

## Intrathymic maturation of murine T lymphocytes from CD8<sup>+</sup> precursors

CYNTHIA J. GUIDOS, IRVING L. WEISSMAN, AND BECKY ADKINS\*

Laboratory of Experimental Oncology, Department of Pathology, Stanford University School of Medicine, Stanford, CA 94305

Communicated by Leroy Hood, June 21, 1989

**ABSTRACT** The CD4<sup>-</sup> thymocyte subset contains immature precursors for phenotypically and functionally mature CD4<sup>+</sup> and CD4<sup>-</sup> thymocytes and peripheral T cells, as well as nonmature CD4<sup>+</sup> thymocytes, most of which die *in situ*. The intrathymic death of most thymocytes is probably related to selective influences that ensure that only those precursors bearing self-major histocompatibility complex (MHC)-restricted and self-tolerant T-cell antigen receptors (TCR) survive to complete the maturation process. Interactions between surface molecules on thymocytes (TCR, CD4, and CD8) and thymic stromal cells (MHC proteins) are critical to repertoire selection. To understand this process, the lineage relationships among immature, nonmature, and mature thymocytes must be defined. We have examined directly the precursor-progeny relationships among CD4<sup>+</sup>, CD4<sup>-</sup>, and CD4<sup>+</sup> murine thymocyte subsets by assessing their short-term (<5 days) developmental potentials following intrathymic injection into *Thy-1* congenic, unirradiated host mice. Our results identify TCR<sup>-/lo</sup> CD4<sup>+</sup> and TCR<sup>lo</sup> CD4<sup>+</sup> blast cells as sequential intermediates in the development of mature TCR<sup>hi</sup> CD4<sup>-</sup> and TCR<sup>hi</sup> CD4<sup>-</sup> thymocytes from CD4<sup>-</sup> precursors, thus defining at least one intrathymic maturation pathway for T lymphocytes.

T lymphocytes mature intrathymically from migratory bone marrow or fetal liver precursors (1-3). The thymic microenvironment induces these precursor cells to proliferate and to express on the cell surface the recognition components (clonotypic  $\gamma\delta$  or  $\alpha\beta$  heterodimers) and signal-transducing components (invariant CD3 proteins) of the T-cell antigen receptor (TCR) complex, as well as the CD4 and CD8 accessory molecules (4, 5). Most mature T cells are unreactive (tolerant) to self antigens and preferentially respond to foreign antigenic peptides bound to self major histocompatibility complex (MHC) molecules (6), apparently due to negative and positive selective events during intrathymic maturation (7-11). Recent evidence suggests that these selective processes involve interactions among the TCR (12), class I and class II MHC proteins on thymic stromal cells (13, 14), and CD4 and CD8 (15-17). However, the maturational stage(s) during which selection takes place is unknown.

CD4<sup>+</sup> cortical thymocytes are an early maturational stage potentially subject to selective processes, since some express low levels of surface TCR (18-20). These cells develop intrathymically from CD4<sup>-</sup> precursors before mature CD4<sup>+</sup> and CD4<sup>-</sup> thymocytes during fetal life (2, 3) and following intrathymic injection into the adult thymus (21, 22). However, most CD4<sup>+</sup> thymocytes are nonfunctional cells that die *in situ* (23, 24). Moreover, the inability of several groups to directly demonstrate a precursor function for CD4<sup>+</sup> thymocytes (25, 26) conflicts with recent studies in  $\alpha\beta$  TCR transgenic mice (27, 28) and lethally irradiated

bone marrow chimeras (15-17) that have provided indirect evidence of CD4<sup>+</sup> precursor function.

To resolve these issues, we investigated thymocyte lineage relationships directly by assessing the developmental potential of individual subsets after intrathymic injection into host mice. The standard protocol (21, 22) was modified as follows. CD4<sup>+</sup>, CD4<sup>-</sup>, and CD4<sup>+</sup> donor thymocytes were obtained using a fluorescence-activated cell sorter (FACS) for the final selection step. Other methods (panning, antibody-mediated complement-dependent cytotoxicity) usually result in significant (>2%) contamination with undesired cell types. Nonetheless, even FACS-purified subsets are seldom 100% pure, and the most common contaminants (CD4<sup>-</sup> precursor thymocytes) expand 50- to 100-fold by 1 week after intrathymic injection (B.A. and I.L.W., unpublished data). Hence, only short-term (<5 days) developmental potential was examined. Finally, unirradiated host mice were used, since the radiation-damaged host thymus supports maturation at a significantly slower rate (unpublished data), and asynchronous maturation of different subsets has been reported (29). Our results provide direct evidence that TCR<sup>-/lo</sup> CD4<sup>+</sup> and TCR<sup>lo</sup> CD4<sup>+</sup> blast cells are sequential intermediate stages in the development of both mature T-cell subsets. We speculate that repertoire selection may occur during one or both of these intermediate stages.

### MATERIALS AND METHODS

**Mice.** Three- to six-week-old C57BL/Ka (*Thy-1.2 Ly-5.1*), C57BL/Ka BA (*Thy-1.1 Ly-5.1*), and C57BL/6/J-Ly5.2 (*Thy-1.2 Ly-5.2*) mice were bred and maintained in our facility in the Department of Pathology.

**Purification of Thymocyte Subsets.** Sources, specificities, and fluorochrome modifications of the monoclonal antibodies used in this study are described in refs. 3 and 22. Prior to cell sorting, thymocyte suspensions were enriched for CD4<sup>+</sup> or CD4<sup>-</sup> cells by cytotoxic elimination of CD4<sup>+</sup> or CD8<sup>+</sup> cells (22). Fluorescein isothiocyanate (FITC)-conjugated 145-2C11 (anti-CD3  $\epsilon$  polypeptide) was used for separation of CD4<sup>-</sup> thymocytes into CD3<sup>-</sup> and CD3<sup>+</sup> subsets. To isolate the subset consisting of large CD4<sup>+</sup> cells, thymocytes were first enriched for large cells by unit-gravity sedimentation over a discontinuous calf serum gradient (40%, 30%, and 20% vol/vol). Fractions containing 30-60% large cells were then stained with allophycocyanin-GK1.5, biotin-53-6.7/avidin-Texas Red (TR), and FITC-145-2C11, and large CD3<sup>-/lo</sup> CD4<sup>+</sup> cells were isolated by cell sorting. Small aliquots of sorted cells were reanalyzed and were always  $\geq 98\%$  pure. Three- to six-week-old unirradiated mice were anesthetized and intrathymic injections were performed ( $1-5 \times 10^5$  cells per lobe) as described (22).

