

1 Comparison of IL-33 and IL-5 Family Mediated Activation of Human Eosinophils

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26 ABSTRACT

27

28 Eosinophils are the prominent inflammatory cell involved in allergic asthma, atopic dermatitis,  
29 eosinophilic esophagitis, and hypereosinophilic syndrome and are found in high numbers in local tissue  
30 and/or circulating blood of affected patients. There is recent interest in a family of alarmins, including  
31 TSLP, IL-25 and IL-33, that are epithelial-derived and released upon stimulation of epithelial cells. Several  
32 genome wide association studies have found SNPs in genes encoding IL-33 to be risk factors for asthma.  
33 In two studies examining the direct role of IL-33 in eosinophils, there were differences in eosinophil  
34 responses. We sought to further characterize activation of eosinophils with IL-33 compared to activation  
35 by other cytokines and chemokines. We assessed IL-33 stimulated adhesion, degranulation, chemotaxis  
36 and cell surface protein expression in comparison to IL-3, IL-5, and eotaxin-1 on human eosinophils. Our  
37 results demonstrate that IL-33 can produce as potent or more eosinophil activation than IL-3, IL-5 and  
38 eotaxin-1. Thus, when considering specific cytokine targeting strategies, IL-33 will be important to  
39 consider for modulating eosinophil function.

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43 INTRODUCTION

44 Eosinophils are the prominent immune cells involved in allergic asthma, atopic dermatitis, eosinophilic  
45 esophagitis, and hypereosinophilic syndrome and are found in high numbers in local tissue and/or  
46 circulating blood of affected patients (1). In the tissue, eosinophils can release toxic granule contents  
47 including Major Basic Protein (MBP), Eosinophil Derived Neurotoxin (EDN), and Eosinophil Peroxidase  
48 (EPO), which may cause intended damage to the target in the case of parasitic infections, but can  
49 inadvertently damage surrounding host tissue and trigger remodeling. In severe asthma, this can lead to  
50 chronic inflammation of the airway resulting in long-term injury and remodeling. In addition, we and  
51 others have demonstrated that eosinophils are pro-inflammatory cells signaling other immune cells  
52 through cytokine release especially by driving and propagating the Th2 type immune response (2, 3).

53

54 IL-5 is a specific activator of eosinophils and is crucial to their development from bone marrow  
55 progenitors. It increases adhesion, survival, and cytokine release as well as inhibits apoptosis. However,  
56 treatment of asthmatic patients with anti-IL5 drug (Mepolizumab) fails to completely eliminate tissue  
57 eosinophilia, though blood eosinophil numbers and asthma exacerbations are significantly reduced (4,  
58 5). Thus, it is important to consider alternative eosinophil activators that may contribute to eosinophil-  
59 mediated pathology in airway tissue.

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61 There are other well-studied activators of eosinophils such as IL-3, GM-CSF, and TSLP causing varying  
62 degrees of activation and involving different signaling kinetics (6). IL-3 and GM-CSF receptors share the  
63 same  $\beta$  chain as IL-5, but IL-3 and GM-CSF have differential effects on eosinophils likely due to the  
64 regulation of their specific  $\alpha$  chain on eosinophils surface. Eosinophils from bronchial lavage (BAL) have  
65 increased expression of IL-3R $\alpha$  and GM-CSFR $\alpha$  and decreased expression of IL-5R $\alpha$  compared to  
66 circulating blood eosinophils (7). IL-5 added to eosinophils *in vitro* leads to up-regulation of IL-3R $\alpha$  and

67 GM-CSFR $\alpha$  and down-regulation of IL-5R $\alpha$  (8, 9). IL-3 more strongly induces eosinophil proteins  
68 including CD48, CD13, and Semaphorin 7A than GMCSF and IL-5 (10, 11). When IL-3 is added along with  
69 TNF $\alpha$ , mRNA for MMP-9 and Activin A are more strongly increased by transcription and mRNA stability  
70 than with IL-5 and GMCSF stimulation (12, 13).

71

72 There is more recent interest in a family of alarmins, including TSLP, IL-25 and IL-33. The alarmins are  
73 epithelial-derived, and released in response to a variety of triggers including epithelial trauma, allergic  
74 inflammation, protease activity, and rhinovirus infection (14, 15). These cytokines are involved in the  
75 pathophysiology of allergic diseases, including asthma and atopic dermatitis, through Th2 pathway  
76 activation (16, 17). We and others have shown that TSLP can activate eosinophils leading to production  
77 of Th2 cytokines, enhanced survival and degranulation (18, 19).

78

79 Several genome wide association studies have found SNPs in genes encoding IL-33 or its receptor ST2  
80 (IL1R1) to be risk factors for eosinophilic asthma, early childhood onset asthma, and severe forms of the  
81 asthma (20). Airway biopsies of asthmatics have higher IL-33 mRNA expression than healthy  
82 subjects(21). In addition, Rhinovirus infection which is an important risk factor for asthma  
83 exacerbations, increases IL-33 levels in nasal lavage of asthmatic patients (22). In two studies examining  
84 the role of IL-33 in eosinophils, there were differences in eosinophil responses. Cherry et al.  
85 demonstrated that IL-33 was as potent or more so than IL-5 in inducing adhesion and degranulation, but  
86 did not evaluate chemotaxis (23). Suzukawa et al. demonstrated that IL-33 was more potent than IL-5 in  
87 inducing adhesion, but not degranulation (24). In addition, CD11b( $\alpha$ M intergrin) was also shown to have  
88 increased expression in the presence of IL-33, but no chemotactic effect was observed by Suzukawa et  
89 al. We sought to further characterize activation of eosinophils with IL-33 compared to activation by  
90 other cytokines and chemokines.

