

Perinatal arsenic
exposures

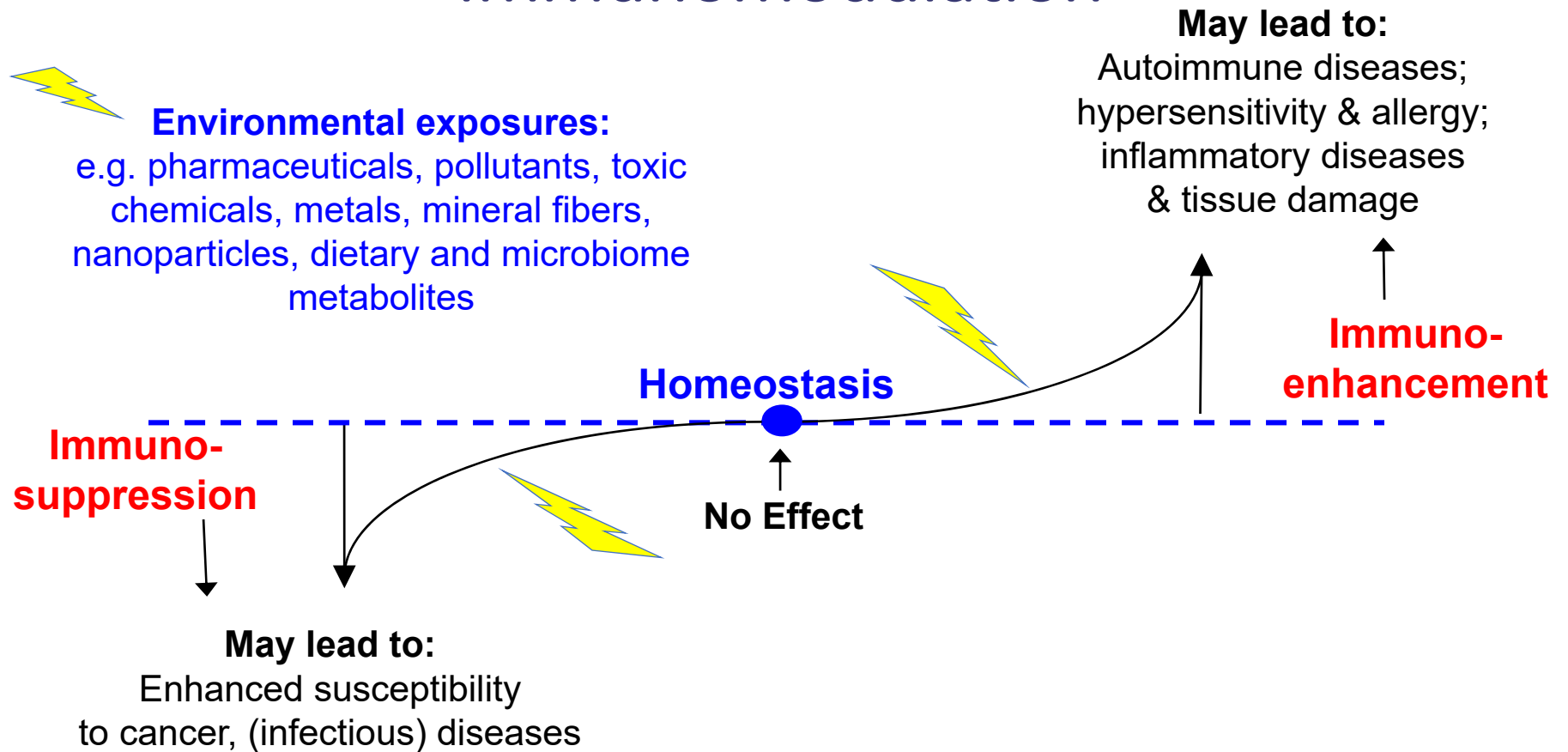
The long-term impact of
perinatal exposures on the
immune system and
disease risk

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Johns Hopkins University
School of Public Health
Environmental Health &
Engineering

All human subject studies have been approved and conducted in accordance to both U.S. and Chile IRB
All animal procedures have been approved and conducted in accordance with the JHU institutional ACUC

No Conflict of Interest

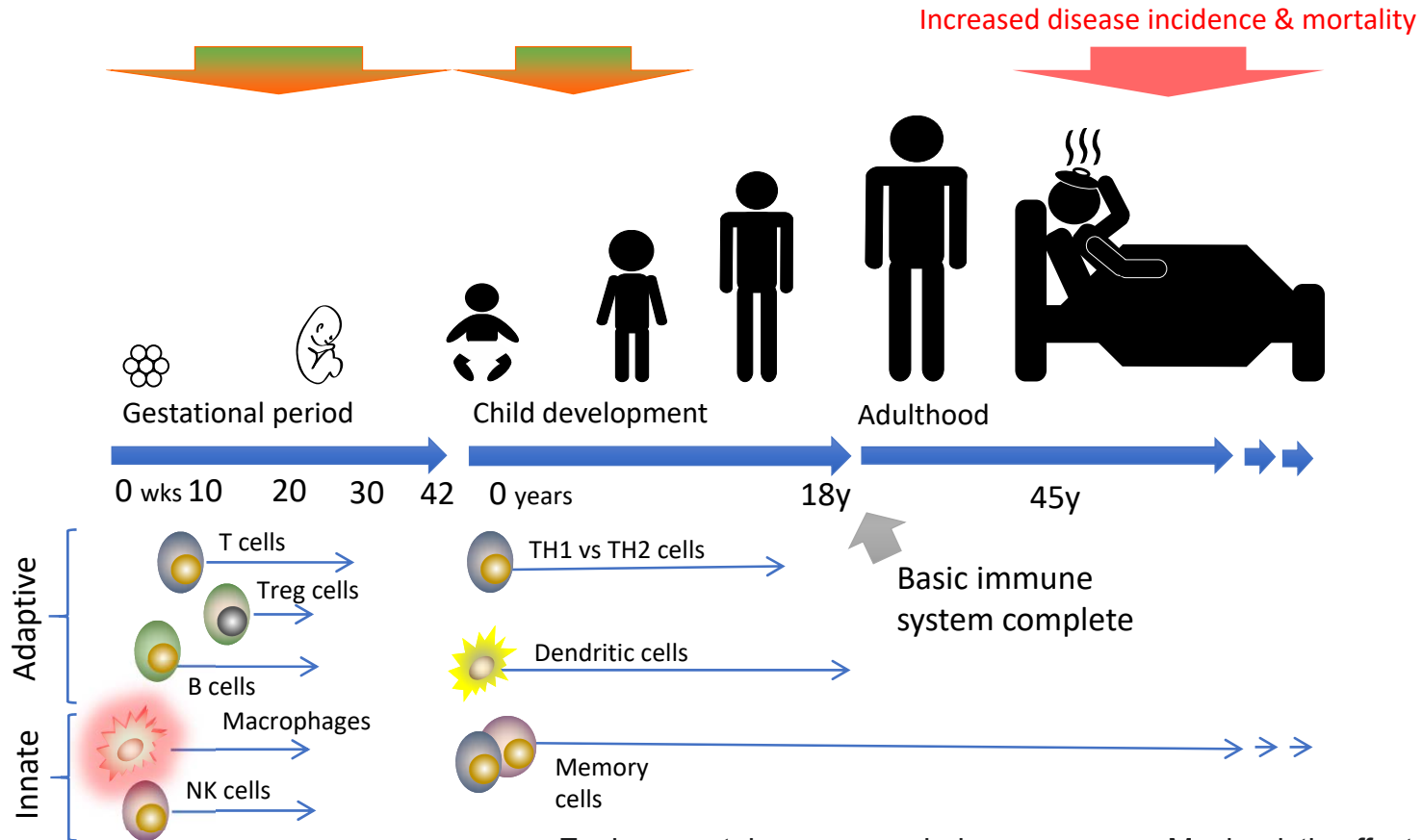
Immunomodulation



Adapted from: Casarett & Doull's Essentials of Toxicology, 2010. 2nd edition (Klaassen CD, Watkins JB, eds) New York: McGraw-Hill. ISBN – 978-0-07-162240-0

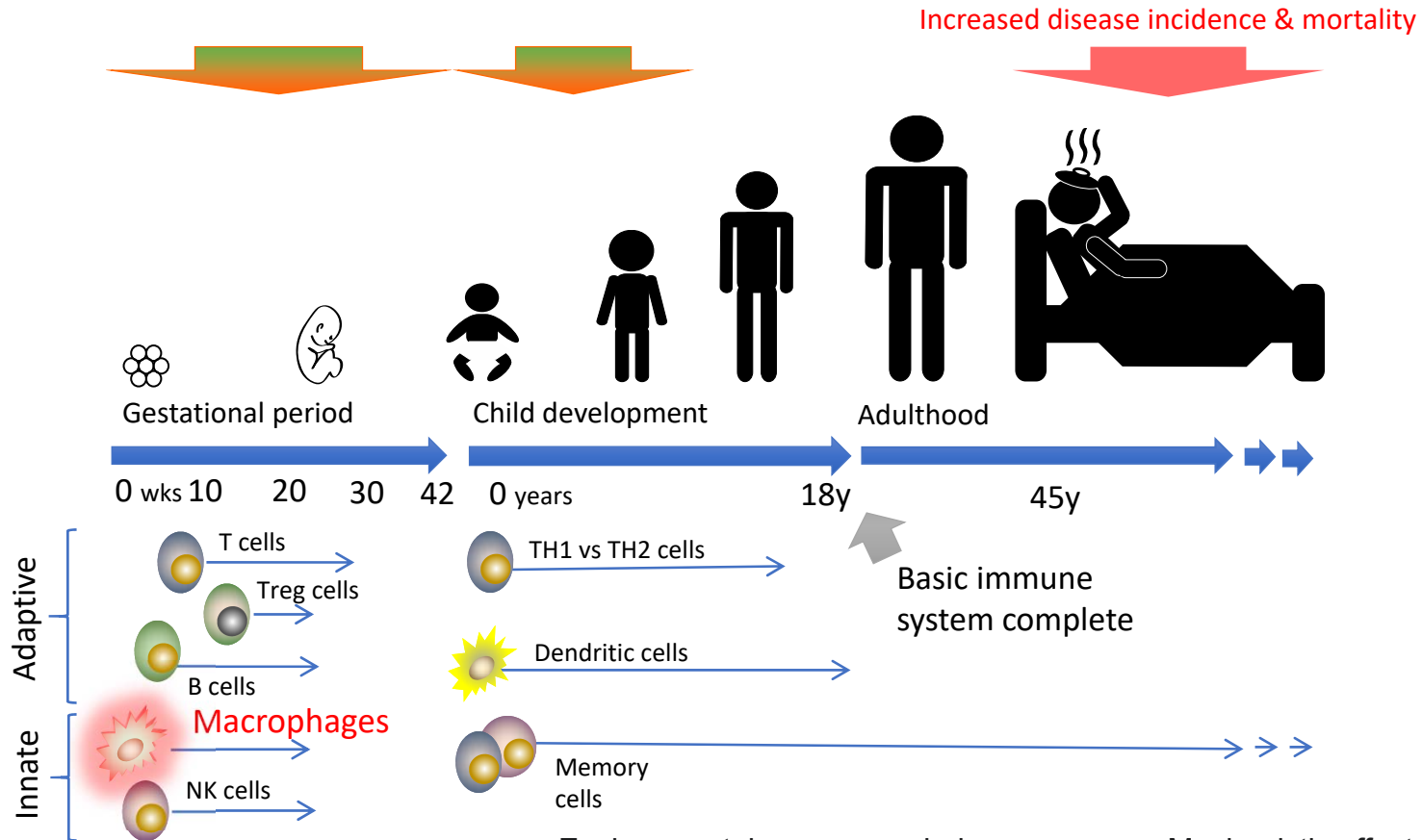
Perinatal windows of susceptibility

Early-life exposures to environmental factors



Environmental exposures during pregnancy: Mechanistic effects on immunity, Rychlik K., & Sillé, F. Birth Defects Research Vol. 111; 4: 178-196, 2019

