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Thyroid stimulating hormone β -subunit splice variant is expressed in all fractional subsets of bone marrow hematopoietic cells and peripheral blood leukocytes and is modulated during bacterial infection

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Abstract

Thyroid stimulating hormone (TSH), a hormone produced in the anterior pituitary, is used to regulate thyroid hormone secretion. It has been known for over three decades that TSH is made by the cells of the immune system; however, the functional role of immune system TSH is unclear. We previously demonstrated that an alternatively-spliced isoform of TSH β , referred to as the TSH β splice variant (TSH β v), is the primary form of TSH β made by hematopoietic cells in mice and humans. Most studies have linked TSH β v expression to myeloid cells of the immune system; however, it has recently been demonstrated that plasma cells in patients with Hashimoto's thyroiditis may be a source of immune system TSH β v. Here, we demonstrate that TSH β v is expressed in bone marrow precursors of lymphoid cells, monocytes, and granulocytes, as well as in mesenteric lymph node (MLN) cells. Plasma cells generated by in vitro culture with bacterial lipopolysaccharide (LPS), and MLN cells from mice infected with *L. monocytogenes* expressed TSH β v. There was an increase in the intensity of intracellular TSH β v expression in MLN cells following exposure to LPS, and in the proportion of TSH β v⁺ CD138⁺ MLN cells following *L. monocytogenes* infection. The number of TSH β v⁺ cells increased in MLN cells, particularly among CD138⁺ cells, following bacterial infection. This was confirmed by an increase in gene expression of BLIMP-1, the transcription factor for CD138, following infection. Levels of circulating thyroxine dropped significantly in mice 24 hrs post-infection. These findings suggest that immune system TSH β v may contribute to the host immune response during bacterial infection.

Keywords

bacterial infection; bone marrow; leukocyte; pituitary hormone; thyroid

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Author's Contributions

JRK, conceptual design; AW and HNP, executed experiments.

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Declarations of Interest: None

1. Introduction

Thyroid stimulating hormone (TSH), a glycoprotein hormone produced by the anterior pituitary in the hypothalamus-pituitary-thyroid (HPT) axis, consists of an α -subunit and a β -subunit. Hormone specificity is determined by TSH β , which in mice is coded for by exons 4 and 5 of the TSH β gene (Gordon et al., 1988). Upon stimulation by thyrotropin releasing hormone from the hypothalamus, TSH is released into the circulation and binds to TSH receptors on thyroid follicular cells, causing the release of triiodothyronine (T3) and thyroxine (T4). T4 is converted into T3, the more biologically active form of thyroid hormone, at the cellular level.

It has been known for over three decades that TSH is produced by peripheral blood leukocytes (PBL) (Harbour et al., 1989; Kruger et al., 1989; Smith et al., 1983) and bone marrow (BM) hematopoietic cells (Vincent et al., 2009). Studies in our laboratory identified an alternatively-spliced variant of TSH β (TSH β v), and demonstrated that this is the primary form of TSH β made by BM cells and PBL in mice and humans (Schaefer and Klein, 2009; Vincent et al., 2009). TSH β v is unique in that in mice the polypeptide is coded for only by exon 5. Exon 4, which is used by the native form of TSH β , is deleted by alternative splicing (Klein, 2019). Uniquely, the 3' end of intron 4 is used to code for the TSH β v signal peptide (Baliram et al., 2013; Baliram et al., 2016; Vincent et al., 2009). A molecule similar to mouse TSH β v has been identified in human leukocytes, as well as across many different species, and has been linked to Hashimoto's thyroiditis (HT) and thyroid tissue destruction (Liu et al., 2012; Liu et al., 2019; Liu et al., 2015; Schaefer and Klein, 2009).

What remains unclear is how TSH β v contributes functionally to the overall health and disease of the organism. Although it might be a factor in the initiation and/or perpetuation of autoimmune thyroiditis, as suggested above, it may also have a role in microregulating the overall metabolic response of the host by altering thyroid hormone output independently of TSH produced by the HPT axis. This could occur by competitive binding of TSH β v for TSH receptors in the thyroid, either under normal homeostatic conditions or during times of immune stress (Bagriacik et al., 2001; Baliram et al., 2017; Klein, 2006; Schaefer and Klein, 2011). There is now accumulating evidence for the latter in both humans and mice (Liu et al., 2019; Montufar-Solis and Klein, 2016).

