

Immunity and How Vaccines Work

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Learning Characteristics

- Active: “let’s try it out and see how it works”
- Reflective: “let’s think it through first”
- Visual: learn best by seeing pictures, diagrams, or demonstrations
- Verbal: learn best by written or spoken words

Definitions

Antibody: immunoglobulin produced mainly by plasma cells; identifies and neutralises pathogens

Antigen: substance that can provoke an immune response

Clone: group of identical descendants

Epitope: the specific piece of the antigen to which an antibody binds.

Humoral: relating to fluids

Innate: present from birth

Definitions

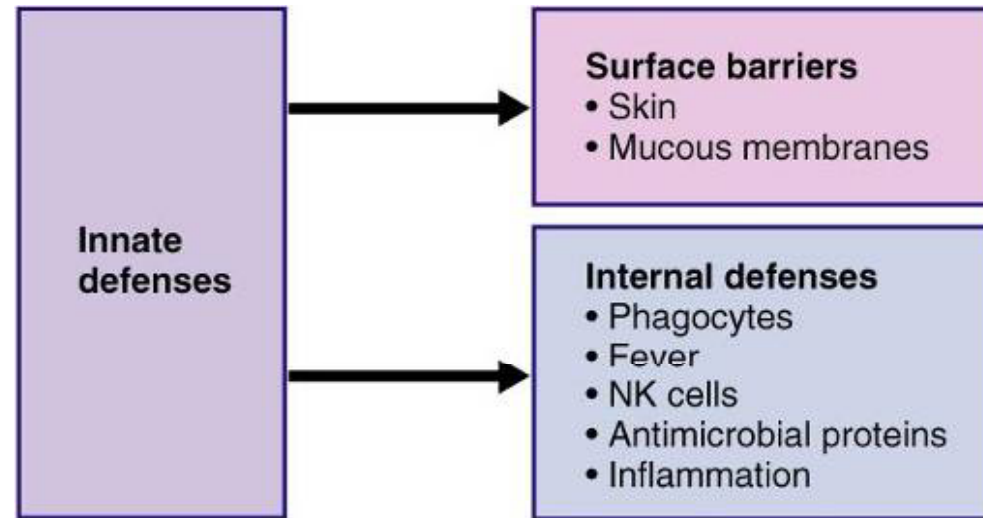
- **Immunity**: resistance to pathogens and their toxic effects
(immunis - exempt, protected)
- **Immune system** - cells, tissues, and molecules that mediate resistance to infections
- **Immunology** - study of structure and function of the immune system
- **Immunity** - resistance of a host to pathogens and their toxic effects
- **Immune response** - coordinated response to introduction of foreign substances; mediated by cells and molecules of the immune system

Role of Immune System

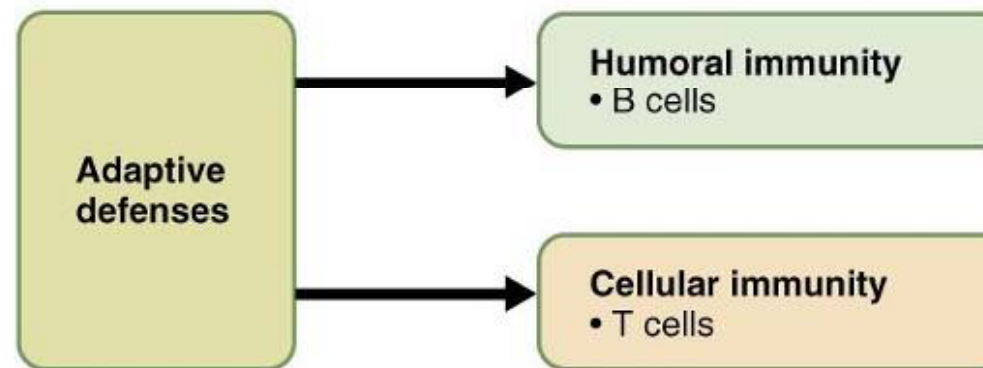
- Defense against microbes
- Defense against the growth of tumor cells
 - kills tumor cells
- Homeostasis
 - destruction of abnormal or dead cells
(e.g. dead blood cells, Ag-Ab complex)

Immune System Overview

- Hematopoietic
- Vasculature
- Lymphatic



(a)



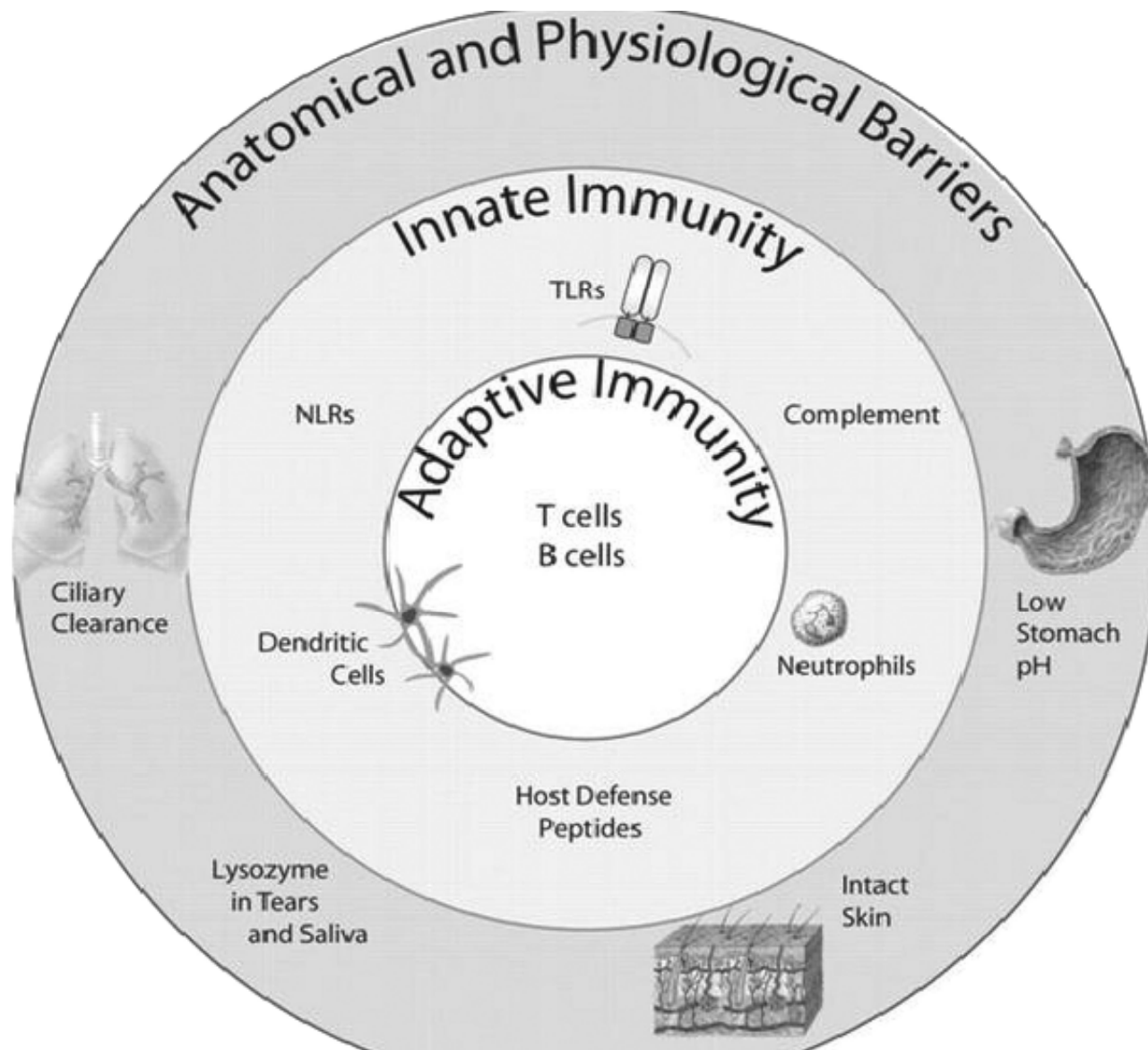
(b)

Immune System

1. Organs
2. Cells
3. Molecules

Innate Immunity

- Relies on already formed components
- Response within minutes to limit the infection
- Non-specific
 - same molecules / cells respond to a range of pathogens
- No memory
 - same response after repeated exposure
- Does not lead to clonal expansion



Immune System Organs

- Tonsils and adenoids
- Thymus
- Lymph nodes
- Spleen
- Payer's patches
- Appendix
- Lymphatic vessels
- Bone marrow

Immune System Cells

- Lymphocytes
 - T-lymphocytes
 - B-Lymphocytes, plasma cells
 - natural killer lymphocytes
- Monocytes, Macrophage
- Granulocytes
 - neutrophils
 - eosinophils
 - basophils

Immune System Molecules

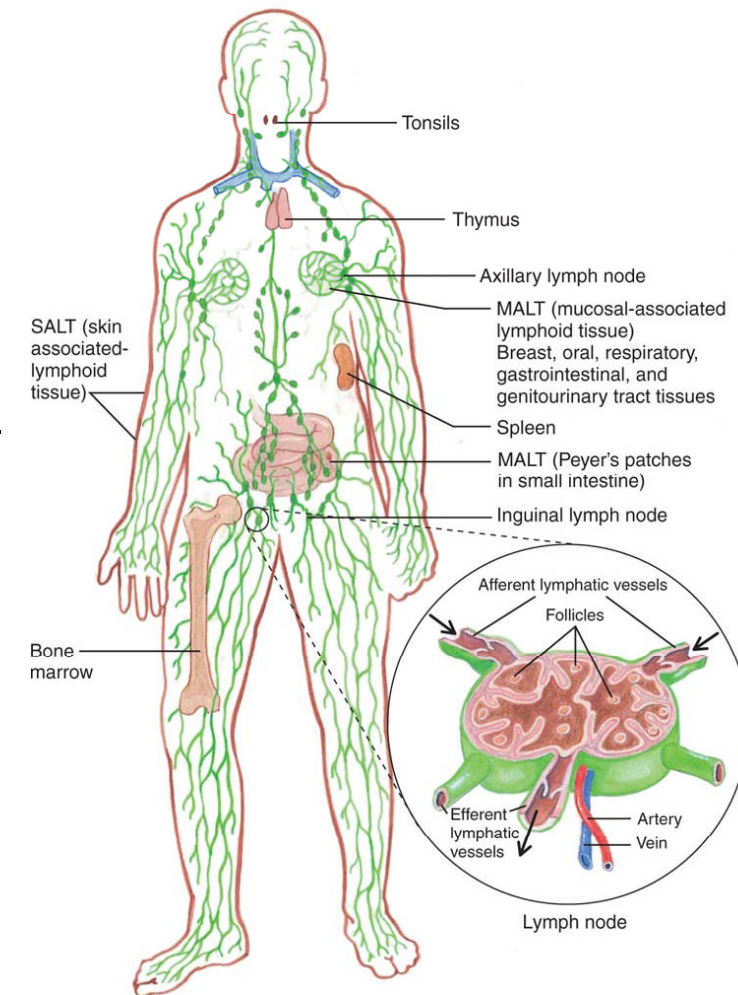
- Antibodies
- Complement
- Cytokines
- Interleukins
- Interferons
- etc

