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Wang, Y., Ito, S., Chino, Y., Iwanami, K., Yasukochi, T., Goto, D., Matsumoto, I., Hayashi, T., Uchida, K., and Sumida, T.	Use of laser microdissection in the analysis of renal-infiltrating T cells in MRL/lpr mice.	Mod. Rheumatol.	18	385-393	2008
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Matsudaira T, Tsuzuki S, Wada A, Suwa A, Kohsaka H, Tomida M, and Ito Y	Automated microfluidic assay system for autoantibodies causing autoimmune diseases using a photoimmobilized autoantigen microarray	Biotechnol Progress	24(6)	1384-1392	2008
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Iwanami K, Matsumoto I, Watanabe Y, Mihara M, Ohsugi Y, Mamura M, Goto D, Ito S, Tsutsumi A, Kishimoto T, Sumida T.	Crucial role of IL-6/IL-17 cytokine axis in the induction of arthritis by glucose-6-phosphate-isomerase.	Arthritis Rheum.	58	754-763	2008
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Kon Y, Atsumi T, Hagiwara H, Furusaki A, Kataoka H, Horita T, Yasuda S, Amengual O, Koike T.	Thrombotic microangiopathy in patients with phosphatidylserine dependent antiprothrombin antibodies and antiphospholipid syndrome.	Clin Exp Rheumatol	26(1)	129-132	2008
Okamoto T, Atsumi T, Shimizu C, Yoshioka N, Koike T	The potential role of macrophage migration inhibitory factor on the migration of vascular smooth muscle cells.	J Atheroscler Thromb	15(1)	13-19	2008
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書籍

著者氏名	論文タイトル名	書籍全体の編集者名	出版社名	出版年
		書籍名	出版地	ページ
松本 功	解糖系酵素と自己免疫疾患	奥村康、平野俊夫、佐藤昇志	中外医学社	2008
		Annual review 免疫 2008	東京	259-264
田中 良哉	自己免疫疾患の医療ニーズ	山脇 良平	技術情報協会	2008
		抗体医薬品の研究開発	東京	34-41

V 平成20年度班会議プログラム

プログラム

13:00~13:05 開会の辞

13:05~13:15 厚生労働省 挨拶

13:15~ 研究発表

1. 13:15~13:35

アナログペプチドによる抗原特異的免疫分子制御法の開発に関する研究
筑波大学大学院人間総合科学研究科疾患制御医学専攻臨床免疫学
住田 孝之

2. 13:35~13:55

E3 ユビキチンリガーゼ c-MIR の抗炎症効果による関節炎治療に関する研究
東京医科歯科大学大学院医歯学総合研究科膠原病・リウマチ内科学
上阪 等

3. 13:55~14:15

免疫疾患における TH1/TH2 細胞の役割と制御に関する研究
筑波大学大学院人間総合科学研究科生命システム医学専攻分子発生生物学
高橋 智

4. 14:15~14:35

関節炎原生ペプチド同定と、自己免疫性関節炎における炎症性サイトカイン、自己抗体、Th17 の病因的統合に関する研究
筑波大学大学院人間総合科学研究科疾患制御医学専攻臨床免疫学
松本 功

5. 14:35~14:55

新規 IL-10 産生制御性 T 細胞の機能解析と免疫疾患制御への治療応用に関する研究
東京大学医学部アレルギー・リウマチ内科
藤尾 圭志

… … … コーヒーブレイク 14:55~15:10 … … …

6. 15:10~15:30

免疫疾患におけるケモカイン・ケモカインレセプターの役割と制御戦略：
SLEモデルにおけるTreg動態の解析

東京大学大学院医学系研究科
石川 昌

7. 15:30~15:50

NKT細胞を介した自己免疫性脳炎抑制の機序に関する研究

国立精神・神経センター神経研究所免疫研究部
山村 隆

8. 15:50~16:10

SLEにおける自己抗体産生機構とB細胞を分子標的とした治療戦略に関する研究

産業医科大学医学部第一内科学講座
田中良哉

9. 16:10~16:30

自己免疫疾患における免疫担当細胞のシグナル異常とその制御（自己免疫疾患におけるRasGRPの発現検討）

北海道大学大学院医学研究科 内科学講座・第二内科
小池 隆夫

10. 16:30~16:50

RAのパンヌス形成に関与する細胞は炎症性サイトカイン及び低酸素状態によって3H-FDG取り込みが増大する

慶應義塾大学医学部
小安 重夫

16:50~16:55 閉会の辞

VI 研究成果刊行物・別刷

Research article

Open Access

Arthritogenic T cell epitope in glucose-6-phosphate isomerase-induced arthritis

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Abstract

Introduction Arthritis induced by immunisation with glucose-6-phosphate isomerase (GPI) in DBA/1 mice was proven to be T helper (Th) 17 dependent. We undertook this study to identify GPI-specific T cell epitopes in DBA/1 mice (H-2q) and investigate the mechanisms of arthritis generation.

Methods For epitope mapping, the binding motif of the major histocompatibility complex (MHC) class II (I-A_q) from DBA/1 mice was identified from the amino acid sequence of T cell epitopes and candidate peptides of T cell epitopes in GPI-induced arthritis were synthesised. Human GPI-primed CD4⁺ T cells and antigen-presenting cells (APCs) were co-cultured with each synthetic peptide and the cytokine production was measured by ELISA to identify the major epitopes. Synthetic peptides were immunised in DBA/1 mice to investigate whether arthritis could be induced by peptides. After immunisation with the major epitope, anti-interleukin (IL) 17 monoclonal antibody (mAb) was injected to monitor arthritis score. To investigate the mechanisms of arthritis induced by a major epitope, cross-reactivity to mouse GPI peptide was analysed by flow cytometry and anti-GPI antibodies were measured by ELISA. Deposition of anti-GPI antibodies on the cartilage surface was detected by immunohistology.

Results We selected 32 types of peptides as core sequences from the human GPI 558 amino acid sequence, which binds the binding motif, and synthesised 25 kinds of 20-mer peptides for screening, each containing the core sequence at its centre. By epitope mapping, human GPI325-339 was found to induce interferon (IFN) γ and IL-17 production most prominently. Immunisation with human GPI325-339 could induce polyarthritis similar to arthritis induced by human GPI protein, and administration of anti-IL-17 mAb significantly ameliorated arthritis ($p < 0.01$). Th17 cells primed with human GPI325-339 cross-reacted with mouse GPI325-339, and led B cells to produce anti-mouse GPI antibodies, which were deposited on cartilage surface.

Conclusions Human GPI325-339 was identified as a major epitope in GPI-induced arthritis, and proved to have the potential to induce polyarthritis. Understanding the pathological mechanism of arthritis induced by an immune reaction to a single short peptide could help elucidate the pathogenic mechanisms of autoimmune arthritis.

