

- The journey of leukocytes from the vessel lumen to the tissue is a multistep process that is mediated and controlled by adhesion molecules and cytokines, and consist of three phases:
- 1. Leukocyte Adhesion to Endothelium.
- 2. Leukocyte Migration Through Endothelium.
- 3. Movement of the cells toward the offending agent

#### I. LEUKOCYTE ADHESION TO ENDOTHELIUM

blood vessels all Tyle - so min

• <u>During blood stasis</u> more white cells assume a peripheral position along the endothelial surface (margination.)

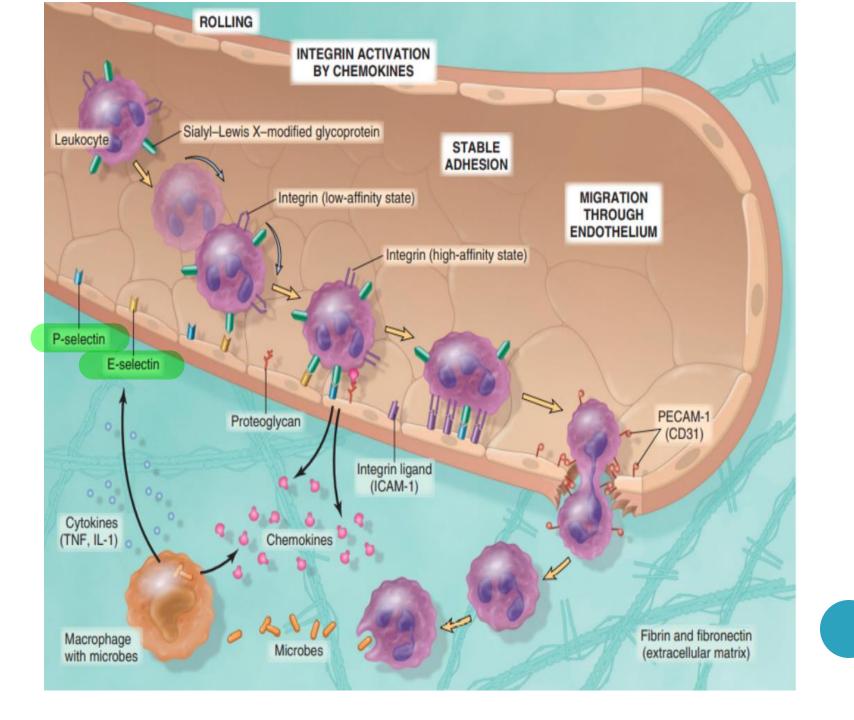
activated by mediators ame from site of injury

Activated endothelial cells express adhesion molecules to which ندايتا وبتريط the leukocytes attach loosely, then bind and detach (rolling.) مشاعة تشاعة تأليفا بطيقة

atheroma

The cells finally come to rest at some point where they adhere firmly.

• The attachment of leukocytes to endothelial cells is mediated by complementary adhesion molecules on the two cell types whose expression is enhanced by cytokines, The two major families of molecules involved in leukocyte adhesion and migration are the selectins and integrins.



#### 1.SELECTINS

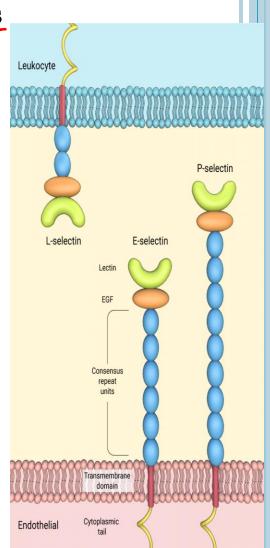
- Mediate the initial weak interactions between leukocytes and endothelium.
- Selectins are receptors expressed on leukocytes and endothelium that contain an extracellular domain that binds sugars (hence the lectin part of the name).

