

Immune Response



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Introduction

• The specific reactivity induced in a host by an antigenic stimulus is known as *immune response*

- Protection against invading Microorganism
- It may lead to consequence which may be either beneficial, indifferent or injurious
- The immune response can be of 2 types
- Humoral mediated immunity (HMI)
- Cell mediated immunity (CMI)
- Usually developed together, but either may be predominant, exclusive or sometime act together or sometime in opposite



Humoral Mediated Immunity (HMI)

- Antibody mediated
- Antibody produced from plasma cell present in blood and other body fluid (Humoral body fluid)
- Provides defence against most **bacterial** pathogen and **virus** (respiratory and intestinal)
- Also participates in pathogenesis of type 1, 2, 3 hypersensitivity reaction and auto-immune disorder



Cell Mediated Immunity (CMI)

- Specific immune response that doesn't involve anitibody
 - Protects against **fungi, virus** and facultative intracellular **bacterial** pathogen
- Rejection of homografts and graft-versus host reaction
- Provides immunological surveillance and immunity against **cancer**
- Mediates pathogenesis of delayed **type 4 hypersensitivity** reaction and certain autoimmune disorder



Humoral Mediated Immunity (HMI)

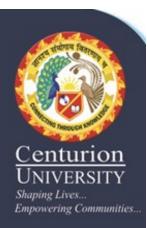
- It involves 4 step
- Lag phase
- - entry of pathogen, its distribution and fate in tissue
- – Contact with immunocompetent cells
- Log Phase
- Steady rise in the titre of antibody
- Plateau phase
- - Equilibrium between antibody synthesis and catabolism
- Decline phase
- Catabolism exceeds production and thus titre falls

Primary and Secondary Response

- Antibody response to initial antigenic stimulus is called **primary response**
- – differs both quantitatively and qualitatively
- – Slow, sluggish and short lived
- - Long lag phase and low titre of antibody
- – Predominantly IgM

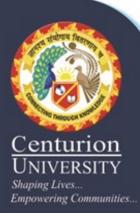
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- Subsequent to primary response is call secondary response
- - Prompt, powerful and prolonged
- – Short or negligible lag phase
- - much higher level of antibodies for longer period
- – Predominantly IgG

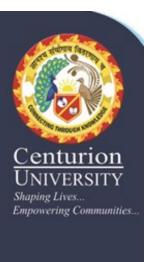


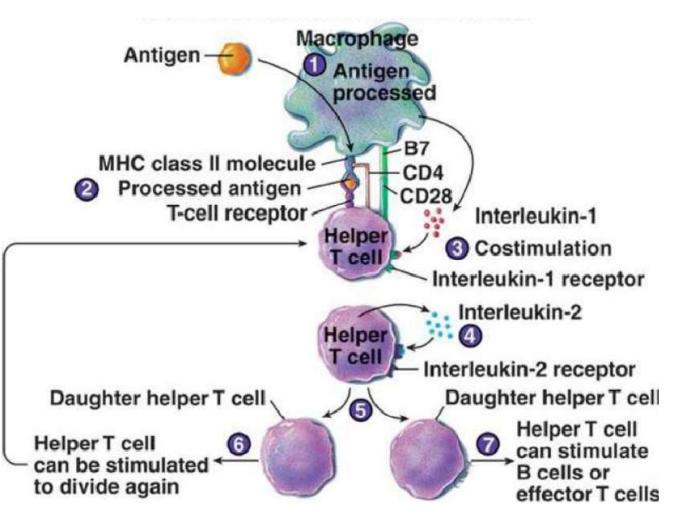
Primary and Secondary Response

- Duration of lag phase and persistence of antigen vary with nature of antigen
- – Diptheria toxoid: 2-3 weeks
- – Pneumococcal polysaccharide few hrs
- Non living vaccine given in multiple dose
- **Priming dose:** first injection of antigen
- Booster dose: subsequent injection of antigen
- Live vaccine: sufficient for multiplication of organism in the body which provides continuous antigenic stimulus

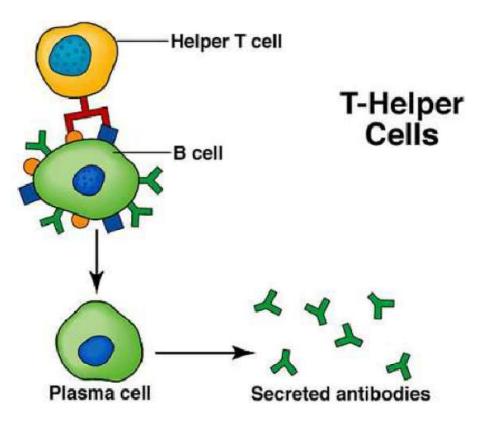


- 1. Antigen enters
- 2. Antigen presenting cells (APC) acivated
- – Macrophage
- – Dendritic cells
- 3. APC binds with Major histocompatablity complex (MHC) II
- **4. Immature T-cell** binds with earlier formed complex with the help of **T-cell receptor** (TCR)
- 5. Whole complex produces signal for activation of **CD4 cells**
- 6. Activation of **CD₄ cells** Maturation of **T helper cell** (TH cells)
- 7. Forms IL-2, IL-4, IL-5 & IL-6: B-cell maturation and subsequently release of plasma cells
- – Plasma cells forms antibodies
- – Some of the **plasma cells memory cells**



