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Glucocorticoids down-regulate dendritic cell function *in vivo* and *in vitro*

Exogenous glucocorticoid hormones are widely used as therapeutic agents, achieve endogenous glucocorticoids may act as physiological immunoregulators, some involved in the control of immune and inflammatory responses. The optimal induction of T lymphocytes requires two distinct signals: the major histocompatibility complex-restricted presentation of the antigen and an additional co-stimulatory signal provided by the antigen-presenting cells. These co-stimulatory signals that, among the cells able to present the antigen, the dendritic cells (DC) have the unique property to maintain immunoreactive cells (T cells) *in vivo* and *in vitro*, and are therefore suggested for the induction of primary immune responses. In this study, we investigated whether glucocorticoids affected the capacity of DC to maintain naive T cells. Our data show that, *in vivo*, the treated but non-manipulated dendritic cells still reflect the stability of DC, whereas they down-regulate the expression of co-stimulatory molecules in naive DC, and strongly reduce their immunostimulatory properties. *In vitro*, a single injection of DCs results in impaired antigen-presenting function, a feature which correlates with up-regulation of soluble DC. These results show that glucocorticoids regulate DC maturation and immune function *in vivo* and *in vitro* and suggest that this mechanism may play a role in preventing overstimulation of the immune system.

1 Introduction

Glucocorticoids (GC) are widely used as anti-inflammatory and immunosuppressive agents to prevent graft rejection and/or treat autoimmune and allergic diseases. The inhibitory effect of GC on the immune system is well partly understood, although several signals have shown that GC inhibit the maturation of many immune cells [1–3], as well as the cell surface expression of MHC, secreted signaling elements [4, 5], and have regulatory and immunomodulatory B-2 receptor [6].

The discovery of MHC restriction allowed attention on the importance of the antigen-presenting cells (APC) in the induction of immune responses. More recently, it has been shown that APC not only display processed antigen in the polymorphic MHC peptide-binding groove, but also express a second co-stimulatory signal which determines the outcome, i.e., activation versus the induction of tolerance of T cell receptor-antigen [7].

Although B cells, macrophages and dendritic cells (DC) represent cell types in T cells, only DC have the capacity to induce naive T cells fully *in vivo* and *in vitro* (for review, see [8]). For this report, we investigated whether

GC treatment affected by DC *in vivo* and *in vitro*. Our data show that dendritic cells (DC), a potent natural immune cell, affects the stability of naive DC, and down-regulate the immunostimulatory properties of immature DC *in vitro*. Furthermore, the regulated T cells were inactivated by mature and impaired DC *in vitro*, suggesting that *in vivo*, GC may control the immune response on the local antigen presentation.

2 Materials and methods

2.1 Mice

Female Balb/c (H-2^d) and CBA (H-2^k) 4–6 weeks old, were purchased from Charles River Wiga (Molsheim, Germany), and maintained in a pathogen-free environment.

2.2 Reagents and antibodies

Edmantheloidin (Ea), for studies *in vivo* (Pallares for methyl glucuronide) and mannanbinder (Mn) for injection *in vivo* were purchased from Sigma (St. Quentin, Belgium). B220.1 was obtained from Biotech (St. Quentin, France).

The immune adjuvant *in vitro* CBA, (CFA-P) [9], was used to stimulate T cells. Purified recombinant myelomonocytic B-220.1 was purchased from TCS Biologicals (St. Quentin, FL, Switzerland). GM-CSF was purchased from Pharmacia (Brussels, Belgium) and from E. coli (Schwartz-Biotech, Brussels, Belgium).

2.3 Cell lines

The LAF¹-resistant, myelomonocytic T cell hybridoma (J-26-8-20.1) [10] was derived by B. J. Lippman (Pharmaceutical of Immunology, Milan, Switzerland).

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Figure 6. Effect of time on splenic cell populations. Mice were injected with 100 ng DEX, 100 ng DEX + 10⁶ T cells, 100 ng DEX + 10⁶ T cells + 10⁶ B cells, or 100 ng DEX + 10⁶ T cells + 10⁶ B cells + 10⁶ T cells. The percentage of CD44⁺ and CD44⁻ cells in the spleen was determined by flow cytometry. The percentage of CD44⁺ cells in the spleen was determined by flow cytometry. The percentage of CD44⁻ cells in the spleen was determined by flow cytometry. The percentage of CD44⁺ cells in the spleen was determined by flow cytometry. The percentage of CD44⁻ cells in the spleen was determined by flow cytometry.

that mice injected with DEX displayed a dose-dependent reduction in the relative number of splenic CD44⁺ (classical) or CD44⁻ (nonclassical) T compared to mice injected with saline only. By contrast, the percentages of B and T lymphocytes remained unchanged, although the relative number of splenic macrophages (CD11b/CD117⁺/F4/80⁺) decreased in the saline mice. The expression of CD4 decreased in all mice injected with DEX in a dose-dependent manner. Thus, although a single injection of DEX suppresses alloantigen-specificity, the lowest dose of DEX used in this study produces a selective decrease in DC numbers in mice, which correlates with impaired APC function.

