

# Structures and Functions of Mammalian Collectins

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## 1 Introduction

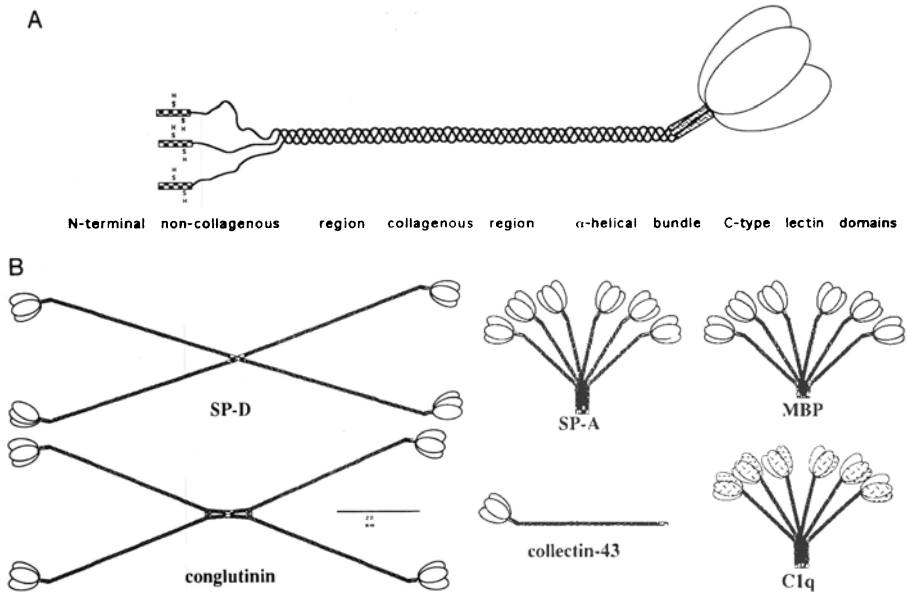
Protein-carbohydrate interactions serve multiple functions in the immune system. Many animal lectins (sugar binding proteins) mediate both pathogen recognition and cell-pathogen interactions using structurally related calcium-dependent carbohydrate recognition domains (C-type CRDs). The collectins are a group of mammalian lectins containing collagen regions. They include mannose-binding lectin (MBL), lung surfactant protein A (SP-A), lung surfactant protein D (SP-D), bovine conglutinin (BC), and collectin-43 (CL-43). Pathogen recognition by these collectins is mediated by binding of terminal monosaccharide residues characteristic of bacterial and fungal cell surfaces. The broad selectivity of the monosaccharide binding site and the geometrical arrangement of the multiple CRDs in the intact collectins explain the ability of these proteins to bind tightly to arrays of carbohydrate structures normally found on the surfaces of the micro-organisms and thus mediate discrimination between self and non-self.

The primary structure of each of the collectins is organised into four regions: an N-terminal region involved in the formation of inter-chain disulphide bonds, a collagenous region composed of Gly-Xaa-Yaa repeats, an  $\alpha$ -helical neck peptide, and a C-terminal C-type CRD (Hoppe and Reid 1994). The collectins are large oligomeric structures, each assembled from multiple copies of a single polypeptide chain (with the exception of human SP-A, which has two closely related types of chains; Fig. 1). The C-type CRDs are spaced, in a trimeric orientation, at the end of triple-helical collagenous stalks. It is becoming increasingly clear that the CRD domains, by binding to carbohydrate ligands on the cell surface of the pathogens, fulfill a recognition function that can bring about effector functions, such as complement activation (by MBL) or phagocytosis (by SP-A and SP-D; Hoppe and Reid 1994; Kishore et al. 1997; Crouch 1998).

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**Fig. 1A,B.** Domain organisation and assembly of the collectin molecules. **A.** The primary structure of each of the collectins is organised into four regions: an N-terminal, non collagenous region involved in the formation of interchain disulphide bonds, a collagenous region composed of Gly-Xaa-Yaa repeats, an  $\alpha$ -helical neck peptide, and a C-terminal C-type CRD domain. The collectins are large oligomeric structures, each assembled from multiple copies of a single polypeptide chain (with the exception of SP-A, where two types of chain are formed). The C-type CRDs are spaced, in a trimeric orientation, at the end of triple helical collagenous stalks. It is becoming increasingly clear that the CRD domains, by binding to carbohydrate ligands on the cell surface of the pathogens, fulfill a recognition function that can bring about effector functions, such as complement activation (by MBL) or phagocytosis (by SP-A and SP-D; Hoppe and Reid 1994). **B.** SP-D and BC appear to be cruciform under the electron microscope, with four arms of equal length ending in globular heads. Oligomers of SP-D are also found. MBL and SP-A seem to resemble serum complement protein, C1q in their overall organisation. The bovine CL-43 exists as monomers (Hoppe and Reid 1994)

## 2 Mannose-Binding Lectin (MBL)

MBL, a  $\text{Ca}^{2+}$ -dependent lectin synthesized primarily in the liver, is an acute phase reactant which shows a modest (1.5- to 3-fold) rise in serum levels during stress or infection. The presence of glucocorticoid responsive elements and a cytokine responsive element homologue in the 5' flanking region of MBL genes (Sastrý et al. 1989) suggests that MBL is an acute phase reactant.

MBL binds to carbohydrate structures found on a wide range of pathogenic organisms. On binding to these carbohydrate structures, MBL can bring about activation of the serum complement system, thus allowing recruitment of a variety of inflammatory, killing and clearance mechanisms, in an antibody-independent manner. MBL is, therefore, considered to play an important role

in innate immunity – especially in very young children or immunodeficient individuals. MBL is also found in amniotic fluid, nasal secretions, middle ear fluid, saliva and inflamed sites – such as rheumatic joint fluid (Turner 1996a).

## 2.1 Molecular Structure and Assembly of MBL

MBL is composed of multimers of identical polypeptide chains of 32 kDa. Three 32-kDa chains combine to make a structural subunit of 92 kDa and oligomeric forms of MBL are composed of two to six of the 92 kDa subunits. Each 32-kDa chain is composed of: an N-terminal region containing cysteine residues involved in inter-chain and inter-subunit disulphide bonding, a region of Gly-Xaa-Yaa repeating triplets which is involved in the formation of collagen-like triple-helical structure, an  $\alpha$ -helical neck region of approximately 34 residues, and a C-terminal globular domain which contains the 14 invariant and 18 highly conserved amino acid residues characteristic of the 120-residue C-type carbohydrate recognition domain (CRD). In the electron microscope, the highest oligomeric form of the MBL, the hexamer of the 92-kDa structural unit, appears as a bouquet-like structure with six globular ‘heads’ each connected by collagen-like strands to a central core (Lu et al. 1990). The largest oligomeric form of serum MBL, which consists of 18 identical 32-kDa polypeptide chains arranged as a hexamer of trimers of these chains, has a molecular weight of 576 kDa. MBL isolated from liver appears to be composed of six identical 32-kDa chains and has a molecular weight of 192 kDa. There are seven cysteine residues at positions 5, 12, 18, 135, 202, 216 and 224 (based on numbering of the 32-kDa chain of the mature protein). The disulphide bond arrangement has not been determined, but the residues at positions 5, 12, and 18 are probably involved in inter-chain and inter-subunit disulfide bonds. The remaining four residues are expected to form two intra-chain disulphide bonds (135 to 224 and 202 to 216) characteristic of that observed in other C-type lectin domains.

