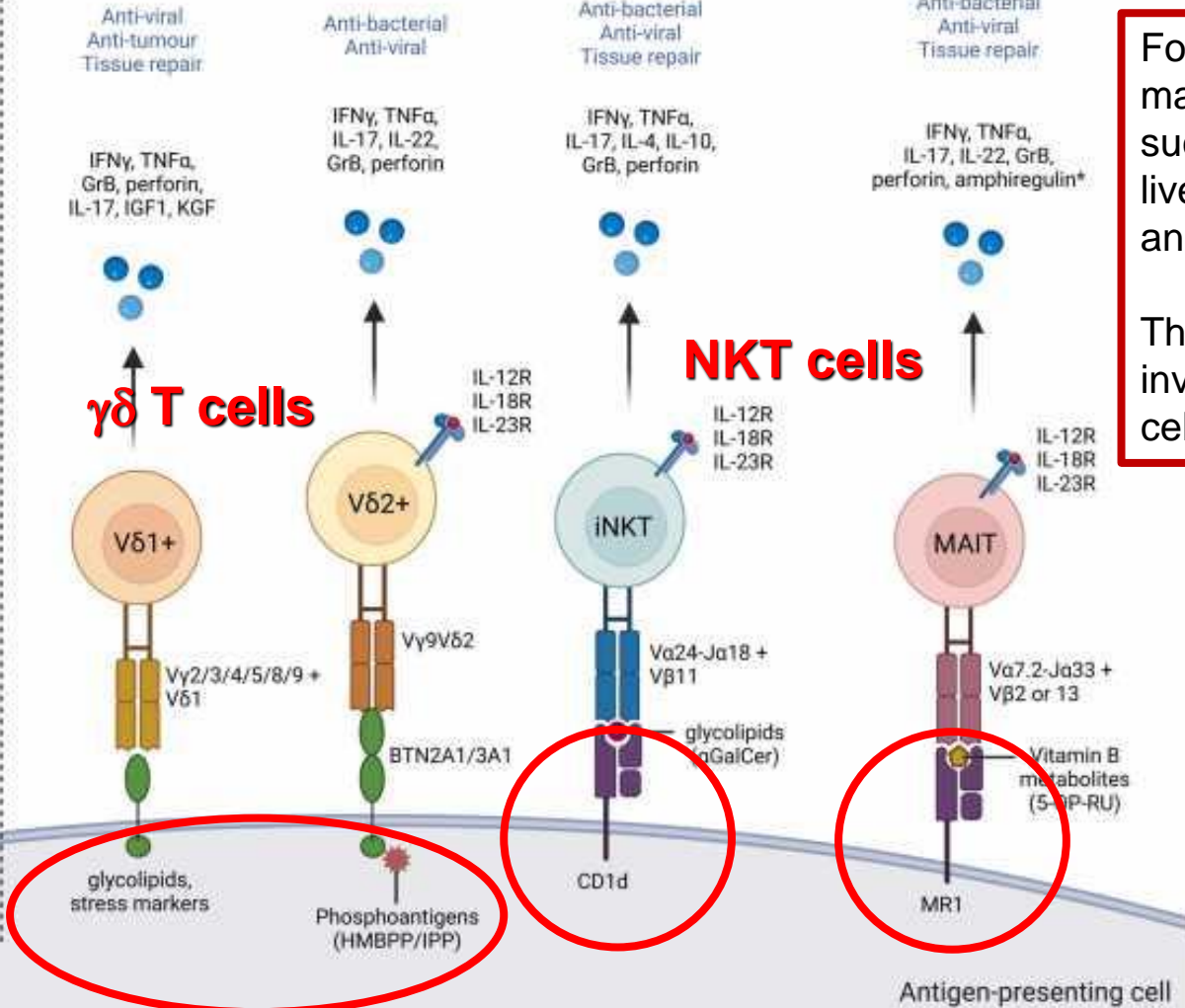
1. CD8+ T cytotoxic cells
2. $\gamma\delta$ T cells
3. NKT and MAIT cells
4. NK cells

