

I. The Immune system



- 1) Cellular effectors:**
Phagocytes
(Monocytes/Macrophages,
Granulocytes);
Killers
(NK cells).
- 2) Soluble Effectors:**
Complement
Defensins
Interferons α , β
Primary cytokines
(IL-1, IL-6, TNF)
Chemokines

- 1) Cellular effectors:**
T lymphocytes
B lymphocytes
- 2) Soluble Effectors:**
Immunoglobulins (B cells)
Interferon- γ
Secondary cytokines
Chemokines

II. Phases of the Adaptive Response

<u>1. Induction</u> (Priming)	<u>2. Effector</u>	<u>3. Memory</u>
Primary response		
-Naïve cells	-Effector cells	
-Quiescent	-Hyper-Activated cells	
-Low precursor frequency ($10^{-5}/10^{-6}$ lymphocytes)	-Clonal expansion: cell cycle	
	Highest precursor frequency ($10^{-2} / 10^{-4}$ lymphocytes)	
-Low avidity Ag Receptors	-Selecting high avidity Ag receptors	
-No effector functions	-Effector functions (Cytokines, Help, Killing)	
-Stringent activation requirements	-Easy to trigger	
Where: Secondary lymphoid Organs	-Secondary lymphoid Organs (CD4 helper, B cells); -Tissues (CD4, CD8 T cells)	
		-Patrolling lymphoid organs and tissues (central memory or effector memory T cells)
How: Meeting with Ag+APC	-Meeting with target cells	-Resident in Bone Marrow (B cells plasmacells)
		-Re-induced by APC in secondary lymphoid organs

