

Arterial macrophage responses in cardiovascular health and disease

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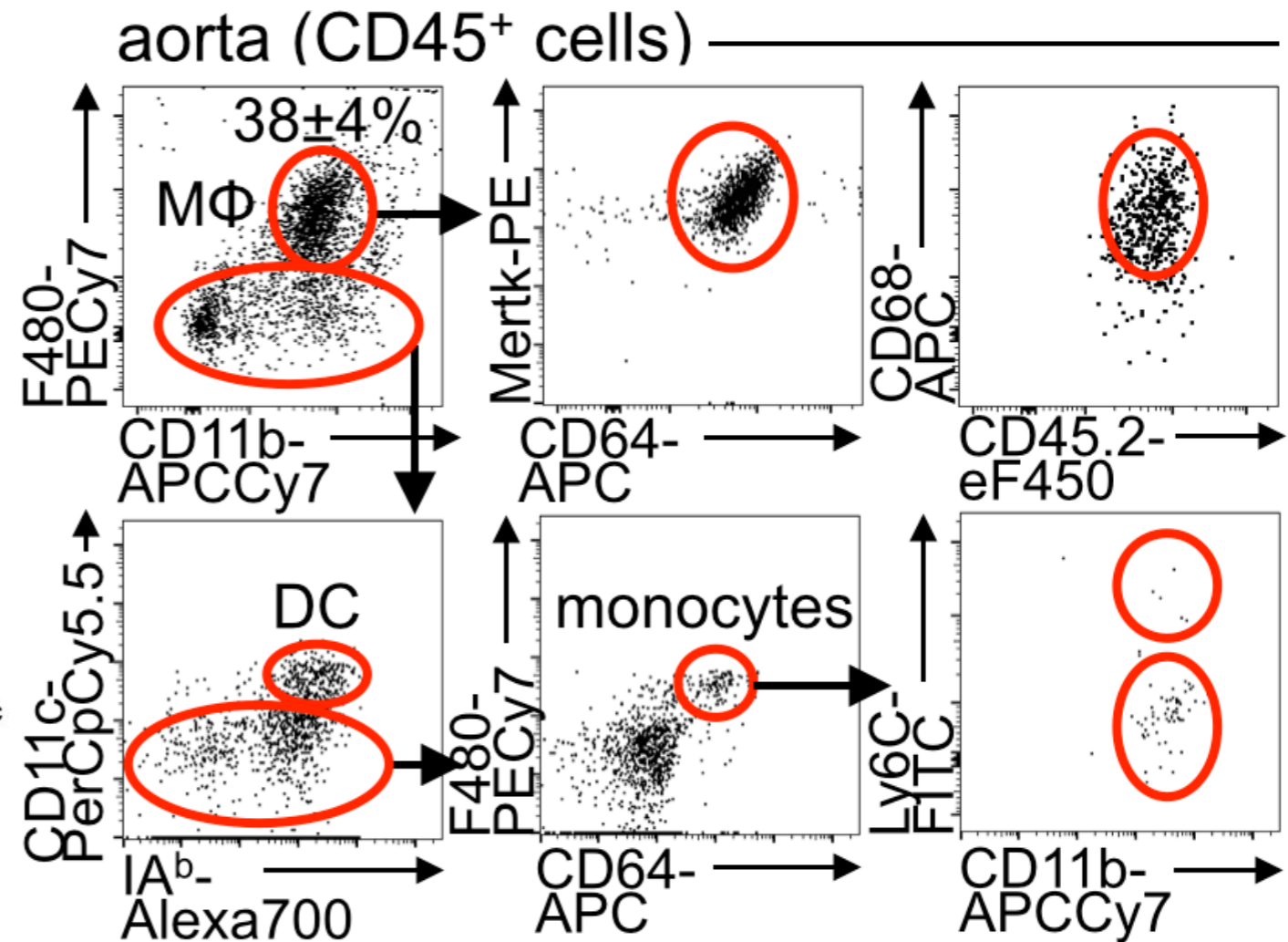
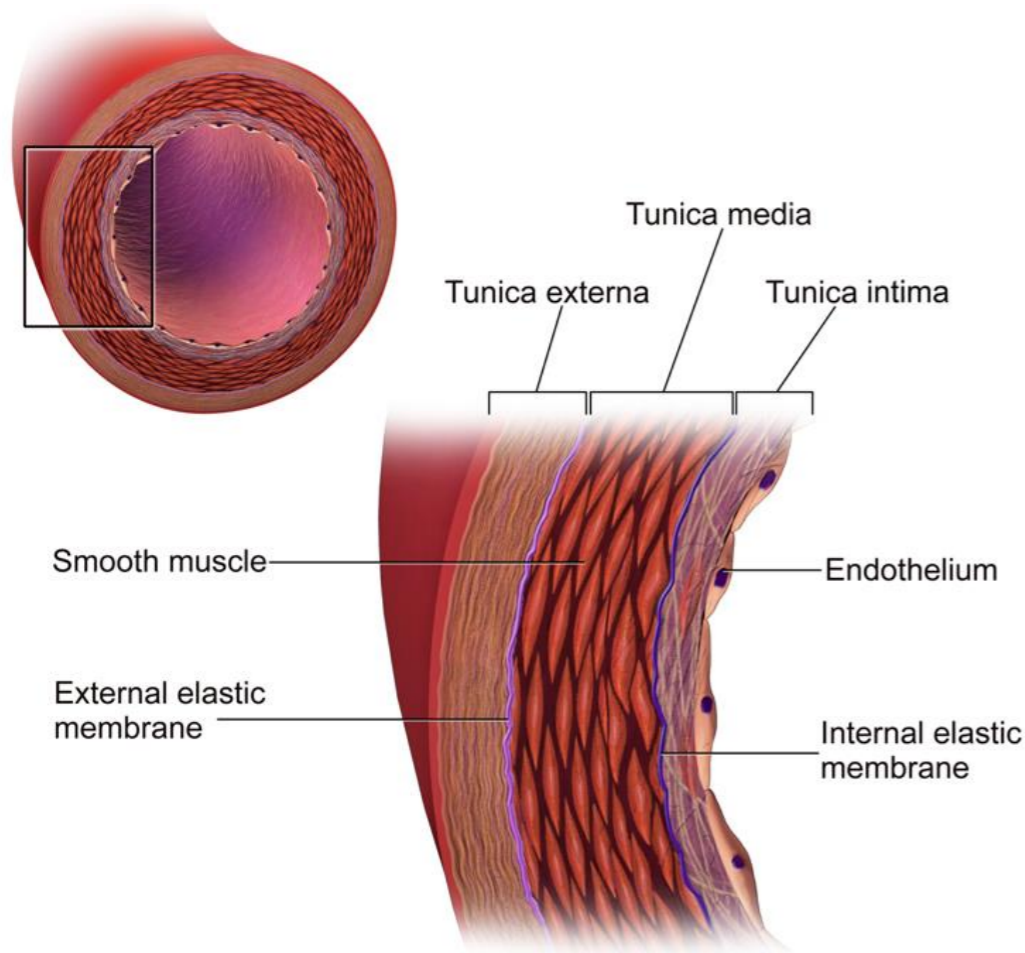
**Ottawa Heart Conference: Inflammation in
Cardiometabolic disease
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No disclosures

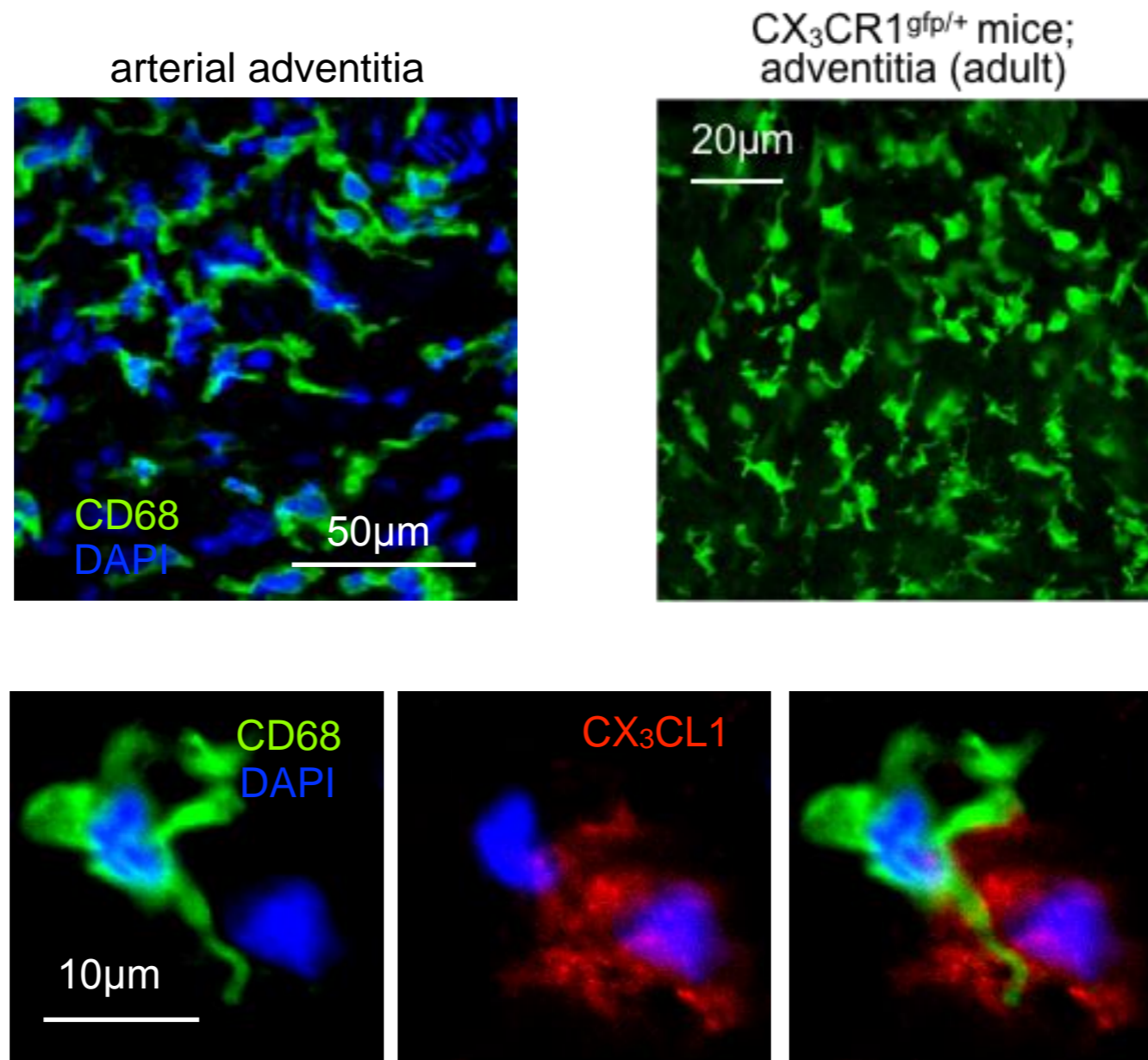
University of Toronto



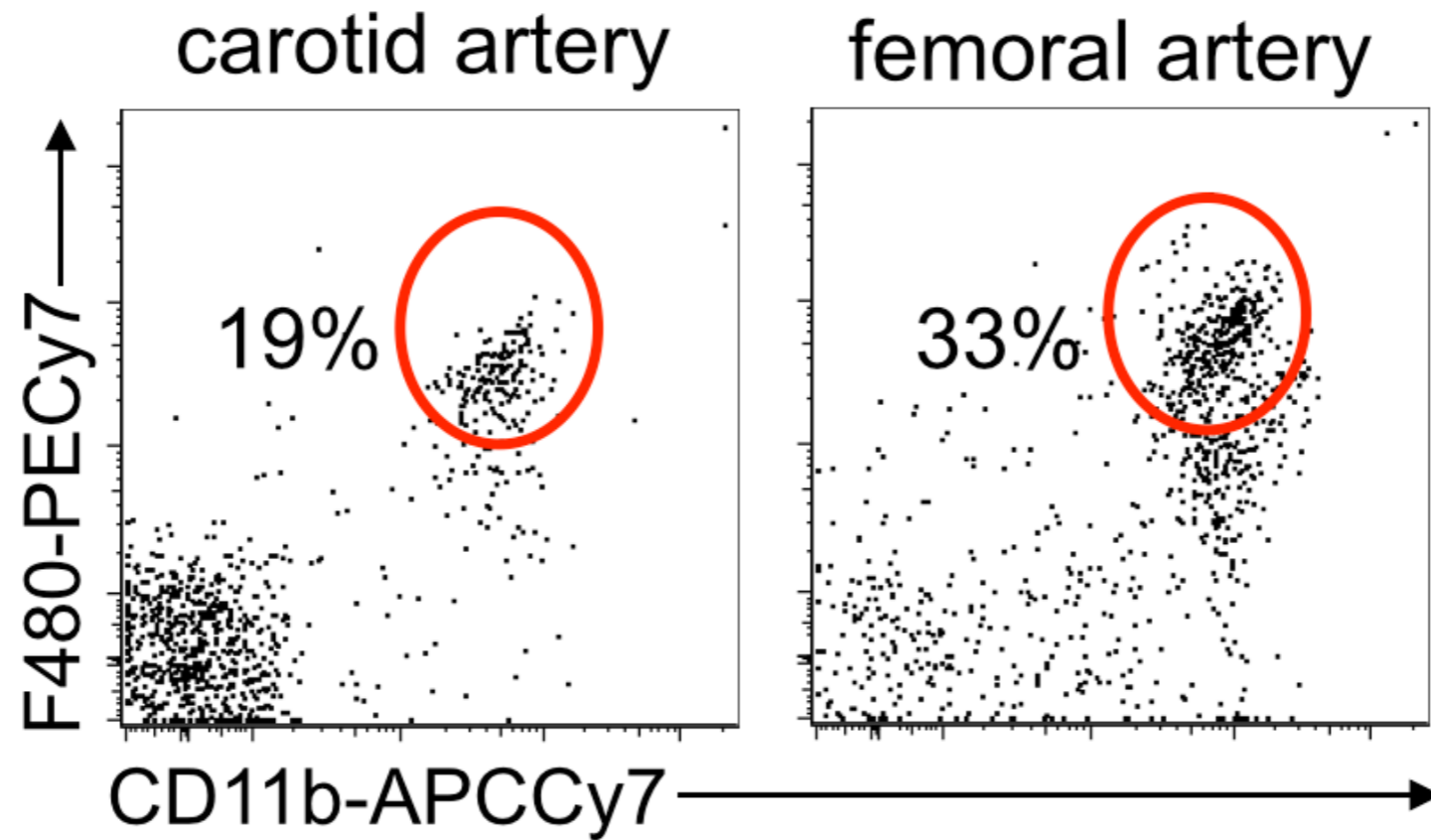
The normal arterial wall is densely populated by tissue MΦ



