

Imunidade aos microrganismos: Malária

Disciplina integrada: Microbiologia, Imunologia e Parasitologia

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Resposta imune à malária???

nature
immunology

REVIEW

Immunity to malaria: more questions than answers

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frontiers | Frontiers in Immunology

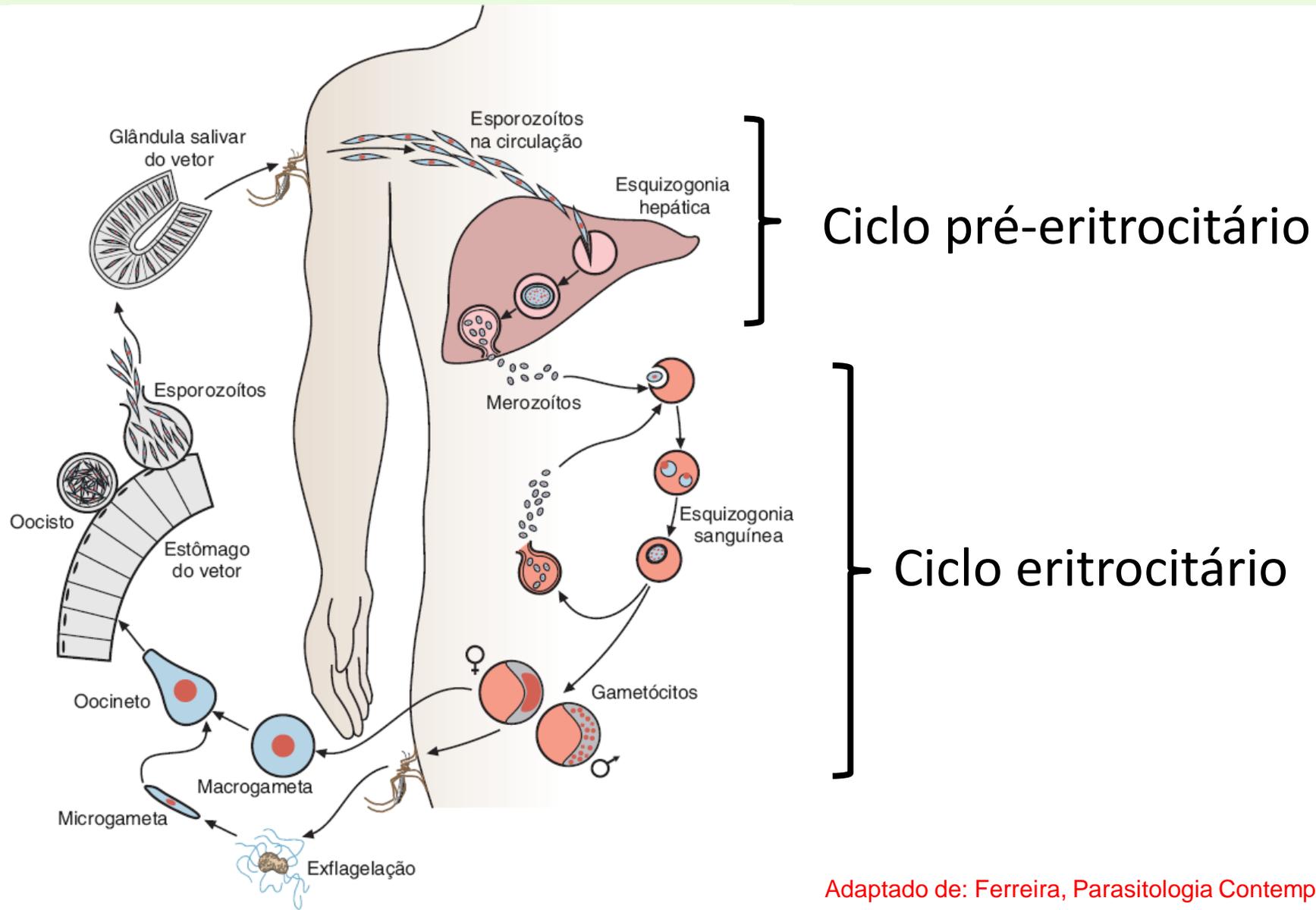
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Innate immunity to malaria: The good, the bad and the unknown

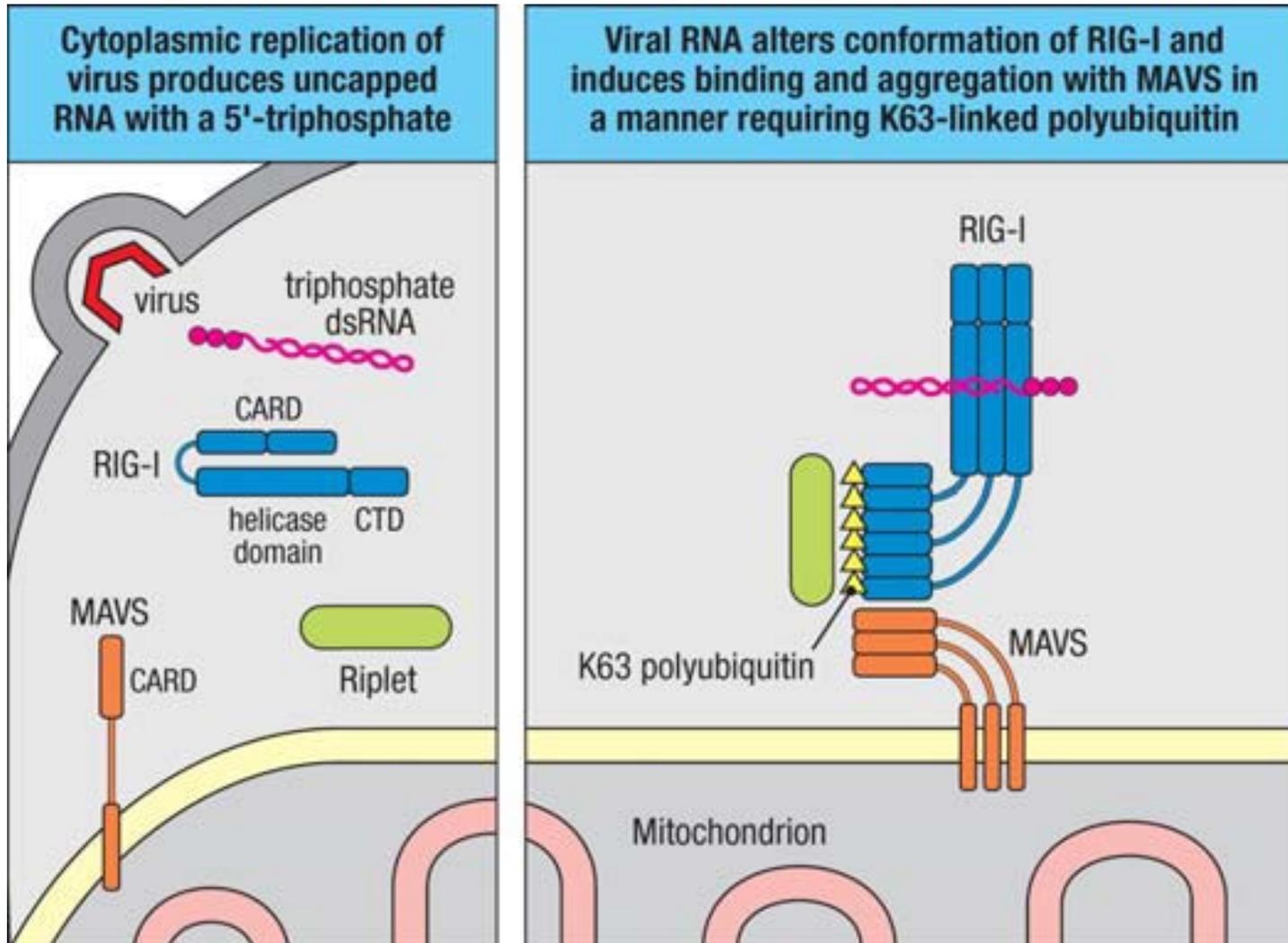
Kai Pohl^{1,2} and Ian A. Cockburn^{2*}

- Múltiplas espécies de *Plasmodium*.
- Diferentes formas do parasita.
- Diferentes manifestações da doença.
- Complexa relação de adaptabilidade entre patógeno e hospedeiro.

Ciclo do *Plasmodium* no hospedeiro vertebrado



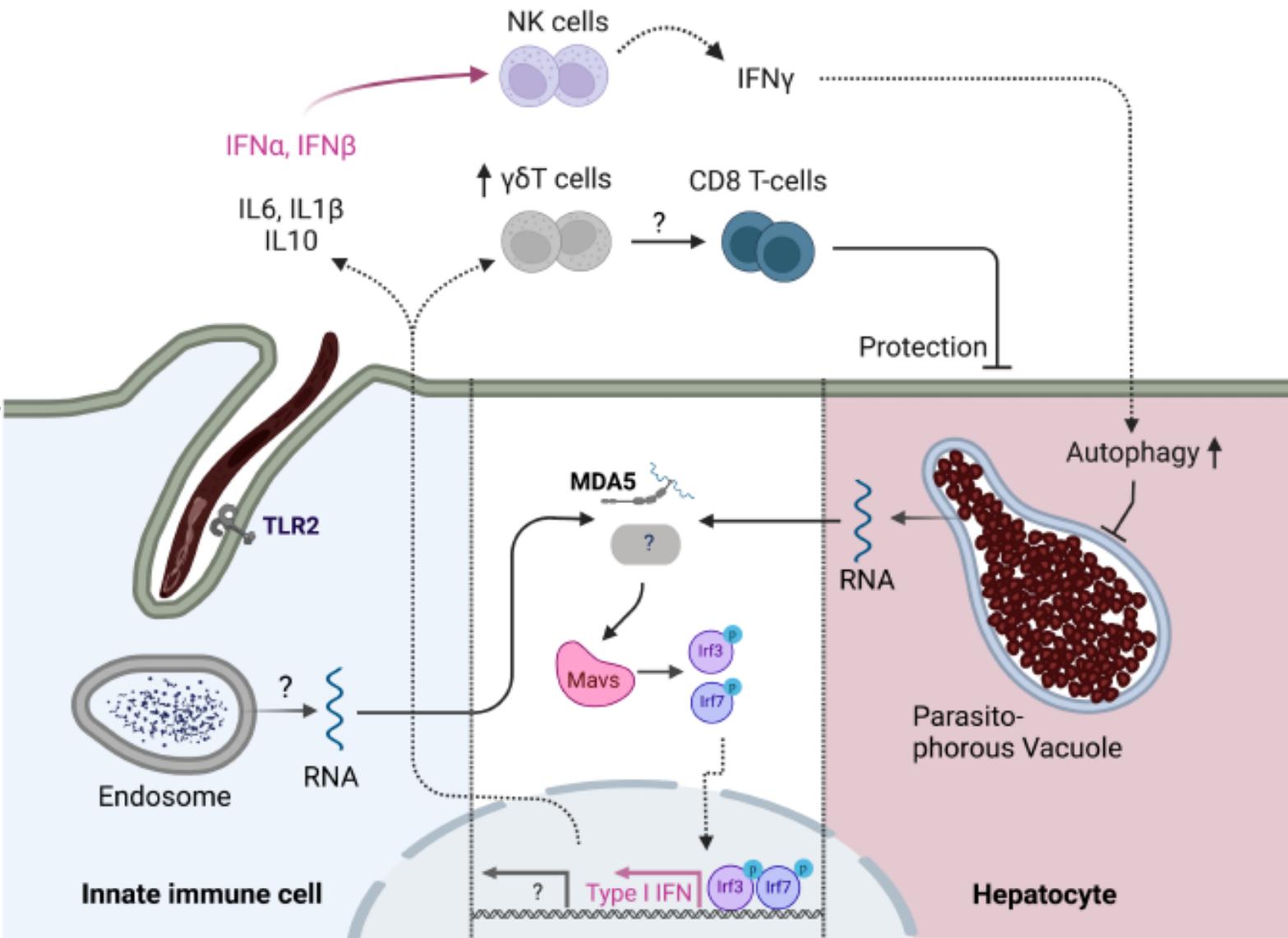
Receptores RIG-I (RIG-I like receptors - RLRs)



RIG-I, MDA5 – Detectam RNA de fita simples, RNA de dupla fita ou RNA complexado a DNA no citosol.