Lymphoid System

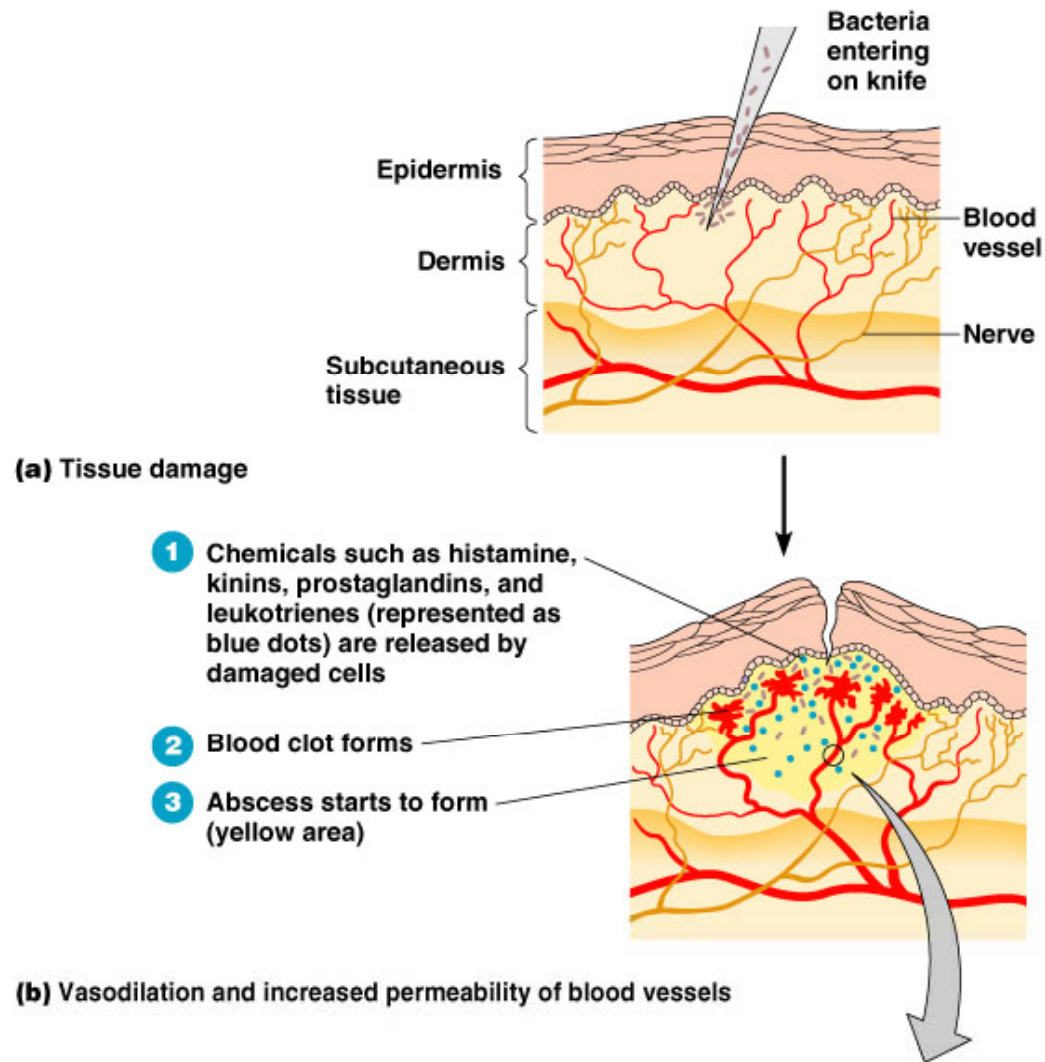
Lymphoid organs: Sites where lymphocytes gather to encounter antigens

Skin, lymph nodes, spleen, thymus, tonsils, adenoids
GIT

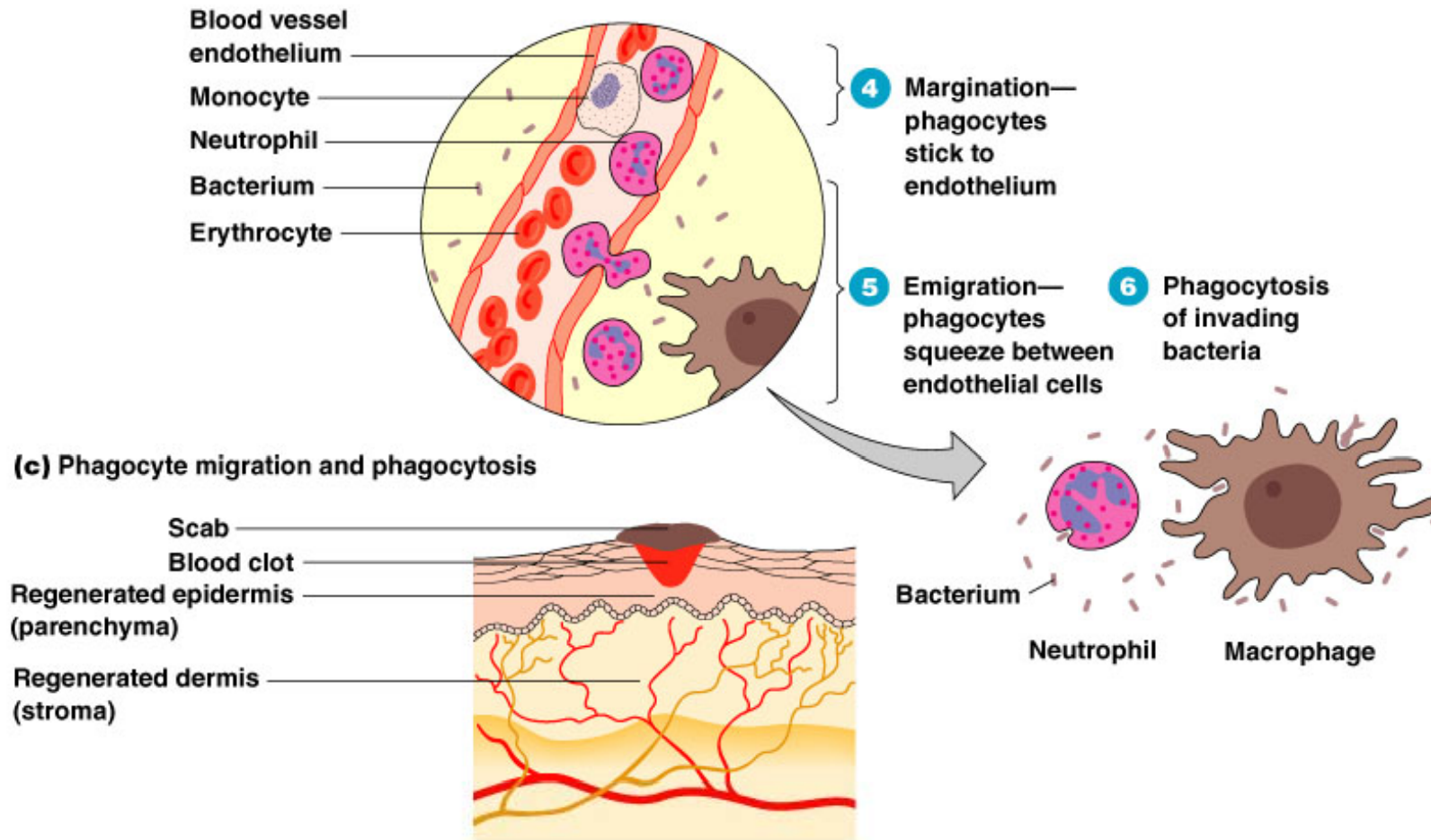
Situated to allow for initiation of immune response from nearly any place in body