Abbreviations: FACS, fluorescence-activated cell sorter; FITC, fluorescein isothiocyanate; MHC, major histocompatibility complex; TCR, T-cell antigen receptor(s); TR, Texas Red.

\*Present address: Department of Pathology R-5, University of Miami School of Medicine, P.O. Box 016960, Miami, FL 33101.

The publication costs of this article were defrayed in part by page charge payment. This article must therefore be hereby marked "advertisement" in accordance with 18 U.S.C. §1734 solely to indicate this fact.

**Detection of Donor-Derived Thymocytes.** After staining with FITC- or biotin-conjugated 19XE5 (or 53-2.1), cell suspensions from individual thymic lobes were resuspended in Hanks' balanced salts solution (containing 10 mM Hepes, 2% calf serum, and 4 mM  $\text{NaN}_3$ ) plus 0.05–0.3 ml of paramagnetic beads (optimal volume was determined empirically for each antibody) coupled to sheep anti-FITC antibodies or avidin (Advanced Magnetics, Inc., Cambridge, MA). After magnetic separation (22, 30), thymocytes were stained (3) with biotin- or FITC-conjugated 53-6.7 and allophycocyanin-GK1.5, followed by avidin-TR. Artificial mixtures containing 0.05% Thy-1.1 thymocytes were routinely enriched 100- to 500-fold by this procedure. Cell suspensions from intrathymically injected mice contained <0.1% donor-derived cells initially and 5–25% after immunomagnetic selection. Background staining of bead-enriched control thymocyte suspensions from saline-injected mice was always <0.5%. For each thymic lobe, 500–5000 Thy-1.1<sup>+</sup> (FITC<sup>+</sup> or TR<sup>+</sup>) viable cells were analyzed for their CD8 (TR or FITC) and CD4 (allophycocyanin) phenotypes.

## RESULTS

**Developmental Potential of CD4<sup>+</sup>8<sup>-</sup> and CD4<sup>+</sup>8<sup>+</sup> Thymocytes.** Although CD4<sup>+</sup>8<sup>-</sup> and CD4<sup>+</sup>8<sup>+</sup> thymocytes phenotypically resemble mature peripheral helper and cytotoxic T cells, CD4/8 phenotype alone is not a reliable indicator of functional maturity. Some adult CD4<sup>+</sup>8<sup>+</sup> thymocytes lack alloantigen-induced cytotoxicity and, unlike peripheral CD4<sup>+</sup>8<sup>+</sup> T cells, express high levels of the J11d heat-stable antigen (31). We therefore examined the "mature" thymocyte subsets for precursor activity by using a short-term intrathymic transfer system. Sorted Thy-1.1<sup>+</sup> CD4<sup>+</sup>8<sup>-</sup> or CD4<sup>+</sup>8<sup>+</sup> thymocytes (>98% pure, Fig. 1 *a* and *b*) were injected intrathymically into unirradiated young adult *Thy-1.2* host mice. Detection of extremely small (0.01–0.1%) donor populations was facilitated by enriching for donor-derived cells with antibody- or avidin-coated paramagnetic beads (30) prior to staining with antibodies for CD4 and CD8 and three-color FACS analysis. Using this technique, we found that a substantial proportion of CD4<sup>+</sup>8<sup>+</sup> thymocytes acquired CD4 antigen by 16 hr after injection (Fig. 1*c*), whereas no detectable CD4<sup>+</sup>8<sup>+</sup> cells arose from CD4<sup>+</sup>8<sup>-</sup> donors (Fig. 1*d*). When the phenotype of donor-derived thymocytes was determined 38 hr after transfer, the proportion of CD4<sup>+</sup>8<sup>+</sup> progeny was only slightly higher than at 16 hr (34–43% vs. 21–36%, data not shown), suggesting that the differentiation was essentially completed by 16 hr. The CD4<sup>+</sup>8<sup>+</sup> progeny were probably not derived from CD4<sup>+</sup>8<sup>-</sup> contaminants, since the CD4<sup>+</sup>8<sup>-</sup> population had similar numbers of CD4<sup>+</sup>8<sup>-</sup> cells but generated very few CD4<sup>+</sup>8<sup>+</sup> thymocytes at either time point (Fig. 1 *b* and *d*; data not shown). Thus, CD4<sup>+</sup>8<sup>-</sup> cells appear to be stable in the maintenance of their phenotype, whereas CD4<sup>+</sup>8<sup>+</sup> cells include precursors for CD4<sup>+</sup>8<sup>+</sup> cells.

The observation that some, but not all, CD4<sup>+</sup>8<sup>+</sup> thymocytes converted to CD4<sup>+</sup>8<sup>+</sup> cells suggested that a subset of the CD4<sup>+</sup>8<sup>+</sup> population might contain most of this precursor activity. One candidate is the J11d<sup>hi</sup> subset, since these cells are CD3<sup>-</sup> or CD3<sup>lo</sup> blast cells (refs. 31–35; data not shown). Moreover, CD3<sup>-</sup> (and J11d<sup>hi</sup>) CD4<sup>+</sup>8<sup>+</sup> blasts first arise at day 15 of gestation, prior to the appearance of any CD4-expressing cells (data not shown), and are concentrated in the outer proliferative zone of the cortex in the adult thymus (32, 33). When adult CD4<sup>+</sup>8<sup>+</sup> thymocytes were separated into CD3<sup>hi</sup> and CD3<sup>-</sup> fractions before intrathymic injection, only the CD3<sup>-</sup> subset generated substantial numbers of CD4<sup>+</sup>8<sup>+</sup> progeny (Fig. 2*a* Lower left). In two separate experiments, 76–84% of the CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> progeny were CD4<sup>+</sup>8<sup>+</sup> at 16 hr postinjection. CD3<sup>hi</sup>4<sup>+</sup>8<sup>+</sup> donor cells produced very small numbers of CD4<sup>+</sup>8<sup>+</sup> cells (Fig. 2*a* Lower right), but these

