

Cytokines

Luděk Šefc

Cytokines

- Protein regulators of cellular communication

Cytokines x hormones

	Hormones	Cytokines
Production sites	few	many
Cell targets	few	many
Presence in blood	yes	rarely
Biological role	homeostasis	infection tissue reparation
Pleiotropic effects	low	high

Cytokines are not produced by specialized cells which are organized in specialized glands, i. e. there is not a single organ source for these mediators .

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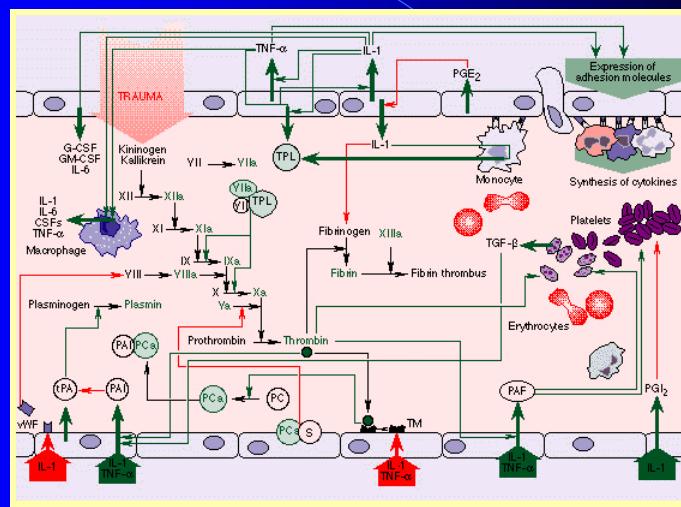
Cytokine properties

- mostly glycoproteins, they bind to a specific membrane receptor on target cells
- effective in extremely low concentrations (10^{-9} - 10^{-12} M)
- many different producing cells
- almost all cytokines are pleiotropic effectors showing multiple biological activities.
- multiple cytokines often have overlapping activities
- high conservation during phylogenesis – low species specificity

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Cytokine regulatory network



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Cytokine receptors

- transmembrane proteins
- mostly composed of different subunits
- similar receptors – members of receptor family

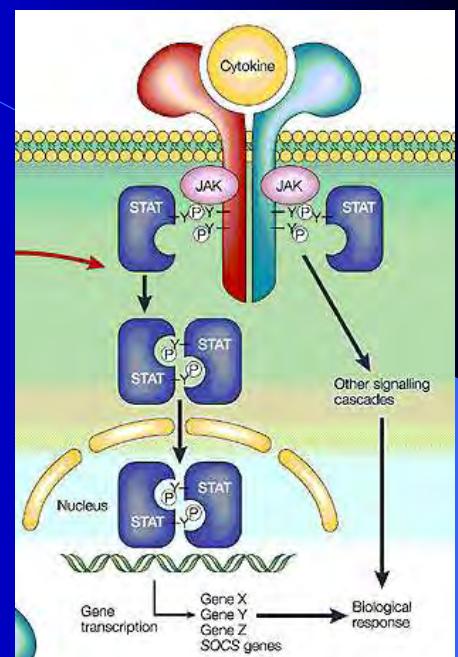
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Cytokine receptor family - type 2

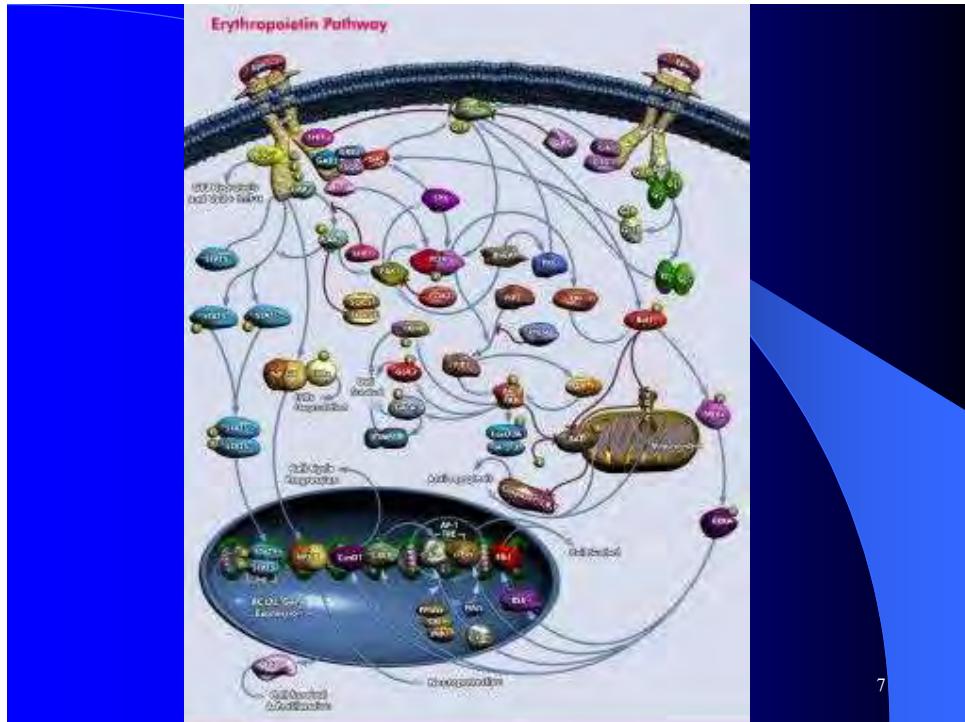
α chain
 \downarrow
 ligand-receptor interaction

β chain
 \downarrow
 signal transduction

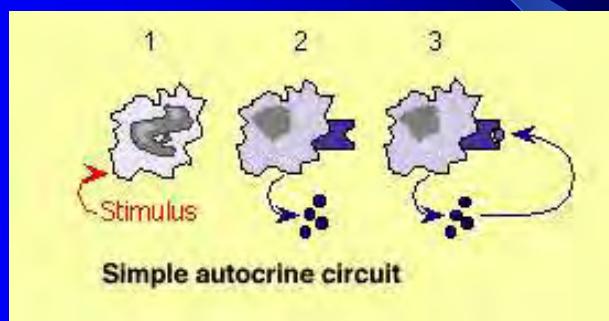


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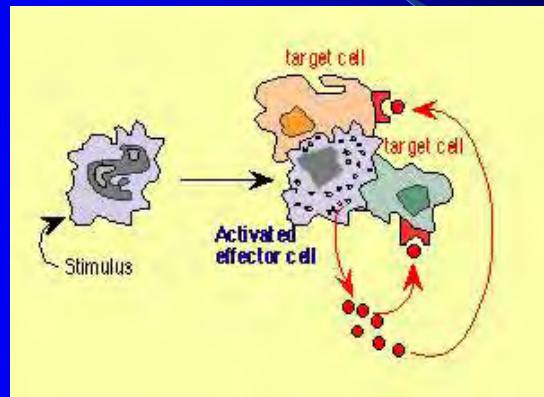
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Autocrine regulation