Antigen recognition of traditional and unconventional T cell subsets

Conventional T cells



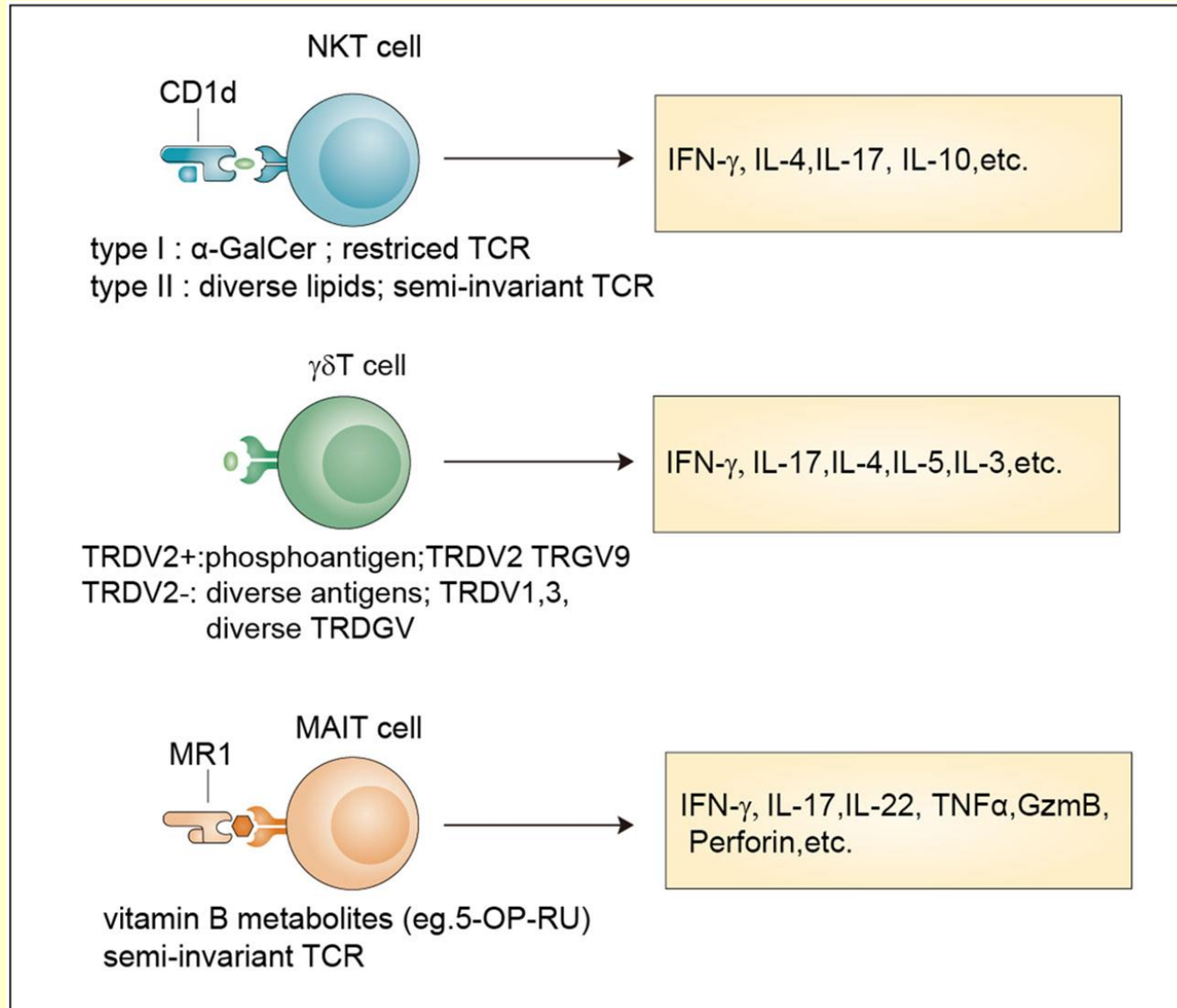
Non-conventional T cells



Found in many tissues such as the liver, lungs and intestine

They have an invariant T cell receptor

Non-conventional or natural T cell subsets

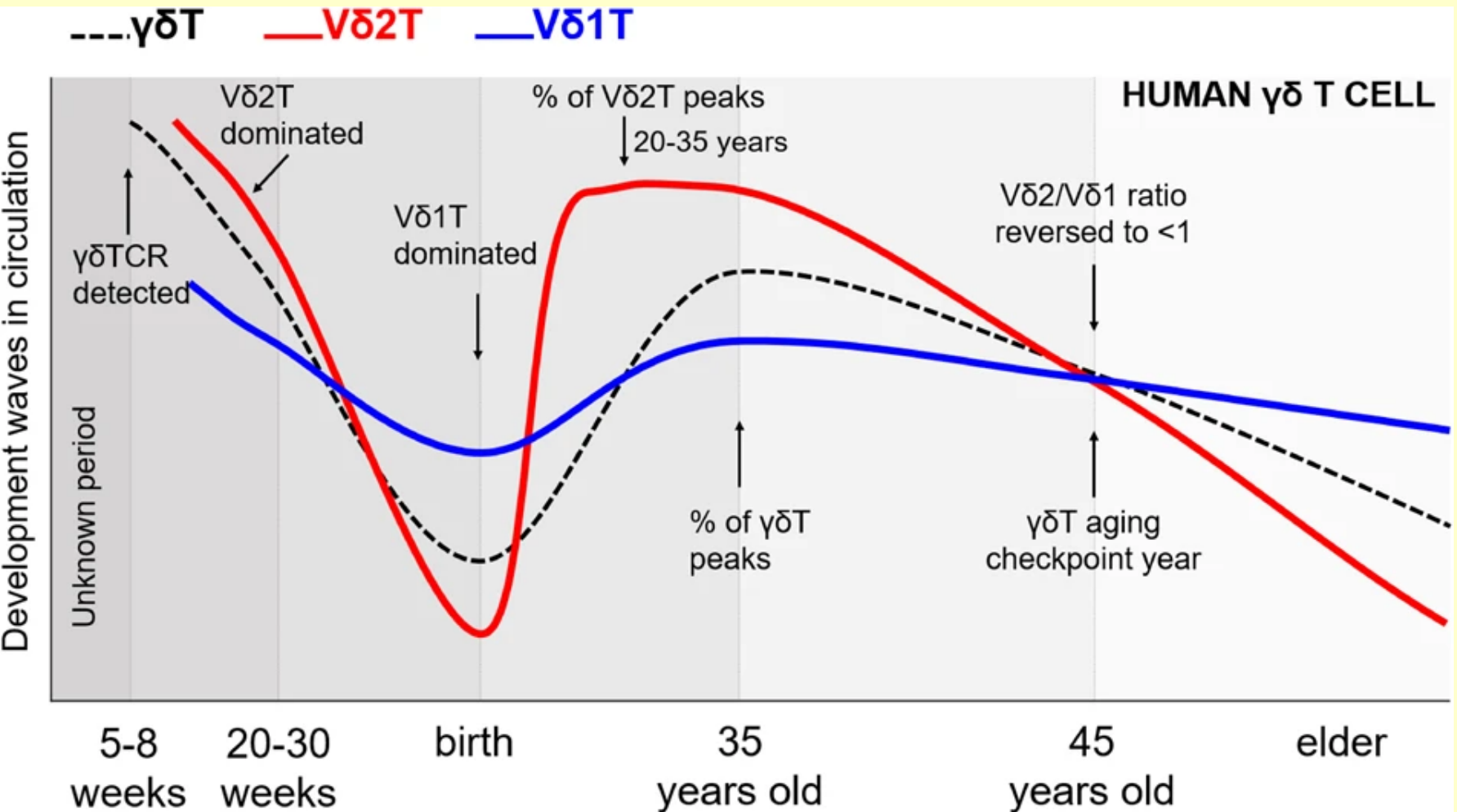


$\gamma\delta$ T cells

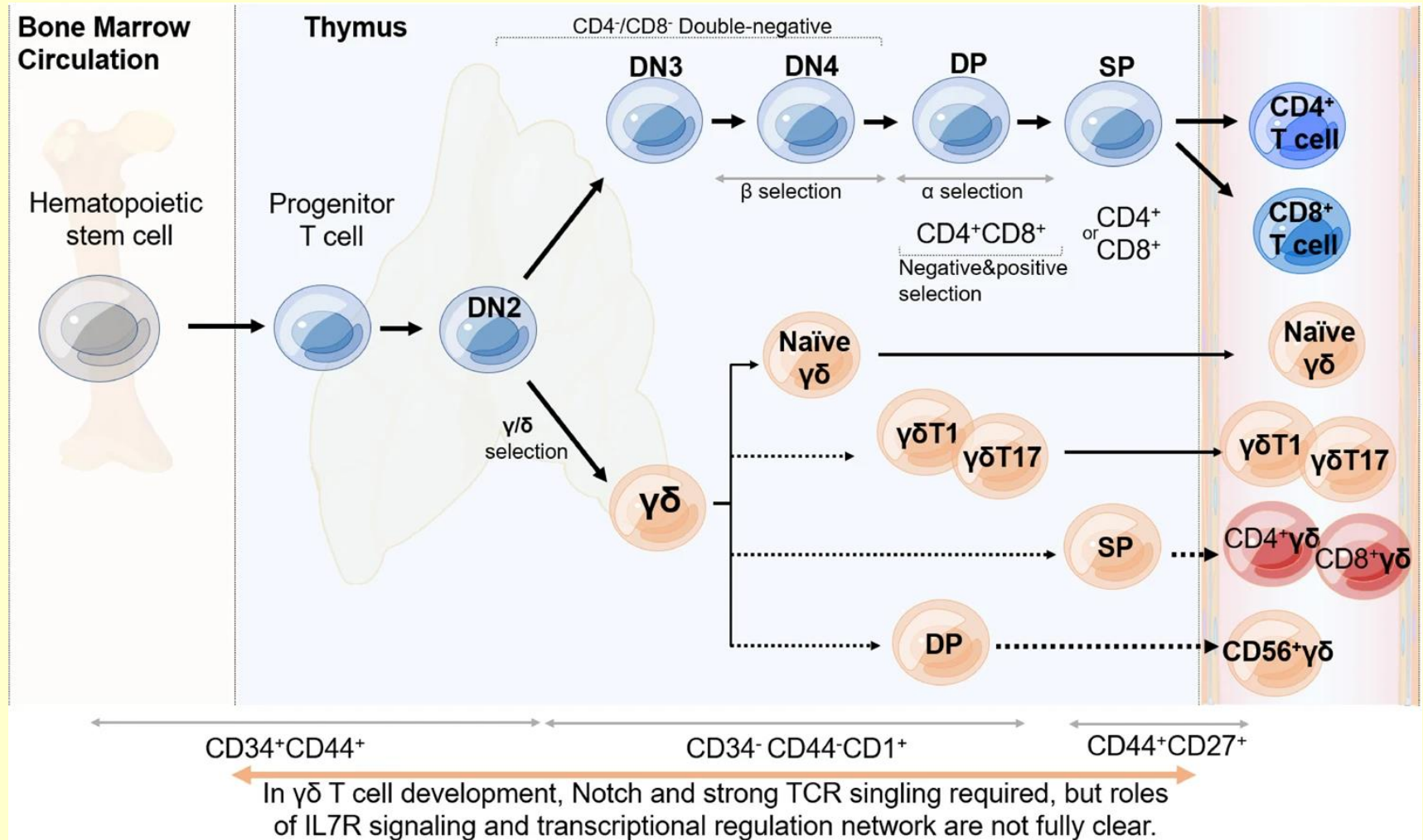
- 5 % of the T cells,
- Intraepidermal lymphocytes: CD4- and CD8-
- Intraepithelial lymphocytes: CD8+
- Produced in embryonic life, no recirculation,
- Limited, tissue specific TcR diversity \rightarrow specialization to respond to certain antigens

