

Apoptosis in chronic hepatitis C



Dr med. Anna Parfieniuk-Kowerda

**Department of Infectious Diseases and
Hepatology**

Medical University of Białystok

Poland

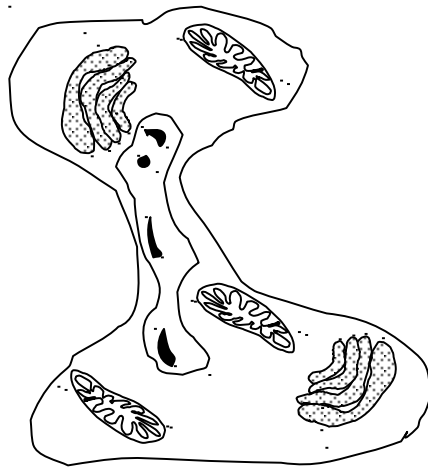
APOPTOSIS

Apoptosis - type I programmed cell death

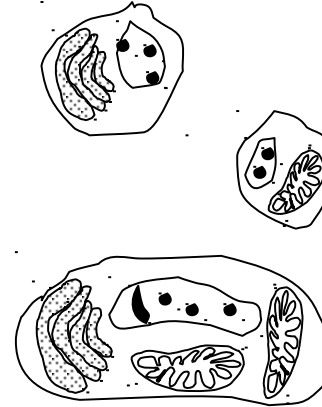
It is a highly regulated and controlled process during cell lifecycle that may occur in *Eucaryota* organisms.



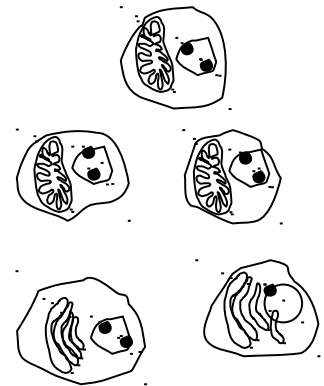
Normal cell



**Cell shrinking, blebbing
Chromatin condensation**



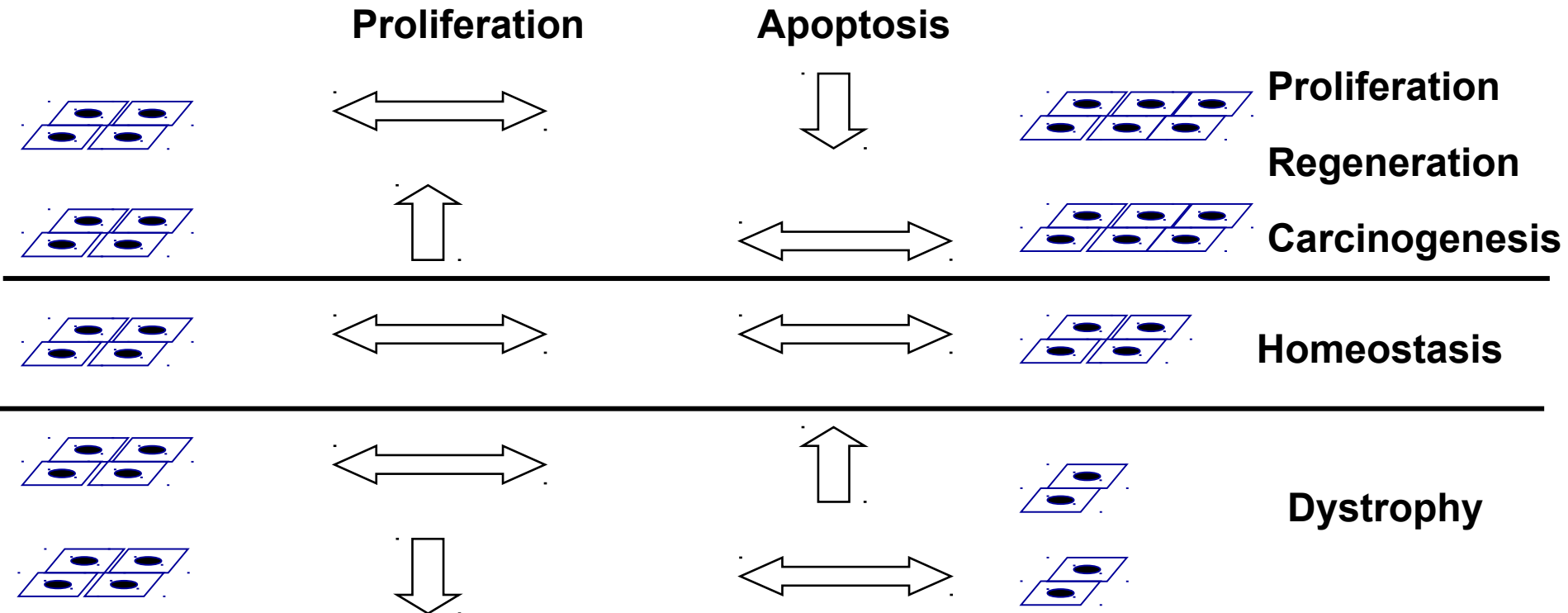
**Nuclear fragmentation
Cell fragmentation**



