THE *lpr* GENE CAUSES AN INTRINSIC T CELL ABNORMALITY THAT IS REQUIRED FOR HYPERPROLIFERATION

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The single autosomal recessive gene lpr (lymphoproliferation) causes massive lymphadenopathy and concomitant autoimmune disease when expressed in the context of the MRL (1) or even normal background genes (2, 3). Extensive studies have been performed regarding the expanded population of cells in lprmice (4). These cells exhibit rearrangements of TCR β chain genes (5, 6), but not of Ig heavy chain genes (7), and therefore are probably of T cell origin. They manifest an immature T cell surface phenotype, i.e., Thy-1⁺(dull), Ly- 1^{+} (dull), Lyt- 2^{-} (8), L3T4⁻ (9), and Paul-Bunnell-negative (P-B⁻)¹ (10); yet they also have some B cell markers such as Ly-6 (11), 6B2, 3A1 (7), and PC-1 (12), as well as high levels of 9F3 antigen (13). Increased expression of the c-myb oncogene in these cells (14) further suggests their immaturity, since this proto-oncogene is characteristic of immature T cells and of the hematopoietic stem cells (15). However, the lpr cells express mature TCR α chain (TCR- α) message (5, 6, Croghan, T. W., J.-L. Davignon, J. Evans, J. P. Allison, R. A. Eisenberg, J. A. Frelinger, and P. L. Cohen, submitted for publication). Functional investigation of purified Thy-1⁺,Lyt-2⁻,L3T4⁻ (double-negative) lpr T cells has indicated their inert (16) and immature nature (17). It has thus been impossible to define the differentiation stage of the abnormal lpr T cells, since they do not correspond to any known normal subpopulations.

Some information is now available concerning the mechanisms of proliferation of these T cells. The fact that neonatal thymectomy prevents the later development of lymphadenopathy indicates its thymus-dependent nature (18, 19). The operation of multiple factors, including some attributable to the spleen, was claimed by using a technique of whole spleen organ transplantation (20). Adoptive transfer experiments have shown that lymphadenopathy develops in lethally irradiated MRL/Mp-lpr/lpr mice given MRL/Mp-lpr/lpr bone marrow (lpr/lpr $\rightarrow lpr/lpr$) but not in those mice given MRL/Mp-+/+ stem cells (+/+ $\rightarrow lpr/lpr$) (21-23). These results suggest that hematopoietic precursor cells expressing the

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¹ Abbreviations used in this paper: BMC, bone marrow cells; LNC, lymph node cells; P-B, Paul-Bunnell; PE, phycoerythrin.

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lpr gene are essential for the massive lymphadenopathy. However, the absence of lymphadenopathy in $(lpr/lpr \rightarrow +/+)$ chimeras suggests that the *lpr* host environment is also important (22, 23).

Two different mechanisms of lymphoproliferation can be postulated: (a) the expanding lpr cell populations have an intrinsic defect(s) that causes unrestrained growth; or (b) one set of abnormal lpr cells may induce a minor population of normal cells to proliferate. The former hypothesis requires the lpr gene to be expressed in the expanding cell population itself, while according to the latter it may be expressed in other cells. To distinguish between these two potential mechanisms, we used Ly-1 congenic mice in an adoptive bone marrow transfer system. Bone marrow cell mixtures of B6-lpr/lpr (Ly-1.2) and B6-+/+ (Ly-1.1) were transferred into lethally irradiated B6-lpr/lpr mice. This system enabled us to trace the development of normal and lpr-derived stem cells in an lpr environment. Our results suggest that the lpr gene effect requires expression directly within the T cells that accumulate in large numbers in lpr mice.

Materials and Methods

Mice. C57BL/6-*lpr/lpr* (B6-*lpr/lpr*), C57BL/6-Ly-1.1 (B6/Ly-1.1), and C57BL/6Kh (B6/Kh) mice were obtained from The Jackson Laboratory, Bar Harbor, ME, and maintained in our mouse colony.

