



Humoral immune response in acute, chronic, and asymptomatic hepatitis B virus infection

Jabbar Afat Alwan¹, Ali Anok Njum^{2*}

AL-Qadisiyah university, college of biotechnology, Department of agriculture biotechnology¹ AL-Furat AL-Awsat Technical University, Samawa technical institutes, Medical laboratory department²

Corresponding author: 2*



ABSTRACT— This study endeavors to appraise invulnerable particles CD45, CD74, cytokines TNF- B and IL-8 in patients infected with hepatitis B virus. An aggregate of (150) seropositive serum samples from patients infected with hepatitis B virus (HBV). Serum samples tested by ELISA assay to evaluate the concentration of cytokines and immune marks. Results showed that acute cases of disease express high level of cytokine and immune marks as compared with chronic and asymptomatic infection. Our study provided that acute hepatitis B Virus Infection causes high Immunological changes as compare with asymptomatic disease.

KEYWORDS: Immunity, CD Markers, cytokines and Hepatitis B Virus

1. INTRODUCTION

Hepatitis B infection is delegated an Orthohepadna infection (Genera) inside the family Hepadnaviridae [13]. This family Incorporate the hepatitis infection, the duck hepatitis infection DHBV, and a few other avian and mammalian variations. All hepadnaviridae have comparative hepatotropism and life cycles in their hosts HBV is the significant wellspring of non-stomach related hepatitis. The most widely recognized of HBV debasements are passed on by various technique for blood transferring and different courses as utilizing same needles, functional contact to blood [12].

In people having several blood transfering, like hemophilia or thalassemia patients, are generally at incredible risk of having HBV [2]. Both sexual and Pre-birth transmission are very rare. In any case, the track of pollution is cryptic in practically half of individuals having HBV Cytokines work as the atoms of guard response that outcome in various physiological functions and change the protective, provocative and fixing patient responses, and generally hid by mono and lymph cells. Cytokines from Immune system microorganisms act basically in the host reaction. Animated Lymphocytes characterized into (2) subcategories rendering cytokines fabricating [3]. Thymocytes partner 1 cytokines, similar to IL-2 and IFN-8, to prompt (Cell mediated immunity) reaction while T assistant - 2 cytokines as IL-10 and IL-4 are worried about AMI. The two reactions have been uncovered to relate in a viral infection [4] and the imbalance among them lean toward humoral immune responses and discouraged change CMI, that is fundamental for insusceptibility alongside sicknesses [5].

2. Materials & Methods

2.1 Patients

The project includes 150 hepatitis B virus, acknowledged at the clinic lab. and with yellowish color or signs and symptoms sensitive of critical and chronic HBV patients and showed seropositive for anti HBV

antibody.

2.2 Serum cytokine

cytokines were completed by ELISA test The previous concentration was articulated in pg/ml.

2.3 Statistical analysis

Was exhibited by expending Chi-square ($^{\chi}2$) examination to control the numerical variations between various collections by consuming an application statistical stand for social science (SPSS 19). The opportunity of ($P \le 0.05$) was restrained to be statistically important.

3. Results

3.1 Medical Remarks

From results showed most patients with HBV were communicated asymptomatic signs while different patients communicated intense signs (stomach cramp, jaundice, loss of hunger and fever) and uncommon patients were uncovered ongoing liver infection. Our outcomes uncovered the rehashed blood bonding and sort of thalassemia was assuming part in infection with HBV.

3.2 Cytokines

All serum tests were examined for IL-8and TNF-B by ELISA, showed profoundly huge increments (p<0.05) in serum level of HBV patients as contrasted and sound benchmark groups, intense HBV uncovered high just as, expansions in serum level of TNF-B significantly (p<0.05), while ongoing liver infection patients express high expansion in serum level of IL-8 significantly (p<0.05). Activated markers concentrate on uncovered high articulation of CD74 and CD-4 in HBV patients as contrasted and solid typical gatherings, where intense HBV patients were showed significantly (p<0.05) high articulation in CD74 and CD4 contrasted and other HBV patients.

