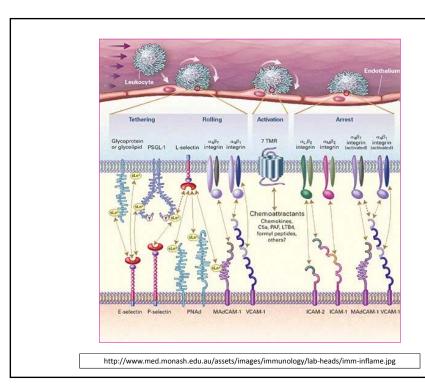


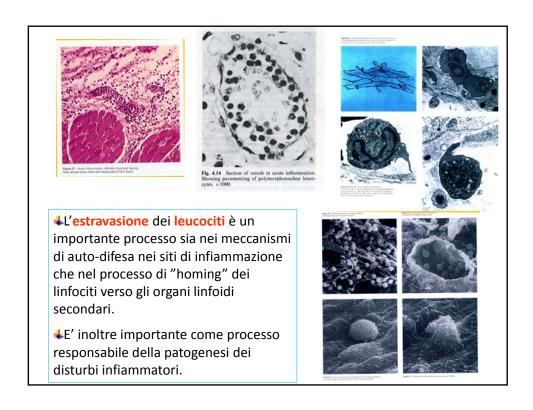
## Didascalia Figura Ley, 2007

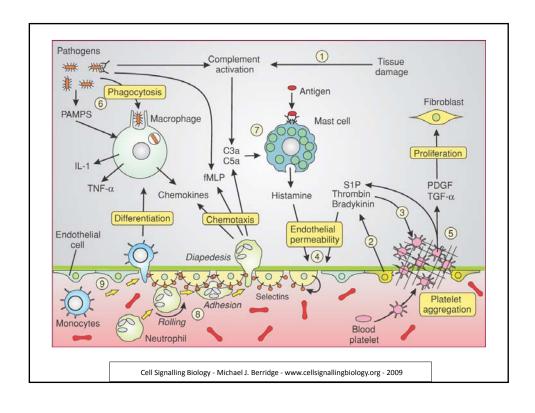
Figure 3 | Transmigration. Migration of leukocytes through venular walls involves penetrating the endothelial-cell barrier and its associated basement membrane and the pericyte sheath. a | Extension of leukocyte mem usions into the endothelial-cell body and endothelial-cell junctions is triggered by ligation of intercellular adhesion molecule 1 (ICAM1) by MAC1 (macrophage antigen 1). Ligation of ICAM1 is associated with increased  $intracellular\ Ca^{2\tau}\ and\ activation\ of\ p38\ mitogen-activated\ protein\ kinase\ (MAPK)\ and\ RAS\ homologue\ (RHO)\ GTP ase,$ which may collectively activate myosin light-chain kinase leading to enhanced endothelial-cell contraction and hence opening of interendothelial contacts. These events may promote leukocyte migration through endothelial junctions (paracellular route), although leukocyte migration can also occur through the body of the endothelium (transcellular route). Transmigration through the endothelium can also induce cell-surface expression of members of the  $\beta_1$ -integrin family and proteases on neutrophils and other leukocytes that may facilitate the onwards movement of the leukocyte through the vessel wall. b | Para cellular migration involves the release of endothelial-expressed vascular endothelial cadherin (VE-cedherin) and is facilitated by intracellular membrane compartments containing a pool of platelet/endothelial-cell adhesion molecule 1 (PECAM1) and possibly other endothelial-cell junctional molecules, such as junctional adhesion molecule A (JAM-A). Other molecules involved in paracellular transmigration are endothelial cell-selective adhesion molecule (ESAM), ICAM2 and CD99. c | Transcellular migration occurs in 'thin' parts of the endothelium, and therefore there is less distance for a leukocyte to migrate. ICAM1 ligation leads to translocation of ICAM1 to actin- and caveolae-rich regions. ICAM1-containing caveolae link together forming vesiculo-vacuolar organelles (VVOs) that form an intracellular channel through which a leukocyte can migrate. Ezrin, radixin and moesin (ERM) proteins could act as linkers between ICAM1 and cytoskeletal proteins (such as actin and vimentin), causing their localization around the channel, thereby providing structural support for the cell under these conditions. d | Migration through the endothelial basement membrane and pericyte sheath can occur through gaps between adjacent pericytes and regions of low protein deposition within the extracellular matrix. This response can be facilitated by <mark>α<sub>ε</sub>β,-integrin </mark>and possibly <mark>proteases</mark>, such as matrix metalloproteinases (MMPs) and neutrophil elastase (NE). ERM, ezrin, radixin and moesin; LFA1, lymphocyte function-associated antigen 1.

