

Letter to the Editor

Further Observation on Interferon Production by Chronic Lymphocytic Leukemia Cells*

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THERE have been several reports [1-6] confirming our early observation [7, 8] of a depressed interferon (IFN) production by chronic lymphocytic leukemia (CLL) leukocytes in response to a viral stimulus. In these studies control cells were obtained from normal, age-matched individuals and consisted of either a mixed leukocyte preparation of granulocytes, monocytes and lymphocytes or unfractionated mononuclear cells (MC) of lymphocytes and monocytes. Sendai virus or Newcastle disease virus (NDV) was employed at a single dose as an interferon inducer. Presumably the dose was predetermined as being optimal for stimulating the control cell suspension to produce IFN. We now reasoned that such a comparison might not be adequate, especially in the light of two recent relevant pieces of information; one defined the major source of Sendai virus- and NDV-induced human IFN to come from non-T lymphocytes [9, 10] and the other documented that most patients with CLL have both normal T and B lymphocytes and leukemic cells of B cell origin bearing 'monoclonal' membrane-bound immunoglobulin in the peripheral blood [11].

In this study we have compared the cell source of IFN production by normal and CLL peripheral MC populations in response to stimulation with NDV at a broad range of concentrations. Details of the methods for preparing MC, enriched populations of T, non-T (B-enriched) and monocytic cells as well as for IFN production and

assay were as described previously [12, 13]. Ten of the 17 CLL patients had not received any treatment prior to testing.

The results as shown in Fig. 1 indicated that non-T (B-enriched) cells produced consistently and significantly higher levels of IFN than the unfractionated MC or the monocytes over a broad range of NDV concentration. On the other hand, the E-rosetted T cells produced very little or no IFN within the range of NDV concentration studied.

Figure 1 also depicts IFN response of non-T (B-

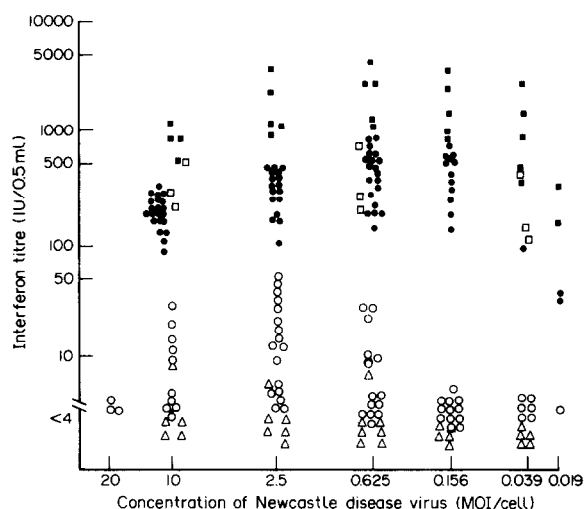


Fig. 1. Interferon production by various human peripheral mononuclear cell populations from normal adult controls and CLL-non-T (B-enriched) (○) cells in response to stimulation with Newcastle disease virus. Normal cell populations studied included unfractionated mononuclear cells (●), E-rosette T (▲), non-T (B-enriched) (△) cells and adherent monocytes (■). Twenty control and 17 CLL-donors contribute to the IFN values shown.

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enriched) cells from CLL donors. These results confirmed and extended earlier studies that CLL leukemic cells or non-T (B-enriched) cells as shown here produced a negligible amount or a significantly lower level of IFN than control unfractionated MC or non-T (B-enriched) cells over a range of NDV concentrations. Since CLL have normal T and B cells in the peripheral blood as well as leukemic B cells [11], it was quite likely that the low-level IFN response might be attributed to the presence of a small number of normal B cells. Like control T cells, the E-rosette

T cells from CLL were found to be unresponsive to IFN induction by NDV over a range of NDV concentrations. It should be reminded also that reduced production of IFN in CLL was demonstrated not only with viral inducers but also with mitogenic stimuli to T and B cells [14].

In conclusion, our results show that non-T (B-enriched) cells from normal adults represented the major cell source of IFN in human MC cultures induced by NDV. In contrast, non-T cells from CLL showed an apparent defect in IFN production.

REFERENCES

1. HADHAZY GY, GERGELY L, TOTTH FD, SZEGEDI GY. A comparative study on the interferon production by the leukocytes of healthy and leukemic subjects. *Acta Microbiol Acad Sci Hung* 1967, **14**, 391-397.
2. SOLOVIEV VD. Some results and prospects in the study of endogenous and exogenous interferon. In: RITA G, ed. *The Interferons*. New York, Academic Press, 1967, 233-243.
3. STRANDER H, CANTELL K, LEISTI J, NIKKILA E. Interferon response of lymphocytes in disorders with decreased resistance to infections. *Clin Exp Immunol* 1970, **6**, 263-272.
4. MCKENZIE AMR. Variations in interferon production by lymphocytes from patients with chronic lymphatic leukemia. *J Clin Pathol* 1972, **25**, 768-771.
5. CHISHOLM M, CARTWRIGHT T. Interferon production in leukaemia. *Br J Haemat* 1978, **40**, 43-50.
6. ADOLF GR, SWETLY P, LUDWIG H. Tumor-promoting compound (TPA) enhances interferon production in chronic lymphatic leukaemia cells. *Br J Haemat* 1981, **48**, 343-345.
7. LEE SHS, OZERE RL, VANROOYEN CE. Interferon production by human leukocytes *in vitro*. Reduced level in lymphatic leukemia. *Proc Soc Exp Biol Med* 1966, **122**, 32-39.
8. LEE SHS, VANROOYEN CE, OZERE RL. Additional studies of interferon production by human leukemic leukocytes *in vitro*. *Cancer Res* 1969, **29**, 645-652.
9. YAMAGUCHI T, HANDA K, SHIMIZU Y, ABO T, KUMAGAI K. Target cells for interferon production in human leukocytes stimulated by Sendai virus. *J Immunol* 1977, **118**, 1931-1935.
10. WIRANOWSKA-STEWART M, STEWART WE II. Determination of human leukocyte populations involved in production of interferons alpha and gamma. *J Interferon Res* 1981, **1**, 233-244.
11. HERSCH EM, GUINN GA, ROSEN R, WALLACE S, ROSE S, FREIRIECH ES. Two populations of lymphocytes in chronic lymphocytic leukemia. In: MCINTYRE OR, ed. *Proceedings of the 4th Leukocyte Culture Conference*. New York, Appleton-Century-Crofts, 1971, 343.
12. LEE SHS, LEE CLY, ROZEE KR. Production and characterization of human gamma interferon. In: KHAN A, HILL NO, eds. *Human Lymphokines: Biological Immune Response Modifiers*. New York, Academic Press, 1982, 303-318.
13. ROZEE KR, LEE SHS, CROCKER JFS, DIGOUT S, ARCINUE E. Is a compromised interferon response an etiologic factor in Reye's syndrome? *Can Med Assoc J* 1982, **126**, 798-802.
14. EPSTEIN LB, CLINE MJ. Chronic lymphocytic leukemia: studies on mitogen-stimulated interferon as a new technique for assessing T lymphocyte effector function. *Clin Exp Immunol* 1974, **16**, 353-363.