Early-life exposures to environmental factors



Environmental exposures during pregnancy: Mechanistic effects on immunity, Rychlik K., & Sillé, F. Birth Defects Research Vol. 111; 4: 178-196, 2019

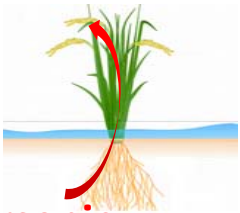
Developmental immunotoxicity (DIT): windows of susceptibility

<u>Gestation</u>				<u>Lactation</u>		
	Immune Maturation Events				Immune Maturation Events	
<i>Gestation Length</i>	1. Initiation of Hematopoiesis	2. Migration of Stem Cells and Expansion of Progenitor Cells	3. Colonization of Bone marrow and Thymus	<i>Lactation Timing</i>	4. Maturation to Immuno-competence	5. Establishment of Immune Memory
<i>Rat average: 22 days</i> <i>Mouse average: 20 days</i>	Rat/Mouse: GD 7-9	Rat/Mouse: GD 9-16	Rat/Mouse: Birth- GD 11	<i>Rat/Mouse: Birth - PND21</i>	Rat/Mouse: Birth – PND21	-
<i>Human average: 40 weeks</i>	Human: GW 8-10	Human: GW 10-16	Human: Birth – GW 16	<i>Human: Birth to ~ 6 wk up to 3 yrs*</i>	Human: Birth – 1 yr	Human: 1- 3 yrs
<u>Pre-Pubescent</u>				<u>Post-Puberty</u>		
	Immune Maturation Events			Immune Maturation Events		
<i>Pre-Pubescent Timing</i>	4. Maturation to Immuno-competence	5. Establishment of Immune Memory	<i>Post-Puberty Timing</i>	5. Establishment of Immune Memory		
<i>~6 weeks rat (~PND42)</i> <i>~4-5 weeks mouse (varies by strain)</i>	Rat/Mouse: PND21 - PND30	Rat/Mouse: PND30 - PND60	<i>> ~ 6 weeks rat (~PND42)</i> <i>> ~ 4-5 weeks mouse (varies by strain)</i>	Rat/Mouse: > PND60		
<i>~10-13 yr Human</i>	Human: Birth – 1 yr	Human: 1 yr to ~10-13yr	<i>> ~ 10-13 yr Human</i>	Human: >10-13 yr		

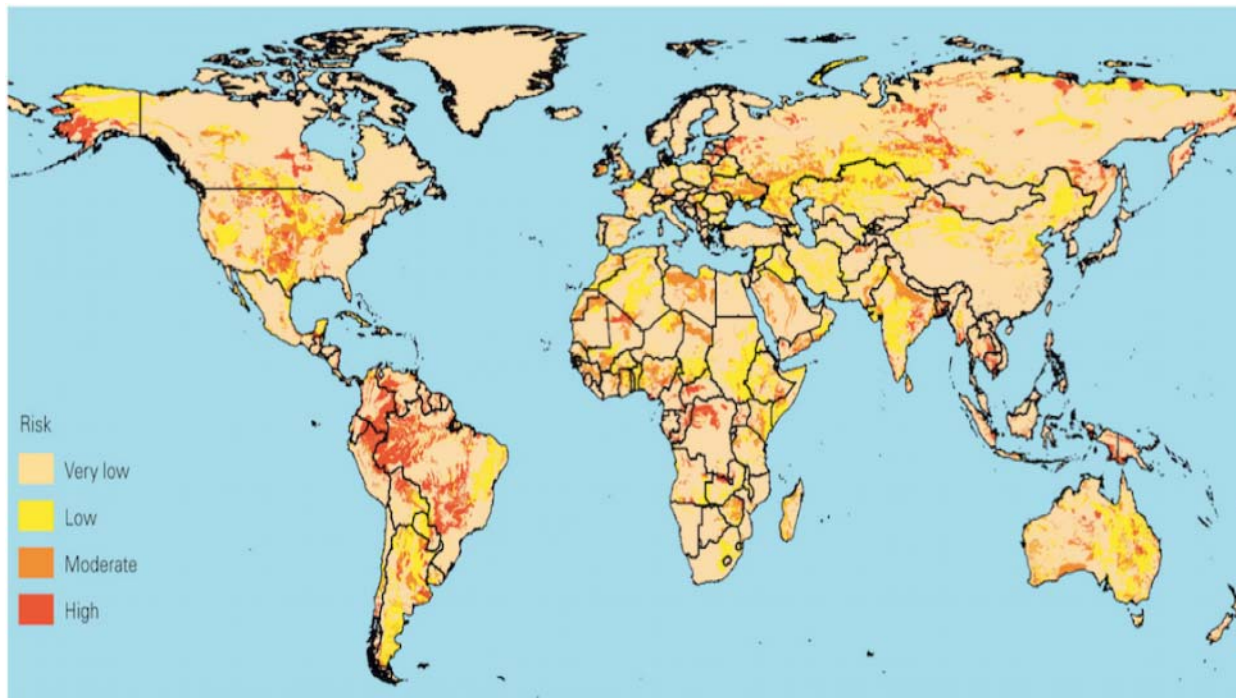
Current Status of Developmental Immunotoxicity: Early-Life Patterns and Testing, DeWitt, J., et al, Toxicologic Pathology, 40: 230-236, 2012

In utero and early life exposures to arsenic:
Later life disease

Arsenic prevalence, exposure & disease



Arsenic



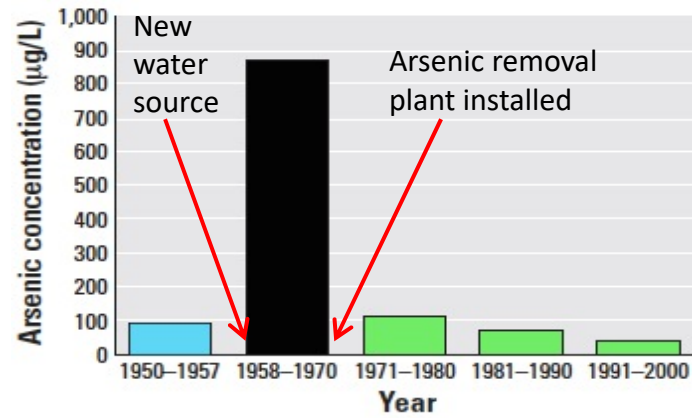
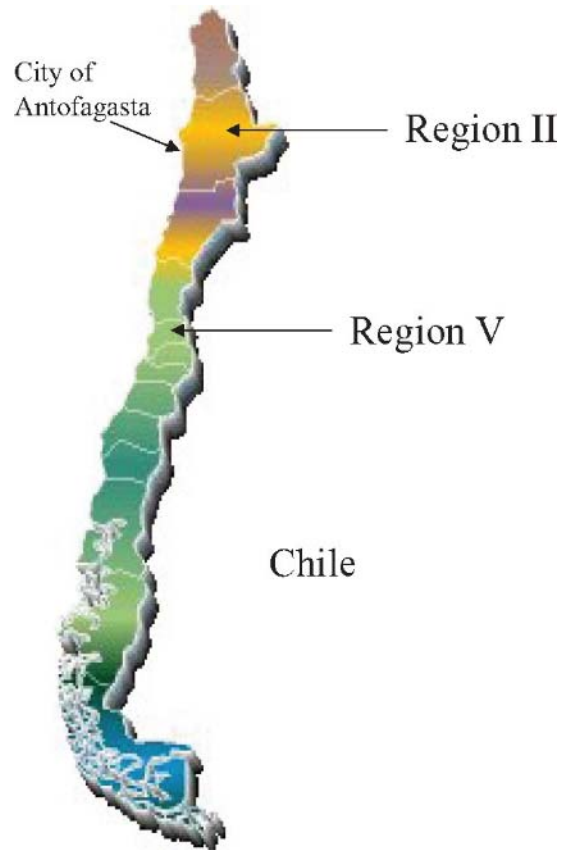
Immunotoxicant



"LungCAXR" by James Heilman, MD - Own work. CC BY-SA 3.0 Wikimedia Commons

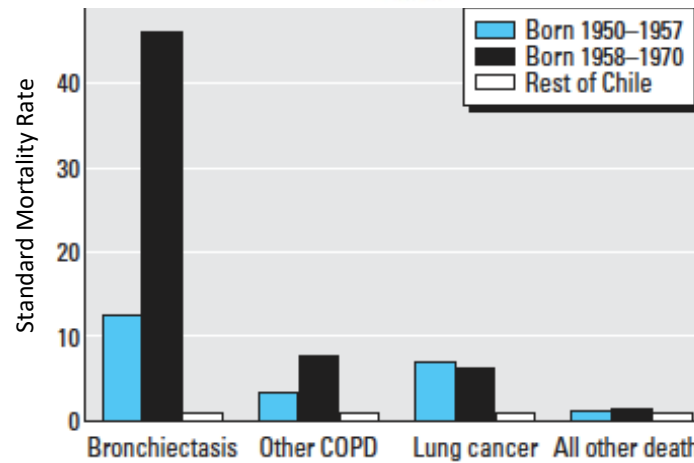
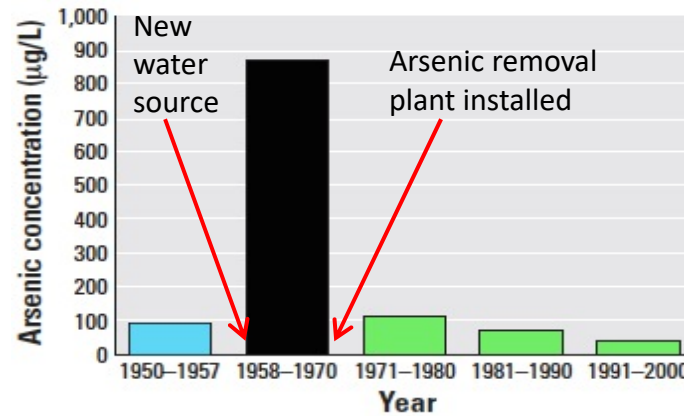
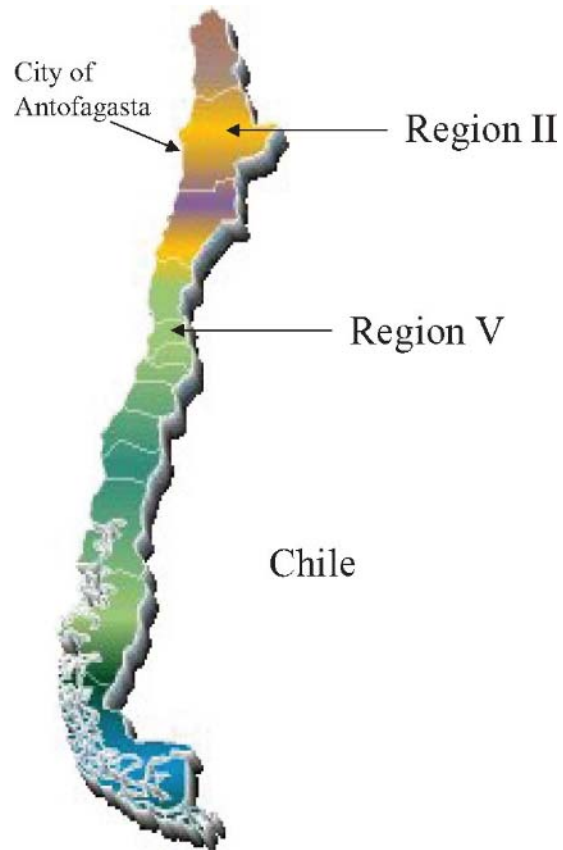
- US EPA & WHO drinking water standard = 10 $\mu\text{g}/\text{L}$ (10 ppb)