4 Discussion

The present study demonstrates that one of the mechanisms by which conventional can suppress immune responsiveness acts and at various inhibitory intensity of splenic DC, suppresses responses to responding T lymphocytes. Since DC have the unique property to activate naive T cells and are required for the induction of a primary



Figure 7. Injection of DEX in combination with DEX. Mice were injected with 100 ng DEX, 100 ng DEX + 10⁶ T cells, 100 ng DEX + 10⁶ T cells + 10⁶ B cells, or 100 ng DEX + 10⁶ T cells + 10⁶ B cells + 10⁶ T cells. The percentage of CD44⁺ and CD44⁻ cells in the spleen was determined by flow cytometry. The percentage of CD44⁺ cells in the spleen was determined by flow cytometry. The percentage of CD44⁻ cells in the spleen was determined by flow cytometry. The percentage of CD44⁺ cells in the spleen was determined by flow cytometry. The percentage of CD44⁻ cells in the spleen was determined by flow cytometry.

Table 1. Effect of time on splenic cell populations

	DEX ^a	DEX + 10 ⁶ T cells	DEX + 10 ⁶ T cells + 10 ⁶ B cells	DEX + 10 ⁶ T cells + 10 ⁶ B cells + 10 ⁶ T cells
CD44 ⁺	100	100	100	100
CD44 ⁻	100	100	100	100
B cells	100	100	100	100
T cells	100	100	100	100

- The number of splenic cells was determined by flow cytometry. The number of CD44⁺ cells in the spleen was determined by flow cytometry. The number of CD44⁻ cells in the spleen was determined by flow cytometry. The number of B cells in the spleen was determined by flow cytometry. The number of T cells in the spleen was determined by flow cytometry.
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response, the suppression of DC function may very effectively inhibit specific immune responses.

In vivo, we show that DEX, a potent synthetically derived adjuvant, downregulates the expression on DC of B₂ molecular chains responsible for antigen activation of splenic T cells. All other markers remain stable, thus, a B₂ molecule is not downregulated. The decrease in the expression of the co-stimulatory signal correlates with impaired antigen-presenting function to naive T lymphocytes (the inhibition of function by more than 50% compared between DEX and DEX + 10⁶ T cells). In contrast, no such effect was observed when DEX was added to the spleen later, i.e. after the first activation in mice (data not shown), suggesting that the maturation of splenic DC is induced only in naive and may not be reversible.

Our data show that the addition of DEX during the priming procedure does not impact the ability of DC to present the appropriate Ag to the class II-restricted T cell lymphocytes, but strongly reduces their capacity to present the same antigen to naive cells. These results suggest that the ability of DC to present a B₂ signal is not affected by DEX, a finding which correlates with the naive cell surface expression of class II antigens to DEX-treated DC, but that their capacity to activate naive T lymphocytes is impaired. Therefore, the immunosuppressive effect of DEX is probably due to a reduced ability to deliver the co-stimulatory signal, which has been shown to derive from the molecule B₂ chains when injected of T cell responses (e.g., immunization). It is difficult to assess in vivo whether T lymphocytes interact with DC purified in the presence of DEX are rendered anergic, i.e. become unable to respond to a subsequent stimulation by APCs presenting self-antigen. The decrease effect in APC activity could be due to binding capacities of molecules of B₂ chains, to the downregulation of very early/late co-stimulatory signals important to the antigen function of these cells, or both. Of note, a report issued by Chom and Krenkel [20] shows that a slightly diminished expression of B₂ on APC correlates with a lower immunostimulatory capacity.

Induced by antibodies/Ag splenic DC, self-antigen, as assessed by MHC staining. Depending on the experi-

thermal water T cells activation in vivo (40). Our data suggest that the modulation of TCR activation, function, or both could be part of the immune regulatory mechanism between the immune and nonimmune systems (41, 42). A major form of action of conventional, may be at the very first step of the immune response, in initial priming of DC into potent APC, thereby preventing the activation of naive antigen-specific, naive T cells.

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