MAVS – RIG-I/MDA-5 ativados sinalizam via MAVS para induzir sinalização via IRF3 e IRF7 e induzir transcrição de IFN do tipo I.

Ativação de imunidade inata durante a fase pré-eritrocítica

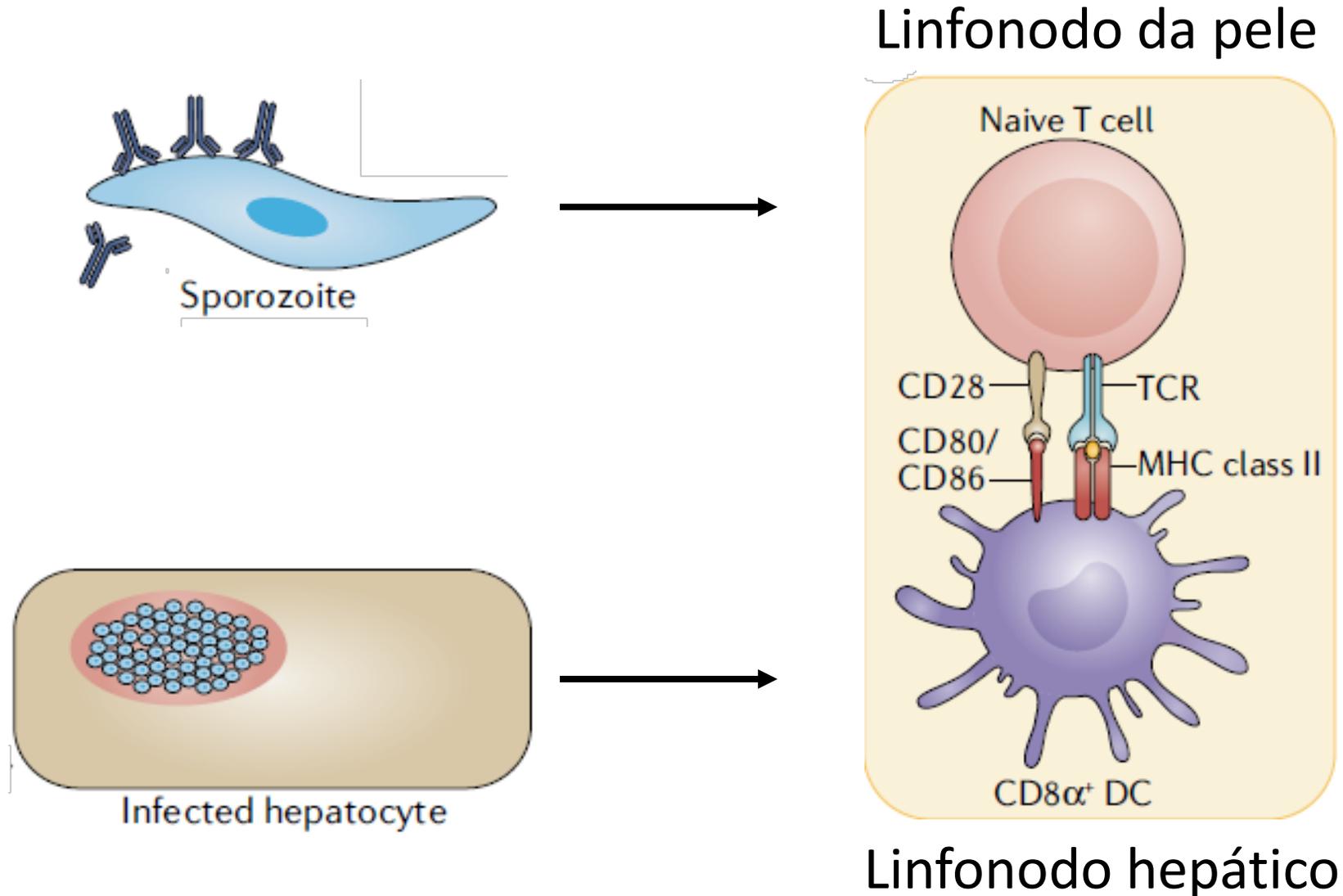


- RNA de esporozoítos e esquizontes hepáticos ativam MDA-5 (família RIG-I) – MAVS – produção de IFN do tipo I

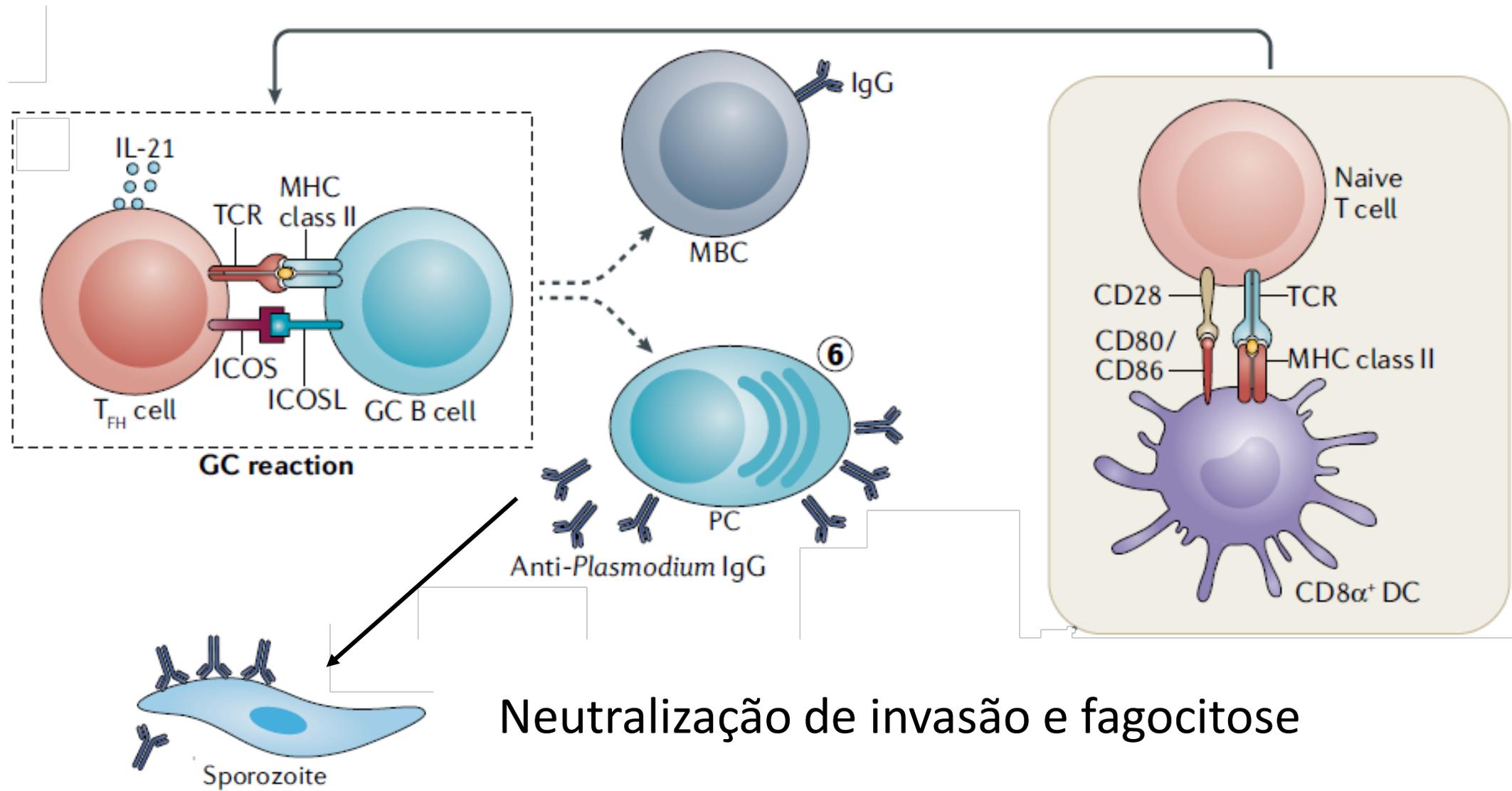
- Ativação de células NK – produção de IFN-gama – ativação de fagócitos (mecanismos microbicidas) e hepatócitos (autofagia).

- TLR2 – IL-6 e TNF - inflamação

Ativação de imunidade adaptativa durante a fase pré-eritrocítica



Imunidade humoral – fase pré-eritrocítica



Vacina anti-malária



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Malaria vaccine implementation programme