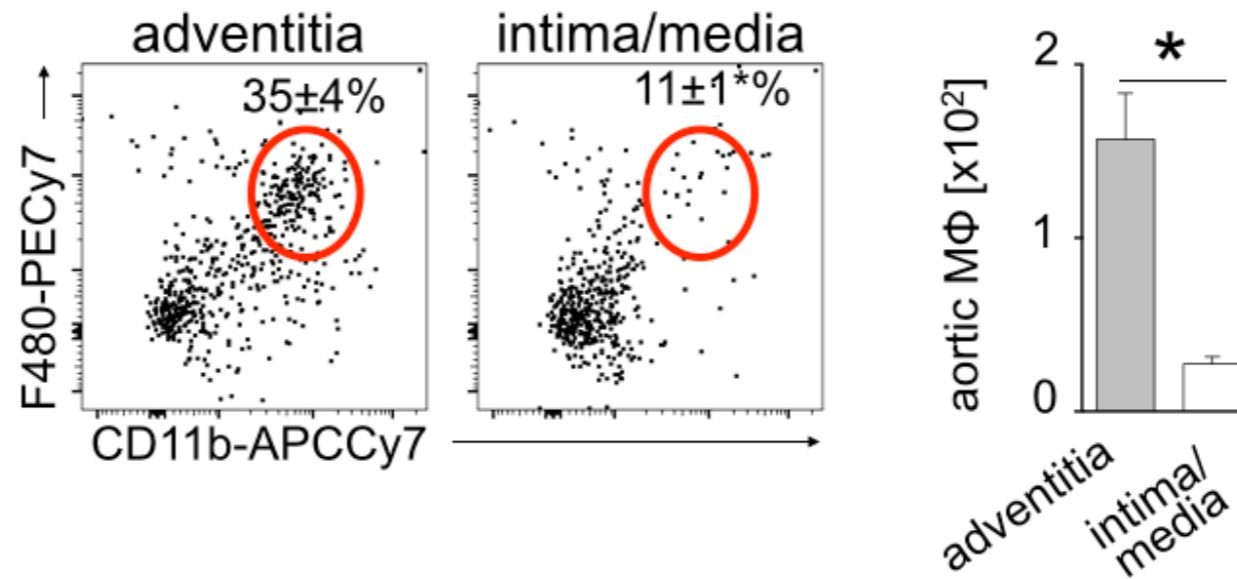
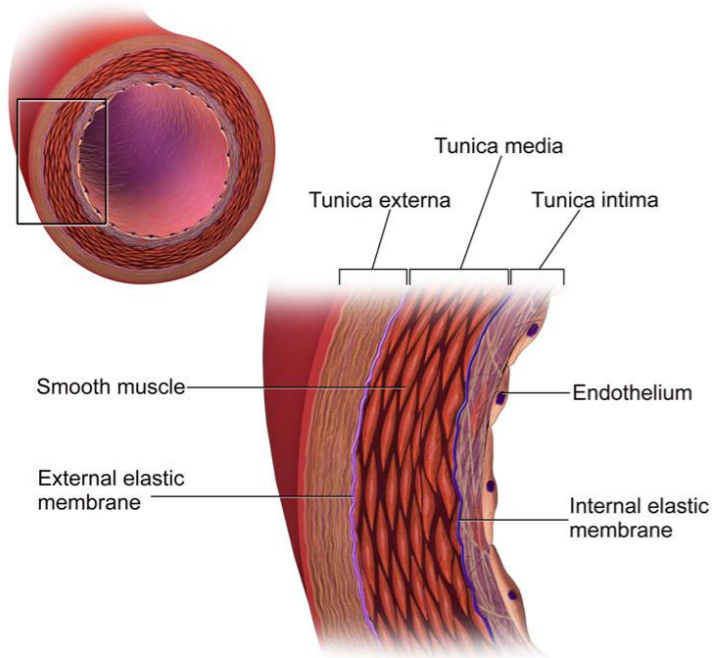
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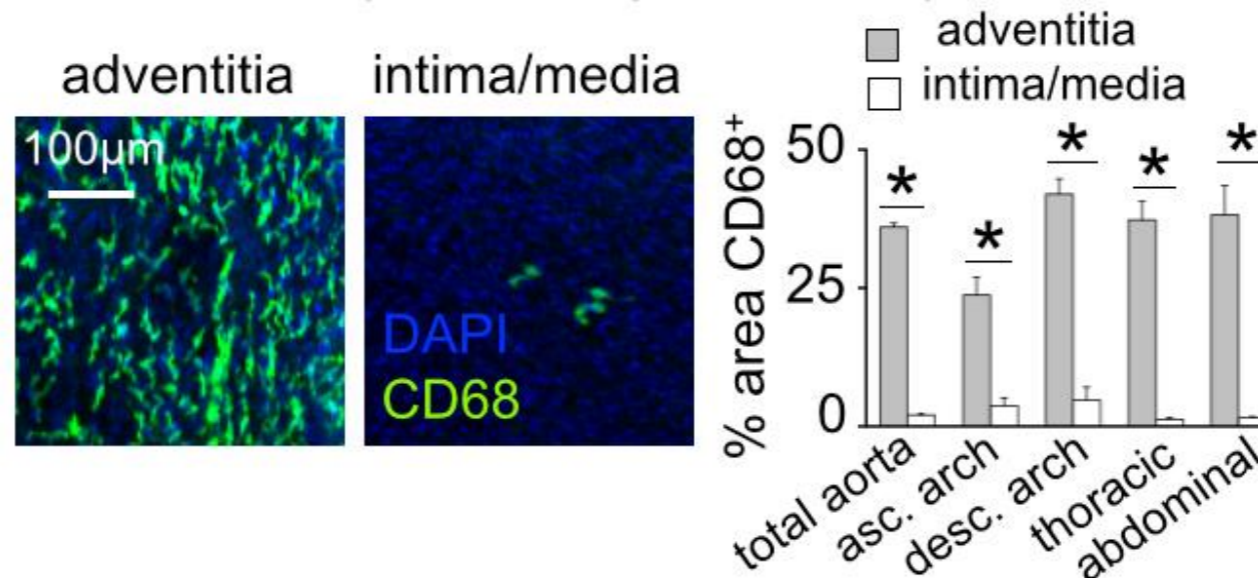
M Φ occupy multiple arterial sites.



Spatial distribution of arterial MΦ



CD68⁺ cells (descending aortic arch)



CCL19-CCR7-dependent reverse transendothelial migration of myeloid cells clears *Chlamydia muridarum* from the arterial intima.

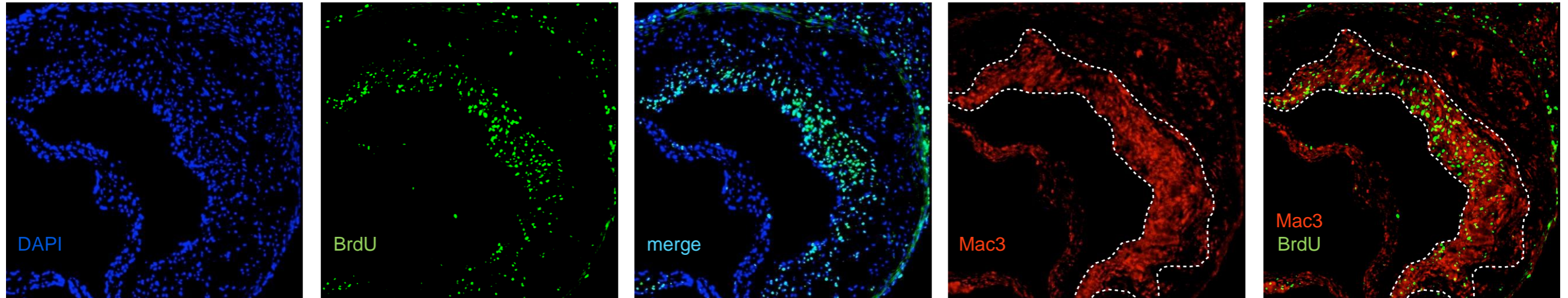
Roufaiel M^{1,2}, Gracey E^{3,4}, Siu A^{1,2}, Zhu SN¹, Lau A¹, Ibrahim H^{1,2}, Althagafi M^{1,2}, Tai K^{1,4}, Hyduk SJ¹, Cybulsky KO¹, Ensan S^{1,4}, Li A^{1,4}, Besla R^{1,2}, Becker HM^{1,2,4}, Xiao H¹, Luther SA⁵, Inman RD^{3,4,6}, Robbins CS^{1,2,4}, Jongstra-Bilen J^{1,2,4}, Cybulsky MI^{1,2,4}.

⊕ Author information

Abstract

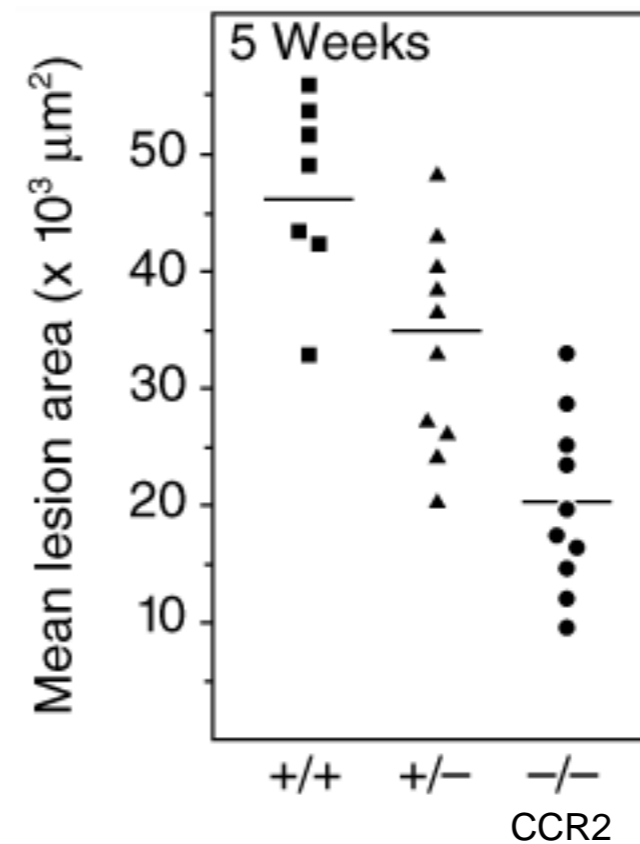
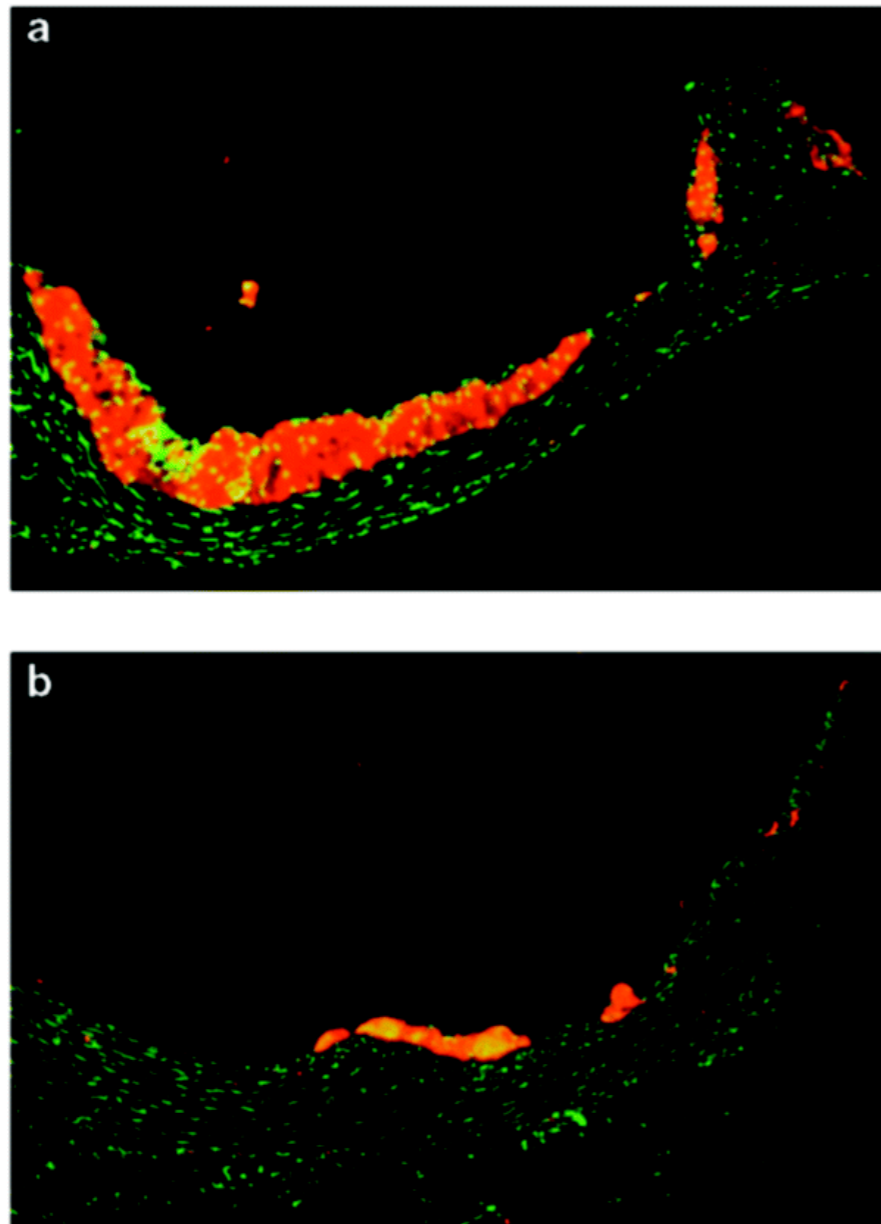
Regions of the normal arterial intima predisposed to atherosclerosis are sites of ongoing monocyte trafficking and also contain resident myeloid cells with features of dendritic cells. However, the pathophysiological roles of these cells are poorly understood. Here we found that intimal myeloid cells underwent reverse transendothelial migration (RTM) into the arterial circulation after systemic stimulation of pattern-recognition receptors (PRRs). This process was dependent on expression of the chemokine receptor CCR7 and its ligand CCL19 by intimal myeloid cells. In mice infected with the intracellular pathogen *Chlamydia muridarum*, blood monocytes disseminated infection to the intima. Subsequent CCL19-CCR7-dependent RTM was critical for the clearance of intimal *C. muridarum*. This process was inhibited by hypercholesterolemia. Thus, RTM protects the normal arterial intima, and compromised RTM during atherogenesis might contribute to the intracellular retention of pathogens in atherosclerotic lesions.

M Φ dominate inflammation in cardiovascular disease



Robbins, Hilgendorf *et al.* Nature Medicine 2013

MΦ depletion ameliorates cardiovascular disease



Boring *et al.* Nature 1998

Are all macrophages created equal?

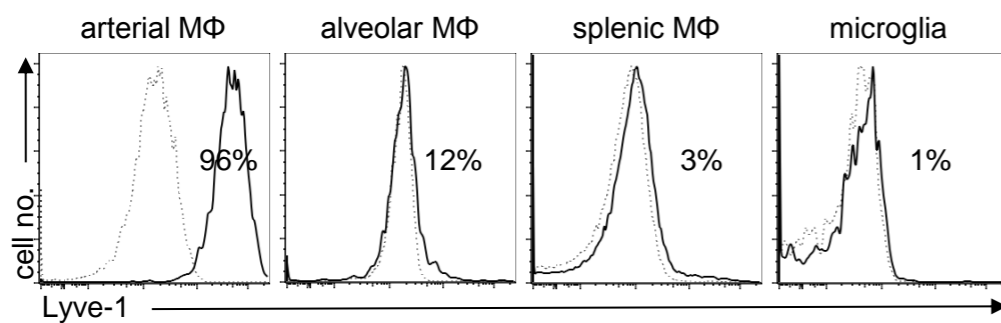
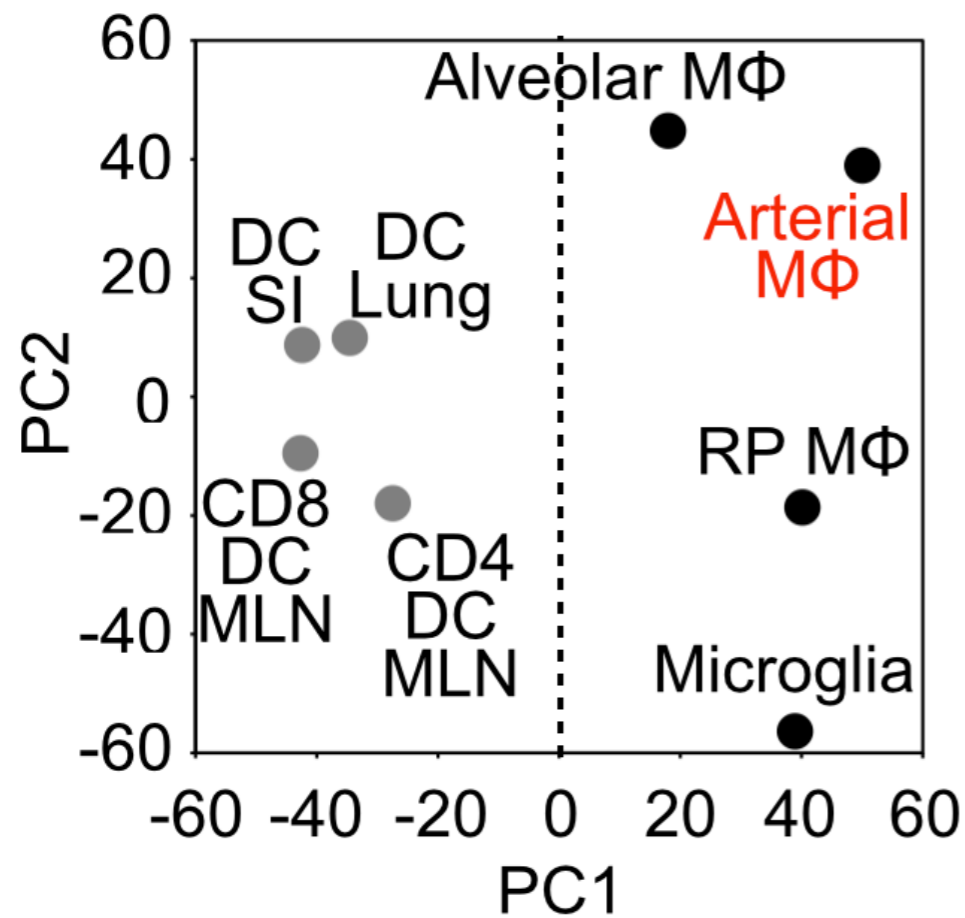
Diversity among tissue macrophages

