

Intestinal immune defects in cerebrovascular disease-How neutrophils do this?

Ali A Tuz¹, Susmita Ghosh², Laura Karsch¹, Markus Gallert¹, Dimitris Ttoouli³, Sai P Sata², Özgür Ulusoy¹, Andreas Kraus¹, Nils Hoerenbaum¹, Hannah-Lea Tummels¹, Jan-Niklas Wolf¹, Sabrina Lohmann¹, Franziska Zwirlein¹, Viola Kayguzuz¹, Vivian Lakovic¹, Alexander Beer¹, Stephanie Thiebes⁴, Altea Qefalia¹, Zülal Cibir¹, Medina Antler¹, Sebastian Korste⁵, Elias Haj Yehia⁶, Lars Michel⁶, Tienush Rassaf⁶, Britta Kaltwasser⁶, Hossam Abdelrahman¹, Ayan Mohamad Yusuf⁶, Chen Wang⁶, Dongpei Yin⁶, Lars Haeusler¹, Smiths Lueong⁷, Mathis Richter⁸, Daniel R. Engel¹, Martin Stenzel², Oliver Soehnlein⁸, Benedikt Frank⁵, Mialitiana Solonomenjanahary⁹, Benoit Ho-Tin-Noe⁹, Jens T Siveke⁷, Matthias Totzeck⁵, Daniel Hoffmann⁵, Anika Grüneboom⁵, Nina Hagemann⁶, Anja Hasenberg¹, Jean-Philippe Desilles^{9,10}, Mikael Mazighi^{9,10}, Albert Sickmann², Jianxu Chen², Dirk M Hermann⁶, Matthias Gunzer^{1,2}, Vikramjeet Singh¹

¹ Institute for Experimental Immunology and Imaging, University Hospital, University of Duisburg-Essen, DE-45147 Essen, Germany

² Leibniz-Institut für Analytische Wissenschaften - ISAS-e.V., Dortmund, Germany

³ Bioinformatics and Computational Biophysics, Faculty of Biology and Centre for Medical Biotechnology (ZMB), University of Duisburg Essen, DE-45141 Essen, Germany

⁴ Department of Cardiology and Vascular Medicine, West German Heart and Vascular Center, University Hospital, University of Duisburg-Essen, DE-45147 Essen, Germany

⁵ Department of Neurology, University Hospital, University of Duisburg-Essen, DE-45147 Essen, Germany

⁶ Division of Solid Tumor Translational Oncology, German Cancer Consortium (DKTK, partner site Essen), German Cancer Research Center (DKFZ), Heidelberg, Germany

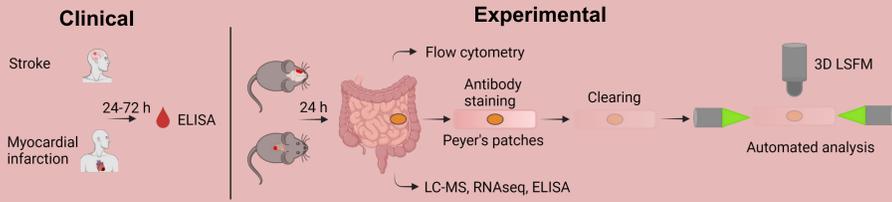
⁷ Institute for Experimental Pathology (ExPat), Center for Molecular Biology of Inflammation (ZMBE), Westfälische Wilhelms-Universität Münster, Münster, Germany.

⁸ Department of Neurology and Center for Translational Neuro- and Behavioral Sciences (C-TNBS), University Hospital Essen, 45147 Essen, Germany.



INTRODUCTION and METHODS

Dysfunction of humoral immunity after tissue injury is responsible for infections and poor outcomes in cardiovascular disease. However, the mechanisms underlying these life-threatening changes are not well known. Among immunoglobulins (Ig), IgA, the most frequent mucosal antibody, is produced by plasma B cells in Peyer's patches (PP) and lamina propria. Using blood samples from different clinical cohort of ischemic stroke and myocardial ischemia patients and pre-clinical animal models, we dissected the causes of post-injury immune defects i.e. IgA and lymphocyte loss.



