

Mycobacterial mycolic acids as immunoregulatory lipid antigens in the resistance to tuberculosis

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List of Abreviations

β2M Beta-2-microglobulin

γδ Gamma-delta

<u>A</u>

AIDS Acquired immune deficiency syndrome

AM Alveolar macrophage

APC Antigen presenting cell

ATCC American Type Culture Collection

<u>B</u>

BCG Bacillus Calmette-Guérin

<u>C</u>

CAM Cytokine-activated monocytes

CD Cluster of differentiation

cDNA Complementary deoxyribonucleic acid

CFU Colony forming units

Chol Cholesterol

CMI Cell-mediated immunity

 $\mathbf{\underline{D}}$

DEPC Diethyl pyrocarbonate

DN Double negative

DNA Deoxyribonucleic acid

DOTS Directly observed treatment short course

DTH Delayed-type hypersensitivity

<u>E</u>

E. coli Eschirichia coli

EDTA Ethylenediaminetetra-acetic acid

ELISA Enzyme-linked immunosorbent assay

EMB Ethambutol

<u>G</u>

GAP-DH Glyceraldehyde-3-phosphate dehydrogenase

GLC Gas-liquid chromatography

GLP Good laboratory practise

GM-CSF Granulocyte macrophage colony stimulating factor

H

HCI Hydrochloric acid

HEPA High Efficiency Particulate Air

HIV human immunodeficiency virus

HPLC High-performance liquid chromatography

Ī

i.n. Intranasal

i.p. Intraperetoneal

i.v. Intravenous

IFN-γ Interferon gamma

IgG immunoglobulin G

IL- Interleukin



INH Isiniazid

iNOS Inducible nitric oxide synthase

IRMA Immunoradiometric assay

<u>K</u>

KOH Potassium hydrooxide

<u>L</u>

LAM lipoarabinomannan

LDL Low-density lipoproteins

LPS lipopolysaccharides

<u>M</u>

M. avium Mycobacterium avium

M. bovis Mycobacterium bovis

M. leprae Mycobacterium. leprae

M. tuberculosis Mycobacterium tuberculosis

M.tb Mycobacterium tuberculosis

MA Mycolic acids

MAIDS Murine acquired immunodeficiency syndrome

MCF Mink cell focus forming

MDR TB Multi-drug resistant tuberculosis

MgCl₂ Magnesium chloride

MHC Major histocompatibility complex

MOPS 3-(N-morpholino) propanesulfonic acid

MOTTS Mycobacteria Other Than Tuberculosis

MRC Medical Research Council

mRNA Messenger RNA

MuLV Murine leukemia virus

MΦ Macrophage

N

NAC No amplification control

NaCl Sodium chloride

NALC-NaOH N-acetyl-L-cysteine-sodium hydroxide

NaOH Sodium hydroxide

NK Natural killer cells

NKSF Natural killer cell stimulatory factor

NO Nitric oxide

NTC No template control

 $\underline{\mathbf{o}}$

OD Optical density

<u>P</u>

PBS/AE Phosphate buffered saline azide EDTA

PC Phospahatidyl choline

PCR Polymerase chain reaction

PMBC Peripheral blood mononuclear cells

PPD Purified protein derivative

PZA Pyrazinamide

<u>R</u>

RFP Rifampetine

RIA Radioimmunoassay

RIF Rifampicin

RNA Ribonucleic acids

RNI Reactive nitrogen intermediates

ROI Reactive oxygen intermediates

RQ-PCR Real time quantitative PCR

RQ-RT-PCR Real-time quantitative reverse transcriptase PCR

rRNA Ribosomal ribonucleic acids

RT Reverse transcriptase

RT-PCR Reverse transcriptase PCR

RZL Rifalazil

<u>S</u>

Sal Saline

SC-1 Stromal cell line

Ser Serum

SIV Simian immunodeficiency virus

SM Streptomycin

SOD Superoxide dismutase

SQ-RT-PCR Semi-Quantitative RT-PCR



SR Scavenger receptor

<u>T</u>

TB Tuberculosis

TCR T cell receptor

Th T helper

TNF-α Tumor necrosis factor alpha

 $\underline{\mathbf{W}}$

WHO World Health Oraganisation



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Summary: Mycobacterial mycolic acids as immunoregulatory lipid antigens in the resistance to tuberculosis