**Apoptotic bodies
No inflammation**

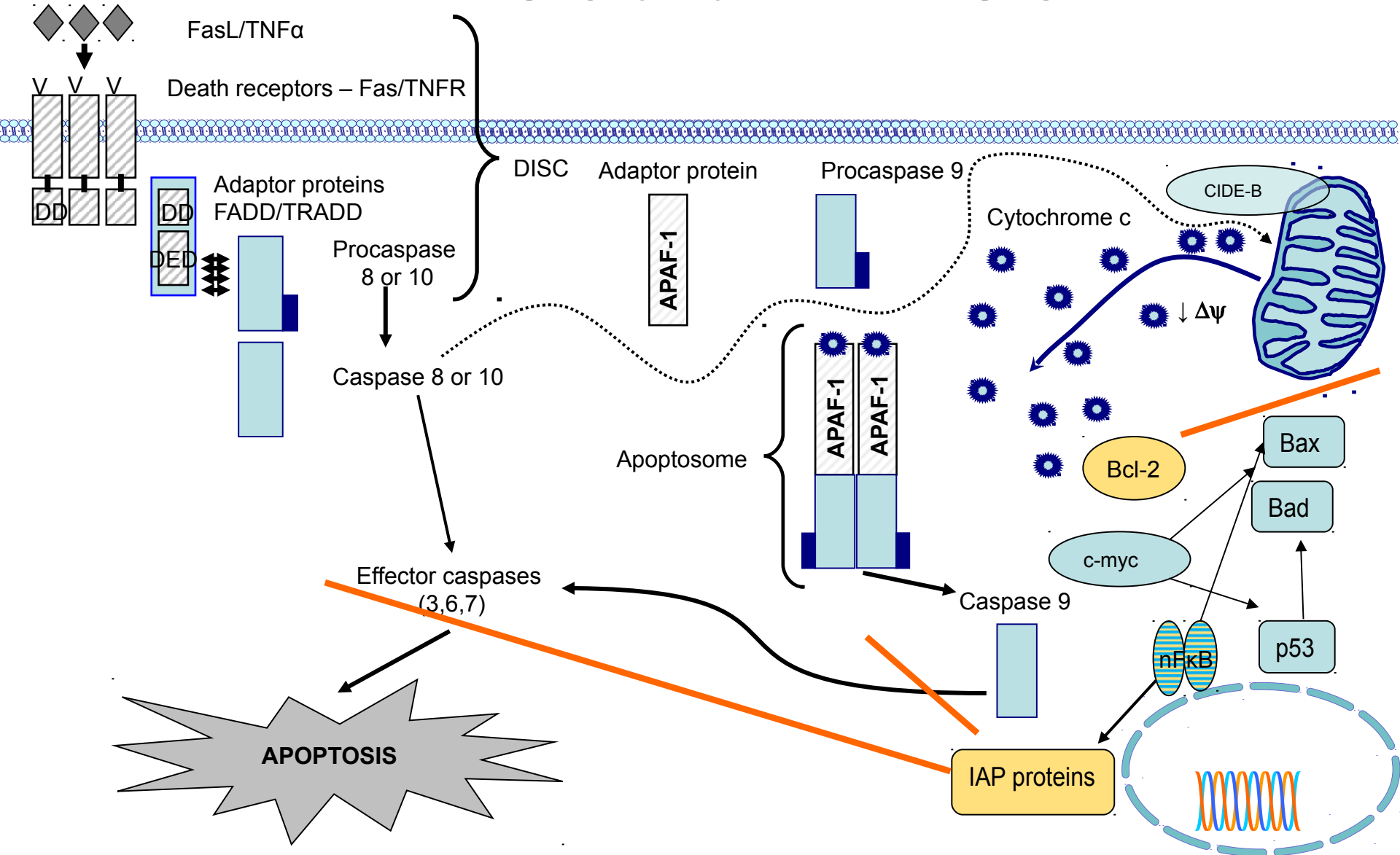
APOPTOSIS

- plays a role in embryonic development and morphogenesis,
- counteracts proliferation
- controls process of the elimination of defective/damaged/infected cells
- crucial for the maintenance of tissue homeostasis



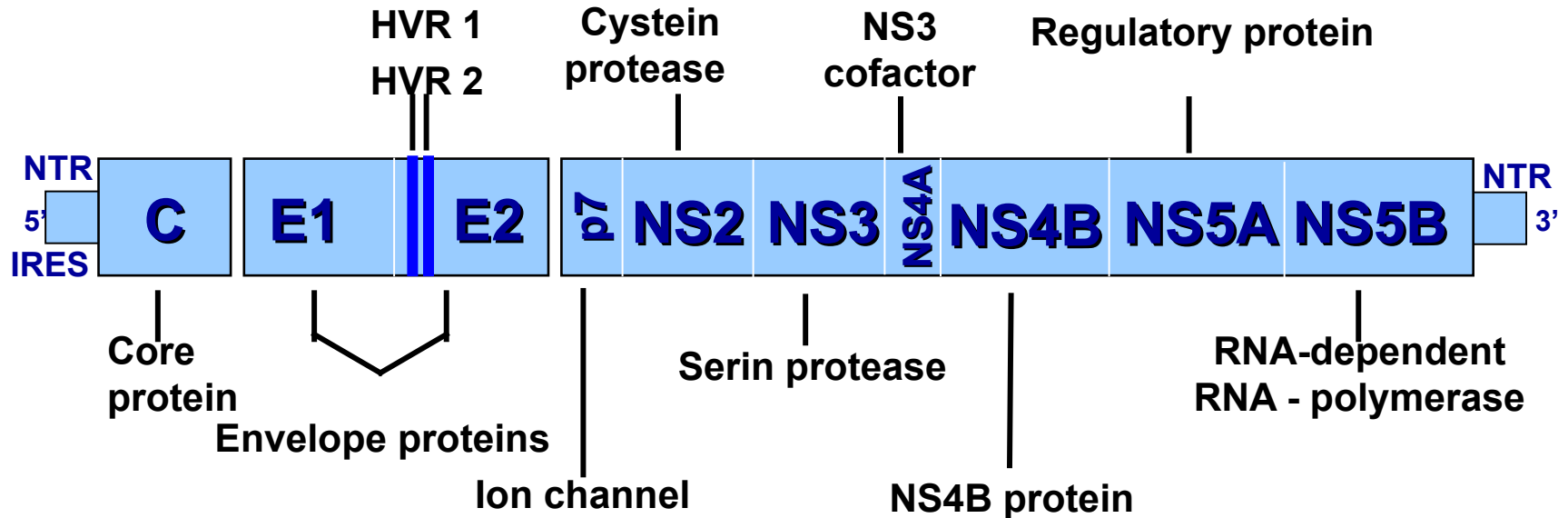
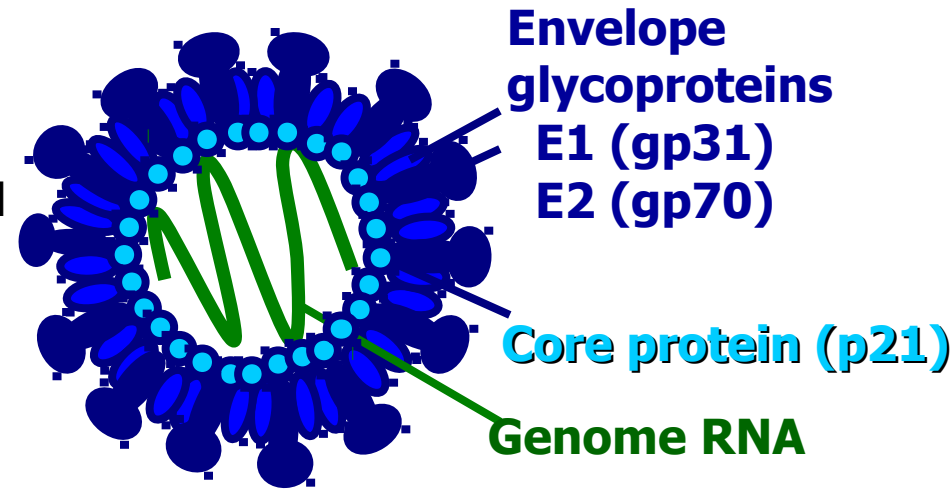
APOPTOTIC PATHWAYS

EXTRINSIC and INTRINSIC



HEPATITIS C VIRUS

- Family *Flaviviridae*, enveloped virus
- Classification D.Baltimore → group IV: ssRNA(+) – positive-sense single stranded RNA
- 7 major genotypes, 67 subtypes, quasispecies



Pathophysiology of CHC

EXPOSURE

Exposure to HCV
Immune response CD4, CD8 T cells, interferon expression

APOPTOSIS

Apoptosis in attempt to clear the virus (15-45% eradication)
Immune evasion-lymphocytes apoptosis among different mechanisms
Establishment of persistent infection

SEQUELAE

Liver damage
Cirrhosis
Hepatocellular carcinoma (HCC)

Role of HCV proteins to induce apoptosis

- HCV core protein: activates Fas, activates TRAIL, induces of mitochondrial stress (ROS, Cyt c release),
- NS3/4A complex: induces of mitochondrial stress (ROS, Cyt c release)
- NS5A: binds to protein kinase R leading to the inhibition of anti-apoptotic protein synthesis
- E1, E2: increase FasL expression

Bantel H, Schulze-Osthoff K. Cell Death Differ. 2003;10 Suppl 1:S48-58

Cruise MW et al. J Leukoc Biol. 2005;78(2):412-25

Patel T et al. Hepatology. 1999;30(3):811-5

Korenaga M et al. J Biol Chem. 2005;280(45):37481-8

Nomura-Takigawa Y et al. J Gen Virol. 2006;87(Pt 7):1935-45

Role of HCV proteins to inhibit apoptosis

- HCV core protein: binds to c-myc, activates NF- κ B, inhibits mitochondrial pathway
- NS3/4A: cleaves MAVS (Cardif) inhibiting intrinsic apoptotic pathway
- NS2: binds to CIDE-B inhibiting intrinsic/mitochondrial pathway
- NS5A: interacts with TRADD blocking caspase activation, activates NF- κ B and protooncogen STAT-3 through triggering oxidative stress and ROS production; binds to proapoptotic protein Bax; inhibits proapoptotic protein Bid, activates protooncogen β -catenin, binds to p53 protein
- E1, E2: repress the activation of caspase-8 and the release of cytochrome c from the mitochondria

