

XXX^e CONGRÈS

MARSEILLE 24-26 NOVEMBRE 2021

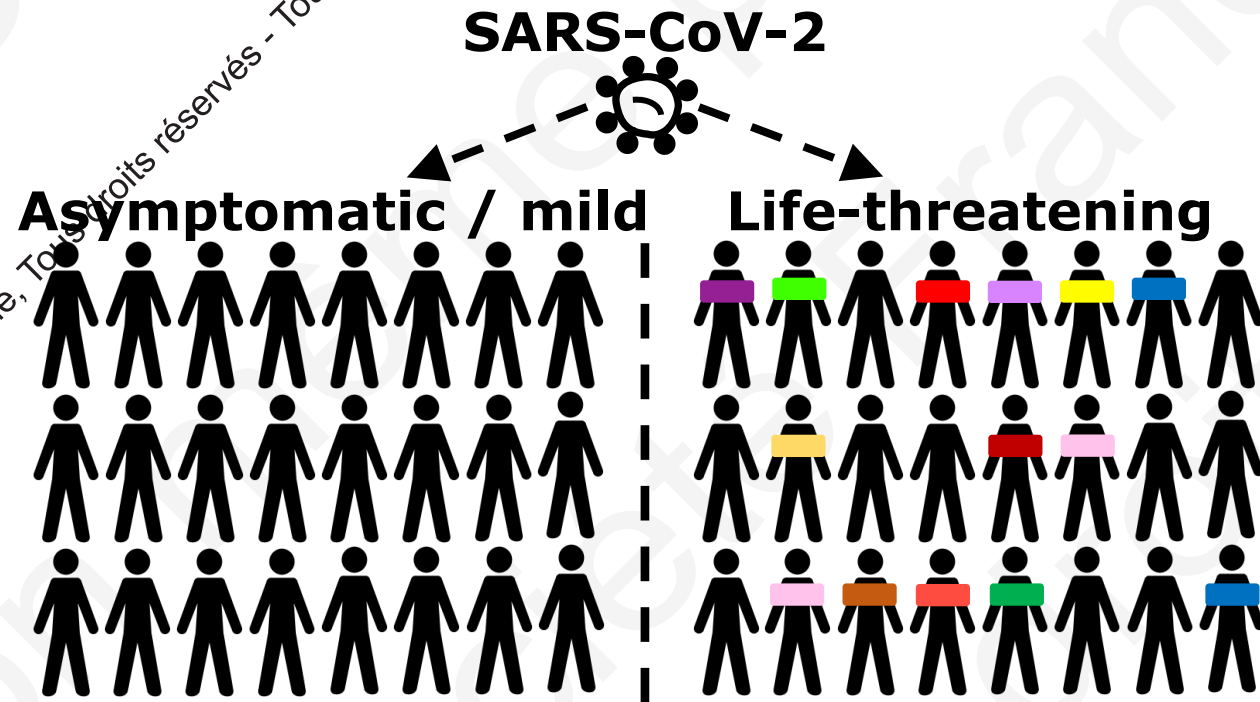


ANTI-TYPE I IFN AUTO-ANTIBODIES AND SEVERE COVID-19

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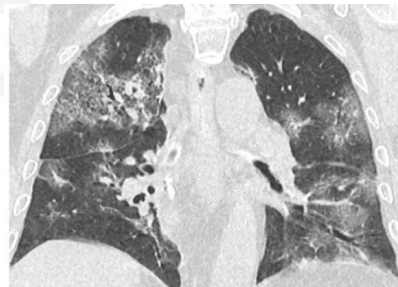
INTER-INDIVIDUAL VARIABILITY IN THE COURSE OF INFECTIOUS DISEASES



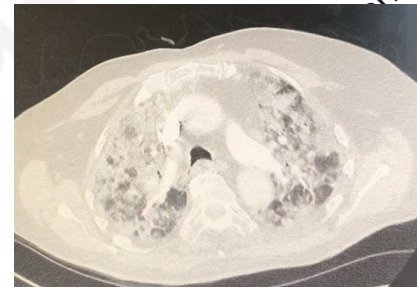
Life-threatening COVID-19 pneumonia



ARDS (Chest X-ray)



