

Chemical biology of antigen presentation by MHC molecules

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MHC class I and MHC class II molecules present peptides to the immune system to drive proper T cell responses.

Pharmacological modulation of T-cell responses can offer treatment options for a range of immune-related diseases.

Pharmacological downregulation of MHC molecules may find application in treatment of auto-immunity and transplantation rejection while pharmacological activation of antigen presentation would support immune responses to infection and cancer. Since the cell biology of MHC class I and MHC class II antigen presentation is understood in great detail, many potential targets for manipulation have been defined over the years. Here, we discuss how antigen presentation by MHC molecules can be modulated by pharmacological agents and how chemistry can further support the study of antigen presentation in general. The chemical biology of antigen presentation by MHC molecules shows surprising options for immune modulation and the development of future therapies.

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An update on MHC class I antigen presentation

The early events: proteins for peptides

MHC class I molecules present peptides from intracellular origin to the immune system (Figure 1) [1]. Successful presentation involves a number of sequential steps, many of which can in principle be targeted by chemical compounds. The process starts with the recognition of protein substrates for degradation by proteasomes. The protein substrates can either be stable proteins at the end of their natural lifetime but they can also be misfolded or mistranslated proteins (so-called DRiPs) [2]. Many properly folded old proteins will also contribute to the MHC class I-associated peptide pool [3]. Whether cells can increase

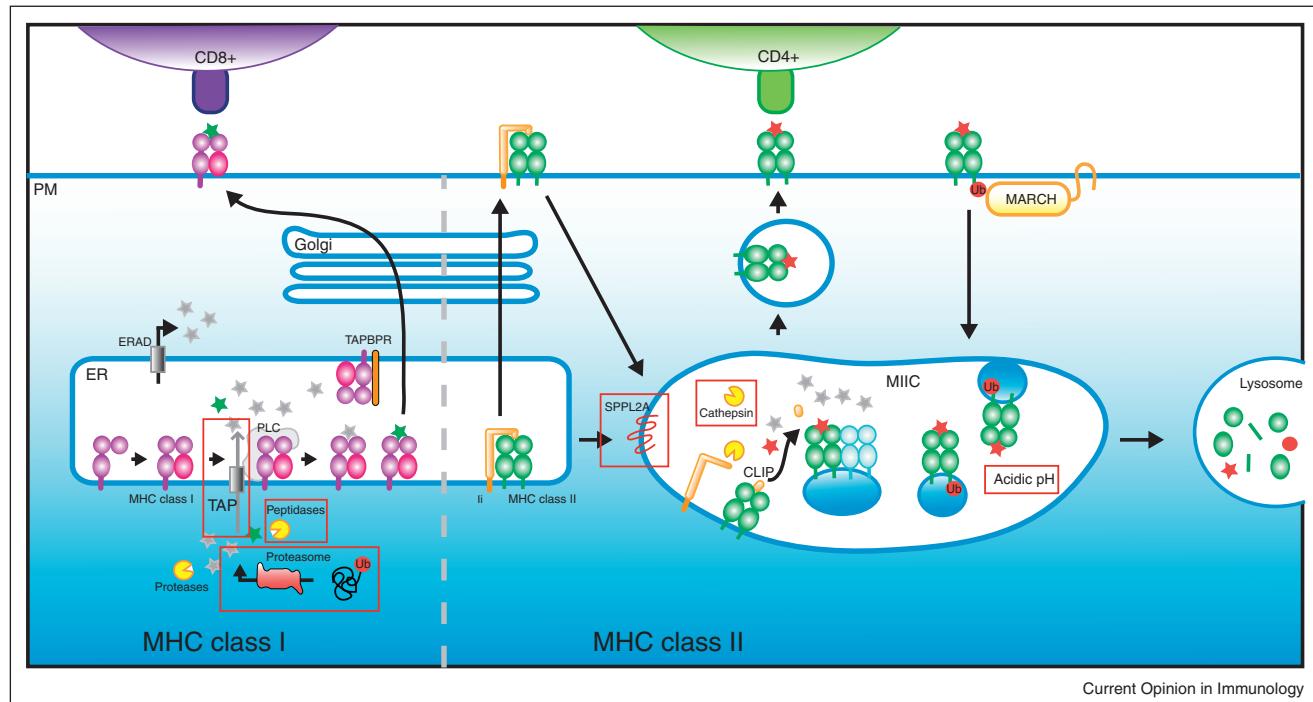
the contribution of DRiPs is unclear. Yet, an increase in the error rate of translation and folding may likely induce the contribution of DRiPs to the peptide pool for MHC class I molecules. Such conditions may include oxidation (e.g. following IFN γ exposure [4] or radiation [5]), chemical interference with folding and higher temperatures (fever) and the mode of translation from endogenous or viral templates [6]. The proteins are then degraded by the ubiquitin-proteasome system and peptides are generated. A critical role for the proteasome in peptide generation for MHC class I molecules is undisputed.

