A First or Dominant Immunization. II. Induced Immunoglobulin Carries Transforming Growth Factor β and Suppresses Cytolytic T Cell Responses to Unrelated Alloantigens

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Summary

Fresh sera from mice immunized by bearing an immunogenic tumor or by repeated injections of allogeneic spleen cells or xenogeneic erythrocytes powerfully suppress cytolytic T cell responses in one-way mixed lymphocyte cultures. Suppression is not antigen specific, though is mediated by immunoglobulin (Ig)G specific for the immunizing antigen. Suppression caused by IgG mimics that caused by active transforming growth factor β (TGF- β). IgG associates with or carries latent TGF- β ; however, suppression caused by the complex of IgG-TGF- β requires macrophages (M ϕ), whereas active TGF- β alone does not. Also, IgG dissociated from TGF- β does not cause suppression, suggesting that M ϕ may take up Ig-TGF- β , process the complex, and deliver active TGF- β to lymphocytes. Indeed, suppression by immune serum was prevented by antibody to Fc receptors, by saturating Fc receptors with heterologous IgGs, and by antibodies against TGF- β . The overall findings reveal a previously unrecognized regulatory circuit whereby IgG produced in response to one antigen nonspecifically downregulates cytolytic T lymphocyte responses to unrelated antigens. The findings introduce the intriguing possibility that TGF- β delivered by IgG and processed by M ϕ may mediate important biological effects in processes such as wound healing, tumor growth, and some autoimmune diseases.

A prior or dominant immunization of mice with one antigen abolished CD8+ cytolytic T lymphocyte (CTL)¹ responses to a second unrelated antigen given simultaneously (1). Suppression became systemic and could be transferred passively to normal mice by fresh immune serum alone. In the present experiments, fresh serum from such immunized mice in high dilution abolished CTL responses in one-way MLC, presumably in a way analogous to that occurring in vivo. The following experiments were designed to determine the nature of the serum components and the cells responsible for suppression of CTL in MLC.

Materials and Methods

Mice and Cell Lines. Donors of sera and lymphoid cells were C3H (H2^k) female mouse mammary tumor virus-negative (MTV⁻) pathogen-free mice 8-12 wk old and housed in a barrier facility; donors of allogeneic cells were BALB/C (H2^b) female mice also pathogen free and housed in a barrier facility. C3H SCID mice purchased from Imdyne (San Diego, CA) were Pneumocystis

¹Abbreviations used in this paper: AD^- , nonadherent cells; α Ser, sera from immune mice; CTL, cytolytic T lymphocytes; DC, dendritic cells; HRBC, horse red blood cells; $M\phi$, macrophages; NMS, normal mouse serum.

carinii free and housed similarly. Tumor targets for measuring CTL in MLC were P815 (H-2^d) cells (see accompanying manuscript [1] for details).

Immunizations and Murine Sera. C3H mice under light ether anesthesia were injected in hind foot pads with 0.05 ml of 5% (vol cells/vol diluent) cell suspension of washed sheep or horse erythrocytes (SRBC or HRBC); injections were repeated every other day four to six times; mice were bled 1 or 2 d after the last injection; i.e., 7-12 d after injections began. Sera from immune mice (α Ser) were pooled from three or four identically injected mice and used within 72 h unless noted otherwise. Normal mouse sera (NMS) were obtained from nonimmunized mice of the same age and housed identically. NMS and a Ser were either untreated (Table 1, Exps. 1 and 2) or diluted 1:10 in RPMI and separated into <100- and >100-kD fractions by filtration/centrifugation using Centricon Microconcentrators (Amicon, Beverly, MA) for Exp. 3 (Table 1) and all subsequent experiments. Both the <100- and >100-kD fractions were reconstituted to the same volume as the sample before fractionation and were considered to be at a dilution of 1:10.

Lymphocytes, Nonadherent Cells (Ad⁻), Dendritic Cells, and Cells without Macrophages. Popliteal lymph node or spleen cells were dispersed and washed in complete medium; debris and aggregates were removed by gravity sedimentation. Ad⁻ were incubated twice for 60 min with carbonyl iron (10⁸ cells/10 ml medium/2 gm carbonyl iron); \sim 95% of macrophages (M ϕ) and dendritic cells (DC) are removed by this procedure. Cells highly enriched for DC

were obtained from cells that adhere to plastic culture plates (10^8 cells/10 ml medium/10-cm culture plates) in an initial 2-h incubation; nonadherent cells were removed and the volume restored. Most DC detach during an additional 18-22-h incubation while most M ϕ remain adherent; $\sim 2 \times 10^5$ detached cells are usually recovered per 10^8 spleen cells and 60-80% of these cells are DC with most of the contaminating cells consisting of M ϕ . Ad $^-$ cells do not respond in MLC unless restored by adding DC, $\sim 3 \times 10^4$ DC/ 5×10^5 responding lymphocytes being optimal.

MLC and Assay for Cytolytic T Cells. MLC were 5 × 10⁵ C3H (H2k) normal spleen cells and 5 × 105 normal, irradiated (2,000 rad) BALB/c (H2d) spleen cells per well of 96-well flat-bottomed tissue culture plates (2). Cells were suspended in 100 μ l of complete medium, which was: RPMI 1640 with 25 mM Hepes supplemented with 2 mM 1-glutamine, 1 mM sodium pyruvate, 0.1 mM nonessential amino acids, 5 × 10⁻⁵ M 2-ME, and 10% FCS; 50 U penicillin and 50 μ g of streptomycin were added per 100 ml of medium. 100 µl of supplemented RPMI 1640 without FCS was added to each culture; this addition was either medium alone for control cultures or contained agents such as IgGs, TGF- β , etc. Thus, the final concentration of FCS was 5%, and concentrations or dilutions of each additional agent are recorded per milliliter of the final 200 µl of culture medium. Cultures were incubated 4 or 5 d at 37°C, 5% CO₂, and 100% humidity. Controls were six or eight replicate cultures to which medium alone was added; each variable was tested in duplicate or triplicate cultures. Viable cell recovery was equivalent (less than twofold difference) in control and variously treated cultures. One-half of each culture (E/T cell ratio of ~50:1) and seven additional double dilutions of each culture were assayed separately against 51Cr-labeled P815 (H2d) target cells using 4-h 51Cr release assay (2); each culture was assayed separately so that results are means for six to eight cultures containing medium only and two or three cultures for each variable tested. For convenience for comparing control and variously treated cultures, results are reported for only three fourfold dilutions or fractions of cultures assayed. Because the slopes of curves for lysis caused by different dilutions of cells from test and control cultures are rarely parallel, we have no adequate way for statistical analysis of differences. Also, for this reason, it is not strictly appropriate to convert results to lytic units, although we have done this to make comparing gross differences easier. For this purpose, a lytic unit is arbitrarily defined as the reciprocal of the fraction of identical cultures, rounded to the nearest 10, causing 30% lysis of labeled target cells. We only emphasize differences between test and control cultures greater than fourfold whether indicated by comparing lysis at different fractions of culture or by lytic units. Furthermore, all of the differences of this magnitude reported have been confirmed in two or more additional experiments, which are not reported. Treating responder cells before culture or treating cells harvested from MLC after 4 or 5 d incubation with anti-CD8 antibody and complement abolishes CTL activated in this culture system (2).