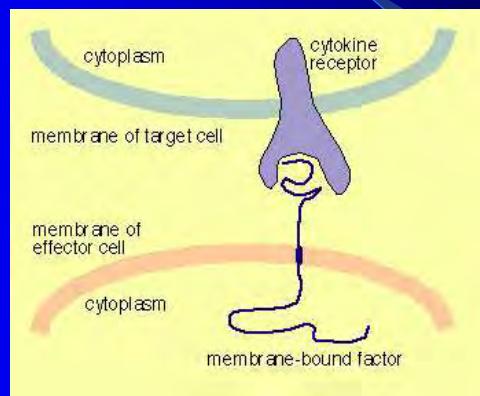
Paracrine regulation



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Juxtacrine regulation

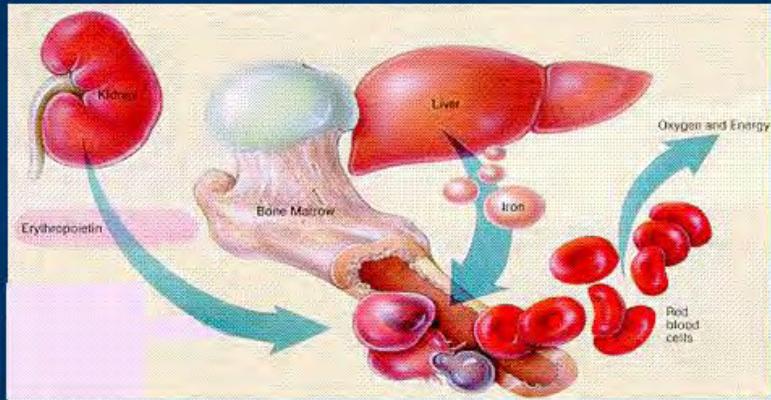


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Endocrine regulation

Normal Erythropoiesis



Cytokine groups

Cytokines exert pleiotropic effects, producing cell range can be wide \Rightarrow no simple classification

There exist several cytokine groups, which can partially overlap

• Hematopoietic growth factors

SCF, IL-3, GM-CSF, G-CSF, TPO, Epo, ... MIP-1 α , IL-10

• Interferons (IFN)

IFN- α , IFN- β , IFN- γ , limitin, TP-1, ...

• Interleukins

up to date IL-1 až IL-37

• Lymfokines

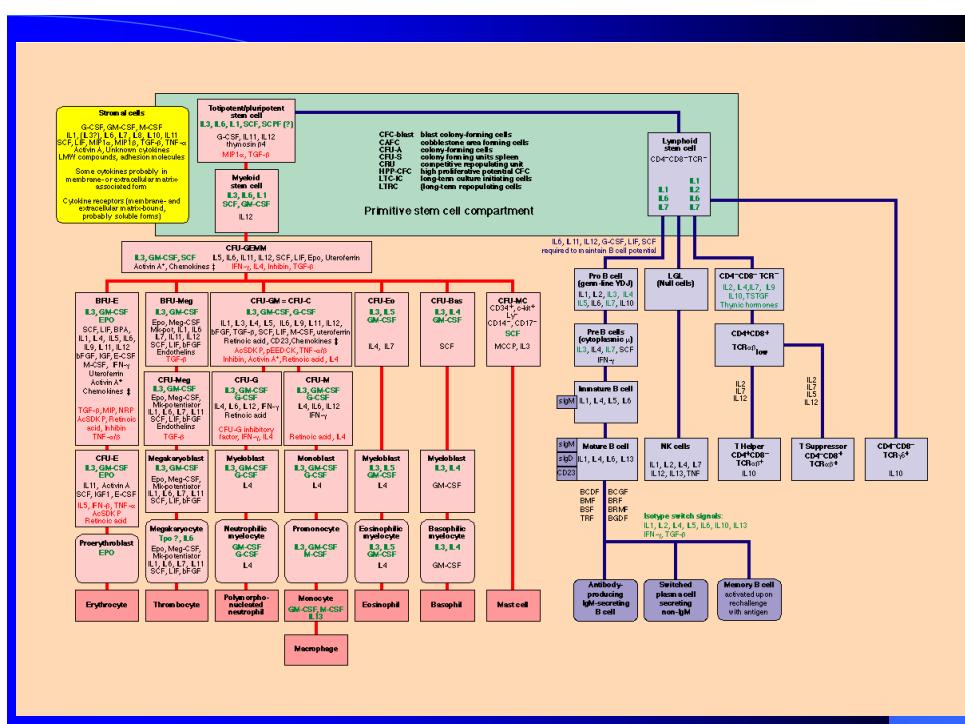
IL-2, IL-10

• Monokines

interleukins, chemokines ...

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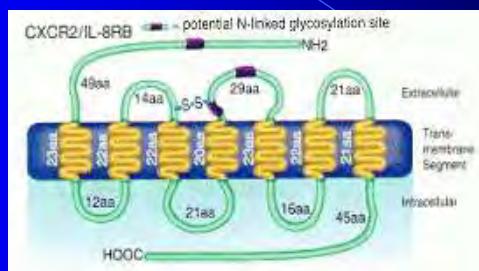
Chemokines

- chemotaxis, migration, activation of immunocompetent cells
- small proteins (8-10 kDa)
- high homology
- CXC chemokines: PF4, IL-8, \Rightarrow neutrophiles
- CC chemokines: MIP-1 α , β , RANTES \Rightarrow monocytes
- C chemokines: IL-16

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Chemokine receptors



- „serpentine receptors“
- promiscuity
- CXCR-1, CCR-3, ...

