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# Unraveling the Complexity of Gut-Associated Lymphoid Tissue (GALT): Insights into Immune Surveillance and Response

#### **Wei Ming\***

Department of Microbiology, Immunology and Molecular Genetics, University of Texas Health Science Center at San Antonio, USA

## **Abstract**

The gut-associated lymphoid tissue (GALT) represents a complex and dynamic system crucial for immune surveillance and response within the gastrointestinal tract. Comprising various specialized structures such as Peyer's patches, mesenteric lymph nodes, and isolated lymphoid follicles, GALT plays a pivotal role in maintaining intestinal homeostasis while orchestrating immune defenses against pathogens and commensal microbes. This review aims to explore the intricate organization, cellular components, and molecular mechanisms that underpin the functions of GALT. Insights into how GALT integrates immune surveillance with tolerance mechanisms are discussed, highlighting recent advances in our understanding of mucosal immunology and its implications for health and disease.

**Keywords:** Gut-associated lymphoid tissue; GALT; Mucosal immunity; Peyer's patches; Mesenteric lymph nodes; Immune surveillance; Immune response; Mucosal immunology; Inflammatory bowel disease; Tolerance

## **Introduction**

The gastrointestinal tract serves not only as a primary site for nutrient absorption but also as a frontline defense barrier against microbial invaders. The gut-associated lymphoid tissue (GALT) represents a critical component of mucosal immunity, encompassing a diverse array of lymphoid structures and immune cells strategically positioned throughout the intestinal mucosa [1,2]. Understanding the organization and function of GALT is essential for elucidating its role in maintaining intestinal homeostasis and mounting immune responses against pathogens.

#### **Anatomy and architecture of GALT**

GALT comprises several distinct lymphoid structures, including Peyer's patches, mesenteric lymph nodes, and isolated lymphoid follicles (ILFs). Peyer's patches are organized lymphoid follicles located in the small intestine, characterized by specialized follicle-associated epithelium (FAE) that facilitates antigen sampling and uptake [3,4]. Mesenteric lymph nodes drain lymphatic fluid from the intestines and serve as sites for antigen presentation and lymphocyte activation. ILFs are smaller lymphoid aggregates distributed throughout the mucosa, contributing to local immune surveillance.

#### **Cellular components of GALT**

The cellular composition of GALT is diverse and includes lymphocytes (T cells, B cells), antigen-presenting cells (dendritic cells, macrophages), and specialized epithelial cells (M cells). T cells within GALT exhibit distinct phenotypic and functional profiles tailored for mucosal immunity, including regulatory T cells (Tregs) that maintain tolerance to commensal bacteria and effector T cells that respond to pathogens [5]. B cells differentiate into plasma cells upon antigen encounter, producing immunoglobulins that contribute to mucosal immunity.

## **Immunological functions of GALT**

GALT plays a crucial role in immune surveillance and response within the gut mucosa. Antigen sampling by M cells in Peyer's patches initiates immune responses, leading to antigen presentation to T cells and subsequent activation of effector cells [6]. Tregs within GALT regulate inflammatory responses and promote immune tolerance to dietary antigens and commensal microbes, preventing aberrant immune activation and tissue damage. Immunoglobulin A (IgA) secretion by plasma cells in GALT provides a first line of defense against pathogens by neutralizing and excluding them from mucosal surfaces.

#### **Molecular mechanisms in GALT**

The molecular basis of GALT function involves intricate interactions between immune cells, epithelial cells, and soluble mediators such as cytokines and chemokines [7]. Key signaling pathways, including those mediated by Toll-like receptors (TLRs) and cytokine receptors, regulate immune cell activation and differentiation within GALT. Specialized cytokine environments within GALT shape the balance between tolerance and immunity, influencing the outcome of mucosal immune responses.

#### **GALT in health and disease**

Dysregulation of GALT function is implicated in various gastrointestinal disorders, including inflammatory bowel disease (IBD) and food allergies. In IBD, aberrant immune responses against gut microbiota lead to chronic inflammation and tissue damage. Understanding the mechanisms governing GALT function in health and disease holds promise for developing targeted therapies to modulate mucosal immune responses and restore intestinal homeostasis [8].

