

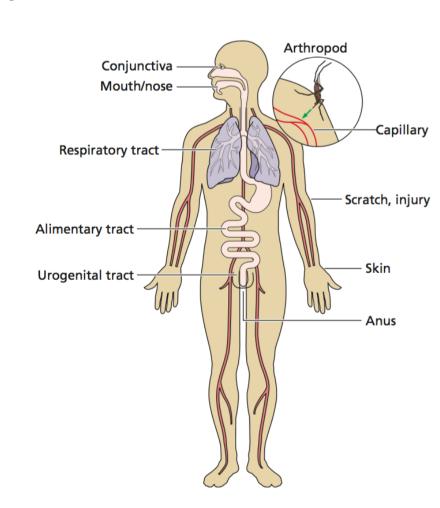
#### **Adaptive Immunity**

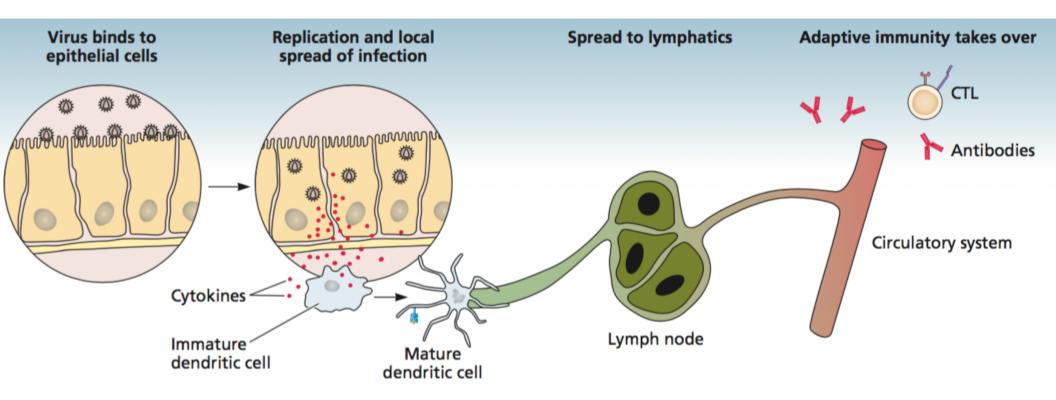
Session 14 Virology Live Fall 2021

Life is simple, but we insist on making it complicated –Confucius

#### **Host defenses**

- Intrinsic
  - Always present in the uninfected cell
  - Apoptosis, autophagy, RNA silencing, antiviral proteins
- Innate immune system: Induced by infection
- Adaptive immune system: Tailored to pathogen; memory



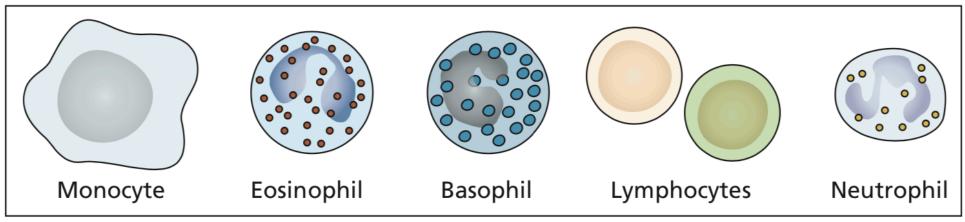


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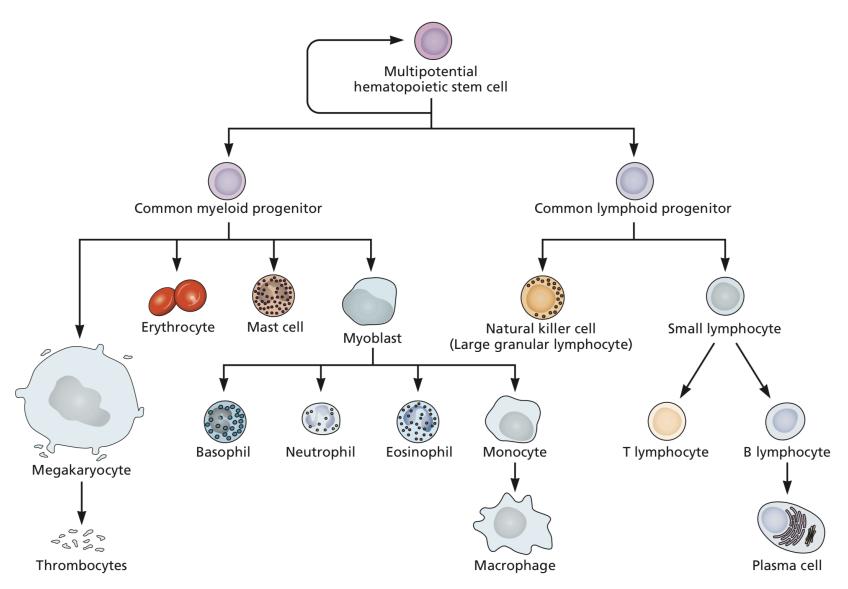
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#### **Leukocytes and Lymphocytes**

