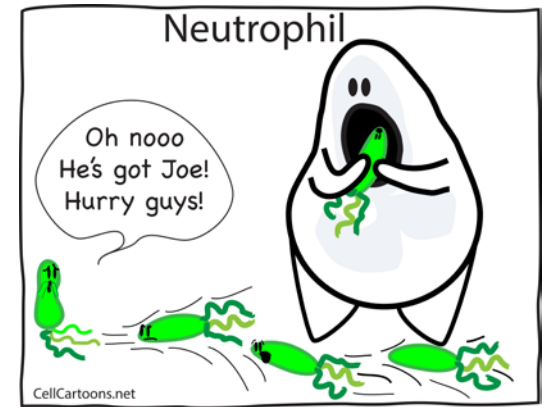




Understanding basic immunology

Dr Mary Nowlan

Immunology



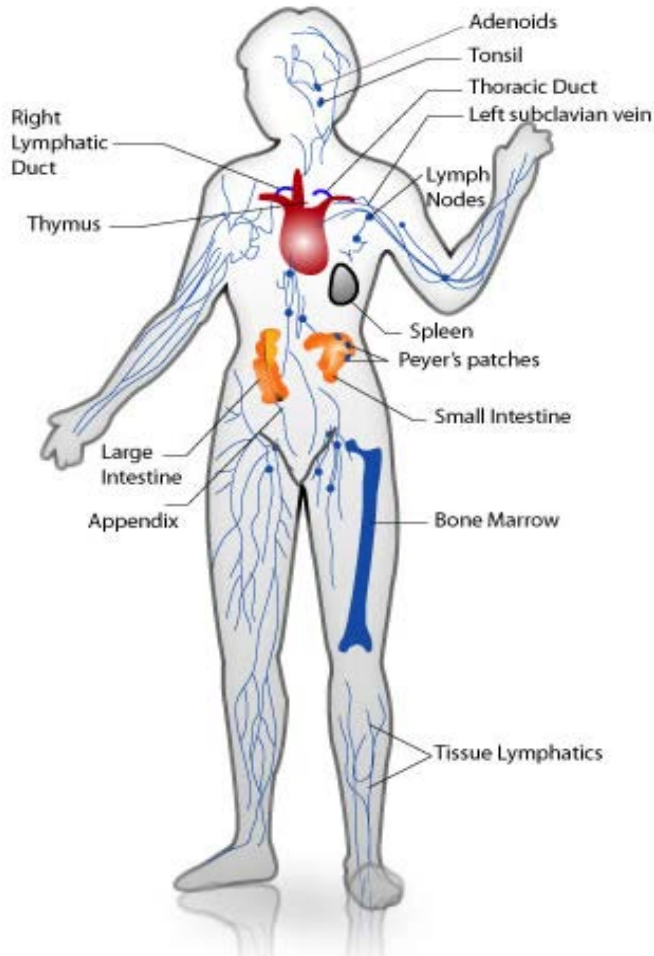
- Immunology
 - the study of how the body fights disease and infection
- Immunity
 - State of being able to resist a particular infection or toxin

Overview



- Function of defences
- Immune response to infection and vaccines
- Generating specific immunity
- Enhancing the immune defences

Functions of the immune system



Protection

- Identify and destroy pathogens
- Cancer

Housekeeping

- Removal of debris and dead cells
- Surveillance

Communication

- Chemical messages
- Antigen presentation
- Memory

Hierarchy of defences

Barriers and chemicals

- Effective but crude – Prevention
- First line of defence

Non specific

- Actively identifies and removes unwanted invaders

Specific

- Highly targeted
- Powerful but slow to develop
- Memory

Self from non-self

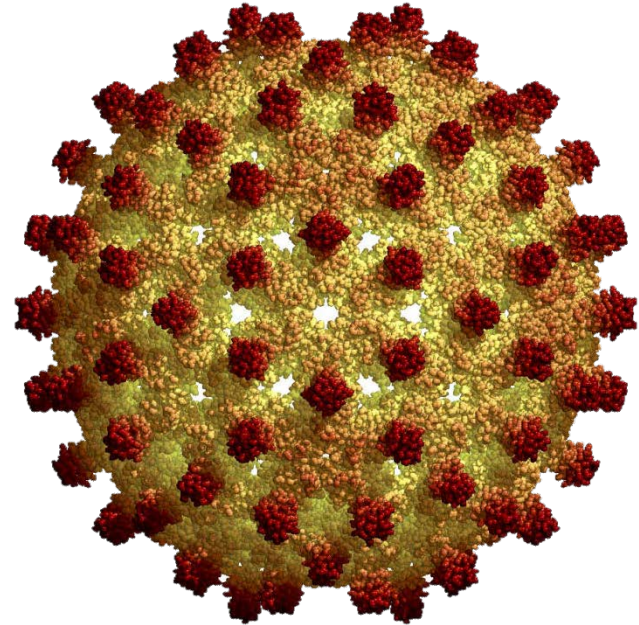
First step to immunity

- Recognise molecular shapes
- Our own cells have a unique 'self' tags on them
- Learn to ignore 'self' in early development