## 2.2 Biological Functions of MBL

MBL renders innate immunity by (1) recognition of carbohydrate structures on the pathogens via CRDs, and (2) activation of the serum complement system in order to recruit its inflammatory, opsonisation and killing mechanisms. Two possible mechanisms have been proposed for the MBL-mediated activation of the classical complement pathway. Initially it was shown that the higher oligomers (pentamers and hexamers) of MBL could interact with the proenzyme C1r2-C1s2 complex after binding to mannan-coated erythrocytes (Lu et al. 1990). The C1-esterase activity expressed by the bound complex results in C4 and C2 cleavage, leading to assembly of the C3 convertase of the

classical pathway (C4b2a; Ohata et al. 1990). However, it is now considered that the MBL oligomers normally circulate with two serine proteases, designated MBL-associated serine proteases (MASP-1 and MASP-2), each of which show approximately 40% amino acid sequence identity to the complement enzymes C1r and C1s (Matsushita and Fujita 1992; Thiel et al. 1997). The MASP-2 shows functional similarity to C1s since it activates the C4 and C2 components of complement after interaction of MBL with targets, such as mannan. However, at present it is not clear what the stoichiometry is of the MBL-MASP-1/MASP-2 complexes and what the precise role of each of the MASP enzymes within such complexes is.

### 2.3 Interaction of MBL with Micro-organisms

The MBL CRDs bind glycans terminating with *N*-acetylglucosamine or mannose. Such terminal residues are relatively rare in mammalian tissues (Rademacher et al. 1988) but occur more commonly on microbial surfaces. MBL, via its CRDs, binds to a wide range of pathogens, which include Gram-negative and Gram-positive bacteria, yeasts, viruses, mycobacteria and parasites. Complement activation, brought about by the MBL-MASP-1/MASP-2 complexes interacting with the pathogen surface, results in coating of the target pathogen with large amounts of activated C4 and C3 which leads to opsonisation. One of MBL's main functions is the enhancement of the killing and clearance of pathogens by bringing about antibody-independent activation of the complement system, thus zero, or low, levels of MBL may greatly increase risk to certain infections in young children and immunodeficient individuals (Turner 1996b).

Native and recombinant MBL have been shown to bind wild-type virulent *Salmonella montevideo*, expressing a mannose-rich *O*-polysaccharide (Kuhlman et al. 1989), leading to uptake and killing by phagocytosis. It is likely that MBL-mediated opsonisation involves a complement amplification process and the deposition of C3b / iC3b on microbial surfaces. Non-encapsulated *Listeria monocytogenes*, non-encapsulated *Haemophilus influenzae* and non-encapsulated *Neisseria meningitidis*, *N. cirera* and *N. subflava* show avid binding to MBL. *Streptococci*, *Escherichia coli*, and *N. meningitidis* serogroup show intermediate binding, while encapsulated *N. meningitidis*, *H. influenzae* and *S. agalactive* show weak affinity towards MBL. In binding to different isogenic mutants of *N. meningitidis*, the structure of lipopolysaccharide (LPS) appears to be an important determinant (Jack et al. 1998). The sonicates of *Mycobacteria leprae* and *M. tuberculosis* bind strongly to MBL, probably because of the high D-mannose content found on the surface of these pathogens. MBL also binds to acapsular *Cryptococcus neoformans* and mediates agglutination (Schelenz et al. 1995).

MBL is known to inhibit both haemagglutinin (HA) activity and infectivity of several strains of viruses, in addition to acting as an opsonin and enhanc-

ing neutrophil reactivity against the virus. It has been shown that MBL, as a  $\beta$  inhibitor of influenza A virus (IAV) acts by binding to high mannose structures and masking the cell attachment site of HA (Hartshorn et al. 1993). MBL is also capable of initiating complement mediated neutralisation of IAV (Anders et al. 1990). It has been demonstrated that MBL inhibits HIV infection of CD4<sup>+</sup> lymphoblasts and binds to HIV-infected U937 cell lines (Ezekowitz et al. 1989). It can further activate the classical complement pathway by binding to *gp120* from HIV-1 and *gp110* from HIV-2 (Haurum et al. 1993).

## 2.4 Gene Organisation and Genetics of MBL

The 7 kb gene encoding human MBL is located on the long arm of chromosome 10, within a gene cluster, at 10q11.2-q23, which also includes genes for SP-A, SP-D and a pseudogene of SP-A. Four exons encode the four distinct regions seen in the mature 32-kDa polypeptide chain of MBL: the N-terminal cysteine rich region (exon 1), a collagenous region (exons 1 and 2) and an  $\alpha$ -helical neck region (exon 3), followed by a CRD region (exon 4).

There are four allelic forms of the MBL gene which provide structural variants of the MBL polypeptide chain. These allelic forms are designated A, B, C and D. The allele A, being the most common, is taken as the normal, or wild-type, form. In the B and C alleles, one glycine residue is replaced by aspartic acid (allele B) or glutamic acid (allele C) within the collagenous region. In the D allele, an arginine residue in the collagenous region is replaced by a cysteine residue (Madsen et al. 1994). Each of these three substitutions probably affects the formation of a stable collagen-like triple-helix. The homozygotes with respect to the B, C, or D alleles have undetectable or trace amounts of MBL. The heterozygotes (A/B, A/C or A/D) have lower levels of MBL (approximately 15% of that of A/A homozygous individuals). The A/A homozygous individuals can also have low levels of MBL since there are variants within the promoter region of the gene which influence serum levels (Madsen et al. 1995; Turner 1996b). An average value of 1  $\mu\text{g/ml}$  is found in the sera of Caucasians, but there is a wide variation in individual values (0–5  $\mu\text{g/ml}$ ), due to the B, C and D alleles and variants in the promoter region.