91 METHODS

92

93 Eosinophil purification

94 In an IRB approved protocol (UW-HS-IRB-2013-1570), adult volunteers (18-55 years) with allergic rhinitis  
95 or mild atopic asthma were consented to provide peripheral blood samples (300 ml) in heparinized  
96 syringes. Blood was diluted 1:1 with 1x HBSS (Corning), layered over 1.090g/mL Percoll, and spun at  
97 2000rpm for 20 minutes. The mononuclear cell layer and Percoll layers were removed and the red blood  
98 cell and granulocyte pellet was moved to a clean tube. Contaminating erythrocytes were removed  
99 through two hypotonic lyses with ddH<sub>2</sub>O and divided into 200 million cell aliquots. The aliquots were  
100 incubated at 4°C for 30 minutes with 200µL HBSS with 4% NCS (Sigma), 200µL of anti-CD16 beads, 15µL  
101 of anti-CD14 and anti-CD3 beads, and 30µL of anti-glycophorin-A beads. The diluted cells were passed  
102 through an Auto MACS (Miltenyi) to remove all of the CD16, CD14, CD3, and glycophorin-A positive cells.  
103 Purified cells were 97% - 99.9% eosinophils with neutrophils and lymphocytes as contaminating cells.

104

105

106 Eosinophil adhesion

107 Eosinophil adhesion was assessed as previously described by measuring Eosinophil Peroxidase activity  
108 (EPO) from adhered cells on 96 well plates (Immulon 4 HBX) stimulated with the respective cytokines for  
109 30 min (25). Wells were coated with 10 ug/ml I-CAM1 (RnD Systems), 5ug/ml V-CAM1(RnD Systems) or  
110 5ug/ml Periostin (RnD Systems). Wells were blocked with 0.1% gelatin in HBSS containing Ca<sup>2+</sup> and  
111 Mg<sup>2+</sup> and washed with 3 times with HBSS. Cells, 1x10<sup>4</sup> eosinophils, were added to each well along with  
112 the respective cytokines (1ng/ml final concentration). After 30 min at 37°C, wells were washed 3x with  
113 HBSS to remove non adherent cells. 100ul of HBSS was added to sample wells and 100ul with 1x10<sup>4</sup>  
114 eosinophils were added to untreated wells to provide "Total" eosinophils for comparison. Eosinophil

115 peroxidase (EPO) activity was used to provide an index of eosinophil cell numbers. EPO substrate (1mN  
116 H<sub>2</sub>O<sub>2</sub>, 1mM O-phenylenediamine (Sigma), and 0.1% Triton x-100 (Sigma) in Tris buffer, pH8.0) was added  
117 to each well for 30 minutes at RT before stopping the reaction using 4M H<sub>2</sub>SO<sub>4</sub>. The colorimetric change  
118 at 492nm was assessed with the BioTek Synergy HT plate reader and the % adherence was calculated  
119 using: sample well OD 492/Total well OD 492 x100%.

120

#### 121 Eosinophil degranulation

122 Eosinophil degranulation was assessed by performing ELISA for Eosinophil Derived Neurotoxin (EDN) on  
123 cell free supernatants from eosinophils cultured for 4hrs with *N*-Formylmethionyl-leucyl-phenylalanine  
124 (FMLP) (Calbiochem) or cytokines. Eosinophils in HBSS with 0.03% gelatin and Ca<sup>2+</sup>/Mg<sup>2+</sup>, 2.5 x10<sup>5</sup>  
125 /well, were stimulated with 100nM FMLP as a positive control and IL-5 (RnD Systems), IL-3 (RnD  
126 Systems), and IL-33 (RnD Systems) at 1ng/ml final concentration for 4 hours at 37°C. A “Total” EDN  
127 content well was created by adding 2.5x10<sup>5</sup> cells directly to 0.1M HCL + 1% Triton x-100 to lyse the cells  
128 and their granules. Cell free supernatants were collected and analyzed with EDN ELISA kit per  
129 manufacturer’s instructions (MBL).

130

#### 131 Eosinophil chemotaxis

132 Eosinophil chemotaxis was measured with a 24-well plate and a 6.5mm thick transwell with 5µm  
133 diameter pores. For each condition, 600µL of co-culture media and chemoattractant was added in  
134 duplicates to the lower chamber. Eotaxin-1 (Promokine) was used at a concentration of 100ng/mL while  
135 IL-3 (RnD Systems), IL-5 (RnD Systems), or IL-33 (RnD Systems) were added at a concentrations of  
136 10ng/mL. The upper transwell was pre-wet using HBSS with 0.01% gelatin and Ca<sup>2+</sup>/Mg<sup>2+</sup>. Purified  
137 eosinophils were also diluted in the HBSS with 0.01% gelatin and Ca<sup>2+</sup>/Mg<sup>2+</sup> to a concentration of  
138 3x10<sup>6</sup>/mL. Each upper well of the transwell was aliquoted 100µL of the eosinophil solution and the

139 plate incubated at 37°C for one hour. In order to remove any cells stuck to the bottom of the transwell,  
140 250mM EDTA (Boston Bioproducts) was added to the bottom well for 5 minutes at room temperature.  
141 The transwell was then removed and 50µL of the solution from the bottom chamber was then diluted  
142 1:1 with trypsin (0.4%, Gibco) and counted.

