Réponses B thymodépendantes et thymoindépendantes

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PLAN

- B cell development and classification
- B cell activation
- Thymodependent B(2) cell response
- Thymo-independent B cell response
- [Antibody effector mechanisms]

TD vs TI humoral immune responses

 Most antibody (B cell) responses need "help"= "Thymus-Dependent" (TD) responses

"Help" comes from T cells (signal 2)

Most help comes from T_H2 but T_H1 can also provide help

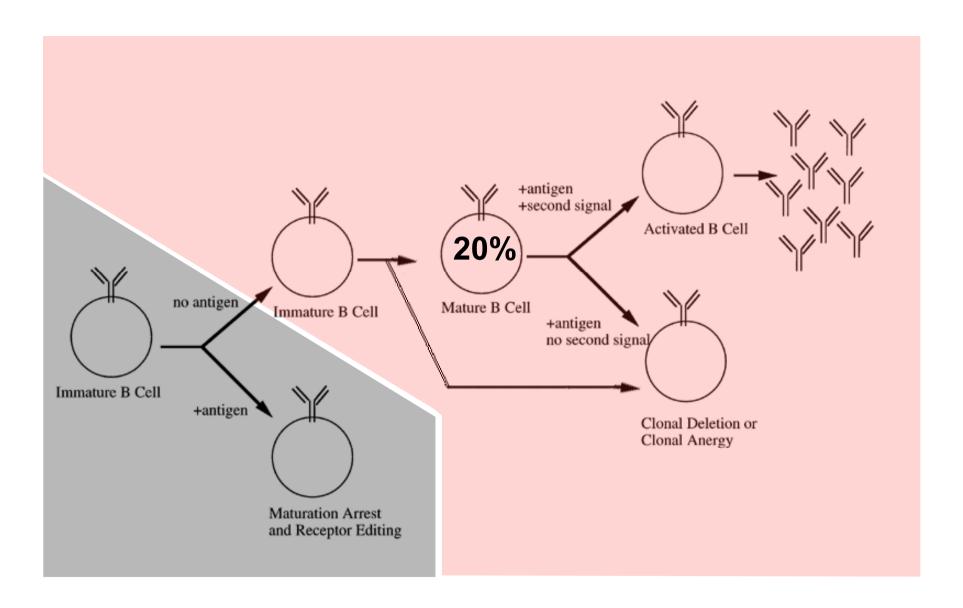
T help controls or partly controls B cell proliferation, class switching, initiation of somatic mutations and memory

Antigens that activate in this way are said to be thymus-dependent antigens

- There are also antibody responses that do not require T help
- ="Thymus-independent" (TI) antibody responses

Antigens that activate in this way are said to be thymus-independent antigens

B cell development and classification



Bone Marrow

Periphery

Bone marrow

Open repertoire of mature B cells.

Tolerance induction

Blood and secondary lymphoid tissues

Additional tolerance induction. Self-tolerant immature B cells and anergized B cells

No positive selection: B cells fail to enter lymphoid follicles

B cells have a half-life of about 3 days

Positive selection: B cells successfully enter lymphoid follicles

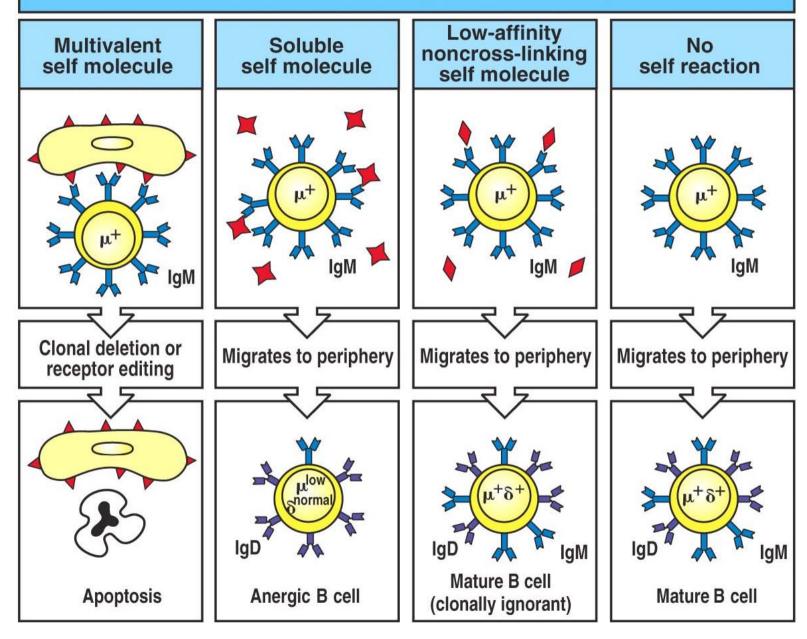
Long-lived mature recirculating naive B cells (half-life about 3–8 weeks)

Stimulation by antigen

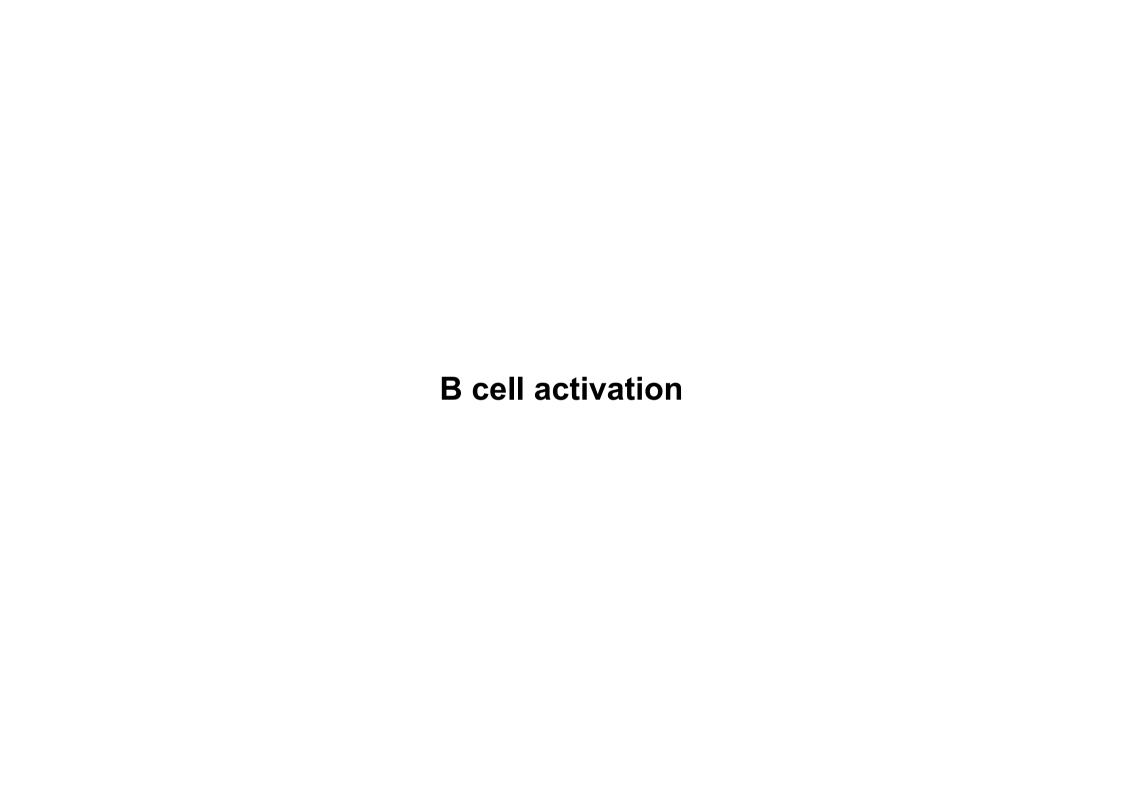
Longer-lived mature recirculating memory B cells.