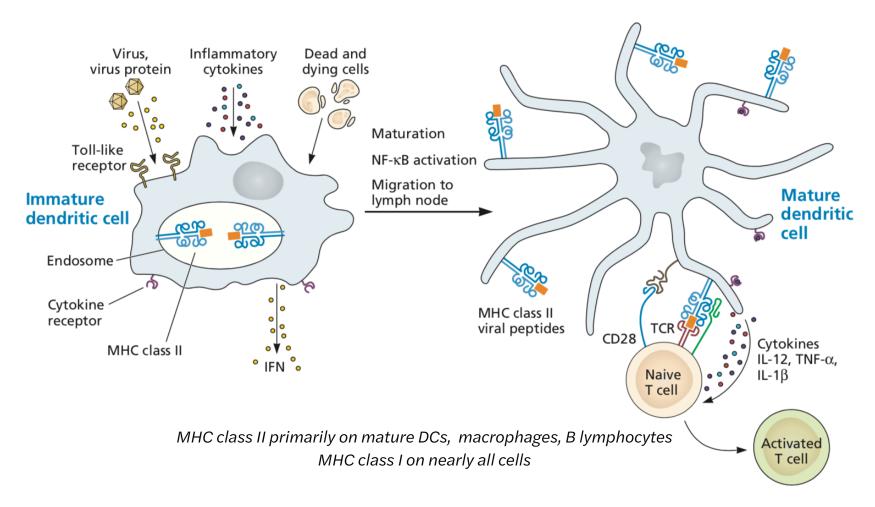
#### Leukocytes



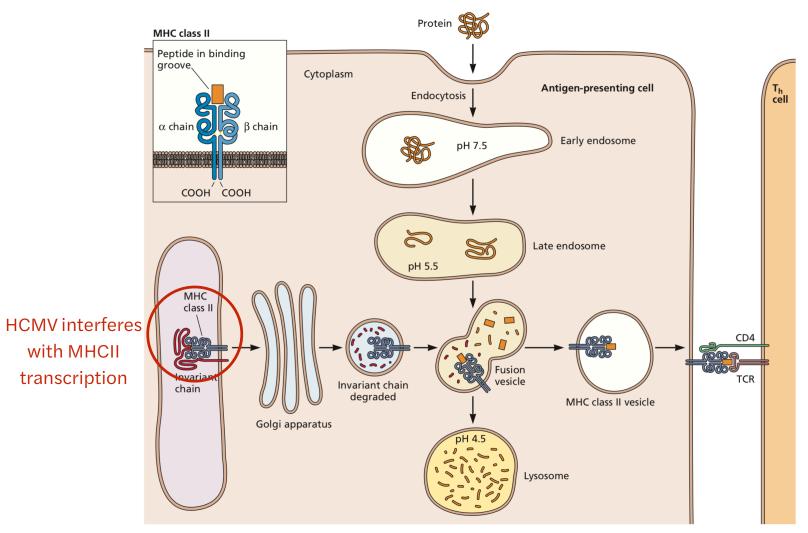
- Leukocyte: general term for white blood cell (lymphocytes, neutrophils, eosinophils, macrophages)
- Lymphocyte: Subset of leukocytes (T, B, NK cells; have variable antigen-detecting cell surface receptors



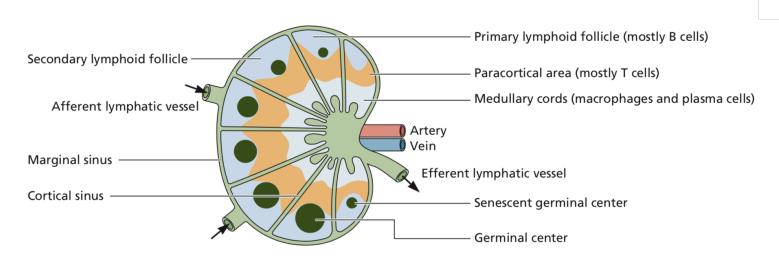
#### Innate instruction of adaptive immunity



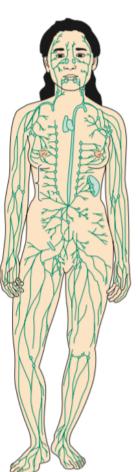
#### **Exogenous antigen presentation**



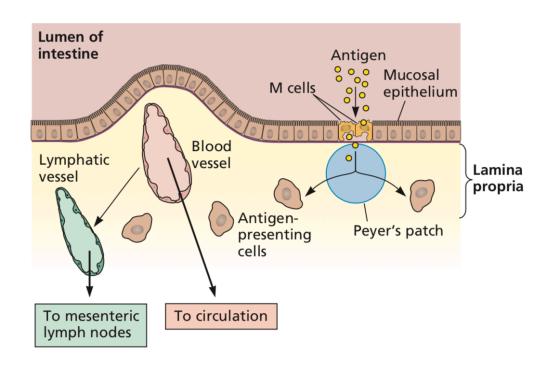
Lymphocyte activation triggers massive cell proliferation

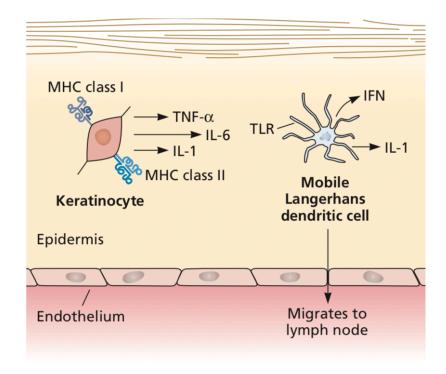


- 1/10,000 1/100,000 B or T cells recognize antigen
- 1-2 weeks: 1,000 50,000 fold amplification
- Lymphadenopathy



