Epstein-Barr virus-specific antibody-dependent cellular cytotoxicity in patients with Burkitt's lymphoma

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http://hinari-gw.who.int/whalecomwww.ncbi.nlm.nih.gov/whalecom0/pubmed/93578
http://erepository.uonbi.ac.ke:8080/xmlui/handle/123456789/31365
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Abstract:

Coded sera from 54 patients with African Burkitt's lymphoma (BL) were titrated for antibodies against an Epstein-Barr virus (EBV)-induced membrane antigen in the antibody-dependent cellular cytotoxicity (ADCC) assay. The titers were then correlated with the progression of lymphoma growth following chemotherapy. In 74% of the patients with high ADCC titers (greater than 3,840), lymphomas showed partial or complete regression following therapy. In the medium-titered group (240-3,840), 36% of the lymphomas showed some response to therapy, while only 29% of the lymphomas in the low group (less than 240) responded to treatment. These preliminary results indicated that, as previously reported for patients with nasopharyngeal carcinoma, ADCC titers may be a prognostic value in patients with this EBV-associated disease. In an attempt to determine the identity of the ADCC antigen, some of these sera were examined for antibody to the four major MA components so far identified in the membrane of EBV-infected Raji cells. Sera with high ADCC titers in general contained antibody to the four major MA components, while low-titered sera usually contained antibody to three or less of these proteins. There were exceptions to this pattern, however, indicating that the ADCC antigen might differ from the four EBV-induced membrane components so far identified.