- RTS/S

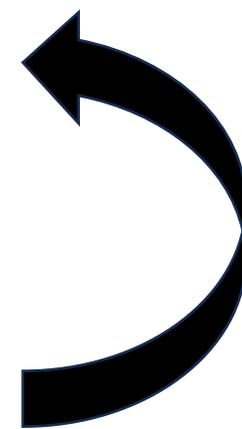
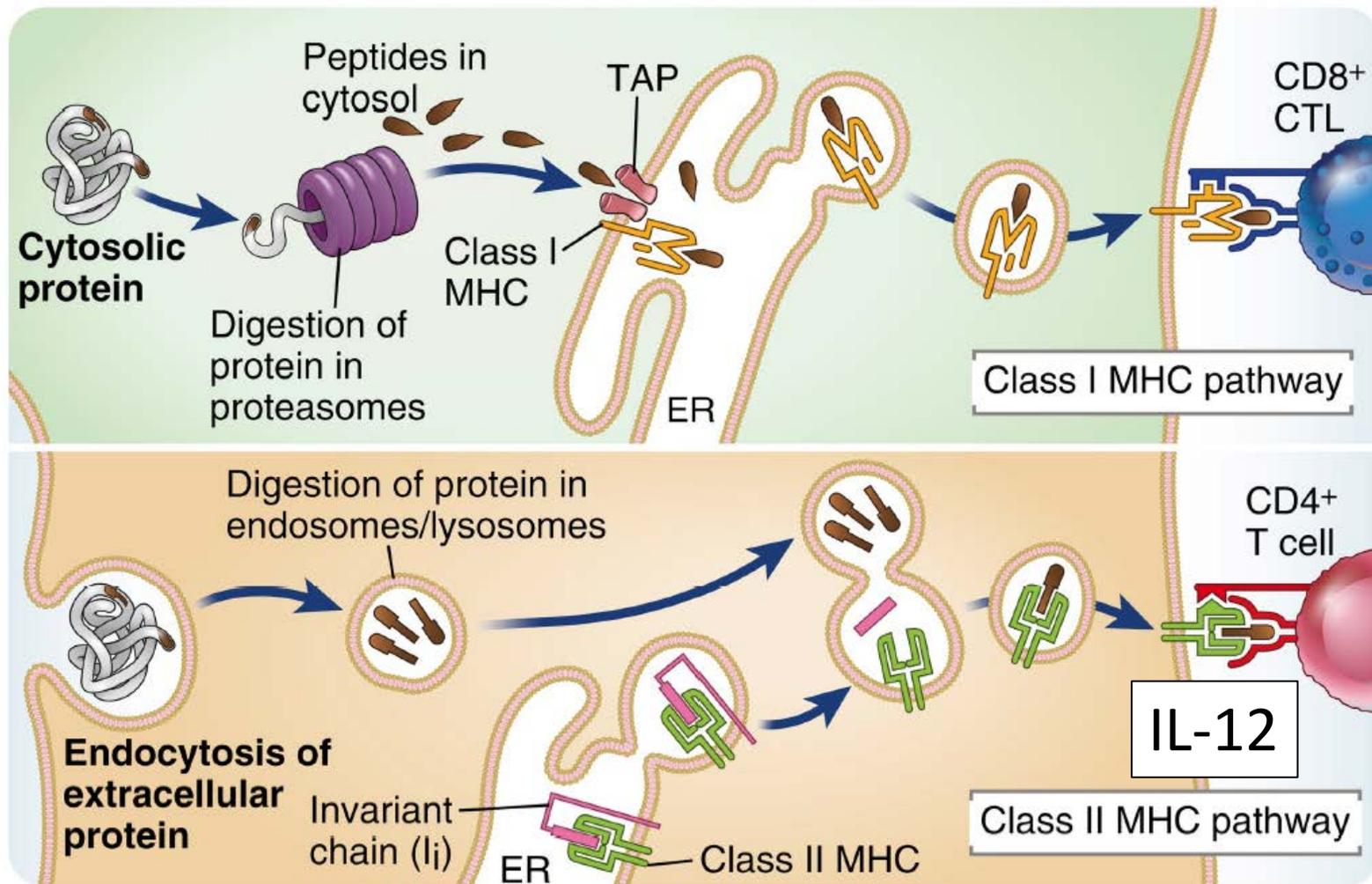
- R21

As of October 2023, **WHO recommends the programmatic use of malaria vaccines for the prevention of *P. falciparum* malaria in children living in malaria endemic areas, prioritizing areas of moderate and high transmission.** This applies to both RTS,S/AS01 and R21/Matrix-M vaccines.

The first malaria vaccine, RTS,S, was recommended by WHO to prevent malaria in children in October 2021. The vaccine has reached nearly 2 million children in Ghana, Kenya and Malawi through the Malaria Vaccine Implementation Programme, MVIP, since 2019.

<https://www.who.int/initiatives/malaria-vaccine-implementation-programme>

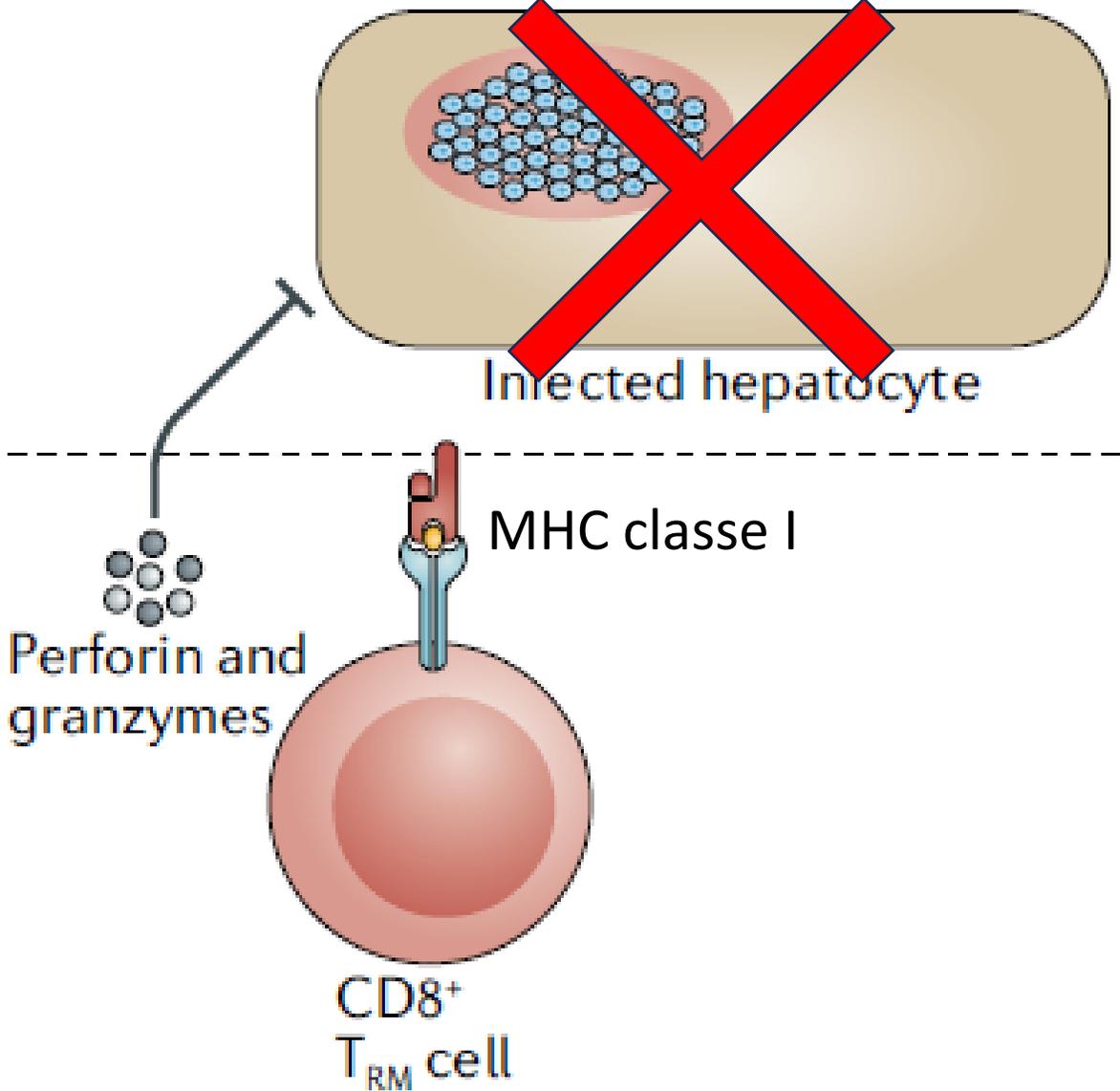
Imunidade celular – fase pré-eritrocítica



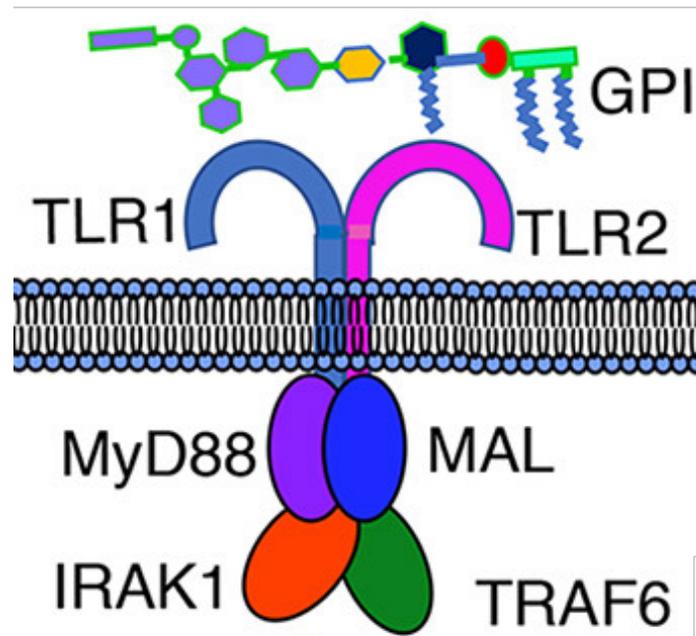
IL-2
IFN-gama
CD40L/CD40

IL-12

Eliminação de hepatócitos infectados por linfócitos T CD8+ citotóxicos



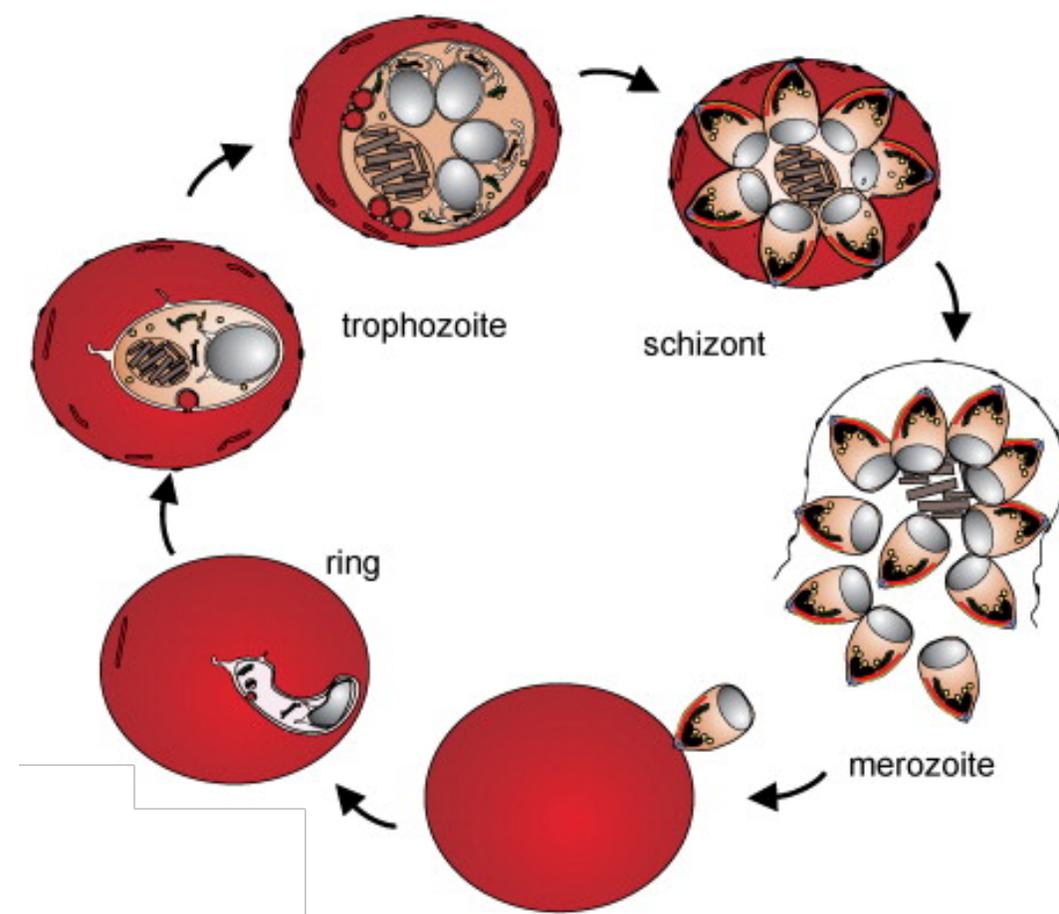
Ativação de imunidade inata durante a fase eritrocítica – TLR2



