

Erasmus University Rotterdam, the Netherlands
CSC PhD 2015 Project Description

School/Department:	Erasmus Medical Center Rotterdam Dept. of Internal Medicine-Nephrology & Kidney Transplantation The Netherlands
Project Title:	Humoral rejection in organ transplantation: new concepts in treatment to improve allograft survival
Abstract:	<p>Annually, 40.000 kidney transplantations are performed worldwide. However, 50% of the transplanted organs are lost within 10 years after transplantation. In particular, antibodies directed against the transplanted organ drives this irreversible and non-treatable process of allograft rejection. Because of its association with preformed antibodies to HLA in recipients, vascular presence of complement fragment C4d has been assumed to represent humoral immune reaction against graft endothelial cells. Analysing the cellular composition of rejection biopsies display a mixture of CD4+ T helper, CD8+ cytotoxic T cells and CD20+ B cells. These poorly defined T and B cell responses persist at a low-grade level during the entire life span of the graft and are refractory to treatment with conventional immunosuppression. Therefore, detailed knowledge of the mechanisms that initiate and maintain B cell driven anti-donor reactivity is required to design therapeutic strategies that specifically target antibody-mediated humoral rejection in organ transplant patients. Recently, a novel specialized T cell subset has been identified, the T follicular helper (Tfh) CXCR5+ cell, which is required for the generation of efficient antibody responses. These Tfh cells that are present in the transplanted organ and in the circulation, support activated B cells via IL-21 after binding to the IL-21Receptor (R) expressed by these B cells.</p> <p>We hypothesize that blockade of the IL-21/IL-21R pathway reduces the incidence and the severity of antibody-mediated rejection after kidney transplantation. We will examine I. the development of antigen specific IL-21+CXCR5+Tfh in relation to humoral rejection in patients after kidney transplantation and II. study in a pre-clinical transplant model the direct effects of anti-IL-21R blockade on the Tfh cell directed antibody rejection process (proof of concept). We will deliver functional characterization of IL-21+CXCR5+Tfh cells that will show the potential of a novel therapeutic approach for treatment of humoral rejection after organ transplantation.</p> <p>The primary objectives of the project are</p> <ol style="list-style-type: none"> 1. To determine the interplay between IL-21/IL-21R signaling and B cell mediated immune responses in patients after kidney

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	<p>transplantation</p> <ol style="list-style-type: none"> 2. To identify a signature that differentiates antibody mediated rejection from non-B cell mediated alloreactivity 3. To examine the efficacy immune modulation by IL-21R blockade in pre-clinical transplant models <p>This proposal will elucidate the role of the IL-21/IL-21R pathway in antibody mediated rejection after organ transplantation</p>
Requirements of candidate:	<p>Master degree: Yes</p> <p>Background: candidate should be educated in <i>Immunology, Medicine or Biology</i> and be trained in laboratory techniques like flow cytometry, cell culture and RNA/DNA assays. Also experience with small animals is appreciated.</p> <p>IELTS Grade: 7.0 (<i>minimal 6.0 per component</i>) or TOEFL: 100 (<i>minimal 20 per component</i>)</p>
Supervisor information:	<p>This project is a collaboration between the departments of Internal Medicine (prof Baan), Surgery (dr Dor) and Pulmonary Diseases (prof Hendriks)</p> <p><u>For information contact:</u> Prof dr. Carla.C. Baan, E-mail: c.c.baan@erasmusmc.nl Erasmus Medical Center Rotterdam Dept of Internal Medicine-Nephrology & Transplantation P.O.Box 2040, Room Nc508, 3000 CA Rotterdam The Netherlands</p> <p>Website: http://nl.linkedin.com/pub/carla-baan/8/a19/960</p> <p>Publications by the Rotterdam Research Team (dr Dor, prof Hendriks and prof Baan) <i>Selected references</i></p> <ol style="list-style-type: none"> 1. Bouvy AP, Klepper M, Kho MM, Boer K, Betjes MG, Weimar W, Baan CC. The impact of induction therapy on the homeostasis and function of regulatory T cells in kidney transplant patients.