Table 1 Distinct locations and functions of tissue macrophages

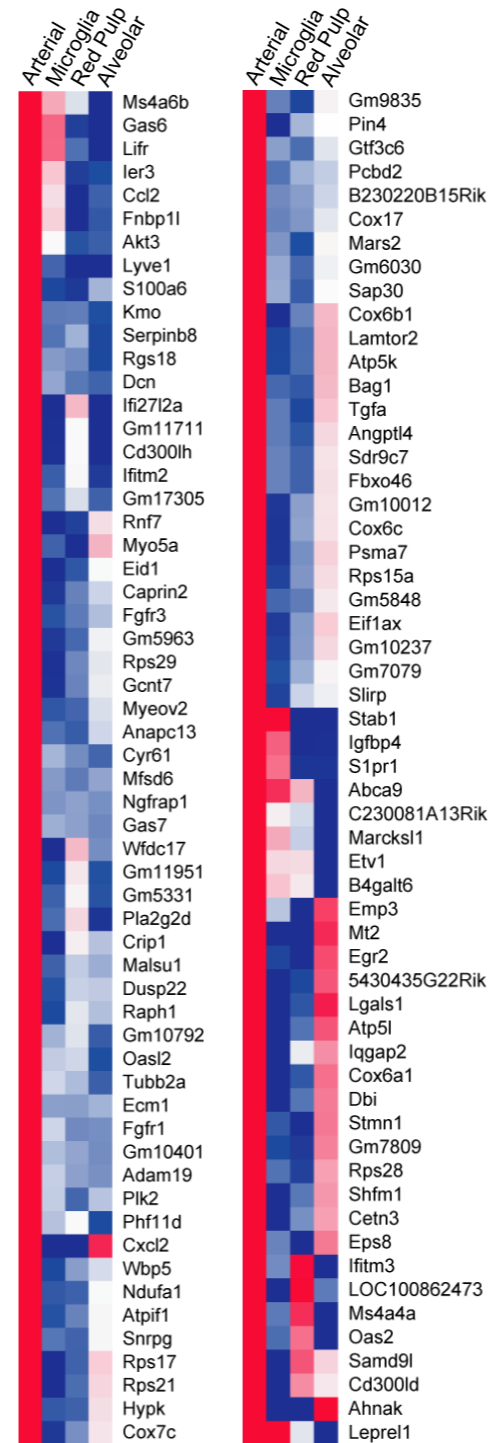
Tissue	Cell type ^a	Functions and notes ^b	Phenotypic markers (tissue-selective transcriptional regulators ^c)
Adipose tissue	'Adipose-associated macrophages'	Involved in control of insulin sensitivity ⁹⁵ and adaptive thermogenesis ⁹⁸	F4/80 ⁺ , CD45 ⁺ (white and brown adipose tissue) ⁹⁸ (PPAR γ ⁹⁵)
Blood	Ly-6C ^{lo} monocytes	Function analogously as 'intravascular housekeepers', clearing endothelial cell debris ¹¹⁴	CX3CR1 ⁺ , Ly-6C ^{lo} , F4/80 ⁺ , CSF1R ⁺ (ref. 114) (Nr4a1; ref. 114)
Bone	Osteoclasts	Multinucleated cells formed by fusion that resorb bone by disruption of the mineralized matrix ³⁵	Calcitonin receptor ⁺ (multinucleate) ¹¹⁶
	Bone marrow macrophages	Support erythropoiesis ^{86,87} and maintain hematopoietic stem cells in stem cell niches ¹¹⁵ ; this is an independent self-renewing population ²⁹	CD169 ⁺ , F4/80 ⁺ , ER-HR3 ⁺ (ref. 117)
Central nervous system	Microglia	Promote neuronal survival and are involved in frontline immune surveillance, removal of dead neurons and synaptic remodelling ^{75,118} ; derived from yolk sac and maintained in adult and during inflammation independently of the bone marrow ^{15,25,64}	F4/80 ⁺ , CD11b ⁺ , CD45 ^{lo} (ref. 119)
	Perivascular macrophages Meningeal macrophages	Immune surveillance Immune surveillance ¹¹⁹	F4/80 ⁺ , CD11b ⁺ , CD163 ⁺ , CD45 ^{hi} (ref. 119) F4/80 ⁺ , CD11b ⁺ , CD45 ^{hi} (ref. 119)
Gastrointestinal tract	Intestinal macrophages	Maintenance of intestinal homeostasis and regulation of immune responses to commensals ^{22,120} ; monocyte-derived ²²	CX3CR1 ^{hi} , F4/80 ⁺ , CD11b ⁺ , CD11c ⁺ , CD64 ⁺ (ref. 120)
Liver	Kupffer cells (sessile)	Clearance of microorganisms and cell debris from the blood, and clearance of aged erythrocytes ^{90,121} ; prenatal origins ²¹ ; maintained in the adult independently of the bone marrow ¹⁷	F4/80 ^{hi} , CD11b ^{lo} , CD169 ⁺ , CD68 ⁺ , Galectin-3 ⁺ (ref. 122), CD80 ^{lo/-} (ref. 121) ^d (PPAR δ ⁹⁷)
	Motile liver macrophages	Immune surveillance ¹²¹	F4/80 ⁺ , CD11b ⁺ , CD80 ^{hi} (ref. 121)
Lung	Alveolar macrophages	Immune surveillance of the lung for inhaled pathogens ⁵⁰ and homeostatic regulation of tissue function ^{71,123} , for example, clearance of surfactant; prenatal origins ²¹ ; maintained in adult and during inflammation independently of the bone marrow ^{29,124}	F4/80 ^{lo} , CD11b ^{lo} , CD11c ^{hi} , CD68 ⁺ , Siglec F ⁺ , MARCO ⁺ , CD206 ⁺ , Dectin-1 ⁺ (ref. 126), Galectin-3 ⁺ ¹²² (PPAR γ ⁷¹)
	Interstitial macrophages	Regulates DC maturation and/or activation ¹²⁵	F4/80 ⁺ , CD11c ⁻ , CD68 ⁺ , MHC II ⁺ (ref. 125)
Serosal tissues	Peritoneal macrophages: F4/80 ^{hi} majority	Immune surveillance and regulation of homeostatic environment ^{49,127} ; apoptotic cell clearance ⁷⁹ ; prenatal origins ²¹ ; maintained in adult and during inflammation independently of the bone marrow ^{21,28}	F4/80 ^{hi} , CD11b ^{hi} , Tim4 ⁺ (ref. 82) ^d , MHCII ^{lo}
	F4/80 ^{lo}		F4/80 ^{lo} , CD11b ⁺ , Tim4 ⁻ , MHCII ^{hi} , CD11c ^{+/+} (this population is most likely heterogeneous, mixed with dendritic cells)
	Pleural macrophages: F4/80 ^{hi} majority	Immune surveillance ¹²⁸ ; maintained in adult and can expand during T _H 2 cell inflammation independently of the bone marrow ⁴⁰	F4/80 ^{hi} , CD11b ^{hi} , Tim4 ⁺ (d)
	F4/80 ^{lo}		F4/80 ^{lo} , CD11b ⁺ , Tim4 ⁻ (dendritic cell-macrophage content undetermined; unpublished observations)
Skin	Dermal macrophages	Immune surveillance ¹²⁹	F4/80 ⁺ , CD11b ⁺ , CD11c ^{lo} , CD206 ⁺ , MHCII ^{lo} , CD169 ⁺ (In the deep dermis) ¹²² , Dectin-1 ⁺ , CD301 ⁺ (ref. 131), Dectin-2 ⁺ (ref. 132)
	Langerhans cells	Interaction with T lymphocytes ¹³⁰ ; derived from yolk sac and/or fetal liver and maintained independently of the bone marrow ^{14,16}	F4/80 ⁺ , CD11b ⁺ , CD11c ⁺ , Langerin ⁺ ¹⁴ (Id2 (ref. 133) and Runx3 (ref. 134))
Spleen	Marginal zone macrophages	Immune surveillance of the circulation ¹⁰¹	CD68 ⁺ , CD209b ⁺ , MARCO ⁺ , Dectin-2 ⁺ (ref. 132), Tim4 ⁺ (ref. 108), (LXR α ¹⁰⁸)
	Metallophilic macrophages	Immune surveillance ¹⁰¹	CD68 ⁺ , CD169 ⁺ (ref. 101) (LXR α ¹⁰⁸)
	Red pulp macrophages	Erythrocyte clearance and iron metabolism ¹⁰² ; prenatal origins ^{17,21} ; maintained in adult independently of the bone marrow ²⁹	F4/80 ⁺ , CD206 ⁺ , Dectin-2 ⁺ (ref. 132), Spi-C ¹⁰²
	White pulp (tingible body) macrophages	Clearance of apoptotic cells resulting during the germinal center reaction ⁹⁹	CD68 ⁺ (ref. 101)

^aThis table is a simplification; marked heterogeneity is evident in many tissues (for example, bone marrow, peritoneum, lung and liver) highlighted through fate mapping studies and phenotypic variation^{17,21,32,121,127}. ^bOrigin is indicated only where experimentally established. ^cSelect examples of tissue-selective transcriptional regulators involved in cellular development or function are indicated. ^dMarker is expressed by the majority of the indicated cells. Subsets are only listed where distinct anatomical localization, function or origins are reported, and not those that are simply defined by variation in select receptor or antigen expression.

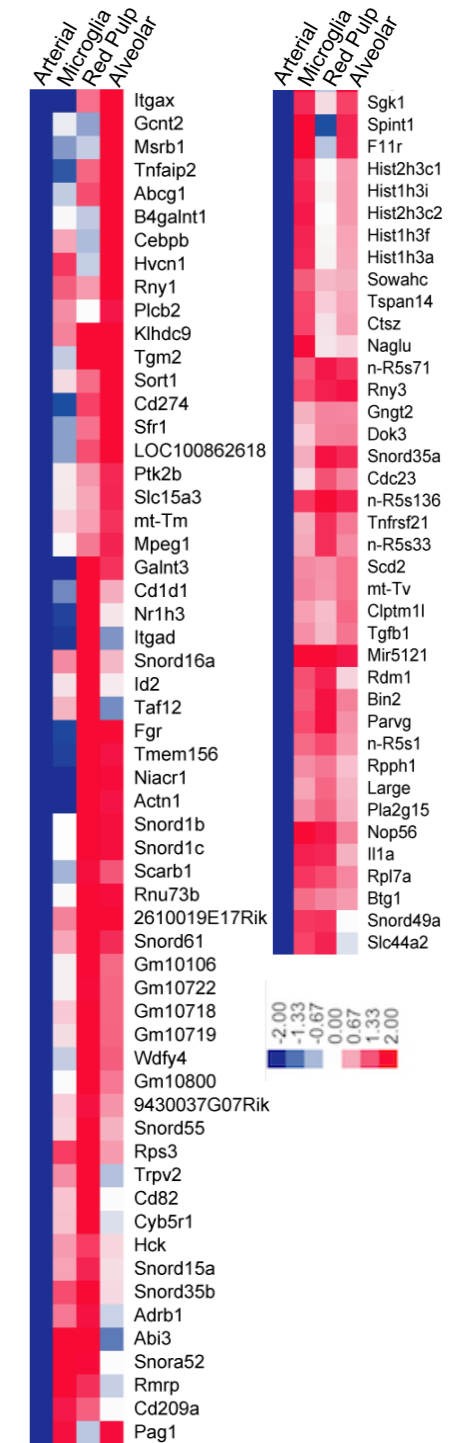
Diversity among tissue macrophages



Up-regulated



Down-regulated



Macrophage Origins

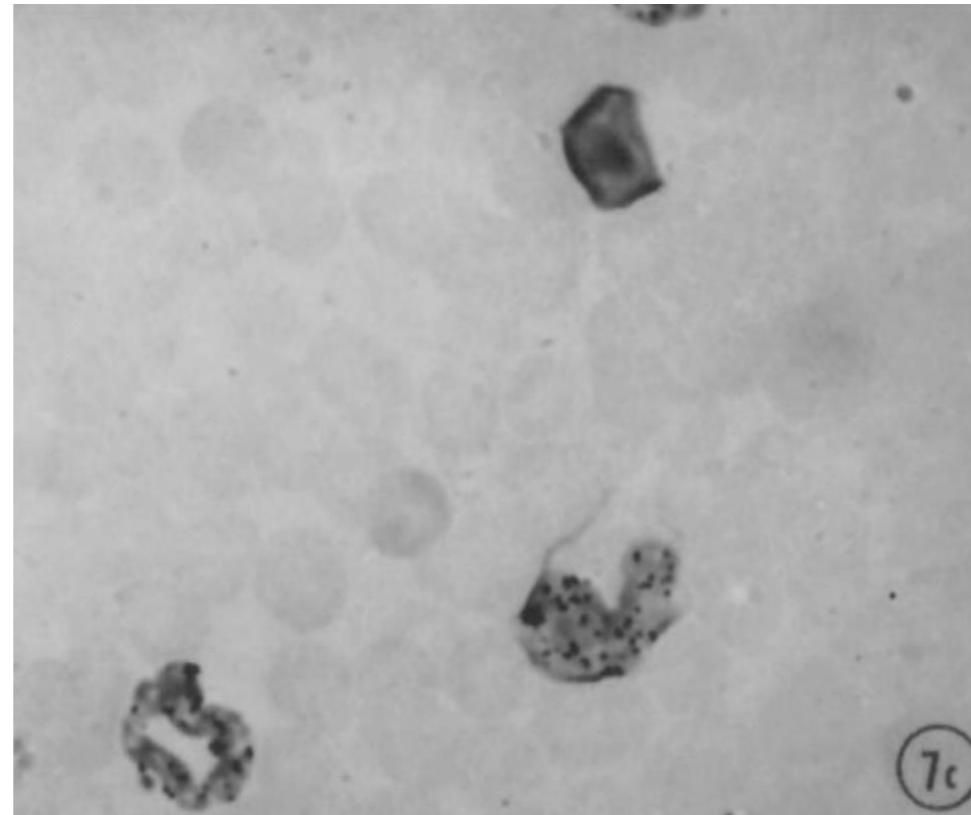
(beyond environmental influences)

THE ORIGIN AND KINETICS OF MONONUCLEAR PHAGOCYTES

BY RALPH VAN FURTH,* M.D., AND ZANVIL A. COHN, M.D.