Table (1) Medical marks for HBV.

NO.	Medical marks	Number	Percentage%
1	Acute sings	20	13.33
2	Chronic Liver disease	10	6.33
3	Chronic liver disease (asymptomatic signs)	120	80

Table (2) The level of IL-8.

Group	NO.	Serum level of IL-8		
		Mean	Minimum	Maximum



ISSN: 1343-4292 Volume 140, Issue 01, April, 2022

Asymptomatic	120	950	200	2300
Acute HBV	20	500	110	850
Chronic liver disease	10	1460	300	1500
Control	10	70	15	75
Total	160	Total	Low	High

Table (3) The Awareness of TNF-B.

Group	NO.	TNF-B		
		Mean	Minimum	Maximum
Asymptomatic	120	92	30	150
Acute HBV	20	600	350	700
Chronic liver disease	10	19	13	20
Control	10	13	6	15

Table (4) The Awareness of CD4.

Group	NO.	Serum level of CD4		
		Mean	Minimum	Maximum
asymptomatic	120	9	3.5	12
Acute HBV	20	13	12	15
Chronic liver disease	10	6	4	7
Control	10	2.5	0.6	5

Group Serum level of CD74 NO. Mean Minimum Maximum 120 8 4 12 asymptomatic Acute HBV 51 20 47 18 Chronic liver 10 13 9 14 disease Control 3 3 10 6

Table (5) The Awareness of CD74

4. Discussion

Cytokines are little dissolvable proteins delivered by invulnerable framework cells" which inward message invulnerability. Solubles act connecting receptors to "incite or forestall cytokine-controlled qualities". Through sickness, it influences infection reduce and harm [1]. Cytokines separated into: (a)" favorable to inflammatory cytokines growth putrefaction factor" the inception of supportive of incendiary cytokines is enacted by viral proteins and dsRNA from HBV [6] (b) (T helper)1 cytokines (interferon); (c) "Th2-type cytokine" stop past activity; (d) "Th17 cytokines" change "Th0 to Th17 cells" favorable to inflammatory [7] interleukin was accepted to portray lymphokines and monokines work on leukocytes". [6]. it influence others.

Interleukin-8, "attar protein", of blood monocytes, for movement and incitement perceived. It is essential for drawing in neutrophil during irritation, in spite of the fact that " creates the impression that IL-1 and TNF animate macrophage arrival of IL-8, which might clarify the capacity of IL-1 and TNF to prompt neutrophilic penetrate" [9].

Discovered working in numerous disease," HBV N S5A protein instigates IL-8 articulation, went with IFN-alpha inhibition, CD74 is an essential film protein; with N-terminal cytoplasmic tail equivalent 28 aa then a solitary 24 amino acids transmembrane piece and around 150-aa lumenal space. The CD74 fasten was thought to work essentially as a MHC class II chaperone, which advances emergency room exit of MHC class 2 particles, drives them to endocytic segments, keeps away from peptide restricting in the lumen center, and gives peptide altering over MHC - 2. Then again, notwithstanding its capacity as a chaperone particle, CD74 these days consider as an adornment flagging atom. CD74 was believed to be a high-liking restricting protein for the supportive of fiery cytokine, macrophage (MIF), giving more proof to its part in signal transduction ways. it adjusts "B cell collection" [8], by a pathway of NF-B p6 5/Rel A homodimer and its co-activator to enact record intervened, (TA FII105) [10].

5. Conclusions

This study concluded that there is a relationship between Immunological responses and pathological changes of liver in Hepatitis B Virus Infection patients

6. Acknowledgment

We would like to acknowledge all people in Samawa public health who provided assistance in manuscript preparation and offered funding for this research.