#### Mucosal and cutaneous immune system





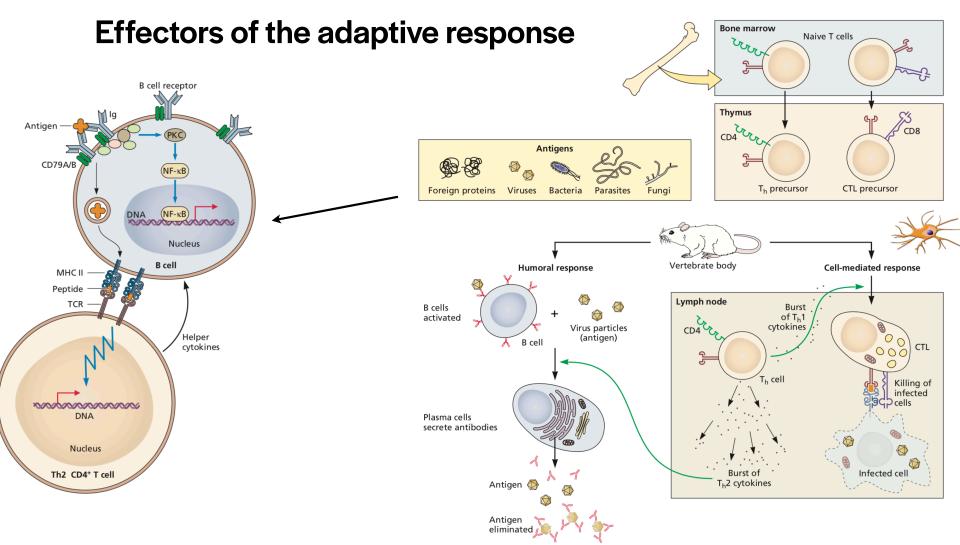
**GALT = gut-associated lymphoid tissue MALT = mucosa-associated lymphoid tissue** 

#### Go to:

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#### What is a property of innate instruction of adaptive immunity?

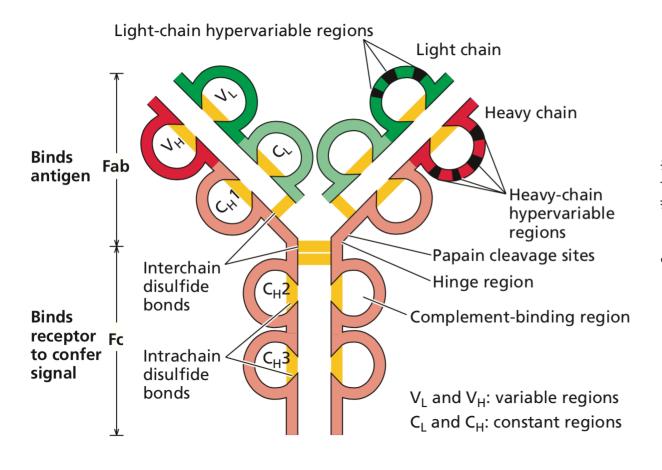
- A. Presentation of viral peptides on MHC II to CD4 T cells
- B. Endocytosis of viral proteins
- C. Activation of DCs by cytokines
- D. Sensing by TLRs
- E. All of the above

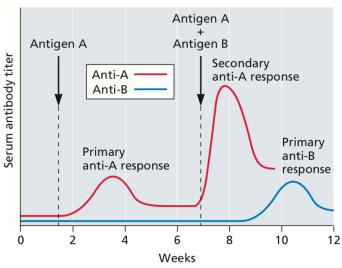


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#### **Antibodies**





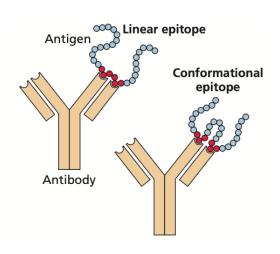
Contraction not waning!

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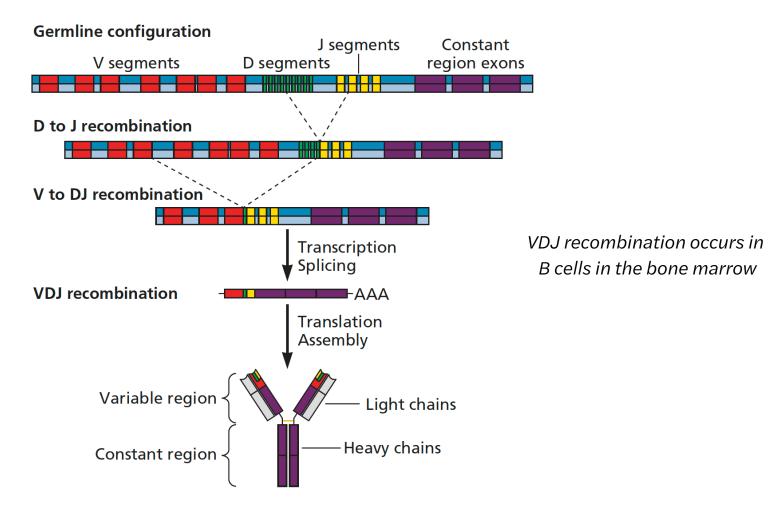
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#### Antibodies, antigens, and epitopes

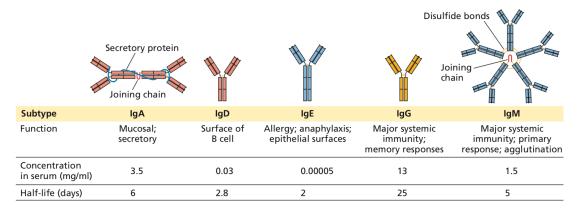
- Antigen: molecule that induces an immune response (protein, DNA, RNA, lipid, polysaccharide)
- Epitope: part of antigen bound by antibody or T-cell receptor
- Monoclonal antibody: against a single epitope
- Serum contains a mixture of monoclonal antibodies: polyclonal