## 2.5 Crystal Structure of Trimeric CRDs of MBL

The crystal structure of the trimeric CRDs of MBL, together with the neck region, shows that each CRD is approximately  $45 \times 25 \times 25 \text{ \AA}$ , and contains two calcium ions, designated sites 1 and 2 (Weis et al. 1991, 1992, 1998; Sheriff et al. 1994). The CRD starts in a  $\beta$ -strand, followed by a ten residue  $\alpha$ -helix, an extended stretch of ten residues, and a second  $\alpha$ -helix. A short turn after this helix leads into a second  $\beta$ -strand that turns sharply at a conserved glycine (158 of MBL-A). The backbone then enters a region with no regular secondary

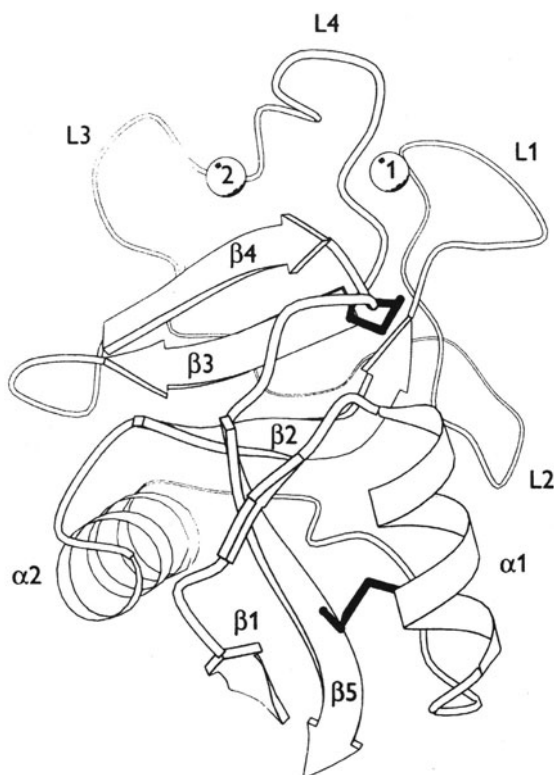


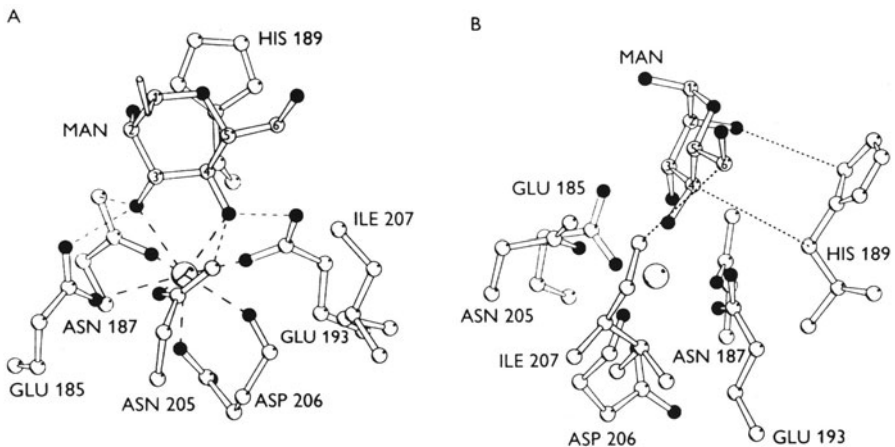
Fig. 2. Ribbon diagram of MBL-A CRD. The  $\alpha$ -helices,  $\beta$ -strands, and loops are labelled as  $\alpha$ ,  $\beta$ , and  $L$ . The two  $\text{Ca}^{2+}$  are represented by *spheres*, and the disulphide bonds are shown in *black* (Weis et al. 1998)

structure, containing two loops, an extended stretch, and two more loops, for a total of about 45 residues (Fig. 2). After the fourth loop, the backbone forms two anti-parallel  $\beta$ -strands that end in a tight turn. The structure enters a short loop, and finishes with a  $\beta$ -strand that pairs in an anti-parallel orientation with the first N-terminal strand. The pairing of the first and last  $\beta$ -strands places the beginning and the end of the CRD next to each other. Structure-based sequence alignment of the CRDs reveals the essential sequence determinants of the fold (Weis et al. 1991). There are two disulphide bonds formed by four invariant cysteines: the outer disulphide links the first  $\alpha$ -helix to the last  $\beta$ -strand, and the inner disulphide links the beginning of the third  $\beta$ -strand to the loop following the fourth  $\beta$ -strand. A second set of conserved residues form the calcium binding sites.

MBL has a broad carbohydrate specificity well-suited to recognise a variety of pathogenic surfaces. The common feature of these sugars is the presence of equatorial hydroxyl groups in the stereochemistry of the 3- and 4-OH groups of D-mannose. The structural basis of MBL and carbohydrate specificity has

been investigated by high resolution X-ray crystallographic analysis of the two rat proteins, serum MBL-A and liver-associated MBL-C. The structure of MBL-A complexed with a high mannose oligosaccharide at 1.7 Å resolution (Weis et al. 1992), and a series of MBL-C structures complexed with methyl glycosides of mannose, *N*-acetylglucosamine, and fucose at 1.7–1.9 Å, have revealed that the binding occurs through direct co-ordination of the site 2  $\text{Ca}^{2+}$  involving covalent bonding of the 3- and 4-OH groups of the ligand (Fig. 3 A). In the interaction of mannose with MBL, there are three non-polar van der Waals contacts: the C4 of mannose contacts the  $\text{C}\beta$  of residue 189 of MBL-A, the 2-OH contacts a carbon atom, and the exocyclic C6 contacts the terminal methyl group of Ile-207 (Fig. 3 B). Site-directed mutagenesis has revealed that only C4- $\text{C}\beta$  contact is energetically significant (Iobst et al. 1994): replacement of His-189 with Ala, and that of Ile-207 with Val, has little effect on ligand binding. However, changing His-189 to Gly, which removes the  $\text{C}\beta$  contact, reduces the affinity for mannose significantly. Complexes of MBL-C with methyl glycosides of *N*-acetylglucosamine and fucose confirm that the contacts with the hydroxyl groups equivalent to the 3- and 4-OH groups are the principal determinants of the recognition. Di-, tri-, and higher oligomannose oligosaccharides complexed with MBL-A and MBL-C confirm that the site interacts only with a single sugar moiety of the ligand (Weis et al. 1992).

