

GENETIC ORGANIZATION OF THE HUMAN MHC CLASS III REGION

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1. ABSTRACT

The human major histocompatibility complex (MHC), or human leukocyte antigen (HLA) region, encompasses over 4 Mb of DNA on the short arm of chromosome 6 and is traditionally divided into the class I, class II and class III regions. The MHC has now been entirely sequenced and ~220 genes have been defined of which ~62 are in the class III region. It is becoming clear that many of the latter encode proteins that are likely to be involved in the immune and inflammatory responses. The MHC is known to contribute to a large number of immune-related disorders including insulin dependent diabetes mellitus, rheumatoid arthritis, common variable immunodeficiency and IgA deficiency and there is growing evidence that genes within the class III region are important in determining susceptibility to many of these complex conditions. Genes in the class III region have also been implicated in a number of non-immune-related diseases such as congenital adrenal hyperplasia and sialidosis. Now that the full gene content of the class III region is known the stage is set for the identification and characterisation of candidate disease genes, which will allow greater understanding of the causes of many MHC-linked diseases and thus aid the development of improved treatments.

2. INTRODUCTION

The human major histocompatibility complex (MHC), or human leukocyte antigen (HLA) region, encompasses over 4 Mb of DNA (~0.1% of the genome) on the chromosome band 6p21.3 (1) and was first recognised due to the involvement of the classical HLA class I and class II proteins in graft rejection and antigen presentation to T cells. Extensive characterisation of this region has recently culminated in the determination of the nucleotide sequence of the entire MHC, confirming the presence of ~220 genes (1) (see <http://www.sanger.ac.uk/HGP/Ch6/MHC.shtml>). The MHC is traditionally divided into the

class I, class II and class III regions. The class III region, which has been redefined as the ~730 kb of DNA extending from *NOTCH4* to *BAT1*, is now known to contain at least 62 genes (see Figure 1; reviewed in (2)). As putative functions are ascribed to the products of these genes it is becoming increasingly apparent that many of these are involved in the immune and inflammatory responses.

The class III region is extremely gene dense, with one gene every 10 kb on average and many of the genes are very closely packed. For example, *G11* and *C4* are separated by 611 bp (3, 4) while the 3' untranslated region of *PBX2* overlaps the promoter of *RAGE* (5, 6). The 140 kb segment of DNA containing the duplicated *G11/C4/Z/CYP21/X/Y* gene cluster, which varies in size from 142 to 214 kb, is probably the most complex in the human genome (7, 8). At least 14 distinct transcripts are encoded in this region, which includes overlapping genes and genes within genes (4, 9). In addition, the class III region contains a high density of retroelements such as human endogenous retrovirus (*HERV*) and *Alu* elements (10).

It is well known that the classical HLA class I and class II genes are highly polymorphic and there is evidence for substantial sequence diversity across the whole MHC. In some cases this is associated with non-coding regions, but within the class III region *C4A* and *C4B* are both highly polymorphic while *C2* and *HSP70-HOM* are just two examples of genes where coding polymorphisms occur to a more limited extent (11, 12, 13). An intriguing feature of the MHC is the occurrence of particular combinations of alleles, at loci across this 4 Mb region, more frequently than would be expected based on the frequencies of individual alleles. This non-random association of alleles gives rise to extended, or ancestral, haplotypes (reviewed in (10)). Explanations for the occurrence of ancestral haplotypes include: models of

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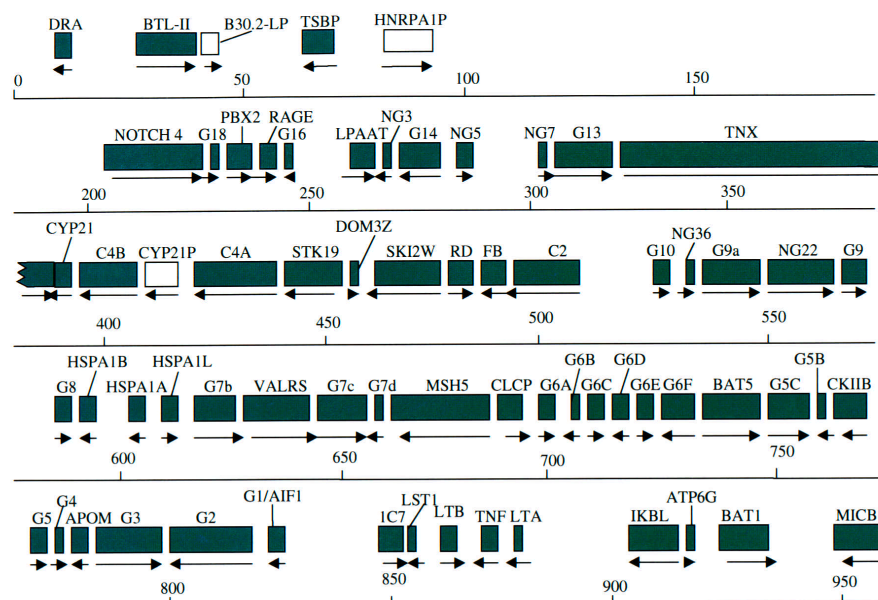