Antigens - molecular shapes

- Drive the immune response
- Include proteins, sugars or nucleic acids
- Vaccines often contain purified antigen





Innate immunity - non-specific

Recognition and response to non-self

Inflammation

Swelling, redness, heat

Damage → danger signal

Inflammatory mediators

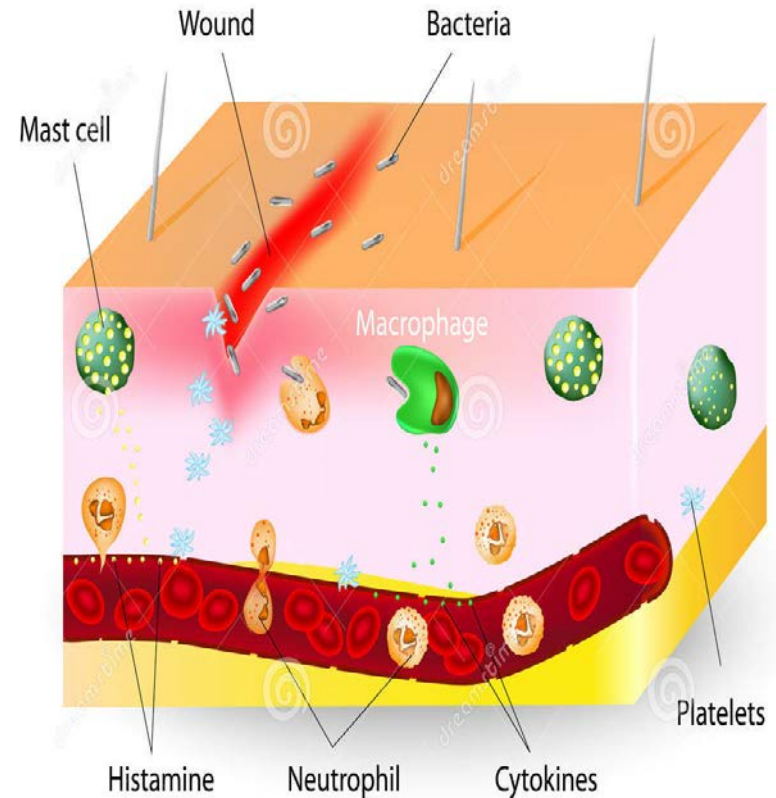
Increased blood flow

Increased capillary permeability

Attracts cells

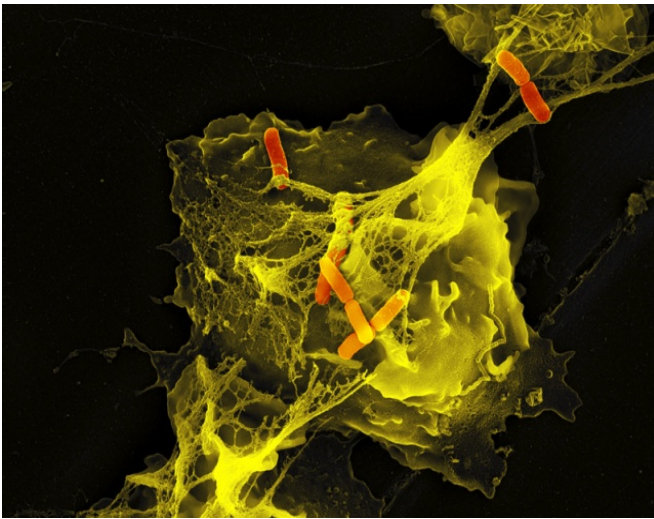
Alerts immune system

Clotting



Fight back - second line of defence

Innate response



- Identifies foreign molecular shapes
- Recognises class of microbe
- Direct killing
- Communication with chemical messengers
 - Cytokines, chemokines
- Antibodies and cytokines enhance this response