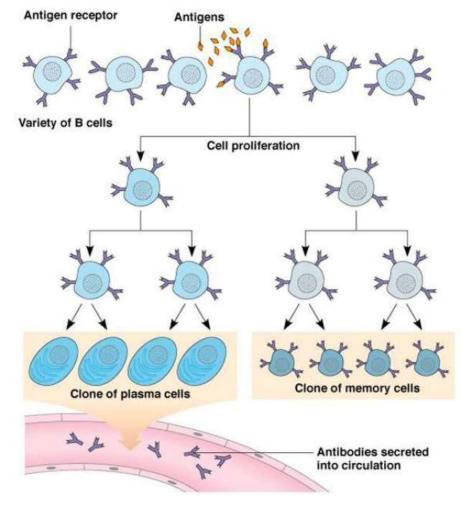








 There is continued production of antibody by cloning of Plasma Cells – Polyclonal Antibodies



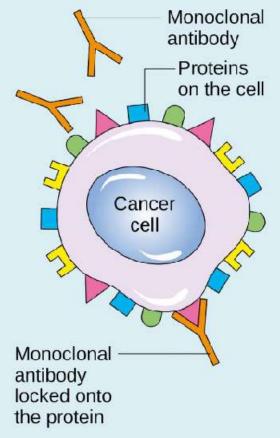


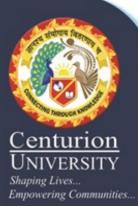
Monoclonal Antibodies

Kohler and Milstein (Nobel Prize 1984)

A single antibody forming cell or clone produces Antibodies against single antigen

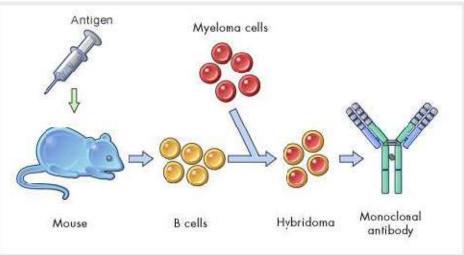
• Antibodies are usually polyclonal





Monoclonal Antibodies

- Prepared by fusing immortal myeloma cells with the spleen cells B cells (derived from a mouse that has been immunized with the intended antigen) to produce monoclonal antibody-producing cells, hybridomas.
- Hybridomas have the characteristics of both cells i.e. produce antibodies and reproduce infinitely.





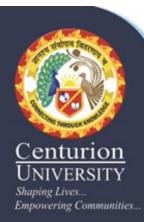
Monoclonal Antibodies

Diagnostic tests

• Detect small amounts of drugs, toxins or hormones

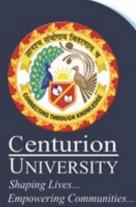
Ex. monoclonal antibodies to **human chorionic gonadotropin** (**HCG**) - pregnancy test kits

- – AIDS by the ELISA test
- Treat viral diseases
- Detection and immunotherapy of cancer
- Classify strains of a single pathogen, e.g. Neisseria gonorrhoeae



Cell-mediated Immunity

- Specific immune response that do not involve antibody
- It participates in following immunological functions
- – Delayed hypersensitivity
- Immunity in infections caused by Obligate and facultative intracellular parasites
- Bacteria: Tuberculosis, Leprosy, Listeriosis, Brucellosis.
- Fungi Histoplasmosis, Cocccidiomysosis, Blastomycosis
- Parasites Leishmaniasis, Trypanosomiasis
- Virus- measles and mumps
- – Transplantation immunity
- – Immunological surveillance & Immunity against malignancy
- – Pathogenesis of Autoimmune diseases: thyroiditis, encephalomyelitis



Induction of Cell Mediated Immunity

- Depends on Nature of Antigenic stimulus
- Best developed after following infection with intracellular parasites
- Live vaccines highly stimulating
- Killed vaccine not very effective, but effective if contains adjuvant.

Induction of Cell Mediated Immunity

• 1. Antigen enters

Empowering Communities...

