



Therapeutic applicability of helminths in atopic and autoimmune diseases

Asmaa kamal Abd Ellah.

Medical Parasitology Department, Faculty of Medicine, Sohag University.

ABSTRACT

The incidence of atopic and autoimmune diseases has been rising all over the world, so the design of new drugs to prevent and treat these diseases should not be delayed. Epidemiological investigations revealed that the increase also parallels a decrease in infectious diseases, especially helminth's infections. In the past decade, helminth infections became less common due to the developed sanitation. Meanwhile, atopic and autoimmune diseases' incidences were increasing, which cannot be explained by the changes of susceptibility genes. Thus, immune dysregulation may be related to the reduced prevalence of helminths' infections. Helminths' products have been used to prevent the development of inflammatory diseases and reduce their symptoms. Several studies on animal models and clinical trials were conducted to detect the efficiency of helminth molecules in immune-modulating of atopic and autoimmune diseases. Making use of their ability for immunomodulation may lead to the introduction of effective therapies for such diseases.

KEYWORDS: helminth infections, effective therapies, atopic, autoimmune diseases.

INTRODUCTION

Over time, helminths have evolved with humans using different mechanisms to become alive in their hosts, for example, they secrete substances to evade humans' immune systems (1).

The parasites do not seek to destroy the hosts but keep them alive by preserving an equilibrium with them. As they do not stimulate their hosts, causing their removal, or suppress their immune system causing host death (2).

It has been noticed that the prevalence of allergic disorders (like allergic dermatitis and asthma, etc.) and autoimmune diseases (like inflammatory bowel disease (IBD) and Type1 Diabetes (T1D), etc.) were raised, with the decline in helminth infections (3).

Greenwood (1969) recognized the negative relationship between parasites and immune disorders and he observed that infection with *Plasmodium* in Nigeria was associated with a decrease in the number of rheumatoid arthritis cases (4).

Also, Greenwood *et al.* (1970) determined that immune dysfunction disorders in mice were inhibited when they were infected with *Plasmodium berghei* (5).

Strachan (1989) assumed the hygiene theory which stated that the patients who were exposed to infectious diseases in childhood, were protected from allergic diseases. So, the rise in the number of cases with allergic diseases can be referred to as the control of infectious diseases particularly the parasitic worms (6).

Also, it has been observed that people infected with worms are more common among the poor populations, while people with atopic diseases and autoimmune diseases are common in rich countries (7).

The current treatments of autoimmune diseases as Long-term glucocorticoid and purine analogs have many side effects therefore it becomes necessary to find more efficient and safe treatment (8).

Several studies have used parasitic worms in the therapy of immune system disorders like IBD, allergy, asthma, multiple sclerosis, and diabetes (9).

Regarding the immune theory, T Helper1/T Helper 17 response is associated with autoimmune disorders and the T Helper 2 response is associated with helminth infections and atopic diseases. Helminth infections enhance TH2 response while suppress TH1/TH17 response, leading to inhibition of autoimmunity. Also, the infections cannot induce allergies due to stimulation polyclonal of IgE which is not specific for allergic diseases (10).

Besides, parasites secrete substances that prevent the inflammation in their hosts to overwhelm their immune system (11).

Furthermore, they can also stimulate regulatory T cells, regulatory B cells, and M2 macrophages, prohibit type 2 lymphoid cells and dendritic cells, and overwhelm intestinal flora (12).

Helminth therapy in animal studies

The first step of the empirical study is the use of parasitic worms as a treatment in animal models. The efficacy of treatment of IBD in mice with helminths and their eggs was recorded. Several studies documented a reduction in IBD symptoms in mice (13).

As helminths stimulate the immune response sharing in the protection of the hosts

from the development of autoimmune diseases. Parasitic infection stimulates IL-4, IL-10, and IL-13 while inhibits INF- γ , INF- α , and IL-12 levels (14).

Also, several animal studies reported that helminth infections decreased the severity of encephalomyelitis in mice with multiple sclerosis. As the infections decreased the activity of Th1 cells, Th17 cells, and INF- γ and stimulated IL-4 and TGF- β (15).

Besides, their infections were effective only as a preventive measure in mice with T1D, as the infections protected mice from developing T1D before any damage to the pancreas occurred by prohibiting the infiltration of pathogenic CD4⁺ T cells, CD8⁺ T cells and macrophages into the islets, or by the infiltration of immune regulatory cells that inhibit islet destruction and by increasing the secretion of IL-4, IL-5, and IL-10 (16).

Moreover, the infections diminished the symptoms and the course of rheumatoid arthritis, as they stimulated IL-4 and IL-10 and inhibit INF- γ to reduce the inflammation in the disease (17).