Early-life exposure to arsenic in Chile



Ferreccio, C., *et al.* Epidemiology 2000; Smith, A., *et al.* EHP 2006 ; Yuan, Y., *et al.* Epidemiology 2010; Steinmaus, C., *et al.* CEBP 2013

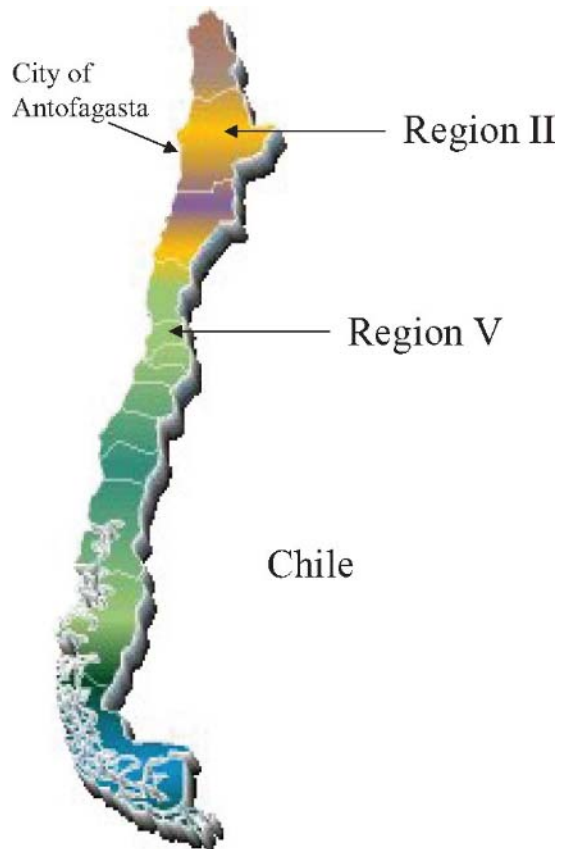
Early-life exposure to arsenic in Chile – Later life disease



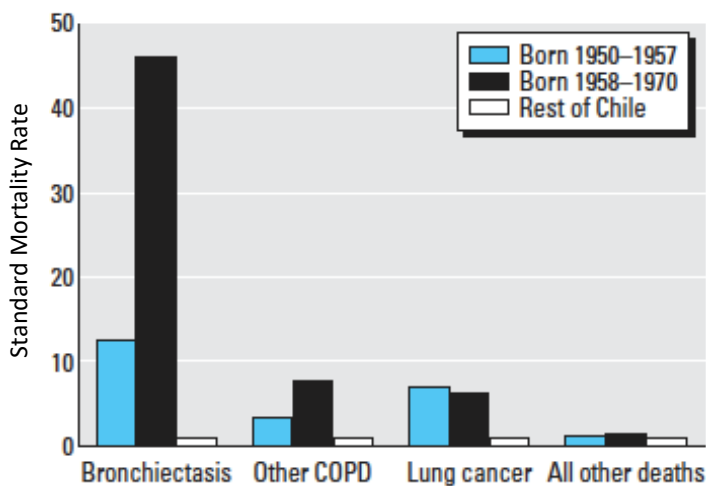
> 40 years later

Ferreccio, C., *et al.* Epidemiology 2000; Smith, A., *et al.* EHP 2006 ; Yuan, Y., *et al.* Epidemiology 2010; Steinmaus, C., *et al.* CEBP 2013

Early-life exposure to arsenic in Chile – Later life disease



Rare evidence supporting the “Developmental Origins of Health and Disease” hypothesis.

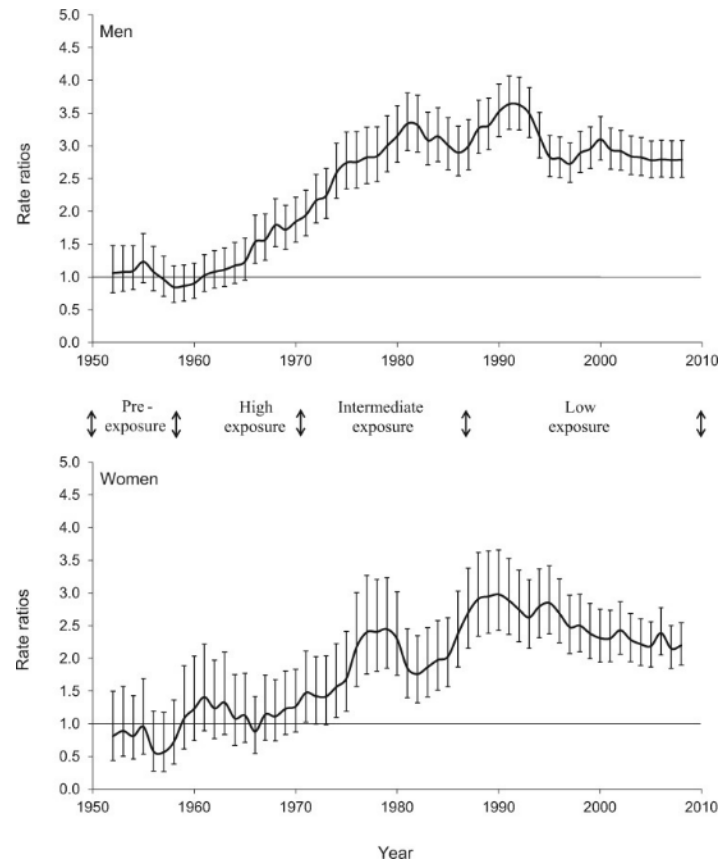
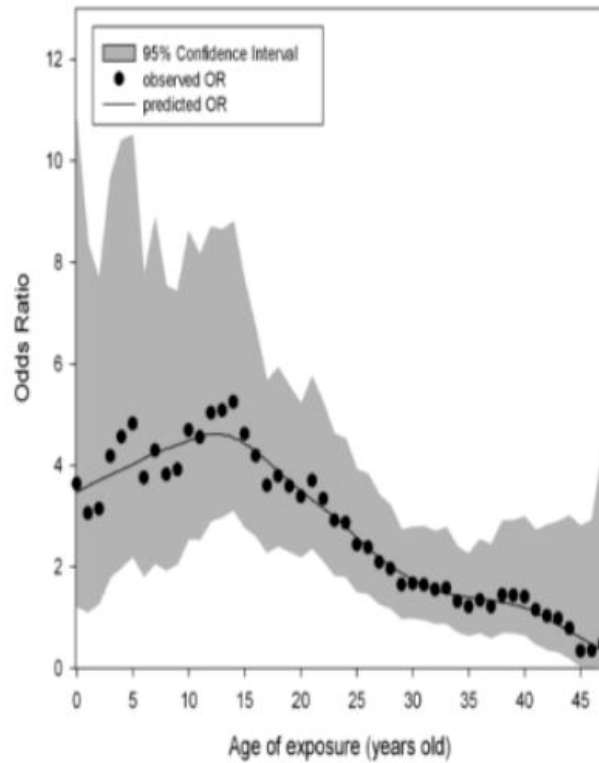


> 40 years later

Ferreccio, C., *et al.* Epidemiology 2000; Smith, A., *et al.* EHP 2006 ; Yuan, Y., *et al.* Epidemiology 2010; Steinmaus, C., *et al.* CEBP 2013

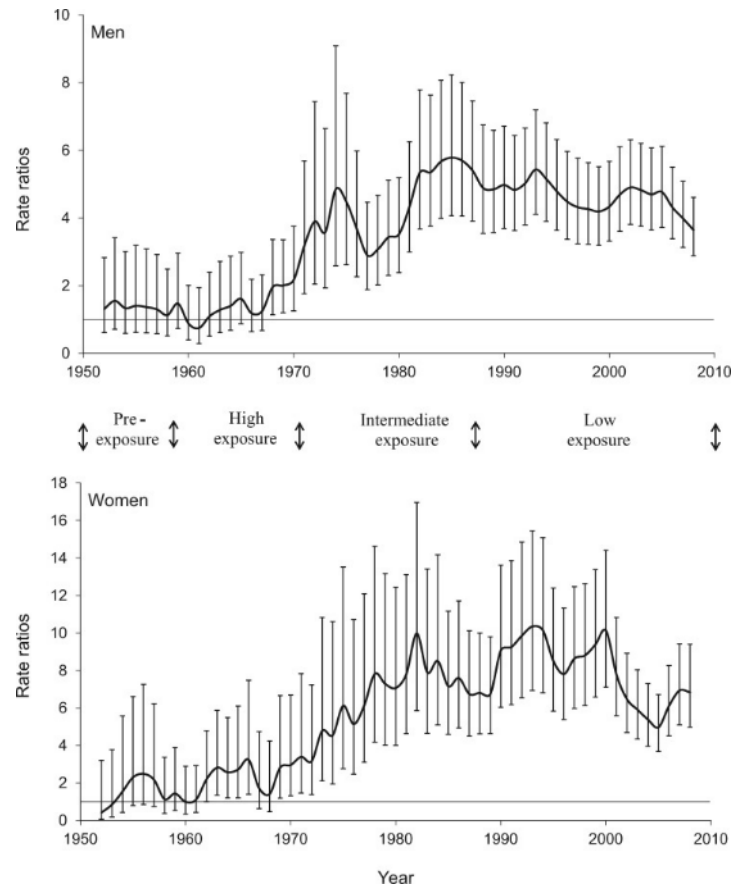
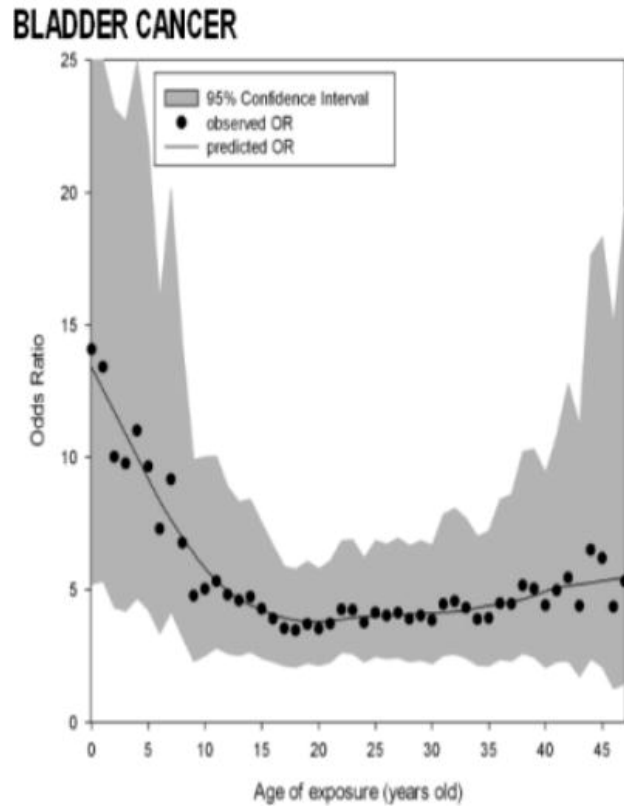
Early-life exposure to arsenic in Chile – Lung cancer

LUNG CANCER



Steinmaus, C. et al *Cancer Epidemiol Biomarkers Prev.* 2014 Aug;23(8):1529-38. and Smith, A., et al. *J Natl Cancer Inst.* 2018 Mar 1;110(3):241-249.