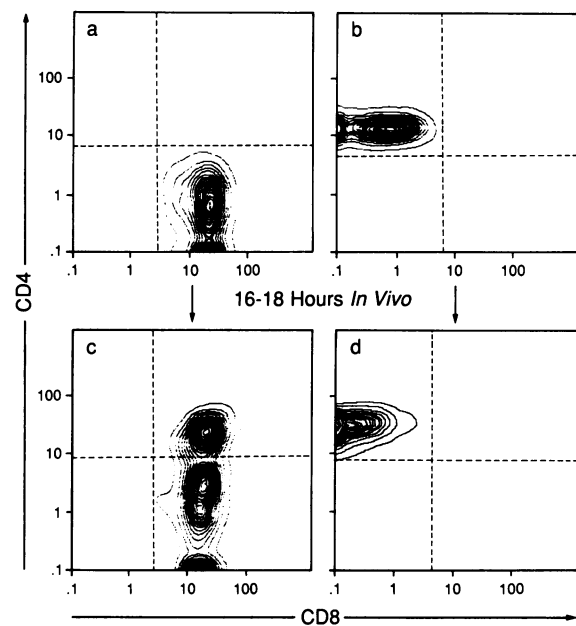


FIG. 1. Short-term developmental fate of CD4<sup>+</sup>8<sup>-</sup> and CD4<sup>+</sup>8<sup>+</sup> thymocytes after intrathymic injection. (Upper) CD4 and CD8 expression on sorted CD4<sup>+</sup>8<sup>-</sup> (*a*) and CD4<sup>+</sup>8<sup>+</sup> (*b*) populations prior to intrathymic injection. In both cases, contaminants (CD4<sup>+</sup>8<sup>-</sup>) were  $\leq 1\%$ . (Lower) Representative profiles of CD4 and CD8 expression on C57BL/Ka BA (*Thy-1.1*) CD4<sup>+</sup>8<sup>+</sup> (*c*) and CD4<sup>+</sup>8<sup>-</sup> (*d*) donor cells 16 hr after intrathymic injection into unirradiated C57BL/Ka (*Thy-1.2*) mice. Dotted lines show the quadrants used to define the CD4<sup>+</sup>8<sup>-</sup> (lower left), CD4<sup>+</sup>8<sup>+</sup> (lower right), CD4<sup>+</sup>8<sup>+</sup> (upper right), and CD4<sup>+</sup>8<sup>-</sup> (upper left) subsets: (*c*) CD4<sup>+</sup>8<sup>+</sup>, 21–36%; CD4<sup>+</sup>8<sup>-</sup>, 63–79%; others, <1%; (*d*) CD4<sup>+</sup>8<sup>+</sup>, 2–3%; CD4<sup>+</sup>8<sup>-</sup>, 97–98%; others, <1%.

may have been derived from the 2–3% contaminating CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> cells. To determine whether the CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> subset also contained precursors for CD4<sup>+</sup>8<sup>+</sup> thymocytes, we examined their developmental fate at a later time point. Interestingly, by 3.5 days postinjection, CD4<sup>+</sup>8<sup>-</sup> (14–20%) progeny appeared (Fig. 2*b* Lower) from CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> precursors. The CD4<sup>+</sup>8<sup>-</sup> progeny (5–10%) may have represented expansion of CD4<sup>+</sup>8<sup>-</sup> contaminants and were not seen in later experiments. However, it is unlikely that the CD4<sup>+</sup>8<sup>-</sup> progeny were derived from contaminating CD4<sup>+</sup>8<sup>-</sup> thymocytes, since at this time point, very few CD4<sup>+</sup>8<sup>-</sup> progeny were detectable from CD4<sup>+</sup>8<sup>-</sup> donor cells (Fig. 2*b* Upper).

Phenotypic examination of the donor-derived cells 16 hr after injection revealed that the CD3<sup>hi</sup>4<sup>+</sup>8<sup>+</sup> cells retained high levels of CD3 (Table 1). In contrast, CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> thymocytes gave rise to a small proportion of CD3<sup>hi</sup> progeny at 16 hr, and a higher proportion by 88 hr. Of the CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> progeny that were CD4<sup>+</sup>8<sup>+</sup> at 16 hr, 8–12% became CD3<sup>hi</sup> (Table 1). Similar to CD4<sup>+</sup>8<sup>+</sup> cells in the unmanipulated thymus (19, 20), CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup>-derived CD4<sup>+</sup>8<sup>+</sup> progeny included CD3<sup>-</sup>, CD3<sup>lo</sup>, and CD3<sup>hi</sup> subsets (Table 1). At 88 hr postinjection, none of the CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup>-derived CD4<sup>+</sup>8<sup>-</sup> cells were CD3<sup>hi</sup>, but 40–50% of the CD4<sup>+</sup>8<sup>-</sup> progeny expressed high levels of the CD3–TCR complex, and the remainder were CD3<sup>lo</sup> (Table 1). High-level expression of CD3–TCR by some CD4<sup>+</sup>8<sup>-</sup> and CD4<sup>+</sup>8<sup>+</sup> progeny of CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> cells suggests that they may be functionally mature.