Secretion and Assay for TGF- β . Lymphoid cells or a murine cell line designated 7.63, originally designated 1591-N-TGF-1, transfected to secrete murine latent TGF- β 1 (3) were cultured in 5 × 10⁵ cells/ml of MEM containing 0.1% FCS at 37°C, 7.5% CO₂, and 100% humidity for 48 h. The medium alone contained <0.01 ng active and <0.1 ng total TGF- β /ml. Supernatants were assayed without treatment to measure active TGF- β , and after acidification at pH 2.0 for 30 min, to measure total TGF- β . Secretion is recorded as ng/10⁶ cells per 24 h using an assay dependent on inhibition of proliferation of cells from a line of mink lung "epithelial-like" cells, designated MvlLu (4). TGF- β is secreted as a latent complex

of \sim 110 kD; only the cleaved active 25-kD homodimer binds receptors or is bound by the anti-TGF- β antibodies we have. The assay does not discriminate between different isoforms of TGF- β , but neutralization of suppression by antibodies to TGF- β confirms that suppression is mediated by TGF- β , and antibodies relatively specific for different isoforms can indicate the form of active TGF- β in a preparation using the Mv1Lu assay.

Antibody Titers. Sera were serially double diluted in PBS containing 0.5% BSA in 96-well V-bottomed plates. For agglutinin titers, each well contained 50 µl of diluted serum and 50 µl of 0.05% RBC; for hemolysin titers, each well contained an additional 50 µl guinea pig complement absorbed with SRBC and HRBC and diluted 1:20 in PBS; each sample was titered in duplicate for both agglutinin and hemolysin titers. Plates were incubated 1 h at 37°C and overnight at 5°C. Titers were read using a magnification of 3. The antibody titers are reported as the reciprocal of the highest serum dilution that caused gross agglutination or complete hemolysis of erythrocytes; duplicate titers did not vary more than one double dilution. Hemolysin titers are not reported separately but were equal to or one double dilution lower than agglutinin titers.

Reagents. Murine TGF- β 1 was the supranatant of a murine tumor cell line transfected with cDNA for murine TGF-\(\beta\)1, designated 7.63; the supranatant contains \sim 10 ng/ml of TGF- β after acid activation and virtually no active TGF- β without acid treatment. Because both latent and active TGF- β adhere to plastic, all samples are processed and stored in plasticware preincubated with 1% BSA in saline. The total amount of TGF- β in such samples is stable during storage for many months. The following reagents were purchased: porcine TGF-β1 (pTGFβ) (lot no. BO60; R & D Systems, Minneapolis, MN); monoclonal mouse anti-TGF- β 2, β 3 (lot no. B1674; Genzyme, Cambridge, MA); TGF-β neutralization antibody, primarily for TGF\$1 (Chicken) (lot no. W247; R & D Systems); normal chicken IgY (endotoxin free) (lot no. U142; R & D Systems). Anti-Fc receptor antibody (rat anti-mouse monoclonal FcR, designated 2.4G2) was a gift of Dr. J. Quintans (University of Chicago); the supranatant and rat control Ig were preincubated with responding lymphocytes for 30 min before stimulator cells and immune sera were added to culture. Murine (m)IgG chromatographically purified were purchased from Cappel, Organon Teknika Corp. (Durham, NC); and from Zymed Laboratories, Inc. (San Francisco, CA). Preparations of mIgs contained 0.05% Na azide, which was removed by repeated high dilution and reconcentrating using Centricon 3 microconcentrators. Affinity-purified goat antibody to mouse Ig (IgG, IgA, IgM) was purchased from Cappel, Organon Teknika Corp. Rabbit IgG was affinity-isolated antigenspecific antibody against horse spleen ferritin (Sigma Chemical Co., St. Louis, MO). Sterile sheep and horse blood in Alsever's solution was purchased from Environmental Diagnostics (Burlington, NC), and was used within 6 wk.

Absorptions of Sera. Sera were absorbed on Protein A-Sepharose[®]
4 Fast Flow (Pharmacia Fine Chemicals, Piscataway, NJ); on protein G using MabIrap™ G and HiTrap™ G (Pharmacia LKB Biotechnology, Uppsala, Sweden), and on affinity-purified goat antibody to murine Ig (IgG, IgA, IgM) coupled to CN-Br Sepharose 4B (Pharmacia Fine Chemicals), 1 mg antibody/ml of Sepharose beads. Sera, diluted 1:10 in 0.2 M Na₂PO₄ and beads (vol/vol), were constantly mixed for 75 min at 20°C. The supranatants obtained after centrifugation and filtration were dialyzed against medium overnight. For absorption on heterologous erythrocytes, sera were diluted 1:25 in medium and absorbed (vol/vol) with packed erythrocytes for 10 min at 5°C with frequent mixing. The supranatant was obtained by centrifugation and the procedure was repeated.

Results

Immune Sera Abolish CTL Responses in MLC. We observed repeatedly that fresh NMS added to MLC at final dilution in culture of 1:50-100 had no significant effect on CTL responses; in contrast, fresh immune sera (α Ser) at these or higher dilutions abolished CTL responses. In different experiments a Ser were from: (a) mice bearing immunogenic tumors that had grown for 2 or 3 wk or were from mice that had recently rejected such tumors; or (b) mice bled 1-3 d after receiving three or more injections of allogeneic spleen cells or xenogeneic erythrocytes given every 2 or 3 d. These observations were confirmed in a single experiment (Table 1, Exp. 1). We found repeatedly, as in Table 1, Exp. 1, that αSer raised against xenogeneic erythrocytes were usually suppressive at higher dilutions than were sera from mice immunized by tumors or allogeneic spleen cells. Partially for this reason, but also for convenience for presenting data, we

report in the following experiments only results using sera from C3H mice immunized with xenogeneic erythrocytes, though the essential findings have been confirmed using sera from C3H mice immunized in these other ways and sera from two other strains of mice immunized with xenogeneic erythrocytes.