Bantel H, Schulze-Osthoff K. *Cell Death Differ.* 2003;10 Suppl 1:S48-58

Jiang X et al. *PLoS One.* 2015;10(7):e0131973

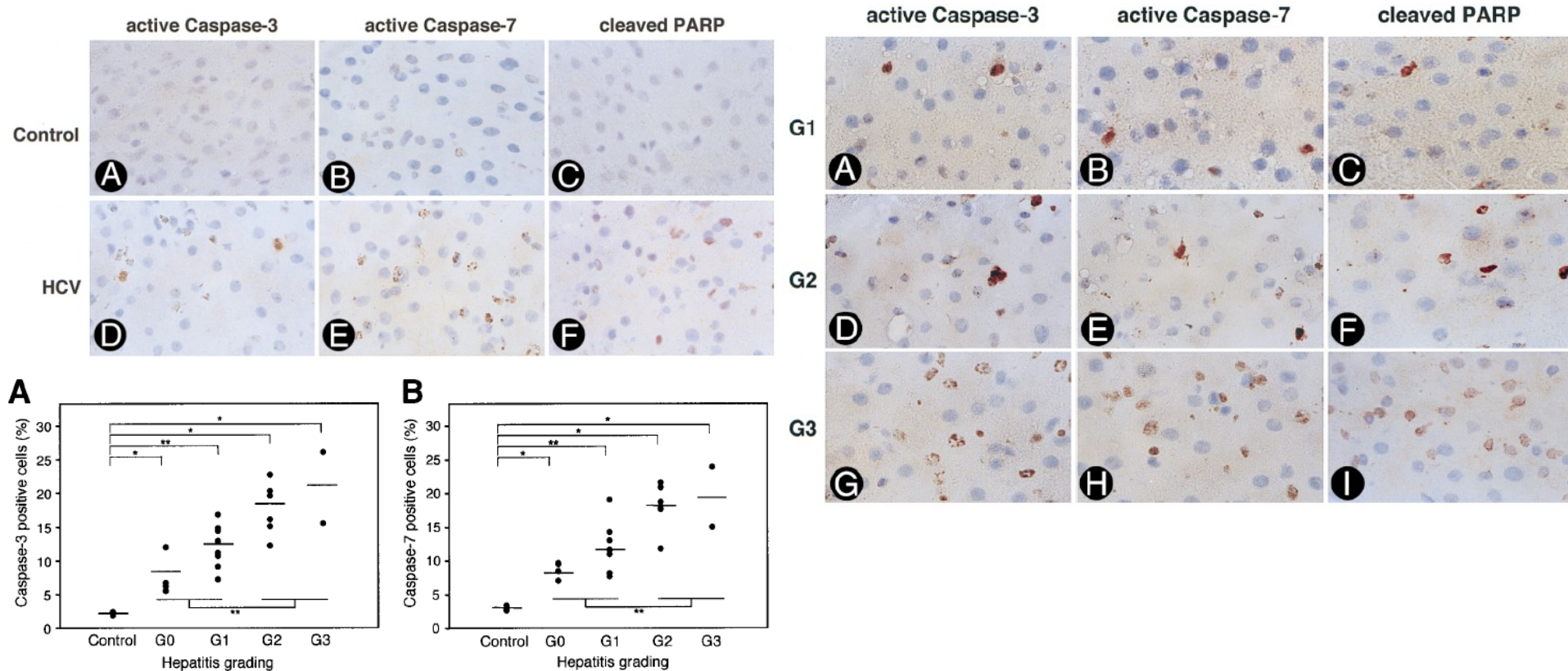
Erdtmann L et al. *J Biol Chem.* 2003;278(20):18256-64

Lee SH et al. *J Immunol.* 2005;175(12):8226-35

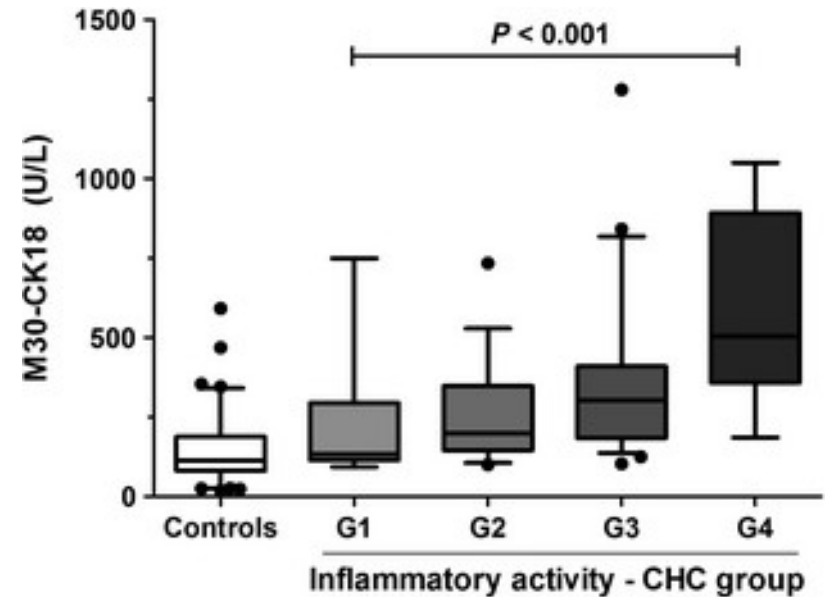
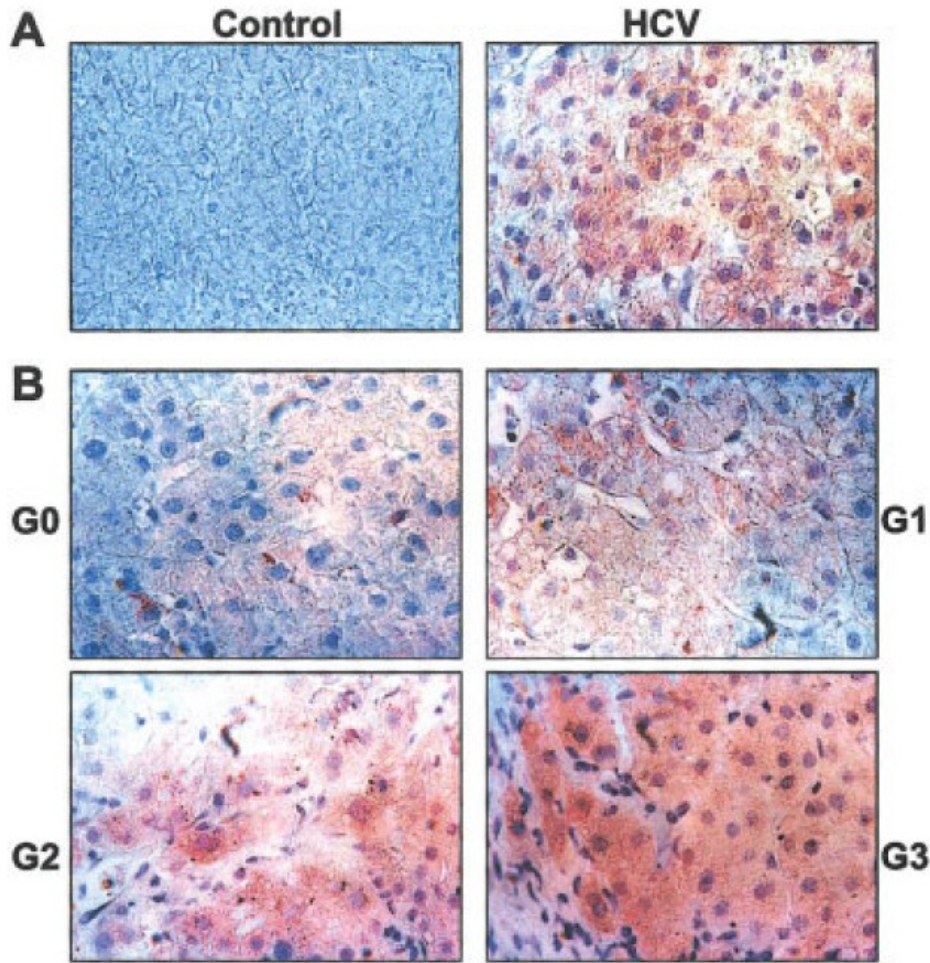
Kim H, Ray R. *Methods Mol Biol.* 2014;1155:125-32

