

# Do helminth parasites help or hinder allergic disease?



**Carsten Flohr**

# Industrialised countries



- 20% asthma
- 20% eczema
- 30% allergic rhinitis



# Developing countries

- less allergy
- rural-urban gradient
- big cities similar prevalence levels to industrialised countries

# Risk factor analysis

- “western lifestyle”
- search for individual risk factors continues

# A letter in *The Lancet* in 1976

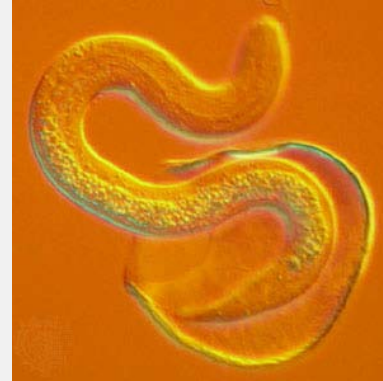
- ...I infected myself with 250 hookworm larvae of Nigerian origin to examine the haematological responses to the parasite....
- ...The most pertinent finding in the context of the discussion on IgE, parasites and allergy was that during the summer of 1975 and 1976 I remained completely free from all symptoms of hayfever.

JA Turton

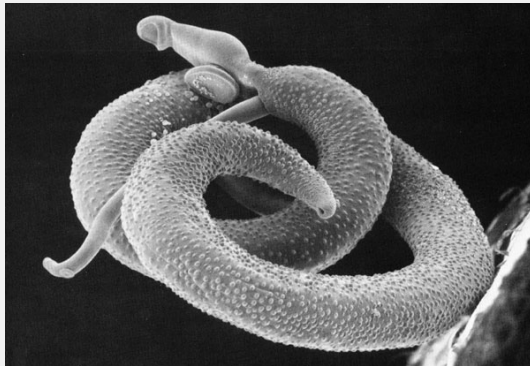
# HELMINTHS



Hookworm



*Ascaris lumbricoides*

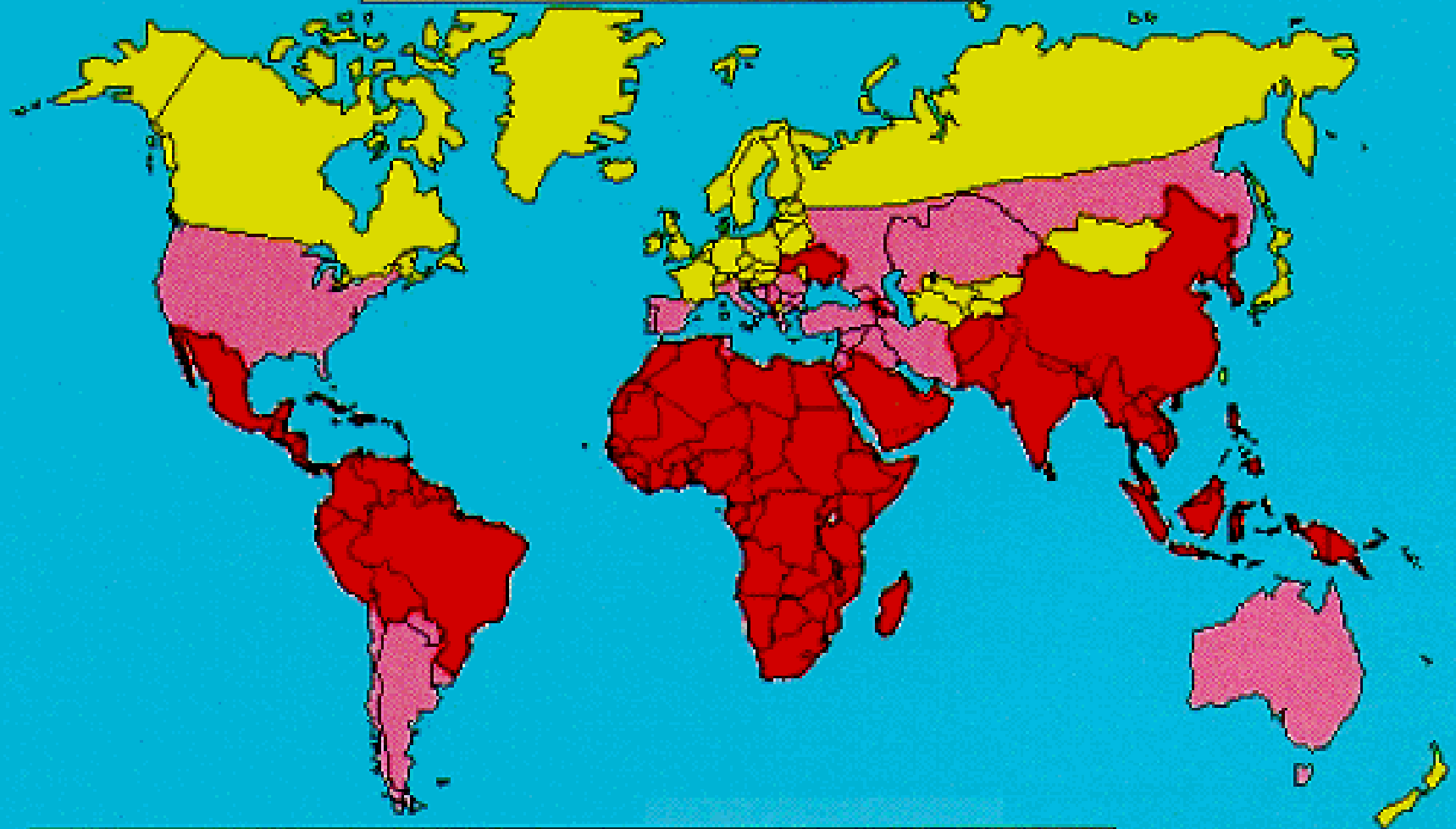