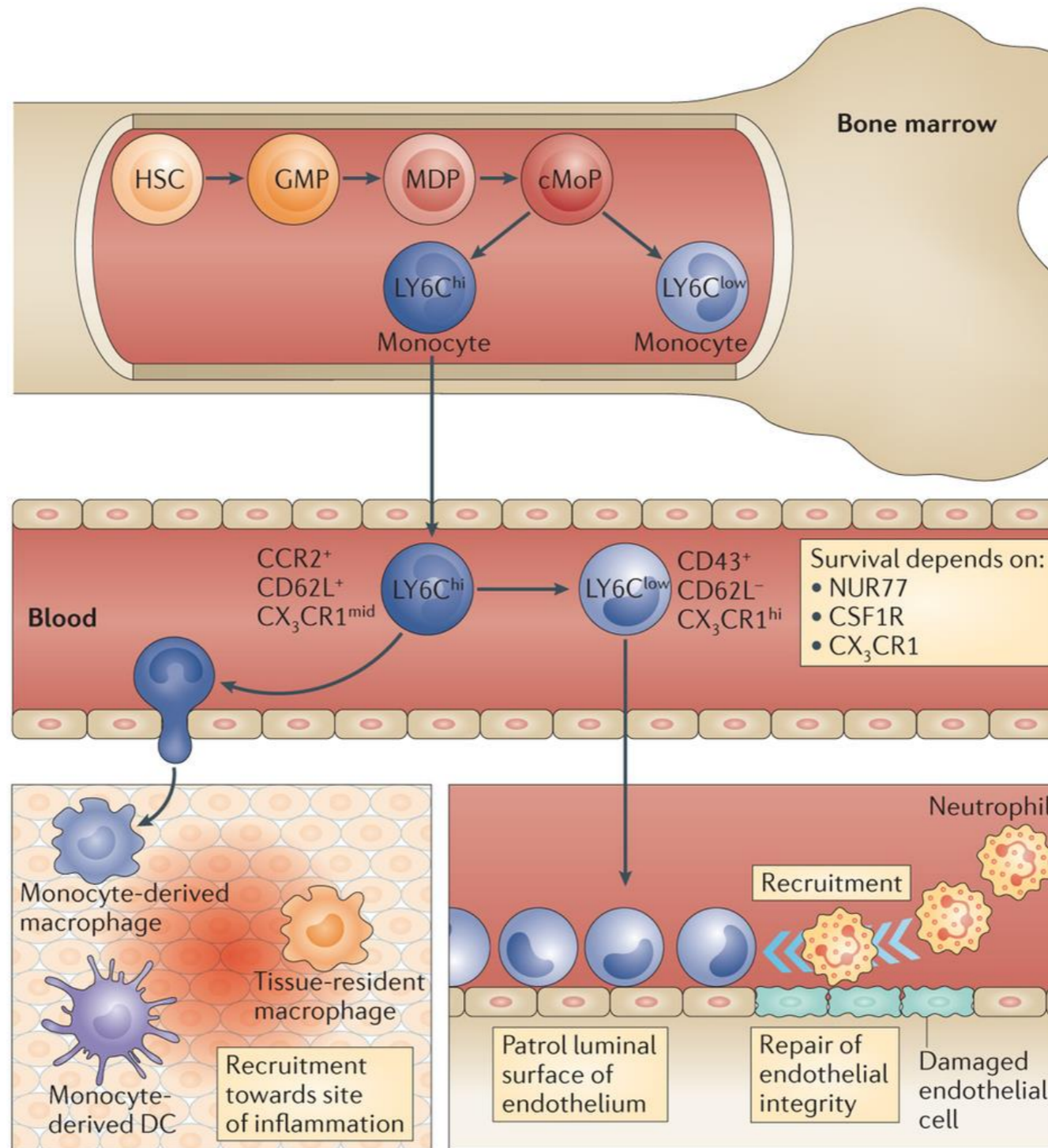
(From The Rockefeller University, New York 10021)

(Received for publication 8 May 1968)



On the basis of these studies the life history of mouse mononuclear phagocytes was formulated to be: *promonocytes* in the bone marrow, → *monocytes* in the peripheral blood, → *macrophages* in the tissue.

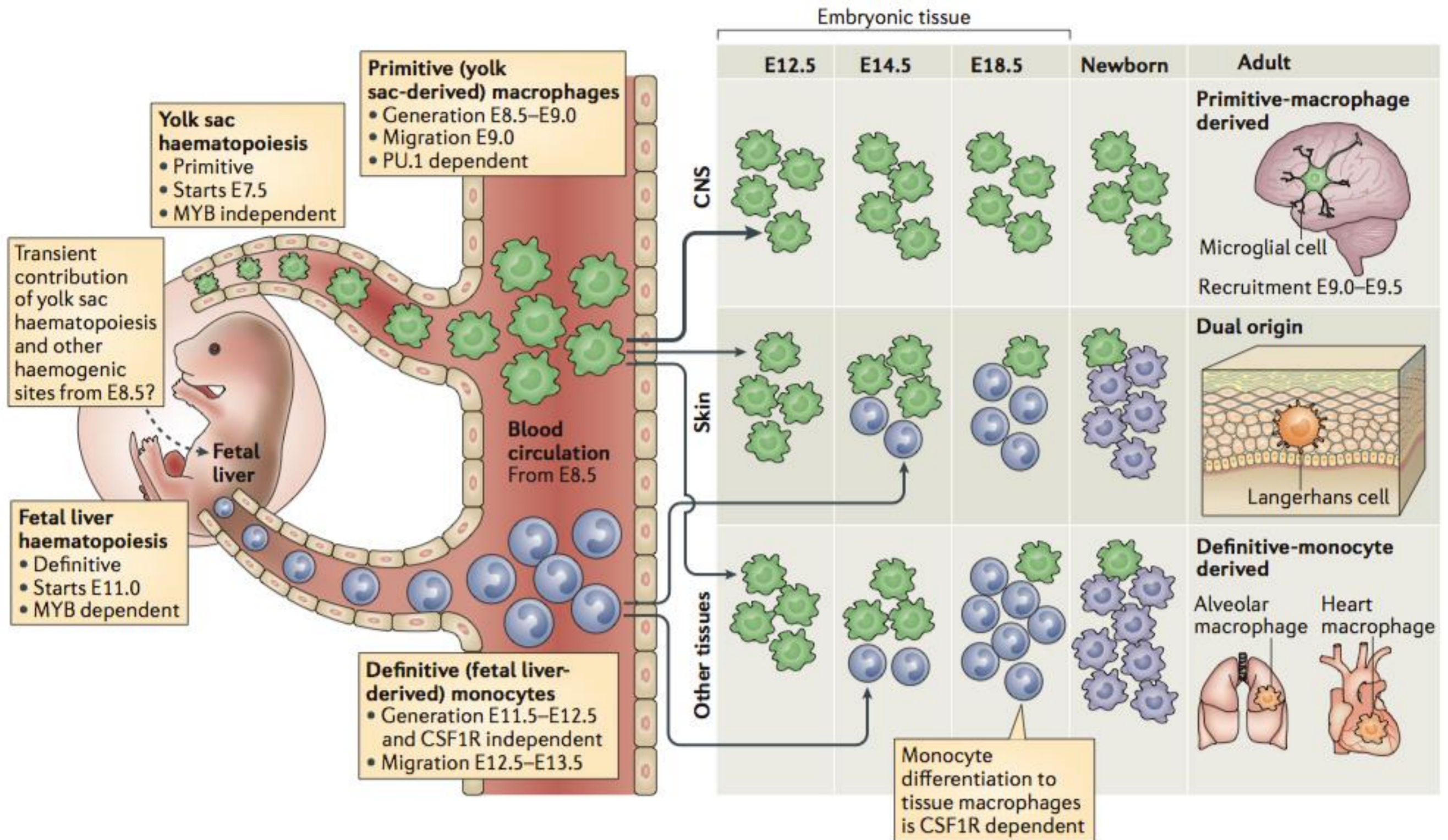
The mouse monocyte compartment



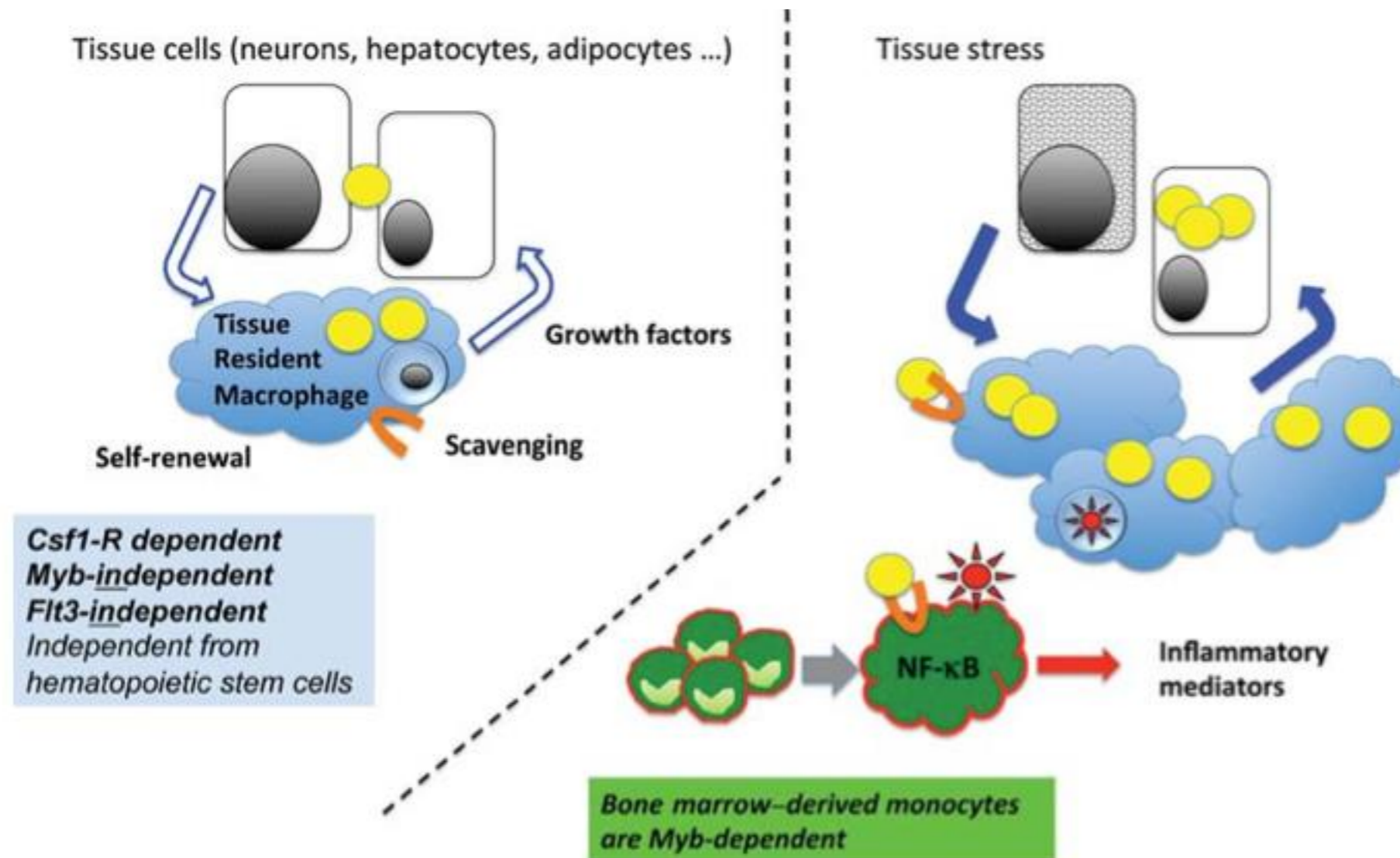
Nature Reviews | Immunology

Nature Reviews Immunology 14, 392–404 (2014)

Embryonic MΦ development

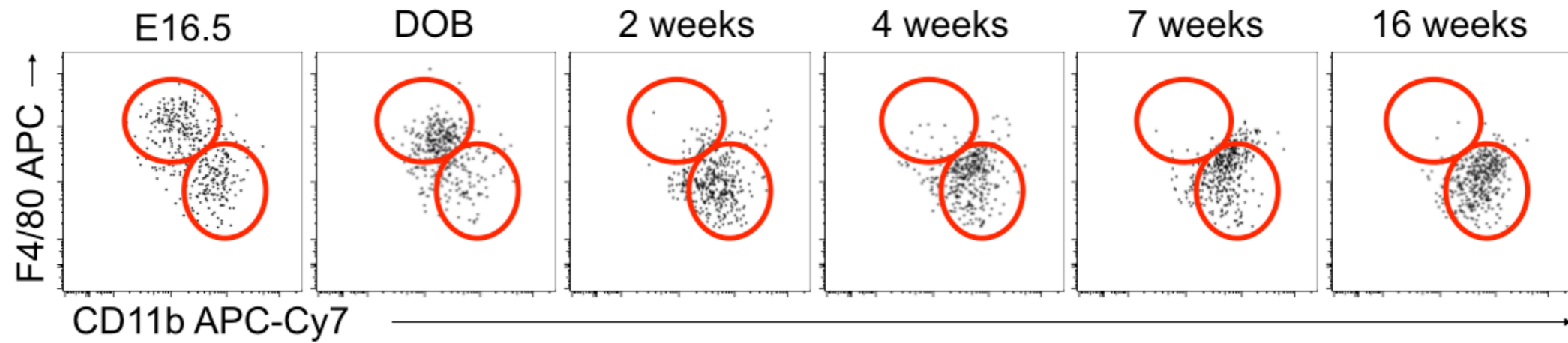


Functional differences between bone marrow dependent and independent macrophage networks



Arterial Macrophage Origins

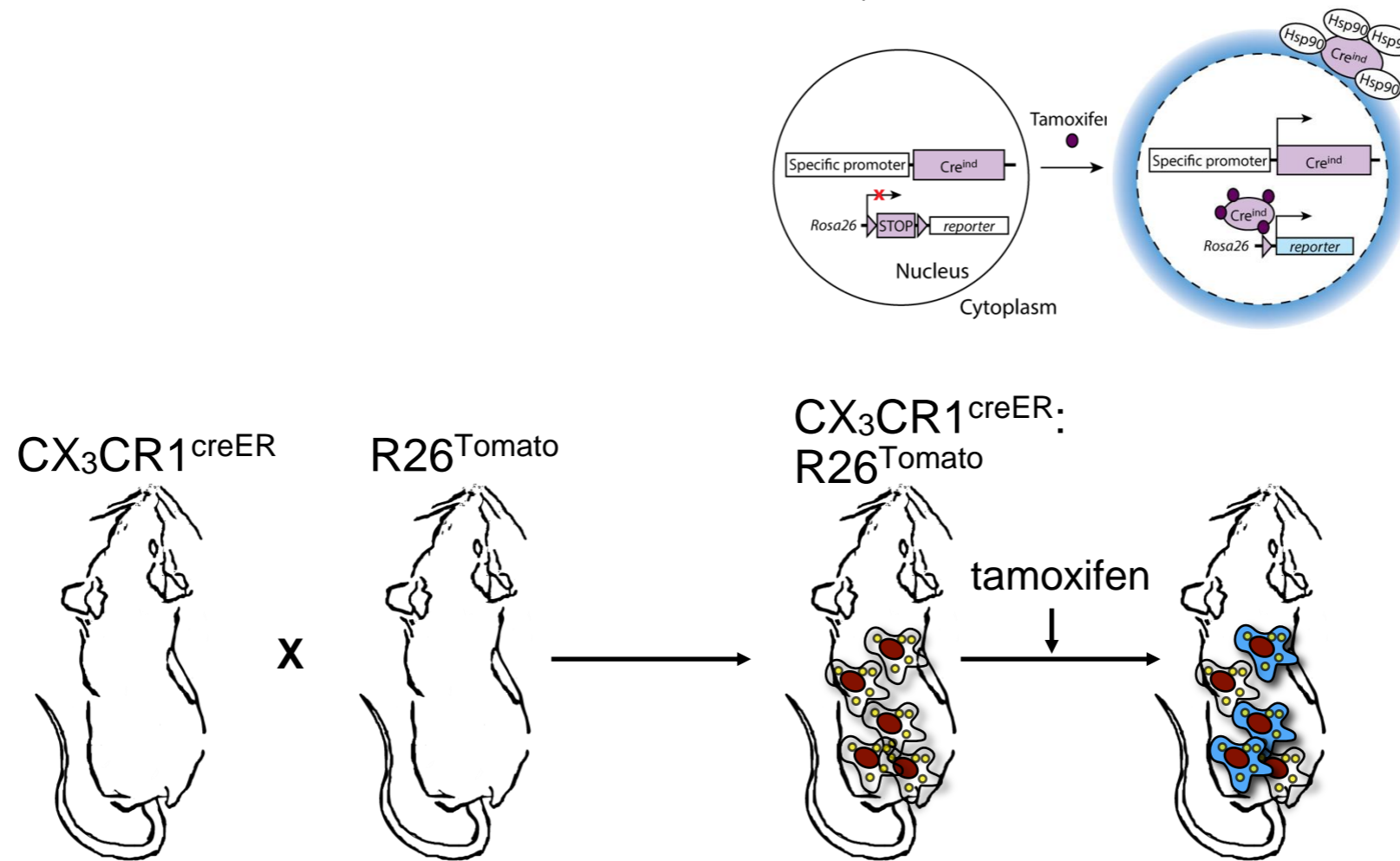
Embryonic origins of arterial macrophages



Ensan, Li, Besla *et al.* Nature Immunology 2016

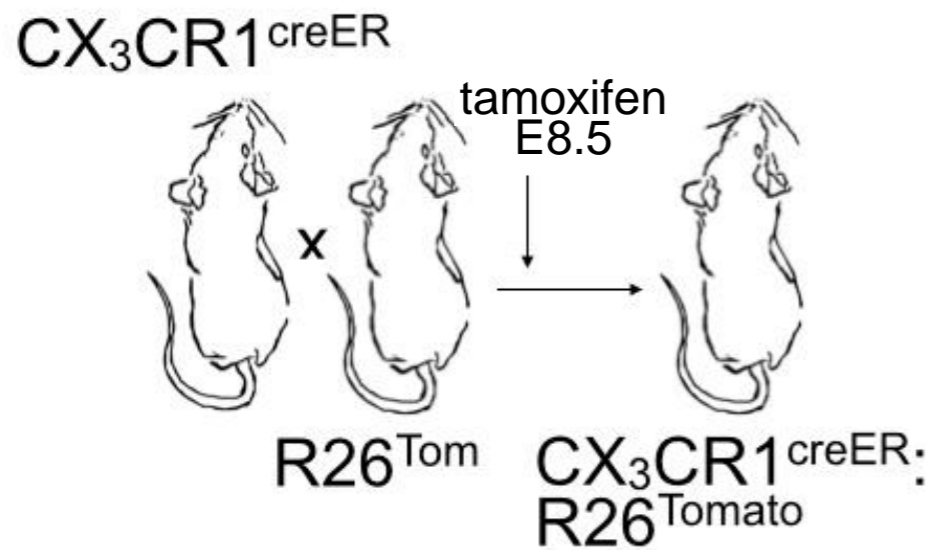
Embryonic origins of macrophages: Lineage Tracing

