

PATHOLOGY

Use of Non-biological Particles in Detecting Anti-immune Blood Diseases

IN spite of the many methods for detecting anti-immune diseases affecting leucocytes, there is still need for simpler and more specific methods.

From a suspension of leucocytes, prepared by separation of the leucocytes in donor blood with saline¹, an extract is produced. This extract consists mainly of γ -globulins. It has been proved, by immunoelectrophoretic analysis on serum from rabbits, immunized with leucocyte extract, to contain antigens specific only to human leucocytes². Stored in a deep-freeze, the leucocyte extracts do not lose their antigen strength for months. Acryl particles with a diameter of 0.5 μ can be charged with the leucocyte extract by using the same technique as when these particles are charged with γ -globulin for demonstrating RAS factor^{3,4}.

Charging of the particles with leucocyte extract can be controlled by mixing a suspension of particles on a microscopic slide in room temperature with serum from rabbits immunized with leucocyte extract. Then an aggregation of the particles takes place within 5 min. The same happens in many cases, when the charged particles are mixed with inactivated human serum containing antibodies against leucocytes. It will not happen, however, when the serum is free from leucocyte antibodies. When aggregation occurs it is always macroscopically visible; no intermediate forms of aggregation, visible only under microscope, have been seen. The method has so far been tested on 43 human sera which contained antibodies against leucocytes according to accepted methods⁵. In 21 cases the acryl particle test was positive; in the remaining it was definitely negative. So the method is not as sensitive as the more complicated methods now in use. It has been tested, too, against 100 sera from healthy blood donors and simultaneously the same particles were tested against inactivated serum from rabbits, immunized with human leucocyte extract. In all cases the test was negative against the blood donor sera and positive against the rabbit sera, indicating that the acryl particle method gives no false positive results.

Acryl particles have also been charged with a thrombocyte extract produced in accordance with the leucocyte extract. Such particles are aggregating spontaneously. This will not happen if the particles are suspended in isotonic solution of EDTA when they are charged with thrombocyte extract. In three cases aggregation of the charged particles was noted when human sera containing antibodies against thrombocytes were added.

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³ Stafsing Carlsson, F., *Opusc. Med.*, **3**, 95 (1959).

⁴ Winblad, S., *Acta Path. Microbiol. Scand.*, **62**, 241 (1961).

⁵ Killman, S. Å., *Leucocyte Agglutinins*, 15 (Oxford, 1960).

Quantitative Relationships in Viral Oncolysis and the Possibility of Artificial Heterogenization of Tumours

SINCE the classical papers of Levaditi *et al.*^{1,2} it has been shown that most viruses reproduce well in malignant tumours although some of them exert rather an oncolytic action³. An attempt to use viruses for treatment of malignant tumour in human beings has so far proved unsuccessful³. However, in this problem the major factors are still largely obscure.

Apart from a certain sensitivity-level of tumour cells to viruses at least three factors define viral oncolysis: (1) quantitative ratio of viral particles and tumour cells in dynamics; (2) production of immunity to viruses; (3) selection of tumour cells resistant to the destroying action of the virus.

The quantitative relationship of viral particles and tumour cells in viral oncolysis *in vivo* was investigated under as simplified conditions as possible: different quantities of trypsinized cells of mouse tumours (sarcoma 180, hepatoma *C₃HA*) or rat tumours (sarcoma *M-I* and Walker sarcoma) were mixed *in vitro* with various dilutions of the vaccinia virus or of the virus of lymphogranuloma inguinale and exposed for 15 min to 22°. Afterwards large amounts of the virus-treated cells (5×10^5 – 2×10^6) were administered to mice and rats respectively while control animals received equal numbers of non-treated cells.

With a ratio in the inoculum of 0.5–5 vaccinia poek-forming units per tumour cell neither of four tumours tested developed as against 100 per cent development in the control. 0.2–2 poek-forming units caused oncolysis of sarcoma 180 in half of the animals while lesser doses caused no oncolysis. Frequently such doses caused stimulation of tumour growth (occurrence of the infected tumours increased, as well as their weight). The virus of the lymphogranuloma inguinale previously regarded as non-oncolytic² at a ratio of 0.1–1 brain mouse *LD₅₀* or more per one tumour cell likewise elicited complete oncolysis of the sarcoma 180.

Preliminary active or adoptive immunization of animals against the virus eliminated the oncolytic effect of even very large viral doses (10^2 – 10^3 poek-forming units per 1 tumour cell). Growth-stimulating action of tumours by vaccinia virus is frequently apparent under these conditions⁴.

In the next experiments the lymphatic cells of twice intensively vaccinia-immunized mice *C₅₇* were administered to a group of mice of the same strain (10^6 cells intraperitoneally and 10^4 intravenously per mouse). The control mice were treated with similar numbers of non-immune lymphatic cells. On the next day mice of both groups were inoculated with 10^5 sarcoma 180 cells per mouse treated at a ratio of 0.2–2 poek-forming units per tumour cell. Tumours arose in the group with non-immune cells in 8 of 19 animals (average weight of the tumours on the tenth day, 1.63 g) and in the group with immune cells in 14 out of 17 mice (average weight 4.9 ($P = 0.954$)). Moreover, intensive active vaccinia immunization of mice (simultaneously in 4 paws) on the next day after administration of sarcoma 180 cells infected with vaccinia virus in a ratio of 0.05 poek-forming units to 1 unit per cell prevented oncolysis and enhanced the tumour growth-stimulating effect of virus.

The experiments showed that oncolysis is caused only by a fairly high ratio of viral particles to tumour cells at a certain phase of tumour growth. These results agree with the recently published results of Durr and Briody⁵. However, the technique used by these workers, namely, implantation of pieces of tumour mixed with the vaccinia virus, does not indicate the ratio between the number of viral particles and tumour cells. The fact that immunity to the virus (particularly an active one) inhibits the oncolytic effect even of very large doses of the virus demonstrates that even under simplified conditions of the experiment when the virus is brought into contact with tumour cells prior to inoculation oncolysis is not immediately effected, so that live tumour cells persist in the organism after a considerable time.

Virus immunity is one of the factors interfering with the curative use of viruses. To prevent the development of immunity in the host we have recently used irradiation of the animals with cobalt-60. For example, complete oncolysis occurs in 13 out of 15 mice *C₅₇*, irradiated (300 r.)