Role of apoptosis in pathogenesis of HCV-associated liver inflammation

Apoptosis plays a critical role in HCV-associated liver injury



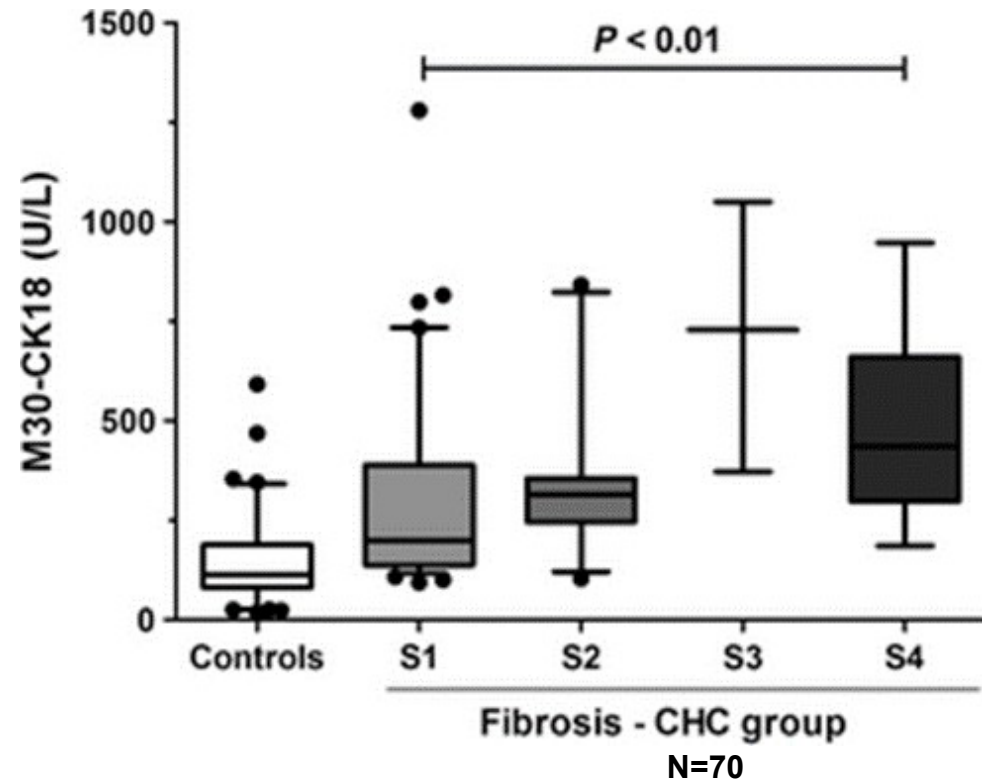
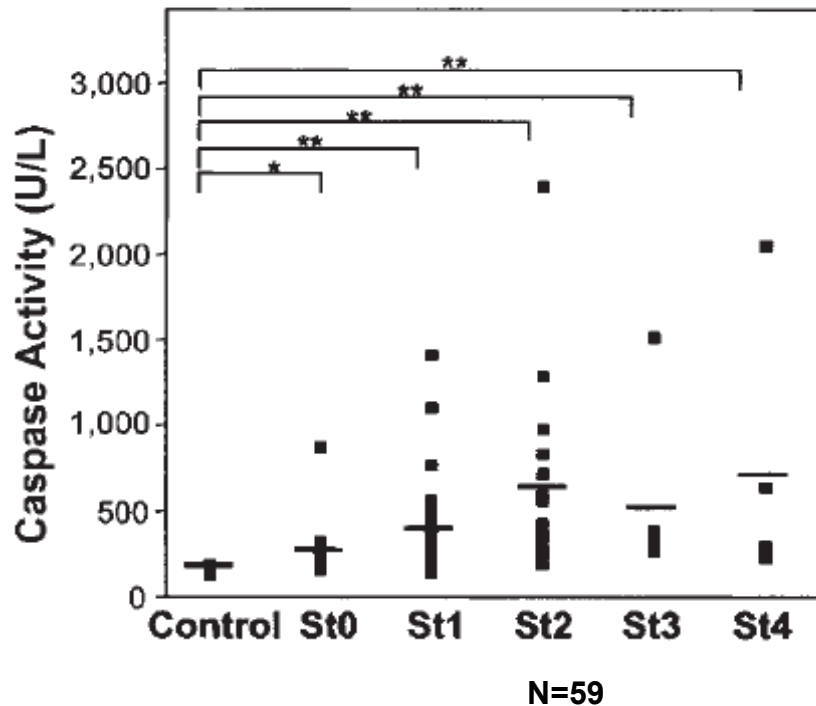
Role of apoptosis in pathogenesis of HCV-associated liver inflammation



Serum concentration of caspase-cleaved CK-18 epitope M30 and inflammatory activity in liver biopsies in CHC

