

The macrophage as a pharmacological target in airway disease

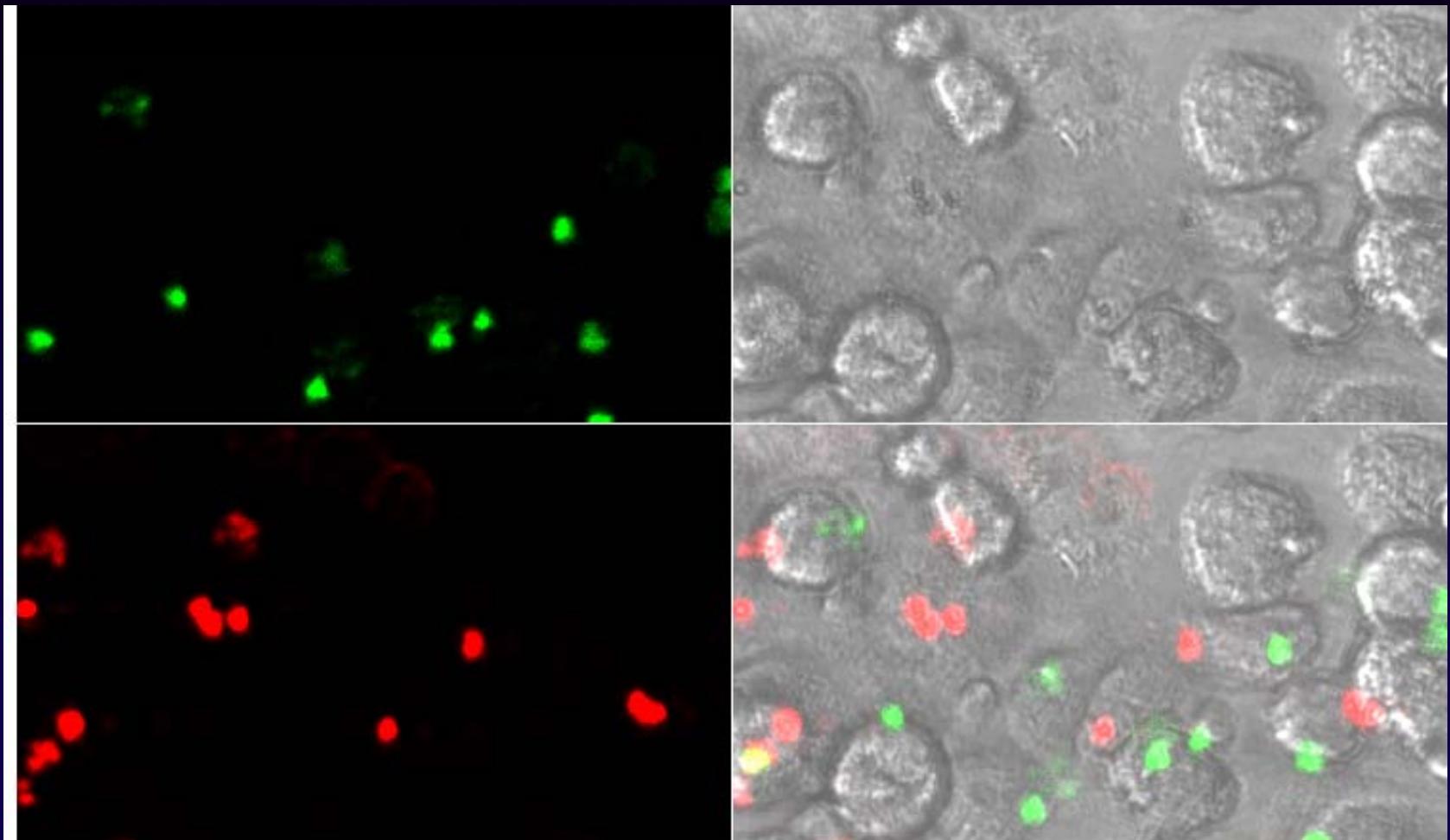
**Louise Donnelly
(l.donnelly@imperial.ac.uk)**

**Airway Disease
National Heart and Lung Institute
Imperial College London**

Macrophages in the Lung

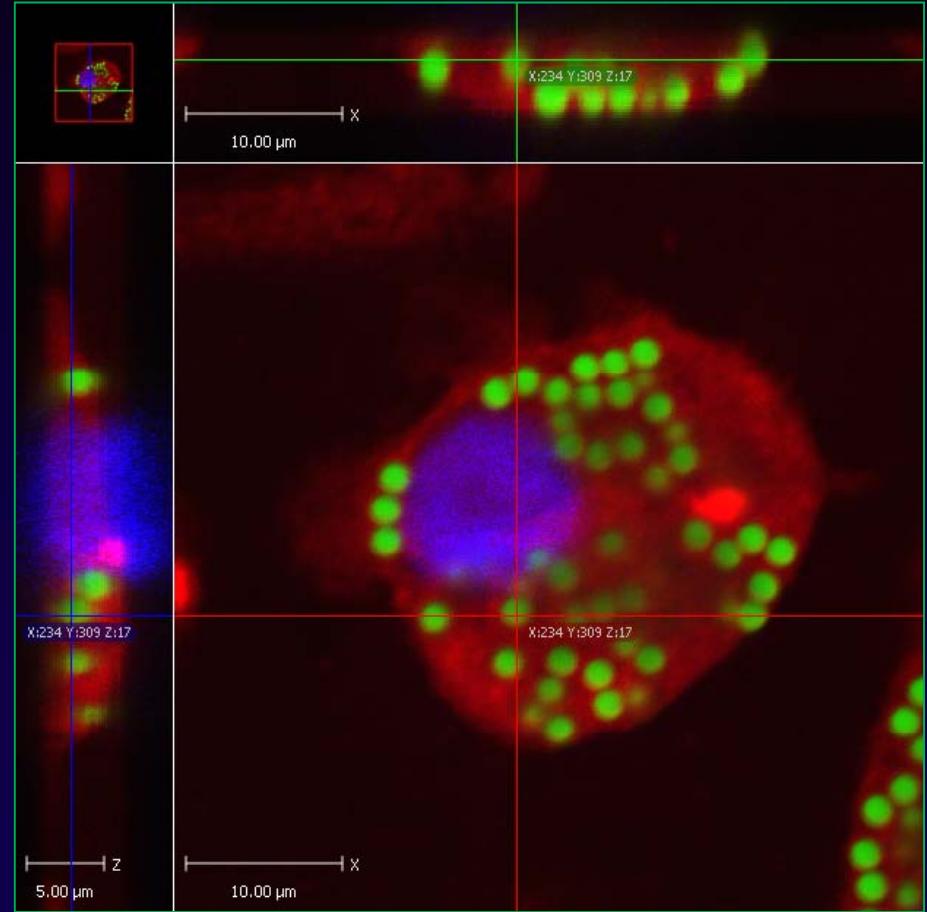
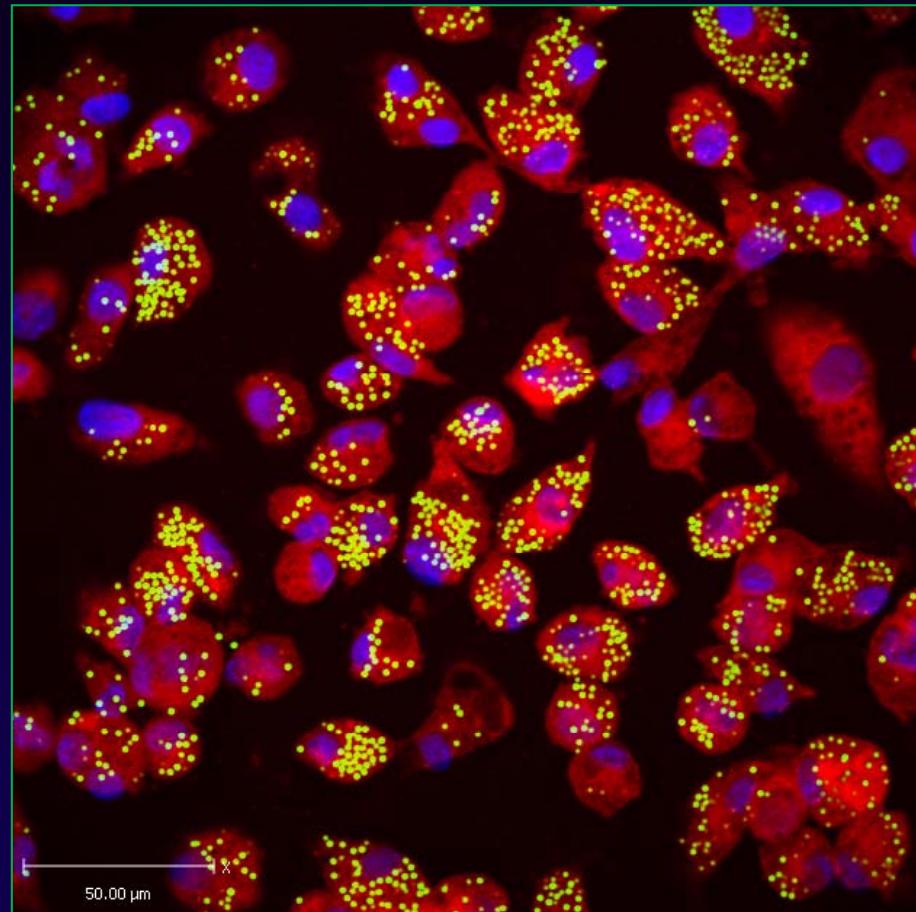
- Host Defence
Maintain sterility of the airways
 - Clearance:
 - Inhaled particles
 - Bacterial pathogens
 - Apoptotic cells
- 
- Phagocytosis
- Efferocytosis

Macrophage Phagocytosis



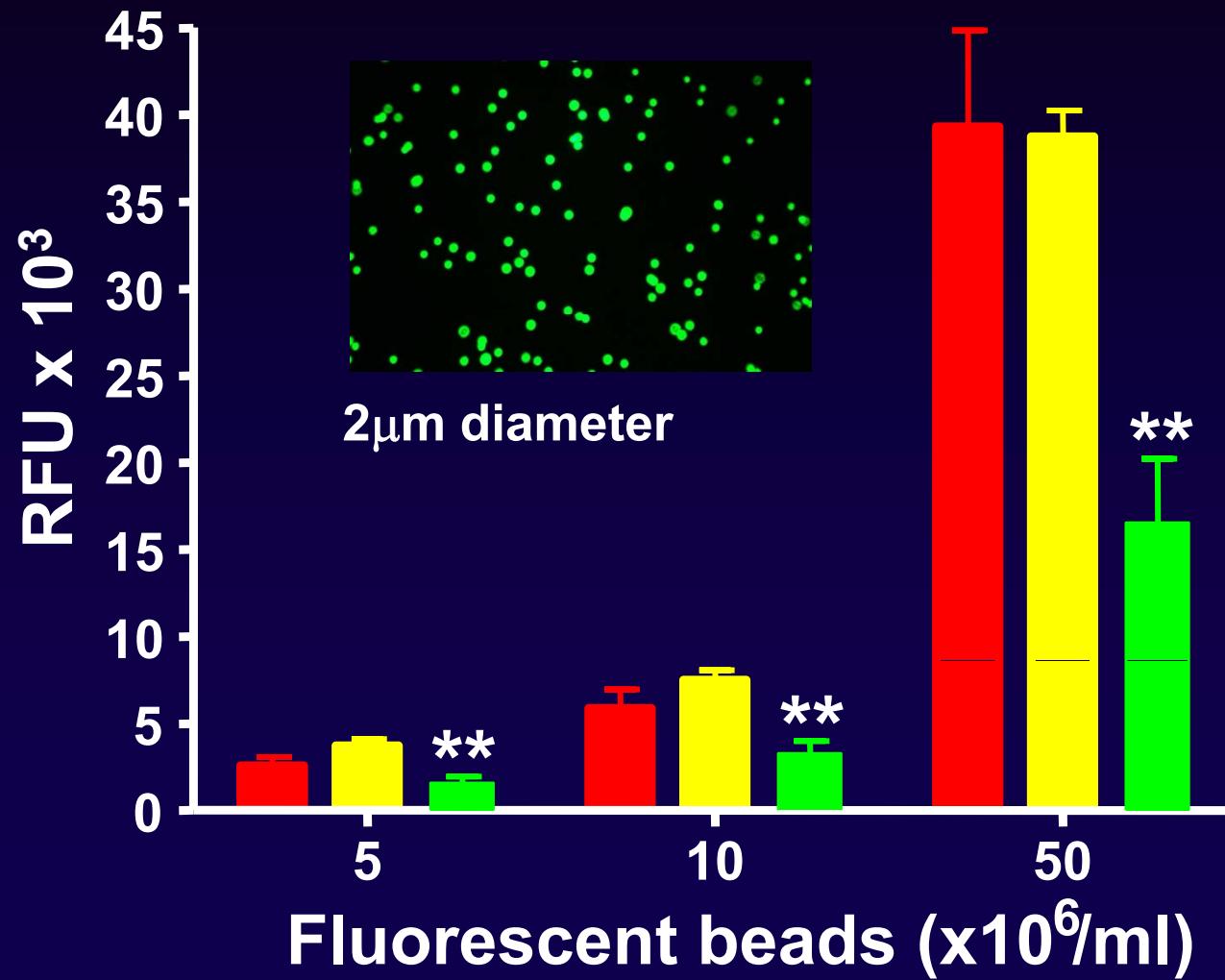
Macrophage Phagocytosis

Confocal Imaging. Phagocytosis of fluorescently labelled beads



Phagocytosis of Beads

Alveolar Macrophages, MDM,
Tissue Macrophages



Different Types of Pulmonary Macrophages

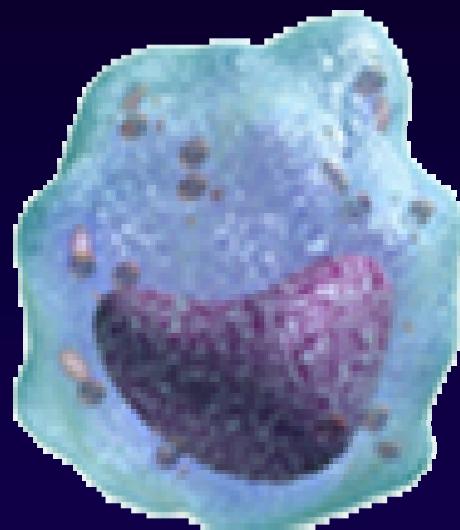
Interstitial Mφ

8 μm



Alveolar Mφ

16 μm



Macrophage Polarization

M1

M2

IFN γ /LPS

Membrane receptors

TLR2, TLR4	Scavenger receptors A + B
Fc γ -RI, II, III	CD163
(CD16, CD32, CD64)	Mannose receptor
CD80, CD86	CD14
	CD23 (Fc ε -RII)

IL-10

Cytokines

TNF- α	
IL-1	IL-1ra
IL-6	
IL-12	IL-10
IFN	

IL-4/IL-13

IL-1R type 1	Decoy IL-1R type II
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IL-4/IL-13, IL-10

Cytokine receptors

CXCL9, CXCL10, CXCL11	CCL-17, CCL-22
CCL2, CCL3, CCL4, CCL5	CCL-24
CXCL8	CCL-18 CCL-16

Chemokine receptors

CCR7	CCR2
	CXCR1, CXCR2

Effect molecules

NOS-2	arginase
ROI	

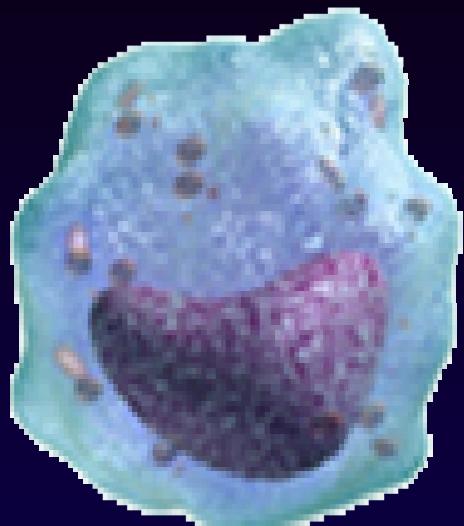
Changes in Lung Inflammatory Cells

Inflammatory cells	Asthma	COPD
CD45 ⁺	2	2
CD3 ⁺	2	4
CD4 ⁺	3	3
CD8 ⁺	2	8
Macrophages	0	9
Neutrophils	-2	2
Eosinophils	93	4