Introduction

Rheumatoid arthritis (RA) is characterised by symmetrical polyarthritis and joint destruction. Although the aetiology is considered to be autoimmune reactivity to some antigens, the exact mechanisms are not fully understood. So far, several

models of arthritis have been described and analysed to understand the aetiological mechanisms of RA. Glucose-6-phosphate isomerase (GPI)-induced arthritis, a murine model of RA, is induced by immunisation with recombinant human (rh) GPI of DBA/1 mice [1]. We have previously demonstrated

APC: antigen-presenting cell; CIA: collagen-induced arthritis; CII: type II collagen; CTLA-4 Ig: cytotoxic T-lymphocyte antigen 4 immunoglobulin; DAPI: 4',6-diamidino-2-phenylindole, diacetate; ELISA: enzyme-linked immunosorbent assay; FCS: fetal calf serum; GPI: glucose-6-phosphate isomerase; IFN: interferon; IL: interleukin; mAb: monoclonal antibody; MHC: major histocompatibility complex; PBS: phosphate-buffered saline; RA: rheumatoid arthritis; rh: recombinant human; SD: standard deviation; SEM: standard error of the mean; TCR: T cell receptor; Th: T helper.

that the T helper (Th) 17 subset of CD4⁺T cells play a central role in the pathogenesis of GPI-induced arthritis; GPI-specific CD4⁺T cells were skewed to Th17 at the time of onset, and blockade of interleukin (IL) 17 resulted in a significant amelioration of arthritis [2]. Furthermore, the data that the administration of cytotoxic T-lymphocyte antigen 4 immunoglobulin (CTLA-4 Ig) in the effector phase ameliorated the progress of arthritis implies the importance of Th17 cells even in the effector phase [3].

In this study, we further explored the epitopes of GPI-specific CD4⁺T cells and identified human GPI (hGPI)₃₂₅₋₃₃₉ as a major epitope. Interestingly, the amino acid sequence of hGPI₃₂₅₋₃₃₉ (IWYINCFGCETHAML) was the same as that of bovine (type II collagen) CII₂₆₆₋₂₇₀(GEPGIAGFKGEQGPK), the dominant epitope of collagen-induced arthritis (CIA), at the major histocompatibility complex (MHC) binding sites [4]. Of note is that arthritis similar to GPI-induced arthritis was generated by immunisation with a short 15-mer single peptide in genetically unaltered mice. By analysis of peptide-induced arthritis, we found that hGPI₃₂₅₋₃₃₉-primed Th17 cells reacted with mouse GPI (mGPI)₃₂₅₋₃₃₉ peptide and subsequently lead to the production of anti-mouse GPI antibodies, which deposited over the cartilage surface of inflaming joints. Our findings should be helpful in unravelling the mechanism of autoimmune arthritis.

Materials and methods

Mice

DBA/1 mice were purchased from Charles River Laboratories, Japan. All mice were kept under specific pathogen-free conditions and all experiments were conducted in accordance with the University of Tsukuba ethical guidelines.

GPI and synthetic peptides

Recombinant mouse GPI and rhGPI were prepared as described previously [5,6]. Briefly, human GPI or mouse GPI cDNA was inserted into the plasmid pGEX-4T3 (Pharmacia, Uppsala, Sweden) for expression of glutathione S-transferase-tagged proteins. *Escherichia coli* harboring the pGEX-hGPI plasmid was allowed to proliferate at 37°C, before 0.1 mM isopropyl-β-D-thiogalactopyranoside was added to the medium, followed by further culture overnight at 30°C. The bacteria were lysed with a sonicator and the supernatant was purified with a glutathione-sepharose column (Pharmacia, Uppsala, Sweden). The purity was estimated by SDS-PAGE.

Crude peptides were synthesised for epitope screening by Mimotopes (Melbourne, Victoria, Australia), and peptides with 90% purity were synthesised for a major epitope decision and induction of arthritis by Invitrogen (Carlsbad, CA). Candidate peptides, which were thought to bind the binding motif, were selected with web soft MHCpred (The Jenner Institute, Oxford, UK) [7].

Induction of arthritis

DBA/1 mice were immunised with 300 µg rhGPI for GPI-induced arthritis, or 10 µg or 25 µg synthetic peptide for peptide-induced arthritis in complete Freund's adjuvant (Difco Laboratories, Detroit, MI). The rhGPI and synthetic peptide were emulsified with complete Freund's adjuvant at a 1:1 ratio (v/v). For induction of arthritis, 150 µl of the emulsion was injected intradermally at the base of the tail of the mouse. On days 0 and 2 after immunisation, 200 ng of pertussis toxin was injected intraperitoneally to develop peptide-induced arthritis. The arthritis score was evaluated visually using a score of 0 to 3 for each paw. A score of 0 represented no evidence of inflammation, 1 represented subtle inflammation or localised oedema, 2 represented easily identified swelling but localised to either the dorsal or ventral surface of the paws, and 3 represented swelling in all areas of the paws.

Treatments of arthritis with anti-IL-17 monoclonal antibodies

To neutralise IL-17, mice were injected intraperitoneally with 100 µg of neutralising antibody or isotype control on day 7 or day 8, 8, and 10. Anti-IL-17 mAb MAB421 (IgG2a) was purchased from R&D Systems (Minneapolis, MN, USA). IgG2a isotype control was purchased from eBioscience (San Diego, CA, USA).

Analysis of cytokine production

Mice were sacrificed on the indicated day. Spleens were harvested and haemolysed with a solution of 0.83% NH₄Cl, 0.12% NaHCO₃ and 0.004% EDTA₂Na in PBS. Single-cell suspensions were prepared in RPMI1640 medium (Sigma-Aldrich, St. Louis, MO) containing 10% FCS, 100 U/ml of penicillin, 100 µg/ml of streptomycin and 50 µM 2-mercaptoethanol. CD4⁺T cells were isolated by MACS positive selection (Miltenyi Biotec, Bergisch Gladbach, Germany). The purity of the collected cells (>97%) was confirmed by flow cytometry. Splenic feeder cells treated with 50 µg/ml of mitomycin C were used as antigen presenting cells (APCs). The purified CD4⁺T cells and APCs were co-cultured with 10 µM of the synthetic peptide at a ratio of 5:1 at 37°C under 5% CO₂ for 24 hours. The supernatants were assayed for interferon (IFN)-γ and IL-17 by Quantikine ELISA kit (R&D Systems, Minneapolis, MN).

Intracellular cytokine staining and flow cytometric analysis

Mice were sacrificed on day 5. The draining lymph nodes were harvested and single cell suspensions were prepared as described above. Cells (1×10⁶/ml) were stimulated with 10 µM of the synthetic peptides in 96-well round bottom plates (Nunc, Roskilde, Denmark) for 24 hours and GoldiStop (BD Pharmingen, San Diego, CA) was added for the last four hours of each culture. Cells were first stained extracellularly, fixed and permeabilised with Cytotfix/Cytoperm solution (BD Pharmingen, San Diego, CA) and then stained intracellularly.

Samples were acquired on FACSCalibur (BD Pharmingen, San Diego, CA) and data were analysed with FlowJo (Tree Star, Ashland, OR).