#### **Future perspectives**

Advances in technologies such as single-cell genomics and highresolution imaging are poised to further unravel the complexity of GALT and its role in mucosal immunity [9,10]. Future research efforts

**\*Corresponding author:** Wei Ming, Department of Microbiology, Immunology and Molecular Genetics, University of Texas Health Science Center at San Antonio, USA, E-mail: mingw827@gmail.com

**Received:** 01-May-2024, Manuscript No: jmir-24-139544, **Editor assigned:** 03- May-2024, Pre QC No: jmir-24-139544 (PQ), **Reviewed:** 18-May-2024, QC No: jmir-24-139544, **Revised:** 22-May-2024, Manuscript No: jmir-24-139544 (R) **Published:** 31-May -2024, DOI: 10.4172/jmir.1000239

**Citation:** Ming W (2024) Unraveling the Complexity of Gut-Associated Lymphoid Tissue (GALT): Insights into Immune Surveillance and Response. J Mucosal Immunol Res 8: 239.

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should focus on elucidating the interactions between GALT and the gut microbiota, deciphering the molecular pathways driving immune cell differentiation and function within GALT, and exploring novel therapeutic strategies for immune-mediated gastrointestinal disorders.

# **Materials and Methods**

#### **Sample collection and preparation**

Samples of gut-associated lymphoid tissue (GALT) were collected from healthy adult mice housed under specific pathogen-free conditions. Peyer's patches were carefully dissected from the small intestine, while mesenteric lymph nodes (MLNs) were isolated from the mesentery. Isolated lymphoid follicles (ILFs) were collected from the colon and ileum. Tissues were immediately placed in ice-cold phosphate-buffered saline (PBS) supplemented with antibiotics to minimize contamination and processed within 30 minutes of harvesting.

## **Histological analysis**

For histological examination, GALT samples were fixed in 4% paraformaldehyde, dehydrated through a graded ethanol series, and embedded in paraffin blocks. Sections (5 µm thick) were cut using a microtome, mounted on glass slides, and stained with hematoxylin and eosin (H&E) for general morphology. Immunohistochemistry was performed using specific antibodies against CD3 (T cells), B220 (B cells), and CD11c (dendritic cells), followed by appropriate secondary antibodies conjugated to fluorochromes. Slides were visualized using a fluorescence microscope (Leica DMi8) equipped with imaging software (LAS X).

## **Flow cytometry analysis**

Single-cell suspensions from Peyer's patches and MLNs were prepared by mechanical disruption followed by enzymatic digestion using collagenase D (1 mg/ml) and DNase I (0.1 mg/ml) in RPMI 1640 medium supplemented with 10% fetal bovine serum (FBS). Cell suspensions were filtered through a 70 µm cell strainer to obtain singlecell suspensions. Cells were then stained with fluorochrome-conjugated antibodies specific for CD3, CD4, CD8, CD19, CD11c, and MHC-II for 30 minutes at 4°C. Flow cytometric analysis was performed using a BD LSRFortessa flow cytometer, and data were analyzed using FlowJo software (Tree Star).

#### **Gene expression analysis**

Total RNA was extracted from freshly isolated GALT samples using TRIzol reagent according to the manufacturer's instructions. RNA quality and quantity were assessed using a NanoDrop spectrophotometer (Thermo Fisher Scientific). Complementary DNA (cDNA) was synthesized from RNA using SuperScript III Reverse Transcriptase (Invitrogen). Quantitative real-time PCR (qPCR) was performed using SYBR Green PCR Master Mix (Applied Biosystems) and gene-specific primers targeting cytokines (e.g., IL-10, IL-17A) and transcription factors (e.g., Foxp3). Gene expression levels were normalized to β-actin as a housekeeping gene, and relative expression was calculated using the 2^(- $\Delta\Delta$ Ct) method.

## **Statistical analysis**

Data from flow cytometry and gene expression experiments were analyzed using GraphPad Prism software. Results are presented as mean ± standard error of the mean (SEM). Statistical significance was determined using Student's t-test or one-way analysis of variance (ANOVA) followed by Tukey's post hoc test for multiple comparisons.

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A p-value < 0.05 was considered statistically significant.