- Ligand recognition: - non-MHC-restricted, but antigen specific
- Antigens: viral proteins, surface heat-shock proteins (produced in inflammatory responses) bacterial lipids, phosphatids through CD1 molecule
- Function: eliminate damaged cells and microbial invaders

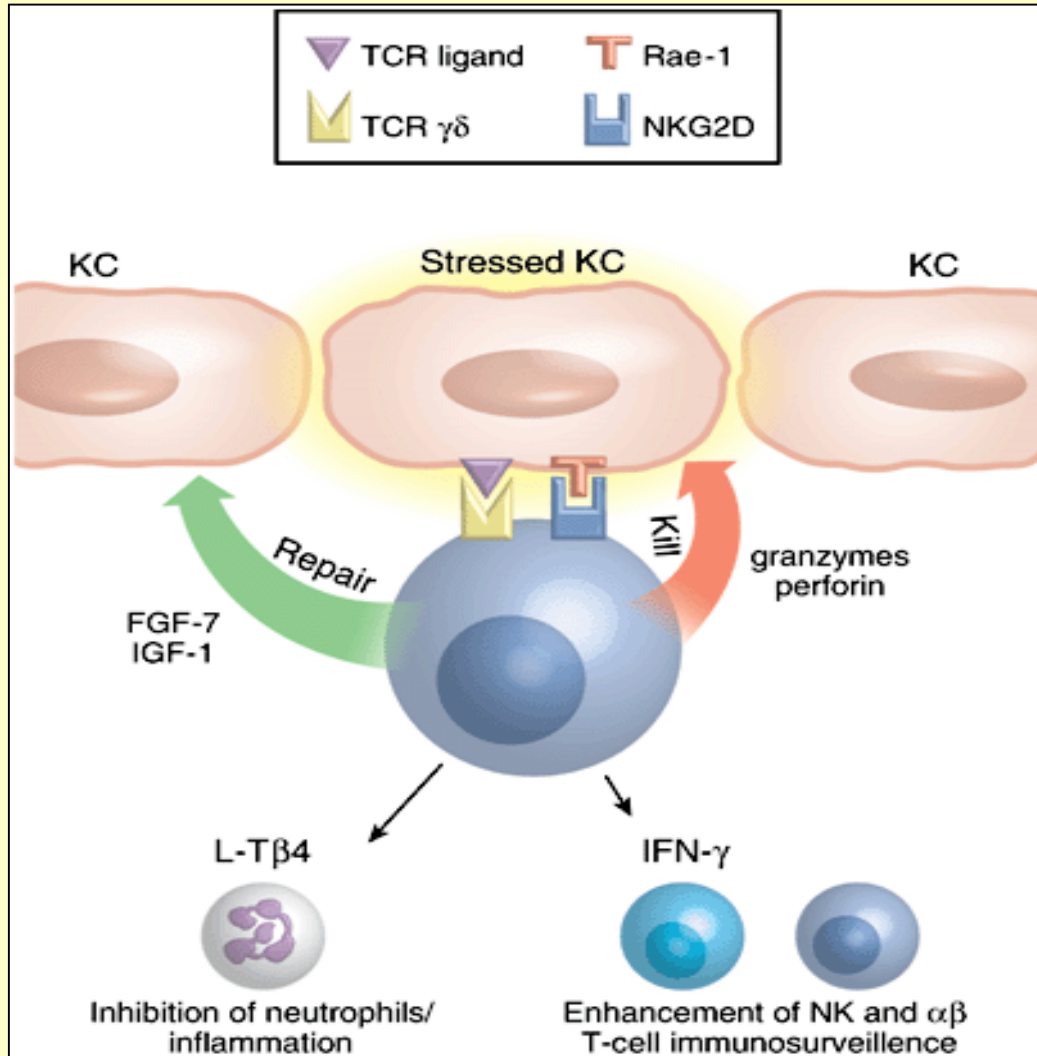
Appearance of the two main human $\gamma\delta$ T cell subsets in the circulation



Human $\gamma\delta$ T cell development and commitment in the thymus



$\gamma\delta$ T cells



$\gamma\delta$ T cells are most abundant in **barrier tissues**, including the skin, intestine and lungs

Tissue-specific CR subgroups expressing V γ and V δ combinations are found

Antigen specificity:

- butyrophilin (BTN) protein-bound bacterial phosphoantigens
- CD1, MR1 MHC-I-like proteins: bound antigens
- MIC-A and MIC-B (MHC class I chain linked protein) antigen – recognized by NKG2D KAR receptor