Analysis of anti-GPI antibody

Sera were taken from immunised mice on day 14 and diluted 1:500 in blocking solution (25% Block Ace (Dainippon Sumitomo Pharma, Osaka, Japan) in PBS) for antibody analysis. We also prepared 96-well plates (Sumitomo Bakelite, Tokyo, Japan) coated with 5 µg/ml rhGPI or recombinant mouse GPI for 12 hours at 4°C. After washing twice with a washing buffer (0.05% Tween20 in PBS), the blocking solution was used for blocking nonspecific binding for two hours at room temperature. After three washes, 150 µl of the diluted serum was added and incubated for two hours at room temperature. After three washes, alkaline phosphatase-conjugated anti-mouse IgG was added at a final dilution of 1:5000, for one hour at room temperature. After three washes, colour was developed with substrate solution (1 alkaline phosphatase tablet (Sigma-Aldrich, St. Louis, MO, USA) per 5 ml alkaline phosphatase reaction solution (containing 9.6% diethanolamine and 0.25 mM MgCl₂, pH 9.8)). Plates were incubated for 20 minutes at room temperature and optical density was measured by a microplate reader at 405 nm.

Immunohistology

For immunohistology, cryostat sections from ankle joints were prepared with the tape capture technique as described previously [8]. Briefly, ankle joints were taken from immunised mice on day 14 and placed in Tissue-Tek (Sakura Finetek, Torrance, CA) filled with 4% carboxymethyl cellulose compound (Finetec, Tokyo, Japan). Frozen ankle joints in the carboxymethyl cellulose compound were attached to the adhesive Cryofilm (Finetec, Tokyo, Japan) and were cut in the microtome. The sections on the adhesive film were fixed with cold acetone. After blocking with 2% bovine serum albumin and 0.05% Tween in PBS, the sections were stained with Alexa 548-conjugated anti-mouse IgG (Invitrogen, Carlsbad, CA) (200 ng/slide), and nuclei were counterstained with 4',6-diamidino-2-phenylindole diacetate (DAPI) (Sigma-Aldrich, St. Louis, MO, USA) (50 ng/slide). Fluorescence was detected with the Leica DMRA2 microscopy (Leica, Wetzlar, Germany). The images were acquired and processed with Leica FW4000 (Leica, Wetzlar, Germany).

Statistical analysis

All data were expressed as mean ± standard error of the mean (SEM) or standard deviation (SD). Differences between groups and variables were examined for statistical significance using the Mann-Whitney's U test and the Spearman's rank correlation coefficient, respectively. A *p* < 0.05 denoted the presence of a statistically significant difference.

Results

I-A^g binding motif and epitope candidates

To analyse T cell epitopes, we first investigated the binding motif of I-A^g from T cell epitopes reported in the literature because DBA/1 mice express only I-A^g as MHC class II. Based on the work by Bayrak and colleagues [9], the anchor motif of I-A^g would exist at P1, P4 and P7, therefore we predicted the binding motifs from amino acid sequences of I-A^g restricted epitopes on murine RNase₉₀₋₁₀₅ [10], myelin basic protein₉₉₋₁₀₁ [11,12], chicken type II collagen (CII)₁₈₁₋₂₀₈ [13], rat CII₂₅₆₋₂₇₀ [14,15], bovine CII₂₅₆₋₂₇₀ [4] and mouse type II collagen [9] (Table 1). Next, we selected 32 types of peptides as core sequences from the human GPI 558 amino acid sequence, which is thought to bind the binding motif (Table 2), and synthesised 25 kinds of 20-mer peptides for screening, each containing the core sequence in its centre (Table 3).

Epitope screening

rhGPI-specific CD4⁺ T cells differentiate into Th1 and Th17 [2], so we analysed IFN-γ and IL-17 production for epitope screening when rhGPI-primed CD4⁺ T cells were stimulated with each synthetic peptide. The production of both IFN-γ and IL-17 was pronounced when GPI-primed CD4⁺ T cells were stimulated with number 18 peptide (hGPI₃₂₇₋₃₄₈) and number 25 peptide (hGPI₅₃₉₋₅₅₈). Therefore, we considered that major epitopes exist in either of the two peptides (Figure 1). In the K/BxN mouse model of arthritis, KRN T cell receptor (TCR) transgenic T cells recognise mGPI₂₈₂₋₂₉₄, the dominant epitope of K/BxN mouse, on I-A^g [16]. However, in the GPI-induced arthritis model, it was unlikely that hGPI₂₈₂₋₂₉₄ was the dominant epitope because GPI-specific T cells did not react prominently to number 16 peptide (hGPI₂₈₀₋₂₉₉).

Because the synthetic peptides used for screening were not purified, we re-synthesised the 15-mer peptides with a purity of 90%; these peptides contained each core sequence of

Table 1

I-A^g binding motifs

P1	P2	P3	P4	P5	P6	P7	P8	P9
A			A			E		
F			P			D		
L			F			Q		
I			S			P		
P			V			N		
S			L			I		
V			N					
			R					

The anchor motif of I-A^g would exist at P1, P4 and P7, therefore we predicted the binding motif from amino acid sequences of I-A^g restricted epitopes on murine RNase₉₀₋₁₀₅, myelin basic protein₉₉₋₁₀₁, chicken type II collagen₁₈₁₋₂₀₈, rat type II collagen₂₅₆₋₂₇₀, bovine type II collagen₂₅₆₋₂₇₀ and mouse type II collagen.

Table 2

Core sequences of glucose-6-phosphate isomerase (GPI) amino acids binding I-A^a

Peptide	Amino acid residues
3-11	ALTRDPOFO
29-37	LDANKDRF
41-49	SLTLNTHHG
56-64	SKNLVTEDV
72-80	AKSRGVEAA
80-88	ARERMFNGE
99-107	LHVALNRNS
102-110	ALRNRSTNP
149-157	ITDVINIGI
167-175	VTEALPKYS
173-181	PYSSGGPRV
181-189	VWYVSNIDG
196-204	LAQLNPSS
201-209	PESSLFIA
210-218	SKTFTTQET
229-237	FLQAAKDPS
230-238	LOAAKDPASA
243-251	FVALSTNTT
253-261	VKEFGIDPO
285-293	ALHVGDFNF
319-327	LLALLGIWY
328-336	INCFGCETH
337-345	AMLPHYDQYL
391-399	FYQLIHQGT
403-411	PCDFLIPVQ
407-415	LIPVQTHP
426-434	LANFLAQTE
452-460	AGKSPEDLE
489-497	ALVAMYEHK
537-545	SHDASTNGL
540-548	ASTNGLINF
545-553	LINFIKQQR

Thirty-two types of peptides were selected as core sequences from the GPI 558 amino acid sequence, which is thought to bind the binding motif. Amino acid residues that are thought to bind anchors of I-A^a are shown in bold letters.

number 18 peptide (hGPI₃₂₇₋₃₄₆) and number 25 peptide (hGPI₅₃₉₋₅₅₈). Number 18 peptide (hGPI₃₂₇₋₃₄₆) contains two core sequences (hGPI₃₂₈₋₃₃₆ and hGPI₃₃₇₋₃₄₅), so therefore we re-synthesised two peptides (hGPI₃₂₅₋₃₃₉ and

hGPI₃₃₄₋₃₄₈). The former sequences of number 25 peptide (hGPI₅₃₉₋₅₅₈) overlapped with number 24 peptide (hGPI₅₃₉₋₅₅₂), which could not stimulate CD4⁺T cells primed with GPI. Therefore we re-synthesised two peptides (hGPI₅₄₂₋₅₅₈ and hGPI₅₄₄₋₅₅₈) from the latter sequences of number 25 peptide (Table 4). We analysed IFN- γ and IL-17 production for epitope screening as described above. The peptide (hGPI₃₂₅₋₃₃₉) induced marked stimulation of GPI-primed CD4⁺T cells, and was considered a major epitope (Figure 2).