Non-specific, innate immunity



Neutrophil engulfing thrush fungus

These cells respond to danger



Macrophage



Dendritic cell



Natural killer cells attacking a cancer cell

Pictures Joel Dubin 2010

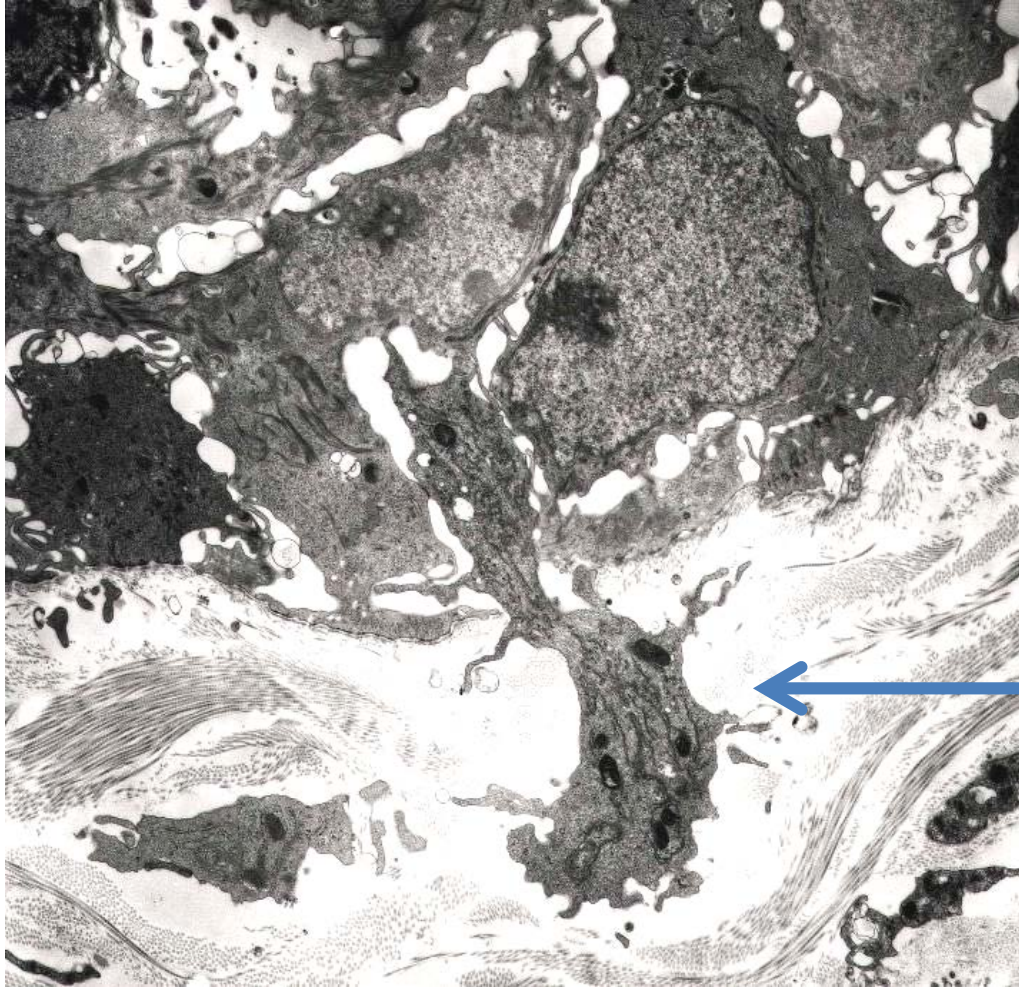


Adaptive immunity - specific

(includes humoral immunity, cellular immunity)