RESULTS

Stroke and heart attack patients have low IgA

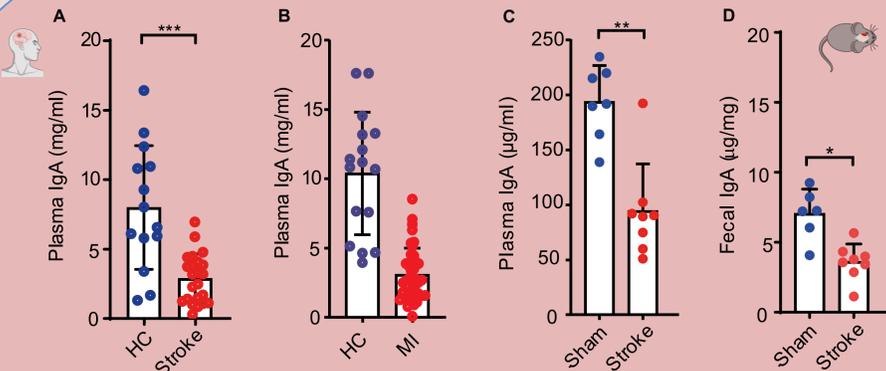


Figure 1. Stroke and myocardial infarction (MI) reduces plasma IgA levels and size of Peyer's patches. A, The amounts of plasma IgA in stroke patients and healthy subjects. B, The amounts of plasma IgA in MI patients and healthy subjects. C, The levels of plasma IgA in stroke mice compared to sham controls. D, The levels of fecal IgA in stroke mice compared to sham controls. MI=myocardial infarction, HC=healthy controls.

B cell follicles shrink after stroke and heart attack

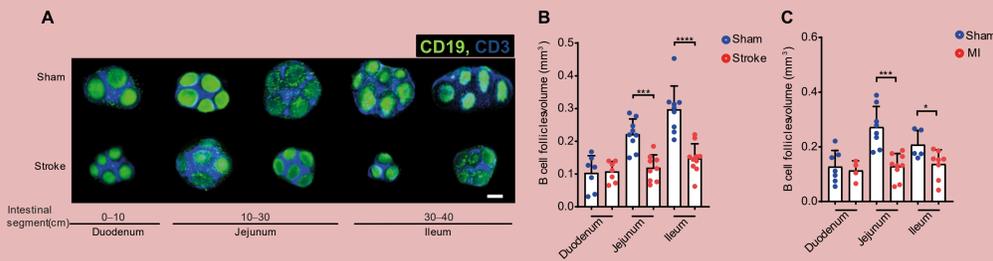


Figure 2. Stroke and myocardial infarction (MI) decreases B cell follicles volume in PP. A, 3D reconstruction of LSFM images of CD19⁺ B cells (green) and CD3⁺ T cells (blue) in PP isolated from duodenum, jejunum and ileum 24 h after stroke or sham surgery. B, Deep learning based automated analysis of B cell follicles volume in PP from duodenum, jejunum and ileum one day after stroke or sham surgery. C, Analysis of B cell follicles volume in PP one day after MI or sham surgery. MI=myocardial infarction, LSFM=light-sheet fluorescence imaging.

