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**Immunology**  
MED438

# Mechanism of Autoimmunity

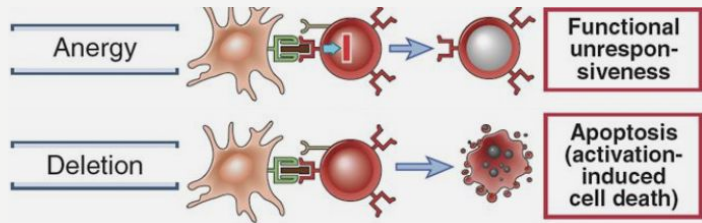


# Objectives

- Autoimmunity results from activation of immune response against self antigens.
- To learn how immunological tolerance (central and peripheral) is induced against self antigens for maintaining normal health.
- To gain understanding of various factors contributing to the breakdown of immunological tolerance and development of autoimmunity.
- Gender predilection in autoimmunity is a well-known phenomenon and is briefly described.

# Self-Tolerance

- Self-tolerance: The immune system's ability to NOT attack healthy body tissues. (differentiation between self and foreign antigens)
- Acquired by central and/or peripheral tolerance.
- Failure of self-tolerance leads to autoimmune diseases, where autoreactive lymphocytes attack self antigens (healthy body tissues).



“Auto” indicates it attacks the body's own cells

Central Tolerance	Peripheral Tolerance
<ul style="list-style-type: none"><li>● In central lymphoid organs (thymus, bone marrow).</li><li>● Immature autoreactive lymphocytes are stopped from <b>exiting</b> primary lymphoid organs and are broken down there (<b>deletion</b>).</li><li>● Autoreactive lymphocytes <b>CAN</b> sometimes pass through into the peripheral lymphoid organs.</li></ul>	<ul style="list-style-type: none"><li>● In peripheral tissue and secondary lymphoid organs.</li><li>● Happens when central tolerance fails and autoreactive T cells <b>pass</b> to the periphery.</li><li>● Either apoptosis (<b>deletion</b>) or anergy (<b>functional deactivation</b>)</li><li>● <b>Anergy</b>: the deactivation of an autoreactive T-cell through APC binding that either lacks costimulation (CD28+B7) or has CTLA-4+B7 binding.</li></ul> <p>CTLA-4 is a protein receptor that has the opposite effect of CD28. It inhibits T-cell activation.</p>

# Autoimmunity Induction

There are 4 **proposed** (theoretical) mechanisms by which autoimmunity is induced:

## 1. Sequestered (hidden) Antigens

- Some self antigens are hidden in tissues and are normally not sensed by the immune system (no self-tolerance induced).
- When those self antigens are exposed to T cells (as a result of infection/trauma), an autoimmune reaction occurs.

Examples of sequestered antigens:

- Myelin Basic Protein (associated w/Multiple Sclerosis)
- Lens and Corneal Proteins (post eye infection/trauma)
- Sperm-associated antigens (post vasectomy)
- Heart muscle antigens (post myocardial Infarction)

**Sympathetic Ophthalmia:**

Trauma in one eye releases the sequestered intraocular antigens to the Lymph node (activates T cells).  
The T cells will then move to the undamaged eye and attack the self-antigens there (autoimmune induction).

# Autoimmunity Induction

## 2. Molecular Mimicry

- Viruses and bacteria possess similar/identical antigenic determinants to those of normal cells.
- **Initiating step** in a variety of autoimmune diseases.

Main examples: (no need to memorize, but understand the concept)

HIV p24	(G V E T T T P S)	Poliovirus VP2	(S T T K E S R G T T)
IgG constant region	(G V E T T T P S)	Ach receptor	(T V I K E S R G T K)

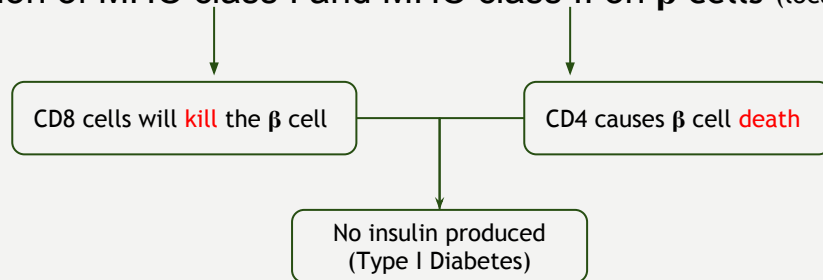
## 3. Inappropriate Expression of Class II MHC Molecules



- Abnormal expression of MHC Class II on non-APC cells (e.x. pancreatic  $\beta$  cells) due to  $\text{IFN}\gamma$  production (induced by a viral infection) causes self-reactive T cells to destroy them