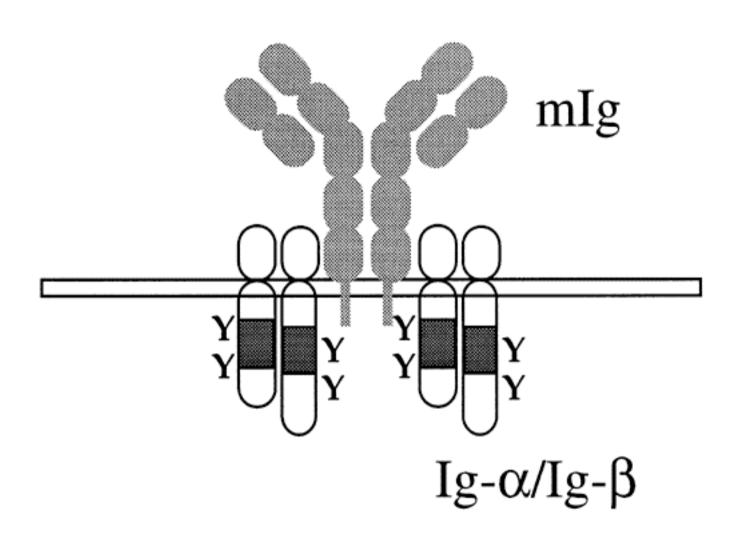
Express high-affinity IgG, IgA, or IgE

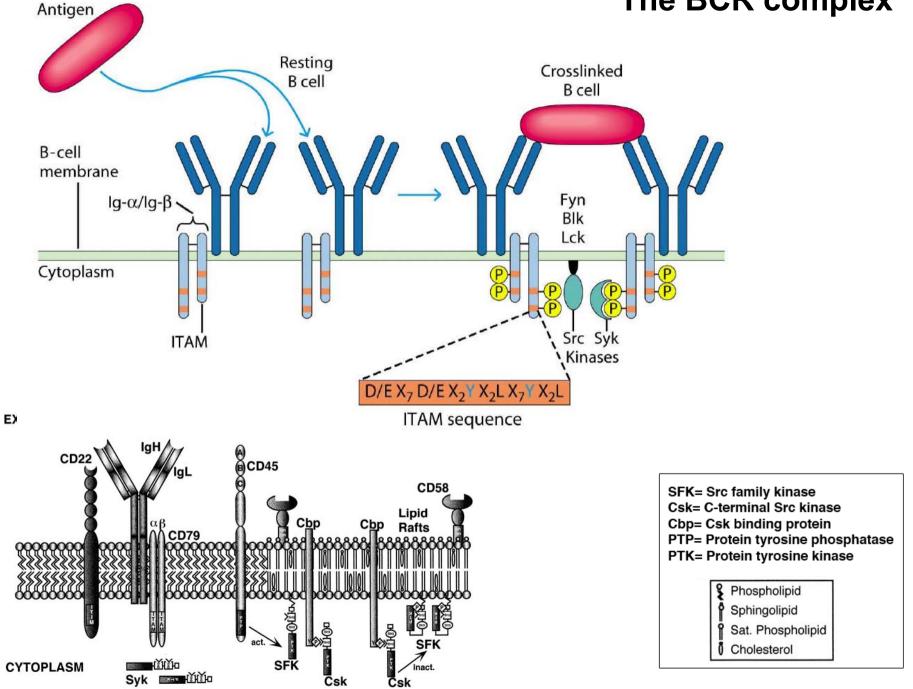
Immature B cell (bone marrow)

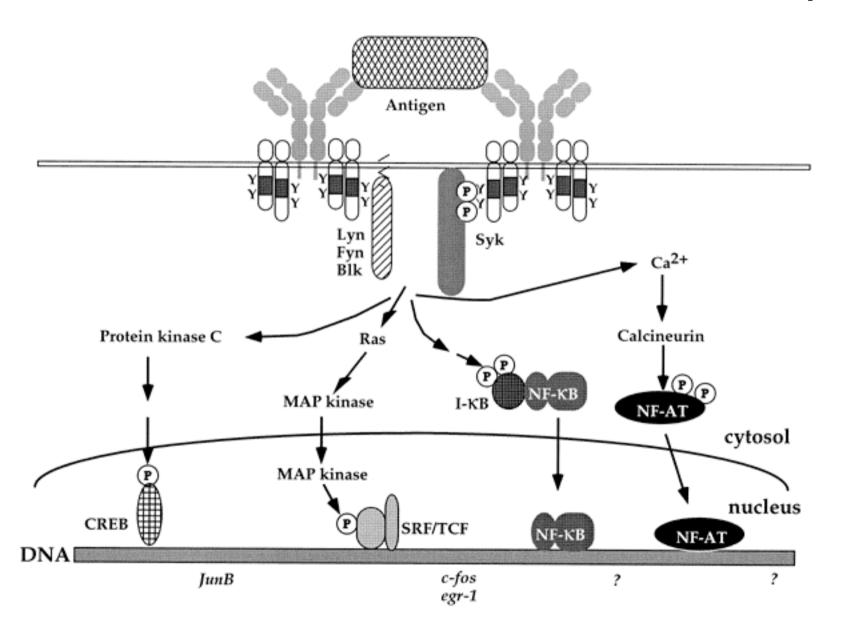


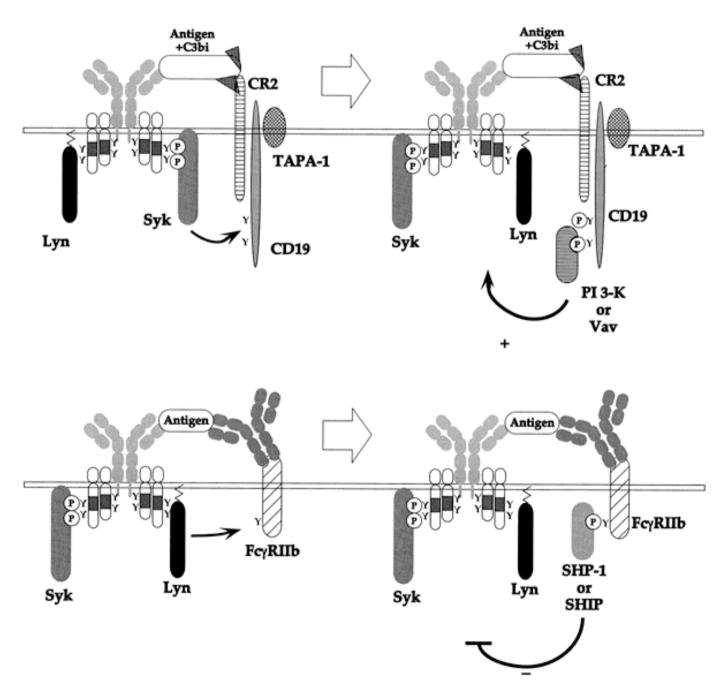
Property	B-1 cells	Conventional B-2 cells	Marginal zone B cells
When first produced	Fetus	After birth	After birth
N-regions in VDJ junctions	Few	Extensive	Yes
V-region repertoire	Restricted	Diverse	Partly restricted
Primary location	Body cavities (peritoneal, pleural)	Secondary lymphoid organs	Spleen
Mode of renewal	Self-renewing	Replaced from bone marrow	Long-lived
Spontaneous production of immunoglobulin	High	Low	Low
Isotypes secreted	IgM >> IgG	IgG > IgM	IgM > IgG
Response to carbohydrate antigen	Yes	Maybe	Yes
Response to protein antigen	Maybe	Yes	Yes
Requirement for T-cell help	No	Yes	Sometimes
Somatic hypermutation	Low-none	High	?
Memory development	Little or none	Yes	?





