

Vitamin D and autoimmunity.

Hector DeLuca - University of Wisconsin

Avery August - Penn State

Andrew Henderson- Boston University

JoEllen Welsh- University of Albany

Mary Ann McDowell - Notre Dame

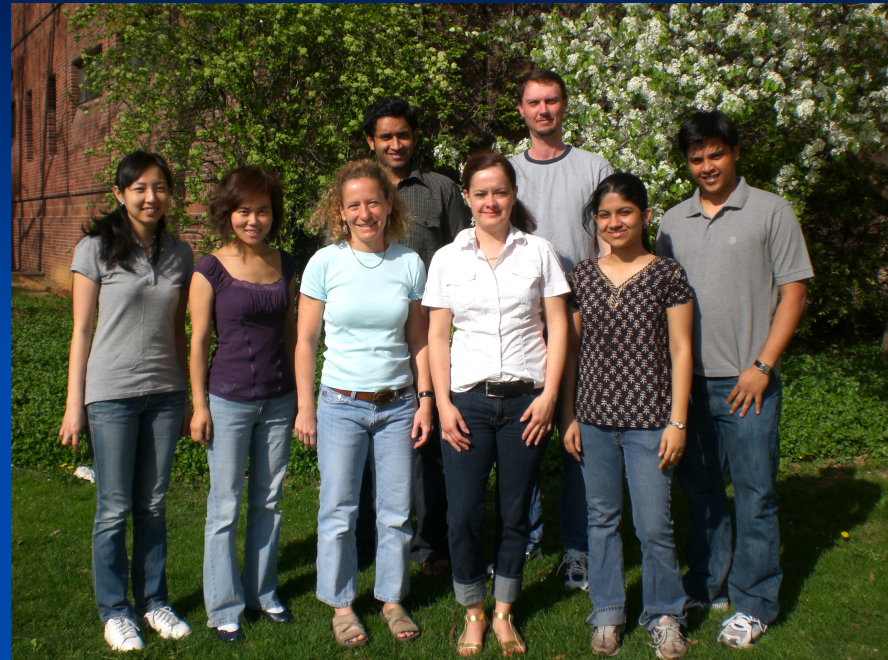
The Cantorna Laboratory

Veronika Weaver

Sanhong Yu

Danny Bruce

Jot Ooi Hui



Past members:

Anja Wittke

Brett Mahon

Candace Bemiss

Monica Froicu

Andy Chang

Funding:

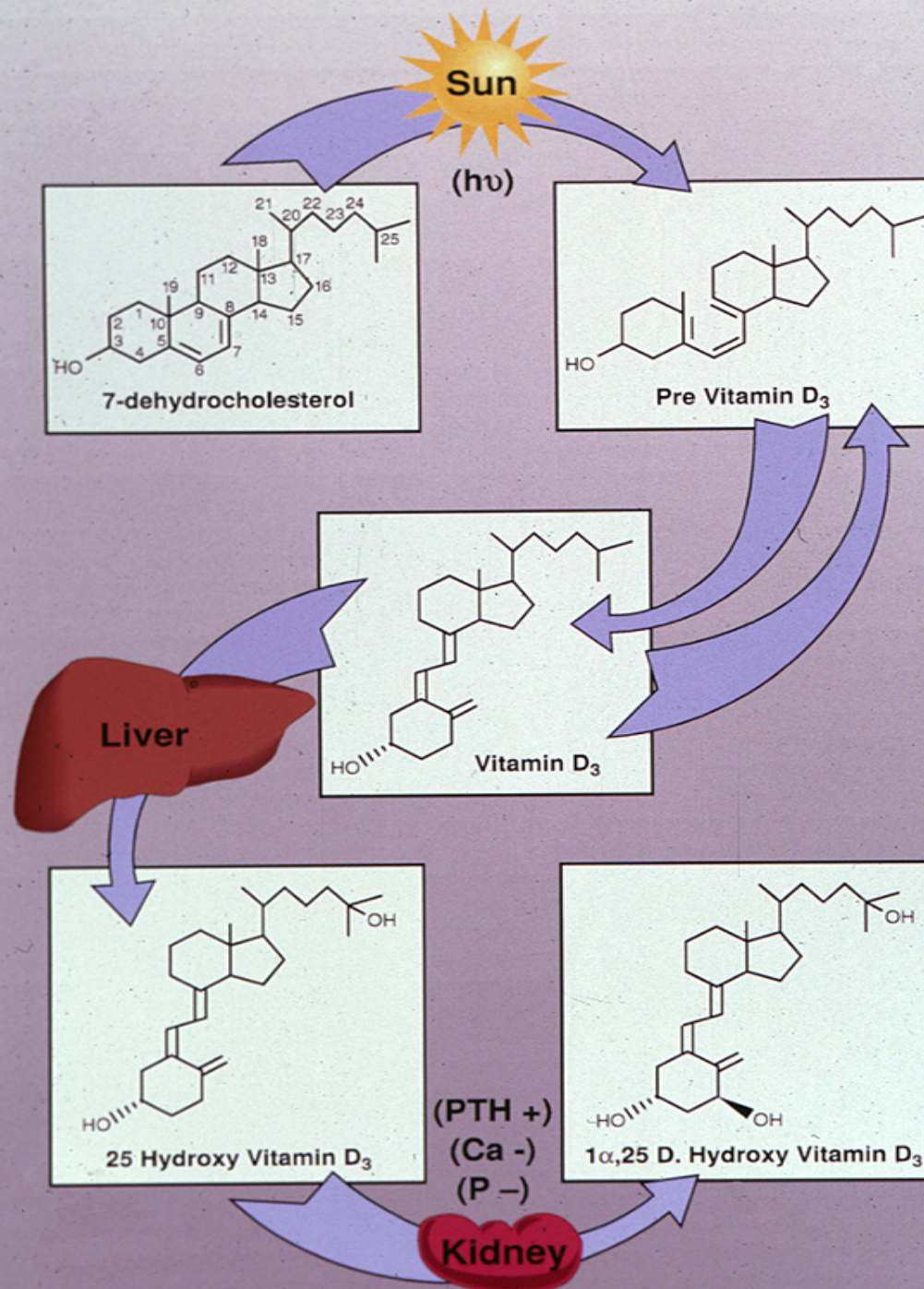
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National Multiple Sclerosis Foundation

No Conflicts of Interest to Disclose



Autoimmunity

Multiple sclerosis

Lupus

Arthritis

Type I Diabetes

Inflammatory Bowel Disease



Genes and Environment

Biological relatives of IBD patients show 10 fold increased risk.

Sisters/brothers show a 30 fold increased risk.

However, monozygotic twins show a 18% (ulcerative colitis) and 50% (Crohn's) concordance rate.

Inflammatory Bowel Disease

Environment:

Higher: urban than rural

northern than southern

(Europe and North America)

developed than underdeveloped

Sunlight?

Bacterial flora

When measured vitamin D status low/bone diseases!

Does vitamin D status affect the development of autoimmune diseases?