III. Phases of the Adaptive Response

1. Induction(Priming)

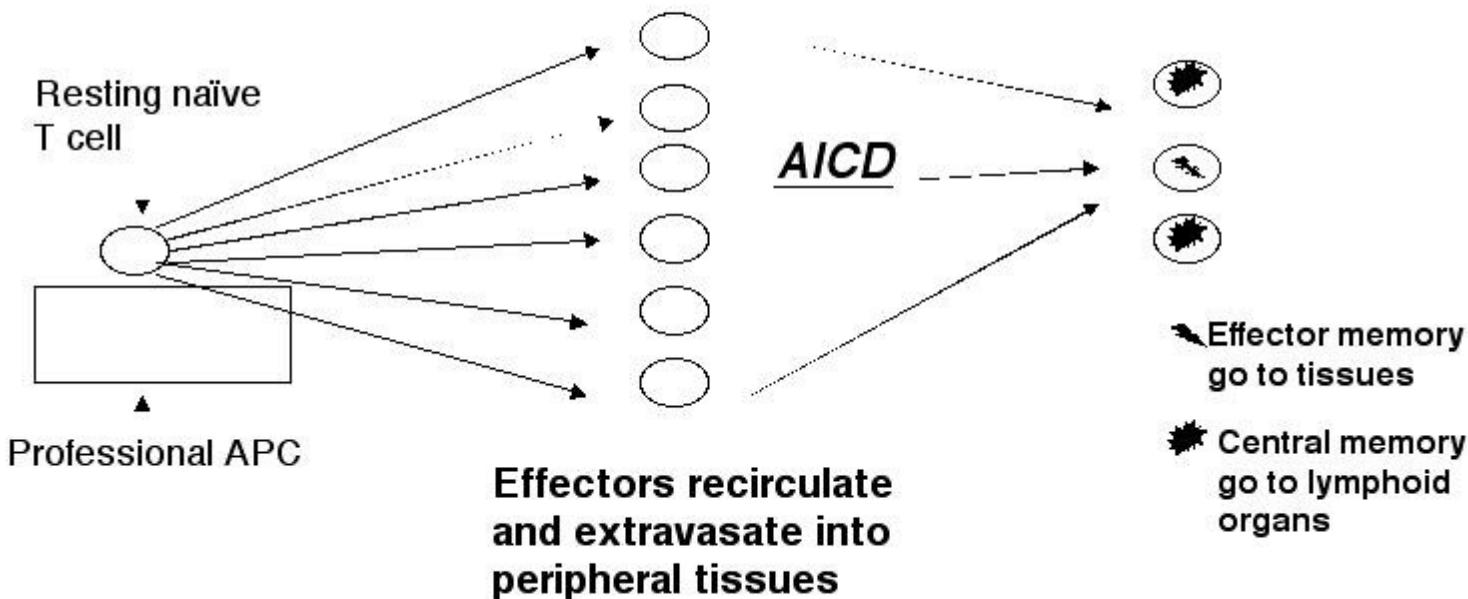
In secondary lymphoids organs

2. Effector

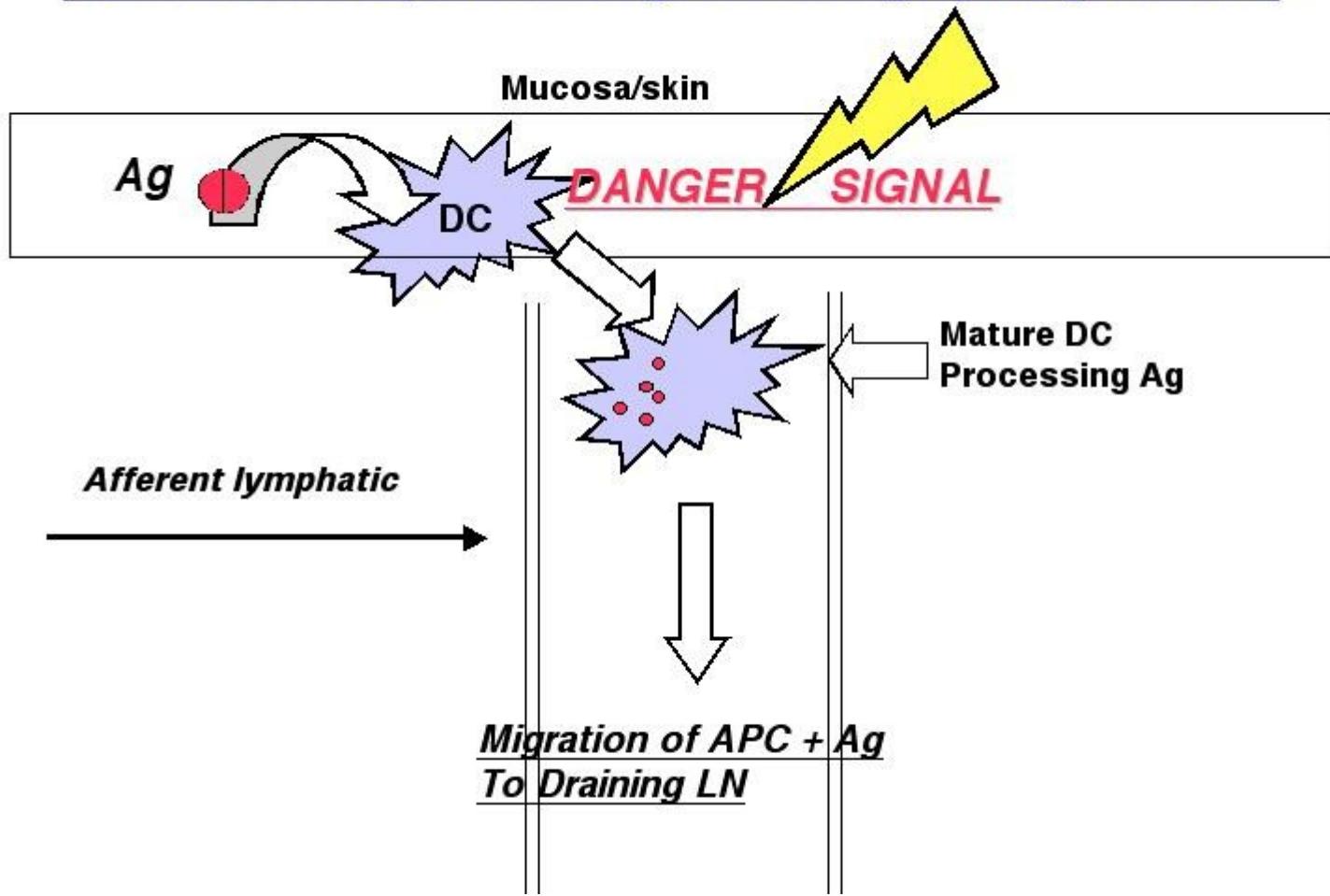
Clonal expansion

3. Memory

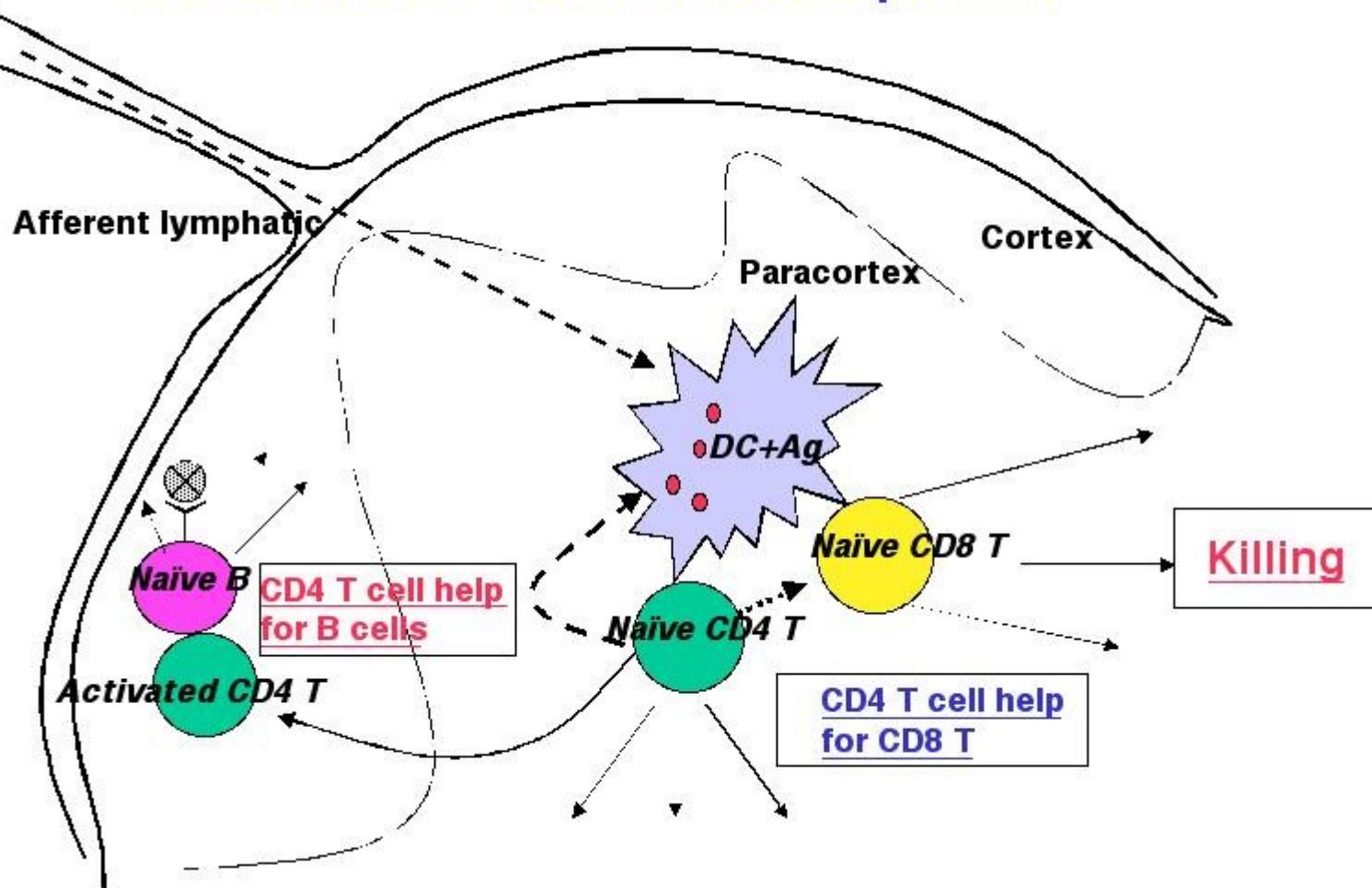
Less clonally expanded

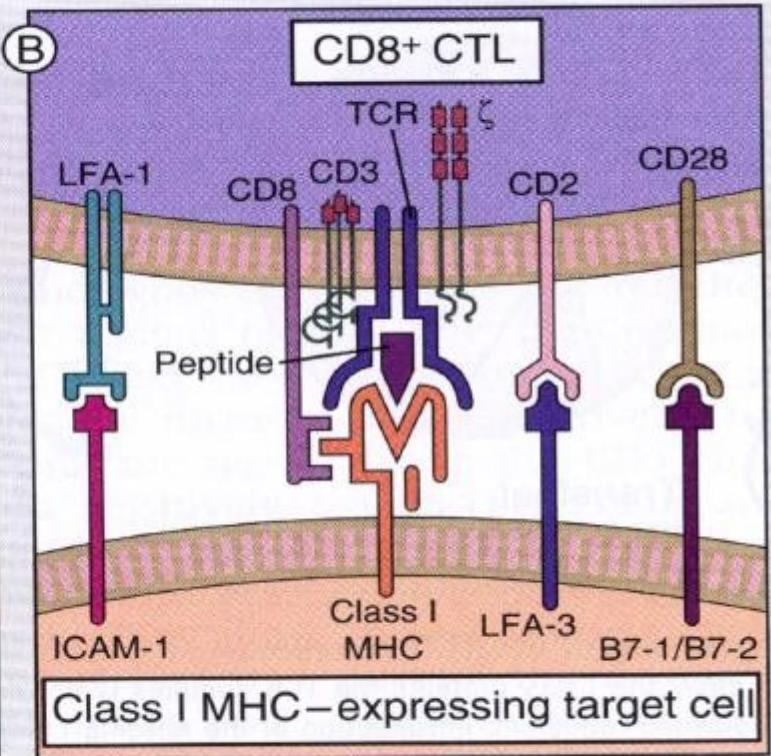
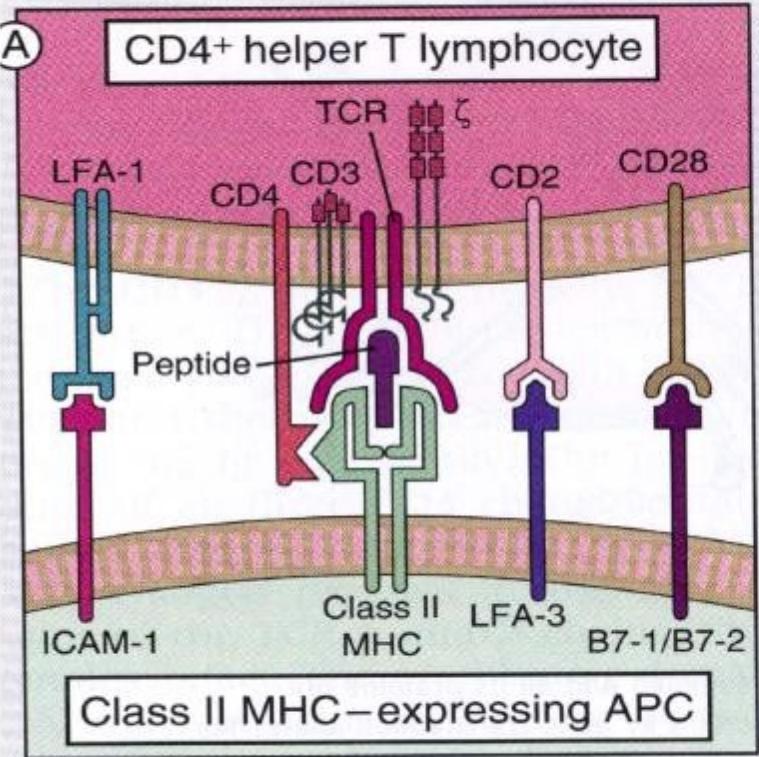