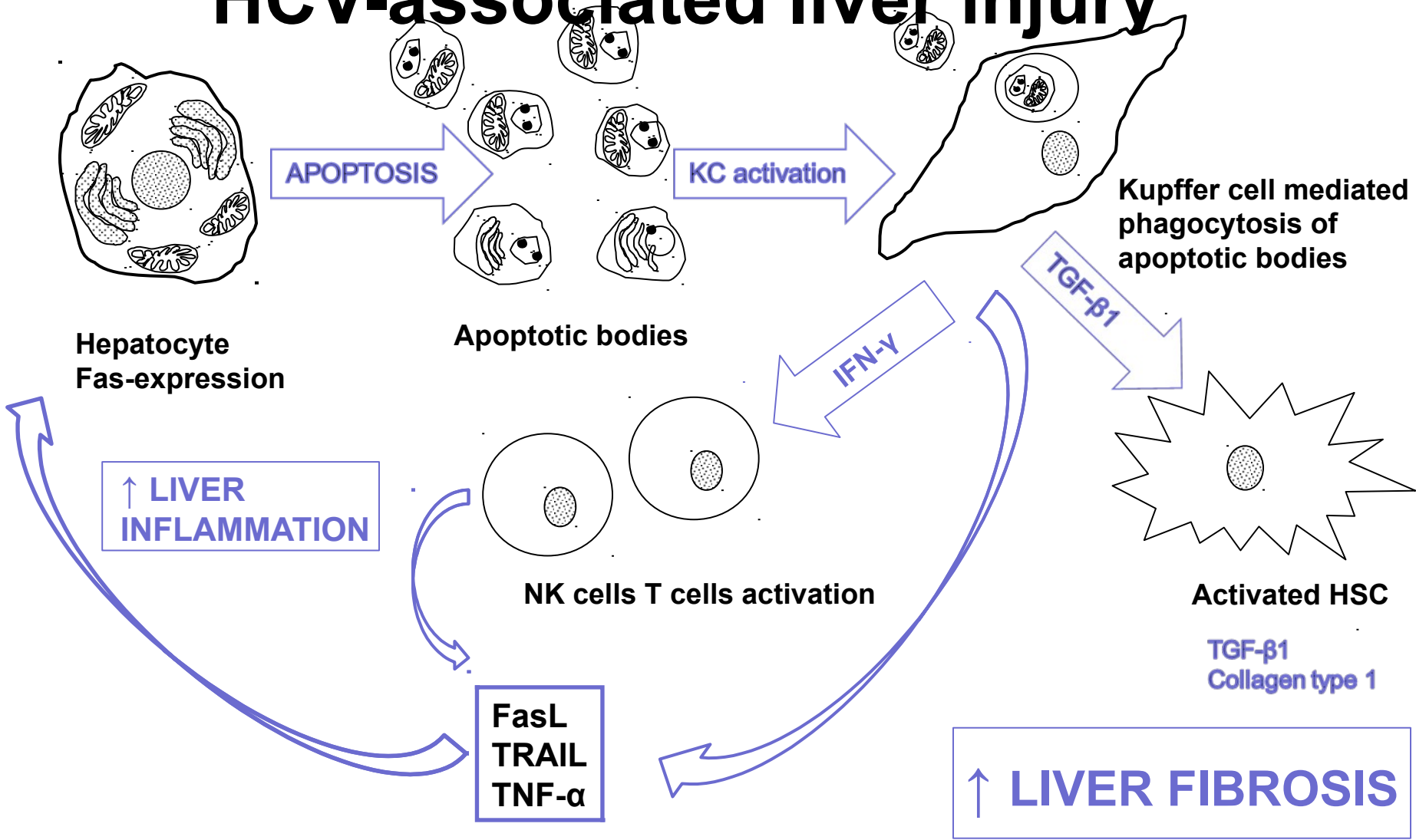
Detection of caspase-mediated CK-18 cleavage in HCV-infected liver biopsies.