Schistosomiasis



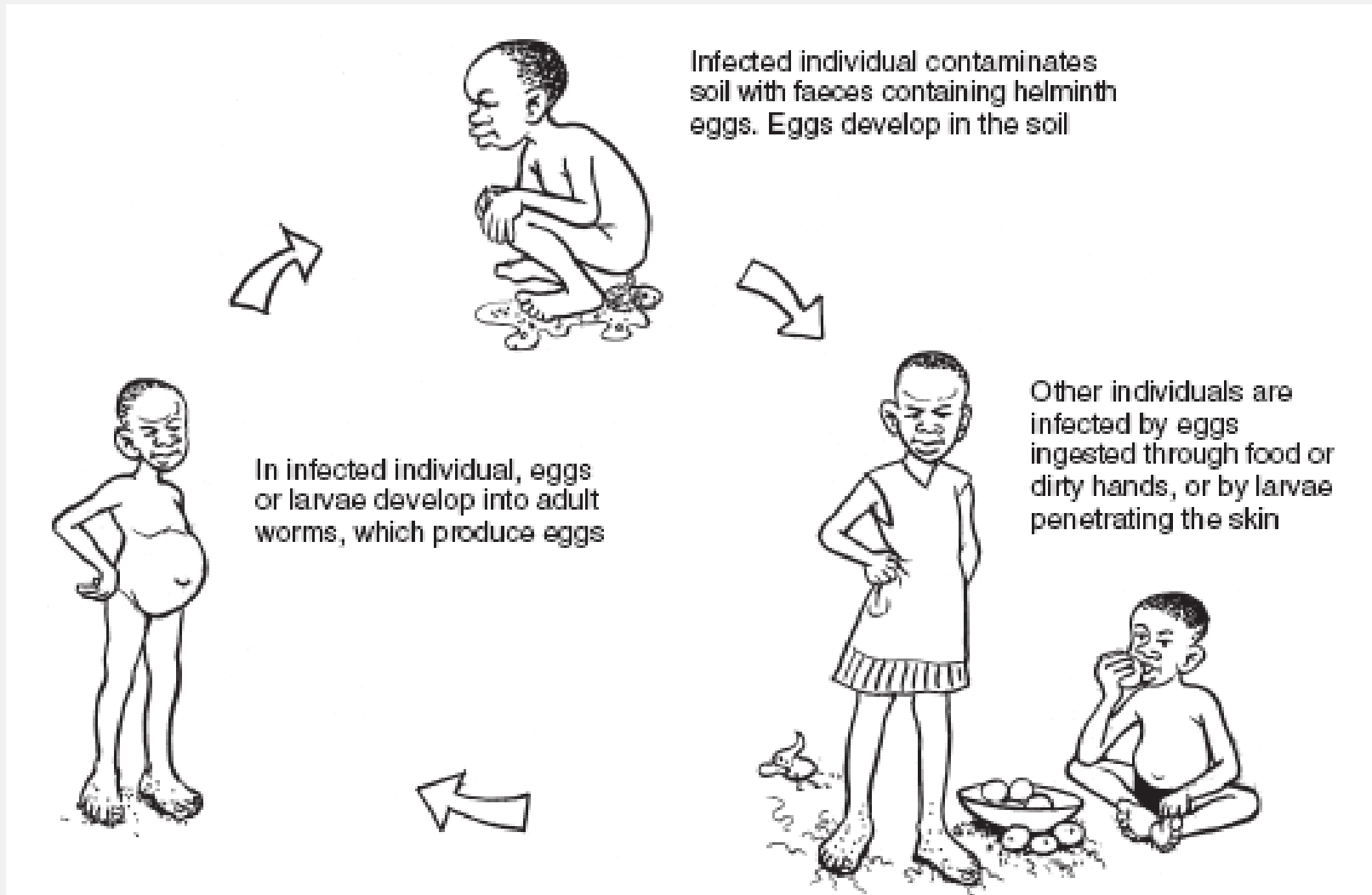
*Trichuris trichiura*

## Intestinal Helminths



-  Countries where intestinal helminths are a public health problem
-  Countries where intestinal helminths are transmitted

Source: WHO/CTD, 1997

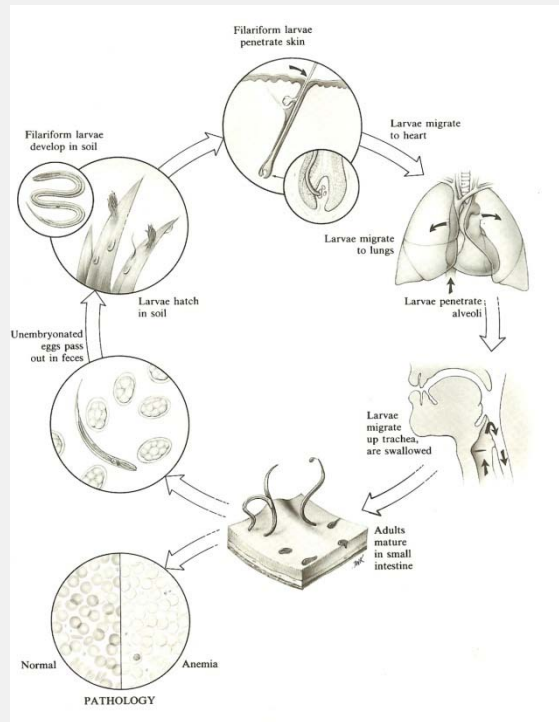


***Poor hygiene – main cause of helminth infection***

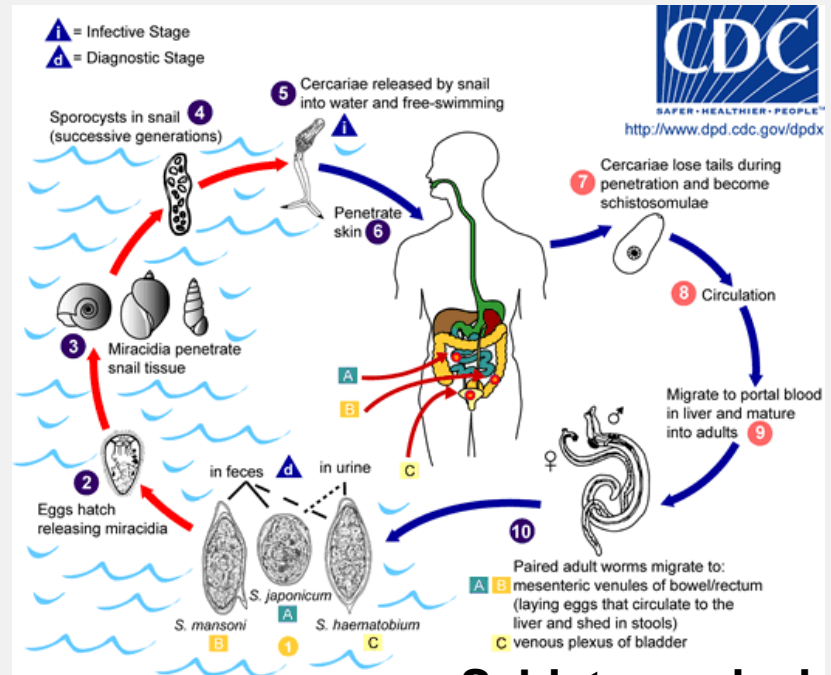


# Helminth infections

- Host invasive (not *Trichuris*)
- Often asymptomatic
- Long-lasting
- Immuno-modulation



**Hookworm/Ascaris lifecycle**

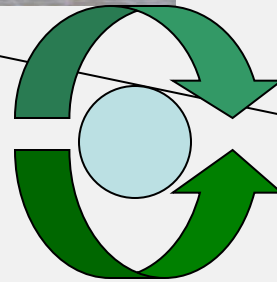


**Schistosomiasis**

# A matter of balance ?



Helminths ↑

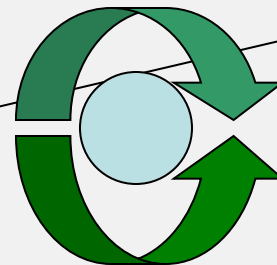


Allergies ↓

# A matter of balance ?



Helminths ↓



Allergies ↑

# Menu

- **Observational evidence**
  - Allergic sensitisation (atopy)
    - Clinical allergy
  - **Mechanisms**
- **Intervention studies**