Several studies have reported TSH β v to be primarily produced by cells of the macrophage/monocyte lineages in BM and PBL (Baliram et al., 2016; Montufar-Solis and Klein, 2016). In humans, TSH β v also has been reported to be produced by plasma cells in the thyroid of patients with HT (Liu et al., 2015). In an effort to reconcile those differences, we reexamined the expression of TSH β v in mouse BM cells and mesenteric lymph node (MLN) cells as a source of PBL, using a monoclonal antibody made in our laboratory to region of TSH β coded for by exon 5. As shown here, we observed high-level expression of TSH β v in BM T cell and B cell precursors and MLN cells. Moreover, expression of TSH β v increased in T cells and B cells following three days of systemic infection with *L. monocytogenes*. These findings collectively suggest that TSH β v produced by peripheral lymphoid cells may be part of the host immune defense mechanism during bacterial infection.

2. Materials and methods

2.1 Mice, cell lines, and cell isolations

Adult female C57BL/6 mice, 24 weeks of age, purchased from Harlan (Indianapolis, IN), were used. Animals were used in accordance with The University of Texas Health Science Center at Houston Institutional Animal Welfare Committee permit No. HSC-AWC-18-0012. For BM cell recovery, mice were euthanized and BM cells were flushed from right and left femurs. MLN cells were used as a source of peripheral leukocytes. Cell lines were the mouse AM alveolar macrophage cells line, provided by Dr. Chinnaswamy Jagannath, Department of Pathology, The University of Texas Health Science Center at Houston. EL4 mouse T cell thymoma cells (TIB-39) were purchased from American Type Culture Collection, Manassas, VA. Peripheral leukocytes were isolated as described elsewhere (Montufar-Solis and Klein, 2016).

2.2 Bacteria and infection

Animals were infected by i.p. injection of 1.0×10^9 colony forming units (CFU) *L. monocytogenes*, a dose we have previously used in mice (Montufar-Solis and Klein, 2016). Studies by others have demonstrated that C57BL/6 mice are more resistant to infection than most other strains (Cheers et al., 1978), and that i.p. infection is usually done in the range of 10^6 - 10^9 CFU (Kernbauer et al., 2013; Lindback et al., 2011). To alleviate pain from bacterial infection, mice are treated with buprenorphine, 0.05 – 0.1 mg/kg body weight given i.p. 2-3 times per day as needed. In the present study, treatment was deemed not to be necessary during the three days of infection.

2.3 Antibodies, flow cytometry, ELISA assay, and real-time PCR

Immunoprofiling of cells was done with the following antibodies: PE-anti-CD3 (145-201), PE-anti-CD19 (1D3) (Tonbo Bioscience, San Diego, CA), PE-CD138 (281-2) (BD Pharmingen, San Diego, CA), anti-TSH β (1B11), streptavidin-APC and isotype control antibodies (eBioscience, San Diego, CA). 1B11 anti-mouse TSH β monoclonal antibody was made and biotinylated in our laboratory (Zhou et al., 2002). 1B11 is reactive to a 12 amino acid peptide (SDSIHEAVRTNY) coded for by exon 5 and located in the C-terminus end of the mouse TSH β protein (Zhou et al., 2002). Using a Fasta peptide homology search program, only sequences of TSH β in a number of other species (mouse, rat, human, dog, pig, bovine, chicken horse, llama, hamster, and opossum) were identified, this indicating that the likelihood of off-target relativities is extremely low.

One-color surface staining of BM and MLN cells was achieved by first reacting cells with anti-CD16/CD32 as a blocker of Fc-receptor reactivity followed by washing and reacting with a PE-labeled antibody. For intracellular staining, cells were stained for surface expression using a PE-labeled primary antibody (anti-CD3, anti-CD19, or anti-CD138). Cell membranes were permeabilized for 20 min at 4°C with cytofix/cytoperm (BD Bioscience, San Diego, CA), washed with permwash (BD Biosciences, San Jose, CA), reacted with biotinylated 1B11 at 4°C for 30 min, washed with permwash, and reacted at 4°C for 15 min with streptavidin-APC. Fluorescence was determined on a FACSCalibur flow cytometer with Cell-Quest software (BD Biosciences).