One or many proteasomes?

The substrate is unfolded by the 19S cap of one of the now three recognized forms of the proteasome; the constitutive proteasome as found in all cells, the immunoproteasome which can be induced by interferon- γ and highly expressed in immune cells and the thymoproteasome in thymic cortical epithelial cells where T cell selection occurs [7]. Three of the total 14 different 20S proteasome subunits differ between these forms and represent the proteolytically active subunits. Consequently, the fine specificity of the proteasomal digestion product differs [8]. Mice deficient in all immunoproteasome subunits lower MHC class I expression, antigen presentation and T cell responses to infection [9]. Mice deficient for the thymoproteasomal subunit β 5t have a different peptide repertoire and decreased CD8 $^{+}$ T cell repertoire against pathogens [10]. Yet, why an altered peptide repertoire by different proteasomes is essential for shaping better immune responses, is unclear. The different proteasomes may have additional functions. Immunoproteasomes, for example, seem more active and thus critical for the degradation of substrates under conditions of surplus waste following oxidative stress by IFN- γ exposure [4]. Whether this is indeed the function of immunoproteasomes is disputed [11].

The proteasome degrades proteins with a particular specificity to peptides of 3–18 amino acids [12]. During the proteolytic cleavage a reversal of proteolysis may occur resulting in the splicing and ligation of two fragments into a new peptide that is not encoded genetically [13–15]. Whether this process of chemical ligation is equally active in all cells and tissues, and whether all proteasomes (constitutive-, immuno- and thymo-) are equally efficient in this process, is unclear.

Degradation continues following the proteasome [16]. The majority of peptides generated by proteasomes will be destroyed in seconds by the set of aminopeptidases

Figure 1

Druggable nodes in the MHC class I and MHC class II antigen presentation pathways. MHC class I and MHC class II molecules are assembled in the ER. They bind peptides produced at different sites in the cell. Boxed are targets that can be druggable for manipulation of expression of MHC molecules and manipulation of the peptide repertoire. In general terms these include proteases involved in peptide generation, proteases involved in cleavage of the invariant chain and TAP.

present in the cytosol [17]. Some specialization may exist. For example, the huge protease TPPII destroys large peptide fragments [18]. Other cytosolic peptidases may be critical for generating or destroying peptides for presentation include nardilysin [19], TPPII [20], Leucine aminopeptidase (LAP) and Thimet OligoPeptidase (TOP) [21,22]. However, none of these peptidases is solely critical in antigen presentation suggesting that they collectively generate, trim or destroy peptides.

And finally... meeting MHC class I

TAP requires peptides longer than 7 amino acids (like MHC class I) but also allows transfer of peptides of over 40 amino acids in length (unlike MHC class I that usually binds peptides of around 9 amino acids and rarely longer peptides) [23,24]. Following translocation, peptides encounter TAP associated MHC class I molecules that are stabilized and kept in place by a complex consisting of two dedicated chaperones tapasin/TAP complex [25*] and one or two MHC class I molecules in complex with one protein disulfide reductase ER60 and one lectin, calreticulin. Tapasin is a classical chaperone that promotes peptide on-rates and off-rates from many (but not all) MHC class I alleles [26]. Peptides can bind directly to MHC class I in this so-called Peptide Loading Complex (PLC). Peptides that are too long for binding MHC class I

in the PLC can be further trimmed by the ER resident amino-peptidases ERAP1 and ERAP2 (ERAAP in mice) to a size proper for MHC class I molecules [27]. Various MHC class I alleles ignore the PLC yet find peptides in the ER for presentation [28]. Recently, a tapasin-related protein TAPBPR was identified that binds MHC class I molecules in the ER without involvement of the PLC and transports these toward the cell surface [29*]. How TAPBPR complements the PLC, is unclear.

