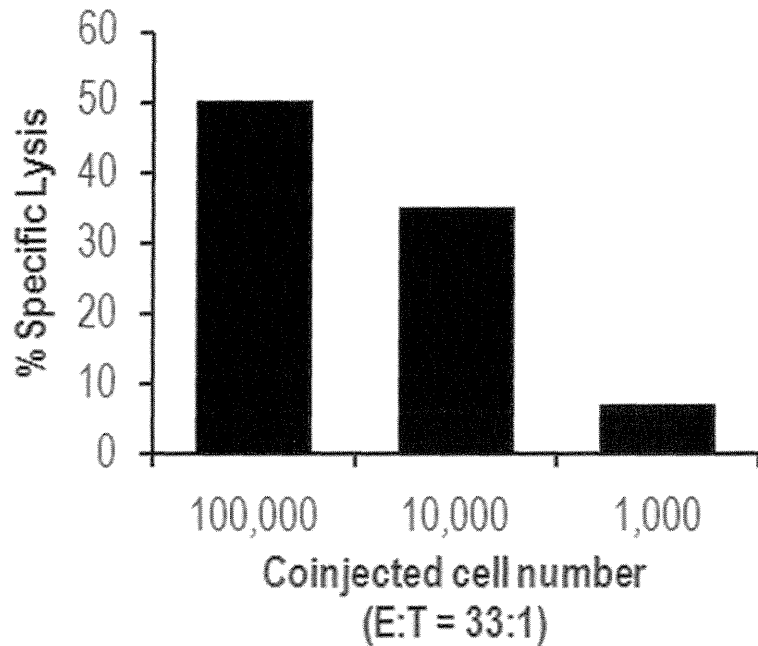


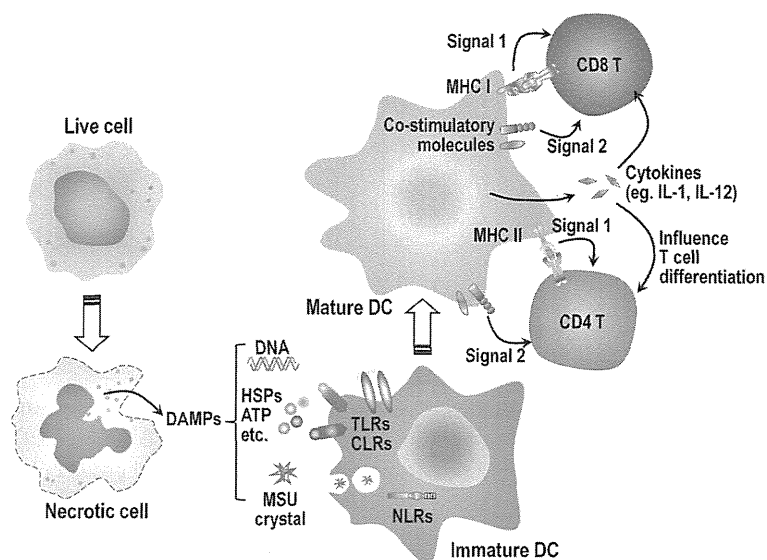
91. Liu-Bryan R, Pritzker K, Firestein GS, Terkeltaub R. TLR2 signaling in chondrocytes drives calcium pyrophosphate dihydrate and monosodium urate crystal-induced nitric oxide generation. *J Immunol.* 2005; 174:5016–5023. [PubMed: 15814732]
92. Scott P, Ma H, Viriyakosol S, Terkeltaub R, Liu-Bryan R. Engagement of CD14 mediates the inflammatory potential of monosodium urate crystals. *J Immunol.* 2006; 177:6370–6378. [PubMed: 17056568]
93. Martinon F, Mayor A, Tschopp J. The inflammasomes: guardians of the body. *Annu Rev Immunol.* 2009; 27:229–265. [PubMed: 19302040]
94. Meissner F, Seger RA, Moshous D, Fischer A, Reichenbach J, Zychlinsky A. Inflammasome activation in NADPH oxidase defective mononuclear phagocytes from patients with chronic granulomatous disease. *Blood.* 2010; 116:1570–1573. [PubMed: 20495074]
95. Bauernfeind F, et al. Inflammasomes: current understanding and open questions. *Cell Mol Life Sci.* 2011; 68:765–783. [PubMed: 21072676]
96. Zhou R, Yazdi AS, Menu P, Tschopp J. A role for mitochondria in NLRP3 inflammasome activation. *Nature.* 2011; 469:221–225. [PubMed: 21124315]
97. Zhou R, Tardivel A, Thorens B, Choi I, Tschopp J. Thioredoxin-interacting protein links oxidative stress to inflammasome activation. *Nat Immunol.* 2010; 11:136–140. [PubMed: 20023662]
98. Meissner F, Molawi K, Zychlinsky A. Superoxide dismutase 1 regulates caspase-1 and endotoxin shock. *Nat Immunol.* 2008; 9:866–872. [PubMed: 18604212]
99. Latz E. NOX-free inflammasome activation. *Blood.* 2010; 116:1393–1394. [PubMed: 20813905]
100. van de Veerdonk FL, et al. Reactive oxygen species-independent activation of the IL-1beta inflammasome in cells from patients with chronic granulomatous disease. *Proc Natl Acad Sci U S A.* 2010; 107:3030–3033. [PubMed: 20133696]
101. Masters SL, et al. Activation of the NLRP3 inflammasome by islet amyloid polypeptide provides a mechanism for enhanced IL-1beta in type 2 diabetes. *Nat Immunol.* 2010; 11:897–904. [PubMed: 20835230]