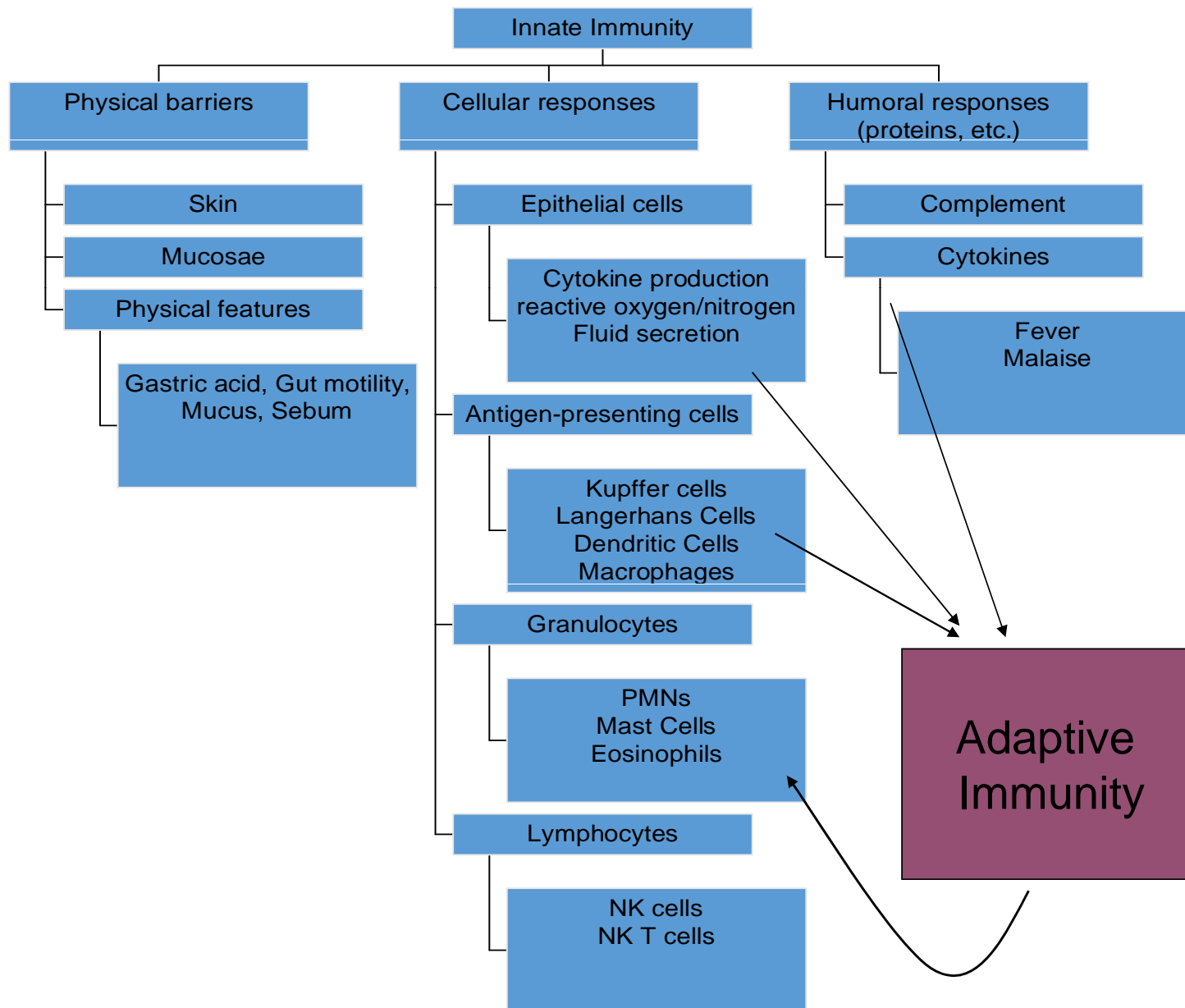


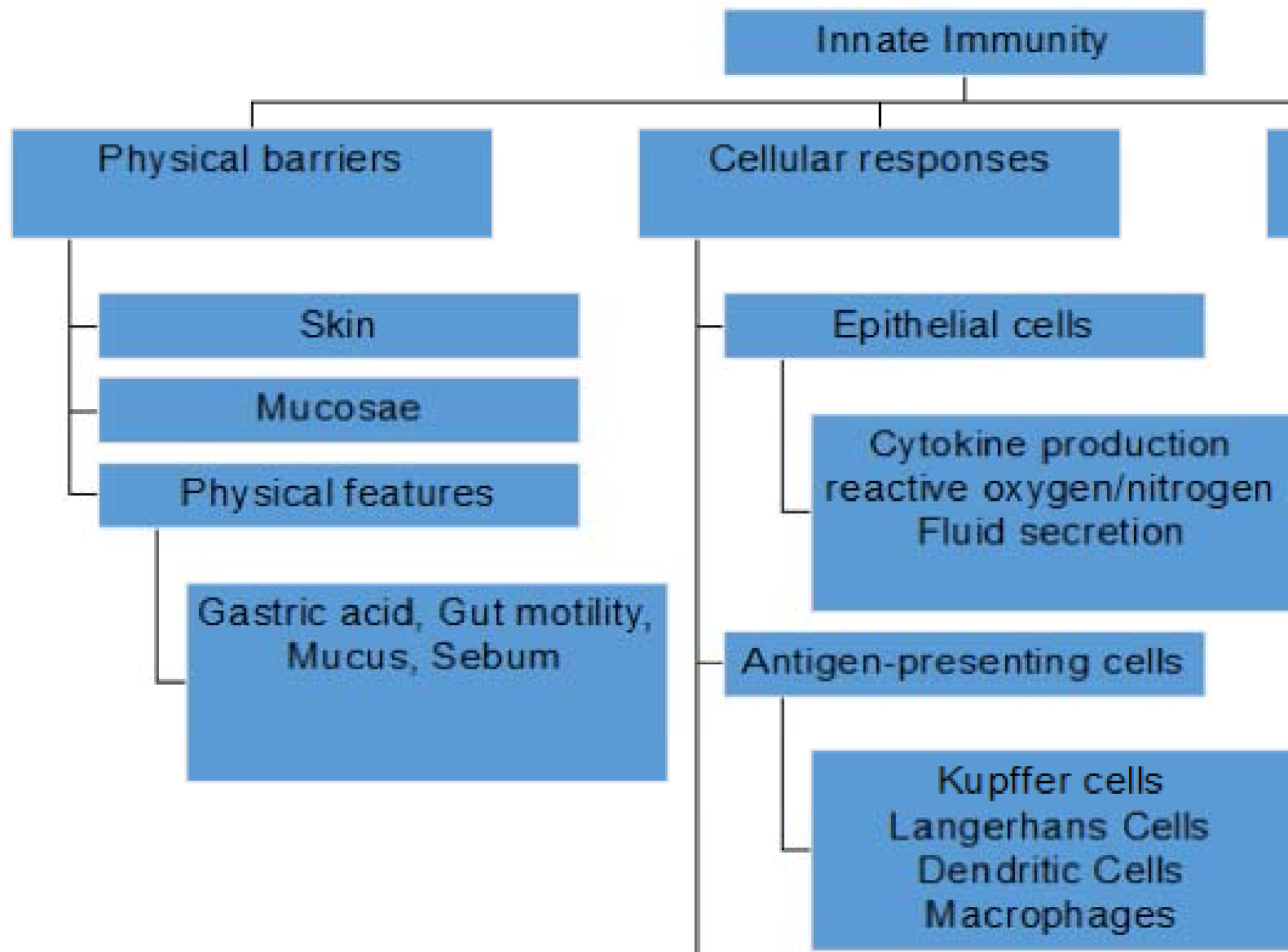
Inflammation

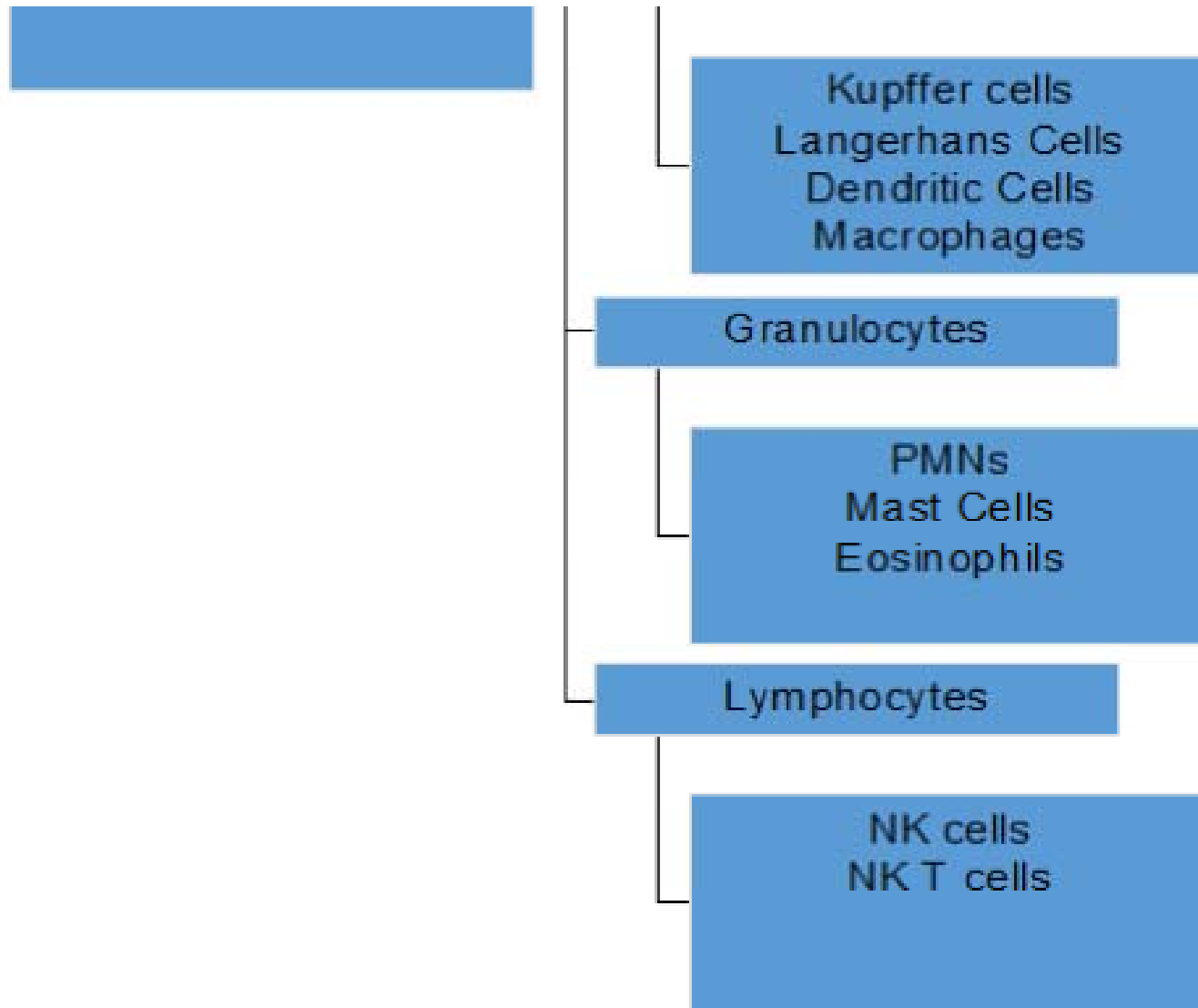


Inflammation









Innate Immunity

Cellular responses

Epithelial cells

Cytokine production
reactive oxygen/nitrogen
Fluid secretion

Antigen-presenting cells

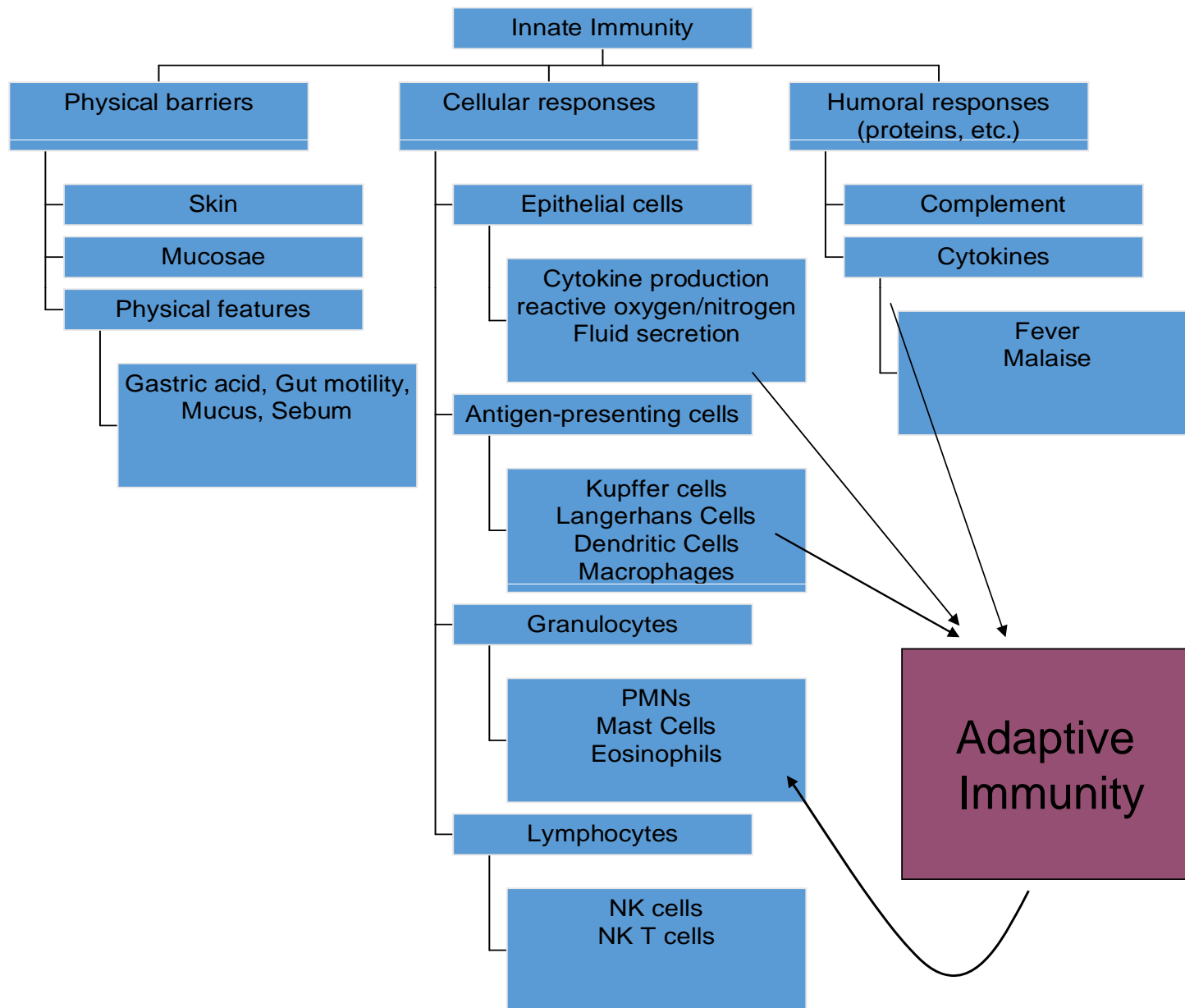
Kupffer cells

Humoral responses (proteins, etc.)