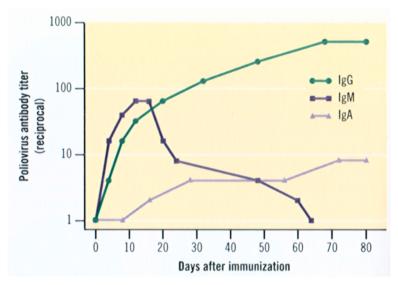


#### Generation of B cell receptor diversity



#### **Antibody response**

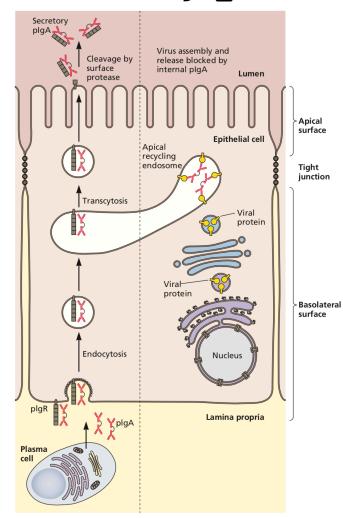




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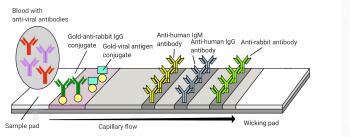
## Secretory IgA

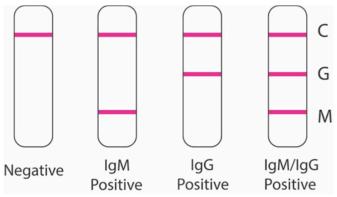


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### A rapid assay for serum antibodies to SARS-CoV-2





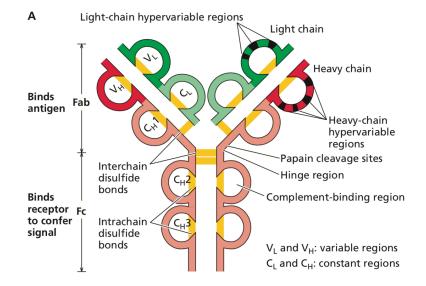




https://youtu.be/HvXCISbrK9Q

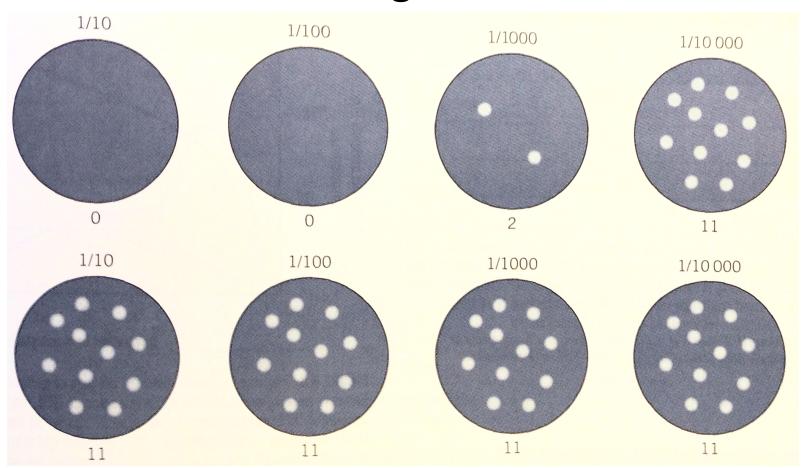
#### **Neutralizing antibodies**

- Essential defense against many virus infections
- Neutralize virus particles in the blood, prevent virus spread
- IgA at mucosal surfaces (secretory antibody) blocks entry
- Some neutralizing antibodies are important for recovery from infection
- Not all anti-viral antibodies neutralize infection!

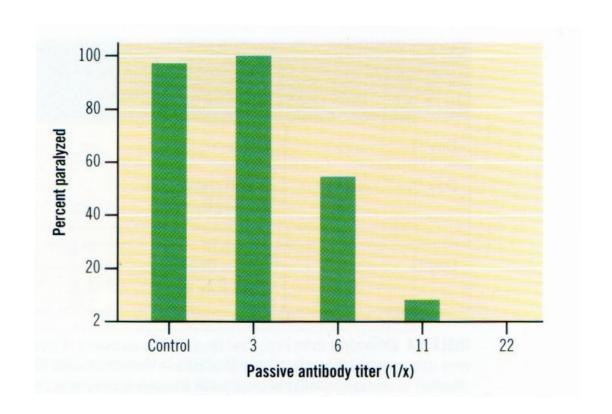


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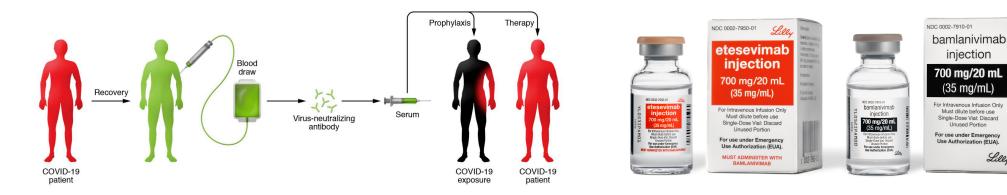
## **Neutralizing antibodies**



## Passive antibody protects against poliomyelitis



## Convalescent sera and monoclonal antibodies for COVID-19 treatment or prevention

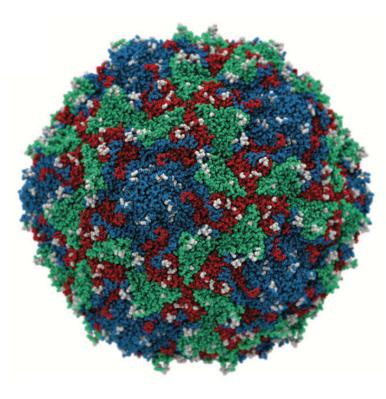


Serum is the liquid that remains after the blood has clotted *Plasma* is the liquid that remains when clotting is prevented with the addition of an anticoagulant. injection

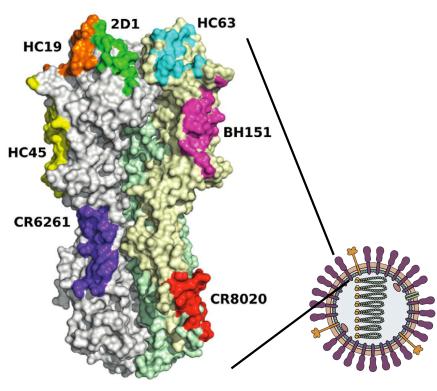
(35 mg/mL)

## **Neutralization antigenic sites**

Some antibodies bind but do not neutralize!