Early-life exposure to arsenic in Chile – Bladder cancer



Steinmaus, C. et al. *Cancer Epidemiol Biomarkers Prev.* 2014 Aug;23(8):1529-38. and Smith, A., et al. *J Natl Cancer Inst.* 2018 Mar 1;110(3):241-249.

Early-life exposure to arsenic in Chile + Obesity = high cancer risk

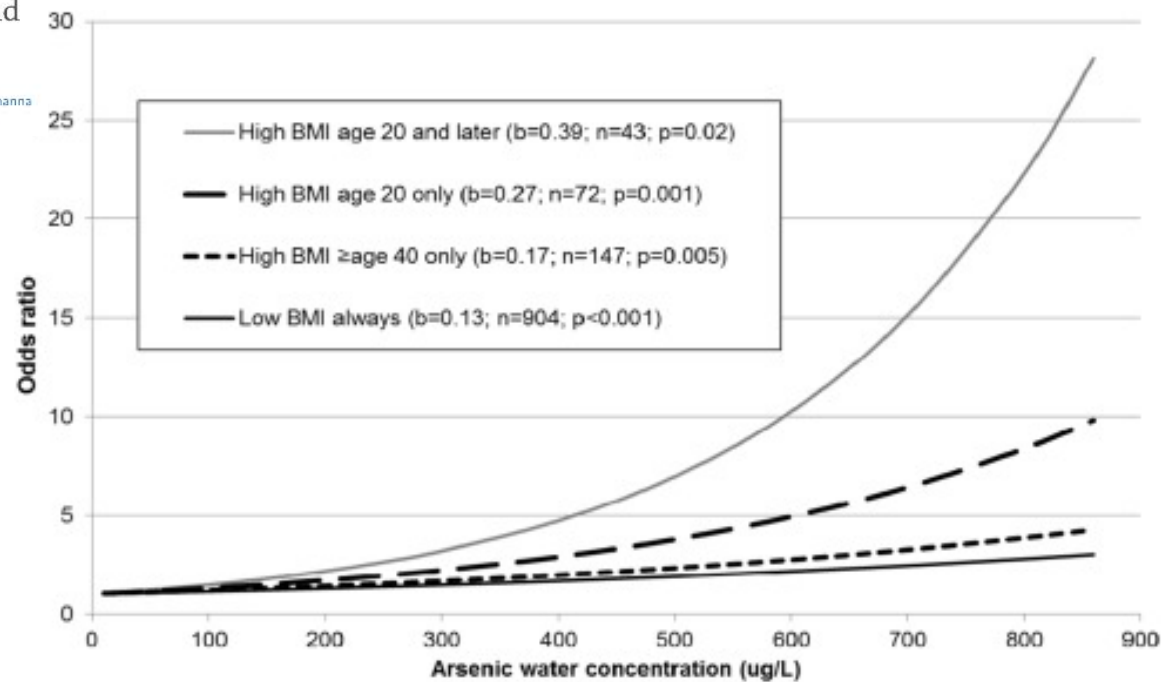


Environmental Research
Volume 142, October 2015, Pages 594-601



Obesity and excess weight in early adulthood and high risks of arsenic-related cancer in later life

Craig Steinmaus^{a, b, c, d, e}, Felicia Castriota^f, Catterina Ferreccio^d, Allan H. Smith^g, Yan Yuan^a, Jane Liaw^a, Johanna Acevedo^d, Liliana Pérez^h, Rodrigo Meza^g, Sergio Calcagno^f, Ricardo Uauy^{g, h}, Martyn T. Smithⁱ



Steinmaus et al, Environ Res. 2015 Oct;142:594-601.

Early-life exposure to arsenic in Chile – T2D

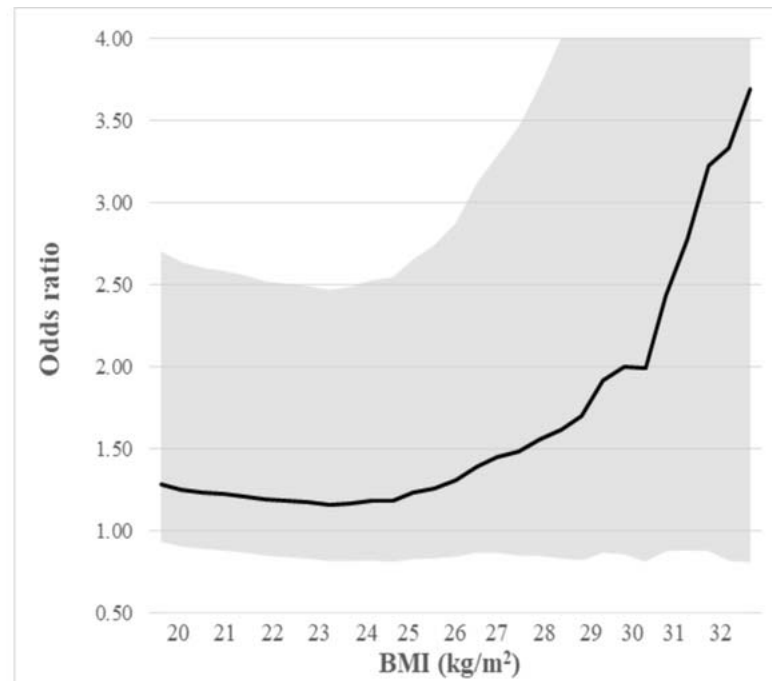


Environmental Research
Volume 167, November 2018, Pages 248-254



Obesity and increased susceptibility to arsenic-related type 2 diabetes in Northern Chile

Felicia Castriota ^a, Johanna Acevedo ^b, Catterina Ferreccio ^b, Allan H. Smith ^c, Jane Liaw ^c, Martyn T. Smith ^d, Craig Steinmaus ^{c, d, e}



Dark line represents the odds ratios. Shaded area represents the 95% confidence intervals. 10,000 µg/L is approximately the range between lower and upper tertile groups of arsenic exposure.

Early-life exposure to arsenic in Chile – T2D



Environmental Research

Volume 172, May 2019, Pages 578-585

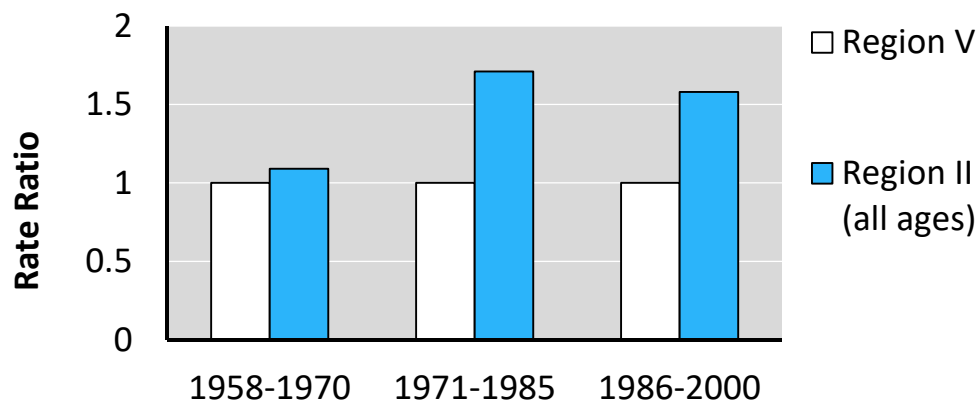
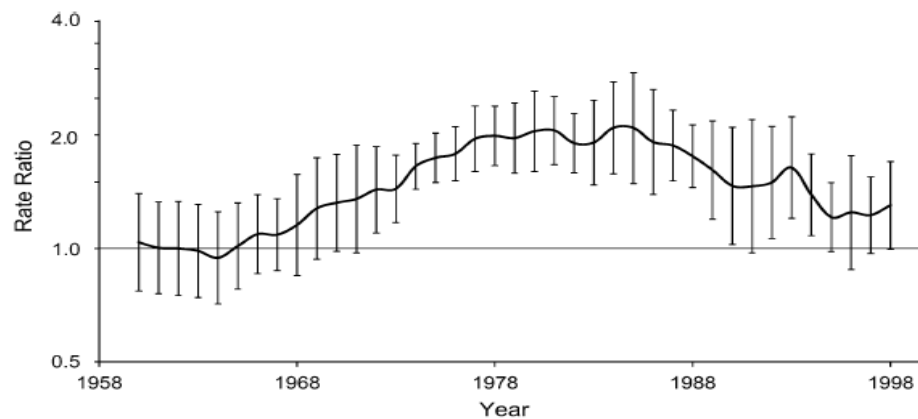
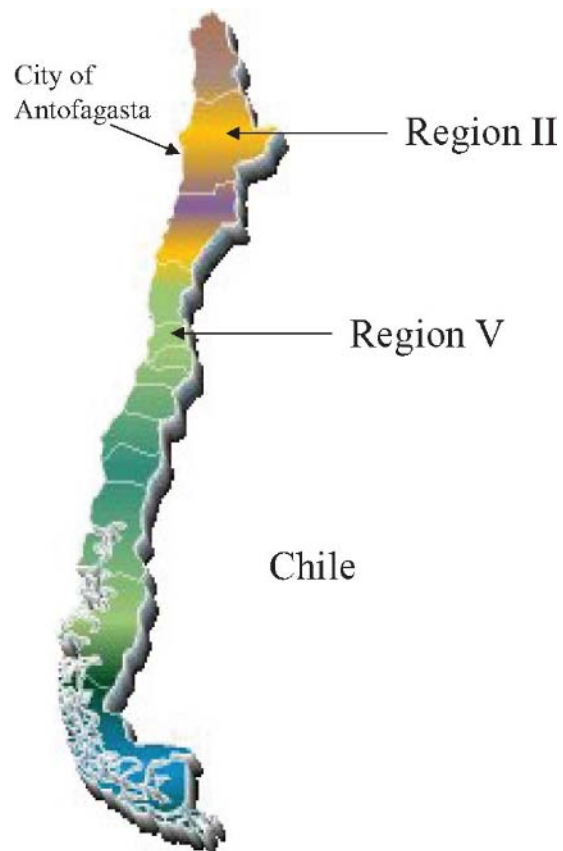


Socioeconomic status and the association between arsenic exposure and type 2 diabetes

Stephanie M. Eick ^a, Catterina Ferreccio ^b, Johanna Acevedo ^b, Felicia Castriota ^c, José F. Cordero ^a, Taehyun Roh ^d, Allan H. Smith ^d, Martyn T. Smith ^c, Craig Steinmaus ^{d, e} ✉