Adapted from Hofer *et al.* Annu Rev Immunol. 2016

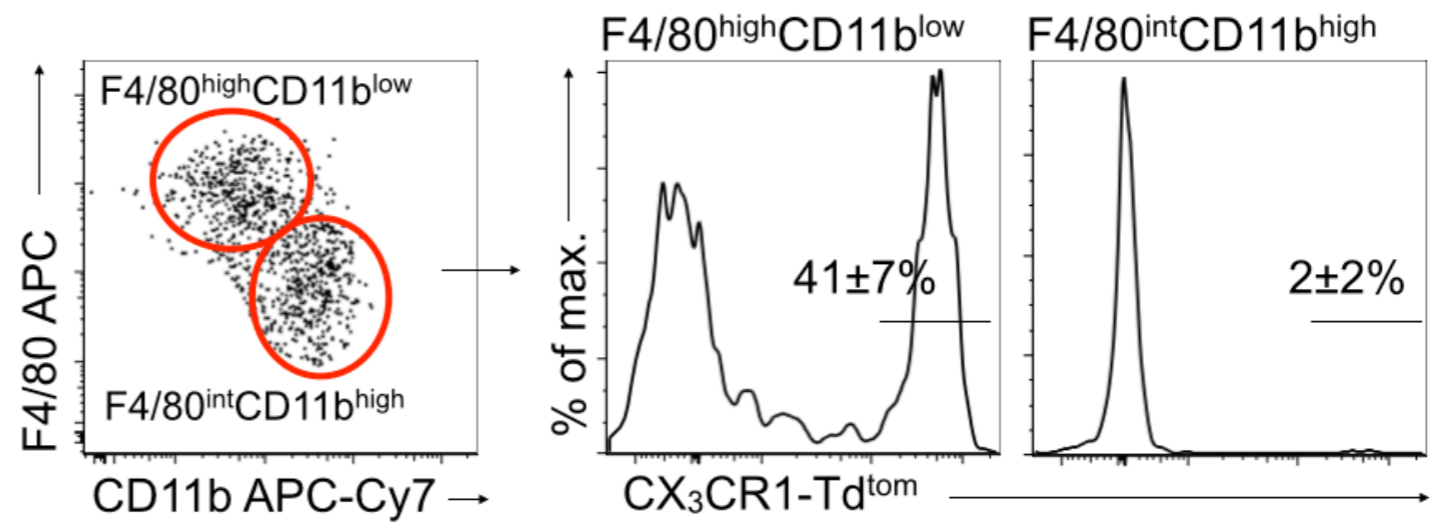


- pulse-label CX₃CR1-expressing progenitor cells in the yolk sac, fetal liver, etc.
- tamoxifen-induced expression of Cre recombinase under control of CX₃CR1 promoter

YS progenitor contribution to arterial MΦ development

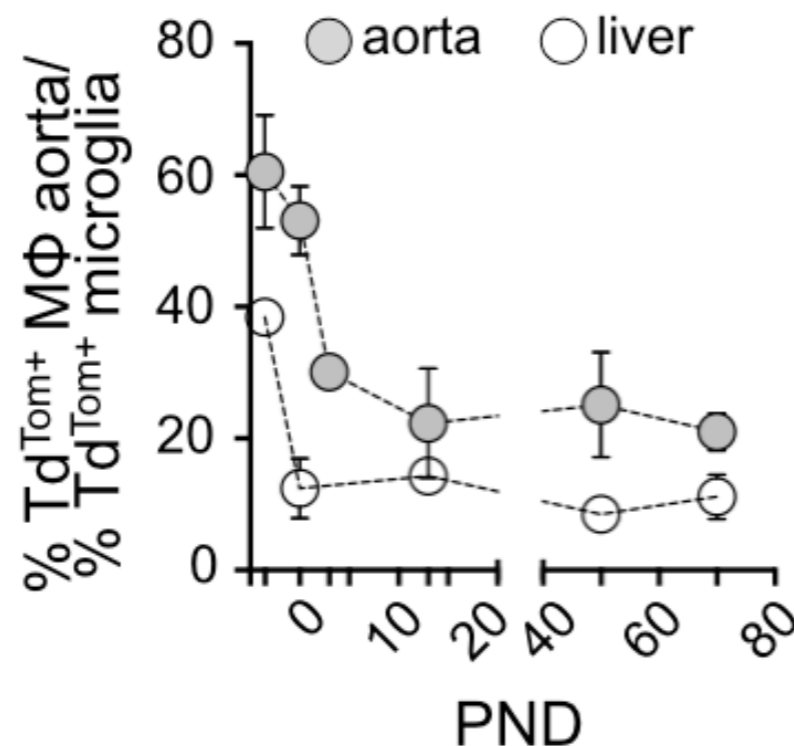
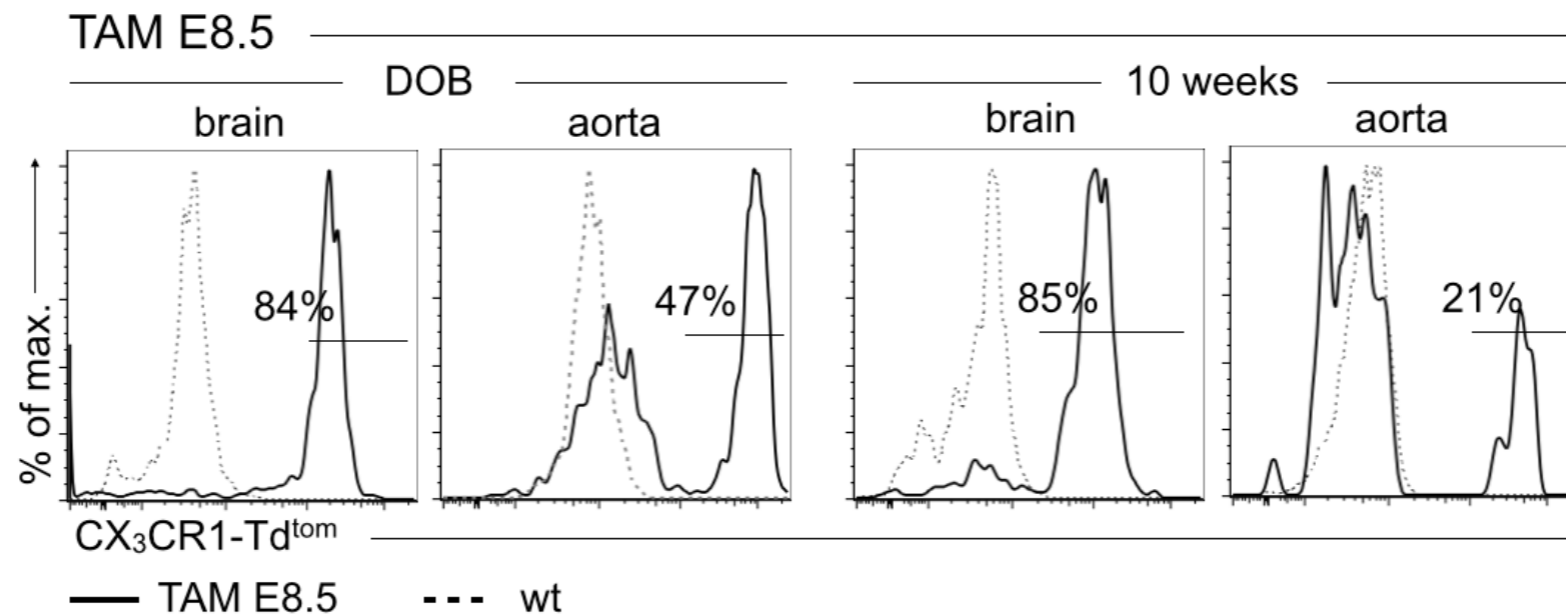


aorta E16.5 (TAM E8.5)



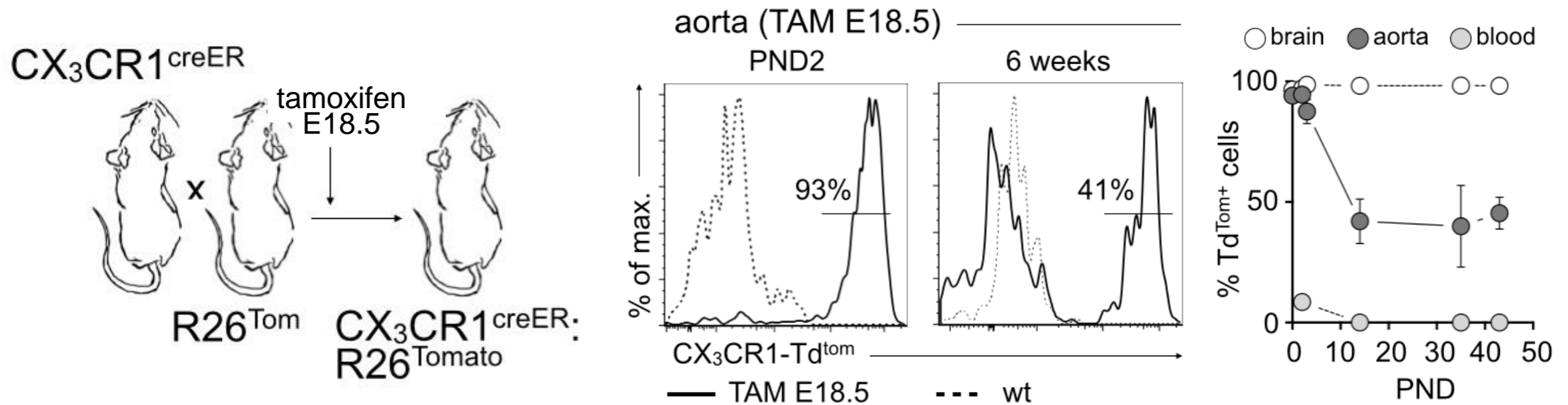
Ensan, Li, Besla *et al.* Nature Immunology 2016

Contribution of YS-derived progenitors to adult arterial MΦ pool



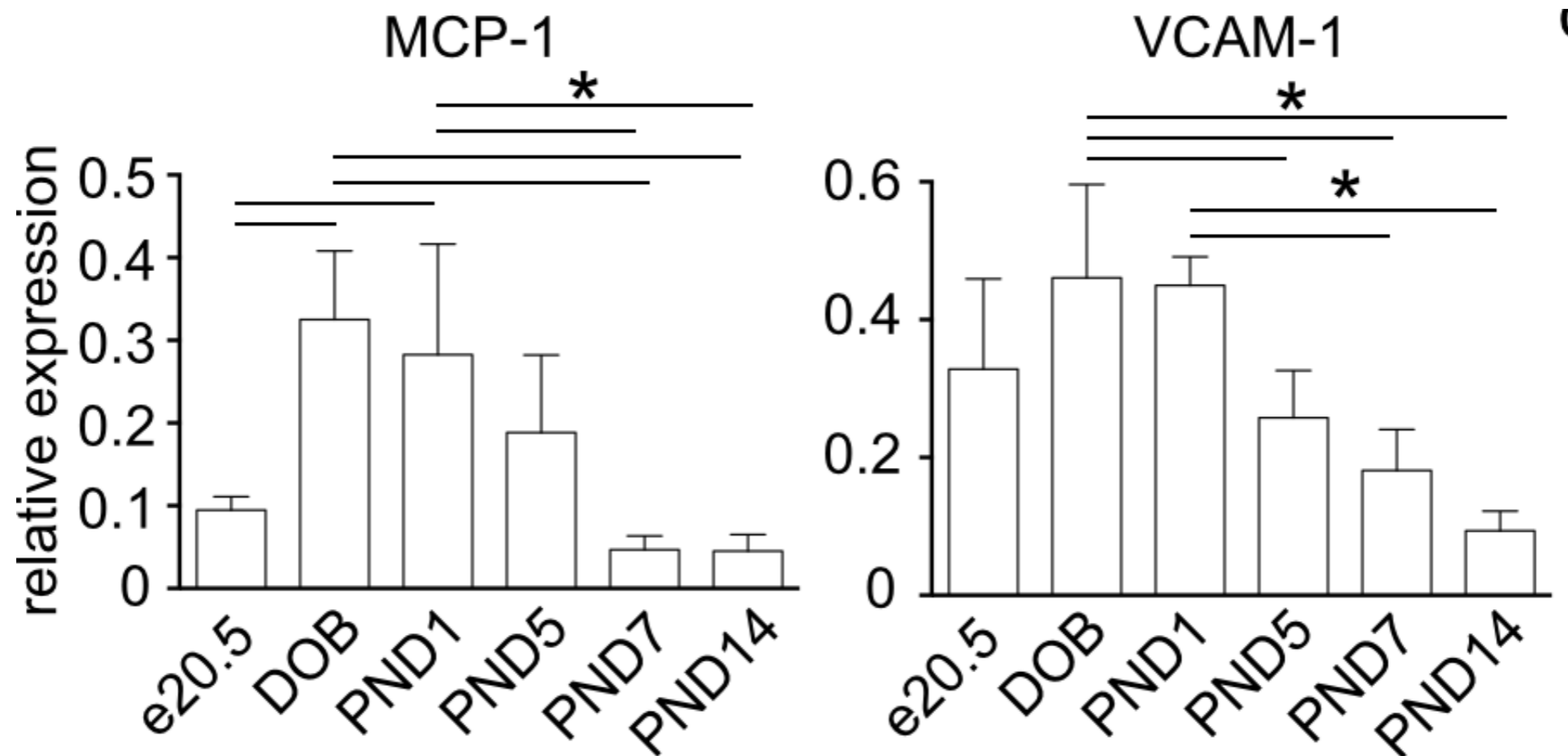
- YS-derived MΦ persist into adulthood
- what leads to decline in YS MΦ population shortly after birth?