**Africa**  
**South America**  
**East Asia**











# Helminths and allergic sensitisation

Type of helminth infection	Number of participants	Age	Odds ratio (95% CI)	Effect direction
<b>ANY HELMINTH</b>				
Cooper et al., Ecuador, 2003a [38]	4433	5-18	0.62 (0.50-0.76)	↓
Cooper et al., Ecuador, 2003b [101]	2865	5-19	0.64 (0.52-0.78)	↓
Cooper et al., , 2004 [27]	1002	7-17	0.65 (0.47-0.91)	↓
Davey et al., , 2005 [102]	7649	5-70+	0.75 (0.58-0.97)	↓
Flohr et al., , 2006 [60]	1742	6-18	0.70 (0.50-0.99)	↓
Nyan et al., The , 2001 [103]	429	15-34	0.30 (0.11-0.80)	↓
<b>HOOKWORM</b>				
Cooper et al., Ecuador, 2003a [38]	4433	5-18	0.67 (0.33-1.37)	NS
Cooper et al., Ecuador, 2003b [101]	2865	5-19	0.39 (0.18-0.85)	↓
Dagoye et al., , 2003 [24]	7155	1-4	1.20 (0.70-1.70) Dp 1.30 (0.80-2.20) Cock	NS NS
Davey et al., , 2005 [102]	7649	5-70+	0.74 (0.55-0.99)	↓
Flohr et al., , 2006 [60]	1742	6-18	0.61 (0.39-0.96)	↓
Grove & Frobes, 1975 [84]	50 atopics 139 non-atopics	All ages	0.24 (0.11-0.51)	↓
Scrivener et al., , 2001 [86]	403	14-60+	1.70 (0.88-3.27)	NS
<b>ASCARIS</b>				
Cooper et al., Ecuador, 2003a [38]	4433	5-18	0.65 (0.54-0.78)	↓
Cooper et al., Ecuador, 2003b [101]	2865	5-19	0.74 (0.60-0.91)	↓
Dagoye et al., , 2003 [24]	7155	1-4	1.10 (0.70-2.00) Dp 1.00 (0.70-1.40) Cock	NS
Flohr et al., , 2006 [60]	1742	6-18	0.28 (0.10-0.78)	↓
Obihara et al., , 2006 [28]	359	6-14	0.57 (0.23-1.40)	NS
Palmer et al., , 2002 [23]	1896	8-18	Increased no of pos SPTs	↑
Scrivener et al., , 2001[86]	403	14-60+	1.52 (0.81-2.87)	NS
<b>TRICHURIS</b>				
Cooper et al., Ecuador, 2003a [38]	4433	5-18	0.69 (0.56-0.86)	↓
Cooper et al., Ecuador, 2003b [101]	2865	5-19	0.82 (0.67-1.01)	NS
Dagoye et al., , 2003 [24]	7155	1-4	1.40 (0.90-2.20) Dp 1.70 (1.10-2.40) Cock	NS ↑
Scrivener et al., , 2001[86]	403	14-60+	1.10 (0.56-2.16)	NS
<b>SCHISTOSOMIASIS</b>				
Araujo et al., , 2000 [104]	42 cases 133 controls	6-40	0.14 (0.03-0.63)	↓
van den Biggelaar et al., Gabon, 2000 [105]	520	5-14	0.32 (0.16-0.63)	↓

# Helminths and atopy

Flohr *et al.*, 2009

# Effect of early helminth infection on atopy in later childhood

<b>Trichuris infection</b> 1055 Brazilian children		<b>OR</b> <b>(95% CI)</b>
<b>First survey</b> <b>(1mth-4yr)</b>	<b>Second survey</b> <b>(4-11yr)</b>	
No or light intensity	No or light intensity	1
No or light intensity	High intensity	0.75 (0.39-1.43)
<b>High intensity</b>	No or light intensity	<b>0.36</b> <b>(0.14-0.97)</b>
<b>High intensity</b>	<b>High intensity</b>	<b>0.18</b> <b>(0.04-0.78)</b>

# Menu

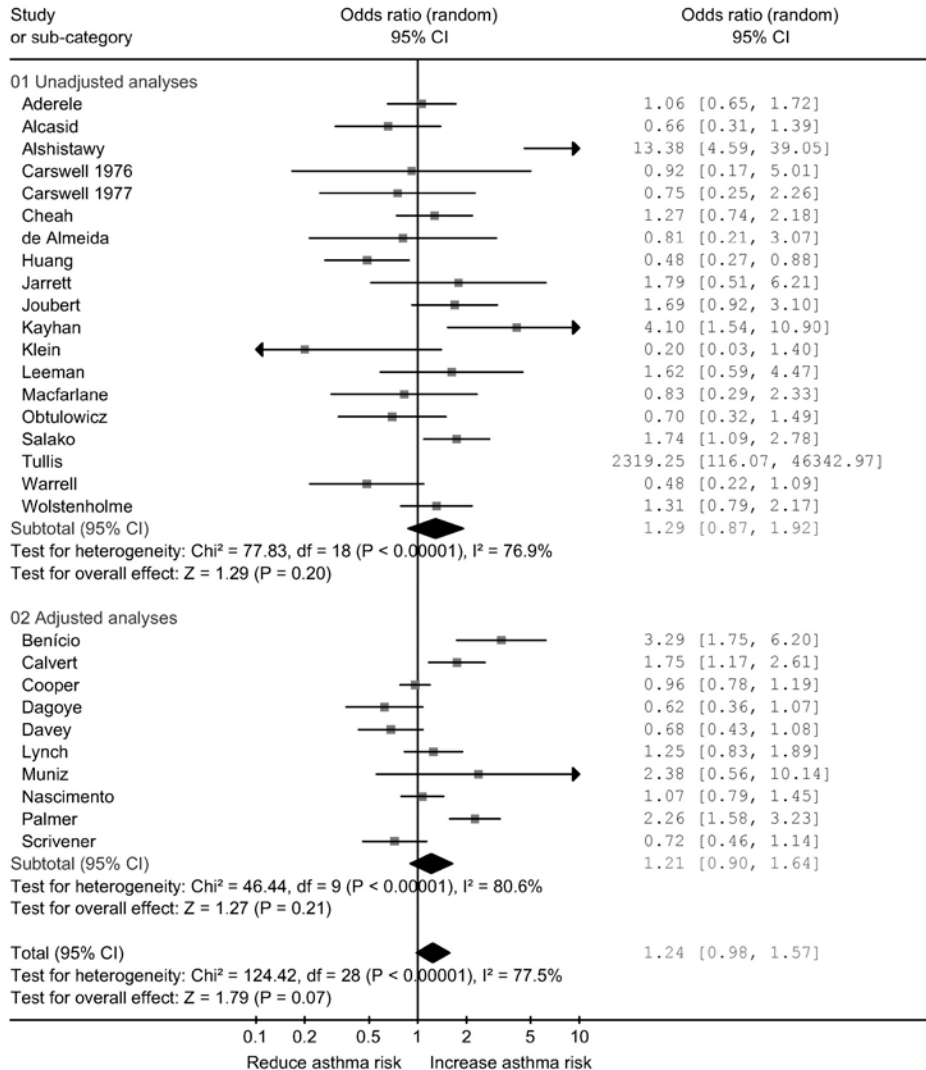
- **Observational evidence**
  - Allergic sensitisation (atopy)
    - Clinical allergy