Antibodies. A panel of rat mAbs was used in the form of culture supernatants. AT83 (24), specific for Thy-1.2; GK-1.5 (25), directed against L3T4; and 53-6.7, directed against Lyt-2 (26), were originally supplied by Dr. Frank Fitch, University of Chicago, Chicago, IL. Hybridoma cells secreting 3A1 mAb (anti-B220) were obtained from The American Type Culture Collection, Rockville, MD. Culture supernatant containing 9F3 mAb was kindly donated by Dr. Francis Dumont, Merck Institute, Rahway, NJ. The hybridomas that secrete mAb against Ly-1.1 or Ly-1.2 were kindly donated by Dr. U. Hämmerling, Sloan-Kettering Institute, New York, NY. Serum-free culture supernatants were concentrated, and the mAbs were purified using protein A-coupled Sepharose 4B. These antibodies were then biotinylated. FITC-coupled MAR 18.5 (mouse IgG2a monoclonal anti-rat κ chain), phycoerythrin (PE)-coupled streptavidin, and FITC-coupled avidin were purchased from Becton Dickinson & Co., Mountain View, CA. Bone Marrow Cell Transfer. 3-4-mo-old B6-lpr/lpr and B6/Ly-1.1 mice of both sexes

Bone Marrow Cell Transfer. 3-4-mo-old B6-lpr/lpr and B6/Ly-1.1 mice of both sexes were used as donors of bone marrow cells (BMCs). Femurs and tibias were removed aseptically, and bone marrow was expressed by syringe via a 23-G needle into cold Dulbecco's modified MEM buffered with 15 mM Hepes. 3-mo-old B6-lpr/lpr mice were used as recipients and received water containing 2 g/liter of antibiotic (Biosol 325; Upjohn Co., Kalamazoo, MI) from 1 wk before irradiation until they were killed. They received 850 rad in a Gamma-cell 40 apparatus (Atomic Energy of Canada, Ltd., Ottawa, Canada). 10 h after irradiation, they were injected with 10⁷ B6-lpr/lpr (group I) or B6/Ly-1.1 (group II) BMCs or with a mixture of 10⁷ B6-lpr/lpr and 10⁷ B6/Ly-1.1 BMCs (group III). All the recipients were housed in sterilized cages in a room supplied with filtered air.

Assessment of Chimerism. The Ly-1 allotype of lymphocytes of group III chimeras was determined by cytotoxicity and immunofluorescence of mononuclear cells enriched from peripheral blood by flotation on LSM (Litton Bionetics, Kensington, MD). Cytotoxicity assays were performed according to the method of J. Klein et al. (27). Briefly, 2 μ l of the cells (2 × 10³) were incubated in a Microtest tissue culture plate (3034; Falcon Labware, Oxnard, CA) for 20 min at room temperature with 2 μ l of 1/20 dilution of either the monoclonal anti-Ly-1.1 or the monoclonal anti-Ly-1.2. The mixture was washed and then incubated for 30 min at 37°C with a 1/15 dilution of Low Tox-M rabbit complement (Cedarlane, Willowdale, Ontario). The live and dead cells were distinguished through an inverted phase-contrast microscope. For immunofluorescence, $3-5 \times 10^5$ cells were incubated for 30 min at 4°C with a 1/20 dilution of biotinylated anti-Ly-1.1 or anti-Ly-

1.2. The mixture was washed and then incubated with a 1/500 dilution of FITC-labeled avidin. Cells were washed three times and preserved in 1% formalin until flow cytometric analysis.

Preparation of Cell Suspensions. Lymph nodes, spleens, and thymuses were removed aseptically, and single cell suspensions were prepared in sterile RPMI 1640 (University of North Carolina Cancer Center, Chapel Hill). Lymph node cells (LNCs) were from a pool of all axillary, cervical, and mesenteric nodes. Their viability, as determined by trypan blue exclusion, exceeded 90%.

Fluorescence Staining and Flow Microfluorometry Analysis. An indirect immunofluorescence protocol was used in all instances. HBSS (pH 7.2, UNC Cancer Center) containing 3% FCS (Hazelton Research Products, Denver, PA), 0.1% sodium azide, and 15 mM Hepes buffer was used as the staining medium. Samples of 10^6 cells were incubated in 100 μ l of staining medium for 30 min at 4°C with hybridoma supernatants or with purified biotinylated anti-Ly-1.1 or anti-Lyt-1.2. After two washes, the cells were incubated in 100 μ l of staining medium for 30 min at 4°C with FITC-coupled anti-rat κ , FITC-coupled avidin, or PE-coupled reagents. After an additional three washes, the cells were analyzed by flow cytometry (Epics V; Coulter Electronics, Hialeah, FL). For two-color immunofluorescence staining, both 9F3 or 3A1 and biotinylated anti-Ly-1.1 or anti-Ly-1.2 were added to the cells simultaneously, because none of these antibodies inhibited or enhanced the binding of the other antibodies to the cells. Fluorescence data were plotted logarithmically over a three-decade scale.