Complement

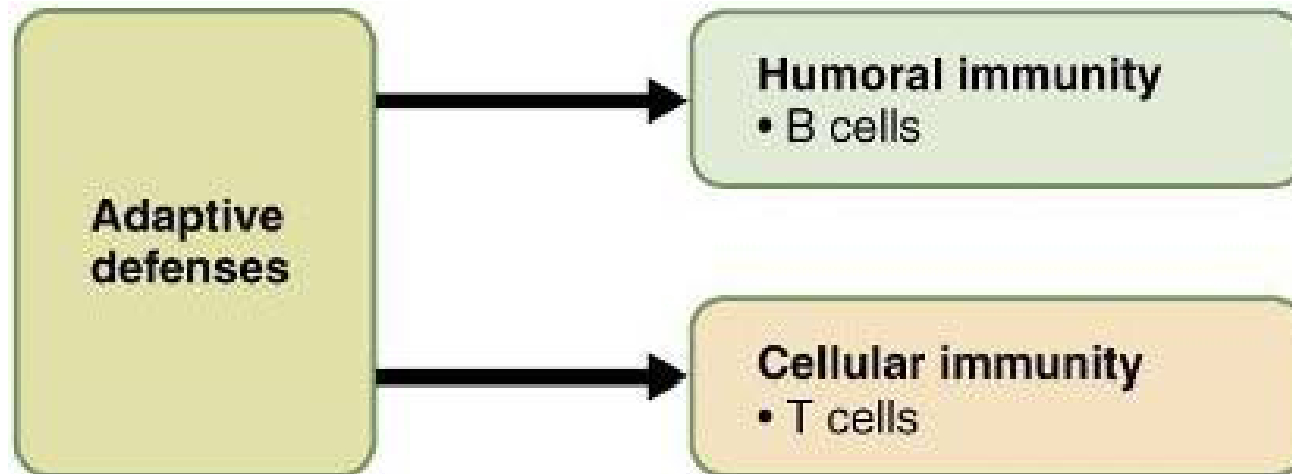
Cytokines

Fever
Malaise



Adaptive Immune System

- Adaptive: responds to specific foreign substances



Adaptive Immunity

Immune system adapts to previously unseen molecules

Induction by infection, vaccination

Immune system mounts response

Immune response must:

Recognise micro-organism as foreign

Respond by producing specific antibodies, lymphocytes

Mediate elimination of organisms

Form memory

Adaptive Immune System: Cells

Antigen Presenting Cells (APCs)

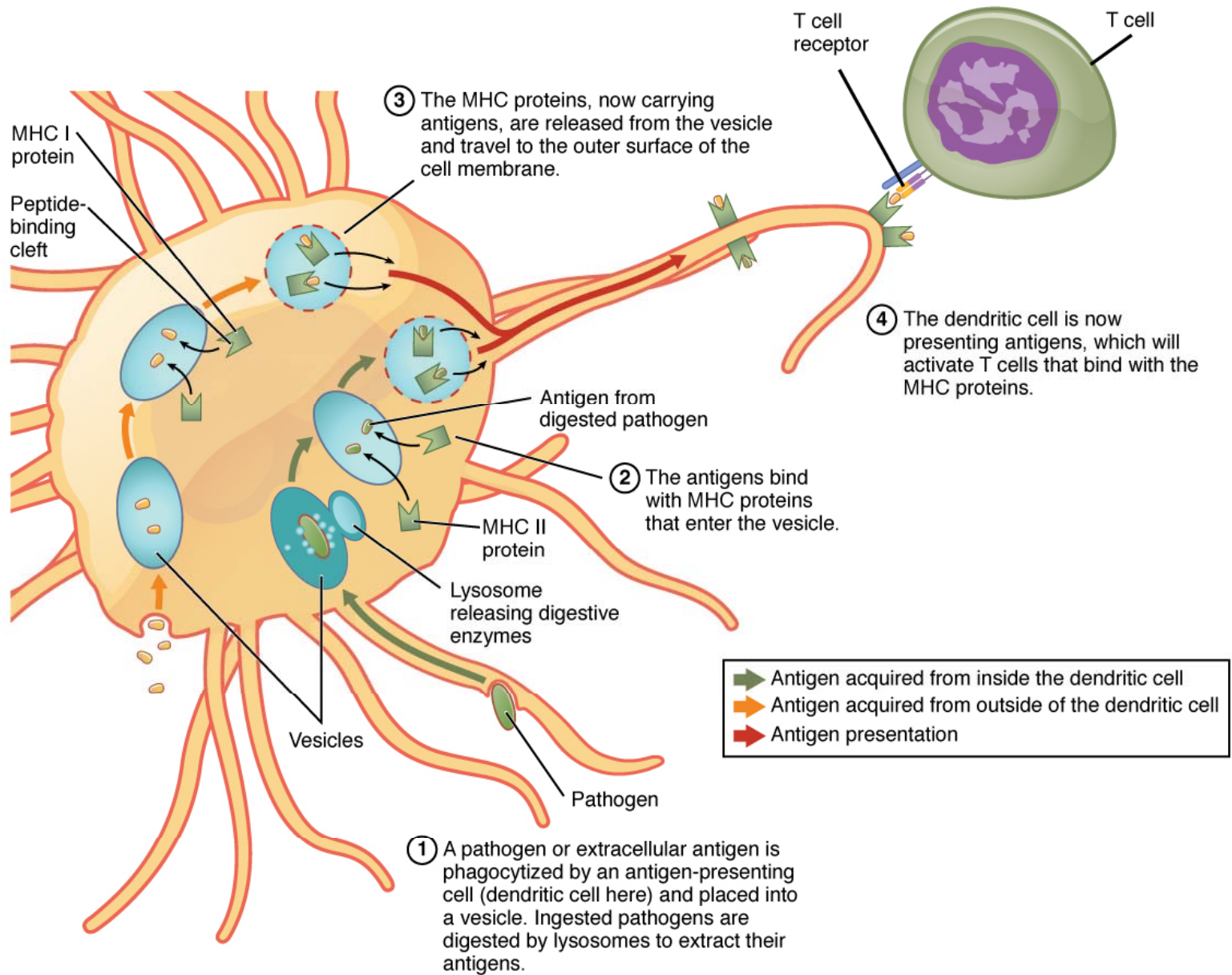
Macrophages & B lymphocytes

Ingest foreign material

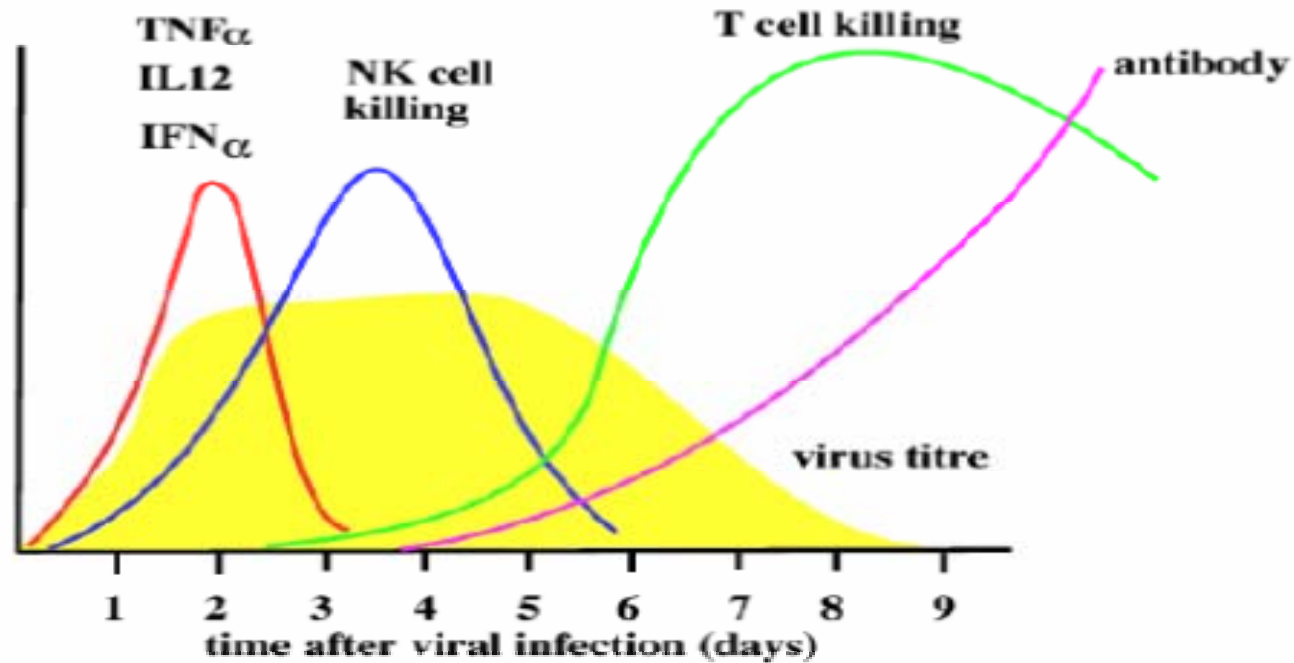
Present antigenic fragments on their cell

Fragments recognised by T-cells.