Circulating T4 levels were measured in a mouse thyroxine T4 ELISA kit (Mybioscience; San Diego, CA) using blood collected from the heart after euthanasia.

Real-time PCR was done as previously described (Montufar-Solis and Klein, 2016). Primer sets were:

CD138	Forward: 5' CTCAGAGCCTTTTGGACAGG 3' Reverse: 5' ATCCGGTACAGCATGAAAGC 3'
BLIMP-1	Forward: 5' AAGTGTGCCAGTGTACAA 3' Reverse: 5' CTGCATTGTCGCTGATGTCG 3'
CD19	Forward: 5' GGGACCTGGACTGTGACCTA 3' Reverse: 5' GGGCACATACAGGCTTTGTT 3'

3. Results

3.1 All major populations of bone marrow hematopoietic cells express TSH β v

BM hematopoietic cells consist of all of the progenitors of peripheral leukocytes. Developing monocytes, granulocytes, and lymphoid cells are present in the BM (Loken et al., 1987; Terstappen et al., 1992). Those populations can be distinguished by flow cytometry according to cell size, forward scatter (FCS), and granularity, side scatter (SSC). This is shown in Fig. 1 A, which includes a lymphoid precursor subset with relative small size and low granularity (Fig. 1A, gate 1), a monocyte precursor subset with larger size and mid-level granularity (Fig. 1A, gate 2), and a granulocyte precursor subset with medium cell size and high granularity (Fig. 1A, gate 3).

The majority of the cells in the lymphoid precursor population expressed TSH β v (Fig. 1B). Some but not all monocyte and granulocyte precursors expressed TSH β v (Fig. 1C–D). This was confirmed for lymphoid cell precursors stained for CD3 expression as a marker of T cell, which consisted of cells with high CD3 expression and cells with low CD3 expression (Fig. 1E). Despite the difference in CD3 expression, cells in both groups expressed equivalent levels of intracellular TSH β expression as determined by mean fluorescence intensity (mfi) (Fig. 1F). Similarly, BM CD19 precursors consisted of cells with high and low CD19 expression (Fig. 1G). CD19^{hi} cells expressed less intracellular TSH β v than CD19^{lo} cells based on mfi (Fig. 1H).

3.2 Lymphocytes, monocytes, and granulocytes in MLNs express TSH β v

PBL in MLNs were stained for TSH β v expression. Similar to BM cells, MLN cells were defined according to three cell subsets based on cell size and granularity (Fig. 2A). The majority of cells in all three groups expressed TSH β v (Fig. 2B–D); the mfi of intracellular TSH β v expression is shown within the histograms. TSH β v is expressed in the majority of MLN CD3⁺ T cells (Fig. 2E) and CD19⁺ B cells (Fig. 2F), thus demonstrating that lymphoid cells and myeloid cells (monocytes and granulocytes) are sources of TSH β . That finding was further confirmed for T cells using the murine EL4 T cell line, which expressed surface CD3 (Fig. 2G) and also expressed intracellular TSH β v (Fig. 2H). Both the AM macrophage cells

line (Fig. 2I) and the EL4 T cell line (Fig. 2J) expressed TRHR and TSH β v genes, but did not express the gene for full-length native TSH β .

It was recently reported that plasma cells, a terminally-differentiated population of B cells, are a source of TSH β v (Liu et al., 2015). We stained MLN cells from normal mice for CD138, a marker of plasma cells, and for intracellular TSH β v expression. There were few plasma cells among lymphoid MLNs (Fig. 2K). However, proportionally more CD138⁺ cells were present in the cell population located in gate 2 (Fig. 2L) and gate 3 (Fig. 2M). This is consistent with the fact that B cells become larger and more granular once they have differentiated into plasma cells.