ELISA Assays. Serum levels of IgG antichromatin, IgG anti-ssDNA, and IgM rheumatoid factor were assayed in polyvinylchloride microtiter plates (Dynatech Laboratories, Inc., Alexandria, VA) coated with chromatin (10 μ g/ml, reference 28), ssDNA (10 μ g/ml), or IgG1 myeloma protein MOPC245 (10 μ g/ml), respectively, for 5 h at room temperature. Plates were then washed with borate-buffered saline (BBS) and nonspecifically coated with coating buffer (BBS, 0.5% normal goat serum, 0.4% Tween-80, 0.5% BSA, 0.1% NaN₃) for 2 h. After the plates were washed, sera diluted at 1:250 in coating buffer were added and incubated overnight at 4°C. The plates were washed again, and affinitypurified biotinylated goat anti-mouse γ or goat anti-mouse μ was added for 2 h of incubation. After additional washing, the plates were incubated with avidin-linked alkaline phosphatase (Sigma Chemical Co., St. Louis, MO) for 2 h. After further washings, 104 phosphatase substrate (para-nitrophenylphosphate, 1 mg/ml; Sigma Chemical Co.) was added in 0.01 M diethanolamine, pH 9.8. The plates were read at appropriate intervals with a microELISA autoreader (Dynatech Laboratories, Inc.).

Results and Discussion

Selective Expansion of the lpr/lpr-derived T Cell Populations in $(lpr/lpr plus +/+ \rightarrow lpr/lpr)$ Chimeras. 3-mo-old B6-lpr/lpr (Ly-1.2) mice were lethally irradiated (850 rad) and reconstituted with 10⁷ BMCs from B6-lpr/lpr (Ly-1.2) mice (group I, $lpr/lpr \rightarrow lpr/lpr$); from B6/Ly-1.1 mice (group II, $+/+ \rightarrow lpr/lpr$); or from both strains of mice (group III, lpr/lpr plus $+/+ \rightarrow lpr/lpr$). Three control mice not given BMC died within 1 mo after irradiation. 4 mo after BMC transfer, the chimerism of 5 group III recipients was assessed by cytotoxicity and immunofluorescence of PBMC with monoclonal anti-Ly-1.1 and Ly-1.2. As shown in Table I, the PBMC of these mice contained nearly equivalent numbers of Ly-1⁺ cells of each donor allotype (Ly-1.1⁺/Ly-1.2⁺ = 0.88).

7-8 mo after the transfer, all mice were killed for examination. One of group III had died just before sacrifice. Most mice in group I or group III had easily detected submandibular lymphadenopathy, while all of group II mice looked healthy at this time. To quantitate lymphoproliferation, the total numbers of

TABLE I Chimerism of Group III Mice (lpr/lpr plus +/+ $\rightarrow lpr/lpr$)						
A seav	n*	Percent positive of PBM				
7155a y		Ly-1.1	Ly-1.2			
cytotoxicity	3	34, 36, 33	36, 37, 39			
immunofluorescence	2	30, 32	41, 38			

* Number of mice tested. Five of eight mice in this group of chimeras were examined.

TABLE II Lymphoid Organ Cell Numbers and Ly-1 Allotype of LN Cells in Bone Marrow Chimeras

Crown	Type of transfer	n*	Number of cells		Percent positive of LN cells [‡]		
Group			Spleen	LN	Thy-1.2	Ly-1.1	Ly-1.2
			×10 ⁻⁸	×10 ⁻⁷			
I	lpr/lpr → lpr/lpr	5	$2.2 \pm 0.4^{\$}$	20 ± 6.6	76 ± 3.2	1.8 ± 1.3	67 ± 2.2
11	$+/+ \rightarrow lpr/lpr$	5	0.8 ± 0.1	2.2 ± 0.3	69 ± 4.0	59 ± 3.6	7.0 ± 3.2
111	lpr/lpr plus +/+ $\rightarrow lpr/lpr$	7	1.9 ± 0.5	20 ± 6.9	76 ± 5.3	5.1 ± 1.1	69 ± 3.5
Unmanipulated							
	B6/Kh	4	1.0 ± 0.1	2.3 ± 0.3	70 ± 3.1	1.5 ± 1.7	60 ± 5.6
	B6/Ly-1.1	4	1.0 ± 0.1	2.4 ± 0.3	68 ± 2.1	57 ± 1.8	1.5 ± 1.2

* Number of mice examined.

[‡] Percent positive of LN cells was determined by immunofluorescence and cytofluorometry.