**Developmental Potential of CD4<sup>+</sup>8<sup>+</sup> Thymocyte Subsets.** The sequential appearance of CD4<sup>+</sup>8<sup>+</sup> and mature CD4<sup>+</sup>8<sup>-</sup> and CD4<sup>+</sup>8<sup>+</sup> thymocytes during ontogeny and after intrathymic injection of adult CD3<sup>-</sup>4<sup>+</sup>8<sup>+</sup> (Fig. 2) or CD4<sup>+</sup>8<sup>-</sup> (21, 22) cells is consistent with a precursor function for CD4<sup>+</sup>8<sup>+</sup> thymocytes. Although several recent studies have been interpreted to support this idea (15–17, 27, 28), direct attempts to demonstrate such a precursor–progeny relationship have been

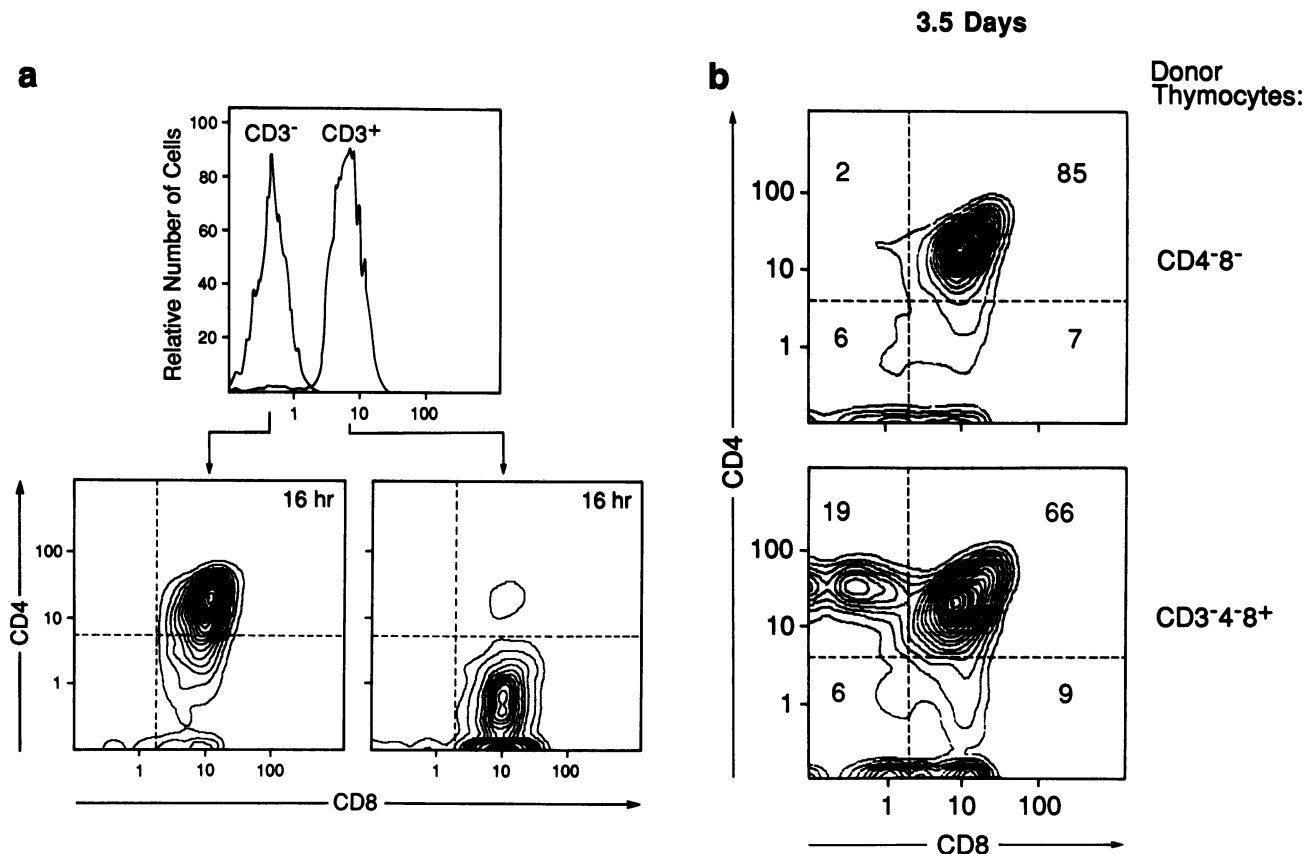


FIG. 2. Developmental potentials of CD4<sup>-</sup>8<sup>+</sup> thymocyte subsets. (a) CD3 profiles of sorted CD3<sup>hi</sup> (CD3<sup>+</sup>) and CD3<sup>-</sup> CD4<sup>-</sup>8<sup>+</sup> Thy-1.1<sup>+</sup> thymocytes (Upper) and representative CD4 vs. CD8 profiles on donor-derived (Thy-1.1<sup>+</sup>) cells 16 hr after intrathymic injection (Lower). The proportion of cells in each quadrant is shown in Table 1. (b) Representative CD4 vs. CD8 profiles of donor-derived thymocytes 3.5 days after intrathymic injection of CD4<sup>-</sup>8<sup>-</sup> (Upper) or CD3<sup>-</sup>4<sup>-</sup>8<sup>+</sup> (Lower) thymocytes; numbers in each quadrant indicate percentages.

unsuccessful. This apparent discrepancy can be explained if only a small subset of CD4<sup>+</sup>8<sup>+</sup> thymocytes contains precursors for mature T cells. The majority of CD4<sup>+</sup>8<sup>+</sup> thymocytes are small, postmitotic cells with a short intrathymic life-span (3–5 days) (23, 24). It is likely that these are derived from the outer cortical CD4<sup>+</sup>8<sup>+</sup> blast population (10–15% of total CD4<sup>+</sup>8<sup>+</sup> thymocytes) (36, 37). To test the developmental potential of the CD4<sup>+</sup>8<sup>+</sup> blast subset, large CD3<sup>-</sup>4<sup>-</sup>8<sup>+</sup> thymocytes (99% pure) were isolated by cell sorting and injected intrathymically into unirradiated, *Thy-1* congenic host mice. By 3.5 days after injection, donor-derived CD4<sup>-</sup>8<sup>-</sup> and

“transitional” CD4<sup>+</sup>8<sup>lo</sup> cells were evident (Fig. 3 Middle) and at higher frequencies than the CD4<sup>+</sup>8<sup>-</sup> progeny of immature CD4<sup>+</sup>8<sup>+</sup> thymocytes (Fig. 2b). At this time, CD4<sup>-</sup>8<sup>+</sup> progeny were also detected, but most of these were CD4<sup>lo</sup> rather than CD4<sup>-</sup>. By 4.5 days, the proportion of bona fide CD4<sup>-</sup>8<sup>+</sup> cells had increased. The precursor activity of CD4<sup>+</sup>8<sup>+</sup> thymocytes is confined to the blast subset; no progeny were detectable from FACS-purified small CD4<sup>+</sup>8<sup>+</sup> thymocytes 4.5 days after intrathymic injection, even when 3-fold more cells were injected per lobe (Table 2). To serve as an internal control for injection efficiency, CD4<sup>-</sup>8<sup>-</sup> cells (*Thy-1.2 Ly-5.2*) were coinjected with small CD4<sup>+</sup>8<sup>+</sup> thymocytes (*Thy-1.2 Ly-5.1*) into *Thy-1.1 Ly-5.1* hosts. In four out of four lobes, only *Ly-5.2<sup>+</sup> Thy-1.2<sup>+</sup>* progeny were detectable, confirming the absence of precursor activity in small CD4<sup>+</sup>8<sup>+</sup> thymocytes.