IV. How do Peripheral Antigens and Lymphocytes meet ?



V. Induction of T and B cell responses

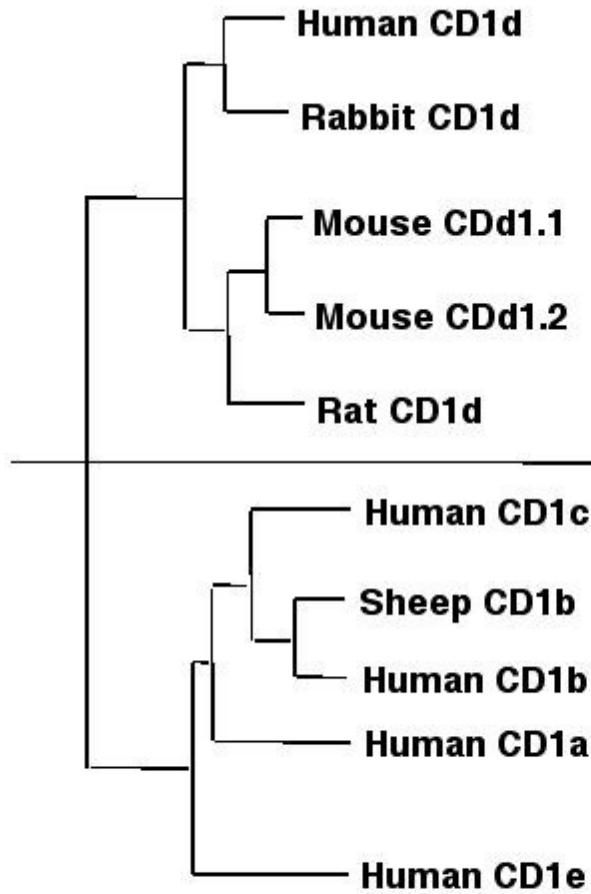




NKT cells

T cells= α/β (γ/δ) TCR

NK cells= CD161 (NKPR1)



T cell response:
NKT cells

8

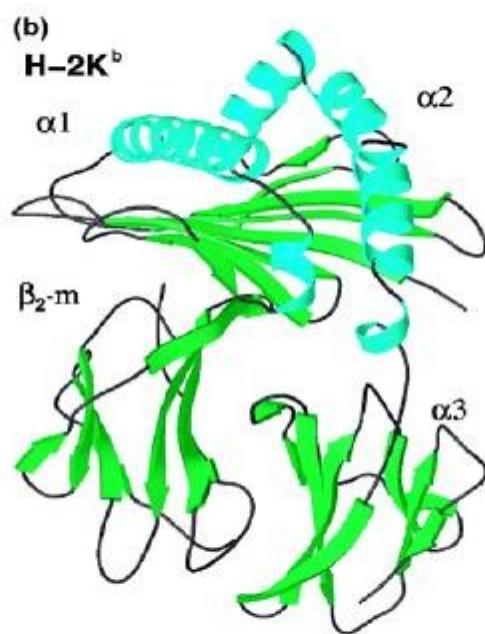
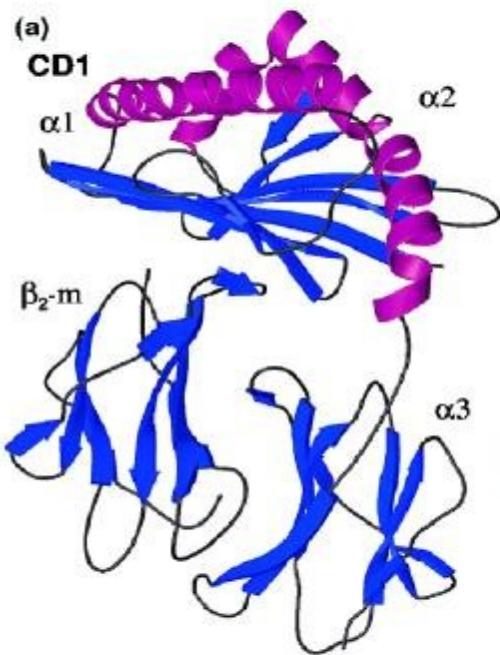
human invariant V α 24-J α Q/V β 11
mouse invariant V α 14-J α 281/V β

GlycosylCeramide Antigens

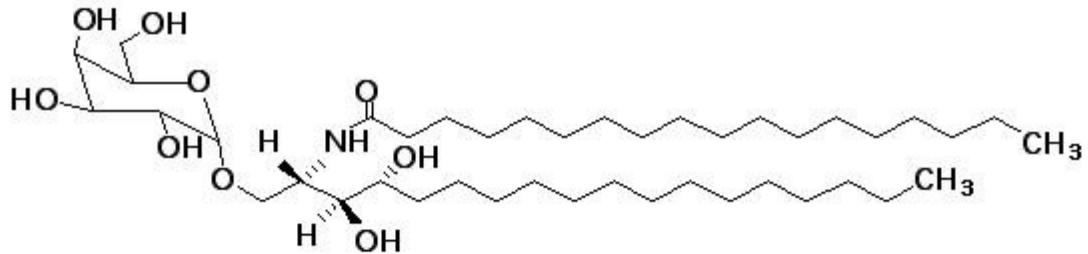
T cell response:
human α/β TCR DN
human TCR α/β CD8 +
human TCR γ/δ

Mycobacterial glycolipid Antigens

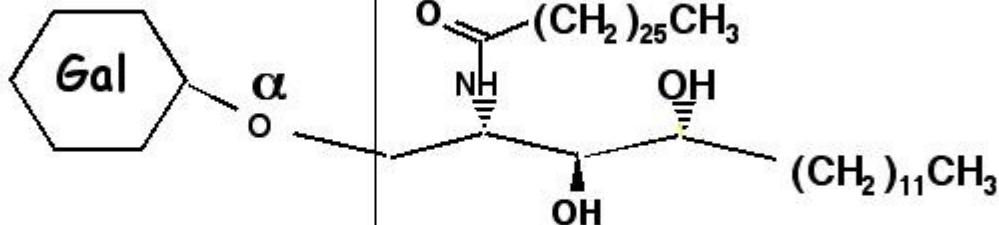
Human CD1 genes: chromosome 1
Mouse CD1 genes: chromosome 3



α-GalCer KIRIN7000



α -Galactosyl Ceramide



Ganglioside GM₁

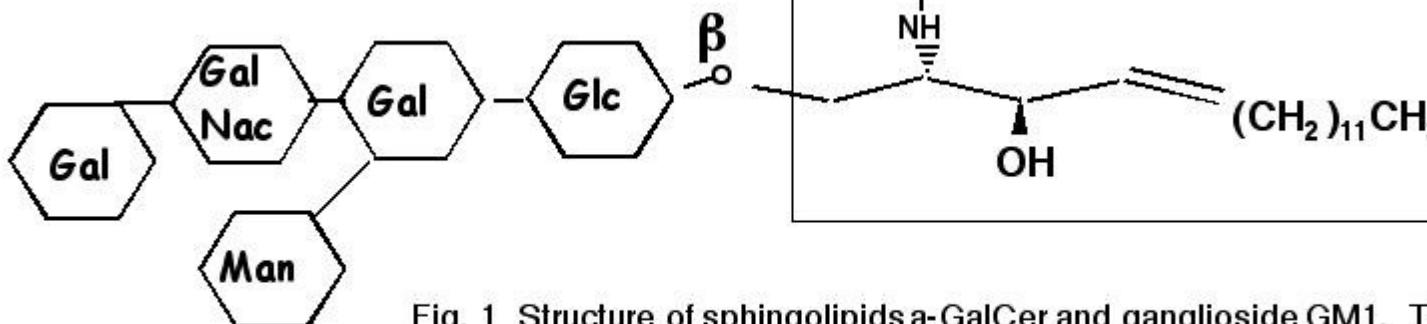
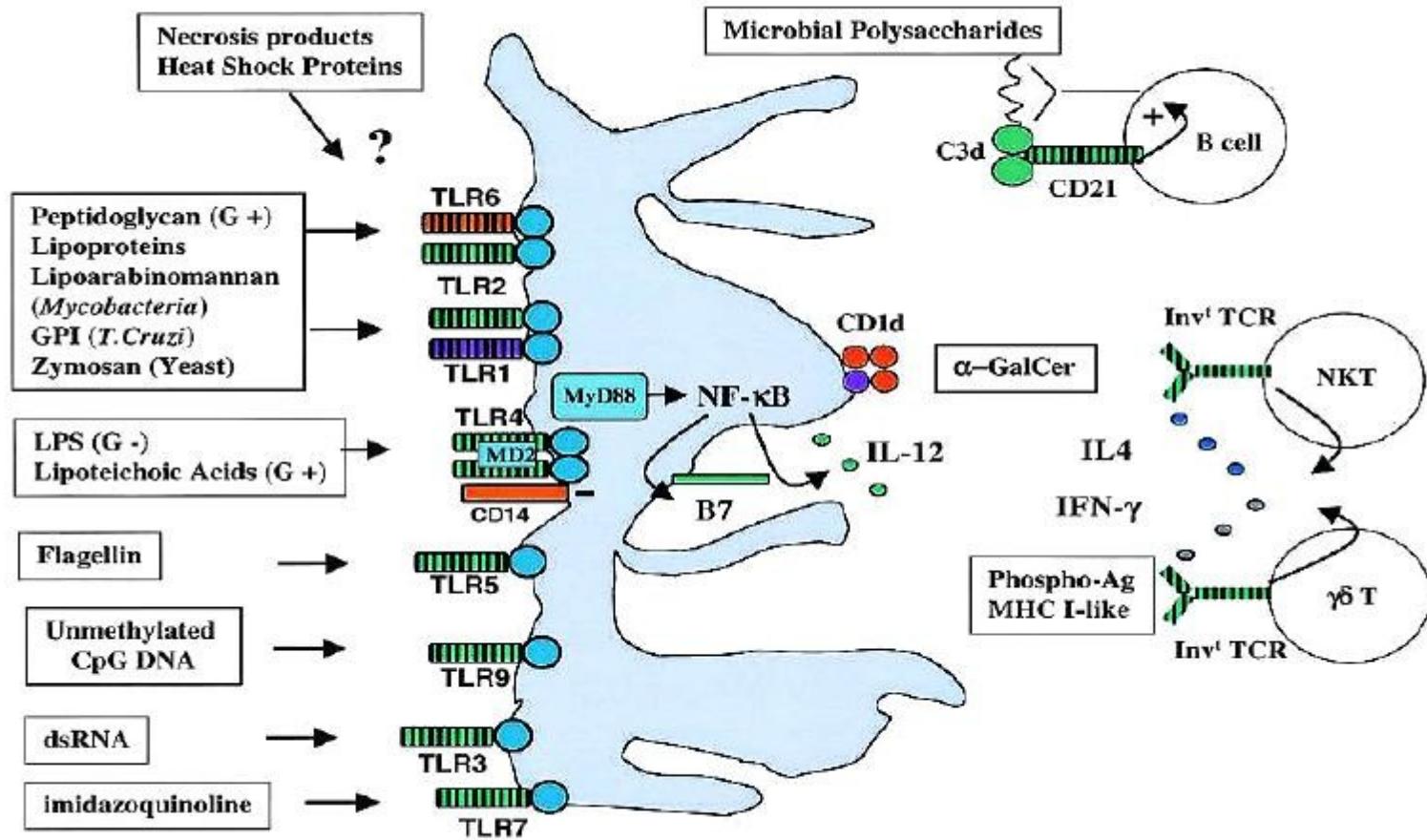