Natural Killer T cells = NKT

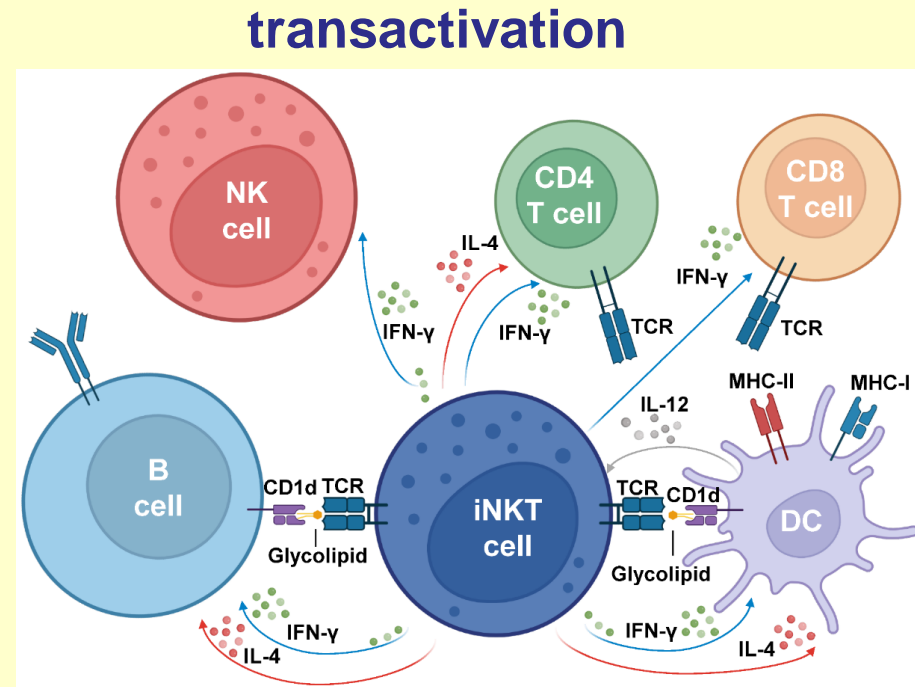
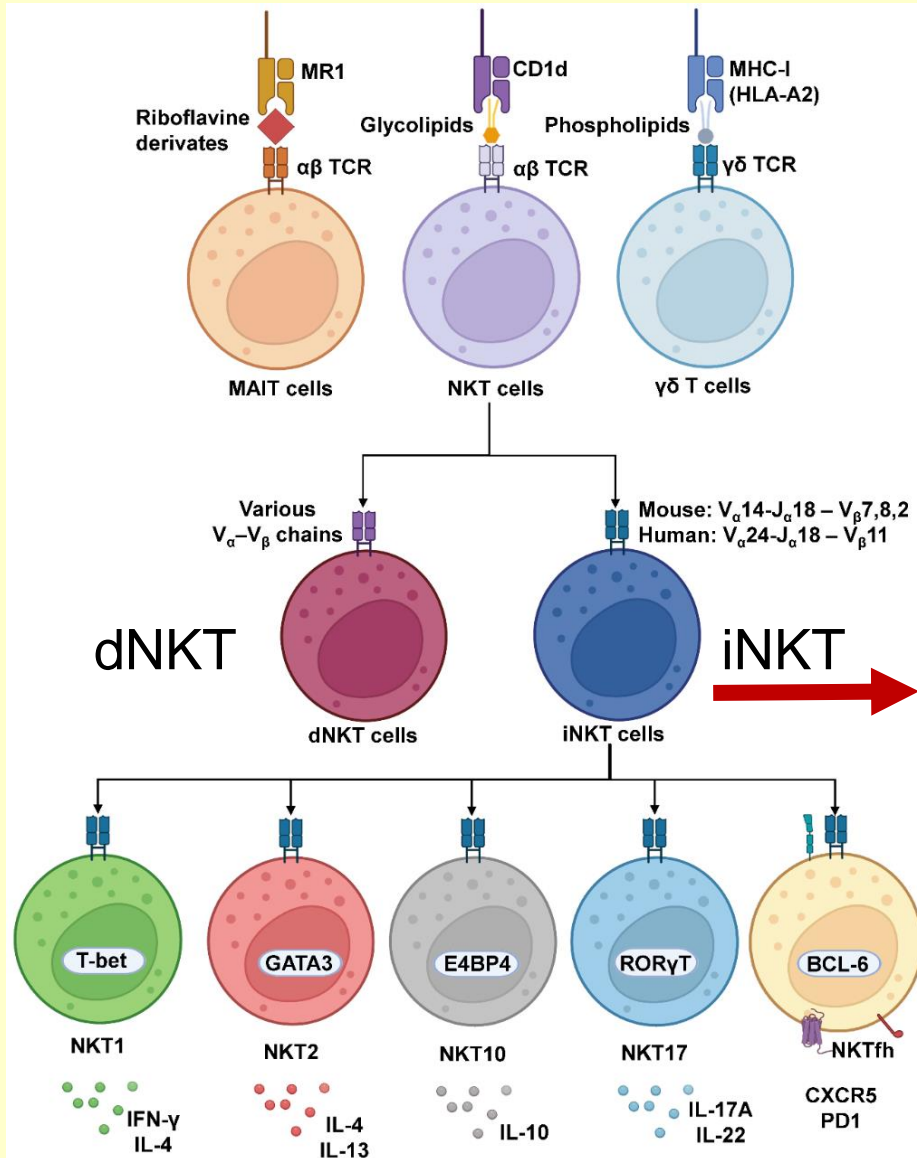
- 0,2% of the peripheral T cells
- Positive selection in the thymus on self phospholipid antigens
- **Antigen recognition:** microbial **phospholipids** and **glycolipids**, presented by the non-polymorphic **CD1d**
- **Markers:** invariant $\alpha\beta$ TcR (iV α 24-J α 18) with limited specificity, CD4 or DN or CD8 $\alpha\alpha$ + NK markers: NK1.1, CD56, CD16, CD161 (NKRP1)
- **Function:** fast cytokine production: IL-4, IFN γ , IL-10, IL-13, IL-17, IL- 21 TNF α

	V α 14 NKT	Conventional T
TCR	invariant V α 14	heterogenous TCR
Ligand	α -GalCer	peptides
MHC	monomorphic CD1d	polymorphic MHC
Major tissues	Liver, Spleen Bone marrow	Thymus, Spleen Lymph nodes
Development	GM-CSFR	no GM-CSFR

NKT cell types

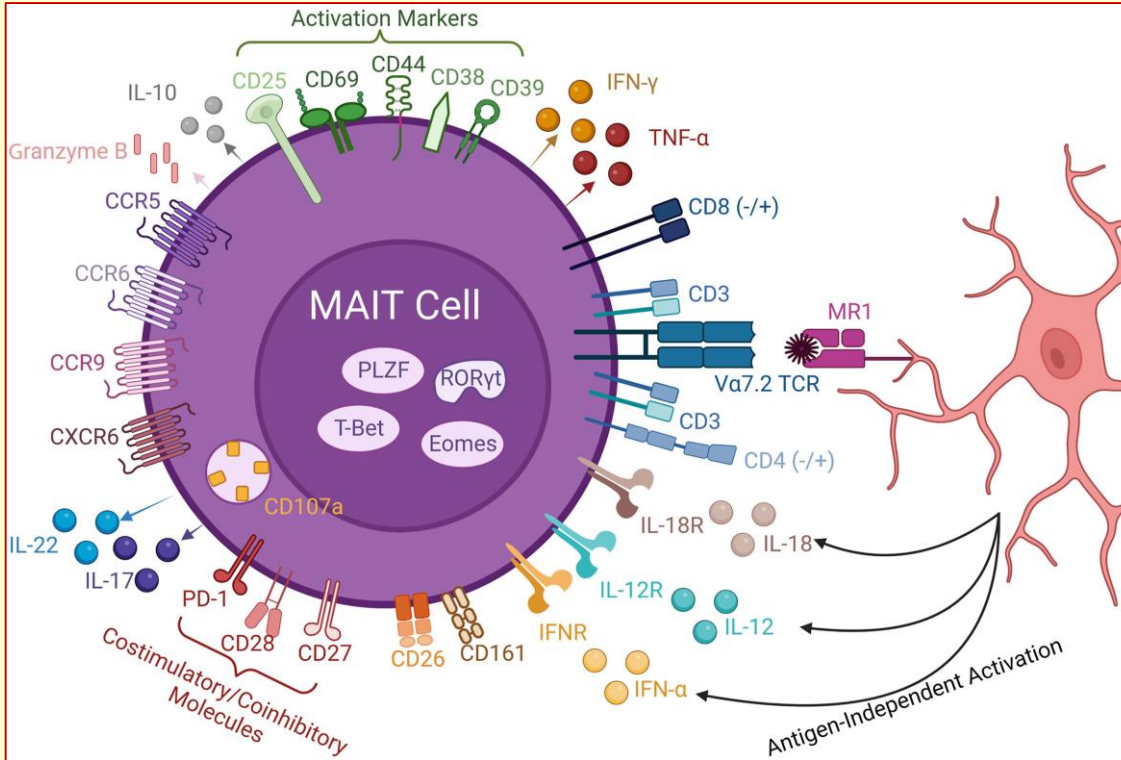
	I	II	III	MAIT cells
Other names	Classic /invariant NKT	Non-classic	-	-
TCR repertoire	invariant V α 24-J α Q (J α 18), V β 11	divers	divers	invariant V α 7.2- J α 33
Co-receptors	CD4, DN, CD8 $\alpha\alpha$	CD4, DN	CD4, CD8 $\alpha\alpha$	DN, CD8 $\alpha\alpha$
NK cell receptor	CD56, CD161	CD56, CD161?	CD56, CD161?	CD161
Antigen presenting molecule	CD1d	CD1d	MHCI and II	MR1
Reactivity	α GalCer, iGb3?, GSL	sulphatide	?	Vitamin B subunits
Occurrence	Liver, thymus, spleen, bone marrow	Liver, spleen	Spleen, bone marrow, liver	Lamina propria, lungs, liver

iNKT cell subgroups – transactivation and polarisation



polarisation

Role of MAIT cells



MAIT cells are predominantly found in the gastrointestinal tract, mesenteric lymph nodes and liver