IgA producing B cells are lost under side-effect of circulating DNA

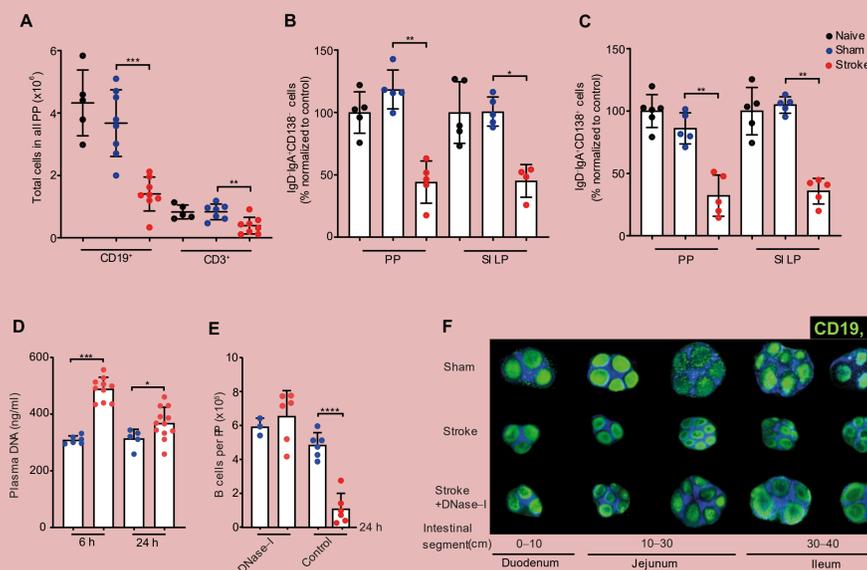


Figure 3. Stroke induced B cell loss in PP is dependent on the circulating DNA. A, Flow cytometry-based quantification of the number of CD19⁺ B cells and CD3⁺ T cells in all intestinal PP 24 h after stroke, sham surgery and unoperated naive mice. B, Quantification of IgD-IgA⁺CD138⁻ plasma cell precursors in all PP and SI LP after 24 h of sham surgery or stroke and naive mice. C, Quantification of IgD-IgA⁺CD138⁺ plasma cells in all PP and SI LP. D, Quantification of plasma DNA 6 h and 24 h after stroke or sham surgery using Qubit assays. E, Numbers of B cells in PP 24 h after stroke or sham surgery in DNase-I and vehicle-treated mice analyzed by flow cytometry. F, 3D reconstruction of LSFM images of CD19⁺ B cells (green) and CD3⁺ T cells (blue) in PP isolated from duodenum, jejunum and ileum 24 h after sham, stroke and stroke+DNase-I treated mice. PP=Peyer's patches, SI LP= small intestine lamina propria.

Post-injury activated neutrophils release toxic NETs

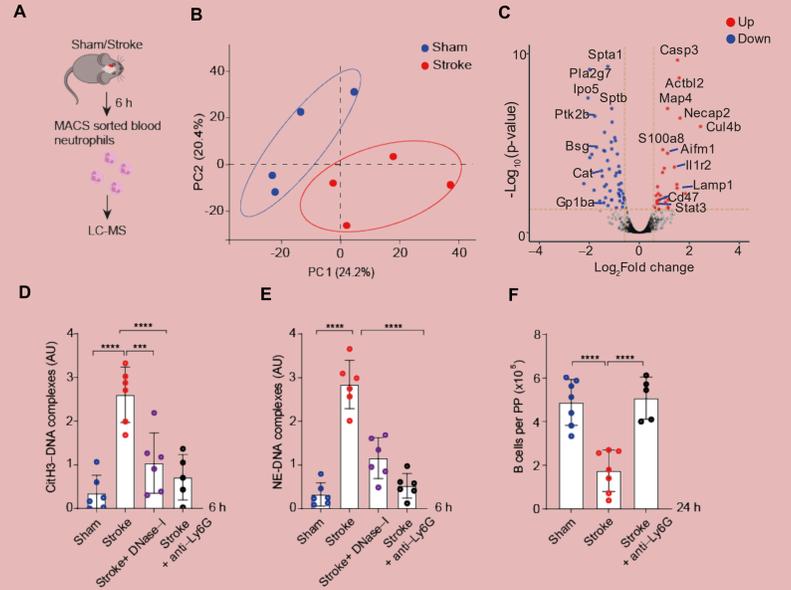


Figure 4. Stroke activated neutrophils release NETs and mediate B cell loss in PP. A, Schematic of the experimental paradigm for neutrophil mass-spectrometry and proteomics analysis. B, Principal component analysis of neutrophil proteomics after sham or stroke. C, Volcano plot comparing the normalized protein abundance in blood neutrophils of stroke mice vs sham-operated mice. D, Relative plasma levels of citH3-DNA or E, NE-DNA complexes after sham + isotype antibody, stroke + isotype antibody, stroke + DNase-I treatment or stroke + anti-Ly6G antibody treatment. F, Numbers of CD19⁺ B cells in intestinal PP in sham-operated + isotype antibody, stroke + isotype antibody and stroke + anti-Ly6G antibody-treated mice.