Arterial MΦ colonization associates with a brief post natal period of monocyte recruitment

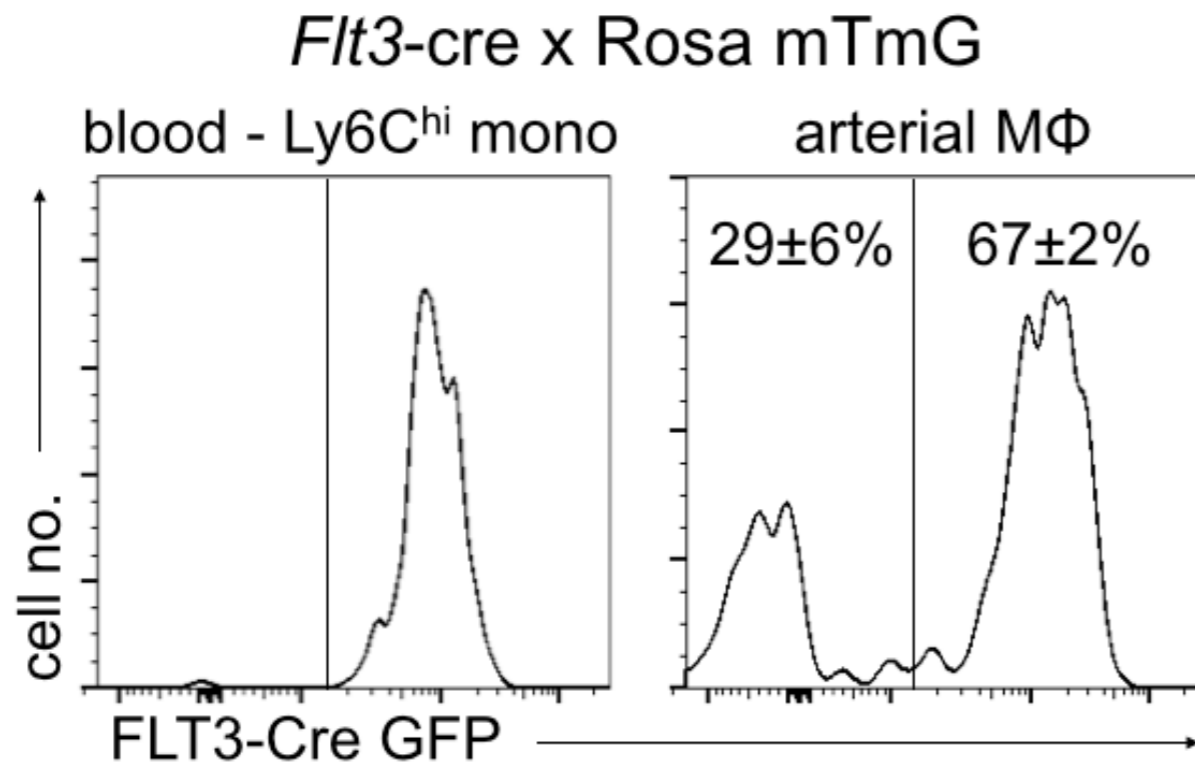


Ensan, Li, Besla *et al.* Nature Immunology 2016

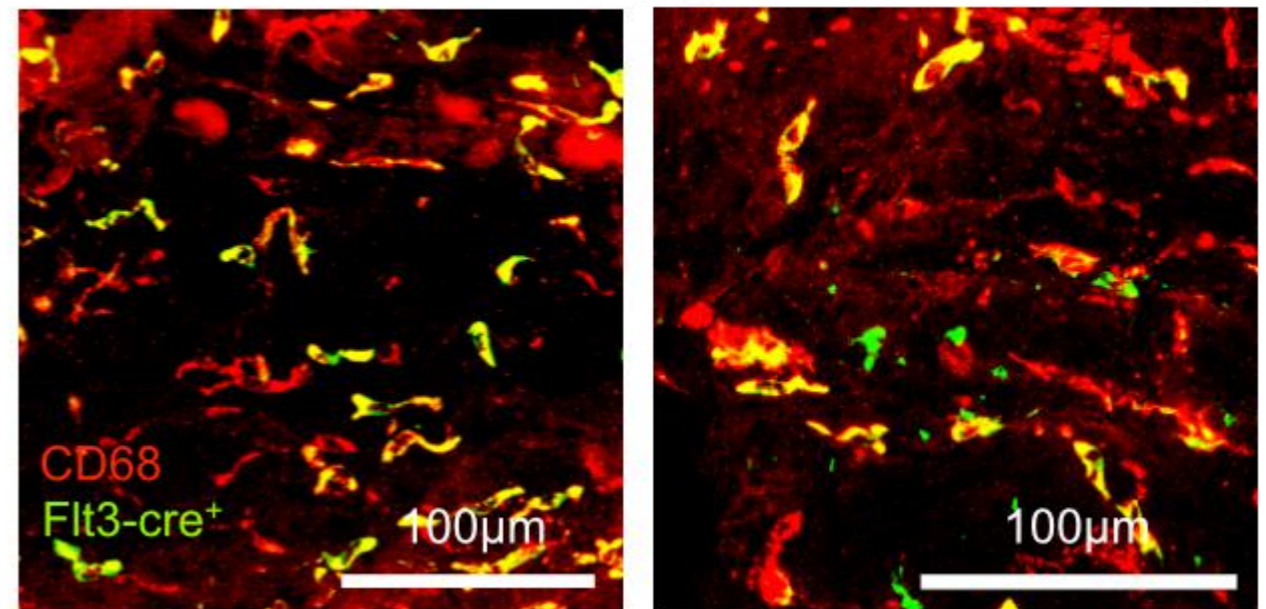
Monocyte accumulation is associated with increased arterial expression of chemotactic factors and adhesion molecules



Arterial M Φ colonization associates with a brief post natal period of monocyte recruitment

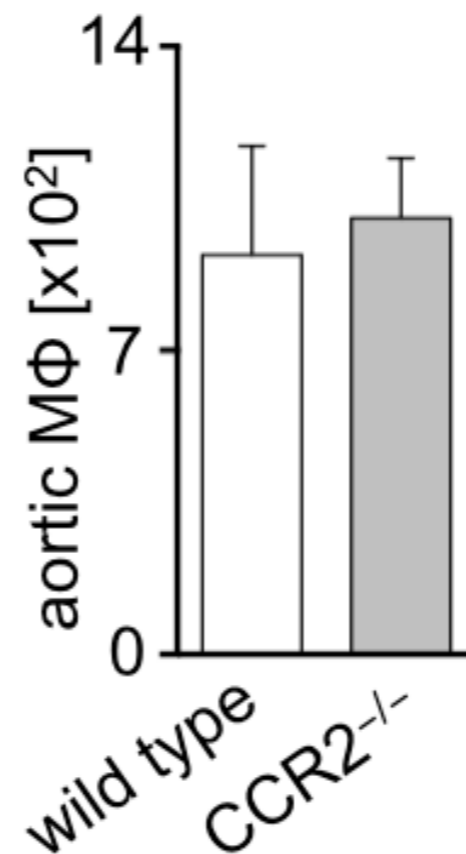


Flt3-cre x Rosa mtmg (arterial adventitia)

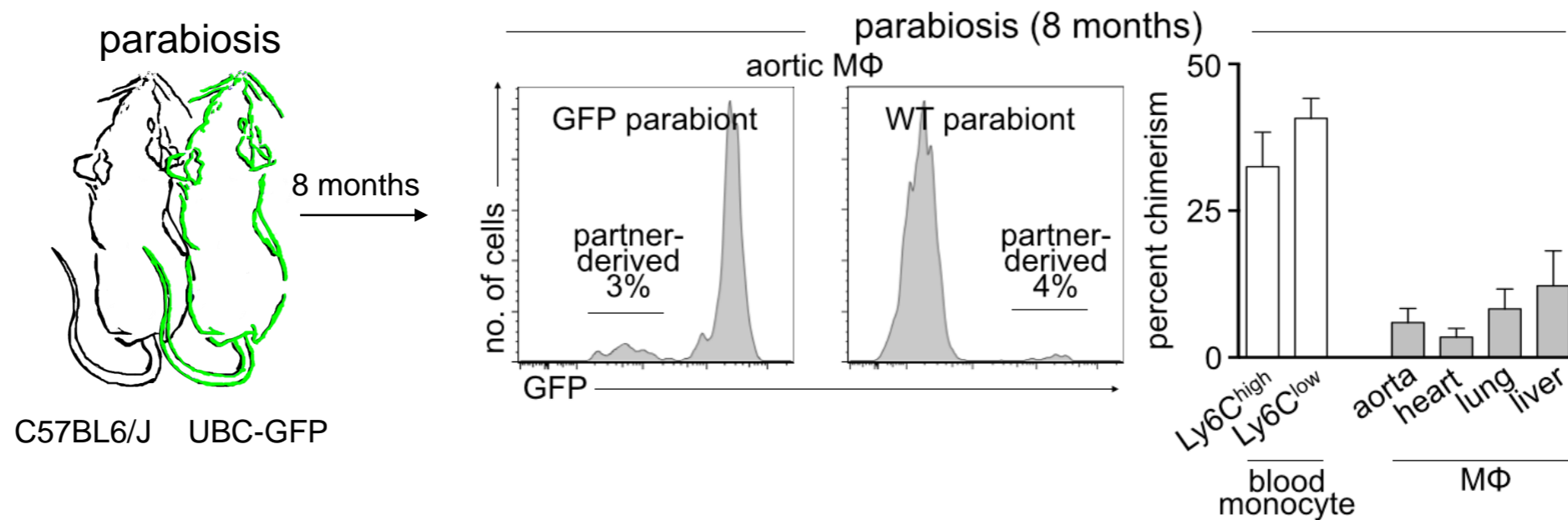


What maintains arterial
MΦ abundance in
adulthood?

Maintenance of arterial MΦ in adulthood occurs largely independent of circulating monocytes

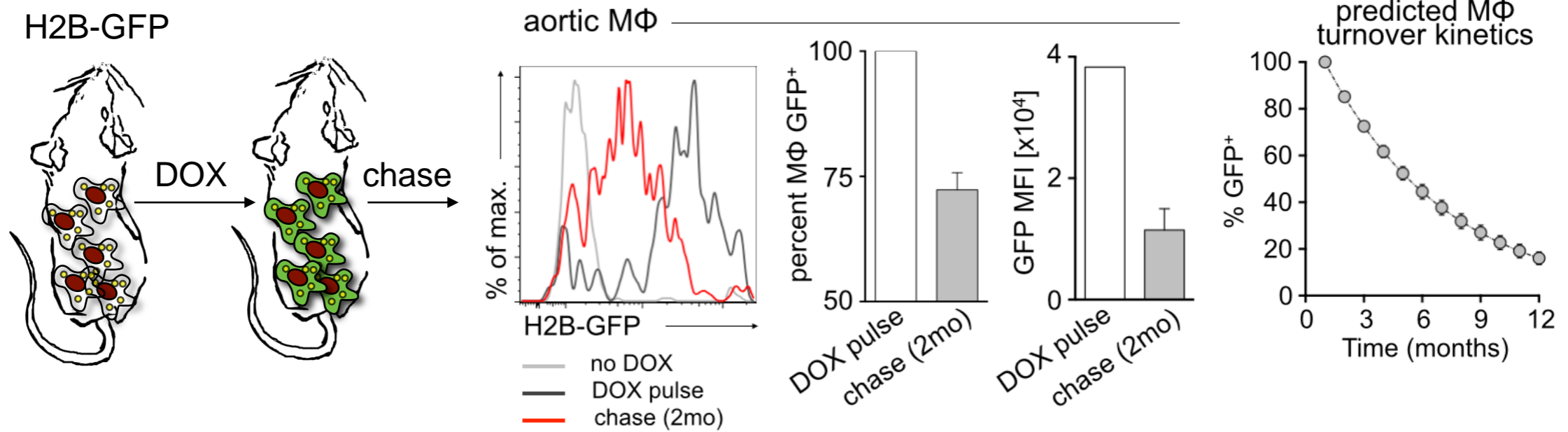


Maintenance of arterial MΦ in adulthood occurs largely independent of circulating monocytes



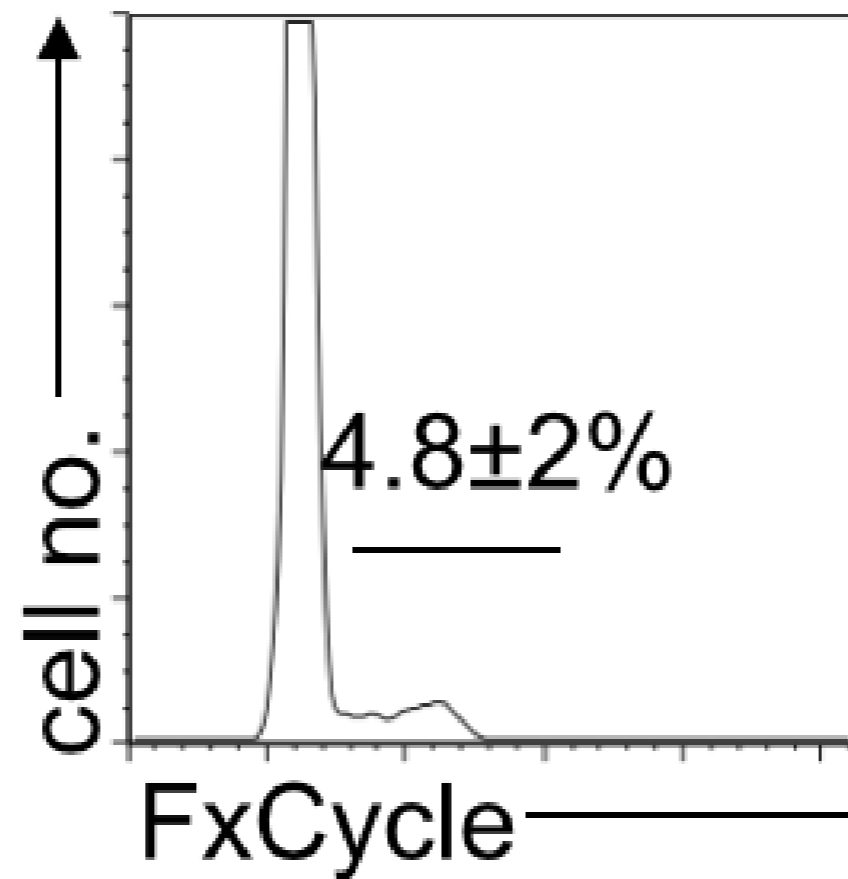
Ensan, Li, Besla *et al.* Nature Immunology 2016

Arterial M Φ turnover kinetics



Ensan, Li, Besla *et al.* Nature Immunology 2016

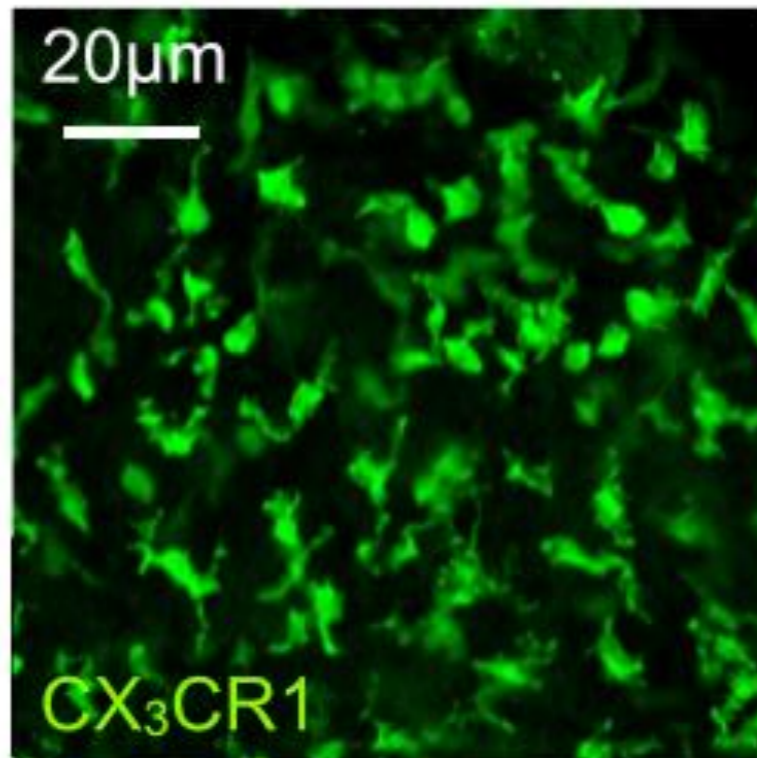
Tissue MΦ renew through local proliferation