Fig. 1 Structure of sphingolipids α -GalCer and ganglioside GM₁. The ceramide moiety is enclosed in the gray box and the α or β anomeric linkage of the sugar is indicated.



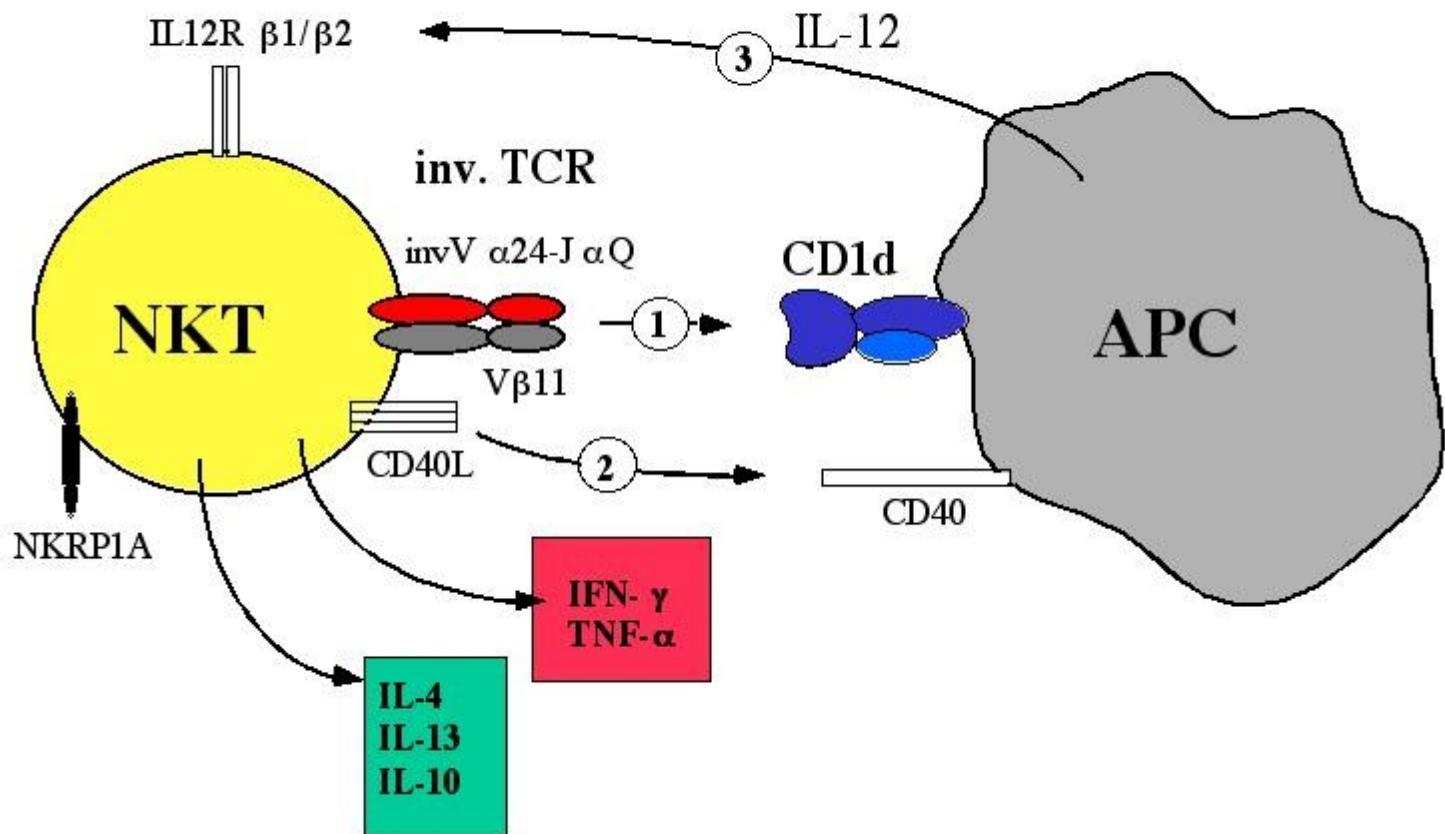
Le cellule NKT differiscono dalle T convenzionali, poiché