Figure 1. A molecular map of the central part of the human MHC. Genes are depicted as boxes with open boxes representing pseudogenes. Arrows indicate the orientation of a gene. The genes *HSPA1A*, *HSPA1B* and *HSPA1L* encode HSP70-1, HSP70-2 and HSP70-HOM, respectively.

selection for apt combinations of alleles at linked loci; population bottle necks, which have not had time to become randomized; and the non-random distribution of recombination sites. Sequence analysis of segments of the MHC from individuals carrying different haplotypes has suggested the presence of blocks of DNA spanning many kilobases that have undergone little or no change due to recombination during human evolution and thus form the basis of ancestral haplotypes (10). Recombination between these 'frozen blocks' has led to the generation of new haplotypes. A second interesting feature of the MHC is the occurrence of extensive duplication, often involving several linked genes or gene fragments. For example, the *G11/C4/Z/CYP21/X/Y* gene cluster is duplicated to varying degrees on different haplotypes. It has been suggested that these duplication events, together with extensive insertion and deletion, occurred just prior to or at an early stage of human evolution and that this was followed by freezing of the specific blocks of DNA that define human MHC haplotypes (10).

Genetic studies have indicated that genes within the MHC contribute to several hundred diseases, the majority of which are immune-related disorders, e.g. insulin dependent diabetes mellitus (IDDM), rheumatoid arthritis (RA), ankylosing spondylitis (AS), common variable immunodeficiency (CVID) and IgA deficiency (IgAD) (14, 15, 16). Strong associations have been found between many diseases and alleles of classical HLA class II and, to a lesser extent, class I genes. However, in most cases it has not been possible to explain the onset or symptoms of disease in terms of variation in the activity of

class I or class II proteins. Furthermore, it is often extended haplotypes, rather than individual alleles, that are associated with disease suggesting that combinations of alleles across the MHC may predispose to, or provide protection against, a disease. Thus, it is very likely that many disease susceptibility genes will be identified within the MHC class III region. For example, a recent study by Schroeder *et al.* (17) has localised the susceptibility locus for IgAD and CVID at the boundary of the class III and class I regions between *G1/AIF1* and *HLA-B*. There is also evidence suggesting that genes in the class III region are involved in susceptibility to AS (18) and IDDM (19). Although most of the MHC-linked diseases are complex, polygenic conditions there are a few instances of diseases that are linked to a single gene in the MHC. For example, congenital adrenal hyperplasia results directly from functional deficiency of the *CYP21B* gene product, due to one of several possible mutations (20), while sialidosis is caused by mutations in the *G9* gene, which encodes a lysosomal sialidase (21). There is evidence that the onset, progression and severity of infectious diseases such as fatal cerebral malaria can also be influenced by genes in the MHC (22). The detailed characterisation of the class III region represents an important step towards determining the contributions of this region to disease.

3. CLASS III REGION GENES AND THEIR GENE PRODUCTS

The molecular characterization of the class III region began with the construction of a contig of genomic DNA clones, comprising both cosmids and yeast artificial

chromosomes (23, 24, 25, 26). Physical mapping of the region was achieved by pulsed-field gel electrophoresis, which established the locations of the complement and tumor necrosis factor (*TNF*) genes (27, 28). Subsequent analysis of the cloned genomic DNA using a variety of techniques, such as CpG-island detection, Zoo blot analysis, Northern blot analysis, cDNA selection, exon trapping and the direct screening of cDNA libraries with cosmid inserts, indicated the presence of at least 50 genes (23, 24, 25, 29, 30, 31). Recently, direct sequence analysis of genomic DNA spanning the entire class III region has been completed (1, 32, 33) (see <http://www.sanger.ac.uk/HGP/Ch6/MHC.shtml>). This has allowed the precise localizations and genomic structures of the known genes in this region to be determined and, in combination with exon prediction software, has revealed the presence of additional loci bringing the total number of genes in this ~730 kb segment of DNA to ~62 (see Figure 1). The known or putative functions of the products of many of these genes are discussed below.

NOTCH-4 encodes a member of a family of transmembrane proteins typified by the Notch protein of *Drosophila* (5, 34, 35). Notch and its homologues are widely expressed during embryonic and adult development and participate in cell-cell interactions, mediating a variety of regulatory events such as cell differentiation and development (36). The murine mammary tumour gene, *int-3*, encodes the intracellular domain of Notch4 (37) and there is evidence that Notch4 is important in regulating branching morphogenesis of epithelial cells during the development of the mammary gland (38).