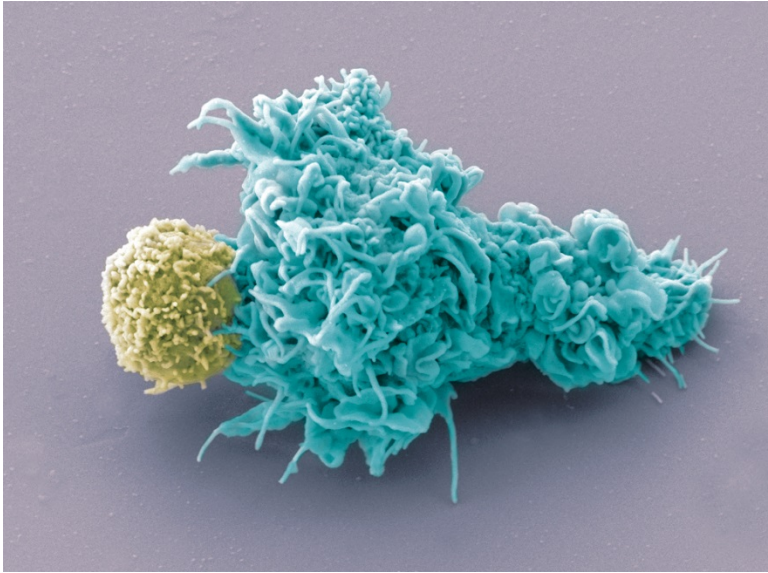
Antigen specific T cells and B cells

Antigen presentation



Dendritic cell entering the lymph to travel to local lymph node

Specific



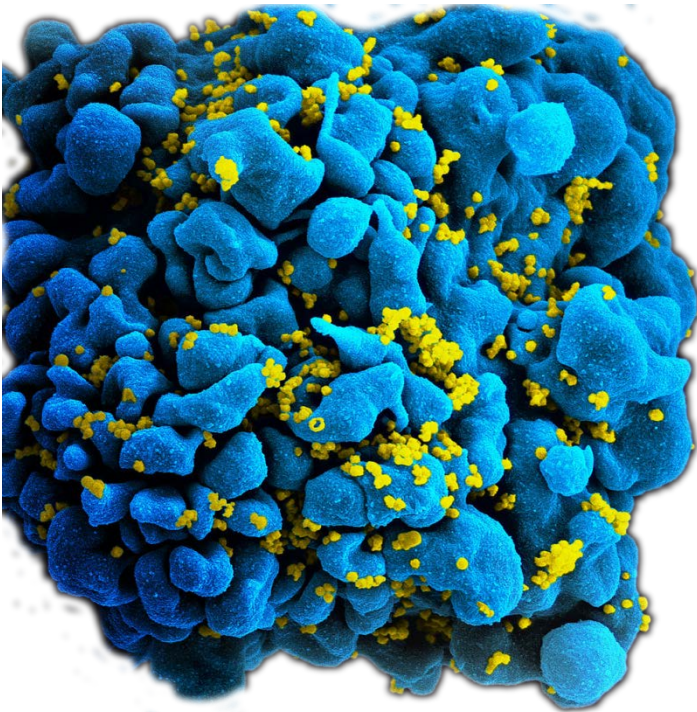
Non-specific Dendritic cell (blue)
interacting with Specific T-cell (gold)

Antigen-specific T and B cells are activated in lymph nodes

T cells require three signals from antigen-presenting cells:

1. Antigen recognition
2. Co-stimulation
3. Cytokine exposure

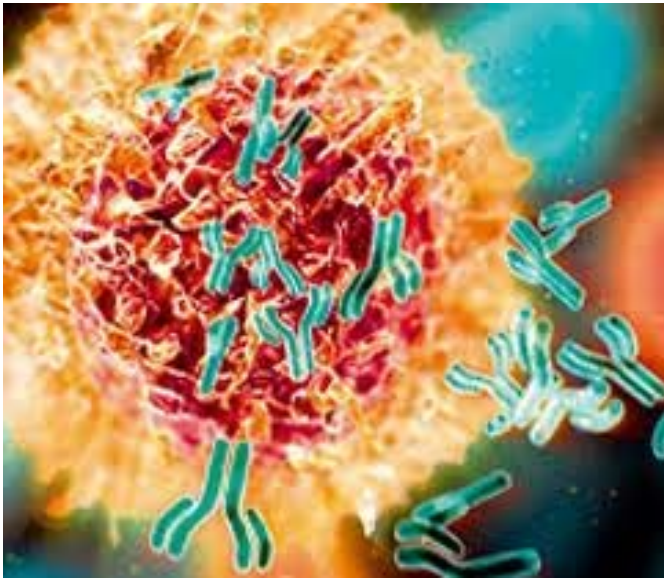
T cells



Cells infected with virus

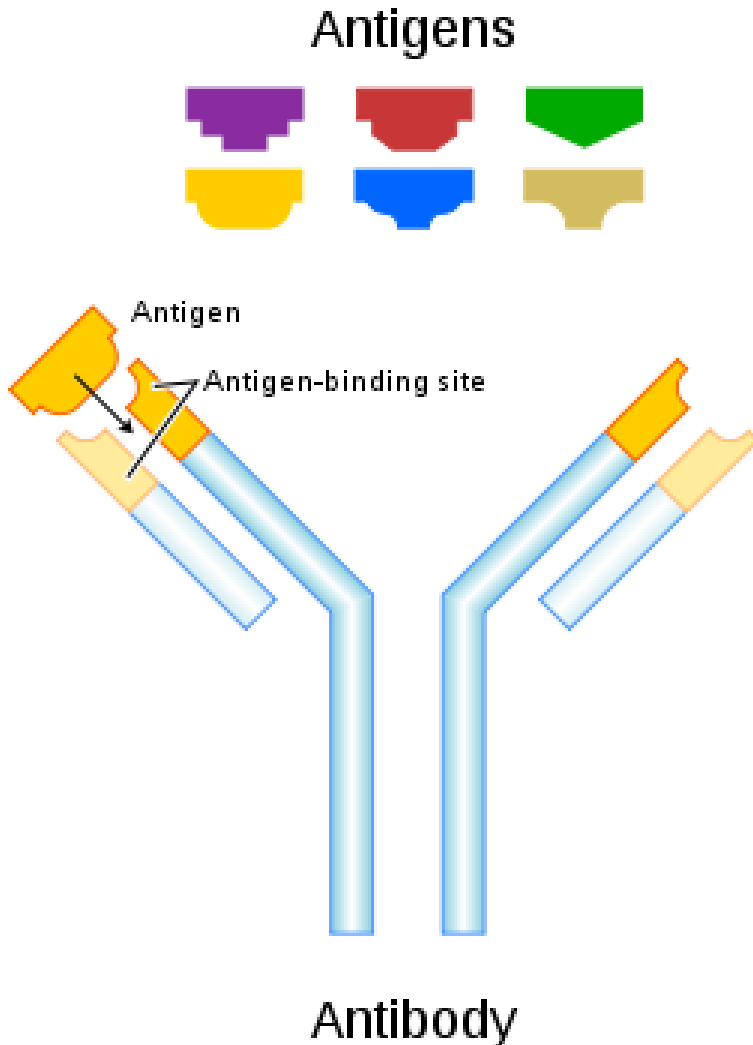
- Cytotoxic T cells
 - Kill infected cells, cancer cells
- Helper T cells
 - drive specific B-cell responses and antibody class
- Memory T-cells remain to fight the same infection another day