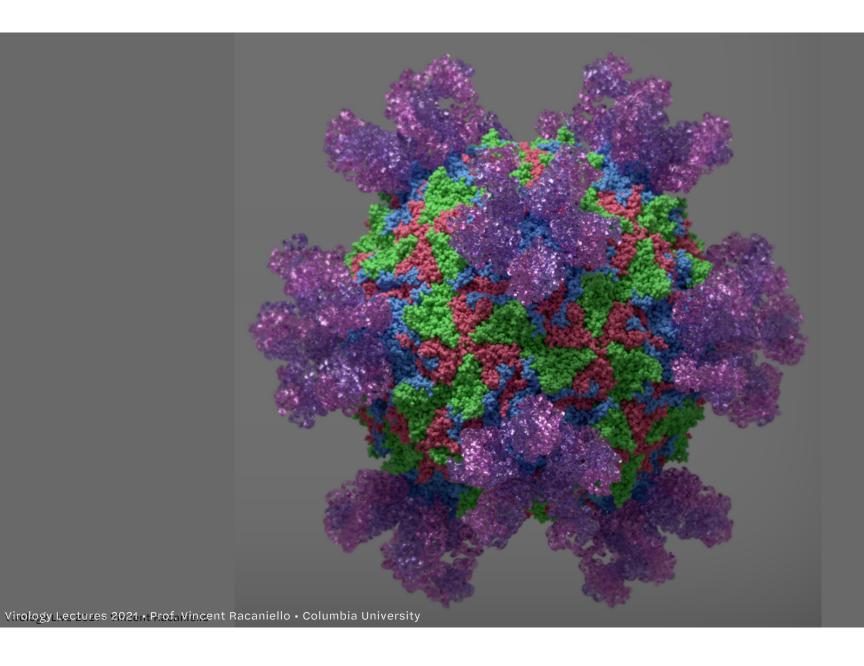


**Poliovirus** 



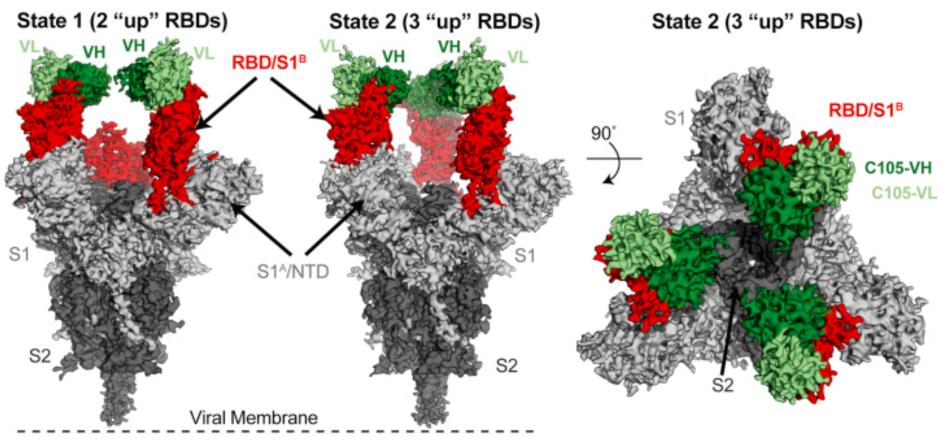
Influenza virus HA

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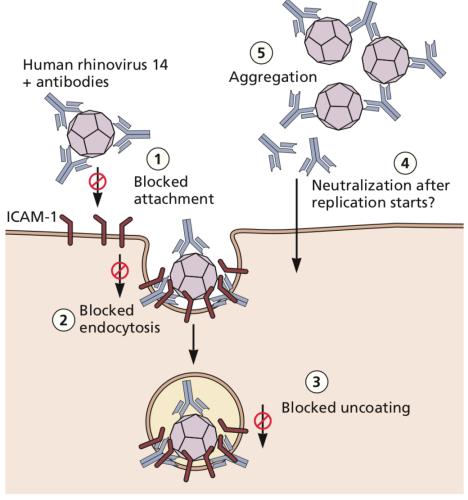