102. Chen GY, Tang J, Zheng P, Liu Y. CD24 and Siglec-10 selectively repress tissue damage-induced immune responses. *Science.* 2009; 323:1722–1725. [PubMed: 19264983]
103. Gurcel L, Abrami L, Girardin S, Tschopp J, van der Goot FG. Caspase-1 activation of lipid metabolic pathways in response to bacterial pore-forming toxins promotes cell survival. *Cell.* 2006; 126:1135–1145. [PubMed: 16990137]
104. Mariathasan S, et al. Cryopyrin activates the inflammasome in response to toxins and ATP. *Nature.* 2006; 440:228–232. [PubMed: 16407890]
105. Munoz-Planillo R, Franchi L, Miller LS, Nunez G. A critical role for hemolysins and bacterial lipoproteins in *Staphylococcus aureus*-induced activation of the Nlrp3 inflammasome. *J Immunol.* 2009; 183:3942–3948. [PubMed: 19717510]
106. Havran WL, Jameson JM. Epidermal T cells and wound healing. *J Immunol.* 2010; 184:5423–5428. [PubMed: 20483798]
107. Toulon A, et al. A role for human skin-resident T cells in wound healing. *J Exp Med.* 2009; 206:743–750. [PubMed: 19307328]
108. Groh V, Rhinehart R, Randolph-Habecker J, Topp MS, Riddell SR, Spies T. Costimulation of CD8alpha T cells by NKG2D via engagement by MIC induced on virus-infected cells. *Nat Immunol.* 2001; 2:255–260. [PubMed: 11224526]
109. Groh V, Wu J, Yee C, Spies T. Tumour-derived soluble MIC ligands impair expression of NKG2D and T-cell activation. *Nature.* 2002; 419:734–738. [PubMed: 12384702]
110. Srivastava P. Interaction of heat shock proteins with peptides and antigen presenting cells: chaperoning of the innate and adaptive immune responses. *Annu Rev Immunol.* 2002; 20:395–425. [PubMed: 11861608]
111. Tsan MF, Gao B. Heat shock proteins and immune system. *J Leukoc Biol.* 2009; 85:905–910. [PubMed: 19276179]
112. Scaffidi P, Misteli T, Bianchi ME. Release of chromatin protein HMGB1 by necrotic cells triggers inflammation. *Nature.* 2002; 418:191–195. [PubMed: 12110890]