Immunisation with a major epitope induces arthritis similar to GPI-induced arthritis

To test if hGPI₃₂₅₋₃₃₉ is arthritogenic, DBA/1 mice were immunised with 10 μ g or 25 μ g hGPI₃₂₅₋₃₃₉ instead of GPI protein, and 200 ng of pertussis toxin was injected intraperitoneally on days 0 and 2 after immunisation. Arthritis resembling GPI-induced arthritis could be generated by immunisation with the peptide, including incidence, manifestations and severity. Symmetrical polyarthritis appeared on day 8, showed peak severity on day 14 and subsided gradually thereafter (Figure 3a). The use of different immunisation doses (10 and 25 μ g) did not seem to affect the incidence and severity of arthritis. Immunised with 10 μ g or 25 μ g hGPI₃₂₅₋₃₃₉ without injection of pertussis toxin could also induce arthritis. However, the arthritis was less severe than with pertussis toxin (data not shown). On the other hand, immunisation with neither hGPI₅₃₉₋₅₅₈ nor hGPI₅₄₄₋₅₅₈, which were considered minor epitopes in GPI-induced arthritis, could induce overt arthritis (Figure 3a). Mice immunised with hGPI₃₂₅₋₃₃₉ developed severe swelling of the wrist and ankle joints. Histologically, severe synovitis was noted in the wrists in the forepaws, and at ankles and tarsal joints in the hind paws (Figure 3b and data not shown).

Peptide-induced arthritis is mediated by Th17

GPI-induced arthritis is Th17-mediated [2], so we explored the aetiological role of Th17 in peptide-induced arthritis. Like GPI-induced arthritis, one time administration of anti-IL-17 mAb on day 7 and three times administration on day 6, 8 and 10 significantly ameliorated the arthritis (Figure 4). From these data, the arthritis induced by hGPI₃₂₅₋₃₃₉ was also considered to be Th17 mediated.

Immunisation of human GPI₃₂₅₋₃₃₉ leads Th17 cells to cross-react with mouse GPI₃₂₅₋₃₃₉

We examined the pathogenesis of arthritis induced by hGPI₃₂₅₋₃₃₉ by comparing it with mice immunised with hGPI₅₄₄₋₅₅₈.

First, we speculated that the difference in cross-reactivity to mouse GPI might affect the incidence of arthritis, because hGPI₃₂₅₋₃₃₉ (IWYINCFGCETHAML) has 13/15 amino acids homology to mGPI₃₂₅₋₃₃₉ (IWYINCYGCETHALL) while hGPI₅₄₄₋₅₅₈ (GLINFIKQQRARVQ) has only 9/15 amino

Table 3

Synthetic peptides for screening T cell epitopes

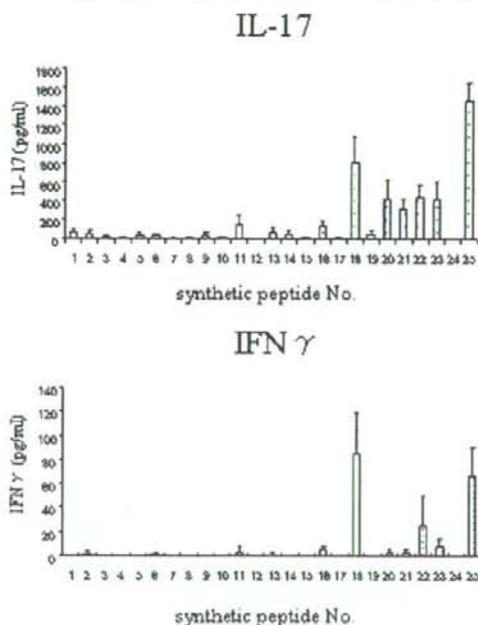
Peptide number	Peptide	Synthetic peptide sequence
1	1-20	H-MA ALTRDPQ FQKLOQWYREH-OH
2	23-42	H-ELNLRRLFD ANKDR FNHFSL-OH
3	37-56	H-FNHFS LTLNT NHGHILVDYS-OH
4	51-70	H-ILVDY SKNLV TEDEVMRMLVD-OH
5	71-90	H-LAKSRG VEAAR ERMFN GGK I-OH
6	96-115	H-RAVLH VALR NR SNTP LVLDG-OH
7	145-164	H-TGKT ITDVI NI GIG GS DLGP -OH
8	162-181	H-LGPL MVTE AL KPY SSGGPRV-OH
9	168-187	H-TEAL KPY SSGGPRVWYV SN I-OH
10	176-195	H-SGGPRV WYV SN IDG THIAKT-OH
11	191-210	H-HIAKT LAQL NP ESSL FIAS-OH
12	200-219	H-N PES SL FI ASK TETT Q ET I-OH
13	225-244	H-AKEW ELQAA K DP SA VAK H FV -OH
14	238-257	H-AVAK H FE VAL ST N TT KV KE FG -OH
15	247-266	H-ST N TT KV KE FG ID PQ N MFE F-OH
16	280-299	H-I GL S IAL H VGF DN FE QL LSG -OH
17	313-332	H-E KN AP VLL ALL GI W Y NC FG -OH
18	327-346	H-Y IN CF GC ETH AM LP YDQ Y LH -OH
19	386-405	H-NGQ HAF Y QL H Q G TK M PCD -OH
20	400-419	H-K M PC DF L PV Q TQ H PR K G -OH
21	420-439	H-L HH K LL AN FLA Q TE AL MRG -OH
22	445-464	H-AR KE L QA AG KSP ED LER LL P -OH
23	484-503	H-P F ML GAL V AM Y E HK IF V Q GI-OH
24	533-552	H-AQ VT SH D AST NGL IN F K Q Q-OH
25	539-558	H-DAST NGL IN E IK Q Q RE AR VQ -OH

Listed are 25 20-mer unpurified peptides in which each core sequence were centred around. Amino acid residues constituting the core sequence and those thought to bind anchors of I-A* are underlined and shown in bold letters, respectively.

acids homology to mGPI₅₄₄₋₅₅₈ (GLISFIKQQRDTKLE). The draining lymph node cells from mice immunised with hGPI₃₂₅₋₃₃₉ or hGPI₅₄₄₋₅₅₈ were cultured in the presence of hGPI₃₂₅₋₃₃₉, mGPI₃₂₅₋₃₃₉, hGPI₅₄₄₋₅₅₈ or mGPI₅₄₄₋₅₅₈ for 24 hours. The hGPI₃₂₅₋₃₃₉-primed cells had distinct cross-reactive immune reaction to mGPI₃₂₅₋₃₃₉ by producing IL-17, whereas the hGPI₅₄₄₋₅₅₈ primed cells did not cross-react to mGPI₅₄₄₋₅₅₈ (Figure 5a). As compared with the draining lymph node cells of hGPI₃₂₅₋₃₃₉-immunised mice, IL-17 production was not remarkable in that of hGPI₅₄₄₋₅₅₈-immunised mice even when the corresponding peptide was used as an antigen for *in vitro* stimulation (Figure 5a). The production of IFN- γ was much lower than that of IL-17, and IL-4 production was not detectable independent of immunisation patterns and antigens for *in vitro* stimulation (data not shown).