Despite their affinity for a range of monosaccharides, MBLs do not trigger complement-mediated lysis or opsonic reaction to host cells. This can partly be explained by the relative sparsity of terminal mannose, GlcNAc, and fucose residues on vertebrate glycoproteins and glycolipids. The crystal structures of the rat MBL-A (Weis and Drickamer 1994) and human MBL (Sheriff et al. 1994)



**Fig. 3A,B.** Binding of mannose at the rat MBP-A calcium site. **A.** Side chain oxygen atoms of residues 185, 187, 193 and 205, and the main chain carbonyl oxygen of residue 206, form the pentagonal, equatorial  $\text{Ca}^{2+}$  ligands (Weis et al. 1998). **B.** Van der Waals contact (*dashed lines*) between mannose and residues His 189 and Ile 207 (Weis et al. 1998)

trimers provide a likely explanation for the ability of MBL to distinguish non-self from self. A hydrophobic interface between the neck and the CRD maintains a fixed spatial relationship between the two, such that the sugar/calcium binding sites are 53 Å (rat) and 45 Å (human) apart in the trimer. The terminal mannose residues in vertebrate mannose-rich oligosaccharides are about 20–30 Å apart. The binding sites in the MBL trimer are therefore too far apart to interact multivalently with such oligosaccharides. In contrast, pathogenic cell surfaces present dense, repetitive arrays of ligands that can span the distance between binding sites in the MBL CRD trimers, resulting in highly avid multivalent interactions. MBL-A has proven to be an excellent system to probe the determinants of carbohydrate specificity in other C-type lectins. The interactions made by MBP-A and its ligands allow new specificities to be engineered onto the C-type CRD scaffold without affecting the overall structure of the protein. The pair of Glu-185 and Asn-187, when replaced with Gln and Asp, respectively, confers upon MBL-A preferential binding for galactosides, instead of mannose (Drickamer 1992).

### 3 Surfactant Protein A (SP-A)

SP-A accounts for 5% of the weight of the surface active mixture of phospholipids and proteins which are essential constituents of pulmonary surfactant. Nearly all the SP-A is tightly associated with lipids, such as dipalmitoylphosphatidylcholine (DPCC) and sphingomyelin. SP-A is considered to play an important role in surfactant secretion and uptake by type II alveolar cells, and also in the organisation of tubular myelin. Both SP-A and SP-D appear to provide innate immunity against lung pathogens by binding to carbohydrates on the pathogens, agglutinating them and triggering effector mechanisms which kill and opsonise the pathogens. SP-A can also interact with macrophages and increase their chemotactic, phagocytic and oxidative properties. It is therefore considered that SP-A may play an important role in the rapid recognition and clearance of pathogens, especially in immunodeficient individuals (Wright 1997).

#### 3.1 SP-A Suprastructure and Assembly

SP-A has a hexameric structure in which six structural subunits of 105 kDa associate to yield a molecule of 630 kDa. Each subunit is composed of three 35-kDa polypeptide chains which are held together by disulphide bonds located in the N-terminal halves of the chains. The overall shape of SP-A is very similar to that of the complement protein C1q, both molecules appearing in the electron microscope as a bouquet-like structures with six globular heads linked by collagen-like strands to a fibril-like central core. The mature forms of the two SP-A polypeptide chains designated  $\alpha_2$  (product of the SP-A II gene)



and  $\alpha_3$  (product of the SP-A I gene) are both composed of 248 residues which include: an N-terminal segment (7 residues), a collagen-like region (73 residues), the neck region (26 residues) and a CRD domain (123 residues). There is one N-linked glycosylation site at Asn-198 in each chain. There are seven cysteine residues in the mature  $\alpha_3$  polypeptide and six in the mature  $\alpha_2$  polypeptide. The cysteines at positions 6, 48 and 65 in the  $\alpha_3$  polypeptide are considered to form inter-chain disulphide bonds and are involved in oligomer formation (Elhalwagi et al. 1997). The remaining four cysteine residues in each chain are the conserved intra-chain cysteine residues found within the CRD domain. The collagen region contains 23–24 Gly-Xaa-Yaa repeats. Prolines are present in the X position of 4–5 triplets, and at the Y position of 15–16 triplets, most of which are hydroxylated. These hydroxyprolines greatly enhance the stability of collagen triple-helix. The stability of the triple-helix is also contributed to by the alternating charged residues present in the two halves of the collagen domain of SP-A, the two halves being separated by an interruption following the 12th triplet, called the 'hinge region'. As in the C1q, the hinge region introduces a bend in the collagen segment which tilts the CRD trimers away from the core in the whole SP-A molecule. The 38–40 residue long SP-A  $\alpha$ -helical coiled-coil neck region is organised into 'heptad repeats'. The cooperative interactions between the neck and CRDs may contribute to SP-A interactions with type II cells (Sano et al. 1998). The CRDs of SP-A have been shown to mediate a variety of interactions including modulation of alveolar type II cell functions, binding and aggregation of phospholipids, and recognition of bacterial, viral and fungal organisms. Mutational analysis has suggested that the carbohydrate binding site of SP-A co-localises with a major  $\text{Ca}^{2+}$ -binding site (McCormack et al. 1994; Sano et al. 1998).

### 3.2 SP-A Gene and Genomic Organisation

Two transcribed SP-A genes (SP-A I and SP-A II) and one pseudogene have been localised to chromosome 10q21–24, within a cluster that includes the SP-D and MBL genes (Hoover and Floros 1998). Human SP-A contains two types of chain ( $\alpha_2$  and  $\alpha_3$ ) and it has been proposed that each trimeric subunit has one  $\alpha_2$  chain and two  $\alpha_3$  chains. The sequences and genomic organisations of the SP-A I and SP-A II genes are very similar, each being composed of seven exons. The expressed proteins are each encoded within four exons (I-IV): I, covering part of the 5' untranslated region, the leader peptide, the N-terminal region and part of the collagen-like sequence; II, covering the remainder of the collagen-like sequence; III, the  $\alpha$ -helical neck sequence; and IV, the CRD plus the 3' untranslated sequences. Allelic variants of each gene are generated by splicing variability in the 5' untranslated regions and by sequence variability in the 3' untranslated regions (Floros and Hoover 1998).

The SP-A mRNA and protein are expressed in epithelial cells and the non-ciliated bronchiolar cells (Clara cells) of the terminal bronchioles and con-

ducting airways (Khoor et al. 1993). It has also been detected in the serous glands of proximal human trachea, in the endocytic compartment of macrophages, rat intestinal epithelia, human and rat mesentery and human inner ear. SP-A is synthesised as a precursor with a 17- to 28-residue-long leader sequence. After synthesis, SP-A is hydroxylated in the endoplasmic reticulum (ER) by the enzyme prolyl hydroxylase, via the formation of 4-hydroxyproline. SP-A is also co-translationally glycosylated with mannose-rich carbohydrates in the ER, followed by post-translational modifications, such as sialylation and sulphation, contributing to the charge heterogeneity of the molecule (McCormack 1998).