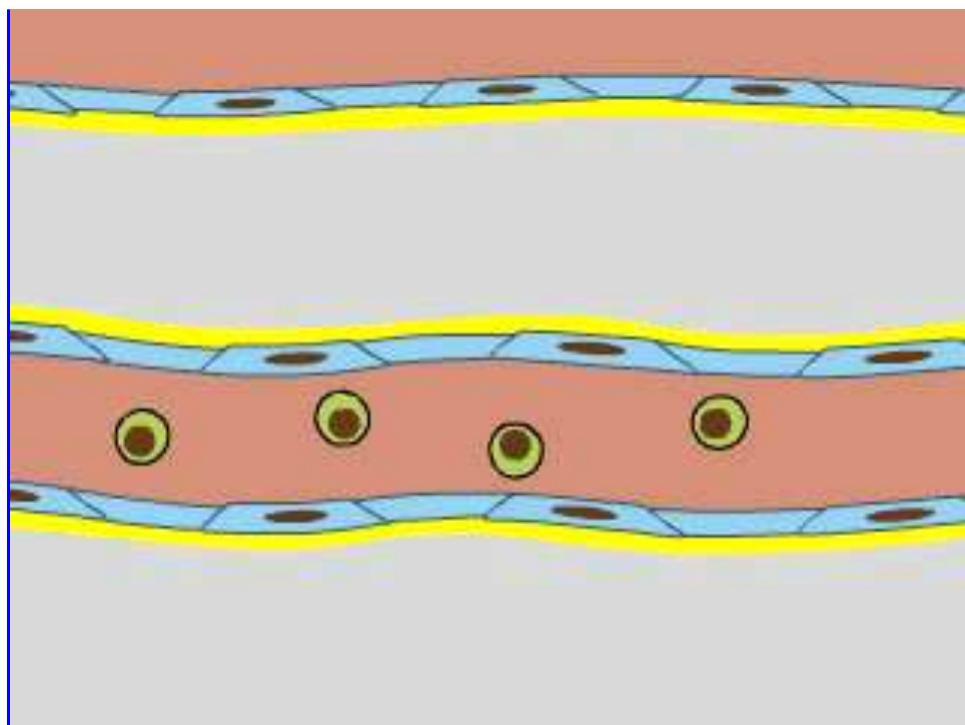
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Inflammatory cytokines

- many different cytokines
- monokines, lymphokines, chemokines, interferons, interleukins...
- key role of macrophages: inflammation triggering cytokines IL-1, TNF- α , IL-6

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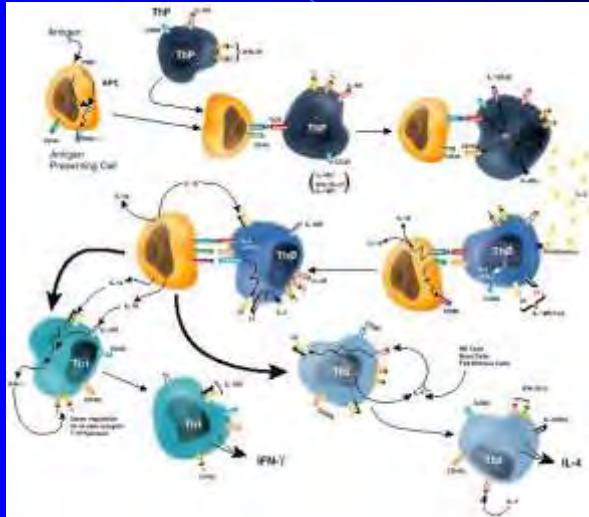
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- TGF- β , LIF – (cannot be classified) – receptors present on all somatic cells, high diversity of effect depends on tissue type and state
-

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Activation of naive CD4⁺ T lymphocytes towards Th1 a Th2 response



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Cytokines in pathogenesis and therapy



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Hematopoietic growth factors

- anemia (Epo)
- neutropenia (G-CSF, GM-CSF)
- thrombocytopenia (Tpo)

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Stem cells

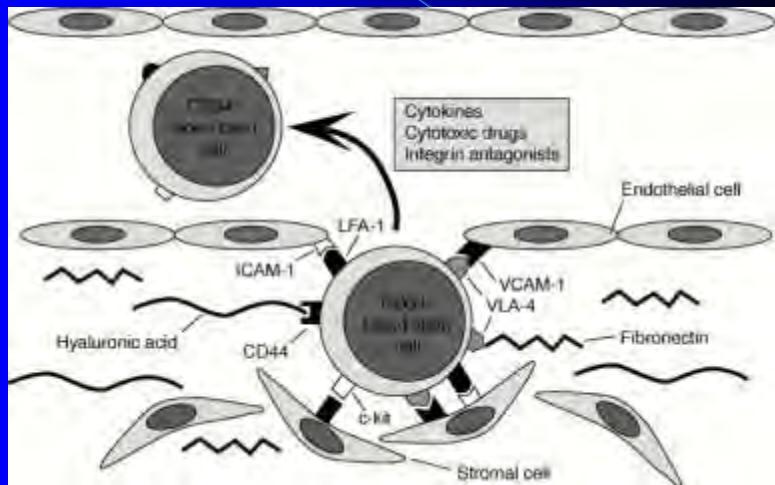
- in the bone marrow
- in the peripheral blood

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Stem cell mobilization into the blood stream