Blood was as suppressive as serum (Table 1, Exp. 2), indicating that the process of clotting does not activate or generate factors responsible for suppression. For this experiment, 0.1 ml of heart blood from a single normal or immune (five injections of SRBC) mouse was added directly to 4.9 ml of culture medium and cells were immediately removed by centrifugation. Serum was prepared from the remaining heart blood obtained from the same mice after allowing clot retraction to occur at room temperature for 90 min. The experiment included blood and sera from a mouse injected identi-

Table 1. Suppression of CTL Responses in MLC by Immune Sera

				Cyto	toxicity	
				Percent 51Cr relea	ase	
Exp.	Addition*	Dilution	1/8‡	1/32	1/128	Lytic units
1	Medium	-	88	75	44	256
	NMS	1:100	81	70	34	256
	TBA Ser.	1:100	34	16	4	8
	α C57 Ser.	1:100	23	10	3	8
	lphaSheep Ser.	1:300	27	11	2	8
2	Medium	-	100	90	59	512
	Normal blood	1:900	97	68	44	512
	lphaSheep blood	1:900	18	19	10	8
	lphaSheep Ser.	1:900	5	5	12	<1
3	Medium	~	80	59	23	128
	NMS	1:600	86	26	40	128
	lphaSheep Ser.	1:600	1	0	2	<1
	SCID Ser.	1:200	77	76	28	128
	SCID "αSheep Ser."	1:200	86	83	43	128
4	Medium	-	89	78	48	256
	lphaSheep Ser.	1:300	1	0	0	<1
	α Sheep >100 kD	1:300	1	0	0	<1
	αSheep <100 kD	1:300	96	92	68	>512

^{*} In Exp. 1, TBA ser. was a pool from three C3H mice bearing immunogenic tumors, designated PRO4L, that had grown progressively for 3 wk and were ~1.5 cm in diameter. αC57 ser. was a pool from three C3H mice each injected in foot pads with 10⁷ C57 spleen cells three times every 2 d and bled 1 d after the final injection. αSheep Ser. was from mice injected identically with 10⁸ SRBC and bled at the same time as mice receiving allogeneic cells. See text for Exps. 3 and 4. Sera were unfractionated in Exps. 1, 2, and 3. ‡Fraction of culture.

cally with HRBC; results were virtually the same as those for immune anti-sheep blood and serum (data not shown). Fresh serum from SCID mice, whether untreated or injected repeatedly with SRBC as in Exp. 2, caused no suppression (Table 1, Exp. 3), suggesting that suppression was most likely due to a product of an immune response.

In a single trial all suppressive activity of an α Ser fractionated by gel filtration was recovered in fractions of >70 kD. In repeated trials all suppressive activity of different pools of α Ser was recovered in the >100-kD fraction obtained by filtration/centrifugation (Table 1, Exp. 4), and as in that experiment the <100-kD fraction usually stimulated responses two- to fourfold. To reduce complications caused by components in sera that may have contrary effects in MLC, all sera for the following experiments were separated by filtration/centrifugation and only the >100-kD fractions were used, except as noted.

We observed repeatedly that sera from mice injected with antigen five or six times were more suppressive than sera from mice injected three or four times, and that suppressive activity of sera was often lost or decreased by more than a three-fold dilution when stored for 1 wk or more at 5 or -20°C, though we have not assessed these variables systematically. To avoid such problems α Ser were used within 48 h of bleeding in each of the following experiments, and each serum tested

was the >100-kD fraction of serum pooled from three or more mice injected five or six times with xenogeneic erythrocytes and bled 1 or 2 d after the last injection. We have found subsequently that the >100-kD fraction of α Ser stored at -80° C retains full suppressive activity for at least 6 wk. In each of the following experiments, α Ser and each of the variables were tested at two or usually three threefold serial dilutions; we report results for only the highest serum dilution, which caused \geq 10-fold suppression of CTL responses.

IgG Specific for the Immunizing Antigen Causes Suppres-As shown in Table 2, Exps. 1 and 2, α Ser absorbed on protein A, protein G, or goat anti-murine Ig coupled to Sepharose no longer caused suppression. Protein A and protein G bind predominantly IgG whereas the goat anti-murine Ig should remove all isotypes. Indeed, considerable anti-SRBC antibody (IgM and IgA identified by ELISA; data not presented) remained after absorption on protein A or protein G, but not after absorption on the goat anti-murine Ig. In recently completed experiments, absorption of α Ser on goat anti-murine IgG coupled to Sepharose was as effective in removing all suppressive activity as absorption on goat anti-murine Ig (IgM, G, A), though absorption on α IgG did not remove all specific anti-RBC antibody, whereas absorption on α Ig did. Absorption of α Ser on goat anti-murine IgM coupled to Sepharose reduced antibody titers four-

Table 2. Absorption and Elution of Ig Causing Suppression

			Cytotoxicity					
			Percent 51Cr release				Antibody titer	
Exp.	Additions to cultures*	Absorption on:	1/8‡	1/32	1/128	Lytic units	αSheep	αHorse
1	Medium	_	82	72	32	128	_	
	lphaSheep Ser.	_	2	3	0	4	960	-
	αSheep Ser.	Protein A	81	74	34	128	240	-
	lphaSheep Ser.	lpham $f I$ g	82	71	39	128	0	-
2	Medium	-	62	25	7	32	_	•
	αSheep Ser.	-	14	2	1	<1	1,280	-
	αSheep Ser.	Protein G	71	30	9	32	400	-
3	Medium	-	84	65	23	128	-	
	αSheep Ser.	_	0	1	1	<1	1,600	0
	αSheep Ser.	SRBC	76	53	23	128	0	0
	lphaSheep Ser.	HRBC	2	3	4	<1	800	0
4	Medium	-	100	87	62	256	-	-
	αHorse Ser.	-	8	12	6	<1	0	3,200
	αHorse Ser.	SRBC	27	16	0	8	0	3,200
	αHorse Ser.	HRBC	87	50	30	128	0	0

^{*} All sera were >100-kD fractions tested at dilutions of 1:300 (Exps. 1 and 2) and 1:200 (Exps. 3 and 4); absorbed samples were tested at the same dilutions as the unabsorbed samples.

[‡]Fraction of culture.

to eightfold, but did not reduce suppressive activity of sera. Absorptions of immune or normal sera on goat IgG coupled to Sepharose or on Sepharose alone did not alter antibody titers, increase CTL responses, or alter the capacity of α Ser to suppress, indicating that absorptions did not introduce extraneous factors that might affect cultures. It was unlikely that suppression was due to IgE since protein A removed suppressive activity, and heat inactivation of α Ser at 56°C for 30 min did not reduce suppressive activity (data not presented). Together, the results indicated that suppression was mediated by IgG.

Table 2, Exps. 3 and 4, show that Ig directed against the antigen used to raise the immune serum was responsible for suppression; i.e., α Ser raised against SRBC lost all specific antibody activity and all suppressive activity after absorption on SRBC but not after absorption on HRBC; similarly, α Ser raised against HRBC lost all specific antibody activity and nearly all suppressive activity after absorption on HRBC but not after absorption on SRBC.

Antibodies against TGF- β Prevent Suppression. Nonantigenspecific, non-H2-restricted suppression caused by α Ser mimicked suppression caused by active TGF- β in several ways. Addition of 1.0–10.0 ng active pTGF- β 1 or mTGF- β 1 to MLC powerfully suppressed CTL responses. Addition of this amount or $10\times$ more latent mTGF- β had no effect on CTL responses. Maximum suppression occurred when α Ser or active TGF- β was added to MLC during the first 24 h of culture; no suppression occurred when either agent was added on days 3 or 4 of culture. Also, both agents caused little or no suppression of CTL responses using sensitized cells obtained from mice recently immunized with the same alloantigen as used in the MLC.