Experimental Inflammatory Bowel Disease

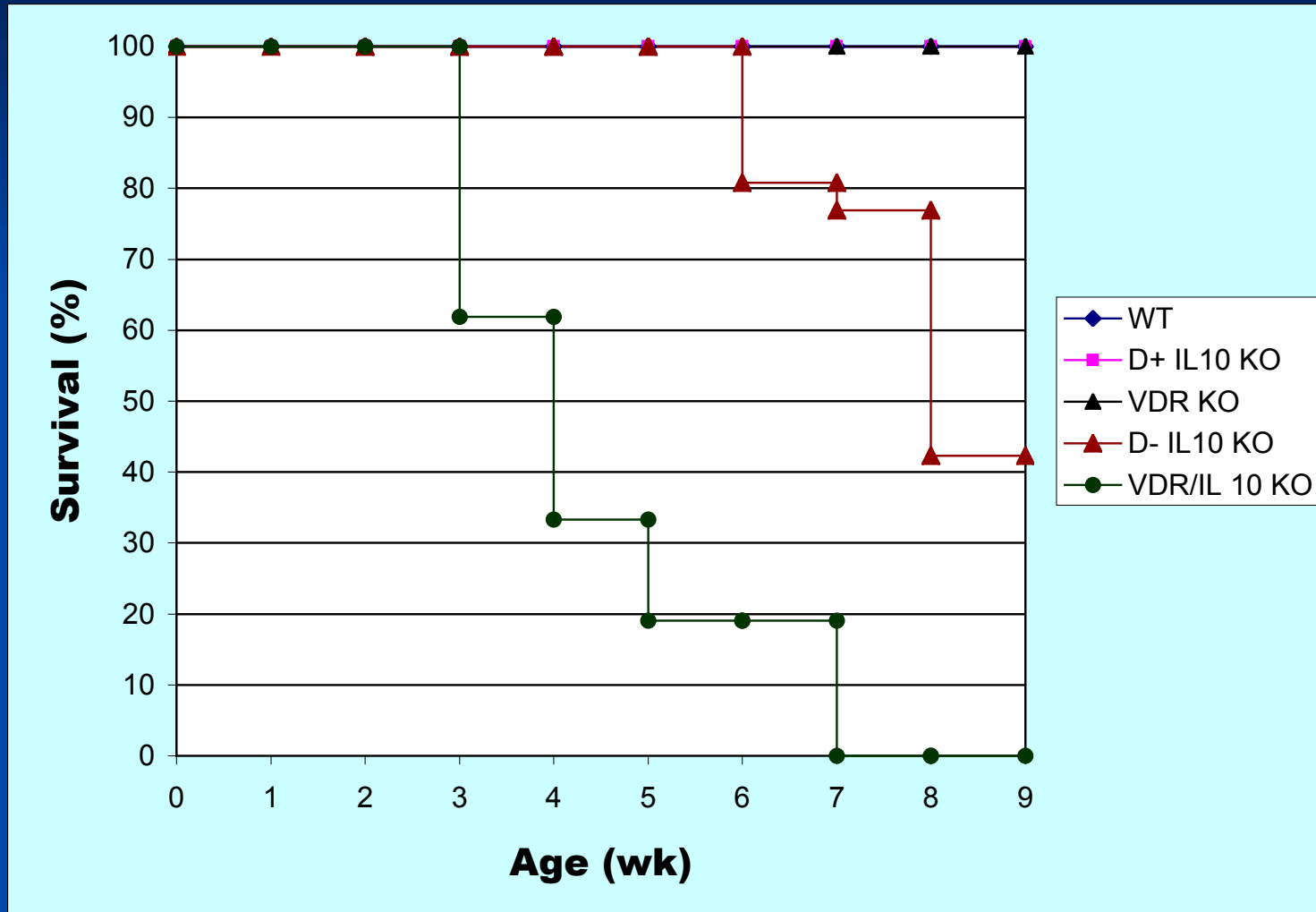
Spontaneous colitis - as a consequence of targeted mutations

IL-10 KO mice spontaneously develop IBD symptoms in the ileum and colon because of a defect in regulatory T cells.

Disease develops sporadically beginning at 9-10 weeks of age. Some mice may not show symptoms after much longer.

Wasting, diarrhea, rectal prolapse and bleeding which can lead to premature mortality.

Vitamin D and VDR deficiency exacerbates Inflammatory Bowel Disease



Cantorna et. al 2000 Journal of Nutrition, Froicu et. al 2003 Molecular Endocrinology

Dextran sodium sulfate induced colitis

DSS in drinking water
5 days/ 5 days regular
drinking water



WT

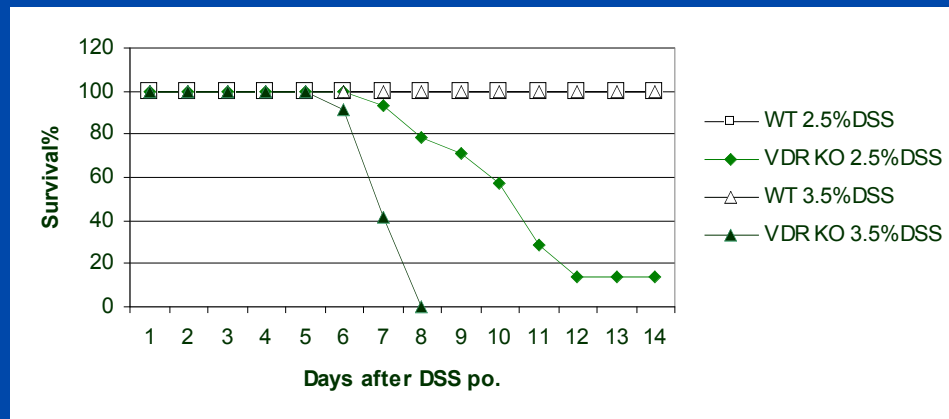
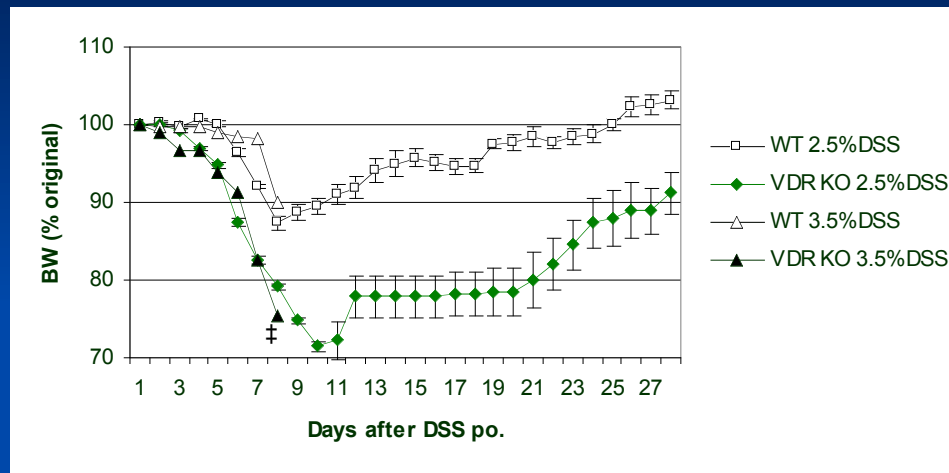


VDR KO

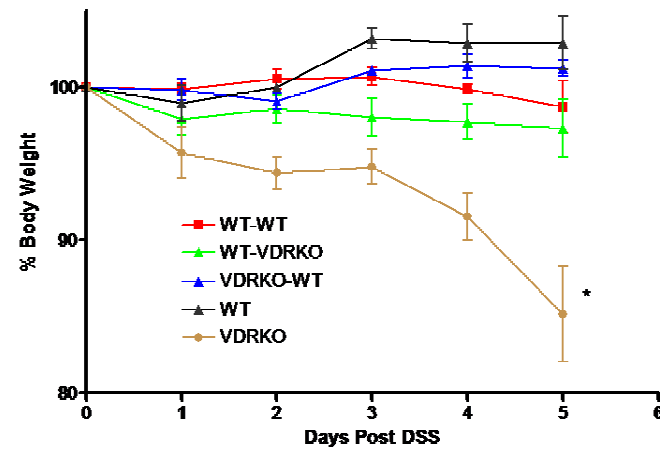


- colonic length
- Histopathology colon
- body weight changes

VDR KO mice are highly susceptible to dextran sulfate induced colitis



Wild type bone marrow transplantation
rescues VDR KO mice from DSS colitis.



