T cell Regulation and Tolerance FOCIS 2023

- 1. Central Tolerance
- 2. Receptor Editing in B cells
- 3. Clonal Deletion in the cortex and medulla
- 4. Natural and Peripheral Regulatory T cells
- 5. What Regulatory T cells Do
- 6. Inhibitory Receptors
- 7. Autoimmunity
- 8. "QUIETLY INTO THE NIGHT"



CENTRAL LYMPHOID ORGANS

PERIPHERY



GOD

Self Non-Self Recognition

Germline Organization of Human Ig Loci



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Checkpoints during B cell development



Distant segments are recombined during receptor assembly





Self-reactive B Edited B cell cell

Receptor editing occurs in the bone marrow

ONE STEP L-CHAIN REARRANGEMENT DRIVES RECEPTOR EDITING



THYMUS



FoXN1 required for medullary and cortical thymic epithelial development





CROSS-SECTIONAL VIEW

MORPHOLOGY OF THE THYMUS



DiGeorge syndrome 22q11.2 heterozygous deletion; Tbx1 gene a major gene'

Cleft palate, heart anomalies Typical facial dysmorphia

An overview of T cell development



Thymic T cell development



PROGRESSIVE MIGRATION AND POSITIVE SELECTION



NEGATIVE SELECTION OF SINGLE POSITIVE CELLS IN MEDULLA





Trends in Immunology

Opinion

Thymic mimetic cells: tolerogenic masqueraders

Daniel A. Michelson¹ and Diane Mathis ^{1,*}



Trends in Immunology

Mechanisms of peripheral T cell tolerance





T cell anergy- no Signal Two and role for CTLA-4



Inhibitory Receptors Dampen Immune Responses

They help mediate: 1.Peripheral Tolerance 2.Lymphocyte Exhaustion 3.Activation Induced Cell Death

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CTLA-4, PD-1,
TIM-3 etc
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Balancing lymphocyte activation and control

Activation Effector T cells Inhibition Regulatory T cells, Anergy, AICD, Exhausted T cells



Normal: reactions against pathogens Pathologic: inflammatory disease, e.g. caused by reactions against self or pathogens

No response to self Controlled response to pathogens

Properties of regulatory T cells

- Phenotype: CD4+, high IL-2 receptor (CD25), low IL-7 receptor, Foxp3 transcription factor; other markers
- Significance: Foxp3 mutations --> autoimmune disease (IPEX); many autoimmune diseases may be associated with defects in or resistance to Tregs
- Mechanisms of action: multiple
 - secretion of immune-suppressive cytokines (TGF β , IL-10; IL-35?)
 - inhibition of APC function (role of CTLA-4?)



Autoimmune diseases: failure of control



Pathogenesis of autoimmunity



Pathogenesis of organ-specific autoimmunity



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Model for the Pathogenesis of SLE



QUIETLY INTO THE NIGHT.....