^{\$} Values represent means ± SD.

splenocytes and LNC, and the Ly-1 allotype of the LNC were determined. As shown in Table II, remarkable splenomegaly and lymphadenopathy were observed in both $(lpr/lpr \rightarrow lpr/lpr)$ and $(lpr/lpr plus +/+ \rightarrow lpr/lpr)$ chimeras. In contrast, the numbers of splenocytes and LNC of $(+/+ \rightarrow lpr/lpr)$ chimeras were similar to those of intact B6/Kh (Ly-1.2) or B6/Ly-1.1 mice. About 90% of the lymph node T cells were Ly-1.1⁺ in group II mice, which confirmed their expected chimeric status. In group III chimeras, 70% of the cells in the expanded lymph nodes were Ly-1.2⁺, while only 5% were Ly-1.1⁺ (Ly-1.1⁺/Ly-1.2⁺ < 0.10; Tables II, III, and Fig. 1). Surprisingly, in contrast to the preferential reconstitution of the lymph nodes by Ly-1.2⁺ cells, the thymuses of the group III chimeras were only moderately skewed toward the *lpr* phenotype (Ly-1.1⁺/Ly- $1.2^+ = 0.70$; Table III, Fig. 2). This suggested either that lymphoproliferation occurred mainly after emigration to the peripheral organs, or that excessive emigration of *lpr* T cells from the thymus might result in massive peripheral accumulation (29).

From these results taken together, we conclude: (a) the lpr T cell population selectively expands in $(lpr/lpr \text{ plus } +/+ \rightarrow lpr/lpr)$ chimeras; (b) in these mice, +/+ lymphocytes neither prevent the growth of lpr T cells, nor proliferate in the environment where the lpr gene is fully expressed; (c) +/+ lymphocytes cannot proliferate abnormally in lpr/lpr host mice even when they constitute 90% of the population of lymph node cells; and (d) the abnormal accumulation of T cells caused by the lpr gene occurs in the peripheral organ(s), but not in the thymus.

Phenotypic Similarity of the Expanded T Cell Population in $(lpr/lpr plus +/+ \rightarrow$

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FIGURE 1. Fluorescence profiles of lymph node cells from $(lpr/lpr \rightarrow lpr/lpr)$ (a and b) (+/+ $\rightarrow lpr/lpr$ (c and d) or (lpr/lpr) plus +/+ $\rightarrow lpr/lpr$ (c and d) or (lpr/lpr) plus +/+ $\rightarrow lpr/lpr)$ (e and f) chimeras stained with monoclonal anti-Ly-1.1 (a, c, and e) or anti-Ly-1.2 (b, d, and f). Background staining with FITC-avidin alone is also shown in each profile.

FLUORESCENCE INTENSITY

TABLE IIILy-1 Allotype of Thymocytes from Group III (lpr/lpr plus +/+ \rightarrow lpr/lpr) Chimeras

Mouse Number	Number of		Percent positive*				
	Thursday Thursday		LN	cells	Thymocytes		
	LIN Cells	1 nymocytes	Ly-1.1	Ly-1.2	Ly-1.1	Ly-1.2	
	×10 ⁻⁷	×10 ⁻⁷					
1	30	1.3	5	71	38	55	
2	19	1.7	6	65	32	46	
3	16	1.2	6	69	35	50	
4	21	1.8	5	73	40	58	
5	27	ND	3	70	ND	ND	
6	13	1.3	5	69	37	50	
7	11	ND	6	63	ND	ND	

* Ly-1 positive percent of the cells was determined by immunofluorescence.

lpr/lpr) Chimeras to that of Intact lpr Mice. Next, we investigated the surface differentiation antigens on the T cells of $(lpr/lpr \text{ plus } +/+ \rightarrow lpr/lpr)$ chimeras to assess whether or not these cells were identical to those accumulating in intact lpr mice. As shown in Fig. 3, the majority of the cells in the chimeras was Thy-I⁺ (Fig. 3a), Ly-1.2⁺ (Fig. 3b), L3T4⁻,Lyt-2⁻ (Fig. 3c). The amounts of both Thy-1 and Ly-1 antigens on the surface of these cells were less than those on LNC of intact B6/Kh mice (Fig. 3, d and e). We also stained for the 9F3 and 3A1 (B-220) antigens, which are known to be expressed on the expanded T cell population of lpr mice (7, 13). As shown in Fig. 4, a remarkable increase in Ly-1.2⁺, 9F3⁺ (Fig. 4a) and Ly-1.2⁺, 3A1⁺ (Fig. 4d) cells was observed in (lpr/lpr) plus $+/+ \rightarrow lpr/lpr$) chimeras, as compared with $(+/+ \rightarrow lpr/lpr)$ chimeras (Fig. 4, b and e) or intact B6/Kh mice (Fig. 4, c and f). Neither 9F3 nor 3A1 antigens