CONCLUSIONS

Vitamin D or VDR deficiency increased the mortality rate in IBD susceptible strains of mice.

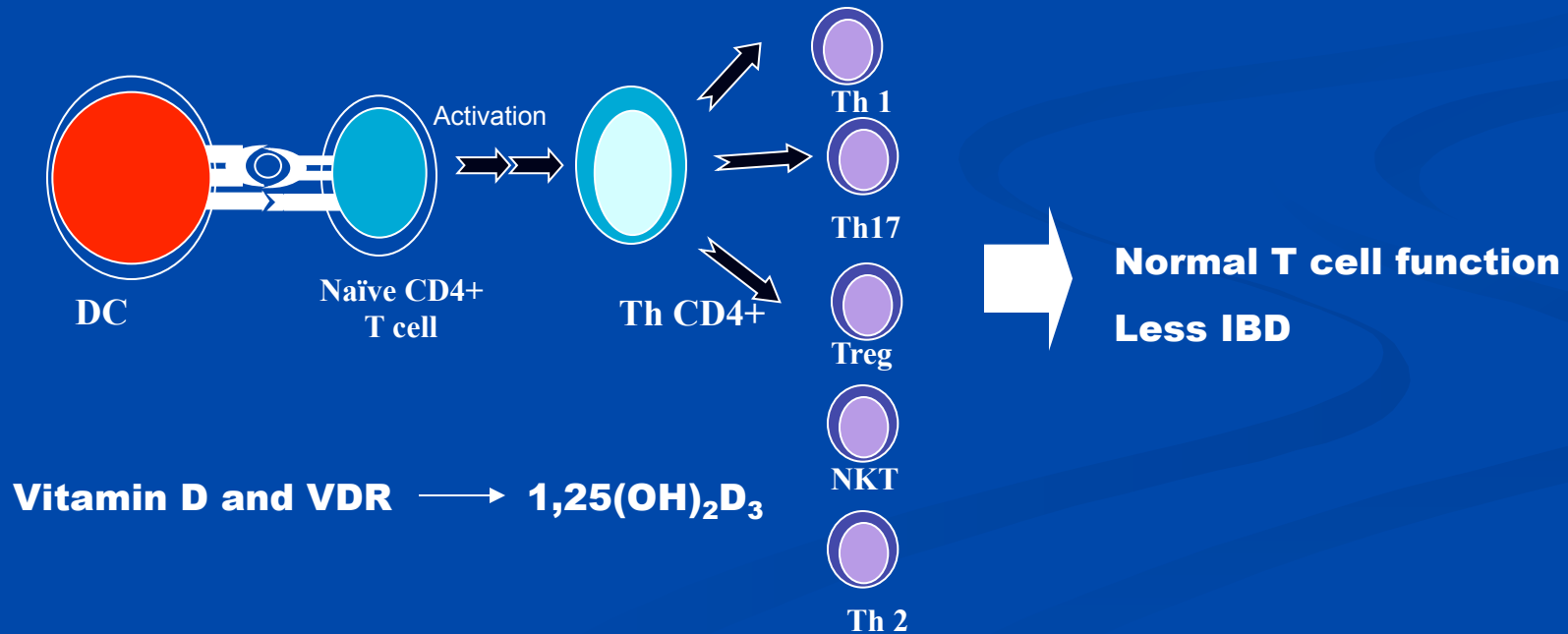
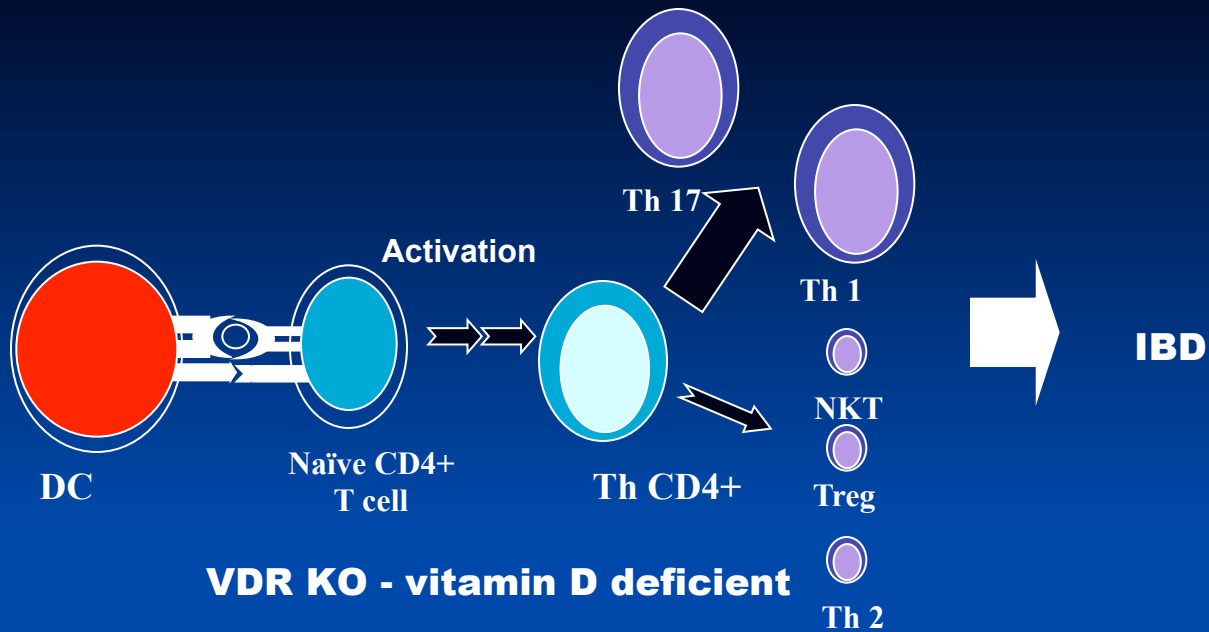
1,25(OH)₂D₃ reduced inflammation in IL10 KO mice. The reduction in inflammation correlated with the decreased expression of TNF α related genes.

VDR/IL10 double KO mice develop a fulminating form of IBD. IBD transferred via splenocytes.

VDR KO mice are highly susceptible to DSS colitis. WT bone marrow protects VDR KO mice from DSS.

1,25(OH)₂D₃ treatment reduced symptoms of colitis.

Model of defect in VDR KO CD4+ T cells increase IBD



IBD: Following CD4/CD45RB^{high} T Cell Transfer into RAG KO mice.