Fold change in number of cells vs healthy controls

Jeffery, P.K (2000) *Chest* 117: 251S-260S

Macrophages and Asthma



Lack of AHR suppression

Remodelling

↑ MMP-9
TGF- β

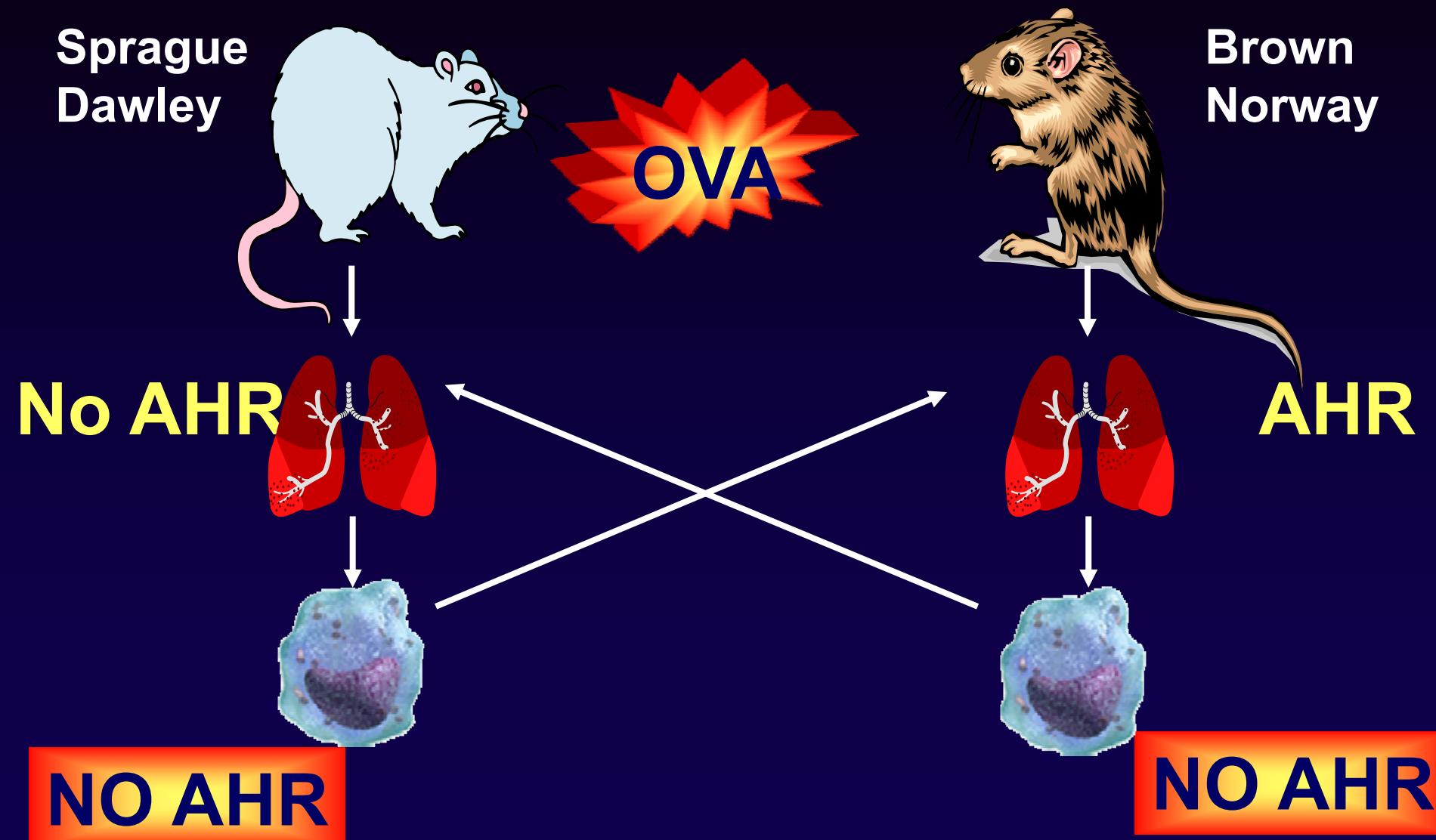
T-cell responses

↑ CD4+ IL-5

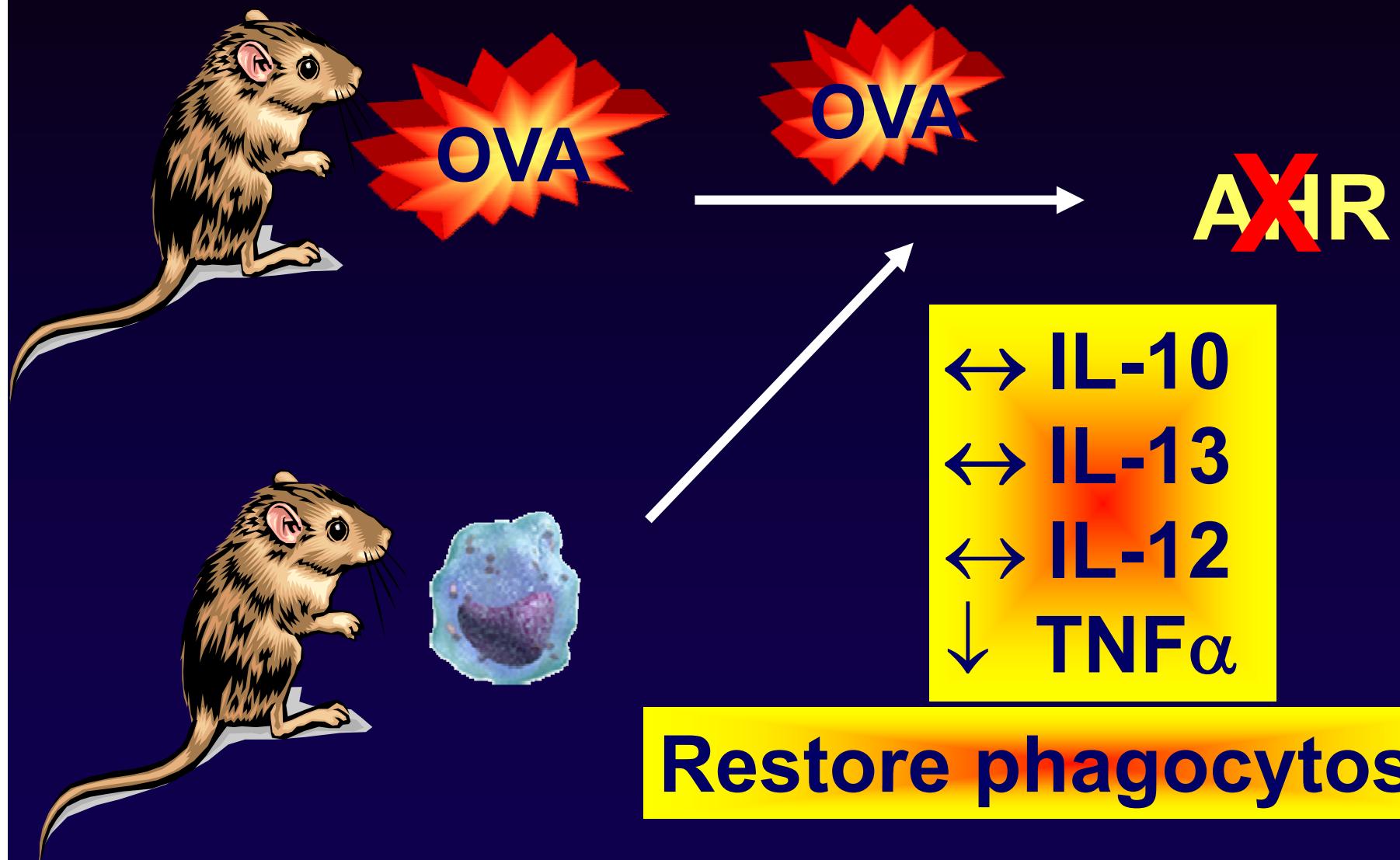
Mediators

↑ CO
IL-12, IL-18

Macrophage Suppression of AHR



How can Macrophages Suppress AHR?



Summary: Macrophages in Asthma

- Modulate the inflammatory response
 - ↓ IL-10, IFN λ , ↑ IL-4
- Remodelling
- Regulate AHR

Chronic Obstructive Pulmonary Disease

- Chronic bronchitis

mucus

Chronic
Inflammation

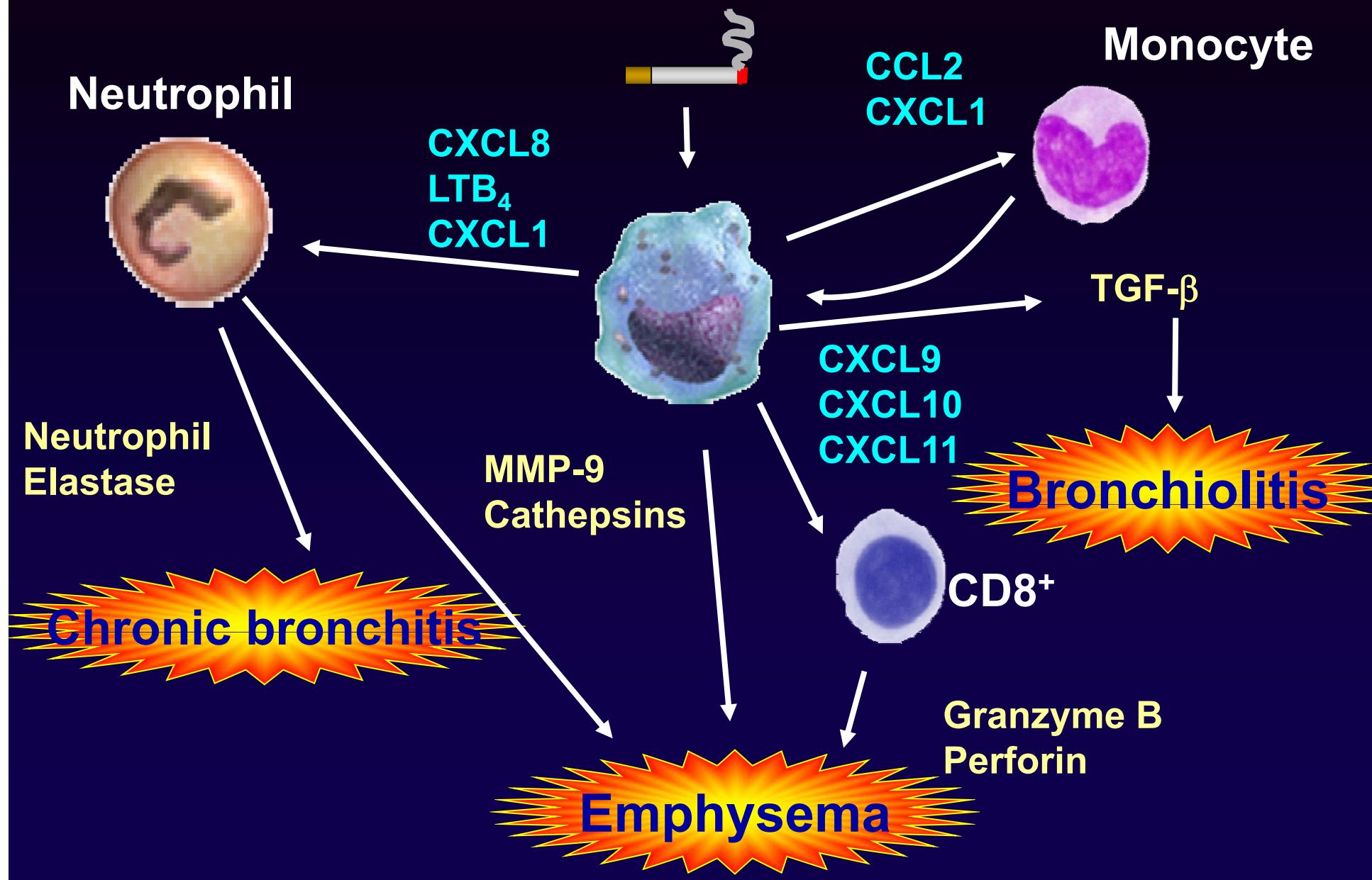
'small'

'collapse'

- Emphysema



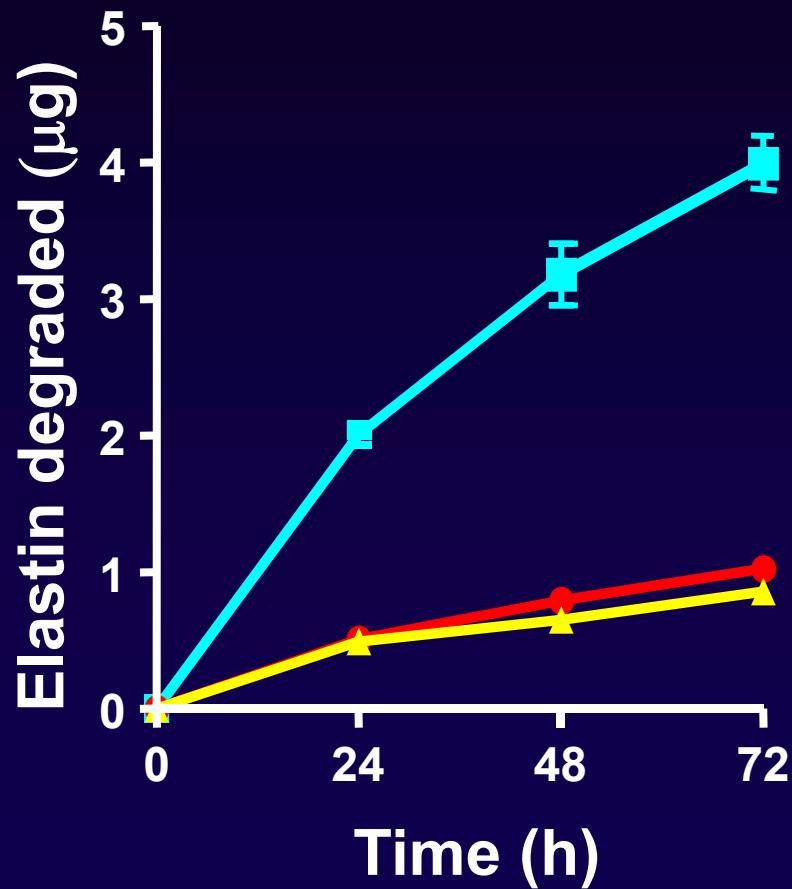
Macrophages in COPD



Macrophages and COPD

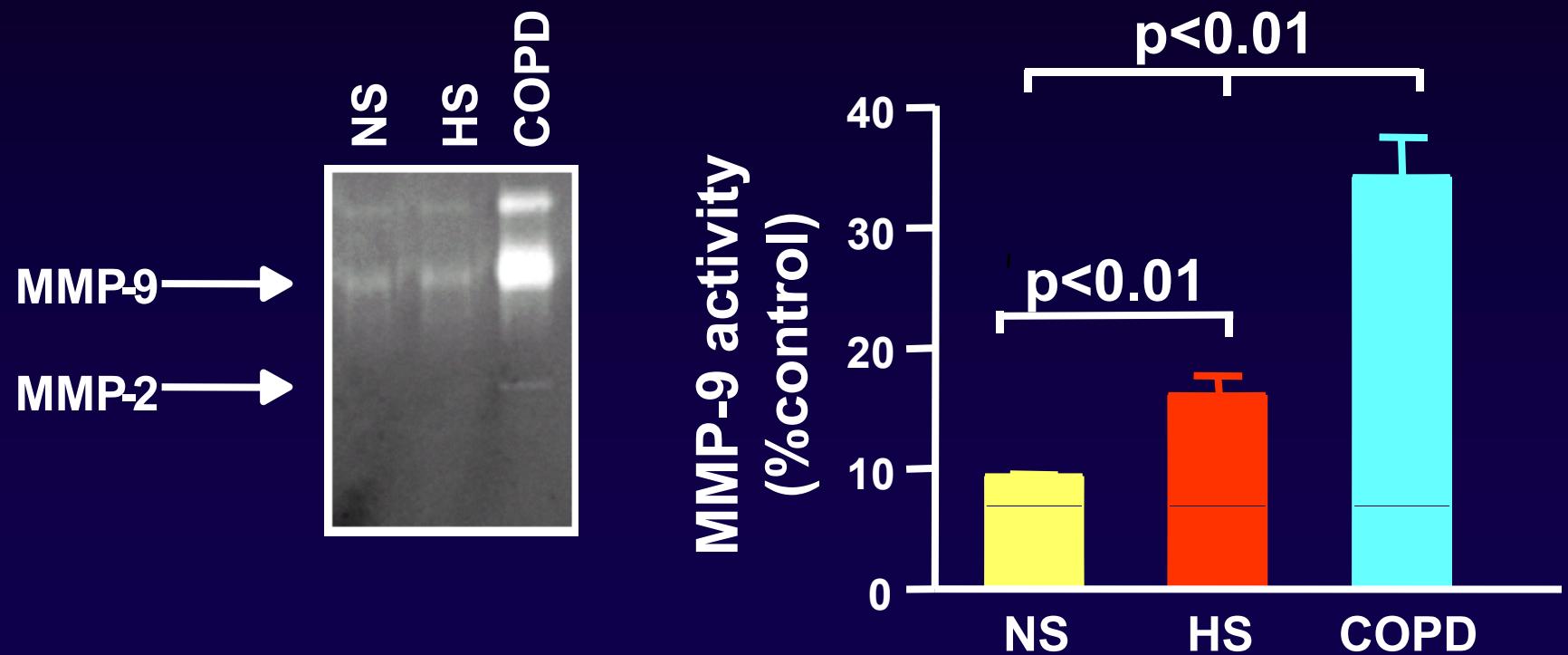
- ↑ Macrophages in BAL and sputum
- ↑ Macrophages at sites of proteolytic damage
- ↑ Macrophages produce increased proteases and chemokines
 - **MMP-9, IL-8**

Release of Elastolytic Activity by Alveolar Macrophages (normal, smokers, COPD subjects)