### 3.3 SP-A-Carbohydrate Interaction

The ability of various monosaccharides to compete for binding of SP-A to mannan, a yeast-derived polymer of mannose, has the order: *N*-acetylmannosamine >L-fucose, maltose >glucose >mannose. Galactose, D-fucose, glucosamine, mannosamine, galactosamine, *N*-acetylglucosamine and *N*-acetylgalactosamine do not inhibit mannan binding. SP-A binds specifically to mannose-rich carbohydrates which are likely components of bacterial lipooligosaccharides or capsular oligosaccharides. The CRDs of SP-A bind avidly, in a  $\text{Ca}^{2+}$  - dependent manner, to LPS via the lipid A domain, whose structure closely resembles that of phosphatidylcholine. SP-A shows an acute phase response to LPS aerosolisation (van Helden et al. 1997), leading to upregulation of SP-A receptor expression on the macrophage surface. SP-A also binds, via its CRDs, to the major surface glycoprotein of *Pneumocystis carinii*, implicated in pneumonia in immunosuppressed subjects (Zimmerman et al. 1992). SP-A is also known to bind to glycolipids, such as lactosylceramide and galactosylceramide (Childs et al. 1992).

### 3.4 SP-A-Phospholipid Interactions

SP-A forms a part of the mixture of phospholipid and protein which lines the alveolar space and acts to reduce surface tension forces and prevent atelectasis during expiration. It can function as an inhibitor of phospholipid secretion by alveolar type II cells, via interaction with a high affinity receptor. SP-A binds tightly to dipalmitoylphosphatidylcholine (DPCC) and galactosylceramide (GalCer) and preferentially enhances DPCC uptake by type II cells, as well as the incorporation of this lipid into lamellar bodies. Since DPCC is the principal component responsible for the biophysical properties of pulmonary surfactant, SP-A may play an important role in phospholipid homeostasis in the alveolar space. Mutational studies have implicated the CRD as the major phospholipid interaction site (McCormack et al. 1994). The lipid binding site may overlap with the  $\text{Ca}^{2+}$ /carbohydrate binding site. SP-A is considered essential

for the formation of tubular myelin and other surfactant aggregates, and in concert with surfactant protein B, facilitates rapid adsorption and spreading of surface active phospholipids at the air-liquid interface of the alveoli (Suzuki et al. 1989). SP-A gene-deficient mice have little or no tubular myelin (Korfhagan et al. 1996). SP-A augments the adsorption of phospholipids to an air-liquid interface and improves surface tension of cycled surfactant mixtures *in vitro*. A possible involvement of the N-terminal region, and not the collagenous region, in lipid aggregation, is suggested by the fact that disruption of the interchain disulphide bond at Cys-6 completely blocks lipid vesicle cross-linking by SP-A (McCormack et al. 1994).

### 3.5 SP-A-Type II Cell Interaction

The alveolar type II cells synthesise and secrete surfactant, and also internalise surfactant from the alveolar space. The interaction of SP-A with type II cells has been shown *in vitro* to inhibit lipid secretion and to promote the uptake of lipid by cells, suggesting a role of SP-A in the regulation of surfactant turnover and metabolism. SP-A interacts with the type II cells via its CRDs. This interaction involves a small disulphide loop containing Cys-204 and Cys-218 (Kuroki et al. 1988) and a region of Glu-202 to Met-207. Mutants of rat SP-A, in which Glu-195 was changed to Gln and Arg-197 to Asp, converted SP-A from a mannose-binding to a galactose-binding lectin (McCormack et al. 1994). These mutations also reduce SP-A binding to the type II cells, confirming the CRD as the interacting region. The CRDs have also been implicated in the ability of SP-A to increase lipid uptake (Kuroki et al. 1988). However, SP-A interaction with type II cells and regulation of type II cell function is complex in nature and needs further investigation.

### 3.6 Interaction of SP-A with Phagocytes

Binding of SP-A to alveolar macrophages has been found to be calcium-, temperature- and concentration-dependent, with an apparent  $K_d$  of 2–4 nM (Kuroki et al. 1988; Wintergerst et al. 1989). It is inhibitable by mannosyl-BSA, the CRD of SP-A, and the collagen region of C1q, suggesting the involvement of both collagenous and CRD regions (Wintergerst et al. 1989). Studies on the functional implications of SP-A binding to alveolar macrophages, neutrophils, peripheral blood monocytes, monocyte-derived macrophages, and bone-marrow derived macrophages have formed the basis for the SP-A role in pulmonary defense (Table 1).

SP-A increases intracellular calcium and inositol triphosphate (IP<sub>3</sub>) concentrations in alveolar macrophages. The calcium response correlates with IP<sub>3</sub> generation, and is necessary for SP-A stimulated phagocytosis. SP-A also stimulates chemotaxis via cell interaction involving its collagen region. It also stim-

**Table 1.** Biological functions proposed to be mediated by SP-A

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Surfactant homeostasis
Receptor-mediated inhibition of surfactant secretion from type II cells
Receptor-mediated enhanced uptake of surfactant phospholipids by type II cells
Surfactant biophysical activity
Enhanced phospholipid adsorption to the monolayer
Prevention of protein inhibition by proteinaceous pulmonary oedema
Maintenance of tubular myelin
Phospholipase A <sub>2</sub> inhibition
Myosin clearance
LPS clearance
Host defense functions
Microbial binding and aggregation
Macrophage and neutrophil activation and chemotaxis
Enhanced microbial phagocytosis and killing (via superoxidative burst)
Antiproliferative and antiinflammatory effects on lymphocytes
Modulation of allergic reactions

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ulates directional actin polymerisation (Tino and Wright 1996). These two effects are preceded by receptor binding and transmission of intracellular signals. SP-A also modulates the production of several mediators of inflammation, such as cytokines (TNF- $\alpha$ , CSF) which control inflammatory response and recruitment of other immune cells and reactive species, leading to tissue damage (Tino and Wright 1998).

### 3.7 Interaction of SP-A with Pathogens and Allergens

SP-A has been shown to act as an opsonin for herpes simplex virus type I via alveolar macrophages. Deglycosylated SP-A does not bind to infected HEp-2 cells expressing viral proteins over the cell surface (Van Iwaarden et al. 1992). SP-A has been shown to bind IAV via its sialic acid residues and thereby neutralises the virus (by inhibiting virus-mediated agglutination of RBCs). Deglycosylation of SP-A completely prevents binding to IAV (H3N2)-infected HEp-2 cells. SP-A, but not SP-D, has been shown to bring about phagocytosis of H3N2 by rat alveolar macrophages (Benne et al. 1995). Preincubation of IAV with SP-A also enhances the ability of the virus to stimulate the respiratory burst of neutrophils (Hartshorn et al. 1997), however, without protecting neutrophils against virus-induced deactivation.