CD4 naive (CD25-)



IBD

C57BL/6 Rag KO mice

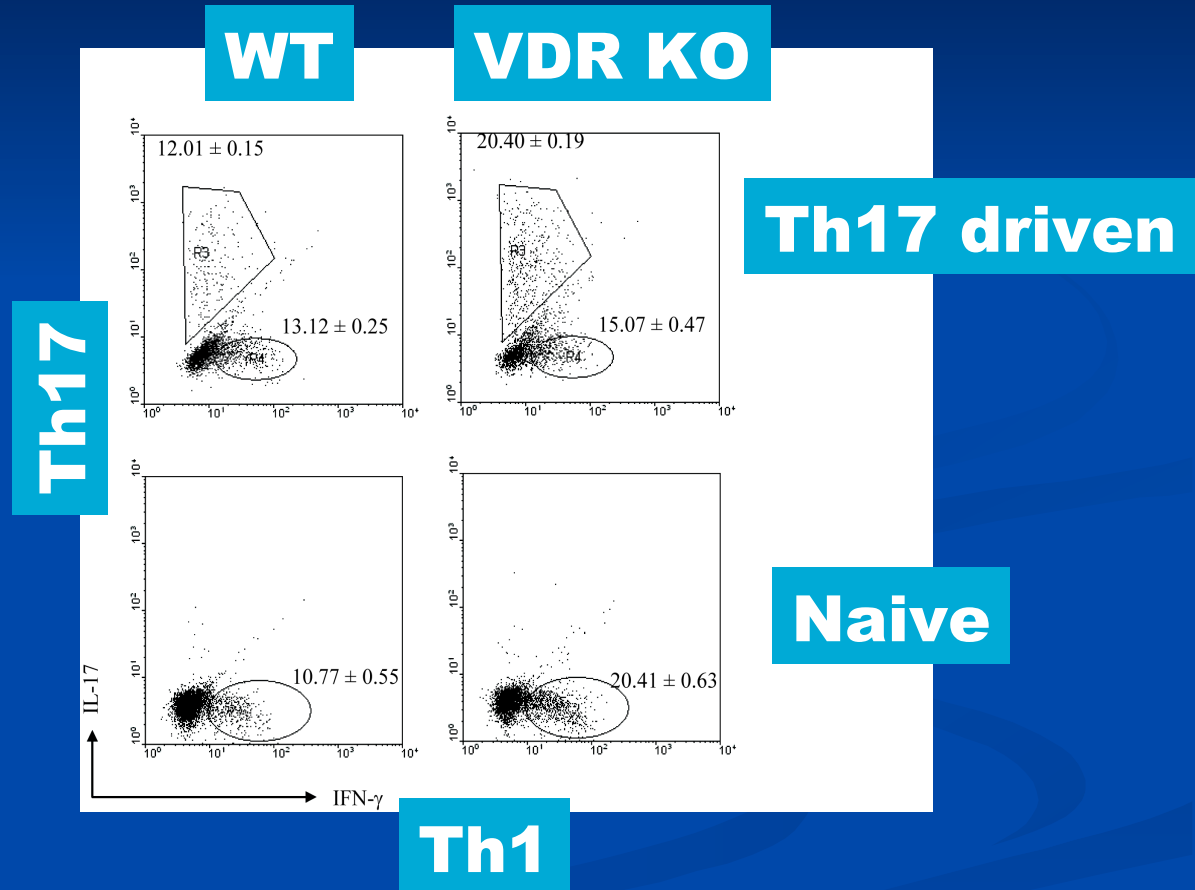
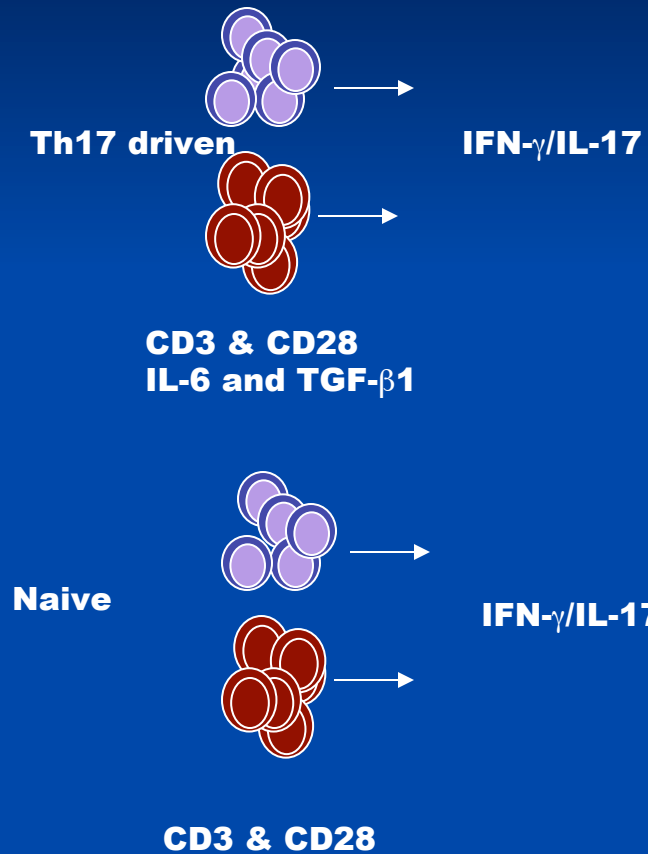
Donor Cells	Body Weight (g)	SI/BW (%)	LI/BW (%)	Colitis
WT naive	18.8 ± 0.8 ^a	6.8 ± 0.4 ^b	3.6 ± 0.6 ^a	2.9 ± 0.3 ^b
VDR KO naive	17.4 ± 0.6 ^a	11.0 ± 0.9 ^d	6.4 ± 1.0 ^b	5.8 ± 0.5 ^c