113. Guma M, Ronacher L, Liu-Bryan R, Takai S, Karin M, Corr M. Caspase 1-independent activation of interleukin-1beta in neutrophil-predominant inflammation. *Arthritis Rheum.* 2009; 60:3642–3650. [PubMed: 19950258]
114. Gabay C, Lamacchia C, Palmer G. IL-1 pathways in inflammation and human diseases. *Nat Rev Rheumatol.* 2010; 6:232–241. [PubMed: 20177398]
115. Joosten LA, et al. Inflammatory arthritis in caspase 1 gene-deficient mice: contribution of proteinase 3 to caspase 1-independent production of bioactive interleukin-1beta. *Arthritis Rheum.* 2009; 60:3651–3662. [PubMed: 19950280]
116. Fantuzzi G, et al. Response to local inflammation of IL-1beta-converting enzyme-deficient mice. *J Immunol.* 1997; 158:1818–1824. [PubMed: 9029121]
117. Miwa K, Asano M, Horai R, Iwakura Y, Nagata S, Suda T. Caspase 1-independent IL-1 beta release and inflammation induced by the apoptosis inducer Fas ligand. *Nat Med.* 1998; 4:1287–1292. [PubMed: 9809553]
118. Stehlik C. Multiple interleukin-1beta-converting enzymes contribute to inflammatory arthritis. *Arthritis Rheum.* 2009; 60:3524–3530. [PubMed: 19950297]
119. Deyerle KL, Sims JE, Dower SK, Bothwell MA. Pattern of IL-1 receptor gene expression suggests role in noninflammatory processes. *J Immunol.* 1992; 149:1657–1665. [PubMed: 1387148]
120. Boraschi D, Tagliabue A. The interleukin-1 receptor family. *Vitam Horm.* 2006; 74:229–254. [PubMed: 17027517]
121. Nuki G, Simkin PA. A concise history of gout and hyperuricemia and their treatment. *Arthritis Res Ther.* 2006; 8(Suppl 1):S1. [PubMed: 16820040]
122. Beck C, Morbach H, Richl P, Stenzel M, Girschick HJ. How can calcium pyrophosphate crystals induce inflammation in hypophosphatasia or chronic inflammatory joint diseases? *Rheumatol Int.* 2009; 29:229–238. [PubMed: 18821074]
123. Fujimura N. Pathology and pathophysiology of pneumoconiosis. *Curr Opin Pulm Med.* 2000; 6:140–144. [PubMed: 10741774]
124. Galkina E, Ley K. Immune and inflammatory mechanisms of atherosclerosis. *Annu Rev Immunol.* 2009; 27:165–197. [PubMed: 19302038]
125. Mandrup-Poulsen T. IAPP boosts islet macrophage IL-1 in type 2 diabetes. *Nat Immunol.* 2010; 11:881–883. [PubMed: 20856216]
126. Larsen CM, et al. Interleukin-1-receptor antagonist in type 2 diabetes mellitus. *N Engl J Med.* 2007; 356:1517–1526. [PubMed: 17429083]
127. Cinti S, et al. Adipocyte death defines macrophage localization and function in adipose tissue of obese mice and humans. *J Lipid Res.* 2005; 46:2347–2355. [PubMed: 16150820]
128. Greenberg AS, Obin MS. Obesity and the role of adipose tissue in inflammation and metabolism. *Am J Clin Nutr.* 2006; 83:461S–465S. [PubMed: 16470013]
129. Dinarello CA, Donath MY, Mandrup-Poulsen T. Role of IL-1beta in type 2 diabetes. *Curr Opin Endocrinol Diabetes Obes.* 2010; 17:314–321. [PubMed: 20588114]
130. Rock KL, Latz E, Ontiveros F, Kono H. The sterile inflammatory response. *Annu Rev Immunol.* 2010; 28:321–342. [PubMed: 20307211]



