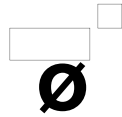


## **The goal of a balanced immune system**

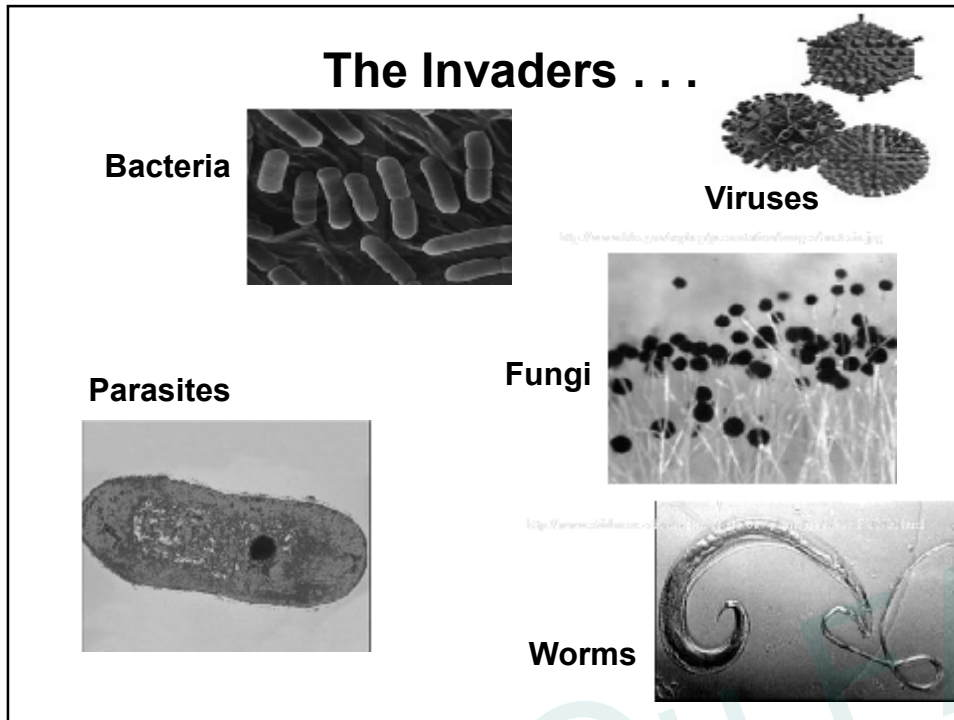


**Pathogens**


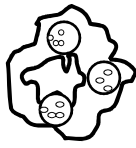

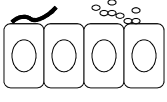