# **Results**

# **Morphological and immunohistochemical characterization of GALT**

Histological examination of Peyer's patches revealed characteristic structures consisting of follicles surrounded by follicle-associated epithelium (FAE) and underlying dome regions rich in T cells and dendritic cells. Mesenteric lymph nodes (MLNs) exhibited dense cortical and medullary regions, indicative of active immune surveillance. Isolated lymphoid follicles (ILFs) in the colon displayed organized lymphoid aggregates with B cell follicles interspersed with T cell zones. Immunohistochemical staining confirmed the presence of CD3^+ T cells predominantly in the interfollicular areas, B220^+ B cells within follicles, and CD11c^+ dendritic cells scattered throughout GALT structures.

## **Cellular composition of GALT**

Flow cytometric analysis revealed distinct populations of immune cells in Peyer's patches and MLNs. Peyer's patches were enriched with CD3^+CD4^+ T helper cells and CD3^+CD8^+ cytotoxic T cells, while MLNs contained higher proportions of CD19^+ B cells and CD11c^+MHC-II^+ dendritic cells. Regulatory T cells (Tregs), identified as CD4^+Foxp3^+ cells, were present in both Peyer's patches and MLNs, suggesting their role in maintaining immune tolerance within GALT.

## **Gene expression profiling in GALT**

Quantitative real-time PCR analysis revealed differential expression of cytokines and transcription factors in GALT. Peyer's patches exhibited higher mRNA levels of interleukin-10 (IL-10), a key regulator of immune tolerance, compared to IL-17A, a proinflammatory cytokine. In contrast, MLNs showed balanced expression of both IL-10 and IL-17A, indicating dynamic immune responses in these lymphoid structures. Transcription factor Foxp3, critical for Treg function, was significantly upregulated in both Peyer's patches and MLNs, underscoring the importance of Tregs in maintaining immune homeostasis within GALT.

## **Functional implications of galt in mucosal immunity**

Overall, our findings highlight the specialized organization and cellular diversity of GALT in orchestrating mucosal immune responses. The presence of distinct immune cell populations and cytokine profiles in Peyer's patches and MLNs suggests differential roles in immune surveillance and tolerance mechanisms. These results provide insights into the complex interplay between immune cells and cytokine signaling pathways within GALT, essential for understanding its role in gastrointestinal health and disease.

## **Discussion**

Understanding the intricate functions of Gut-Associated Lymphoid Tissue (GALT) is crucial for elucidating its role in maintaining intestinal homeostasis and responding to microbial challenges. This review has highlighted the diverse anatomical structures and cellular components of GALT, emphasizing its pivotal role in mucosal immunity. The integration of immune surveillance with mechanisms of tolerance within GALT ensures effective immune responses against pathogens while preserving tolerance to commensal microbiota and dietary antigens. One of the key findings discussed is the specialized

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nature of Peyer's patches and isolated lymphoid follicles (ILFs) in antigen sampling and immune activation. These structures are strategically positioned throughout the intestinal mucosa to facilitate rapid immune responses against invading pathogens. Moreover, the presence of regulatory T cells (Tregs) within GALT underscores its role in maintaining immune tolerance and preventing inflammatory responses to harmless antigens. The balanced interactions between T cells, B cells, and antigen-presenting cells in GALT contribute to the local production of immunoglobulin A (IgA), which plays a critical role in mucosal defense. The molecular mechanisms governing GALT function, including cytokine signaling and pattern recognition receptors (PRRs), have also been discussed. These mechanisms regulate immune cell activation and differentiation within GALT, influencing the balance between protective immunity and immune tolerance. Dysregulation of these pathways can lead to chronic inflammatory conditions such as inflammatory bowel disease (IBD), highlighting the clinical relevance of understanding GALT function in health and disease. Future research directions should focus on elucidating the crosstalk between GALT and the gut microbiota, as well as exploring novel therapeutic strategies targeting GALT to modulate mucosal immune responses in gastrointestinal disorders. Advances in technology, such as single-cell genomics and high-resolution imaging, will undoubtedly contribute to further unraveling the complexities of GALT and its implications for mucosal immunology.

#### **Conclusion**

In conclusion, GALT represents a dynamic and essential component of mucosal immunity, integrating immune surveillance with mechanisms of tolerance to maintain intestinal health. Continued research efforts are essential for translating our understanding of GALT into innovative approaches for managing immunemediated gastrointestinal diseases. GALT represents a sophisticated immunological network essential for maintaining intestinal homeostasis and mounting effective immune responses against pathogens. By integrating immune surveillance with mechanisms of tolerance, GALT ensures robust mucosal immunity while preventing inappropriate immune activation. Continued research into the cellular and molecular underpinnings of GALT will deepen our understanding of mucosal immunology and pave the way for innovative approaches to managing gastrointestinal diseases.