IBD

more severe IBD

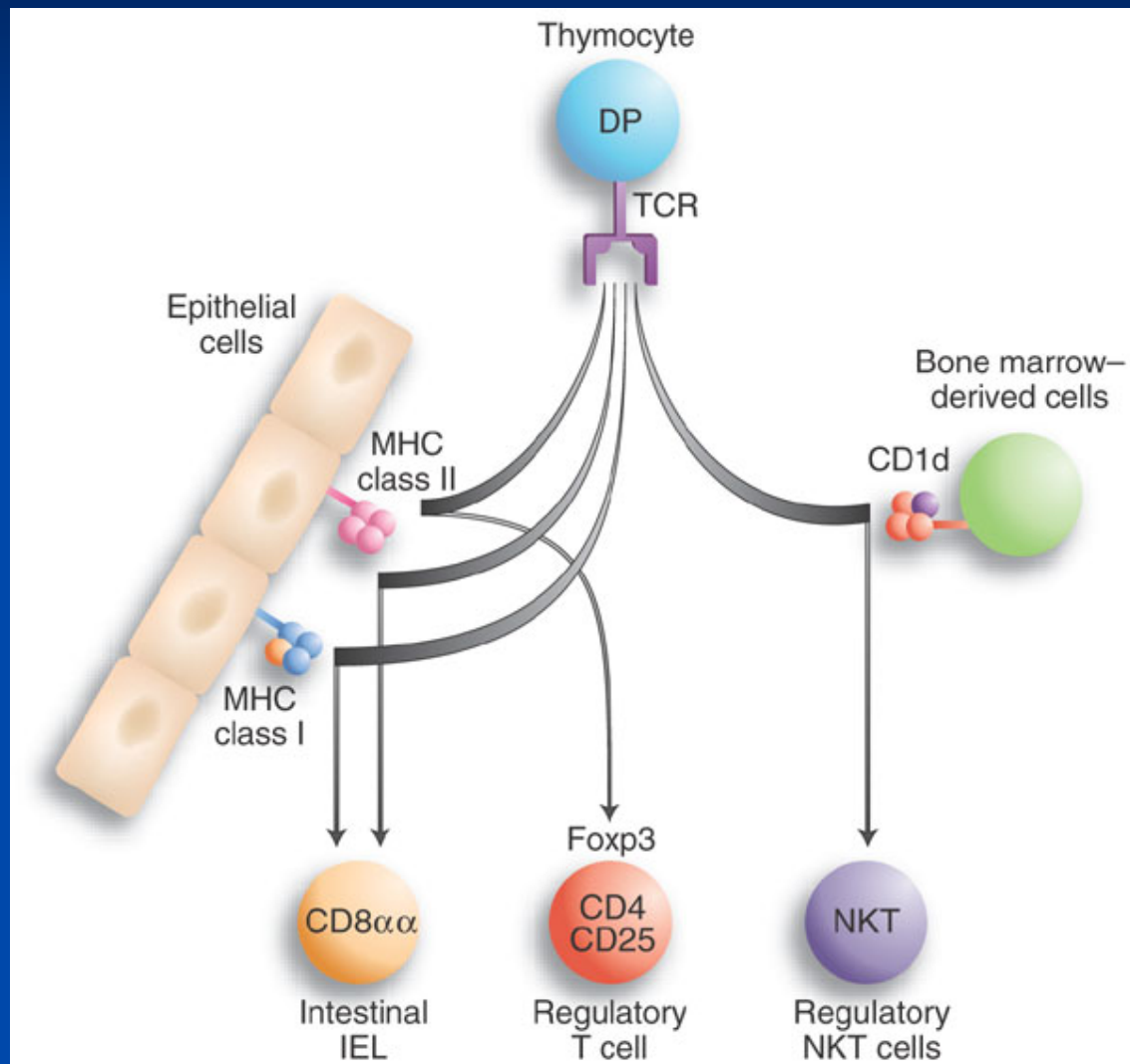
VDR KO CD4⁺ T cells contain highly pathogenic T cells

More Th17 and Th1 cells in VDR KO mice.