The *PBX2* gene product is a homeodomain-containing protein related to PBX1 (39). The PBX proteins can form heterodimers with homeobox proteins and, thus, may modulate their DNA-binding specificities. Since the homeobox proteins show different expression patterns in various developmental stages and lineages of the hematopoietic system, the PBX proteins might have a role in regulating the expansion of various hematopoietic precursors (40).

The *RAGE* gene encodes a member of the immunoglobulin (Ig) superfamily, which acts as a receptor for advanced glycosylation end products of proteins (RAGE) (5, 41). AGEs accumulate in vascular tissue as a result of ageing, and at an accelerated rate in diabetes, due to the prolonged exposure of proteins to aldoses. The interaction of RAGE with AGEs is involved in mediating effects such as monocyte migration and activation, increased vascular permeability and the activation of NF- κ B in endothelial cells. RAGE may contribute to diabetic complications by modulating cellular function following interaction with AGEs and expression of RAGE is upregulated in the vasculature in a range of vasculopathies, in atherosclerotic vascular lesions and in immune inflammation vasculitides (42, 43).

The *hLPAATa* gene encodes a lysophosphatidic acid acetyltransferase (LPAAT) that shares 48% sequence

identity with *hLPAATb* (which is encoded on chromosome 9) and is localised in the ER (44). Recombinant *hLPAATa* has been shown to specifically convert LPA to PA, which is the first step in phospholipid synthesis, and to have an affinity for fatty acids with acyl chains of 12-18 carbons in length (44). Of particular interest is the observation that *hLPAATa* is involved in generating the phospholipid precursor of arachidonic acid, which is essential for the production of most prostaglandins. The latter play important roles in the inflammatory response, the production of pain and fever, the regulation of blood pressure, induction of blood clotting, control of several reproductive functions and regulation of the sleep/wake cycle (45). Although the best known function of phospholipids is the formation of biological membranes, some phospholipids and their metabolites have been implicated in signalling pathways (46). For example, IL-1 β and TNF α may activate and signal, at least in part, through a common lipid intracellular signalling pathway that requires the activation of LPAAT (47, 48). Furthermore, inhibitors of LPAAT have been shown to block the inflammatory responses mediated by an increase in PA and there is evidence to suggest that LPAAT is activated by IL-1 β (47).

The *G14* gene encodes a secreted protein with ~20% identity to human palmitoyl-protein thioesterase 1 (PPT1) (49, 50). This protein was termed PPT2 by Soyombo and Hofmann (49) on the basis that it has palmitoyl-CoA hydrolase activity, although with a substrate specificity different from that of PPT1. Protein modification by the addition of palmitate, or other fatty acids, via labile thioester bonds is a reversible event, which may be important in the regulation of membrane attachment (51). PPT1 is known to be important in the catabolism of lipid-modified proteins by hydrolysing the thioester bonds that link fatty acids to cysteine residues in S-fatty acetylated proteins. Mutations in PPT1 result in the childhood neurodegenerative disorder, infantile neuronal ceroid lipofuscinosis (INCL), which is characterised by early vision loss and mental deterioration leading to a vegetative state by three years of age (52). This has been ascribed to the failure of PPT1 to localise to the lysosomes resulting in the accumulation of lipid thioesters. The addition of recombinant PPT1 to INCL patient cell lines can reverse this accumulation. The failure of PPT2 to exert a similar effect indicates that these two enzymes have independent functions (49). The structure of PPT2 is distinct from that of PPT1, comprising an N-terminal lipase domain and a C-terminal domain common to the cytokine receptor superfamily. A comparison of the activities of the *G14* protein product and recombinant bovine PPT1 has revealed that, while both enzymes preferentially hydrolyse long acyl chains (>12-14 carbons) the former has a broader range of activity and would be more appropriately termed an S-thioesterase (50). *G14* has been shown to be expressed as a variety of alternatively spliced transcripts and there is evidence, from a monocyte-like cell line, for a secreted form of the protein (50, 53). A number of polymorphisms, two of which result in amino acid changes, have been identified in *G14*. However, none of these show an

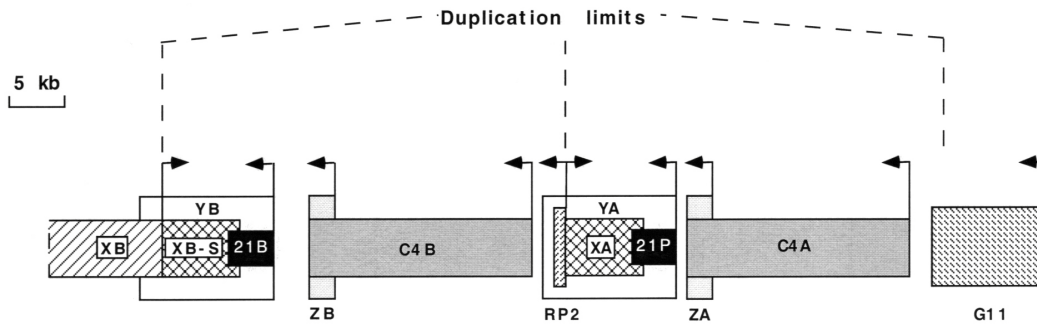


Figure 2. A map of the duplicated *G11/C4/Z/CYP21/Y/X* gene cluster. Genes and gene fragments are depicted as boxes, with duplicated loci having the same pattern of shading. Only the 3' end of the ~65 kb *XB* gene is shown, as indicated by the open-ended box. The 5' to 3' orientation of each locus is indicated by an arrow and the duplication limits are marked by dotted lines.