Pro-IL-1 β
TNF

GPI - Glicofosfatidilinositol

Liberação de Hemozoína e Ác. Úrico

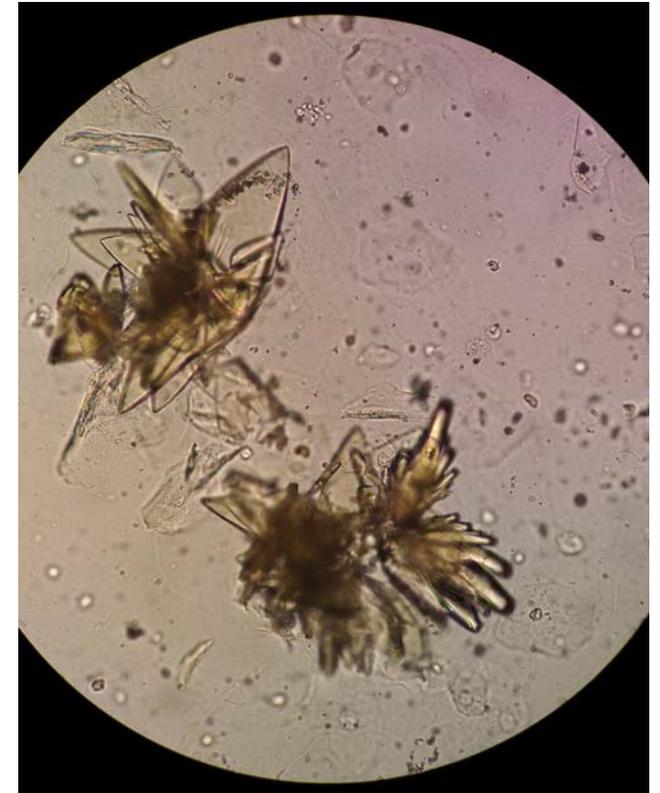


Hemozoína



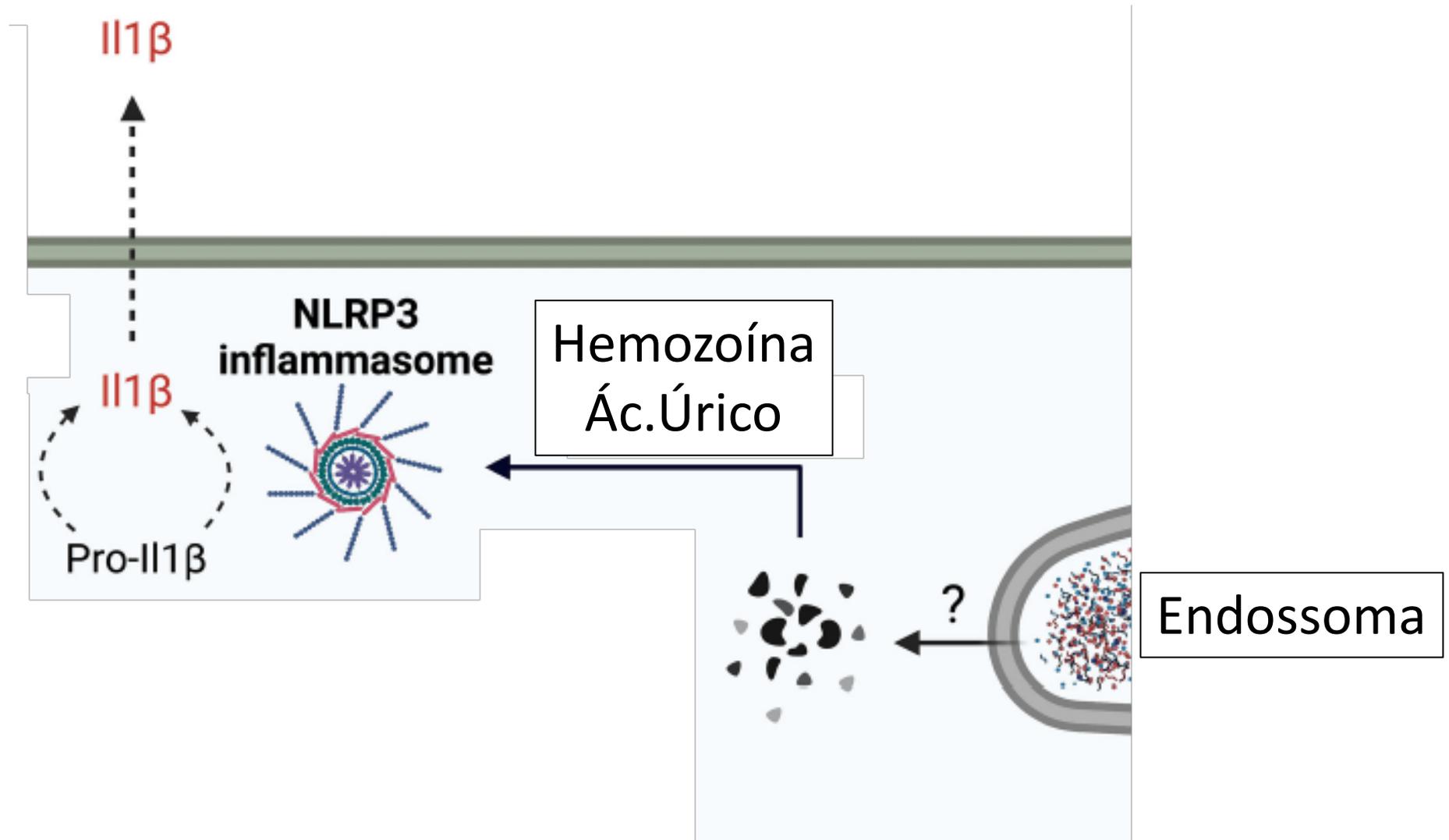
<https://news.vt.edu/articles/2008/05/2008-322.html>

Ácido Úrico

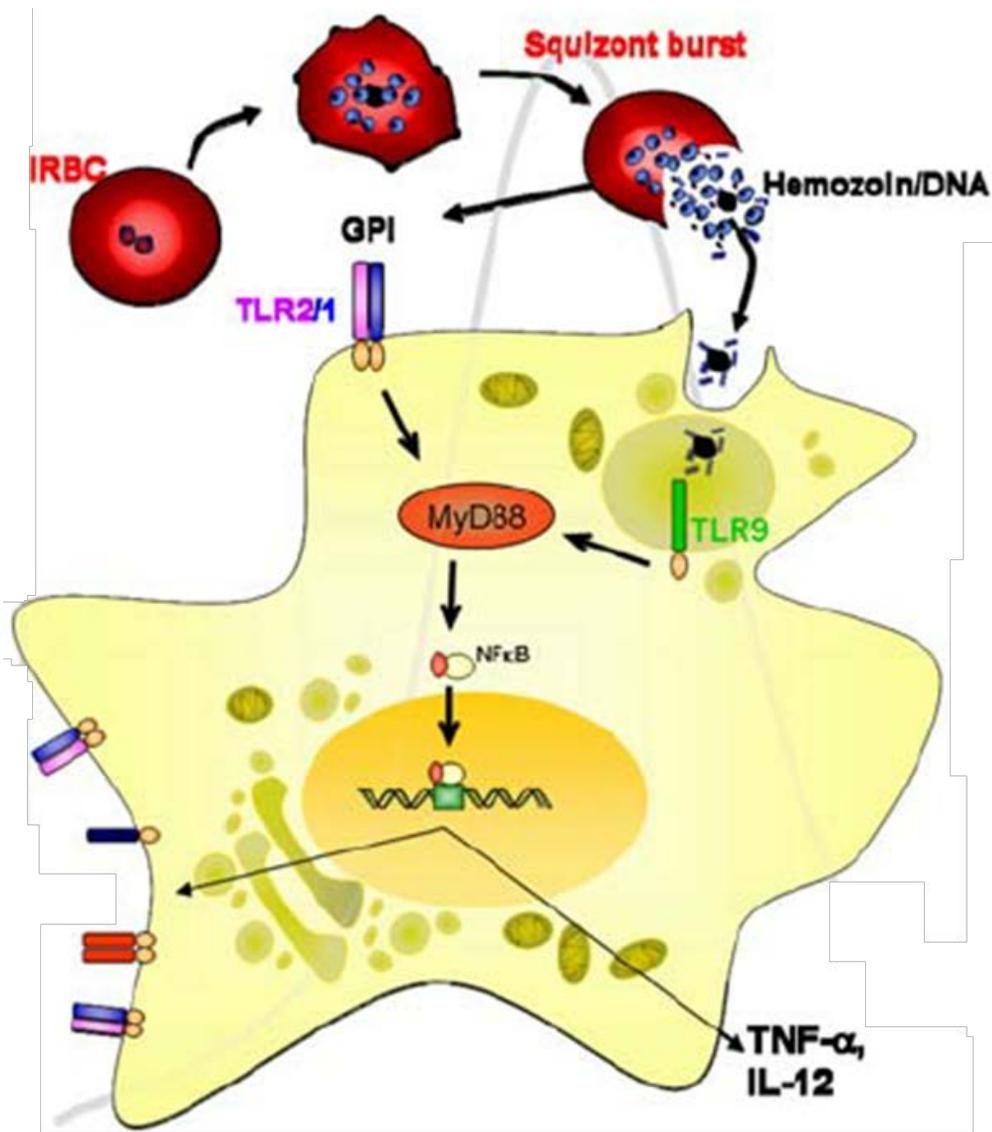


https://www.reddit.com/r/MicroPorn/comments/73edl5/oc_uric_acid_crystals_in_urine_4096x2304_x400/

