Assays to evaluate T cell responses

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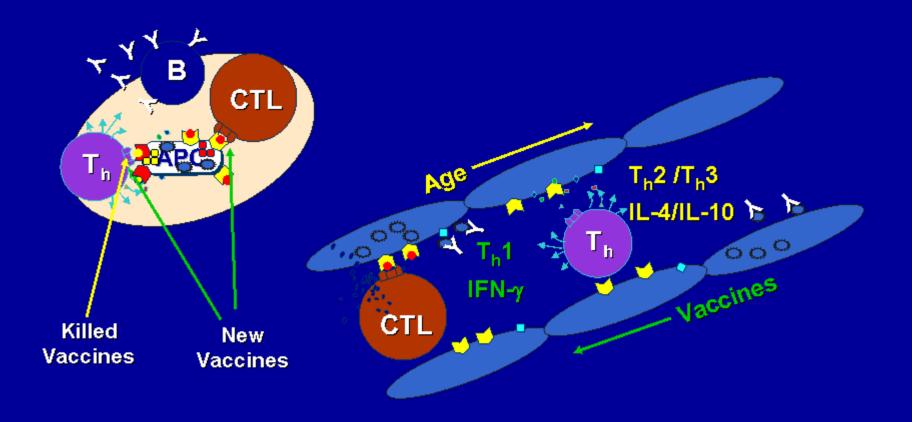
Influenza: Outcomes

Catastrophic disability

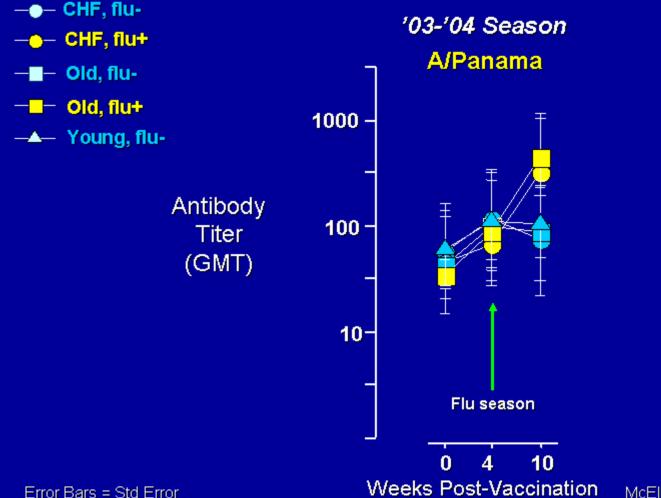
- ♦ Defined as a loss of independence in \geq 3 ADL
- 72% who experience catastrophic disability have been hospitalized
- Leading causes of catastrophic disability
 - Strokes
 - CHF
 - Pneumonia and influenza
 - Ischemic heart disease
 - Cancer
 - Hip fracture

Ferrucci et al. JAMA 277:728, 1997 Barker et al. Arch Int Med 158:645, 1998 Falsey et al. *N Engl J Med*. 2005;352:1749