➤ **Mechanisms**

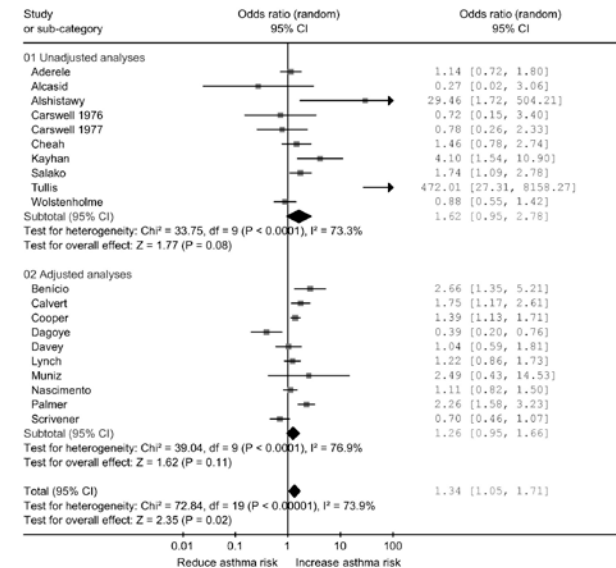
➤ **Intervention studies**

# Helminths and asthma – Xsectional

## Any helminth



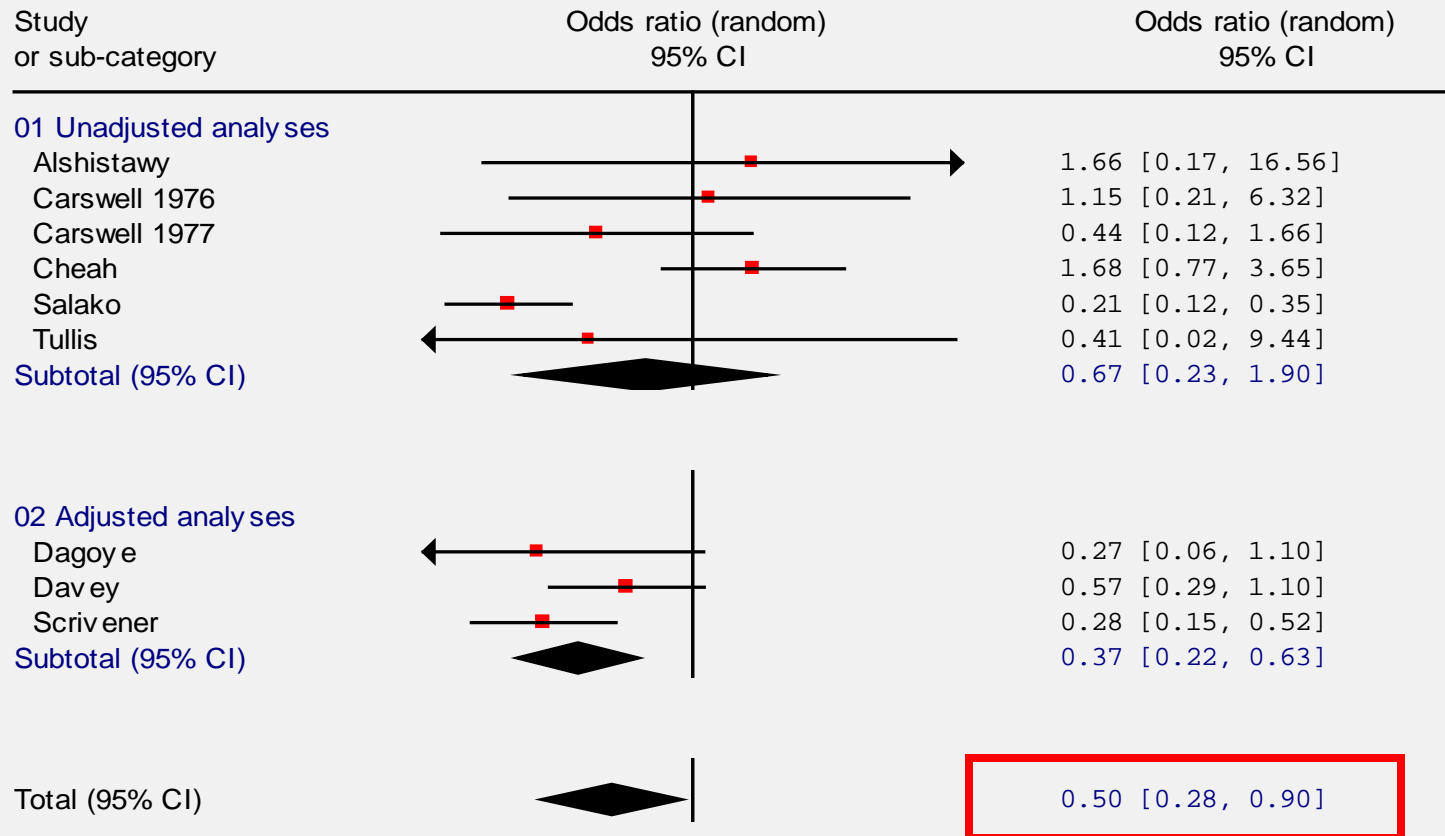
## Ascaris & Trichuris



Systematic review

Leonardi-Bee *et al.* 2006

# Hookworm and asthma – Xsectional



**Infection intensity related  
OR=0.34, 95% CI 0.19-0.62**

Leonardi-Bee *et al.* 2006

# Helminths and eczema

- East Germany
- ISAAC questionnaire
- n=4169, age 5-14
  - Ascaris infection ↑  
Eczema ↓
  - adjusted OR=0.31 (0.18-0.56)
- Other studies no effect
- Little work on hay fever