Ativação de inflamassoma por Hemozoína e Ác.Úrico

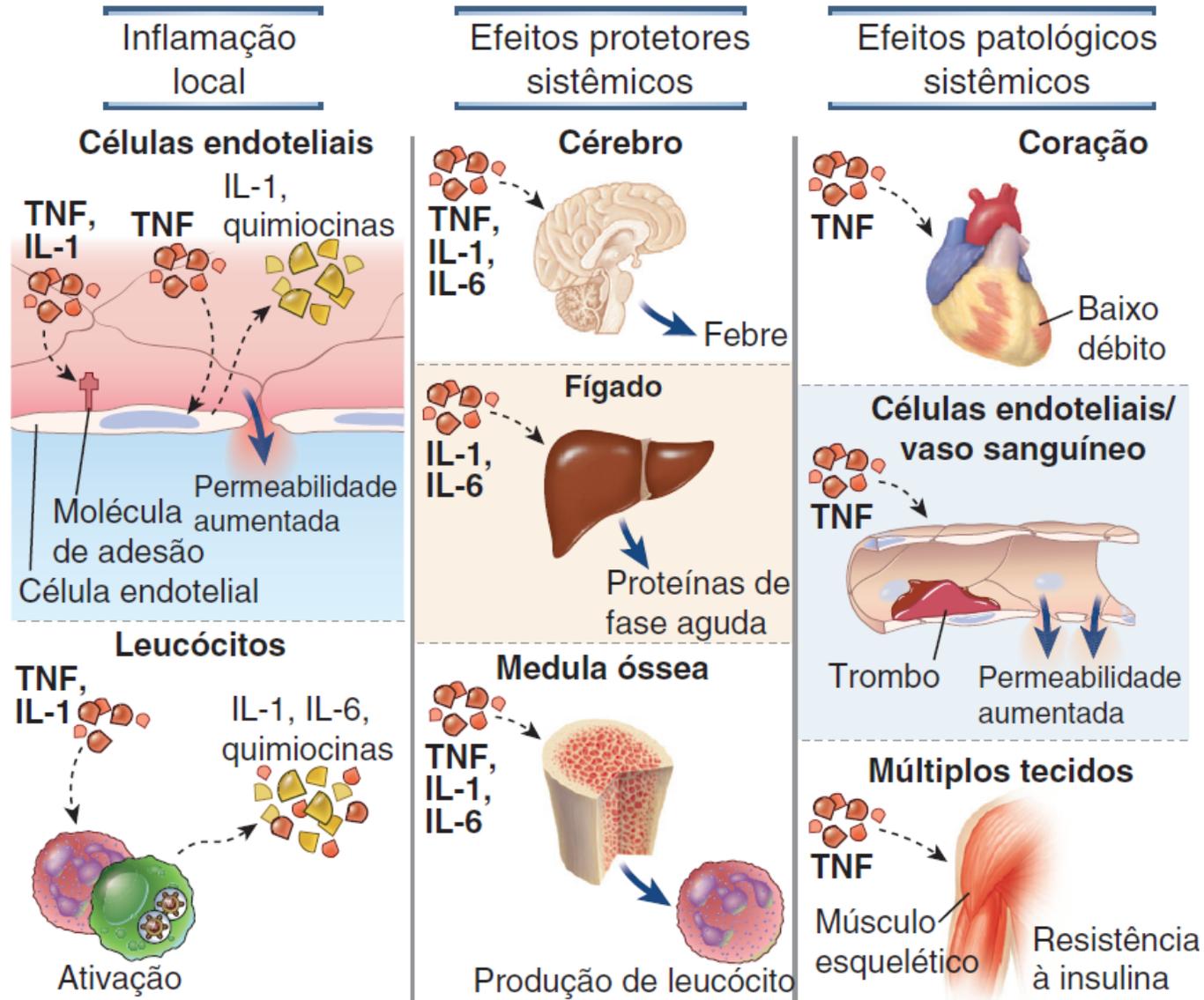


Ativação de TLRs durante fase eritrocítica da malária

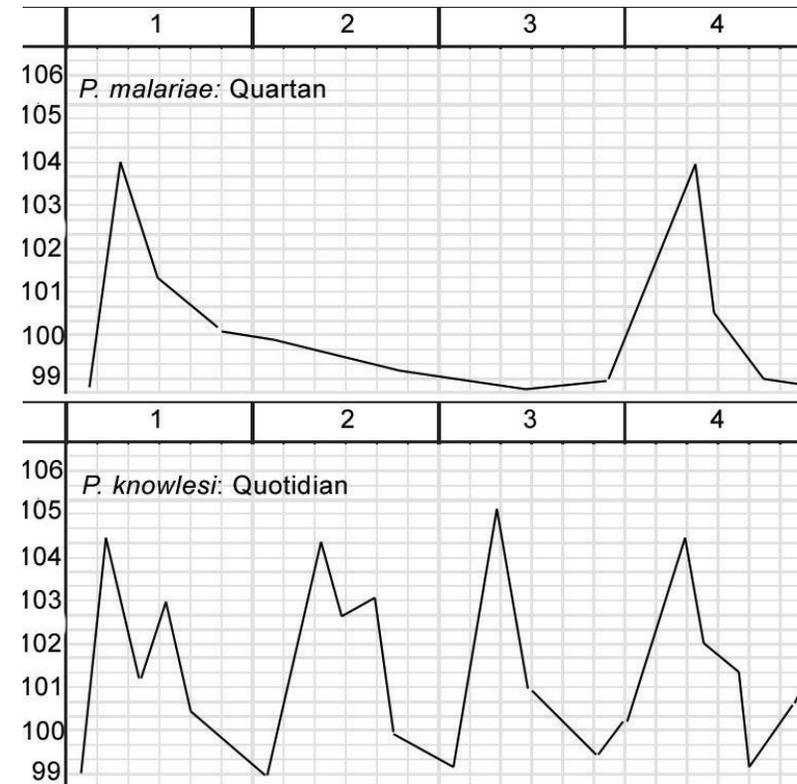
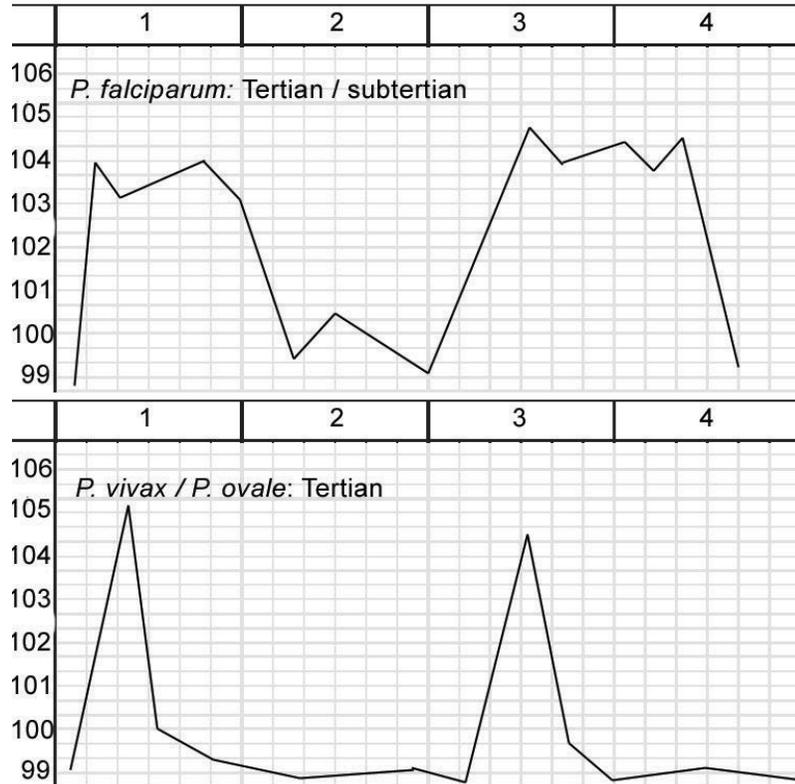


- Hemozoína liga a DNA do patógeno e ativa TLR9 no endossoma
- Junto à ligação a TLR2 por GPI
- Produção de IL-12 e TNF
- DAMPS – inflamassoma – IL1 β

Efeitos sistêmicos de citocinas inflamatórias

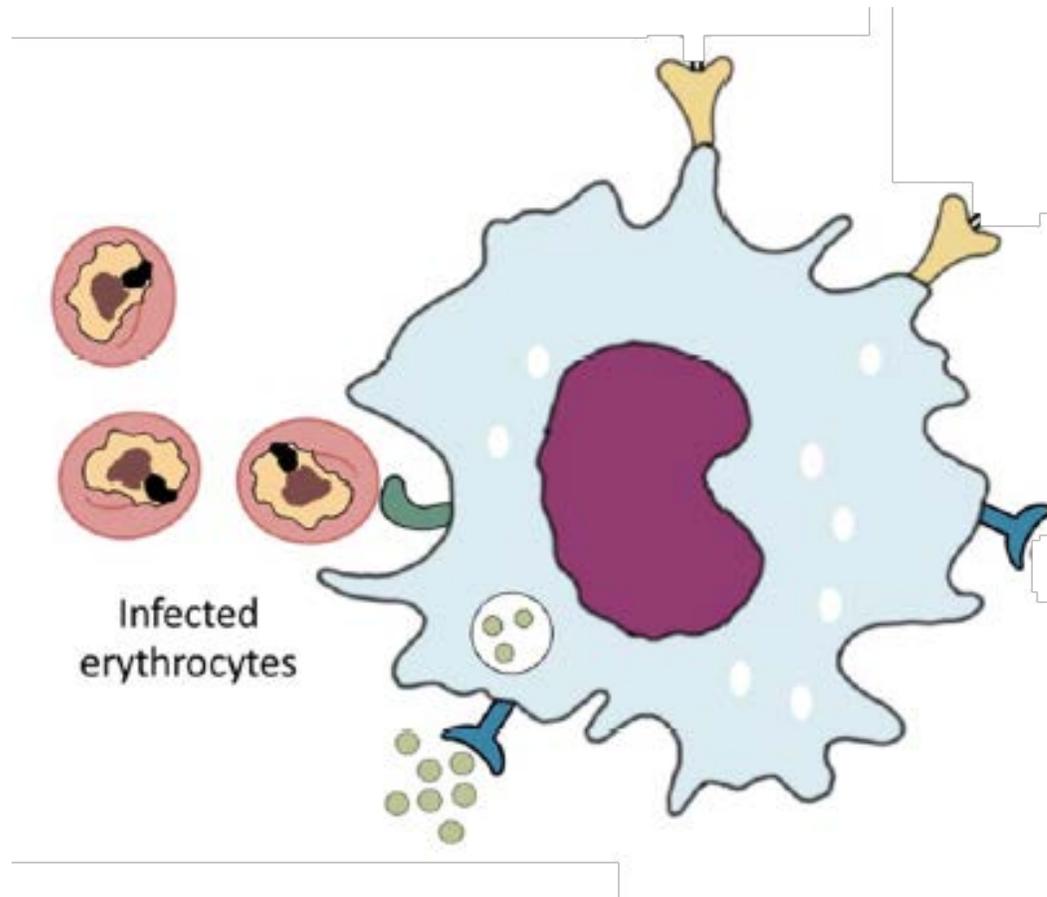


Episódios de febre recorrente em malária são causados por liberação de mediadores inflamatórios



