

Cystic Fibrosis Research News

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Title:

IgG avidity to *Pseudomonas aeruginosa* over the course of chronic lung biofilm infection in cystic fibrosis

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What was your research question?

While the antibody response to bacteria is intense, it still may not be efficient enough to clear Pseudomonas infection from CF airways. We asked whether the ability of antibodies specific for Pseudomonas to recognise the bacteria changes over the course of chronic Pseudomonas lung infection in CF.

Why is this important?

The body's main defence against Pseudomonas is the IgG antibody. Yet the functional mechanisms of why this does not work in CF are poorly understood. Studying this may help to clarify why the antibody response is not showing appropriate immune effectiveness against Pseudomonas infection in individuals with CF.

What did you do?

We assessed serum samples from 10 patients seen at the Copenhagen CF Reference, in Denmark, who developed chronic Pseudomonas lung infection. These samples were dated from two years prior to the onset of chronic infection until two years after positive culture results. To determine the functionality of anti-Pseudomonal IgG antibody, we measured how strongly the antibodies interacted against different antigens (structures of the bacterial

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cell) of Pseudomonas. These results were compared against those from a group of 10 patients, who had occasional but not chronic Pseudomonas colonization over 5 years.

What did you find?

The ability of antibody IgG to bind Pseudomonas alginate, the main component of the biofilm-producing mucoid Pseudomonas, did not increase either in the onset of chronic infection or two years post onset During this period, there is a high and repeated exposure to this antigen. Similarly, antibodies in patients with occasional colonization did not increase to alginate either.

What does this mean and reasons for caution?

IgG is the main antibody involved in the inflammatory response, attracting neutrophils of the immune system to the infection site. Neutrophils are the main actors in bacteria capture and destruction. The low binding ability of IgG in CF airways may reflect flaws in antibody production by B-lymphocytes in CF and possibly play a role in the poor immune response against Pseudomonas.

What's next?

Experiments evaluating the capacity of opsonization (marking of the bacteria for later elimination) of these IgG antibodies against non-mucoid and mucoid Pseudomonas strains will be performed to better understand our findings.

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