Sadly, both MHC class I molecules that fail to acquire peptide cargo (which can be a substantial number), the free H chain and free peptides will be cleared from the ER lumen (β_2m is secreted) by the ERAD system [30]. This ERAD system involves recognition of the glycosylated MHC class I H chain by EDEM1 before dislocation in the cytosol to allow ubiquitination by HRD1 for degradation by proteasomes [31].

And then... the end

MHC class I-peptide combinations will usually stay at the cell surface for 4–18 h dependent on cell type. The exact molecular mechanism for this difference is unclear but may involve expression of MARCH ubiquitin ligases that modify the cytoplasmic tail of MHC class I by one or more Ub molecules for internalization and degradation in lysosomes.

somes [32]. Of note, a fraction of MHC class I can escape lysosomal destruction. They may lose peptides at the buoyant acidic pH (around pH 5.5) and then acquire a new peptide generated in endosomes for presentation at the plasma membrane [33]. This is a form of cross-presentation of peptides from exogenous antigens generated by endosomal proteases as for MHC class II.

Targets and drugs effective in MHC class I antigen presentation

With this detailed understanding of the MHC class I biology, selective targets for inhibition by compounds to modulate expression and function can be defined. In fact, this has already been exploited by nature: various viruses downregulate MHC class I to escape recognition by the immune system [34]. Many of these viral proteins inhibit TAP [35], or affect folding and degradation of MHC class. Why would inhibition of MHC class I be of interest for drug development? Downregulating MHC class I would obviously be useful to prevent transplant rejection, but also in particular auto-immune diseases such as Bechterew that is strongly linked to the MHC class I allele HLA-B27.05 [36].

Proteasome inhibitors are used in the treatment of Multiple Myeloma (MM) cancer patients. Velcade was the first inhibitor introduced in the clinic and Kyprolis, developed by Onyx pharmaceuticals was approved earlier this year. It is noteworthy that both inhibitors are so-called covalent binders (Figure 2). Covalent drugs tend to be avoided by Pharma, since side reactions are difficult to control, but these compounds may change this dogma. Both Velcade and Kyprolis target mainly β_5 and β_2 activities in proteasomes, their activities on immunoproteasomes have not been documented very well. Inhibition of all proteasome activities may not be required for proper anticancer effects (or simply lethal) [37]. More selective immunoproteasome inhibitors should have selectivity for immune cells such as dendritic cells while cells lacking immunoproteasomes would be left untouched. Thymoproteasome inhibitors may have effects of T cell selection and of interest in auto-immune diseases. Although the first immunoproteasome specific inhibitor has been reported [37], many improvements in design and selectivity are to be expected.

Cytosolic peptidases are difficult proteases to inhibit selectively, as they are mostly metalloproteases (generally inhibited by non-selective metal-ligating reagents, such as thioleucine and phenanthroline). In addition, such inhibitors may alter the peptide repertoire which may induce new auto-immune responses.

Inhibition of the **peptide transporter TAP** would selectively affect MHC class I antigen presentation. Peptides with long side chains are competitive TAP inhibitors, as they block the pore in TAP during translocation [38]. Yet

better inhibitors may be generated based on inhibitors made against ABC transporter family members of TAP, notably multidrug transporter MDR1. One such inhibitor is cyclosporine that also prevents activation of T cells. Non-immunosuppressive cyclosporins have been developed [39], but not tested for TAP-inhibition.

Finally, it may be difficult to selectively interfere with peptide loading of MHC class I molecules. But inhibiting the ER associated peptidases **ERAAP/ERAP** may be useful to trim MHC class I expression at the cell surface as apparently many peptides require a final trimming step in the ER, as concluded from genetic silencing and the inhibition of this metallo-peptidase with thioleucine [40] (Figure 2). Targeting ERAAP/ERAP may be highly relevant in the case of rheumatoid arthritis that has been linked to genetic variants of this peptidase [41•]. The first inhibitors for ERAP1 have now been developed [42,43]. How these inhibitors act in living systems is as yet unclear.

The MHC class I pathway reveals many critical enzymes and transporters that could be targeted by small compounds for regulation of MHC class I expression.