143

144

145 Flow cytometry

146 Eosinophils purified through AutoMACS separation were incubated with IL-3(10ng/mL, RnD Systems), IL-  
147 5(10ng/mL, RnD Systems), IL-33(10ng/mL, RnD Systems), Eotaxin-1(100ng/mL, Promokine), in FBS and  
148 1% RPMI for 4 hours at 37°C (0.5x10<sup>6</sup> cells/tube). Cells were incubated with antibody-fluorochrome  
149 conjugates for 30 minutes at 4°C. Cells were washed, fixed with a paraformaldehyde solution, and  
150 analyzed using the BD LSR Fortessa or BD LSR II (BD Biosciences). Antibodies used were: CD16 PE-CF594,  
151 CD14 Alexa Fluor 488(BD Biosciences); CD18 PE-Cy7, CD11b PerCP Cy5.5, ICAM-1 PE (Biolegend); CD66b  
152 PE-Cy7 (eBioscience); Ghost Dye™ Red 780 (Tonbo). Data was collected using FACSDiva™ Software (BD  
153 Biosciences). Data was analyzed with Flow Jo Version 10 (Tree Star Inc.), with 75-150,000 events  
154 captured. Experiments were performed with at least 7-9 replicates for each group. Appropriate  
155 compensation controls were performed using antibodies and compensation control beads (Invitrogen™  
156 Ebioscience™ UltraComp Ebeads™).

157

158

159 Statistics

160 Adhesion, degranulation, and chemotaxis data are expressed as mean ± SEM. One-way ANOVA test and  
161 the Dunn's test or Student Newman Keul's test, if appropriate were used for pair-wise comparisons  
162 (Sigmaplot 13.0, Systat Software). Differences were considered significant when  $p < 0.05$ .

163

164 For flow cytometry studies, MFI values were obtained from flow cytometry analysis software (FlowJo  
165 10.2). MFI fold change values were normalized by performing  $\log_{10}$  transformation of the ratio between  
166 cytokine stimulated MFI values and unstimulated MFI values. Ratio-*t*-tests were performed on the log-  
167 transformed data (RStudio Version 1.0.153). One-way ANOVA tests and the Dunn's test or Student  
168 Newman Keul's test, if appropriate, were used for pair-wise comparisons of the log-transformed data  
169 (SigmaPlot 13.0). Differences were considered significant when  $p < 0.05$ .

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173 RESULTS

174

175 **Eosinophil Adhesion**

176 Percent adherence was measured by EPO activity from adhered cells (N=22). As shown in Fig 1,  
177 eosinophils were significantly more adherent to uncoated wells when stimulated with IL-33 than when  
178 stimulated with IL-3 ( $p < 0.001$ ) or IL-5 ( $p < 0.001$ ). Similarly, with ICAM-1 as a substrate, eosinophils  
179 stimulated with IL-33 were significantly more adherent than those stimulated with IL-3 ( $p < 0.001$ ) or IL-5  
180 ( $p < 0.001$ ).

181

182 **Fig 1. Eosinophils are more adherent to uncoated wells when stimulated with IL-33.**

183 Eosinophil adhesion determined by EPO release from adherent cells cultured for 30min with cytokine  
184 stimulation, cytokine concentration 1ng/mL. Values shown are a percentage of optical density (OD) of  
185 “Total” wells containing  $10 \times 10^4$  lysed eosinophils with control (no stimulation) subtracted. N=22  
186 Experiments from different blood donors (n=22) with the exception of 3 donors that were repeated  
187 twice in which case, results were averaged from the 2 different experiments using their cells. Lines  
188 connect comparison groups with p-value denoting significant difference in pair-wise comparisons.

189

190 **Eosinophil Degranulation**

191 As shown in Fig 2, eosinophils stimulated with IL-33 for 4 hours induced more percent total EDN release  
192 than the positive control FMLP ( $p = 0.04$ , N=16). EDN release from IL-33 stimulated eosinophils was  
193 significantly higher than eosinophils stimulated with IL-3 ( $p < 0.001$ ) and IL-5 ( $p < 0.001$ ). IL-3 and IL-5  
194 both induced significantly higher degranulation than our control ( $p < 0.001$ ).

195

196 **Fig 2. Eosinophils stimulated with IL-33 induce more percent total EDN release than positive control.**

197 EDN release determined by ELISA for eosinophils cultured 4 hrs with cytokine stimulation, cytokine  
198 concentration 1ng/mL (n=16). Values are expressed as % of “Total” well containing 0.5x10e6/well of  
199 lysed eosinophils. Lines connect comparison groups with p-value denoting significant difference in pair-  
200 wise comparisons.

201

### 202 **Eosinophil Chemotaxis**

203 As shown in Fig 3, Percent migration of eosinophils after stimulation using transwell chambers was  
204 evaluated (N=8). Eotaxin-1 demonstrated significantly higher percent migration than did IL-33 (p <  
205 0.001). IL-3(p < 0.001 ) and IL-5 (p = 0.005) demonstrated significant increase in percent migration when  
206 compared to IL-33. There was no significant difference in percent migration of eosinophils stimulated  
207 with IL-33 when compared to control (p = 0.28). Compared to control, percent migration was  
208 significantly increased with eotaxin-1 (p < 0.001).

209

### 210 **Fig 3. IL-33 stimulation does not result in increased eosinophil migration.**

211 Percent migration of eosinophils after stimulation using transwell chambers. Migration assessed after 1  
212 hour after cytokine was placed in lower chamber, eotaxin-1 concentration 100ng/mL, IL-33 and other  
213 cytokine concentrations 10ng/mL (n=8). Values are expressed as % migration of total cells in well  
214 containing 0.3x10e6/well of eosinophils. Lines connect comparison groups with p-value denoting  
215 significant difference in pair-wise comparisons.