To assess whether the CD4<sup>+</sup>8<sup>-</sup> progeny detected 3–5 days after intrathymic injection might represent selective outgrowth of small numbers of CD4<sup>+</sup>8<sup>-</sup> contaminants, FACS-purified large CD4<sup>+</sup>8<sup>+</sup> cells (*Thy-1.2 Ly-5.1*) were mixed with FACS-purified CD4<sup>+</sup>8<sup>-</sup> thymocytes (*Thy-1.2 Ly-5.2*) at a ratio of 10:1 before intrathymic injection into *Thy-1.1 Ly-5.1* hosts. Lobes injected with the mixture of *Ly-5.1<sup>+</sup> CD4<sup>+</sup>8<sup>+</sup>* blasts and *Ly-5.2<sup>+</sup> CD4<sup>+</sup>8<sup>-</sup>* thymocytes or with *Ly-5.1<sup>+</sup> CD4<sup>+</sup>8<sup>+</sup>* blasts alone contained 16–23% *Thy-1.2<sup>+</sup> CD4<sup>+</sup>8<sup>-</sup>* progeny after 4.5 days. In both cases, 92 ± 6% were *Ly-5.1<sup>+</sup>*. Thus, even when the level of CD4<sup>+</sup>8<sup>-</sup> contaminants was 5- to 10-fold higher than the maximum (2%) in our purified CD4<sup>+</sup>8<sup>+</sup> blast populations, neither they nor their progeny were detectable.

## DISCUSSION

Interactions between MHC proteins on thymic stromal cells and the CD4, CD8, and  $\alpha\beta$  TCR molecules on T-cell precu-

Table 1. Progenitor activity of CD3<sup>hi</sup> and CD3<sup>-</sup> CD4<sup>-</sup>8<sup>+</sup> adult thymocytes

Time after injection, hr	CD4 <sup>-</sup> 8 <sup>+</sup> donor population	Phenotype of donor-derived thymocytes, % (% CD3 <sup>hi</sup> )			
		CD4 <sup>-</sup> 8 <sup>-</sup>	CD4 <sup>+</sup> 8 <sup>-</sup>	CD4 <sup>-</sup> 8 <sup>+</sup>	CD4 <sup>+</sup> 8 <sup>+</sup>
16	CD3 <sup>-</sup>	2–3 (0)	0	14–20 (8–12)	76–83 (2–5)
16	CD3 <sup>hi</sup>	2–3 (0)	0	92–94 (97–98)	3–5 (<1)
88	CD3 <sup>-</sup>	5–10 (0)	14–20 (40–50)	7–12 (35–50)	59–72 (3–5)

Percentages shown are the ranges observed for each group. Donor cells were analyzed for CD4 vs. CD3, CD8 vs. CD3, and CD4 plus CD8 vs. CD3 expression to allow calculation of the percentage of CD3<sup>hi</sup> and CD3<sup>lo</sup> cells within each CD4/8 subset (% CD3<sup>hi</sup> is given in parentheses). CD3<sup>-</sup>4<sup>-</sup>8<sup>+</sup>-derived CD4<sup>+</sup>8<sup>+</sup> cells included 18–23% and 30–40% CD3<sup>lo</sup> cells at 16 and 88 hr postinjection, respectively. Fifty to 60% of CD3<sup>-</sup>4<sup>-</sup>8<sup>+</sup>-derived CD4<sup>+</sup>8<sup>-</sup> thymocytes were CD3<sup>lo</sup> 88 hr after injection.

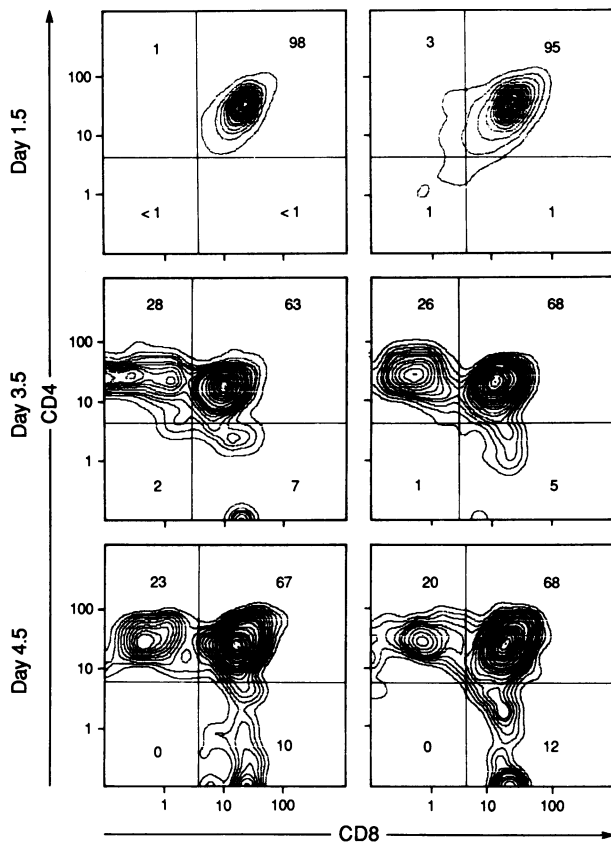


Fig. 3. Developmental potential of large CD4<sup>+</sup>8<sup>+</sup> thymocytes. Representative CD4 vs. CD8 profiles of donor-derived thymocytes in two individual lobes analyzed 1.5, 3.5, and 4.5 days after intrathymic injection into unirradiated hosts. Numbers in each quadrant indicate percentages. Cells injected were 99% CD4<sup>+</sup>8<sup>+</sup> and 80% large. Similar results were obtained in three different experiments.