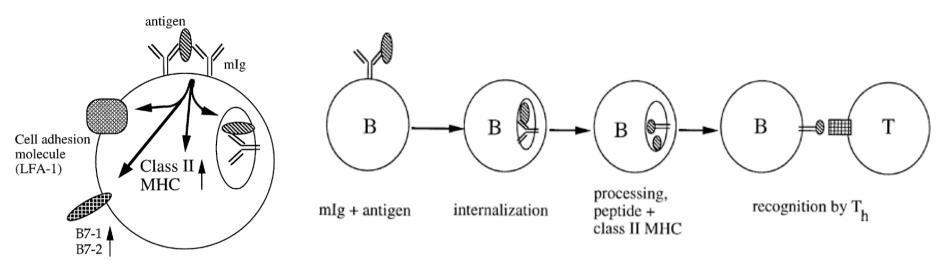




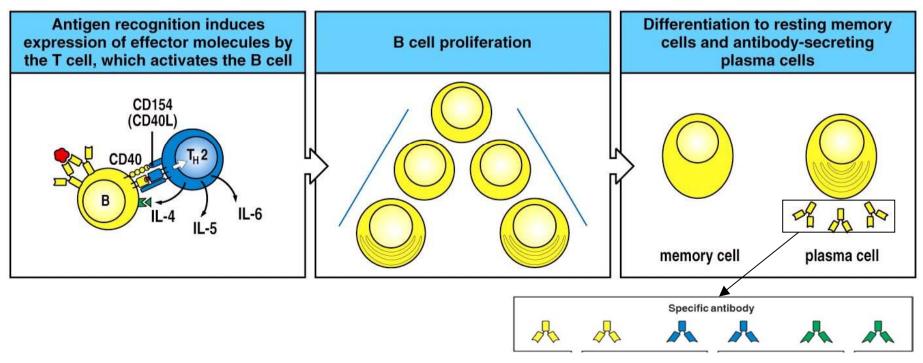


Thymodependent B(2) cell response

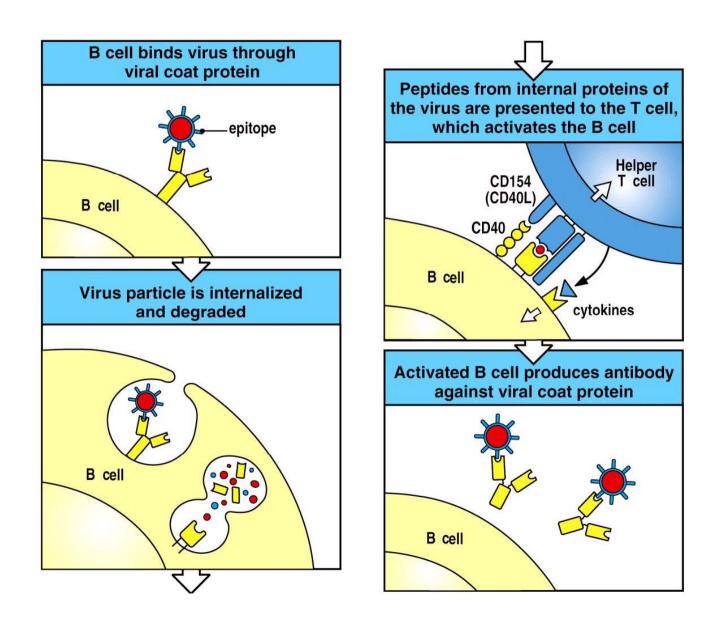
Activation by antigen binding and helper T cell interactions

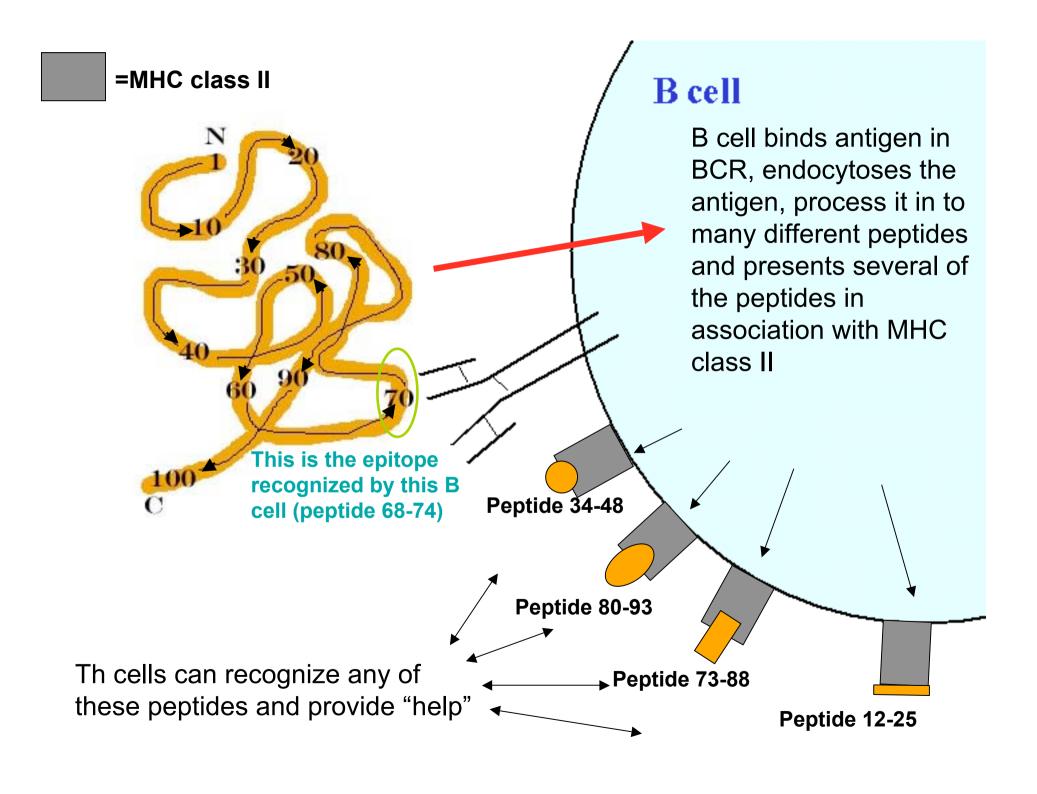


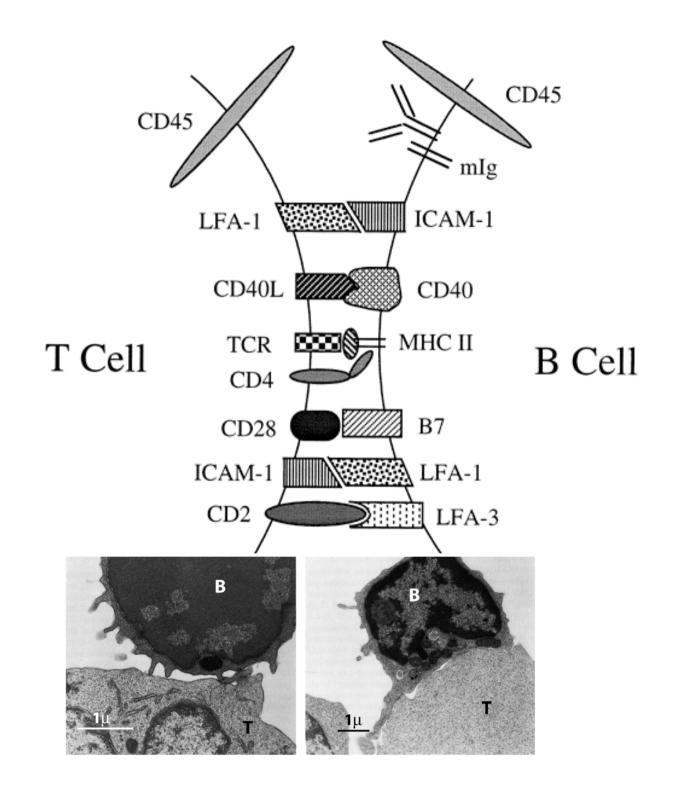
Activation = proliferation and differentiation

