

Research Progress of Myeloid Derived Suppressor Cells in Recurrence and Metastasis of Colorectal Cancer

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Received: Nov. 18th, 2018; accepted: Dec. 3rd, 2018; published: Dec. 11th, 2018

Abstract

Myeloid derived suppressor cells (MDSCs) are a group of heterogeneous cells derived from bone marrow, which have remarkable ability of suppressing immune cell response. MDSCs have a positive regulatory effect on Tregs in the process of recurrence and metastasis of colorectal cancer. It inhibits the normal anti-tumor immunity of the body. Immunosuppression leads to immune escape of CTC and promotes tumor metastasis through TME. There are still many mechanisms of MDSCs that have not been elucidated, and we need to devote more efforts to prevent recurrence and metastasis of tumors and immunotherapy.

Keywords

Myeloid Derived Suppressor Cells, Colorectal Cancer, Recurrence and Metastasis

髓源性抑制细胞在结直肠癌复发转移中的研究进展

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收稿日期: 2018年11月18日; 录用日期: 2018年12月3日; 发布日期: 2018年12月11日

摘要

髓源性抑制细胞是骨髓来源的一群异质性细胞, 具有显著抑制免疫细胞应答的能力。MDSCs在结直肠癌

的复发转移过程中,对Tregs具有正向调控作用,抑制机体正常的抗肿瘤免疫,免疫抑制导致CTC免疫逃逸,通过TME促进肿瘤转移。MDSCs仍有许多作用机制未被阐明,还需要我们投入更大的精力,为预防肿瘤的复发转移及免疫治疗做出贡献。

关键词

髓源性抑制细胞, 结直肠癌, 复发转移

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1. 引言

结直肠癌(colorectal cancer, CRC)是目前发病率和致死率位居前三的恶性肿瘤之一。随着饮食习惯和饮食结构的改变,我国结直肠癌发病率和死亡率也呈上升趋势。结直肠癌的普查和居民健康意识的增强使得结直肠癌早期诊断率提高而使其整体死亡率有所下降,但转移性结直肠癌(metastatic colorectal cancer, mCRC)的死亡率仍居高不下,结直肠癌致死的主要原因是肿瘤的复发转移[1]。

髓源性抑制细胞(Myeloid-derived suppressor cells, MDSCs)是一类具有显著免疫抑制活性的异质细胞群,其通过抑制效应T细胞功能从而介导肿瘤免疫逃逸,促进肿瘤生长。研究表明MDSCs的聚集能够促进肿瘤的发生和疾病进程,MDSCs的高表达与癌症患者的总体生存率降低密切相关[2]。本文就MDSCs及其在结直肠癌复发转移中的研究进展进行综述。

2. 关于髓源性抑制细胞

MDSCs是一群来源于骨髓前体细胞和未成熟骨髓细胞(immature myeloid cells, IMCs),具有不同分化潜能和免疫抑制能力的异质性细胞[3]。正常情况下,是树突状细胞(DC)、巨噬细胞和粒细胞的前体,能迅速地分化为成熟的粒细胞、DCs和巨噬细胞,并进入相应的器官、组织,发挥正常免疫功能。在肿瘤等其它病理条件下,受细胞因子的作用,这些髓系来源的前体细胞成熟受阻,因而停留在各个分化阶段,成为具有免疫抑制功能的MDSCs。它们在TGF- β 、IL-6、IFN- γ 等细胞因子的作用下被募集、迁移、扩增,使得其在外周血中的数量和比例增加,通过各种途径抑制机体的免疫反应,使肿瘤细胞逃避机体的免疫系统,促进肿瘤的发生、发展和转移[4]。