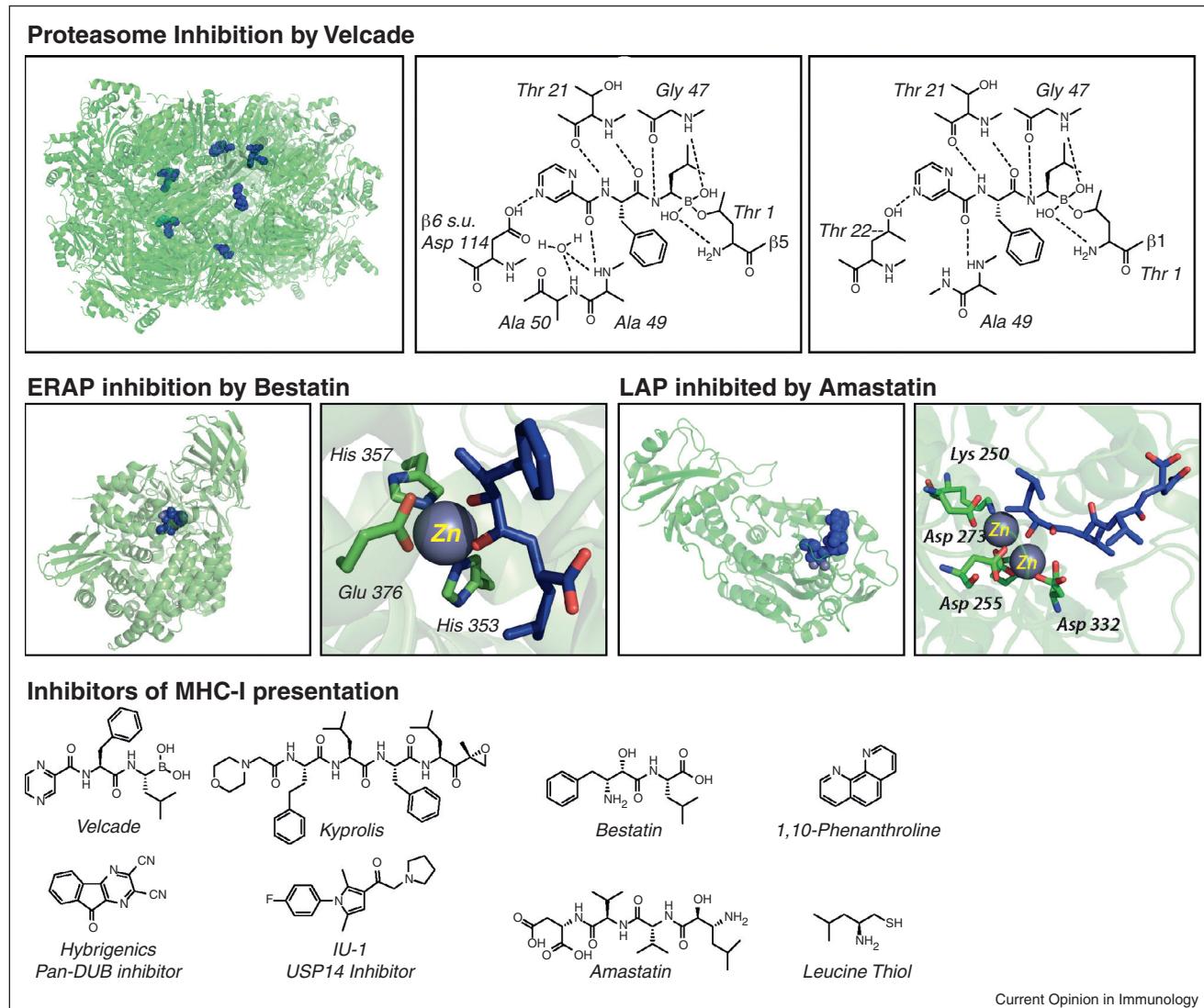
Updating MHC class II antigen presentation

The basics

MHC class II has a similar architecture as MHC class I yet they differ in tissue distribution and in the source of peptides presented that are mainly derived from proteins degraded in the endocytic pathway. Firstly, MHC class II is assembled in the ER and pairs with the invariant chain Ii. Ii then supports transport to late endosomes, generally named MIIC [44]. Here, the luminal domain of Ii is degraded by resident proteases (especially cathepsin S and L) [45] and the transmembrane part of Ii ultimately by the transmembrane protease SPPL2a [46•,47•]. Released MHC class II then associates with dedicated chaperone DM possibly on the internal vesicles within MIIC but also the limiting membrane [48,49] (Figure 1). A recent crystal structure of the MHC class II (HLA-DR1)-DM complex, shows that DM affects the beginning of the peptide-binding groove (the P1P2 pockets) and more specifically a Trp residue that is then pointing towards HLA-DM. This conformation allows efficient peptide exchange until high affinity peptides bind and occupy the P1P2 pockets in HLA-DR1. The Trp residue may then flip inwards, lock the peptide and prevent further DM interactions [50••]. This explains how a chaperone (DM) promotes the selection of ‘high affinity’ peptides by MHC class and it is likely that tapasin acts in a similar manner (tapasin and DM are both MHC look-alikes with a very similar overall structure [51]).