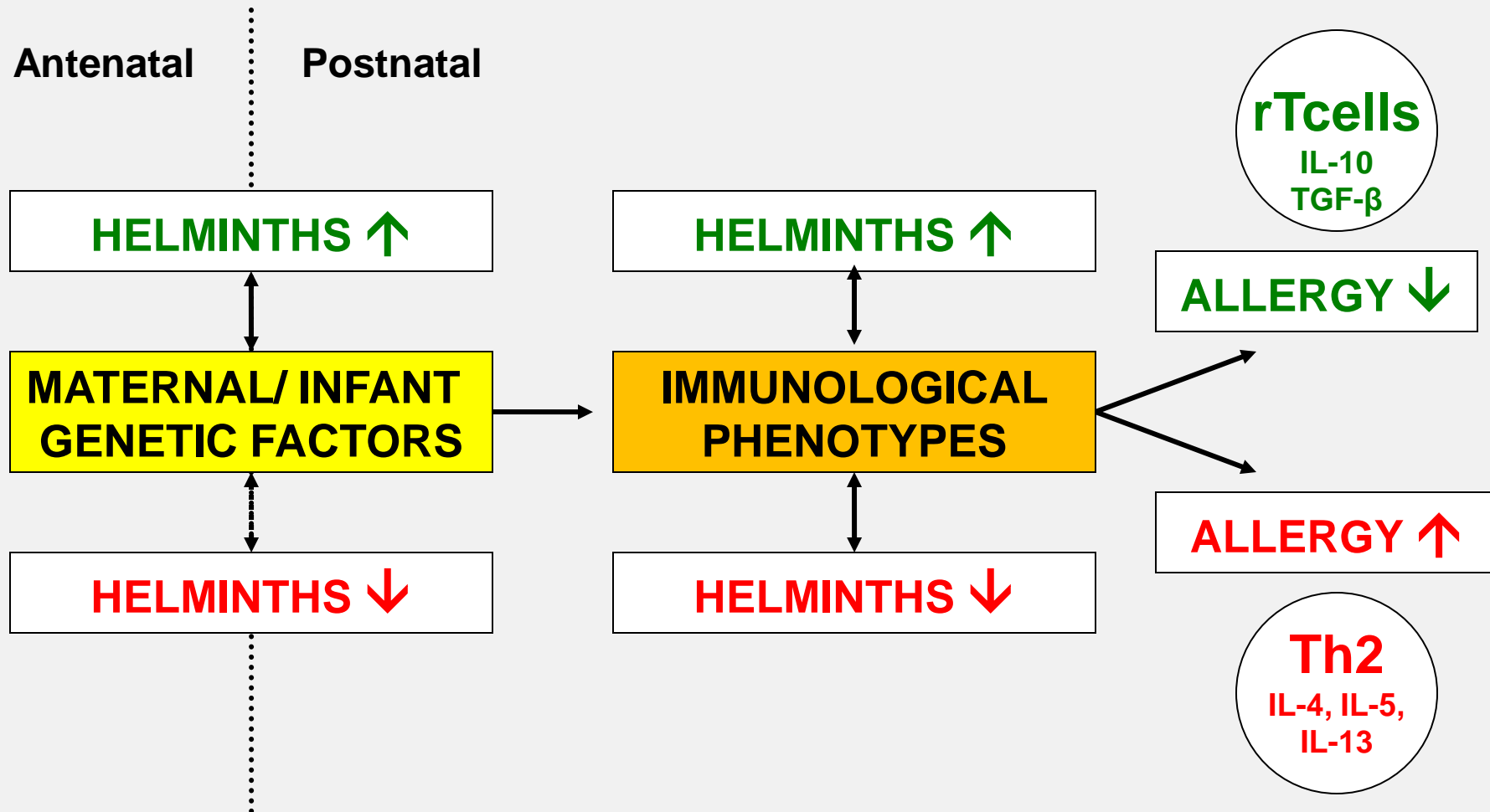
Schäfer *et al.*, 2005

# Summary - Cross-sectional studies

- Helminth↑ atopy↓
  - Hookworm↑ wheeze↓
  - Ascaris/Trichuris↑ wheeze↑
  - Ascaris↑ eczema↓
  - Early/heavy helminth infection
  - Species matters (host invasiveness)
- Study heterogeneity (species, age etc)



# Need for birth cohort studies



Flohr *et al.*, 2009

# Helminths & eczema – Birth cohort

- Uganda, n=103
- Hookworm & schistosomiasis
- Maternal helminth infection pregnancy↑  
→ Infantile eczema↓
- 74% eczema↓ by 15 months in infants
- Adjusted OR=0.26 (0.08-0.83)

Elliott *et al.*, 2005

# Menu

- **Observational evidence**
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➤ **Mechanisms**

➤ **Intervention studies**

# Löffler Syndrome

# ACUTE

hypersensitivity reaction



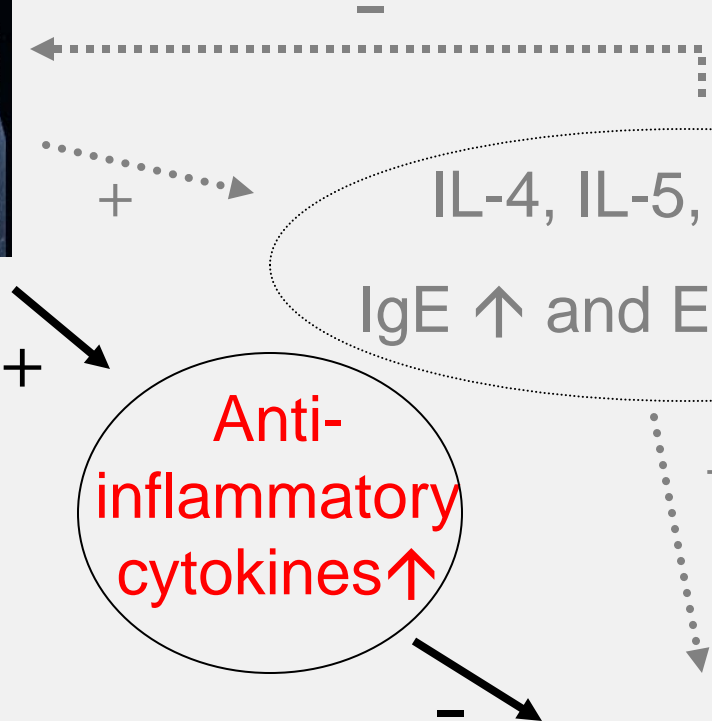
IL-4, IL-5, IL-13 ↑  
IgE ↑ and Eosinophilia