3.3 LPS stimulation of MLN cells alters the expression of TSH β v

Based on the findings of others (Liu et al., 2015), we sought to determine whether there was an increase in the numbers of CD138⁺ plasma cells and/or intracellular TSH β v expression in MLN cells after culture with *E. coli* LPS. As seen in Fig. 3, no differences were observed in the expression of CD138 between non-stimulated cells in the lymphocyte, monocyte, or granulocyte populations (Fig. 3B, D, and F) compared to LPS-stimulated cells (Fig. 3I, K, and M). However, the levels of intracellular TSH β v expression increased in all three cell populations following exposure to LPS as seen by an increase in mfi of LPS-stimulated cells (Fig. 3J, L, and N) compared to non-stimulated cells (Fig. 3C, E, and G). A partial exception to this was the bimodal expression of TSH β v in the granulocyte population of LPS-stimulated cells (Fig. 3N), which consisted of a subset of cells with a lower mfi than non-LPS-stimulated cells, and a subset with a higher mfi than non-LPS-stimulated cells. The reason for this is currently unclear; however, it is possible that the downward shift in intracellular TSH β v in LPS-stimulated granulocytes reflects the secretion of TSH β v following LPS stimulation.

3.4 Bacterial infection results in an increase in TSH β v expression in MLN cells

Mice were infected with 1.0×10^9 CFU *L. monocytogenes* by i.p. infection. Three days later, MLN cells were recovered and stained for surface expression of CD138 and intracellular TSH β v expression. No increase in TSH β v was observed in CD138⁺ MLN lymphocytes in *L. monocytogenes*-infected mice (Fig. 4H) compared to non-infected mice (Fig. 4B). However, there was an increase in CD138⁺, TSH β v⁺ cells located in gate 2 (Fig. 4I) and gate 3 (Fig. 4J) of infected mice compared to non-infected mice (Fig. 4C and D). CD138⁺ cells with those physical characteristics are likely to be plasma cells given that B cells increase in both size and granularity following differentiation into plasma cells.

To further examine the expression of TSH β v in lymphocytes in *L. monocytogenes*-infected and non-infected mice, we stained MLN cells for surface CD3 and CD19 expressions and intracellular TSH β v. There was an increase in the mfi of TSH β v in CD19⁺ MLN cells from *L. monocytogenes*-infected mice (Fig. 4K) compared to non-infected mice (Fig. 4E), as well as for CD3⁺ MLN cells from *L. monocytogenes*-infected mice (Fig. 4L) compared to non-infected mice (Fig. 4F). This also held true when all leukocyte populations were analyzed (mfi non-infected, 981.4 ± 542 , $n = 5$ vs. $2,654.5 \pm 248$, infected, $n = 3$; $p = 0.024$). Expression of BLIMP-1, a transcription factor for CD138, is increased in MLN cells 7 days

post-infection with *L. monocytogenes* (Fig. 4M). Circulating T4 levels dropped sharply in infected mice 24 hrs post-infection (Fig. 4N).

4. Discussion

Although it is well established that TSH β v is made by cells of the immune system in humans and mice (Schaefer and Klein, 2009; Vincent et al., 2009), the functional and physiological significance of that is only now becoming evident. Recent studies have demonstrated that changes in intrathyroidal TSH β v expression occur during bacterial infection, and that this may be due to TSH β v-secreting leukocyte homing to the thyroid (Montufar-Solis and Klein, 2016). TSH β v also has been shown to contribute to bone development and morphogenesis (Abe et al., 2003; Baliram et al., 2013; Baliram et al., 2016; Baliram et al., 2017). In HT, an autoimmune disease of the thyroid, circulating levels of TSH β v are altered, possibly by plasma cells that traffic to the thyroid (Liu et al., 2012; Liu et al., 2019; Liu et al., 2015). Yet, many unanswered questions still remain as to the role of TSH β v in health and disease.

Several studies, including those from our laboratory, reported that production of TSH β v is primarily the domain of monocytes and granulocytes, with little if any TSH β v made by lymphoid cells (Montufar-Solis and Klein, 2016). Other studies, however, have reported that TSH β v is made by lymphoid cells, in particular by plasma cells, the terminally-differentiated form of B cells (Liu et al., 2015). The purpose of the present study was two-fold. First, we examined the expression of TSH β v in BM cells and peripheral leukocytes, with particular interest in the expression in the lymphoid cell population. Second, we examined the expression of TSH β v in MLN cells in mice infected systemically with *L. monocytogenes*. The rationale for *L. monocytogenes* infection was that it generates a rapid and strong response that incorporates all branches of the immune system. As noted above, in an earlier study we found that expression of TSH β v was largely restricted to myeloid cells, the monocyte and granulocyte populations (Montufar-Solis and Klein, 2016). In that study, however, the majority of intracellular TSH β staining was done with the M-16 antibody obtained from Santa Cruz Biotechnology, which we have subsequently found to be unreliable for TSH β staining. In the present study, we used antibody 1B11, a monoclonal antibody made in our laboratory (Zhou et al., 2002). That antibody has strong reactivity to a portion of TSH β that is present in the TSH β v polypeptide. To insure that the reactivity of 1B11 is for TSH β v, we used a commercial anti-TSH β beta antibody made by Abcam (Thermo Scientific, clone ab231218). We observed similar staining patterns of anti-TSH beta antibody ab231218 and 1B11 on MLN cells (data not shown), this confirming that monoclonal antibody 1B11 specifically reacts with TSH β v.