Some immune cells (such as immature B cells) express an additional chaperone called DO that tightly interacts with DM. In fact, DM is required for DO to leave the ER for

Figure 2



Drugs targeting the MHC-I pathway. (a) Crystal structure of proteasome inhibitor Velcade in the yeast 20S proteasome [98]. $\beta 1$ and $\beta 5$ catalytic subunits are targeted through multiple H-bonding interactions; (b) Inhibition of the metalloproteases ERAP [99] and LAP [100,101] by their inhibitors bestatin and amastatin works through ligation of cis-heteroatoms in the inhibitors with the catalytic Zn-atoms in the enzymes catalytic site; and (c) chemical structures of inhibitors of MHC class I antigen presentation, as discussed in part 2.

transport to MIIC. DO appears to act as an MHC class II molecule and the crystal structure shows it binding at the same sites to DM as MHC class II would [52^{••}]. Consequently, DO alters the MHC class II associated peptidome and quenches MHC class II antigen presentation. Yet, it may promote presentation of exogenous antigens, as deduced from mouse studies in DO-deficient mice [53]. Most auto-immune diseases are strongly associated to MHC class II alleles. DO is probably important to reduce auto-immune responses [53,54,23] but may have other surprising functions as well.

Ultimately, MHC class II is transported to the plasma membranes either via tubules emanating from MIIC [55] or by direct fusion of MIIC to the plasma membrane [56]. Whether this involves some sort of quality control system allowing only proper MHC class II to leave MIIC, is unclear as such a system is unknown in the endosomal pathway.

Controlling MHC class II transport

MHC class II export from MIIC can be controlled as exemplified for macrophages exposed to IL-10 and maturing DC. IL-10 quenches MHC transport to the

plasma membrane of human monocytes and thus reduces immune responses [57].

Dendritic cells (DC) strongly upregulate MHC class II expression at the plasma membrane following maturation. This is the result of induced transport of MHC class II from MIIC to the plasma membrane and – at the same time – a strongly increased half-life at the cell surface [58]. A recent siRNA screen identified many factors controlling MHC class II biology [23]. This screen integrated expression arrays, microscopy and flow cytometry to predict proteins involved in controlling the MHC class II redistribution in maturing DC. Nine proteins were identified that – when silenced in immature DC – produced a MHC class II distribution as seen in mature DC. One pathway was particularly well resolved. The GTPase Arl14/ARF7 on MIIC interacts with effector ARF7EP that coupled to actin-binding protein Myo1e to control transport of MIIC in DC. Myo1e is a ‘single-leg’ actin binding motor that does not move but attach cargo to actin. The pathway then shows how MIIC is retained by a mechanism attaching these vesicles to actin thus preventing transport to the cell surface. Loss of this retention mechanism yields immature DC with a mature MHC class II phenotype, as MHC class II is now mostly at the cell surface [23].

The end

Once at the cell surface, MHC class II may display remarkably different half-lives, and is strongly increased following differentiation of mature DC. This coincides with high cell surface expression of MHC class II and prolonged presentation of antigen. The transmembrane E3 ubiquitin-ligase MARCH-1 controls the cell surface half-life of MHC class II in DC. MARCH-1 ubiquitinates MHC class II for internalization and degradation (Figure 1) [59]. Immature DC in MARCH-1 deficient mice present with stable and higher MHC class II levels [60,61]. However, MARCH-1 also locates to MIIC [62] and may have other effects on MHC class II biology since engineered mice with MHC class II mutations to prevent ubiquitination show normal antigen presentation responses [63].

Targets for pharmacological modulation of MHC class II antigen presentation

As MHC class II is strongly associated to almost all autoimmune diseases, pharmacological modulation to control expression may have direct application in these diseases. Surprisingly, peptides from denatured protein (fragments) may be presented differently than those derived from intact antigen and then contribute to autoimmunity [64]. Controlling this may also yield solutions for autoimmune diseases. The current understanding of the MHC class II pathway also reveals some druggable targets (Figure 1). These include the proteases involved in the destruction of Ii (cathepsin S, cathepsin L, AEP [65] and SPPL2a [46[•],66[•],67]). Endosomal proteases involved in specific generation of disease-associated peptides may be targeted

[68,69]. Also, endosomal enzymes involved in the preparation of antigens for destruction are drug targets. This includes GILT, a gamma interferon-inducible lysosomal thiolreductase that controls responses to dust mite allergens [70] and auto-immune responses against Trp1[71]. This may be a reasonable target as GILT-deficient mice are fully viable (yet poor in cross-presentation) [72].

