

1. Introduction

1.1. Autoimmune diseases

Autoimmune diseases occur when a specific adaptive immune response, as a result of failed self-tolerance, is mounted against self-antigens. Autoimmune diseases caused by activated self-reactive T and B cells are relatively common in human population. As reviewed in Samter's Immunologic Diseases, altogether 5% of the human population suffers from some form of autoimmunity [1]. Patients with systemic autoimmune disorders such as systemic lupus erythematosus (SLE) account for as many as one in 500 African-American or Asian women living in westernized societies. SLE is characterized by a female predominance of 10:1. Autoimmune diabetes type 1A affects 1 out of 400 adolescents among the general population with onset peak at the age of 15-24. The prevalence of rheumatoid arthritis (RA), a chronic systemic autoimmune inflammatory disease of the joints, accounts in most of the population groups of the world for about 0.5% to 1 % with a peak onset in the fourth decade of life. Like many other autoimmune diseases RA is more common in woman than in man, the accepted ratio is 3:1 (reviewed in [1, 2]).

1.1.1. Autoimmune nature of rheumatoid arthritis

The etiology and pathogenesis of RA are not well understood [3]. The primary role of auto-reactive B cells in RA has been recently suggested by findings in K/BxN T-cell receptor (TCR) transgenic mice. These mice were generated by breeding NOD mice to KRN/C57Bl/6 TCR transgenic mice and are characterized by early onset of spontaneous RA [4]. The arthritogenic activity in K/BxN serum resides in the IgG antibody fraction specific for glucose-6-phosphate isomerase (GPI) [5]. GPI is a ubiquitously expressed, largely cytosolic enzyme, which is essential for basic carbohydrate metabolism. GPI also exhibits extra-cellular functions that include cytokine and growth factor activities [6-9]. Recent studies revealed high concentrations of GPI on the surface of the hypertrophic joint synovia of RA patients [10, 11]. In addition, high concentrations of anti-GPI specific antibodies have recently been described in sera of patients with RA [11]. As evidence for the disease-provoking role of autoantibodies,

injection of purified IgGs against GPI into healthy mice induced arthritis [12]. The similarities between the described mouse model of arthritis, and RA in human imply a defective negative selection or activation of normally dormant but potentially pathogenic autoreactive B cells in the pathogenesis of RA.

1.2. B cells

The immune system generates 2×10^7 B lymphocytes per day with each of them recognizing a different antigen. The unique antigen specificity of B lymphocytes is defined by the primary structure of the immunoglobulin heavy and light chains comprising the surface expressed antigen receptor [13]. The specificity of the B cell antigen receptors is achieved through the rearrangement of the immunoglobulin genes [14]. In mice, random rearrangement of V_H , D_H and J_H genes and junctional diversity allows generation of 11.000 possible variants of IgH chain. Similarly, rearrangement of the V_k and J_k genes attributes to the generation of 320 different IgL chains. In contrast to humans where Ig κ is used to an equal extent as Ig λ , Ig λ chains are barely used in mice. Pairing of distinct IgH and IgL chains can potentially yield $3,5 \times 10^6$ different antibody specificities per mouse, and even more in humans. Although there are differences between mouse and human B cell rearrangement, as for example the frequency of Ig λ usage, the main principal is the same (reviewed in [15]).

1.3. B cell development in the bone marrow

B lymphocyte progenitors derive from hematopoietic stem cells (Figure 1). The earliest stage of a B cell lineage commitment is, based on the Philadelphia nomenclature, defined as a pre-pro-B cell [16, 17], which is characterized by the cell-surface expression of the general B cell marker B220 (isoform of CD45). Pre-pro-B cells express low levels of the recombination activating genes (RAG-1 and RAG-2) [18, 19], and they do not express components of the B cell antigen receptor (BCR) [20]. These very early B-lineage progenitors are immediate precursors of the pro-B cells and rarely have any immunoglobulin gene rearrangements.