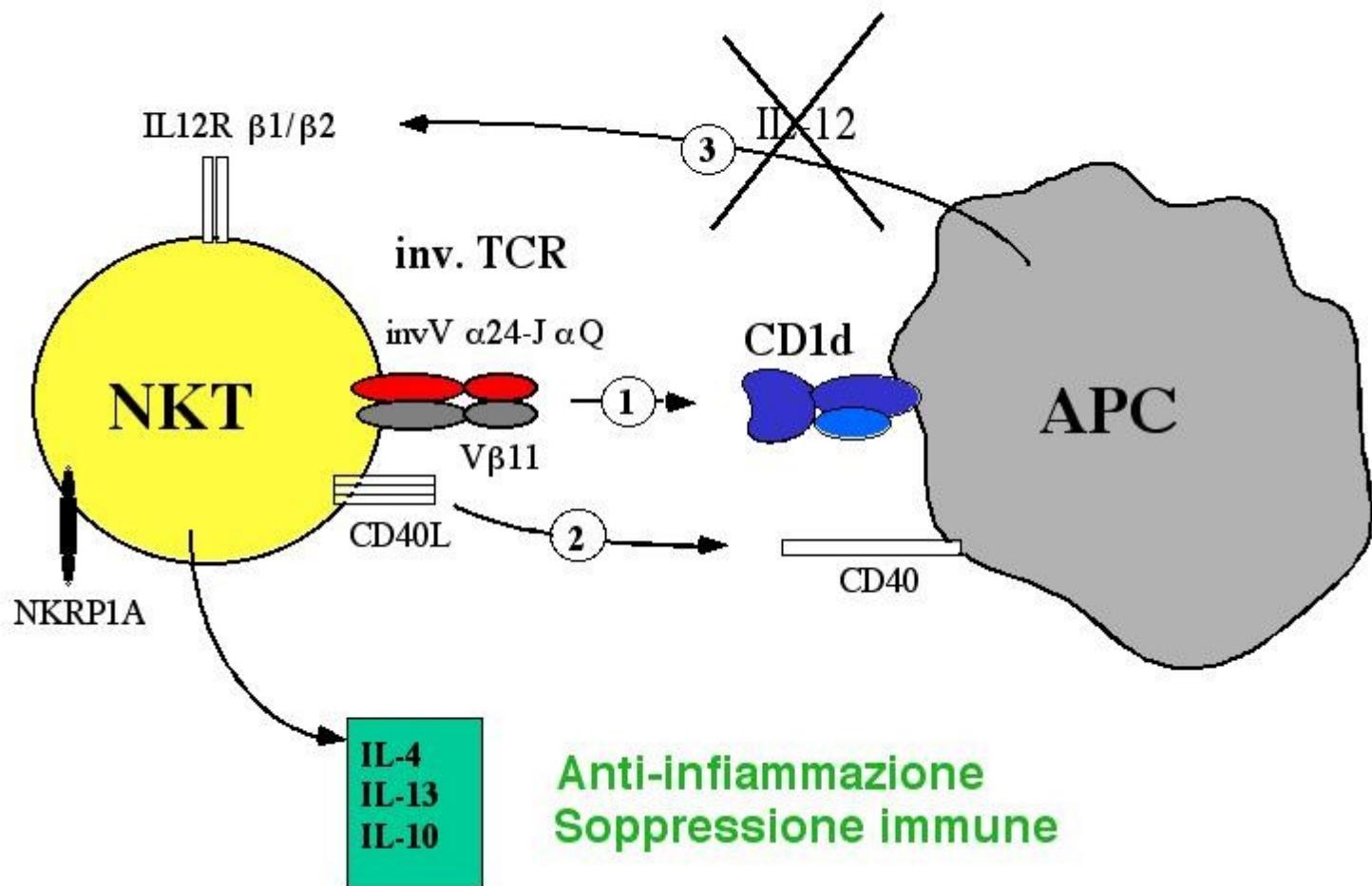
Sono sempre attivate

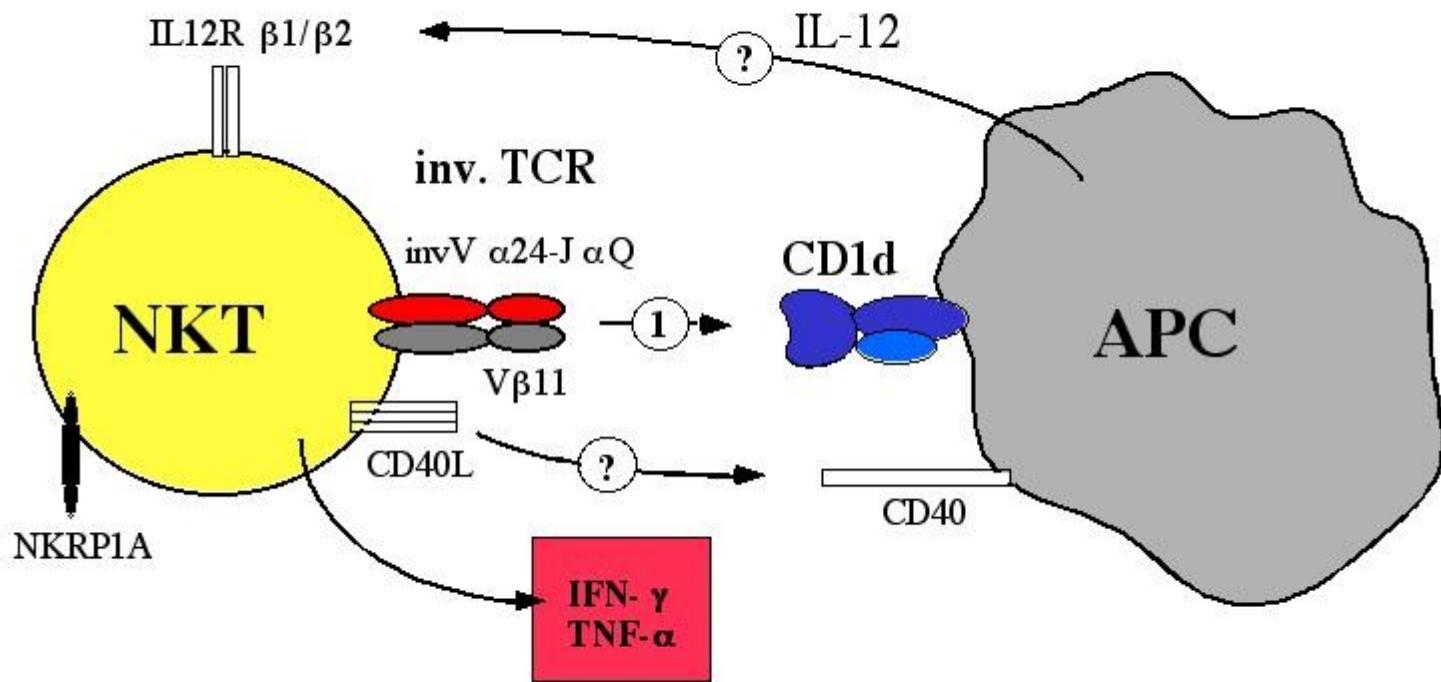
Sono già clonalmente espansse

Hanno sempre funzioni effettive immediate

In questo, sono simili alle cellule dell'immunità innata

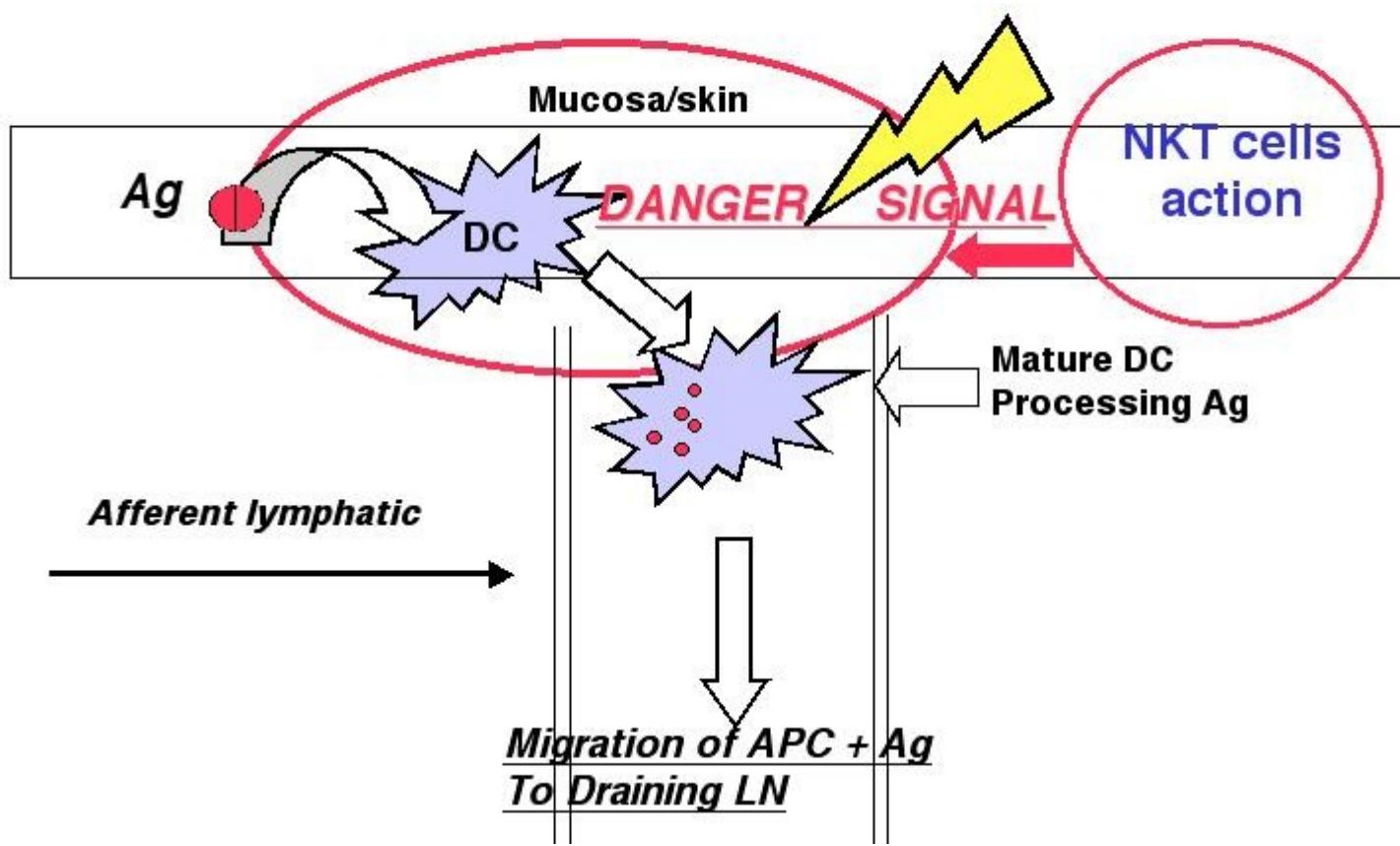




