

TABLE 372e-1 HUMAN LEUKOCYTE SURFACE ANTIGENS—THE CD CLASSIFICATION OF LEUKOCYTE DIFFERENTIATION ANTIGENS (CONTINUED)

Surface Antigen (Other Names)	Family	Molecular Mass, kDa	Distribution	Ligand(s)	Function
CD64 (FcγRI)	Ig	45–55	Macrophages and monocytes	Fc portion of IgG	Mediates phagocytosis and ADCC
CD80 (B7-1, BB1)	Ig	60	Activated B and T, MP, DC	CD28, CD152	Co-regulator of T cell activation; signaling through CD28 stimulates and through CD152 inhibits T cell activation
CD86 (B7-2, B70)	Ig	80	Subset B, DC, EC, activated T, thymic epithelium	CD28, CD152	Co-regulator of T cell activation; signaling through CD28 stimulates and through CD152 inhibits T cell activation
CD89 (FCαR)	Ig	55–100	Neutrophils, eosinophils, monocytes, and MP	Fc portion of IgG	Mediates phagocytosis and ADCC of IgA-coated pathogens
CD95 (APO-1, Fas)	TNFR	43	Activated T and B	Fas ligand	Mediates apoptosis
CD152 (CTLA-4)	Ig	30–33	Activated T	CD80, CD86	Inhibits T cell proliferation
CD154 (CD40L)	TNF	33	Activated CD4+ T, subset CD8+ T, NK, M, basophil	CD40	Co-stimulator for T cell activation, B cell proliferation and differentiation
CD279 (PD-1)	Ig	50–55	B, T, Tfh	PD-L1, PD-L2	Inhibits T cell proliferation

Abbreviations: ADCC, antibody-dependent cell-mediated cytotoxicity; CTLA, cytotoxic T lymphocyte-associated protein; DC, dendritic cells; EBV, Epstein-Barr virus; EC, endothelial cells; ECM, extracellular matrix; FcγRIII, low-affinity IgG receptor isoform A; FDC, follicular dendritic cells; G, granulocytes; GC, germinal center; GPI, glycosyl phosphatidylinositol; HTA, human thymocyte antigen; Ig, immunoglobulin; IgG, immunoglobulin G; LCA, leukocyte common antigen; LPS, lipopolysaccharide; MHC-I, major histocompatibility complex class I; MP, macrophages; Mr, relative molecular mass; NK, natural killer cells; P, platelets; PBT, peripheral blood T cells; PD-1, programmed cell death-1; PI, phosphatidylinositol; PI3K, phosphatidylinositol 3-kinase; PLC, phospholipase C; PTP, protein tyrosine phosphatase; TCR, T cell receptor; Tfh, T follicular helper cells; TNF, tumor necrosis factor; TNFR, tumor necrosis factor receptor. For an expanded list of cluster of differentiation (CD) human antigens, see Harrison's Online at <http://www.accessmedicine.com>; and for a full list of CD human antigens from the most recent Human Workshop on Leukocyte Differentiation Antigens (VII), see <http://mpr.nci.nih.gov/prowl/>.

Source: Compiled from T Kishimoto et al (eds): *Leukocyte Typing VI*. New York: Garland Publishing, 1997; R Brines et al: *Immunology Today* 18S:1, 1997; and S Shaw (ed): Protein reviews on the Web. <http://mpr.nci.nih.gov/prowl/>.

TABLE 372e-2 MAJOR COMPONENTS OF THE INNATE IMMUNE SYSTEM

Pattern recognition receptors (PRRs)	Toll-like receptors (TLRs), C-type lectin receptors (CLRs), retinoic acid-inducible gene (RIG)-1-like receptors (RLRs), and NOD-like receptors (NLRs)
Antimicrobial peptides	α-Defensins, β-defensins, cathelin, protegrin, granulysin, histatin, secretory leukoprotease inhibitor, and probiotics
Cells	Macrophages, dendritic cells, NK cells, NK-T cells, neutrophils, eosinophils, mast cells, basophils, and epithelial cells
Complement components	Classic and alternative complement pathway, and proteins that bind complement components
Cytokines	Autocrine, paracrine, endocrine cytokines that mediate host defense and inflammation, as well as recruit, direct, and regulate adaptive immune responses

Abbreviation: NK, natural killer.

amounts of LPS through TLR4 leads to the release of large amounts of cytokines that mediate LPS-induced shock. Mutations in TLR4 proteins in mice protect from LPS shock, and TLR mutations in humans protect from LPS-induced inflammatory diseases such as LPS-induced asthma (Fig. 372e-1).

Two other families of cytoplasmic PRRs are the NLRs and the RLRs. These families, unlike the TLRs, are composed primarily of soluble intracellular proteins that scan host cell cytoplasm for intracellular pathogens (Tables 372e-2 and 372e-3).

The intracellular microbial sensors, NLRs, after triggering, form large cytoplasmic complexes termed *inflammasomes*, which are aggregates of molecules including NOD-like receptor pyrin (NLRP) proteins that are members of the NLR family (Table 372e-3). Inflammasomes activate inflammatory caspases and IL-1β in the presence of nonbacterial danger signals (cell stress) and bacterial PAMPs. Mutations in inflammasome proteins can lead to chronic inflammation in a group of periodic febrile diseases called *autoinflammatory syndromes* (Table 372e-6).

EFFECTOR CELLS OF INNATE IMMUNITY

Cells of the innate immune system and their roles in the first line of host defense are listed in Table 372e-5. Equally important as their roles in the mediation of innate immune responses are the roles that each cell type plays in recruiting T and B lymphocytes of the adaptive immune system to engage in specific pathogen responses.

Monocytes-Macrophages Monocytes arise from precursor cells within bone marrow (Fig. 372e-2) and circulate with a half-life ranging from 1 to 3 days. Monocytes leave the peripheral circulation via capillaries and migration into a vast extravascular cellular pool. Tissue macrophages arise from monocytes that have migrated out of the circulation and by in situ proliferation of macrophage precursors in tissue. Common locations where tissue macrophages (and certain of their specialized forms) are found are lymph node, spleen, bone marrow, perivascular connective tissue, serous cavities such as the peritoneum, pleura, skin connective tissue, lung (alveolar macrophages), liver (Kupffer cells), bone (osteoclasts), central nervous system (microglia cells), and synovium (type A lining cells).

In general, monocytes-macrophages are on the first line of defense associated with innate immunity and ingest and destroy microorganisms through the release of toxic products such as hydrogen peroxide (H₂O₂) and nitric oxide (NO). Inflammatory mediators produced by macrophages attract additional effector cells such as neutrophils to the site of infection. Macrophage mediators include prostaglandins; leukotrienes; platelet activating factor; cytokines such as IL-1, TNF-α, IL-6, and IL-12; and chemokines (Tables 372e-7 to 372e-9).

Although monocytes-macrophages were originally thought to be the major antigen-presenting cells (APCs) of the immune system, it is now clear that cell types called *dendritic cells* are the most potent and effective APCs in the body (see below). Monocytes-macrophages mediate innate immune effector functions such as destruction of antibody-coated bacteria, tumor cells, or even normal hematopoietic cells in certain types of autoimmune cytopenias. Monocytes-macrophages ingest bacteria or are infected by viruses, and in doing so, they frequently undergo programmed cell death or *apoptosis*. Macrophages that are infected by intracellular infectious agents are recognized by dendritic cells as infected and apoptotic cells and are phagocytosed by dendritic cells. In this manner, dendritic cells “cross-present” infectious agent antigens of macrophages