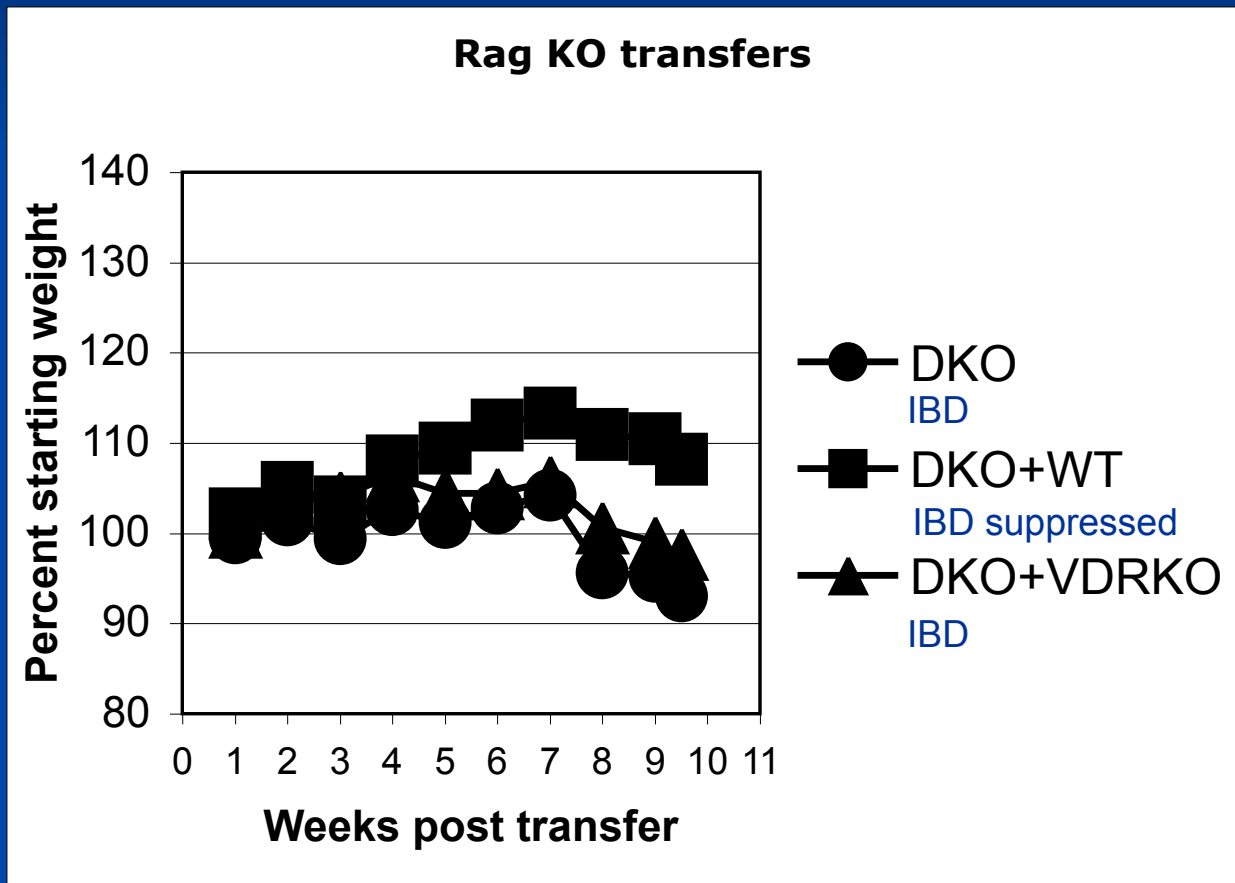


Unconventional T cells as regulatory cells

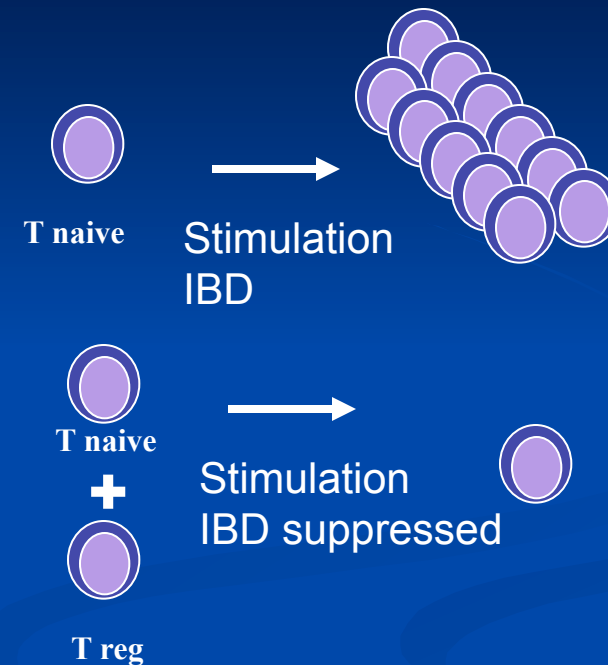
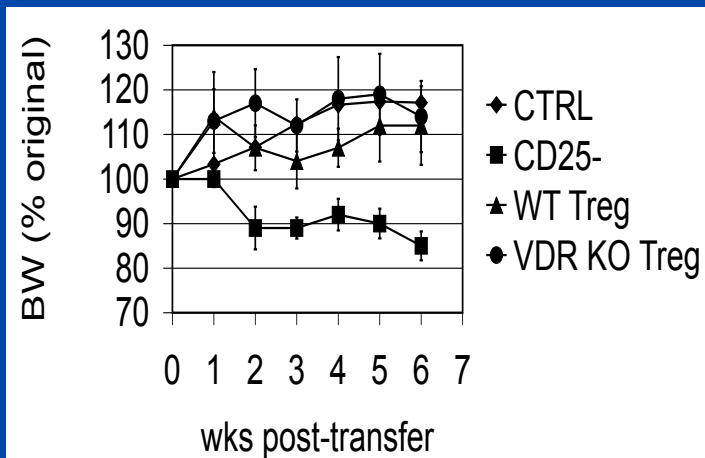
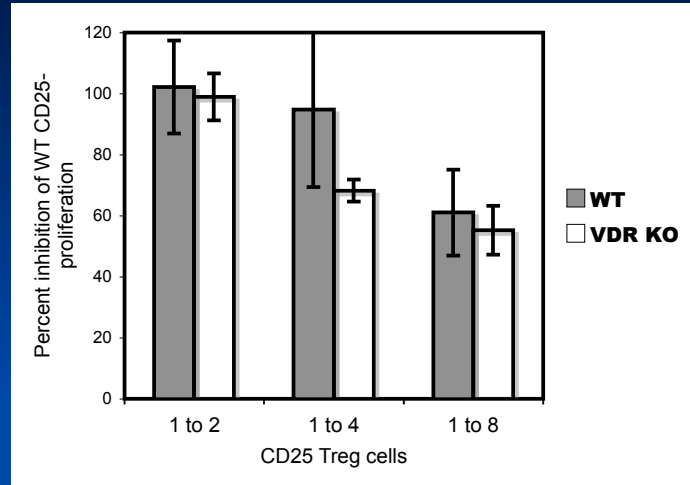
Classical T cells CD4+, CD8+ etc. are present in normal numbers in the VDR KO mice.



