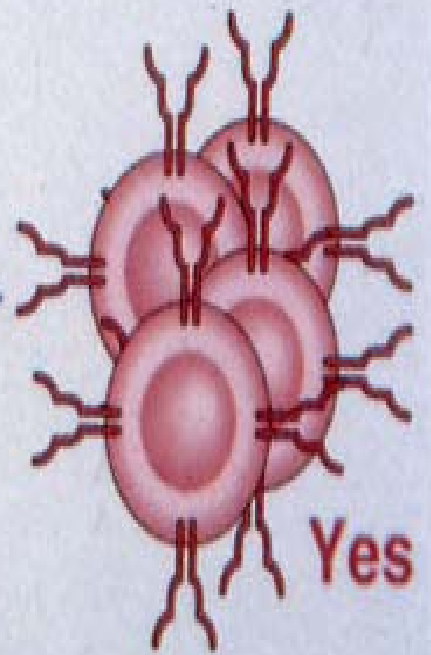
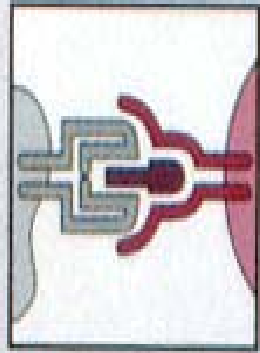
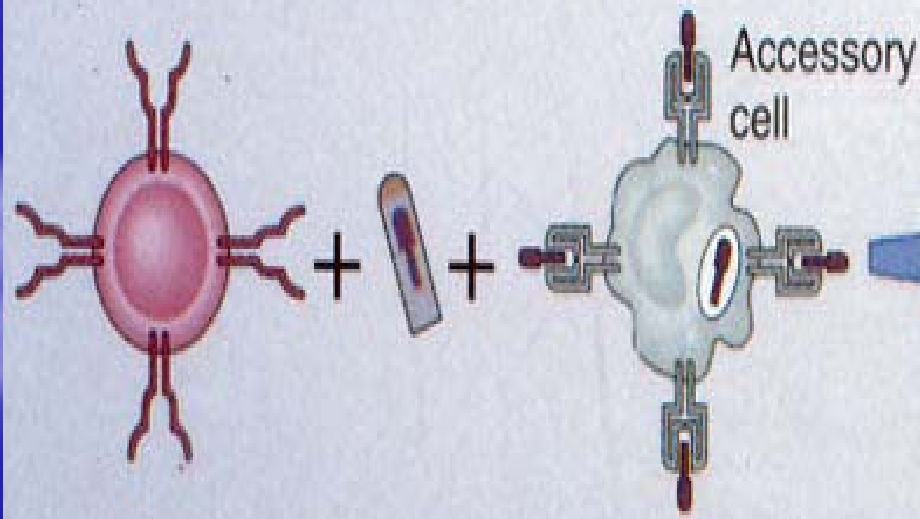
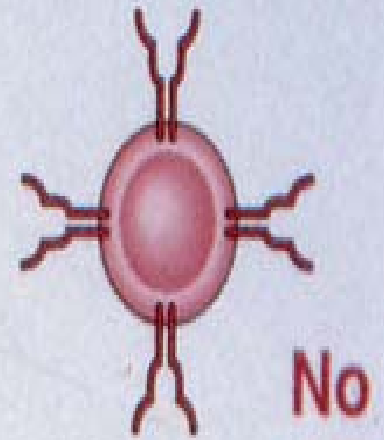
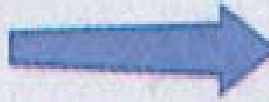
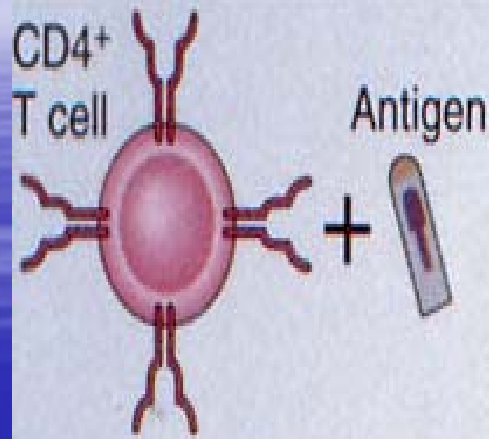