Low SES

Early-life exposure to arsenic in Chile – Later life TB



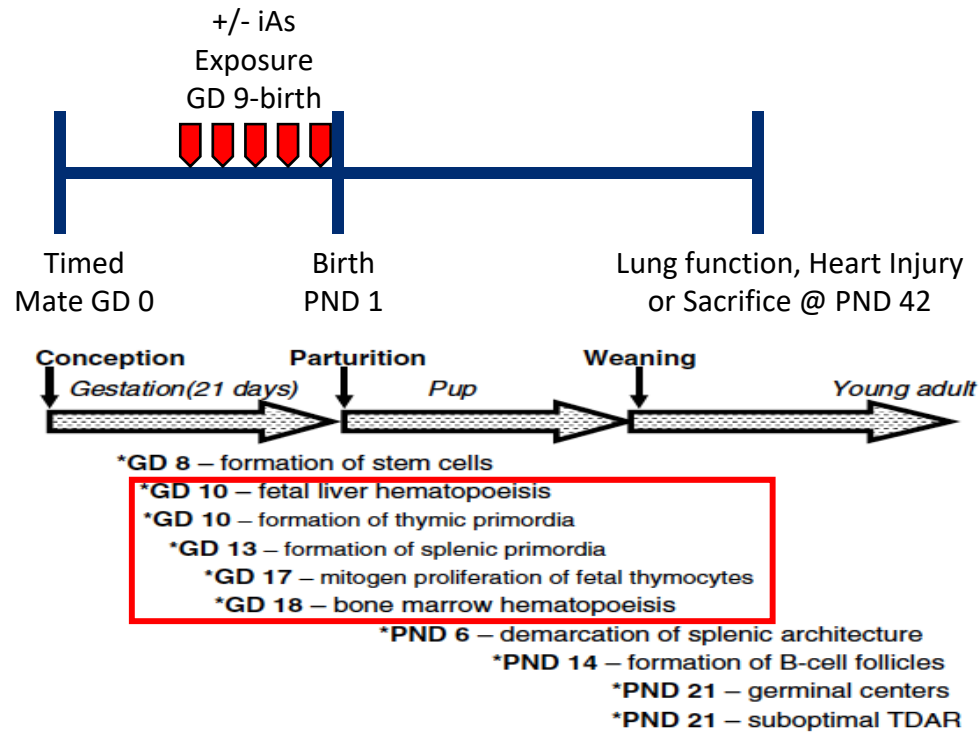
Early-life exposure to arsenic in Chile – Later life cytokine profiles

*External Exposure at Birth (ug/L)									
Cytokine**	% detectable	Continuous Scaled per 200 ug/L				Categorical Low: <860 ug/L; High: 860 ug/L			
		Unadjusted OR (95% CI)	p-value	Adjusted OR*** (95% CI)	p-value	Unadjusted OR (95% CI)	p-value	Adjusted OR*** (95% CI)	p-value
MCP-1	100	0.06 (0.00, 0.11)	0.036	0.05 (-0.01, 0.10)	0.082	0.22 (-0.00, 0.44)	0.052	0.19 (-0.04, 0.42)	0.097
IP-10	100	0.02 (-0.04, 0.08)	0.499	0.00 (-0.06, 0.06)	0.941	0.04 (-0.20, 0.28)	0.727	-0.03 (-0.27, 0.22)	0.830
MIP-1-β	99	0.05 (-0.01, 0.11)	0.094	0.05 (-0.01, 0.11)	0.083	0.20 (-0.04, 0.45)	0.096	0.22 (-0.03, 0.46)	0.083
Eotaxin-CCL-11	98	0.10 (-0.00, 0.21)	0.060	0.10 (-0.01, 0.21)	0.074	0.43 (0.00, 0.86)	0.049	0.44 (-0.01, 0.88)	0.056
EGF	88	0.10 (-0.04, 0.25)	0.171	0.10 (-0.05, 0.25)	0.188	0.40 (-0.19, 0.99)	0.180	0.38 (-0.22, 0.98)	0.208
IL-1Ra	85	0.06 (-0.06, 0.19)	0.329	0.09 (-0.03, 0.21)	0.150	0.27 (-0.24, 0.79)	0.296	0.40 (-0.10, 0.90)	0.116
TNF-α	73	0.01 (-0.11, 0.12)	0.906	0.02 (-0.10, 0.14)	0.704	0.02 (-0.45, 0.48)	0.941	0.09 (-0.39, 0.57)	0.718
IL-8	69	0.11 (-0.00, 0.23)	0.056	0.12 (0.00, 0.24)	0.047	0.40 (-0.07, 0.88)	0.097	0.45 (-0.04, 0.94)	0.072
VEGF	61	-0.18 (-0.44, 0.08)	0.183	-0.17 (-0.44, 0.10)	0.223	-0.70 (-1.76, 0.37)	0.196	-0.65 (-1.77, 0.46)	0.248
IL-15	59	0.05 (-0.09, 0.19)	0.503	0.08 (-0.06, 0.21)	0.265	0.22 (-0.35, 0.79)	0.446	0.33 (-0.22, 0.87)	0.235
MIP-1-α	56	0.10 (0.01, 0.19)	0.039	0.12 (0.02, 0.21)	0.016	0.38 (-0.00, 0.76)	0.052	0.45 (0.07, 0.84)	0.022
IL-5	46	0.08 (-0.05, 0.22)	0.218	0.11 (-0.02, 0.23)	0.093	0.34 (-0.20, 0.89)	0.213	0.44 (-0.07, 0.95)	0.088
IL-12p40	44	0.04 (-0.11, 0.20)	0.600	0.08 (-0.08, 0.24)	0.316	0.23 (-0.40, 0.86)	0.470	0.40 (-0.24, 1.03)	0.216
GM-CSF	42	0.05 (-0.06, 0.15)	0.375	0.06 (-0.05, 0.15)	0.279	0.26 (-0.15, 0.67)	0.209	0.30 (-0.10, 0.71)	0.140
TNF-β	42	0.14 (-0.01, 0.28)	0.062	0.19 (0.05, 0.33)	0.010	0.54 (-0.04, 1.12)	0.066	0.78 (0.21, 1.35)	0.008
IL-10	38	0.13 (-0.05, 0.30)	0.150	0.13 (-0.04, 0.31)	0.129	0.44 (-0.27, 1.14)	0.221	0.48 (-0.23, 1.18)	0.184
IL-1-β	27	0.02 (-0.02, 0.07)	0.323	0.02 (-0.02, 0.07)	0.319	0.12 (-0.09, 0.32)	0.256	0.12 (-0.08, 0.31)	0.250
IFN-α-2	23	0.09 (-0.03, 0.21)	0.122	0.08 (-0.04, 0.21)	0.191	0.39 (-0.09, 0.87)	0.113	0.34 (-0.17, 0.84)	0.187
IL-6	21	0.05 (-0.02, 0.12)	0.126	0.06 (-0.01, 0.13)	0.094	0.24 (-0.04, 0.53)	0.094	0.26 (-0.02, 0.55)	0.072
IL-2	19	0.02 (-0.05, 0.09)	0.571	0.01 (-0.06, 0.08)	0.784	0.09 (-0.18, 0.37)	0.497	0.06 (-0.23, 0.35)	0.672
IL-12p70	18	0.01 (-0.03, 0.06)	0.527	0.02 (-0.03, 0.06)	0.509	0.08 (-0.11, 0.27)	0.402	0.09 (-0.11, 0.29)	0.369
IL-13	17	0.07 (-0.03, 0.16)	0.152	0.08 (-0.01, 0.17)	0.084	0.28 (-0.10, 0.66)	0.152	0.33 (-0.05, 0.70)	0.088
IFN-γ	13	-0.00 (-0.09, 0.08)	0.918	0.00 (-0.08, 0.08)	0.986	-0.02 (-0.36, 0.31)	0.891	-0.01 (-0.35, 0.34)	0.971
G-CSF	6	0.09 (-0.03, 0.21)	0.149	0.11 (-0.01, 0.23)	0.073	0.40 (-0.08, 0.88)	0.103	0.49 (0.00, 0.98)	0.048
IL-4	5	-0.00 (-0.07, 0.07)	0.971	-0.00 (-0.08, 0.08)	0.965	0.03 (-0.27, 0.32)	0.864	0.02 (-0.29, 0.33)	0.889
IL-17a	5	-0.02 (-0.08, 0.04)	0.610	-0.02 (-0.08, 0.05)	0.582	-0.06 (-0.30, 0.19)	0.651	-0.07 (-0.33, 0.19)	0.598
IL-7	4	-0.01 (-0.04, 0.03)	0.606	-0.00 (-0.04, 0.03)	0.929	-0.02 (-0.16, 0.12)	0.748	0.01 (-0.14, 0.15)	0.916

Grant-Alfieri , A. , Zhang, H., et al, unpublished

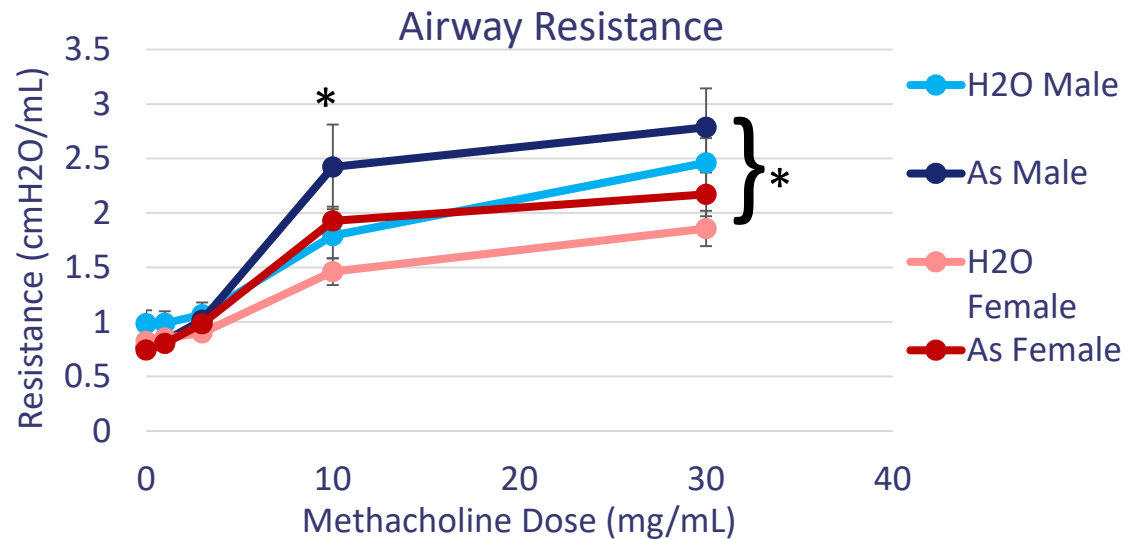
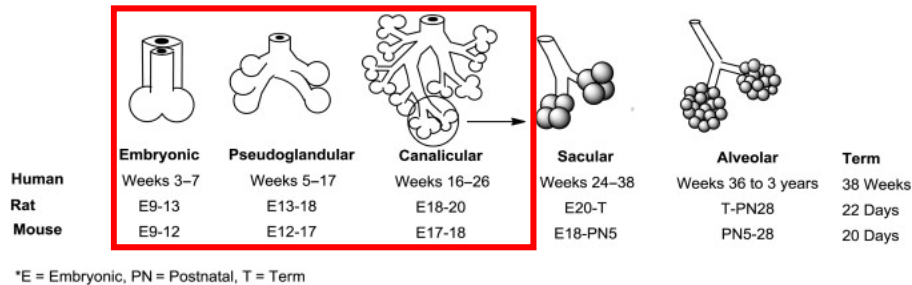
In utero arsenic exposure model