association with NCL disorders (53). The *G14* gene contains an incomplete CTG repeat, encoding a stretch of Leu residues in the signal peptide of the protein. The expansion of trinucleotide repeats is an important feature in various human genetic disorders, including neurogenic conditions.

The *G13* (*Creb-rp*) protein product contains a leucine zipper consensus sequence preceded by two clusters of basic residues that are separated by an alanine spacer, i.e. a bZip domain (54, 55). This domain is conserved in many transcription factors including the cyclic AMP response element binding protein (CREB) family, which comprises proteins that show sequence-specific binding to DNA (via a basic region) and use dimerization (via a leucine zipper domain) to control activity.

Three components of the complement system, which is the principal effector mechanism of humoral immunity and is important in the clearance of immune complexes, opsonization and cell lysis, are encoded in the class III region (reviewed in (56, 57)). C2 and C4 participate in the classical pathway, which is activated by the binding of C1 to antigen-antibody complexes or following the interaction of mannan binding protein with carbohydrate ligands. Factor B (Bf) is a component of the alternative pathway, which is activated by a diverse set of substances including components of yeast and bacterial cell walls. The *C2* and *Bf* genes are separated by only 421 bp (58) and the fact that they have similar organization and encode functionally related proteins suggests that they arose by duplication of an ancestral locus. This is also thought to be the case for *C4A* and *C4B*, which encode proteins that differ by only four amino acids, but nevertheless have profoundly different covalent binding activities (59, 60, 61). *C4B* can occur as both long and short forms, due to the presence or absence of a *HERV-K* element in intron 9 (62, 63). Both isotypes of C4 are highly polymorphic, whilst C2 and Bf show more limited polymorphism (11, 12).

Most human chromosomes carry two *C4* genes, *C4A* and *C4B*, which form part of a duplicated segment of DNA spanning ~75 kb (64). However, the number of expressed *C4* genes can range from none to four. Complete

deficiency of C4, which correlates with severe immune complex diseases, is rare while partial deficiency of C4 is more common and is thought to be associated with an increased susceptibility to systemic lupus erythematosus (SLE), scleroderma and primary biliary cirrhosis (65). Duplications or deletions of *C4* always include the neighbouring *CYP21*, *X*, and *G11* (or *STK19*) loci (see Figure 2). It has been suggested that recombination events involving chromosomes that carry non-functional copies of these genes (i.e. *CYP21P*, *XA* and *RP2*) may result in disease-associated mutations in this segment of the class III region (8, 66).

The *CYP21B* gene and the related pseudogene *CYP21P* lie ~2.5 kb from the 3' ends of *C4B* and *C4A*, respectively, and share 97% overall nucleotide sequence identity (67, 68). *CYP21B* encodes the adrenal enzyme steroid 21-hydroxylase, which is involved in mineralocorticoid and glucocorticoid biosynthesis. *CYP21P* contains deleterious mutations and so cannot encode functional protein. Deficiency of *CYP21B* is the most frequent cause (95%) of CAH, which is characterised by accumulation of 17-hydroxyprogesterone and production of excess androgen (20). Classical CAH occurs as the milder simple virilising form and the more severe, and life-threatening, salt wasting form. Individuals with the nonclassical late-onset form of CAH remain asymptomatic or develop the symptom of an excess of androgens in childhood or at puberty.

The *TN-X* (*XB*) and *XA* genes overlap the 3' ends of the *CYP21B* and *CYP21P* genes by 481 bp, respectively and are transcribed in the opposite orientation to the *C4* and *CYP21* genes (7, 69) (see Figure 2). Tenascin-X (TN-X) is a member of a family of proteins with structures similar to tenascin (TN-C). The functions of these extracellular matrix proteins are unclear, but TN-C can facilitate cell movement by counteracting the cell adhesion and spreading activity of fibronectin *in vitro* and may also be important in embryogenesis. TN-X has a tissue distribution distinct from that of TN-C, being predominantly expressed in heart and skeletal muscle (70). One of the boundaries of the duplication of the *C4/CYP21/X* region lies within exon 26 of *XB*, such that *XA* lacks the first 26 exons of *XB* (7). *XA*

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is expressed as an adrenal-specific transcript, but a premature stop codon suggests that it is probably not expressed at the protein level. The *XB-S* gene, which shares 99% nucleotide sequence identity with *XA*, is transcribed from a promoter within exon 26 of *XB* and is expressed as an adrenal-specific truncated variant of TN-X (71). The *YB* and *YA* genes utilise the *CYP21B/P* promoters and are transcribed in the same orientation as the latter, but use a different array of exons and introns (72). Due to the presence of a duplication boundary within the *Y* genes, they each have unique 3' ends and both *YA* and *YB* are expressed as two alternatively spliced adrenal-specific transcripts (72). Transcripts termed *ZA* and *ZB* have recently been shown to arise from promoters in intron 35 of *C4A* and *C4B*, respectively, and are expressed exclusively in the adrenal gland (9). No protein products have yet been identified for the *Y* and *Z* transcripts and their significance remains to be determined.