To test directly whether TGF- β might be involved, antibodies to TGF- β were added to MLC. In repeated experiments a murine mAb against TGF-\(\beta\) 2,3 (IgG2b) at concentrations that partially neutralized the effects of 1.0-3.0 ng of active porcine or murine TGF- β prevented suppression caused by adding α Ser to MLC (e.g., Table 3, Exp. 1). Control IgG2b of unknown specificity added to cultures at the same or $3\times$ the concentration of the anti-TGF- β antibody had no effect on CTL responses. Also, in repeated experiments, a chicken antibody against TGF-\beta1 at concentrations that neutralized 1.0-3.0 ng of porcine or murine TGF- β in MLC very effectively prevented suppression caused by α Ser. (e.g., Table 3, Exp. 2). The chicken antibody against TGF- β alone had no effect on CTL responses in MLC; however, the findings using chicken antibody have to be taken with reservation (and serve as a cautionary note) because the normal chicken Ig provided as a control caused bizarre effects on cells in MLC that we have not observed for the chicken antibody against TGF- β or for any other additive we have ever used during the course of a great many experiments.

Secretion of TGF- β by Lymphocytes. α Ser might suppress CTL responses by stimulating cells in MLC to secrete TGF- β . For these experiments, secretion of TGF- β by lymphoid cells was compared with secretion by a murine cell line transfected

Table 3. Antibodies against TGF-\$\beta\$ Prevent Suppression

			Cytotoxicity					
Ехр.			P	Percent 51Cr Rel				
	Additions to cultures*	αTGF-β Antibody‡	1/85	1/32	1/128	Lytic units		
1	Medium	0	80	62	25	128		
	Medium	α TGF- β 2,3	82	66	31	128		
	TGF-β1*	0	19	8	8	<8		
	TGF- β 1*	α TGF- β 2,3	40	18	12	16		
	lphaSer	0	6	2	2	0		
	lphaSer	α TGF- β 2,3	70	42	14	64		
2	Medium	0	86	78	46	512		
	Medium	αTGF-β1	81	74	40	512		
	TGF-β1	0	19	6	2	8		
	TGF-β1	αTGF-β1	77	40	14	128		
	lphaSer	0	54	18	9	32		
	lphaSer	αTGF-β1	84	82	40	512		

^{*} TGF-β was active pTGF-β1, 1.0 ng/ml (Exp. 1) and 3.0 ng/ml (Exp. 2). αSer were at dilutions of 1:200 (Exp. 1) and 1:300 (Exp. 2). ‡ Monoclonal murine anti-TGF-β2,3 (IgG2b), 50 µg/ml (Exp. 1). Murine IgG2b of unknown specificity used as a control at 50-200 µg/ml had no effect on responses in this or other experiments. Chicken anti-TGF-β1, 30 µg/ml (Exp. 2); see text for discussion of chicken Ig control. § Fraction of culture.

with cDNA for murine TGF- β 1, which secretes \sim 10.0 ng TGF- $\beta/10^6$ cells per 24 h (3). Under the same culture conditions unfractionated lymphoid cells or highly purified populations of B or CD4⁺ cells secreted <1.0 ng TGF- β , but the addition of 1% murine serum caused unfractionated B or CD4⁺ cells to secrete 1.0-5.0 ng TGF- β /10⁶ cells per 24 h. Stimulation of secretion of TGF- β was caused exclusively by the >100-kD fraction of sera. Secretion by B and CD4+ cells was always higher than for CD8+ cells. We found no complementation between populations that resulted in secretion of more TGF- β than could be accounted for by the separate populations. Adherent cells, predominantly $M\phi$ but including DC, alone with or without added serum, did not secrete measurable amounts of TGF- β . We consistently found that supernatants of cells depleted of adherent cells and stimulated with serum contained more TGF- β than supernatants of cultures that included adherent cells, suggesting that adherent cells inhibited secretion or consumed TGF-β. Greater than 90% of TGF- β secreted by lymphocytes in cultures was latent and required acid activation for bioassay or causing suppression of CTL responses in MLC. Also, ~90% of the activity of the activated TGF- β was inhibited in the bioassay by chicken antibody-specific TGF β 1 (data not presented).

The essential findings found in many repeated experiments are shown in Table 4. Lymphocytes, including B cells, secrete significant amounts of latent TGF- β , and cells from normal mice secrete as much TGF- β as cells from immune mice. Furthermore, normal sera were as effective as α Ser in stimulating secretion of TGF- β . In other experiments (data not presented),

Table 4. Secretion of TGF-\$\beta\$ by Lymphocytes

Exp.	L	ymphocytes	Serum*	TGF-β	
I	В	Imm. LN	-	0.6	
	В	Normal spleen	-	1.0	
		_	lphaSer	0.6	
		_	NMS	1.0	
	В	Imm. LN	lphaSer	3.5	
	В	Imm. LN	NMS	3.4	
	В	Normal spleen	lphaSer	3.0	
	В	Normal spleen	NMS	5.5	
2	В	Imm. LN	-	0.7	
	CD4	Imm. LN	_	0.3	
	CD8	Imm. LN	_	0.5	
			lphaSer	1.0	
	В	Imm. LN	α Ser	5.0	
	CD4	Imm. LN	lphaSer	2.8	
	CD8	Imm. LN	αSer	1.1	

^{*} All sera were at a dilution of 1:100 and were unfractionated. ‡ Total nanograms secreted/106 cells per 24 h; all preparations tested before acidification contained <0.1 ng active TGF-β.

sera from SCID mice or α Ser absorbed on protein G were also as effective as normal or immune sera. Thus, it is unlikely that suppression of CTL caused by adding α Ser to MLC is secondary to stimulation of secretion of TGF- β by responding cells. For this reason, we examined whether IgG in α Ser might carry TGF- β .

 $TGF-\beta$ Is Associated with or Carried by IgG. Different individual or pooled NMS or αSer contained ~200-300 ng TGF- β /ml; >90% of serum TGF- β was latent and >90% of acid activated TGF- β in sera was neutralized by antibody to TGF- β 1. We found no consistent differences in total amounts of latent or active TGF- β in either whole or the >100-kD fractions of NMS or α Ser. Absorptions to remove Ig from NMS or αSer consistently reduced serum concentrations of TGF- β by \sim 25-50%. The findings indicated that \sim 2.0–10.0 ng of TGF- β is carried per 1.0 mg IgG (assuming that serum contains ~20 mg IgG/ml of serum), and each of two commercial preparations of mIgG affinity purified from "normal" mouse sera did contain 3–5 ng latent TGF- β /mg IgG (Table 5). Neither of the commercial preparations at a concentration of 1.0 mg IgG/ml culture medium inhibited (or enhanced) CTL responses. We then purified IgG from our NMS and a Ser by absorption on protein G coupled to Sepharose, washing the column contents with 10 vol of diluent, pH 7.0, and briefly eluating absorbed IgG at pH 2.7 for 1.5 min using a 1.0 M glycine-HCl buffer. The neutralized eluate from NMS contained no measurable active TGF- β and \sim 5.0 ng latent TGF- β /mg IgG, which caused no suppression when added to MLC at 1.0 mg IgG/ml of culture medium. In marked contrast, the eluate from α Ser, containing ~ 1.0 ng active and ~ 30.0 ng latent TGF- β /mg IgG, abolished CTL responses at a dilution that added \sim 3.0 μ g IgG and \sim 0.1 ng TGF- β /ml of culture medium (Table 5, Exp. 3).