VDR KO CD4+ FAIL TO SUPPRESS WEIGHT LOSS

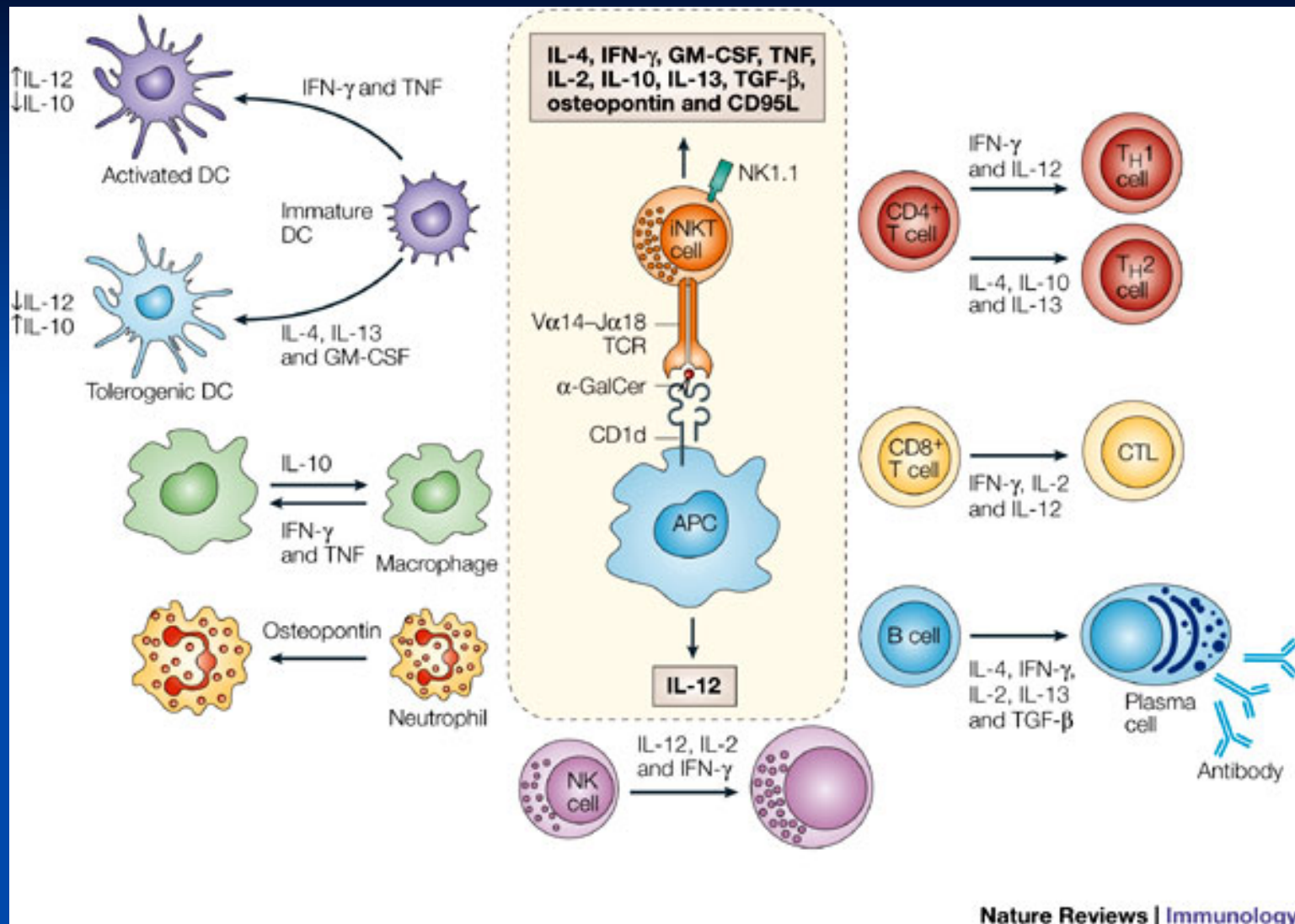


In vitro and in vivo T reg function

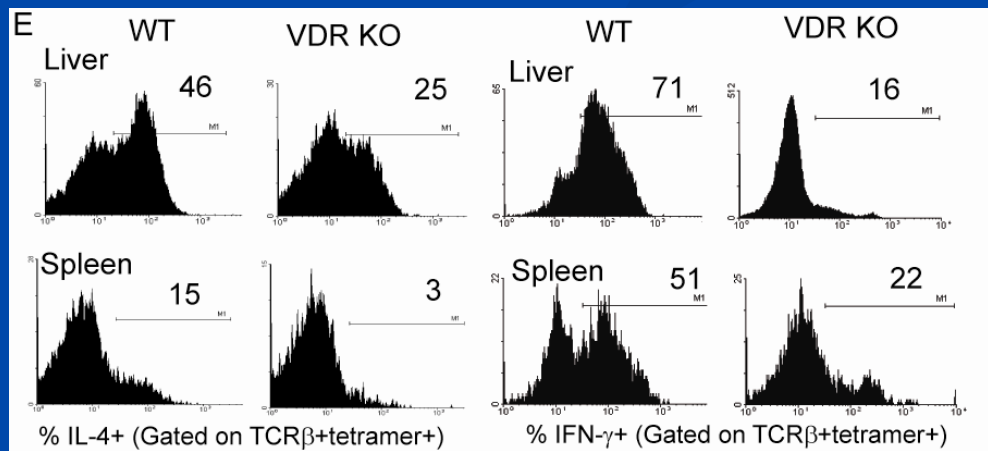
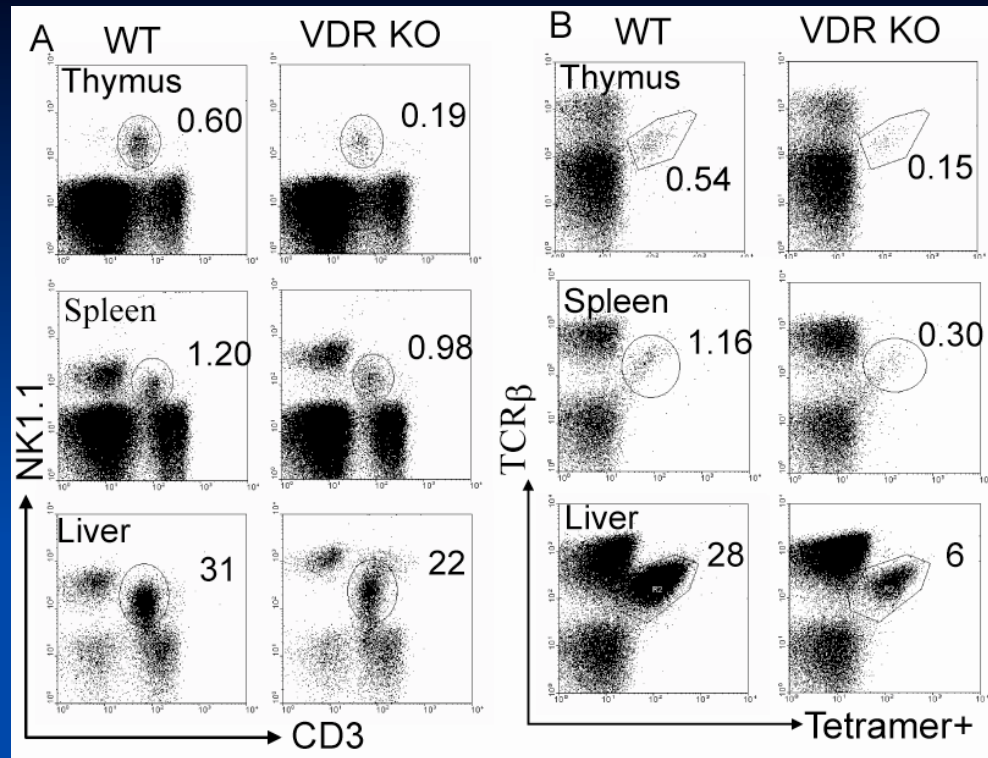


Numbers of T reg (FoxP3⁺) cells are not different in VDR KO and WT mice.

T reg from VDR KO mice are functionally normal.

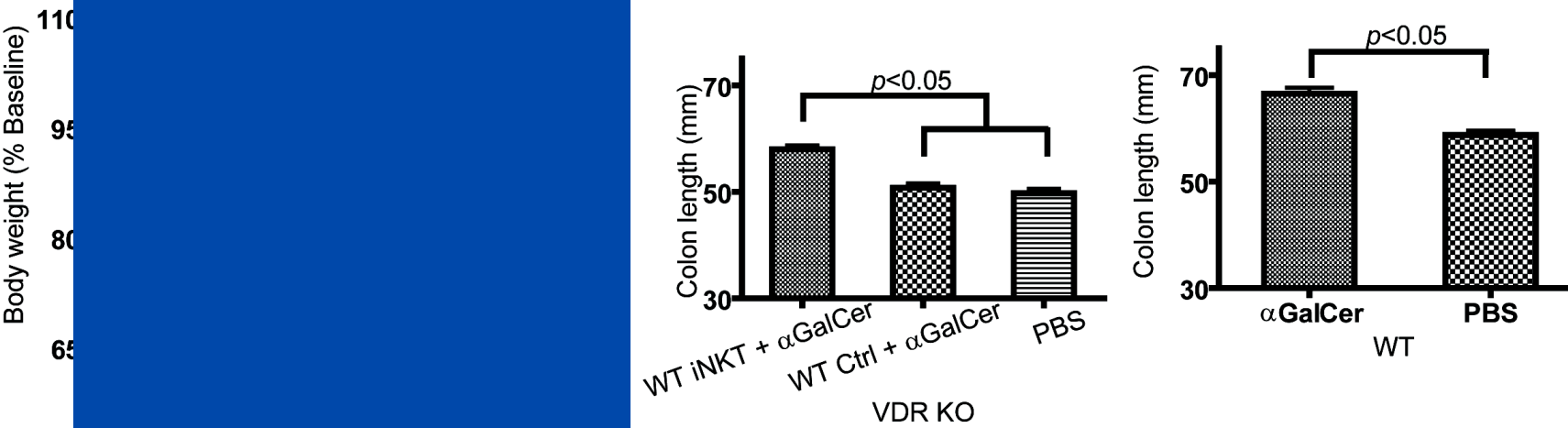


NKT cells are regulatory cells providing early cytokine secretion.

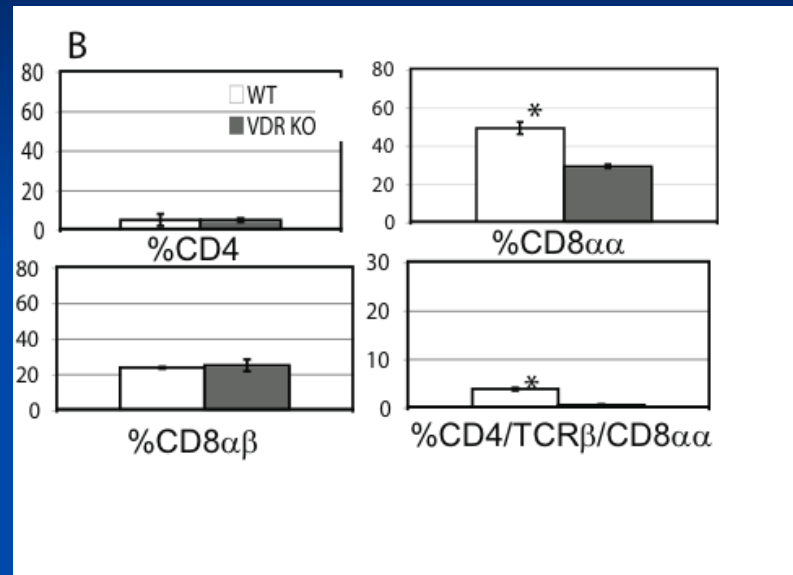


Activated WT iNKT cells protect VDR KO mice from DSS colitis.

DSS colitis



CD8 $\alpha\alpha$ T cells are missing in VDR KO mice.