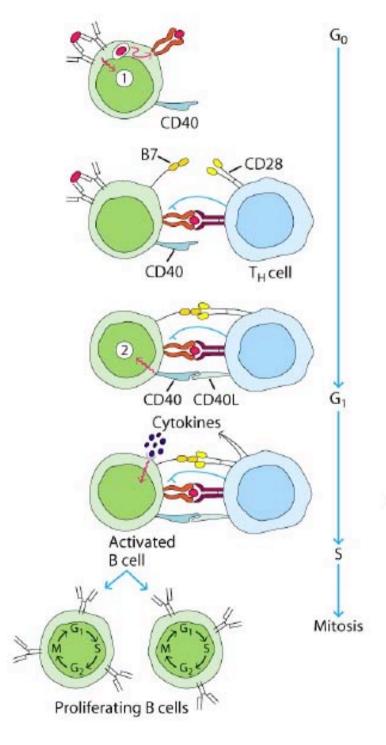


T cells activate B cells that recognize the same Ag but not necessarily the same epitope









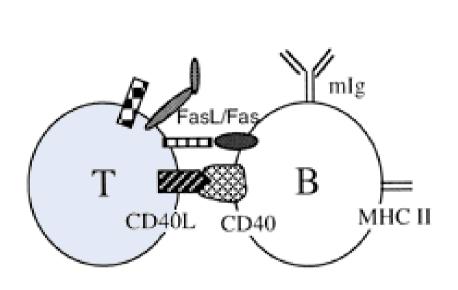
Binding of Ag stimulates MHC II and B-7 expression on B-cell.

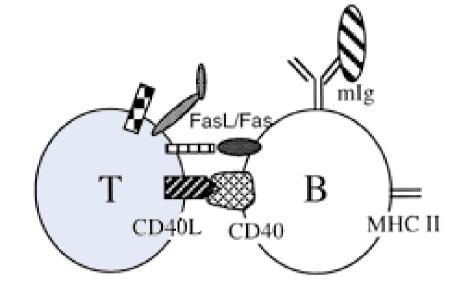
MHC/B7 interaction with T-cell receptor induces expression of CD40L on T-cell.

CD40/CD40L interaction provides costimulatory interaction necessary for activation of B-cell.

B-cells induce expression of receptors for cytokines secreted by T-cell. T-cell reorients golgi toward B-cell.

B-cells begin to proliferate and differentiate. Undergo Class switching and affinity maturation





CD40L without Ag: B cell susceptible to Fas Killing: Apoptosis

CD40L with Ag: B cell resistant to Fas killing: Activation

(T cell activation up-regulates T cell expression of CD40L)

Signal 2 (CD40L) is required for class switching but T_H cells make cytokines that influence isotype switching

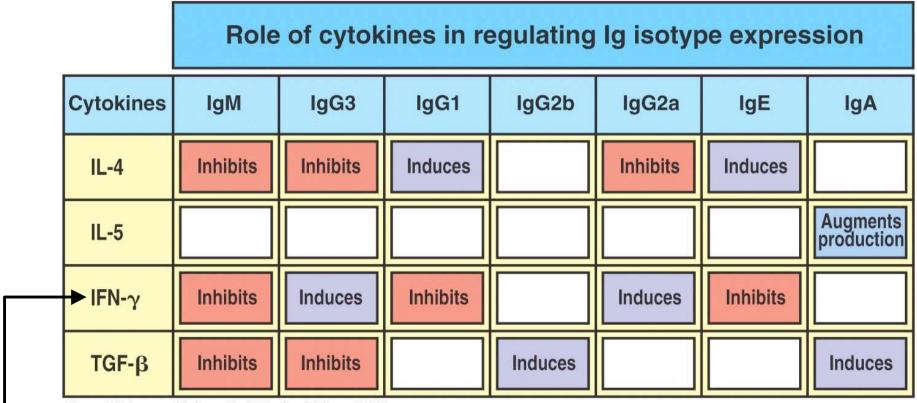
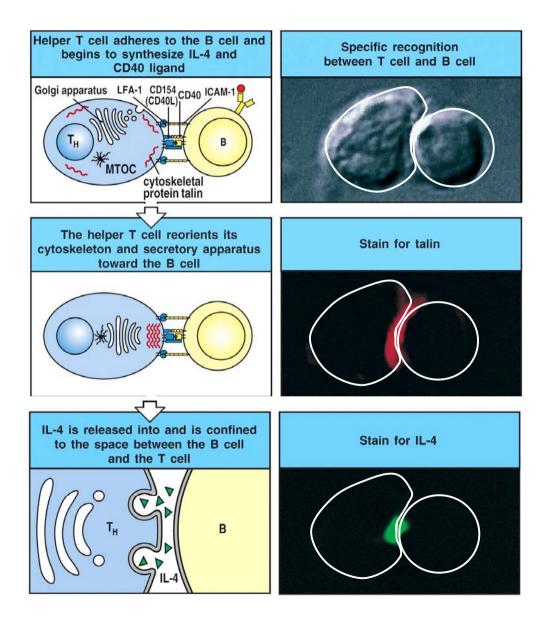
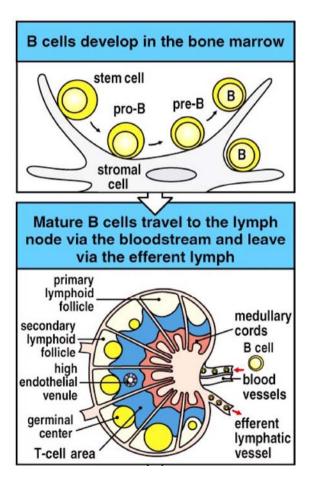


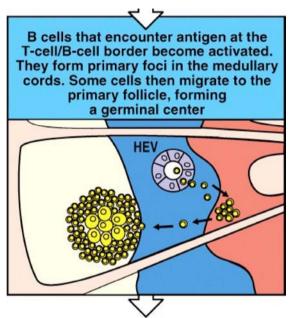
Figure 9-7 Immunobiology, 6/e. (© Garland Science 2005)

IFN-g is a hallmark of cell-mediated immune responses so IgG3 and IgG2a are also associated with T_H1 responses

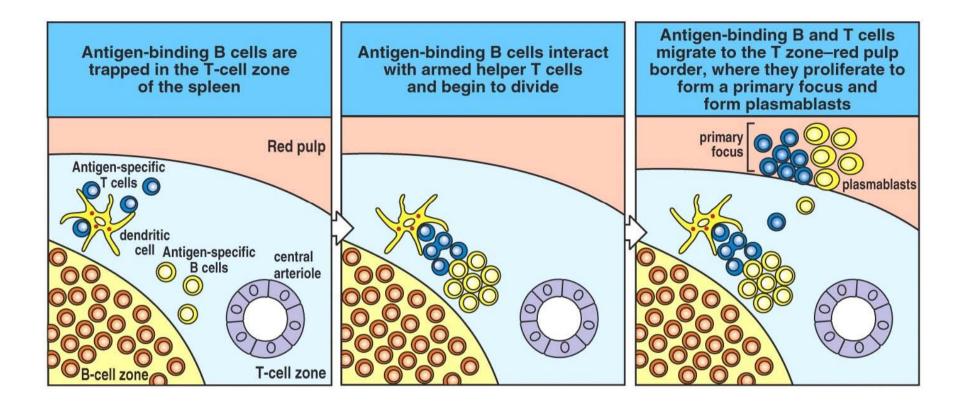
IL-4 is secreted in the direction of the B cell so there is little bystander effect on neighboring B cells