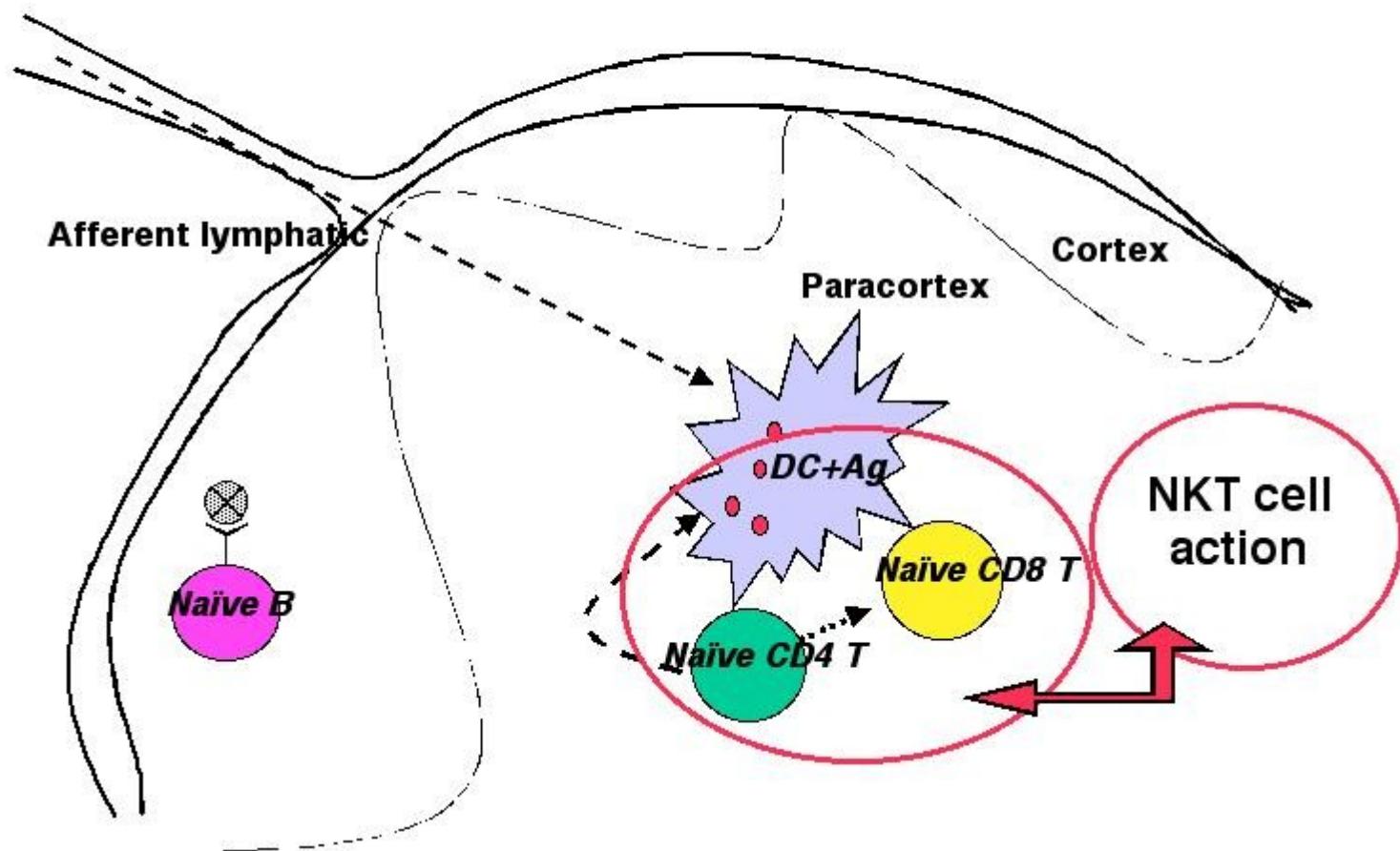


Infiammazione
Attivazione immune

Cellule NKT possono influenzare la maturazione delle DC nelle mucose

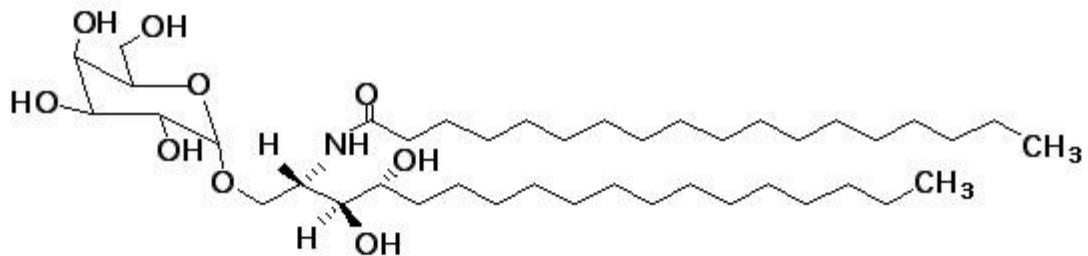


Le cellule NKT possono influenzare l'induzione della risposta immune