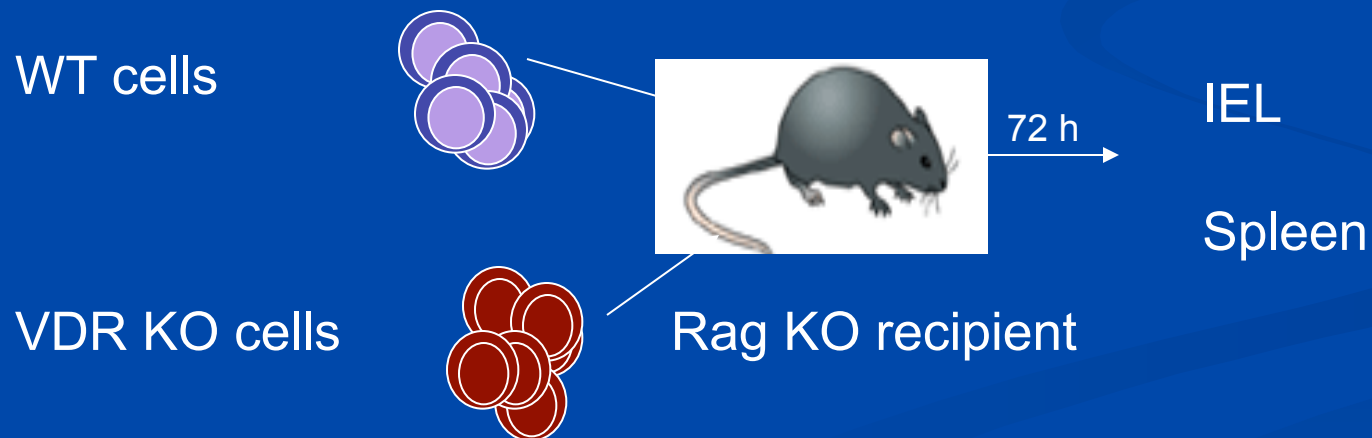
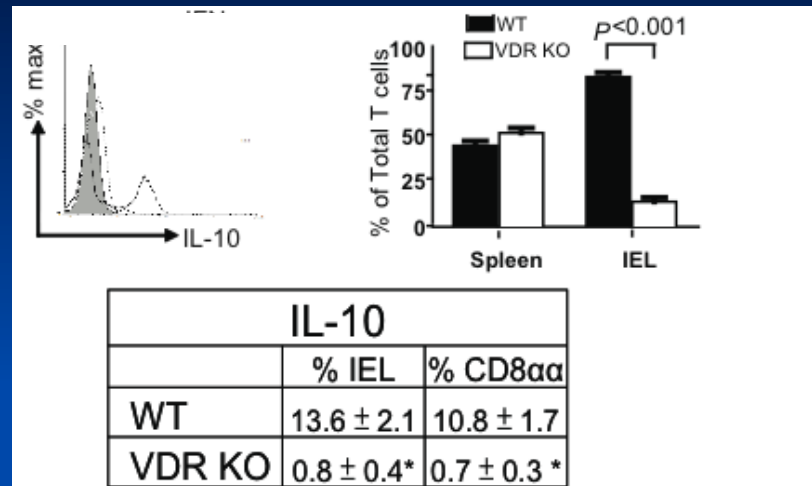


CD8 $\alpha\alpha$ T cells are significantly reduced in the intestine of VDR KO mice.

CD8 $\alpha\alpha$ T cells suppress inflammation and proliferation in the intestine.

CD8 $\alpha\alpha$ T cells secrete IL-10 and TGF- β 1 in the intestine.

Homing and IL-10 secretion of VDR KO T cells



Yu & Bruce et. al 2008 PNAS

IBD targets

CD4+CD45RB^{high} T cells from VDR KO mice induce greater pathology than WT counterparts.

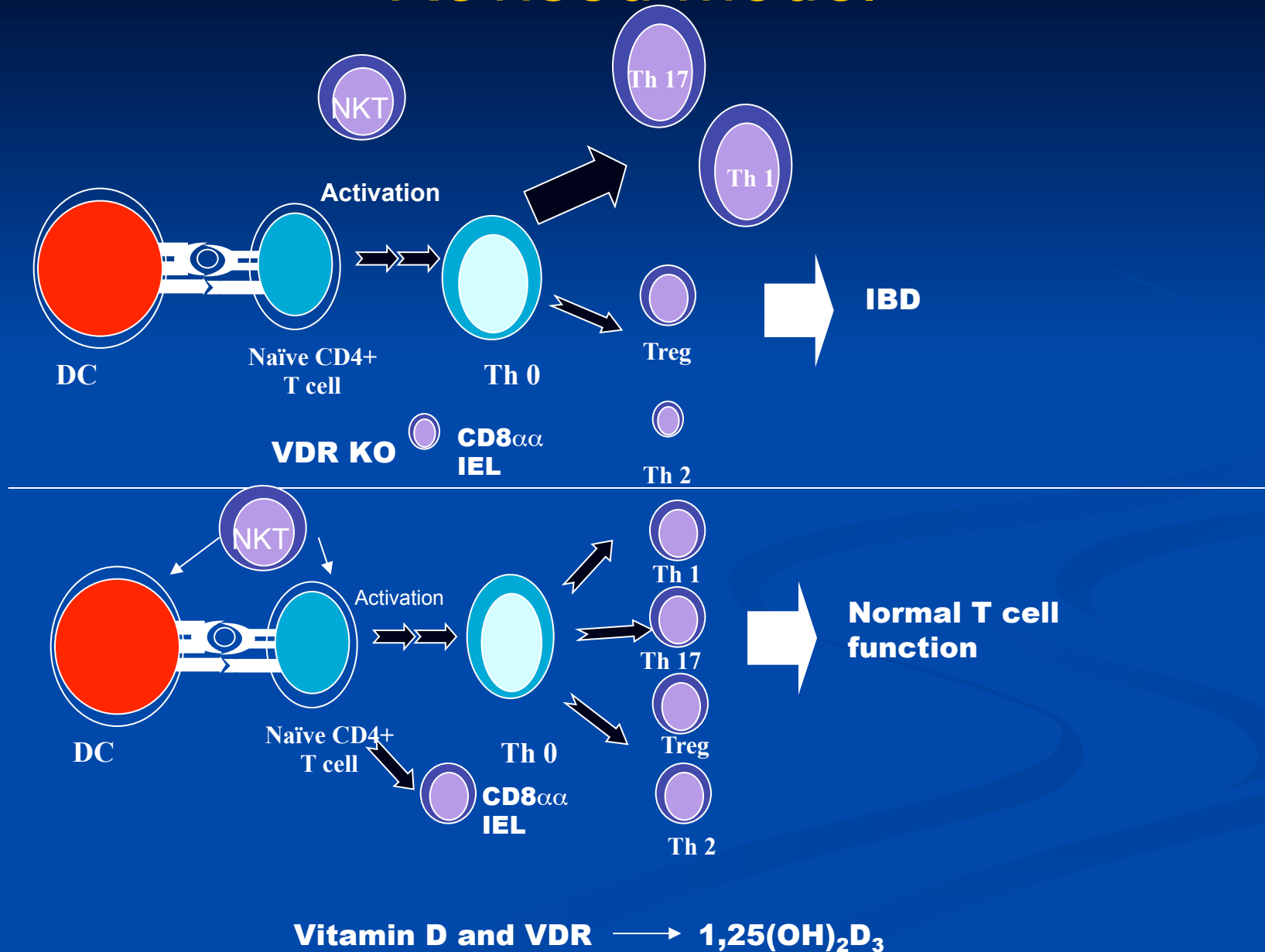
More IL-17, and IFN- γ less IL-10 in the VDR KO host.

Expression of the VDR is not required for T reg cell development or function.

NKT cell development and function require the VDR.

T cell homing and expression of CD8 $\alpha\alpha$ in the IEL require the VDR.

Revised model



Conclusions

Vitamin D is required for NKT cell development and function. Protective T cells in the gut require vitamin D and the VDR.

One consequence of reduced levels of vitamin D is increased inflammation in the gastrointestinal tract.