Upon encounter with the commensal microbial flora, MAIT cells proliferate and develop a memory phenotype

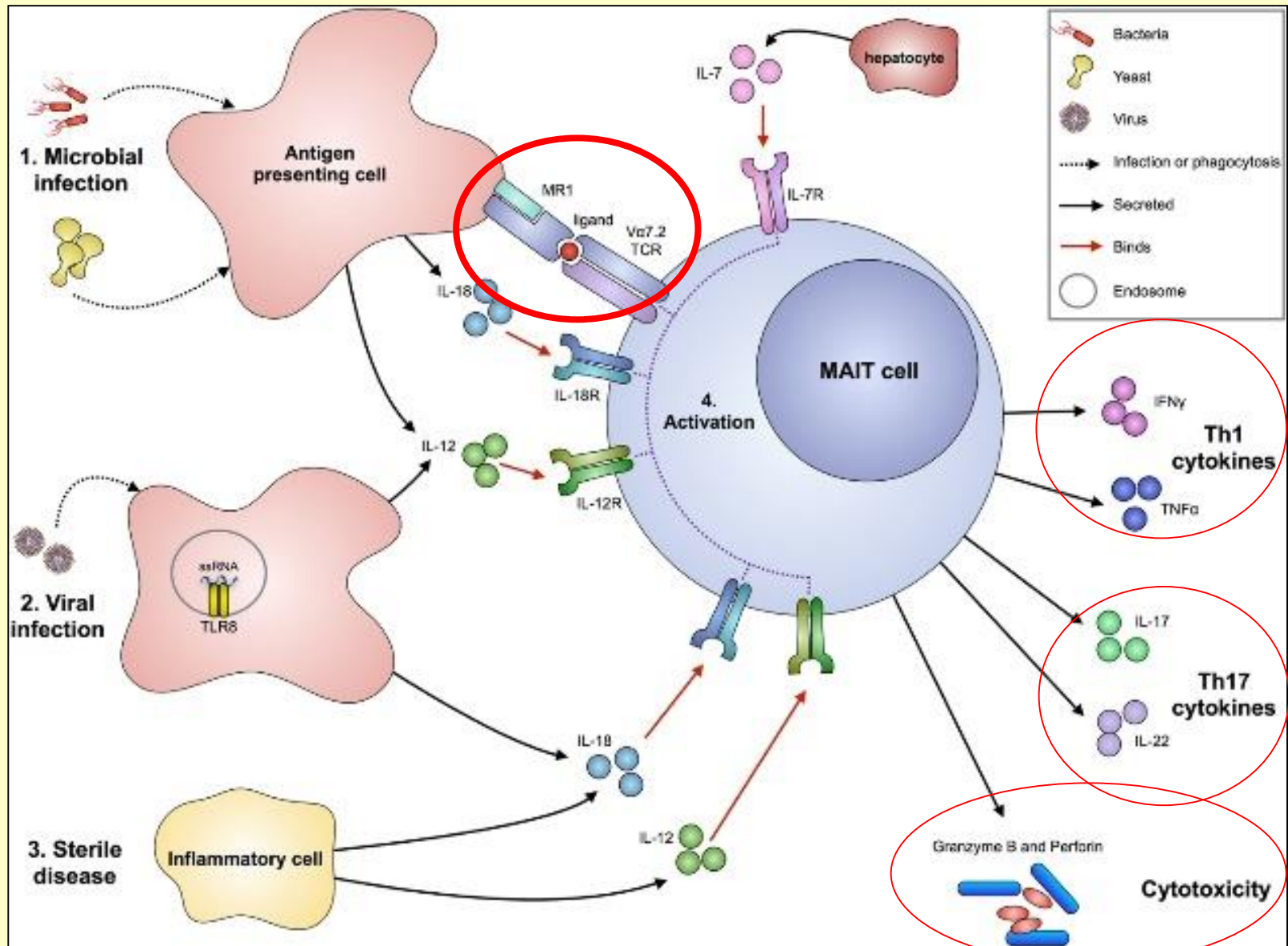
Important in antimicrobial antibacterial defence, produce cytokines

Recognition of microbially derived B vitamin (e.g. riboflavin) derivatives presented on MR1

Cytokines can also activate

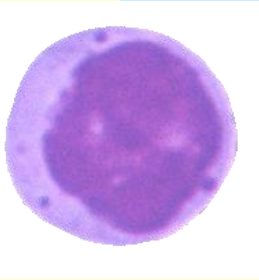
Markers: CD3, CD4, CD8, Valpha 7.2 TCR ? PD1, CD28, CD27, produce Granzym B

MAIT cell activation and polarisation



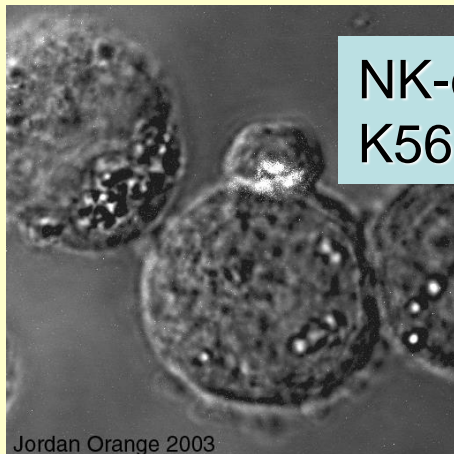
Cytotoxicity

1. CD8+ T cytotoxic cells
2. $\gamma\delta$ T cells
3. NKT and MAIT cells
4. **NK cells**



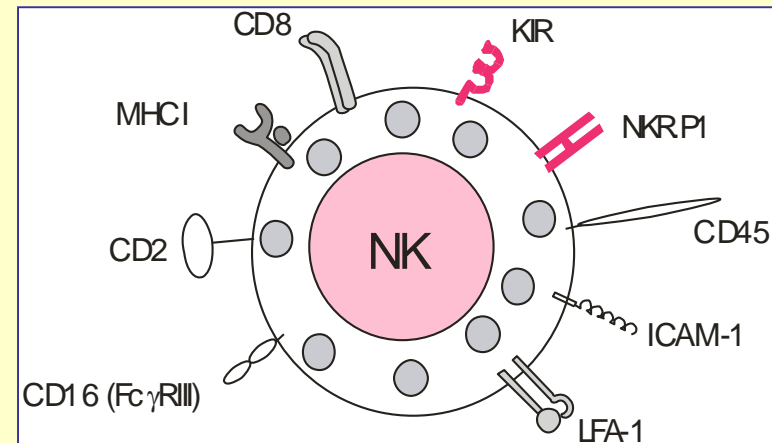
Natural killer cells (NK)

- 10-15% of lymphocytes = LGL cells
- **Phenotype:**
- TcR- CD3-, CD4-, CD8+/-, CD2+, CD16+ (Fc γ RIII) CD56+,
- They secrete cytokines: INF γ \rightarrow immune regulation (Th1)
- **Function: *early*** response to infection with certain viruses, intracellular bacteria and tumor cells

