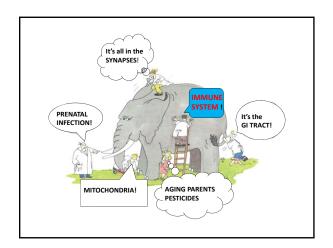
ASD: NEUROINFLAMMATION --OR IMMUNE DYSREGULATION?

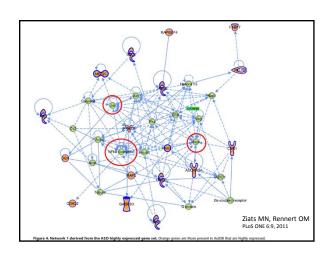
Andrew W. Zimmerman, MD UMass Memorial Medical Center **UMass Medical School** Worcester, MA, USA A.R.I. Webinar June 11, 2014

Financial Disclosures: None



OUTLINE

- •Review immune findings in Autism Spectrum Disorder
 - •Immunogenetics: gene expression profiles, HLA
 - •Maternal and child autoantibodies: causes or effects?
 - •Microglial activation: neurotoxic or neuroprotective?
- •Neuroglial functions: a broader perspective
- •Prenatal insults: reprogramming -- arrested development?
- •Immunomodulatory therapies Rx at which level?
- •Cellular metabolic and synaptic dysfunction: the "fever effect"



Pediatric Neurology 2006;35:303-307

HLA-DR4 in Families With Autism

Li-Ching Lee, PhD, Andrea A. Zachary, PhD, Mary S. Leffell, PhD, Craig J. Newschaffer, PhD, Karla J. Matteson, PhD, John D. Tyler, PhD, and Andrew W. Zimmerman, MD

Odds Ratio (C.I.)

DR4 - Tennessee Mothers: 5.54 (1.74, 18.67) Fathers: 1.57 (0.44, 5.42) Children: 4.20 (1.37, 13.27)

AGRE (USA) Mothers: 1.10 (0.47, 2.49)

Fathers: 0.94 (0.40, 2.20)Children: 0.94 (0.40, 2.20)

| Cytokines-plasma of children | | |
|---|---|--|
| Study Description | Reference | |
| Elevated levels of IL-1b, IL-6, IL-8 and IL-12p40. Associated with regression | (Ashwood, et al., 2011b) | |
| Increase in chemokine MCP-1, Rantes and Eotaxin levels in ASD subjects compared to age-matched typically developing controls. An association between increases chemokines levels with aberrant behaviors. | (Ashwood et al., 2011c) | |
| In male ASD subjects, an increase in cytokines IL-1beta, IL-1RA, IL-5, IL-8, IL-12(p70), IL-13, IL-17 and GRO-alpha. | (Suzuki et al., 2011) | |
| Increase in leptin levels in ASD subjects compared to age- matched controls. | (Ashwood et al., 2008b) | |
| Increase in macrophage migration inhibitory factor (MIF) in ASD subjects compared to age-matched controls. | (Grigorenko et al., 2008) | |
| Decrease in TGF-beta in subjects with ASD compared to controls. | (Ashwood et al., 2008a; Okada et al., 2007) | |
| Increase in IL-12 and IFN-gamma in ASD subjects compared to age-matched controls. | (Singh, 1996) | |

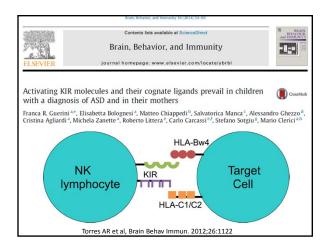
| Cytokine/Chemokines- activated cells | | |
|---|------------------------------|--|
| Study Description | Reference | |
| In isolated PBMCs stimulated with PHA, increase in GM-CSF, TNF-alpha and IL-13 . A decrease in IL-12(p40) in ASD subjects vs. controls. | (Ashwood et al., 2011d) | |
| Stimulation of TLR on monocytes - ASD vs. to age-matched controls. Increase in IL-1beta, IL-6, TNF-alpha, with stimulation of TLR2. Increase in IL-1beta, with stimulation of TLR4. Decrease in IL-1beta, IL-6, GMCSF, TNF-alpha with TLR9. | (Enstrom et al., 2010) | |
| Increase in IFN-gamma in NK cells from subjects with ASD. | (Enstrom et al., 2009b) | |
| Increase production of cytokines from Th1 and Th2 cytokines in ASD subjects vs age-matched controls. | (Molloy et al., 2006) | |
| Increase in IL-12 and TNF-alpha in ASD subject with GI symptoms. | (Jyonouchi et al., 2005) | |
| Increase in IFN-gamma and TNF-alpha in isolated PBMCs from ASD subjects compared to age-matched controls stimulated with LPS. | (Jyonouchi et al., 2002) | |
| Unstimulated whole blood from ASD vs. age-matched controls – increase in IFN-gamma and IL-1RA with -higher IL-6 and TNF-alpha. | (Croonenberghs et al., 2002) | |
| Unstimulated PBMC- ASD subjects: higher levels of TNF-alpha , IL-1beta , and IL-6 vs. controls. PBMCs stimulated with LPS, PHA and tetanus produced increase levels of IL-12 and IL-1beta . | (Jyonouchi et al., 2002) | |