Specific – B cells and antibody



- Plasma cells
 - activated B-cells
 - secrete antigen-specific antibodies
- T cell dependent or independent responses
- Memory B-cells and antibody

Antibody – humoral immunity



- Immunoglobulins
- Secreted by plasma cells
- Bind to specific antigen
 - Neutralise
 - Block attachment
 - Label
 - Activate complement
 - Trigger cytokine release
 - Present antigen to T cells

Key classes of antibody



IgM – low affinity, in primary immune responses; complement activation; largest Ab, does not cross placenta



IgG – high affinity, most important class of Ab in secondary immune responses, crosses the placenta

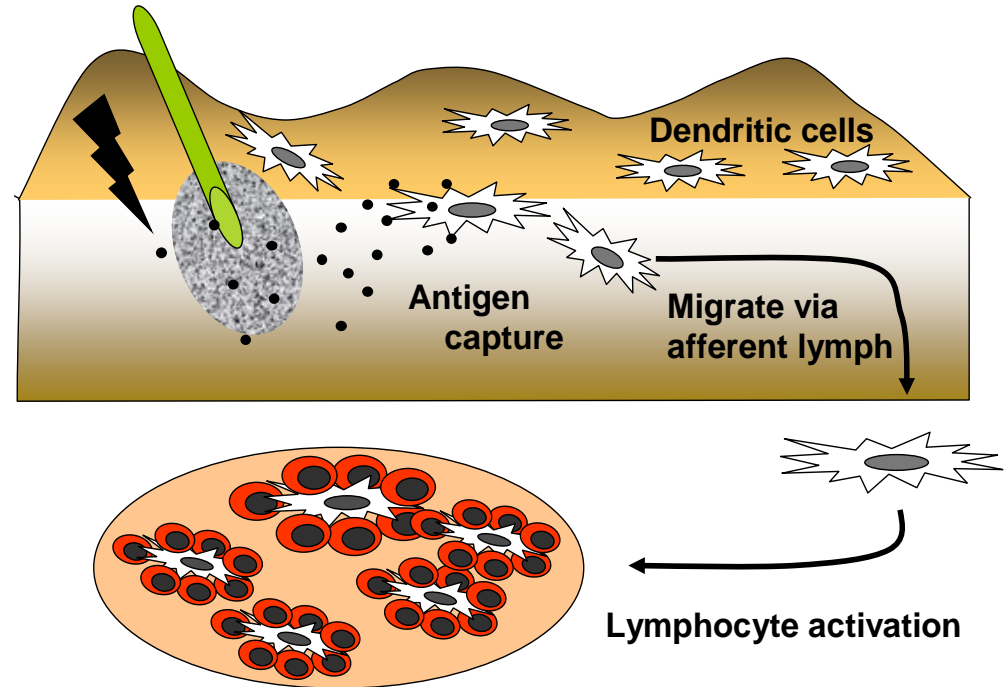
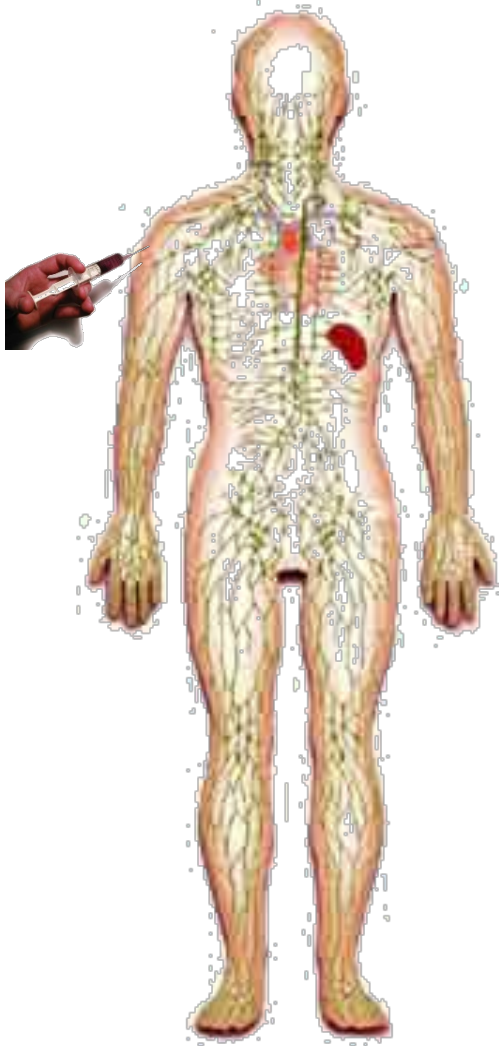