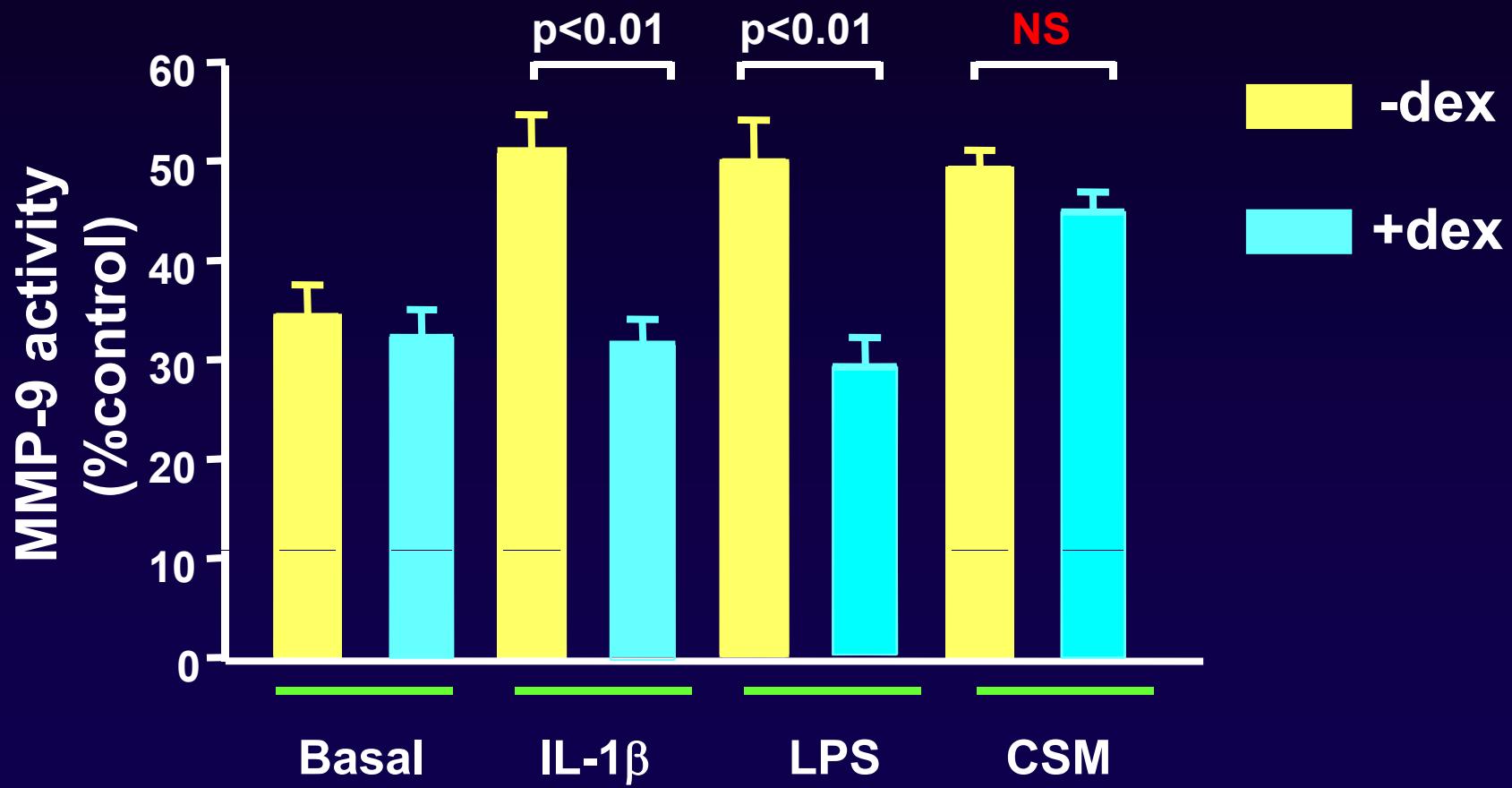


Russell et al., (2002) AJP Lung Cell Mol. Physiol. 283:L867-873

Release of MMP Activity by Alveolar Macrophages

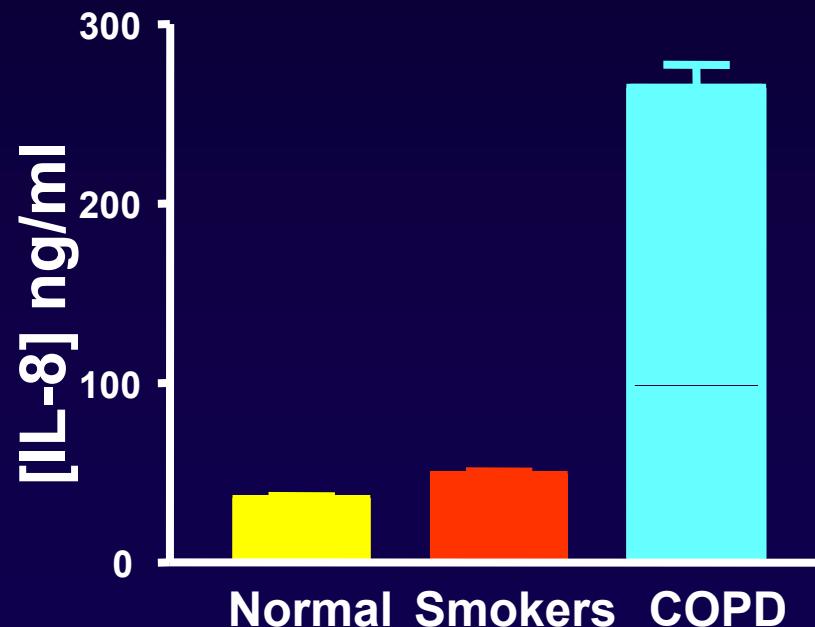


Effect of Dexamethasone on Release of MMP Activity by Macrophages from COPD Patients

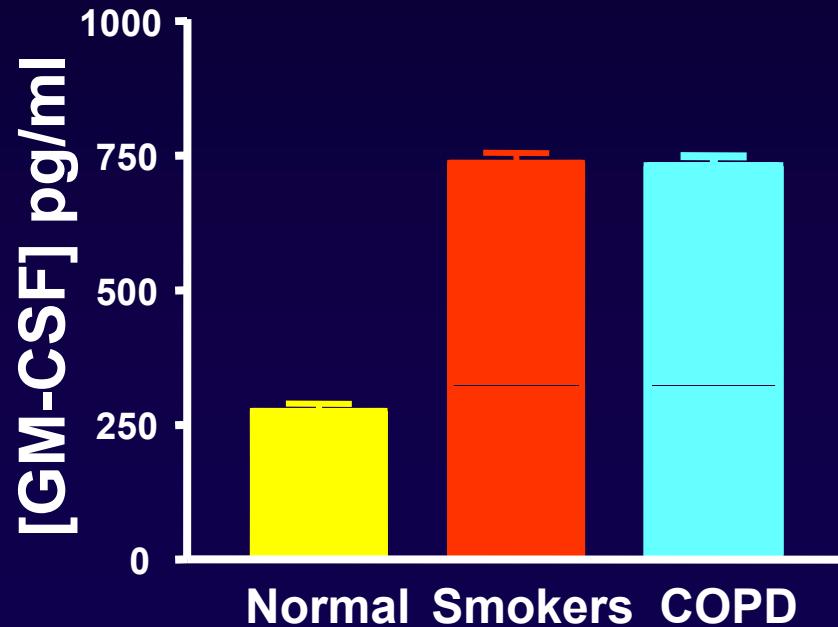


Cytokine Release by Alveolar Macrophages

IL-8



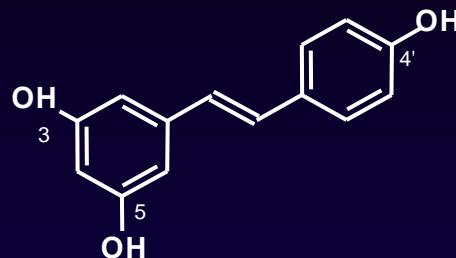
GM-CSF



Anti-inflammatory agents



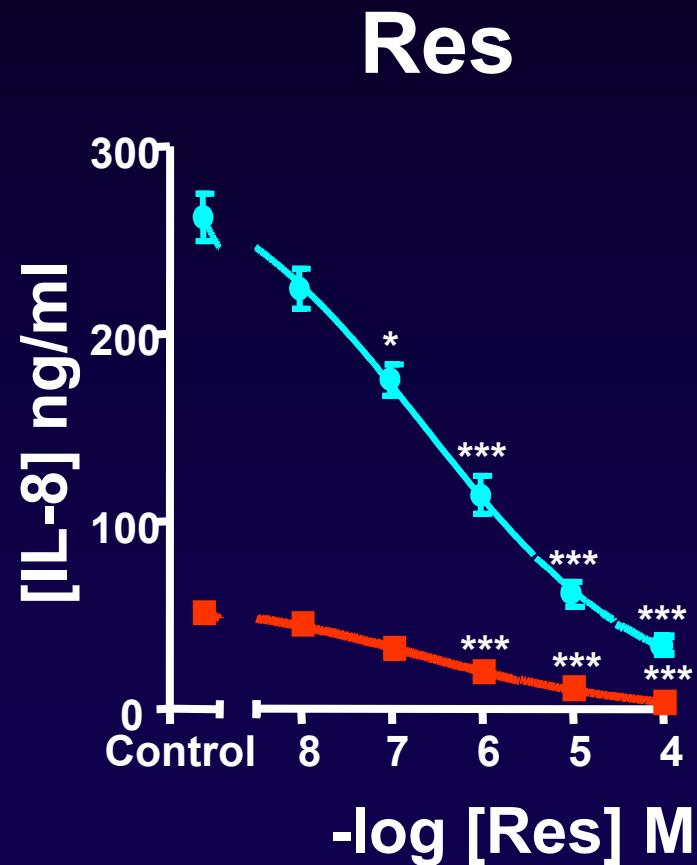
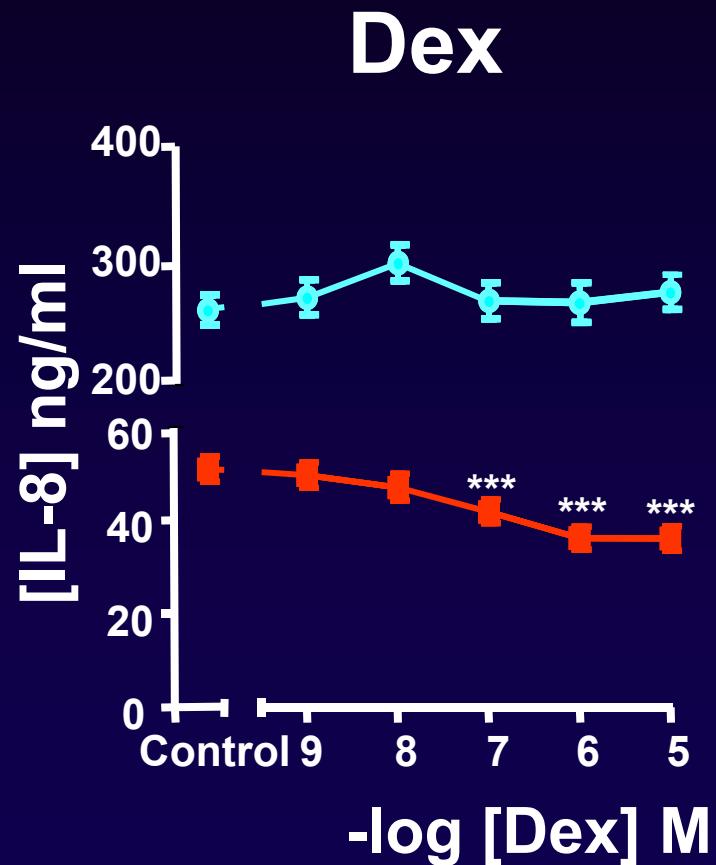
Dexamethasone



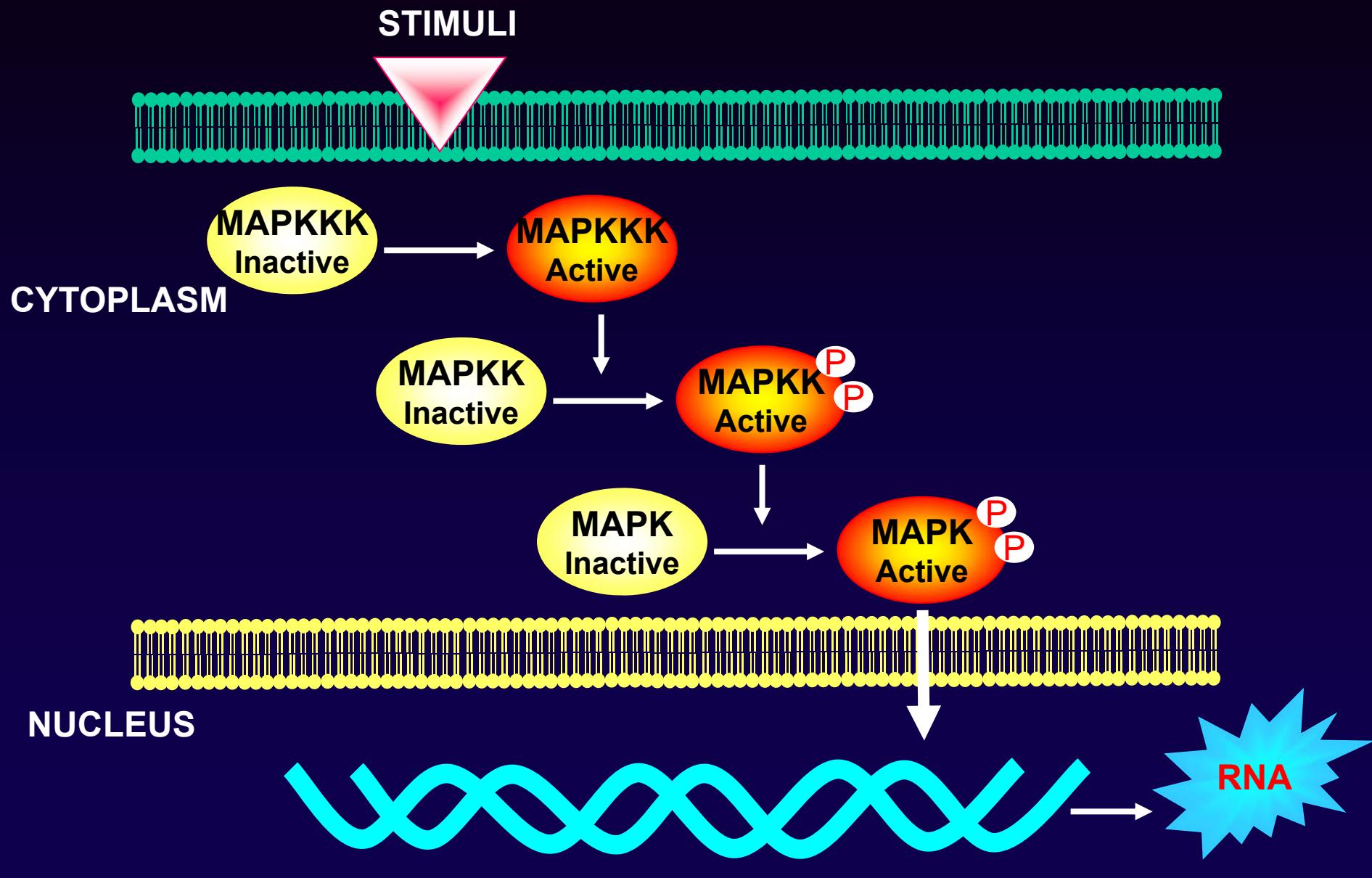
Resveratrol

- Glucocorticosteroid
- Anti-inflammatory
- Found in the skin of peanuts, red fruit (plums and grapes) and red wine
- Anti-oxidant and anti-proliferative properties

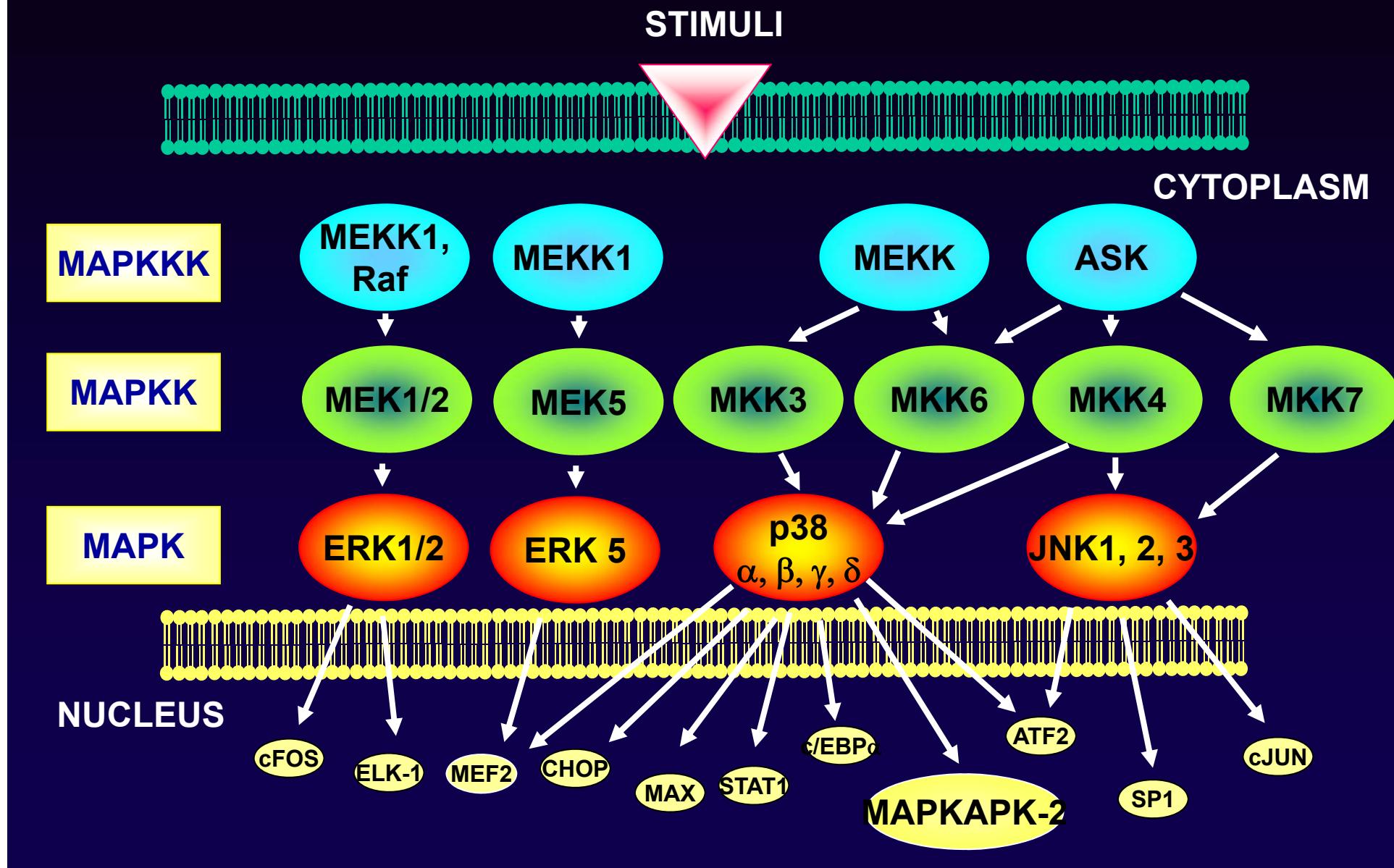
Effect of Dexamethasone and Resveratrol on IL-8 release by Alveolar Macrophages (smokers, COPD)