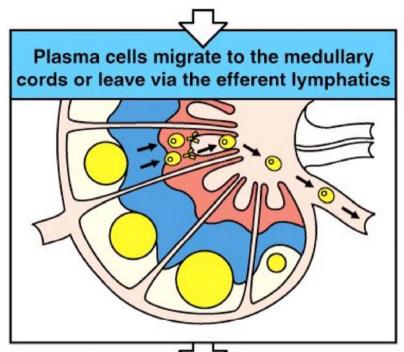


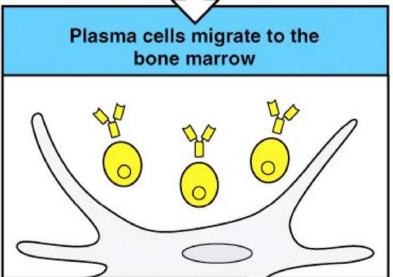


Those B cells and T cells that bind antigen are trapped in the T cell zone of the peripheral lymphoid organ where they can both get activated and interact



Some B cells in the primary focus differentiate into plasmablasts and plasma cells, leave the area and make antibody. Others go to the B cell zone

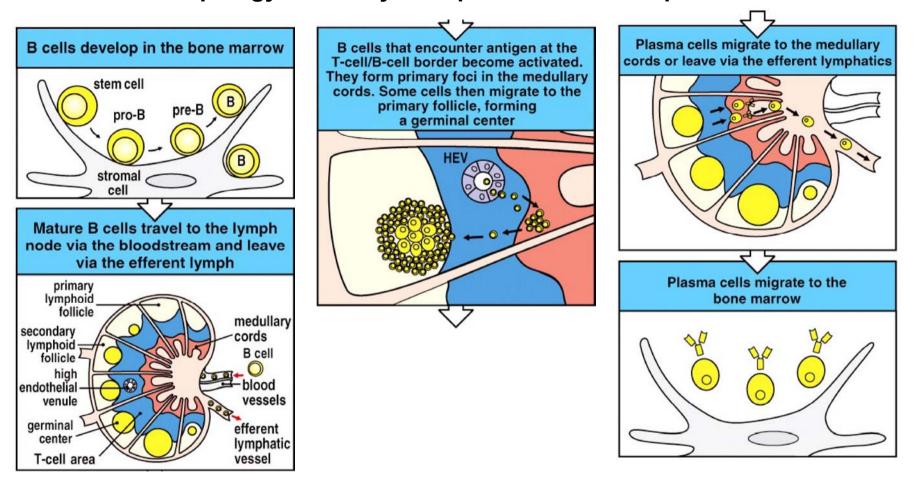




Activated B cells eventually differentiate into plasma cells for the secretion of antibody and memory B cells.

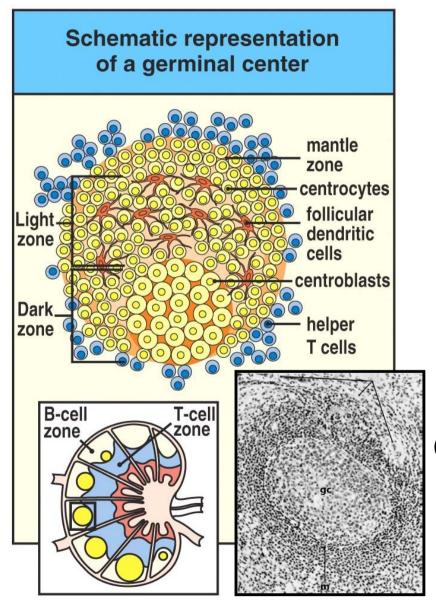
Most plasma cells survive for a few day to a few week. Some are longlived (account for much of the circulating antibodies).

Memory B cell live a long time (years). Memory B cells keep the changes that they acquired in the germinal centers (e.g., class switched, somatic mutations).



Although 50-100 different antigen-specific B cells originally comprise a GC, by the end of the response all the B cells are from 1 or a few clones

Germinal centers (GC) contain antigen-specific B cells, follicular dendritic cells (FDC) and antigen-specific T cells



Germinal centers are mostly proliferating B cells but also contain many (10%) T cells

In the germinal centers, B cells undergo:

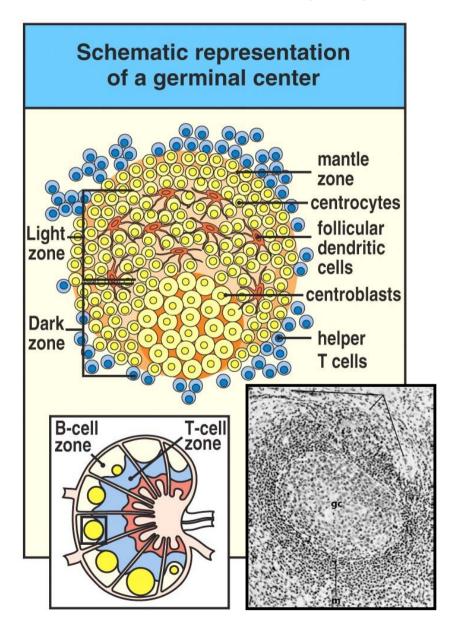
- 1.somatic hypermutations
- 2.affinity maturation
- 3.isotype switching



Modification of the amount (proliferation), of the function (switch) and of the efficiency (affinity) of the antibodies

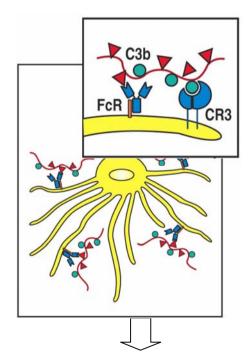
Centrocyte = B cell; Centroblast = dividing B cell

Germinal centers (GC) contain antigen-specific B cells, follicular dendritic cells (FDC) and antigen-specific T cells

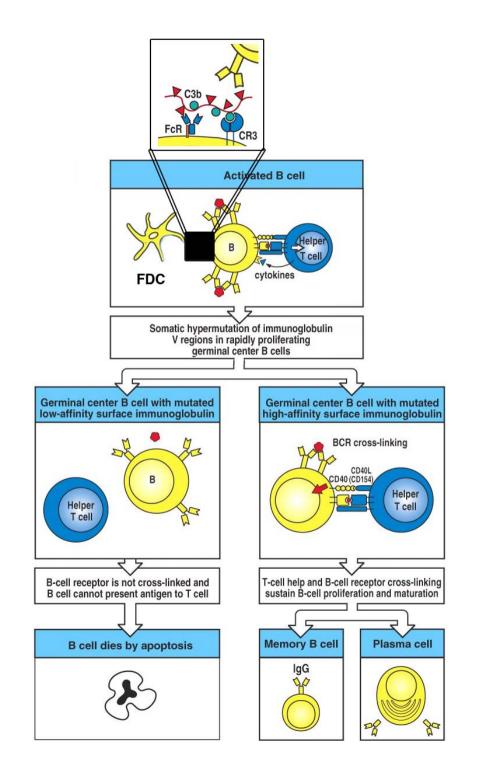


FDC present <u>native</u> antigen:

- 1. bound by antibody and FcR
- bound by complement and complement receptors



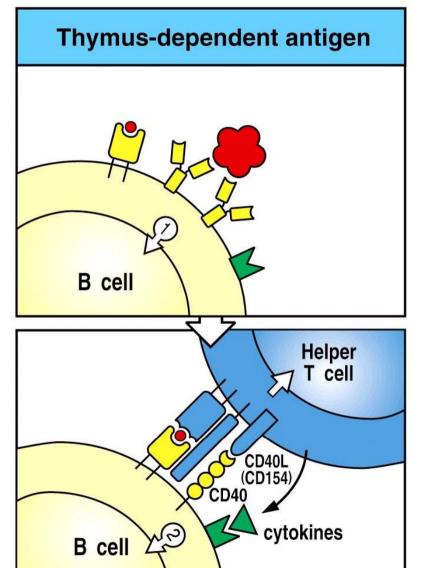
B cells competing to bind the antigens presented by FDCs= competition that drive affinity maturation

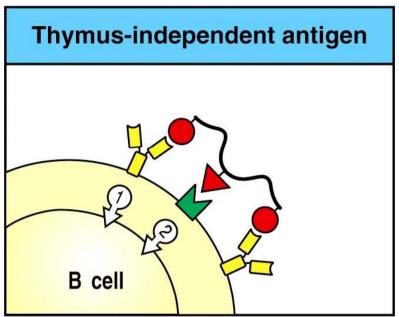


If T cells recognize only peptides, how do you make antibodies to polysaccharides or other non-protein macromolecules?