The findings reported here indicate that all three primary subsets of leukocytes (lymphoid cells, monocytes, and granulocytes) in the BM and in MLNs, a peripheral immune compartment, are sources of TSH β v. In extending that, we made three additional observations. First, following *in vitro* stimulation of MLN cells with bacterial LPS, the intracellular fluorescence intensity of TSH β v increased in all populations, thus indicating that exposure to bacterial cell wall stimuli has a direct effect on the amount of TSH β v produced. Second, the increase in CD138⁺ cells in granular (Fig. 4B, gate 3) MLN cells

from *L. monocytogenes*-infected mice is indicative of an increase in plasma cells in response to infection. Plasma cells have significantly more cytoplasmic granulation due to enhanced antibody secretion (Pracht et al., 2017). Third, the increase in intracellular TSH β v expression in both CD19⁺ and CD3⁺ MLN cells in infected mice, as demonstrated by higher mfi, points to involvement of those cells in response to bacteria.

Perhaps one of the most perplexing question pertaining to TSH β v is the observation that TSH β v is endogenously present in most of the cells of the immune system. This is evident by flow cytometry as reported here and by others (Baliram et al., 2013; Montufar-Solis and Klein, 2016), and has been documented in electron microscopic studies of BM macrophages (Baliram et al., 2013). Collectively, this suggests that peripheral leukocytes are primed and ready to release TSH β v on short notice. Questions remain as to why TSH β v would need to be secreted from intracellular stores rather than by cellular *de novo* manufacture as needed, what signal are used to trigger its release, in which sites it is released, and what the physiological outcome of TSH β secretion is. We have proposed that immune system TSH β v is used to assist in regulating metabolism during times of immune stress, such as during viral or bacterial infection (Schaefer and Klein, 2011). This could occur by intrathyroidal release of TSH β v upon trafficking of select leukocyte populations to the thyroid, which may result in competition in binding between native TSH β and TSH β v to the TSHR, and could account for the precipitous drop in circulating T4 24 hrs post-infection as shown here and as reported in mice challenged with alloantigen (Bagriacik et al., 2001).

5. Conclusions

We demonstrate that TSH β v is expressed in all major BM precursors leukocyte subsets, as well as in mature leukocytes in MLN. Additionally, there is an increase in CD138 expression, a marker of plasma cells, on TSH β v⁺ cells in mice during an active *L. monocytogenes* infection. These findings collectively add to our understanding of the distribution of TSH β v-producing cells in mice in normal homeostatic conditions as well as during an active immune response to foreign antigen.

Acknowledgments

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Abbreviations:

BM	bone marrow
CFU	colony forming units
HT	Hashimoto's thyroiditis
HPT	hypothalamus-pituitary-thyroid
LPS	lipopolysaccharide

MLN	mesenteric lymph nodes
MFI	mean fluorescence intensity
PBL	peripheral blood leukocyte
TSH	thyroid stimulating hormone
TSHβv	TSH β splice variant
T3	triiodothyronine
T4	thyroxine

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Highlights

- The TSH β splice variant (TSH β v) is expressed in lymphoid precursors (T cells and B cells), monocyte precursors, and granulocyte precursors in the bone marrow of normal mice.
- TSH β v is spontaneously expressed in lymphocytes, monocytes, and granulocytes, as well as in CD138⁺ plasma cells, in mesenteric lymph node cells from normal mice.
- In vitro exposure of mesenteric lymph node cells to bacterial lipopolysaccharide resulted in an increase in the intracellular fluorescence intensity of TSH β v.
- Infection of mice with *Listeria monocytogenes* resulted in elevated expression of TSH β v⁺ in CD138⁺ plasma cells seven days post-infection.
- Levels of circulating thyroxine dropped significantly twenty-four hours post-*Listeria monocytogenes* infection.