MAP Kinase Pathways

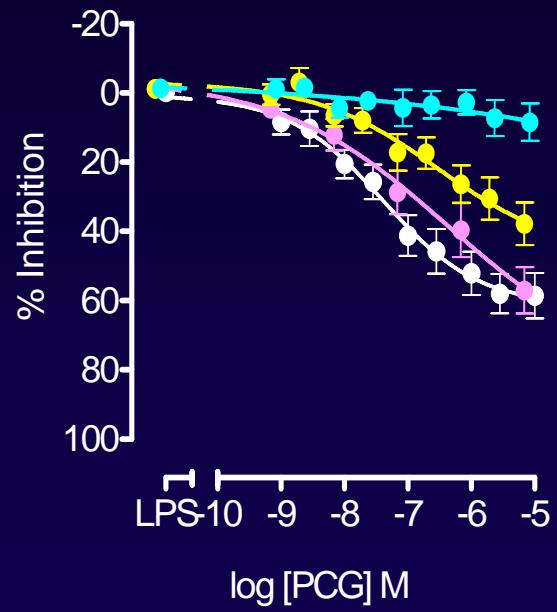
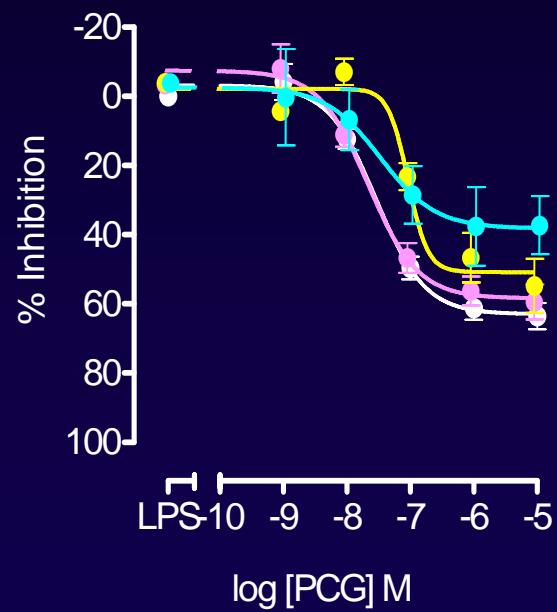
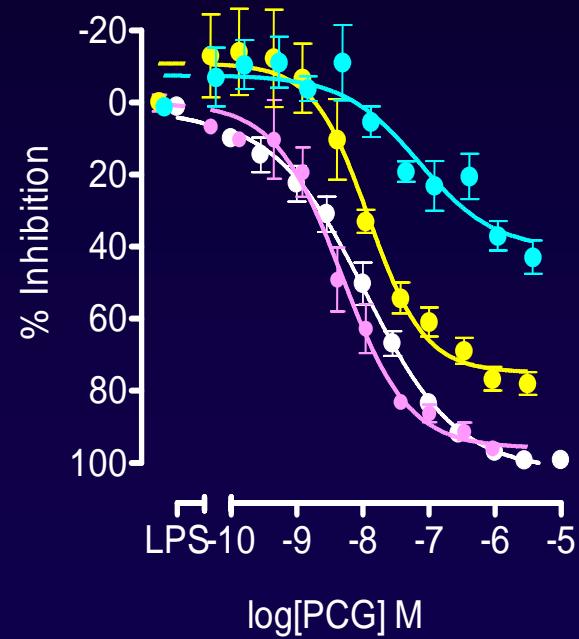


MAP Kinase Pathways



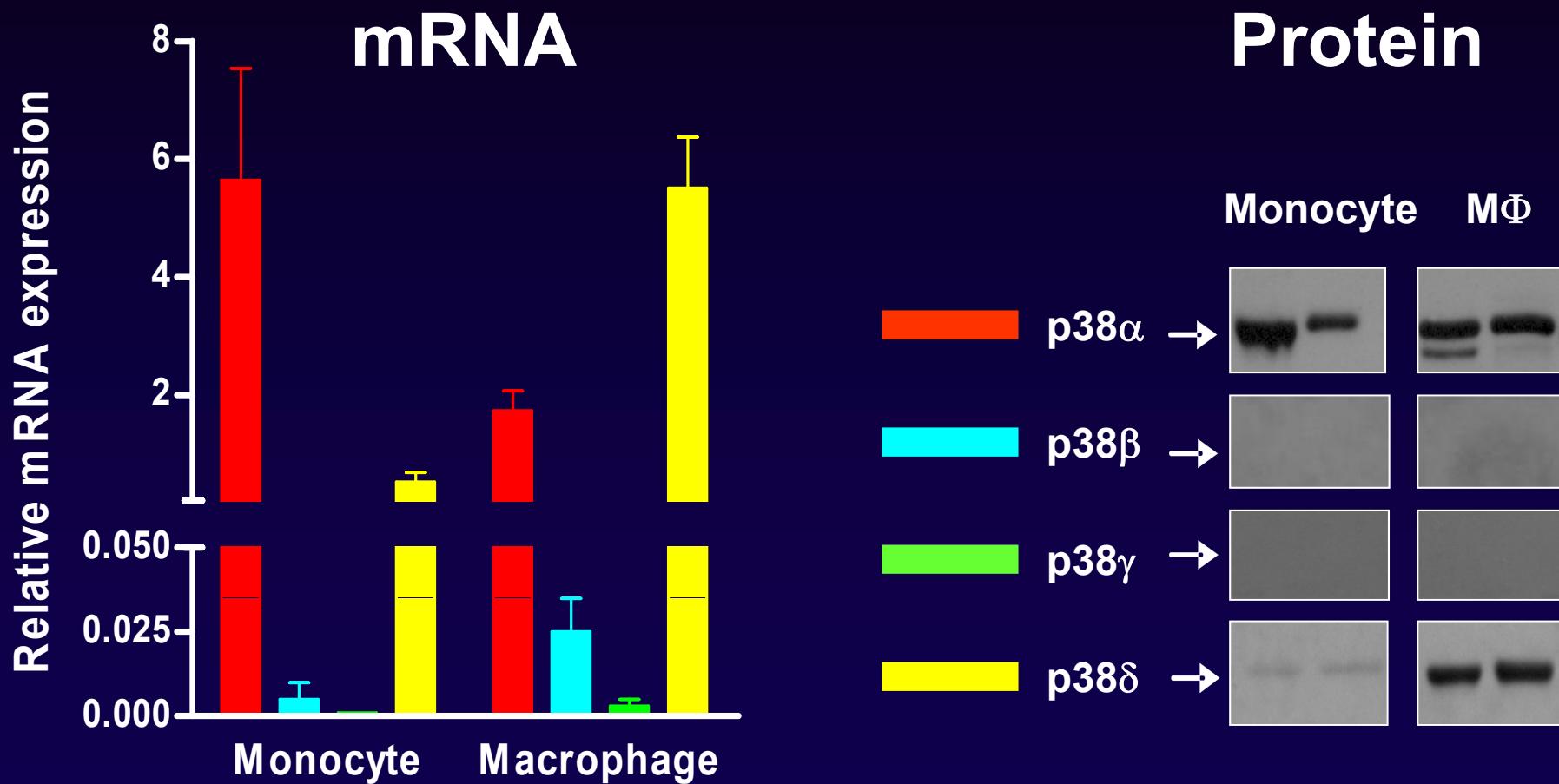
Effects of a PCG on Cytokine Release

Monocyte
MONOCYTES > **Derived Macrophages** > **MACROPHAGES**



TNF- α = **GM-CSF** > **IL-6** > **IL-8**

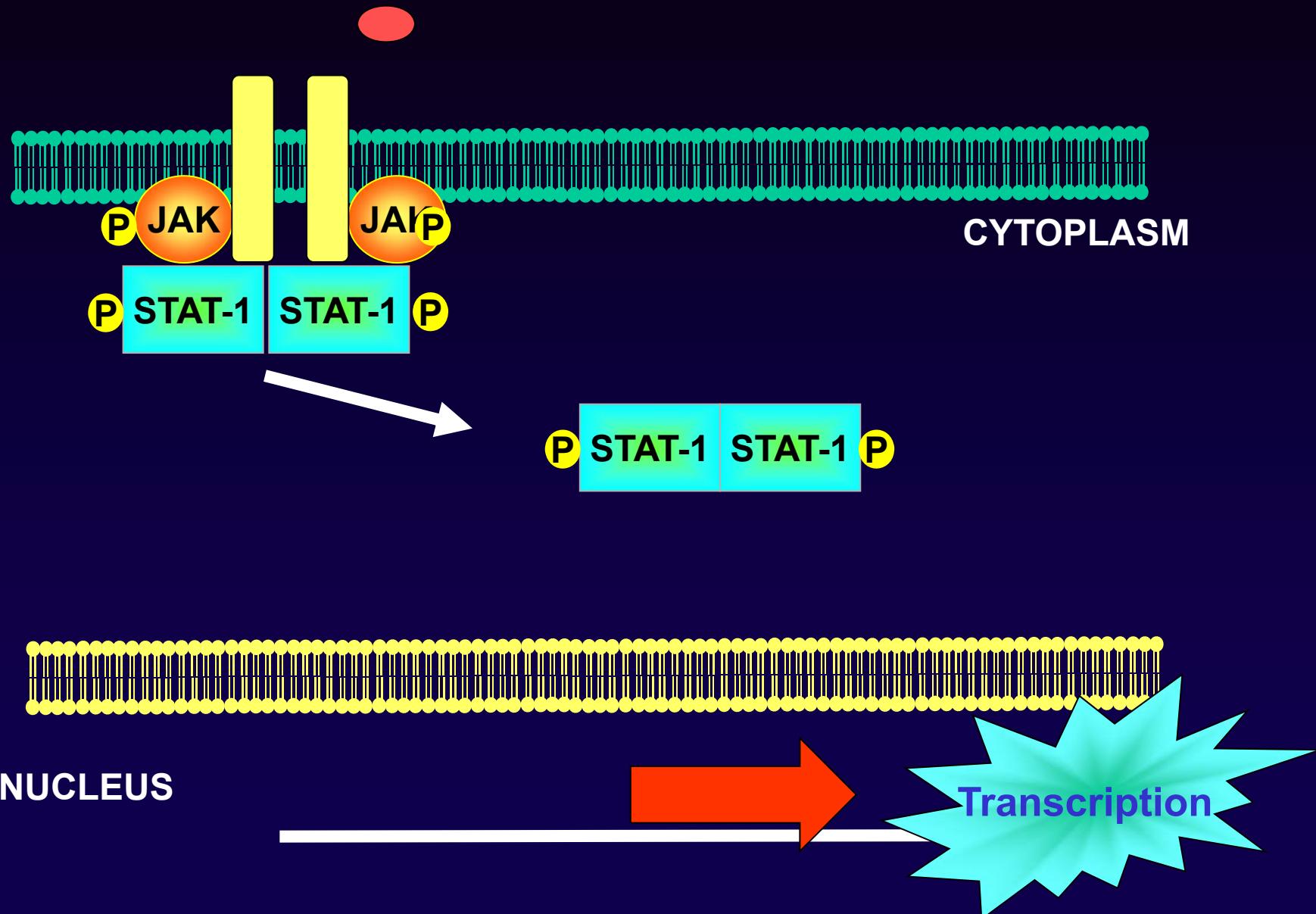
Differential Expression of p38 MAP Kinase Isoforms in Monocytes and Macrophages



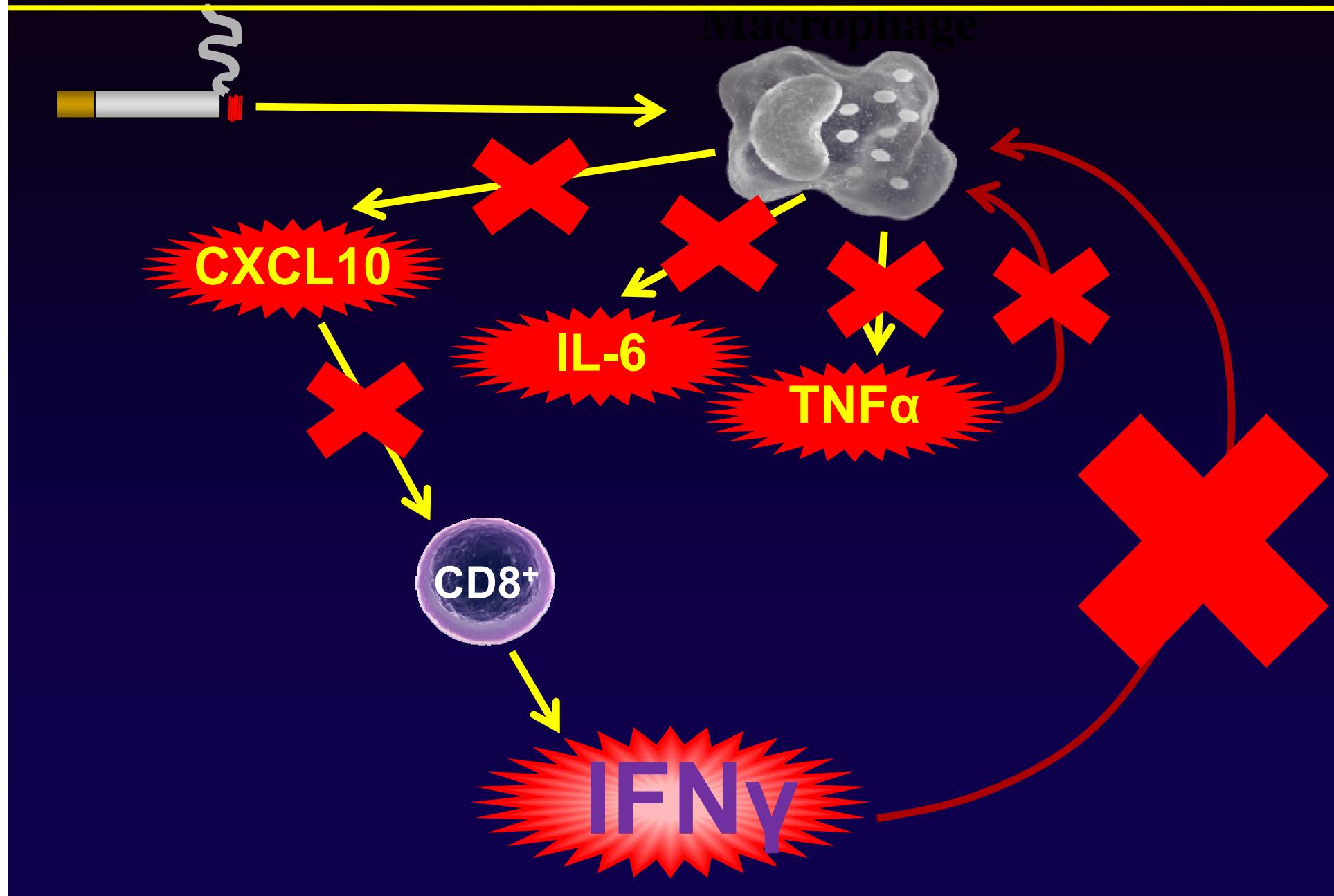
Hale et al., 1999 J Immunol 162: 4246-52