- 2. Antigen presenting cells (APC) acivated
 - Macrophage
 - Dendritic cells
- 3. APC binds with Major histocompatablity complex (MHC) I
- **4. Immature T-cell** binds with earlier formed complex with the help of **T-cell receptor** (TCR)
- 5. Whole complex initiate the formation of CD4 (helper) & CD8 cells (cytotoxic)
- - Former **helps** releases of **lymphokines** which activates
- macrophage eats away intercellular parasites
- – **CD8 cells** recognize antigen on surface of virus, infected cells, tumor cells, allograft cells with MHC I and secretes **lymphokines** and destroy target cells



Cytokines

- **Signaling** proteins and glycoproteins that are used extensively in **cellular communication**.
- It regulates **immunological**, **inflammatory and reparative** host response
 - It acts like hormone and neurotransmitter
 - Differ from former in being produced not by specialized glands but by widely distributed cells such as **lymphocytes**, **macrophage**, **platelets and fibroblast**
 - Its grouped in 5 class
 - - Interleukin (IL) : IL (1-13)
 - - Colony stimulating factors (CSF)
 - – Tumor Necrosis factor (TNF)
 - – Interferon (INF)
 - - Others: Transforming growth factor (TGF) & Leukemia inhibitory factor (LIF)



Interleukin (IL)

• IL-1

- Secreted by macrophages, monocytes and few other multinucleated giant cell (MGC)
- – Stimulated by antigen, toxins, injury and inflammatory processes
- – Inhibited by cyclosporin A, corticosteroid and prostaglandins
- Stimulates T-cell for production of IL-2 and other lymphokines
- B-cell proliferation and antibody synthesis
- Neutrophil chemotaxis and phagocytosis
- Endogenous pyrogens

• IL-2

- – Powerful modulator of immune response
- - Major activator of T and B cells
- – Stimulates cytotoxic T cells and NK cells
- - Treatment of certain kind of cancers



Interleukin (IL)

IL-3

- Growth factor for bone marrow stem cells
- Stimulates multilineage hematopoiesis
- Also known as multicolony stimulating factor multi-CSF

IL-4

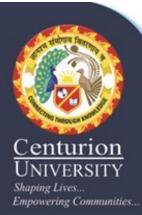
- Activates resting B-cells and differentiate it
- Growth factor for T-cells and mast cells
- – Enhances cytotoxic T cells
- – Role in atopic hypersensitivity augments Ig E synthesis
- IL-5
- – Proliferation of activated B cells
- – Induces maturation of eosinophils
- IL-6
- – Produced by stimulated T and B cells, macrophages and fibroblasts
- – Induces immunoglobulin synthesis activated B-cells



- Stimulates growth and differentiation of **pluripotent stem cells** in bone marrow
- Induces **cascades** of other **cytokines**

Empowering Communities.

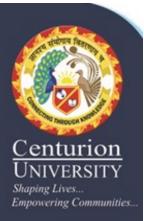
- Adjusting the rate of **production of blood cells** according to requirements
- Massive granulocyte response seen in pyogenic infection
- Treating **hematopoietic dysfunction** in infections and malignancies



Tumour Necrosis factor (TNF)

Two types TNF α and TNF β

- Principally formed by activated macrophages and monocytes
- Induces hemorrhagic necrosis
- Cachetin: Serum factor wasting syndrome (cachexia)
- Manifestation of endotoxic shock
- Immunomodulatory influence on other cytokines
- TNF β : produced principally by T-helper cells, effects similar to TNF α



Interferon (IFN)

• Antiviral agent, 3 classes

IFN α

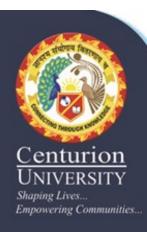
- – produced by leukocytes
- Treat various viral infections: certain cases of acute and chronic hepatitis C and chronic hepatitis B

IFN β

- produced by fibroblast
- virus-infected epithelial cells

IFNγ

- – Produced in response to mitogens, antigen or exposure to IL-2
- - Macrophage activation and Augmentation of neutrophil
- – Monocyte function and Anti-tumor activity
- – **Treatment** : lepromatous leprosy, leishmaniasis, toxoplasmosis and certain tumours such as melanoma and Kaposi's sarcoma.



Others

- Transforming growth factor (TGF)
- – Transform fibroblasts
- – Growth factor for fibroblasts
- – Promotes wound healing
- Down regulator of some immunological and hematological processes

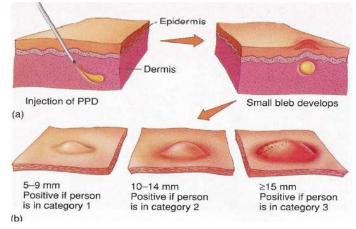


Detection of CMI

• Earlier method was skin test – **Delayed type hypersensitivity**

- Ex: Mantoux test (tuberculin test)
- Culture test
- Lymphocyte transformation test
- Migration inhibiting factor test.







THANK YOU

Happy to Answer if You have any Question....?