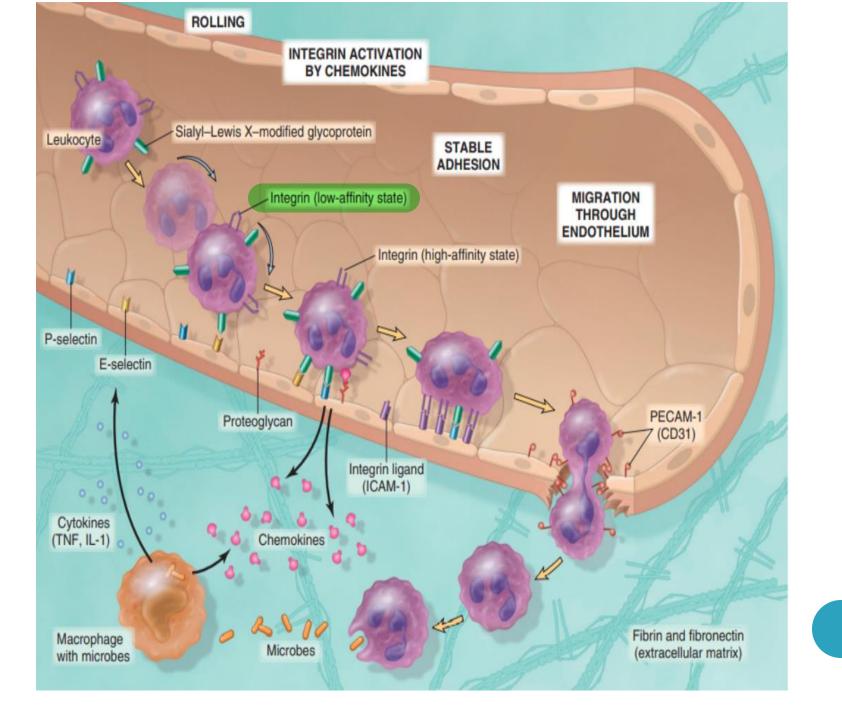
- The three members of this family are:
- E-selectin (also called CD62E), expressed on <u>endothelial cells</u>.
- P-selectin (CD62P), present on <u>platelets and endothelium</u>.
- L-selectin (CD62L), found on the surface of most <u>leukocytes.</u>

- The endothelial selectins are expressed at low levels on unactivated endothelium, they are upregulated after stimulation by cytokines and other mediators.
- Therefore, binding of leukocytes is largely restricted to the endothelium at sites of infection or tissue injury (where the mediators are produced).

activated endothelium المن يا عنون endothelial cell عنون المنطقة المن عنون المنطقة المناطقة المناطقة

• These weak selectin-mediated rolling interactions slow down the leukocytes and give them the chance to recognize additional adhesion molecules on the endothelium.





## 2.INTEGRINS Present only in leukocyte

- a family of leukocyte surface proteins that mediate the adhesion of leukocytes to endothelium and of various cells to the extracellular matrix.
- They are normally expressed on <u>leukocyte plasma membranes</u> in a <u>low-affinity form</u> and <u>do not adhere</u> to their <u>specific ligands</u> until the leukocytes are activated by chemokines.
- When the rolling leukocytes activated their integrins undergo conformational changes and cluster together, thus converting to a high-affinity form.