TALLER MECANISMOS DE
DAÑO
INTRODUCCION

Antigen recognition

T cell response



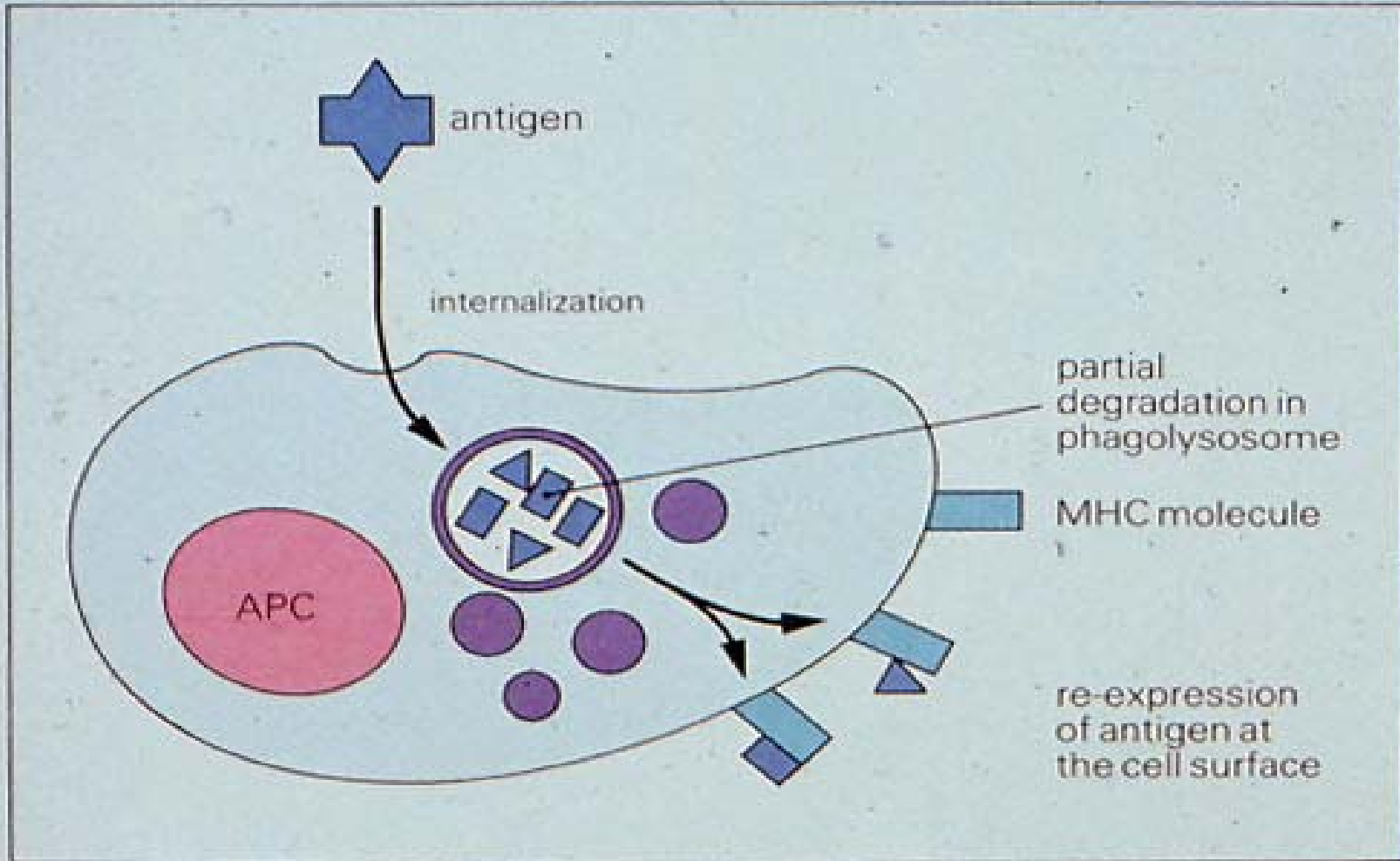