sors are critical aspects of the intrathymic selection events that appear to shape the mature T-cell recognition repertoire (9–17). Delineation of the precursor–progeny relationships among thymocyte populations expressing different subsets of these molecules is required in order to define maturational stages during which repertoire selection might operate. We have attempted to resolve thymocyte lineage relationships by examining the short-term developmental potentials of FACS-purified normal thymocyte subsets in the unirradiated thymic microenvironment. Our results identify subsets of CD4<sup>+</sup>8<sup>+</sup> and CD4<sup>+</sup>8<sup>+</sup> thymocytes as sequential intermediate stages during intrathymic development of T lymphocytes from CD4<sup>+</sup>8<sup>+</sup> precursors and provide direct evidence in favor of the maturation pathway outlined in Fig. 4. Though our data

Table 2. Precursor activity in CD4<sup>+</sup>8<sup>+</sup> subsets

Donor cells ( <i>Thy-1.2</i> )		Thy-1.2 <sup>+</sup> , % (Ly-5.2/ <i>Thy-1.2</i> )
<i>Ly-5.1</i>	<i>Ly-5.2</i>	
0	0	<0.5
3 × 10 <sup>5</sup> large CD4 <sup>+</sup> 8 <sup>+</sup>	0	5 ± 2*
3 × 10 <sup>5</sup> small CD4 <sup>+</sup> 8 <sup>+</sup>	0	<0.5
1 × 10 <sup>6</sup> small CD4 <sup>+</sup> 8 <sup>+</sup>	0	<0.5
3 × 10 <sup>5</sup> small CD4 <sup>+</sup> 8 <sup>+</sup>	3 × 10 <sup>5</sup> CD4 <sup>+</sup> 8 <sup>+</sup>	53 ± 18* (0.98)

Four and one-half days after intrathymic injection of unirradiated host mice (*Thy-1.1 Ly-5.1*) with the indicated subset(s), cell suspensions from individual thymic lobes were immunomagnetically enriched for Thy-1.2<sup>+</sup> cells and analyzed for their Ly-5 (FITC) phenotype by two-color flow cytometry. (Ly-5.2/*Thy-1.2* ratio is shown in parentheses.)

\*Mean ± SD.

pertain primarily to T-cell production in the adult thymus, the results are consistent with the appearance of these subsets during fetal life (refs. 4 and 5 and data not shown).

The earliest progeny of CD4<sup>+</sup>8<sup>+</sup> progenitors in the adult and fetal thymus are CD4<sup>+</sup>8<sup>+</sup> cells (unpublished observations). Consistent with the immature cell surface phenotype, cell cycle status, and intrathymic location (31–35) of TCR<sup>hi</sup> (J11d<sup>hi</sup>) CD4<sup>+</sup>8<sup>+</sup> thymocytes, our data identify these cells as intrathymic progenitors (Fig. 2). This is a transient developmental stage; within 16 hr, the majority of these CD4<sup>+</sup>8<sup>+</sup> blasts acquire CD4 (Fig. 2a). TCR<sup>hi</sup> CD4<sup>+</sup>8<sup>+</sup> blasts may have already received signals from the thymic microenvironment necessary for transcriptional activation of the CD4 gene, since some rat and murine CD4<sup>+</sup>8<sup>+</sup> thymocytes express surface CD4 after overnight culture in the absence of the thymic microenvironment (32, 34).

CD4<sup>+</sup>8<sup>+</sup> blasts represent a second intermediate stage during intrathymic T-cell maturation (Fig. 3). Our data suggest that progeny of these cells have at least three possible developmental fates (Fig. 4). The majority become small CD4<sup>+</sup>8<sup>+</sup> thymocytes that are destined for intrathymic death (Table 2). Alternatively, CD4<sup>+</sup>8<sup>+</sup> blasts can develop into CD4<sup>+</sup>8<sup>+</sup> or CD4<sup>+</sup>8<sup>+</sup> thymocytes (Fig. 3) that express mature levels of TCR (data not shown). Based on recent experiments showing that most CD4<sup>+</sup>8<sup>+</sup> blasts express very low levels of surface TCR (C.J.G., J. S. Danska, C. G. Fathman, and I.L.W., unpublished data), we propose that the specificity of the TCR expressed at this early maturational stage determines the cells' subsequent developmental fate due to TCR-mediated positive and/or negative selective events. The frequency with which CD4<sup>+</sup>8<sup>+</sup> blast cells give rise to mature thymocytes appears to be low, since no more than 30–35% of donor-derived cells were phenotypically mature 3.5 or 4.5 days after injection. Given that small CD4<sup>+</sup>8<sup>+</sup> progeny have short life-spans, and the probability that mature progeny soon emigrate to peripheral lymphoid tissues, it is difficult to determine the true relative frequencies of the three types of progeny. The absolute number of mature T cells that develop from a given number of CD4<sup>+</sup>8<sup>+</sup> blasts could not be determined, since no internal control for injection efficiency was included.

Our data do not prove that all mature T cells pass through a CD4<sup>+</sup>8<sup>+</sup> intermediate stage or that all CD4<sup>+</sup>8<sup>+</sup> blasts arise from CD4<sup>+</sup>8<sup>+</sup> precursors. The appearance of small numbers of phenotypically mature CD3<sup>hi</sup>4<sup>+</sup>8<sup>+</sup> progeny from intrathymically injected CD3<sup>+</sup>4<sup>+</sup>8<sup>+</sup> blasts within 16 hr (Table 1) suggests that cells at this maturational stage might have two possible developmental fates (Fig. 4). In both the rat and the mouse, some CD4<sup>+</sup>8<sup>+</sup> precursors express low levels of αβ TCR (ref. 35 and data not shown); therefore they could be subject to selective processes that induce those with appropriate TCR to become CD3<sup>hi</sup> while remaining CD4<sup>+</sup>. Indeed, TCR crosslinking prevents rat CD4<sup>+</sup>8<sup>+</sup> thymocytes from differentiating into CD4<sup>+</sup>8<sup>+</sup> cells *in vitro* (35). Alternatively, the CD3<sup>hi</sup>4<sup>+</sup>8<sup>+</sup> progeny present at 16 hr may have already passed through a CD4<sup>+</sup>8<sup>+</sup> intermediate stage. At present, we cannot distinguish between these two possibilities.