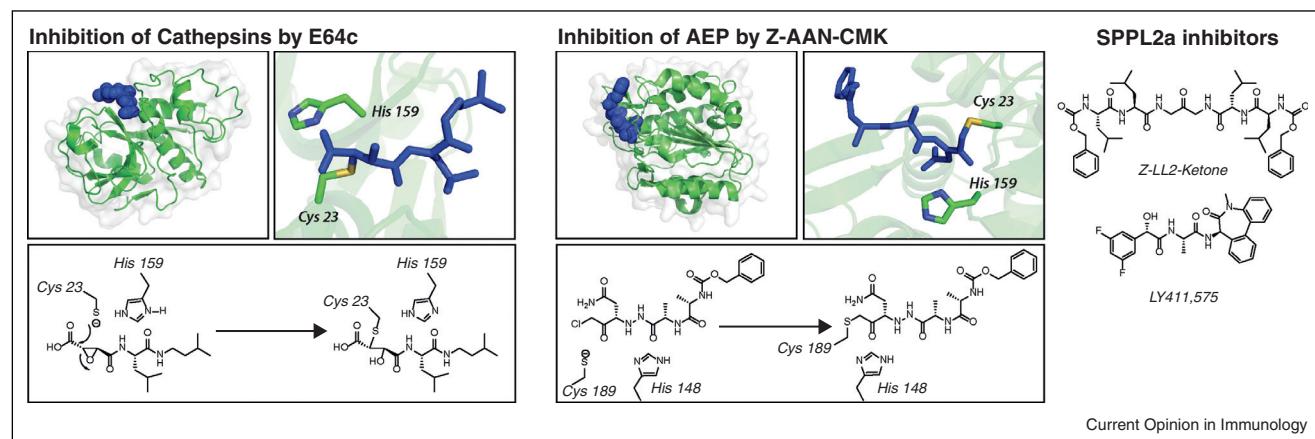
Are there more options for defining druggable targets that control MHC class II? The genome-wide siRNA screen for factors controlling MHC class II expression and peptide loading revealed 287 with about 140 proteins with unknown function [23]. These include many druggable proteins. The quest is to define inhibitors with sufficient specificity, selectivity and *in vivo* activity to manipulate MHC class II responses without serious side effects for application in auto-immune diseases like MS, T1D and Coeliac disease that all have strong links to MHC class II alleles.

Small molecule modulation of MHC class II antigen presentation

Modulating endosomal homeostasis or specific endosomal proteases can alter MHC class II antigen presentation [73]. Chloroquine (inhibits lysosomal acidification [74]) and the general cysteine protease inhibitor leupeptin [75] both inhibit MHC class II antigen presentation albeit fairly unspecific (for structures and mode of inhibition; Figure 3). Selective inhibitors of cathepsin S interfere with processing of Ii [76] and reduced presentation of auto-antigens [77]. These inhibitors are in clinical trials for treatment of auto-immune disorders [78,79]. Other proteases may merely affect processing of antigens. Inhibitors of aspartyl proteases and AEP [65] can alter the presentation of defined epitopes [68,69]. These studies illustrate the complexity of protease inhibition to manipulate MHC class II: Inhibiting proteases may both prevent epitope generation and induce the generation of other epitopes that trigger (different) self-reactive T cells and then induce auto-immune responses.

In addition, endosomal proteases act in a network [80]. They are required for removal of propeptides to activate other proteases and inhibiting one protease then affects the activity levels of other endosomal proteins. For example, cathepsin S regulates the activity of cathepsin L and the turnover of GILT [81]. But GILT then regulates the degradation of cathepsin S. Highly specific single-protease inhibitors may thus have broad effects on endo-lysosomal protease activities [82]. Broad cathepsin-specific inhibitors have been developed that affect endosomal destruction of EGF-receptor. The effects on MHC class II are unknown [83].