ISSN: 1343-4292 Volume 140, Issue 01, April, 2022

7. References

- [1] Rossi, C., Shrier, I., Marshall, L., Cnossen, S., Schwartzman, K., Klein, M. B., Greenaway, C. (2012). Seroprevalence of chronic hepatitis B virus infection and prior immunity in immigrants and refugees: a systematic review and meta-analysis. PloS one, 7(9), e44611.
- [2] Rui, L., Y. Dan, T. Chunlin, Z. Lin, L. Haitao and G. Deyu (2017). "Comparison of the diagnostic value of hepatocellular carcinoma≤ 3 cm in diameter in patients with chronic liver disease between contrast enhanced ultrasound and gadolinium diethylene-triamine-pentaacetic acid-enhanced magnetic resonance imaging." Chinese Journal of Medical Ultrasound (Electronic Edition) 14(5): 386-393.
- [3] Sagnelli, C., Ciccozzi, M., Pisaturo, M., Lo Presti, A., Cella, E., Coppola, N., & Sagnelli, E. (2015). The impact of viral molecular diversity on the clinical presentation and outcome of acute hepatitis B in Italy. New Microbiol, 38(2), 137-147.
- [4] Sakamoto, T., Tanaka, Y., Orito, E., Clavio, J., Sugauchi, F., Ito, K., Sollano, J. (2006). Novel subtypes (subgenotypes) of hepatitis B virus genotypes B and C among chronic liver disease patients in the Philippines. Journal of general virology, 87(7), 1873-1882.
- [5] Terrault, N. A., Lok, A. S., McMahon, B. J., Chang, K. M., Hwang, J. P., Jonas, M. M., Wong, J. B. (2018). Update on prevention, diagnosis, and treatment of chronic hepatitis B: AASLD 2018 hepatitis B guidance. Hepatology, 67(4), 1560-1599.
- [6] Wang, J. (2013) Lnetwork: an efficient and effective method for constructing phylogenetic networks. Bioinformatics, 29, 2269–2276.
- [7] Wang, Y.-Z., G.-X. Wu, L.-B. Luo, M. Chen and L.-H. Ruan (2007). "Oligonucleotide chip, real-time PCR and sequencing for genotyping of hepatitis B virus." World Journal of Gastroenterology: WJG 13(31): 4260.
- [8] Ward, J. W. and P. Van Damme (2018). Hepatitis B Vaccines. Hepatitis B Virus and Liver Disease, Springer: 91-117.
- [9] Watashi, K., Urban, S., Li, W., & Wakita, T. (2014). NTCP and beyond: opening the door to unveil hepatitis B virus entry. International journal of molecular sciences, 15(2), 2892-2905.
- [10] Yip W-K, Cheng AS-L, Zhu R, Lung RW-M, Tsang DP-F, Lau SS-K, et al.(2011). Carboxylterminal truncated HBx regulates a distinct microRNA transcription program in hepatocellular carcinoma development. PLoS One.;6:e22888.
- [11] Zekri, A.-R. N., M. M. Hafez, N. I. Mohamed, Z. K. Hassan, M. H. El-Sayed, M. M. Khaled and T. Mansour (2007). "Hepatitis B virus (HBV) genotypes in Egyptian pediatric cancer patients with acute and chronic active HBV infection." Virology journal 4(1): 74.
- [12] Zhang, Q., & Cao, G. (2011). Genotypes, mutations, and viral load of hepatitis B virus and the risk of hepatocellular carcinoma: HBV properties and hepatocarcinogenesis. Hepatitis monthly, 11(2), 86.
- [13] Zoulim, F., Testoni, B., & Lebossé, F. (2013). Kinetics of intrahepatic covalently closed circular DNA

and serum hepatitis B surface antigen during antiviral therapy for chronic hepatitis B: lessons from experimental and clinical studies. Clinical Gastroenterology and Hepatology, 11(8), 1011-1013.



This work is licensed under a Creative Commons Attribution Non-Commercial 4.0 International License.