Increased attachment of SP-A-coated *Staphylococcus aureus* to macrophages has been reported, but this interaction does not lead to phagocytosis (McNeely and Coonrod 1993). SP-A enhances the binding and opsonisation of *E. coli* J 5 (containing O-antigen deficient rough LPS), but not *E. coli* O 111 (with O-antigen containing smooth LPS), to macrophages, suggesting that SP-A binding

to Gram-negative bacteria is dependent on LPS structure (Pikkar et al. 1995). SP-A has been reported to bind *Streptococcus pneumoniae* (Group A *Streptococcus* and Group B *Streptococcus*; Tino and Wright 1996). SP-A binds, aggregates, and promotes phagocytosis by macrophages of *H. influenzae*. Low binding to *H. influenzae* type b without agglutination and phagocytosis has also been reported (Tino and Wright 1996). SP-A binds Bacillus Calmette-Guerin (BCG) via CRDs and brings about phagocytosis by several types of phagocytic cells (Weikert et al. 1997). SP-A enhances phagocytosis, agglutination, and killing of *Klebsiella pneumoniae* K21a strain (capsule containing Man  $\alpha$ 1 Man sequences), either via opsonisation, or through activation of macrophages via the mannose receptor (Kabha et al. 1997). *Mycoplasma pulmonis* is considered to be involved in pneumonia and exacerbation of asthma and chronic obstructive pulmonary disease (COPD). SP-A binds, independent of calcium and sugar, and brings about phagocytosis and mycoplasmal killing by interferon- $\gamma$ -activated murine alveolar macrophages. It also involves generation of peroxynitrite by alveolar macrophages (Hickman-Davis et al. 1999). SP-A also enhances phagocytosis of *M. tuberculosis* by a direct interaction with human monocyte-derived macrophages and human alveolar macrophages, possibly via upregulation of the macrophage mannose receptor activity. Carbohydrate moieties on SP-A seem important for this interaction. SP-A also enhances the attachment of *M. tuberculosis* to alveolar macrophages, and thus may contribute to the development of tuberculosis in patients with HIV infection (Downing et al. 1995).

SP-A contributes to the clustering of *P. carinii* *in vivo* by interacting with *gpA*, a mannose- and glucose-rich glycoprotein expressed on cysts and trophozoites of the pathogen (Crouch 1998). SP-A has recently been shown to bind and agglutinate, via CRDs, pathogenic unencapsulated *C. neoformans*, but not the capsulated forms (Schelenz et al. 1995). SP-A and SP-D have been shown to agglutinate *Aspergillus fumigatus* conidia and also to enhance binding, phagocytosis and killing of conidia by human alveolar macrophages and circulating neutrophils (Madan et al. 1997a). It appears that SP-A and SP-D may have an important immunological role in the early antifungal defense response in the lung, through inhibiting infectivity of the conidia by agglutination and by enhancing uptake and killing of conidia as well as hyphae of *A. fumigatus* by phagocytic cells.

SP-A has been reported to bind a variety of allergenic pollens such as Lombardy poplar, Kentucky blue grass, cultivated rye and short ragweed, via CRDs (Malhotra et al. 1993). SP-A and SP-D have been shown to bind whole mite extracts (*Dermatophagoides pteronyssinus*, *Derp*) and the purified glycoprotein allergens, in a carbohydrate-specific and calcium-dependent manner and inhibit specific IgE binding to allergens (Wang et al. 1996). SP-A and SP-D can also bind a range of allergens/antigens present in the 3-week culture filtrate of *A. fumigatus* and to purified allergens, *gp45* and *gp55*, and inhibit the ability of allergen specific IgE from aspergillosis patients to bind these allergens (Madan et al. 1997b). The blocking of IgE binding is probably mediated either

by steric hindrance posed by the surfactant molecules already bound to the allergens' carbohydrate structures, or by the recognition of the same binding site of both IgE and surfactant proteins. The possible protective roles played by SP-A and SP-D against airborne allergens are further supported by their ability to block allergen-induced histamine release from basophils isolated from patients having allergic broncho pulmonary aspergillosis (ABPA) and asthmatic children (Madan et al. 1997b; Wang et al. 1998). SP-A and SP-D have also been shown to have antiproliferative effects on peripheral blood mononuclear cells, which were isolated from asthmatic children and challenged with *Derp* allergens (Wang et al. 1998). It therefore appears that SP-A and SP-D may modulate the development of asthmatic symptoms by both inhibiting histamine release in the early phase of allergen challenge and suppressing lymphocyte proliferation in the late phase of asthmatic attacks where there is bronchial inflammation. The inhibitory effects of SP-A and SP-D against *Derp* and *A. fumigatus* allergens suggest a general defense role in the allergen sensitisation/ allergic reactions. Recently, IgE has been shown to have a central role in the induction of lung eosinophil infiltration and Th2 cytokine production (Coyle et al. 1996). Antigen-IgE complexes, bound to CD23, allow B cells to facilitate antigen presentation to antigen specific T cells, resulting in a greatly amplified T cell response. Thus, through their ability to inhibit IgE binding to allergens, SP-A and SP-D may represent a novel approach for the treatment of asthma (1) by preventing degranulation of mast cells, and also (2) by possibly inhibiting CD23/IgE-enhanced antigen processing and presentation to CD4<sup>+</sup> T cells and subsequent activation of Th2 cytokine production.

## 4 Surfactant Protein D (SP-D)

SP-D is one of the surfactant proteins found in the air space lining material in the lungs. Although it does bind to specific phospholipids in the lung surfactant, it shows quite different properties to those of the hydrophobic peptides, SP-B and SP-C, which are strongly associated with lipids. Pulmonary SP-D is produced by alveolar type II cells and nonciliated bronchiolar alveolar cells. However, SP-D may not be a lung specific protein since low levels of material antigenically similar to SP-D are found in normal human serum and, animal studies indicate the presence of SP-D, or SP-D like proteins, in gastric mucosa, tracheobronchial, lacrymal and salivary glands (Crouch 1998).

### 4.1 Molecular Structure and Assembly of SP-D

SP-D is composed of oligomers of a 130-kDa subunit formed from three identical polypeptide chains (43 kDa each) which have an N-linked oligosaccharide structure at Asn-70. As judged by electron microscopy, human SP-D is

assembled into a 520-kDa tetrameric structure with four of the 130-kDa, homotrimeric subunits linked via their N-terminal regions, but trimers, dimers and monomers of the 130-kDa subunit are also seen in SP-D preparations. The triple-helical arms in each 130-kDa subunit are approximately 46 nm in length and although appearing flexible, show no sharp bends or distribution which is consistent with there being no interruptions to the Gly-Xaa-Yaa repeat in the collagenous region of SP-D. Clusters of three CRDs are held together by the  $\alpha$ -helical coiled-coil region found at the C-terminal end of the collagen-like triple helix present in each 130-kDa subunit. Up to eight of the 520-kDa tetrameric structures can undergo further oligomerization to give SP-D multimers having a large array, of up to 96 ( $8 \times 12$ ), CRDs (Crouch 1998). Each chain contains four distinct regions: a 25-residue-long N-terminal distinct region which contains cysteine residues involved in inter-chain disulphide bonding, a 177-residue-long collagen region, a 28-residue-long neck region, and a 125-residue-long CRD region. Unlike SP-A, the SP-D collagen region contains hydroxylysine and hydroxylysylglycosides. An important structural feature is the repeating heptad pattern of hydrophobic residues, in the 'a' and 'd' positions, seen in the  $\alpha$ -helical coiled-coil neck region of the SP-D molecule. The alignment of these hydrophobic residues allows the formation of a self-associating triple-stranded parallel  $\alpha$ -helical bundle which determines the trimeric orientation of the CRDs and possibly also acts as a nucleation point for triple-helix formation (Hoppe et al. 1994). The two cysteines at positions 15 and 20 are considered to be involved in the inter-chain disulphide bonding while the four within the CRD region are considered to be involved in intra-chain disulphide bonding.