T cell apoptosis  
Prevention of mast cell degranulation

Anti-inflammatory cytokines ↑

# CHRONIC

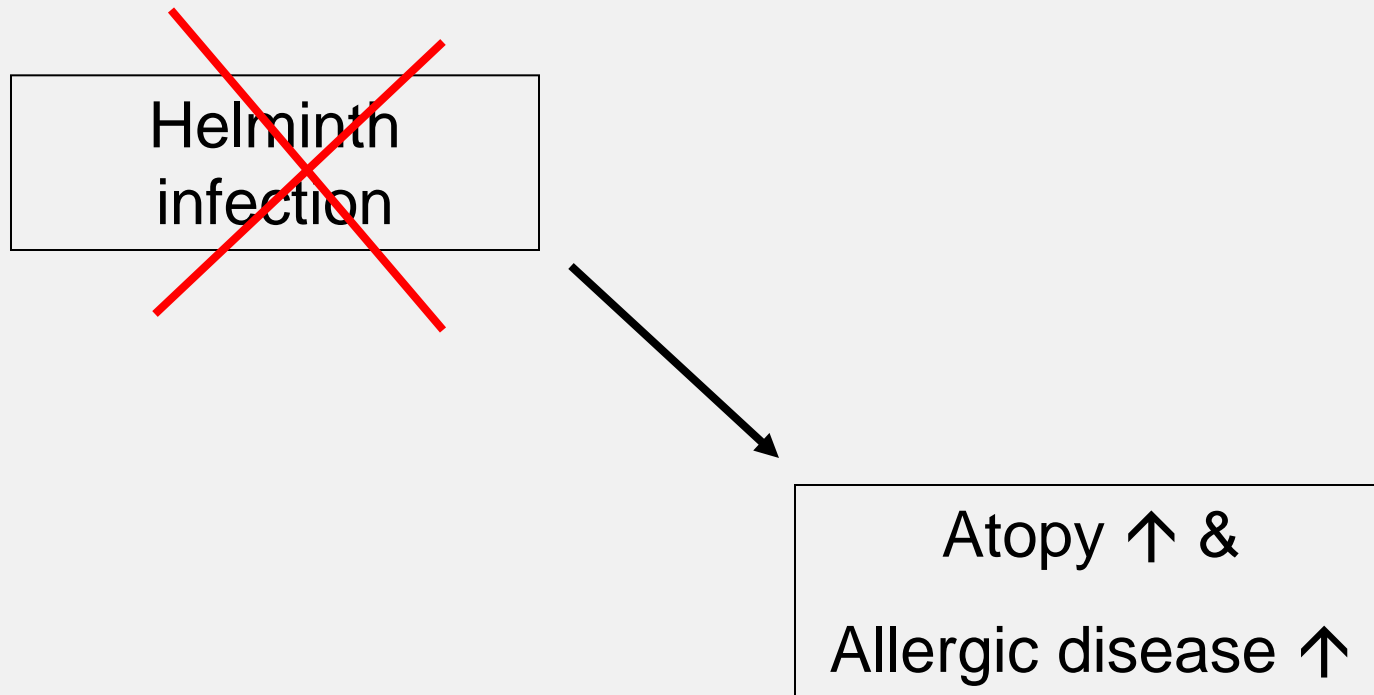
Atopy & Allergic disease



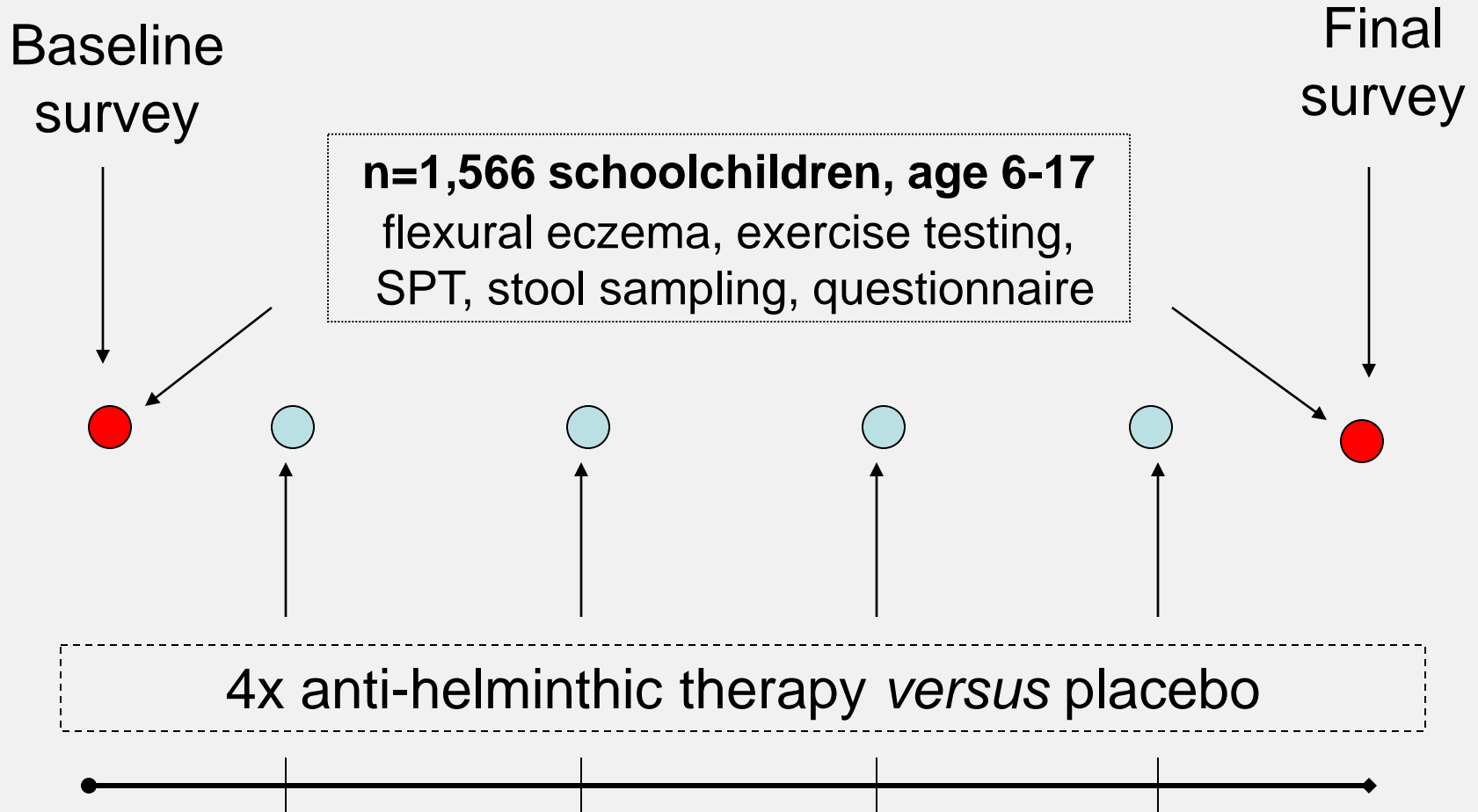
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  - **Helminth-endemic areas**