G-CSF
GM-CSF

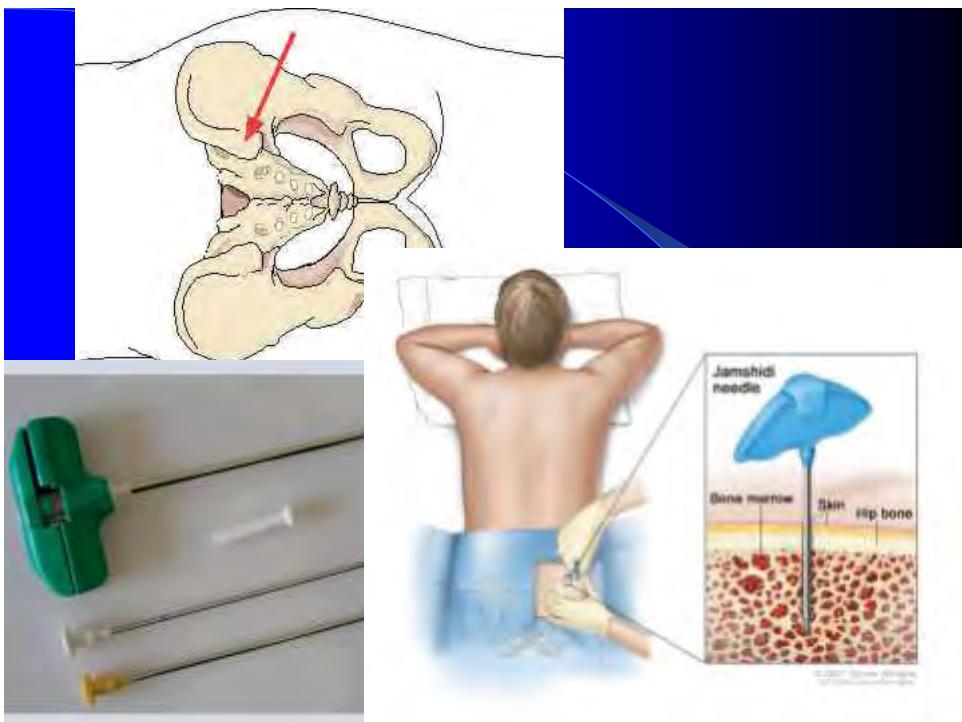


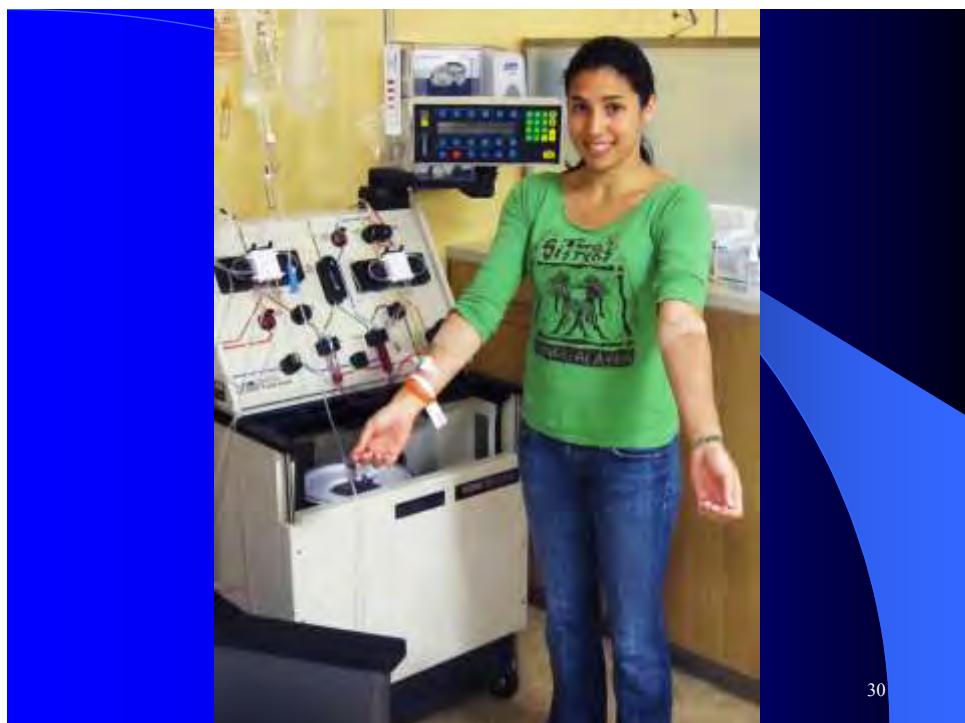
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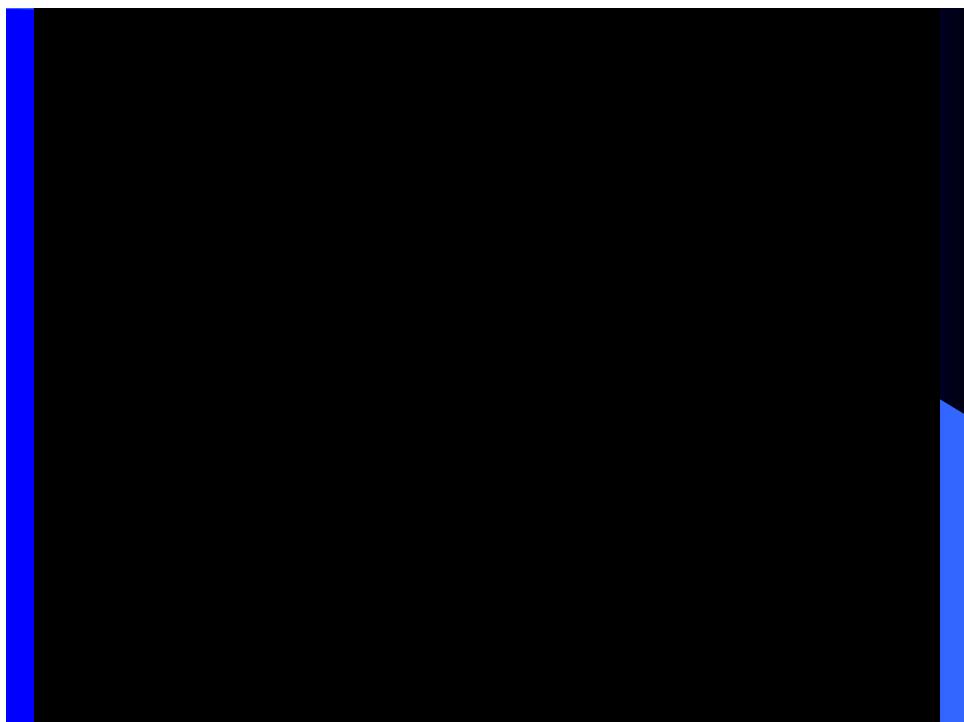






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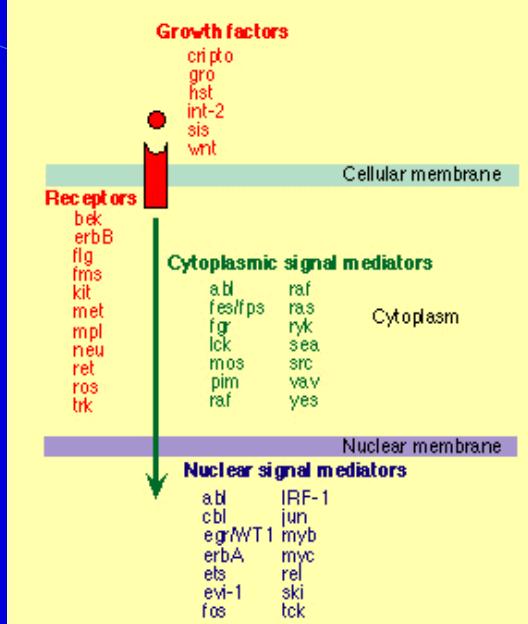
Graft purging

- autologous graft containing leukemic cells – *in vitro* cultivation with cytostatics (Mafosfamide)
- proliferative block of healthy stem cells – MIP-1 α

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Oncogenes



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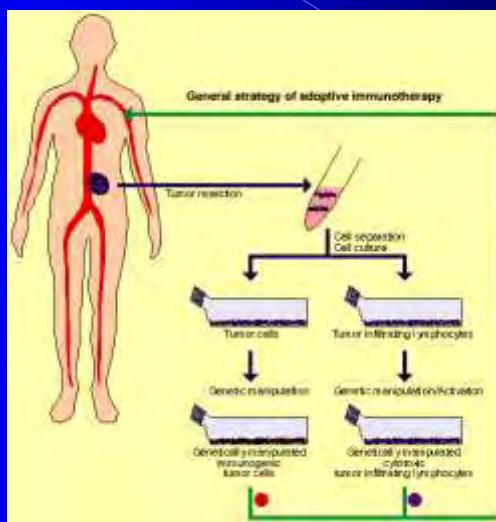
Adoptive immunotherapy