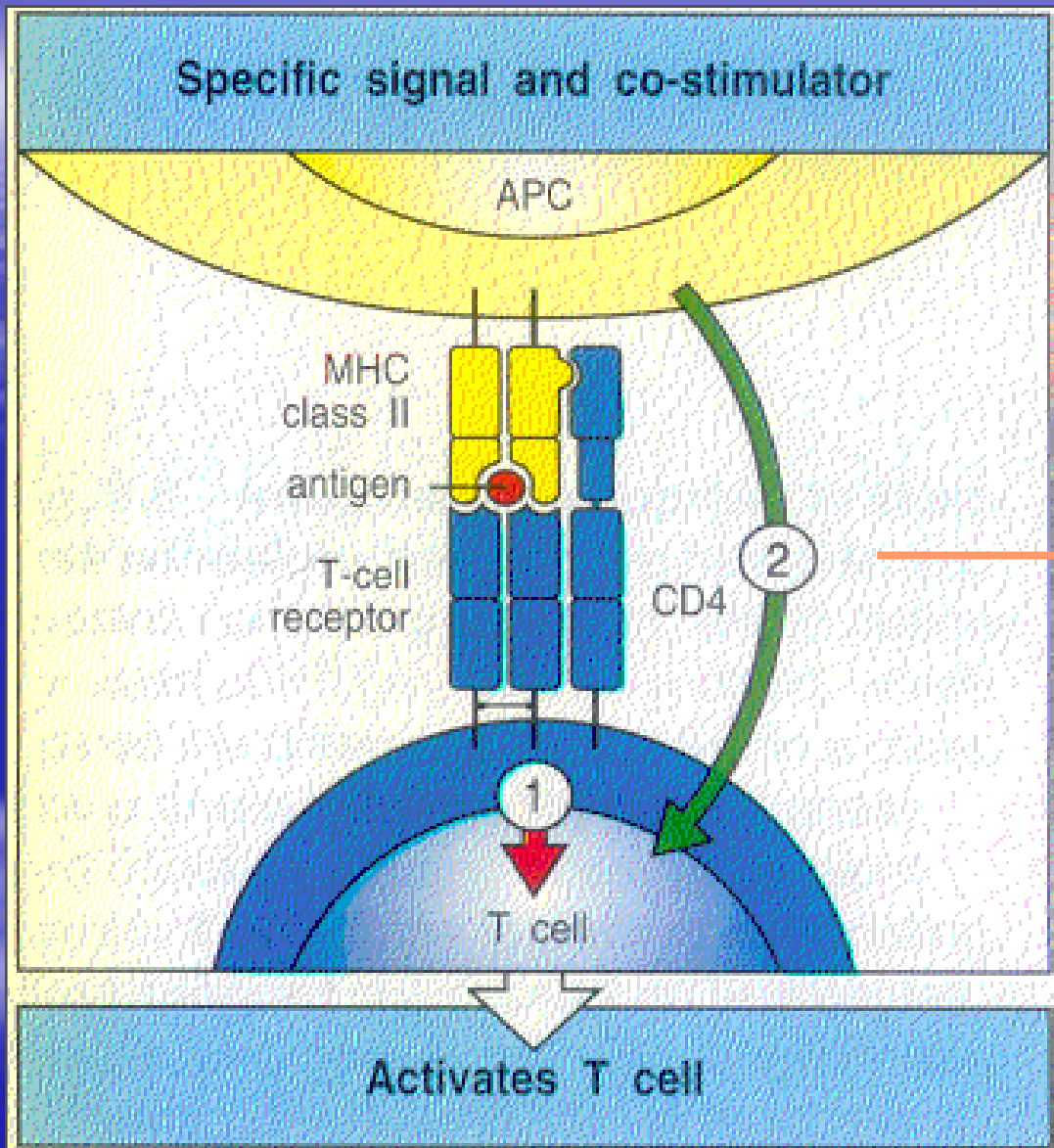
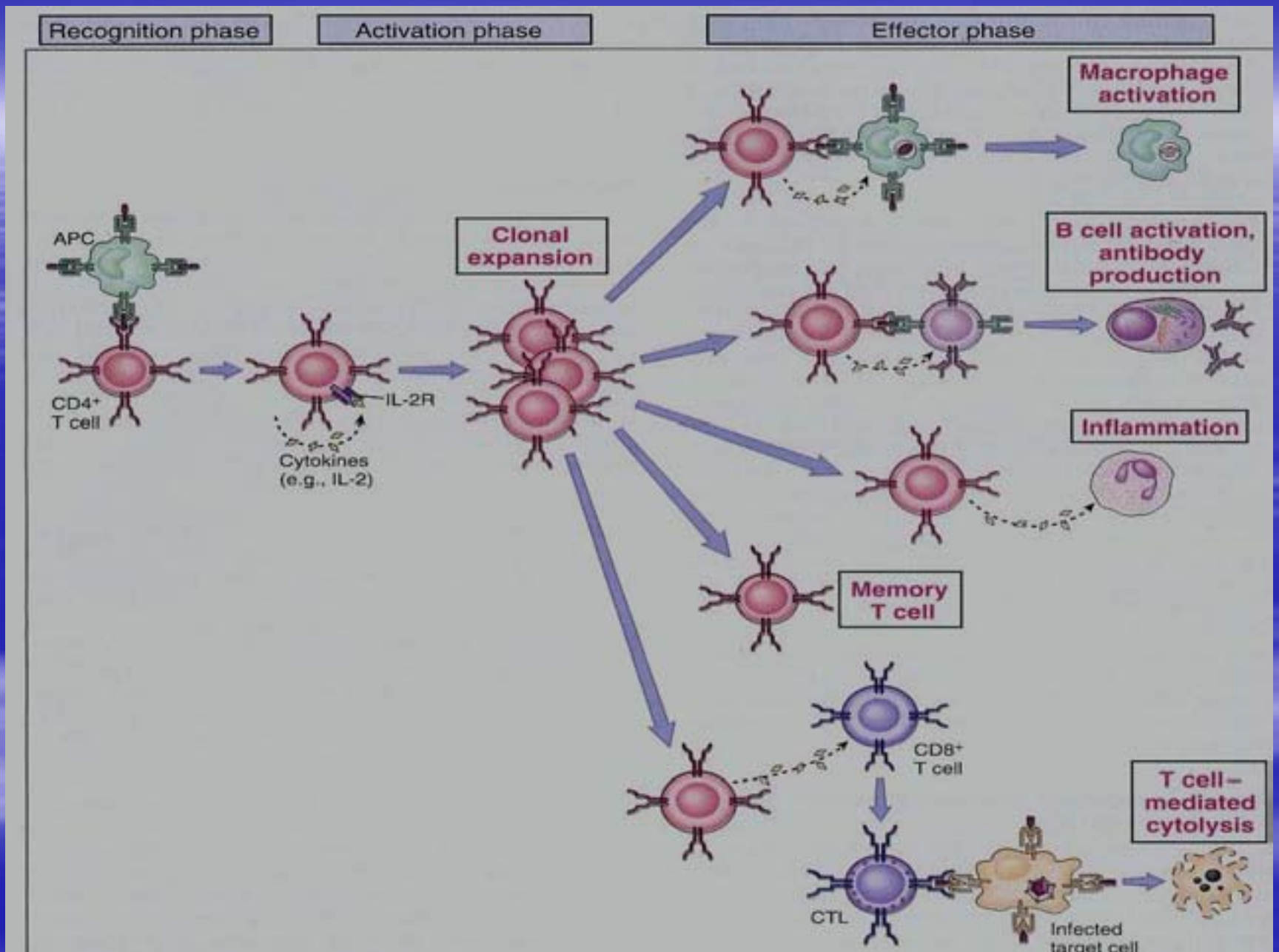