Role of apoptosis in pathogenesis of HCV-associated hepatic fibrosis



Role of apoptosis in pathogenesis of

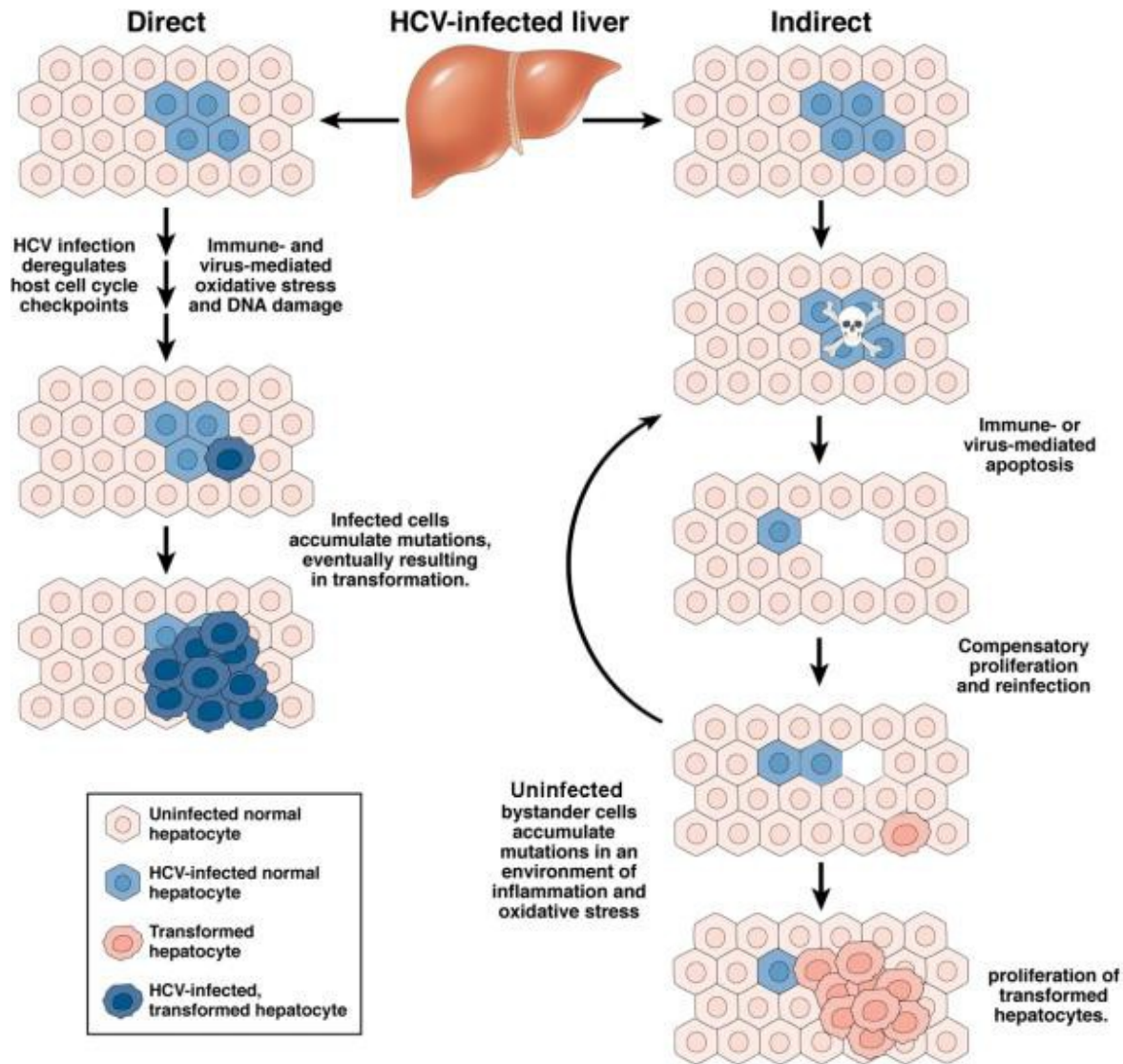
HCV-associated liver injury



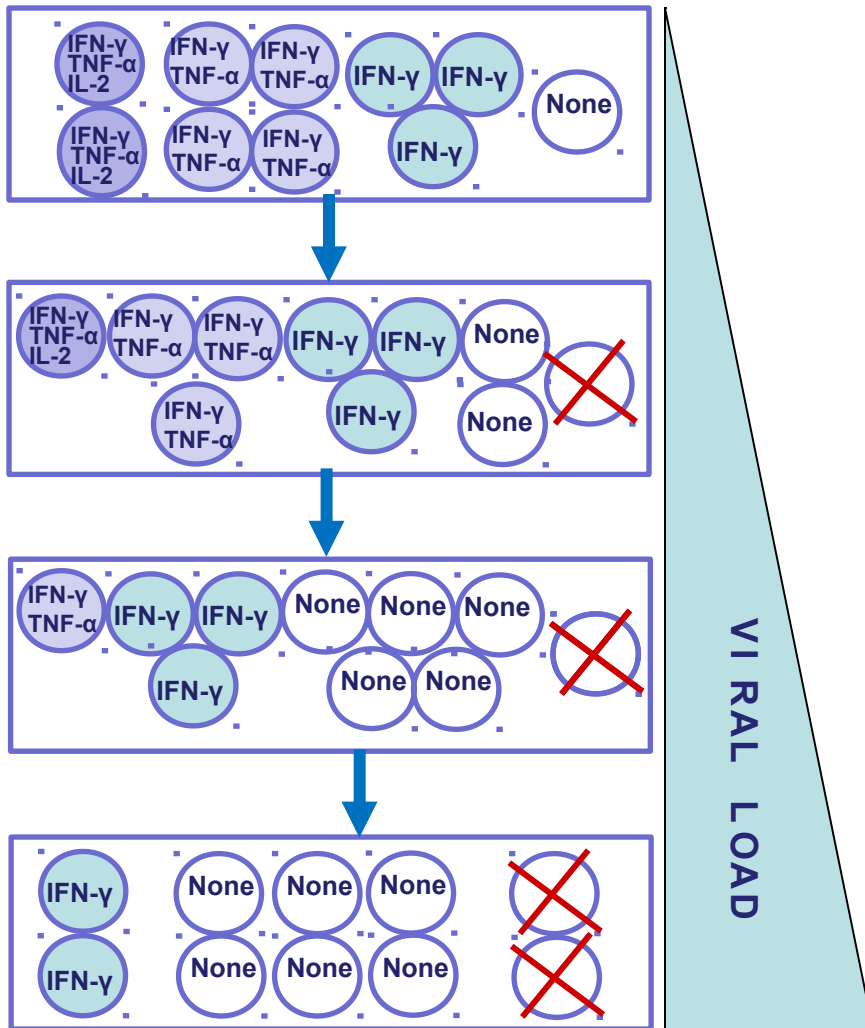
Stegmann KA et al. Gastroenterology. 2010;138(5):1885-97

Malhi H et al. Physiol Rev. 2010; 90(3): 1165–1194

Carcinogenesis in CHC



Apoptosis of lymphocytes in CHC



Increased susceptibility to apoptosis

CD4, CD8 T-cells:

- ROS increased in PBMC in CHC
- TRAIL, Fas expression upregulated in NK, CD4, CD8 T-cells
- increased downstream caspase activity
- In HCV-specific CD8+ T-cells:
 1. increased PD-1 expression
 2. increased annexin V expression
 3. increased frequency of caspase 9-mediated T-cell death within the liver
 4. significant functional deficits – phenomenon of T-cells exhaustion

Adapted from:

Yi JS et al. Immunology.2010;129(4): 474–81

Barathan M et al. Apoptosis. 2015;20(4):466-80

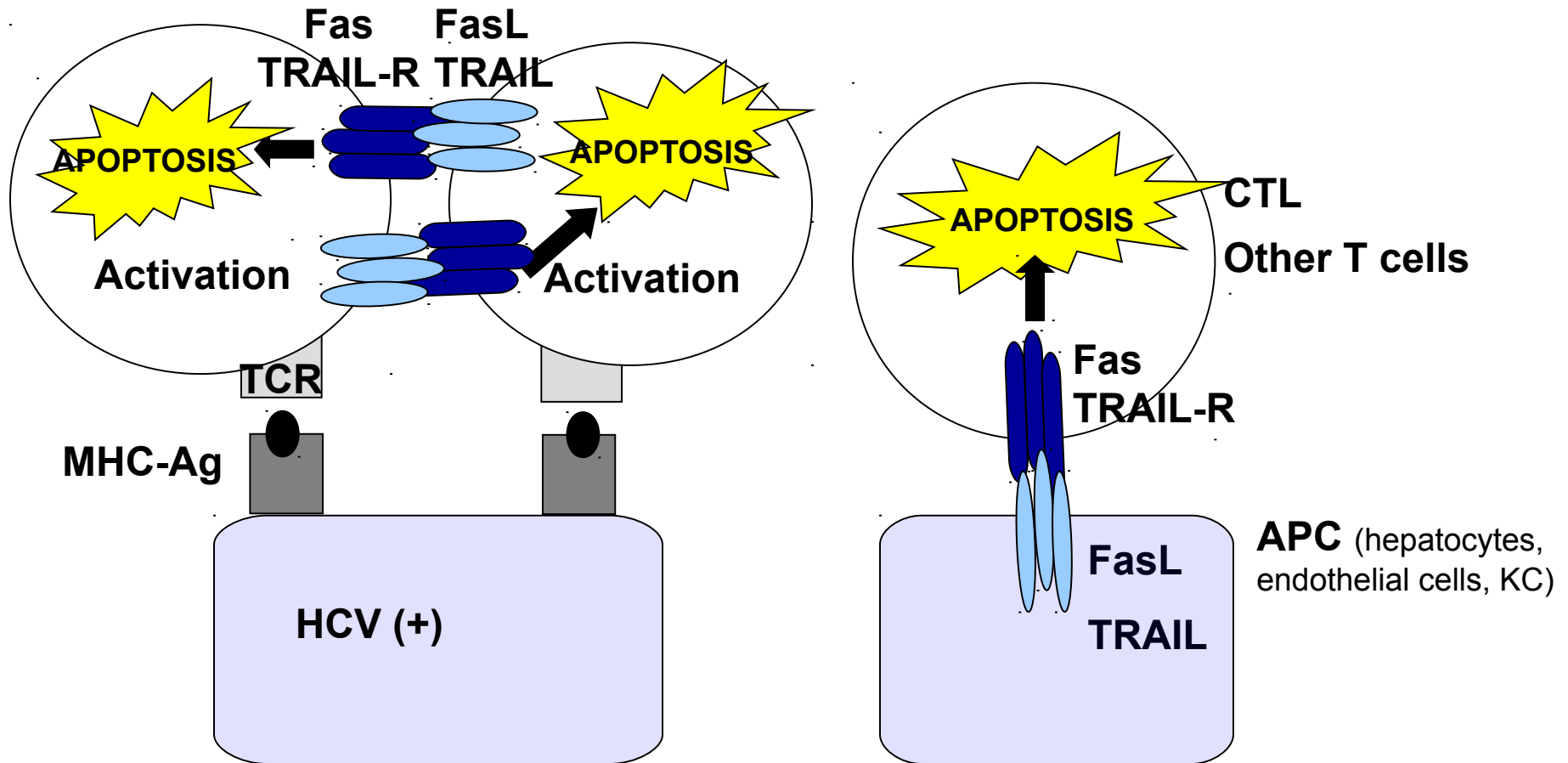
Panasiuk et al. Liver Int. 2010;30(3):472-8