NET blockade protects IgA producing plasma cells

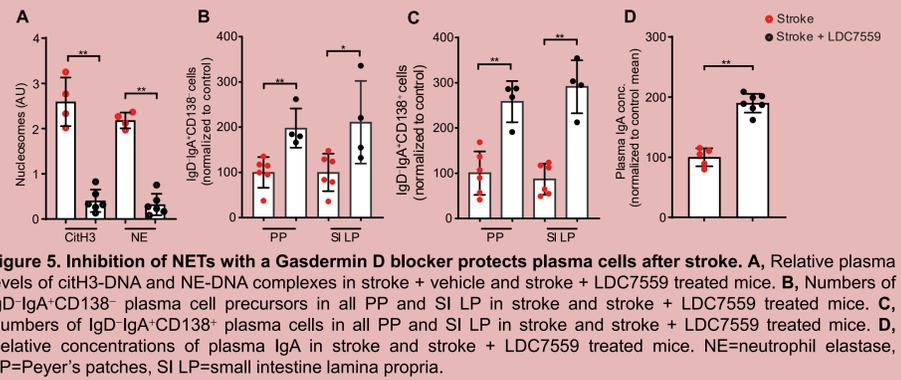


Figure 5. Inhibition of NETs with a Gasdermin D blocker protects plasma cells after stroke. A, Relative plasma levels of citH3-DNA and NE-DNA complexes in stroke + vehicle and stroke + LDC7559 treated mice. B, Numbers of IgD-IgA⁺CD138⁻ plasma cell precursors in all PP and SI LP in stroke and stroke + LDC7559 treated mice. C, Numbers of IgD-IgA⁺CD138⁺ plasma cells in all PP and SI LP in stroke and stroke + LDC7559 treated mice. D, Relative concentrations of plasma IgA in stroke and stroke + LDC7559 treated mice. NE=neutrophil elastase, PP=Peyer's patches, SI LP=small intestine lamina propria.

NETs in patients can be targeted to correct immune defects

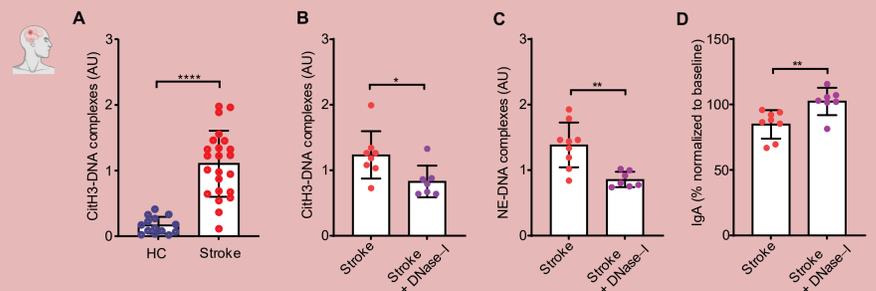
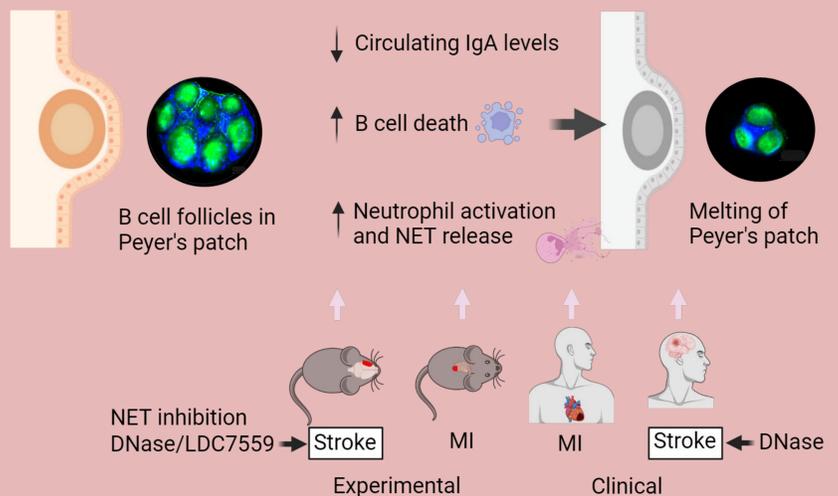


Figure 6. Stroke and myocardial infarction patients show increased circulating NETs. A, Relative plasma levels of citH3-DNA complexes in stroke patients and healthy subjects. B, CitH3-DNA complexes in stroke patients with and without DNase-I treatment. C, NE-DNA complexes in stroke patients with and without DNase-I treatment. D, The baseline normalized levels of circulating IgA in stroke patients with and without DNase-I treatment. HC=Healthy controls.

SUMMARY

Healthy Tissue

Cerebrovascular disease



vikramjeet.singh@uk-essen.de

DFG Deutsche Forschungsgemeinschaft

INSTITUTE FOR EXPERIMENTAL IMMUNOLOGY & IMAGING

UNIVERSITÄT DUISBURG ESSEN
Offen im Denken

ZMB ZENTRUM FÜR MEDIZINISCHE BIOTECHNOLOGIE UNIVERSITÄT DUISBURG-ESSEN
University Hospital Essen