IgA - found primarily in secretions such as breast milk, tears, saliva and mucosal membranes



IgE - Evolved to provide protection for parasitic infections; associated with allergic diseases e.g. asthma & hay fever; histamine release

What happens to the injected vaccine?



- Antigen carried to lymph node where specific response takes place
- Other ingredients excreted via blood, kidneys, urine.

Development of specific immunity

Primary immune response

- Activation of T and B cells
- Antibody produced by short-lived plasma cells
- Low affinity antibody appears in serum - IgM
- Takes 2 weeks, peaks around 30 days

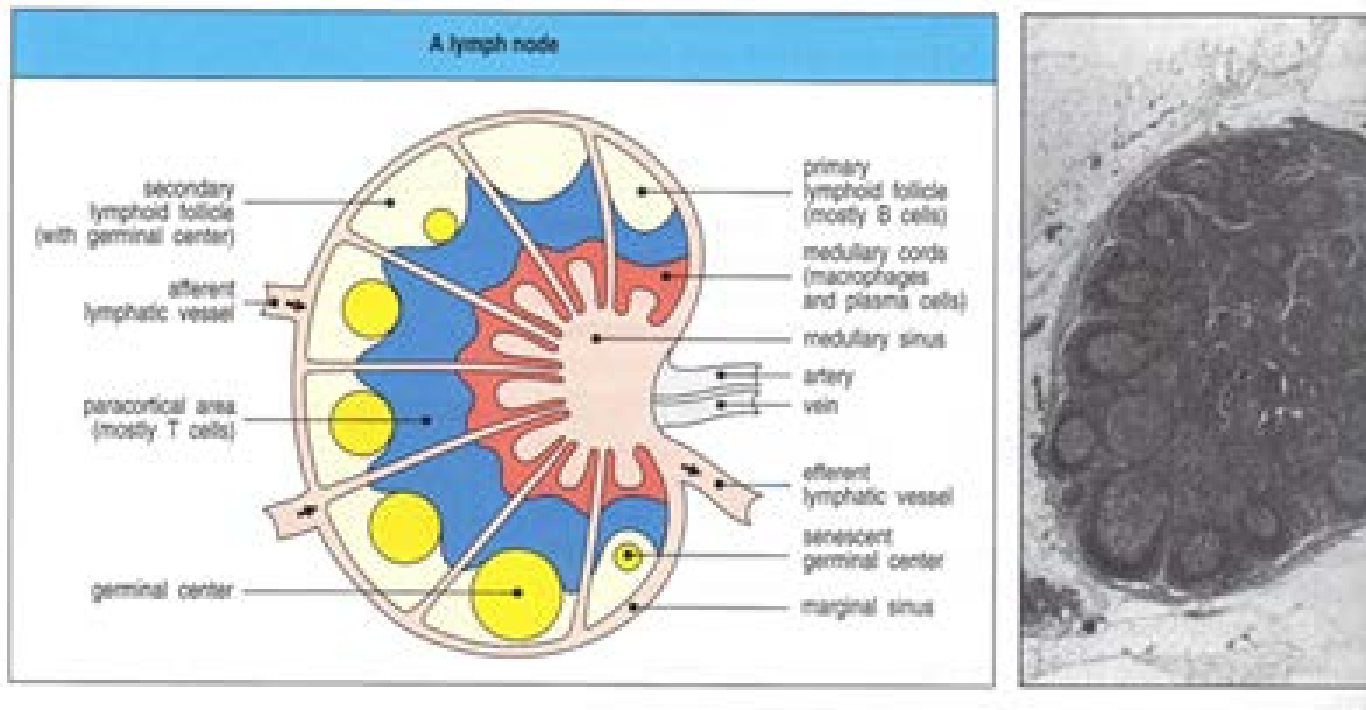
Immune memory

- Immune memory is slow - at least four months
- T cell dependent
- High affinity IgG
- Only immune memory can be 'boosted'