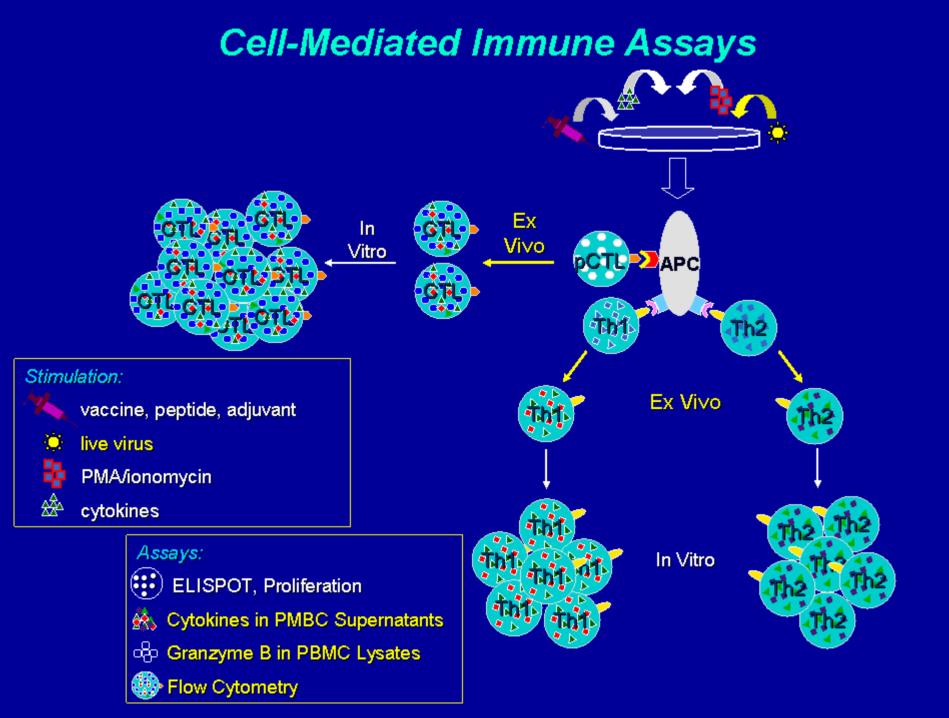
Targeting Immune Responses



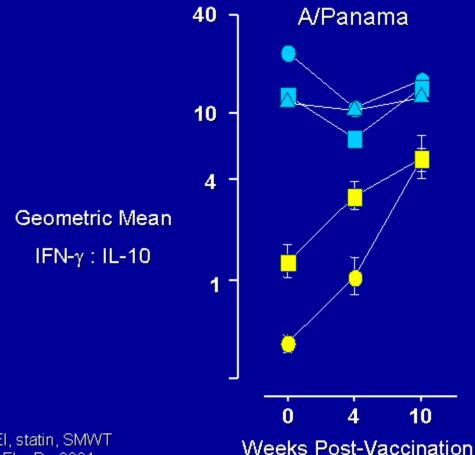
Antibody Response: Vaccination and Infection



McElhaney et al. J Immunol 176:6333-9, 2006



IFN-γ : *IL-10 Ratio Vaccination and Infection*

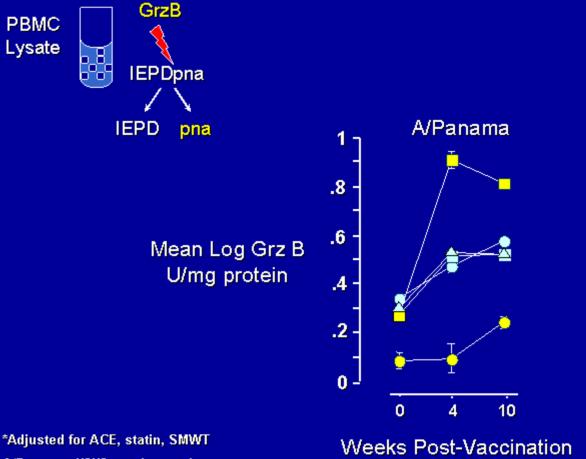


Young, flu Old, flu CHF, flu Old, flu+ at 4 wks
CHF, flu+ after 4 wks

*Adjusted for ACEI, statin, SMVVT A/Pan: Flu vs. No Flu: P<.0001 Error bar: std dev

McElhaney et al. J Immunol 176:6333, 2006

Granzyme B Level: Vaccination and Infection*



CHF, flu CHF, flu+ after 4 wks
Old, flu Old, flu+ at 4 wks
Young, flu-

A/Panama: H3N2 vaccine strain A/Wyoming: H3N2 circulating strain

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Unpublished observations

- After adjustment for baseline antibody titers:
 - antibody responses by hemagglutination inhibition assay do not change with aging
- In ex vivo PBMC stimulated with live influenza virus
 - granzyme B is largely produced by T cells that express degranulation markers consistent with their effector function
 - NK cells are not stimulated to produce granzyme B under these ex vivo conditions



In older adults:

- HI antibody titers as a sole measure of vaccine efficacy may not predict protection
- Cytokine and granzyme B responses to influenza may complement antibody titers in the evaluation of vaccine efficacy
- There remains a significant margin for improvement of both pandemic and seasonal influenza vaccines the aging immune system may senesce but memory is not lost!

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