Thymo-independent B cell response

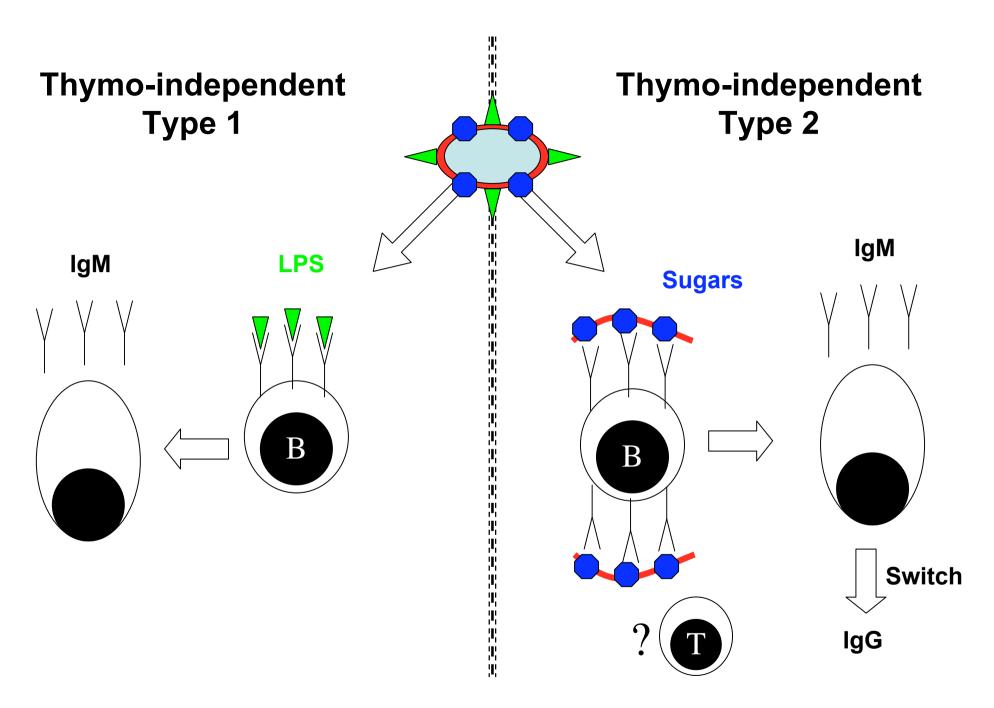
Some B cell responses require T help whereas other do not





T-independent antibody response generally have

- 1. no memory
- 2. no isotype switching
- 3. no somatic mutations

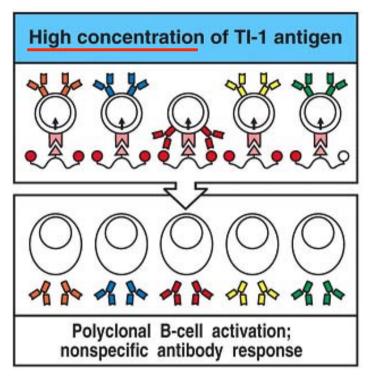


B cells that respond to these Ags are mostly **B1a** cells

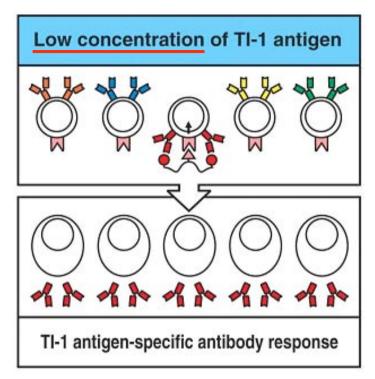
Properties of thymus-dependent and thymus-independent antigens

	TD ANTIGENS	TI ANTIGENS	
Property		Type 1	
Chemical nature	Soluble protein	Bacterial cell-wall components (e.g., LPS)	
Humoral response			
Isotype switching	Yes	No	
Affinity maturation	Yes	No	
Immunologic memory	Yes	No	
Polyclonal activation	No	Yes (high doses)	
BCR signaling	"Classic"	Use the BCR as a focusing component that concentrates the polyclonal activator	
Cytokines	Required (from Th)	Required (from non- lymphoid cells)	
Target B cells	Mature only	Mature and immature	

B cell response to TI-1 antigens



These are <u>polyclonal B cell activators</u> or <u>B</u> <u>cell mitogens</u>. These can be dangerous because they deregulate B cell responsiveness



At low doses, the TI-1 antigens activate only the <u>antigen-specific B cells</u> but they do it without T cell help. This can be helpful in getting rid rapidly of bacteria (without the need to expand Th cells)

Bacterial lipopolysaccharides (LPS) is the prototypical TI-1 antigen

Properties of thymus-dependent and thymus-independent antigens

	TD ANTIGENS	TI ANTIGENS		
Property		Type 1	Type 2	
Chemical nature	Soluble protein	Bacterial cell-wall components (e.g., LPS)	Polymeric protein antigens; capsular polysaccharides	
Humoral response				
Isotype switching	Yes	No	Limited	
Affinity maturation	Yes	No	No	
Immunologic memory	Yes	No	No	
Polyclonal activation	No	Yes (high doses)	No	
BCR signaling	"Classic"	Use the BCR as a focusing component that concentrates the polyclonal activator	Vigorous and prolonged	
Cytokines	Required (from Th)	Required (from non- lymphoid cells)	Required (not necessarily from Th cells)	
Target B cells	Mature only	Mature and immature	Mature only	

B cell response to TI-2 antigens

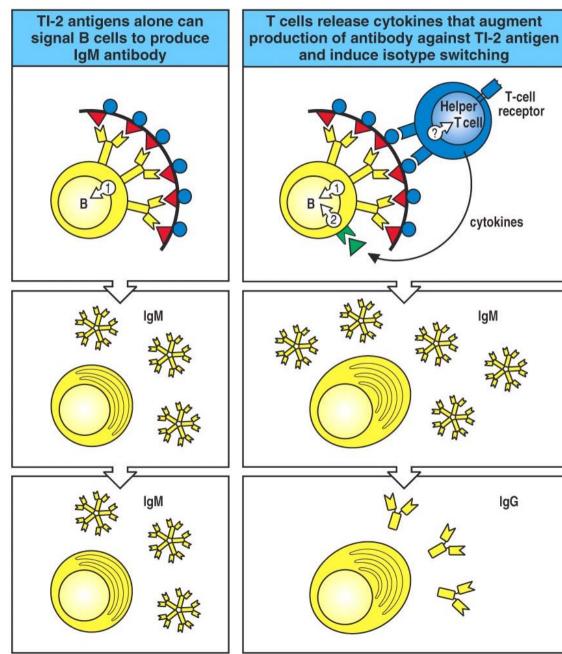
TI-2 antigens contain highly repetitive structures (epitopes)

Highly repetitive epitopes cross-link the BCRs and activate the B cells

Bacterial capsule polysaccharides are prototypic TI-2 antigens

Too low a density of repeating epitopes and they do not activate

Too high a density of repeating epitopes and they anergize.