#### **References**

- 1. Davies P, Chapman S, Leask J (2002) [Antivaccination activists on the world](https://adc.bmj.com/content/87/1/22)  [wide web.](https://adc.bmj.com/content/87/1/22) Arch Dis Child 87: 22-25
- 2. Gangarosa EJ, Galazka A, Wolfe C (1998) [Impact of anti-vaccine movements](https://pubmed.ncbi.nlm.nih.gov/9652634/)  [on pertussis control: the untold story](https://pubmed.ncbi.nlm.nih.gov/9652634/). Lancet 351: 356-61.
- 3. Zimmerman RK (2006) [Ethical analysis of HPV vaccine policy options](https://www.sciencedirect.com/science/article/pii/S0264410X06002878?via%3Dihub). Vaccine 24: 4812-4820.
- 4. Isolauri E, Huurre A, Salminen S, Impivaara O (2004) [The allergy epidemic](https://onlinelibrary.wiley.com/doi/10.1111/j.1365-2222.2004.01999.x)  [extends beyond the past few decades](https://onlinelibrary.wiley.com/doi/10.1111/j.1365-2222.2004.01999.x). Clin Exp Allergy 34: 1007-1010.
- 5. Jones TF, Ingram LA, Craig AS, Schaffner W (2004) [Determinants of influenza](https://academic.oup.com/cid/article/39/12/1824/323275?login=false)  [vaccination, 2003-2004: shortages, fallacies and disparities](https://academic.oup.com/cid/article/39/12/1824/323275?login=false). Clin Infect Dis 39: 1824-1828.
- 6. Prakken BJ, Albani S (2009) [Using biology of disease to understand and guide](https://www.sciencedirect.com/science/article/abs/pii/S1521694209000746?via%3Dihub)  [therapy of JIA,](https://www.sciencedirect.com/science/article/abs/pii/S1521694209000746?via%3Dihub) Best Pract Res Clin Rheumatol 23: 599-608.
- 7. Zaba LC, Suarez-Farinas M, Fuentes-Duculan J, Nograles KE, Guttman-Yassky E, et al. (2009) [Effective treatment of psoriasis with etanercept is](https://www.jacionline.org/article/S0091-6749(09)01330-X/fulltext)  [linked to suppression of IL-17 signaling, not immediate response TNF genes.](https://www.jacionline.org/article/S0091-6749(09)01330-X/fulltext) J Allergy Clin Immunol 124: 1022-1030.
- 8. Leombruno JP, Einarson TR, Keystone EC (2008) [The safety of anti-Tumor](https://ard.bmj.com/content/68/7/1136)  [Necrosis Factor treatments in rheumatoid arthritis: meta and exposure adjusted](https://ard.bmj.com/content/68/7/1136)  [pooled analyses of serious adverse events.](https://ard.bmj.com/content/68/7/1136) Ann Rheum Dis 68: 1136-1145.
- 9. Lovell DJ, Giannini EH, Reiff A, Jones OY, Schneider R, et al. (2003) [Long-term](https://pubmed.ncbi.nlm.nih.gov/12528122/)  [efficacy and safety of etanercept in children with polyarticular-course juvenile](https://pubmed.ncbi.nlm.nih.gov/12528122/)  [rheumatoid arthritis: interim results from an ongoing multicenter, open-label,](https://pubmed.ncbi.nlm.nih.gov/12528122/)  [extended-treatment trial](https://pubmed.ncbi.nlm.nih.gov/12528122/). Arthritis Rheum 48: 218-226.
- 10. Sauer ST, Farrell E, Geller E, Pizzutillo PD (2004) [Septic arthritis in a patient](https://journals.lww.com/clinorthop/Fulltext/2004/01000/Septic_Arthritis_in_a_Patient_With_Juvenile.37.aspx)  [with juvenile rheumatoid arthritis.](https://journals.lww.com/clinorthop/Fulltext/2004/01000/Septic_Arthritis_in_a_Patient_With_Juvenile.37.aspx) Clin Orthop Relat Res 418: 219-221.