The V(D)J recombination is initiated at the pro-B cell stage of B cell development and a significant fraction (30%) of pro-B cells contains rearranged IgH genes [16]. The

rearrangement of IgH genes is accomplished in two steps: (1) the recombination of a diversity (D_H) segment to a junction (J_H) segment, and (2) the recombination of a variable (V_H) gene to the joined DJ_H gene complex. Because of random nucleotide loss and addition, D segments can be joined to J_H gene segments in any one of three reading frames. Most of the mature B cells in humans have D_H segments in reading frame 2 (RF2) that encodes for hydrophilic amino acids, one third of B cells produces DJ_H joints in RF3, which frequently encodes hydrophobic amino acids, and the remaining number of B cells carry D_H segments in RF1, which often contains stop codons [21]. After DJ_H rearrangement, V_H genes become accessible to the V(D)J recombination machinery and complete heavy chain transcription units are assembled [22]. Following translation, the IgH is transported to the cell surface where it becomes associated with the surrogate light chains VpreB and λ -like (VpreB1/2 and $\lambda 5$ in mice) [23-25]. Together with the transmembrane signaling proteins $Ig\alpha$ and $Ig\beta$, which are essential for the initiation of the IgH-dependent signal, this pre-B cell receptor controls the differentiation of pro-B cells into pre-B cells and their clonal expansion [26-30].

Signals derived from pre-BCR arrest further IgH rearrangements (allelic exclusion) and initiate IgL gene rearrangement [31, 32]. Successful light chain VJ rearrangement leads to replacement of surrogate light chains VpreB and λ -like by $Ig\kappa$ or $Ig\lambda$ that together with the IgH generate the unique B cell antigen receptor (BCR). Expression of BCR leads to the generation of immature B cells and marks the transition to the antigen dependent phase of B cell development.

Immature lymphocytes display mainly surface IgM and remain in the immature compartment for an average of 3.5 days [33]. During this time the B cells undergo antigen-induced BCR mediated negative selection (see below).

1.4.. Antigen-dependent B cell selection

The clonal selection theory proposes that each B lymphocyte produces a single antibody and that individual lymphocytes undergo clonal expansion upon encounter with a specific antigen [34, 35]. The mass production of lymphocytes with virtually unlimited specificities has a potential drawback due to the generation of large numbers of lymphocytes that potentially recognize self-antigens. Ehrlich and others proposed that the consequences of formation of

self-antibodies were so severe that the immune system stringently prohibited its occurrence [36]. Defects in negative selection of self-reactive B lymphocytes can lead to immune cell-mediated destruction of various organs. The causal role of auto-antibodies in immune cell-mediated injury was proven by Harrington who showed that the transfer of sera derived from patients with idiopathic thrombocytopenic purpura caused thrombocytopenia in the injected individuals [37]. Despite overwhelming evidence for the causal role of autoantibodies in the development of various autoimmune diseases, the molecular and cellular mechanisms preventing the development and accumulation of the autoreactive B cells remain largely elusive. So far three different mechanisms called negative selection, anergy, and receptor editing are described to guarantee B cell tolerance (Figure 1).

1.4.1. Clonal deletion and anergy

Most of the generated self-reactive B cells, however either die of clonal deletion or become functionally incapacitated (anergized) upon encounter with self-antigens. Clonal deletion is defined as self antigen-induced death of autoreactive B cells during early B cell development or at later stages of B cell maturation. Overall, the efficiency of clonal deletion is likely to be higher in the bone marrow than in the periphery due to the high susceptibility of immature B cells to BCR-induced apoptosis [38].

Incubation of immature B cells with anti-IgM antibodies *in vitro* revealed a direct correlation between the degree of the BCR cross-linking and the rate of cell death [39], i.e., B cells cultured in the presence of high concentrations of anti- μ antibodies die at a high rate. In contrast, BCR cross-linking at intermediate levels due to lower concentrations of anti- μ does not cause B cell death but prevents B cell proliferation and antibody production upon subsequent mitogen exposure. This non-responsive or anergic state of self-antigen specific B cells was extensively characterized in mice co-expressing the transgenic BCR specific for hen egg lysozyme (HEL) and transgenic soluble HEL [40]. B cell anergy also occurs in mice that express BCR specific for the single-stranded DNA (ssDNA) [41, 42]. Thus, the state of anergy seems to be reached by B cells with a low affinity self-reactive BCR whereas high affinity anti-self-reactivity leads to clonal deletion.