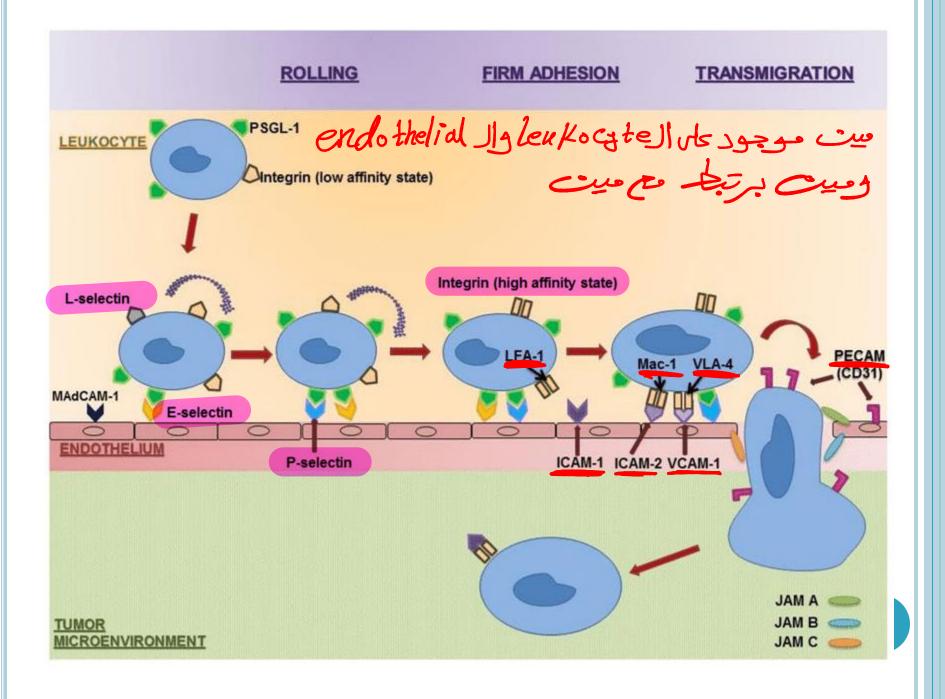
interleukin-1

tumor necrosis factor

TNF and IL-1, activate endothelial cells to increase their expression of ligands for integrins.

## الأعلة وق تكون الاختماروليس الاح INTEGRIN WITH THEIR LIGANDS:

- intercellular adhesion molecule-1 (ICAM-1), which binds to the integrins (LFA-1)
- macrophage-1 antigen (Mac-1): ICAM-2.
- VCAM-1 which binds to the integrin: VLA-4.
- The leukocytes stop rolling, and engagement of integrins by their ligands delivers signals leading to cytoskeletal changes that arrest the leukocytes and firmly attach them to the endothelium



#### II. LEUKOCYTE MIGRATION THROUGH ENDOTHELIUM

- <u>leukocy</u>tes migrate through the <u>vessel wall</u> primarily by:
- driven by <u>chemokines</u> produced in <u>extravascular</u> <u>tissues</u>
- > <u>squeezing</u> between cells at intercellular junctions.
- platelet endothelial cell adhesion molecule-1 (PECAM-1)\*

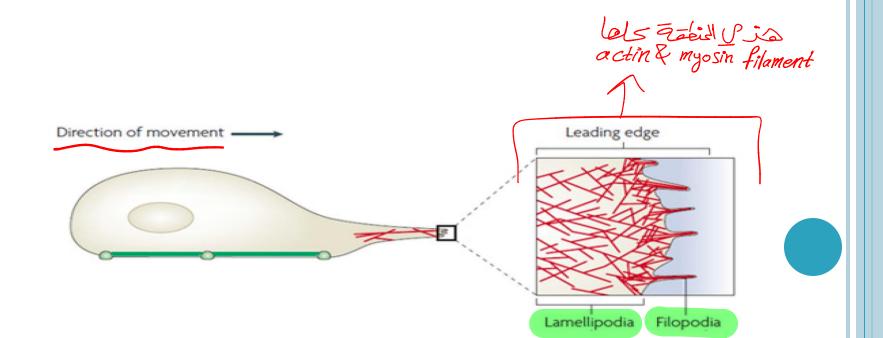
endothelial ایس اوساعد ال

 After traversing the endothelium, leukocytes pierce the basement membrane, probably by secreting collagenases, and they enter the extravascular tissue.

#### CHEMOTAXIS OF LEUKOCYTES

- after <u>leaving the circulation</u>, <u>movement of leukocytes</u> in the tissues, toward the site of injury occurs along a chemical gradient.
- Exogenous and endogenous substances can act as chemoattractants, including the following:
- <u>Bacterial products.</u>
- Cytokines, especially those of the chemokine family.
- **3** Components of the complement system, particularly <u>C5a</u>.
- Products of the lipoxygenase pathway of arachidonic acid (AA) metabolism, particularly leukotriene B4 (LTB4)

• The leukocyte moves by extending filopodia that pull the back of the cell in the direction of extension, much like the front wheels