IgG Dissociated from TGF- β No Longer Causes Suppression. While IgG in α Ser carried significant amounts of latent TGF- β , suppression by α Ser appeared to be an order of magnitude greater than could be accounted for if all the carried TGF- β was activated. Indeed, α Ser acidified at pH 2.0 for 30 min no longer suppressed CTL responses at the same high serum dilution, though acid-treated α Ser at low dilutions that added 1.0–3.0 ng of the activated TGF- β /ml of culture medium did suppress, and this suppression was prevented by preincubation of the treated sera with antibody to TGF- β (data not presented).

Acid treatment of α Ser not only activated TGF- β but also dissociated it from IgG. This was shown by acidifying α Ser and fractionating it before neutralization. This procedure yielded all specific α SRBC or α HRBC antibody in the >100-kD fraction and all TGF- β in the active form and in the <100-kD fraction. The acidification/fractionation procedure did not cause any loss of complement-dependent hemolytic activity, which requires the Fc portion of antibody molecules. Interestingly, fractionation of α Ser after acidification and neutralization yielded the same amounts of active TGF- β , but virtually all of the TGF- β was now recovered in the >100-kD fractions, indicating that the activated TGF- β reaggregates

Table 5. IgG Carries TGF-β

Exp.			TGF-β	S	
	Preparation [‡]	Source	Active	Total	Suppression of CTL/mg IgGs
			ng/	mg	
1	IgG (commercial)	NMS	0.5	5.0	None, 1.0
2	IgG (commercial)	NMS	0.5	3.5	None, 1.0
3	IgG Prot. G eluate	NMS	0	5.0	None, 1.0
	IgG Prot. G eluate	lphaSer	1.0	30.0	Complete, 0.01

^{*} Preparations tested before acidification (active) and after acidification (total).

§ Per milliliter of culture medium.

possibly with itself and/or other large molecules. These findings for one experiment are shown in Table 6. Aliquots of α Ser were either acidified for 30 min and fractionated before neutralization or were treated with the same quantities of acid and base added simultaneously before fractionation. The >100-kD fractions of both samples had the same antibody titers to SRBC but the >100-kD fraction of the acid-treated aliquot no longer suppressed effectively whereas the control aliquot did, suggesting that the combination of IgG and TGF- β in fresh immune serum may have to be in a particular or unique configuration for suppression to occur.

Macrophages Are Obligatory for Suppression Caused by Immune Serum. Two cell types are obligatory for CD8⁺ CTL responses in MLC, CD8⁺ lymphocytes, and DC (5). Selective removal in vitro of B lymphocytes, or in vivo of CD4⁺ lymphocytes or NK cells from populations of responder and irradiated stimulator cells, did not lower (and usually caused higher) CTL responses, and in each case αSer was fully suppressive (data not shown). In contrast, αSer caused no sup-

pression in Ad⁻ cultures but reconstituted with DC (Ad⁻ + DC) (Table 7, Exp. 1), though small quantities of active pTGF- β abolished responses in such cultures (Table 7, Exp. 2). These findings were confirmed in similar experiments using different α Ser and active mTGF- β as well as pTGF- β . IgG-TGF- β might stimulate M ϕ to secrete factors, including leukotrienes, prostaglandins, nitric oxide, or cytokines, that could suppress lymphocyte function, but in an extensive series of experiments we were unable to prevent suppression caused by α Ser with indomethacin, acetylsalicylic acid, N-monoethyl-L-arginine, TNF- α , IL-2, or selected other cytokines, each tested at six concentrations over a 2-log range (data not shown).

Interference with $M\phi$ Function Prevents Suppression by Immune Sera. Presumably $M\phi$ take up IgG-TGF- β via Fc receptors for IgG and, as shown in Table 8, Exp. 1, a rat antibody directed against murine Fc receptors partially prevented suppression by α Ser. Also, rabbit IgG added to cultures prevented suppression by α Ser in a dose-dependent manner (Table 8,

Table 6. IgG Dissociated from TGF-\$\beta\$ No Longer Suppresses

				Cytot	toxicity	
	Treatment [‡]	Percent Cr release			-	
Suppression by:*		1/85	1/32	1/128	Lytic units	Antibody titer
Medium	-	93	98	71	512	_
αSer	Control	21	10	6	<8	2,560
lphaSer	Acidification Neutralization	85	78	49	256	5,120

^{*} The dilution of α Ser was 1:300.

^{*} Commercial murine IgG: Exp. 1 (Cappel Laboratories) and Exp. 2 (Zymed Labs., Inc.), see Materials and Methods.

[‡] Acidification was at pH 2.0 for 30 min with fractionation done before neutralization; control αSer was treated with the same quantity of acid and base added simultaneously before fractionation. Results are for the >100 kD fraction.

§ Fraction of culture.

Table 7. Macrophages Are Obligatory for Suppression Caused by Immune Serum but Not for Suppression Caused by Active TGF-8

		Additional cells‡	TGF-β or immune serum [§]	Cytotoxicity				
	B 1 1: 1: 1			Pe				
Exp.	Responder and irradiated stimulator cells*			1/8	1/32	1/128	Lytic units	
1	Whole	0	0	65	37	14	64	
	Whole	0	lphaSer	13	5	3	<8	
	Whole	DC	0	71	36	16	64	
	Whole	DC	lphaSer	7	5	3	<8	
	\mathbf{Ad}^-	0	0	14	5	12	<8	
	\mathbf{Ad}^-	0	lphaSer	5	2	5	<8	
	Ad-	DC	0	87	62	34	128	
	Ad-	DC	lphaSer	77	60	23	128	
2	Whole	0	0	73	46	17	128	
	Whole	0	TGF- β 1	5	5	9	<8	
	Ad-	0	0	13	6	4	<8	
	\mathbf{Ad}^-	DC	0	73	37	15	128	
	Ad-	DC	TG F-β 1	4	3	5	<8	

^{*} 5×10^5 responder and 5×10^5 irradiated stimulator cells, either whole or depleted of adherent cells (Ad-). 4×10^4 C3H DC added per culture.