**Tumor cells**

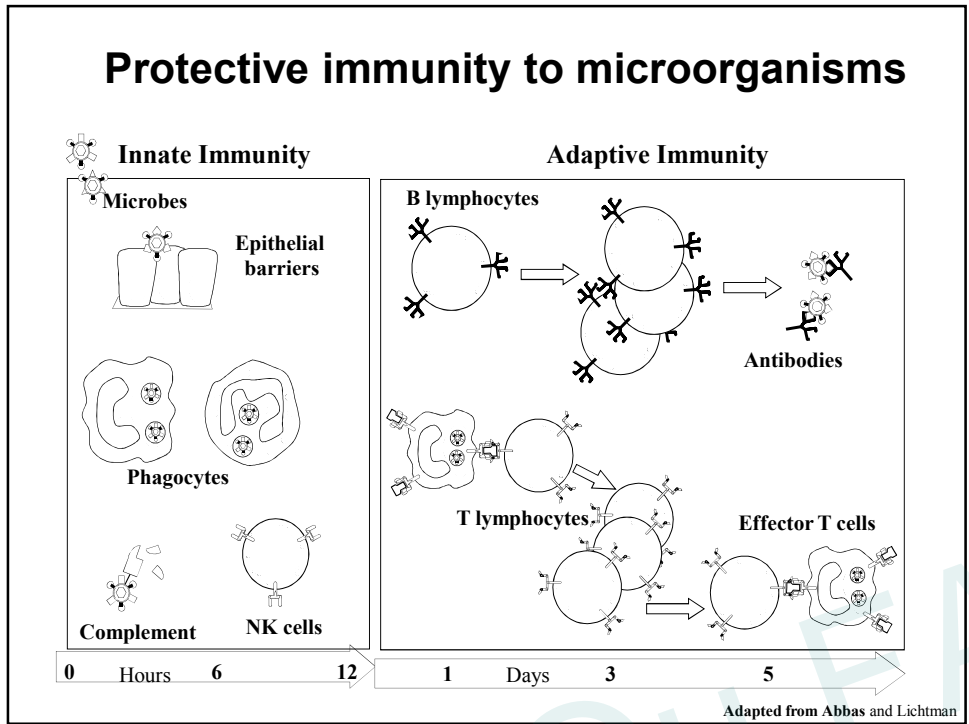
**Autoimmunity or Allergy**

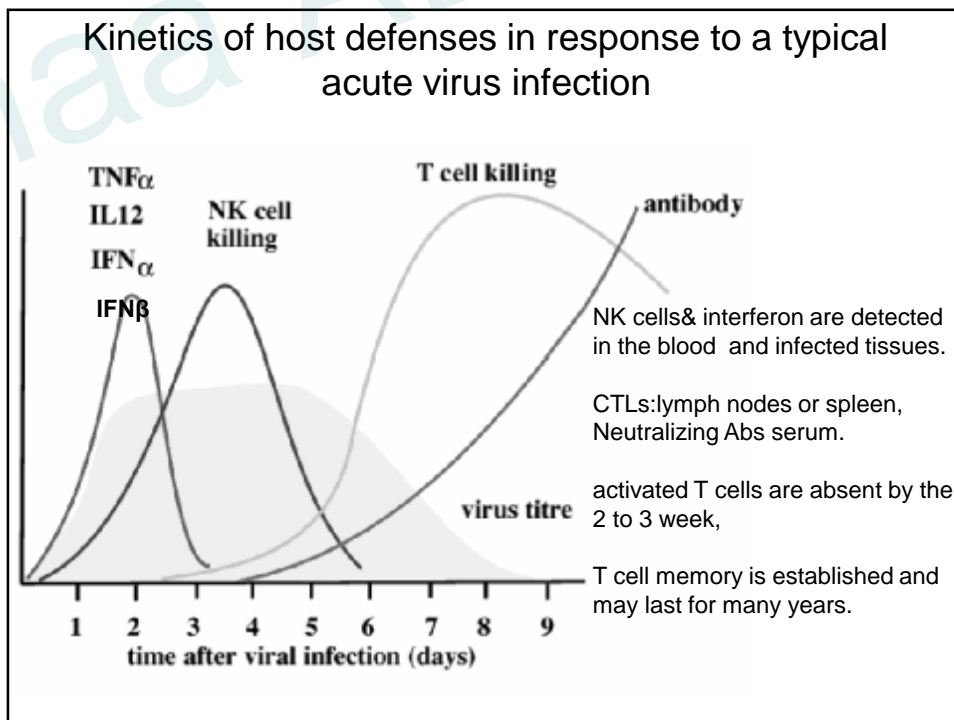
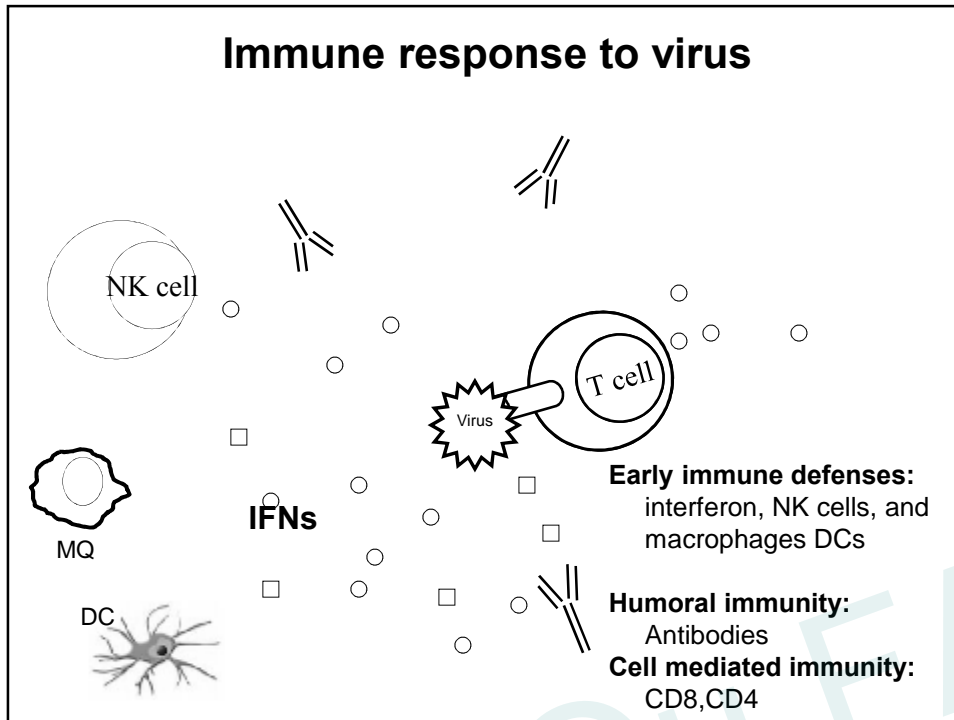
## **Immune responses to Pathogen**