- LAK cells: melanoma, renal carcinoma, colorectal carcinoma, prevention of GVHD
 - a) IL-2 i.v.
 - b) leukaferesis
 - c) *in vitro* cultivation with IL-2
 - d) reinfusion of $10^{10} - 10^{11}$ LAK cells

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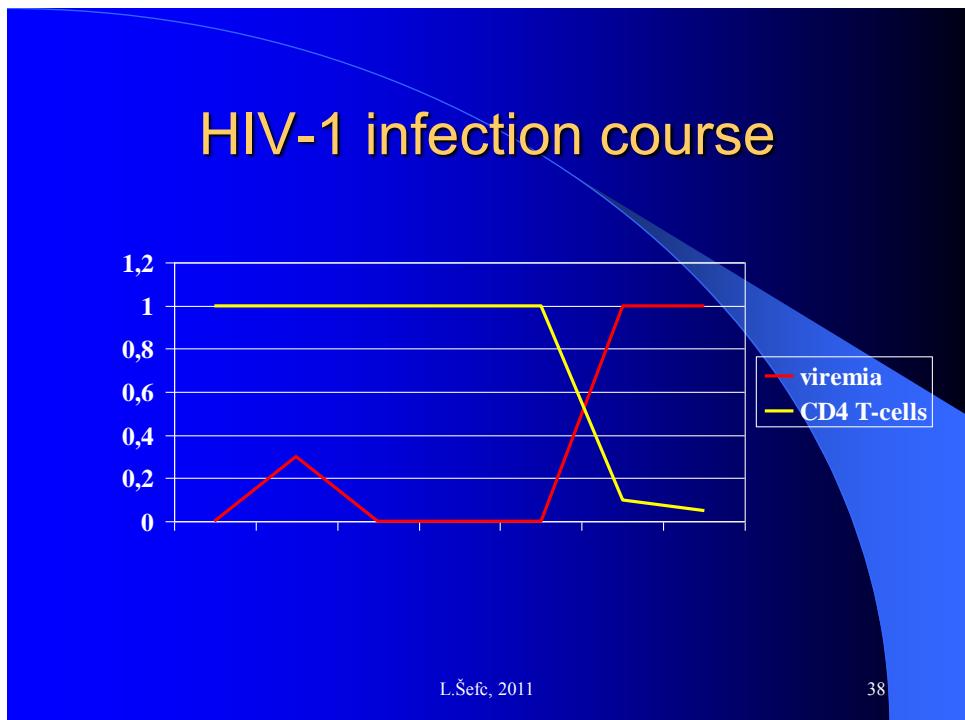
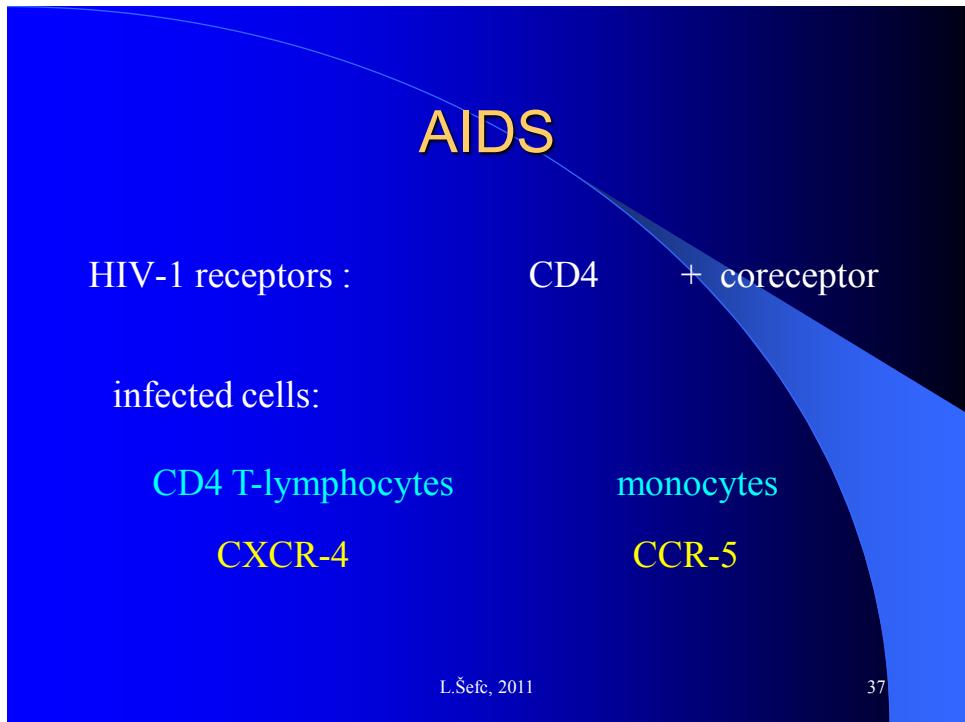
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Adoptive immunotherapy



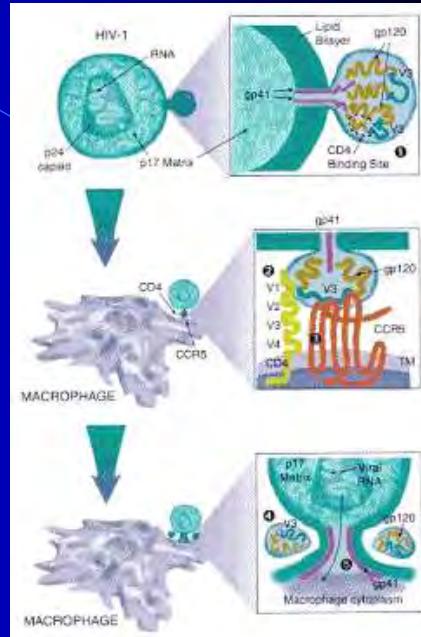
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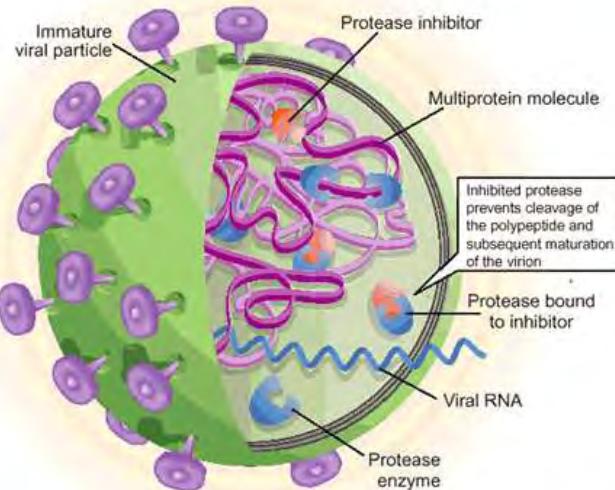
HIV-1 infection