Smith et al., 2006 Brit J Pharmacol 149: 393-404

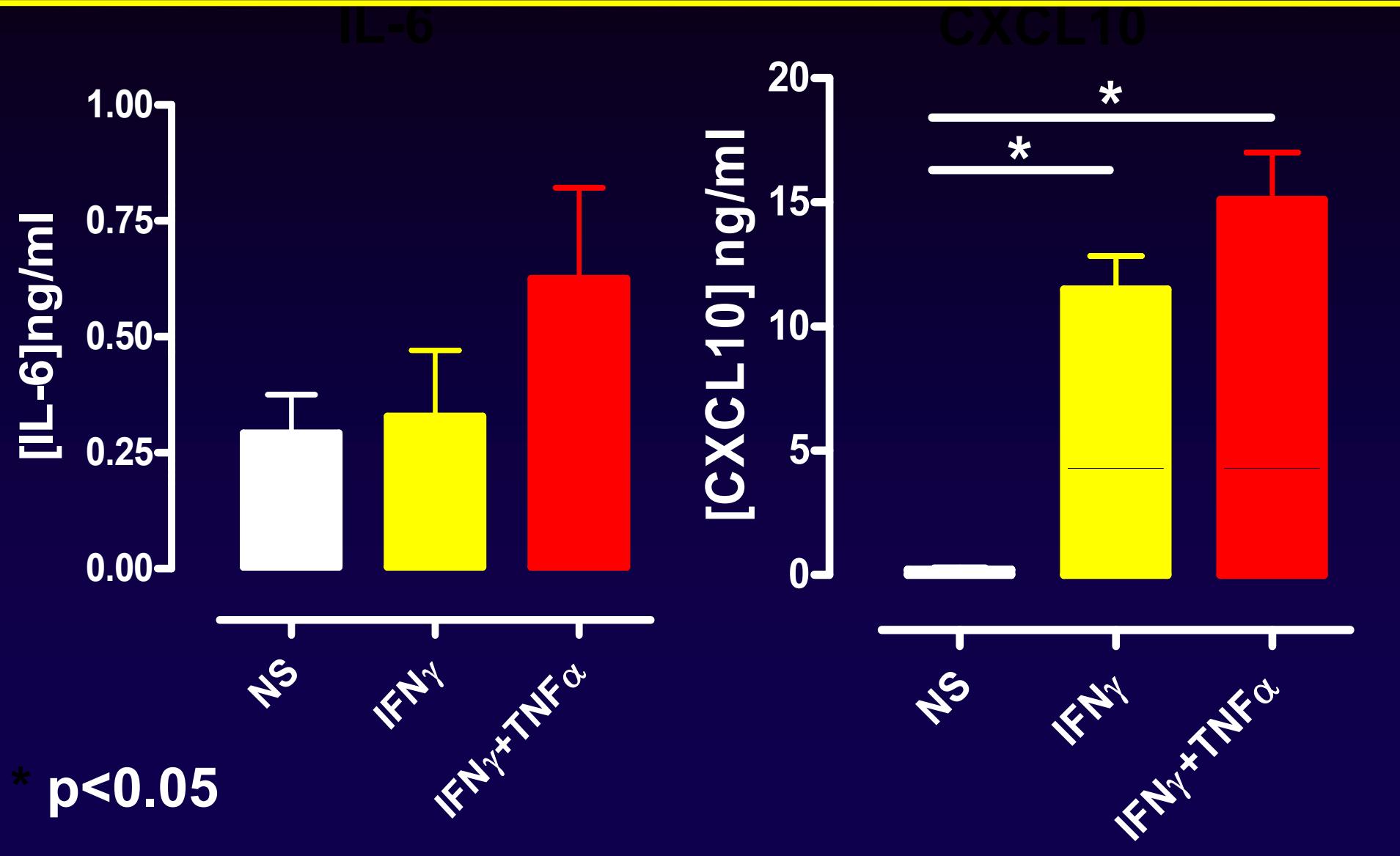
IFN γ Signalling



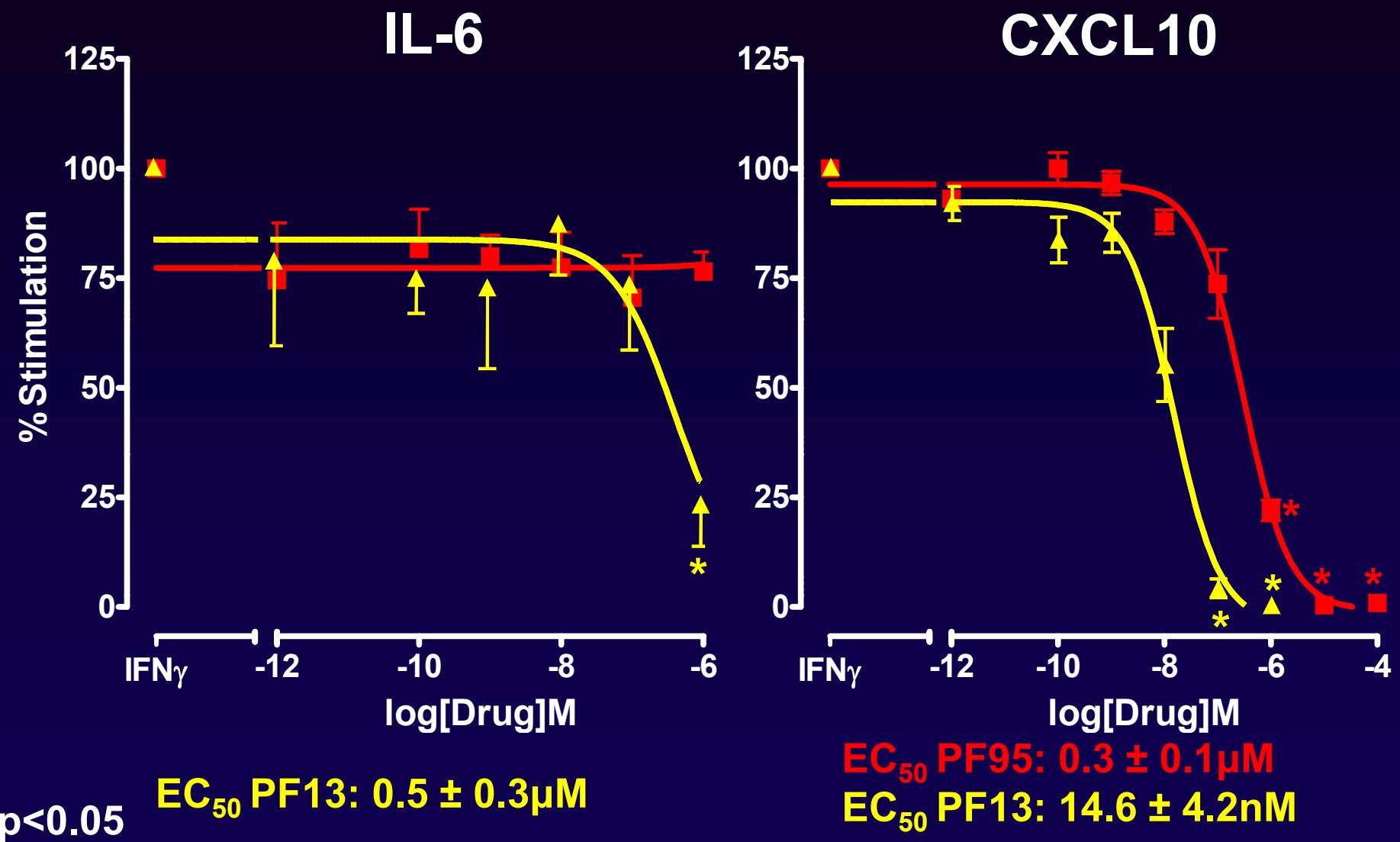
Inflammation in COPD



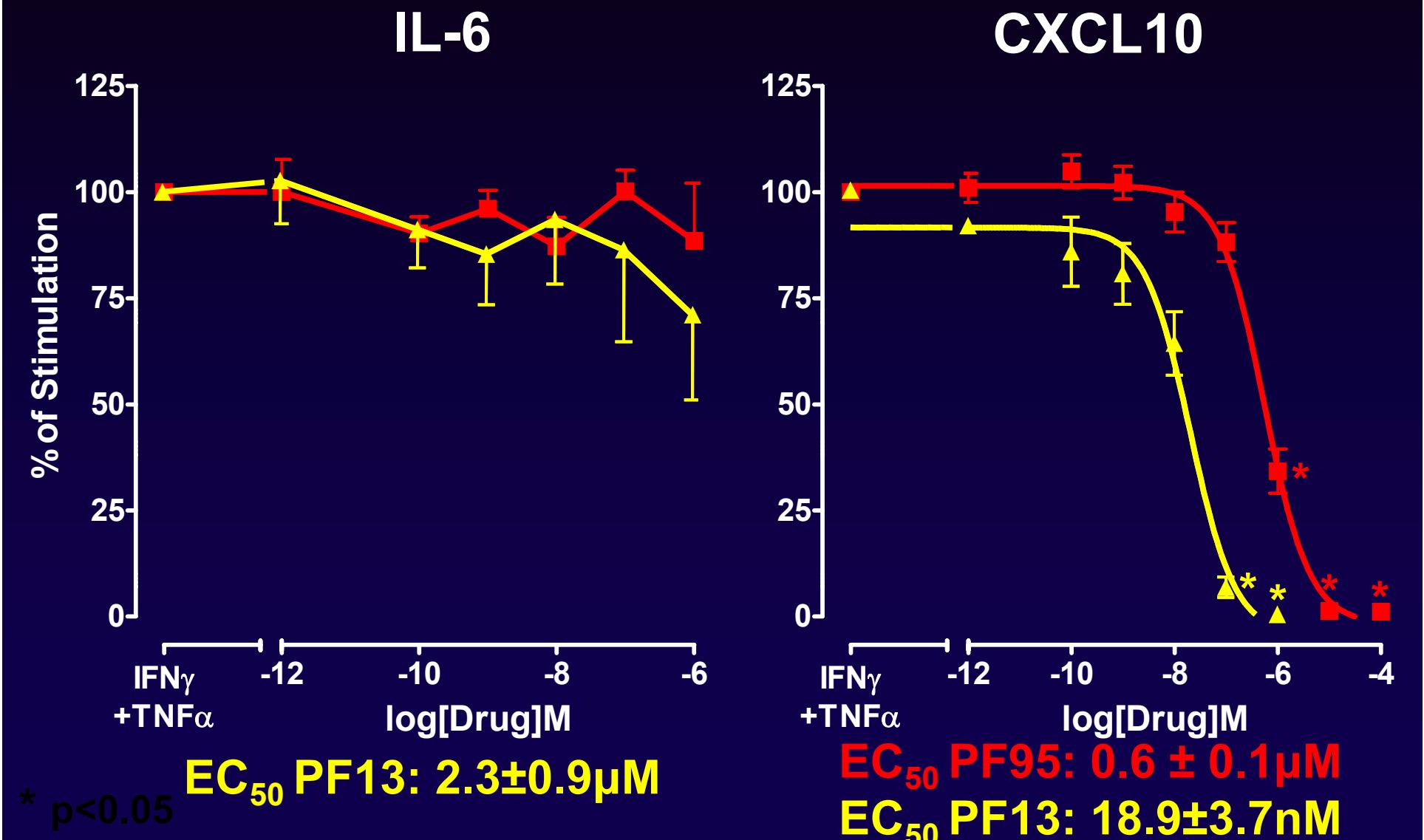
Effect of $\text{IFN}\gamma \pm \text{TNF} \alpha$ on Macrophage Stimulation of IL-6 and CXCL10 (n=4-5)



Effect of JAK/STAT inhibitors (PF95, PF13) on IFN γ stimulated cytokine release (n=4-5)



Effect of JAK/STAT inhibitors (PF95, PF13) on IFN γ +TNF α stimulated cytokine release (n=4-5)



Summary

Inhibition of signal transduction pathways could provide anti-inflammatory therapies

However, macrophage differentiation state may alter these responses

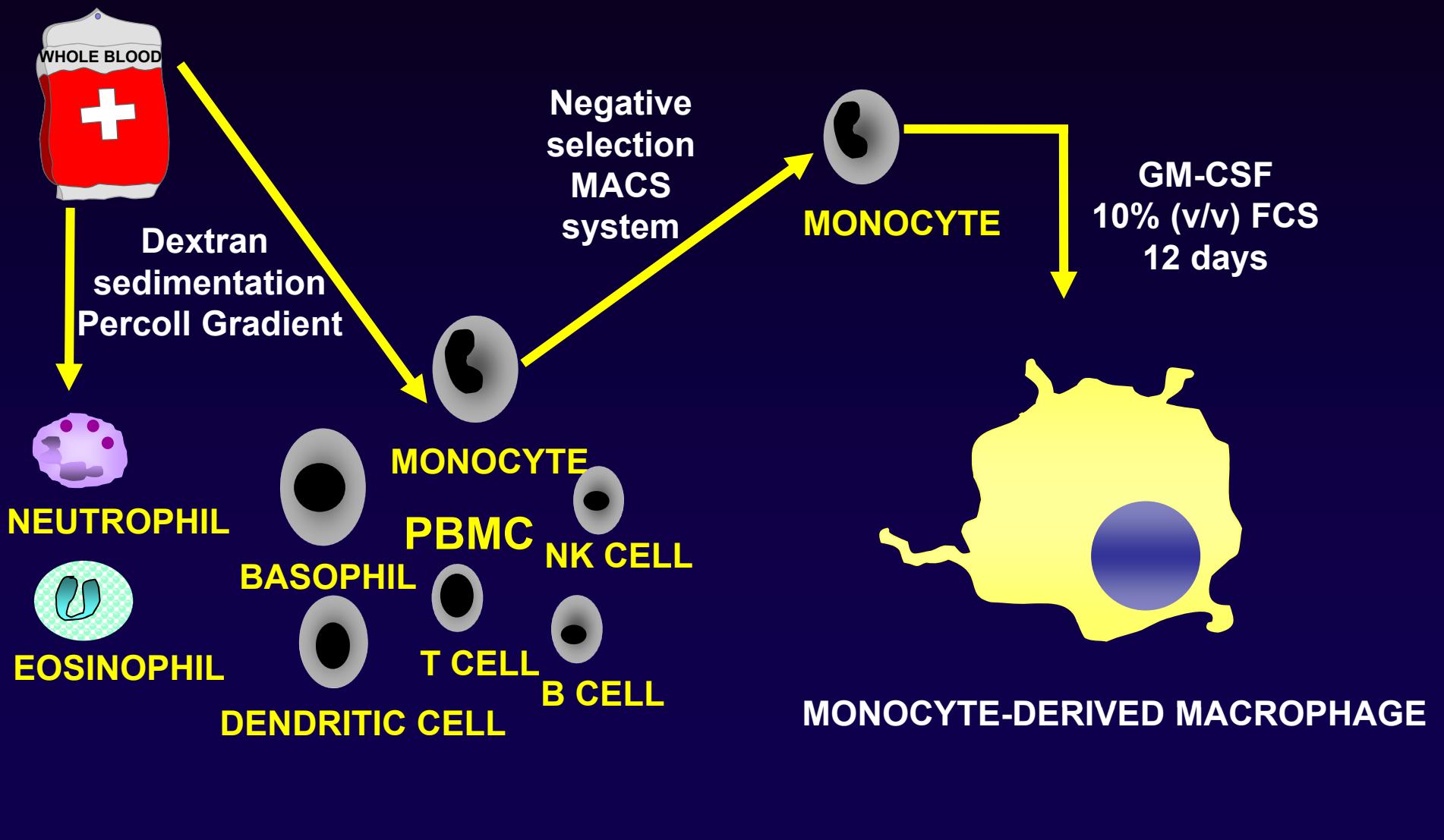
Macrophage Phagocytosis in COPD

- Alveolar macrophages phagocytose inhaled particles and pathogens and maintain sterility of the airways
- Despite increased numbers of macrophages in COPD the lower airways are colonised
- This suggests defective pathogen clearance by macrophages in COPD

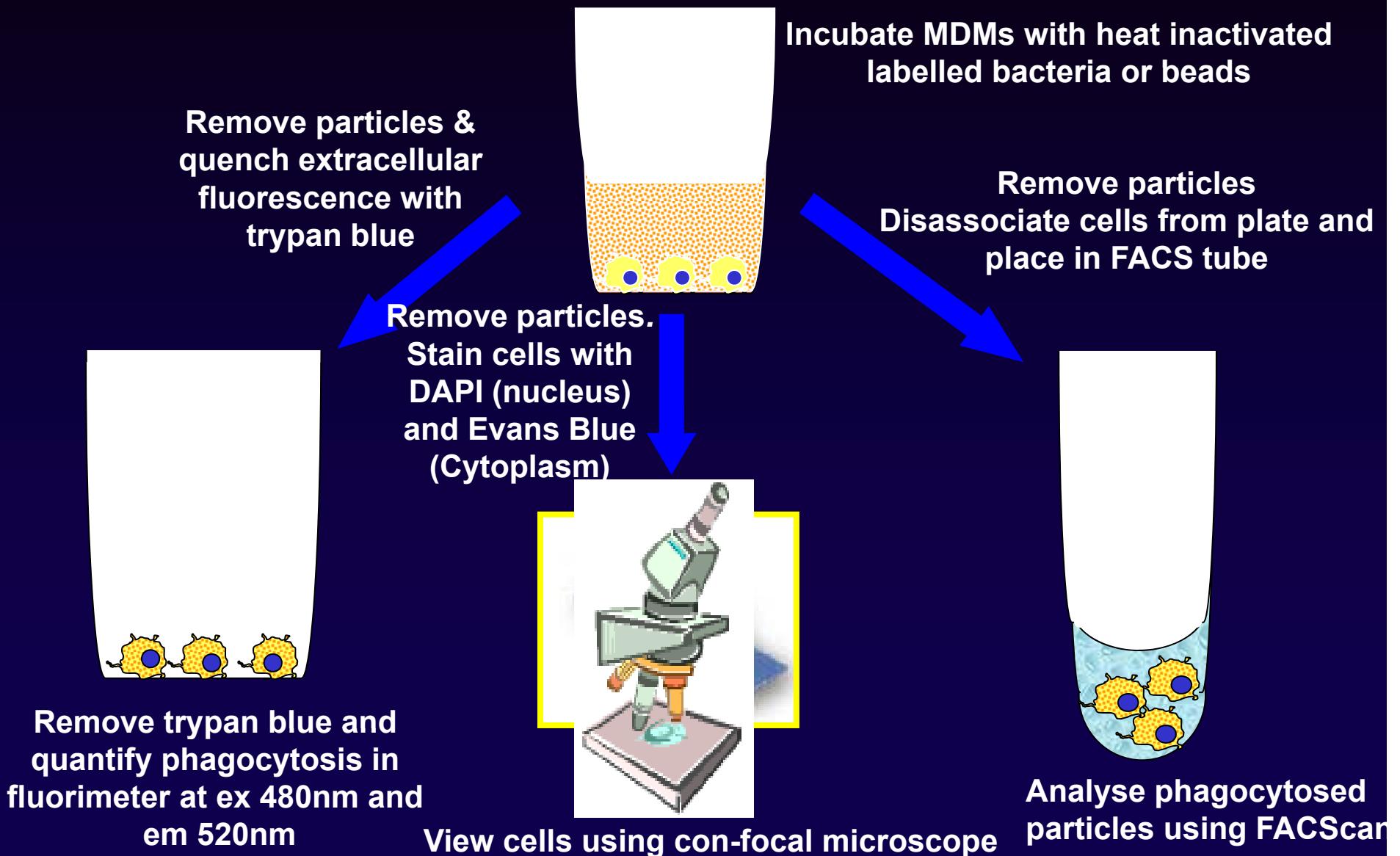
COPD and Exacerbations

- COPD exacerbations are the most common cause of hospital admissions in the UK
- Increased numbers of exacerbations are associated with decline in lung function
- Approx 40% of exacerbations are caused by bacterial infections
 - *H. influenzae*
 - *S. pneumoniae*

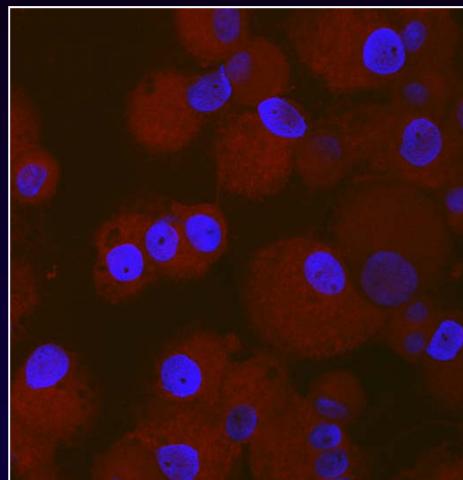
Leukocyte Isolation and Differentiation of MDM



