Correlation between cytotoxic T-cell responses and graft versus host disease

E. Goulmy, E. Blokland, J. Pool, J.W. Gratama, F.E. Zwaan and J.J. van Rood. Dept. of Immunohaematology & Blood Bank and Isolation Pavilion, University Hospital Leiden, Rijnsburgerweg 10, 2333 AA LEIDEN, The Netherlands.

Transplantation antigens other than those coded for the MHC almost certainly can be considered to play a role in the success of graft exchange between HLA identical siblings. This can be concluded from the results obtained in human bone marrow transplantation.

Since cytotoxic T-cells (CTLs) may play a role in graft rejection and/or Graft-versus-Host-Disease (GvHD), we studied the appearance of CTL activity in 21 recipients after HLA genotypically identical bone marrow transplantation. Post-transplant lymphocytes from 9 out of 13 patients suffering from GvHD demonstrated CTL activity (see table), which was directed against patients pre-transplant lymphocytes.

Table	Bone-marrow recipients	anti-host	cytotoxic activity
		yes	no
	no GvHD	0	8
	GvHD	9	4
			p = 0.001

Further characterization of these 9 CTL populations revealed a series of non HLA antigens requiring one or more self class I HLA antigens in order to be recognized.

Based on our comprehensive panel analyses (using these 9 CTL populations), the most common (and hopefully the strongest immunogenic) non HLA antigens are possibly among these first series. Large scale expansion of our 9 CTL populations enables us to perform prospective donor typing when preferred for example in those cases where more than one donor is available.

For reference see: E. Goulmy, Class I restricted human cytotoxic T lymphocytes directed against minor transplantation antigens and their possible role in organ transplantation. Prog. Allergy, 1985, 36: 44-72.



· · · · ·