It has been reported that Th17 cells are not the only cellular sources of IL-17, but CD8⁺ T cells, natural killer T cells and $\gamma\delta$ T cells are also capable of producing IL-17 [17-22]. Therefore, we investigated the IL-17 producing cells using flow cytometry. The draining lymph node cells from mice immunised with hGPI₃₂₅₋₃₃₉ or hGPI₅₄₄₋₅₅₈ were stimulated with hGPI₃₂₅₋₃₃₉ and mGPI₃₂₅₋₃₃₉, or hGPI₅₄₄₋₅₅₈ and mGPI₅₄₄₋₅₅₈, respectively. Intracellular cytokine staining was performed without nonspecific stimulants, such as phorbol myristate acetate or ionomycin. We confirmed that immunisation of hGPI₃₂₅₋₃₃₉ induced antigen-specific Th17 cells, which cross-reacted with mGPI₃₂₅₋₃₃₉. However, immunisation of hGPI₅₄₄₋₅₅₈ induced neither hGPI₅₄₄₋₅₅₈-specific Th17 cells nor Th17 cells that can cross-react with mGPI₅₄₄₋₅₅₈ remarkably (Figure 5b). These data indicate that induction of antigen-specific Th17 cells and

Figure 1



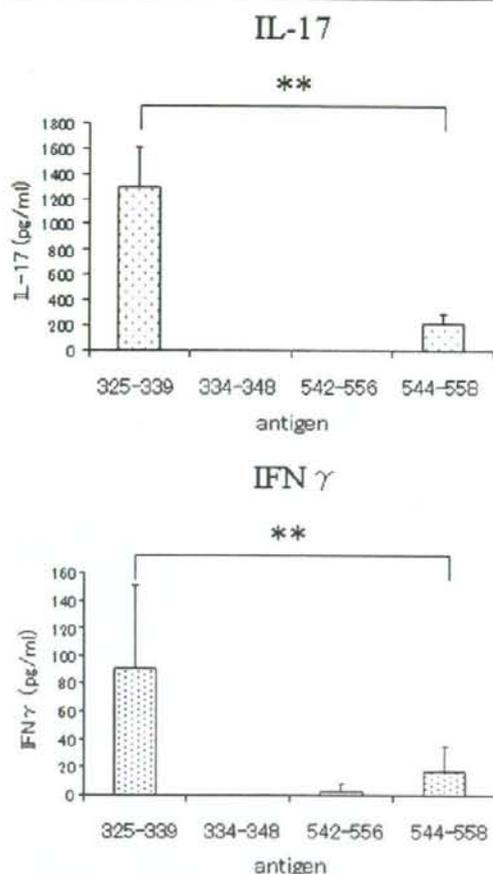
Synthetic peptides number 18 and 25 produced marked stimulation of glucose-6-phosphate isomerase (GPI) primed CD4⁺ T cells. Mice were sacrificed on day 7 after immunisation. CD4⁺ T cells were purified from spleen cells of GPI-immunised DBA/1 mice. GPI-primed CD4⁺ T cells and antigen presenting cells (APCs) were co-cultured with 10 μ M of synthetic peptide for 24 hours. The supernatants were assayed for interferon (IFN) γ and interleukin (IL) 17 by ELISA. Data are averages \pm standard deviation of three culture wells. Representative data of three independent experiments.

cross-reactivity with mouse GPI might be the pathogenesis of peptide-induced arthritis.

Immunisation of human GPI₃₂₅₋₃₃₉ leads B cells to produce anti-mouse GPI antibodies

To explore the importance of autoantibodies, we measured anti-human GPI antibodies and anti-mouse GPI antibodies in mice immunised with hGPI₃₂₅₋₃₃₉, hGPI₅₄₄₋₅₅₈ and hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈ by ELISA. Mice immunised with hGPI and the two peptides (hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈) produced high titres of anti-human GPI antibodies and anti-mouse GPI antibodies, and mice immunised with hGPI₃₂₅₋₃₃₉ and hGPI₅₄₄₋₅₅₈ hardly produced any anti-human GPI antibodies. However, mice immunised with hGPI₃₂₅₋₃₃₉ produced significantly higher titres of anti-mouse GPI antibodies than mice immunised with hGPI₅₄₄₋₅₅₈ (Figure 6a). It is noteworthy that immunisation with the two peptides (hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈) induced significantly higher titres of anti-mouse

Figure 2



GPI₃₂₅₋₃₃₉ is a major epitope. Mice were sacrificed on day 7 after immunisation. CD4⁺ T cells were purified from splenocytes of glucose-6-phosphate isomerase (GPI) immunised DBA/1 mice. GPI-primed CD4⁺ T cells and antigen presenting cells (APCs) were co-cultured with 10 μ M of synthetic peptide hGPI₃₂₅₋₃₃₉, hGPI₃₃₄₋₃₄₈, hGPI₅₄₂₋₅₅₆ or hGPI₅₄₄₋₅₅₈ for 24 hours. The purity of each peptide was 90%. The supernatants were assayed for interferon (IFN) γ and interleukin (IL) 17 by ELISA. Data are averages \pm standard deviation of five culture-wells. ***p* < 0.01 (Mann-Whitney's U test). Representative data of three independent experiments.

GPI antibodies than that with hGPI₃₂₅₋₃₃₉ alone, whereas the severity and incidence of arthritis in mice immunised with two peptides (hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈) were comparable with those in mice immunised with hGPI₃₂₅₋₃₃₉ alone (Figures 3a and 6a).

Table 4

Re-synthesised peptides used for determining a major epitope

Peptide number	Peptide	Synthetic peptide sequence
18	327-346	H-Y <u>INCFGCETHAMLPYDQY</u> LH-OH
	325-339	H-IWY <u>INCFGCETHAML</u> -OH
	334-348	H-ETH <u>AMLPYDQY</u> LHRF-OH
25	539-558	H-DASTNG <u>LNFIKQQREARVQ</u> -OH
	542-556	H-TNG <u>LNFIKQQREAR</u> -OH
	544-558	H-G <u>LNFIKQQREARVQ</u> -OH

The 15-mer peptides were synthesised with 90% purity, containing each core sequence of number 18 peptide (GPI₃₂₇₋₃₄₆) and number 25 peptide (GPI₅₃₉₋₅₅₈). Amino acid residues constituting the core sequence and those thought to bind the anchors of I-A^b are underlined and shown in bold letters, respectively.