#### mAb Fab fragment bound to SARS-CoV-2 spike

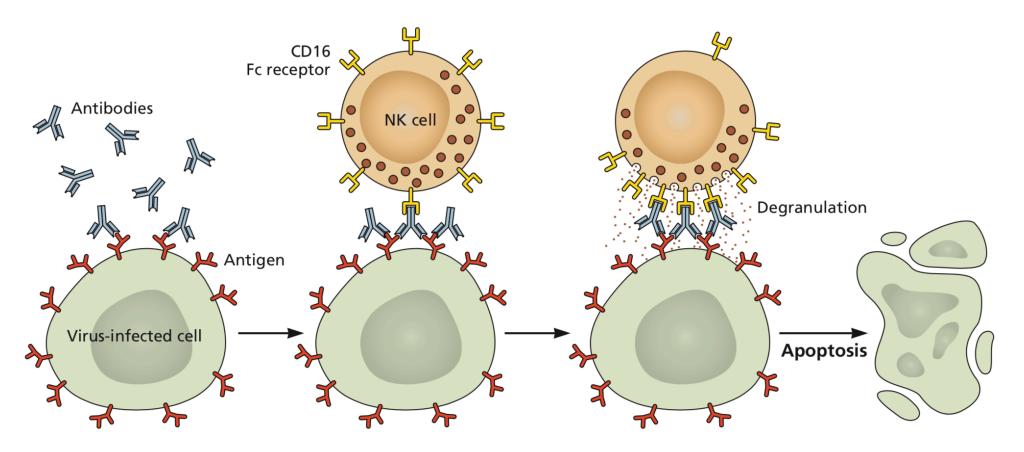


### **Neutralizing antibodies**



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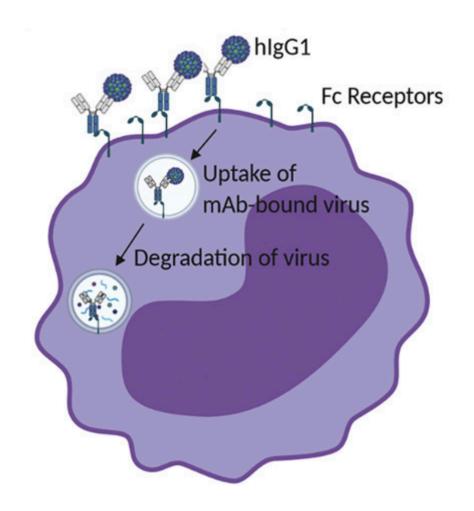
#### **Antibody-dependent cellular cytotoxicity**



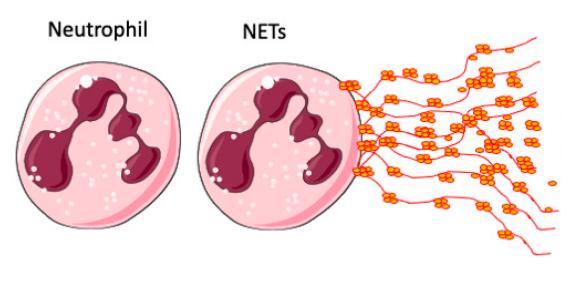
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## Disease protection by non-neutralizing antibodies

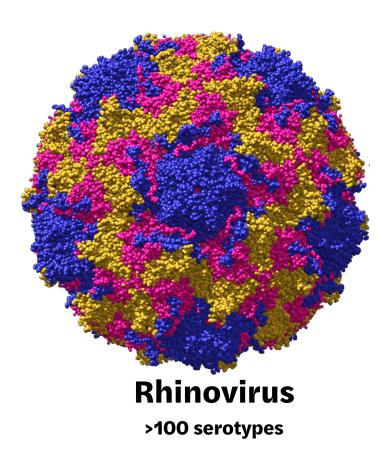


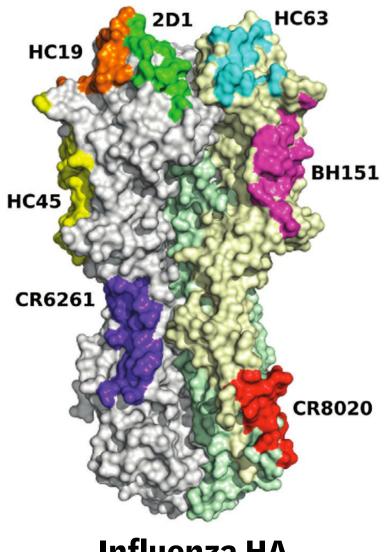
### **IgA-stimulated NETosis**



- Stimulated by IgA-virus complexes
- Non-neutralizing Ab
- Involves Fc receptors on neutrophils

### **Evasion of antibody**





Influenza HA

Antigenic variation

#### Go to:

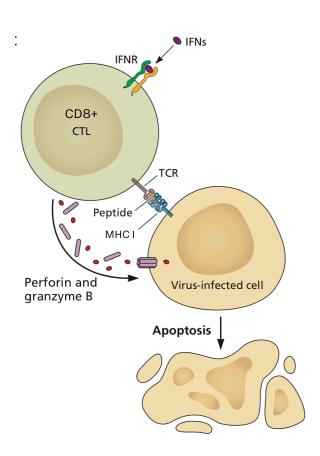
## b.socrative.com/login/student room number: virus

#### Which statement about anti-viral antibodies is incorrect:

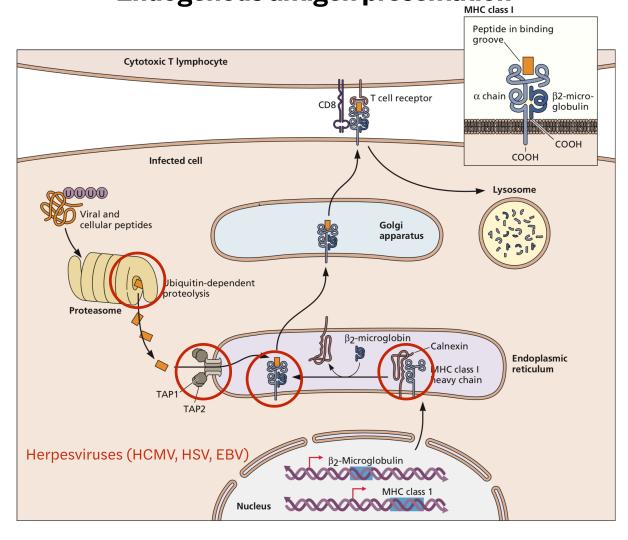
- A. They are important for protection against viral infections
- B. They only neutralize virus infectivity
- C. They may block virus attachment to cells
- D. They can be found at mucosal surfaces
- E. IgM is the first to appear, then IgG