MDSCs主要分为两大亚群:粒细胞型MDSCs(G-MDSCs)和单核细胞型MDSCs(M-MDSCs)。G-MDSCs数量较多,在机体内发挥主要作用,但M-MDSCs功能更强,在一些研究中也显示出主导作用。小鼠的MDSCs细胞表面共表达CD11b和髓系分化抗原Gr-1。对于小鼠,M-MDSCs的特征为CD11b+Ly6ChighLy6G-,而G-MDSCs为CD11b+Ly6ClowLy6G+。目前普遍认为,人MDSCs细胞表面共表达标志物CD33和CD11b,但不表达成熟髓系标志物HLA-DR及MHC II[5]。1995年有研究首次报道了在人类头颈部肿瘤患者体内发现CD34+的MDSCs的表达[6]。目前在甲状腺肿瘤、胰腺癌、肝癌、食管癌、乳腺癌等肿瘤患者体内均有MDSCs表达的报道,并且对免疫系统均有抑制作用[7]。一般将单个核细胞中CD14-CD11b+CD33+CD15+或CD66b+细胞定义为G-MDSCs,而CD14+CD11b+CD33+HLA-DR-/low为M-MDSCs;由于表面标记缺乏良好的特异性,严格的MDSCs鉴别需进一步验证其是否具有免疫抑制功能[8][9]。研究发现,肿瘤乏氧微环境下的MDSCs表面PD-L1明显升高,与T细

胞上的 PD-1 受体结合, T 细胞无法识别肿瘤细胞, 肿瘤细胞开启免疫逃逸[10]。MDSCs 还可在肿瘤部位分化成调节性 DC, 进而引起 T 细胞分泌 IFN- γ 能力下降[11]。以上各种机制在肿瘤的不同类型、不同分期以及不同 MDSCs 亚群中各有侧重, 而非一成不变[12]。MDSCs 由多种肿瘤和宿主细胞分泌的细胞因子所诱导, 不同肿瘤中 MDSCs 表型不同可能是由于不同肿瘤产生的细胞因子的不同组合所致。迄今为止, 除表达 CD33、CD11b 和对 T 细胞活化的抑制能力外, 尚无确定的表型标志或组合能够明确地定义 MDSCs。

3. 髓源性抑制细胞与结直肠癌的复发转移

在肿瘤患者体内, MDSCs 受到肿瘤来源相关因子(tumor-derived factors, TDFs)刺激后, 未成熟的前体细胞从骨髓募集至外周组织器官, 并在外周被激活后, 大量增殖、分化和成熟, 发挥抑制肿瘤免疫系统作用, 进一步促进肿瘤的发生和发展[13]。

在小鼠结肠癌模型中 Gr-1 + CD115 + MDSCs 在 IFN- γ 和 IL-10 存在的条件下可将抗原特异性 CD4 + CD25-T 细胞转化为 CD4 + CD25-Foxp3+ 的 Tregs, 但不依赖 NO 的产生[14]。在结直肠癌发生和发展过程中, 转化上皮细胞和基质细胞的相互作用诱导正常环境向支持肿瘤生长和扩散的微环境转化, 肿瘤微环境与免疫细胞功能障碍及大面积浸润相关。肿瘤浸润细胞主要包括肿瘤相关巨噬细胞、MDSCs、CD4 + T 细胞、CD8 + T 细胞、Tregs、间质干细胞、癌相关成纤维细胞、内皮祖细胞、肥大细胞和血小板。这些细胞能够维持肿瘤相关的炎症、血管生成和免疫抑制, 进而促进结直肠癌生长、血管生成和转移。MDSCs 通过氨基酸依赖和不依赖两种方式下调机体的抗肿瘤免疫, 具有很强的 T 细胞应答抑制能力。有学者报道, MDSCs 通过抑制免疫促进了结肠癌的进展[15]; 在结肠癌组织存在大量 MDSCs 浸润, 它们通过促进血管生成加速了肿瘤的进展[16] [17]。另外有研究报道, 通过小鼠模型发现 MDSCs 浸润促进结肠癌肝转移灶的生长[18]。这些细胞通过分泌不同的趋化因子、生长因子、免疫抑制因子、细胞外基质降解酶及促血管生成因子等, 促进肿瘤的进展与转移。但目前有关 MDSCs 促进结直肠癌复发转移的具体机制仍不清楚, 现就其可能相关性进行探讨。

3.1. 调节性 T 细胞

调节性 T 细胞(regulatory T cells, Tregs)是一类能对自身免疫原保持免疫耐受、发挥功能性免疫抑制和防止免疫损伤的特定淋巴细胞亚群。根据产生部位和诱导条件等差异分为自然调节性 T 细胞(nTregs)和诱导性调节 T 细胞(iTregs)。由于大多数的肿瘤可以表达自身抗原, Tregs 引起的免疫耐受, 被认为是肿瘤免疫逃逸和免疫治疗失败的一个重要因素[19]。其在肿瘤免疫和免疫逃逸中发挥关键作用, 在人和小鼠的外周血及淋巴组织中约占 CD4+T 细胞的 5%~10%。Tregs 代表一群独特的 CD4+辅助性 T 细胞亚群, 在控制自身免疫中发挥着重要作用, CD4+CD25+是其主要的分子表型, FoxP3 是 Tregs 关键的细胞内标志, 对 Tregs 的分化、发育和免疫调节功能的发挥具有重要作用[20] [21] [22]。