	<p>Nephrol Dial Transplant. 2014 Aug;29(8):1587-97.</p> <p>2. Baan CC, Graav de GN, Boer K. T follicular helper cells in transplantation: the target to attenuate antibody-mediated allogeneic responses? Current Transplantation Reports 2014;1:166-7</p> <p>3. Hendriks RW, Yuvaraj S, Kil LP. Targeting Bruton's tyrosine kinase in B cell malignancies. Nat Rev Cancer. 2014 Apr;14(4):219-32.</p> <p>4. Demmers MW, Korevaar SS, Betjes MG, Weimar W, Rowshani AT, Baan CC. Limited efficacy of immunosuppressive drugs on CD8+ T cell-mediated and natural killer cell-mediated lysis of human renal tubular epithelial cells. Transplantation. 2014 Jun 15;97(11):1110-8.</p> <p>5. Shushimita S, de Bruijn MJW, de Bruin RW, IJzermans JN, Hendriks RW, Dor FJMF. Dietary restriction and fasting arrest B and T cell development and increase mature B and T cell numbers in bone marrow. PLoS One. 2014 Feb 4;9(2):e87772</p> <p>6. Kil LP, de Bruijn MJ, van Hulst JA, Langerak AW, Yuvaraj S, Hendriks RW. Bruton's tyrosine kinase mediated signaling enhances leukemogenesis in a mouse model for chronic lymphocytic leukemia. Am J Blood Res. 2013;3(1):71-83.</p> <p>7. de Mik SM, Hoogduijn MJ, de Bruin RW, Dor FJMF. Pathophysiology and treatment of focal segmental glomerulosclerosis: the role of animal models. BMC Nephrol. 2013;14:74 doi: 10.1186/1471-2369-14-74.</p> <p>8. Litjens NH, de Wit EA, Baan CC, Betjes MG. Activation-induced CD137 is a fast assay for identification and multi-parameter flow cytometric analysis of alloreactive T cells. Clin Exp Immunol. 2013;174(1):179-91.</p> <p>9. Corneth OB, Mus AM, Asmawidjaja PS, Wolterink RG, van Nimwegen M, Brem MD, Hofman Y, Hendriks RW, Lubberts E. Lack of IL-17 receptor A signaling prevents autoimmune inflammation of the joint and gives rise to a Th2-like phenotype in collagen-induced arthritis. Arthritis Rheum. 2013 Oct 14. doi: 10.1002/art.38229.</p> <p>10. Baan CC, Peeters AM, Demmers MW, Mol WM, Boer K, Samsom JN, Rowshani AT, IJzermans JN, Weimar W. FoxP3 T cells and the pathophysiologic effects of brain death and warm ischemia in donor kidneys. Clin J Am Soc Nephrol. 2012;7:1481-9.</p> <p>11. Kil LP, de Bruijn MJ, van Nimwegen M, van Hamburg JP, Dingjan GM, Thaïss F, Rimmelzwaan GF, Elewaut D, Delsing D, van Loo PF, Hendriks RW. Btk levels set the threshold for B-cell</p>
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	<p>activation and negative selection of autoreactive B cells in mice. Blood 2012;119(16):3744-56.</p> <p>12. Vafadari R, Quaedackers ME, Kho MM, Mol WM, Chan G, Weimar W, Baan CC. Pharmacodynamic analysis of tofacitinib and basiliximab in kidney allograft recipients. Transplantation 2012;94(5):465-72.</p> <p>13. Sewgobind VD, Quaedackers ME, van der Laan LJ, Kraaijeveld R, Korevaar SS, Chan G, Weimar W, Baan CC. The Jak inhibitor CP-690,550 preserves the function of CD4CD25FoxP3 regulatory T cells and inhibits effector T cells. Am J Transplant. 2010;10(8):1785-95.</p> <p>14. Baan CC, Balk AHMM, Dijke IE, Korevaar SS, Peeters AM, de Kuiper RP, Klepper M, Zondervan PE, Maat LA, Weimar W. IL-21: an IL-2 dependent player in rejection processes. Transplantation 2007;83:1485.</p> <p>15. Kuwaki K, Knosalla C, Dor FJ, Gollackner B, Tseng YL, Houser S, Mueller N, Prabharasuth D, Alt A, Moran K, Cheng J, Behdad A, Sachs DH, Fishman JA, Schuurman HJ, Awwad M, Cooper DK. Suppression of natural and elicited antibodies in pig-to-baboon heart transplantation using a human anti-human CD154 mAb-based regimen. Am J Transplant. 2004;4(3):363-72.</p>
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