

ACTA SCIENTIFIC MICROBIOLOGY (ISSN: 2581-3226)

Volume 3 Issue 2 February 2020

Conceptual

Could HDFx Ameliorate the Infections and Potential Courses of Hepatocarcinomas and Cirrhosis Induced by Hepatitis B

Burton M Altura $^{1.6*}$, Asefa Gebrewold 1,5,6 , Anthony Carella 1,5,6 and Bella T Altura $^{1,3\cdot6}$

¹Department of Physiology and Pharmacology, the State University of New York Downstate Medical Center, Brooklyn, New York, USA

²Department of Medicine, the State University of New York Downstate Medical Center, Brooklyn, New York, USA

³The Center for Cardiovascular and Muscle Biology, the State University of New York Downstate Medical Center, Brooklyn, New York, USA

⁴School of Graduate Studies in Molecular and Cellular Science, the State University of New York Downstate Medical Center, Brooklyn, New York, USA

⁵Bio-Defense Systems, Inc, Rockville Centre, the State University of New York

Downstate Medical Center, Brooklyn, New York, USA

⁶Orient Biomedica, Estero, Florida, the State University of New York Downstate Medical Center, Brooklyn, New York, USA

*Corresponding Author: Burton M Altura, Department of Physiology and Pharmacology, the State University of New York Downstate Medical Center, Brooklyn, New York, USA.

DOI: 10.31080/ASMI.2020.03.0484

Globally, hepatitis B infection is a major public health problem, and infected patients can remain asymptomatic for decades. Approximately 90% of the world's population currently reside in regions of very high and intermediate hepatitis B infection [1]. These patients often, without knowing it, can transmit the virus to other family members, friends, and others carrying diverse diseases. Almost one million people /year die of complications due to infections caused by hepatitis B, including hepatocarcinomas and cirrhosis [2]. In the USA, today, there are as many as two million people living with chronic hepatitis B, who are totally unaware of their infection [3]. Interestingly, approximately 95% of the people with chronic hepatitis B infection come from intermediate/high prevalence countries, primarily due to a lack of screening [2-4]. About 260 million people worldwide are living with chronic hepatitis B infections [3-6].

Major concerns in the inflammatory events produced by hepatitis B viruses (HBV) in the liver center on the loss of

Received: December 16, 2019

Published: January 08, 2020

© All rights are reserved by Burton M

Altura., et al.

immunocompetence of CD4 T-lymphocytes, CD8 T-lymphocytes, natural killer (NK) cells, Kupffer cells, and "pit cells" [4-11]. These cell types are normally "geared" to produce diverse antiviral molecules (i.e., interferons, tumor necrosis-alpha, and a number of interleukins) [7-11]. HBV not only severely hampers the production of these protective antiviral molecules, but results in reduction of these critical cell types in the liver [7,10,11]. So, in our opinion, any effective therapeutic measures against HBV infections, and the sequelae of events leading to cirrhosis and/or hepatocarcinomas, should focus on restoring these vital cell types and their immunocompetence, and thus prevent initiation of inflammatory events in the liver.

For the past several decades, our laboratories have been looking for and investigating peptides/proteins that have unique host-defense attributes [12-15]. These studies have led us to discover a conserved protein in mice, rats, guinea-pigs, rabbits, dogs, and sub-human primates that we have termed host-defense factor \boldsymbol{x}

(HDFx) [14]. So far, through thousands of experiments, we have found and reported that "HDFx" is protective or ameliorative against lethal hemorrhage, lethal intestinal ischemic shock, a variety of endotoxins, trauma, multiple gram-negative and grampositive bacteria, certain hemorrhagic fever viruses, NASH, several experimental forms of liver cancers, and "cytokine storms" [12-25]. In addition, HDFx stimulates production of immunocompetent T-lymphocytes in infections, immunocompetent NK, Kupffer, and pit cells [12-15,17-20,22]. Interestingly, HDFx causes regeneration of tissues damaged in a variety of pathobiology events in experimental animals [23, 25]. Due to HDFx's unique profile, we have suggested that it may prove very useful in more speedy recovery after orthopedic and other major surgeries, drugresistant tuberculosis, carcinomas in the liver, and the aggressive changes observed in bacteria found in people/astronauts residing at the space-station [18-21, 23, 25].