## 4.2 Interaction of SP-D with Carbohydrate and Lipid Ligands

The order of preference of human SP-D in solid phase competition assays using maltosyl-BSA as the ligand is maltose >glucose, mannose, fucose >galactose, lactose, glucosamine >*N*-acetylglucosamine. SP-D is known to bind to the glucose-containing core oligosaccharides of LPS (Kuan et al. 1992), and mannose-rich *N*-linked oligosaccharides of the haemagglutinin of IAV and the *gpA* of *P. carinii*. SP-D shows high affinity binding to phosphatidylinositol (PI) and glucosyl-ceramide in a calcium- and sugar-dependent manner (Persson et al. 1992). Substituting Glu-321 to Gln and Asn-323 to Asp in the CRDs reverses the relative carbohydrate binding specificity from maltose >glucose >galactose to galactose >maltose, glucose. Phospholipid binding by SP-D appears to involve neck as well as CRD regions (Kishore et al. 1996).

## 4.3 Interaction of SP-D with Pathogens and Allergens

SP-D binds to carbohydrates/LPS on the surfaces of a variety of pathogens such as IAV, Gram-negative bacteria (*E. coli*, *Salmonella*, *Pseudomonas aeruginosa*,

*K. pneumoniae*) and fungal organisms (*C. neoformans*, *P. carinii*, *A. fumigatus*). The binding of SP-D to these organisms leads to a reduction in infectivity, agglutination and enhanced killing (Reid 1998).

SP-D CRDs bind the glycoconjugates expressed near the sialic acid binding site on the haemagglutinin (or neuraminidase) of specific strains of IAV (Hartshorn et al. 1996) and act as potent inhibitors of HA-mediated agglutination, thereby causing viral aggregation. SP-D is a more potent inhibitor of IAV infectivity than SP-A or MBL. The susceptibility of various IAV strains to neutralisation by SP-D directly correlates with specific differences in the number of glycoconjugates expressed on the HA (Reading et al. 1997). Inoculation of mice with IAV in the presence of mannan is known to increase viral replication, suggesting involvement of the CRDs.

SP-D binds to glycoconjugates (LPS) expressed by a variety of Gram-negative bacterial strains involved in lung pathogenesis, such as *K. pneumoniae*, *Ps. aeruginosa*, *H. influenzae*, and *E. coli*. In contrast to SP-A, SP-D binding to LPS and subsequent agglutination of bacteria is calcium-dependent and inhibitable by competing sugars, LPS and rough mutant forms of LPS (but not by lipid A; Kuan et al. 1992). SP-D does not recognise the capsular polysaccharides of *K. pneumoniae*, and the presence of a well-formed capsule limits interaction of SP-D with underlying LPS molecules. SP-D contributes to the clustering of *P. carinii* *in vivo* by interacting with *gpA*, a mannose- and glucose-rich glycoprotein expressed on cysts and trophozoites (Crouch 1998). SP-D has recently been shown to bind and agglutinate, via CRDs, pathogenic unencapsulated *C. neoformans* (but not the capsulated) forms (Schelenz et al. 1995).

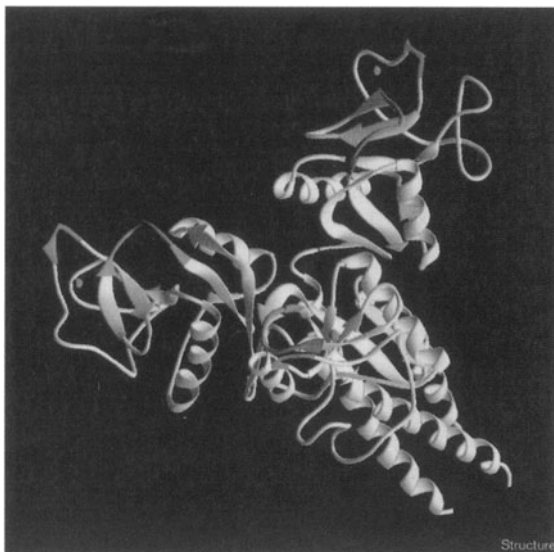
#### 4.4 SP-D Gene Organisation and Genetics

Human SP-D is encoded by a single gene with seven exons spanning >11 kb of DNA on the long arm of chromosome 10, at a locus on 10q22.2–23.1, which also includes the SP-A genes. The first protein-encoding exon (exon 2) includes sequences corresponding to the signal peptide, N-terminal region and first seven Gly-Xaa-Yaa triplets. The remainder of the collagen region (the total of 59 Gly-Xaa-Yaa repeats), is encoded by three exons of 117 bp each. The sixth exon encodes the coiled-coil neck region, whereas the seventh exon codes for the CRD.

#### 4.5 SP-D Crystal Structure

The crystal structure of a trimeric fragment of human SP-D, composed of an  $\alpha$ -helical coiled-coil 'neck' region and the three CRD domains, have recently been determined at 2.3 Å resolution (Hakansson et al. 1999). The fold of the CRD is similar to that of MBL. The novel central packing of one of the tyro-





**Fig. 4.** Ribbon diagram showing the overall main chain structure of the trimeric  $\alpha$ -helical coiled-coil and three lectin domains of human lung surfactant protein D. The positions of the three carbohydrate-binding calcium ions, one in each monomer, are shown as black spheres

sine side chains within the coiled-coil results in an asymmetric orientation of the CRDs. There are three calcium ions bound to each SP-D monomer (Fig. 4), one at the carbohydrate binding site and two in a second site previously described for MBL (Weis et al. 1992). The average distance between the two carbohydrate binding calcium ions is 51 Å. The position of the conserved calcium ligands in SP-D (Glu 321, Asn 323, Glu 329, Asn 341 and Asp 342) matches very closely with those of MBL-A. There is a central cavity between the three CRD domains which presents a positively charged surface, which has been suggested to be a putative interacting region for LPS, or cell surface receptors.

