

キチン化が消失し、c-SMACが低形成となった。負の選択を誘導する高親和性ペプチド刺激でもc-SMACは形成されず、TCRには活性化したシグナル分子が共局在していた。

【結論・考察】 選択前DP胸腺T細胞におけるTCRのインターナリゼーションは、c-Cblが責任分子でK63ポリユビキチン化を介して誘導していると考えられた。負の選択を誘導する高親和性ペプチド刺激でもc-Cbl欠損によるTCRの取り込み低下によりc-SMACは低形成となりTCRシグナルが持続していた。負の選択では一過性の強いTCRシグナルが、正の選択では弱いTCRシグナル持続していると考えられており、c-Cbl欠損によるこのTCRシグナルの持続により胸腺選択がどう変化するのか、OT-I Tg Cbl^{-/-}選択前DP胸腺細胞を用いて検討中である。

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Differences in cytokine and chemokine levels among various diseases and between serum and plasma samples

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【Introduction】 The measurement of cytokines and chemokines play a large role in elucidation of the pathology of autoinflammatory and immune diseases. Although at present, cytokine and chemokine levels are measured using multiplex immunoassays, there has not been much discussion about the differences in results between plasma and serum samples. Therefore, in this study, we compared the results of cytokine and chemokine levels measured in blood serum and plasma samples.

【Subjects and Methods】 The following patients (15 in total) were analyzed: 4 patients with periodic fever, 2 patients with acute encephalopathy, and patient each with aphthous stomatitis, pharyngitis and adenitis, Familial mediterranean fever, Crohn's disease, scleroderma, Juvenile idiopathic arthritis, West syndrome, lissencephaly, norovirus infection, Positive occipital sharp

transients of sleep, and food allergy. At the time of blood collection, both plasma and serum with EDTA-2Na were collected. Measurements were performed using the 27-plex Human Cytokine Assay from Biorad.

【Results】 Levels of PDGF, G-CSF, IL-1 β , IL-1ra, IL-8, IL17, and MIP-1 α , and MIP-1 β were found to be different between serum and plasma.

【Discussion】 We demonstrated that patients with periodic fever, aphthous stomatitis, pharyngitis, adenitis, and FMF have high serum and plasma levels of various chemokines and cytokines compared with patients with other diseases. These results suggest the possibility of platelet function and macrophage involvement in the pathology of PFAPA and FMF.

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Molecular imaging of the hCD19 CAR signalosomes, "CAR microclusters"

(免疫学)

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CAR-T cell therapy is certainly one of the recent remarkable advantages in tumor immunotherapy. Human CD19 CAR is particularly shown to possess anti-tumor effects against CD19-positive B cell lymphomas and already applied for clinical use in the United States. In comparison with its worthwhile evaluation, little is known about the molecular mechanisms how CAR introduces the activation signaling by T cells to kill the target cells and to develop into effector/memory CAR-T cells. To address these issues, we newly established hCD19 CAR imaging system by the combination of single molecule-based total internal reflection fluorescence microscopy (TIRFM) and hCD19-expressing lipid bilayers. We've really defined the distinct signalosomes, we-called "microclusters", and demonstrated that T cell activation is harmoniously regulated by microclusters constructed by not only TCRs but also immune checkpoint receptors in a spatio-temporal fashion. We this time identified "hCD19 CAR microclusters" by using that new imaging technique and