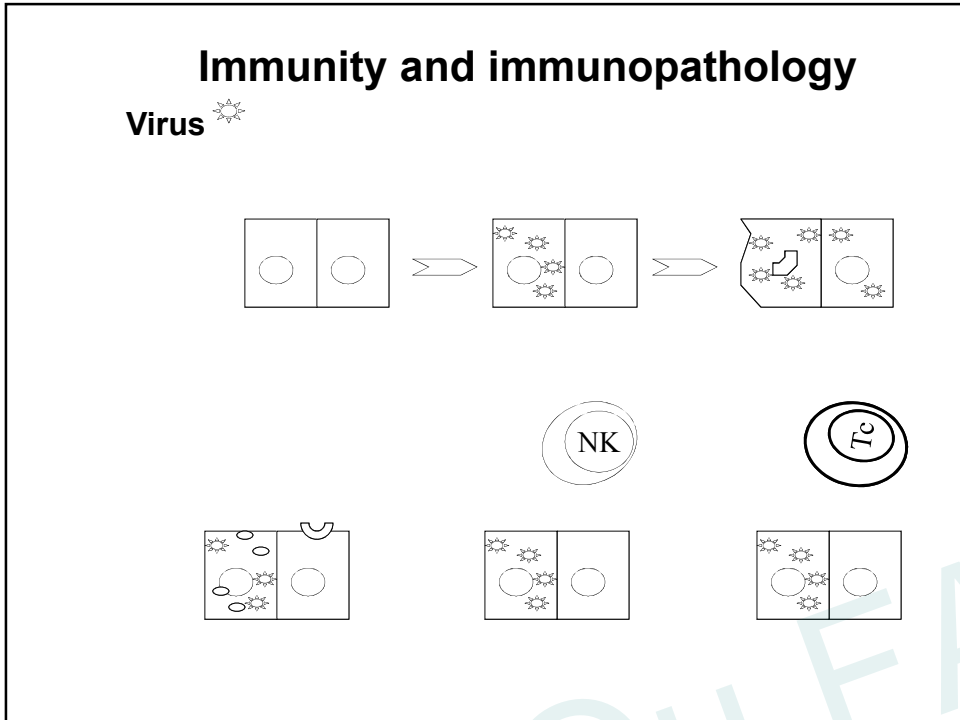


### Pathogens in various compartments

	Intracellular		Extracellular	
				
<b>Site of infection</b>	Cytoplasmic	Vesicular	Interstitial space blood, lymphs	Epithelial surfaces
<b>Protective immunity</b>	Cytotoxic T cells ADCC NK cell	T cell dependent Macrophage activation	Antibodies Complement Phagocytosis Neutralization	Antibodies, especially IgA, Inflammatory cells
<b>Micro-organisms</b>	Viruses Chlamydia Listeria protozoa	Mycobacteria Salmonella Leishmania Trypanosoma Legionella....	Viruses Bacteria Protozoa Fungi Worms	Neisseria gonorrhoeae Worms Candida Streptococcus Vibrio cholerae Escherichia coli