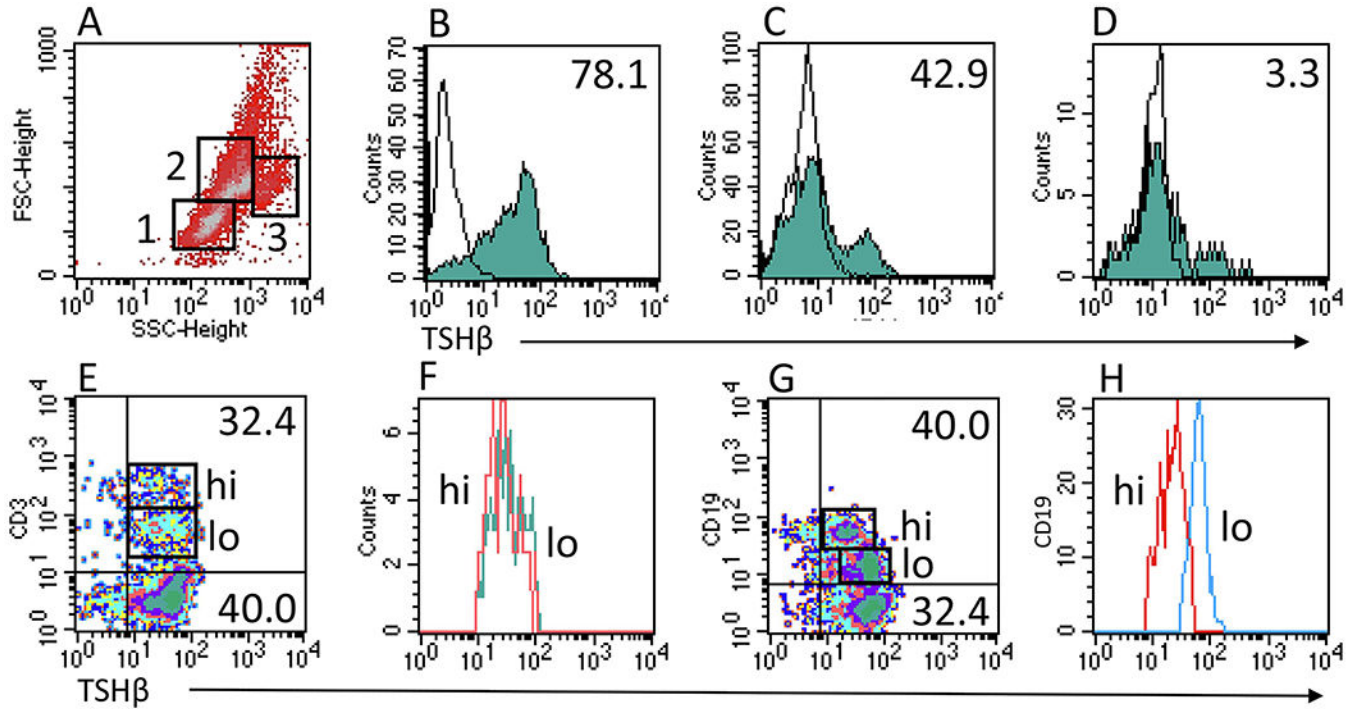


Fig. 1.

Expression of TSH β v in BM hematopoietic cells. (A) BM scattergram of cells defined by forward scatter (FSC) and side scatter (SSC) showing three distinct populations consisting of lymphoid precursors (gate 1), monocyte precursors (gate 2), and granulocyte precursors (gate 3). (B) Expression of TSH β v in BM lymphoid precursors in gate 1. (C) Expression of TSH β v in BM monocyte precursors in gate 2. (D) Expression of TSH β v in BM granulocyte precursors in gate 3. (E) Expression of TSH β v in two populations of CD3⁺ T cell precursors defined by the intensity of CD3 fluorescence expression. (F) Comparison of TSH β v the mfi on CD3^{hi} and CD3^{lo} subsets. (G) Expression of TSH β v on two populations of CD19⁺ BM precursors defined by the intensity of CD19 fluorescence expression. (H) Comparison of TSH β v expression on CD19^{hi} and CD19^{lo} subsets.