A major problem in the progression of HBV infections in the liver is the severe inflammatory reaction causing clogging of capillary blood flow and its normal distribution/nutrition of liver parenchymal, Kupffer, and pit cells [8-11]. Close, histological examination of these tissues often reveals adhesion of leukocytes, macrophages, and platelets to the endothelial cell walls of the microscopic blood vessels with transudation of these bloodformed elements into the surrounding tissues and tissue spaces, leading to greater and greater inflammatory reactions [8-11]. Interestingly, HDFx possesses the unique ability of being able to maintain liver vasomotor tone, reduce adhesion and transudation of blood- formed elements under low-flow and inflammatory conditions, while accelerating the healing process, as observed in numerous experimental states of shock, endotoxemia, and trauma [14,15,25,27].

Conclusions

We have discovered a new host -defense biologic immunomodulator which may provide unique ways to ameliorate and prevent liver inflammatory reactions caused by hepatitis B viruses, and accelerate healing in damaged liver parenchymal, Kupffer, and pit cells induced by HBV. Use of HDFx in susceptible, high-risk patients could eventuate in markedly reduced hospitalizations, reduced-hospital costs, and reduction in development of liver cancers worldwide.

Acknowledgements

A number of our studies discussed in this report have been supported by unrestricted grants from several pharmaceutical companies (CIBA-GEIGY Pharmaceuticals, SANDOZ Pharmaceutical, BAYER Pharmaceuticals, and The UpJohn Co.) as well as anonymous donors. We are very grateful to a number of colleagues who helped to make our discoveries and hypotheses possible (i.e., C. Thaw, R.W. Burton, and C. Parillo). Some of the work discussed was supported, in part, by Research Grants from The N.H.L.B. Institute and The National Institute of Mental Health). We are also very grateful for the generous support provided by Dr. Albert Madison of The Bio-Defense Laboratory at The Naval Medical Center, Silver Springs, MD.

Bibliography

- Weinbaum CM., et al. "Recommendation for identification and public health management of persons with chronic hepatitis B virus infection". Hepatology 49 (2009): S35-S44.
- 2. Rajbhandari R and Chung RT. "Screening for hepatitis B virus infection: a public health imperative". *Annals of Internal Medicine* 161 (2014): 76-77.
- 3. World Health Organization Hepatitis B fact sheet (2007).
- 4. Cohen C., *et al.* "Is chronic hepatitis B being undertreated in the United States?" *Journal of Viral Hepatitis* 18 (2011): 377-383.
- 5. Centers for Disease Control and Prevention Surveillance for Viral Hepatitis-United States (2014).
- 6. Terrault N., *et al.* "AASLD Guidelines for treatment of chronic hepatitis B". *Hepatology* 63.1 (2016): 261-283.
- Washington K. "Inflammatory and infectious diseases of the liver". In: Gastrointestinal and Liver Pathology. Incobuzio CA, Montgomery EA, eds. Churchill-Livingstone, London (2005).
- Majno G and Joris I. "Cells, Tissues and Diseases, 2nd edn". Oxford University Press, New York (2004).
- 9. Kumar V., *et al.* "Robbins and Cotran Pathologic Basis of Disease". 10th edn. Elsevier Saunders, Philadelphia (2015): 643-645.
- 10. Rehermann B. "Natural killer cells in viral hepatitis". *Cellular and Molecular Gastroenterology and Hepatology* 1.6 (2015): 578-588.
- 11. Trepo C., *et al.* "Hepatitis B infection". *Lancet* 384 (2014): 2053-2063.