#### TYPE OF INFLAMMATORY CELLS DURING INFLAMMATION:

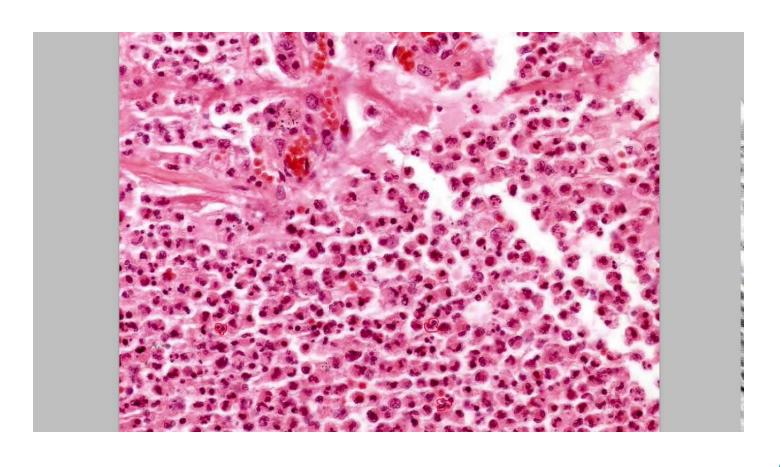
- In most forms of acute inflammation:
- Neutrophils predominate in the inflammatory infiltrate during the first 6 to 24 hours.
- 20 Monocyte-derived macrophages over 24 to 48 hours.
  - in Chronic inflammation=> 1-lymphocytes
    2-plasma cells

what is the most common mechanism of destruction?

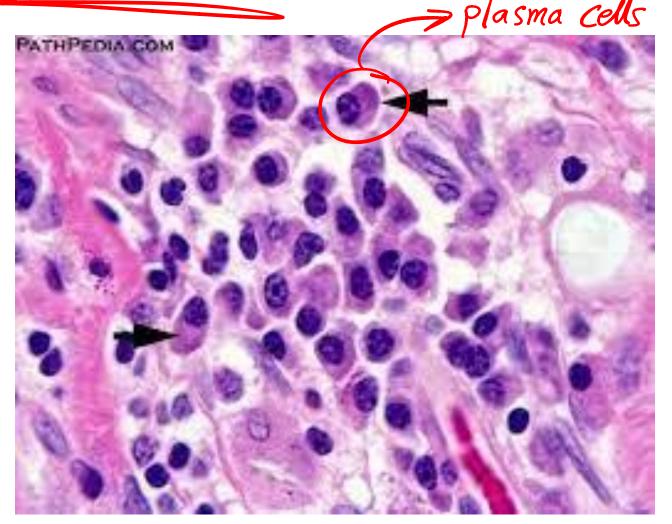
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neutrophils co

A Cute inflammation

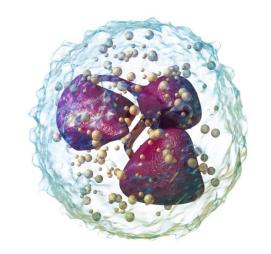


# Chronic inflammation Plasma cells

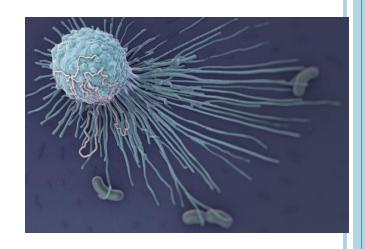


#### NEUTROPHILS, WHY IN ACUTE?

- More numerous in the blood than other leukocytes.
- > They respond more rapidly to chemokines.
- They may attach more firmly to the adhesion molecules that are rapidly induced on endothelial cells, such as P- and E-selectins.
- After entering tissues, neutrophils are shortlived; they undergo apoptosis and disappear within 24 to 48 hours.



#### MACROPHAGES



- Survive longer.
- May proliferate in the tissues, and thus they become the dominant population in prolonged inflammatory reactions.

#### EXCEPTIONS ARE PRESENT?

- Infection with Pseudomonas bacteria, the cellular infiltrate is dominated by neutrophils for several days.
- In viral infections, lymphocytes may be the first cells to arrive.
- In allergic reactions, eosinophils may be a prominent cell type.