The existence of CD8<sup>+</sup> intrathymic precursors for mature T cells has been suggested by several recent studies, but the CD8<sup>+</sup> subset (CD3<sup>+</sup>4<sup>+</sup>8<sup>+</sup>, CD3<sup>+</sup>4<sup>+</sup>8<sup>+</sup>, or CD4<sup>+</sup>8<sup>+</sup>) was not identified. Nikolic-Zugic and Bevan (39) reported that CD4<sup>+</sup>8<sup>+</sup> thymocytes obtained by panning (88–90% pure) gave rise to CD4<sup>+</sup>8<sup>+</sup> thymocytes 1–2 weeks after intrathymic injection into lethally irradiated hosts. Smith (15) showed that chronic administration of anti-CD8 monoclonal antibody to mice following lethal irradiation and bone marrow reconstitution significantly inhibited the development of splenic CD4<sup>+</sup>8<sup>+</sup> T cells. Similar experimental systems have been used to determine the effect of anti-CD4 antibody on the intrathymic maturation of CD4<sup>+</sup>8<sup>+</sup> T cells bearing V<sub>β6</sub><sup>+</sup> or

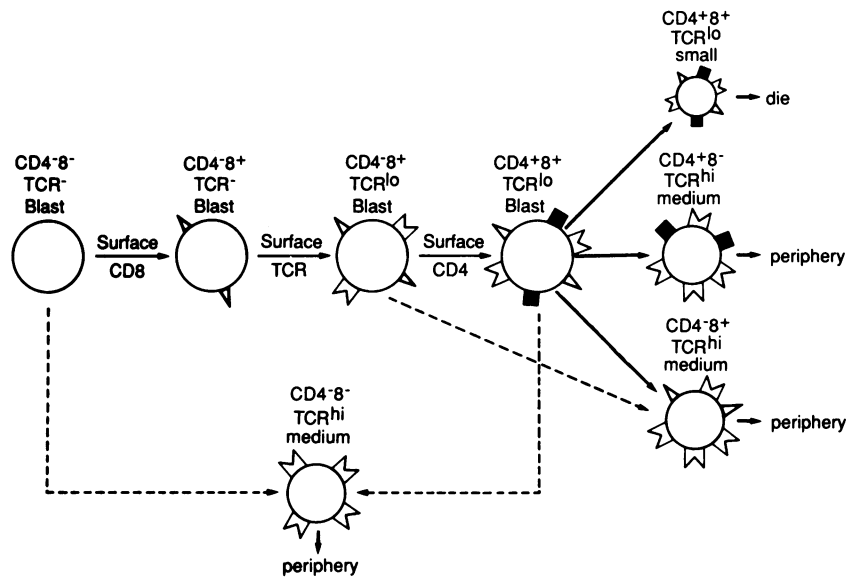


FIG. 4. Lineage relationships among thymocyte subsets. Data presented in Figs. 1–3 suggest this maturation scheme for  $\alpha\beta$  TCR-bearing  $CD4^+8^-$  and  $CD4^+8^+$  T lymphocytes. Solid lines indicate demonstrated precursor–progeny relationships, and dotted lines indicate additional possibilities for which there is no direct evidence as yet. The  $TCR^hi$   $CD4^+8^-$  subset includes cells bearing  $\gamma\delta$  and  $\alpha\beta$  receptors.  $TCR^hi$   $CD4^+8^-$  ( $\alpha\beta$ ) cells appear late in fetal life and are derived from  $TCR^-$   $CD4^+8^-$  progenitors (22, 38), but their maturation sequence has not been defined.

$V_{\beta 17a}^+$  TCR (16, 17). This approach is indirect in that the putative precursor cells cannot be isolated or identified, and it is possible that  $CD4^+8^+$  cells were artificially created from  $TCR^hi$   $CD4^+8^+$  thymocytes (20) by antibody-induced modulation of CD4 or some other indirect mechanism. Further, this experimentally induced transition does not appear to reflect normal development, since the majority of  $CD4^+8^+$  thymocytes, even those normally destined for intrathymic death, decrease CD4 and increase CD3 in response to anti-CD4 (40). Studies of thymic maturation in mice made transgenic for a self-reactive  $\alpha\beta$  TCR have also provided evidence that mature T cells develop from  $CD4^+8^+$  precursors (27, 28). However, circumvention of early developmental events by the use of rearranged  $\alpha$  and  $\beta$  transgenes could cause maturational aberrations due to developmentally deregulated TCR expression. For example, if the immature  $CD4^+8^-$  and  $CD4^+8^+$  progenitors in the transgenic animals express higher than normal levels of TCR, they could be subjected prematurely to signals for selection, differentiation, and emigration. Thus, development of the downstream  $CD4^+8^+$  and  $CD4^+8^-$  cells would be prevented, potentially explaining the greatly increased frequencies of  $\alpha\beta$ - $TCR^hi$   $CD4^+8^-$  and  $CD4^+8^+$  peripheral T cells in these transgenic mice. The identification and purification of bipotential  $CD4^+8^+$  precursors for mature  $CD4^+8^-$  and  $CD4^+8^+$  T cells from normal animals should enable direct studies of the repertoire selection process *in vivo*, using the intrathymic transfer technique, and *in vitro*, using cloned thymic stromal cells.

We thank Drs. D. Ingolia, L. Smith, and J. Danska for reading the manuscript and Dr. S. Heimfeld for advice regarding immunomagnetic separation of cells. C.J.G. is supported by a postdoctoral fellowship from the Medical Research Council of Canada and by an Independent Research Allowance from the Alberta Heritage Foundation for Medical Research. This research was supported by grants from the U.S. Public Health Service (B.A. and I.L.W.) and the Weingart Foundation (I.L.W.).