Table 8. Interference with Fc Receptors Prevents Suppression by Immune Sera

			Cytotoxicity					
Ехр.			Percent 51Cr rel		ease	T		
	Suppression by:*	Additions [‡]	1/85	1/32	1/128	Lytic units		
1	Medium	-	100	88	49	512		
	lphaSer	_	20	6	0	<8		
	_	αFc AB	96	77	33	256		
	_	Ig control	100	78	38	256		
	lphaSer	αFc AB	93	47	9	128		
	αSer	Ig control	51	17	2	32		
2	Medium		85	80	62	512		
	αSer		16	2	0	<8		
	-	Rabbit IgG (50 μ g/ml)	87	75	65	512		
	_	Rabbit IgG (150 μg/ml)	88	80	65	512		
	αSer	Rabbit IgG (50 μ g/ml)	65	34	13	32		
	αSer	Rabbit IgG (150 μ g/ml)	84	65	40	256		

[§] αSer (1:300) or pTGF- $\beta 1$ (3 ng/ml of culture medium). \parallel Fraction of culture.

^{*} Dilutions of α Ser were 1:400 (Exp. 1) and 1:300 (Exp. 2). ‡ In Exp. 1, the concentration of the α FcAB was \sim 15 μ g/ml, and the rat Ig control \sim 10 × the concentration of the α FcAB.

[§] Fraction of culture.

Exp. 2), presumably by saturating Fc receptors. In addition, various "particulate" and soluble antigens that are phagocytized or taken up by other means also prevented suppression. For example, adherent cells were obtained by removing nonadherent cells after a 2-h incubation; the adherent cells were cultured alone or with a soluble antigen, Pc-KLH, 10 μ g/ml of culture medium; the cells were incubated for 24 h and then washed thoroughly. These cells were compared with fresh adherent cells for restoring the capacity of α Ser to suppress cultures lacking adherent cells but with added DC, as was done in Table 7, Exps. 1 and 2. The fresh adherent cells again completely restored the capacity of α Ser to suppress; suppression was less using the adherent cells incubated for 24 h alone (possibly because of interaction of adherent cells with protein antigens in FCS?) and α Ser caused no suppression using adherent cells incubated with the antigen (data not presented). Apparently, prior or other engagement of $M\phi$ as well as blocking Fc receptors may prevent these cells from taking up and/or processing IgG-TGF- β in α Ser. Together, the findings suggest that suppression is not due to "activated M ϕ ;" e.g., M ϕ stimulated with thioglycolate or lectins for ≥24 h that have many altered activities, including secretion of TGF- β (6).

Discussion

Fresh homologous sera are often "toxic" for many culture systems; the fact that our sera came from pathogen-free mice may account for why 1-2% NMS did not suppress cultures and allowed us to study components in immune serum that do suppress CTL responses. Though our immune sera were obtained from intensely immunized mice, immunization was meant to be comparable to the antigenic challenge that might occur with growing tumors or infectious agents. Adjuvants were not used and all of our sera were obtained within 6-12 d of the first injection of antigen; thus, we do not think our results are an artifact of an unphysiological regime for immunization. Though we have not studied the variables of antigen dose or injection schedule systematically, we have observed that serum obtained 7 d after a single injection of antigen was much less suppressive than sera from mice receiving the same total dose of antigen given every 2 d for three injections.

Repeated antigen injections should favor formation of circulating antigen-antibody complexes that are taken up by $M\phi$ and can cause various immunologic effects (7-9). Our α Ser may well contain complexes present in great antibody excess and such complexes could play a role, though we have been unable to reproduce suppression with complexes formed in vitro over broad ranges of antigen-to-antibody ratios using various purified specific antibodies and appropriate soluble or particulate antigens. Also, heat-aggregated IgGs, which reproduce many of the effects of complexes, did not cause suppression of CTL responses, and storage of sera that favors aggregation of IgGs caused immune sera to lose rather than gain suppressive activity. IgGs are dissociated from antigens and other ligands by acidification; brief acid elution of IgGs from fresh immune sera absorbed on protein A or protein

G yielded eluates that were fully suppressive. Acidification, pH 2.0 for 30 min should be more effective in dissociating antigen-antibody complexes, but this procedure also dissociates Ig and TGF- β , which may be the more critical effect of acid treatment. These arguments are supported by recent preliminary observations that indicate that suppression can be mediated by a <300-kD fraction of α Ser that would exclude antigen-antibody complexes formed in great antibody excess, but the findings obtained to date do not rule out that suppression can be caused by a >300-kD fraction of α Ser.

Our interest in the role of TGF- β originally arose because active TGF- β suppresses activation and proliferation of resting lymphocytes (10–14); glioblastomas and selected other tumors secrete latent TGF- β and are associated with immune suppression (15–17), and an immunogenic murine tumor transfected to secrete latent mTGF- β failed to stimulate CTL in vivo and in vitro (3). Though the experiments presented here do not prove that TGF- β carried by IgG in α Ser is responsible for suppression of CTL responses, we think the inference is strong and the concept important enough to be considered until confirmed or refuted.

Ongoing studies are designed to determine whether suppression by a Ser is caused by a particular subclass of IgG and whether IgG and TGF- β are secreted as a complex or combine after secretion. Latent TGF- β of \sim 110 kD is cleaved to yield the active 25-kD homodimer but the physiological process for activating TGF- β is not understood, though it is accomplished in the laboratory with various proteolytic enzymes (18) and most usually by acidification. This procedure requires pH 2.0 for >15 min; relatively little active TGF- β is obtained at higher pH or during shorter periods of acidification. The inactive portion of latent TGF- β has at least three glycosylation sites that are necessary for latency (19); thus, it is tempting to think that IgG and TGF- β may be linked through carbohydrate chains that are cleaved or digested at target sites, e.g., by M ϕ , causing activation of the carried TGF- β . Possibly the structure of the linkage between TGF-β-IgG in fresh serum may alter on storage or manipulation to account for the lability of suppressive activity of α Ser, since the total amount of assayable TGF- β in aser remains stable during storage.

Since IgGs and latent TGF- β are of comparable molecular mass, only a very small fraction of IgG molecules in α Ser must carry TGF- β . However, even a few nanograms of TGF- β per milligram of IgG has the potential for producing important biological effects if TGF- β can be delivered, concentrated. and activated at precise sites. M ϕ focusing the activity of TGF- β delivered by IgG through Fc receptors may explain why TGF- β associated with IgG is an order of magnitude more effective in suppressing CTL responses than free active TGF- β added to cultures, and may account for difficulties using antibodies against TGF- β . Antibodies to TGF- β neutralize only active TGF- β and are effective in bioassays only when they are preincubated with active TGF- β before addition to target cells because of the higher affinity of active TGF- β for receptors than for antibody. Thus, in MLC, antibodies to TGF- β may have different access to TGF- β in the cell-cell interaction or diffusion-limited space between $M\phi$

and lymphocytes depending on the form of the antibody. For example, this may explain why a murine mAb against TGF- β 1,2,3 (subclass IgG1) does not prevent suppression (data not presented), whereas a murine mAb against TGF- β 2,3 (subclass IgG2b) does (Table 3). Possibly the subclass of antibody against TGF- β may be more critical than the epitope on TGF- β .

