

In This Issue

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By John Ashkenas, Science Editor

Directed antisense expression moderates feeding and weight gain

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Dendritic cell vaccination using a cell-permeant tumor antigen

(See article on pages 1463–1470.)

Dendritic cells (DCs) can process and present tumor cell-specific antigens, activating CD8⁺ T lymphocytes to destroy tumor cells. Here, Wang and colleagues propose a new route to tumor antigen presentation that they hope will help realize the promise of DC vaccines for treating cancer or blocking metastatic disease. In their method, an appropriate MHC-restricted epitope is generated as a fusion peptide carrying an additional, HIV-derived sequence that allows it to penetrate the DC plasma membrane. Wang et al. have found that such fusion peptides are taken up more readily and presented by DCs more efficiently than occurs following standard DC “pulsing” protocols. Now, they show that this quantitative change in tumor antigen presentation correlates with a qualitative improvement in T cell tumoricidal activity. Working

with a peptide that serves as a tumor antigen in both humans and mice, the authors find that transduced DCs activate both CD4⁺ and CD8⁺ cells, which act synergistically to suppress tumor growth in mice carrying metastatic melanoma cells. The contribution of CD4⁺ cells to this process was not anticipated and remains something of a puzzle, since the tumor antigen used is restricted by Class I MHC molecules, which activate CD8⁺ cells. Nonetheless, control mice receiving the peptide-transduced DCs appear to be completely protected from metastatic disease, while animals lacking either the CD4⁺ or CD8⁺ subtype develop a significant number of lung metastases. This procedure seems well suited for DC vaccination in vitro or in vivo, using cell-permeant forms of this or other tumor antigens. Still, concerns about provoking autoimmunity by this means will need to be addressed before it can be considered for use in humans.

NEMO submerged in virus-prone boys

(See article on pages 1501–1509.)

NK cells provide an important line of host defense, acting both with and without help from the clonal immune system to destroy virally infected and malignantly transformed host cells. NK cell biologists distinguish between two modes of cell killing, one dependent on a humoral response to the target cells (antibody dependent cellular cytotoxicity [ADCC]) and the other antibody-independent (NK cell cytotoxicity). To date, they have been unable to tease apart the contributions of these mechanisms to human health, but Orange et al. now report on a mutation of the adaptor protein NEMO that impairs the latter while sparing the former. NEMO is the product of an essential X-linked gene, and it mediates many of the effects of the ubiquitous NF κ B pathway. Nevertheless, certain mild mutations in *NEMO* are compatible with development in males. Boys carrying one of these mutations show various developmental and dermatological abnormalities, as well as recurrent bacterial and viral infections, but they can survive well into adolescence. Orange et al. focus here on the unusual properties of the NK cells from three such patients, each of whom carries a distinct *NEMO* missense mutation. NK cells from these boys fail to kill a tumor cell line that is normally targeted by NK cell cytotoxicity, but they are active (even unusually so) in ADCC assays. Orange et al. find that IL-2 supplementation can rescue NK cell cytotoxicity, suggesting a parallel route to cell killing that might be of use in treating these patients or even to enhance NK activity in other settings.