- gp160 \Rightarrow gp120 + gp41
- protease inhibitors
(Norvir, Katera)



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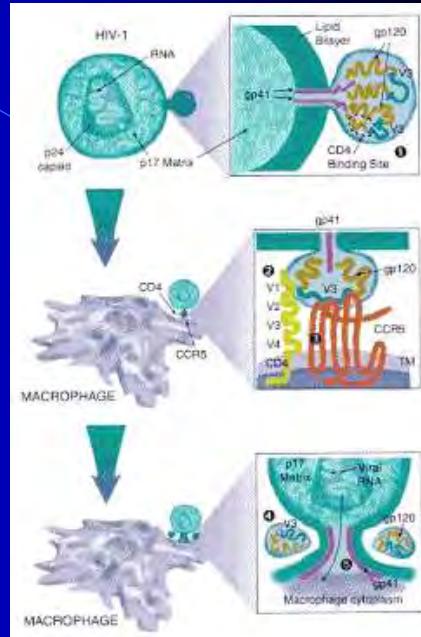
Source: Nat Med © 2003 Nature Publishing Group

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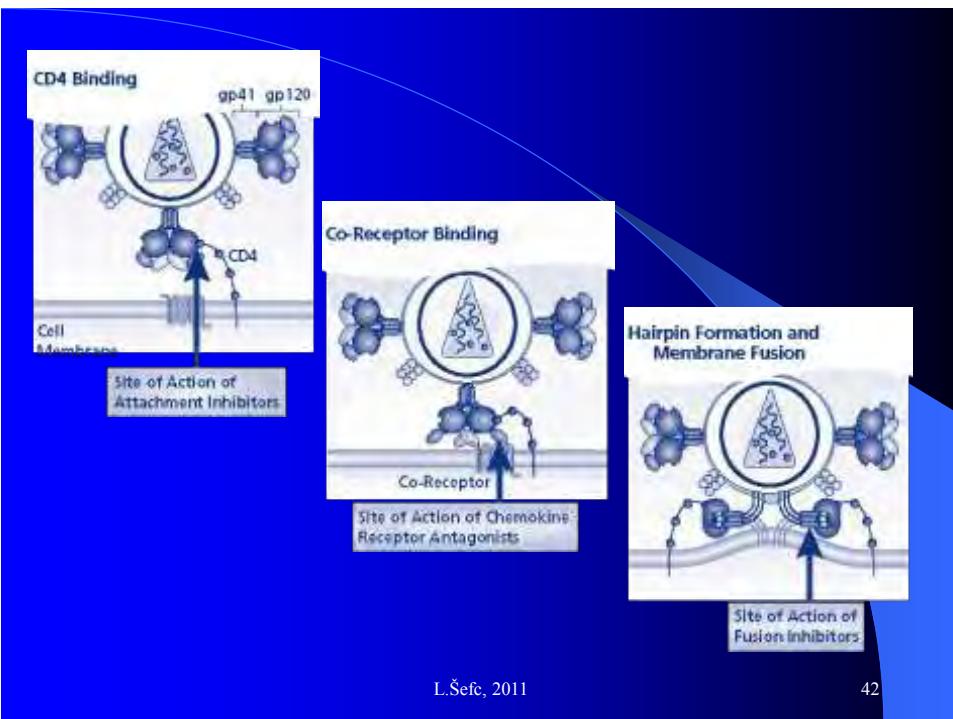
HIV-1 infection

- gp160 \Rightarrow gp120 + gp41
- protease inhibitors
(Norvir, Katera)
- fusion inhibitors
(Fuzeon)



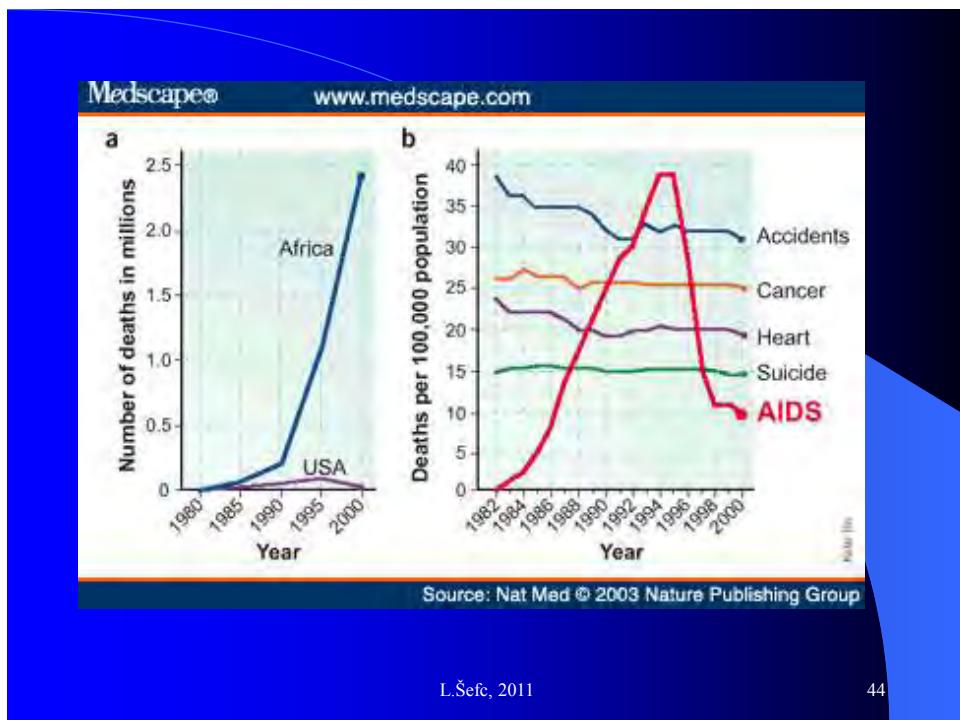
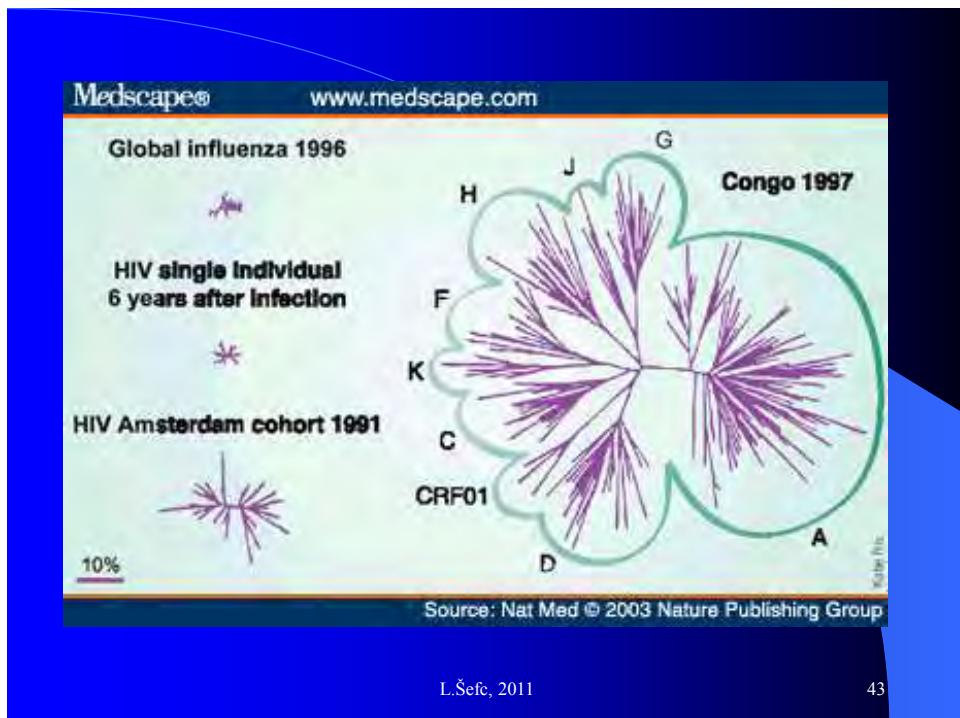
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Septic shock