Secondary response

- rapid (4 days)

Lymph node

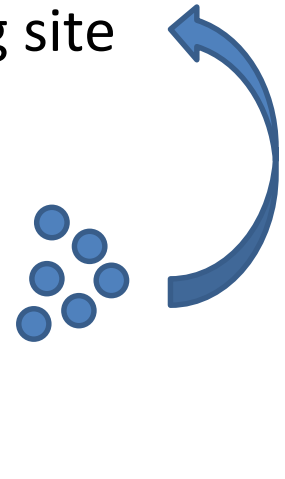


- **Cortex** – containing dividing B cells and T cells
- **Medulla** – macrophages and antibody producing plasma cells
- **Sinuses** – net of reticular fibres spanning lymphatic capillaries

Specific immunity – generation of high affinity antibodies

Affinity maturation – in germinal centres

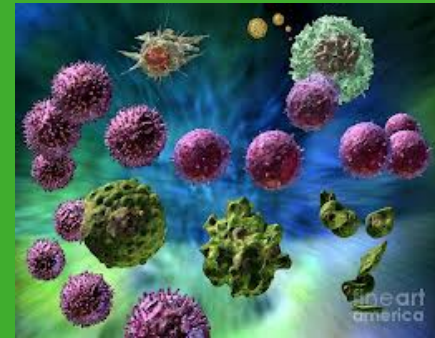
1. Activated B cells proliferate
 2. Mutations in DNA coding for antigen binding site
 3. Presented antigen by DC and T cells
 4. Positive – high affinity => clones proliferate
 5. Negative – low affinity => death †
- Differentiation and class switching - IgM to IgG – long lived memory