Antigen Presenting Cell



Innate and Adaptive Immunity Work Together



Adaptive Immunity: active and passive

	Active Immunity	Passive Immunity
Natural	Clinical, sub-clinical infection	via breast milk, placenta
Artificial	Vaccination: Live, non-live	Immune serum, immune cells

Cell-mediated Immune Response

Primary response

- Production of specific clones of effector T cells and memory clones
- Develops in several days
- Does not limit the infection

Secondary response

- more pronounced, faster
- more effective at limiting the infection

Generation of Immune Response

~ 4-7 days to generate **primary immune response**

- IgM produced then IgG
- After ~3 weeks primary response turned off
- Ab-producing cells, memory B cells formed
- Memory B cells secrete Ab when same agent encountered again
- This is **secondary immune response**
- **Memory** lasts weeks / years

Adaptive System: T Cells

Sorted in the Thymus

Manage the immune response

Eliminate microbes that survive within
phagocytes or other infected cells

Produce memory cells

T lymphocytes

Two types

- Helper T- lymphocytes (T_H L)
 - activate phagocytes to kill microbes
 - activate B cell
- Cytotoxic T-lymphocyte (CTL)
 - destroy infected cells containing microbes

Functions of T_H Cells

Orchestrate immune response

- Recognize antigen presented by APC
- Cytokines are delivered
- Cytokines activate APC to destroy antigen

Activate B cell

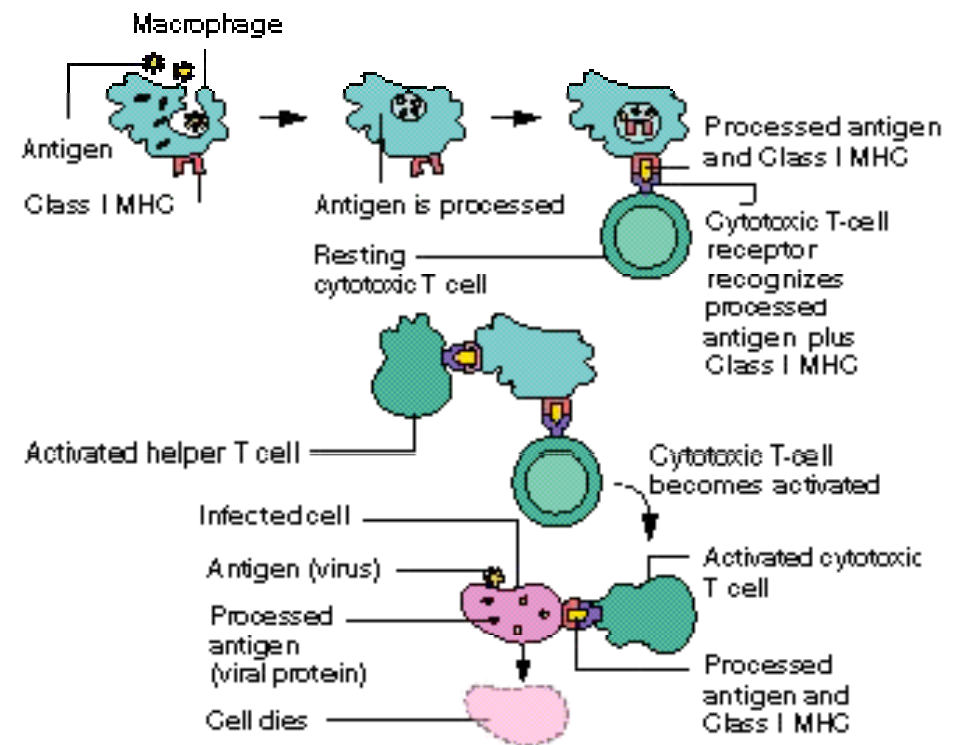
If T_H cell encounters B cell bearing antigen

- T_H cell produces cytokines
- Cytokines activate B cell
- B cell proliferates
- Drives formation of B memory cells

Cell-mediated Immune Response

1. T-cell
 - recognizes antigen on macrophage
 - identifies molecules on cell surfaces
2. T-cell goes into effector stage that can kill infected cells

11



I1

Is this sentence right?

Suzi Lyons, 20/03/2006

Adaptive System: B Cells

- Eliminate extra-cellular microbes and their toxins
- Are APCs and Ab-producing cells