- systemic expression of multiple inflammatory mediators
- Gram-negative septicemia – endotoxin
- (tampons contaminated with *Staphylococcus aureus* - exotoxin \Rightarrow toxic shock)
- hypotension, insufficient tissue perfusion, uncontrollable bleeding
- multisystem organ failure, disseminated intravascular coagulation

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Septic shock

- > 150 cytokines, „cytokine storm“
- IL-1 \Rightarrow tachycardia and hypotension, \uparrow IFN- γ , chemokines, ...
- TNF- α \Rightarrow \uparrow pro-coagulation activity of endothelial cells, > 1 ng/ml \Rightarrow lethal prediction
- IL-6 \Rightarrow induction of acute phase proteins

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Septic shock - therapy

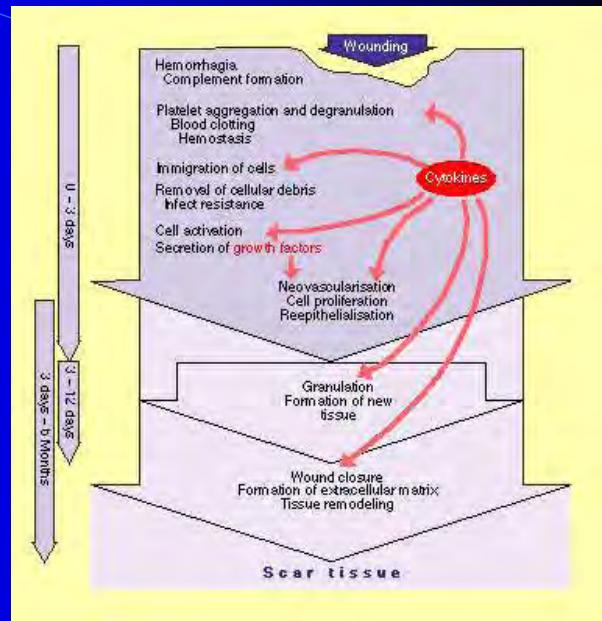
- antibodies against TNF- α
- IL-1Ra
- sTNF- α R
- IL-4, IL-10

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Wound healing

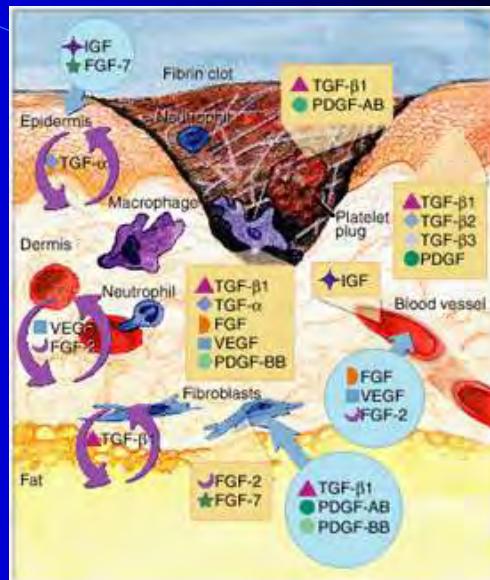
- EGF, FGF
- TGF- β
- chemokines
- angiopoietins