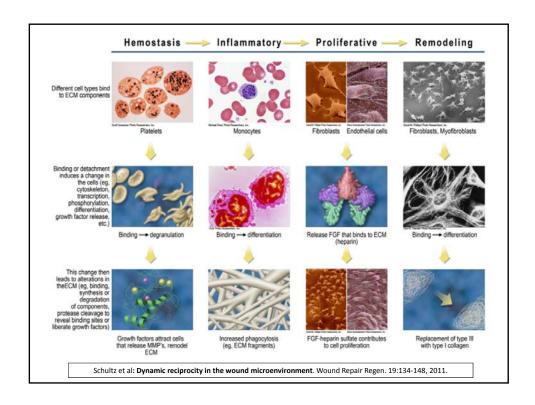
Ley K, Laudanna C, Cybulsky MI, Nourshargh S. **Getting to the site of inflammation: the leukocyte adhesion cascade updated.**Nat Rev Immunol. 2007 Sep;7(9):678-89.

http://www.nature.com/nri/journal/v7/n9/fig\_tab/nri2156\_F3.html#figure-title









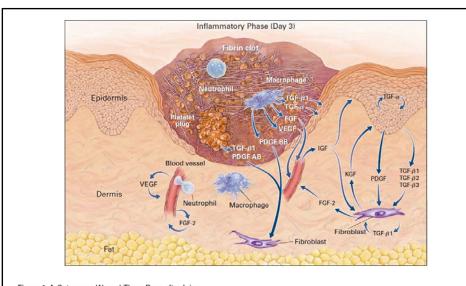


Figure 1. A Cutaneous Wound Three Days after Injury.

Growth factors thought to be necessary for cell movement into the wound are shown. TGF- $\beta$ 1, TGF- $\beta$ 2, and TGF- $\beta$ 3 denote transforming growth factor  $\beta$ 1,  $\beta$ 2, and  $\beta$ 3, respectively; TGF- $\alpha$  transforming growth factor  $\alpha$ ; FGF fibroblast growth factor; VEGF vascular endothelial growth factor; PDGF, PDGF AB, and PDGF BB platelet-derived growth factor, platelet-derived growth factor AB, and platelet-derived growth factor BB, respectively; IGF insulin-like growth factor; and KGF keratinocyte growth factor.

Singer AJ, Clark RA. Cutaneous wound healing. N Engl J Med. 341:738-746, 1999.

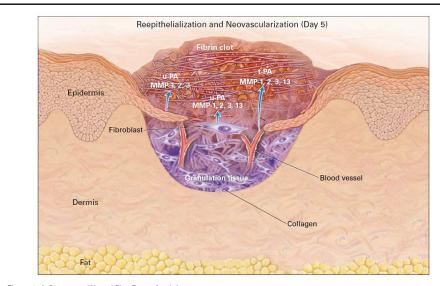
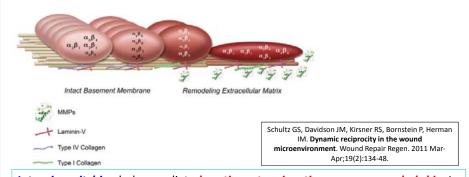


Figure 2. A Cutaneous Wound Five Days after Injury.

Blood vessels are seen sprouting into the fibrin clot as epidermal cells resurface the wound. Proteinases thought to be necessary for cell movement are shown. The abbreviation u-PA denotes urokinase-type plasminogen activator; MMP-1, 2, 3, and 13 matrix metalloproteinases 1, 2, 3, and 13 (collagenase 1, gelatinase A, stromelysin 1, and collagenase 3, respectively); and t-PA tissue plas-

minogen activator.

Singer AJ, Clark RA. Cutaneous wound healing. N Engl J Med. 341:738-746, 1999.



Integrin switching helps mediate keratinocyte migration across wounded skin. In this graphic representation, keratinocytes are depicted as ovals containing the major integrin subunits they express, and the extracellular matrix is depicted as elongated brown cylinders. Intact keratinocytes bound to basement membrane are shown on the left and migrating keratinocytes at the wound edge are shown on the right. Matrix metalloproteases (MMPs) enable migration by breaking down the underlying basal lamina at the leading edge of the keratinocyte sheet, where the cells assume a flattened shape and express an array of integrins that permits migration across the newly formed granulation tissue. The leading epithelial cells rearrange their distribution of b1 integrins to engage with type I collagen below the damaged/absent basement membrane.