# Vietnam Study - Hypothesis



# RCT in hookworm-endemic area in Vietnam



**Hookworm 70%, Ascaris 6%, dual infected 5%**

Flohr *et al.*, 2010

# Results Vietnam RCT

- No change in clinical allergy

**BUT**

- 37% SPT positivity ↑

OR = 1.37 (1.03 – 1.82), p=0.02

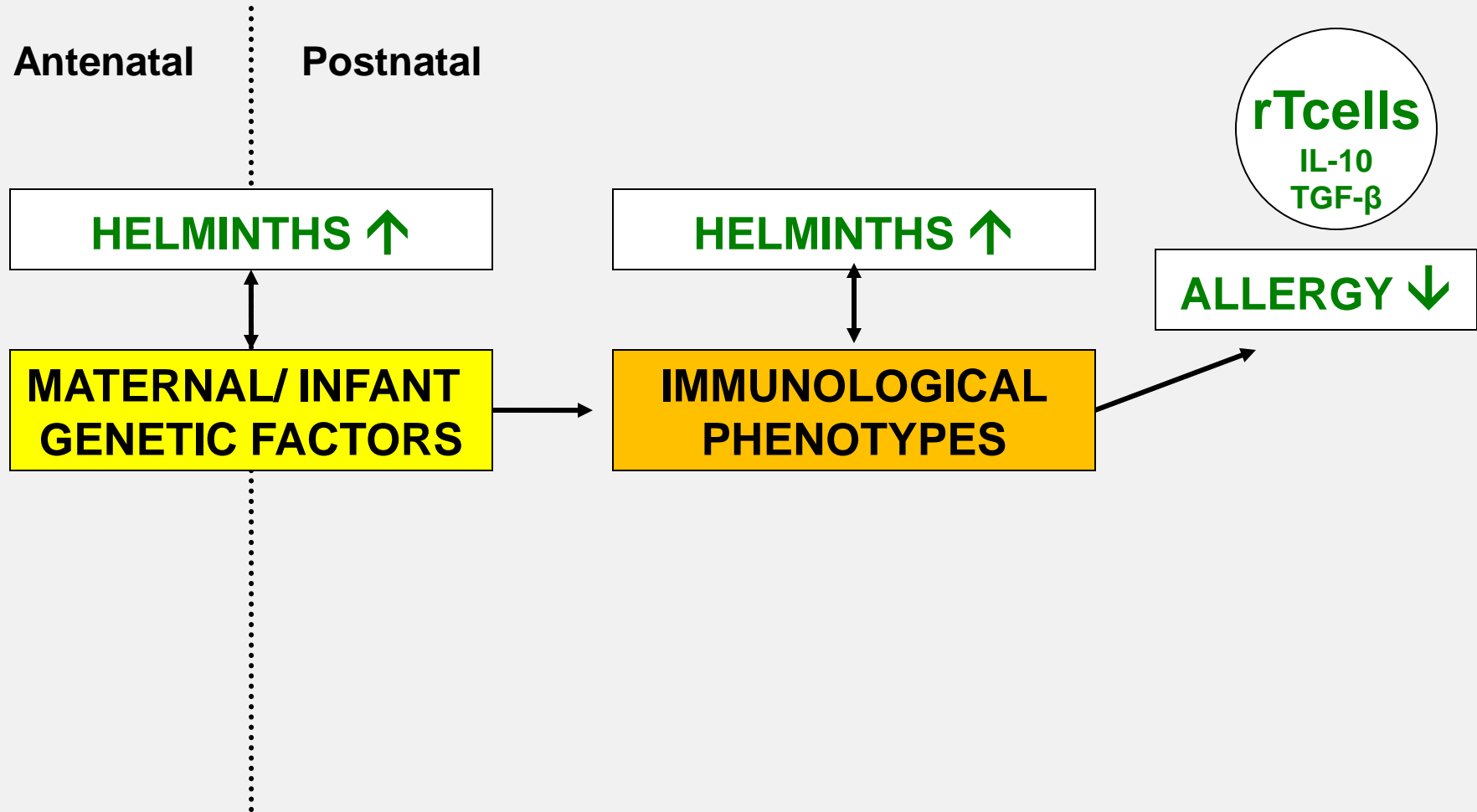
Flohr *et al.*, 2010



# Results Vietnam RCT

- Effect strongest for children with **dual helminth infection**
- OR=4.90 (1.48-16.19), p=0.009
- Synergistic effect of two helminth species

# Need for interventional birth cohort studies



Flohr *et al.*, 2009

# Ugandan RCT pregnant mothers & babies

Pregnant mothers  
N=2507

```
graph TD; A[Pregnant mothers N=2507] --> B[Praziquantel group: HR 2.65 (1.16-6.08)]; A --> C[Albendazole group: HR 1.82 (1.26-2.64)];
```

**Praziquantel group: HR 2.65 (1.16-6.08)**

**Albendazole group: HR 1.82 (1.26-2.64)**

Hookworm >40%  
*Schistosoma mansoni* ~20%

Mpairwe & Elliott 2010

# Summary

## Intervention Studies

- Helminth↑ atopy and eczema↓
- Synergistic effect of parasite species

# Menu

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- **Helminth-naïve allergic individuals**

# Intervention studies in helminth-naïve individuals

## 1. Nottingham hookworm trials

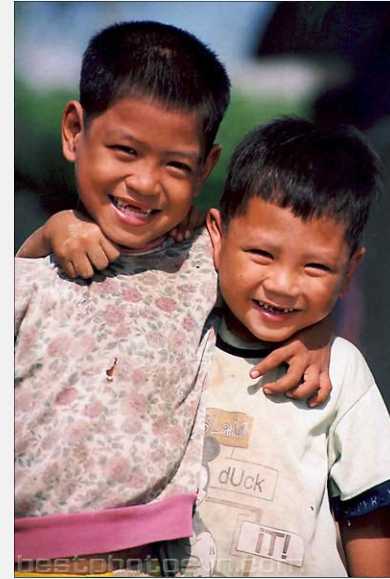
- Dose-ranging study
- Hay fever
- Asthma



## 2. Danish *Trichuris suis* trials in hay fever (modelled on ulcerative colitis trials)

- Immunological response
- No effect on allergic disease or atopy
- No trial in eczema sufferers yet

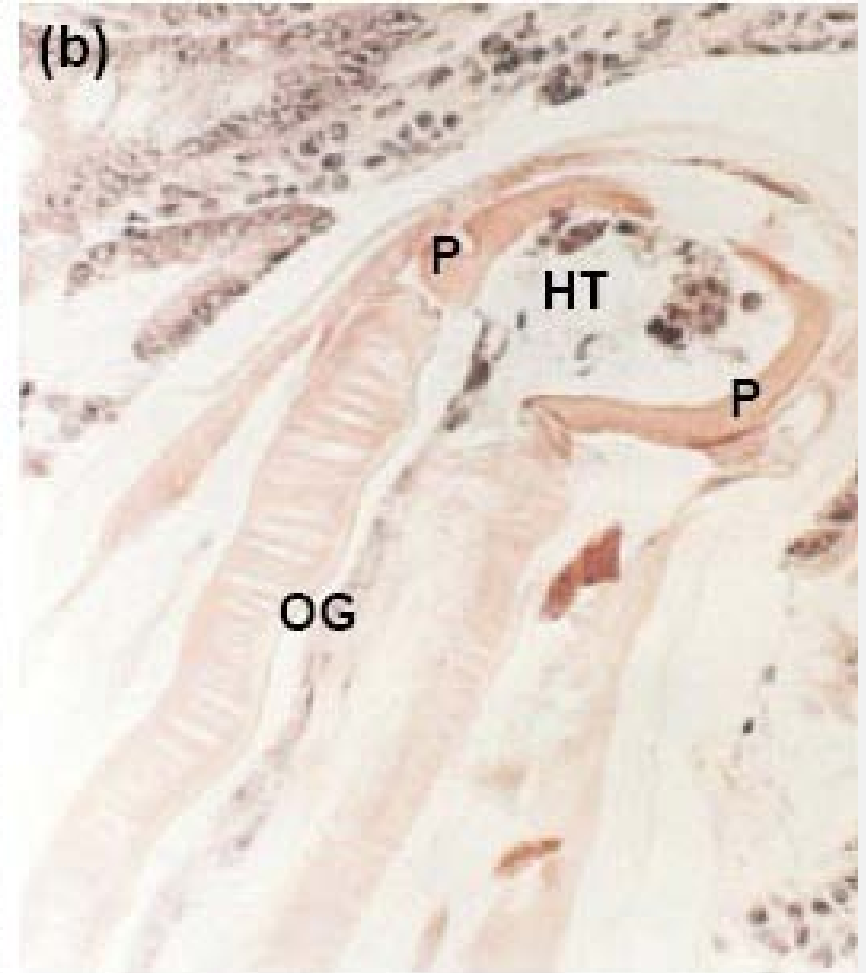
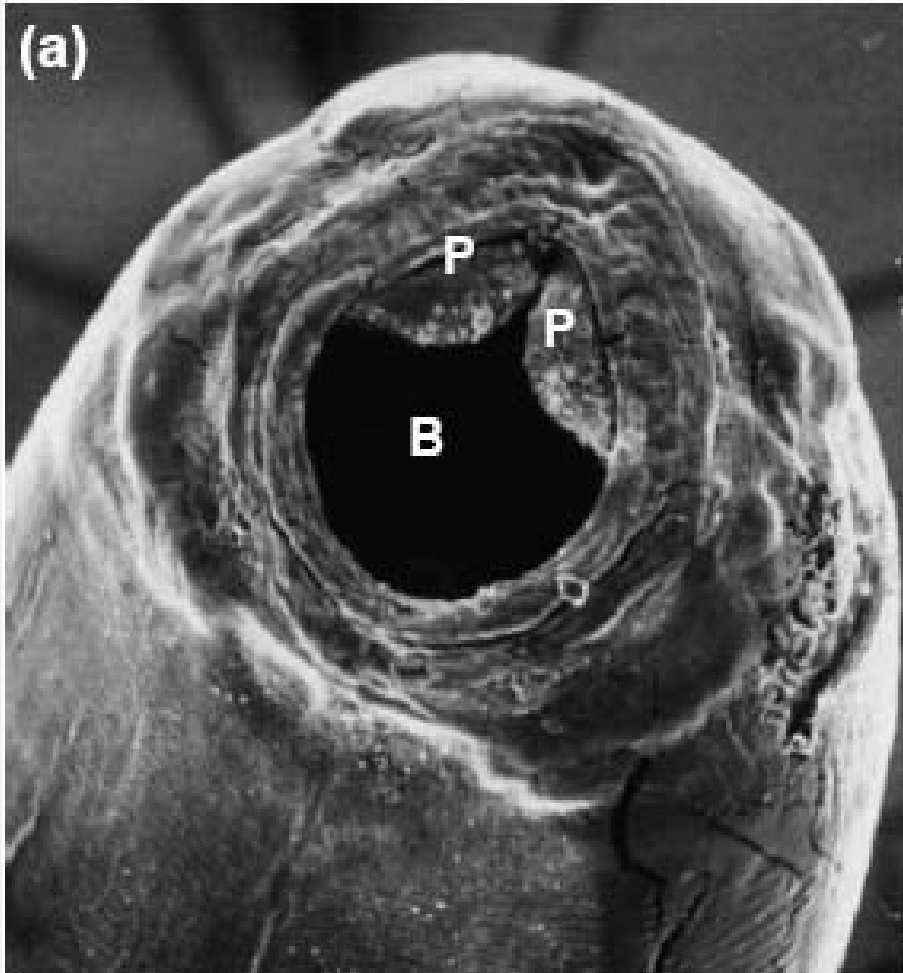
# Limitations of intervention studies