Antigen binds to B-cell receptors

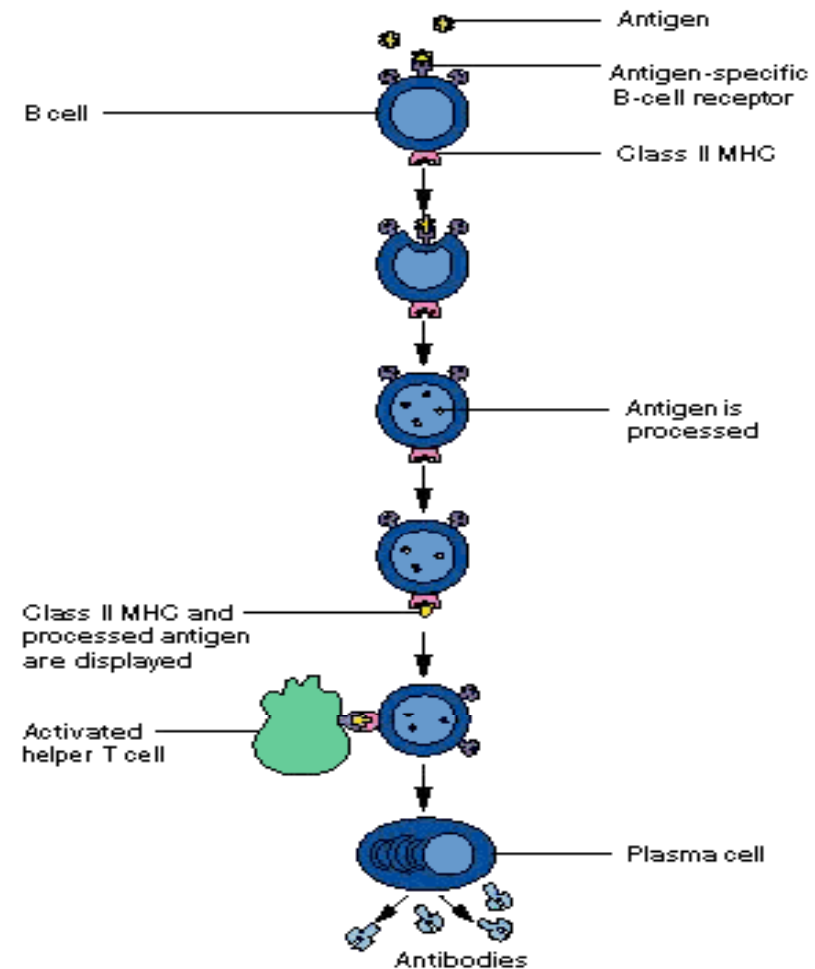
Antigen ingested by B-cell

B cell presents antigen to T-cell

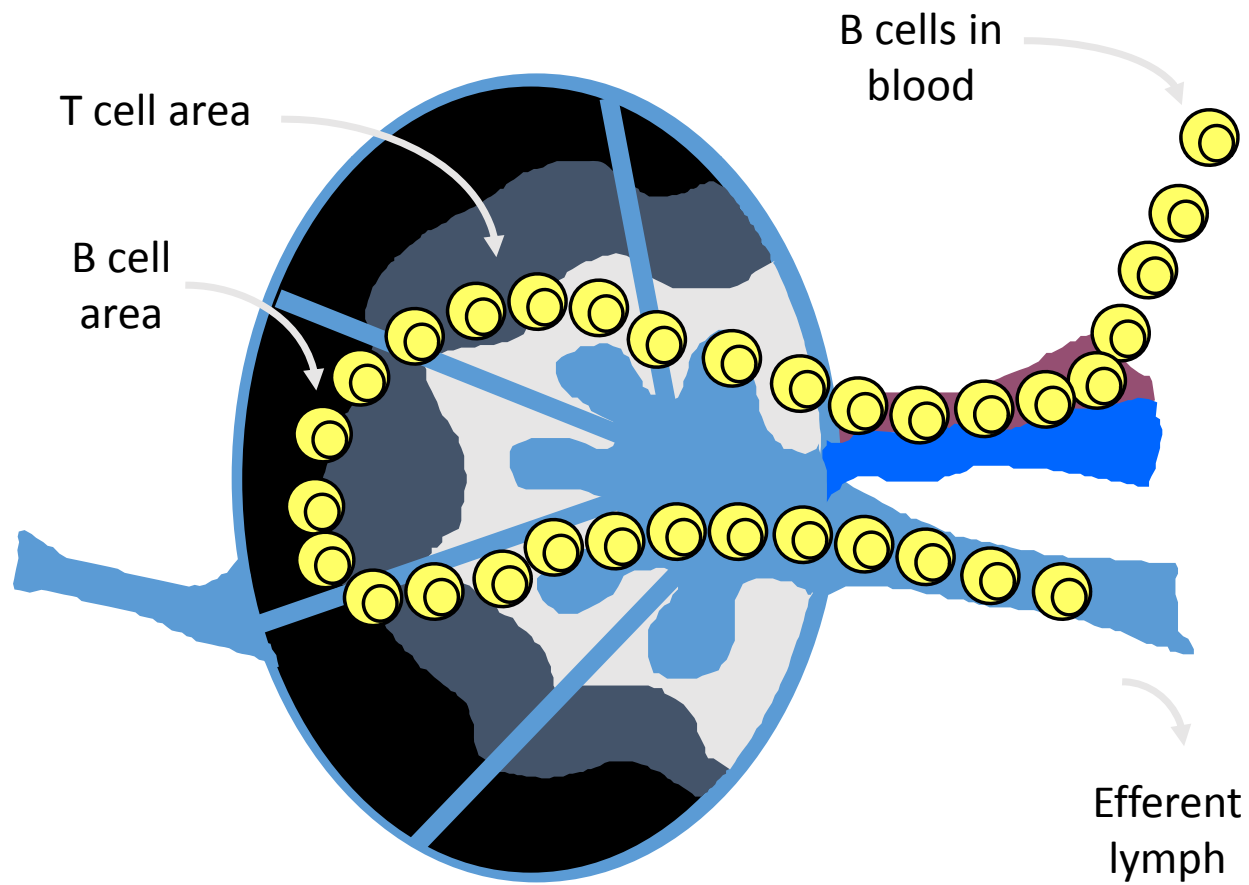
B cell produces antibody

Humoral (B cell) Immune Response

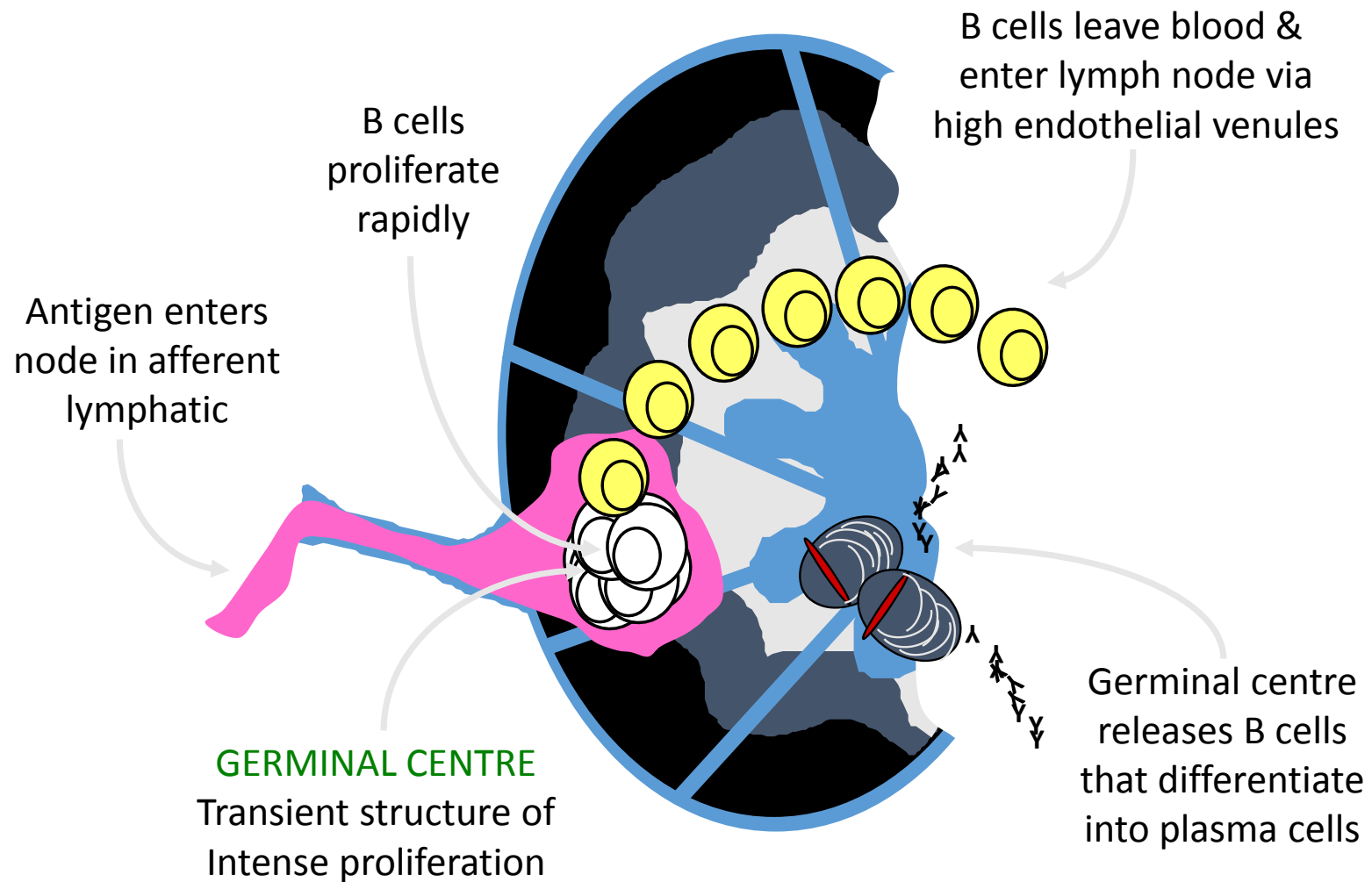
1. B lymphocytes recognize specific antigens
 - proliferate and differentiate into Ab-secreting plasma cells
2. Abs bind to specific Ags on microbes; destroy microbes
3. Some B lymphocytes evolve into memory cells



Recirculating B cells pass through lymphoid organs



Recirculating B cells are trapped by foreign antigens in lymphoid organs



Summary (1)

Innate immunity

- relies on mechanisms already existing before microbe infects host
- is the first line of defense
- has no memory for subsequent exposure
- relies on non specific mechanisms

Summary (2)

Adaptive immunity

- develops following entry of microbe
- comes into action after innate immunity fails to get rid of microbe
- has memory to deal with subsequent exposure
- happens through specific cells
 - T cells (cell mediated)
 - B cells (antibody mediated)

Summary (3)

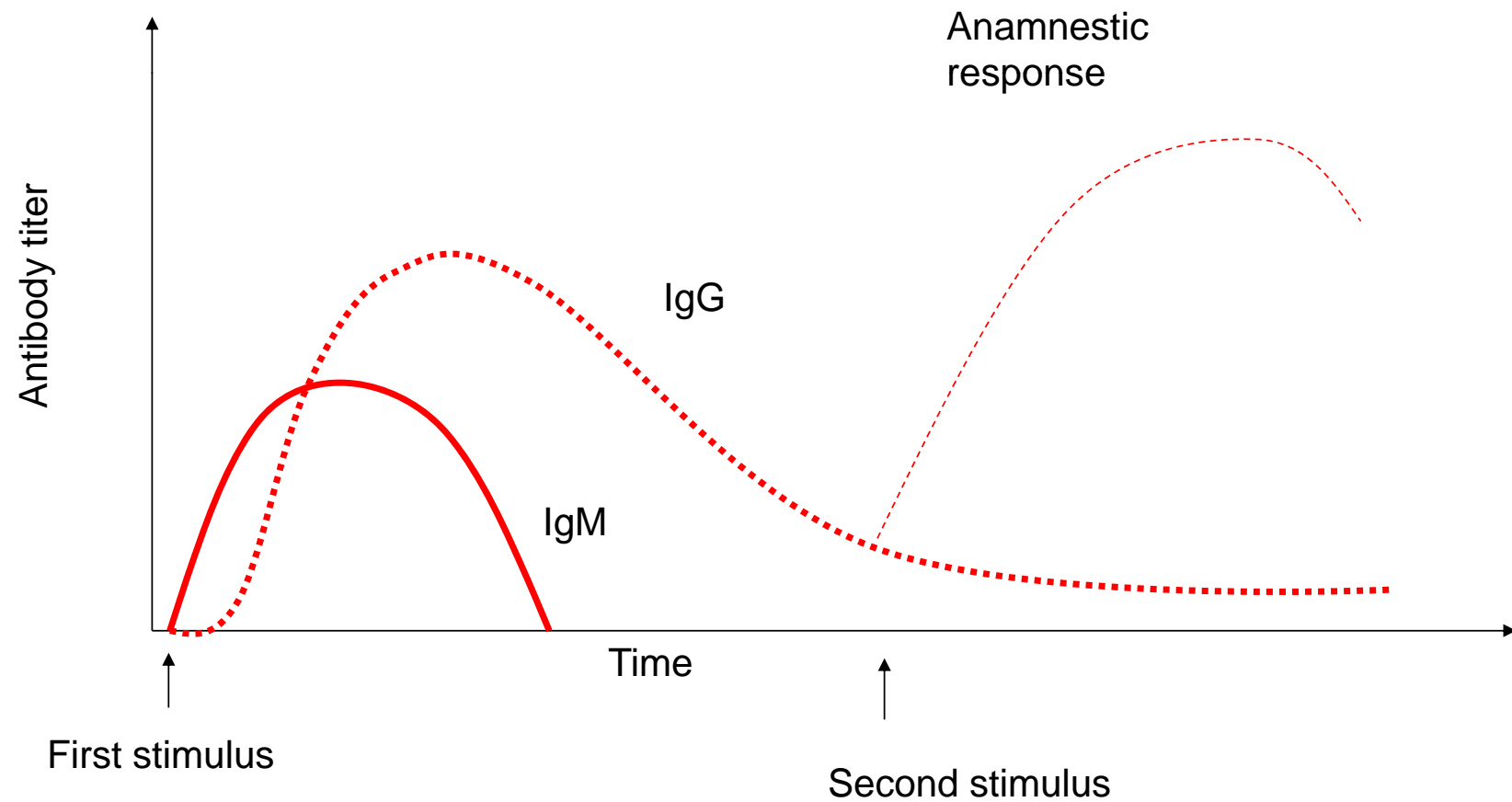
Primary immune response

- short lasting
- smaller in magnitude

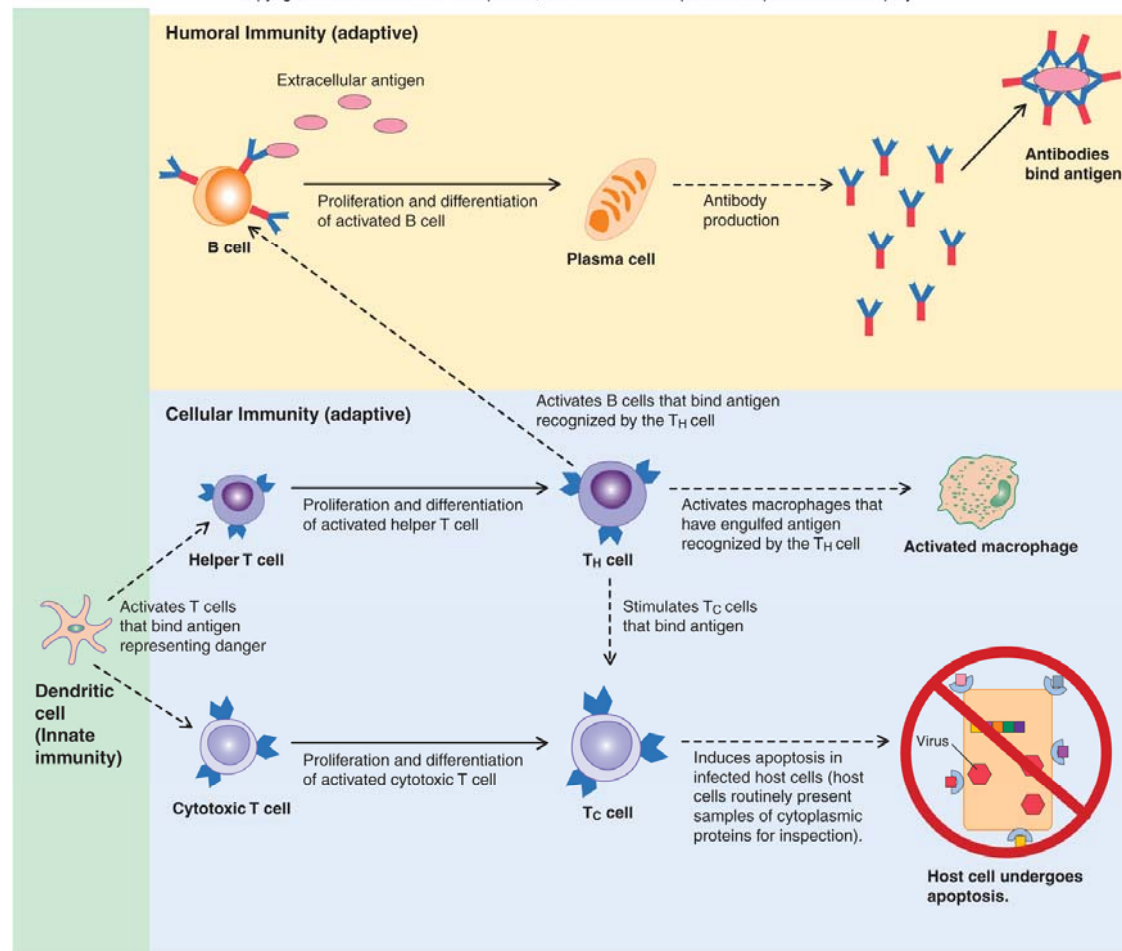
Secondary immune response

- longer in duration
- larger in magnitude
- develop 'memory cells' following primary response

IgM – IgG sequential response



Summary of Adaptive Immune Response



What is a Vaccine?