Helminth therapy in humans

Two parasitic worms were used in the treatment of humans; *Trichuris suis* (the pig whipworm) and *Necator americanus* (a human hookworm). *T. suis* was applied by mouth and infected the gut and could not colonize for an extended duration, while *N. americanus* was applied to the skin and migrated to the small intestine, and became asymptomatic with no replication abilities for a long duration (18).

Researches began in the treatment of IBD patients with *T. suis* fifteen years ago. They were treated with the eggs of this worm and treatment appeared effective and the patients tolerated this treatment. The treatment effect was temporary, so it was necessary to repeat the treatment to

improve the symptoms. The promising new therapy was also given for ulcerative colitis and Crohn's disease (19).

Other helminth therapy researches in humans used the *Necator americanus*. In the clinical study, 9 Crohn's patients were infected with the larvae and 7 patients improved while 2 patients got worse (20).

Helminths products as new drugs

The treatment by excretory-secretory (ES) substances produced by parasitic worms was safer than infection with living worms and was accepted by the patients. The study showed that ES products of *Taenia crassiceps* decreased the symptoms of multiple sclerosis in mice and the treatment results were better than those results with dexamethasone (21).

However, infection with living worms or their ES products nonspecifically inhibited the host immune system, and they exposed the host to hazards of infection with them as the risk of exposure to vaccines (22).

Therefore, the use of single molecules is the best in modulating the immune response. There are a few studies to extract proteins that yield interesting results. *Fasciola hepatica* Helminth Defense molecules1 (FhHDM-1) protein from *Fasciola hepatica* was used to treat T1D and multiple sclerosis in mice. It had a significant effect in reducing the symptoms of these diseases in mice and decreased the production of proinflammatory cytokines TNF and IL-6 (23).

Omega-1 protein extracted from the antigen of *Schistosoma* eggs rescued the mice with T1D. This protein protected the mice from the development of T1D and stimulated Foxp3 expression and IL-4 in mice (24).

ES-62 is the best parasitic worm's product. This protein is extracted from *Acantho-*

cheilonema vitae. It stimulates Th2 cells and inhibits Th1 and Th17 cells. It also stimulates B cells and macrophages to produce IL10 (25).

This substance appeared to improve exacerbations in mice infected with asthma (26). It reduced the severity of symptoms of arthritis in mice. Also, it had a significant decline in the secretion of proinflammatory cytokines by T cells like its effect in mice (27).

CONCLUSION

Helminths accompanied humans for a long time and kept in equilibrium with their hosts. The high incidence of autoimmune and atopic diseases has motivated studies towards the therapeutic use of helminths. Studies on helminths therapy have passed through several steps starting with epidemiological researches, studies on animals, studies on humans, to manufacture of helminths products. Although promising results of helminths treatment have been accomplished however numerous inquiries remain to be verified such as the type of their species used, method of their application, their dose, duration, and their use on a wide clinical scale. So, we recommend that more studies are needed in our way to produce effective and safe therapies for those suffering patients.

REFERENCES

1. **Maizels RM and McSorley HJ.** Regulation of the host immune system by helminth parasites. *J Allergy Clin Immunol*; 2016; 138: 666-675.
2. **Wu Z, Wang L, Tang Y and Sun X.** Parasite-derived proteins for the treatment of allergies and autoimmune diseases. *Frontiers Micr*; 2017; 8: 2164.
3. **Stiemsma LT, Reynolds LA, Turvey SE and Finlay, BB.** The hygiene hypothesis: current perspectives and future therapies. *Immuno Targets Ther*; 2015; 4:143.