In utero Arsenic Exposure Model



Kristal Rychlik, PhD

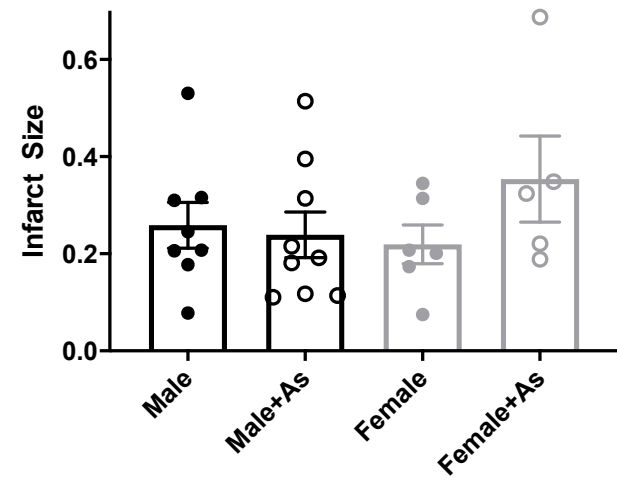
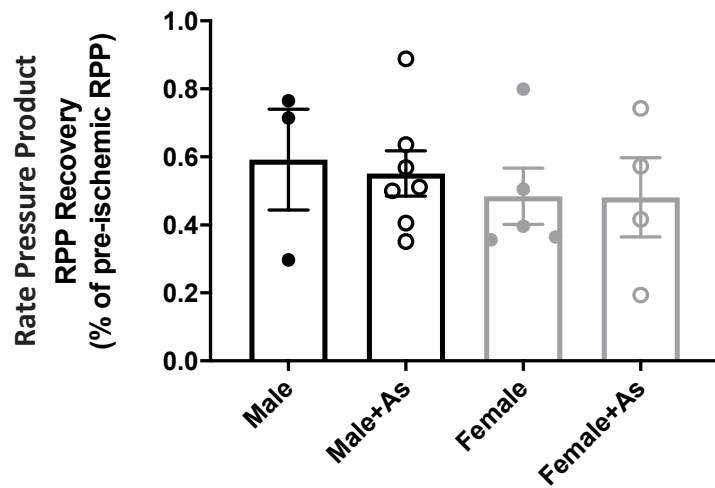
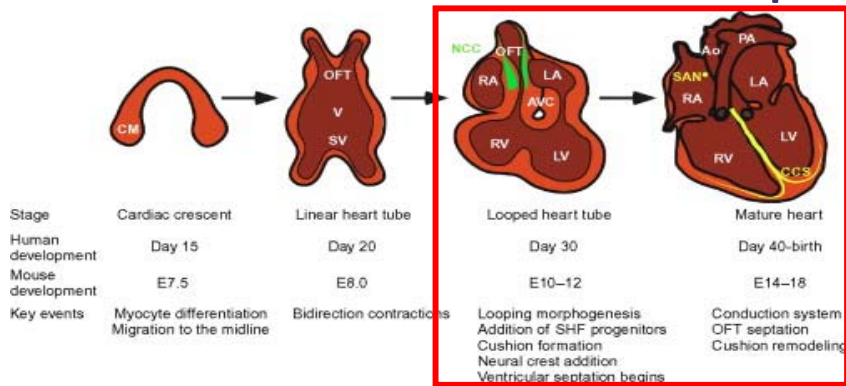
In utero Arsenic Exposure Model & Lung Function



Rychlik, Mitzner & Sillé et al, unpublished

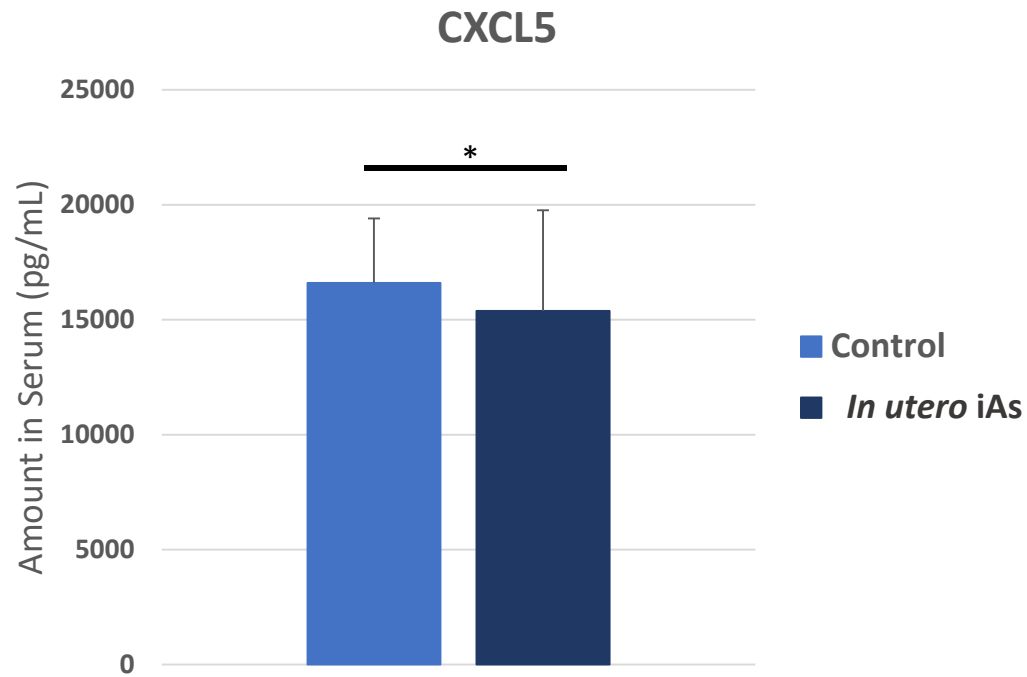
Chapter 15 - Lung Development. Lin Liu et al. MicroRNA in Regenerative Medicine; 381-399; 2015

In utero Arsenic Exposure Model & Heart Injury



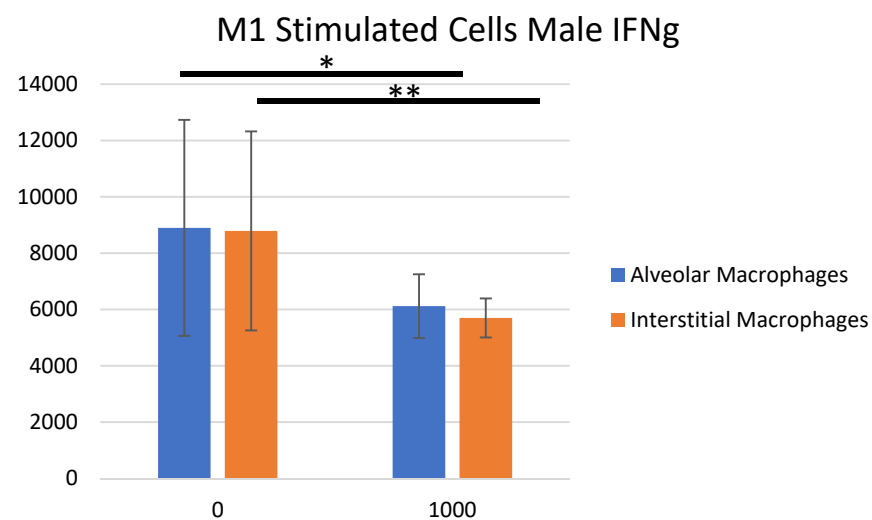
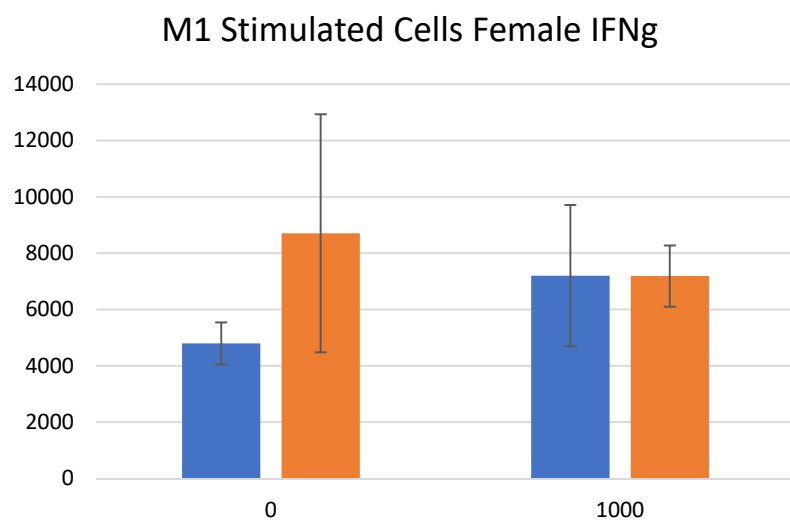
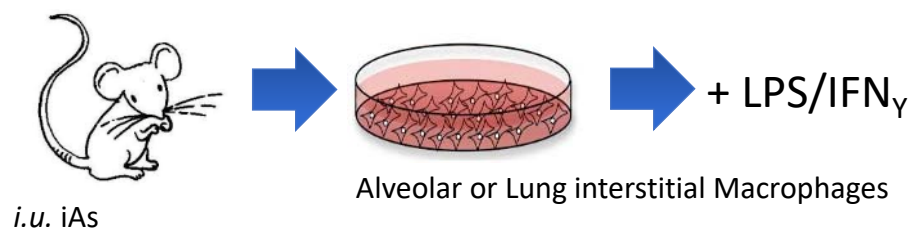
Rychlik, Kohr & Sillé et al, unpublished Heart Development. David J. McCulley, Brian L. Black, Current Topics in Developmental Biology, 2012

In utero Arsenic Exposure Model: serum cytokine changes



Age: 4 wks
N=4-8.
*p<0.05

In utero Arsenic Exposure Model: Macrophage cytokines



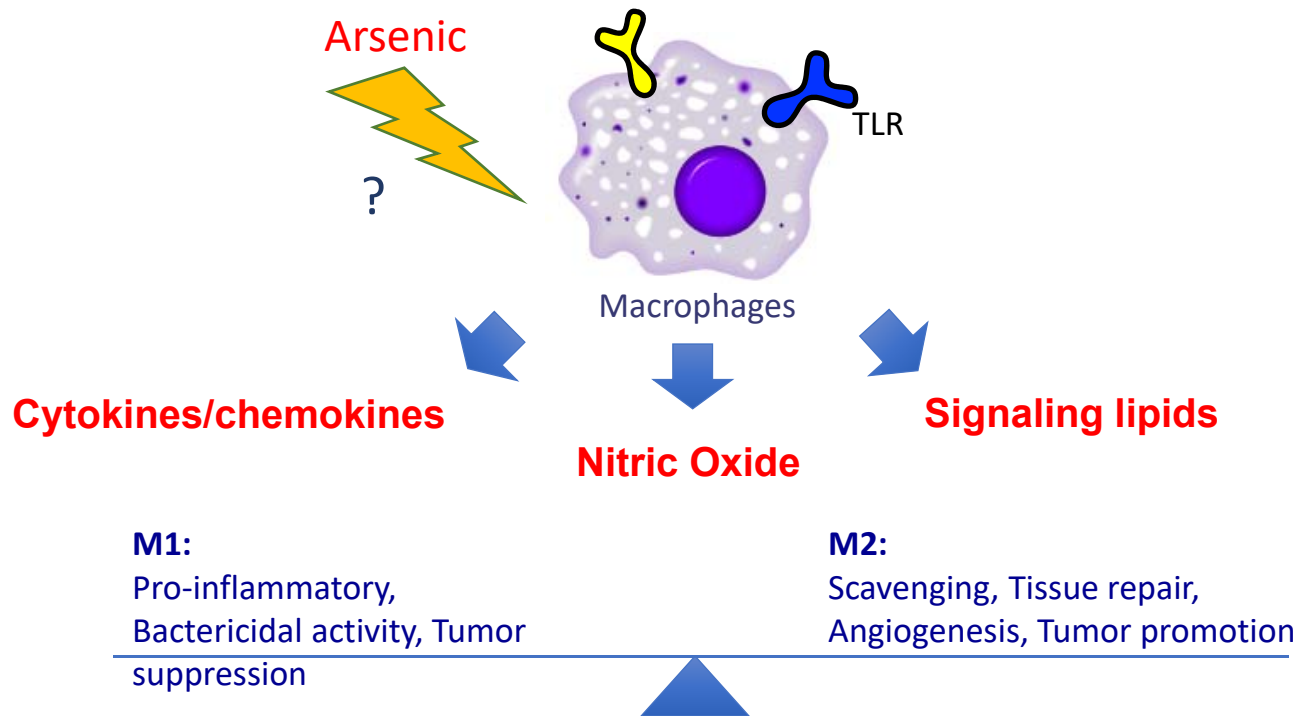
Rychlik & Sillé et al, unpublished Two-way ANOVA with Tukey's Multiple Comparisons Test; N=3; P<0.03