216

### 217 **Eosinophil Expression of Cell Surface Markers**

218 As shown in Fig 4, eosinophil cell surface marker expression was assessed using flow cytometry.  
219 We compared the change in cytokine stimulated expression for 4 hours versus baseline  
220 expression (N=7-9). IL-33, IL-3, IL-5 and eotaxin-1 significantly increased expression of CD11b,

221 CD66b, and CD18 when compared to unstimulated control (with p-values < 0.05). ICAM-1  
222 expression compared to unstimulated control, was significantly increased after incubation with  
223 only IL-33, IL-3, IL-5 (with p-values < 0.001), but not eotaxin-1 (p = 0.3). In pairwise  
224 comparisons, IL-33 stimulated eosinophils expressed significantly higher levels of CD11b (Fig  
225 4A) and CD18 (Fig 4B) than eotaxin-1 (with p-values < 0.001) or IL-3 stimulated cells (with p-  
226 values < 0.05). IL-33 stimulated cells demonstrated higher CD18 expression compared to IL-5 as  
227 well (p=0.01). IL-33 stimulated eosinophils significantly increased expression of CD66b (Fig 4C)  
228 and ICAM-1 (Fig 4D) when compared to eotaxin-1 (with p-values < 0.001) and IL-3 (with p-  
229 values < 0.05), but not IL-5. When comparing IL-33 stimulated eosinophil surface marker  
230 expression versus that of IL-3, IL-5 or eotaxin-1 at these concentrations, IL-33 stimulated  
231 eosinophils demonstrated the highest fold change in marker expression. The 4hr stimulation  
232 experiments did not result in statistically significant change for: N29, CD29, CD11a, CD11c,  
233 CD54, CD23, CD40, CD44, CD41, CD62P (Data not shown).

234

235 **Fig 4. IL-33 induces significant changes in cell surface expression.**

236 Box plots of normalized fold change for A) CD11b, B) CD18, C) CD66b, D) ICAM-1 after 4 hour stimulation  
237 with either IL-3, IL-5, IL-33, eotaxin-1 compared with unstimulated, represented by dotted line (n=7-8).  
238 Lines connect comparison groups with p-value denoting significant difference in pair-wise comparisons.

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242 DISCUSSION

243 Our results demonstrate that IL-33 is as or more potent than IL-3 and IL-5 in inducing eosinophil  
244 adhesion and degranulation. In addition, eosinophil stimulation with IL-33 resulted in increased  
245 expression of the cell surface markers CD11b, CD18, CD66b, and ICAM-1 in a manner comparable to or  
246 higher than IL-3, IL-5, and eotaxin-1. Our study confirms the lack of chemotaxis from IL-33 stimulation.  
247 Few studies have examined the comparative effects of IL-33 vs. IL-3, IL-5 or eotaxin-1 on eosinophils. To  
248 our knowledge, increased eosinophil expression of CD18 and CD66b after IL-33 stimulation has not  
249 previously been described.

250  
251 IL-33 is a member of the IL-1 family of cytokines constitutively expressed in the nucleus of endothelial  
252 and epithelial cells of mucosal membranes and fibroblasts and can be released in response to cell injury  
253 (26). Characterized as an alarmin, IL-33 warns the immune system of barrier injury when cells  
254 undergoing necrosis from infections or physical damage release their contents (27). In this case, the full-  
255 length active form is released and IL-33 signaling can occur. However, if cells undergo programmed  
256 death like apoptosis, the full length form is cleaved by caspases 3 and 7 and signaling is abrogated (28).  
257 Proteases from environmental allergens have also been shown to cleave IL-33, which in turn leads to  
258 downstream Th2 signaling and allergic inflammation (29). IL-33 is considered a Th2 type cytokine  
259 signaling Th2 lymphocytes and ILC2s to release/produce cytokines such as IL-4, IL-5, IL-6, and IL-13  
260 driving the type 2 immune response. Dendritic cells when stimulated with IL-33, release IL-6 and induce  
261 production of IL-5 and IL-13 from naïve CD4+ T cells (30). Viral infections can also result in production of  
262 Th2 cytokines. In addition, viral infections can lead to bronchial epithelial damage and trigger the release  
263 of inflammatory mediators. In a study by Han et al., mice infected with rhinovirus were found to have  
264 increased lung epithelial TSLP and IL-33 (31). The production of these two alarmins, in addition to the  
265 presence of Th2 cytokines may result in increased eosinophil activity.

266

267 The alarmin family also includes TSLP and IL-25. We have previously demonstrated that TSLP promotes  
268 eosinophil degranulation, and that its activity may be enhanced by the allergic cytokine milieu (18).  
269 Elevated levels of IL-33 are found in bronchial tissue, and BAL fluid of asthmatics when compared to that  
270 of controls (21, 32). This points to an important role for IL-33 in airway inflammation. The IL-33 and TSLP  
271 pathways, may be a point of intersection where viral infections and allergic exposures combine to result  
272 in increased eosinophilic inflammation and a heightened risk of exacerbation from the activation of  
273 eosinophils.

274

275 The CD4+ Th2 cytokines IL-3 and IL-5 are produced during allergic inflammation. It has previously been  
276 thought that eosinophil activation was mainly controlled by IL-3, IL-5 and GM-CSF. Eosinophil adhesion is  
277 the one of the necessary steps in eosinophil migration to target tissues. We observed that eosinophils  
278 were significantly more adherent in uncoated or ICAM-1 coated wells after 30 minute incubation with IL-  
279 33 when compared to IL-3 and IL-5. This is similar than the findings of Cherry et al. and Suzukawa et al.  
280 who both found a significant increase in eosinophil adhesion with IL-33 when compared to IL-5. Our  
281 studies used different lengths of time for eosinophil incubation with stimulant than did the previously  
282 described studies. In addition, for our adhesion experiments, we used a lower concentration of 1ng/ml  
283 for each cytokine, as opposed to the 100ng/mL used in the Cherry et al. study and the 1-100ng/mL used  
284 in Suzukawa et al.