B cell response to TI-2 antigens and the role of T cells

- TI-2 responses exist in athymic mice
- Elimination of all $\alpha\beta$ and $\gamma\delta$ T cells blocks TI-2 B cell responses
- May be $\alpha\beta$ or $\gamma\delta$ CD4-/CD8- DN T cells with an extrathymic development which may interact with non classical MHC molecules (such as CD1)

Summary of different classes of antigens

	TD antigen	TI-1 antigen	TI-2 antigen		
Antibody response in infants	Yes	Yes	No		
Antibody production in congenitally athymic individual	No	Yes	Yes		
Antibody response in absence of all T cells	No	Yes	No		
Primes T cells	Yes	No	No		
Polyclonal B-cell activation	No	Yes	No		
Requires repeating epitopes	No	No	Yes		
Examples of antigen	Diphtheria toxin Viral hemagglutinin Purified protein derivative (PPD) of Mycobacterium tuberculosis	Bacterial lipopoly- saccharide <i>Brucella abortus</i>	Pneumococcalpoly- saccharide Salmonella polymerized flagellin Dextran Hapten-conjugated Ficoll(polysucrose)		

How can we help the immune system to make Abs to TI Ags such as polysaccharides (PS) and other non-protein macromolecules?

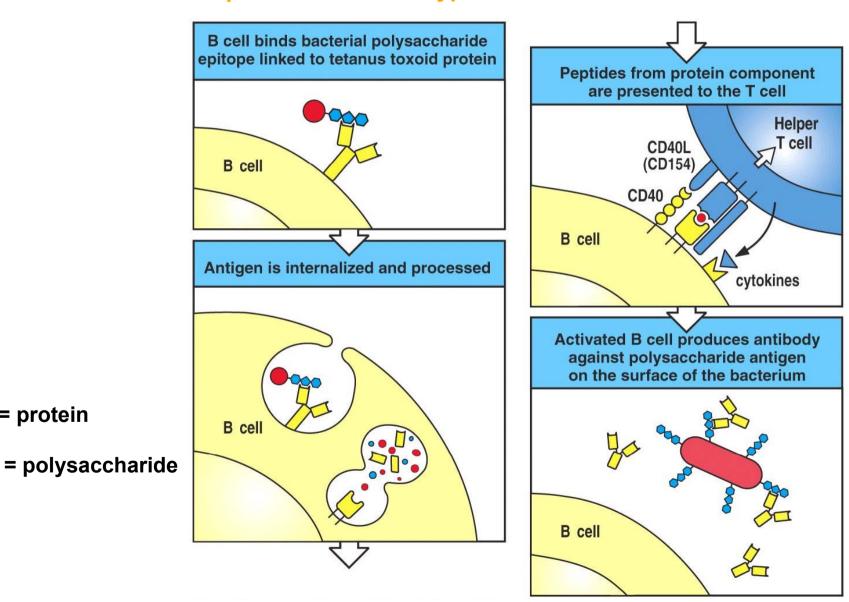
Haemophilus influenzae type b vaccine

- Prior to the introduction of effective Hib vaccines 20 years ago, Hib = the most common etiologic agent of serious bacterial infections in young children (<5 years)
- Though neonates <3months are rarely affected
- Hib PS = TI-2 Ag. Anti-Hib PS Abs=IgM (also IgG in humans)
- First generation vaccine: purified Hib PS: poor efficacy in children <2 years
- Second generation vaccines: Hib PS conjugated with one protein carrier
 - Diphteria toxoid (PRP-D): poor efficacy
 - Non-toxic diphteroid toxin (HbOC or HibTiter): OK with 3 inj
 - Meningococcal outer membrane (PRP-OMPC): OK with 1 inj <2 mo of age but not efficient >6 mo
 - Purified tetanus toxoid (PRP-T): has the advantage of HbOC+PRP-OMPC

How can we help the immune system to make Abs to TI Ags such as polysaccharides (PS) and other non-protein macromolecules?

Haemophilus influenzae type b vaccine

= protein



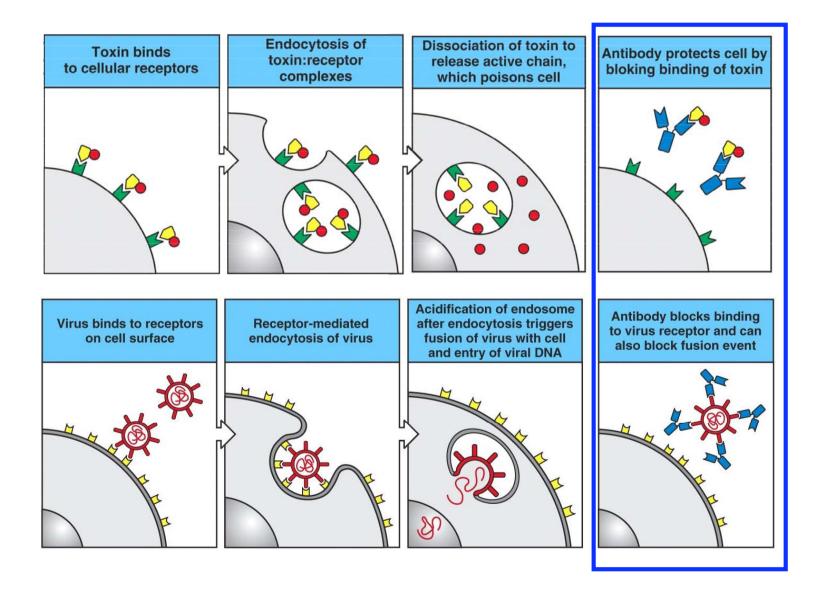
[Antibody effector mechanisms]

(how antibodies help get rid of antigens)

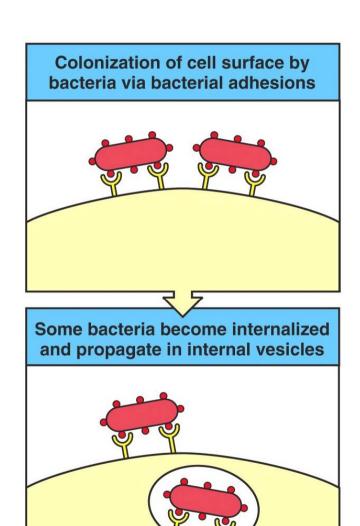
Some of the way that antibodies function to protect against infections

- ✓ Neutralization and inhibition of adherence
- ✓ Opsonization
- ✓ Complement activation
- ✓ Immune complex clearance by RBC
- ✓ ADCC
- ✓ Mast cell degranulation
- ✓ Eosinophil degranulation

Neutralization of microbial agents

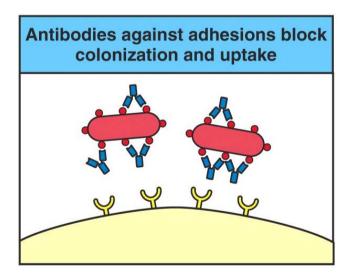


Neutralization of microbial agents



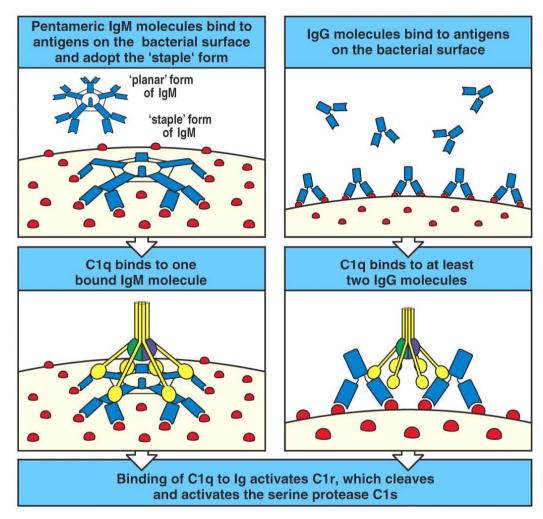
Most bacteria need to attach to a surface to initiate an infection