Tregs 在肿瘤患者体内诱导免疫耐受, 是肿瘤免疫的重要负向调节因素, 促进肿瘤发生发展。在实验小鼠模型中, 消除 Tregs 可以明显加强机体的抗肿瘤免疫反应以及免疫治疗效果[23]。有学者报道, 肿瘤诱导的 G-MDSC 能够抑制 nTreg 的增殖以及早期极化过程中 CD4+T 细胞向 Tregs 转化[24]。Ji 等[25]也发现 G-MDSC 能够通过 ROS 途径抑制 Tregs 分化。而 iNOS 作为 M-MDSCs 的效应分子, 也与 Tregs 产生有关, 但还存在争议[26] [27]。目前报道, 诱导 Tregs 生的 MDSCs 大部分为 M-MDSCs [28] [29] [30] [31], 是否 G-MDSC 与 M-MDSC 对于 Tregs 作用不同, 需要更进一步的研究证实。相关文献也证实 MDSCs 亚型并不是独立的群体, 亚型之间存在着动态转变的过程。在小鼠实验性关节炎中, MDSCs 会发生一个从 G-MDSCs 向 M-MDSCs 转变的过程, 且其免疫抑制效能也明显减弱[32]。国内学者通过流式细胞计数对

健康者和肿瘤患者的外周血进行 Tregs 比例测定,结果提示肿瘤患者外周血中 Tregs 比例显著高于健康者外周血中 Tregs 比例,差异有统计学意义[33]。高素珍等[34]通过流式细胞计数和免疫组化法对分别对肿瘤组织中 Tregs 进行定量及定位分析,其结果显示,远离肿瘤部位组织 Tregs 比例明显低于肿瘤组织部位 Tregs 比例,差异有统计学意义;有淋巴结转移者 Tregs 比例明显高于无淋巴结转移者,差异亦有统计学意义,表明 Tregs 与大肠癌进展密切相关。MDSCs 通过抑制效应 T 细胞和自然杀伤(NK)细胞等抗肿瘤免疫细胞的功能介导肿瘤免疫逃逸, Tregs 则在维持自身免疫稳态、控制移植排斥反应中发挥着非常重要的作用,但肿瘤微环境中的 Tregs 却能够减弱机体的抗肿瘤免疫,而且肿瘤抗原和相关细胞因子对 Tregs 的募集、扩增以及诱导产生有重要作用。肿瘤发生时, MDSCs 对 Tregs 具有正向调控作用,抑制机体正常的抗肿瘤免疫。

3.2. 循环肿瘤细胞

循环肿瘤细胞(circulating tumor cells, CTCs)是指由实体瘤或肿瘤转移灶释放进入外周血循环中的肿瘤细胞[35]。肿瘤细胞侵入到原发肿瘤细胞的周围组织中,进入血液和淋巴管系统,形成循环肿瘤细胞 CTCs,并转运到远端组织,再渗出,适应新的微环境,最终形成新的转移灶[36]。在 CTCs 的形成及发生远处转移的过程中, MDSCs 的免疫抑制作用可能是导致 CTCs 免疫逃逸发生的重要因素[37]。