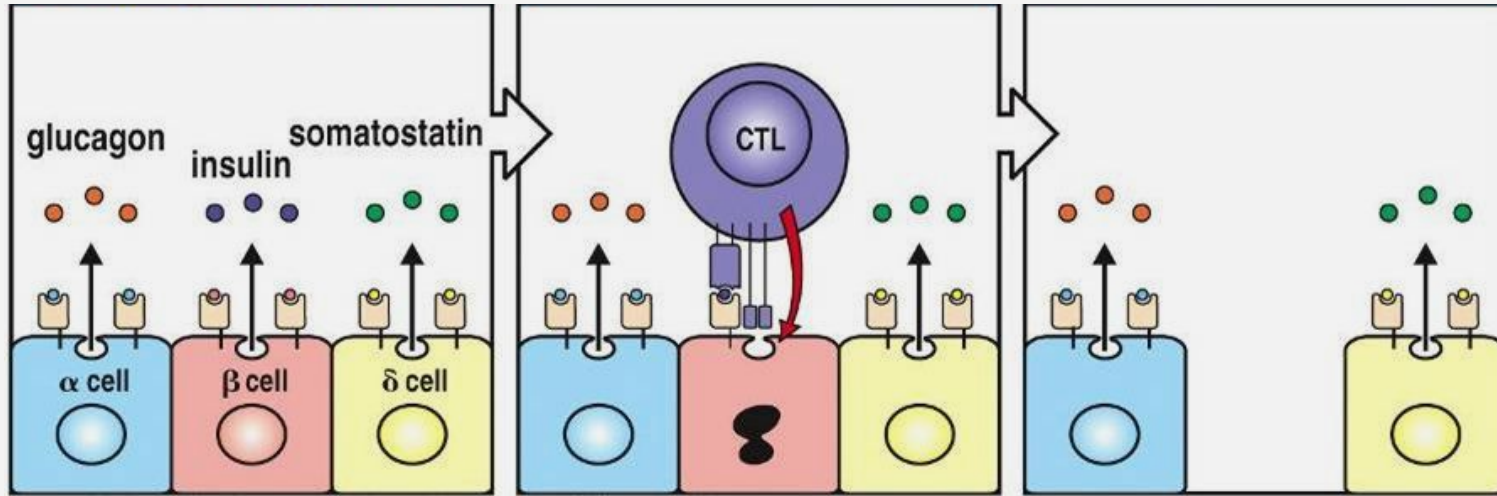
Type I diabetes (abnormal expression of both MHC classes):

**Abnormally** high expression of MHC class I and MHC class II on  $\beta$  cells (located in pancreatic/langerhans islets)



# Autoimmunity Induction

## Type 1 Diabetes (illustration)



A normal islet of Langerhans containing several cell types (3 demonstrated), each secreting different hormones and expressing different proteins.

In Type I diabetes (insulin-dependent), an effector T cell attacks and kills the  $\beta$  cell because it is abnormally expressing MHC peptides.

Insulin can no longer be produced due to the  $\beta$  cell death, while glucagon ( $\alpha$  cell) and somatostatin ( $\gamma$  cell) will continue being produced. This leads to Type I diabetes.

# Autoimmunity Induction

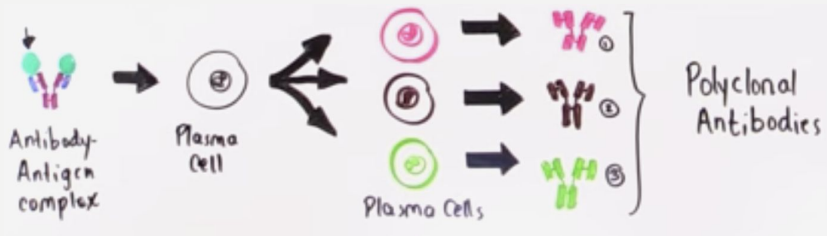
## 4. Polyclonal B Cell Activation

- Happens when a polyclonal B cell (**nonspecific**) is activated (**becomes a plasma cell**) by certain viruses and bacteria without the help of T cells (**T-independent**).
- This self-reactive plasma cell will proliferate and eventually produce polyclonal antibodies (mainly **IgM**), some of which will be **autoantibodies**.

Viruses and bacteria that induce the activation of polyclonal B cells are:

- Certain gram negative bacteria
- Herpes simplex virus
- Cytomegalovirus

- Epstein Barr Virus (**herpes 4 virus**)
- HIV



↓ ↓

Cause infectious **mononucleosis** (**glandular fever**), an autoimmune disease with a variety of autoantibodies

[Click here for a video explaining the concept of “polyclonal” antibodies](#)

# Hormonal Factors

- 90% of autoimmune diseases occur more in women.

(ulcerative colitis occurs equally in both sexes, while diabetes occurs more in males)

High estrogen levels will induce B-cell maturation, which will lead to the production of anti-DNA antibodies.