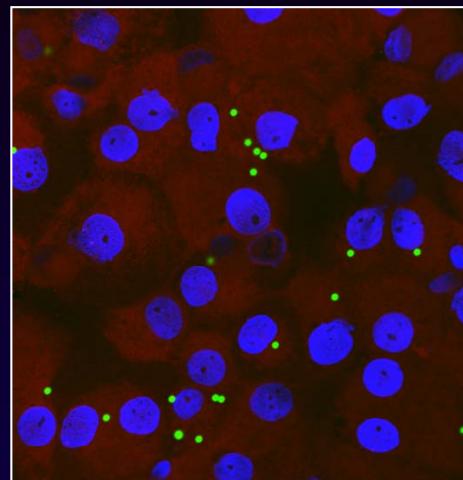
Measurement of Phagocytosis



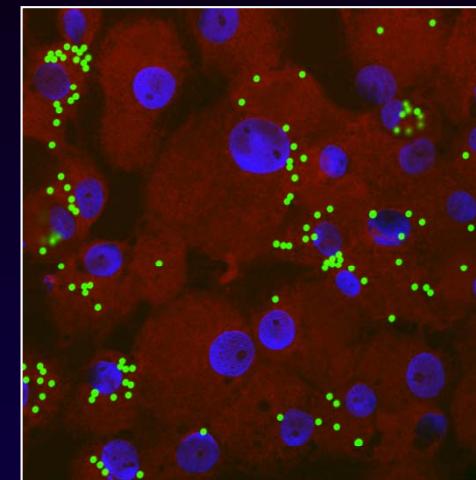
MDM phagocytosis of Beads



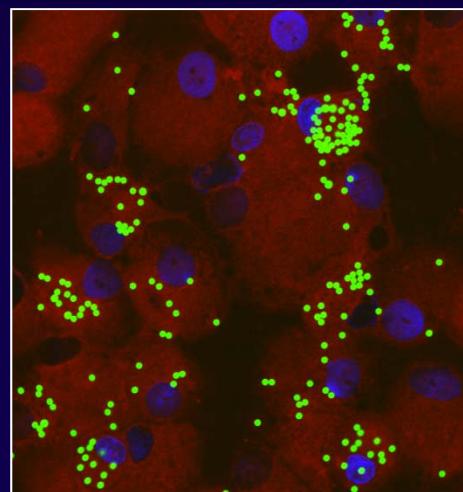
No beads



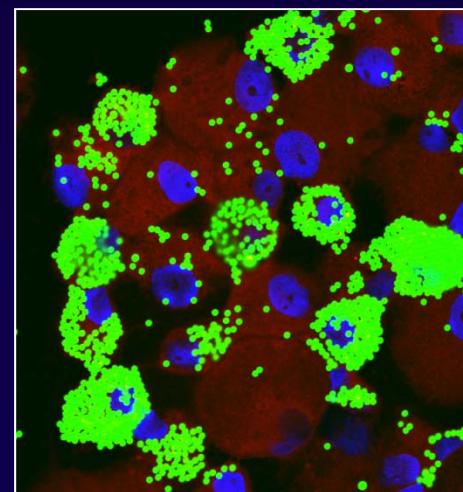
1x10⁶ beads/ml



5x10⁶ beads/ml



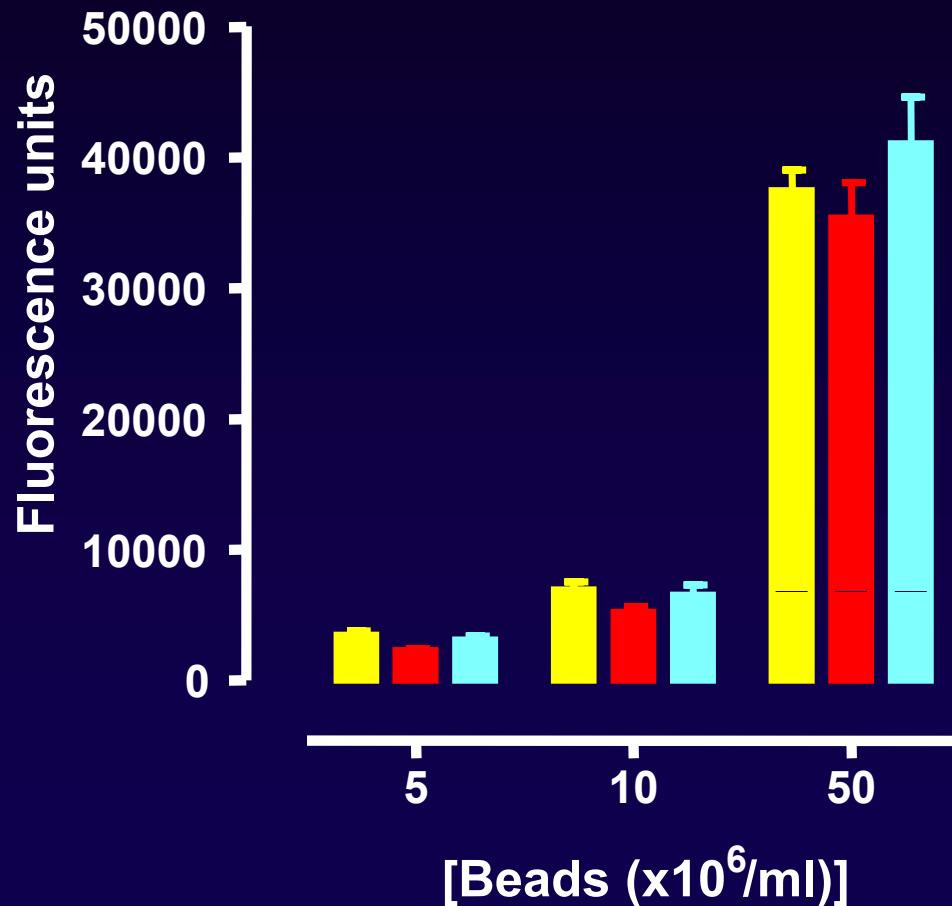
10x10⁶ beads/ml



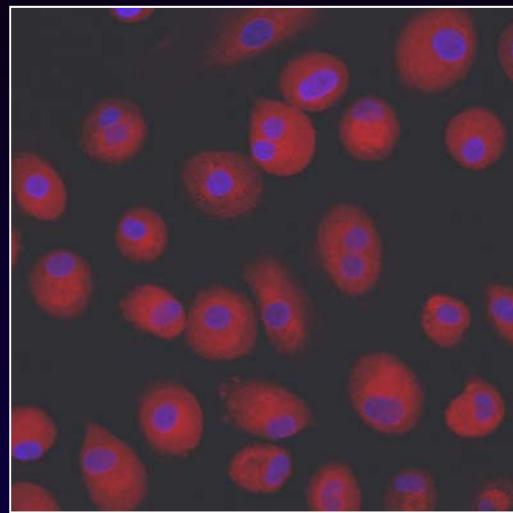
50x10⁶ beads/ml

MDM phagocytosis of beads

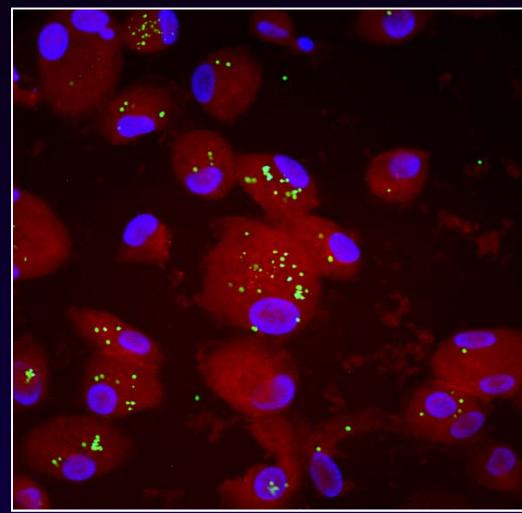
Non-smokers (n=9), smokers (n=13) and COPD subjects (n=11)



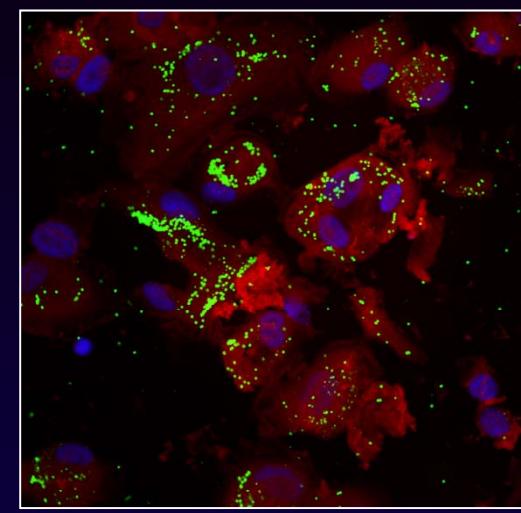
Phagocytosis of *E.coli*



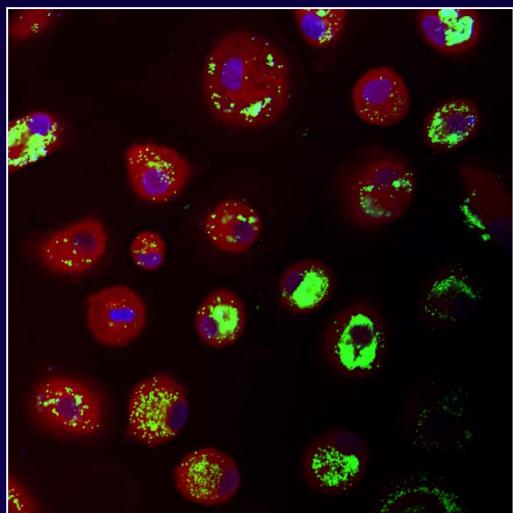
No *E.coli*



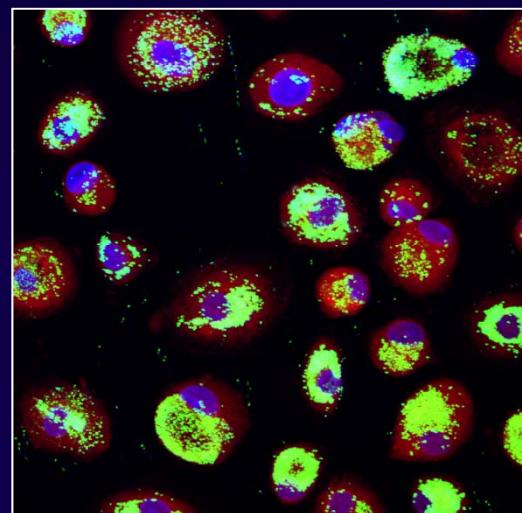
1 μ g/ml *E.coli*



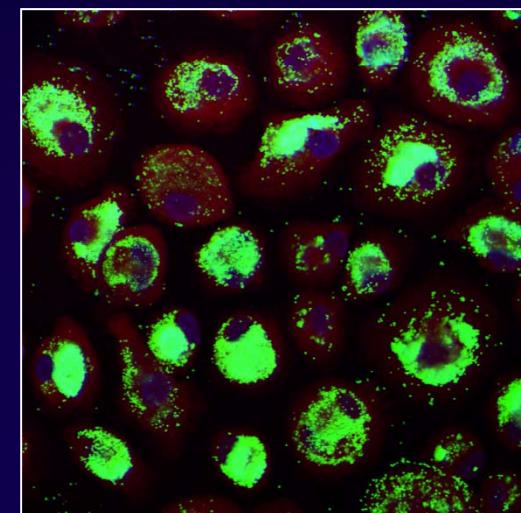
2 μ g/ml *E.coli*



25 μ g/ml *E.coli*



100 μ g/ml *E.coli*



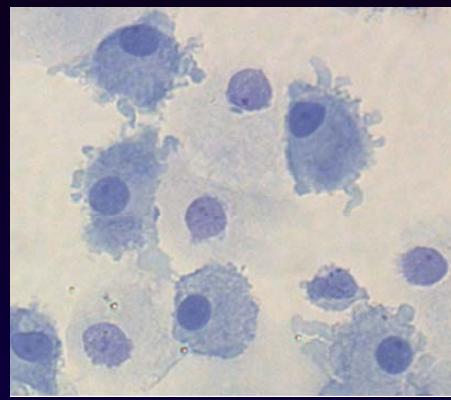
400 μ g/ml *E.coli*

Does Disease Affect Phagocytosis?

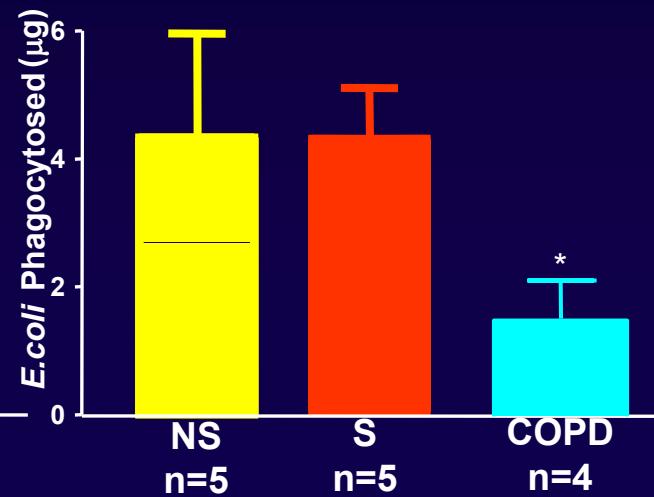
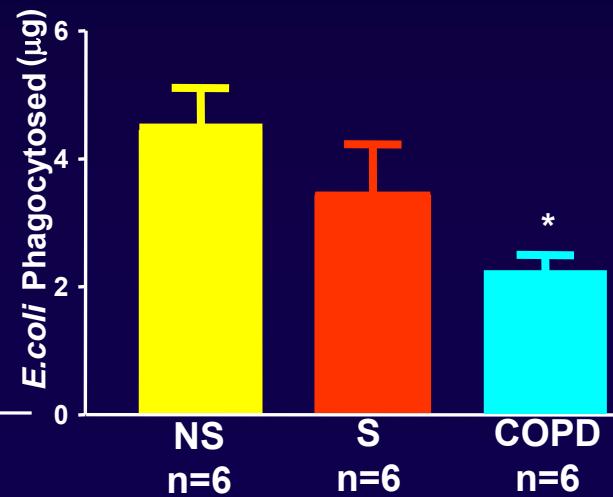
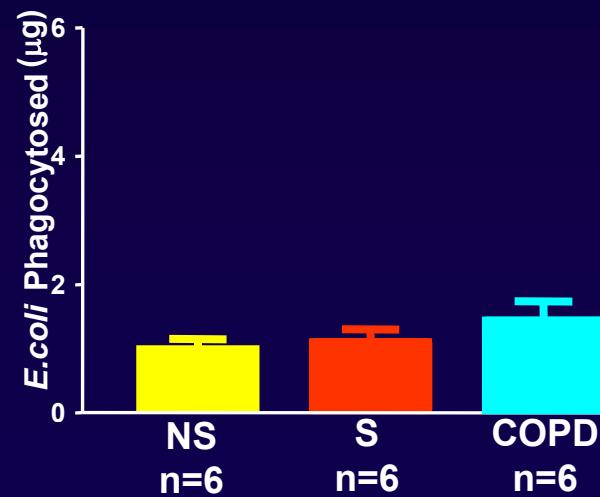
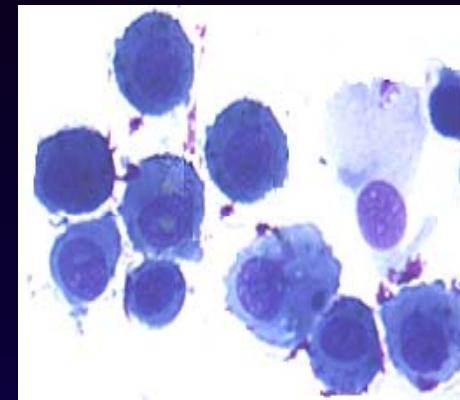
Monocytes