Another protease-target may be SPPL2a that cleaves the last fragment of Ii before allowing peptide loading of MHC class II [66[•],67,84]. Selective inhibitors of SPPL2a

Figure 3

Mechanisms of some endosomal protease inhibitors. **(a)** Crystal structure of the cathepsin inhibitor E64c in complex with papain, the archetypal cysteine protease and the mechanism of inhibition [102]; **(b)** crystal structure of AEP in complex with a Z-AAN-CMK inhibitor and the mechanism of inhibition [103]; and **(c)** reported SPP inhibitors [67] that may be a start-point for further development of more selective SPPL2a inhibitors.

and b have not been reported, but general inhibitors of multimembrane aspartyl proteases, such as LY411575 [85] and zLL2k (initially reported as a γ -secretase but also an SPPL2 inhibitor) [67,86] can inhibit the final stages of Ii processing. These compounds can be the basis for more selective SPPL2a inhibitors.

Further targets in the MHC class II pathway are endolysosomal enzymes that post-translationally edit peptide epitopes. For example, the major collagen epitope in rheumatoid arthritis is hydroxylated and glycosylated at lysine residues. In rheumatoid arthritis, these appear to be deglycosylated [87]. The responsible glycosidase is an interesting target for rheumatoid arthritis treatment [88]. Other post-translational modifications on antigenic peptides (citrullination, tyrosine nitration) also yield neo-epitopes that can induce auto-immunity. Citrullinated peptides are detected by T cells in rheumatoid arthritis patients [89].

Chemistry for innovative vaccines

With the recent drive to the development of more effective vaccines, chemical synthesis and characterization is essential in their rational design. Results in the form of long peptide vaccines and synthetic TLR ligands are only illustrations of chemical options. Fully synthetic glycopptide tumor vaccines are generated [90]. TLR-ligands are conjugated to peptides for combining innate signaling and antigen to the same endosome in the same DC. Such conjugates can induce robust immune responses [91–93].

The design of vaccines has relied so far on immunization with either inactivated live strains or components thereof. Vaccination has made an enormous contribution to mankind. Chemical modification of MHC presented antigenic

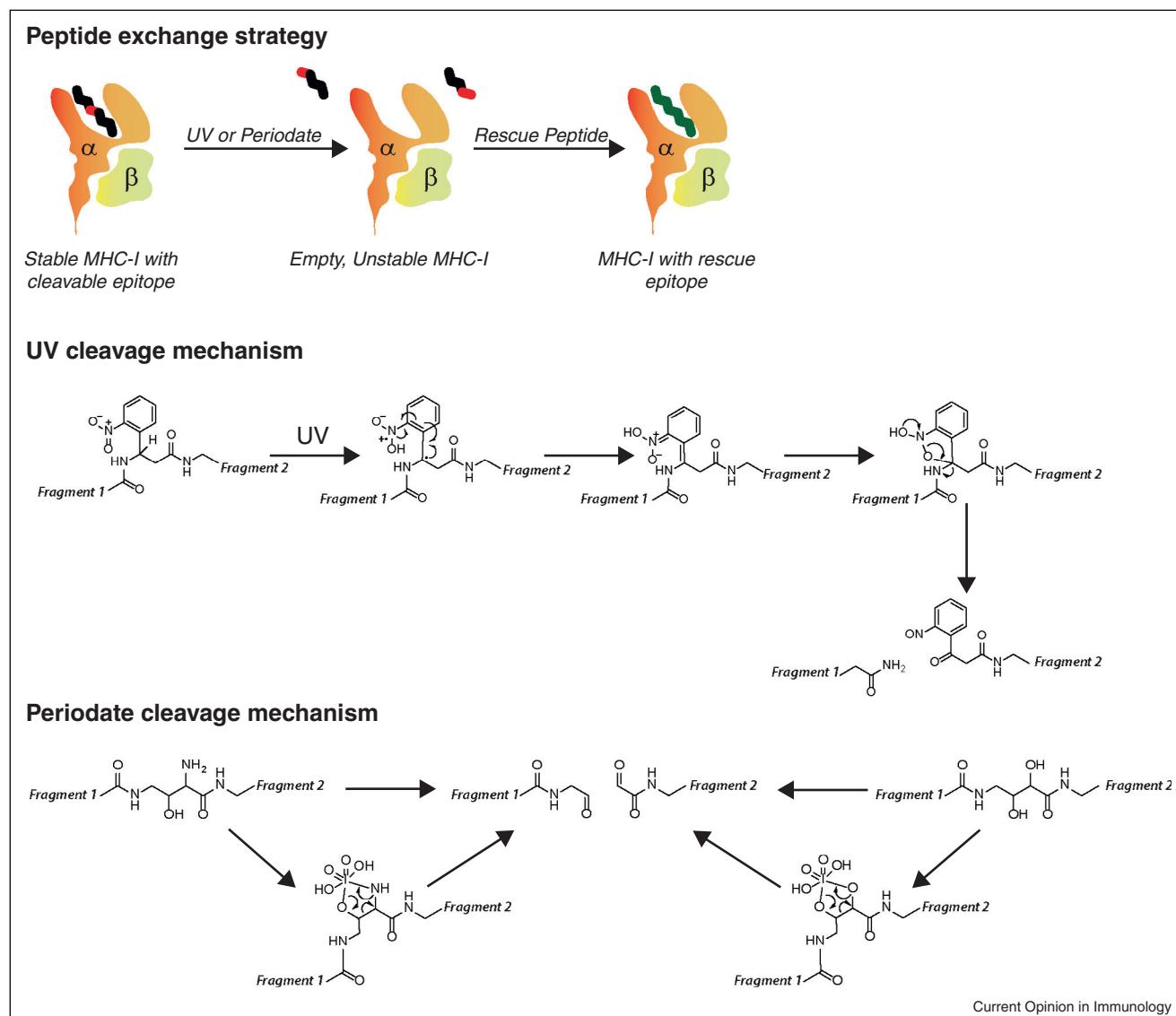
peptides may provide a future entry to peptide-based formulations that provide safe and long-lasting immune responses [94] against cancer and infection diseases.