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Wound healing



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Bone remodeling

osteoblasts
 ↓
 chemokine CCL23
 ↓
 osteoclast
 chemotraction

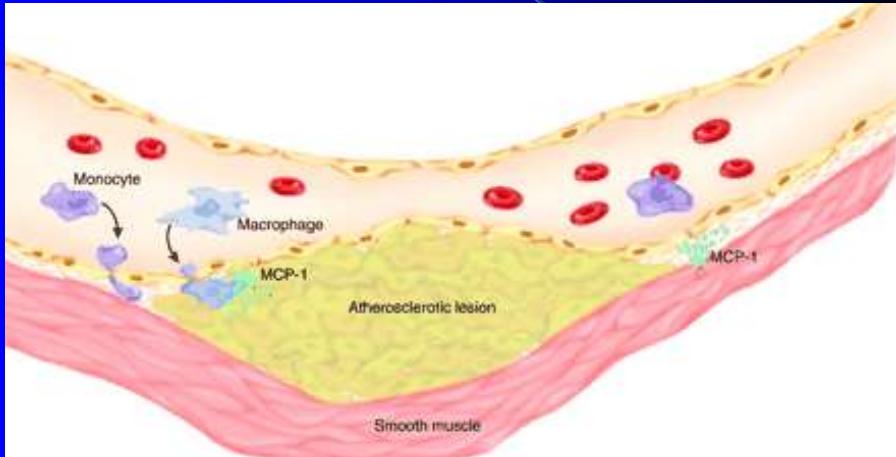


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Atherosclerosis

MCP-1 – macrophage chemoattractant protein-1



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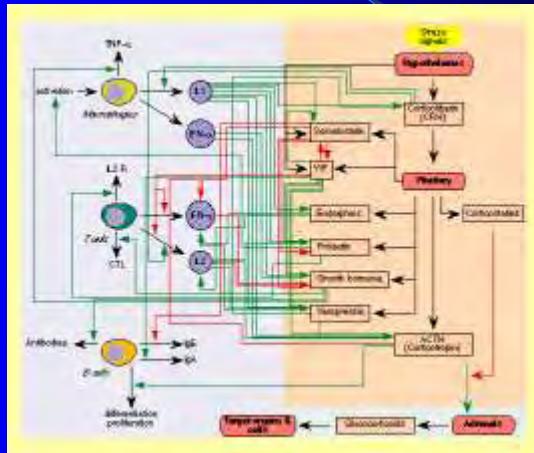
Neuroimmune network

- interactions between the immune system and neuroendocrine organs
- hypothalamo-pituitary-immune axis
- innervations of lymphatic organs (sympathicus, parasympathicus)
- cytokine production in CNS during injury, infection, and neurodegenerative processes
- hypophysectomy impairs humoral and cell immunity

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Hypotalamo-pituitary-immune axis and cytokines



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Cytokine fusion toxins

- chimeric proteins: DT (diphtheria toxin) and PE (Pseudomonas exotoxin)
 - targetted against cells bearing a specific receptor
 - cancer cells, lymphoma
 - prevention of GVHD

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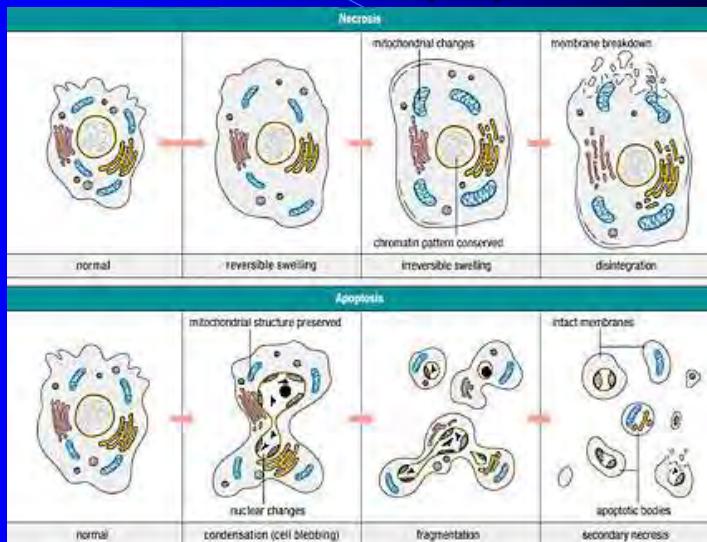
Necrosis x apoptosis

- Necrosis: passive \Rightarrow inflammation
- Apoptosis: active and energy dependent \Rightarrow no inflammation

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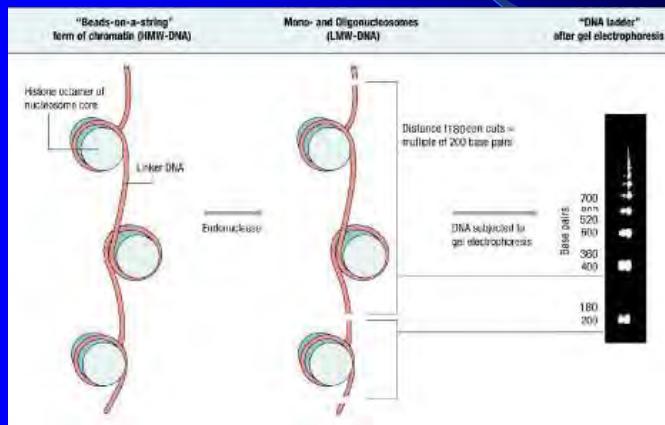
Necrosis x apoptosis



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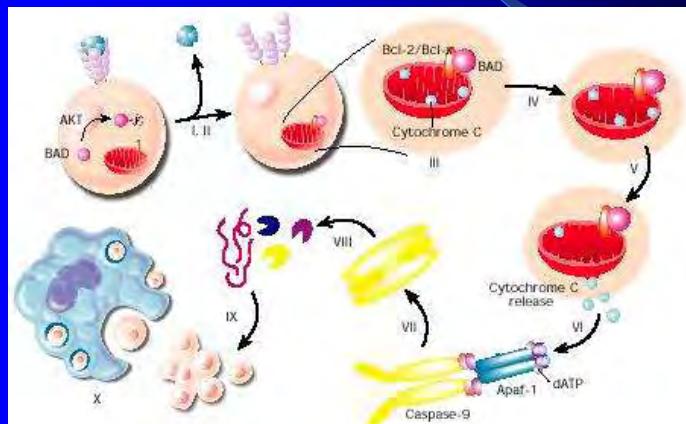
Apoptosis



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Negative apoptosis regulation (hematopoietic cells)



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Positive apoptosis regulation (lymphocytes, cancer cells)

- „death factors“ – TNF- α , Fas-L
- „death receptor“ activation
- pro-caspase activation (caspase 8 – FLICE)

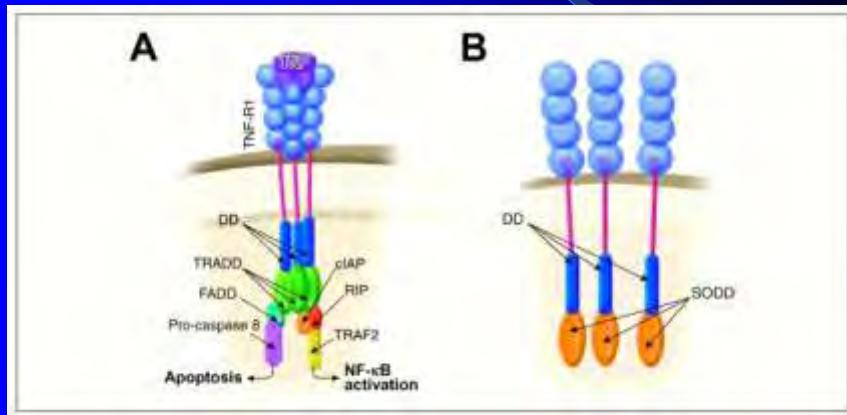
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apoptosis

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Positive apoptosis regulation (lymphocytes, cancer cells)



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