

Human decidual NK cells form immature activating synapses and are not cytotoxic

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In early pregnancy invading fetal trophoblasts encounter abundant maternal decidual natural killer cells (dNK). dNK express perforin, granzymes A and B and the activating receptors NKp30, NKp44, NKp46, NKG2D, and 2B4 as well as LFA-1. Even though they are granular and express the essential molecules required for lysis, fresh dNK displayed very reduced lytic activity on classical MHC I negative targets K562 and 721.221, $\approx 15\%$ of that of peripheral NK cells. dNK formed conjugates and activating immune synapses with 721.221 and K562 cells in which CD2, LFA-1 and actin were polarized toward the contact site. However, in contrast to peripheral NK cells, they failed to polarize their microtubule organizing centers and perforin-containing granules to the synapse, accounting for their lack of cytotoxicity.

lymphocytes | microtubule organizing center | perforin | pregnancy | uterus

In human pregnancy, the implanted embryo constitutes a hemiallograft but remains spared from attack by the maternal immune system (1). Fetal extravillous trophoblasts that invade the maternal decidua are in close contact with decidual natural killer cells (dNK), which constitute 50–90% of the resident lymphocytes in early gestation (2). The invading extravillous trophoblasts lack expression of classical class I MHC HLA-A and -B antigens (3), a characteristic associated with susceptibility of target cells to NK cell-mediated cytotoxicity (4), yet they are not rejected by dNK. They express HLA-C and the nonclassical HLA-E, -G, and CD1d MHC I molecules (5–8), which led to the proposal that these MHC antigens on trophoblasts interact with NK cell receptors (2, 6, 9). Both the missing self-hypothesis (4) and the observation that HLA-E and HLA-G expression protects MHC I-negative NK cell targets from cytotoxicity of peripheral blood NK cells (pNK) and pNK lines (9, 10) led to the idea that expression of nonclassical MHC I molecules by trophoblasts was necessary to prevent lysis by NK cells.

pNK constitute up to 15% of circulating lymphocytes and are defined by their CD56⁺ CD3[−] phenotype. They are represented by two different subsets, the CD56^{dim} CD16⁺ NK cell subset and the CD56^{bright} CD16[−] NK cell subset, constituting 95% and 5% of pNK, respectively (11). CD56^{dim} pNK are granular and known to be cytotoxic. In contrast, CD56^{bright} pNK do not contain granules and are noncytotoxic, but have greater cytokine production capacity (12).

dNK resemble the CD56^{bright} pNK subset in their CD56^{bright} CD16^{neg} phenotype but, like CD56^{dim} pNK, they contain cytotoxic granules (13). Transcriptional gene expression profiling has shown that dNK constitute a subset distinct from CD56^{bright} and CD56^{dim} pNK cells (14). Among the genes selectively overexpressed in dNK are secreted proteins with known immunosuppressive activity, suggesting that dNK might contribute to the generation of an immunosuppressive environment at the maternal fetal interface. On the other hand, perforin and granzymes A and B are expressed by dNK to a similar or higher level than by CD56^{dim} pNK cells (13, 14), suggesting that dNK may have cytotoxic potential. Different reports have produced conflicting interpretations of the cytotoxic capacity of dNK (6, 15–17).

NK cytotoxic activity results from a balance between inhibitory and activating signaling originated from the interaction of cell surface activating and inhibitory receptors with ligands expressed on the surface of the target cell (4, 18, 19). The balance between activating and inhibitory signaling also controls the supramolecular organization of proteins at the NK cell–target cell contact (20–22), defining the formation of activating and inhibitory NK immunological synapses (NKIS). At the activating NKIS, surface molecules, including CD2 and LFA-1, and intracellular molecules, among them filamentous actin (F-actin), accumulate in a time-dependent manner (22), followed by the mobilization of perforin-containing granules toward the target cell contact site (21).

On the other hand, at the inhibitory NKIS, killer cell Ig-like receptors accumulate on the NK side and HLA-C accumulates on the target cell side of the cell–cell contact in an ATP-independent and cytochalsins B- and D- and colchicine-insensitive manner. Interestingly, F-actin does not accumulate at the inhibitory NKIS (20, 23).

Here, the cytotoxic activity of human dNK on MHC I-negative targets and the formation of NKIS were carefully evaluated. Freshly isolated dNK displayed severely reduced cytotoxic activity, but surprisingly, the synapses they formed were activating NKIS, in that they accumulated F-actin at the cell–cell contact. The lack of cytotoxic activity stemmed from the inability of dNK to mature the activating synapses by polarization of the microtubule organizing center (MTOC) together with perforin-containing cytotoxic granules toward the target cell.