FIGURE 2. Fluorescence profiles of thymocytes from a representative (lpr/lpr) plus $+/+ \rightarrow lpr/lpr)$ chimera stained with biotinylated monoclonal anti-Ly-1.1 (a) or anti-Ly-1.2 (b). Background staining with FITC-avidin alone is also shown in each profile.





FLUORESCENCE INTENSITY

FIGURE 3. Comparison of the expression of Thy-1.2 (a and d) Ly-1.2 (b and e) or Lyt-2 plus L3T4 (c and f) on lymph node cells from an $(lpr/lpr plus +/+ \rightarrow lpr/lpr)$ chimera (a, b, and c) and an unmanipulated B6/Kh mouse (d, e, and f). Background staining with FITC-avidin alone is also shown in each profile. These data are representative of three separate experiments.



FLUORESCENCE INTENSITY (GREEN)

FIGURE 4. Two-color fluorocytometric analysis of 9F3 (a, b, and c; green) or 3A1 (d, e, and f; green) and Ly-1.2 (a, c, d, and f; red) or Ly-1.1 (b, and e; red) antigens on lymph node cells from an $(lpr/lpr plus +/+ \rightarrow lpr/lpr)$ chimera (a and d), a $(+/+ \rightarrow lpr/lpr)$ chimera (b and e), or an unmanipulated B6/Kh mouse (c and f). The levels that show <1% positive for both green and red fluorescence of lymph node cells treated with counterstains alone are delimited by the lines. These data are representative of three separate experiments.

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were expressed on the minor population of Ly-1.1⁺ LNC of group III chimeras (data not shown).

These data indicate that the major population of T cells in $(lpr/lpr \text{ plus } +/+ \rightarrow lpr/lpr)$ chimeras is Thy-1⁺(dull), Ly-1.2⁺(dull), Lyt-2⁻,L3T4⁻, 9F3⁺,3A1⁺, which is identical to that seen in intact *lpr* mice.

Autoantibody Formation in Chimeras. Finally, the serum levels of three autoantibodies, IgG antichromatin, IgG anti-ssDNA, and IgM rheumatoid factor, were assessed in the three groups of chimeras and compared with those of unmanipulated B6-lpr/lpr, B6/Kh, and B6/Ly1.1 mice (Table IV). Both the group I $(lpr/lpr \rightarrow lpr/lpr)$ and the group III $(lpr/lpr plus +/+ \rightarrow lpr/lpr)$ sera had elevated levels of all three autoantibodies, while the group II $(+/+ \rightarrow lpr/lpr)$ sera exhibited no more activity than normal controls. These data confirm that the lpr internal milieu alone cannot induce autoantibody formation in normal lymphocytes (22, 23). Furthermore, the similar autoantibody levels of the intact B6-lpr/lpr mice compared with the group III chimeric mice (which presumably possess a full complement of normal T cells) indicate that autoantibody production in lpr mice cannot be suppressed by normal T cells and thus is not due to a lack of T suppressor cells.

Recently, Perkins et al. (30) demonstrated that MRL/lpr recipient mice were resistant to engraftment by normal A-Thy mouse lymphocytes and that (A-Thy \rightarrow MRL/lpr) radiation chimeras were completely repopulated by MRL/lpr lymphocytes within 6 wk after transplantation. Our experimental system differs from theirs in that we have used as donors 99% genetically identical, congenic +/+ mice (instead of A-Thy mice). We found <10% repopulation by residual host bone marrow in (+/+ \rightarrow lpr/lpr) chimeras 7 mo after the transplantation. However, Perkins' data suggest the existence of radioresistant effector cells that may attack and prevent the growth and differentiation of +/+ lymphocytes or precursors in the lpr host mice. Nevertheless, in our experiments we detected normal numbers of Lyt-2⁺ and/or L3T4⁺ T cells in (+/+ \rightarrow lpr/lpr) chimeras (data not shown). In addition, Ly-1.1⁺, +/+-derived cells constituted 33 and 36% of the cells in the peripheral blood and the thymus, respectively, of (lpr/lpr