Genomic sequence analysis of *G11* (or *STK19*) has shown that 913 bp of its 3' end was involved in the duplication event giving rise to the two *C4Z/CYP21/Y/X* gene clusters (3, 4). *G11* lies ~600 bp upstream of *C4A* and the duplicated fragment, comprising the last 2 and a half exons of *G11*, lies the same distance from *C4B*, i.e. overlapping the 3' end of *YA*. Two alternative products of the *G11* gene have been described: *G11-Z* and *G11-Y*, which lacks the first 110 amino acids of *G11-Z* (73). In addition, the use of two differential splice sites at the end of exon 5 results in the presence or absence of four amino acids (Val-Cys-Asp-Cys) in both *G11-Y* and *G11-Z*. Recombinant *G11-Z* protein has been shown to bind ATP and to have Mn^{2+} -dependent protein kinase activity that phosphorylates Ser and Thr residues (73). Similar activity was observed for *G11-Y*, indicating that the catalytic domain of *G11* lies between amino acids 111 and 368. Interestingly, the presence or absence of the Val-Cys-Asp-Cys motif within this domain had no obvious effect on the activity of *G11-Y*. Protein kinases and phosphatases play vital roles in the activation and inactivation of cellular processes that regulate transcription, resulting in specific changes in gene expression. Restricted intracellular distribution may be important in determining the substrate specificity of kinases and the localization of *G11-Z* to the nuclei of transfected COS7 cells suggests that this protein may be involved in the regulation of transcription in the nucleus (73).

DOM3Z encodes a protein product that contains a leucine zipper motif (74). Related proteins (sharing 20-30% sequence identity) have been identified in complex and simple eukaryotes and in a flowering plant. Of these, the *C. elegans* protein, *DOM3*, has a putative role in the postembryonic development of germ cells.

SKI2W encodes a protein that contains an RNA helicase domain and two leucine zipper motifs and shows extensive similarity to the yeast antiviral protein Ski2p (31, 75). Helicases play essential roles in unwinding DNA during replication, repair, recombination and transcription, and RNA during splicing and translation. Ski2p exerts its antiviral action by translational inhibition of viral RNA that

lacks a poly(A) tail. Ski2w has been shown to hydrolyse ATP, an important energy source for helicases, and has been localised to the nucleolus and cytoplasm where it is thought to be associated with ribosomes and polyribosomes (75, 76).

G9a contains six contiguous copies of the 33 amino acid ANK repeat (77). This repeat is thought to mediate protein-protein interactions and is found in proteins of diverse function, including *Drosophila* Notch and NF- κ B. The C-terminal region of G9a corresponds to a SET domain (~150 amino acids), which is also found at the C-termini of the *Drosophila* trithorax protein and its human homologue ALL-1 (or HRX). The SET domain is important in the action of these proteins as regulators of transcription during development (78).

The *G9* gene encodes a protein with significant sequence identity to bacterial and mammalian sialidases (21, 79, 80). Biochemical analysis and nucleotide sequencing have confirmed the existence of three unique forms of sialidase in mammals, located in the lysosomes, cytosol and plasma. Recombinant G9 protein has sialidase activity with an acidic pH optimum and is localised in lysosomes. The maximal activity of this sialidase and its transport from the ER to lysosomes depends on its association with the lysosomal protein, protective protein/cathepsin A (PPCA) (81). Sialidases are important in modulating many cellular functions by regulating the sialic acid content of glycoproteins and glycolipids. Deficiency in lysosomal sialidase activity (<10% of normal activity), due to a variety of point mutations in the sialidase itself or in PPCA, results in various forms of sialidosis or in galactosialidosis. These lysosomal storage disorders are characterised by developmental and neurological abnormalities (21, 80, 82, 83). Three allelic variants of the murine equivalent of G9 (*Neu1*) have been described, of which *Neu1^a* confers only ~17% of normal sialidase activity (84). Mice that carry this allele (SM/J and related strains) are small at birth, but do not exhibit the severe symptoms of human sialidosis patients. Comparison of mice expressing the different Neu1 allotypes has implicated the MHC-linked sialidase in several aspects of the immune response. For example, Neu1 has been shown to be required for the regulation of IL4 production during T cell activation, which has important implications for the initiation of Th2- versus Th1-type responses (85).