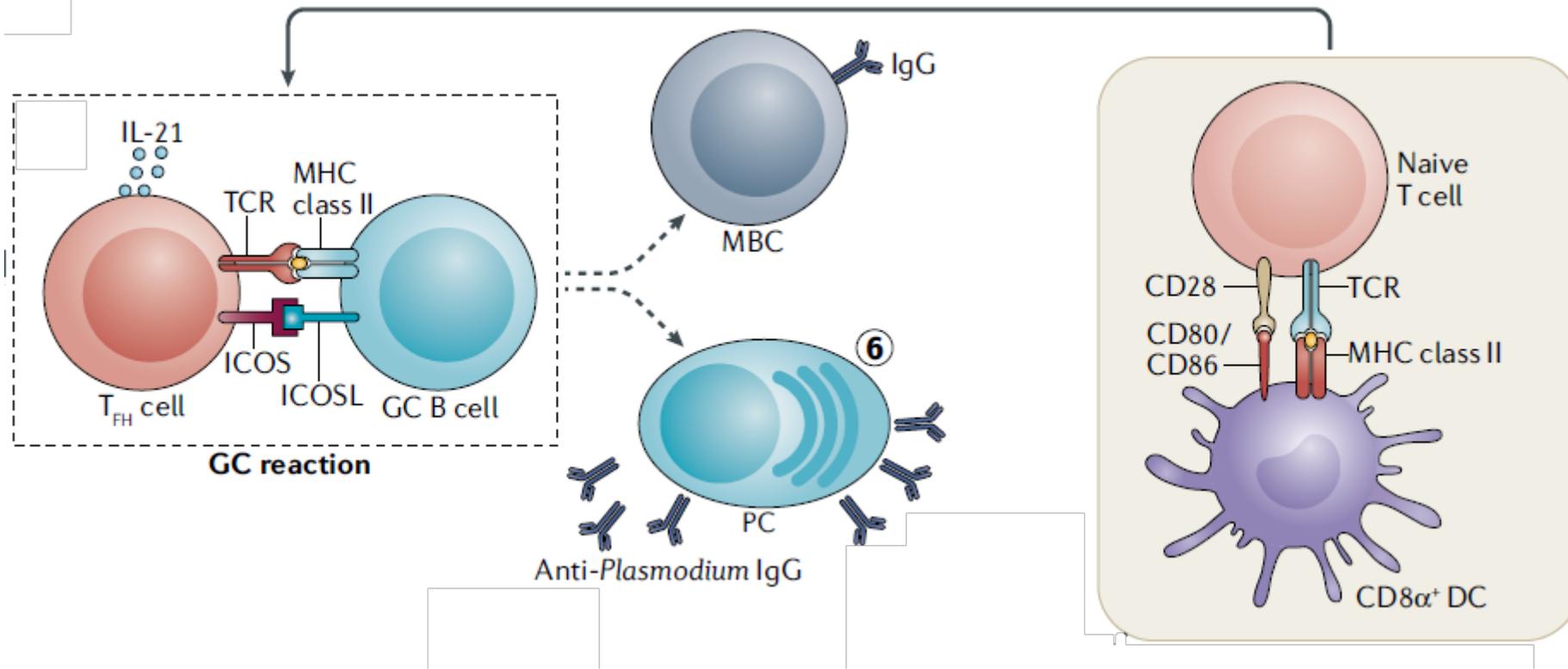
Desenvolvimento de febre decorrente de ciclo de replicação parasitária e ruptura de hemácias infectadas – DAMPS - TNF

Remoção de hemácias infectadas



- Depuração de hemácias infectadas no baço por fagócitos (macrófagos)
- Ligação CD36 – PfEMP1

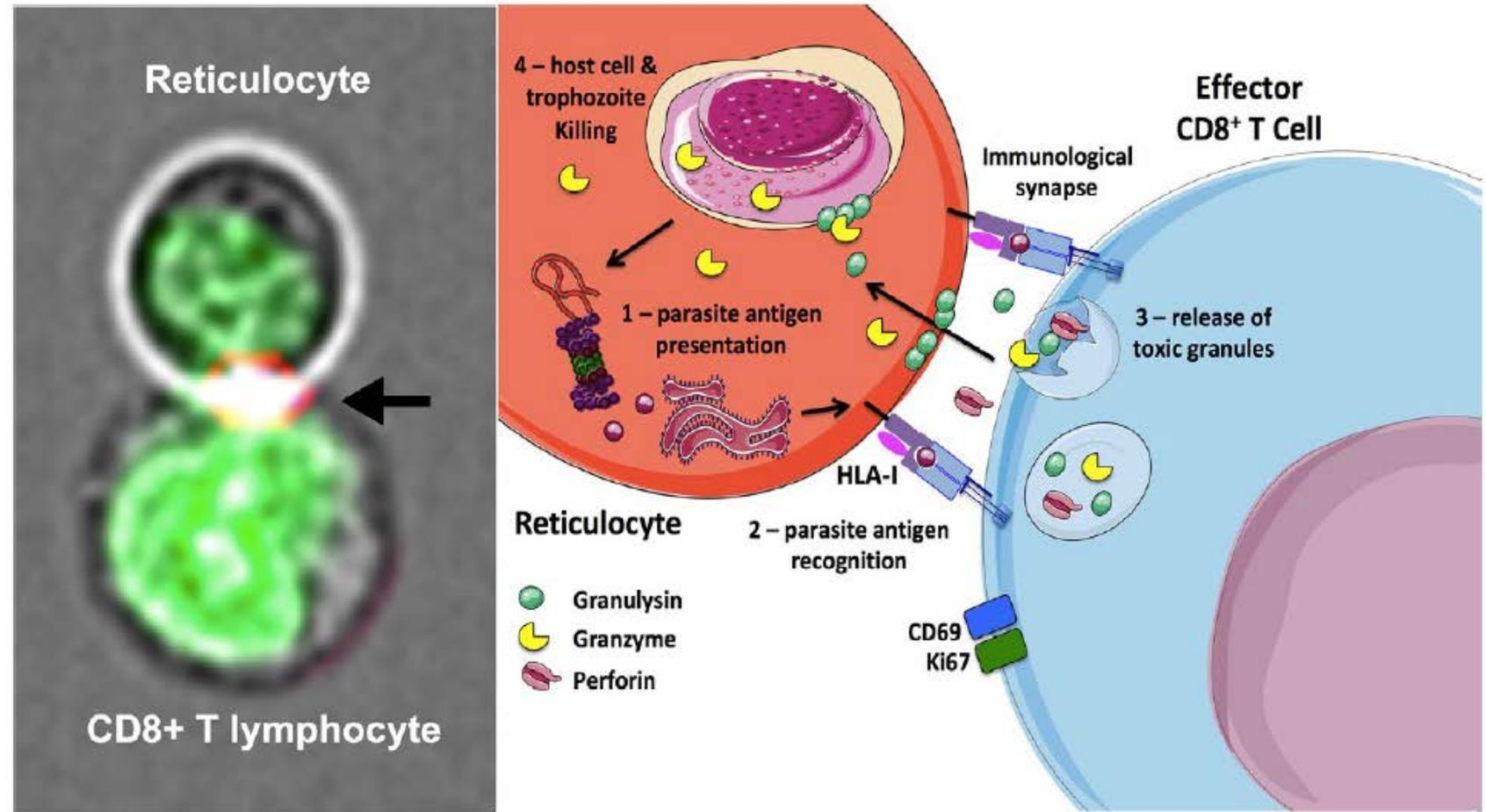
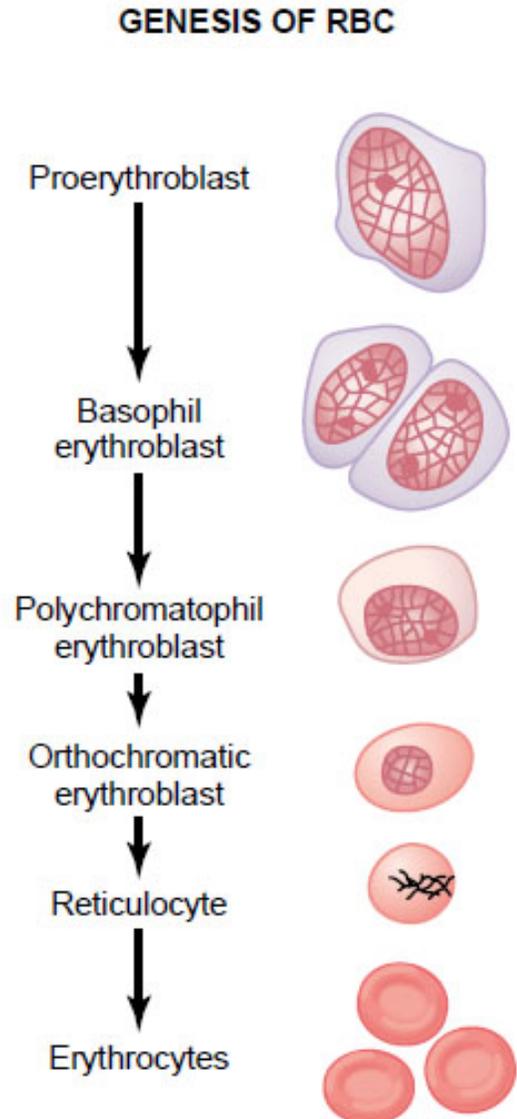
Imunidade adaptativa fase eritrocítica