α -Gal Cer come farmaco per attivare cellule NKT

α -GalCer KIRIN7000



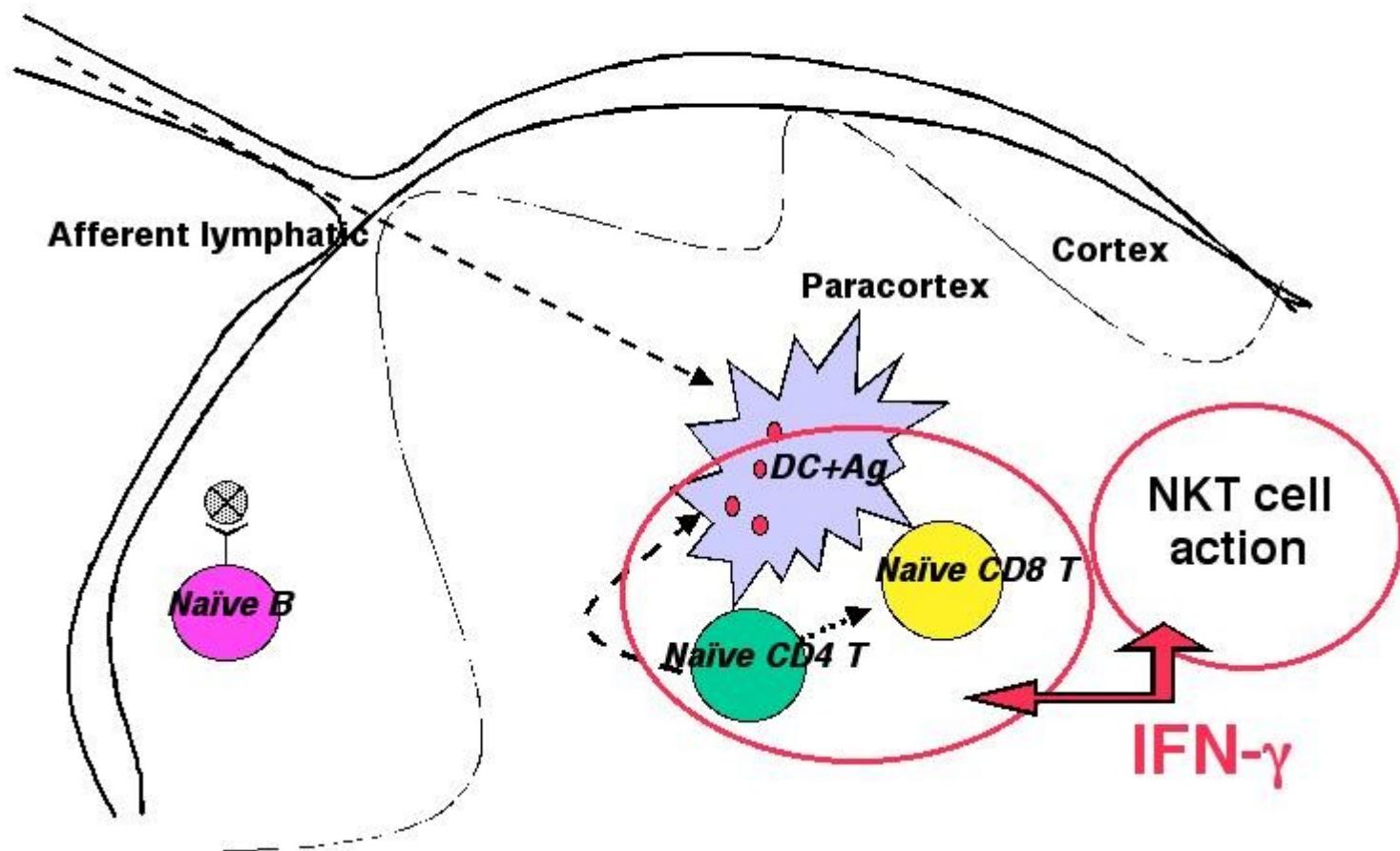
Regulatory activity by inv. NKT cells

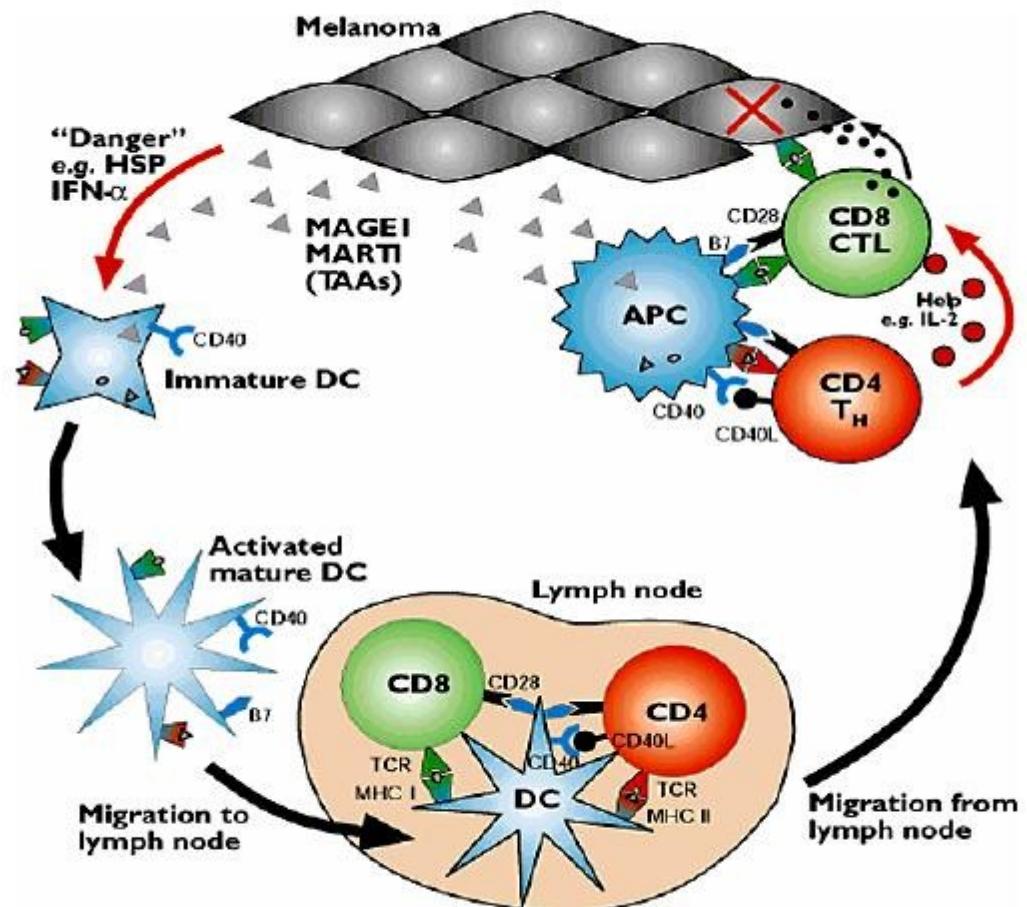
Activation of inv. NKT cells by α -Gal Cer:

Induces anti-tumor responses

Potentiate malaria vaccines

Le cellule NKT possono influenzare l'induzione della risposta immune





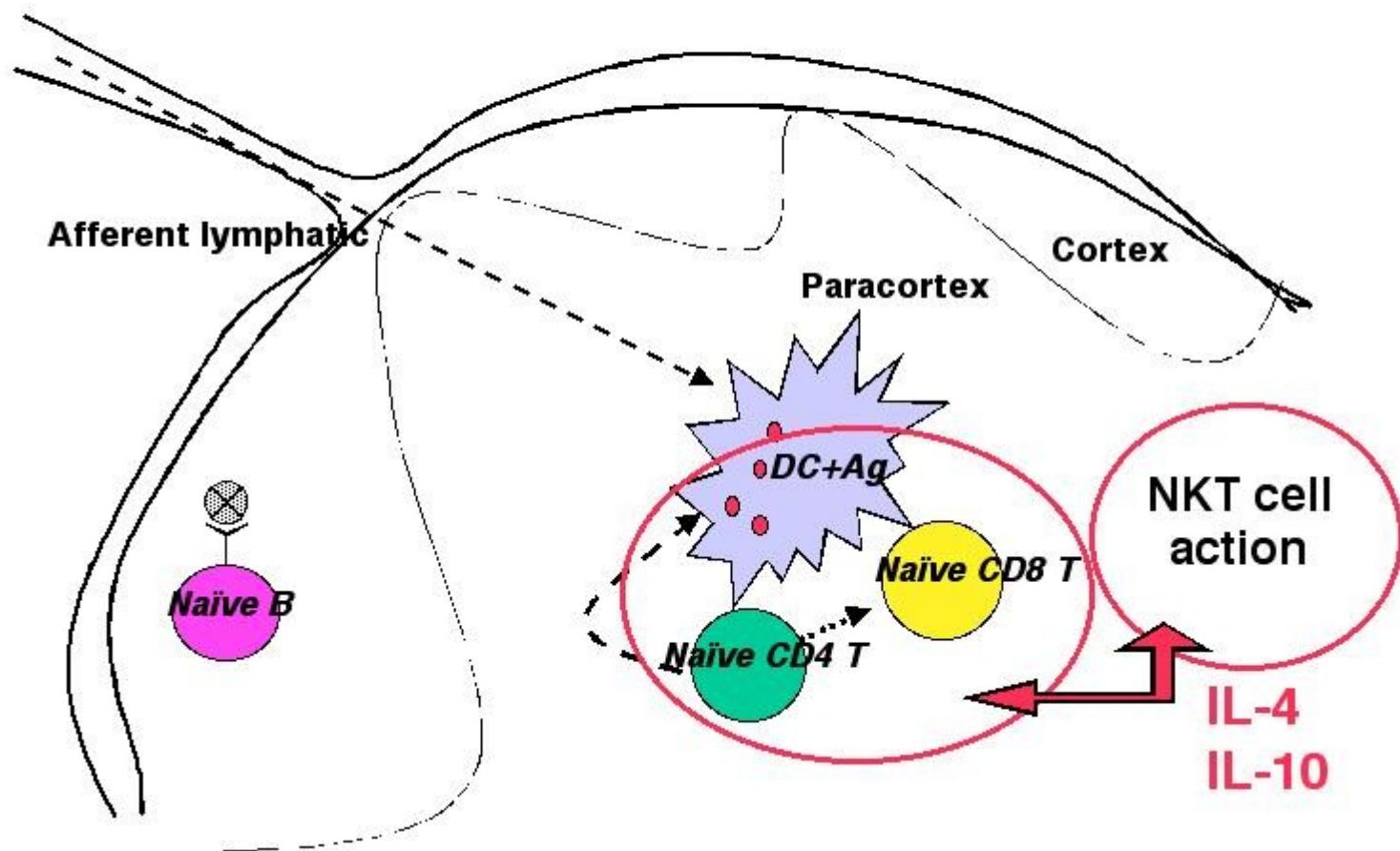
Regulatory activity by inv. NKT cells

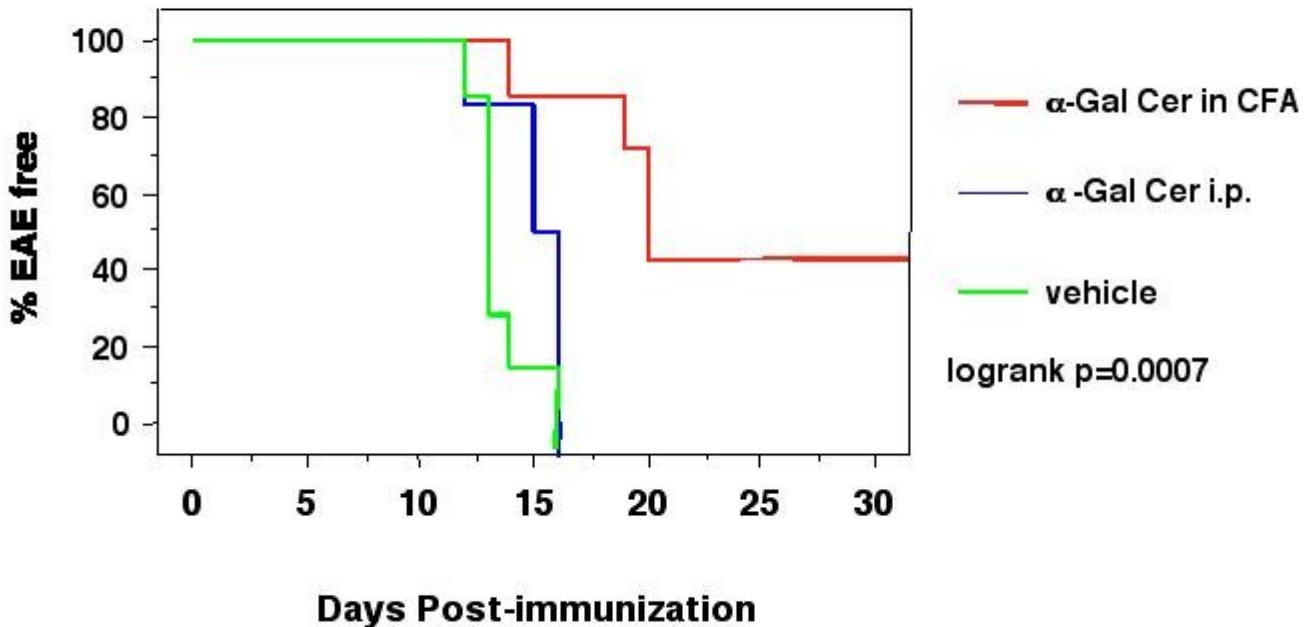
Activation of inv. NKT cells by α -Gal Cer:

Suppresses/delays type I diabetes

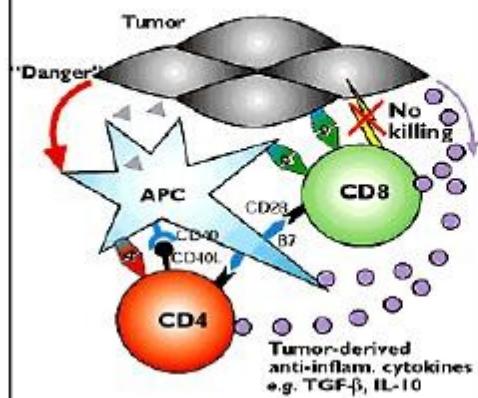
Suppresses/delays EAE

Le cellule NKT possono influenzare l'induzione della risposta immune

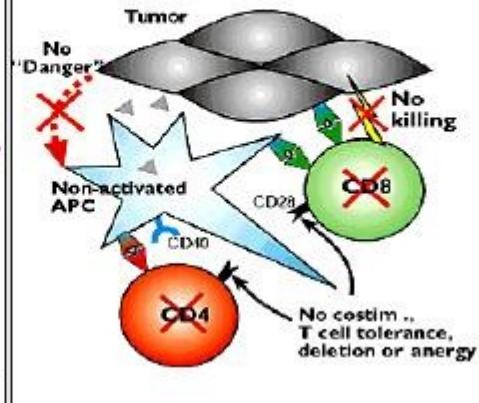




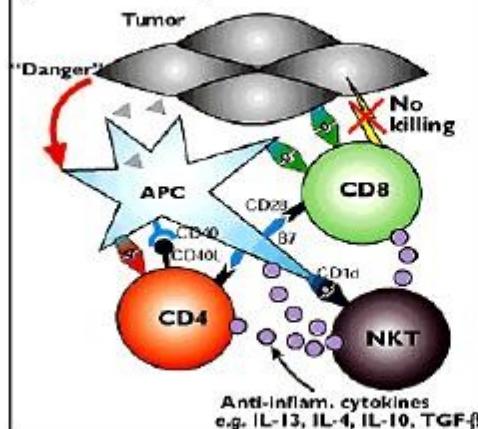
a Tumor-derived suppression



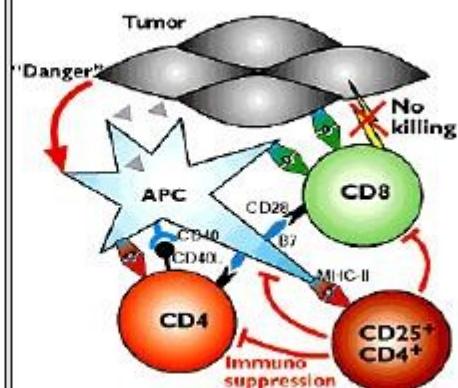
b Absence of danger

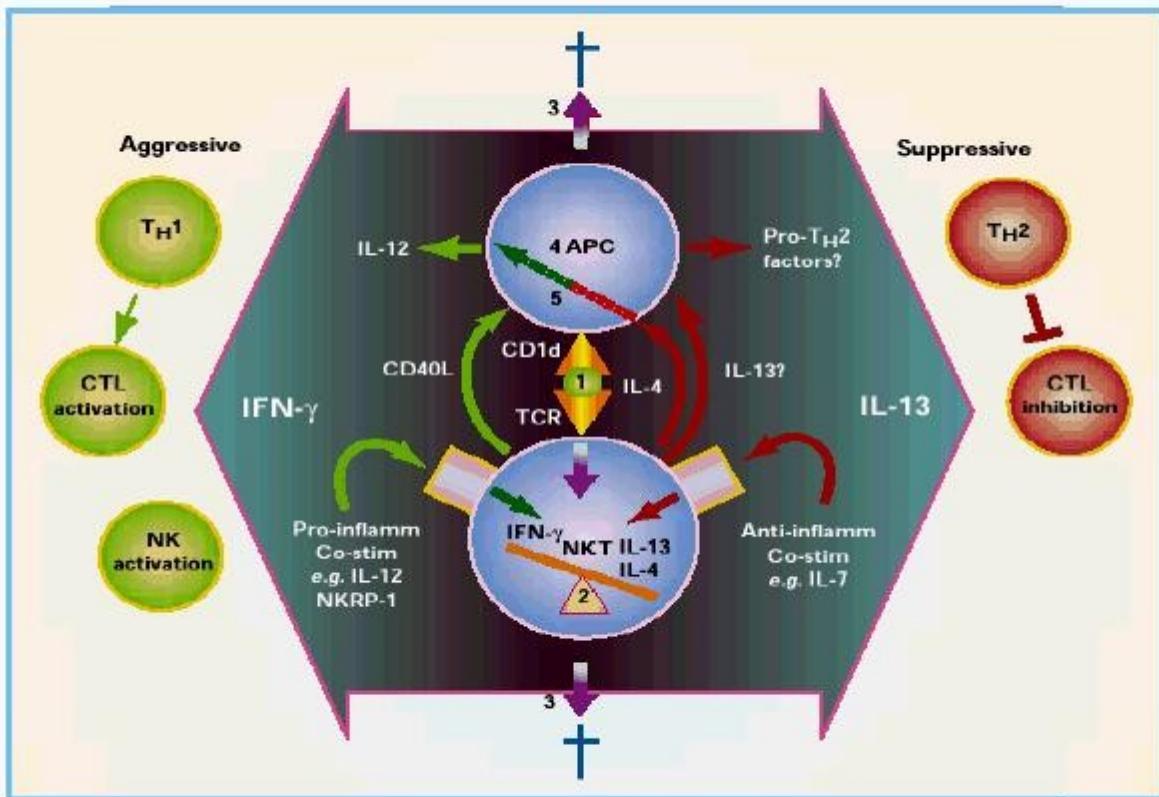


c Inhibition by NKT cells



d Inhibition by CD25⁺CD4⁺ T cells





Le cellule NKT hanno caratteristiche tipiche sia dell'immunità innata che adattativa

Hanno funzione regolatoria, producendo citochine pro- ed anti- infiammatorie

La loro manipolazione è possibile, e potrebbe avere interessanti risvolti futuri in terapia