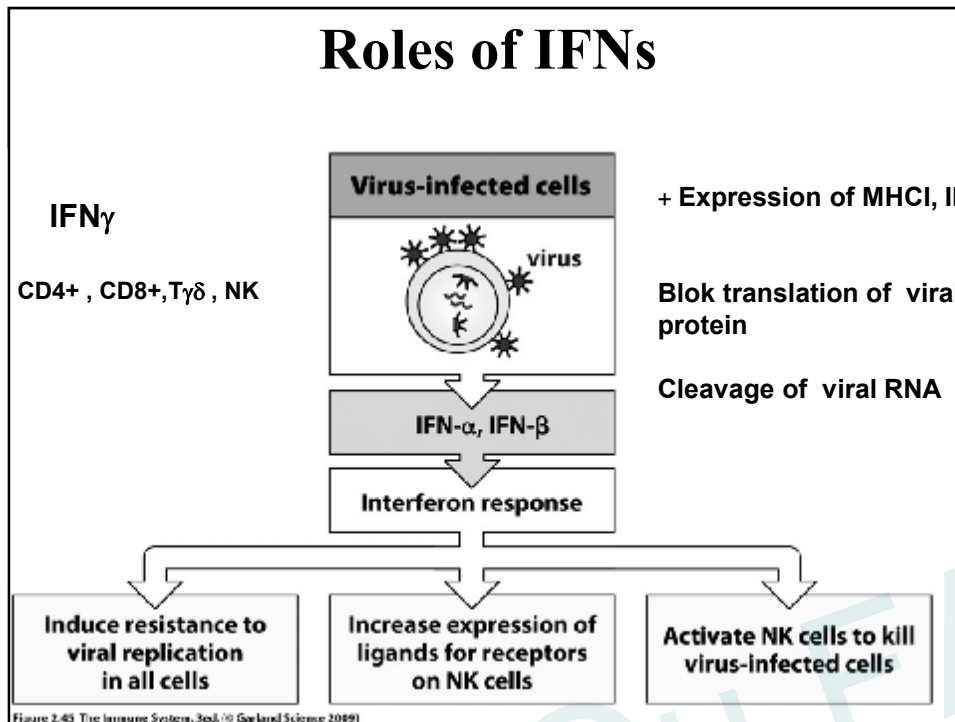






### Interferons

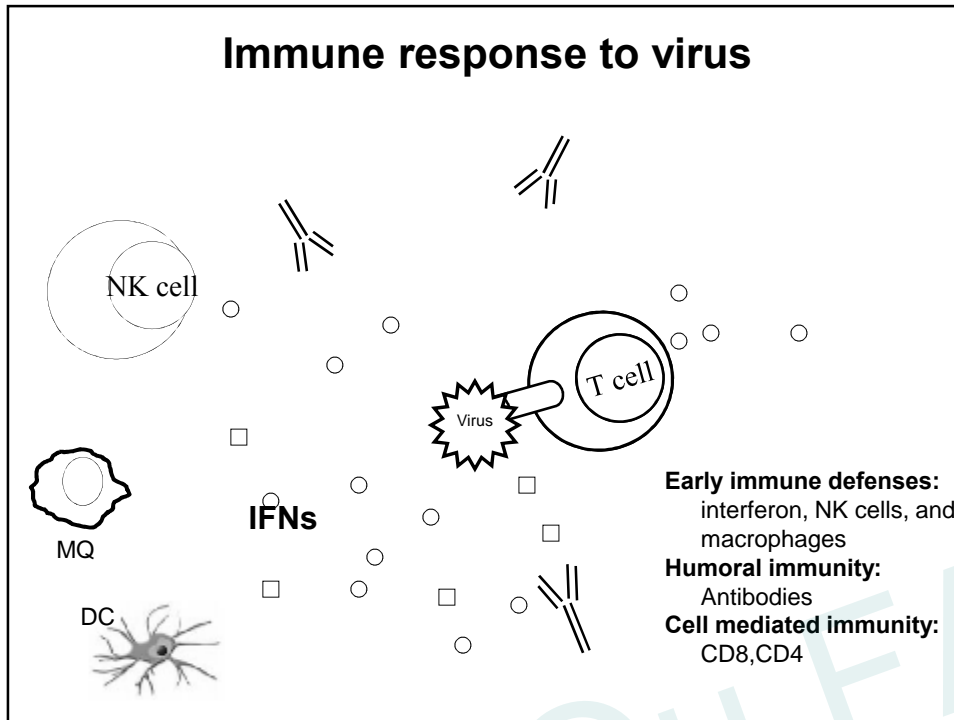
- ❖ Small proteins released by virally infected cells  
Trigger the production of antiviral proteins
- ❖ Two types of IFNs:
  - Type I IFNs**
    - Alpha: produced by leukocytes and attract/stimulate NK cells
    - Beta: secreted by fibroblasts causing slow inflammation
  - Type II IFN**
    - Gamma: produced following antigenic or mitogenic stimulation of T and NK cells. Stimulate macrophage activity.
- ❖ Interferons exert antiviral activity by a variety of mechanisms



## Anti-Viral Immunity

Anti-viral activity of interferons (IFNs)

- Virus infected cells produce IFNs
- IFN- $\alpha$  inhibit intracellular replication of viruses
- IFN- $\alpha$  activate NK-cells and macrophages to kill virus infected cells
- IFNs have no direct effect on extracellular virus
- IFNs act early in viral diseases before antibody
- IFNs activity is not specific



### Antibodies

- Antibodies provide a major barrier to virus spread between cells and tissues and are particularly important in restricting virus spread in the blood stream.
- IgA production becomes focused at mucosal surfaces where it serves to prevent reinfection.
- Antibodies may be generated against any viral protein in the infected cell.

## Anti-Viral Immunity Roles of antibodies

- In viraemic infections, antibodies neutralize virus, preventing its attachment to receptor sites on susceptible cells ( e.g. Poliovirus, mumps, measles, rubella)
- In superficial non-viraemic infections (influenza)  
Secretory **IgA** neutralizes virus infectivity at the mucous surfaces
- Antibodies destroy free virus particles directly by aggregation of virus and opsonization or by complement mediated lysis
- Both mechanisms also act on virus infected cells

Antiviral effects of antibody		
target	agent	mechanism
free virus	antibody alone	blocks binding to cell blocks entry into cell blocks uncoating of virus
	antibody + complement	damage to virus envelope blockade of virus receptor
virus-infected cells	antibody + complement	lysis of infected cell opsonization of coated virus or infected cells for phagocytosis
	antibody bound to infected cells	ADCC by NK cells, macrophages, and neutrophils
ADCC, antibody-dependent cellular cytotoxicity		