285

286 In our studies, IL-33 induced degranulation of eosinophils significantly more than IL-3 and IL-5. This  
287 differs to the results from Suzukawa et al. who also measured EDN after IL-33 incubation. However, our  
288 work supports the finding of Cherry et al. that, IL-33 can induce degranulation to a level of at least that  
289 of IL-5. One limitation of our experiments is that they were performed at single time points. Previous

290 work has shown that there can be differences in eosinophil activation at different time points. For  
291 example, prolonged activation with IL-3 is more potent than IL-5 and GM-CSF in inducing eosinophil  
292 expression of specific activation and adhesion molecules (33). This poses the question of whether IL-33  
293 demonstrates similar potency when compared to IL-3, IL-5, or eotaxin-1 at time points not examined in  
294 our study.

295

296 Our eosinophil chemotaxis studies did not demonstrate increased cell migration after IL-33 incubation.  
297 These results are consistent with that of Suzukawa et al. who reported that IL-33 failed to attract  
298 eosinophils in their migration study. As demonstrated in our results, IL-33 stimulation led to increased  
299 expression of adhesion and migration molecules CD11b, CD18, CD66b and ICAM-1. ICAM-1 is a well  
300 known adhesion molecule that binds to Mac-1 and LFA-1 on the surface of cells or endothelium, and has  
301 been shown by Suzukawa et al. to increase after IL-33 incubation. Expression of these cell surface  
302 molecules was increased with IL-33 to a similar or higher level than IL-3, IL-5 and eotaxin-1. It is possible  
303 that IL-33 participates in priming eosinophils to express these markers, but does not directly lead to  
304 eosinophil migration. Of note, our flow cytometry results revealed changes in expression that are  
305 consistent with prior data. For example, others have demonstrated that eosinophils express increased  
306 ICAM-1 after incubation with IL-33 (34, 35). Various studies have demonstrated increased expression of  
307 CD11b, CD18, CD66b and ICAM-1 in response to IL-5, IL-3, or GM-CSF, although direct comparisons with  
308 IL-33 induced expression were not performed for all of these cell surface markers (33, 36).

309

310 CD11b ( $\alpha$ M integrin) and CD18 ( $\beta$ 2 integrin) form the Mac-1 (macrophage integrin, also known as  
311 complement receptor 3, CR3) complex. It has previously been reported that Mac-1 plays a key role in  
312 eosinophil degranulation and adhesion (37). IL-33 has been demonstrated to increase CD11b expression  
313 to levels comparable to that of IL-5 (24), and we have extended these observations to demonstrate that

314 the CD18 dimer partner is also upregulated. CD66b (CEACAM8) is GPI anchored glycoprotein, which has  
315 been associated with CD11b. Yoon et al. demonstrated that CD66b cross linking by monoclonal  
316 antibody, or galectin-3 led to CD11b clustering on the eosinophil cell surface, and promoted  
317 degranulation (36). Therefore, the IL-33 mediated increased CD66b and CD11b likely play a role in  
318 enhanced eosinophil degranulation.

319  
320 These eosinophil cell surface molecules have been studied in a number of inflammatory diseases.  
321 Sputum eosinophils of asthma patients have been shown to have up-regulated CD66b and CD11b (38). A  
322 study of peripheral eosinophils of asthma patients in response to segmental antigen challenge  
323 demonstrated increases in the CD11b and CD18 post-challenge (39). CD66b has been found to be  
324 elevated on the surface of peripheral eosinophils in untreated eosinophilic esophagitis patients when  
325 compared to healthy controls. Other inflammatory disorders such as rheumatoid arthritis have  
326 demonstrated that CD66b, CD11b, and CD18 are down-regulated by glucocorticoid use. These studies  
327 highlight that these cell surface markers likely play an important role in mediating inflammation. Our  
328 results indicate that IL-33 increased the expression of CD66b, CD18, and CD11b to the level of or more  
329 so than IL-3, IL-5 and eotaxin-1. A representative sample of CD11b<sup>high</sup>CD18<sup>high</sup> and CD11b<sup>high</sup>CD66b<sup>high</sup>  
330 percent positive eosinophils from our stimulation experiments is shown in Table 1. IL-33 induced as high  
331 or higher percent-positive cells exhibiting these markers. Therefore, it is plausible that IL-33 leads to  
332 potent eosinophil activation through its effects on CD66b, and thereby the Mac-1 complex.

333

334 Table 1. Representative Sample of Double “High” Percent Positive Eosinophils

	Unstimulated	IL-3	IL-5	IL-33	Eotaxin-1
CD11b <sup>high</sup> CD66b <sup>high</sup>	27.80%	63.50%	89.20%	92.60%	56.60%
CD11b <sup>high</sup> CD18 <sup>high</sup>	41.30%	81.10%	97.70%	97.80%	86.60%

335 The above table contains double “high” population percentages for the markers listed. These  
336 percentages were obtained by gating on the unstimulated median fluorescence intensity and observing  
337 the increase in double “high” percentage shown in a single representative sample.  
338

339 We recently described relative abundance of proteins of the peripheral blood eosinophil proteome (40).  
340 In comparing protein content of IL-5, IL-3 and IL-33 receptor molecules, IL-5R $\alpha$  was the highest, with the  
341 relative abundance of IL-3R $\alpha$  and ST2 being 15.6% and 28.1% respectively. This demonstrates that  
342 despite less relative abundance of the ST2 receptor when compared to IL-5R $\alpha$ , IL-33 is still capable of  
343 inducing comparable or higher eosinophil adhesion, degranulation and cell surface markers when  
344 compared to IL-5.