We further investigated the difference of the correlation between anti-mouse GPI antibodies and arthritis score among immunisation patterns. Each of the three different immunisation patterns (rhGPI, hGPI₃₂₅₋₃₃₉ and hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈) showed no positive correlation between anti-mouse GPI antibodies and arthritis score (Table 5).

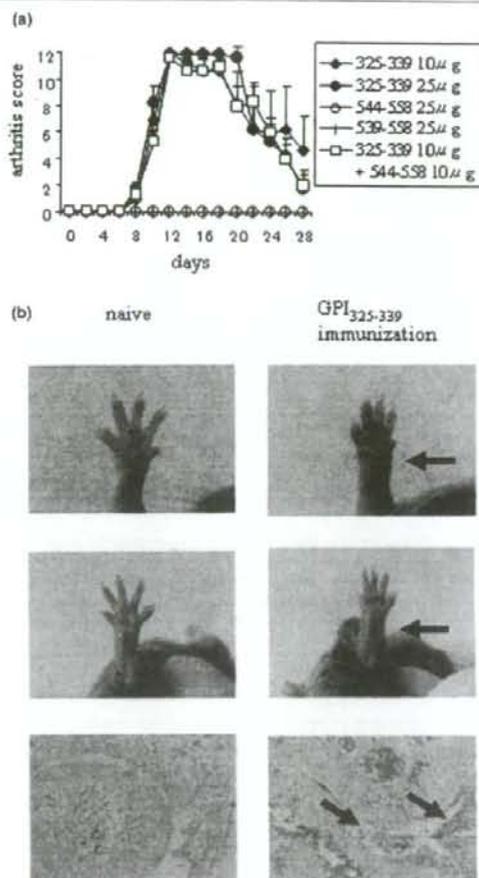
Next, we investigated the existence of IgG on the cartilage surface by immunohistology, because GPI were proved to deposit on the cartilage surface of normal naive mice [23]. The cryostat sections of ankle joints from naive mice and mice immunised with hGPI₅₄₄₋₅₅₈ did not show IgG deposit on the cartilage surface. However, those from mice immunised with rhGPI and hGPI₃₂₅₋₃₃₉ showed IgG deposits (Figure 8b). These data indicate that anti-mouse GPI antibodies may play a role in the development of peptide-induced arthritis.

Discussion

GPI, a ubiquitous glycolytic enzyme, is a new autoantigen candidate in autoimmune arthritis [5,6]. GPI-induced arthritis is induced by immunisation of genetically unaltered DBA/1 mice with rhGPI [1]. We report here the therapeutic efficacies of mAb to tumour necrosis factor- α and IL-6 and CTLA-4 Ig in this model [3]. Moreover, CD4⁺ T cells, especially Th17 cells, seem to be more important than B cells, because administration of anti-CD4 mAb or anti-IL-17 mAb markedly ameliorate the progress of arthritis independent of anti-GPI antibodies titres [1,2]. Therefore, exploring the epitope of CD4⁺ T cells and its arthritogenic effect is important for understanding the pathological mechanisms.

In this study, we investigated the binding motif of I-A^b from T cell epitopes considered to bind to I-A^b, synthesised peptides of epitope candidates and identified hGPI₃₂₅₋₃₃₉ as a major epitope. Interestingly, the MHC binding residues of hGPI₃₂₅₋₃₃₉ (IWYINCFGCETHAML) at P1, P4 and P7 were the same as those for bovine ClI₂₅₆₋₂₇₀ (GEP-

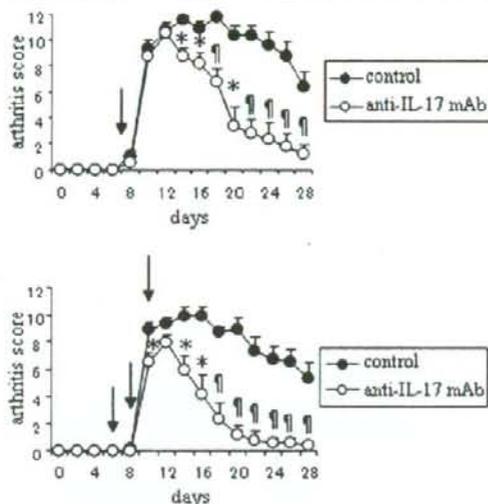
Figure 3



Immunisation with hGPI₃₂₅₋₃₃₉ induces severe polyarthritis. DBA/1 mice were immunised with 25 μg of hGPI₃₂₅₋₃₃₉, hGPI₅₃₉₋₅₅₈ or hGPI₅₄₄₋₅₅₈, or 10 μg each of hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈, and 200 ng of pertussis toxin was injected intraperitoneally on days 0 and 2 after immunisation. (a) The mean arthritis score (± standard error of the mean (SEM)) of five mice in one representative experiment of two independent experiments. (b) Severe swelling of the wrist (upper panels) and ankle joints (middle panels) in mice immunised with 25 μg of hGPI₃₂₅₋₃₃₉ compared with naive mice (arrowheads). Histological analysis of haematoxylin & eosin-stained sections of ankle joints taken from naive mice and mice on day 14 after hGPI₃₂₅₋₃₃₉ immunisation (lower panels) showed severe synovitis with massive infiltration of cells and hyperplasia of synovial tissue (arrowheads).

induced arthritis [4]. These findings indicate that the binding motif (P1 I, P4 F, P7 E) might have high binding affinity with I-A^b, and the peptides with this motif-MHC complexes might be effectively recognised by TCRs and could be arthritogenic in some condition. Although immunisation with a fragment of

Figure 4



Anti-IL-17 monoclonal antibody (mAb) suppresses the development of arthritis. DBA/1 mice were immunised with 25 μ g of hGPI₃₂₅₋₃₃₉ and 200 ng of pertussis toxin was injected intraperitoneally on days 0 and 2 after immunisation. 100 μ g of anti-IL-17 mAb or isotype control (control) was administered intraperitoneally on day 7 (upper panel) or day 6, 8, and 10 (lower panel) after immunisation (arrow). Mean arthritis score (\pm standard error of the mean (SEM)) of five mice per group. Representative data of two independent experiments. * $p < 0.05$, # $p < 0.01$ (Mann-Whitney's U test).

cyanogen bromide of bovine CII, CB11 (CII₁₂₄₋₄₀₂), which contains the dominant epitope, can induce arthritis, the severity and incidence are much lower than arthritis induced by bovine CII protein [4]. Other fragments (CB8, CB9, CB10 and CB12) do not induce arthritis, as is explained by the production of anti-bovine CII antibodies. Immunisation with CB11 fragment produces five times more antibodies to bovine CII than any other fragment [4]. The observation that administration of anti-CD4 mAb after the onset of arthritis did not ameliorate the arthritis [24,25] and a combination of mAb to CII can passively transfer arthritis to naive mice [28] also emphasises the importance of autoantibodies to the induction of collagen-induced arthritis.