## 5 Cell Surface Receptors for Collectins

SP-A, MBL and conglutinin, but not SP-D, have been shown to bind to a molecule, designated as the cC1qR/collectin receptor, which is now generally regarded as being a membrane associated form of an intracellular, multifunctional  $\text{Ca}^{2+}$ -binding protein, called 'calreticulin' (Eggleton et al. 1997). However, given its primarily intracellular localisation and lack of membrane anchorage and signal transduction components, its candidature as a receptor molecule is debatable. The binding of C1q, SP-A and MBL, but not SP-D, to another cell surface molecule, defined as *C1qR<sub>p</sub>*, has also been demonstrated (Nepomuceno

et al. 1997). *C1qR<sub>p</sub>*, a 126-kD glycoprotein, is a novel type I membrane protein composed of a C-type CRD, five epidermal growth factor-like domains, a transmembrane domain, and a short cytoplasmic tail. It is expressed on the surfaces of monocytes/macrophages, neutrophils, endothelial cells, and microglia. *C1qR<sub>p</sub>* is considered to mediate phagocytosis by binding to the collagen regions of C1q, MBL and SP-A. Since ligand-*C1qR<sub>p</sub>* ligation triggers phagocytosis without inducing release of proinflammatory cytokines, further dissection of the *C1qR<sub>p</sub>* system may provide a basis for antimicrobial therapy without an inflammatory response. It could be potentially useful in regulating the phagocytic capacity of myeloid cells (a prophylactic treatment for immunocompromised individuals at risk from infection). A putative SP-D receptor, *gp340*, appears to bind SP-D through its CRD regions in a calcium- dependent and sugar- independent manner (Holmskov et al. 1997). The *gp340* has been described as a new member of a scavenger receptor cysteine-rich superfamily containing multiple scavenger receptor type B domains. Although the interaction between *gp340* and SP-D involves the CRD region, the inability of maltose to block the interaction indicates a protein-protein interaction, rather than a carbohydrate-CRD interaction.

## 6 SP-A and SP-D Gene Knock-out Mice

Mice lacking SP-A mRNA and protein *in vivo* [designated SP-A (-/-)] have been generated using gene knock-out technology (Korfhagen et al. 1996). SP-A knock-out mice survive and breed normally, having normal levels of SP-B, SP-C and SP-D, phospholipid composition, secretion and clearance, and incorporation of phospholipid precursors. Lungs of SP-A (-/-) mice have markedly decreased tubular myelin figures. *P. aeruginosa* (Le Vine et al. 1998) and Group B *Streptococci* (Le Vine et al. 1999a) are cleared less efficiently than the wild-type mice. These mice are also more susceptible to respiratory syncytial virus (RSV) infection than the control mice (Le Vine et al. 1999b). These studies on SP-A knock-out mice demonstrate that SP-A has an important role in the innate immune system of the lung *in vivo*.

Mice bred after disruption of the SP-D gene have shown remarkable abnormalities in surfactant homeostasis and alveolar cell morphology. They also show a progressive accumulation of surfactant lipids and apoproteins in the alveolar space, hyperplasia of type II cells with massive enlargement of intracellular lamellar bodies, and an accumulation of alveolar macrophages (Botas et al. 1998). Thus, SP-D deficient mice resemble mice deficient in granulocyte-macrophage colony stimulating factor (GM-CSF; Dranoff et al. 1994). The SP-D receptor, *gp340*, which is a scavenger receptor, may serve as a route for internalisation of lipids in macrophages and may mediate the macrophage proliferation induced by exposure to oxidised low density lipoproteins. However, an association of SP-D and *gp340*, the GM-CSF pathway, and surfactant clearance remain to be investigated.

## 7 SP-A and SP-D in Human Diseases

The expression of SP-A and SP-D within the lung makes these collectins specific markers for lung diseases (Kuroki et al. 1998). The measurement of SP-A and SP-D in amniotic fluids and tracheal aspirates reflects lung maturity and the production levels of the lung surfactant in infants with respiratory distress syndrome (RDS). The SP-A concentrations in bronchoalveolar lavage (BAL) fluids are significantly decreased in patients with acute respiratory distress syndrome (ARDS) and also in patients at risk to develop ARDS. A significant increase of SP-A and SP-D in BAL fluids and sputum is diagnostic for pulmonary alveolar proteinosis (PAP). The BAL fluid from the alveolar proteinosis patients forms a very good source of human SP-A (Strong et al. 1998). The SP-A and SP-D concentrations in BAL fluids from patients with idiopathic pulmonary fibrosis (IPF; McCormack et al. 1995) and interstitial pneumonia with collagen vascular diseases (IPCD) are lower than those in healthy controls. SP-A and SP-D appear in the circulation in specific lung diseases, such as PAP, IPF, IPCD and ARDS (Kuroki et al. 1993). SP-A is also a marker for lung adenocarcinomas and can be used to differentiate lung adenocarcinomas from other types and metastatic cancers, and to detect metastasis of lung adenocarcinomas.

## 8 Bovine Collectins: Conglutinin (BC) and Collectin-43 (CL-43)

To date, conglutinin (BC) and collectin-43 (CL-43) have only been identified as being present in the serum of Bovidae. BC, the first mammalian lectin to be discovered, is known for its ability to agglutinate complement-coated erythrocytes – a reaction called ‘conglutination’. Conglutination is brought about via binding of its CRDs to the complement component, iC3b, covalently attached to the erythrocytes (Hirani et al. 1985). BC is a cruciform-shaped tetramer of identical polypeptides, each being 44 kDa. It binds well to oligosaccharides containing nonreducing terminal GlcNAc. BC binds to the high mannose group on the  $\alpha$ -chain of the complement degradation product iC3b – which contains the single high mannose oligosaccharide at Asn-917, covalently attached to another protein/carbohydrate via the activated thiol ester (Holmoskov and Jensenius 1996). This binding is inhibitable by GlcNAc and mannose. BC shows opsonising activity *in vitro* toward *Salmonella typhimurium* and *E. coli* (Friis-Christiansen et al. 1990). This activity depends on the presence of the complement system. It is likely that by binding to iC3b deposited on the bacterial surfaces, BC interacts with macrophages. Subcutaneous injection of BC has been shown to protect mice challenged with *Salmonella typhimurium* (Friis-Christiansen et al. 1990). BC also interacts with IAV, as shown by inhibition of virus agglutinating activity as well as by inhibition of infection *in vitro* (Hartley et al. 1992).

CL-43 (molecular mass of single polypeptide 31.5kDa) is known to exist mostly as monomer, comprising a 28-residue-long N-terminal region, 114 residues of a collagen region (38 Gly-Xaa-Yaa triplets), a 31-residues-long neck region, and a 128-residue-long CRD. CL-43 shows selectivity for L-fucose and mannose, similar to BC. No data concerning the biological role for CL-43 has yet been reported (Holmoskov and Jensenius 1996).

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