The *HSP70-1* and *-2* genes (*HSPA1A* and *HSPA1B*) both encode the major heat-inducible 70 kDa heat shock protein (HSP70), while *HSP70-HOM* (*HSPA1L*) encodes a non-heat-inducible protein that is 90% identical to HSP70-1/-2 (86). All hsp70s can bind unfolded proteins and peptides and act as chaperones in the synthesis, folding, assembly, translocation and degradation of proteins during normal cellular processes and following stress. It has been suggested that the cytosolic hsp70s (including HSP70 and HSC70) and the ER-resident chaperone gp96 form a relay line, chaperoning antigenic peptides generated in the cytosol until they bind MHC class I molecules in the ER (87). In support of this, hsp preparations from tumor cells, virally infected cells and normal cells and tissues have been

shown to contain hsp-peptide complexes. Furthermore, HSP70- and gp96-peptide complexes purified from murine methylcholanthrene-induced sarcomas have been found to give rise to tumour-specific immunity mediated by T cells when injected into syngeneic mice, indicating that an immune response is being initiated by tumor-specific peptides carried by hsps (87). In the case of gp96 this has been shown to arise following uptake of the hsp-peptide complexes by a subset of macrophages, which prime antigen-specific cytotoxic T cells (88). Hsp70s have been implicated in many diseases. For example, increased expression of hsp70s has been observed in autoimmune diseases such as scleroderma and SLE, although this may be a consequence of disease rather than a contributory factor (89, 90). However, exposure of keratinocytes to UV light results in accumulation of HSP70 in the nucleoli and a concomitant increase in binding sites for autoantibodies to nuclear antigens which are a feature of erythematosus lesions (91). Furthermore, cytosolic members of the hsp70 family have been detected on the surface of some tumour cells, where they mediate a strong anti-tumour response by rendering cells sensitive to NK cell-mediated lysis (92).

Hsp70 genes in the freshwater mould, *Achlya klebsiana*, and in *Drosophila auraria* have been shown to form long antiparallel coupled open reading frames (LAC-ORFs), or antisense gene pairs, with NAD-specific glutamate dehydrogenase (*NAD-GDH*)-like genes (93, 94). In *A. klebsiana* the NAD-GDH-like gene is comprised of ten exons and exon 10 is in perfect register, along the complementary strand, with an *hsp70* gene (94). Both genes are inducible by L-glutamine and by abundant organic nitrogen. The *hsp70* gene is also induced by starvation, but not by heat shock, indicating overlapping, but not identical, control of the two genes. The fact that the hydropathy plots for the hsp70 and NAD-GDH-like proteins are almost perfect mirror images suggests that they may interact and it is possible that the hsp70 may assist the folding of the NAD-GDH-like protein. *Hsp70* genes in a number of species have been shown to exist as LAC-ORFs with genes encoding proteins with significant sequence identities to the NAD-GDH-like proteins encoded in *A. klebsiana* and *D. auraria*, suggesting possible evolutionary benefits (94). For example, HSP70-1 is 61% identical to the *D. auraria* hsp70 and the *HSP70-1* gene forms an antisense pair with a gene encoding a protein with 36% identical to the NAD-GDH-like protein of *D. auraria*.

The *VALRS* gene encodes a protein that shares 48.3% identity with the valyl-tRNA synthetase (Trs^{Val}) of *Saccharomyces cerevisiae* and functional studies on recombinant G7a have confirmed that it is the human Trs^{Val} (95, 96). G7a has a unique N-terminal region, which may be involved in the interaction of human Trs^{Val} with elongation factor 1H.

MSH5 encodes a homologue of the bacterial mismatch repair protein, MutS (97, 98, 99). Eukaryotic homologues of MutS fall into two categories: those involved in mismatch repair and those involved in meiotic recombination processes. They typically function as

heterodimers and *MSH5* has been shown to interact specifically with *MSH4*. In *S. cerevisiae*, *MSH5* is required for meiotic segregation fidelity and crossing-over and may also be important in the response of mitotic cells to DNA-damaging agents (100, 101). Human *MSH5* mRNA is expressed at particularly high levels in testis and protein expression occurs during a defined phase of spermatogenesis suggesting a role in germ cell development. *MSH5* mRNA is also abundant in bone marrow and lymph nodes, so the protein may also be important in the assembly of Ig and/or T cell receptor genes during lymphoid development.

G6 encodes a regulatory nuclear chloride ion channel protein (hRNCC) (33) that corresponds to the NCCP27 protein described by Valenzuela *et al.* (102). This protein was shown to be associated with the nuclear membrane, but lacks a transmembrane region suggesting that it may be a regulatory subunit of a multi-protein complex. This is supported by the presence of multiple PEST sequences in hRNCC, which mediate rapid degradation of the protein in response to appropriate stimuli. Two CA repeats, one in intron 2 of *G6* and the second in intron 2 of *G6D*, achieved the highest LOD scores of all the markers used in a recent genome-wide screen for susceptibility genes to ankylosing spondylitis (AS) (18).