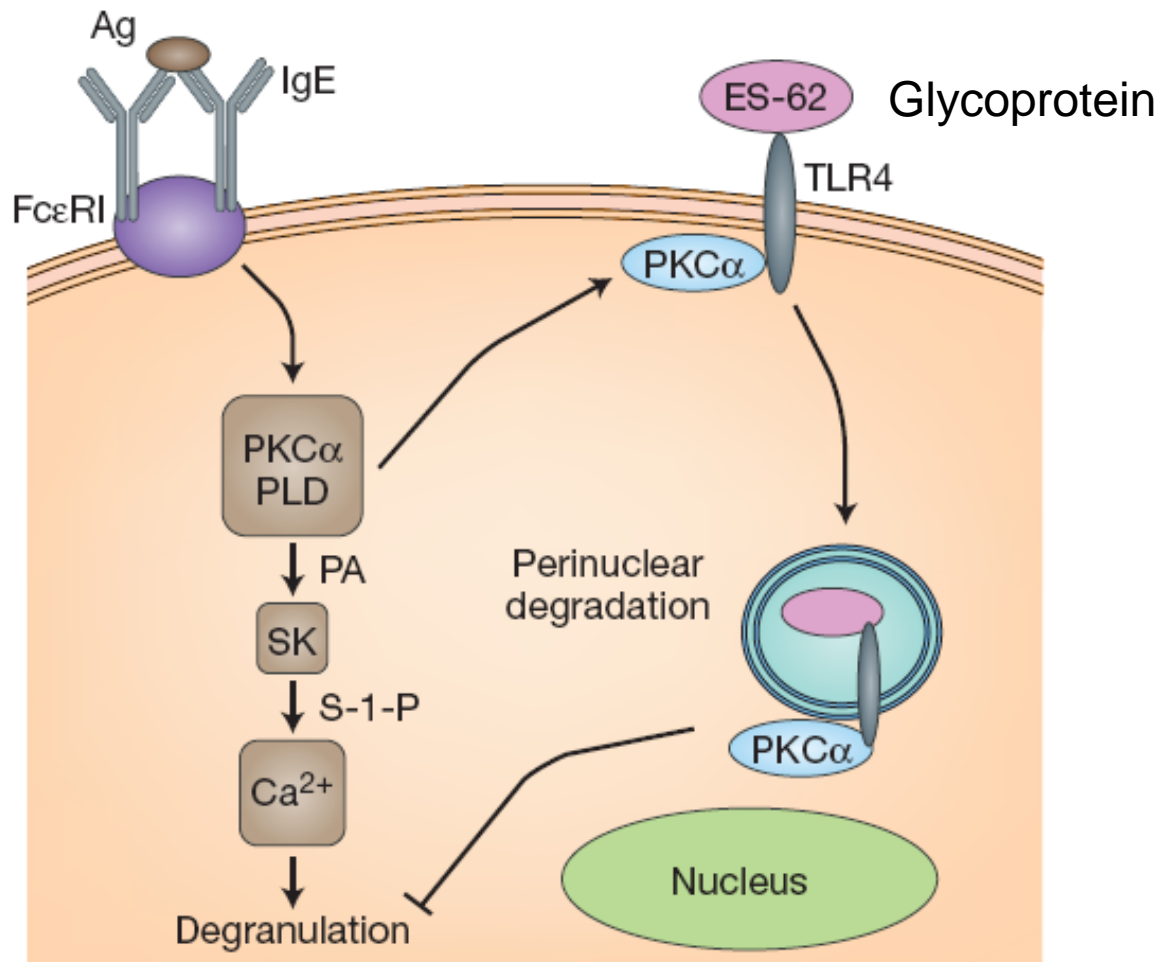
- Parasite-naïve
- Single exposure
- Low infection intensity

- Early priming
- Recurrent exposure
- High infection intensity

# Ultimate aim: allergy drugs from worms







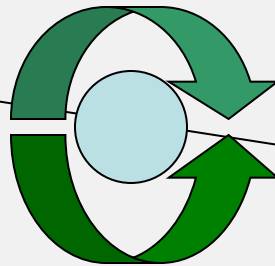
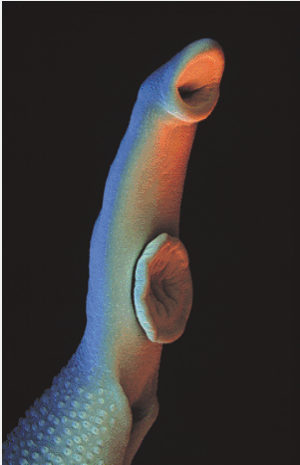
Filarial nematode-derived ES-62 induces hypo-responsiveness of mast cells by disrupting FcεRI signalling

Nature, Harnett et al. 2008

# Future therapy?

Immuno-  
modulatory  
network

reg T cell  
activity



Gut worm-derived products



Bon appétit !