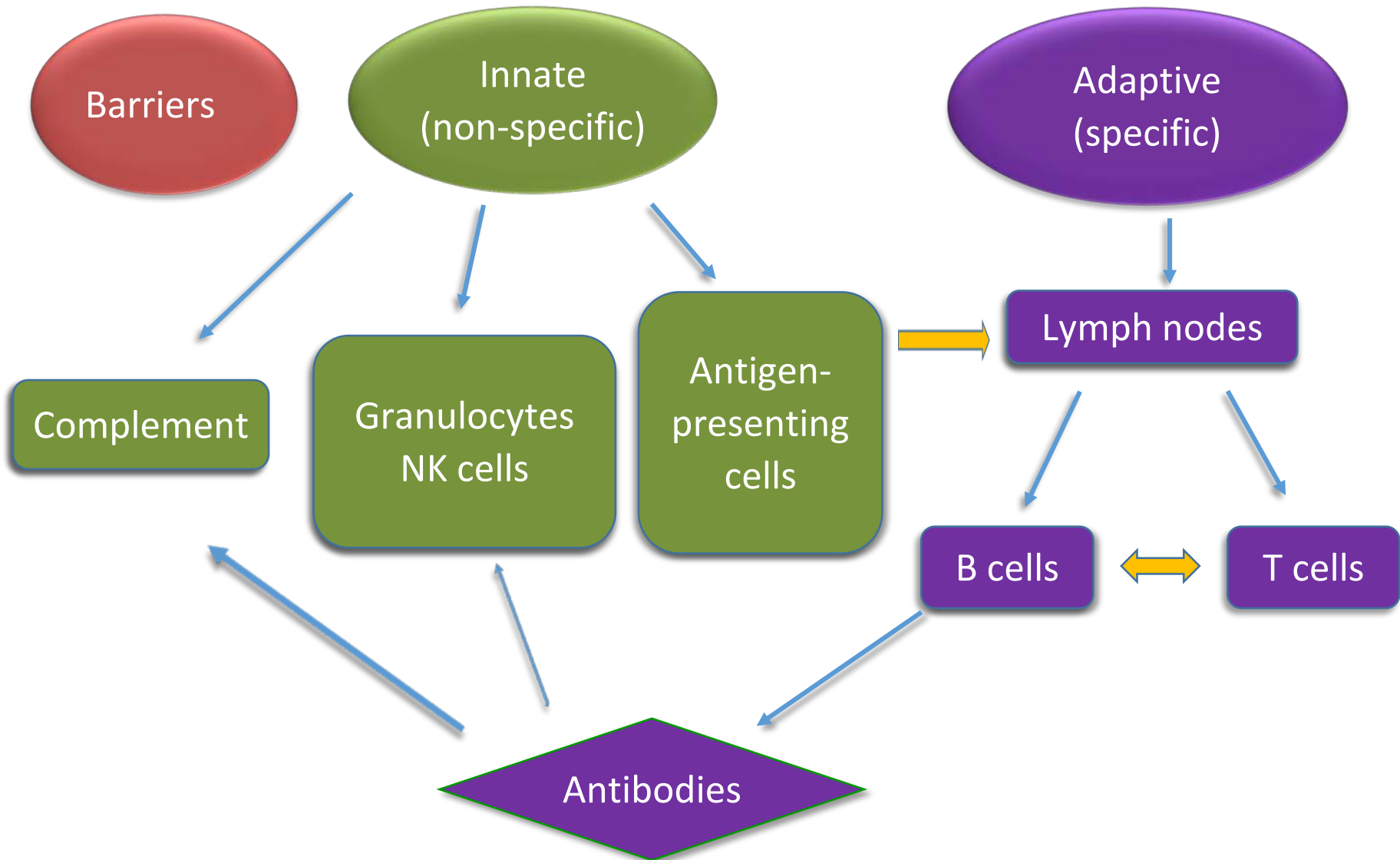


Summary

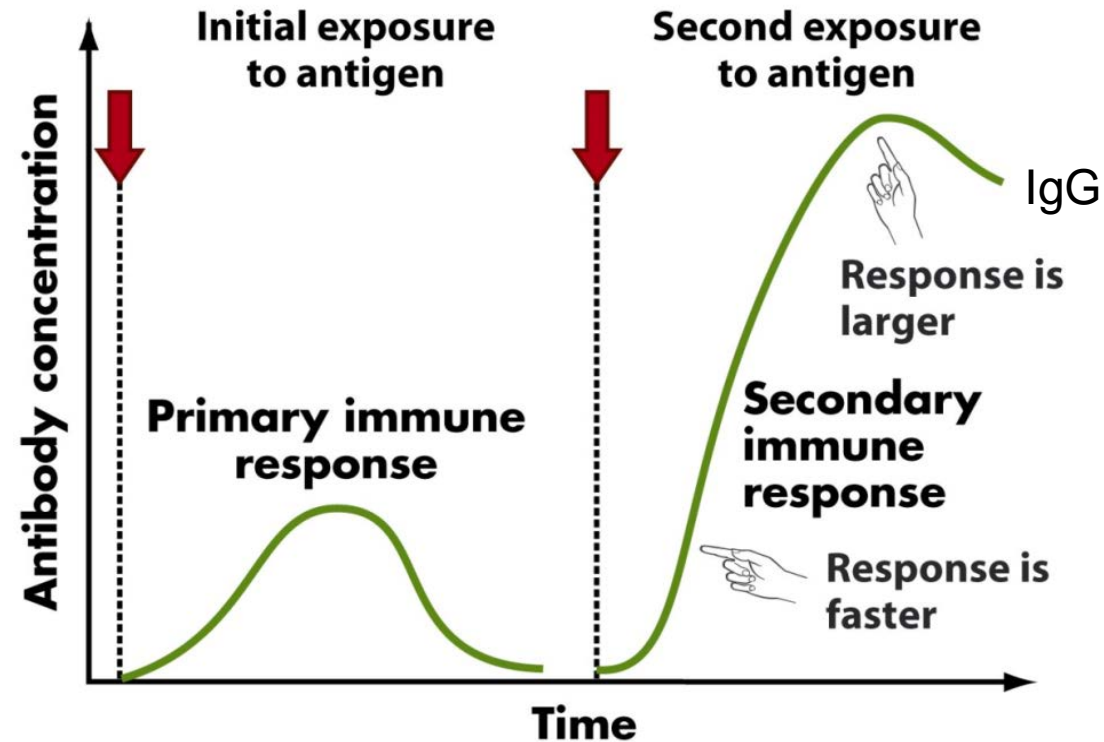
From microbial recognition to adaptive response and memory



Innate works with adaptive immunity



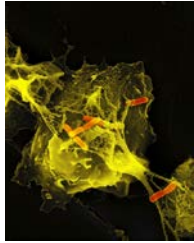
Immune memory



- Specific, adaptive immunity
- Long lived protection from reinfection

Figure 49-16 Biological Science, 2/e
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Communication enhances immunity



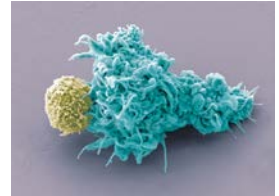
Specific antibodies label targets

IL-5
IL-4
IL-2
IFN- γ

- Instruct B cells
- Enhance innate response
- New cell production

Innate

Antigen presented by DC



IL-1
IL-6
IL-12

Adaptive

Antigen-specific T and B cells activated