345  
346 In this paper, we identify that IL-33 exerts its effects on eosinophils, resulting in as potent or more  
347 adhesion, degranulation, and cell surface marker expression when compared to IL-3, IL-5, or eotaxin-1.  
348 IL-33 as an alarmin has the ability to set off a number of down-stream effects that lead to a skewing  
349 toward the Th2 pathway and the development of allergic inflammation. The fact that IL-33 has as potent  
350 effects on eosinophils strengthens the argument for use of this molecule as a therapeutic target and  
351 broadens our knowledge in regards to how these pathways may be intersecting to produce  
352 inflammation. Anti-IL-33 biologics are currently in clinical trials for asthma and other atopic conditions  
353 and will be expected to significantly impact eosinophil function in allergic disorders.

354

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Figure 1.

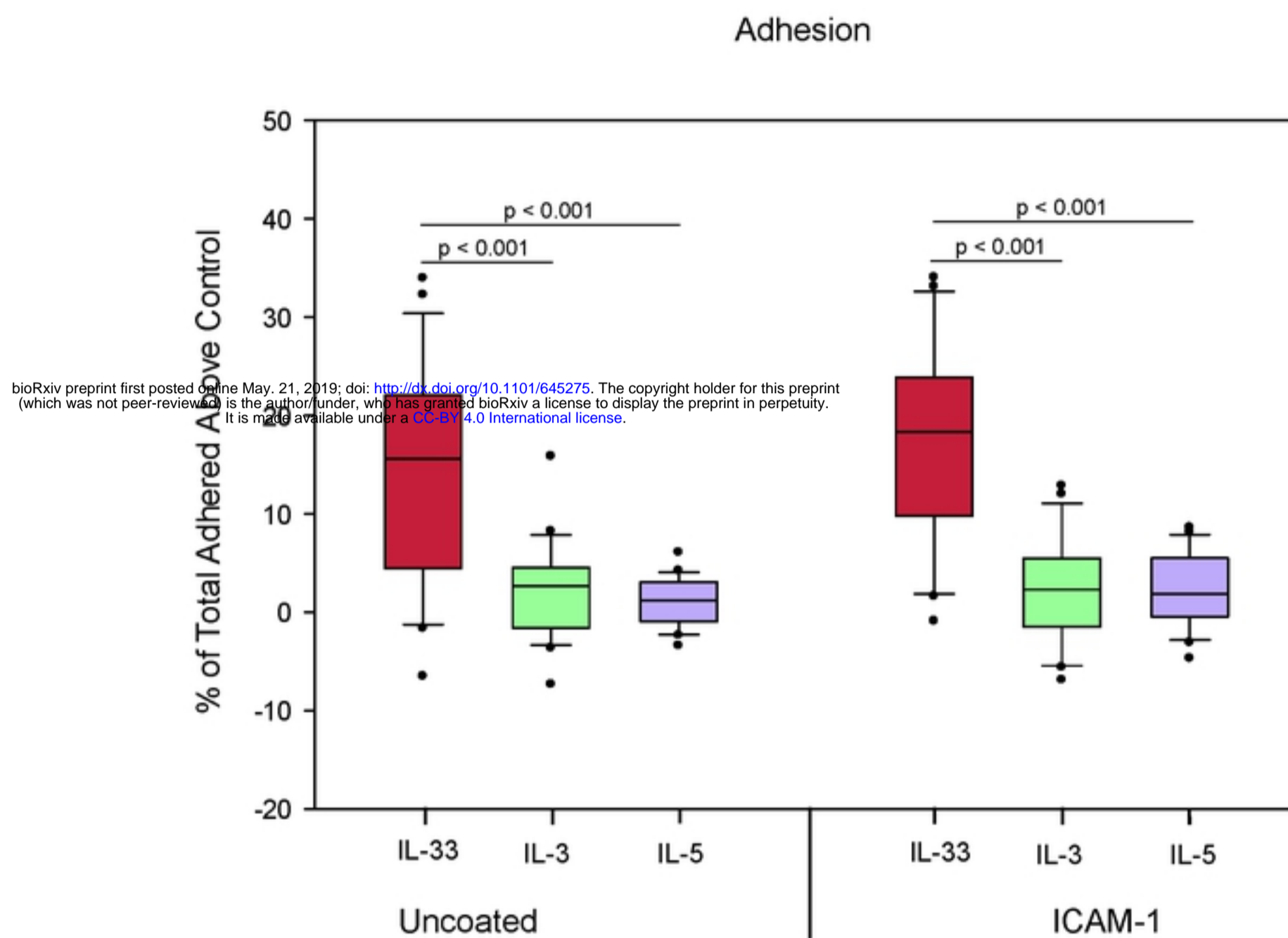


Figure 1

Figure 2.