The *G6A* gene encodes a putative homologue of the enzyme $\text{N}^0\text{-N}^0$ -dimethylarginine dimethylaminohydrolase (DDAH) (33), which was first described in rat kidney and regulates the production of nitric oxide (NO) by metabolising L-arginine analogues that inhibit NO synthesis (103). *G6A* is probably not the human equivalent of DDAH, but is likely to have a related function. Interestingly, the L-arginine analogue, N^0 -mono-methyl-L-arginine has a variety of anti-inflammatory effects while NO production contributes to the development of IDDM (see references in (33)).

G6B encodes a novel member of the Ig superfamily with a single Ig V-like domain (33). Members of this superfamily function mainly in the immune system, cell-cell recognition or structural organisation and regulation of muscle (104). The presence of cysteine residues in *G6B* in addition to those involved in the conserved disulphide bond of the Ig V domain suggests that it may form hetero- or homo-dimers via disulphide bonding. The cytoplasmic tail of *G6B* contains a proline-rich domain, characteristic of src homology 3 (SH3) domain-binding proteins, and two putative phosphorylated tyrosine residues. These features are typical of a signal transduction receptor.

G6C and *G6D* encode small cysteine-rich proteins that share ~20-27% identity with members of the leukocyte antigen 6 (Ly-6) superfamily (33). Both proteins contain a leader peptide, a Ly-6-like domain, a transmembrane domain and sequences characteristic of GPI-anchored proteins. The Ly-6 proteins are differentially expressed in several hemopoietic lineages, especially T cells, during hemopoiesis and immune responses. They are

thought to be involved in signal transduction and cell activation and may be important in leukocyte development (105, 106). The murine *Ly-6* genes all map to a 630 kb region of chromosome 15 and three *Ly-6* genes have been mapped to human chromosome 8, which is syntenic with murine chromosome 15 (107). G6C and G6D are not direct orthologues of any of the known murine *Ly-6* proteins, although they may have related functions. Furthermore, G6C and G6D share only 20% amino acid sequence identity and have distinct expression patterns, with G6C being expressed only in T cells, suggesting that these proteins have distinct roles.

G6E is also predicted to encode a *Ly-6* family member on the basis of an incomplete sequence. The first two predicted exons encode a leader sequence and the first 24 residues of a *Ly-6* domain (33). However, a stop codon at the end of exon 2 and the failure to detect G6E transcripts in any of the cell lines tested suggest that this may be a pseudogene.

The *G5a* gene encodes the casein kinase II (ckII) β subunit (31). CkII is a highly conserved serine protein kinase, consisting of a heterotetramer of α and α' catalytic subunits and two regulatory β subunits. The β subunit is required for high activity phosphorylation of the α subunit (108). Many of the substrates of ckII, such as insulin, epidermal growth factor and a variety of cellular and viral oncoproteins, play key roles in cell growth and metabolism (109). CkII activity appears to be upregulated in the neurofibrillary tangles in the brains of Alzheimer's Disease (AD) patients (110).

There is evidence that three alternative transcripts are derived from the differential splicing of nine exons in the *G1*/allograft inflammatory factor 1 (*AIF1*) genomic region (32). *AIF1* (111) is derived from exons 1-6, *G1* (112) contains an alternatively spliced version of exon 4 together with exons 5 and 6, and IFN- γ -responsive transcript 1 (*IRT-1*) (EMBL database accession no. U95213) is derived from exons 4, 5 and 6 together with the intervening intronic sequence. *AIF1* is an IFN- γ -inducible molecule expressed in cells of the monocyte lineage (32, 111). It has been associated with the processes involved in chronic allograft rejection and has also been implicated in the development of IDDM (111, 113). *G1*, *AIF1* and *IRT-1* all contain a cluster of paired basic residues, which is a feature of hormone precursor proteins. *AIF1* also contains a putative EF hand calcium-binding domain. This may not be functional in *G1* and *IRT-1* due to the truncation of the conserved α -helix preceding the domain in both proteins and the presence of a 66 residue insertion within the conserved loop of the EF hand domain in *IRT-1*.

IC7 encodes a putative novel member of the Ig superfamily and differential splicing of this gene has been shown to result in nine alternative transcripts of which six encode putative protein isoforms, *IC7a-f* (32). *IC7a*, *b* and *c* contain sequence encoded by a single exon 2 which corresponds to an Ig V-like domain (104). In *IC7d*, *e* and *f* alternative splicing results in two exons from the exon 2 region leading to truncation of the Ig domain to form an Ig

C2-like domain (114). If these *IC7* isoforms are expressed this will represent the first known example of Ig set switching within a protein. *IC7* is predicted to be a type I integral membrane protein and the absence of cysteines, other than those involved in the conserved disulphide bond of its Ig domain, suggests that it exists as a monomer. The cytoplasmic tails of *IC7a* and *e* contain a number of potential SH3 domain binding motifs and a potential protein kinase C phosphorylation motif. Recently, NKp30, a novel triggering receptor selectively expressed by resting and activated natural killer cells and involved in the recognition and killing of target cells, was shown to correspond to the *IC7c* isoform (115).