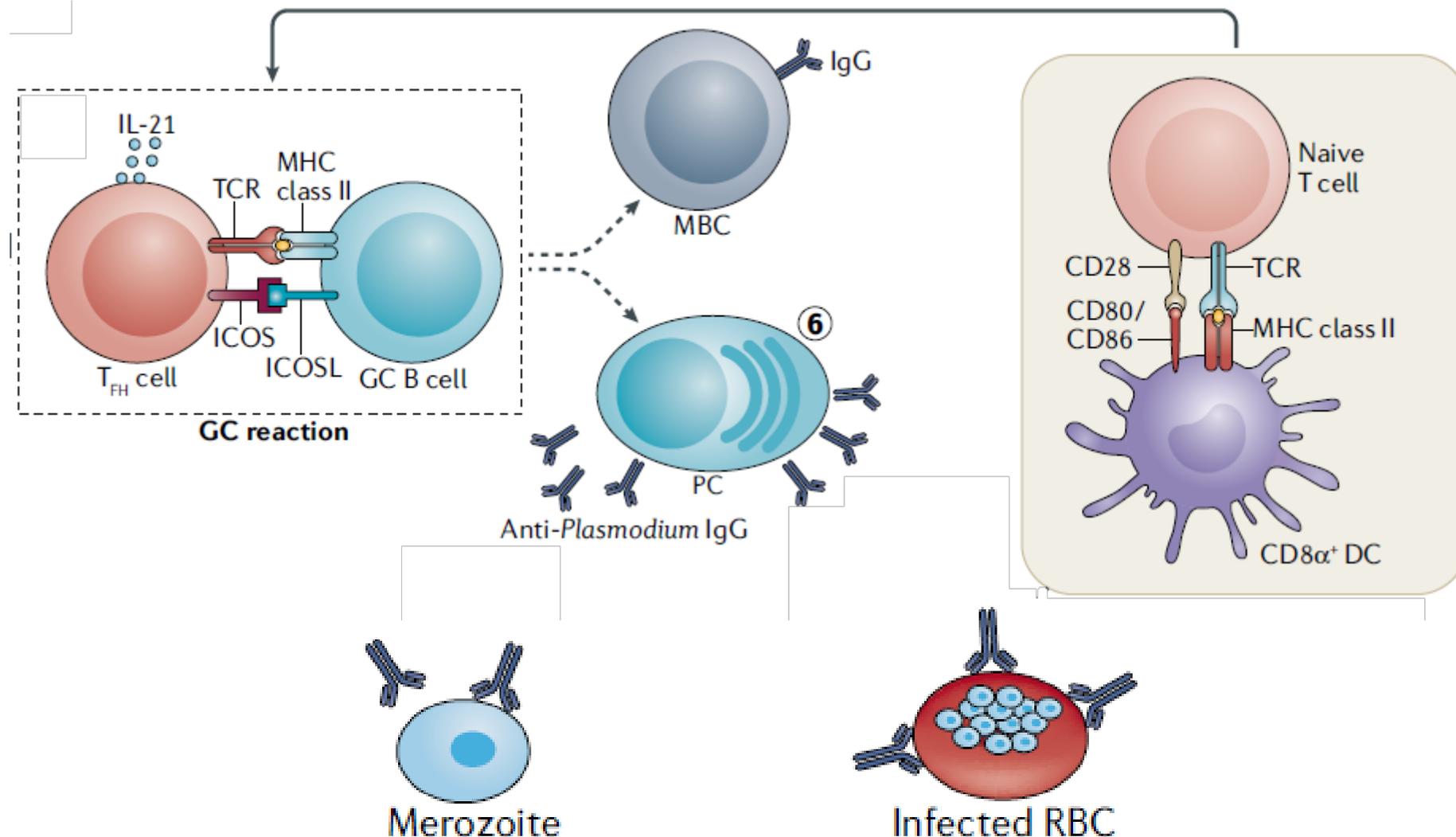
Th1 – IFN-gama

TCD8+ Citotóxica

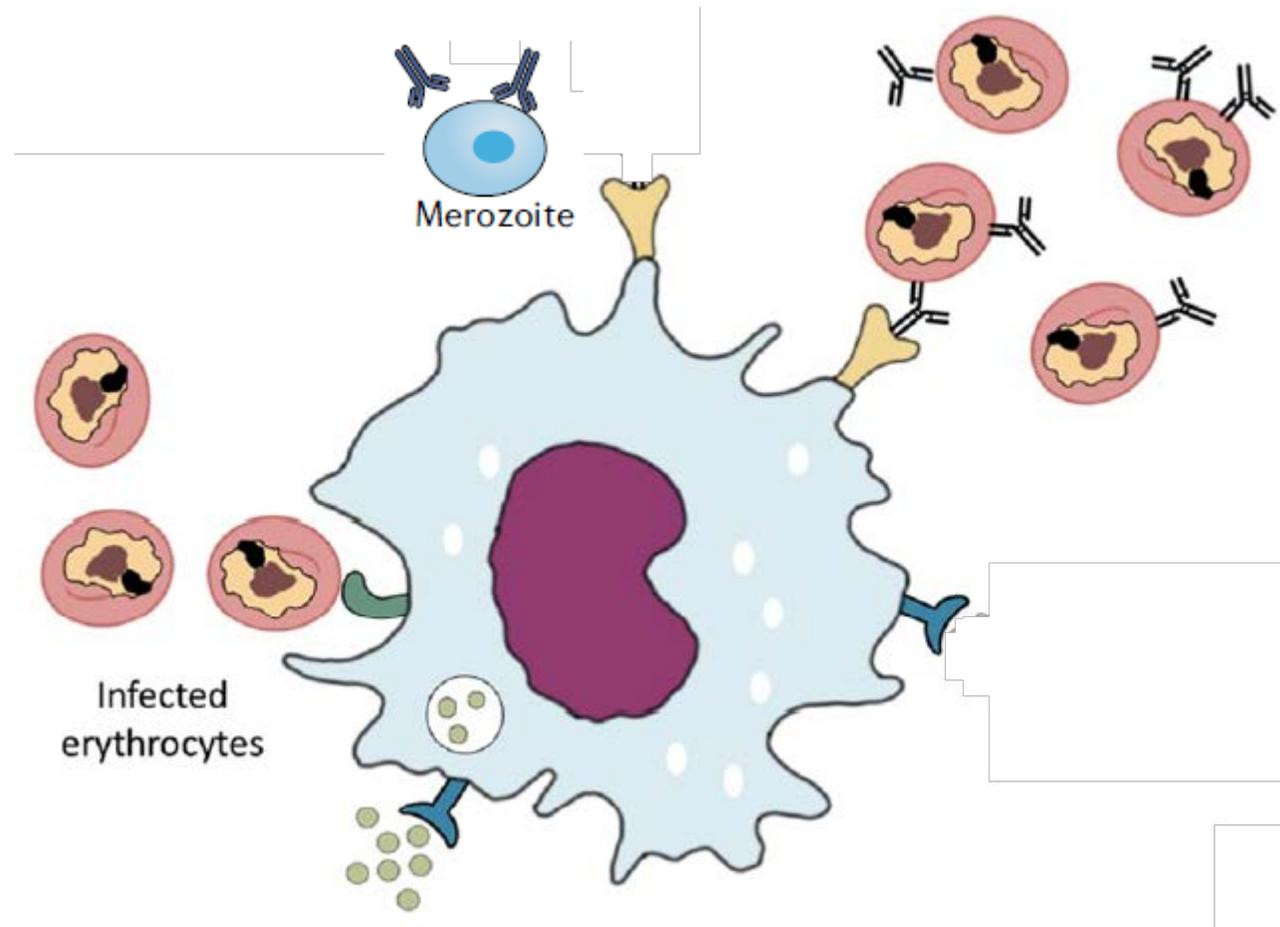
Linfócitos T CD8+ citotóxicos eliminam reticulócitos infectados por *P. vivax*



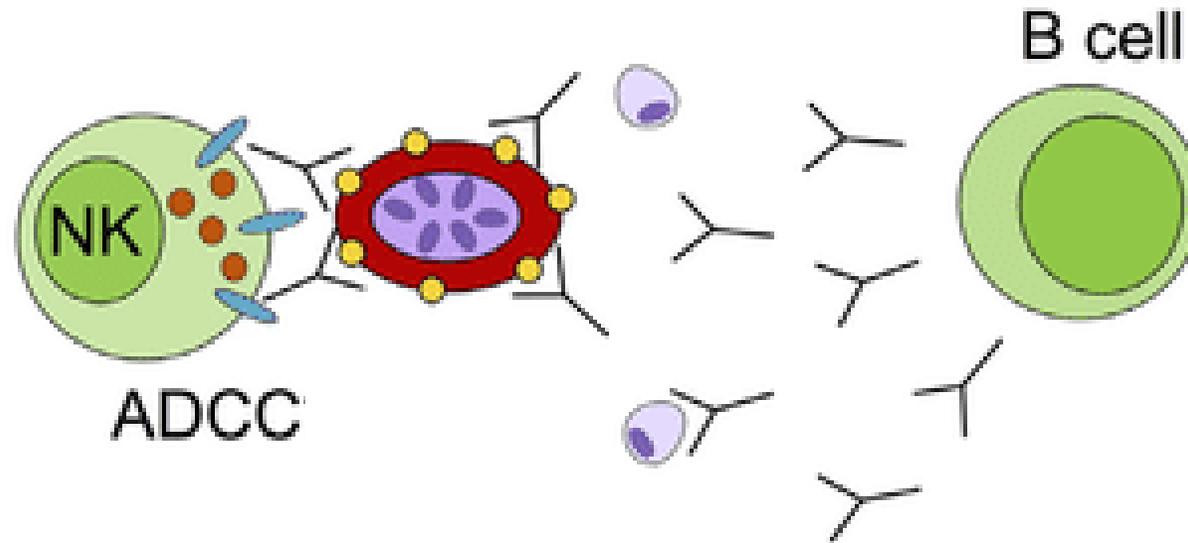
Imunidade humoral fase eritrocítica – antígenos de *Plasmodium* em merozoítos ou na superfície de hemácias infectadas



Opsonização de merozoítos e hemácias infectadas

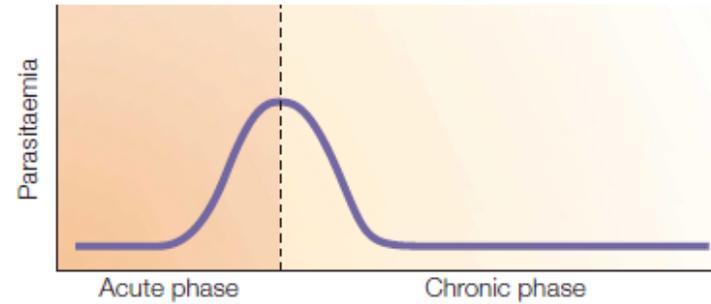


Citotoxicidade dependente de anticorpos por células NK

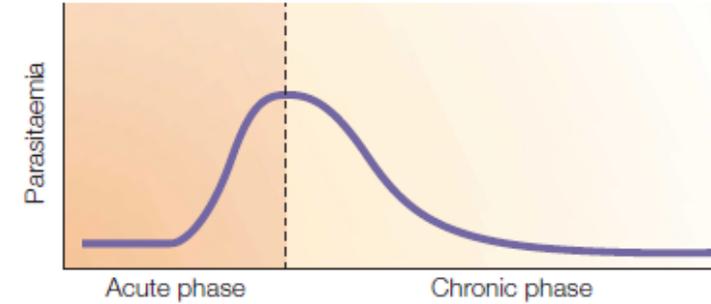


Modelos experimentais revelam papel da resposta imune contra malária

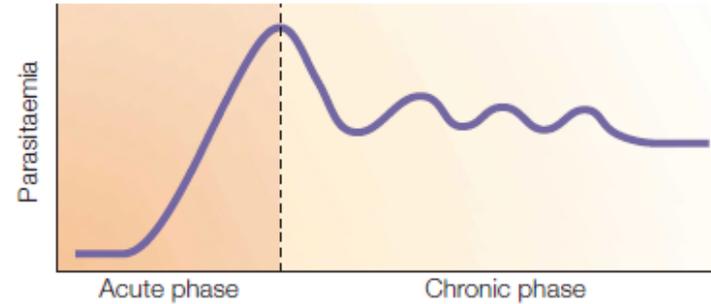
a Wild-type mice



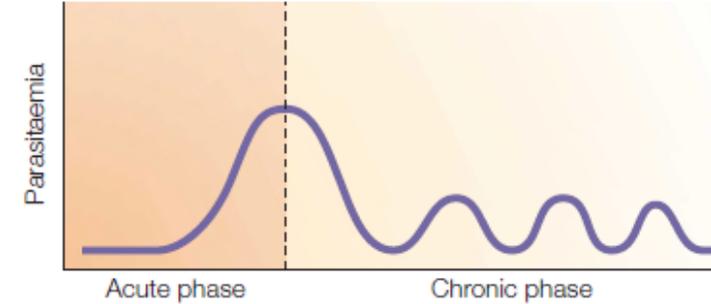
d $\gamma\delta$ T-cell-deficient mice



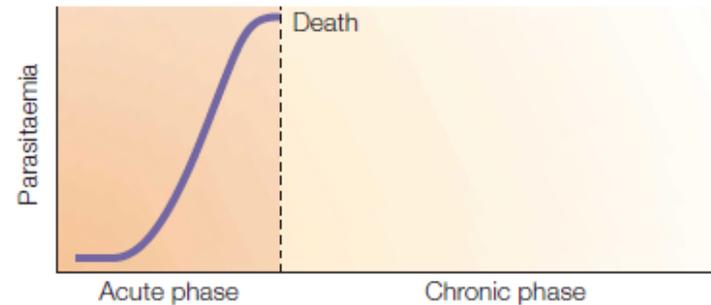
b CD4⁺ T-cell-depleted mice



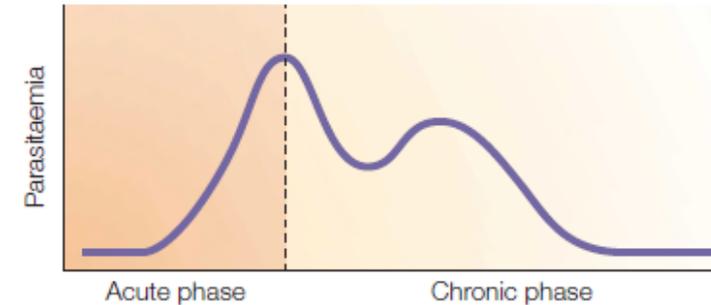
e B-cell-depleted or -deficient mice



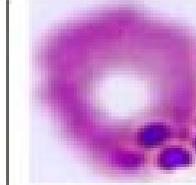
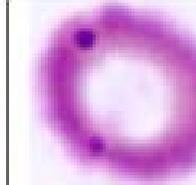
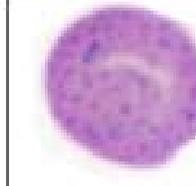
c IFN- γ -deficient mice