MDM

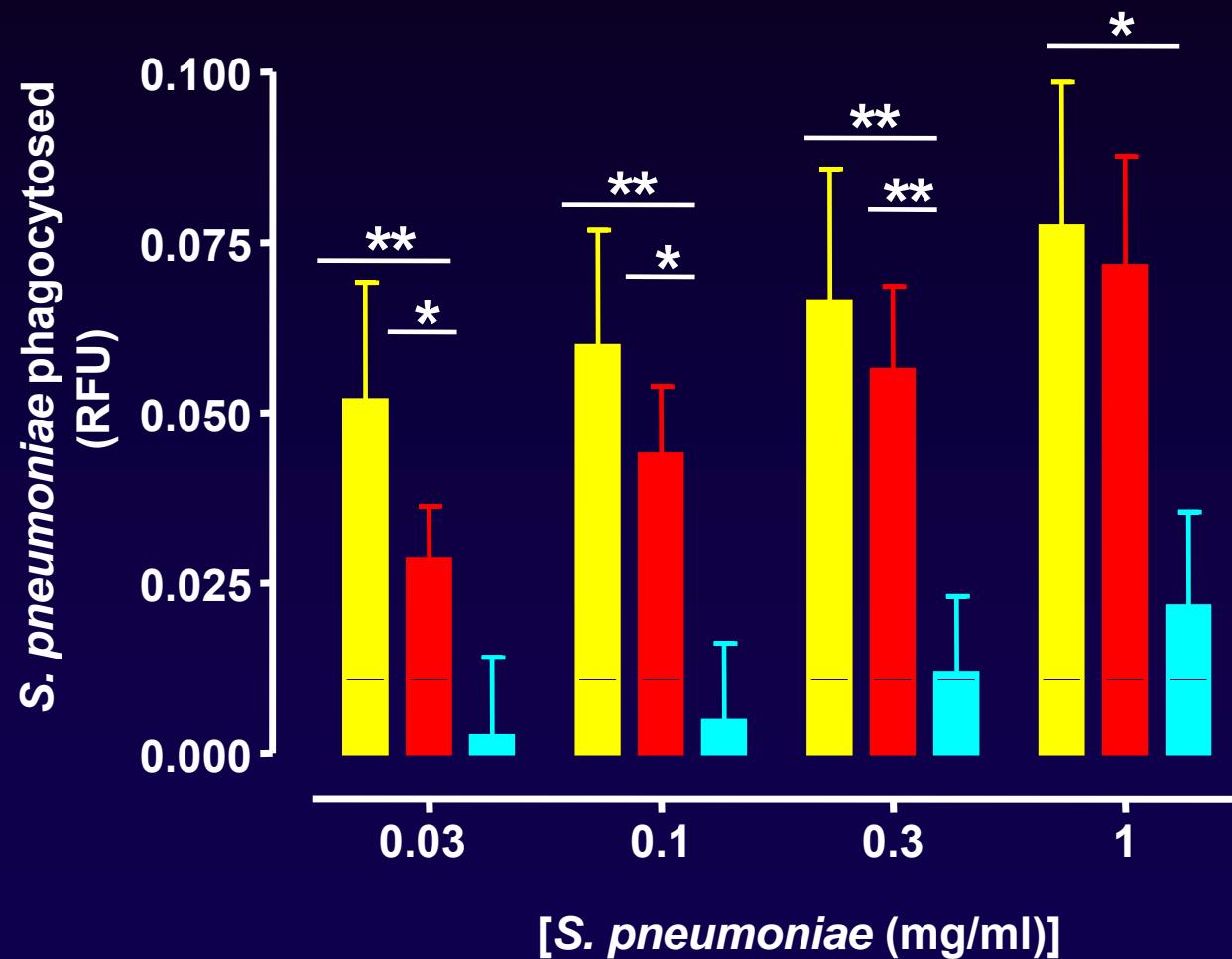


Alveolar Macrophages



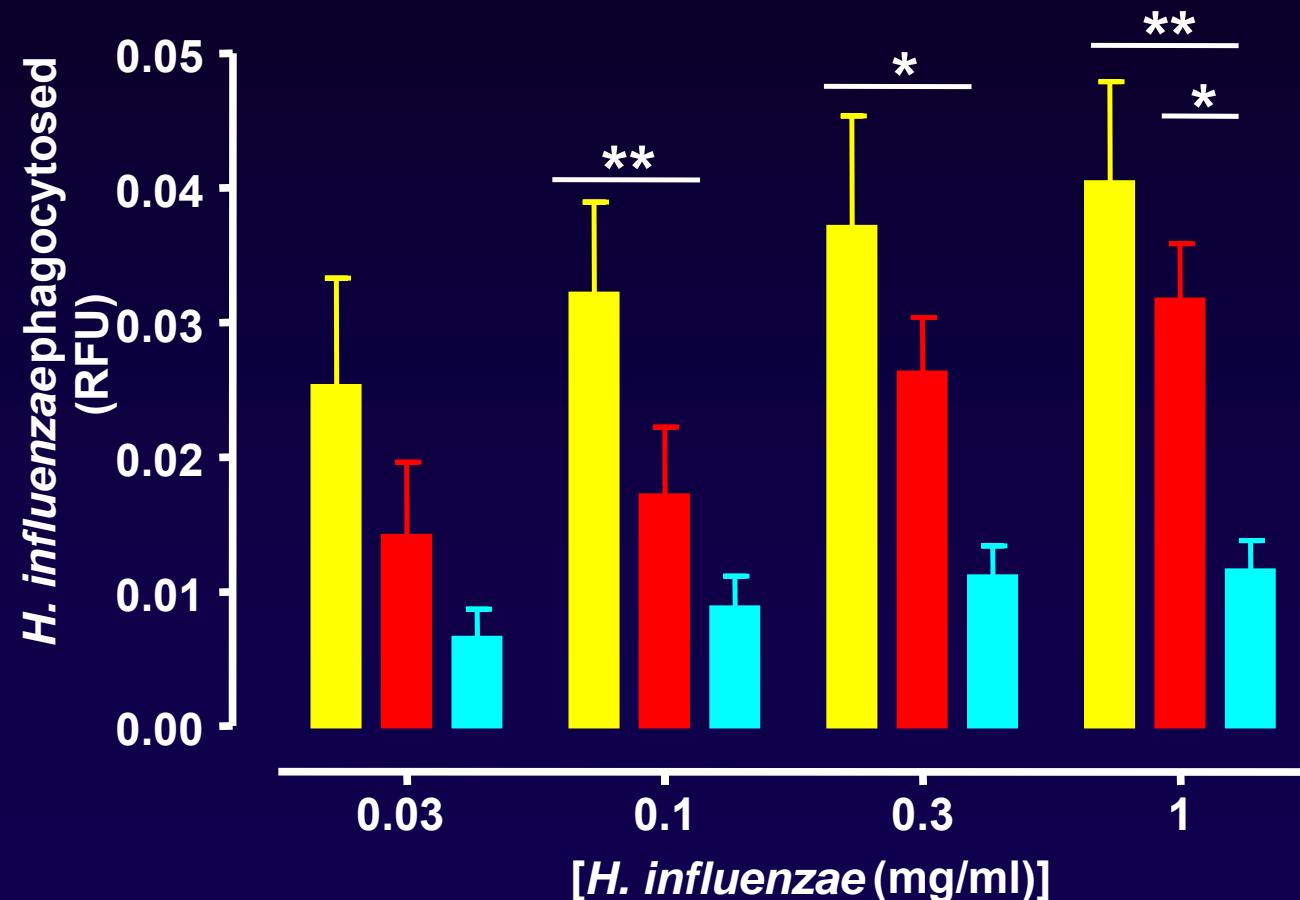
MDM phagocytosis of *S. pneumoniae*

Non-smokers (n=16), smokers (n=11) and COPD subjects (n=12)



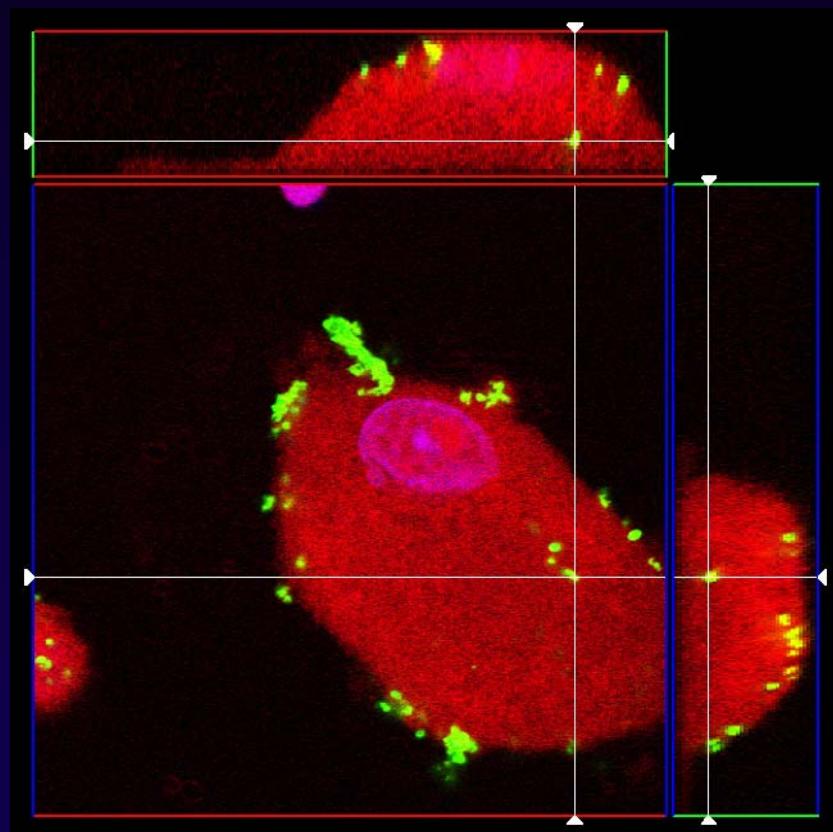
MDM phagocytosis of *H. influenzae*

Non-smokers (n=15), smokers (n=11) and COPD subjects (n=16)

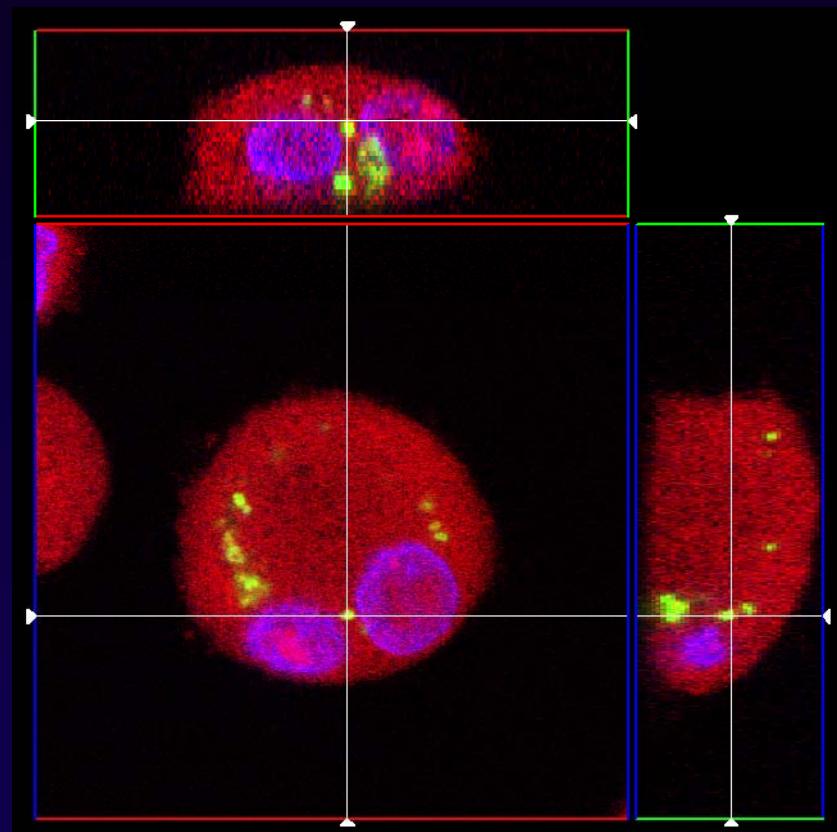


Confocal Microscopy of MDM

H. influenzae

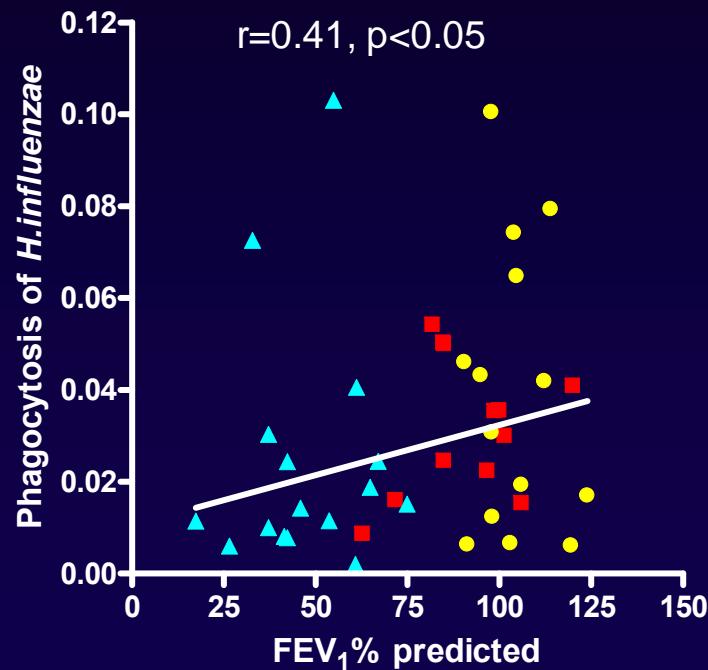


S. pneumoniae

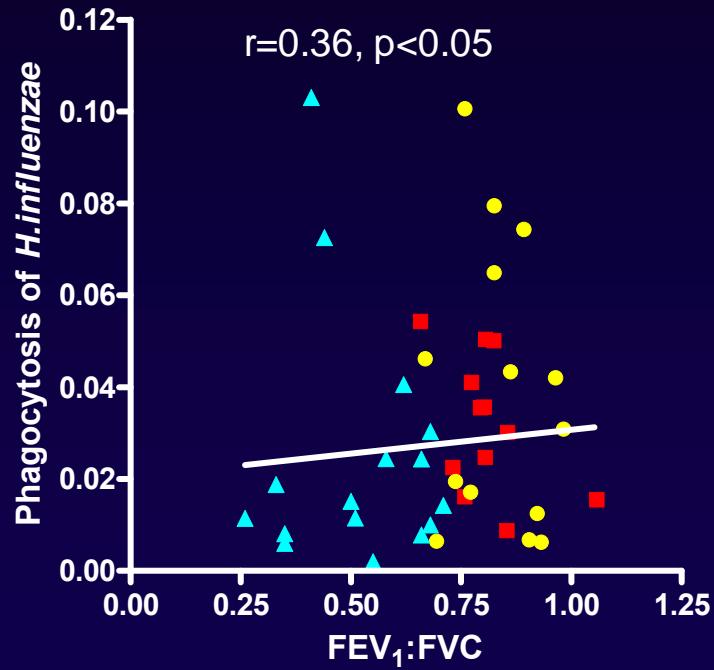


Relationship between Lung Function and Phagocytosis of *H.influenzae*

FEV₁% predicted



FEV₁:FVC



● Non-smokers

■ Smokers

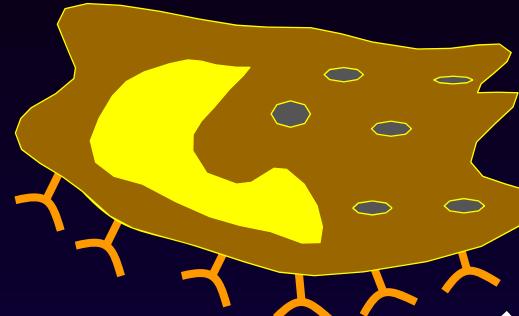
▲ COPD

Macrophage Phagocytosis

- COPD smoker
- Normal smoker

Defective phagocytosis

Bacteria



Alveolar macrophage

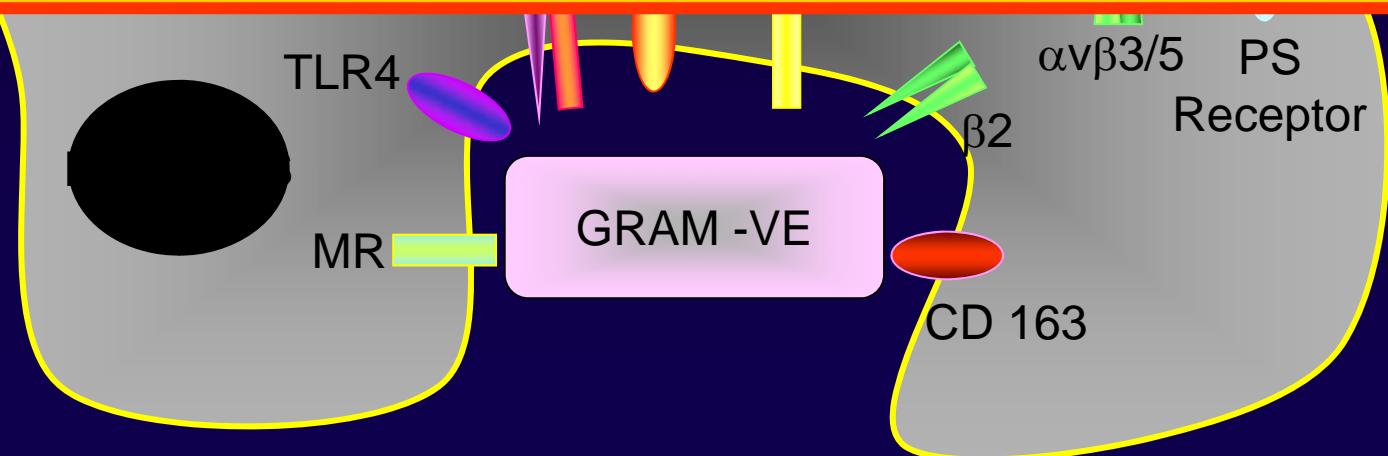
↑ Inflammatory mediators

Sterilisation of

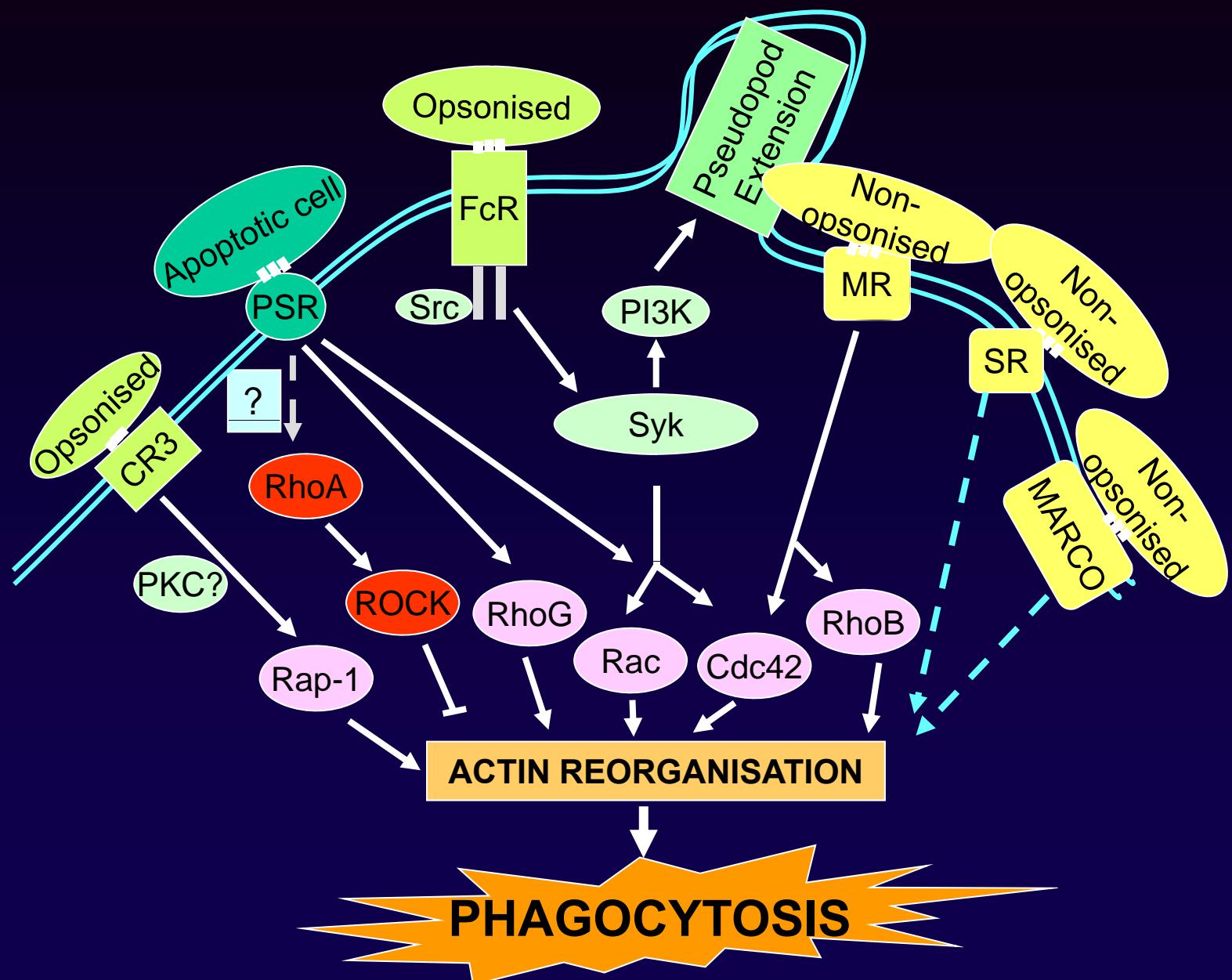
Chronic colonisation
Persistent inflammation