Our study demonstrated that immunisation with hGPI₃₂₅₋₃₃₉ induced antigen-specific Th17 cells, which can cross-react with mGPI₃₂₅₋₃₃₉ and lead B cells to produce anti-mouse GPI antibodies. However, immunisation with hGPI₅₄₄₋₅₅₈ could not even induce hGPI₅₄₄₋₅₅₈-specific Th17 cells. The difference of ability of Th17 induction between two peptides may come from MHC-binding affinity and TCR-binding affinity. A peptide that is likely to bind to MHC class II with high affinity and interacts strongly with the T cell receptor tends to stimulate Th1-

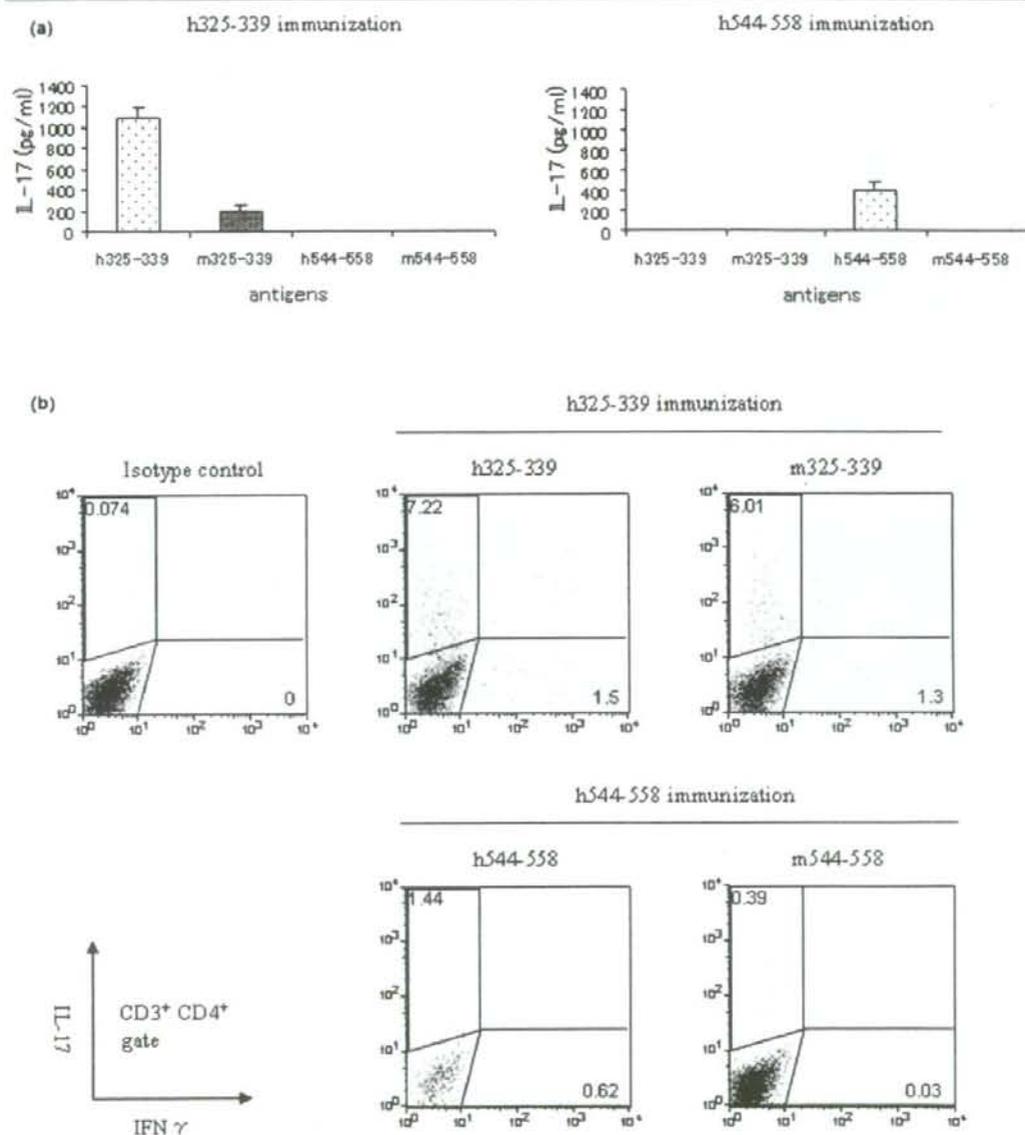
cell response, whereas a peptide with low binding affinity to MHC class II and T cell receptor tends to elicit Th2-cell response [27,28]. Although the relationship between Th17 differentiation and the strength of TCR signalling and MHC-binding affinity has not been clarified, it is possible that the difference in amino acid sequences between hGPI₃₂₅₋₃₃₉ and hGPI₅₄₄₋₅₅₈ might affect the I-Aq binding affinity and the TCR signalling, and consequently lead to the difference in extent of antigen-specific Th17 cells. In this study, we did not detect any IL-4 production, which is an adjuvant effect of *Mycobacterium tuberculosis* and pertussis toxin.

In K/BxN mice expressing I-A^{b7} as MHC class II molecules, mGPI₂₈₂₋₂₉₄-specific CD4⁺ T cells lead B cells to produce anti-mouse GPI antibodies [16]. The anti-mouse GPI antibodies from K/BxN mice have such high affinity that IgG transfer of K/BxN mice can provoke arthritis in normal mice [6]. In comparison, the anti-mouse GPI antibodies from GPI-induced arthritis alone are not sufficient for the development of arthritis because IgG transfer from mice immunised with rhGPI can not provoke arthritis. However, IgG signalling through Fc γ R seems necessary for the induction of GPI-induced arthritis because Fc γ R-deficient mice are resistant to arthritis [1]. Moreover, the data that transfer of rhGPI-primed or hGPI₃₂₅₋₃₃₉-primed Th17 cells to naive DBA/1 mice can not induce arthritis emphasises the necessity of anti-mouse GPI antibodies (unpublished observation). Considering the data that there are no positive correlation between anti-mouse GPI antibodies and arthritis score [29] and unpublished observation, and arthritis-resistant mice like C57BL/6 produce as high titres of anti-mouse GPI antibodies as DBA/1 when immunised with rhGPI (1 and unpublished observation), anti-mouse GPI antibodies may play a subordinate role in the development of GPI-induced arthritis and peptide-induced arthritis in DBA/1 mice.