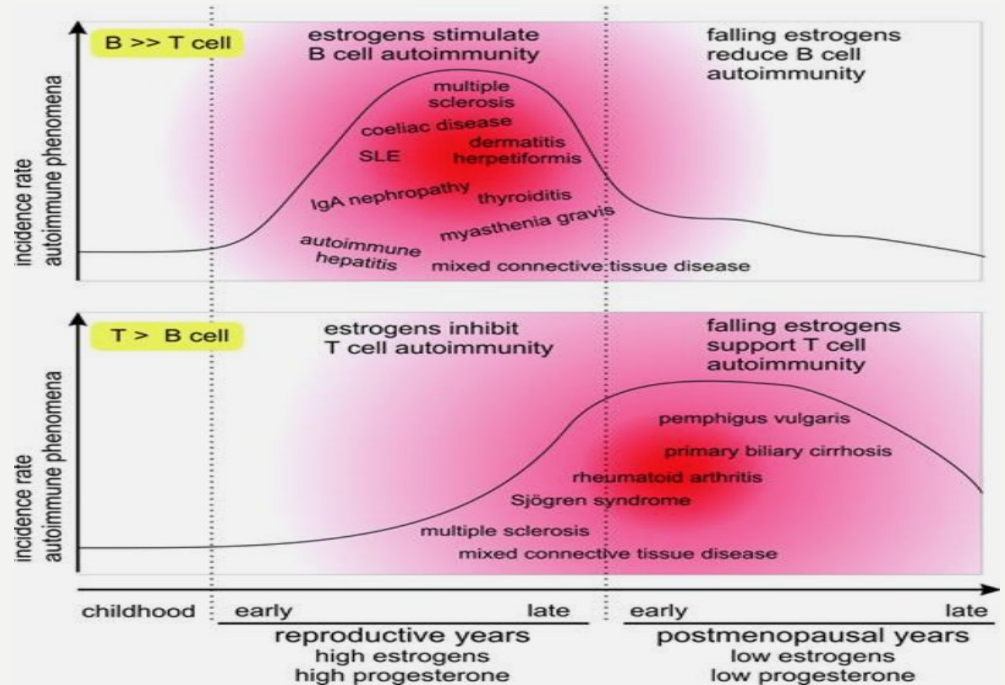
- High estrogen levels (pre-menopause):

- Stimulate B-cell autoimmunity (SLE).
- Inhibit T-cell autoimmunity (rheumatoid arthritis).

- Low estrogen levels (post-menopause):

- Inhibit B-cell autoimmunity.
- Stimulate T-cell autoimmunity.

- SLE (B-cell autoimmunity) either appears or exacerbates during pregnancy due to hormonal irregularities.





# Drug induced Lupus Erythematosus

Autoimmune disease in which the immune system attacks healthy tissues caused by the chronic intake of certain drugs, causing lupus-like symptoms

- **Anti-histone** antibodies are frequently present, and are used to differentiate between drug induced diseases from others.
- Associated with the development of **anti-nuclear** antibodies, which are used to diagnose autoantibodies.
- Renal and CNS involvement is **uncommon**

In short, DILE is a variant of SLE that resolves within days to months after withdrawal of the causing drug(s).

- **Examples:**

- Hydralazine (used for hypertension)
- Procainamide (antiarrhythmic)

- Isoniazid (Anti TB)
- Penicillin (antibiotic)

# Take Home Message

- Normal healthy state is maintained by immunological tolerance against self antigens at central and peripheral levels
- Autoimmune diseases result from the breakdown of immunological tolerance to self antigens
- Certain autoimmune diseases exhibit strong association with female gender

# Quiz:

1. Which of the following best describes a CD8 T cell antigen recognition process during self-tolerance?

- a) MHC Class I-APC + CD28-B7
- b) MHC Class II-APC + CTLA4-B7
- c) MHC Class II-APC + CD28-B7
- d) MHC Class I-APC + CTLA4-B7

2. A 69 y/o man w/type 1 diabetes underwent a heart attack that resulted in the body attacking the heart's  $\alpha$ -myosin cells. Which choice fits best as the consequence of the heart attack?

- a) Inappropriate MHC Class II expression autoimmune induction
- b) Systemic Lupus Erythematosus
- c) Sequestered Antigen autoimmune induction
- d) Myocardial Infarction

3. Which cytokine has an etiological role in insulin-dependent diabetes?

- a)  $\text{IFN}\gamma$
- b) TNF- $\alpha$
- c) TNF- $\beta$
- d) None of the above

4. Which of the following is a characteristic of polyclonal B cell activation?

- a) T-dependent
- b) Induced by Gram positive bacteria
- c) Causes include cytomegalovirus
- d) Main antibody is IgG

5. Which of the following patients is most likely to develop a T-cell autoimmunity?

- a) A 57 year old woman
- b) A 69 year old man
- c) A 28 year old woman
- d) A 34 year old man

6. What can we use to diagnose autoantibodies?

- a) Anti-histone antibodies
- b) Anti-nuclear antibodies
- c) Immunofluorescence
- d) ELISA

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