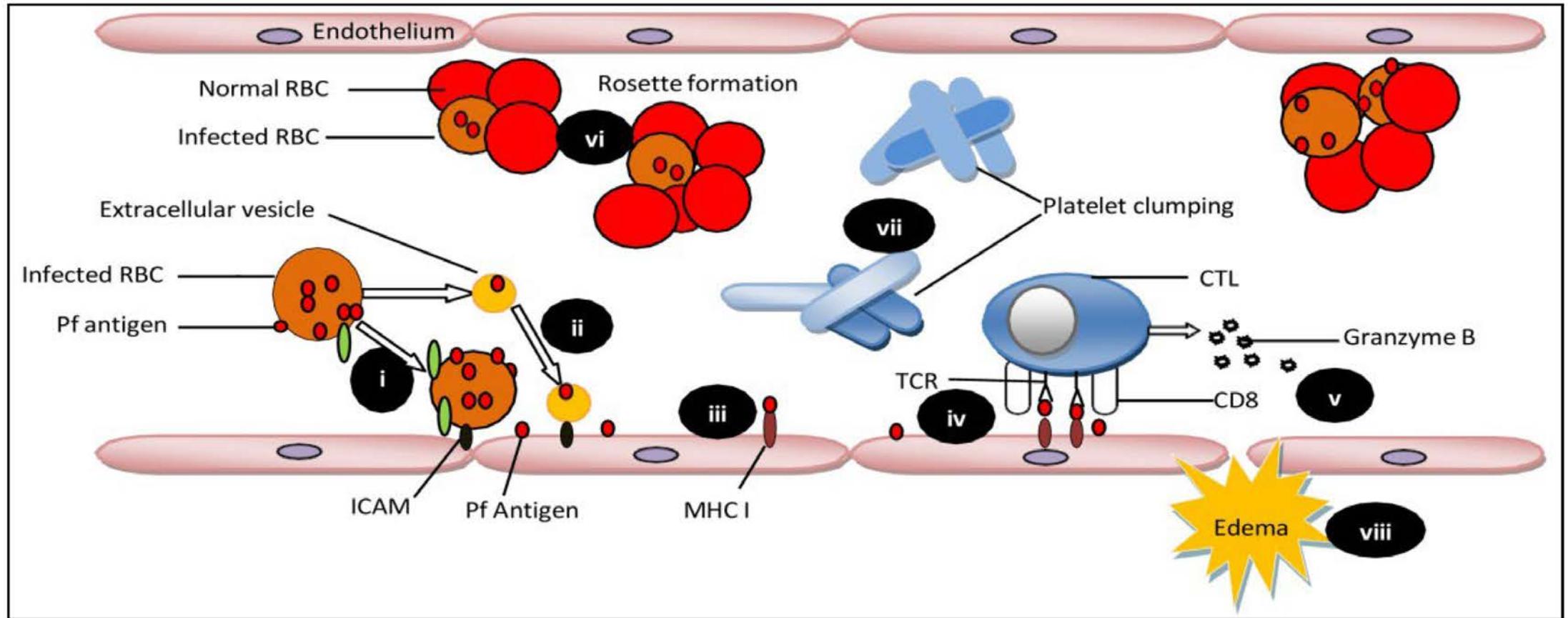
f NK-cell-depleted mice



P. falciparum – hemácias com morfologia alterada

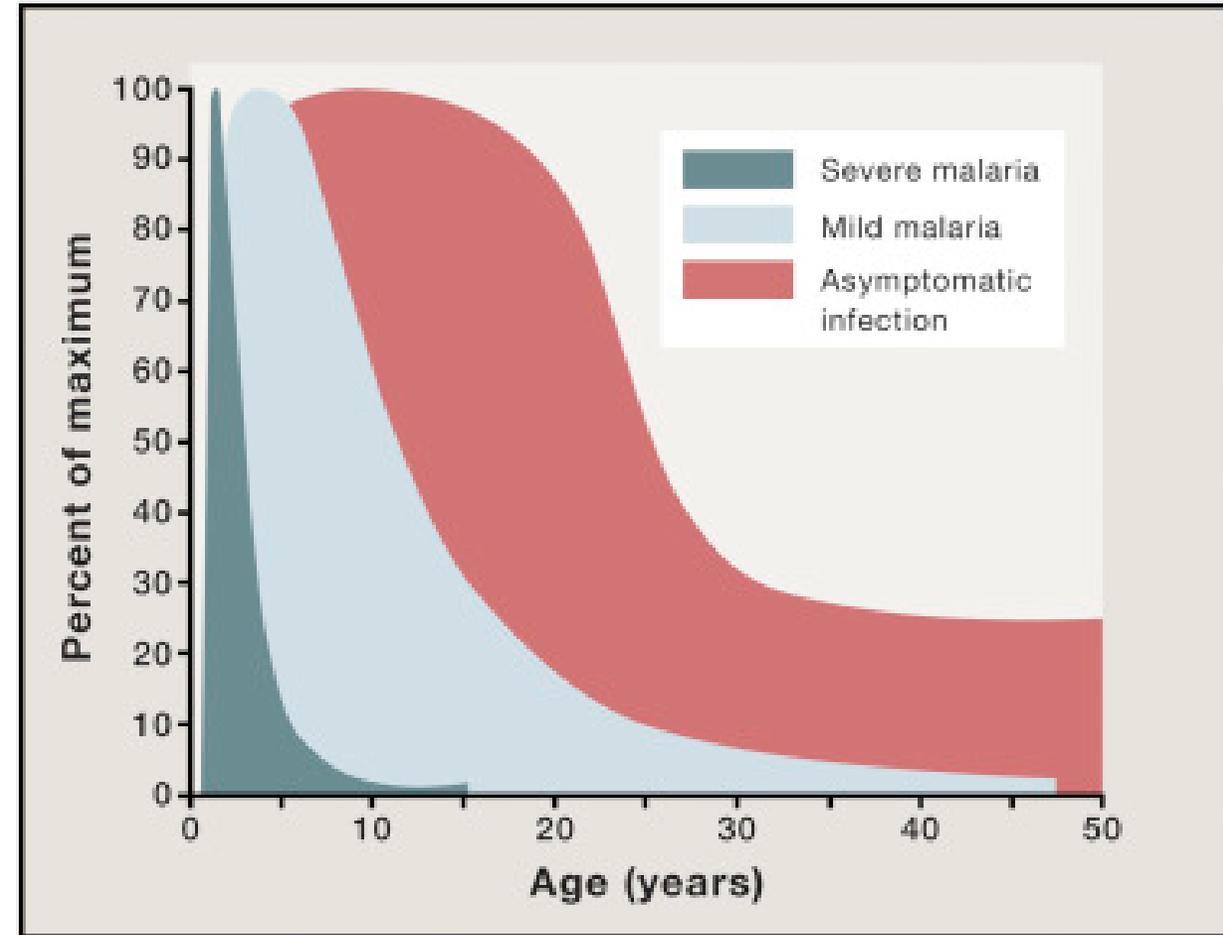
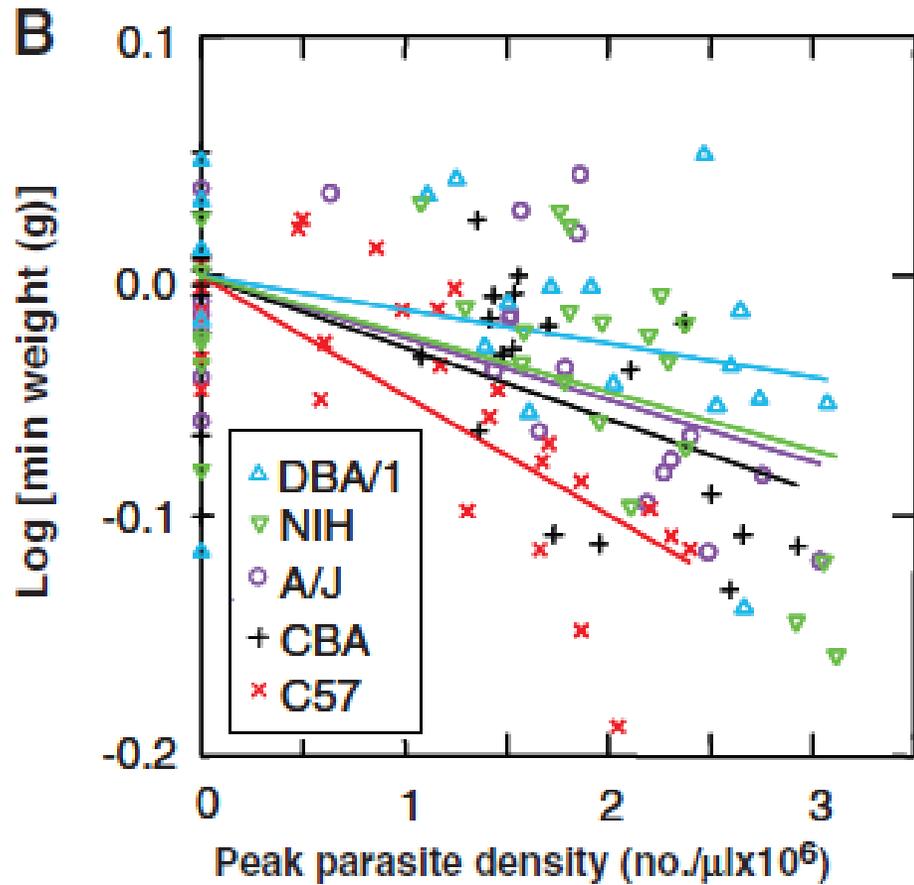
Type of Malaria	RBCs					
P.Malaria						
P.Falciparum						
P.Ovale						
P.Vivax						

Malária cerebral por *P. falciparum*



Rosetas de hemácias infectadas – coagulação; CD8+ citotóxicas e NK atacam endotélio

Tolerância à doença – Malária é um ótimo exemplo – carga parasitária nem sempre se traduz em sintomas



Questões