Radziewicz H et al. J Virol. 2008;82(20):9808-22

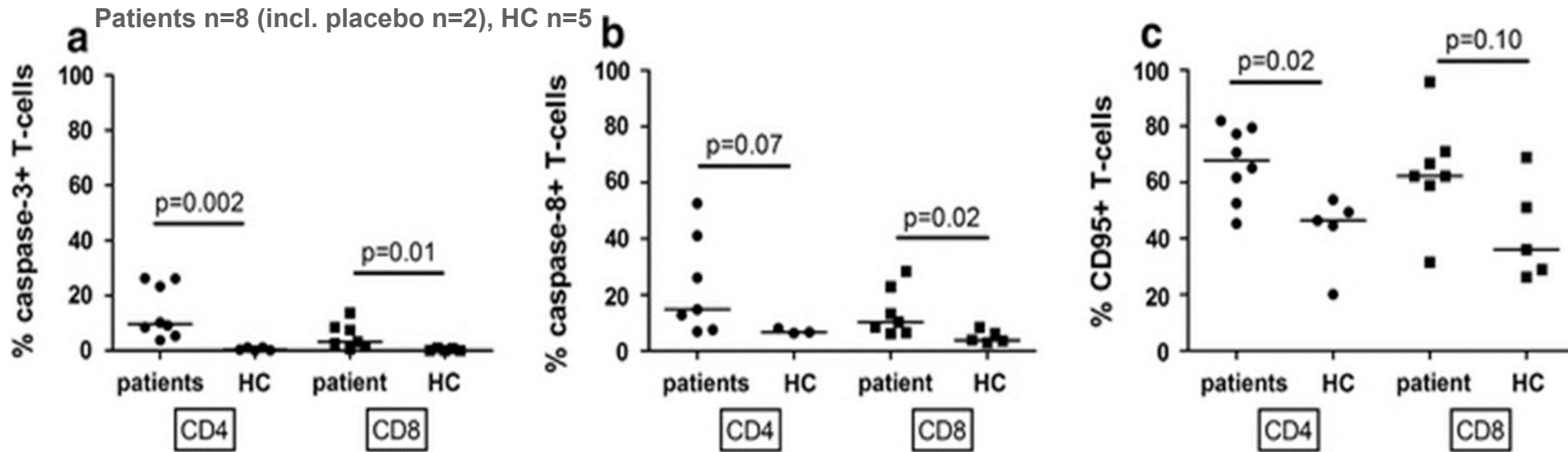
Penna A et al. Hepatology. 2007;45(3):588-601

Stegmann KA et al. Gastroenterology. 2010;138:1885-97

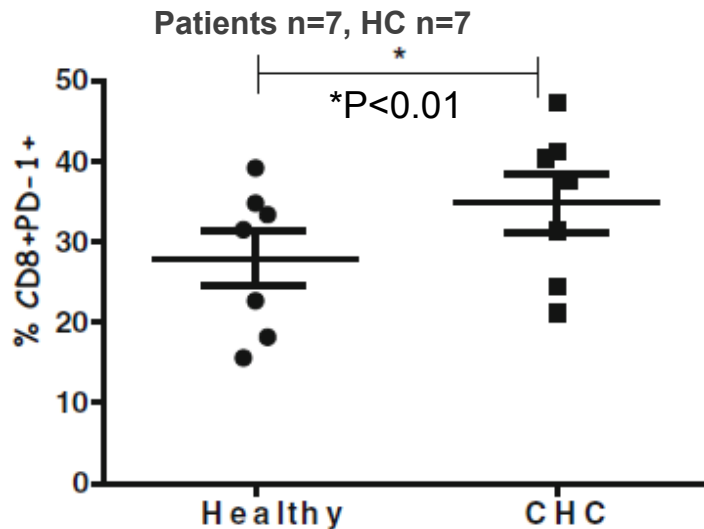
Apoptosis of lymphocytes in CHC



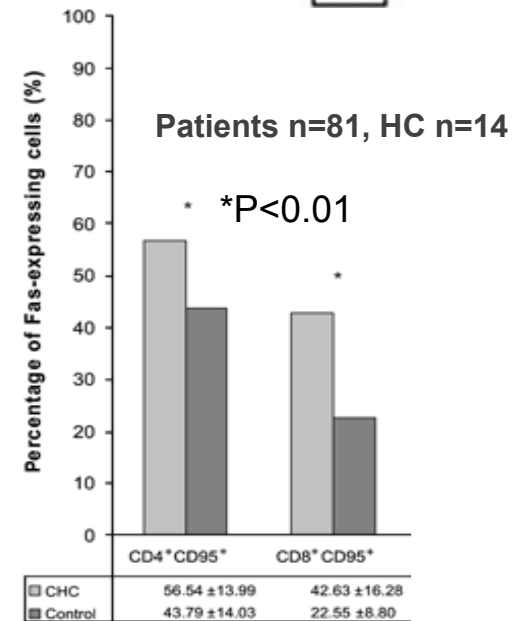
Apoptosis of lymphocytes in CHC



Arends JE et al. Apoptosis. 2011 Sep; 16(9): 959–966



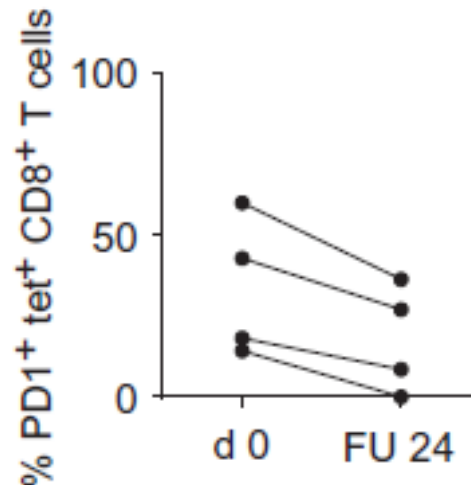
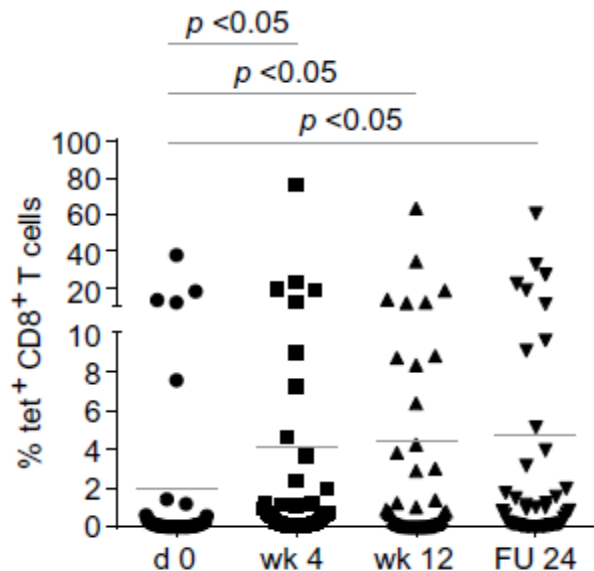
Barathan M et al. Apoptosis. 2015;20(4):466-80



Panasiuk et al. Liver Int. 2010;30(3):472-8

Effects of DAA treatment on T cells population

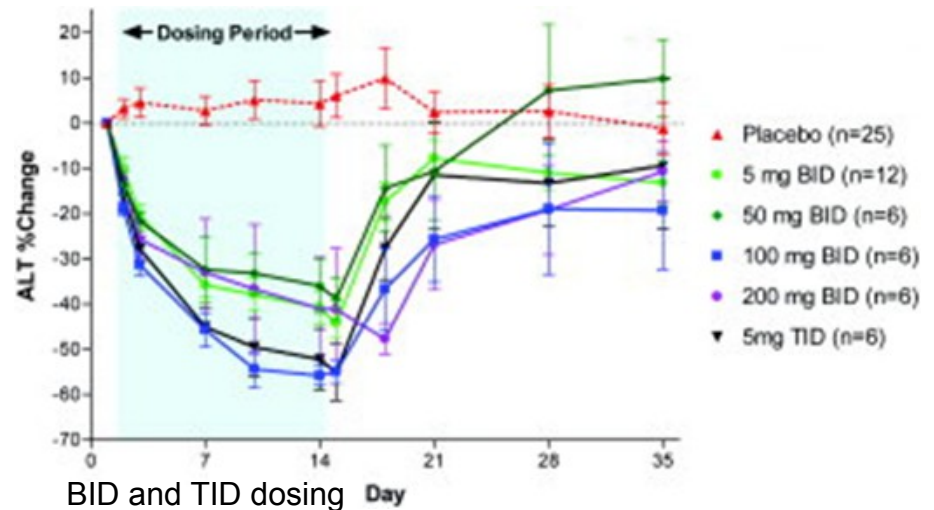
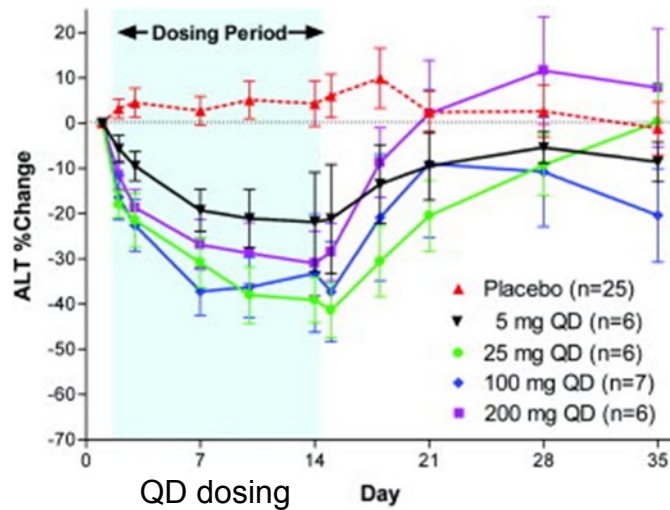
- 51 previously untreated chronically infected patients undergoing IFN-free therapy with a combination of faldaprevir (NS3/4A protease inhibitor) and deleobuvir (a non-nucleoside NS5B inhibitor) with or without ribavirin
- SVR12 n=28, failure n=13
- prompt restoration of HCV-specific CD8+ T cell proliferation under successful IFN-free therapy
- increase HCV specific responses after *in vitro* expansion per patient