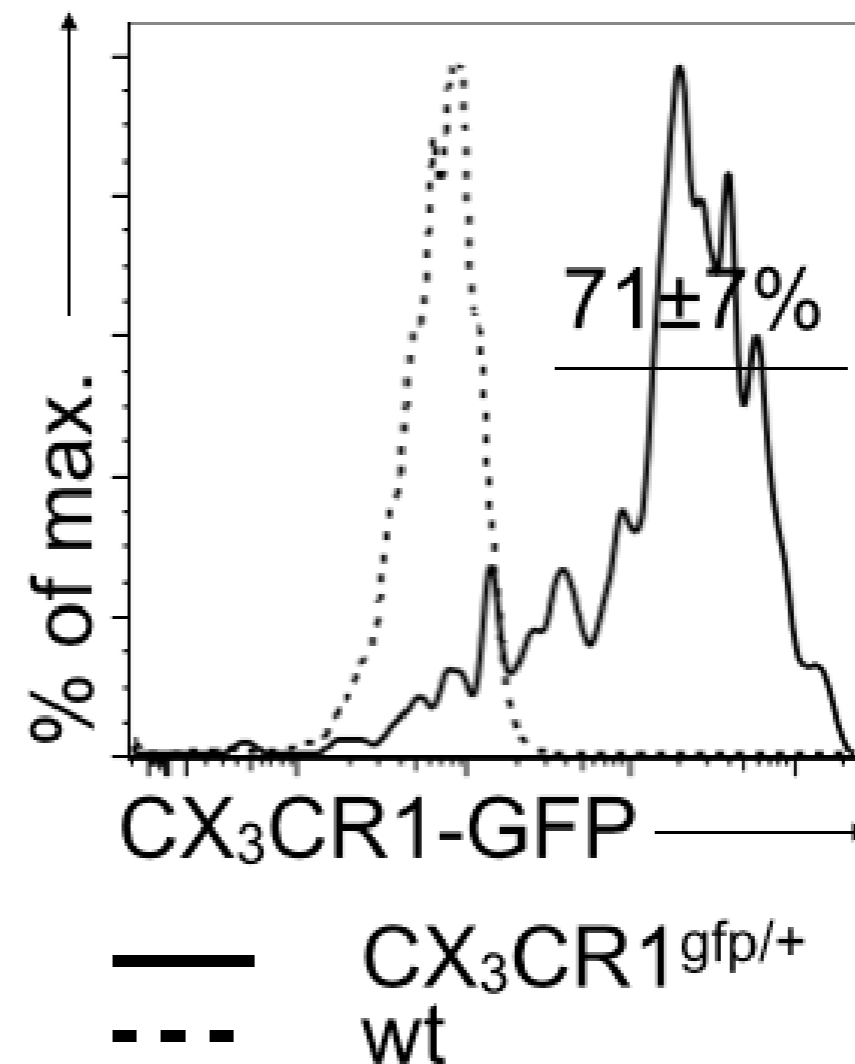
Arterial M Φ survival

CX₃CR1 expression on arterial MΦ persists into adulthood

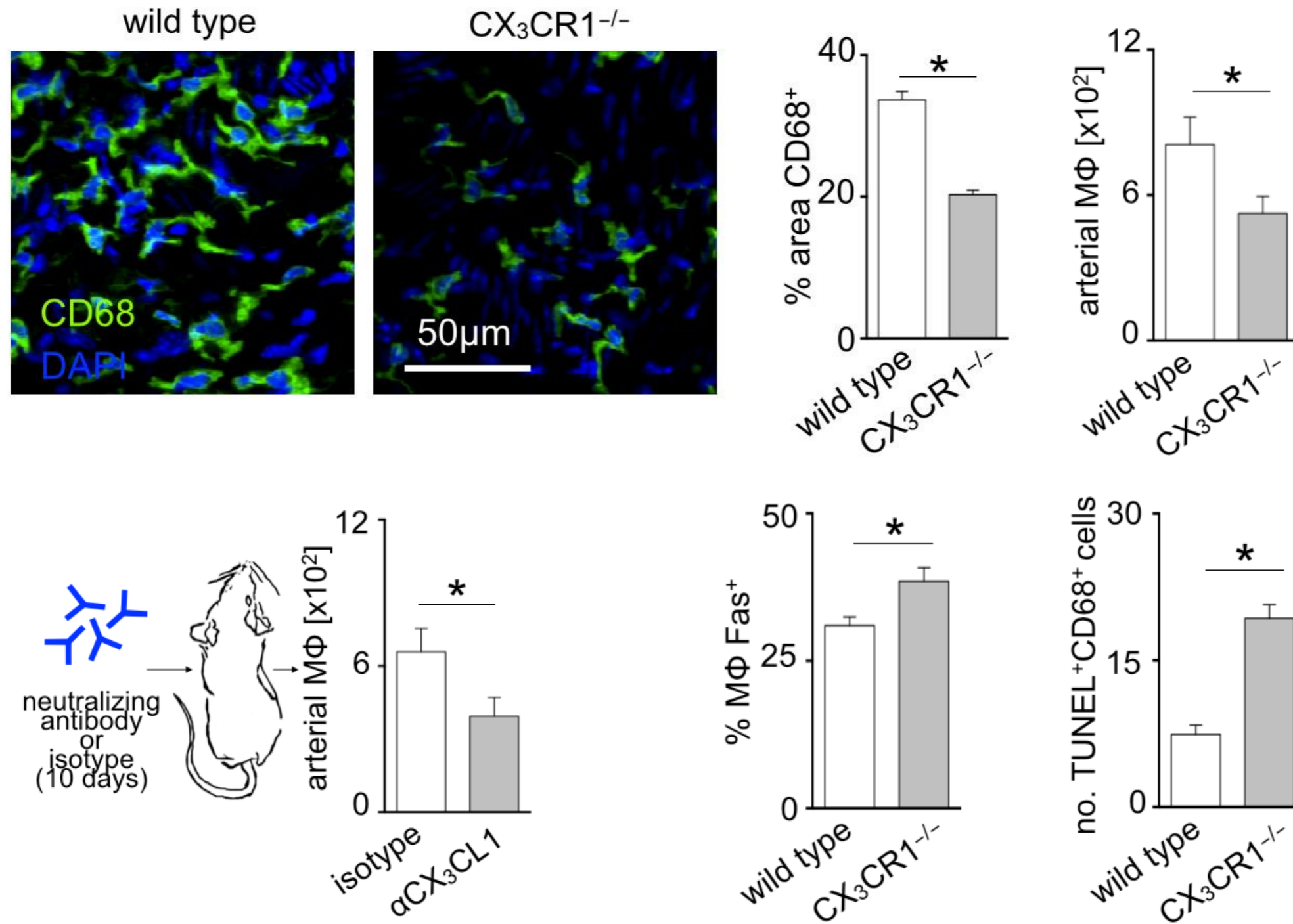
CX₃CR1^{gfp/+} mice;
adventitia (adult)



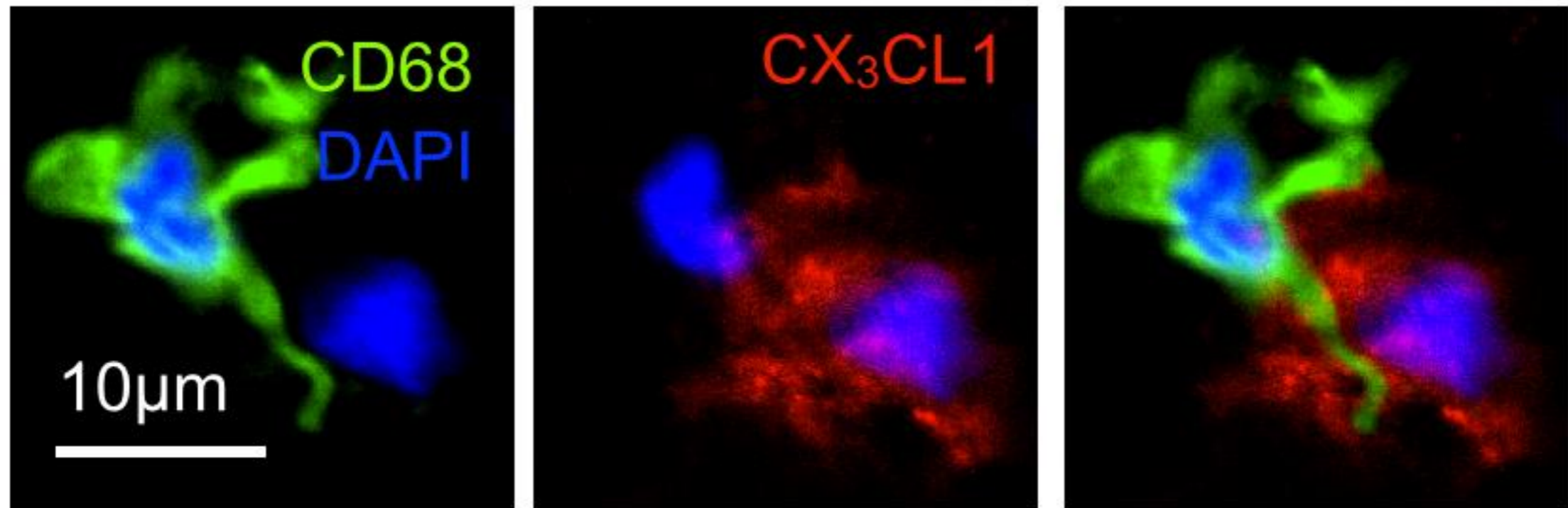
(CD45⁺F4/80⁺
CD11b⁺ cells)



CX₃CL1-CX₃CR1 interactions maintain arterial MΦ survival

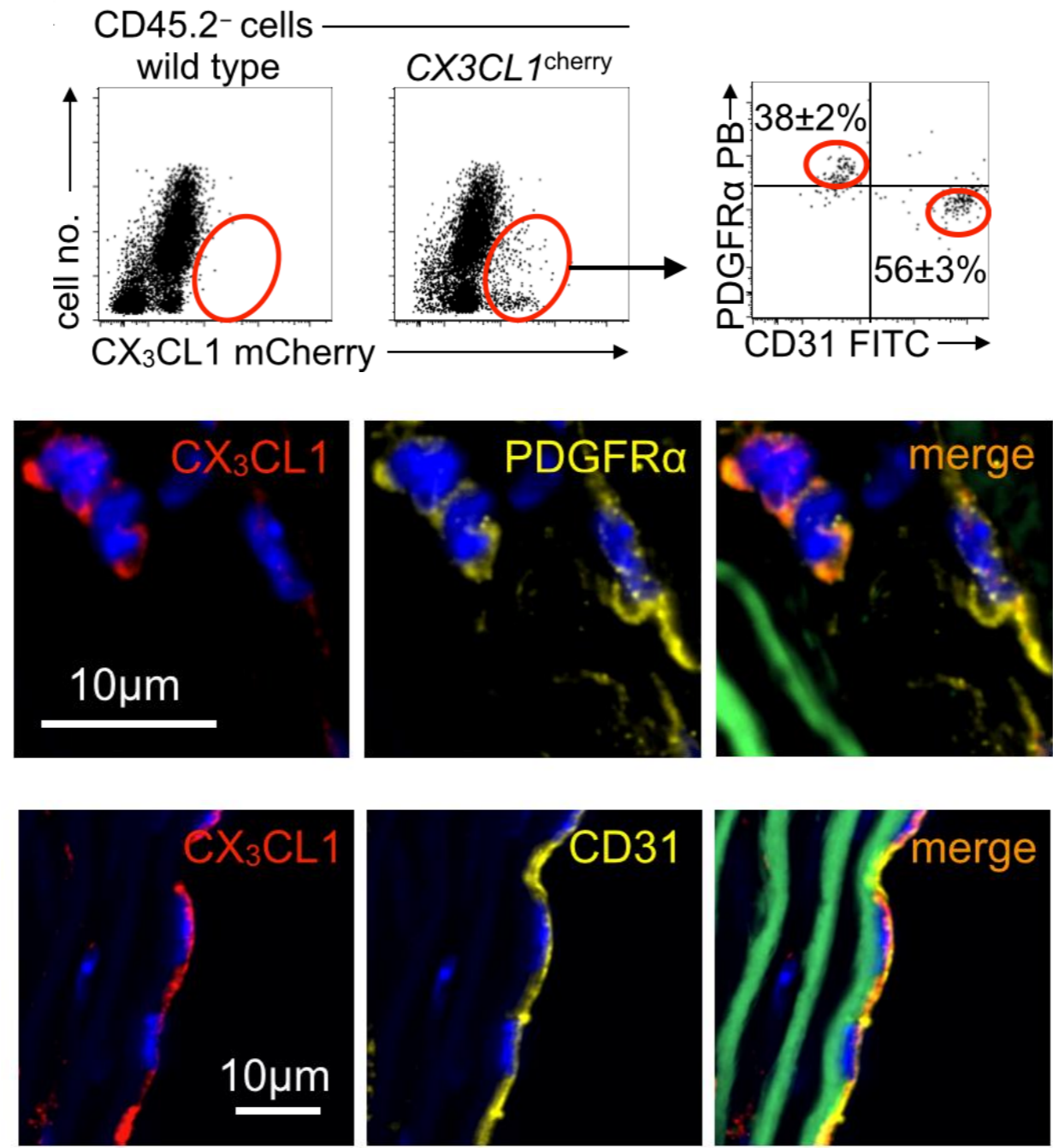


CX₃CL1-CX₃CR1 interactions maintain arterial MΦ survival: The tissue MΦ niche



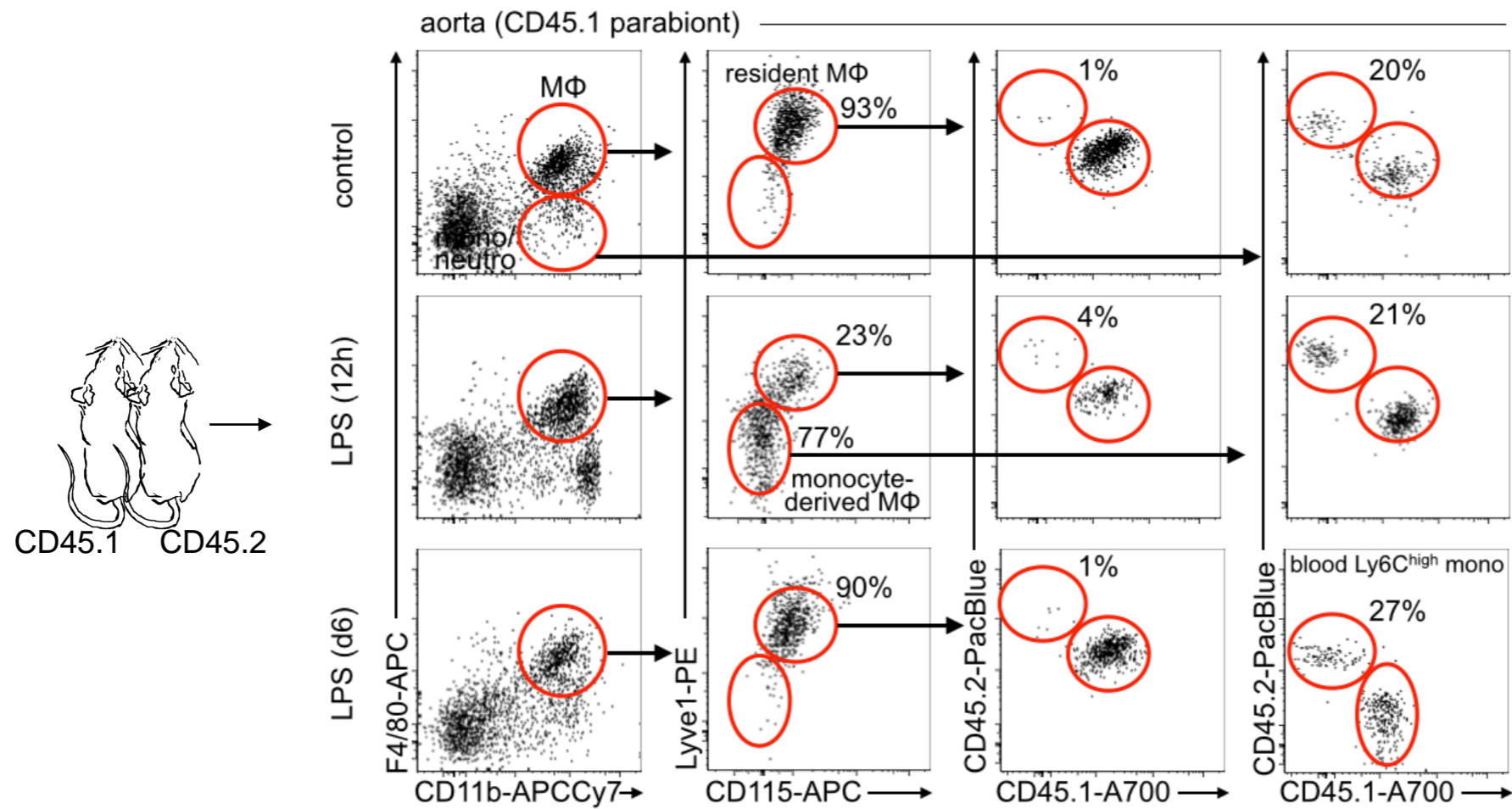
Ensan, Li, Besla *et al.* Nature Immunology 2016