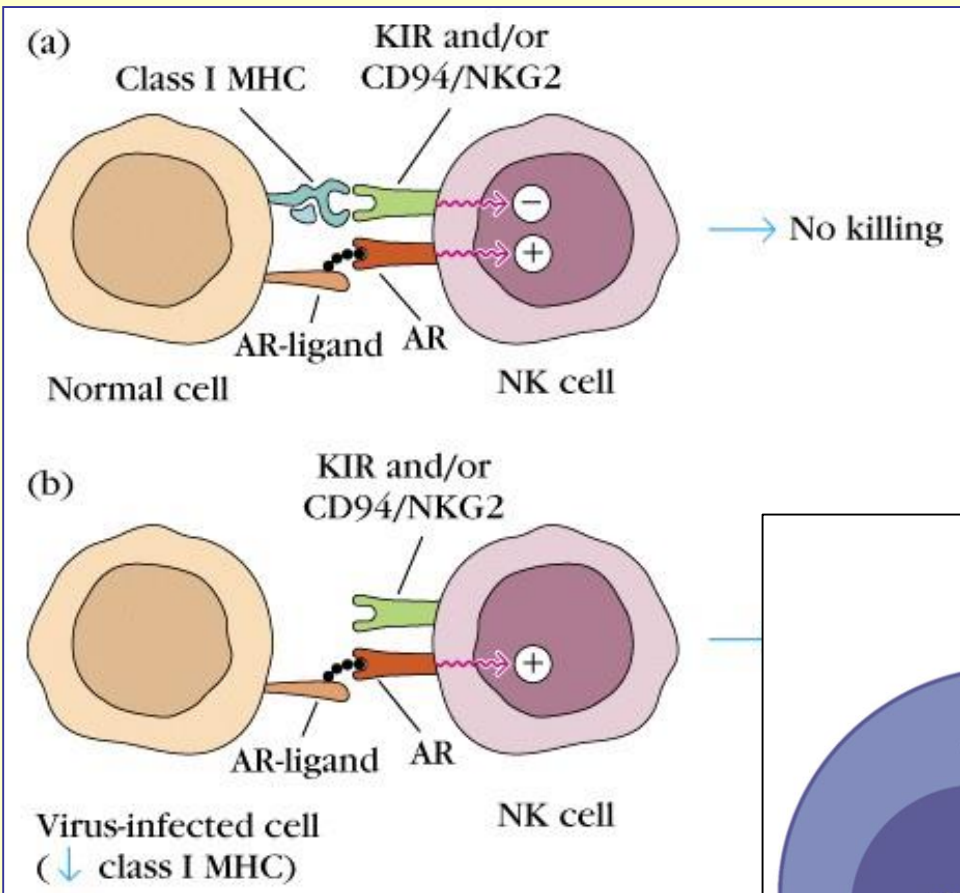


NK-cells kill their target-cell K562 with perforin (white)

Jordan Orange 2003

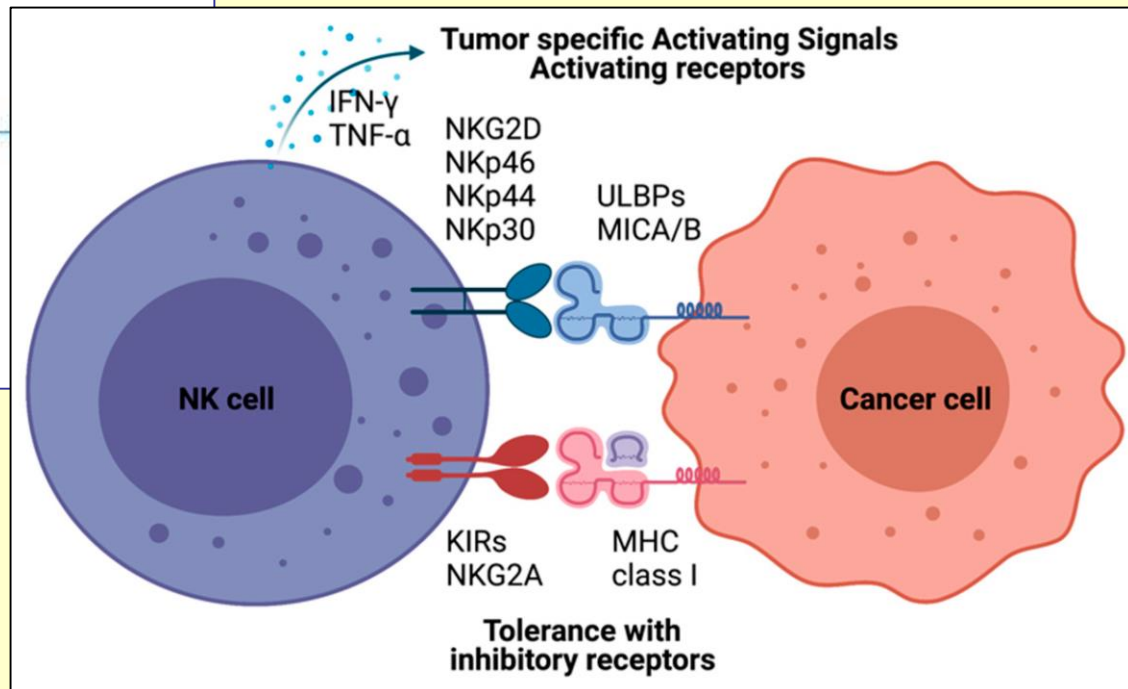


Opposite signal model of NK cell activation



Destruction of a virally infected cell

Tumour cell destruction



Antibody-dependent cellular cytotoxicity (ADCC)