肿瘤微环境(tumor microenvironment, TME)中含有大量的免疫活性细胞,主要包含具有免疫抑制功能的 Tregs [38]、肿瘤相关巨噬细胞(tumor-associated macrophages, TAMs) [39]、调节/耐受树突状细胞[40]和 MDSCs [41],及参与免疫反应的 T、B 细胞及 NK 细胞等。这些免疫活性细胞在细胞在肿瘤微环境中相互作用,同样, MDSCs 也通过与其他免疫活性细胞的相互作用而利于 CTCs 的存活,从而促进肿瘤的发生、发展。MDSCs 通过分泌大量抑制性细胞因子 IL-10、转化生长因子 β (TGF- β)等来抑制 NK 细胞的杀伤作用及 IFN- γ 的产生[42],使患者免疫功能下降,从而有利于 CTCs 的免疫逃逸和生存,最终形成远处转移。另外, MDSCs 还可抑制 DC 细胞的正常分化,而 DC 则是主要的抗原提呈细胞,DC 细胞的数量和功能状态可能对 CTCs 的免疫耐受起着决定性作用。有研究发现 MDSCs 表达膜结合 TGF- β 1,并通过其抑制 NK 细胞的活性、NKG2D 的表达和 INF- γ 的产生,诱导 NK 细胞的细胞毒作用减弱[43]。MDSCs 不仅通过免疫抑制途径及促进肿瘤血管生成等导致肿瘤进展,并且分泌一些细胞因子及蛋白侵入基底膜或间质,促进 CTCs 的形成和数目增加[44] [45]。MDSCs 除了抑制 T 细胞和 NK 细胞的免疫杀伤作用,可能还与外周血中的巨噬细胞、血小板、Tregs 和肥大细胞等共同对免疫系统产生抑制。

3.3. 上皮间质转化

上皮间质转化(epithelial-mesenchymal transition, EMT)是指上皮细胞通过特定程序转化为具有间质表型的细胞[46]。参与包括结直肠癌在内多种肿瘤的发生、发展、侵袭和转移,并与肿瘤化疗耐药密切相关。

MDSCs 不仅可以通过免疫抑制的机制影响肿瘤的发生发展,还可以通过诱导肿瘤细胞发生 EMT 以及促进肿瘤血管生成等非免疫学机制参与肿瘤的进展[47] [48]。在肿瘤的发生过程中, MDSCs 通过肿瘤细胞侵袭健康组织以及转移,促进肿瘤的发生发展[49]。研究表明肿瘤可以招募 MDSCs 到其周围并诱导激活信号转导与转录激活因子 3 (signal transducer and activator of transcription, STAT3)信号通路,从而促进肿瘤的发展[50] [51]。另外,在 TME 中有肿瘤坏死因子(tumor necrosis factor, TNF)等各种细胞因子,并且具有一定的肿瘤杀伤作用。已有研究发现[52] TNF 受体-2(TNFR-2)可以促进 MDSCs 存活并向 TME 中聚集,利于 TME 中的肿瘤细胞发生免疫逃逸。低氧诱导因子(hypoxia inducible factor, HIF)是 TME 中

的另外一个重要细胞因子,与其相关的低氧环境对肿瘤细胞的生存具有重要影响。研究发现[53], HIF-1 α 使 MDSCs 向着 TAMs 分化,促使肿瘤细胞发生播散。敲除 HIF-1 α 的小鼠体内的 MDSCs 免疫抑制功能下降且精氨酸酶-1 (arginase1, Arg-1)及一氧化氮合成酶-2 (nitricoxidesynthase2, NOS-2)表达水平亦降低[54],说明低氧环境可能是 MDSCs 发挥作用的条件之一。LIM1863 是一个结肠癌细胞系,分化程度较高,是研究 EMT 理想的细胞模型[55]。用 TGF- β 刺激 LIM1863 细胞可诱导出现 EMT 现象,分化良好的球样结构消失而细胞迁移能力增强,形成单层细胞[56]。将 TGF- β 和 TNF- α 两种细胞因子共同刺激 LIM1863 细胞,则可更加明显的诱导 EMT 过程[57]。由此可见,EMT 在结直肠癌的发生发展及转移中发挥着重要的作用。

4. 结语

MDSCs 是骨髓来源的一群异质性细胞,作为肿瘤免疫微环境中重要的免疫抑制细胞,通过多种途径抑制机体的免疫细胞,减弱机体对肿瘤细胞的杀灭作用,与肿瘤的发生发展、及复发转移息息相关。本文通过对 Tregs、CTCs、TME 及 EMT 等在结直肠癌发生发展及转移中作用机制的阐述,探索 MDSCs 在结直肠癌中的可能机理。但肿瘤的复发与转移机制十分复杂,MDSCs 促进结直肠癌的复发及转移仍有许多作用机制未被阐明,还需从临床及基础方面进一步验证判断。因此,对 MDSCs 深入的基础研究及相应的临床实践还需要我们投入更大的精力,以便为预防肿瘤的复发转移及免疫治疗取得更大的进步。

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