A STUDY OF PIROXICAM PHOTOSENSITIVITY

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Piroxicam is a nonsteroidal anti-inflammatory drug, causing photosensitivity reactions which usually begins within a few days of starting treatment with the medication. Recently it has been reported that piroxicam photosensitivity might be due to cross reactions with thimerosal. We examined the correlations between photosensitivity to piroxicam and hypersensitivity to thimerosal, by sensitizing guinea pigs with piroxicam, thimerosal, and thiosalicylate, and cross reactions were observed among those agents. A possible mechanism of piroxicam photosensitivity was discussed.

ANALYISIS OF HTLV-I INTEGRATION AND T CELL RECEPTOR GENE REARRANGEMENT ON THE TUMOR CELLS IN THE SKIN LESIONS OF ATL

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HTLV-I is the causative agent of ATL and is integrated into the DNA genome of infected cells. T cell receptor gene (TcR) is rearranged through the differentiation of T lymphocytes. The monoclonality and the origin of tumor cells can be identified by analyzing the rearrangement of the gene. We detected the integration of HTLV-I provirus by Southern blotting and polymerase chain reaction, and analyzed the rearrangement of TcR by Southern blotting on seven cases of ATL.

SUBSETS OF PERIPHERAL BLOOD LYMPHOCYTES AND LYMPHOCYTE PROLIFERATIVE RESPONSE FOR LECTINS ON THE PATIENTS WITH CUTANEOUS T CELL LYMPHOMA.

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Lymphocyte proliferation test (LPT) on twenty cases of the patients with cutaneous T cell lymphoma (CTCL) was studied using propidium iodide assay. Peripheral lymphocyte subsets of these patients were studied analyzed by indirect immunofluorescence assay using free cell suspensions. Almost normal OKT4/8 ratio and moderate response on LPT were found on the patients of stage I_A, I_B, II_A, and II_B CTCL. Low OKT4/8 ratio and low response on LPT against lectins (PHA, Con A) were found on the patients of stage II_B CTCL. The former group was response to chemotherapy or radiotherapy, but the latter group was no response to chemotherapy or radiotherapy.

EFFECT OF CYCLOSPORIN ON LE-LIKE SKIN LESIONS OF MRL MICE

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Cyclosporin (CyA) is an immunosuppressive agent with specificity for T lymphocytes. This study was designed to verify the role of CyA on the occurrence of skin lesions and immune function in MRL/Mp-lpr/lpr) (MRL/lpr) mice which is an autoimmune model characterized by T cell abnormality and spontaneous development of skin lesions similar to those of LE. CyA was given 5 times a week at a daily oral dose of 5 mg/kg or 50 mg/kg to MRL/lpr mice for 4 to 16 weeks since 1 to 4 month (mo) of age. We investigated the macroscopic skin lesions, proteinuria, anti-DNA antibody levels and cell-mediated immunity in the treated and control mice. The intensity of lupus band test were decreased, and massive lymphadenopathy, proteinuria and anti-DNA antibody levels were reduced in the treated mice with a dose of 50 mg/kg for 16 weeks since 1 mo of age. CyA did not influence the development of macroscopic skin lesions. This preliminary study suggests the early and high dose administration of CyA in MRL/lpr mice induced a partial inhibition on lupus dermatoses and the disease activity.

GENOTYPIC ALTERATIONS IN CLONED HTLV-1-INFECTED CELL LINE CELLS

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Expression of HTLV-1-associated antigens, rearrangement of T-cell receptor gene(TcR), and phenotypes were studied in the primary, established, and cloned ATL cells. Freshly isolated ATL cells, which were positive for CD3, 4 and 25, did not express HTLV-1-associated antigens such as p19, 24 and their precurcors. Several days after culture, the virus antigens were detected in 3-5% of the cells. Although an established cell line(MH-1) showed a similar phenotype to the primary ATL cells, the TcR rearrangement pattern was different, and the percentage of virus antigen-positive cells were increased. Furthermore, cloned MH-1 cells showed different rearrangement patterns from MH-1 and the primary cell type. These findings suggest that genotypic alterations frequently occur in culture, and that cell line cells do not always represent cytological profiles of the original cell types.

IgG SUBCLASSES OF ANTI-SSA/Ro ANTIBODY IN PATIENTS WITH SJÖGREN'S SYNDROME.

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Sera from patients with Sjögren's syndrome were analyzed for the subclass distribution of IgG autoantibody to SSA/Ro (58 KDa) antigen using immunoblotting technique. The IgG1 and IgG4 were the dominant subclasses with anti SSA/Ro reactivity at 58 KDa. The relationship between the presence of these IgG subclasses with anti SSA/Ro reactivity and signs and symptoms of Sjögren's syndrome was examined. The Sjögren's syndrome patients with IgG4 subclass of SSA/Ro antibody were characterized by the presence of either the Rheumatoid Factor or anti SSB/La antibody, and the presence of IgG3 subclass SSA/Ro antibody brought the existence of the Rheumatoid Factor. Significant correlations of the clinical features and each of the IgG subclasses of SSA/Ro antibody will be discussed.