#### **Cell mediated immunity**

- Essential for clearing most viral infections
- CTL and target cells form an immunological synapse
- Lysis of target cell
- Countermeasures



#### **Endogenous antigen presentation**



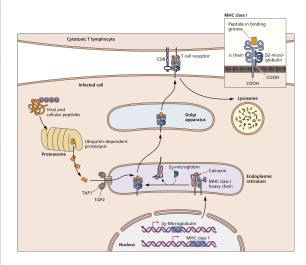


TAP = transporter associated with antigen processing

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## **Countering MHC I**

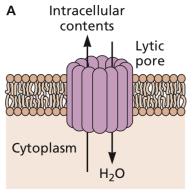
MHC I pathway	Viral protein
MHC I synthesis	Lentivirus Vpu
TAP synthesis TAP function	EBV vIL-10, HCMV UL111A HCMV US6, HSV ICP47
MHC I transport Retain in ER Dislocate to cytoplasm Increase MHC I endocytosis	HCMV US3, Ad E3-19K HCMV US11, US2 HIV nef, HHV-7 K3, K4



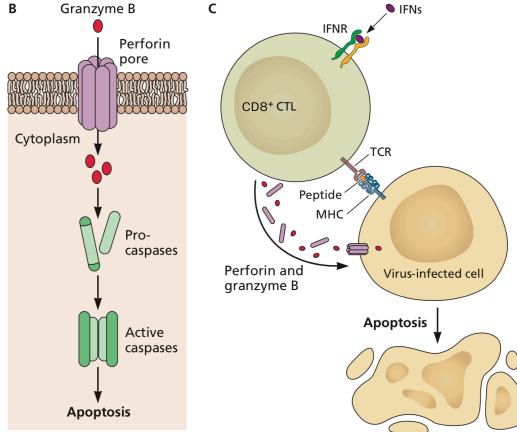
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#### Cytotoxic T lymphocyte (CTL) lysis



- Lysis of target cell by two mechanisms
  - Release of cytoplasmic content
  - Apoptosis



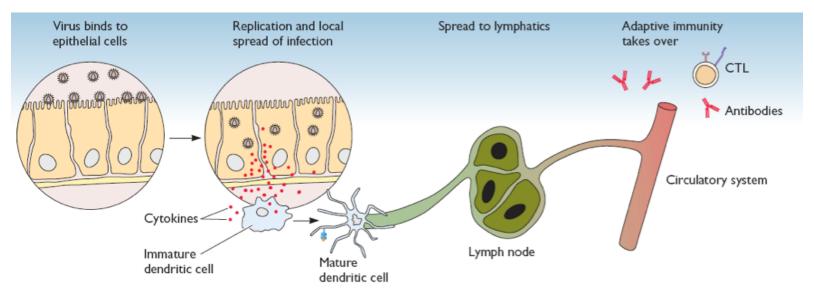
# Antibody vs cellular immunity in protecting against monkeypox virus disease

Day of vaccination	Immune manipulation	Neutralizing Ab day 22	Monkeypox infection	Fatality
0	None	800-6400	Day 28	0/4
0	B cell depletion	42-59	Day 28	3/4
0	CD8 cell depletion	268-2963	Day 28	0/4

# For some infections, CTL response is more important than the antibody response

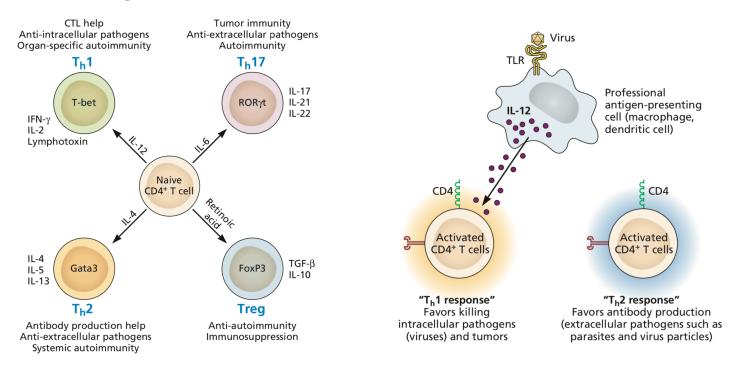
#### How is the correct response made?

Begins in lymph tissues where sentinels tell naive B and T cells nature of invader



# This decision is made in part by special T helper cells (Th cells)

- Th cells make contact in the lymph nodes with sentinel DCs and macrophages
- Information exchanged (peptides, cytokines) causes differentiation to Th1 or Th2



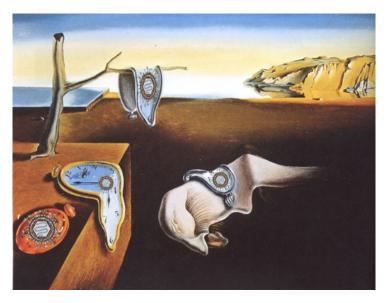
#### Go to:

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## For some infections, CTLs are more important for protection than antibody. How is the CTL-antibody balance determined?

