

WBC /Cytokine

Immune suppression did not grossly affect wbc levels throughout the study, neither suppressing during the period of immune suppression nor inducing a bounce-back effect on withdrawal. IL-8 levels were very high in Aniridia patients at study start, and this was not associated with any abnormal WBC levels. IL-8 is most likely produced by cells other than WBC in this scenario – IL-8 is associated with inflammation and neovascularization and can be made by many stromal cells. This may be borne out by the continued high levels during immune suppression. The very high rebound values may be due to synergistic effects of immune cell and stromal cell IL-8 production. This may be supported by the resolution of IL-8 levels in patients who started with normal IL-8, but continued high production in those who presented with high IL-8. i.e. a resolving spike may be immune-mediated but a continued high level is not sourced from immune cells.

TNF levels were normal at start correlating with the normal wbc levels – i.e. no sign of chronic inflammation. TNF was essentially absent during immune suppression but did show elevation in 3/7 patients which may indicate a degree immune response to cryptic infection.