- Biological preparation that improves immunity to a particular disease
- Contains antigen(s) that resembles a pathogen
- Stimulates immune system to recognise antigen as foreign,
destroy it, and "remember" it
- Pathogens later encountered cause memory response

Types of vaccines

	Live Attenuated vaccines	Inactivated vaccines	Toxoids	Cellular fraction vaccines	Recombinant vaccines
	<ul style="list-style-type: none">•BCG•Typhoid oral•Oral polio•Yellow fever•Measles•Mumps•Rubella•Intranasal Influenza	<ul style="list-style-type: none">•Typhoid•Cholera•Pertussis•Plague•Rabies•IPV•Influenza•Japanese encephalitis	<ul style="list-style-type: none">•Diphtheria•Tetanus	<ul style="list-style-type: none">•Meningococcal polysaccharide vaccine•Pneumococcal polysaccharide vaccine•Hepatitis B polypeptide vaccine	<ul style="list-style-type: none">•Hepatitis B vaccine

Live attenuated pathogens

MMR, BCG, Cholera

Inactivated pathogens

IPV, Pertussis

Subunit / Peptide components

HepB (Hepatitis B surface antigen)

Influenza (purified HA & NA antigens)

Conjugate (polysaccharides joined to protein carrier)

HiB , PCV, MenB, C, ACWY

Toxoids

Diphtheria, tetanus

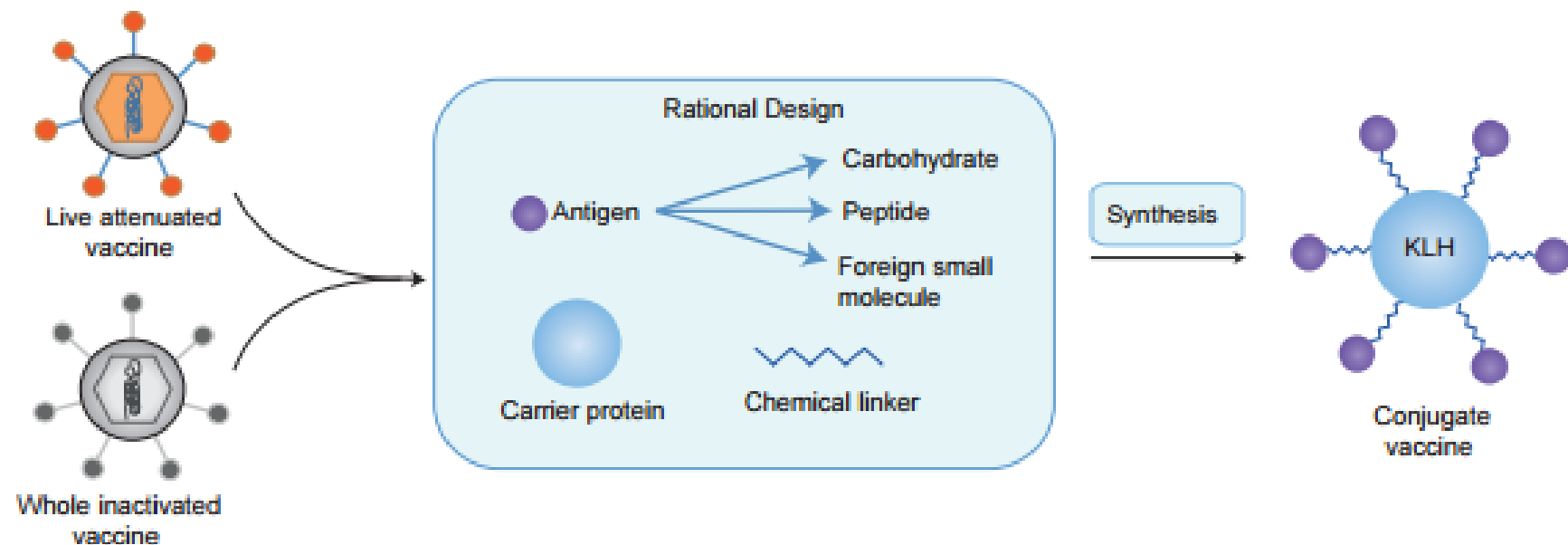


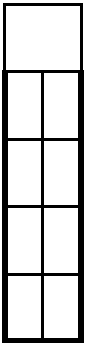
Figure 1 | Modular approach to rationally designed synthetic vaccines. The empirical nature of traditional vaccine development, which relies on the use of live attenuated or whole inactivated viruses, is being replaced by a more sophisticated molecular approach that harnesses computational design and advanced synthetic techniques to create well-defined conjugate vaccines.

Pros and Cons of Different Types of Vaccines

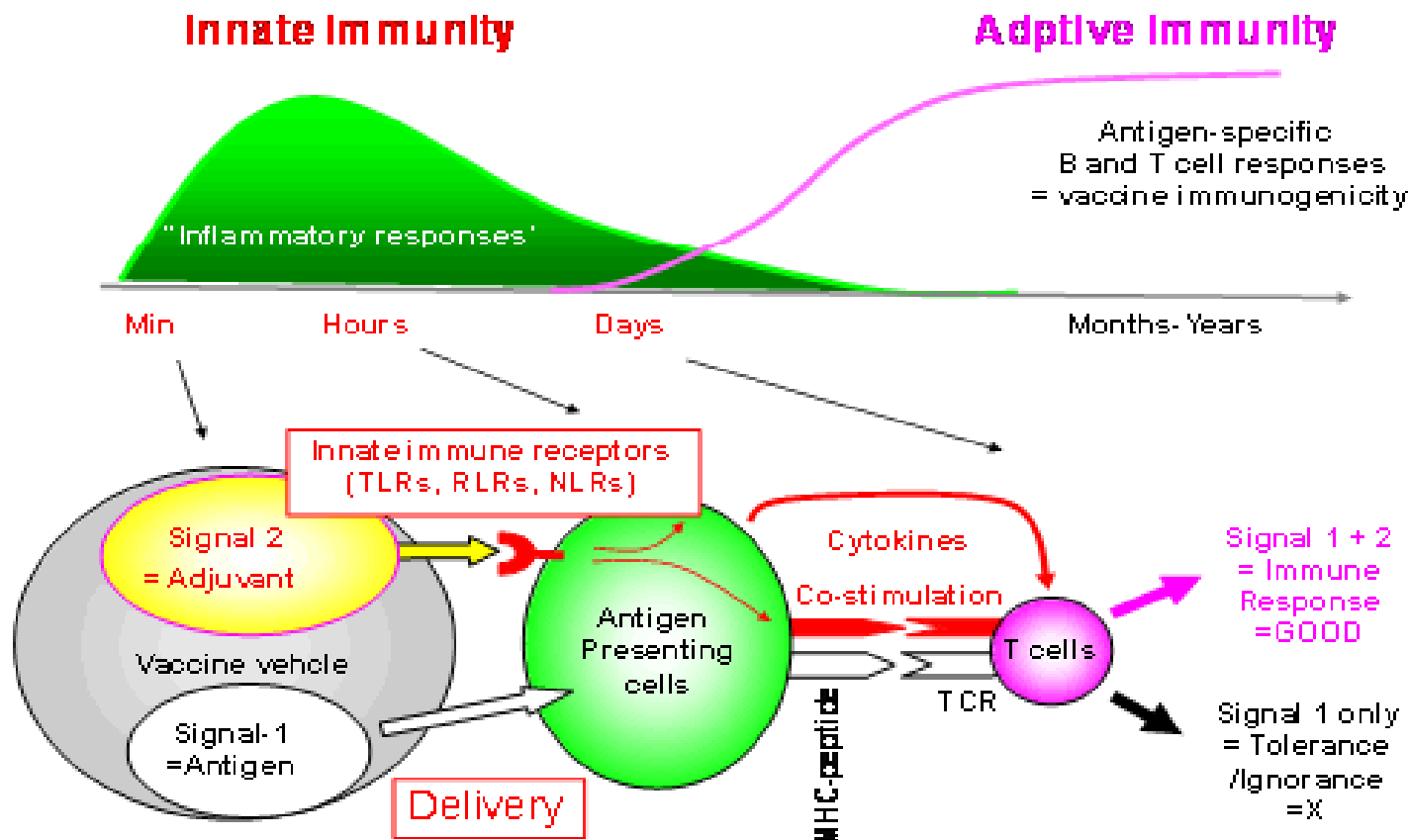
Live attenuated pros: better immune response
cons: reversion - oral polio
infection in immunodeficient
less stable

Inactivated pros: may be safer; more stable than live
cons: weaker immune response; boosters
contaminants

Molecular components pros: no living pathogen present
very stable
fewer side effects
cons: fewer epitopes
weaker immune response