Fig. 7.19 Antigen processing. Antigens are internalized by antigen-presenting cells (APCs) and are then degraded by proteolytic enzymes in the phagolysosomes. Some of the material is only partly degraded and is re-expressed at the cell surface, where it comes to be associated with MHC molecules.



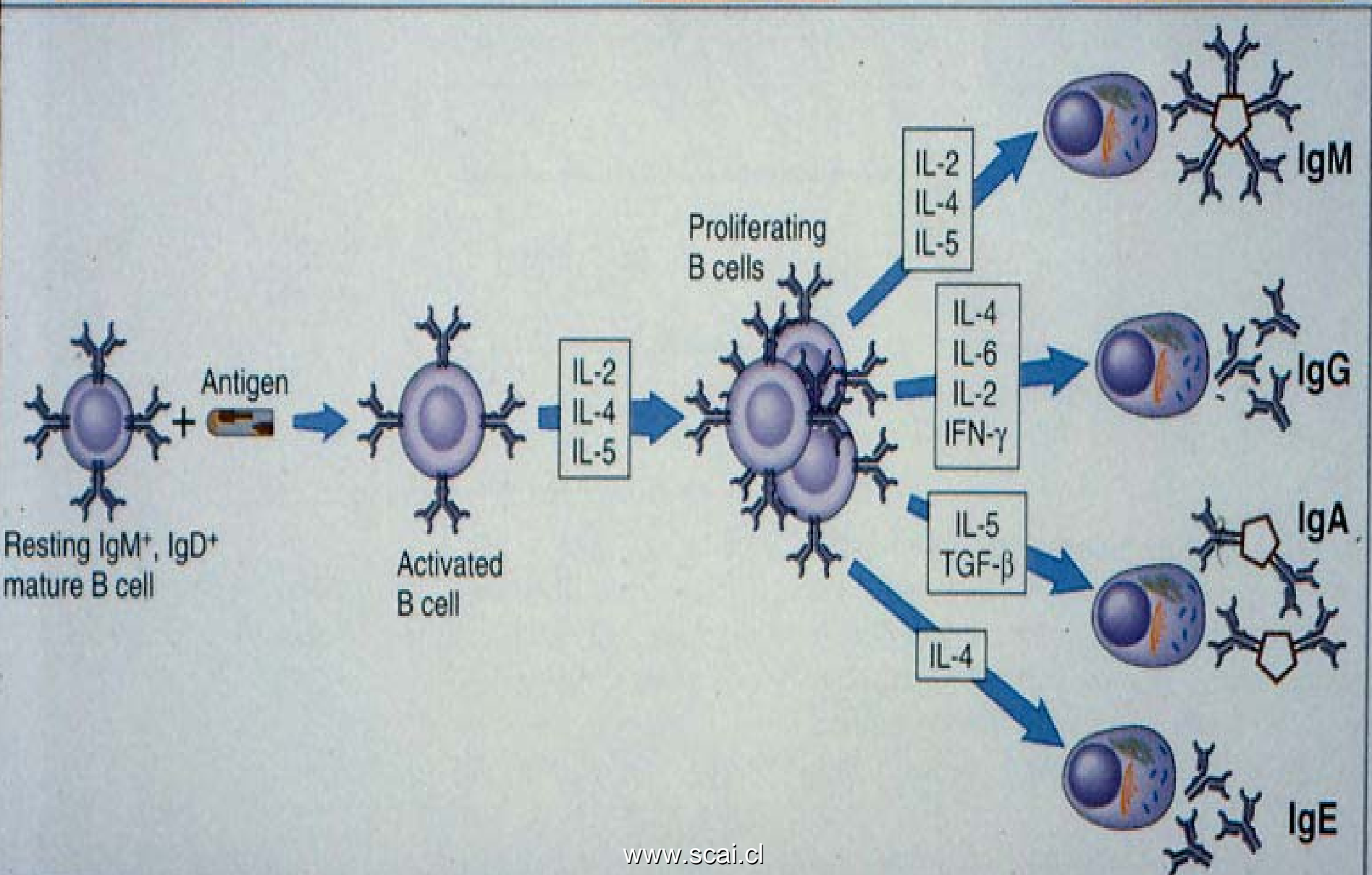
Moléculas
coestimuladoras
Citoquinas

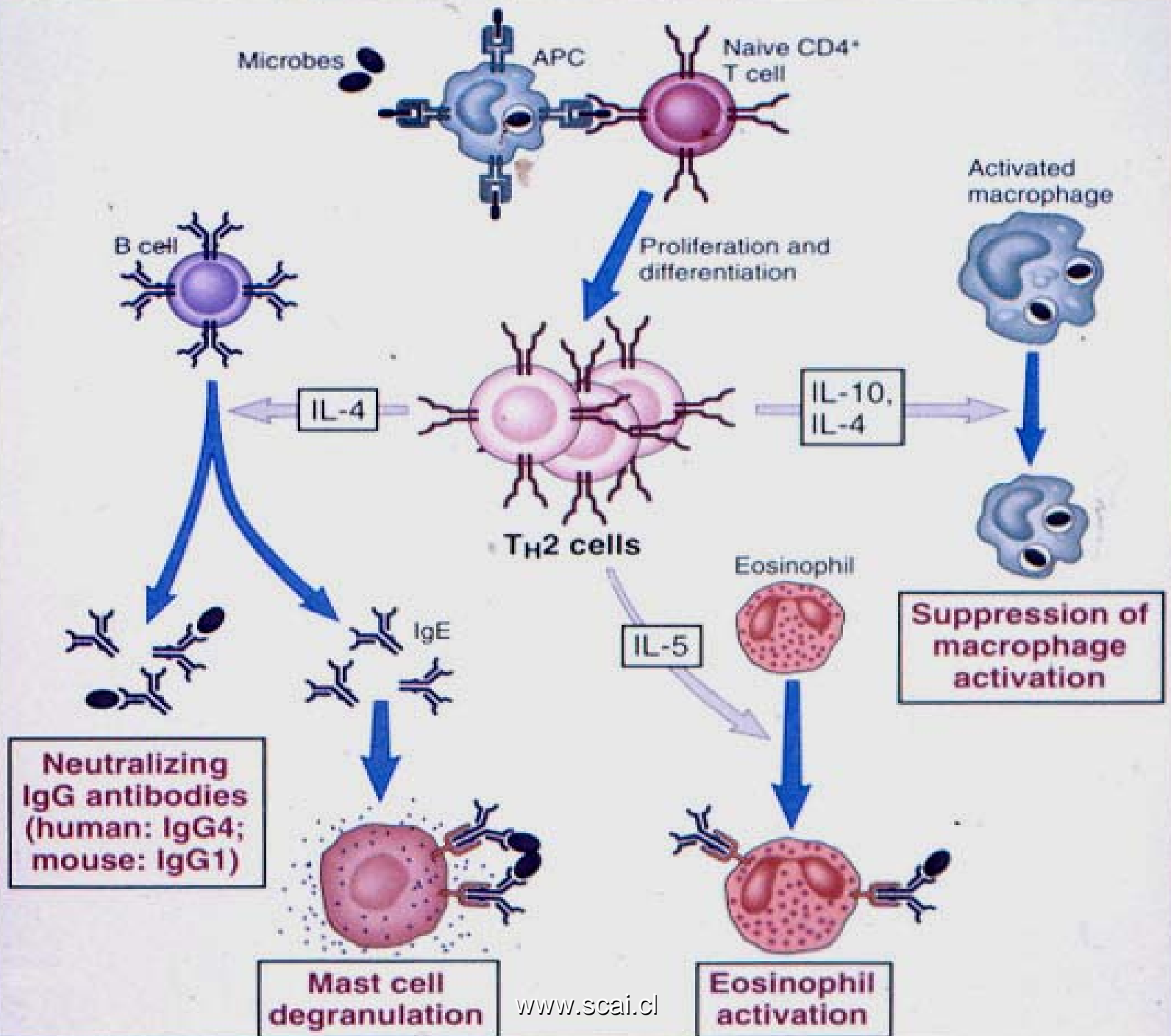


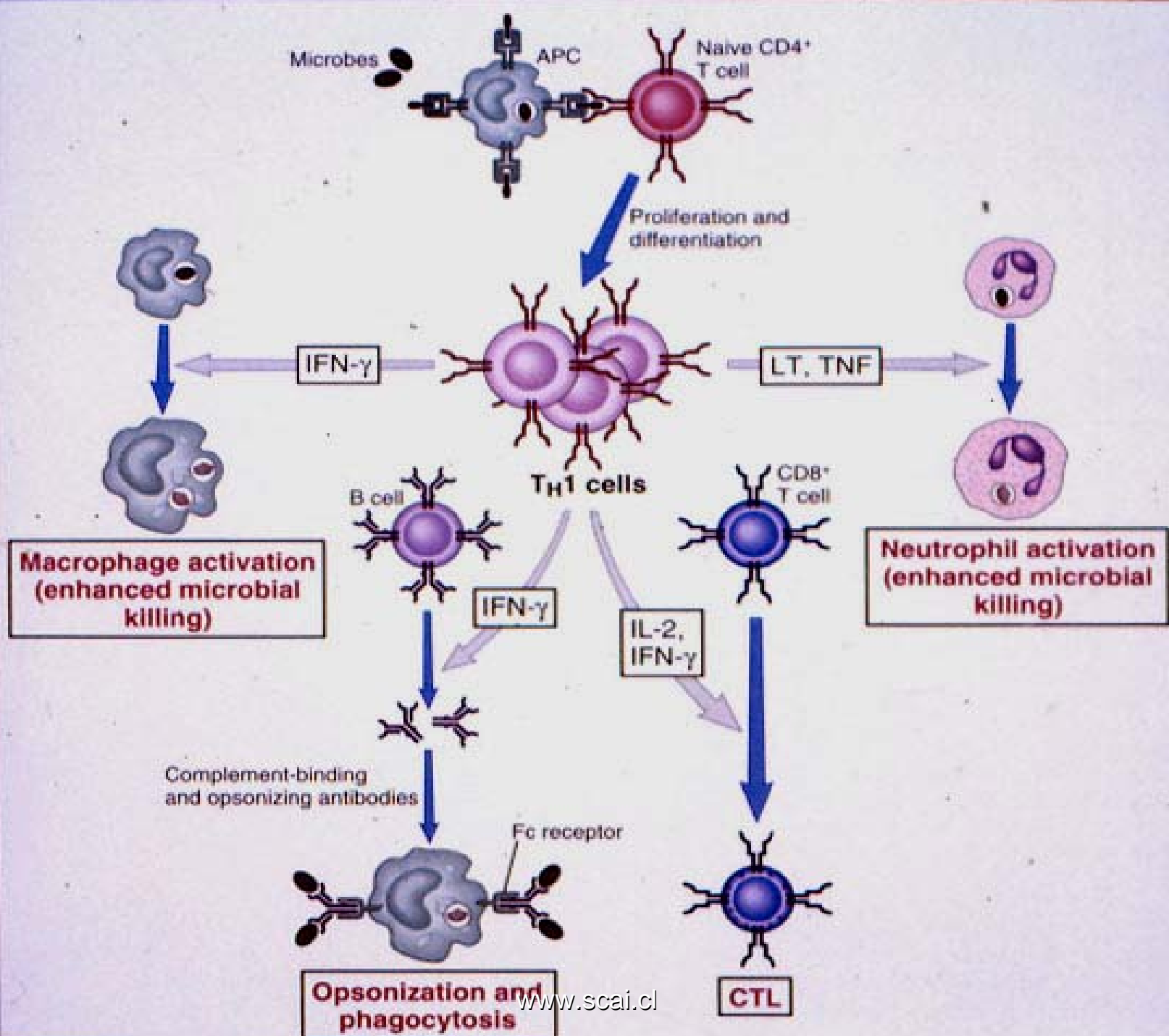