1. Metcalf, D. & Moore, M. A. S. (1971) in *Hemopoietic Cells*, eds. Neuberger, A. & Tatum, E. L. (North-Holland, Amsterdam), pp. 172–180.
2. Cantor, H. & Weissman, I. L. (1976) *Prog. Allergy* **20**, 1–64.
3. Spangrude, G. J., Muller-Sieburg, C. E., Heimfeld, S. & Weissman, I. L. (1988) *J. Exp. Med.* **167**, 1671–1683.
4. Adkins, B., Mueller, C., Okada, C., Reichert, R. A., Weissman, I. L. & Spangrude, G. J. (1987) *Annu. Rev. Immunol.* **5**, 325–365.
5. von Boehmer, H. (1988) *Annu. Rev. Immunol.* **6**, 309–326.
6. Marrack, P. & Kappler, J. (1987) *Science* **238**, 1073–1079.
7. Fink, P. J. & Bevan, M. J. (1978) *J. Exp. Med.* **148**, 766–775.
8. Zinkernagel, R. M., Callahan, G. N., Althage, A., Cooper, S., Klein, P. A. & Klein, J. (1978) *J. Exp. Med.* **147**, 882–896.

9. MacDonald, H. R., Lees, R. K., Schneider, R., Zinkernagel, R. M. & Hengartner, H. (1988) *Nature (London)* **336**, 471–475.
10. Zuniga-Pflucker, J. C., Longo, D. L. & Kruisbeek, A. M. (1989) *Nature (London)* **338**, 76–78.
11. Kappler, J. W., Roehm, N. & Marrack, P. (1987) *Cell* **49**, 263–271.
12. McDuffie, M., Born, W., Marrack, P. & Kappler, J. (1986) *Proc. Natl. Acad. Sci. USA* **83**, 8728–8732.
13. Kruisbeek, A. M., Fultz, M. J., Sharrow, S. O., Singer, A. & Mond, J. J. (1983) *J. Exp. Med.* **157**, 1932–1946.
14. Marusic-Galesic, S., Stephany, D. A., Longo, D. L. & Kruisbeek, A. M. (1988) *Nature (London)* **333**, 180–183.
15. Smith, L. (1987) *Nature (London)* **326**, 798–800.
16. Fowlkes, B. J., Schwartz, R. H. & Pardoll, D. M. (1988) *Nature (London)* **334**, 620–623.
17. MacDonald, H. R., Hengartner, H. & Pedrazzini, T. (1988) *Nature (London)* **335**, 174–176.
18. Roehm, N., Herron, L., Cambier, J., DiGuisto, D., Haskins, K., Kappler, J. & Marrack, P. (1984) *Cell* **38**, 577–584.
19. Lanier, L. L., Allison, J. P. & Phillips, J. H. (1986) *J. Immunol.* **137**, 2501–2507.
20. Havran, W. L., Poenie, M., Kimura, J., Tsien, R., Weiss, A. & Allison, J. P. (1987) *Nature (London)* **330**, 170–173.
21. Crispe, I. N., Moore, M. W., Husmann, L. A., Smith, L., Bevan, M. J. & Shimonkevitz, R. P. (1987) *Nature (London)* **329**, 336–339.
22. Guidos, C. J., Weissman, I. L. & Adkins, B. (1989) *J. Immunol.* **142**, 3773–3780.
23. McPhee, D., Pye, S. & Shortman, K. (1979) *Thymus* **1**, 151–162.
24. Scollay, R., Butcher, E. & Weissman, I. L. (1980) *Eur. J. Immunol.* **10**, 210–218.
25. Shortman, K. & Scollay, R. (1984) in *Recognition and Regulation in Cell-Mediated Immunity*, eds. Watson, J. D. & Marbrook, J. (Dekker, New York), pp. 31–60.
26. Husmann, L. A., Crispe, I. N., Shimonkevitz, R. P. & Bevan, M. J. (1987) *J. Cell. Biochem. Suppl.* **11D**, 231.
27. Kisielow, P., Bluthman, H., Staerz, U. D., Steinmetz, M. & von Boehmer, H. (1988) *Nature (London)* **333**, 742–746.
28. Sha, W. C., Nelson, C. A., Newberry, R. D., Kranz, D. M., Russell, J. H. & Loh, D. Y. (1988) *Nature (London)* **335**, 271–274.
29. Amagai, T., Kina, T., Hirokawa, K., Nishikawa, S., Imanishi, J. & Katsura, Y. (1987) *J. Immunol.* **139**, 358–364.
30. Spangrude, G. J., Heimfeld, S. & Weissman, I. L. (1988) *Science* **241**, 58–62.
31. Crispe, I. N. & Bevan, M. J. (1987) *J. Immunol.* **138**, 2013–2018.
32. Paterson, D. J. & Williams, A. F. (1987) *J. Exp. Med.* **166**, 1603–1608.
33. Shortman, K., Wilson, A., Egerton, M., Pearse, M. & Scollay, R. (1988) *Cell. Immunol.* **113**, 462–479.
34. MacDonald, H. R., Budd, R. C. & Howe, R. C. (1988) *Eur. J. Immunol.* **18**, 519–523.
35. Hunig, T. (1988) *Eur. J. Immunol.* **18**, 2089–2092.
36. Weissman, I. L. (1967) *J. Exp. Med.* **126**, 291–304.
37. Weissman, I. L., Small, M., Fathman, C. G. & Herzenberg, L. A. (1975) *Proc. Fed. Am. Soc. Exp. Biol.* **34**, 141–144.
38. Fowlkes, B. J., Kruisbeek, A. M., Ton-That, H., Weston, M. A., Coligan, J. E., Schwartz, R. H. & Pardoll, D. M. (1987) *Nature (London)* **329**, 251–254.
39. Nikoloz-Zugic, J. & Bevan, M. J. (1988) *Proc. Natl. Acad. Sci. USA* **85**, 8633–8637.
40. McCarthy, S. A., Kruisbeek, A. M., Uppenkamp, I. K., Sharrow, S. O. & Singer, A. (1988) *Nature (London)* **336**, 76–79.