Pancaspase inhibitors in HCV infection

Liver inflammation & fibrosis

- Oral emricasan (IDN-6556/PF-03491390), an antiapoptotic irreversible caspase inhibitor, lowers aminotransferase activity in patients with chronic hepatitis C
- CHC n=80,



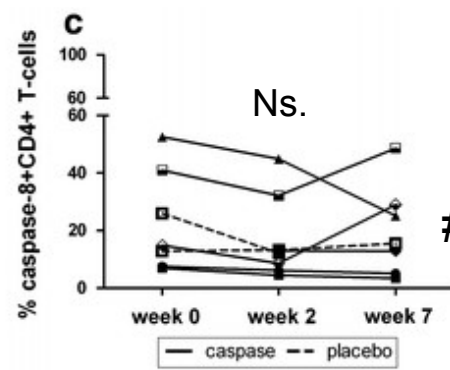
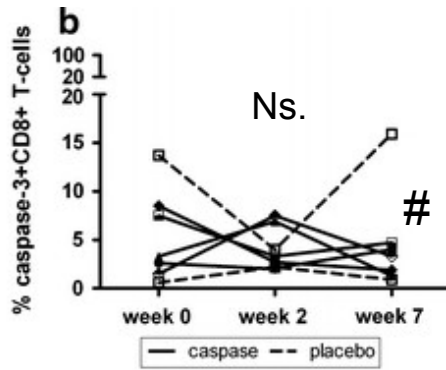
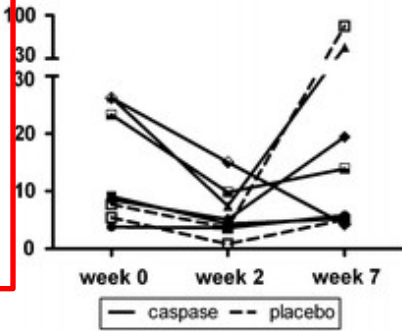
- mean ALT decrease 22-56%
- all HCV treatment groups above 5 mg QD were significantly different from placebo
- HCV-RNA levels remained stable within 1 log unit during the study

Longitudinal analysis of caspase-3 and CD95 expression in peripheral T-cells

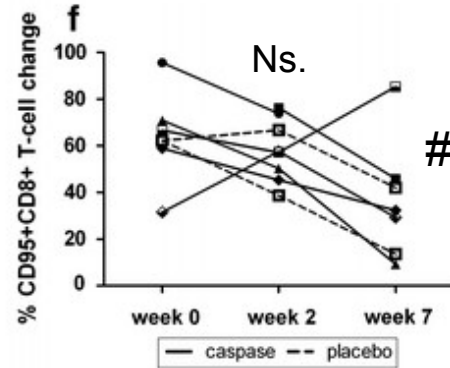
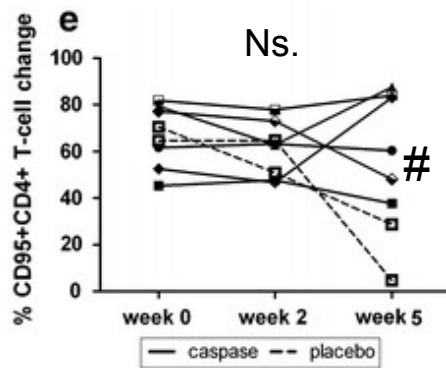
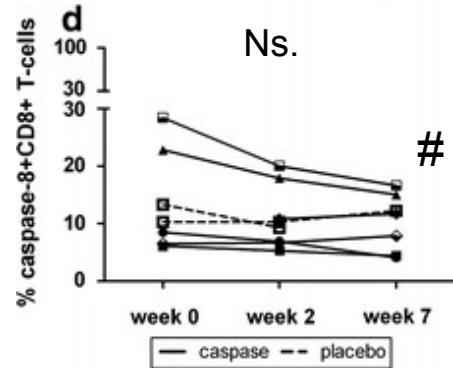
GS-9450 median (%), $P = 0.05$

16.2 6.3 9.9

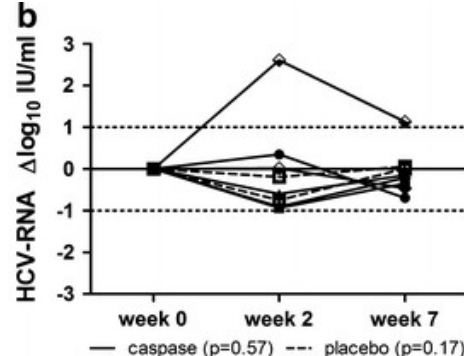
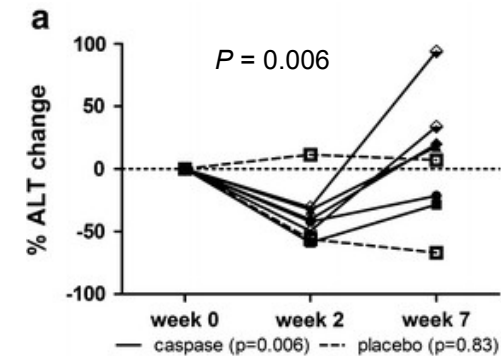
% caspase-3+CD4+ T-cells



Patients n=8
(incl. placebo n=2)
HC n=5



ns. GS-9450 vs. placebo



Treatment with low-doses of GS-9450 resulted in lower ALT-values, but did not affect either the HCV viral load or the peripheral T-cells apoptosis rates (caspase 3, caspase 8, Fas expression)

Conclusions

The phenomenon of apoptosis in CHC is responsible for liver inflammation and fibrosis, is substantial for cancer formation and facilitate immune evasion

DAA treatment allows to restore HCV-specific CD8 cells population and functionality of these cells (increased HCV specific responses and reduced expression of the markers of T cell exhaustion, e.g. PD-1) although further confirmation is necessary

Therapeutic interventions in apoptotic signalling are limited by a complex nature of apoptosis in CHC and seem to be most applicable in the future in patients with advanced fibrosis / cirrhosis who previously completed successful antiviral treatment