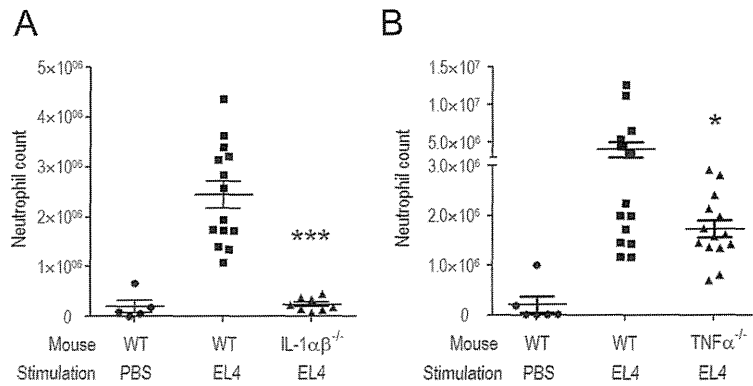
**Fig. 1. Cells contain an endogenous adjuvant activity that augments the priming of CD8<sup>+</sup> T-cell responses**

A limiting amount of antigen (5  $\mu$ g ovalbumin-conjugated beads) was co-injected into mice together with either  $10^5$ ,  $10^4$ , or  $10^3$  mitomycin C-treated syngeneic GL261 cells. Seven days later, splenocytes were harvested and stimulated with ovalbumin-transfected EG7 cells. CTL activity was measured against EG7 cells 5 days later in a  $^{51}\text{Cr}$  release assay. E:T ratio = 33:1. The data show that the GL261 cells, which lack antigen, contain an activity that markedly augments the priming of CD8<sup>+</sup> T-cell responses to the co-injected antigen.



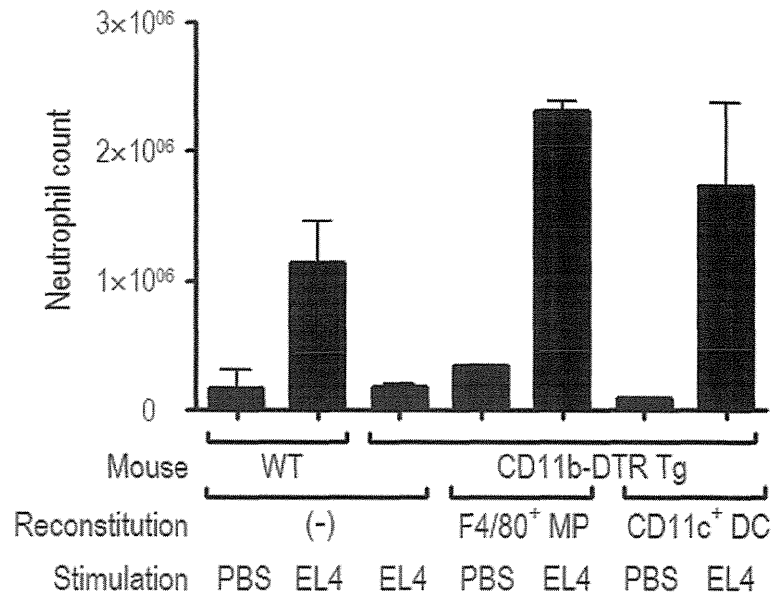
**Fig. 2. Adjuvant effect of DAMPs in stimulating dendritic cells**

When cells undergo necrosis intracellular DAMPs (such as DNA, HSPs, MSU, etc.) are released into the extracellular milieu. Some of these DAMPs can act as adjuvants to stimulate dendritic cells (DCs), through pattern recognition receptors, such as TLRs, CLR, or NLRs, or other receptors to increase the expression of MHC molecules, co-stimulatory ligands, and cytokines. These mature DC can then optimally activate T cells and direct their differentiation. HSPs, heat-shock proteins; MSU, monosodium urate crystal; TLRs, Toll-like receptors; CLR, C-type lectin receptors; NLRs, NOD-like receptors.