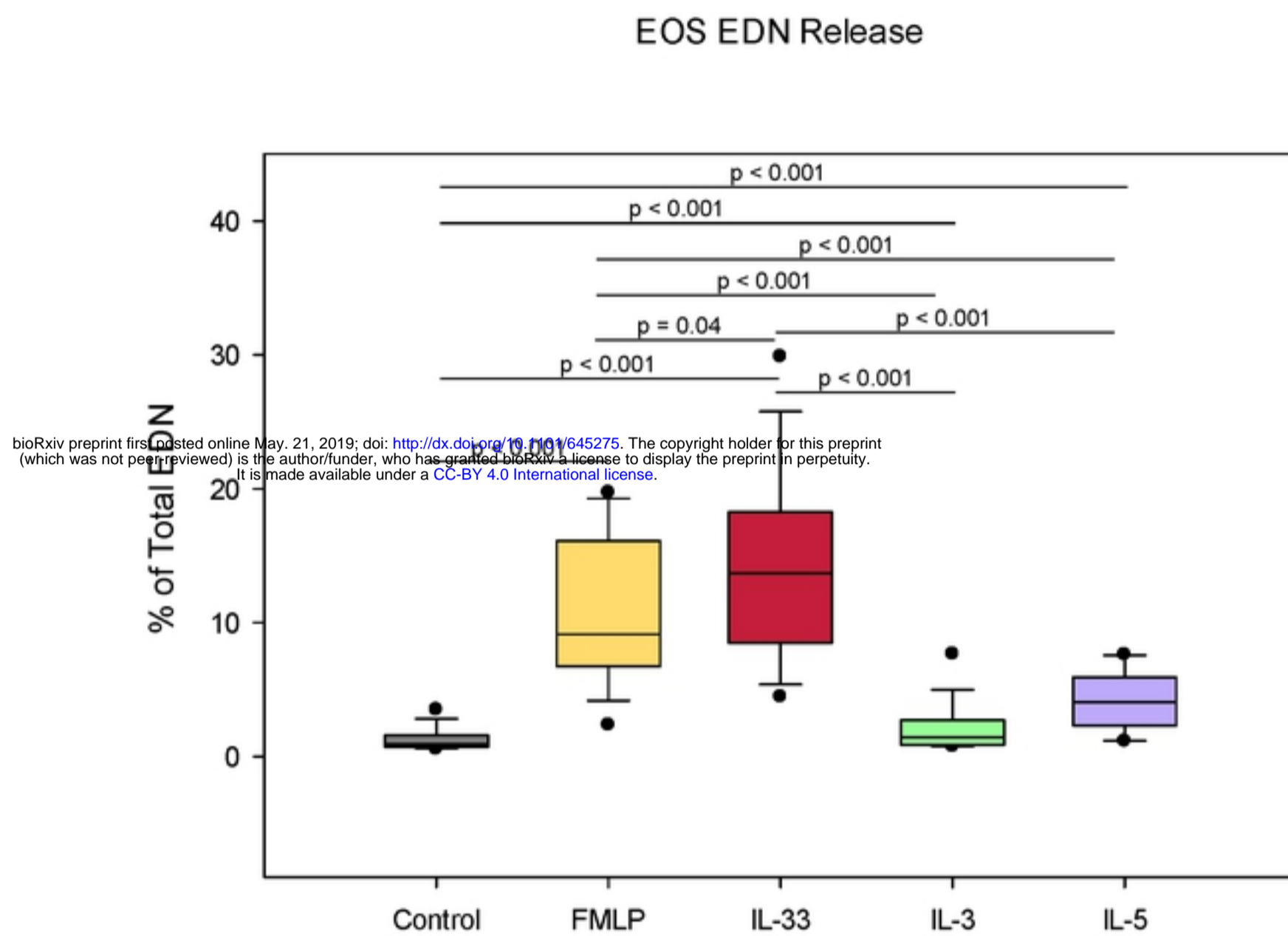


Figure 3.