- 12. Altura BM. "Role of reticuloendothelial and endothelial cells in response to shock and trauma". In: Pathophysiology of Combined Injuries and Trauma, Conklin JT, ed. University Park Press, Baltimore (1985).
- 13. Altura BM. "Endothelial and reticuloendothelial cell function: roles in injury and low-flow states". In: The Scientific Basis for the Care of the Critically Ill., Little RA, Frayn KN, eds. Manchester University Press, Manchester (1986): 259-274.
- Altura BM., et al. "A novel biologic immunomodulator, HDFx, protects against lethal hemorrhage, endotoxins and traumatic injury: potential relevance to emerging diseases". International Journal of Clinical and Experimental Medicine 2 (2009): 266-279.
- 15. Altura BM., et al. "HDFx: a novel biologic immunomodulator is therapeutically-effective in hemorrhagic and intestinal ischemic shock: importance of microcirculatory-immunological interactions and their implications for the warfighter and disaster victims". International Journal of Clinical and Experimental Medicine 4 (2011): 331-340.
- 16. Altura BM., *et al.* "HDFx: A novel immunomodulator for the amelioration of hypovolemic shock in the OR, cancer patients and on the battlefield". *Journal of Clinical Medicine and Therapeutics* 1.1 (2016): e002.
- 17. Altura BM. "HDFx: A novel immunomodulator and potential superbug super-warrior for hospitalized patients and battle-field casualties". *International Journal of Vaccine Research* 3.1 (2016): 1-3.
- 18. Altura BM., et al. "HDFx: A recently discovered biologic and its potential use in prevention and treatment of hemorrhagic fever viruses and antibiotic-resistant superbugs". *Journal Hematol and Thromboemb Dis* 4.4 (2016).
- 19. Altura BM., et al. "HDFx: A potential new treatment and prophylactic against nonalcoholic steatohepatitis (NASH) and subsequent hepatocellular carcinomas: Is hypomagnesemia a complication of the disease?" *Journal of Alcoholism and Drug Dependence* 4 (2016): 1000e133.
- Altura BM., et al. "HDFx: A novel immunomodulator and potential fighter against cytokine storms in inflammatory and septic conditions in dogs and farm animals". International Journal of Veterinary Health Science and Research 5 (2017): 1-3.
- 21. Altura BM., *et al.* "A novel biologic immunomodulator may have the potential to prevent bacteria in space from becoming aggressively infectious and lethal". *Clinical Research and Trials* 3 (2017): 1-3.

- 22. Altura BM and Altura BT. "HDFx: A novel biologic immunomodulator for potential control of NK cell and macrophage dysfunction in drug-resistant tuberculosis". *Journal of Clinical Medicine and Therapeutics* 2.3 (2017): 20.
- Altura BM and Altura BT. "Could HDFx, a recently discovered biologic immunomodulator that accelerates wound healing, ameliorate complications after orthopedic surgeries?" EC Orthopedics 7.5 (2017): 207-210.
- 24. Altura BM and Altura BT. "Use of HDFx, a novel immunomodulator, to stop germs from winning in hospitals and on the battlefield: the danger of antibiotic resistance". *International Journal of Vaccine Research* 4.1 (2017):1-2.
- 25. Altura BM., *et al.* "HDFx: A novel immunomodulator for the amelioration of hypovolemic shock in the OR, Cancer patients and on the battlefield". *Journal of Clinical Medicine and Therapeutics* 1.1 (2016): e03.
- 26. Altura BM., et al. "HDFx: a novel biologic immunomodulator accelerates wound healing and is suggestive of unique regenerative powers: potential implications for the warfighter and disaster victims". International Journal of Clinical and Experimental Medicine 5 (2012): 289-295.
- Altura BM and Altura BT. "HDFx for the prevention and treatment of vasodilatory septic shock: A personal perspective". Vascul Dis Ther 2.6 (2017): 1-3.

Assets from publication with us

- Prompt Acknowledgement after receiving the article
- Thorough Double blinded peer review
- · Rapid Publication
- Issue of Publication Certificate
- · High visibility of your Published work

Website: https://www.actascientific.com/

Submit Article: https://www.actascientific.com/submission.php

Email us: editor@actascientific.com Contact us: +91 9182824667