The stupidest virus is cleverer than  
the cleverest virologist

Viruses might be very tiny and have no  
brains, but when it comes to survival games  
no one can call them dumb

### **How can a virus evade the immune system**

#### **Antigenic variation**

- involves mutating regions on proteins that are normally targeted by Abs and T cells.
- human immunodeficiency virus (HIV): (mutations) can arise in those viral peptides that bind to MHC class I molecules to which the initial T cell response arose.
- is responsible for the antigenic shift and drift seen with influenza virus.
- Humoral immunity to such diseases lasts only until the new virus strain emerges, making effective longlasting vaccinations difficult to produce.

**Failure of T cell surveillance and the emergence of new pathogenic variant viruses.**

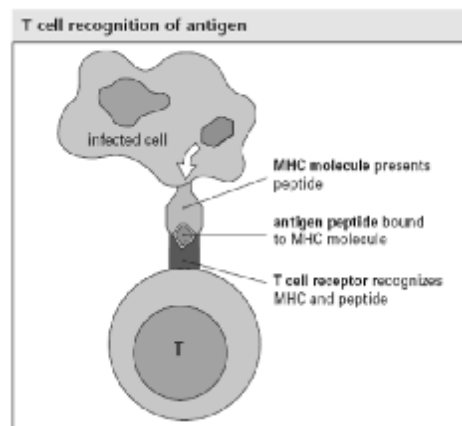
### How can a virus evade the immune system

#### *Strategies to control the expression of MHC molecules*

MHC class I expression can be disrupted by:

- blocking peptide uptake into the endoplasmic reticulum
- preventing maturation assembly and migration of the MHC complex.
- other mechanisms involve premature targeting of MHC class II for degradation.
- Downregulation of MHC class I may disrupt CD8+ T cell recognition.

What advantage is there for a virus in causing the loss of MHC class I molecules in the cell it has infected?



**The infected cell can no longer be recognized by cytotoxic T cells**

## **How can a virus evade the immune system**

### **Strategies for disrupting the chemokine network.**

Chemokines represent an important traffic-light system for cell migration

- The herpesviruses encode chemokine homologs (e.g. CCL3); chemokine receptor homologs; and chemokine-binding proteins, which have powerful effects on delaying or inhibiting cell migration during inflammation.
- viruses encode homologs for CD46 and CD55 – complement regulatory proteins that block C3 activation.

HIV makes use of cellular CD59, which is incorporated in the viral envelope, thereby blocking complement mediated lysis of the virion.

## **How can a virus evade the immune system**

### **Strategy for disrupting the interferon system.**

- Interference with interferon signaling.
- Some can produce their own cytokines so they compete with the human ones and confuse the immune response.
- They can produce receptors for human cytokines to remove them quickly from the infection site and mute the “call-to-arms”.

Responses to viral antigens can cause tissue damage

### **The formation of immune complexes**

- Immune complexes may arise in body fluids or on cell surfaces and are most common during persistent or chronic infections (hepatitis B virus)
- Immune complexes form and are deposited in the kidney or in blood vessels, where they evoke inflammatory responses (glomerulonephritis).

Responses to viral antigens can cause tissue damage

### ***CTL responses can cause sever tissue damage***

chronic active hepatitis in humans, whereby CTLs target hepatitis B virus-infected cells and may also participate in a nonviral autoimmune disease.

Responses to viral antigens can  
cause tissue damage

**Viruses can infect cells of the immune system**

- ***HIV infects CD4+ cells***
- prolonged clinical latency
- ineffective immunity
- continuous virus mutation
- neuropathology and a tendency to infect bone marrow-derived cells and lymphocytes .
  
- HIV is taken up by CD4+ T cells and macrophages following binding of a viral glycoprotein (gp120) to CD4 and certain chemokine receptors (CXCR4 and CCR5).
  
- It also enters other antigen-presenting cells by this route