Materials and Methods

dNK Cells. dNK cells were isolated from decidua basalis obtained from patients undergoing first-trimester elective abortions as described (14), except that dNK enrichment was achieved by depletion of CD3⁺ cells and CD16⁺ cells with immuno-magnetic beads (Miltenyi Biotech). dNK were then used for confocal microscopy or were further purified with anti-CD56 coated magnetic beads for cytotoxicity experiments or for culture in the presence of 12 ng/ml IL-15 (PeproTech).

pNK Cells. pNK cells were isolated from peripheral blood as described (14) but immuno-magnetic beads were used for removal of CD3⁺ cells for confocal microscopy experiments. For cytotoxicity assays, pNK were further purified by the subsequent use of anti-CD56-coated magnetic beads.

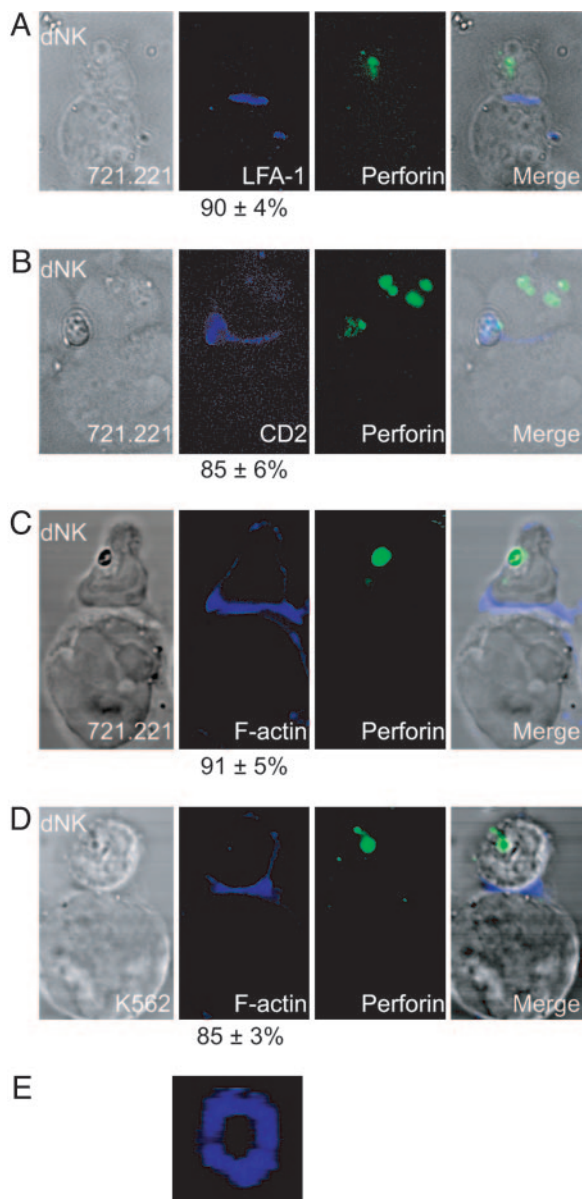
Mock Isolation of pNK. Mock isolation of pNK as if they were dNK was achieved by subjecting RosetteSep (Stem Cell Technologies) enriched pNK to the same isolation protocol used for dNK isolation.

Conflict of interest statement: No conflicts declared.

Abbreviations: NK, natural killer; dNK, decidual NK cells; pNK, peripheral blood NK cells; NKIS, NK immunological synapses; MTOC, microtubule organizing center.