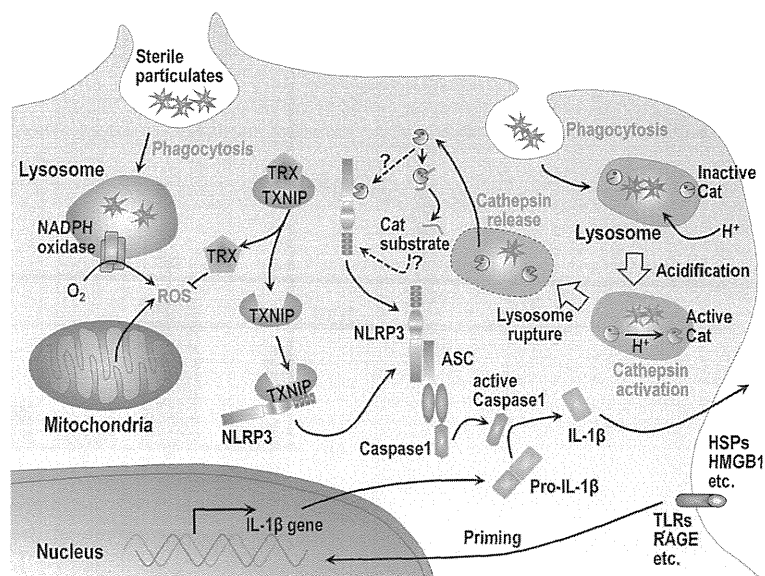


**Fig. 3. Role of IL-1 and TNF $\alpha$  in cell death-induced inflammatory responses**

Wildtype (WT) C57BL/6 and (A) IL-1 $\alpha\beta$  double-deficient or (B) TNF $\alpha$ -deficient mice were injected intraperitoneally with 30 million heat-shocked necrotic EL4 cells. Total neutrophil number in the peritoneal cavity was determined 14 h after stimulation. The data are combined results of three experiments with values from individual mice displayed along with means  $\pm$  SEM. \* $p < 0.05$ , \*\*\* $p < 0.0001$  versus WT group. The data shown that TNF $\alpha$  can make some contribution to the cell death-induced inflammatory responses; notably this contribution is less than from IL-1.



**Fig. 4. Analysis of the cells required for the generation of cell death-induced inflammation**  
 Wildtype (WT, FVB/N) or CD11b-DTR-Tg mice were injected intravenously with 500 ng of diphtheria toxin (500 ng); this procedure depletes macrophages in the transgenic mice. The treated animals were then reconstituted with F4/80<sup>+</sup> macrophages (MPs) from thioglycollate-elicited peritoneal cells or CD11c<sup>+</sup> dendritic cells (DCs) from spleens of Flt3L-treated mice (C57BL/6 mice injected with Flt3L-transduced cells). Neutrophil number in the peritoneum was determined 14 h after intraperitoneal injection of heat-shocked necrotic EL4 cells or PBS and displayed as the mean  $\pm$  SEM. The data show that loss of CD11b<sup>+</sup> cells in the host markedly inhibits inflammation to dead cells and that these responses can be reconstituted by the adoptive transfer of MPs or DCs.



**Fig. 5. Mechanisms of NLRP3 inflammasome activation by sterile stimuli**

There are two distinct mechanisms proposed as to how NLRP3 inflammasomes are activated by sterile particles. The first model suggests that after phagocytosis, the particles stimulate ROS from NADPH oxidase and/or mitochondria. The increased level of ROS in the cytosol is then sensed by thioredoxin (TRX) and causes its dissociation from thioredoxin-binding protein (TXNIP). The released TXNIP then binds and activates NLRP3 through interaction with LRR and NATCH domains of NLRP3. The second model also requires phagocytosis of the sterile particles. In this pathway phagosomes acidify and the drop in pH causes Cathepsin (Cat) activation. Through some unknown mechanism, some of the particulate-containing phagosomes rupture and release their contents into the cytosol. This vacuolar rupture is somehow sensed by NLRP3, possibly by binding a cleavage product of activated cathepsins or by the cathepsins cleaving NLRP3 in a way that activates it. NLRP3 associates with ASC and pro-Caspase 1 to form the inflammasome and cleaves the Caspase 1 zymogen into its active form. Active Caspase 1 then cleaves pro-IL-1 $\beta$  into active IL-1 $\beta$ . In most cases, the synthesis of pro-IL-1 $\beta$  is induced by “priming”, which requires the stimulation of pattern recognition receptors or cytokines to stimulate transcription of pro-IL-1 $\beta$ .