4. **Greenwood B, Herrick E.M. and Voller A.** Suppression of autoimmune disease in NZB and (NZB× NZW) F1 hybrid mice by infection with malaria. *Nature*;1970; 226: 266-267.
5. **Greenwood BM.** Polyarthritis in Western Nigeria. I. Rheumatoid arthritis. *Annals of the rheumatic Dis*;1969; 28, 488.
6. **Strachan, D.P.;** Hay fever, hygiene, and household size. *British Med J*; 1989; 299: 1259.
7. **Maizels R. and Yazdanbakhsh M.** T-cell regulation in helminth parasite infections: implications for inflammatory diseases, *T Cell Regulation in Allergy, Asthma and Atopic Skin Diseases.* Karger Publishers; 2008; 112-123.
8. **Garg SK, Croft AM and Bager P.** Helminth therapy (worms) for induction of remission in inflammatory bowel disease. *Cochrane Database Sys Rev*; 2014; 20: 1.
9. **Zwiernik J, Arlukowicz T, Zwiernik B, Matyskiela T, Gimela-Dargiewicz M, Rakowska A, Januszko-Giergielewicz B. and Rotkiewicz E.** Therapeutic applicability of helminths in autoimmune diseases—literature overview. *Przegląd Gastroenterol*; 2019; 14: 168.
10. **Erb KJ.** Can helminths or helminth-derived products be used in humans to prevent or treat allergic diseases? *Trends in Immunol*; 2009; 30: 75-82.
11. **Li L, Xie H, Wang M, Qu J, Cha H, Yang Q, Feng Y, Qi Y, Qiu H and Dong N.** Characteristics of IL-9 induced by *Schistosoma japonicum* infection in C57BL/6 mouse liver. *Sci Reports*; 2017; 7:1-9.
12. **Versini M, Jeandel PY; Bashi T, Bizzaro G, Blank M. and Shoenfeld Y.** Unraveling the hygiene hypothesis of helminths and autoimmunity: origins, pathophysiology, and clinical applications. *BMC Med*; 2015; 13: 81.
13. **Reyes JL, Fernando MR, Lopes F, Leung G, Mancini NL, Matisz CE, Wang A, and McKay DM.** IL-22 restrains tapeworm-mediated protection against experimental colitis via regulation of IL-25 expression. *PLoS pathogens*; 2016; 12.
14. **Smallwood TB, Giacomini PR, Loukas A, Mulvenna JP, Clark RJ, and Miles JJ.** Helminth immunomodulation in autoimmune disease. *Frontiers Immunol*; 2017; 8: 453.
15. **Walsh KP, Brady MT, Finlay CM, Boon L, and Mills KH.** Infection with a helminth parasite attenuates autoimmunity through TGF- β -mediated suppression of Th17 and Th1 responses. *J Immunol*; 2009; 183, 1577-1586.
16. **Liu Q, Sundar K, Mishra PK, Mousavi G, Liu Z, Gaydos A, Alem F, Lagunoff D, Bleich D, and Gause WC.** Helminth infection can reduce insulinitis and type 1 diabetes through CD25-and IL-10-independent mechanisms. *Inf. Immunity*; 2009; 77: 5347-5358.
17. **He Y, Li J, Zhuang W, Yin L, Chen C, Li J, Chi F, Bai Y, and Chen XP.** The inhibitory effect against collagen-induced arthritis by *Schistosoma japonicum* infection is infection stage-dependent. *BMC Immunology*; 2010; 11: 28.
18. **Bethony J, Brooker S, Albonico M, Geiger SM, Loukas A, Diemert D, and Hotez PJ.** Soil-transmitted helminth infections: ascariasis, trichuriasis, and hookworm. *Lancet*; 2006; 367: 1521-1532.
19. **Summers RW, Elliott D, Urban J, Thompson R and Weinstock J.** *T. suis* therapy in Crohn's disease. *Gut*; 2005;54: 87-90.
20. **Croese J, O'neil J, Masson J, Cooke S, Melrose W, Pritchard D, and Speare R.** A proof-of-concept study establishing *Necator americanus* in Crohn's patients and reservoir donors. *Gut*; 2006; 55: 136-137.
21. **Peón, AN; Ledesma-Soto Y; Olguín JE; Bautista-Donis M; Sciotto E and Terrazas LI.** Helminth products potently modulate experimental autoimmune encephalomyelitis by downregulating neuroinflammation and promoting a suppressive microenvironment. *Mediat Inflamm*; 2017; 2017: 8494572.

22. **McSorley HJ and Maizels RM.** Helminth infections and host immune regulation. *Clinic Micro Reviews*; 2012; 25: 585-608.
23. **Lund ME, Greer J, Dixit A, Alvarado R, McCauley-Winter P, To J, Tanaka A, Hutchinson AT, Robinson MW, and Simpson AM.** A parasite-derived 68-mer peptide ameliorates autoimmune disease in murine models of Type 1 diabetes and multiple sclerosis. *Sci Reports*;2016; 6: 37789.
24. **Zaccone P, Burton OT, Gibbs SE, Miller N, Jones FM, Schramm G, Haas H, Doenhoff MJ, Dunne DW, and Cooke A.** The *S. mansoni* glycoprotein ω -1 induces Foxp3 expression in NOD mouse CD4⁺ T cells. *European J. Immunol*; 2011; 41: 2709-2718.
25. **Harnett W.** Secretory products of helminth parasites as immunomodulators. *Molecular biochem parasitol*; 2014; 195:130-136.
26. **Coltherd J, Rodgers D, Lawrie R, Al-Riyami L, Suckling C, Harnett W and Harnett M.** The parasitic worm-derived immunomodulator, ES-62, and its drug-like small molecule analogues exhibit therapeutic potential in a model of chronic asthma. *Sci reports*; 2016; 6, 19224.
27. **Pineda M, Eason R, Harnett M, and Harnett W.** From the worm to the pill, the parasitic worm product ES-62 raises new horizons in the treatment of rheumatoid arthritis. *Lupus*; 2015; 24: 400-411.