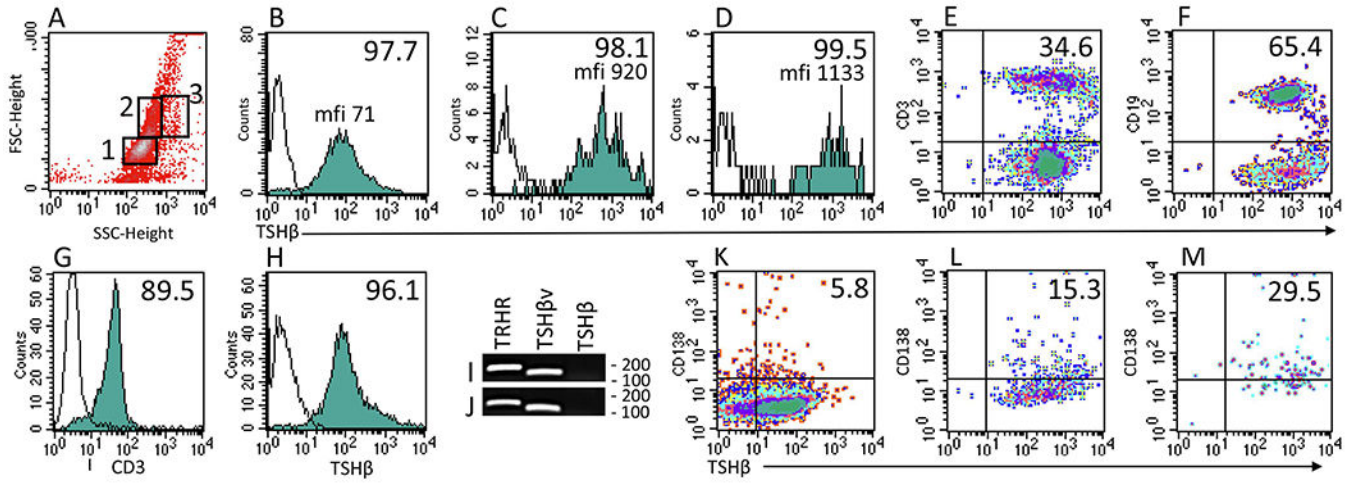


Fig. 2. Expression of TSH β v in MLN cells from normal mice. (A) Scattergram of cells defined by forward scatter (FSC) and side scatter (SSC) showing three distinct populations consisting of lymphoid cells (gate 1), monocytes (gate 2), and granulocytes (gate 3). Intracellular expression of TSH β v in (B) lymphoid cells, (C) monocytes, (D) granulocytes, (E) CD3⁺ T cells, and (F) CD19⁺ B cells. Expression of (G) CD3 on EL4 T cells, and (H) intracellular TSH β v expression in EL4 T cells. PCR analysis of TRHR, TSH β v, and TSH β gene expression in the mouse (I) AM macrophage cell line, and (J) EL4 T cells. CD138 expression on MLN (K) lymphoid cells, (L) monocytes, and (M) granulocytes, mfi, mean fluorescence intensity.