What chemistry can do for immunologists: new chemical tools

An enormous number of reagents used by immunologists during culturing and measuring immune responses are the result of a serious chemistry activity. F-moc chemistry to produce peptides is one such example. These peptides are used to induce immune responses but also to load *in vitro* folded MHC molecules to form tetramers for monitoring T cell responses. However, a tetramer for each and every different peptide has to be produced. Chemists generated peptides with UV and (later) chemical unstable linkages [95,96] (Figure 4). Tetramers with these peptides can be exposed to UV or periodate in the presence of peptides of choice. The tetramer-associated peptide will be split and dissociates to be replaced by the exogenous peptide. This allows the generation of one peptide-tetramer batch for loading with any peptide of choice. This allowed combinatorial coding of broad T cell responses by tetramers [97].

What immunologists can do for chemists and chemists for immunologists

There is probably no field beyond immunology where molecules of a different nature have a biological impact. Many unique molecules are produced by the various pathogens to which the host immune system responds. These can provide inspiration to bio-organic chemists to synthesize and combine bioactive structures evolved in the battle between host and pathogen. Such molecules may provide options for radically new drug design with applications in immuno-modulation and improved and

Figure 4

Peptide exchange in MHC-tetramers. Peptide exchange in MHC-tetramers. (a) MHC-I complexes can be folded with a single cleavable peptide. Treatment with periodate or UV-light will result in cleavage of this starter epitope into two low affinity fragments that can be displaced by a ‘rescue’-peptide [104,105]. This approach allows for the rapid generation of libraries of MHC-peptide complexes; and (b) the chemistries available are based on ortho-nitrophenyl sidechains, which cleave upon UV-treatment or are based on cis-diols [106] or cis hydroxylamines [107], which can be cleaved upon treatment with periodate via the mechanisms shown.

innovative vaccines. Organic chemistry will be essential to arrive at such compounds, not only for therapy but also for diagnostics. Diagnostic imaging with novel fluorophores and reading immune response using MHC or TCR tetramers are just examples of these. Many of the examples outlined above, have been the results of interactions between the fields of immunology and bioorganic chemistry. Although they have different language, an accepted Esperanto seems nearby. To make the next steps towards new drugs, new immunotherapies, new imaging techniques, better arraying options and more,

immunology and chemistry communities should embrace each other’s worlds.

Concluding remarks: a bright future for chemical immunology

Chemical immunology is an upcoming field with no representation at significant Immunology or Chemistry meetings. Yet, the power of chemical tools and bioactive small molecules in the immunology field is undisputed as is the width of immunology as an inspiration for organic chemistry. The current scientific climate promotes

translational research and chemistry is essential to arrive at bioactive compounds to modulate immune responses. New molecules always yielded new biology and it may be anticipated that chemical immunology will generate both better understanding and manipulating of immunological processes such as antigen presentation by MHC molecules.

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