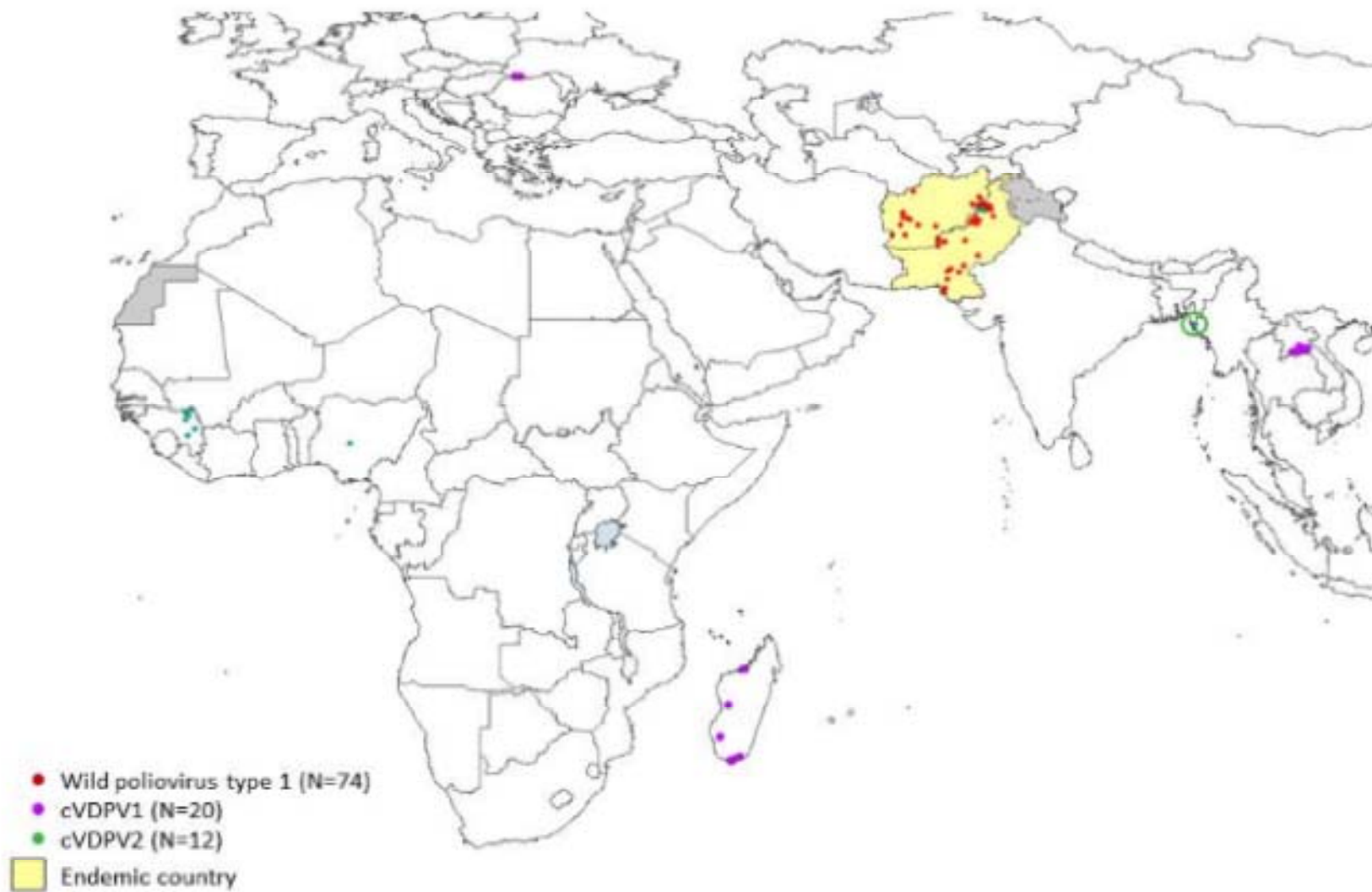
Innate Control of Vaccine Immunogenicity



Reported Cases of VPDs, Europe

	1980	2000	2011	2012	2013
Diphtheria	608	1,585	33	32	32
Measles	851,849	37,421	37,073	26,982	25,375
Mumps	No data	243,344	27,448	38,141	35,075
Pertussis	90,546	53,675	34,432	56,941	27,824
Polio	549	0	0	0	0
Rubella	No data	621,039	9,672	30,509	39,614
Rubella (CRS)	No data	48	7	60	50
Tetanus	1,715	412	197	194	93

Wild Poliovirus & cVDPV Cases¹, 2015
01 January – 31 December



¹Excludes viruses detected from environmental surveillance.

POLIO TYPE

WPV & cVDPV

SURVEILLANCE

- ☐ ADEQUATE STOOL COLLECTION
(Rolling 12 Month Period)
- ☐ NONPOLIO ACUTE FLACCID PARALYSIS
(Rolling 12 Month Period)
- ☐ ENVIRONMENTAL
(Rolling 6 Month Period)

YEAR-TO-DATE 2016

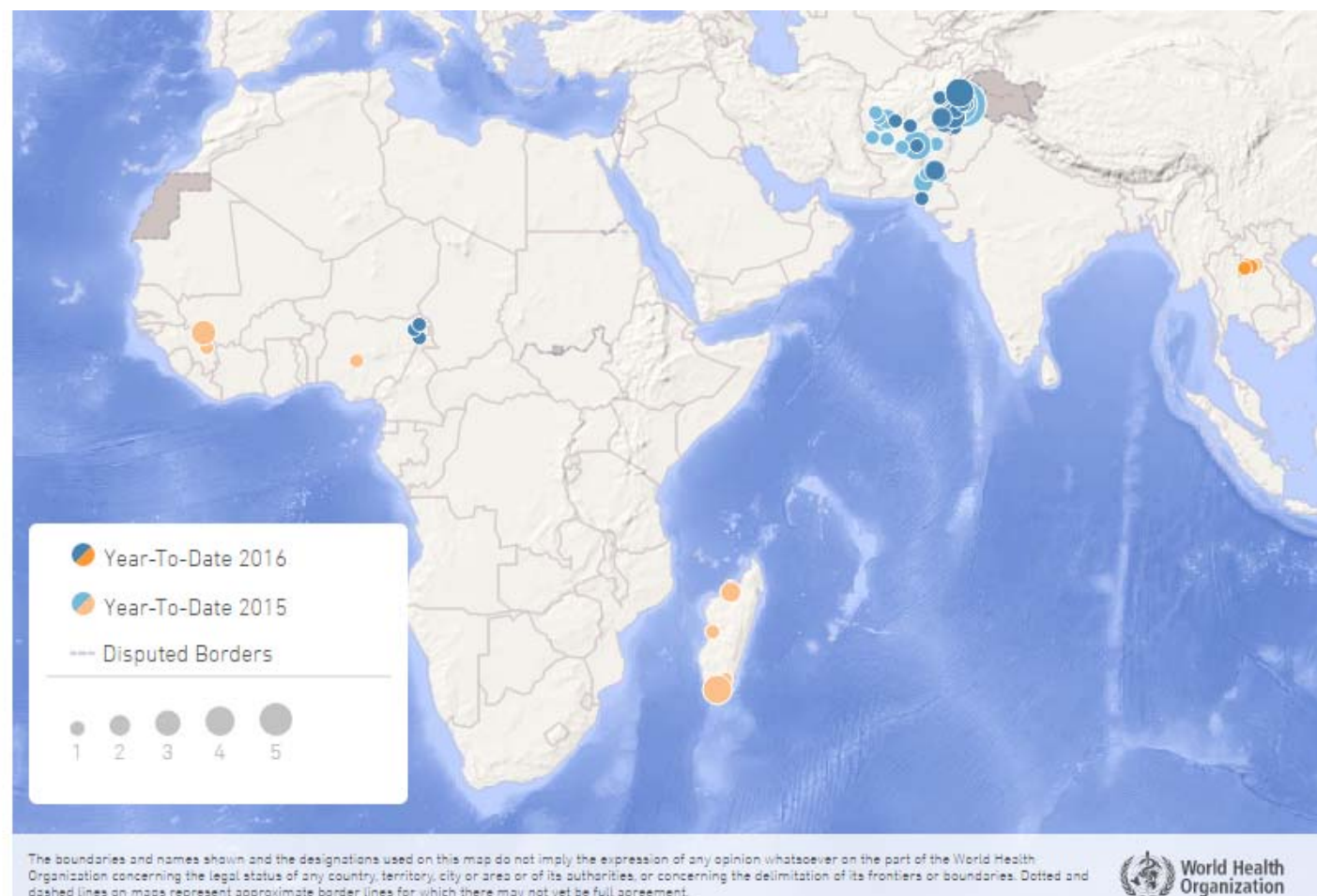
Jan 1 - Oct 10, 2016

26 WPV **3** cVDPV

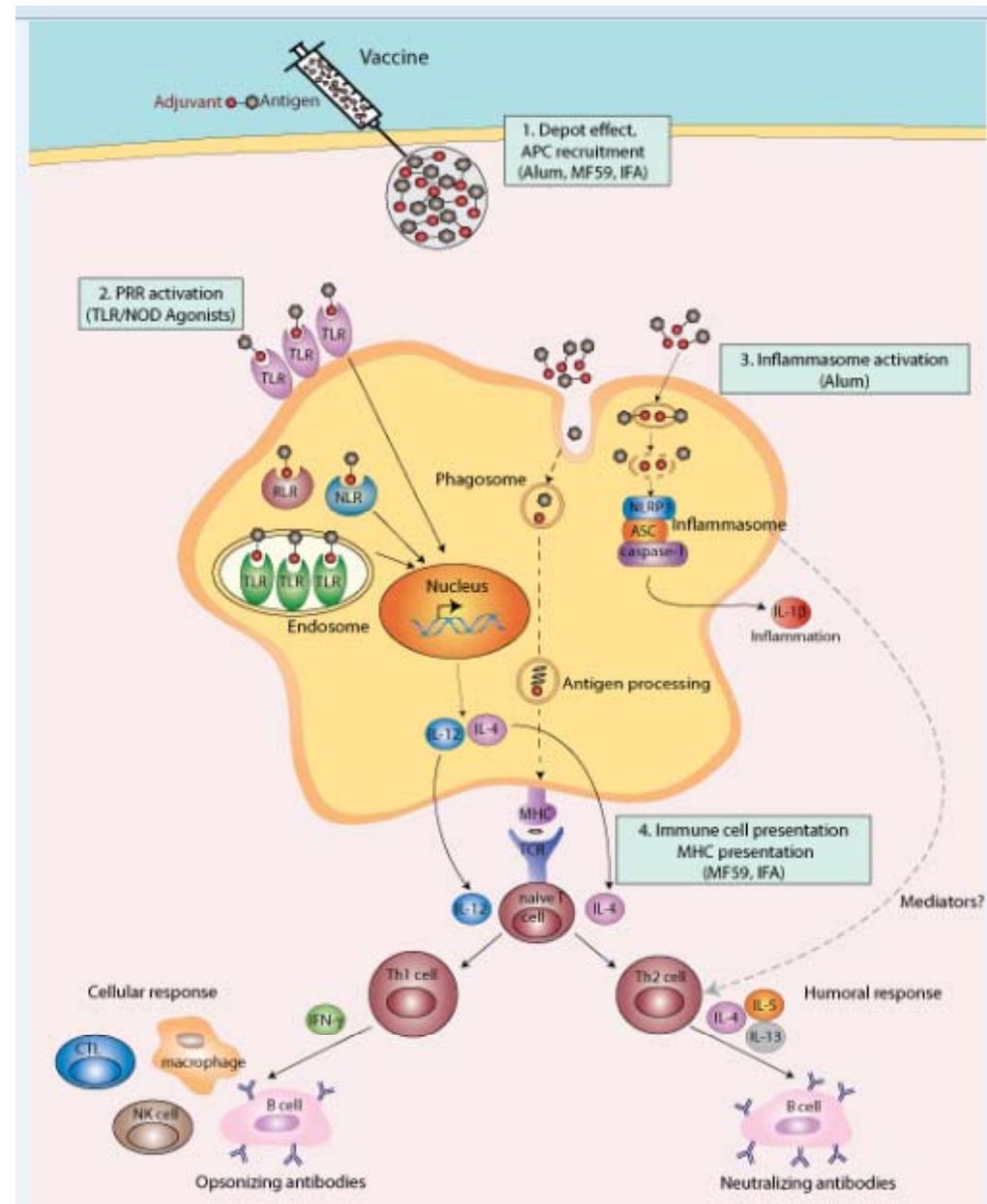
YEAR-TO-DATE 2015

Jan 1 - Oct 10, 2015

48 WPV **20** cVDPV



How Vaccines Work



Primary and Memory Response