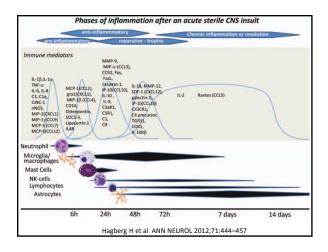
T cells in Autism

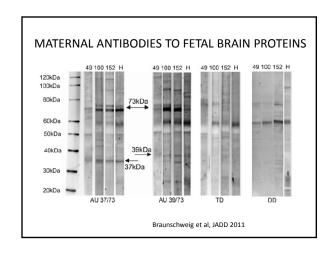
- When peripheral blood T cells were stimulated, GM-CSF, TNFα, and IL-13 were significantly increased whereas IL-12p40 was decreased in ASD relative to TD controls.
- Increased pro-inflammatory or TH1 cytokines were associated with greater impairments in core features of ASD as well as aberrant behaviors.
- In contrast, production of GM-CSF and TH2 cytokines were associated with better cognitive and adaptive function.

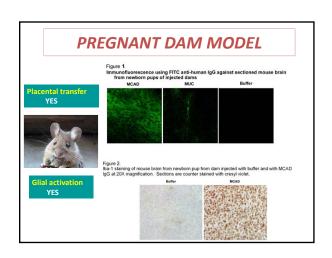
Ashwood P, Krakowiak P, Hertz-Picciotto I, Hansen R, Pessah IN,

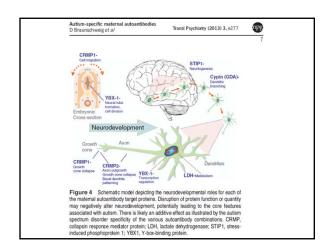
Van de Water, J. Brain Behav Immun, 2010



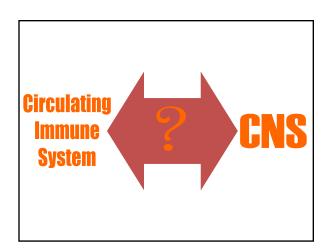


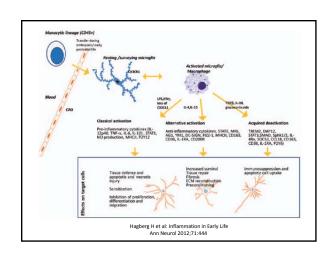


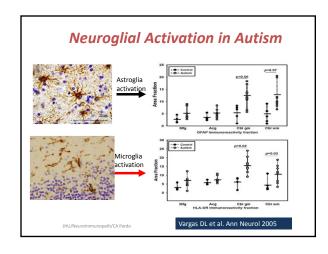


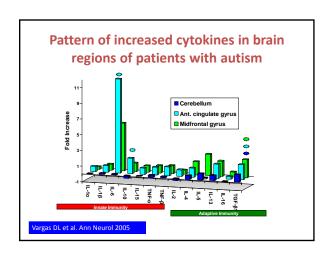


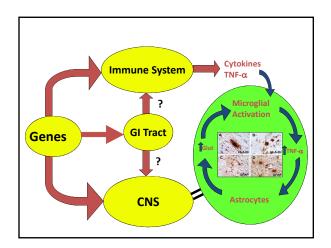
Intense Golgi cell staining in ~21% of patients with ASD compared with 0% of normal controls (BBI, 2008). This staining pattern correlates with a ~52 kDa protein by blot (Wills et al, 2008). In addition to antibodies against the cerebellum, there is intense reactivity to proteins in the thalamus and hypothalamus (Cabanlit et al, ANYAS, 2007).