Antibodies can prevent attachment of bacteria to cell surfaces



Prevention of adhesion on mucus membranes is particularly important; this is a major role for secretory IgA

Complement activation

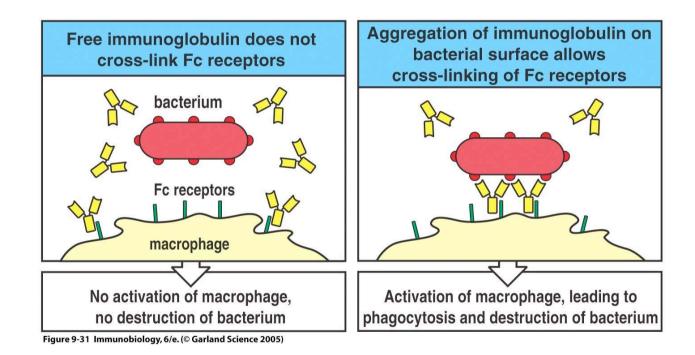


IgM is highly efficient at fixing (activating) complement (A single molecule of IgM bound to a surface can initiate a complement cascade

IgGs can fix complement but are less efficient (2 IgG can initiate a complement cascade but getting 2 bound molecules of IgG close together can take lots of IgG)

Free Ig does <u>not</u> bind efficiently to FcR whereas antigen-antibody IC do bind efficiently (IgE-FcRε is an exception)

=> free Igs and IC (Ig+Ag) do not compete with each other for FcR. This allows "innate immunity" to focus on targets already recognized by antibody



IgM does not have free Fc regions and there are few Fc receptors for IgM. But IgM is efficient at complement activation and uses C3b for an opsonin (IgM is not an opsonin but it is very efficient at inducing production of C3b, a good opsonin).

Fc receptors and complement receptors synergize to make phagocytosis of bacteria and other organisms very efficient

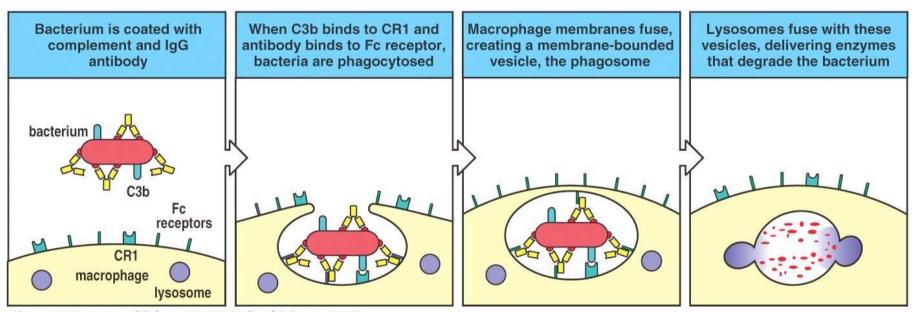


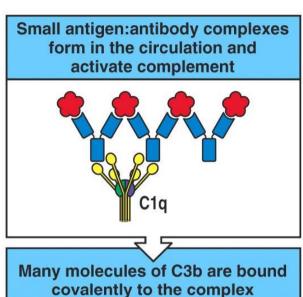
Figure 9-32 Immunobiology, 6/e. (© Garland Science 2005)

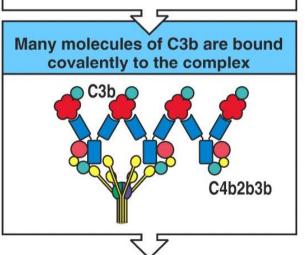
Antibodies can activate complement

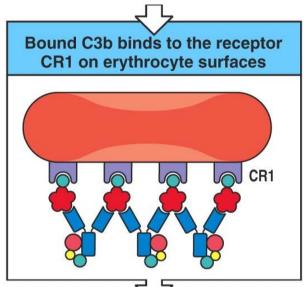
<u>but</u>

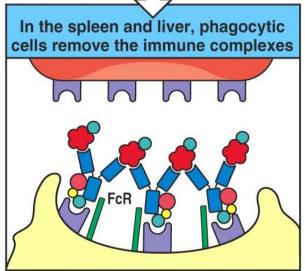
complement can be activated without antibody

Red blood cells (RBC) help clear immune complexes (antigen-antibody complexes) from the blood via complement receptors on the RBCs





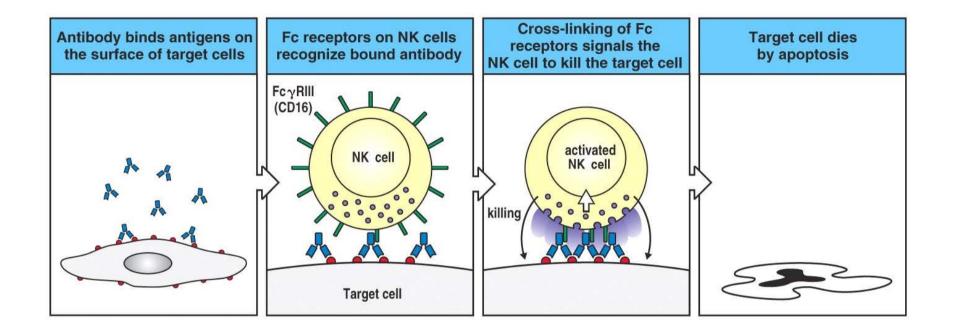




Immune complexes that are not removed from the blood in the liver or spleen tend to get deposited in the kidneys

This can cause glomerulonephritis (inflammation of the glomeruli) and kidney failure

Antibody dependent cell-mediated cytotoxicity (ADCC)



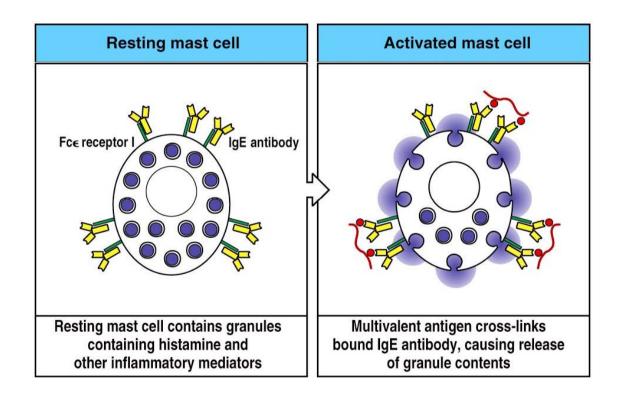
NK has two ways to recognize targets:

- (1) lack of MHC class I on the target (innate immunity)
- (2) antibody on the target (adaptive immunity)

IgE plus antigen causes <u>degranulation</u> of mast cells (granules contain histamine and other compounds that cause inflammation)

Mast cells can bind antibodies with FcεR in the absence of antigen (unlike other FcRs)

The binding affinity of FcεR for IgE is 100 to 50,000 time greater than the affinity of most other FcRs for antibody



Functional activity	IgM	lgD	lgG1	lgG2	lgG3	lgG4	lgA	IgE
Neutralization	+	1	+	++	++	++	++	1
Opsonization	+	-	+++	*	++	+	+	_
Sensitization for killing by NK cells	-	ı	++	-	++	-	ı	_
Sensitization of mast cells		1	+	-	+	I	I	+++
Activates complement system	+++	1	++	+	+++	1	+	