- A. By B lymphocytes
- B. By intrinsic defenses
- C. By autophagy of infected cells
- D. By the mix of peptides and cytokines presented by DCs
- E. It depends on whether the capsid is icosahedral or helical

#### Adaptive responses also provide *memory*

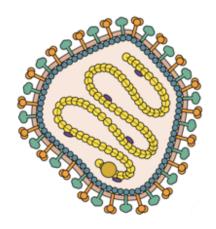


- If the host is subsequently infected by the same virus, the response will be rapid and specific
  - Innate responses don't have memory
- Memory: the basis for vaccination

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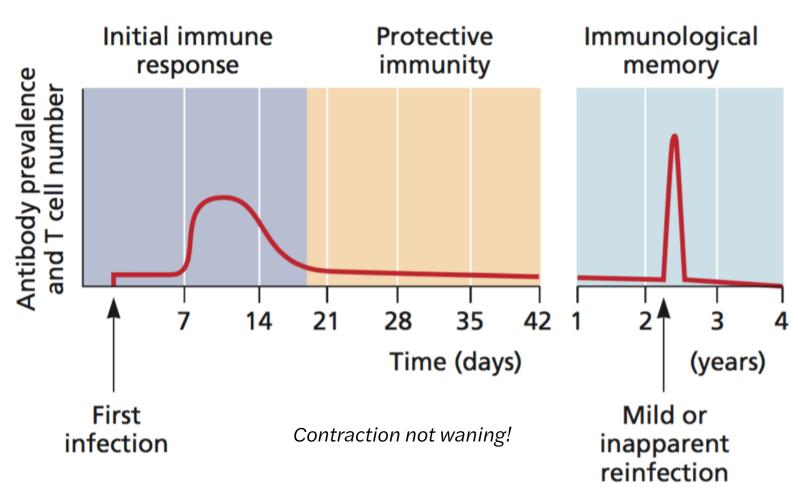
#### Infection provides immune memory





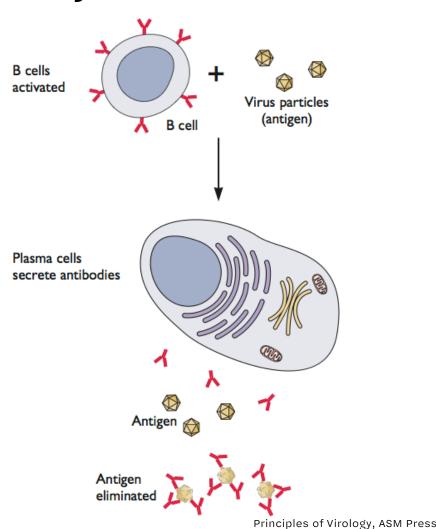
- 1781: outbreak of measles on Faroe Islands
- Next 65 years, islands free of measles
- 1846: another outbreak of measles; none of those who survived the 1781 epidemic were infected
- Immune memory may last a long time, maintained without re-exposure to virus

#### **Immunological memory**



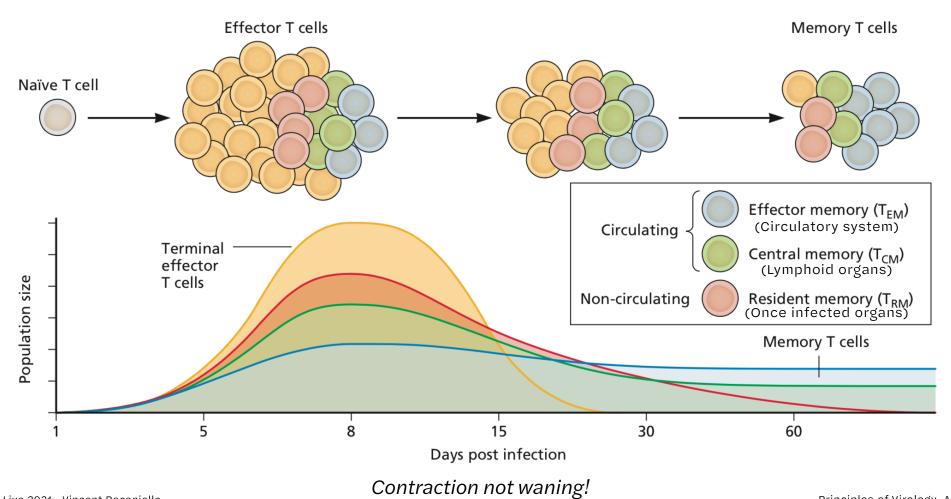
### **Immunological memory**

- Memory B cells
  - In spleen, lymph nodes
  - Do not produce antibodies unless stimulated by Ag
- Long lived plasma cells
  - Bone marrow
- Memory T cells



Disease	Persistence of antibody
Systemic infections	
Chikungunya	30 yr
Rift Valley fever	12 yr
Dengue	32 yr
Yellow fever	75 yr
Measles	65 yr
Mumps	12 yr
Poliomyelitis	40 yr
Hepatitis A	25 yr
Smallpox	40 yr
Vaccinia	75 yr
Rubella	14 yr
Mucosal Infections	
Coronavirus disease	12 mo
Influenza	30 mo
RSV disease	3 mo
Rotavirus gastroenteritis	12 mo

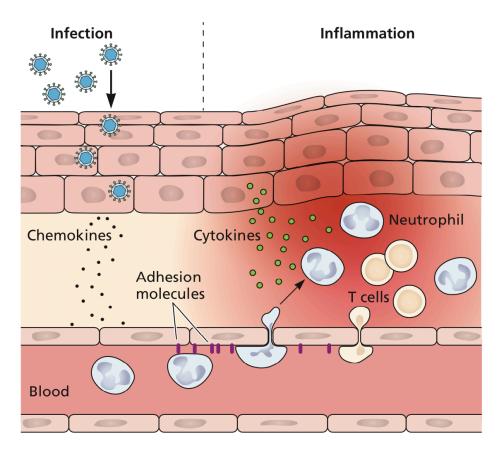
#### **Generation of memory T cell diversity**



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# Inflammation provides integration and synergy within the immune system



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Next time: Mechanisms of pathogenesis