We have confirmed that the mAb against $TGF\beta 2,3$ does not neutralize m or pTGF-β1 in the Mv1Lu bioassay; however, the same antibody does partially neutralize suppression of CTL responses in MLC caused by pTGF- β 1 or α Ser (Table 3). The different isoforms of TGF- β undoubtedly share epitopes, and receptors for TGF- β are probably not identical on Mv1Lu cells and murine lymphocytes. For these reasons, we do not think it surprising that an antibody that neutralizes the interaction of one isoform of TGF- β with receptors on cells in one system will necessarily be effective in another system and vice versa. Different considerations limit the use of other antibodies against TGF- β in MLC. For example, we cannot use rabbit antibodies because control rabbit IgG is as effective as rabbit anti-TGF- β antibody in preventing suppression by αSer, undoubtedly because rabbit IgG blocks or saturates Fc receptors. Nevertheless, we interpret our overall findings as consistent with the idea that suppression caused by α Ser is mediated by TGF- β 1.

On a broader scale, the effects of TGF- β are pleiotropic

and depend on the type and state of activation or maturation of target cells in many different tissues (20-24), suggesting that the activity of TGF- β must be highly restricted or regulated at different sites. Thus, the idea that the activity of TGF- β in immunity is modulated by Ig suggests one kind of strategy for limiting the activity of TGF- β to the relevant system, just as the association of TGF- β -2 with α -fetal protein (25, 26) suggests a different strategy for limiting activity of TGF- β to the site of maternal-fetal interaction. Thus, IgG localizing TGF- β at antigenic sites could play an important role in the homeostasis of immunity by augmenting proliferation of already activated dominant lymphocyte clones (27), promoting isotype switch (27-29), suppressing activation/proliferation of new specific antigen-reactive clones that may arise during ongoing immunity, and suppressing some autoimmune diseases (30). On the other hand, TGF- β can promote abnormal scarring as well as wound healing (31-37), and stimulate growth of some malignancies (38-41), so that antibody carrying TGF- β to antigen target sites in some autoimmune diseases or cancer may have deleterious effects. In an analogous way, desirable or adverse effects of specific antibodies given passively for experimental or clinical objectives (42) may depend on the presence and nature of TGF- β carried by IgG. Thus, the finding that IgG can carry biologically effective TGF- β has many important implications.

This work was supported by grants from the National Institutes of Health (R37 AI-10242 and RO1-2267).

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Received for publication 8 March 1993 and in revised form 28 May 1993.

References

- Rowley, D.A., and R.M. Stach. 1993. A first or dominant immunization. I. Suppression of simultaneous cytolytic T cell responses to unrelated alloantigens. J. Exp. Med. 178:835.
- Torre-Amione, G., R. Teutken, and D.A. Rowley. 1989. Powerful immunosuppression mediated by interleukin 2-activated, non-antigen specific or H-2 restricted Thy⁺ CD8⁺ cells. Cell. Immunol. 124:50.
- Torre-Amione, G., R.D. Beauchamp, H. Koeppen, B.H. Park, H. Schreiber, H.L. Moses, and D.A. Rowley. 1990. A highly immunogenic tumor transfected with a murine TGFβ1 cDNA escapes immune surveillance. Proc. Natl. Acad. Sci. USA. 87:1486.
- Danielpour, D., L.L. Dart, K.C. Flanders, A.B. Roberts, and M.B. Sporn. 1989. Immunodetection and quantitation of the two forms of transforming growth-factor beta (TGF-β1 and TGF-β2) secreted by cells. J. Cell. Physiol. 138:79.
- Gilbertson, S.M., P.D. Shah, and D.A. Rowley. 1986. NK cells suppress the generation of Lyt2⁺ cytolytic T cells by suppressing or eliminating dendritic cells. J. Immunol. 136:3567.

- Assoian, R.K., B.E. Fleurdelys, H.C. Stevenson, P.J. Miller, D.K. Madtes, E.W. Raines, R. Ross, and M.B. Sporn. 1987. Expression and secretion of type β transforming growth factor by activated human macrophages. Proc. Natl. Acad. Sci. USA. 84:6020.
- Heyman, B. 1990. Fc-dependent IgG-mediated suppression of the antibody response: fact or artefact? Scand. J. Immunol. 31:601.
- 8. Heyman, B. 1990. The immune complex: possible ways of regulating the antibody response. *Immunol. Today.* 11:310.
- Manca, F., E. Fenoglio, G. Li Pira, A. Kunkl, and F. Celada. 1991. Effects of antigen/antibody ratio on macrophage uptake, processing, and presentation to T cells of antigen complexed with polyclonal antibodies. J. Exp. Med. 173:37.
- Kehrl, J.H., L.M. Wakefield, A.B. Roberts, S. Jakowlew, R. Alvarez-Mon, R. Derynk, M.B. Sporn, and S. Fauci. 1986.
 Production of transforming growth factor β by human T lymphocytes and its potential role in the regulation of T cell growth. J. Exp. Med. 163:1037.