Anergic B cells are short lived and unable to enter anatomical niches, e.g., lymphoid follicles, in the presence of normal, wild type mice derived B cells [43, 44]. Chronic encounter of

soluble HEL by HEL-binding B cells leads to changes in the B cell phenotype characterized by low expression levels of IgM and CD23, but relatively high surface expression levels of CD5 as compared to B cells of wild-type mice. Compared to the anergic anti-HEL specific B cells, the anergic ssDNA specific B cells are functionally potent but fail to differentiate into plasma cells. It seems possible, that differences in anergy-related features of B cells may reflect the affinity of the self-antigen-BCR interaction as well as other less defined antigen-determined changes in B cell signaling. Characterization of the anergic state of B cells is further complicated by the lack of well defined anergy-specific markers that precludes identification of anergic cells within peripheral B cell population. Therefore, the frequency of these cells in non-transgenic mice as well as in human could not be determined so far.

1.4.2. Receptor editing

The frequency of autoreactive B cells during B cell development and maturation can be reduced significantly by secondary light chain gene recombination ("receptor editing"). Elimination of self-reactive B cells through receptor editing was first described for transgenic B cells specific for double-stranded DNA (dsDNA) or major histocompatibility complex (MHC) class I [45, 46]. In mice, about 25% of auto-reactive B cells change their specificity through secondary IgL gene rearrangement [47]. In contrast to anergy and deletion, this recently described mechanism of "social correction" of autoreactive B cells spares the initially autoreactive B cells by replacing self-specific BCR by an "unharmful" one. The high numbers of antibody molecules that are produced by gene replacement as shown by Casellas et al. [47] suggest that receptor editing represents a major force in shaping the antibody repertoire under physiological conditions.