CX₃CL1-CX₃CR1 interactions maintain arterial MΦ survival: arterial MΦ niche



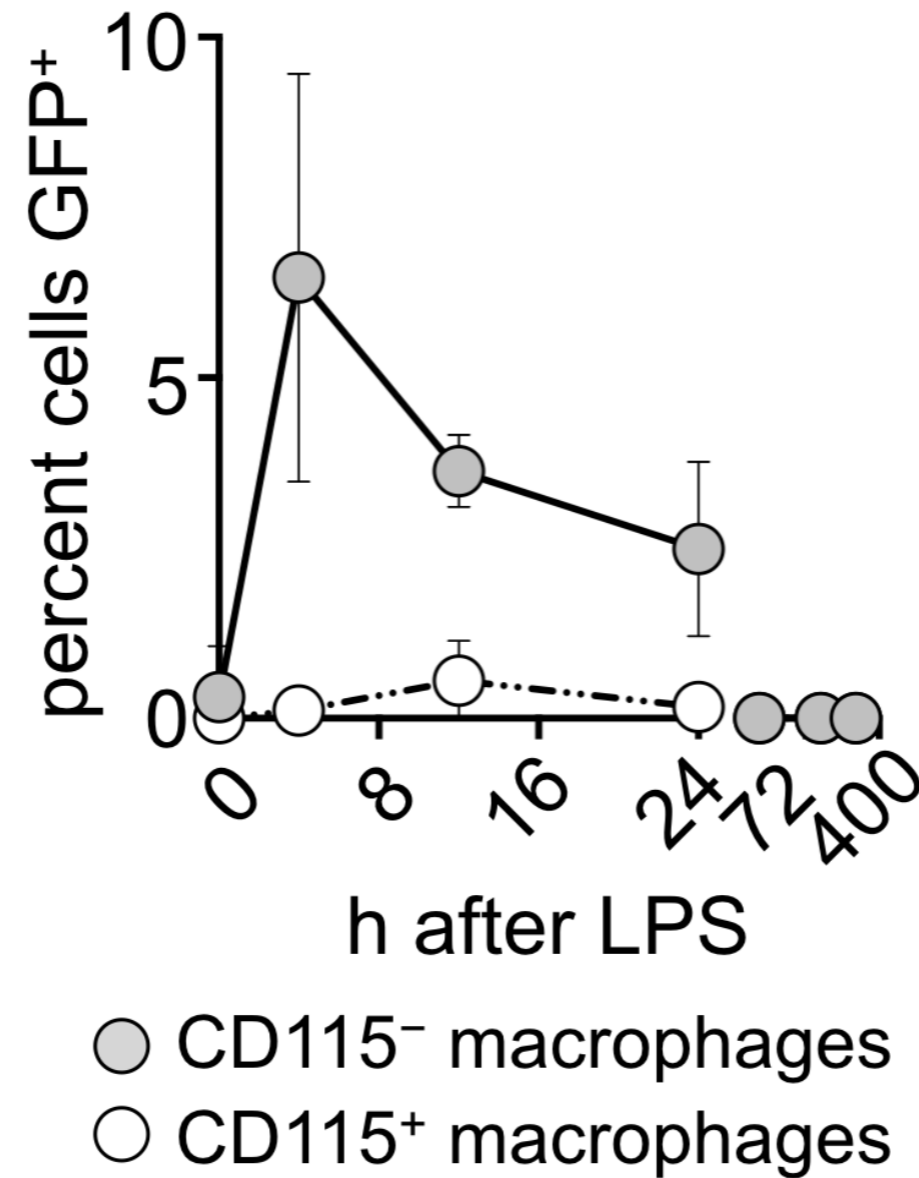
Arterial M Φ responses during inflammation

Arterial macrophage diversity during inflammation

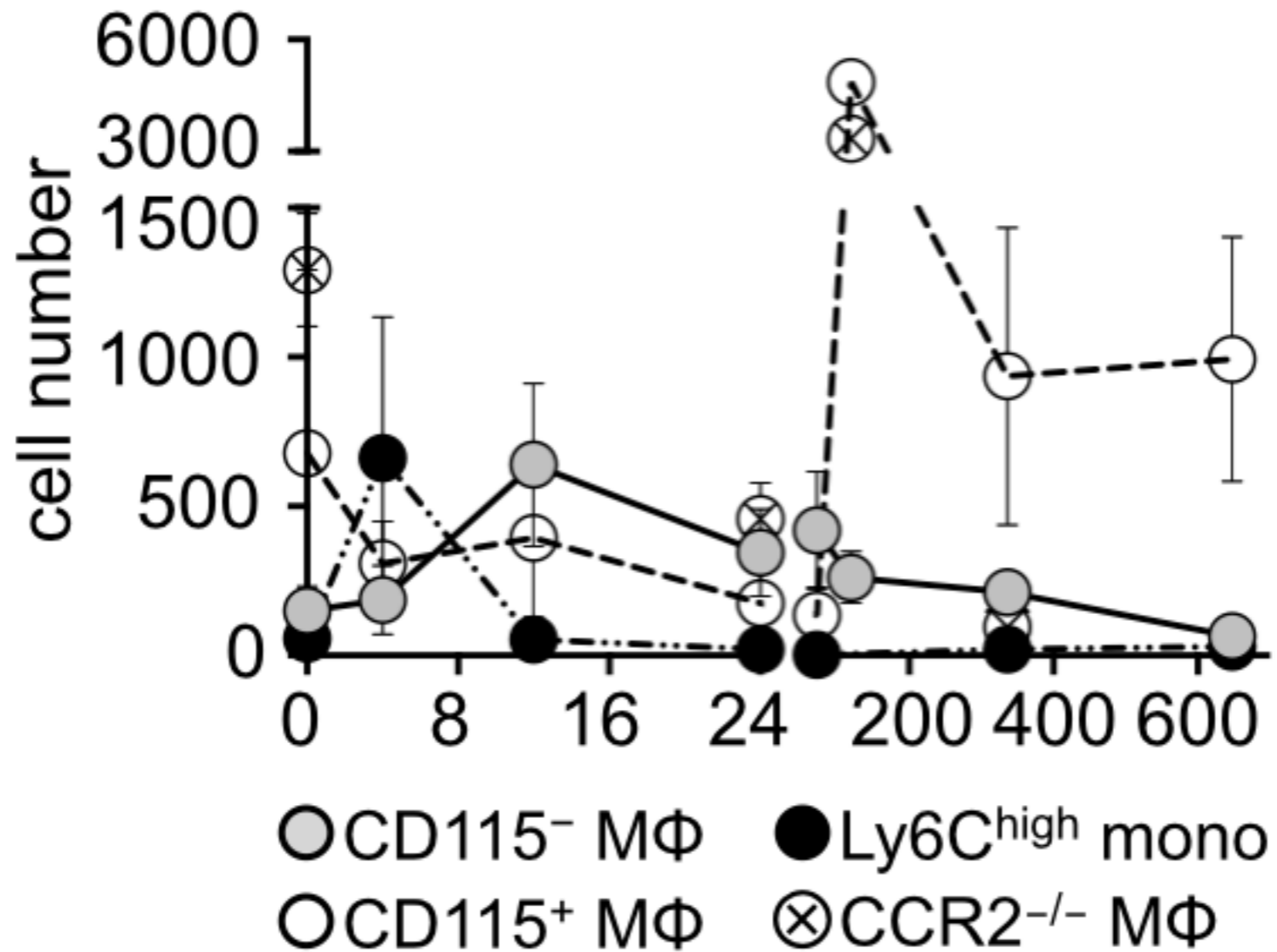


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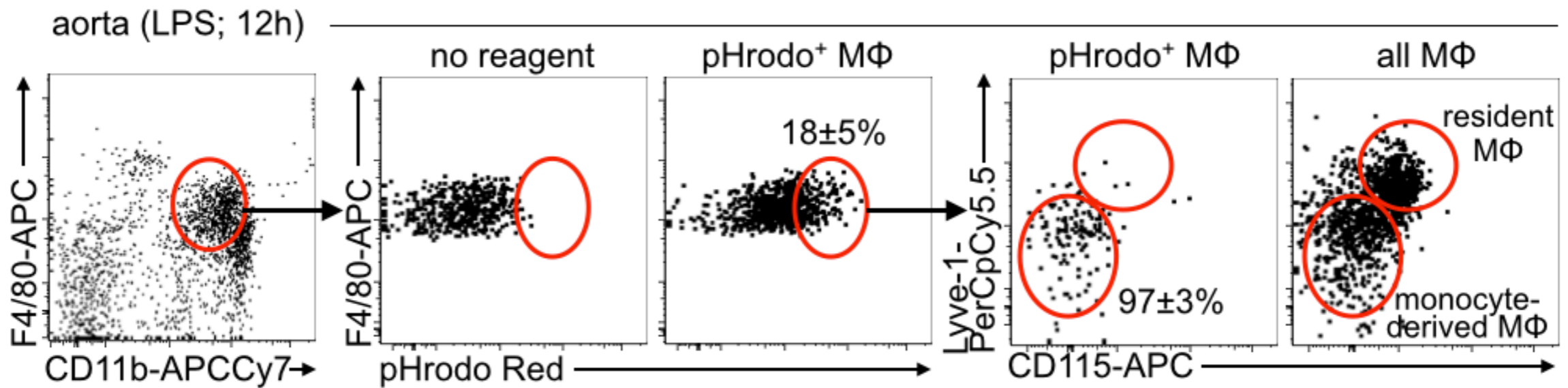
Arterial macrophage diversity during inflammation



Macrophage diversity during inflammation

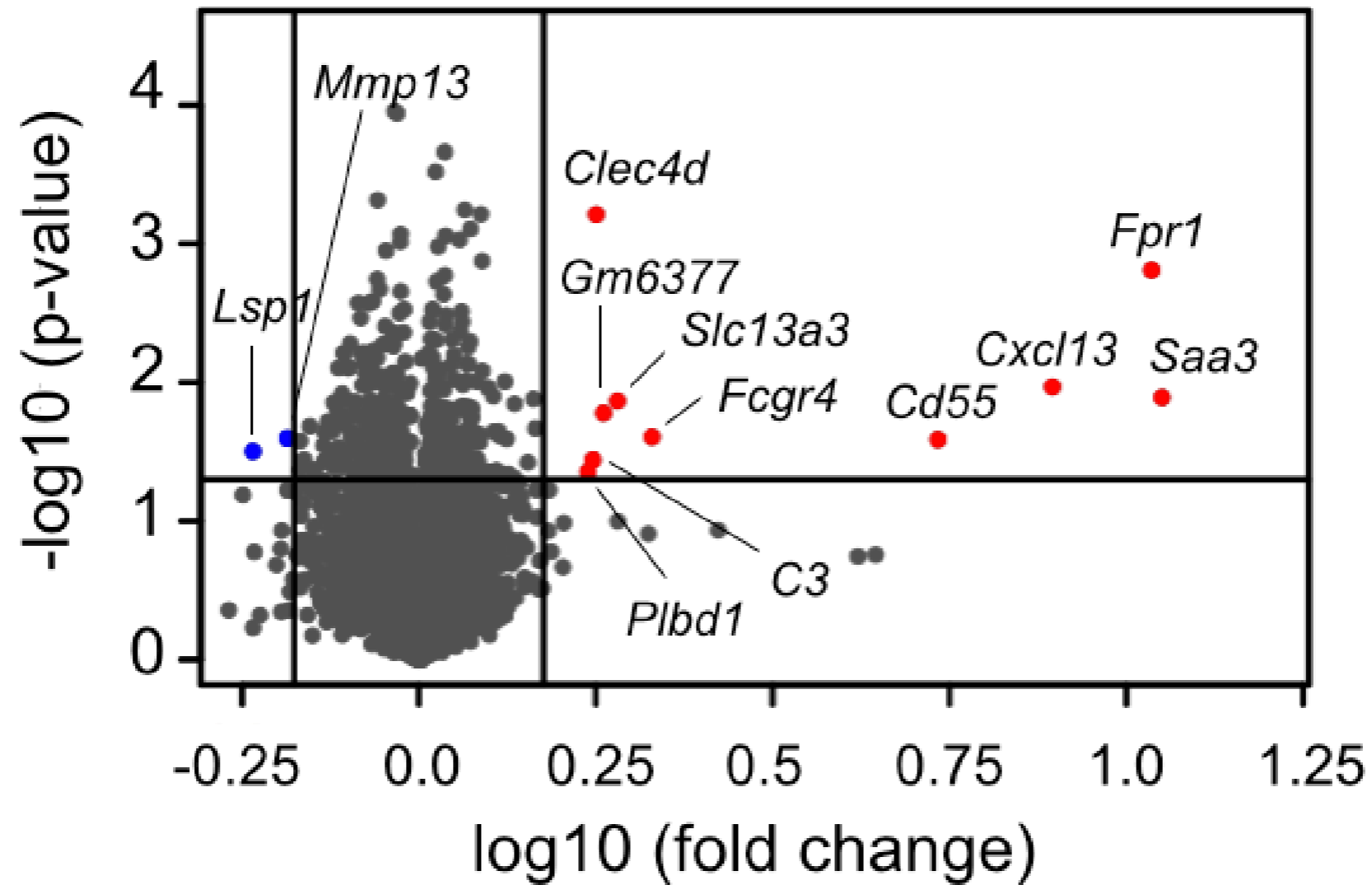


Macrophage diversity during inflammation

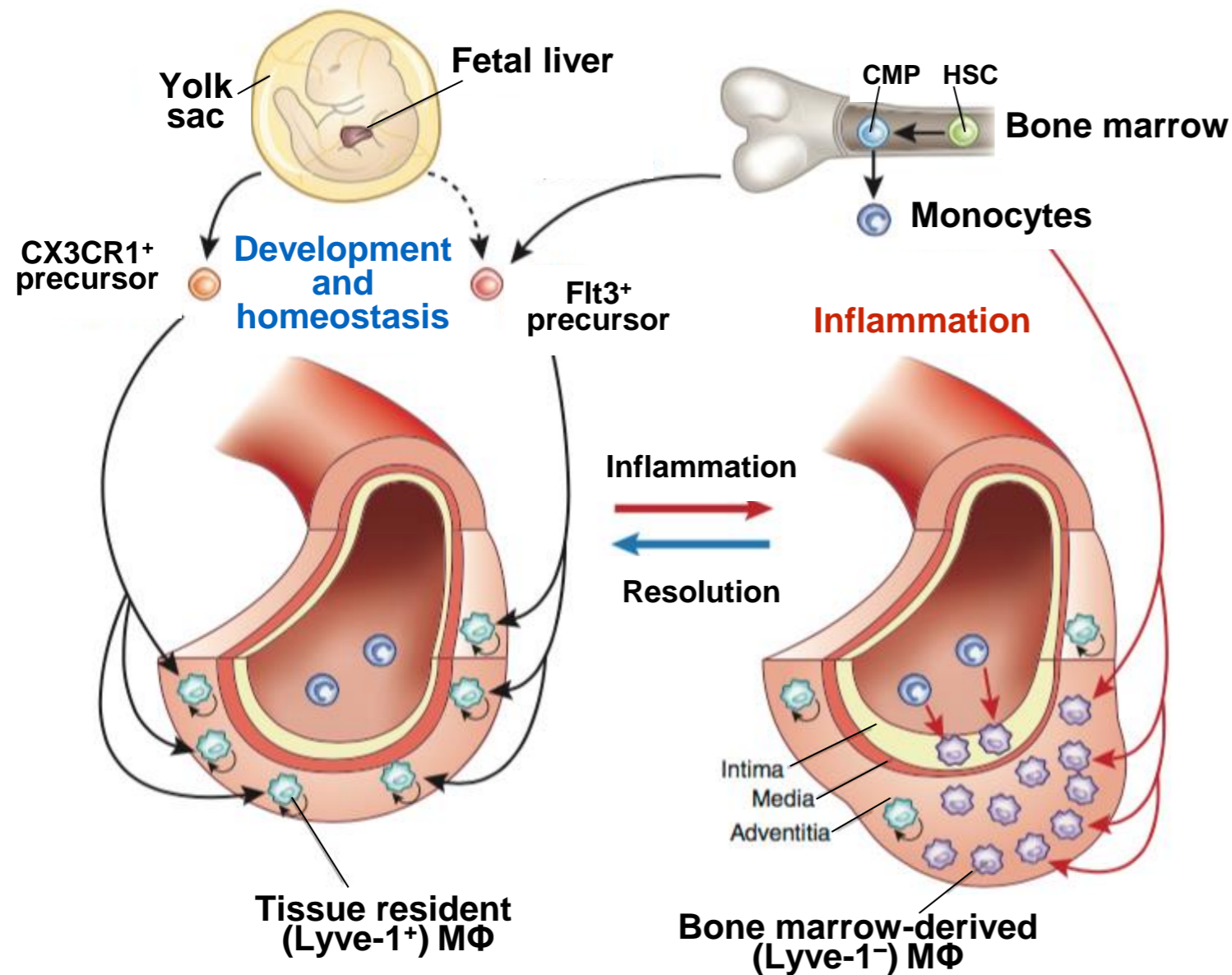


Ensan, Li, Besla *et al.* Nature Immunology 2016

Replenishment of arterial MΦ during inflammation



Conclusions



Adapted from Klapproth *et al.* Nature Immunology 2016

- Resident arterial MΦ constitute a distinct population among tissue MΦ.
- Arterial MΦ developmental pathway is unique - arise embryonically from CX₃CR1⁺ precursors and postnatally from bone marrow-derived monocytes that colonize the tissue immediately after birth.
- Survival of arterial MΦ within the vascular niche depends on a CX₃CR1/CX₃CL1 axis.
- In adulthood, proliferation sustains arterial MΦ in the steady state and after severe depletion following sepsis.
- After infection, arterial MΦ return to functional homeostasis rapidly.

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