Innate and adaptive immunity

Innate	Adaptive
Barriers (mechanical / chemical), enzymes peptides, complements	T cells & b cells
cells (monocytes macrophages neutrophils basophils eosinophil)	
Non specific	Specific
Monotonic (always same response)	Increase magnitude & speed in re-exposure
Immediate (minutes – hours)	Days
Better in recognizing self from non self	Less efficient in this type of recognition

Regarding specificity & magnitude of speed

• Innate system

The innate cells have **PRR** (receptors) for 1000 antigen (as an example); everyone has them we got them from our parents and will be giving them to or kids

Adaptive system

Depends on what antigens invade your body, BC each time a new antigen enters the body new T & B cells will be formed

Antigen	Immunogen	Hapten / tolerogen
Any particle that is recognized by the	Antigen that stimulates an immune	Antigen that doesn't stimulate an
immune system	response	immune response
To get recognized need to be :		
1. in high MW	-	-
2. Complex (proteins , carbs)		
3. Foreign		

- Epitopes: smallest part of antigen and it's the binding site with adaptive immunity or antibodies (antigenic determinants)
- Paratope: the part that binds the antigen

Tolerogen	Haptens
Things that induce tolerance	Very low molecular weight antigen need to conjugate to a
	carrier protein to induce the immune response
Dust / it enters the body in small doses for a long	Like : penicillin
time until no immune response	Food additives , lipids

Receptors on innate cells are fixed (inherited) but in adaptive cells generated by somatic recombination

Inflammation

Changes that happen	Signs of inflammation
Increased blood supply	Pain
Increased permeability	Heat
Expression of endothelial adhesion molecules	Redness & swelling
Activation of local innate cells to secret chemotactic factors that recruit leukocytes	Loss of function

PRRs

Toll like TRL	Scavenger	opsonin
Binding > signaling > phagocyte activation > cytokine secretion	Binding > signaling > phagocyte activation > internalization	<i>Indirect binding to microbe</i> :(coating the microbe to make it obvious) Act indirectly by binding to soluble molecules that engage the microbe The result is microbe internalization to the cell.

Opsonization

2 types

Complement receptors	Antibody receptors
C3b, c3bi, c4b	IGG ,IGM

Antibody receptors

Direct	Indirect
<u>IGG, IGA</u>	IGM

Innate immune cells

Phagocytic	Non – phagocytic
- Neutrophil	- Basophils
- Mononuclear phagocytes	- Eosinophils
- Dendritic cells	- NK

Functions of macrophages

"Please send crazy ants "

- 1) Phagocytosis of foreign particles the same as neutrophils
 - (1) Scavenger receptors
 - (2) <u>opsonin dependent phagocytosis</u>; engulf antigen antibody complex as in viruses *via receptor for opsonizing IgG and complement C3b*, No receptors for IGM
- 2) Secretion of enzymes and oxidative metabolites if antigen is big, cause tissue damage (respiratory burst- oxygen radicals, NO, prostaglandins)

3) Cytokine production which recruit other inflammatory cells, as neutrophils (chemotaxis) by TLR

4) Antigen-Presentation to *T cells*

The link between innate and adaptive immunity

Its bidirectional, meaning that >> innate activates adaptive and the way around

- 1) <u>The innate stimulate the adaptive</u> (macrophage secret IL-12 and/ or IL-4 that activate T cells. C3d complement activate B cell. Antigen presentation to T cell by macrophages.
- 2) The adaptive immune response use some innate cells to eliminate the antigen (T cells secret IFN gamma that activate macrophages)