In the process of epitope screening, the response to hGPI₅₃₉₋₅₅₈ peptide was comparable with that to hGPI₃₂₇₋₃₄₆ peptide; however, the response to hGPI₅₄₂₋₅₅₈ and hGPI₅₄₄₋₅₅₈, which were synthesised with 90% purity, was lower than that to hGPI₅₃₉₋₅₅₈ peptide. Furthermore, the response to hGPI₅₃₉₋₅₅₈, which was re-synthesised with 90% purity, was much lower than to hGPI₃₂₅₋₃₃₉ or to hGPI₅₃₉₋₅₅₈ peptide for screening (data not shown). These results could be explained by differences in the purity of the synthetic peptides. The synthetic peptides used for screening (peptides numbers 1 to 25, Table 2) were unpurified, and the purity of each peptide would have been quite different, although the exact purity was unchecked by the product maker. Therefore, it is possible that the purity of number 25 peptide might have been much higher than that of number 18 peptide, or alternatively, number 25 peptide may have contained other peptides through peptide synthesis.

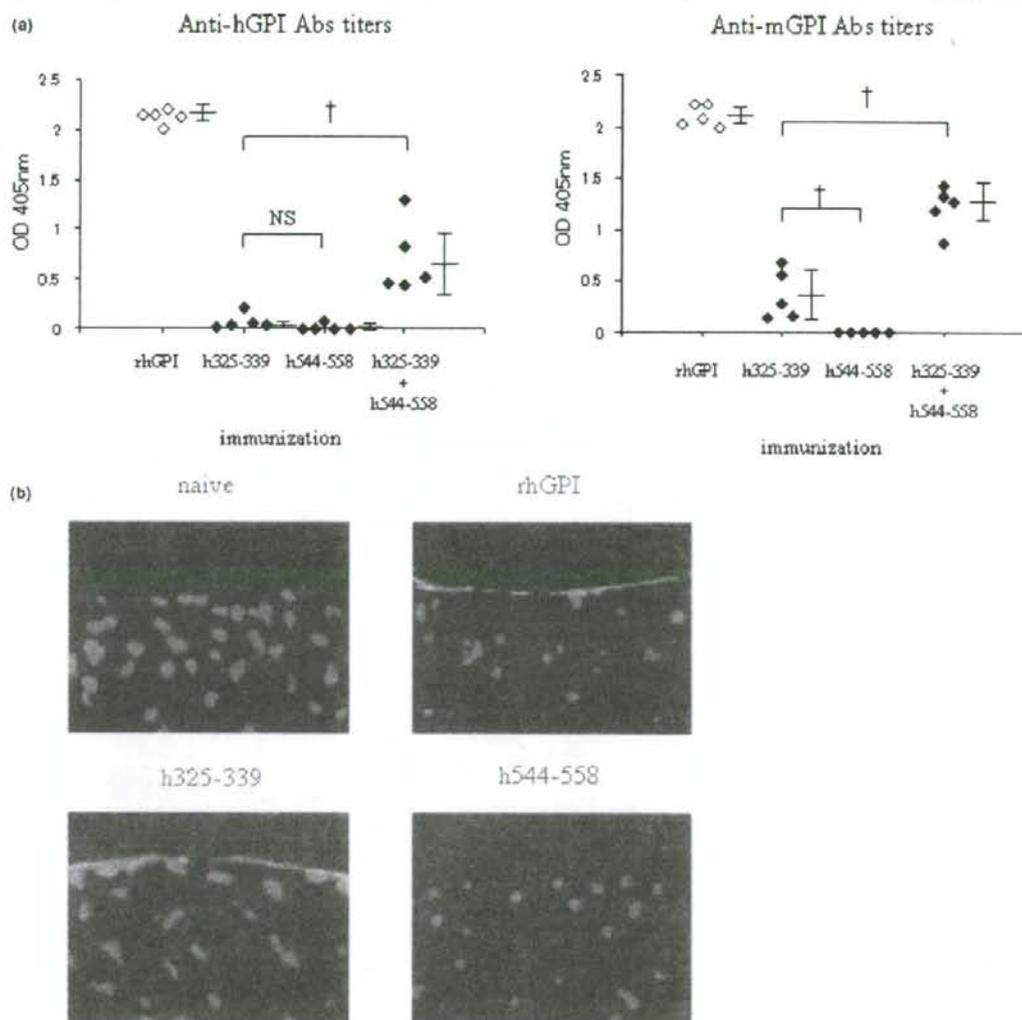
From a probability point of view, it is possible that other epitopes exist in some regions of human GPI-amino acid

Figure 5



Cross-reactivity with peptides derived from mouse glucose-6-phosphate isomerase (GPI). (a) Draining lymph node (DLN) cells taken from hGPI₃₂₅₋₃₃₉-immunised mice on day 5 were cultured with 10 μ M of hGPI₃₂₅₋₃₃₉, mGPI₃₂₅₋₃₃₉, hGPI₅₄₄₋₅₅₈ or mGPI₅₄₄₋₅₅₈ for 24 hours. The supernatants were assayed for interleukin (IL) 17 by ELISA. Data are averages \pm standard deviation of three culture-wells. Representative data of three independent experiments. (b) DLN cells taken from hGPI₃₂₅₋₃₃₉ or hGPI₅₄₄₋₅₅₈-immunised mice on day 5 were cultured with 10 μ M of hGPI₃₂₅₋₃₃₉ and mGPI₃₂₅₋₃₃₉ or hGPI₅₄₄₋₅₅₈ and mGPI₅₄₄₋₅₅₈, respectively. GoldiStop was added at the last four hours of each culture. Flow cytometry for IL-17 and interferon (IFN) γ was gated in CD3⁺, CD4^{high} cells. Representative flow cytometry data of three independent experiments with two mice per experiment.

Figure 6



Titres of anti-mouse glucose-6-phosphate isomerase (GPI) antibodies were elevated in mice with arthritis. (a) Sera were taken on day 14 from mice immunised with recombinant human (rh) GPI, hGPI₃₂₅₋₃₃₉, hGPI₅₄₄₋₅₅₈ or hGPI₃₂₅₋₃₃₉ plus hGPI₅₄₄₋₅₅₈, and the titres of anti-human GPI antibodies and anti-mouse GPI antibodies were analysed by ELISA. Each symbol represents a single mouse. Data are mean optimal density \pm standard deviation. $\dagger p < 0.01$ (Mann-Whitney's U test). Representative data of two independent experiments. (b) Ankle joints were taken on day 14 from mice immunised with rhGPI, hGPI₃₂₅₋₃₃₉ or hGPI₅₄₄₋₅₅₈. Cryostat sections of ankle joints were stained with anti-mouse IgG (red), and nuclei were counterstained with 4',6-diamidino-2-phenylindole diacetate (blue). Representative data of three independent experiments.

sequence from which we did not synthesise the peptides, because I-A^b may have another binding motif and our synthesised peptides covered only the 399/558 (71.5%) amino acid residues of human GPI protein, not the whole length. However, two experimental pieces of data support that hGPI₃₂₅₋₃₃₉

may be the dominant epitope. One is that immunisation with hGPI₃₂₅₋₃₃₉ provoked arthritis similar to that induced by rhGPI protein. The other is that intraperitoneal injection of hGPI₃₂₅₋₃₃₉ after the onset of arthritis significantly ameliorated the progress of arthritis (data not shown). Because systemic