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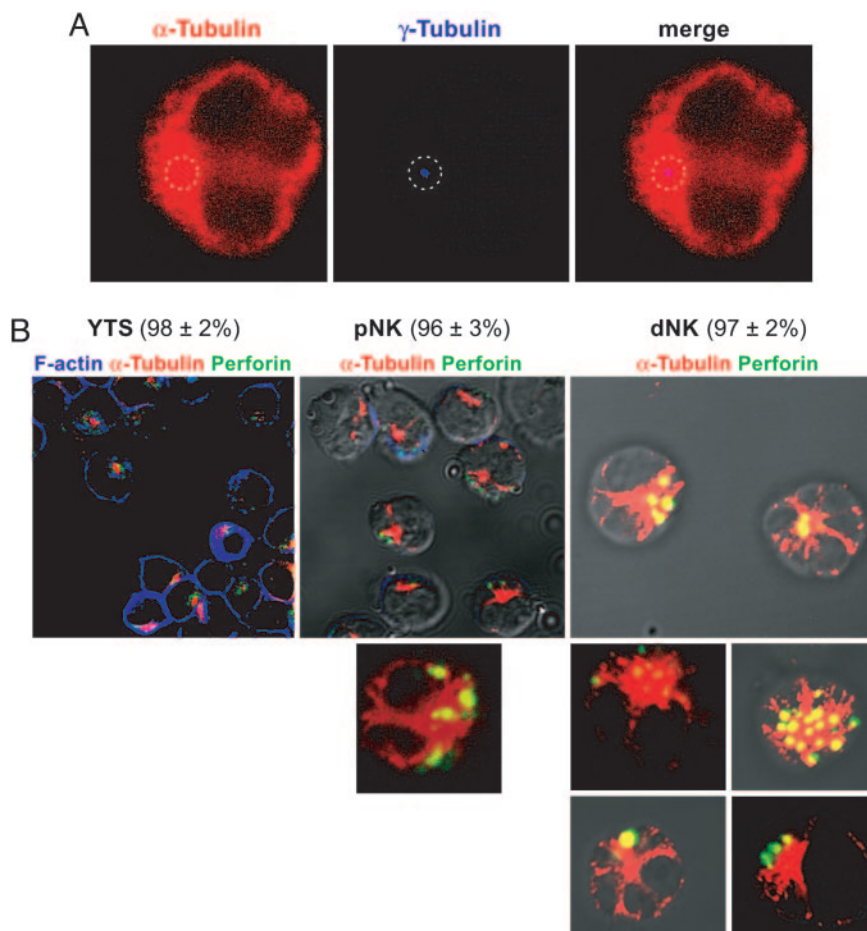


Fig. 4. Perforin containing granules are clustered around the MTOC in resting NK cells. (A) Confocal image of a YTS cell showing the microtubule cytoskeleton stained with anti α -tubulin antibodies (red). γ -tubulin staining (blue dot) locates the MTOC in the center of an α -tubulin dense area. A dotted line circle highlights the location of γ -tubulin staining. (B) Confocal images of unconjugated YTS cells (Left), pNK (Center), and dNK (Right). α -tubulin (red), perforin (green) and F-actin (blue in Left) are shown. The MTOC is located at the center of the red dense area. Numbers at the top indicate the percentage of cells of each NK cell type showing perforin containing granules clustered around the MTOC.

exposure of NK cells to trophoblast cell lines known to express HLA-C and HLA-G, such as Jeg-3 and BeWo (Fig. 2C). The reduced cytotoxicity of fresh dNK on MHC I-negative targets (Fig. 1A) indicates that the failure to polarize the MTOC and

cytotoxic granules is, by itself, sufficient to inhibit dNK cytotoxicity.

The mechanism that prevents polarization of the MTOC and cytotoxic granules is presently unknown. Because dNK and pNK

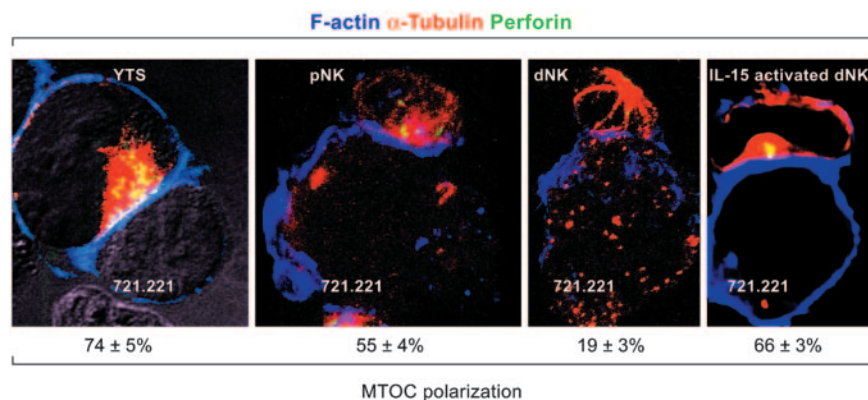


Fig. 5. Fresh noncytotoxic dNK fail to polarize the MTOC and perforin containing granules to the target cell contact site, as is done by the cytotoxic pNK, YTS, and IL-15-activated dNK. Confocal images of conjugates of a YTS cell (Left) a pNK cell (center left), a dNK cell (Center Right), and a dNK cell incubated 36 h in IL-15 (Right) with 721.221 cells. Staining shows α -tubulin (red), perforin (green), and F-actin (blue). Numbers at the bottom indicate the percentage of conjugates showing the MTOC polarized toward the target cell contact site.