Leukocyte specific transcript (*LST-1*) is the human equivalent of the murine *B144* gene (116). It is expressed predominantly in monocytes, where it is inducible by IFN- γ , and also at lower levels in some T cells. This has led to the suggestion of a role for *LST-1* in the immune response. There is evidence for multiple protein isoforms of *LST-1*, due to a complex pattern of alternative splicing involving at least nine exons (117, 118). Furthermore, it appears that both membrane-bound and soluble forms of *LST-1* are expressed, depending on the usage of two possible open reading frames. Treatment of monocytes with IFN- γ has been shown to result in a shift from expression of both soluble and membrane-bound *LST-1* to expression of the soluble form alone (117).

The cytokines TNF, LT α and LT β belong to the TNF ligand superfamily (119). TNF occurs as membrane bound and secreted homotrimers, both of which are biologically active. LT α also forms secreted homotrimers, but can be retained at the cell surface as heterotrimers with LT β . TNF is produced by a variety of cells and exhibits numerous inflammatory and immunomodulatory activities as well as being involved in tumor cachexia. LT α is expressed exclusively by lymphocytes. It shows similar activity *in vitro*, but is often less potent than TNF. Recent studies suggest a unique role for secreted LT α in the generation of germinal centres, and membrane-bound LT α has been implicated in the development of the spleen, lymph nodes and Peyer's patches (120, 121, 122). Polymorphisms in the promoter of the TNF gene are thought to play a role in increased susceptibility to fatal cerebral malaria (22).

The IKBL protein contains two copies of the 33 amino acid ANK repeat followed by a third poorly conserved ANK repeat and a short region rich in acidic amino acids, which is typical of the I κ B family of transcription factor inhibitors (123). The Rel family of transcription factors, which includes NF- κ B, regulates the expression of a wide variety of genes including cytokines, cytokine receptors and stress proteins. In unstimulated cells these transcription factors are maintained in the cytosol due to their association with inhibitors belonging to the I κ B family (124). Stimulation of cells by agents such as PMA, IL-1 β , TNF and LPS results in the phosphorylation and subsequent degradation of the I κ B protein, allowing translocation of the free Rel proteins to the nucleus.

The *ATP6G* gene encodes a homologue of vacuolar ATPase G (V-ATPase G) subunits (32). These H⁺-translocating ATPases are involved in a broad range of functions, including bone reabsorption, processing of endocytosed receptor-ligand complexes and degradation of cell debris in lysosomes, and may be involved in the immune and inflammatory responses (125). The G subunit is one of two known peripheral components of the V₁ catalytic ATPase complex, which are thought to act independently to perform the same or similar functions in different cell types. *ATP6G* appears to be particularly abundant in monocytes and macrophages (32). On the basis of sequence conservation between species the first 50 amino acids of *ATP6G* are likely to constitute an important functional domain. A truncated form of *ATP6G*, which results from alternative splicing and lacks the first 41 amino acids, is therefore unlikely to be functional.

BAT1 encodes a nuclear protein with significant sequence similarity to the DEAD-box protein family of ATP-dependent RNA helicases (126). These proteins participate in diverse cellular functions such as initiation of translation, RNA splicing, ribosome assembly, spermatogenesis, oogenesis and cell growth and division (127). It is possible that *BAT1* may be involved in the complex splicing that has been shown to be a feature of a number of immune-related genes in the MHC, e.g. *LST-1*, *IC7* and *AIF1*.

4. CONCLUSION

The genes of the MHC class III region encode proteins of diverse function. However, there is growing evidence that many of these are involved in the immune and inflammatory responses and that genes within the class III region are involved in susceptibility to a number of diseases. Although the gene content of the class III region has now been completely defined it is clear that many of the genes, for example *LST-1*, *IC7* and *AIF1*, are subject to alternative splicing such that the number of transcripts encoded within this regions is far greater than might be expected.

The rapid expansion of the protein and DNA sequence databases over recent years has allowed putative functions to be ascribed to the products of many of the newly identified genes in the class III region and these have been confirmed experimentally in a number of cases. This knowledge, together with the use of the many known polymorphic markers (e.g. dinucleotide repeats and single nucleotide polymorphisms) across the class III region in patient studies, will greatly facilitate the identification of candidate disease genes. As a result of recent improvements in technology the detection of promoter and/or coding polymorphisms in candidate genes and the association of these with diseases are relatively straightforward. However, establishing the effects of polymorphisms on gene expression or protein function *in vitro* and in animal models still represents a major challenge for the future

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