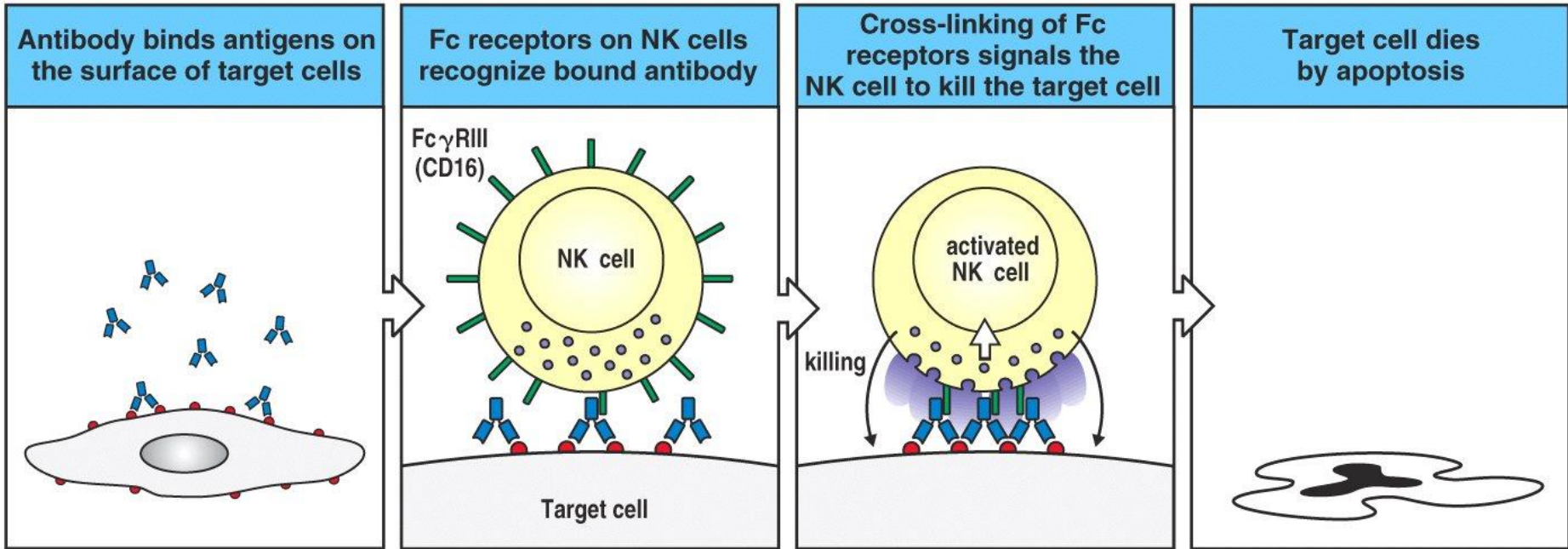


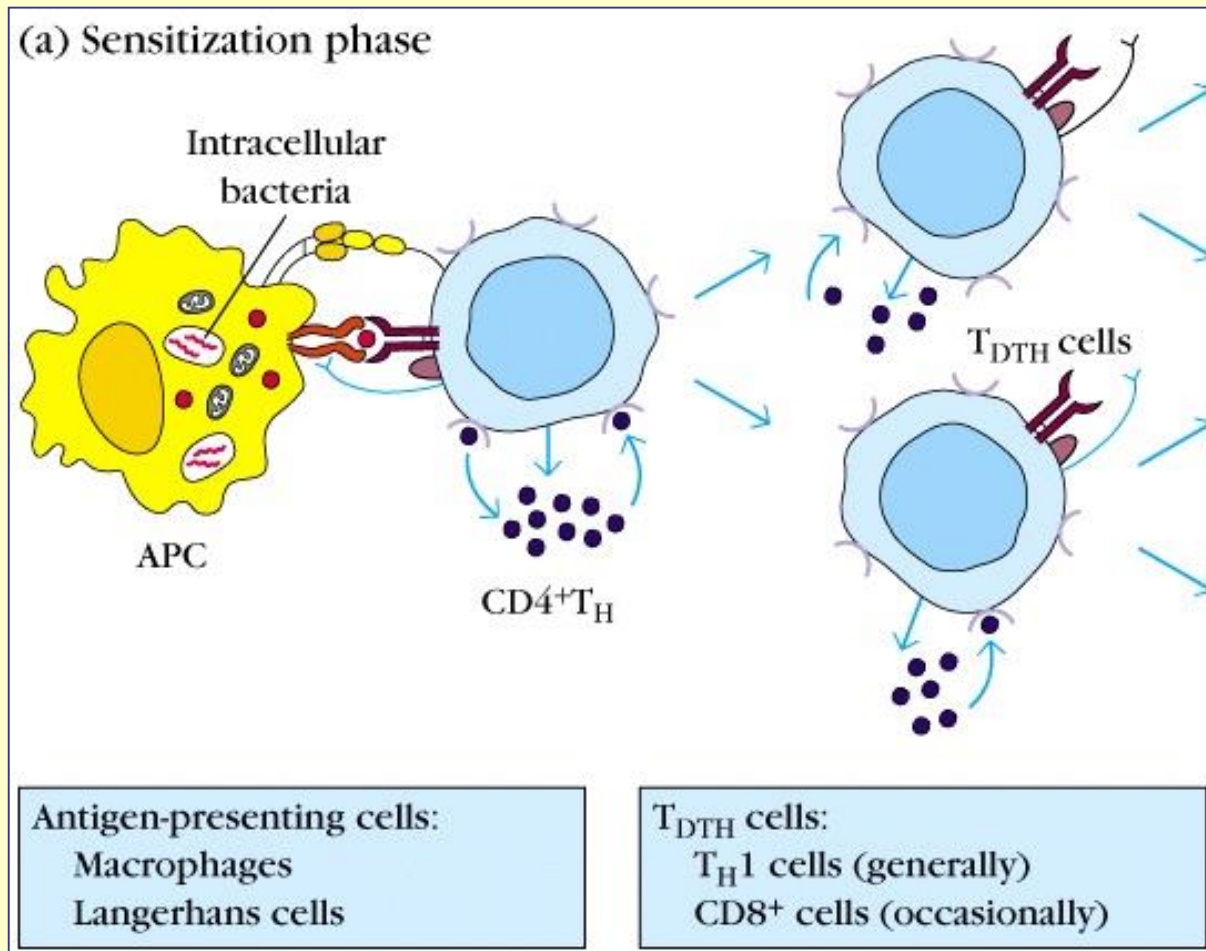
Figure 9-34 Immunobiology, 6/e. (© Garland Science 2005)