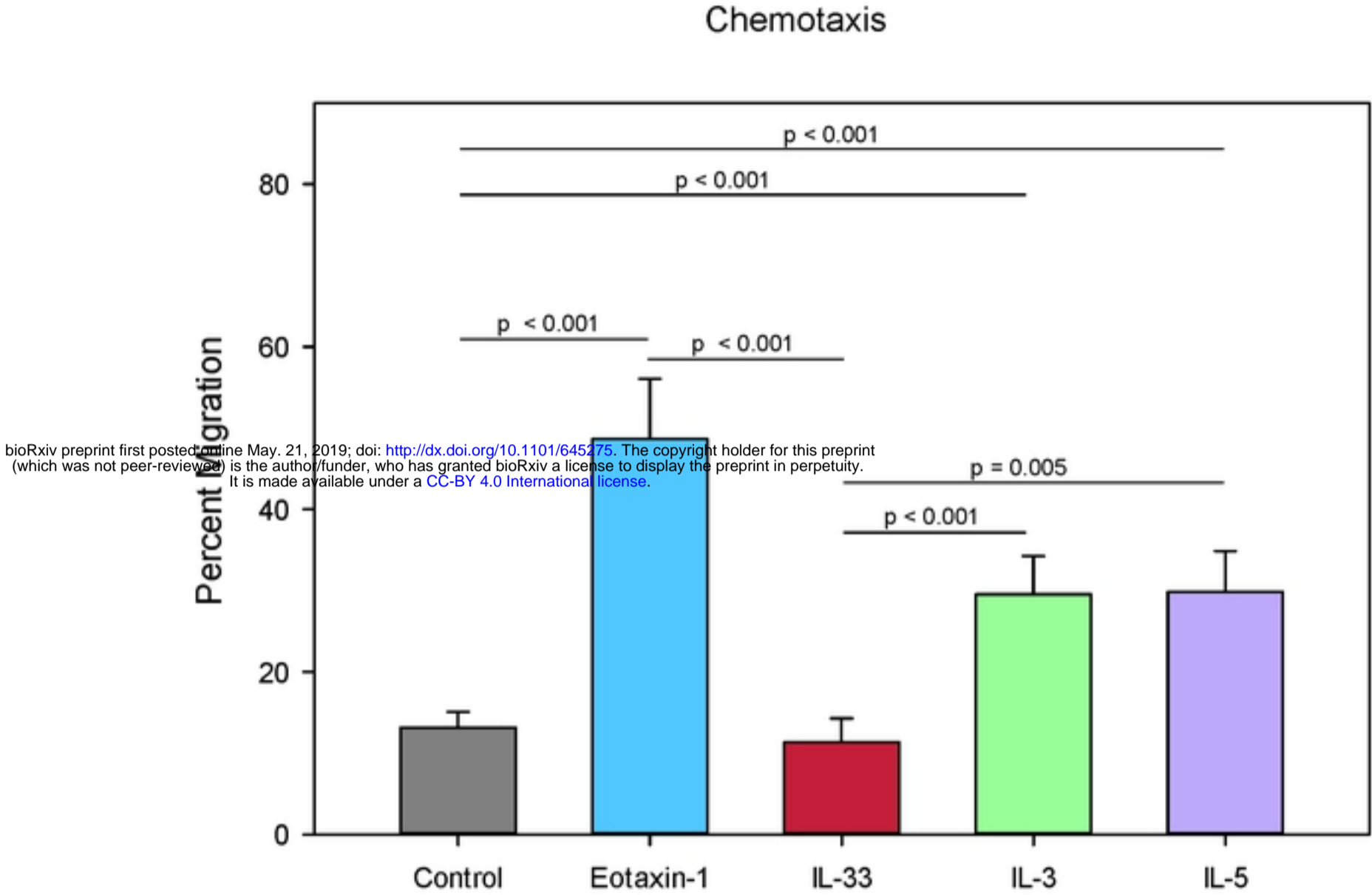


Figure 3

Figure 4.

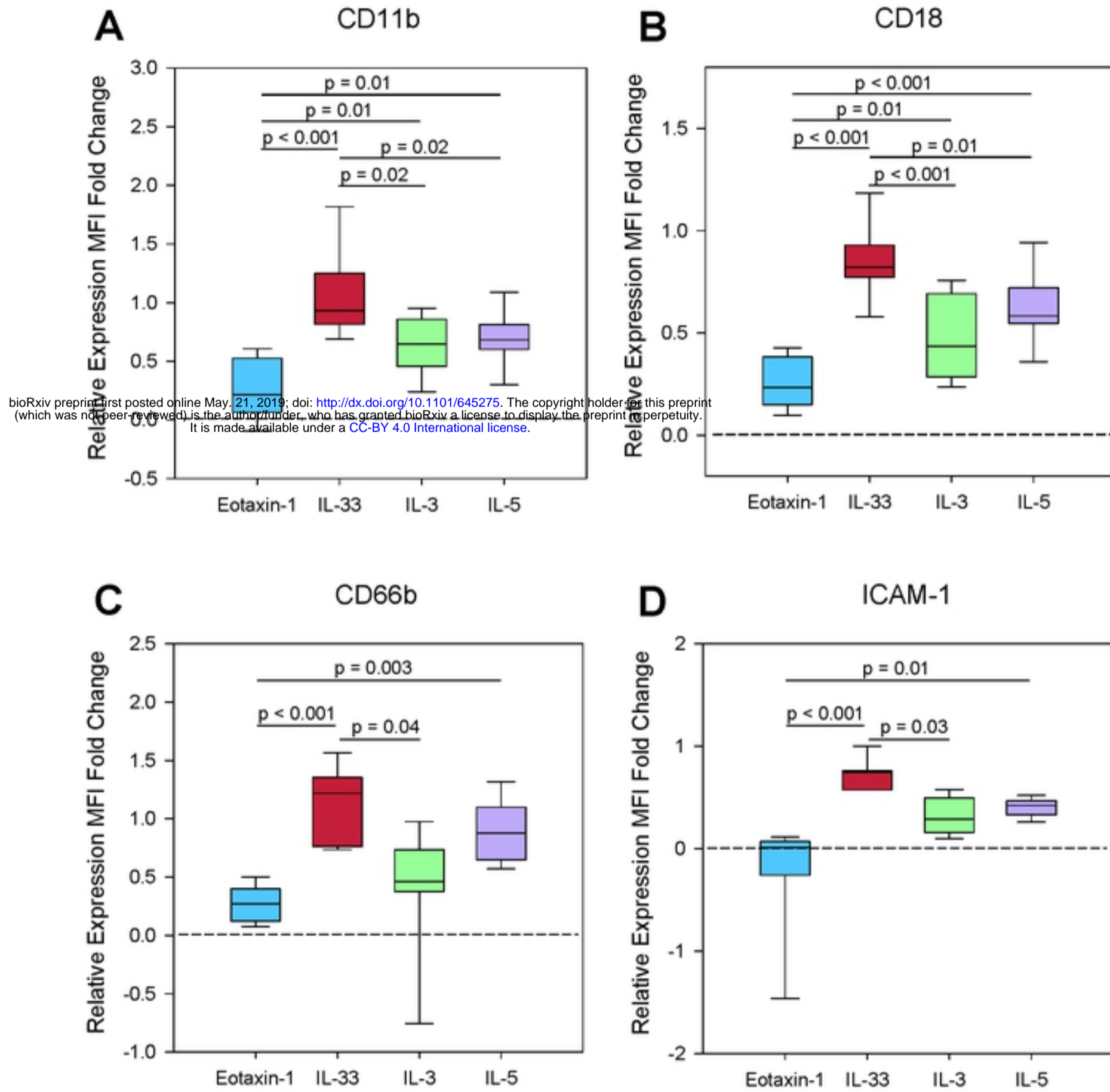


Figure 4