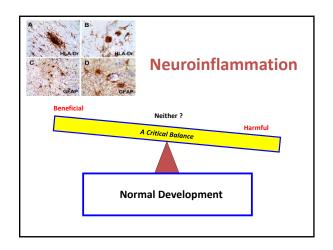




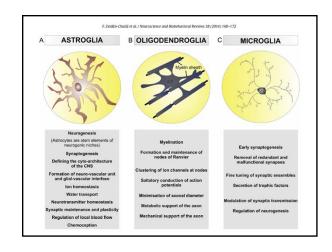


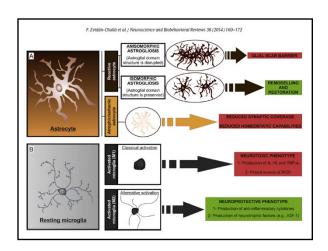


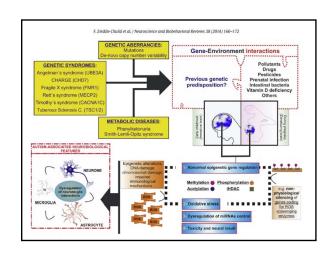


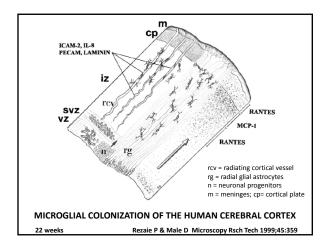


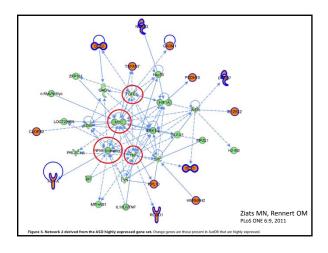












Immune-related prenetal risk factors Immune effects on neurodevelopment on brain and behavior Immune-related prenetal risk factors Immune interactions on brain and behavior Immune effects on neurodevelopment on brain and behavior Reaccommune abnormalizes Prophete immune activates Maternal indicardizooly production Maternal indicardizooly producti

IMMUNOMODULATION? • IVIG • Prednisone • Minocycline • Pioglitazone • Infliximab • Experimental models? - VPA - fraX mice - Bone marrow transplant - Stem cells

30 children with autism, with fever; 30 age-matched with autism, afebrile. Overall, 83% of children improved on at least one domain of the A.B.C. during fever: irritability, stereotypy, hyperactivity, and inappropriate

Curran LK et al, Pediatrics 2007

speech.

Fever in Children with Autism

Results: Mean ABC Subscale Scores and RM-ANOVA Findings (n=30 pairs)

Irritability

Stereotypy

Lethargy

P-0.005

P-0.005

P-0.001

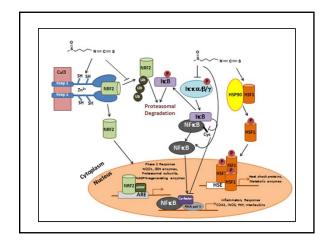
P-0.003

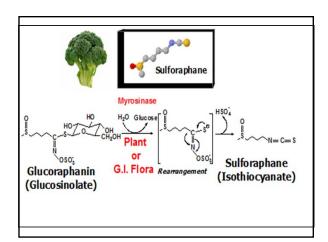
Fever

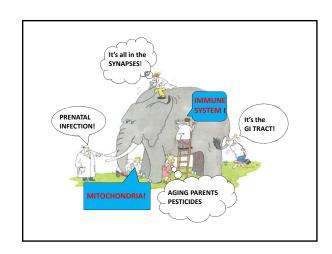
Control

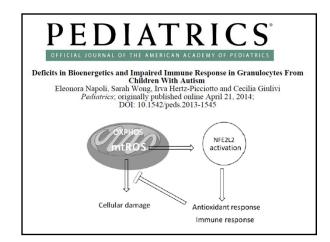
Biochemical and Metabolic Abnormalities in ASD Compared to Neurotypical Children

- Oxidative Stress Increased and Antioxidant Enzymes Lower
- Total Glutathione Levels are Lower
- Ratio of Oxidized to Reduced Glutathione Levels is Higher
- Capacity for Reducing Glutathione is Impaired
- Enhanced Lipid Peroxidation
- Increased Neuroinflammation in Selected Brain Regions Elevated NO Synthesis
- Impaired Mitochondrial Function and Energy Generation
- Nrf2 Levels are Depressed and Genes under its Control are Lower









Metabolism of Granulocytes in Children with ASD ASD Neurotypical development Resting O₂ Uptake 0.38±0.09 1.1±0.3 .05 **NADH Oxidase** 4.6±3.1 .01 10.9±4.9 Succinate Oxidase 1.6±1.2 5.2±2.0 .001 **ATPase** 46±28 123±54 .005 Nrf2 Gene Express Level 0.45±0.01 1.00±0.03 .01 [nmol x (min x mg protein)-1] (Napoli et al, Pediatrics 2014)

POSSIBLE CAUSES OF NEUROINFLAMMATION AND IMMUNE DYSREGULATION IN AUTISM

- A. EXOGENOUS: e.g., infections, valproate, "environmental factors"
- **B. AUTOIMMUNE ACTIVATION**
- C. ALTERED (IMMUNE) GENE EXPRESSION AND BRAIN DEVELOPMENT
- D. CELLULAR METABOLIC DYSFUNCTION
- E. All of the above.



COLLABORATORS

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Kanwaljit Singh