Recognition of Particles

No difference in expression of
MARCO, MR, CD163, CD36,
TLR2, TLR4

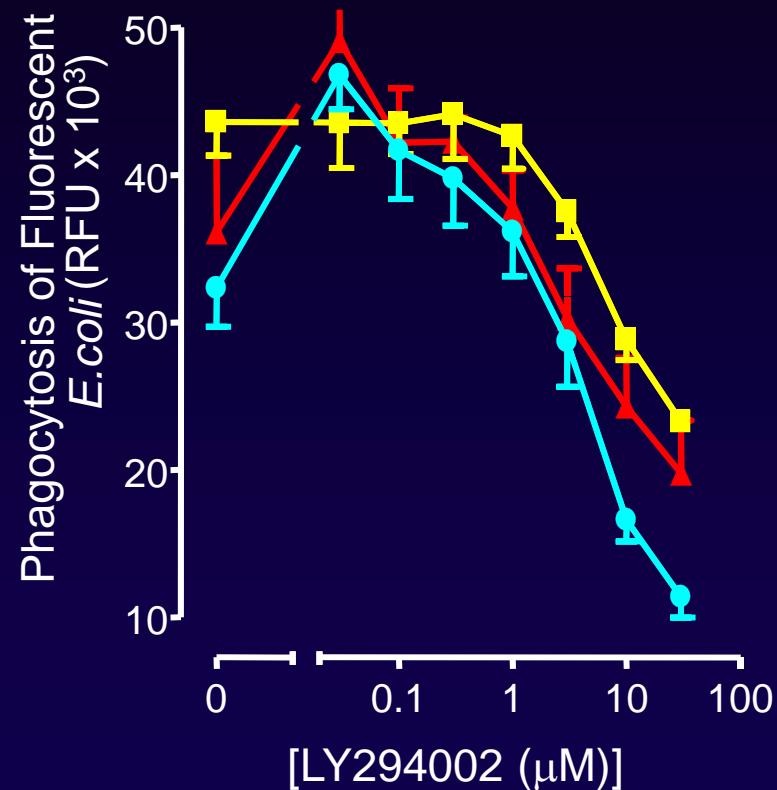


Signal Transduction Pathways

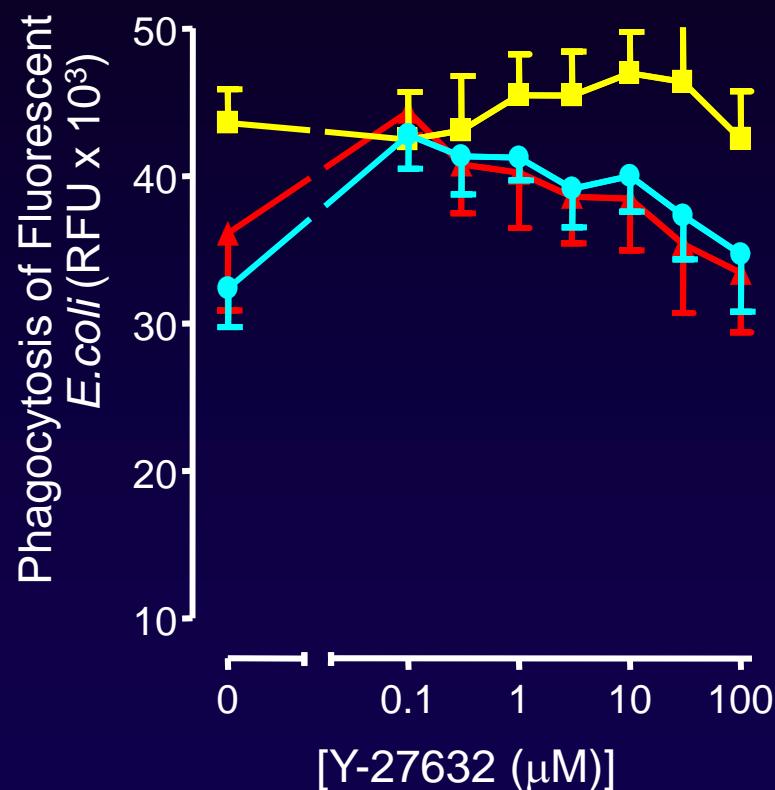


Effect of Kinase Pathway Inhibitors

PI3K Inhibitor

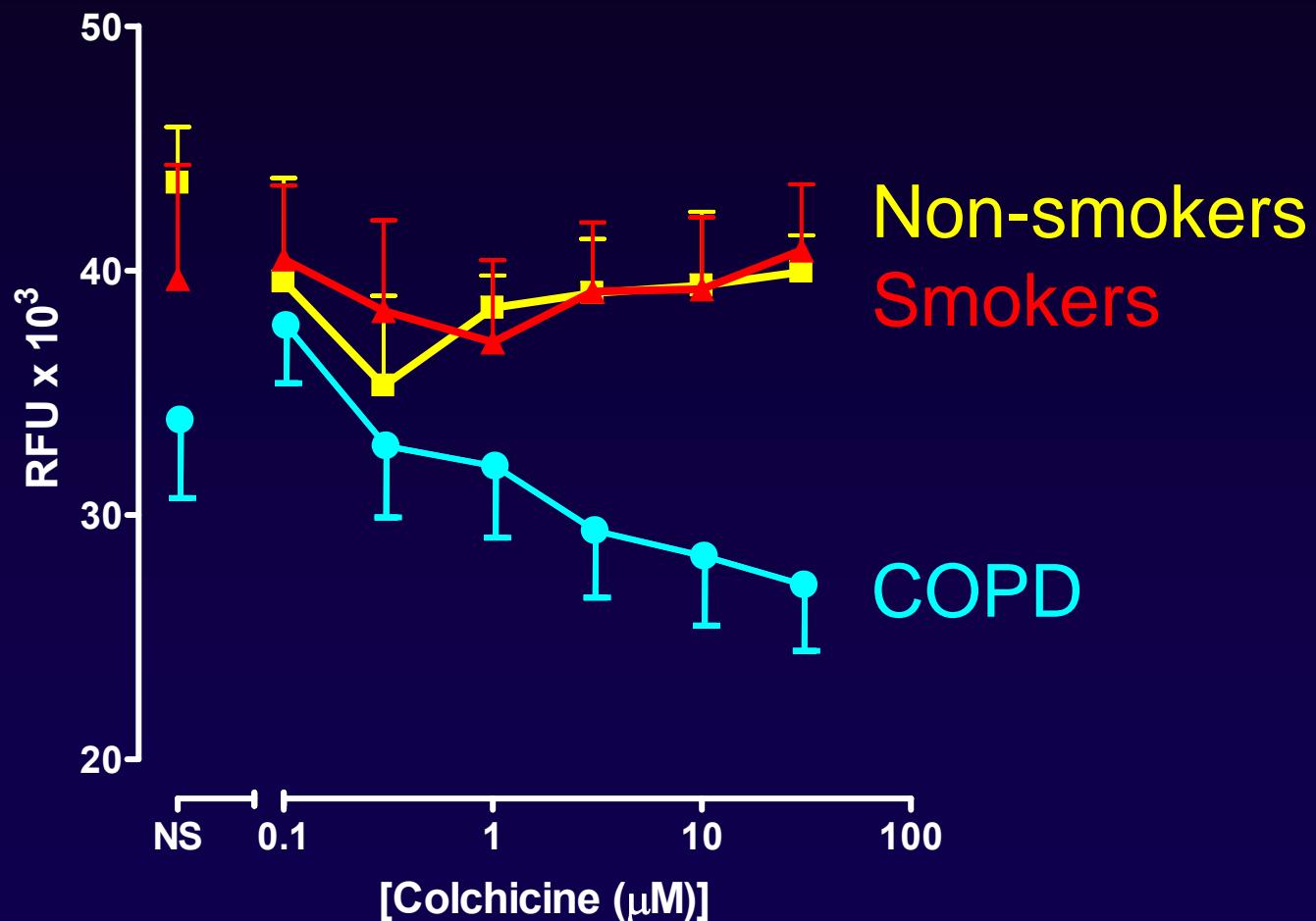


Rho kinase Inhibitor



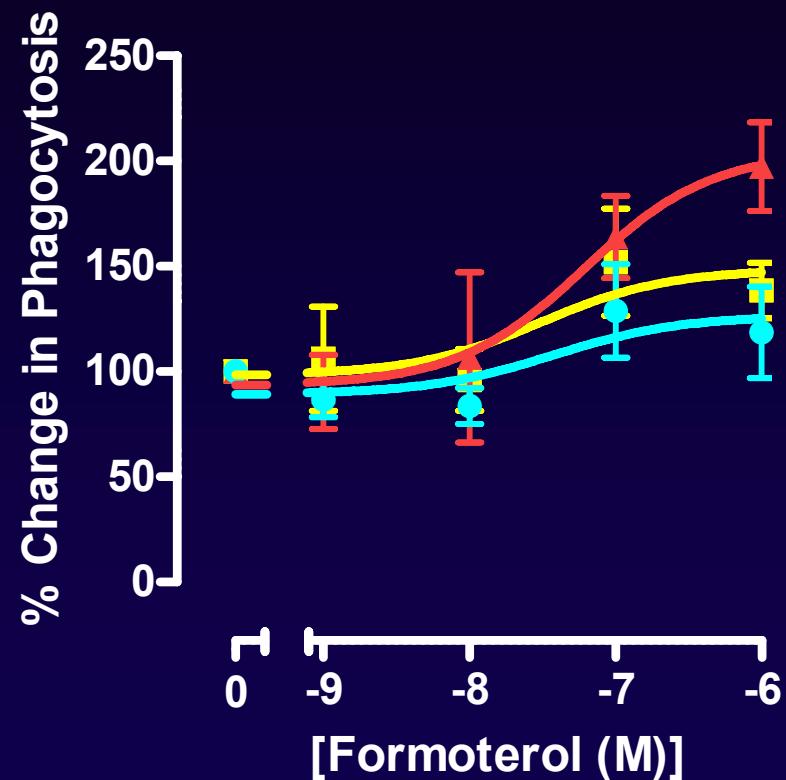
■ Non-smokers n=6 ▲ Smokers n=6 ● COPD n=9

Effect of Colchicine (microtubule disruptor) on *E.coli* Phagocytosis in MDM

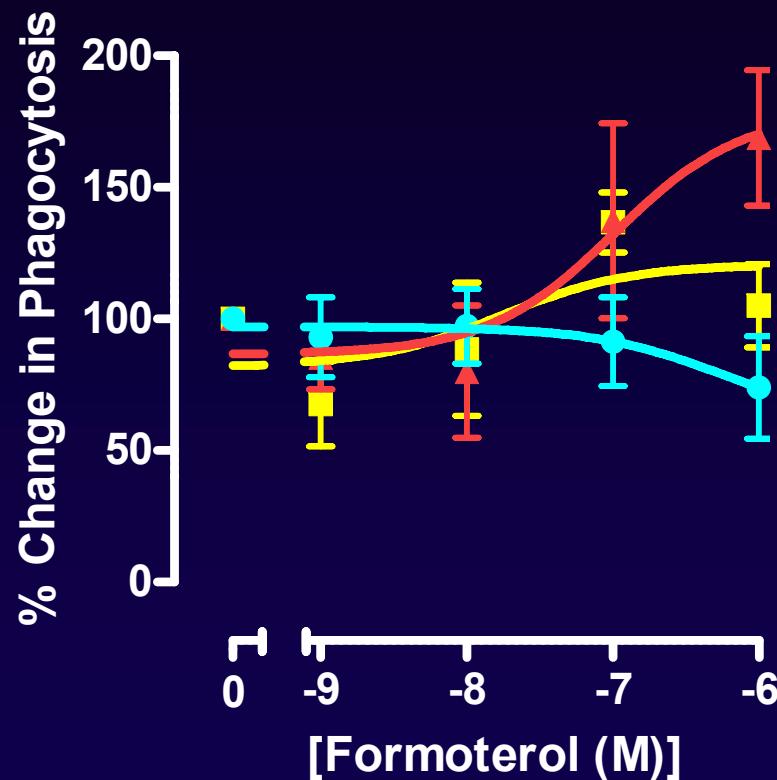


Effect of Formoterol on Phagocytosis

H. influenzae



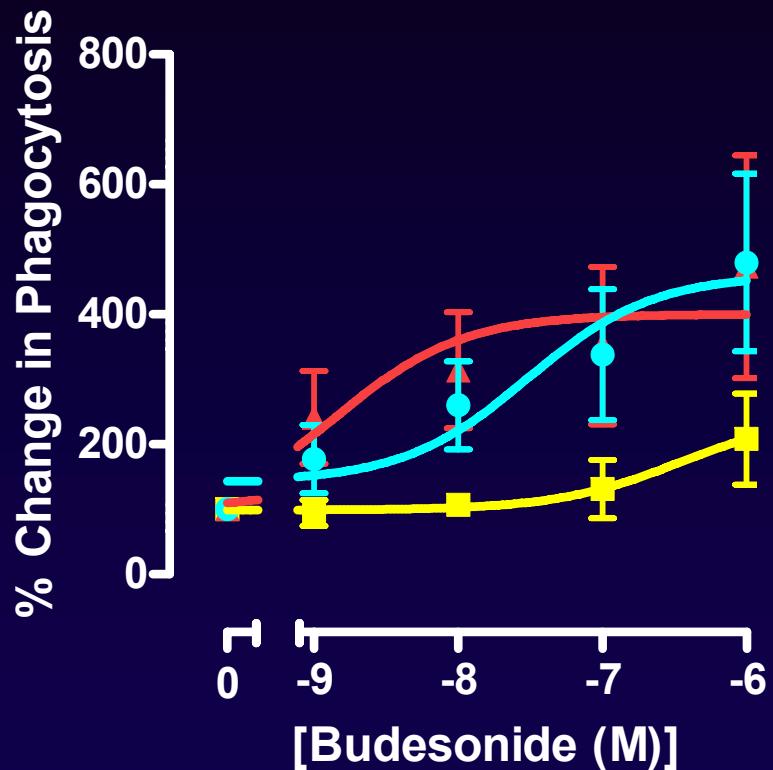
S. pneumoniae



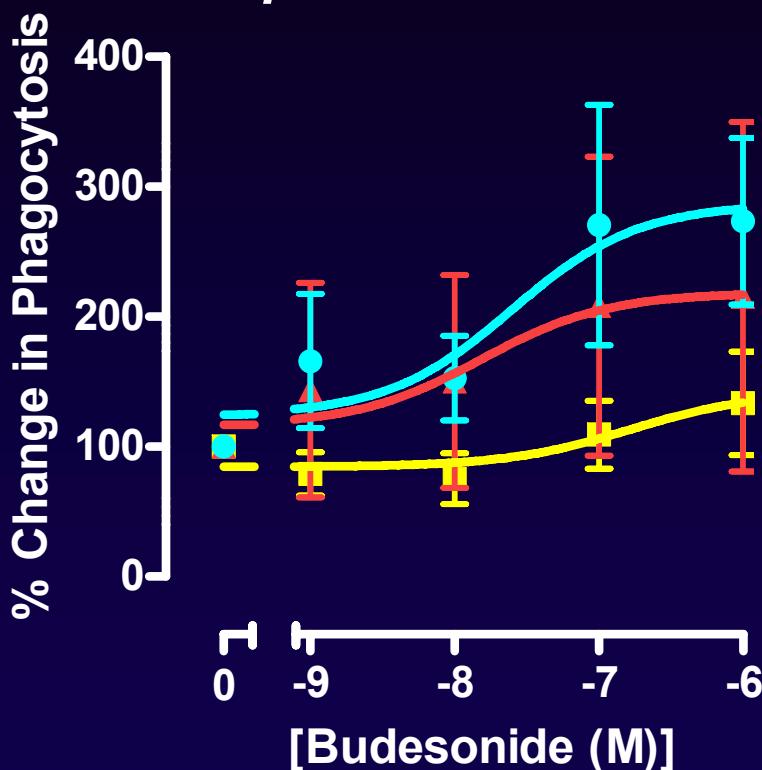
■ Non-smokers n=5 ▲ Smokers n=6 ● COPD n=5

Effect of Budescoside on Phagocytosis

H. influenzae



S. pneumoniae



■ Non-smokers n=5 ▲ Smokers n=6 ● COPD n=5

Summary

Monocytes/macrophages could be targets for asthma and COPD

Role – Dependent on environment/phenotype

Inhibit – monocyte migration
mediator release
protease activity

Promote – phagocytosis
immunomodulator release
e.g. IL-10