- 11. Kehrl, J.H., A.B. Roberts, L.M. Wakefield, S. Jakowlew, M.B. Sporn, and A.S. Fauci. 1986. Transforming growth B is an important immunomodulatory protein for human B lymphocytes. J. Immunol. 137:3855.
- 12. Espevik, T., I.S. Figari, M.R. Shalaby, G.A. Lackides, G.D. Lewis, H.M. Shepard, and M.A. Palladino, Jr. 1987. Inhibition of cytokine production by cyclosporin A and transforming growth factor β . J. Exp. Med. 166:571.
- 13. Ranges, G.E., I.S. Figari, T. Espevik, and M.A. Palladino, Jr. 1987. Inhibition of cytotoxic T cell development by transforming growth factor β and reversal by recombinant tumor necrosis factor A. J. Exp. Med. 166:991.
- 14. Ruegemer, J.J., S.N. Ho, J.A. Augustine, J.W. Schlager, M.P. Bell, D.J. McKean, and R.T. Abraham. 1990. Regulatory effects of transforming growth factor- β on IL-2 and IL-4 dependent T cell cycle progression. J. Immunol. 144:1767.
- 15. Bodmer, S., K. Strommer, K. Frei, C. Siepl, N. DeTribolet, I. Heid, and A. Fontana. 1989. Immunosuppression and transforming growth factor- β in glioblastoma. Preferential production of transforming growth factor-\(\beta 2\). I. Immunol. 143:3222.
- 16. Berg, D.J., and R.G. Lynch. 1991. Immune dysfunction in mice with plasmacytomas. Evidence that transforming growth factor beta contributes to the altered expression of activation receptors on host lymphocytes. J. Immunol. 146:2865.
- 17. Huber, D., J. Phillip, and A. Fontana. 1992. Protease inhibitors interfere with the transforming growth factor- β -dependent but not the transforming growth factor-β-independent pathway of tumor cell-mediated immunosuppression. J. Immunol. 148:
- 18. Lyons, R.M., J. Keski-Oja, and H.L. Moses. 1988. Proteolytic activation of latent transforming growth factor- β from fibroblast conditioned medium. J. Cell Biol. 106:1659.
- 19. Miyazono, K., and C-H. Heldin. 1989. Role for carbohydrate structures in TGF-β1 latency. Nature (Lond.). 338:158.
- 20. Sporn, M.B., A.B. Roberts, L.M. Wakefield, and R.K. Assoian. 1986. Transforming growth factor-β: Biological function and chemical structure. Science (Wash. DC). 233:532.
- 21. Moses, H.L., R.J. Coffey, Jr., E.B. Leof, R.M. Lyons, and J. Keski-Oja. 1987. Transforming growth factor β regulation of cell proliferation. J. Cell. Physiol. 5(Suppl.):1.
- 22. Moses, H.L., E.Y. Yang, and J.A. Pietenpol. 1990. TGF-β stimulation and inhibition of cell proliferation: new mechanistic sights. Cell. 63:245.
- 23. Czarniecki, C.W., H.H. Chiu, G.H.W. Wong, S.M. McCabe, and M.A. Palladino. 1988. Transforming growth factor-\$1 modulates the expression of class II histocompatibility antigens on human cells. J. Immunol. 140:4217.
- 24. Clark, D.A., M. Falbo, R.B. Rowley, D. Banwatt, and J. Stedronska-Clark. 1988. Active suppression of host-vs-graft reaction in pregnant mice. IX. Soluble suppressor activity obtained from allopregnant mouse decidua that blocks the cytolytic response to IL-2 is related to transforming growth factor-β. J. Immunol. 141:3833.
- 25. Altman, D.J., S.L. Schneider, D.A. Thompson, H.-L. Cheng, and T.B. Tomasi. 1990. A transforming growth factor β 2 (TGF-B2) like immunosuppressive factor in amniotic fluid and localization of TGF- β 2 mRNA in the pregnant uterus. J. Exp. Med. 172:1391.
- 26. Lee, H.-M., and S. Rich. 1991. Co-stimulation of T cell proliferation by transforming growth factor- β 1. J. Immunol. 147:1127.
- 27. Coffman, R.L., D.A. Lebman, and B. Shrader. 1989. Transforming growth factor β specifically enhances IgA production by lipopolysaccharide-stimulated murine B lymphocytes. J. Exp.

- Med. 170:1039.
- 28. Sonoda, E., R. Matsumoto, Y. Hitoshi, T. Ishil, M. Sugimoto, S. Araki, A. Tominaga, N. Yamaguchi, and K. Takatsu. 1989. Transforming growth factor β induces IgA production and acts additively with interleukin 5 for IgA production. J. Exp. Med. 170:1415.
- 29. Lin, Y.A., and J. Stavnezer. 1992. Regulation of transcription of the germ-line Ig α constant region gene by an ATF element and by novel transforming growth factor-\$1 responsive elements. J. Immunol. 149:2914.
- 30. Kuruvilla, A.P., R. Shah, G.M. Hochwald, H.D. Liggitt, M.A. Palladino, and G.J. Thorbecker. 1991. Protective effect of transforming growth factor $\beta 1$ on experimental autoimmune disease in mice. Proc. Natl. Acad. Sci. USA. 88:2918.
- 31. Mustoe, T.A., G.F. Pierce, A. Thomason, P. Gramotes, M. Sporn, and T. Deuel. 1987. Accelerated healing of incisional wounds in rats induced by transforming growth factor- β . Science (Wash. DC). 237:1333.
- 32. Raghow, R., A.E. Postlethwaite, J. Keski-Oja, H.L. Moses, and A.H. Kang. 1987. Transforming growth factor- β increases steady state levels of type I procollagen and fibronectin messenger RNAs posttranscriptionally in cultured human dermal fibroblasts. J. Clin. Invest. 79:1285.
- 33. Blatti, S.P., D.N. Foster, G. Ranganathan, H.L. Moses, and M.J. Getz. 1988. Induction of fibronectin gene transcription and mRNA is a primary response to growth-factor stimulation of AKR-2B cells. Proc. Natl. Acad. Sci. USA. 85:1119.
- 34. Keski-Oja, J., J.R. Raghow, M. Sawdey, D.J. Loskutoff, A.E. Postlethwaite, A.H. Kang, and H.L. Moses. 1988. Regulation of mRNAs for type-I plasminogen activator inhibitor, fibronectin, and type I procollagen by transforming growth factor- β . Divergent responses in lung fibroblasts and carcinoma cells. J. Biol. Chem. 263:3111.
- 35. Coffey, R.J., N.J. Sipes, C.C. Bascom, R. Graves-Deal, C.Y. Pennington, B.E. Weissman, and H.L. Moses. 1988. Growth modulation of mouse keratinocytes by transforming growth factors. Cancer Res. 48:1596.
- 36. Connor, Jr., T.B., A.B. Roberts, M.B. Sporn, D. Danielpour, L.L. Dart, R.G. Michels, S. deBustros, C. Enger, H. Kato, M. Lansing, H. Hayashi, and B.M. Glaser. 1989. Correlation of fibrosis and transforming growth factor- β type 2 levels in the eye. J. Clin. Invest. 83:1661.
- 37. Fava, R.A., H.J. Olsen, A.E. Postlethwaite, K.H. Bradley, J.M. Davidson, L.B. Nanney, C. Lucas, and A.S. Townes. 1990. Transforming growth factor β_1 (TGF-B₁) induced neutrophil recruitment to synovial tissues: implications for TGF-\beta-driven synovial inflammation and hypoplasia. J. Exp. Med. 173:1121.
- 38. Schwarz, L.C., M.-C. Gingras, G. Goldberg, A.H. Greenberg, and J.A. Wright. 1988. Loss of growth factor dependence and conversion of transforming growth factor- β_1 inhibition to stimulation in metastatic H-ras-transformed murine fibroblasts. Cancer Res. 48:6999.
- 39. Manning, A.M., A.C. Williams, S.M. Game, and C. Paraskeva. 1991. Differential sensitivity of human colonic adenoma and carcinoma cells to transforming growth factor β (TGF- β): conversion of an adenoma cell line to a tumorigenic phenotype is accompanied by a reduced response to the inhibitory effects of TGF- β . Oncogene. 6:1471.
- 40. Tada, T., S. Ohzeki, K. Utsumi, H. Takiuchi, M. Muramatsu, X.-F. Li, J. Shimizu, H. Fujiwara, and T. Hamaoka. 1991. Transforming growth factor- β -induced inhibition of T cell function. Susceptibility difference in T cells of various phenotypes and function and its relevance to immunosuppression in the

- tumor-bearing state. J. Immunol. 146:1077.
- Mooradian, D.L., J.B. McCarthy, K.V. Komanaduri, and L.T. Furcht. 1992. Effects of transforming growth factor-β1 on human pulmonary adenocarcinoma cell adhesion, motility, and
- invasion in vitro. J. Natl. Cancer Inst. 84:523.
- 42. Dwyer, J.M. 1992. Manipulating the immune system with immunoglobulin. N. Engl. J. Med. 326:107.