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Tuberculosis has returned with vengeance mainly due to the resurgence of multi drug resistant strains incurred by non-compliance to the 6-9 months chemotherapy programme. Co-infection with HIV, which disorientates the immune response, has aggravated the situation. This study was built on previous observations that indicated that the major lipid cell wall component of M. tuberculosis, i.e. mycolic acids, a wax that envelopes and protects the bacillus from the hostile host immune system, can be purified and administered to animals for protection against subsequent tuberculosis induction. It was established in this study that mycolic acids pre-treatment can significantly protect mice upon subsequent intranasal infection with M. tuberculosis and that this protection is not attributed so much to the T helper cell immunity, but rather through induction of innate immunity. In the murine AIDS model, innate immunity induced by mycolic acids pre-treatment was not enough to protect the virally immunocompromised mice against subsequent M. tuberculosis infection. Mycolic acids administration in mice did not support tuberculosis chemotherapy to enable shortening of the duration of chemotherapy. In human tuberculosis patients, antibodies to mycolic acids could be measured in a specially adapted configuration of a resonant mirror biosensor. The preliminary investigation opened up the possibility that the prevalence of anti-mycolic acids



antibodies in tuberculosis patients may be measured as a surrogate marker for tuberculosis infection. An apparent cross-reactivity between mycolic acids and cholesterol in binding to tuberculosis patient antibodies may provide far reaching insight in the role of the mycolic acids in the cell wall to facilitate infection. This research contributed significantly to the understanding of the host-pathogen interaction in tuberculosis, to open up fresh approaches to improved diagnosis and chemotherapy.

Opsomming: Mikobakteiële mikolsure as immunregulatariese lipiedantigene in die weerstandigheid teen tuberkulose.

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Tuberkulose is terug met mening, hoofsaaklik vanweë die herlewing van multi-drogeryweerstandige patogeenstamme deur die onvoldoening aan die 6-9 maande lange chemoterapie-termyn. Ko-infeksie met HIV, wat die immuunrespons versteur, het die toestand vererger. Hierdie studie is gebaseer op vroeëre waarnemings wat daarop gedui het dat die dominante lipied-selwandkomponent van M. tuberculosis, d.i. mikolsure - 'n was wat die basillus omhul en beskerm teen die vernietigende immunstelsel van die gasheer - gesuiwer en toegedien kan word aan proefdiere om beskerming te verleen teen daaropvolgende tuberkulose-induksie. Daar is met hierdie studie vasgestel dat voorinfeksie behandeling met mikolsure muise aansienlik kan beskerm teen daaropvolgende intranasale infeksie met M. tuberculosis en dat hierdie beskerming nie soseer te wyte is aan die T-helpersel-immuniteit nie, maar eerder deur die induksie van ingeskape immuniteit. In die muis-VIGS-model, was die ingeskape immuniteit, geïnduseer deur voorbehandeling met mikolsuur, onvoldoende om teen M. tuberculosis infeksie te beskerm in die virale immuunverydelde muis. Toediening van mikolsure aan muise het nie die effektiwiteit van chemoterapie ondersteun om 'n verkorte duur daarvan moontlik te maak nie. In mens tuberkulose-pasiënte kon teenliggame teen mikolsure aangetoon word in 'n spesiaal aangepaste konfigurasie van die resonante spieëlbiosensor. Die voorlopige ondersoek het die moontlikheid onthul dat die bestaan van anti-mikolsuurteenliggame in tuberkulose pasiënte gemeet kan word as 'n surrogaatmerker van tuberkulose infeksie. 'n Oënskynlike kruis-reaktiwiteit tussen mikolsure- en cholesterolbinding aan tuberkulose-pasiënt-teenliggame kan verreikende insig verleen aan die rol



van mikolsure in die selwand om infeksie te bevorder. Hierdie navorsing het bygedra tot 'n beter begrip van die gasheer-patogeen interaksie in tuberkulose, ten einde vars benaderings te skep vir verbeterde diagnose en chemoterapie.