In vitro models for *in utero* exposures to arsenic:
Macrophages

Arsenic & macrophages

Hypothesis:

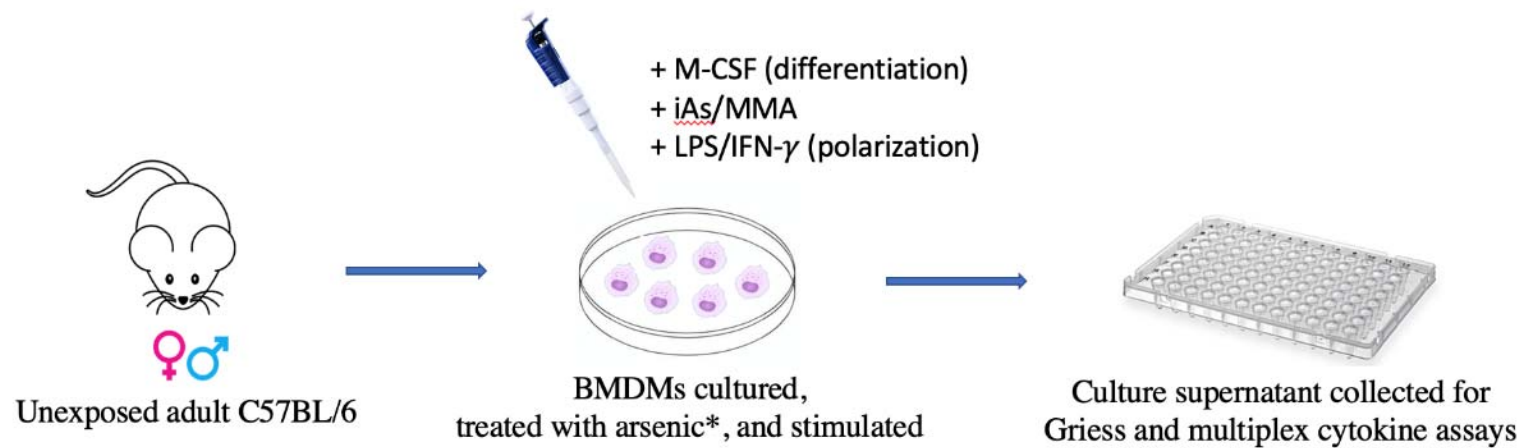
Early-life exposure to arsenic alters macrophage development & function causing increased disease later in life.



Evaluate function and polarization states of arsenic-exposed macrophages



Emily Illingworth

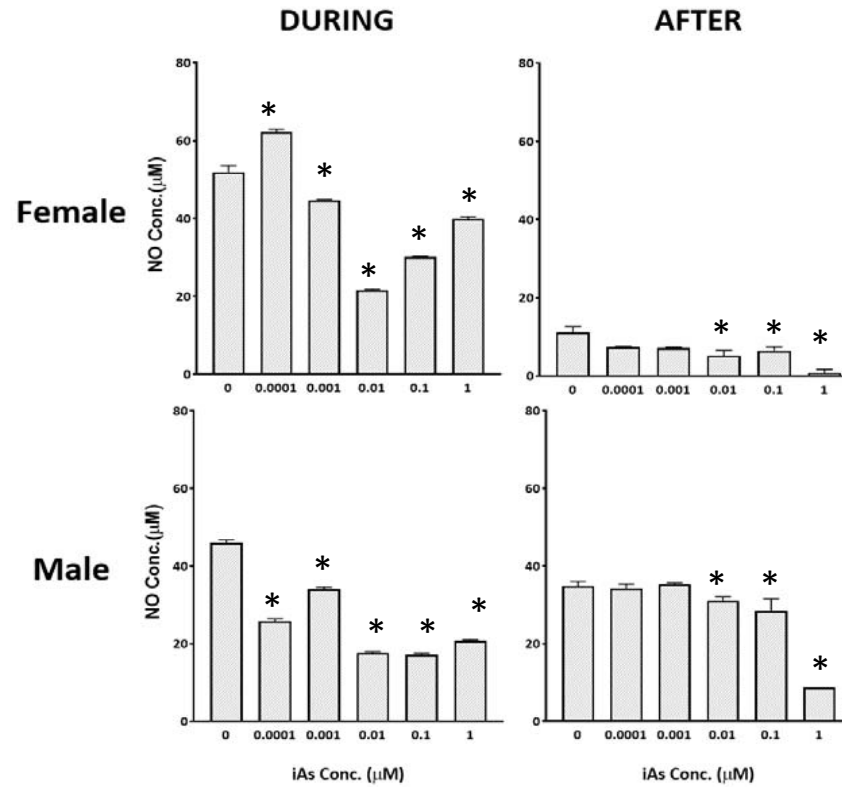


*Arsenic was added to culture either during or after differentiation in doses: 0, 0.01, 0.1, 1 μ M

Arsenic alters macrophage function

Developmental model vs. Mature model:

Griess Assay >
Nitric Oxide



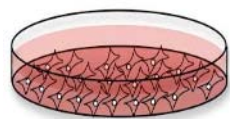
* $P < 0.05$

Arsenic alters cytokine/chemokine expression

Homeostasis



Mouse bone marrow



Macrophages

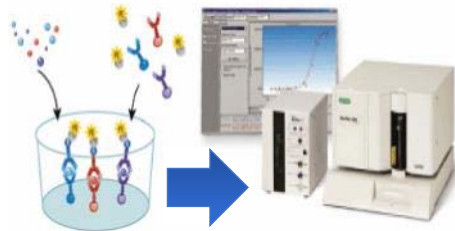
+/- 0.1 uM iAs

M1: 100ng/mL LPS +

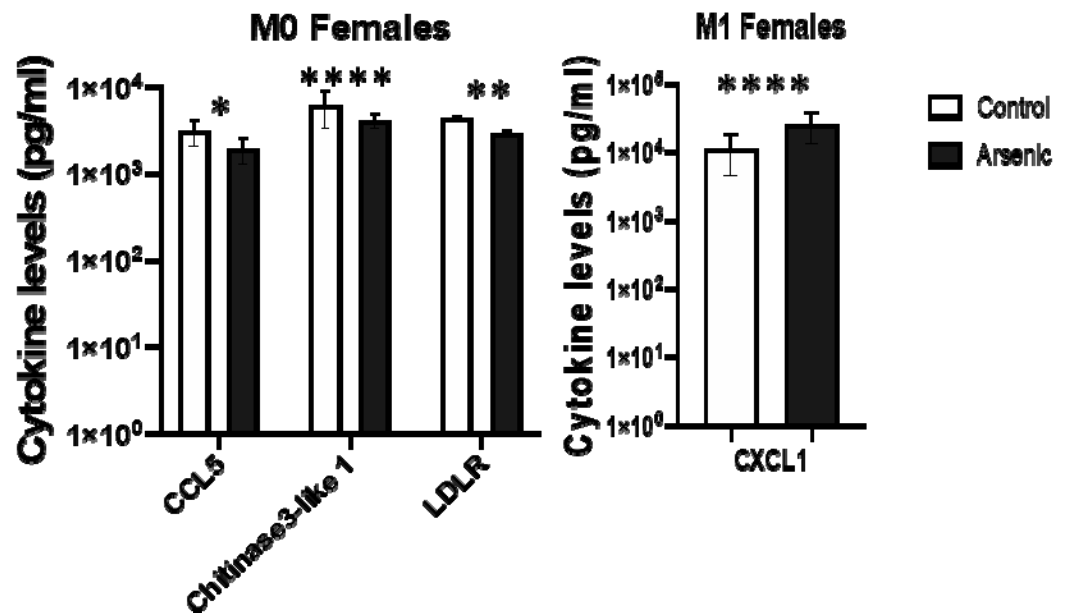
6.25 ng/mL IFN γ

M2: 20ng/mL IL-4

and IL-13



Signaling protein analysis



Arsenic alters cytokine/chemokine expression

Homeostasis



Mouse bone marrow



Macrophages

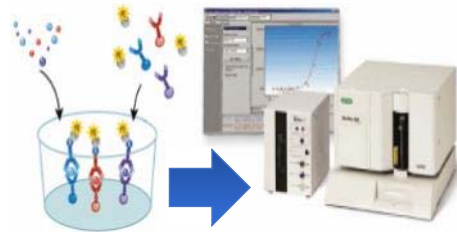
+/- 0.1 uM iAs

M1: 100ng/mL LPS +

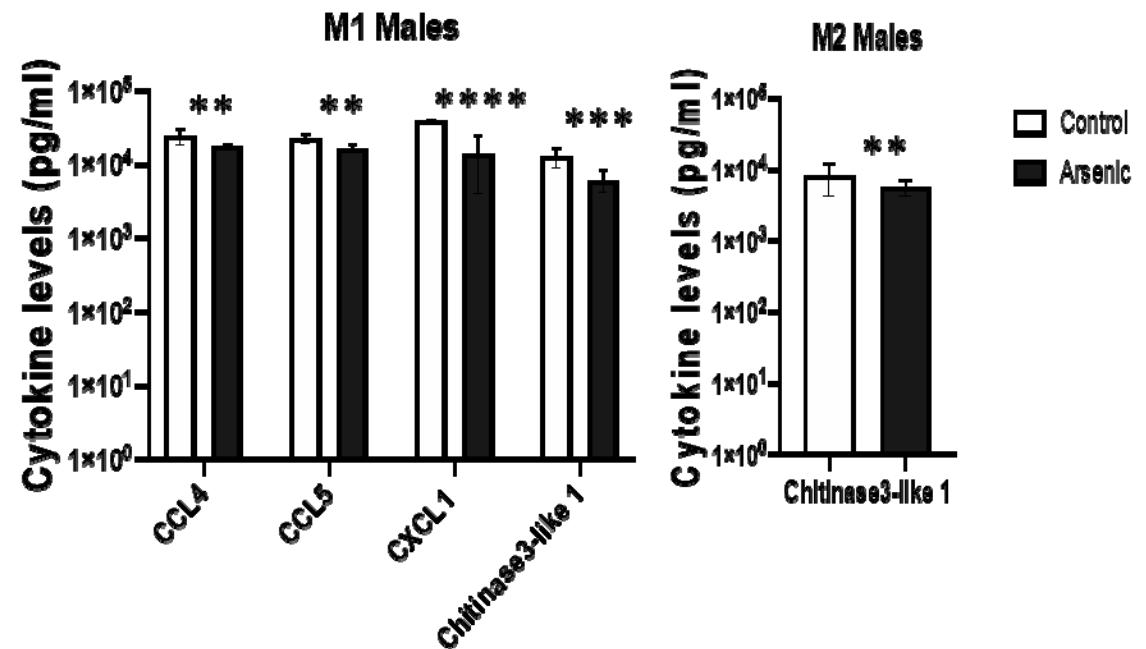
6.25 ng/mL IFN γ

M2: 20ng/mL IL-4

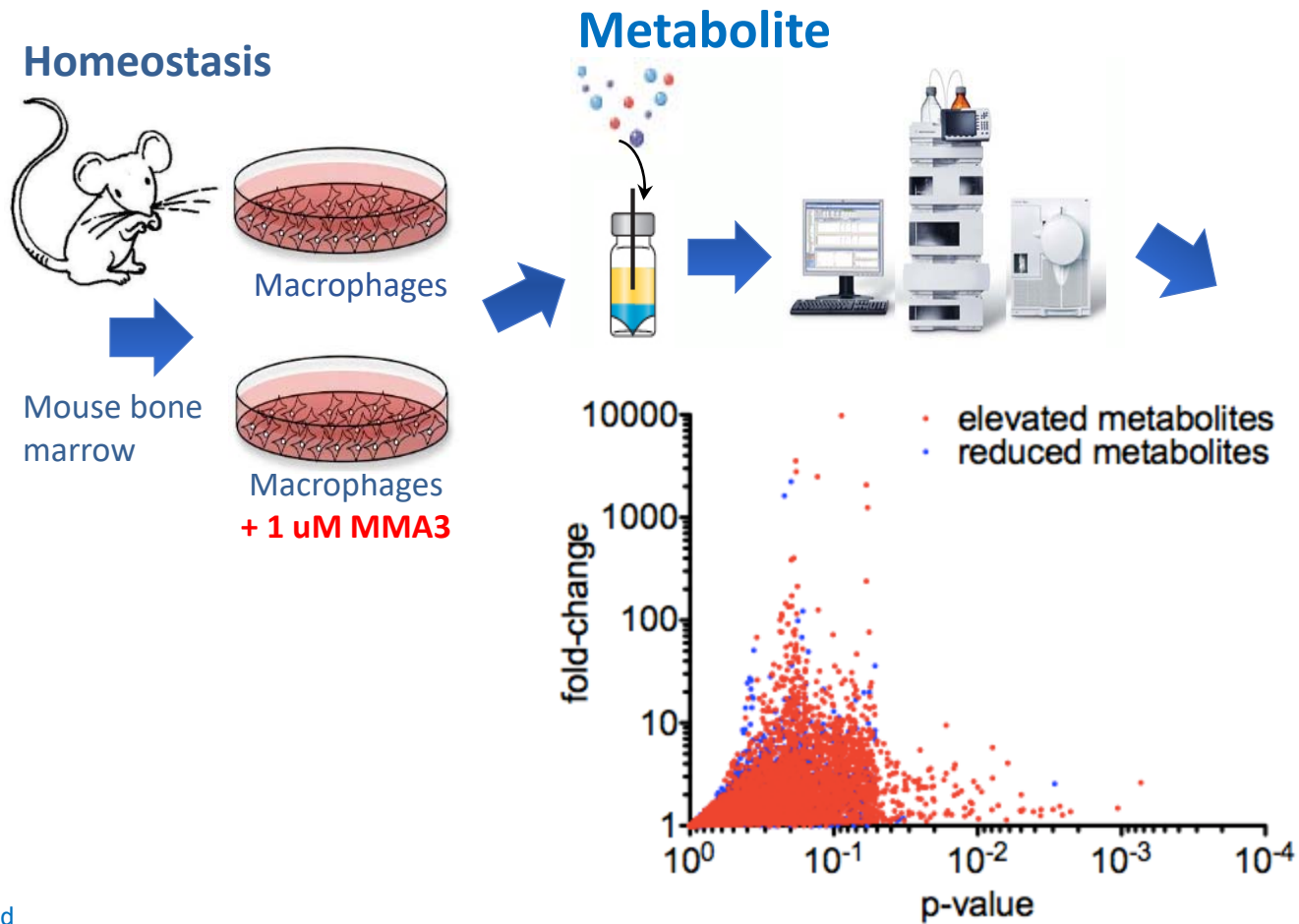
and IL-13



Signaling protein analysis

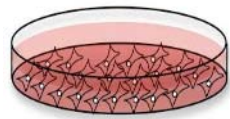


Arsenic alters signaling lipids expression



Arsenic alters signaling lipids expression

Homeostasis



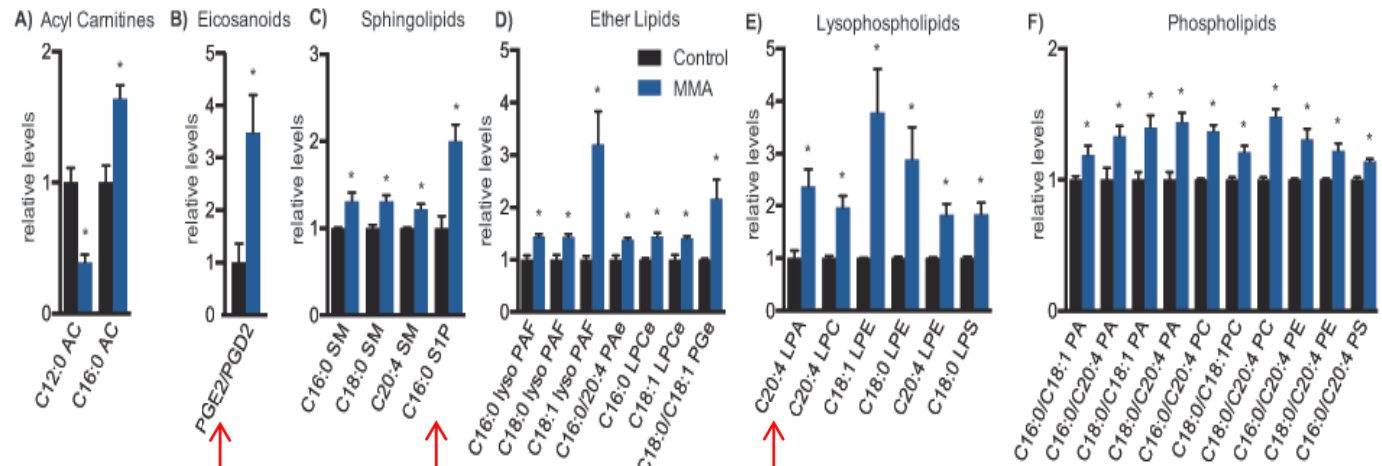
Macrophages

+/- 1 uM
MMA3

Mouse bone marrow



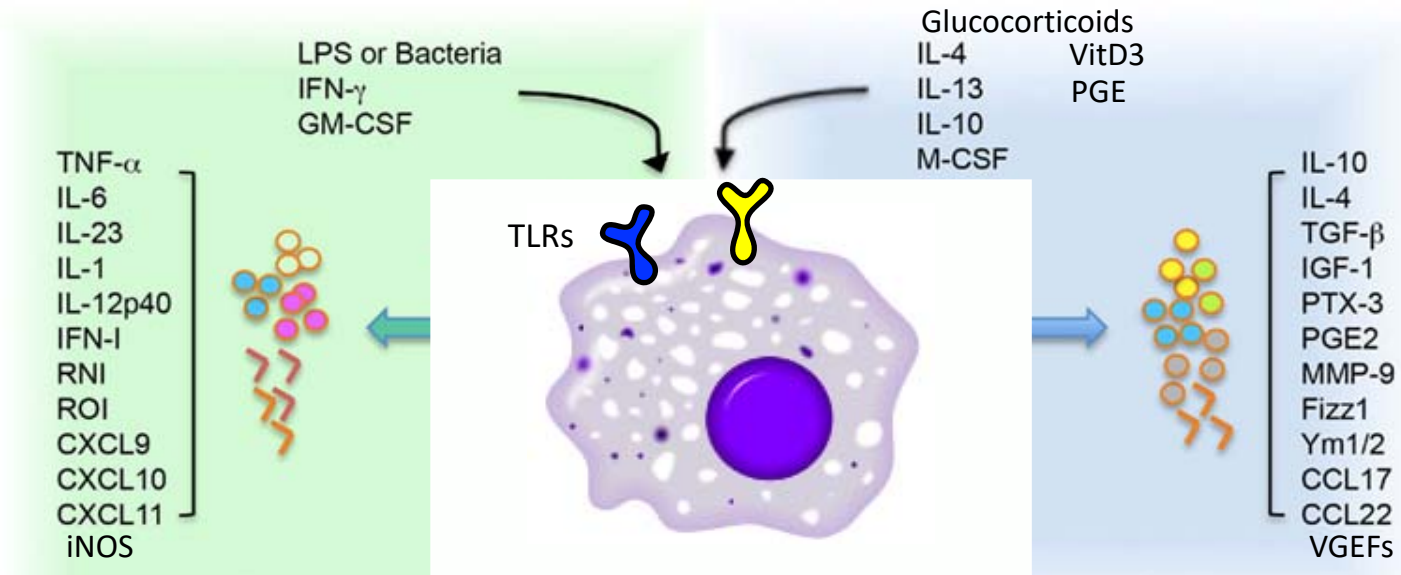
Metabolite analysis



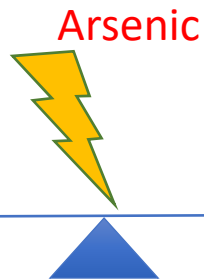
Pro-inflammatory and pro-tumorigenic signaling lipids

PGE2/PGD2 = Prostaglandins; C16:0 S1P = sphingosine-1-phosphate; LPA= lysophosphatidic acid.

Arsenic & macrophages



M1:
 Pro-inflammatory
 Bactericidal activity
 Tumor suppression

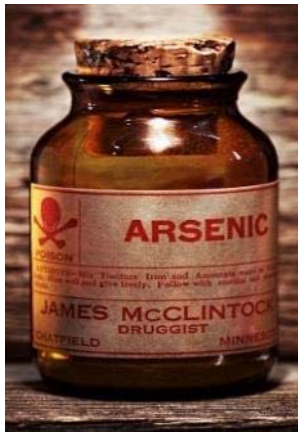


M2:
 Scavenging
 Tissue repair
 Angiogenesis
 Tumor promotion

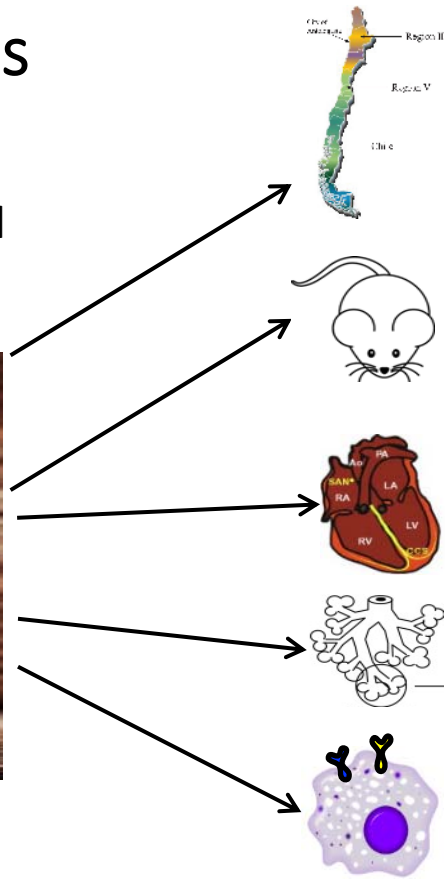
Adapted from: Bosurgi, L., *et al.* Front. Immunol. 2011

Conclusions

Environmental exposures:



Arsenic



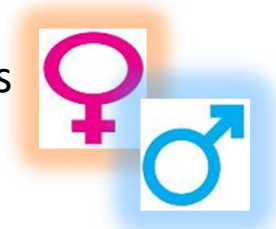
In utero & early life arsenic: increased cytokine profiles, and increased mortality from immune-related diseases even >40 years later.

In utero (P9-birth) >> Reduced pro-inflammatory cytokines

In utero (P9-birth), no effect on ischemia

In utero (P9-birth), no effect on airway resistance

iAs-exposed during differentiation vs mature macrophages >> M1/M2 skewing
>> Reduced pro-inflammatory cytokines
>> Increased pro-inflammatory lipids



Thank you!

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- ✧ Tyrone Howard
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