#### LEUKOCYTE ACTIVATION

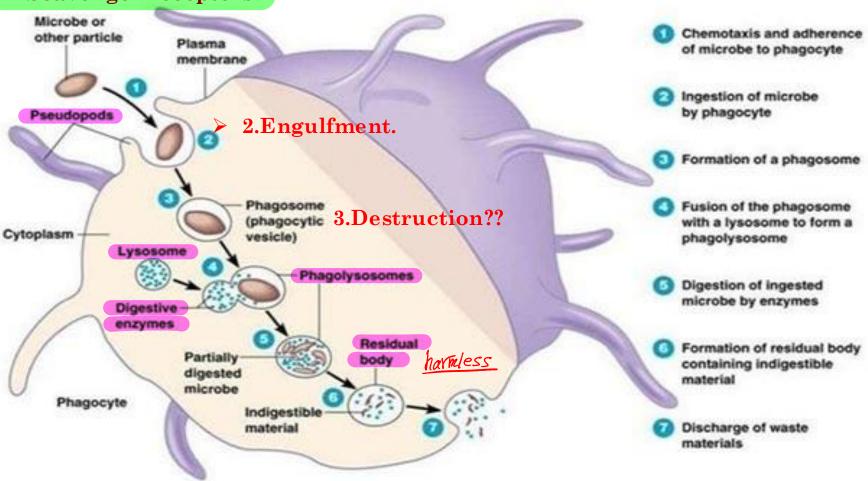
- After leukocytes (particularly neutrophils and monocytes) have been recruited to a site of infection or tissue injury they must be activated to perform their functions.
- The functional responses that are most important for destruction of microbes and other offenders are:
- Phagocytosis.
- Intracellular killing

#### 1. Phagocytosis

- Phagocytosis involves three sequential steps:
- (1) recognition and attachment of the particle to be ingested by the leukocyte.
- (2) engulfment, with subsequent formation of a phagocytic vacuole.
- (3) killing or degradation of the ingested material



- **≻**Mannose receptors.
- Scavenger receptors



#### DESTRUCTIVE MECHANISMS:

- o 1. respiratory burst: in neutrophi s
- Is the rapid release of the <u>reactive oxygen</u> species (ROS), superoxide anion (O2) and hydrogen peroxide (H2O2).

not all types are toxic o 2. Nitric Oxide:

- Endothelial (eNOS): maintain vascular tone
- Neuronal (nNOS): acts as neurotransmitter.
- o Inducible (iNOS): involved in microbial killing, expressed when macrophages are activated by cytokines (e.g., IFN-γ) or microbial products.

  interferon gamma

 3. Granule Enzymes: Neutrophils contain granules packed with enzymes and anti-microbial proteins

#### Azurophilic (also known as primary) granules

HBP, neutrohil elastase, Cathepsin G, Protease 3, azurocidin, myeloperoxidase

#### Secondary granules

Lysozyme, Alkaline phosphatase, Collagenase, Vit B12 binding protein, Lactoferrin



Tertiary granules

Gelatinase, Cathepsin B, Cathepsin D, β-d-Glucuronidase, α-Mannosidase, Plasminogen activator, MMP-9

- These <u>harmful proteases</u>, however, <u>are normally</u> controlled by a system of <u>anti-proteases</u> in the serum and tissue fluids.
- For most among these is <u>α1-anti-trypsin</u>, which is the major inhibitor of neutrophil elastase.
- A deficiency of these inhibitors may lead to sustained action of leukocyte proteases, as is the case in patients with α1-anti-trypsin deficiency—

#### Leukocyte-Mediated Tissue Injury

- Leukocytes are important mediators of injury to normal cells and tissues under several circumstances:
- \* As part of a normal defense reaction against infectious microbes, in some infections that are difficult to eradicate, such as TB, hepatitis.
- \* In certain autoimmune diseases.
- \* In allergic diseases, including asthma

# TERMINATION OF THE ACUTE INFLAMMATORY RESPONSE

- 1. Degradation of mediators.
- 2. Neutrophils apoptosis.
- 3. Stop signals:
- \* a switch in the type of arachidonic acid metabolite produced, from proinflammatory <u>leukotrienes</u> to anti-inflammatory <u>lipoxins</u>.
- liberation of anti-inflammatory cytokines, including transforming growth factor-β (TGF-β) and IL-10, from macrophages

all of the following mediators ansidered as inflammatory mediators except: 1+2

### ANY QUESTION????