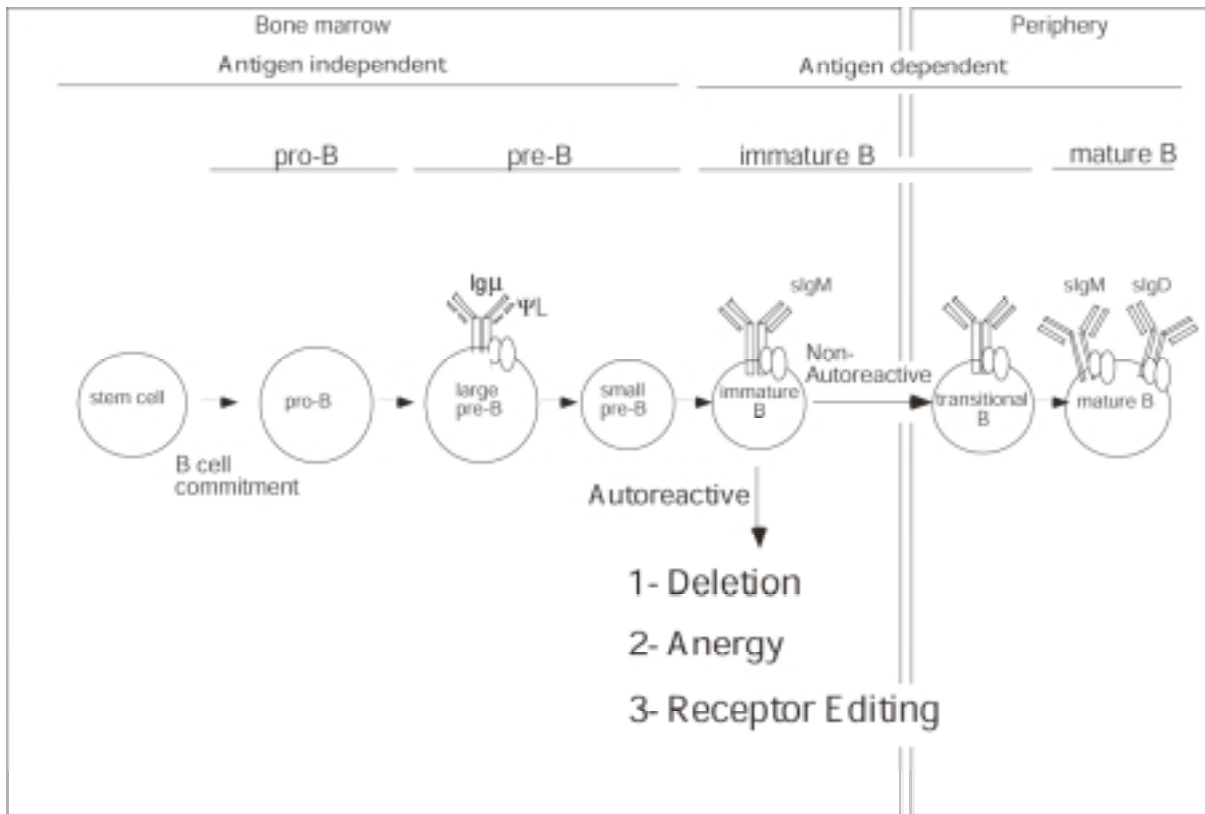


Figure 1. B cell differentiation. Developmental stages of B cell lymphopoiesis with cell surface expression of pro-B, pre-B (Igμ, VpreB/λlike and Igα-Igβ) or B (Igμ, Igκ or Igλ and Igα-Igβ) cell receptors is shown.

1.5. Peripheral B cell maturation

Immature B cells that have passed selection in the bone marrow and carry a non-self-reactive BCR on the cell surface, migrate to the peripheral lymphoid tissues where they form a population of transitional B cells (Figure 1). Kinetic studies have shown that only 10 to 30% of all daily produced immature B cells (2×10^7), differentiate into the long-lived mature B cells [48-50]. Mature B cells can be distinguished from transitional B cells by expression of IgM and increased expression of IgD, in combination with the expression of complement receptors (CR1/CR2). Compelling evidence for selection of peripheral B cells relies on differences found in the antibody repertoire of pre-B, immature, and mature B cells [51-55], which strongly support an antigen-dependent selection of peripheral mature B cells.

1.6. Self-reactive B cells

Besides high affinity autoreactive B cells that are caused by insufficient self tolerance in the cause of autoimmune disease, there are different B cell populations in healthy human and mice that express self-reactive B cell receptors, e.g., B-1 cells that comprise about 5% of the peripheral B cell pool and express self-/polyreactive antibodies. In mice and human, low-affinity IgM auto-antibodies produced by B-1 cells presumably neutralize various self and non-self antigens prior to the development of specific immune responses [56, 57]. However, the expansion of autoreactive B-1 cells may lead to the development of autoimmunity in mice and man [58].

Another recently described B cell population that may also contribute to the pathogenesis of RA in human is characterized by co-expression of B cell antigen receptor and surrogate light chain VpreB (V-preB⁺L⁺ B cells, Figure 2) [59, 60]. As previously mentioned, differentiation of pro-B into pre-B cells in the bone marrow is governed by the pre-B cell receptor that is comprised of the V-preB and λ -like proteins (surrogate light chains) associated with Ig heavy chain (IgH). Further developmental progression of pre-B cells into immature B cells is associated with the silencing of the V-preB and λ -like genes. As a consequence V-preB and λ -like proteins are therefore not expected to be present on immature or mature B cells in the periphery [61, 62]. The exception is this small population of B cells, accounting for 0.5-1% of all peripheral B cells in healthy human donors (Figure 2), that is found to be accumulated in joints of RA patients [59, 60]. Moreover, these V-preB⁺L⁺ B cells display an unusual heavy and light chain repertoire formerly seen in autoreactive B cells [59, 60], which suggests a pathogenic role of antibodies produced by V-preB⁺L⁺ B cells in the pathogenesis of RA.