**T_H –cell mediated
macrophage activation**

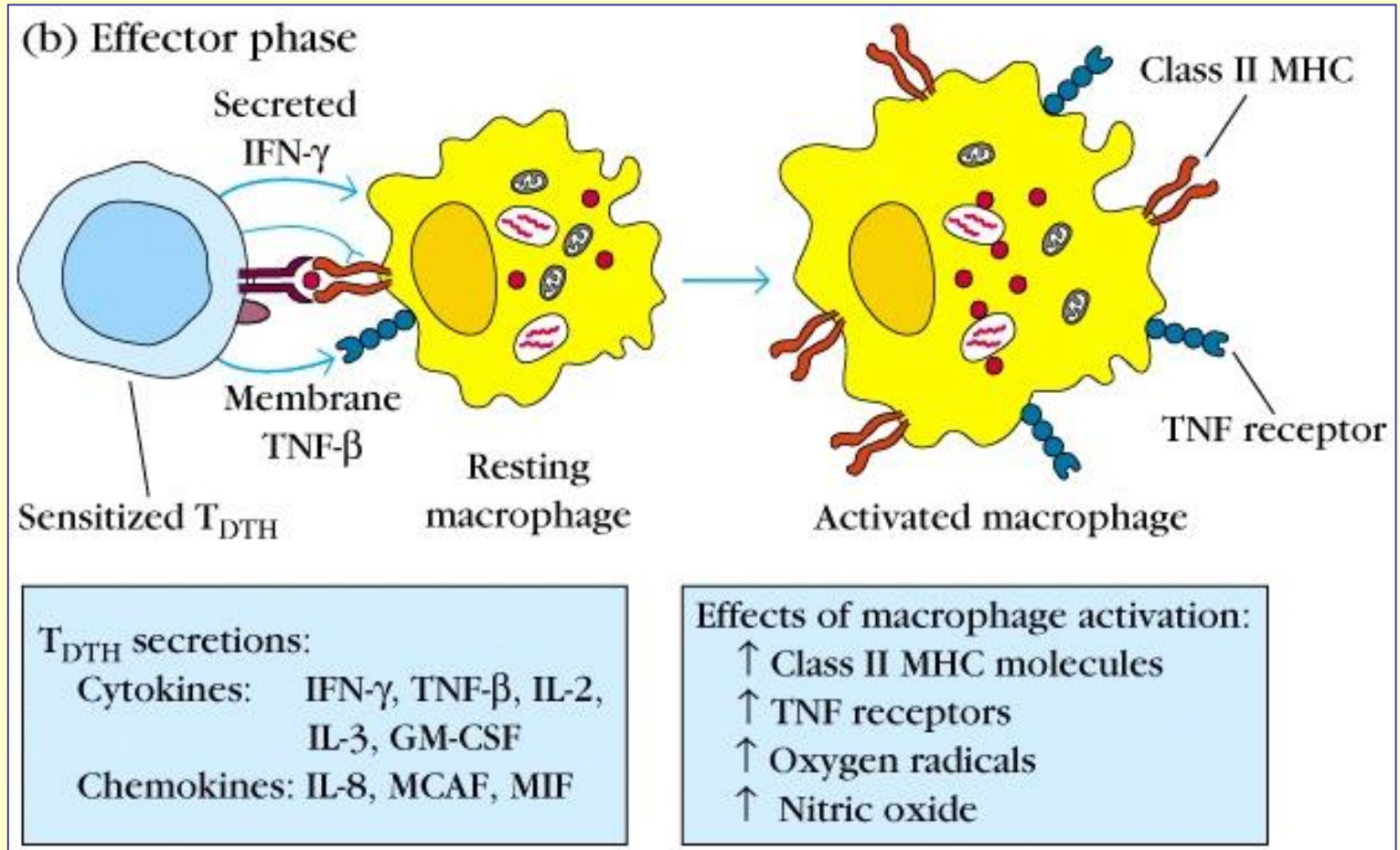
**Delayed type hypersensitivity
= DTH**

Immuneresponses against intravesicular microorganisms

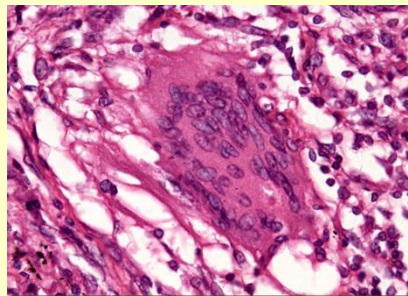
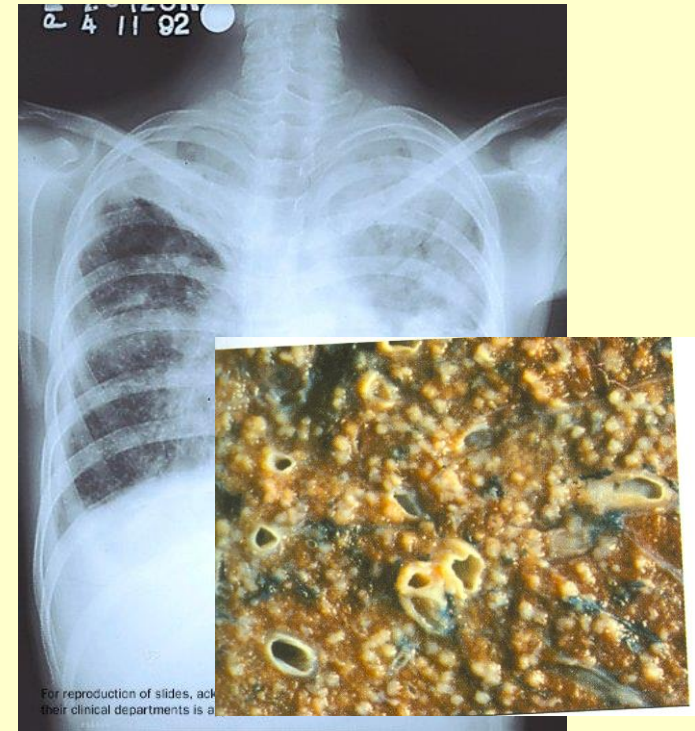
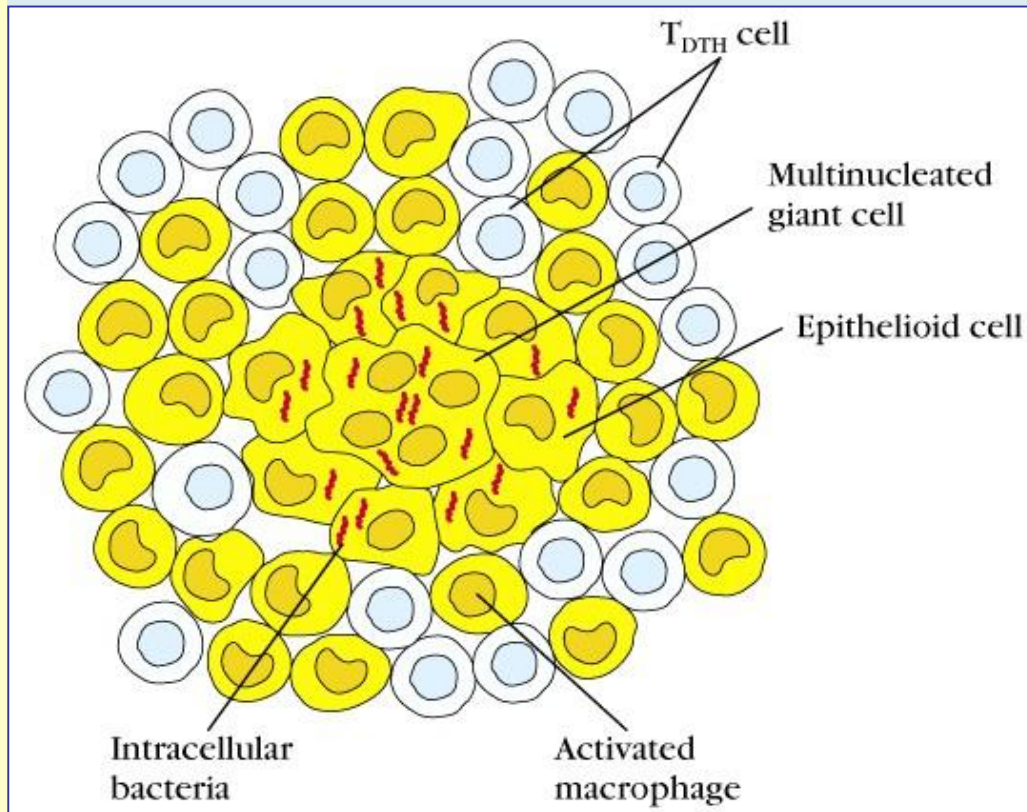
I. Sensitization:



II. Effector phase

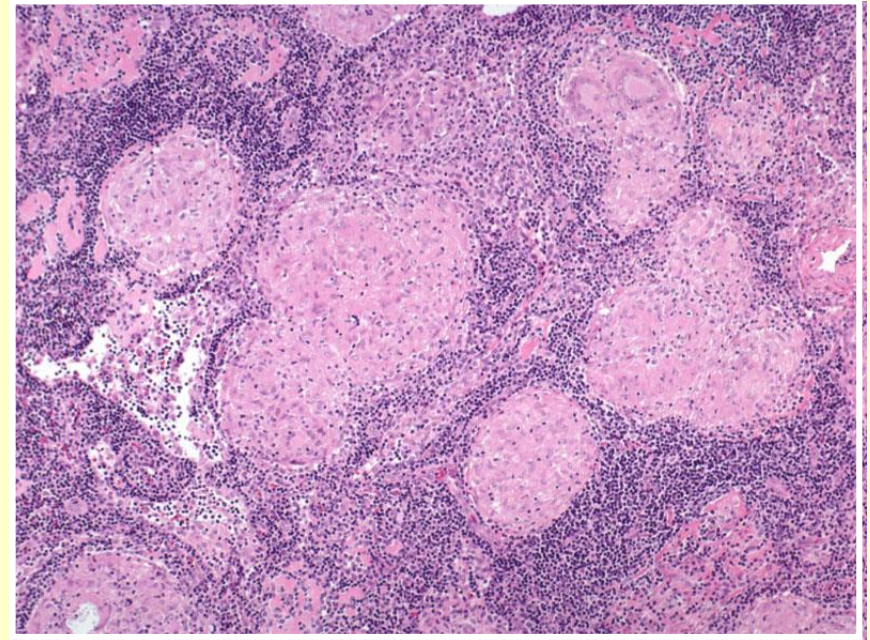


Prolonged DTH – granuloma formation



Miliaris tuberculosis

Prolonged DTH – granuloma formation



**TABLE 14-3 INTRACELLULAR
PATHOGENS AND CONTACT ANTIGENS
THAT INDUCE DELAYED-TYPE
HYPERSENSITIVITY**

Intracellular bacteria

Mycobacterium tuberculosis

Mycobacterium leprae

Listeria monocytogenes

Brucella abortus

Intracellular fungi

Pneumocystis carinii

Candida albicans

Histoplasma capsulatum

Cryptococcus neoformans

Intracellular parasites

Leishmania sp.

Intracellular viruses

Herpes simplex virus

Variola (smallpox)

Measles virus

Contact antigens

Picrylchloride

Hair dyes

Nickel salts

Poison ivy

Poison oak

Effect of contact antigens