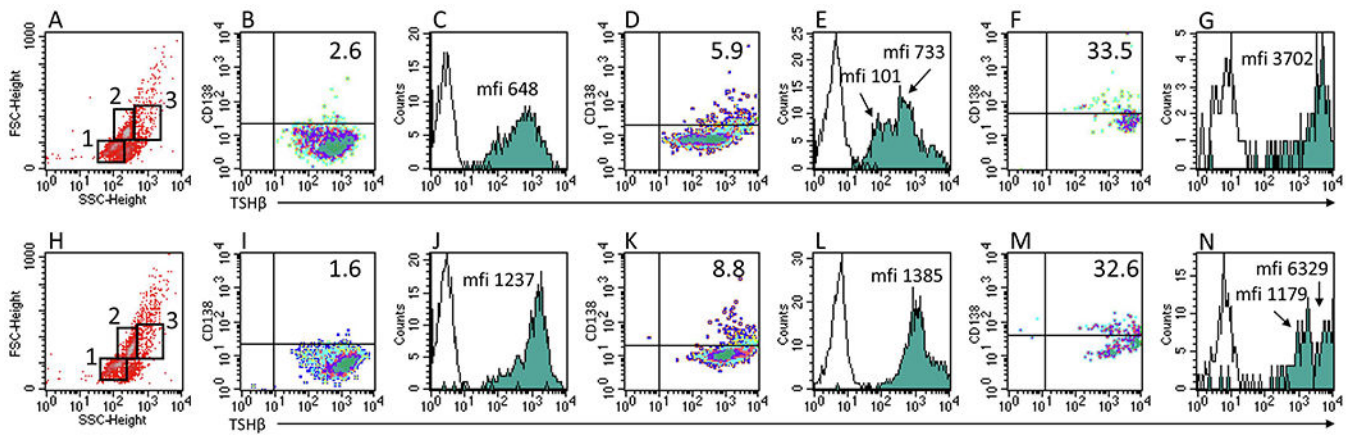
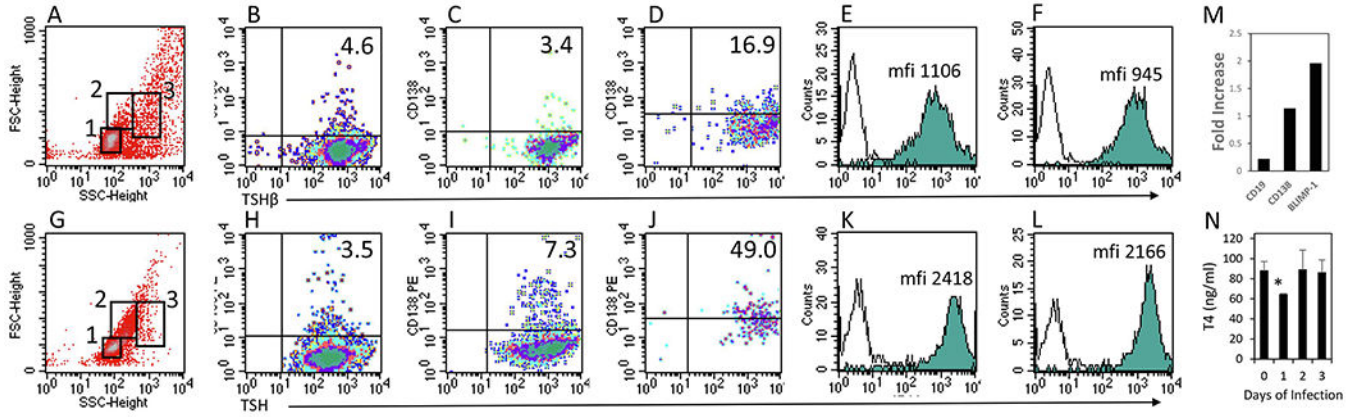


Fig. 3.

Expression of CD138 and TSH β v in MLN cells. MLN cells were cultured (A-G) without LPS, and with (H-N) 100 μ g/ml LPS for 48 hrs. No differences were noted in the expression of CD138⁺, TSH β v⁺ (B vs. I) lymphocytes, (D vs. K) monocytes, or (F vs. M) granulocytes when stimulated with LPS. However, intracellular expression of TSH β v increased following exposure to LPS (J, L, N) compared to (C, E, G) non-stimulated cells, mfi, mean fluorescence intensity.

**Fig. 4.**

Effect of *L. monocytogenes* infection on TSH β v expression in MLN cell. MLN cells from (A-F) non-infected and (G-L) *L. monocytogenes*-infected mice. (B, C, D) Proportions of CD138⁺, TSH β v⁺ MLN cells in gated populations 1, 2, and 3 in panel A of non-infected mice, and (H, I, J) *L. monocytogenes*-infected mice. Intracellular TSH β v expression in CD19⁺ MLN cells from (E) non-infected mice compared to (K) *L. monocytogenes*-infected mice. Intracellular TSH β v expression in CD3⁺ MLN cells from (F) non-infected mice compared to (L) *L. monocytogenes*-infected mice. (M) Fold increase in CD19, CD128, and BLIMP-1 gene expression in MLN cells from infected mice relative to non-infected mice. (N) Circulating levels of T4 were significantly lower in mice 24 hrs post-infection compared to non-infected mice and to mice 48 and 72 hrs post-infection. * $p = 0.02$. mfi, mean fluorescence intensity.