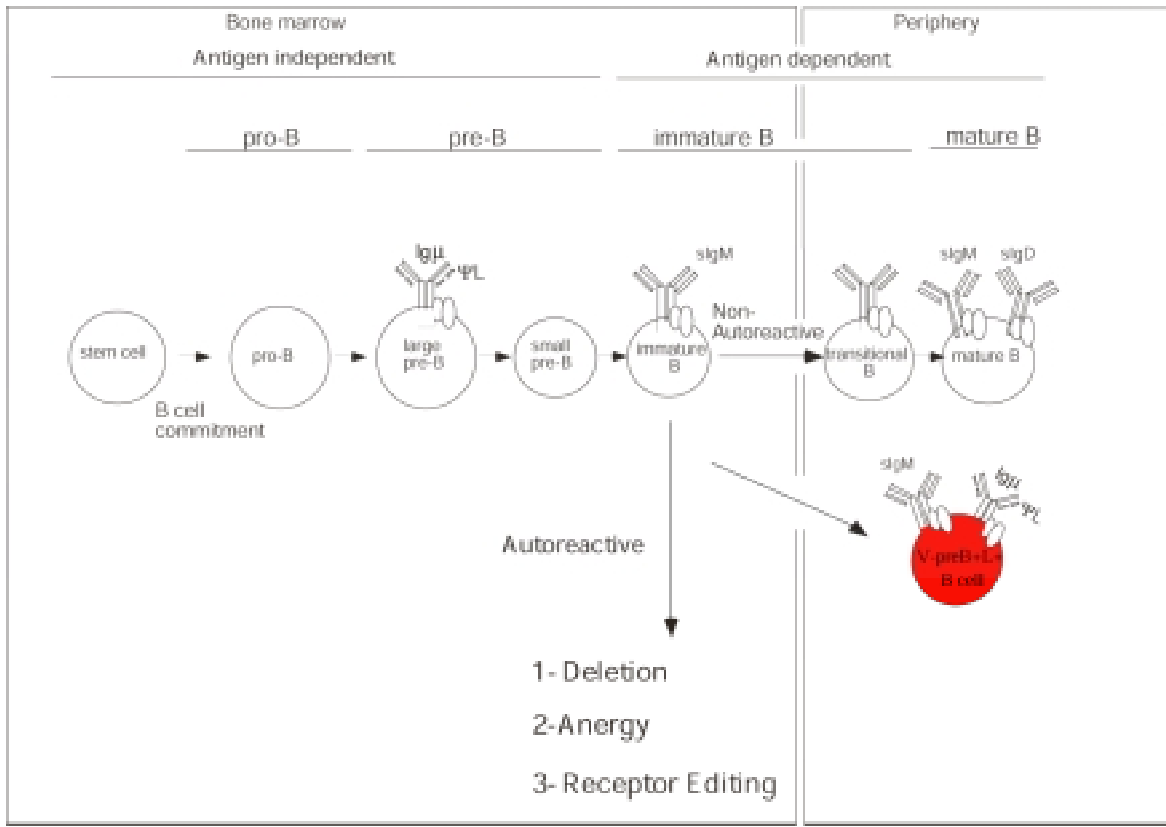


Figure 2. V-preB⁺L⁺ B cells in developmental stages of B cell lymphopoiesis. Cell surface expression of pro-B, pre-B ($Ig\mu$, $VpreB/\lambda$ like and $Ig\alpha$ - $Ig\beta$), or B ($Ig\mu$, $Ig\kappa$ or $Ig\lambda$ and $Ig\alpha$ - $Ig\beta$) cell receptors is shown. Peripheral V-preB⁺L⁺ B cells (red) co-express pre-BCR and BCR on the surface.

1.7. Objectives

The hypothesis underlying the present study was that V-preB⁺L⁺ B cells might be involved in the pathogenesis of rheumatoid arthritis in human by the production of autoreactive, arthritogenic antibodies. The specific aims of this work were:

1. Establishment of a method to analyze the immunoglobulin repertoire and antibody specificity of individual V-preB⁺L⁺ B cells.

2. Analysis of the antigenic specificity of antibodies expressed by individual V-preB⁺L⁺ B cells:

- Do antibodies expressed by individual V-preB⁺L⁺ B cells display autoreactive activity?
- Do antibodies expressed by individual V-preB⁺L⁺ B cells recognize antigens with presumably specific arthritogenic activity?

3. Does the co-expression of, as revealed by the objectives, autoreactive BCR and pre-BCR on V-preB⁺L⁺ B cells prevent negative B cell selection?

Generation of transgenic mice that carry one of the characteristic V-preB⁺L⁺ B cell IgH chain genes to test the hypothesis whether in the absence of the pre-BCR (V-preB and λ -like) these cells undergo negative selection.