Group	Type of transfer		IgG antichromatin [‡]	IgG anti-ssDNA [‡]	IgM RF [‡]
I	$lpr/lpr \rightarrow lpr/lpr$	5	$0.362 \pm 0.061^{\$}$	$0.434 \pm 0.091^{\$}$	$0.384 \pm 0.135^{\$}$
II	$+/+ \rightarrow lpr/lpr$	5	0.105 ± 0.039	0.089 ± 0.051	0.113 ± 0.010
Ш	lpr/lpr plus +/+ $\rightarrow lpr/lpr$	7	$0.504 \pm 0.157^{\$}$	$0.659 \pm 0.218^{\$}$	$0.416 \pm 0.100^{\$}$
Unmani	pulated				
	B6-lpr/lpr	4	$0.548 \pm 0.059^{\$}$	$0.684 \pm 0.132^{\$}$	$0.453 \pm 0.149^{\$}$
	B6/Kh	4	0.053 ± 0.010	0.074 ± 0.013	0.075 ± 0.024
	B6/Ly1.1	4	0.100 ± 0.022	0.089 ± 0.031	0.123 ± 0.033

 TABLE IV

 Serum Autoantibody Levels in Bone Marrow Chimeras

* Size of each group.

[‡] Values represent means ± SD of OD₄₀₅ in ELISA.

[§] These are significantly different from those of unmanipulated normal mice, p < 0.05 (Student's t test).

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plus $+/+ \rightarrow lpr/lpr$ chimeras. Therefore, marked suppression of the +/+ precursors in the lpr host did not occur in our system.

Our data support the hypothesis that the lpr gene causes intrinsic defect(s) in the T cells which hyperproliferate to form massive lymphadenopathy. We cannot exclude the possibility that an additional abnormality in the lpr internal milieu or in another subset of the cells, such as macrophages, might be associated with the triggering mechanism of the lymphadenopathy (31). However, such an abnormality alone is not sufficient, and the defect(s) in the expanding cell population itself is essential for the disease. An aberrant response of lpr T cells to growth-regulation lymphokine(s), or to autocrine growth mechanisms could explain the unrestrained growth of these cells, but confirmation of these possibilities is lacking (32). From the recent molecular approaches for the lpr T cells, we can speculate that the candidate defect(s) of lpr T cells could include: enhanced expression of c-myb and c-raf oncogenes (14); defects in regulation of c-myc oncogene expression (Katagiri, K., T. Katagiri, S. Yokota, R. A. Eisenberg, P. L. Cohen, and J. Ting, submitted for publication); altered K⁺ channel expression (33); aberrant expression of surface glycoprotein and glycolipid (34); and abnormal phosphorylation of tyrosine residues of membrane protein (35; our unpublished observation). Although it is impossible to determine at this point which, if any, of these reported abnormalities are directly relevant to the *lpr* lymphoproliferation, our current data increase our confidence that the expanded, double-negative T cell population itself directly expresses the *lpr* gene defect.

Summary

The *lpr* gene induces marked lymphoproliferation characterized by the massive accumulation of T cells of an unusual phenotype and concomitant autoimmune disease. To clarify the mechanism of the lpr effect, bone marrow cells from B6*lpr/lpr* (Ly-1.2) and B6-+/+ (Ly-1.1) mice were transferred into lethally irradiated B6-lpr/lpr mice. As has been previously reported, recipients of the B6*lpr/lpr* bone marrow showed the typical *lpr* phenotype with marked lymphadenopathy, splenomegaly and increased levels of autoantibodies; while the recipients of B6-+/+ bone marrow had normal sized lymph nodes and spleen and no autoantibodies. A third group of mice received an equal mixture of bone marrow cells from the B6-lpr/lpr and B6-+/+ donors. These mice showed both lymphadenopathy and autoantibody production comparable to that of recipients of the B6-lpr/lpr marrow alone. Immunofluorocytometric analysis of the lymphoid populations in these mixed bone marrow recipients established that the T cells from the lpr/lpr and +/+ donors were equivalently represented in the peripheral blood and thymus. In striking contrast, the T cells that accumulated in abnormally large numbers in the lymph nodes were almost entirely from the *lpr* donor. Their surface phenotype was Thy-1+(dull), Ly-1.2+(dull), Lyt-2-, L3T4-, 9F3+, and $3A1^+$, which is consistent with that found in intact *lpr* mice. These results indicate that the lpr gene causes an intrinsic defect directly within the T cells that accumulate in large numbers in lpr mice. In addition, the presence of the +/+ T cells cannot prevent the expression of the *lpr* abnormalities.

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