Antigen recognition

B cell proliferation

Ig secretion and isotype switching







MECANISMOS DE DAÑO

DEFINICIÓN:

- Respuestas fisiológicas *exageradas* del sistema inmune, que pueden causar daño

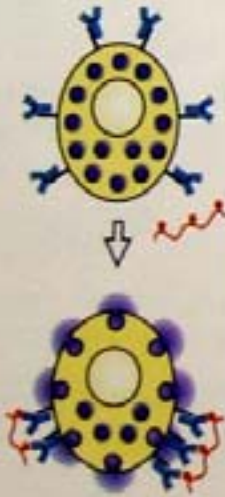

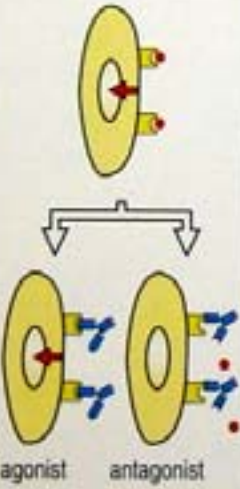
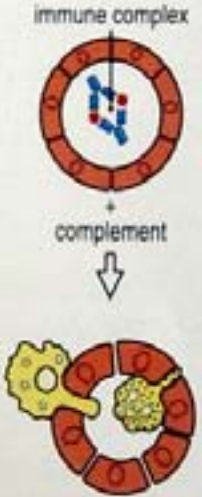
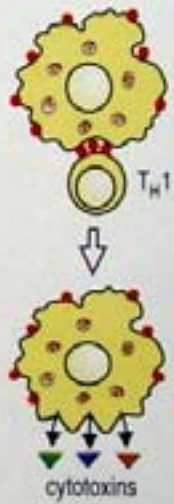

Mecanismos de Hipersensibilidad

Fase de Sensibilización:

- Silente
- Activación de células
- Síntesis de anticuerpos

Fase Efectora:

- Liberación de mediadores
- Inflamación
- Déficit funcional

	Type I	Type II		Type III	Type IV	
Immune reactant	IgE antibody, T _H 2 cells	IgG antibody		IgG antibody	T cells	
Antigen	Soluble antigen	Cell- or matrix-associated antigen	Cell-surface receptors	Soluble antigen	Soluble antigen	Cell-associated antigen
Effector mechanism	Mast-cell activation	Complement, FcR ⁺ cells (phagocytes, NK cells)	Antibody alters signaling	Complement Phagocytes	Macrophage activation	Cytotoxicity
						
Example of hypersensitivity reaction	Allergic rhinitis, asthma, systemic anaphylaxis	Some drug allergies (eg penicillin), transfusion reaction, autoimmune hemolytic anemia	Graves' disease (agonist) Myasthenia gravis (antagonist)	Serum sickness, Systemic lupus erythematosus	Contact dermatitis, graft rejection, rheumatoid arthritis	Contact dermatitis, graft rejection, diabetes mellitus