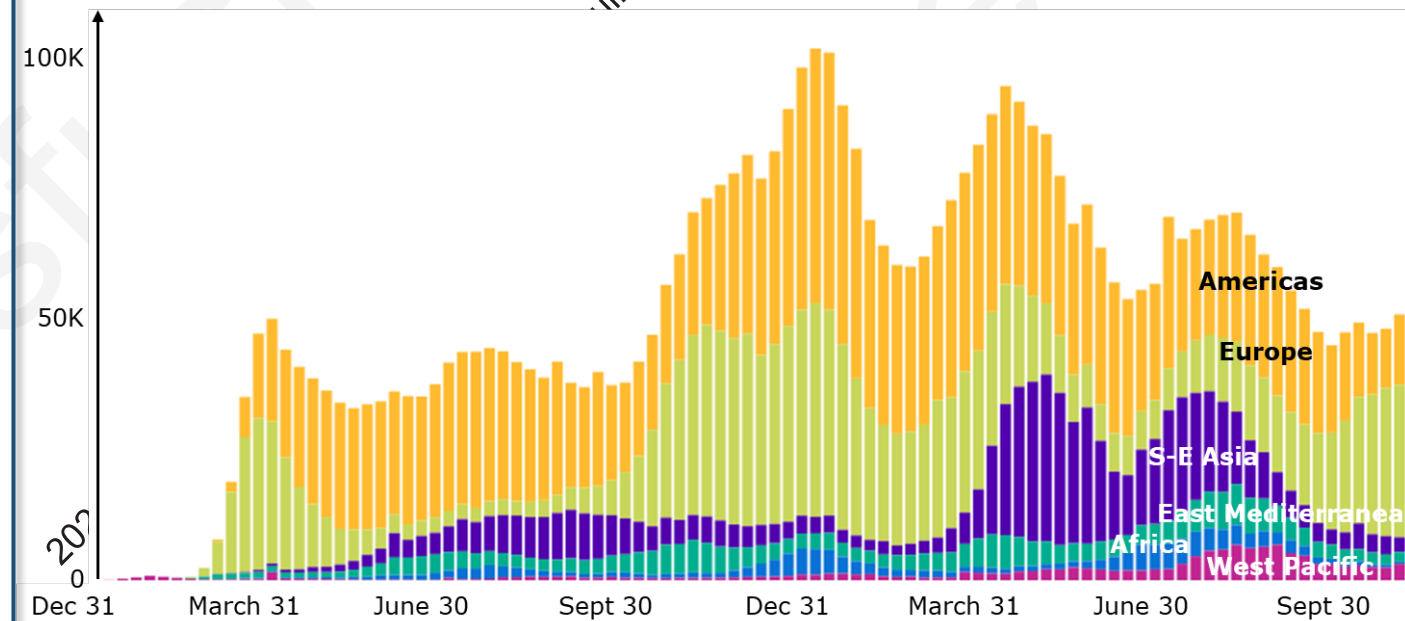
Severe Covid pneumonia (Chest CT)



Critical pneumonia, ARDS (Chest CT)

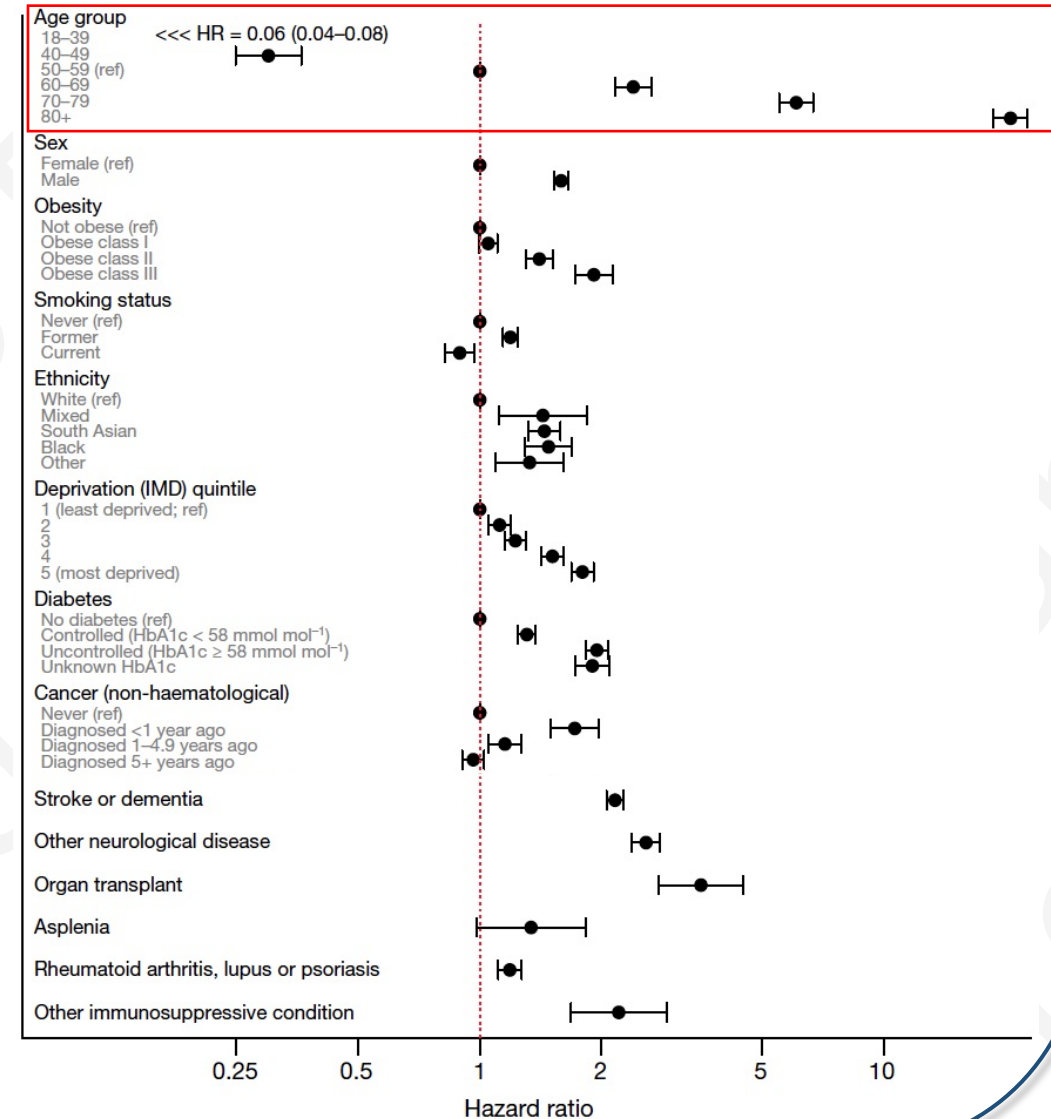
WHY DO PEOPLE DIE OF COVID-19?

Number of weekly deaths for COVID-19 (source: WHO)



Total deaths > 5.1 million

COVID-19 death hazard ratios (study on 17 million individuals)

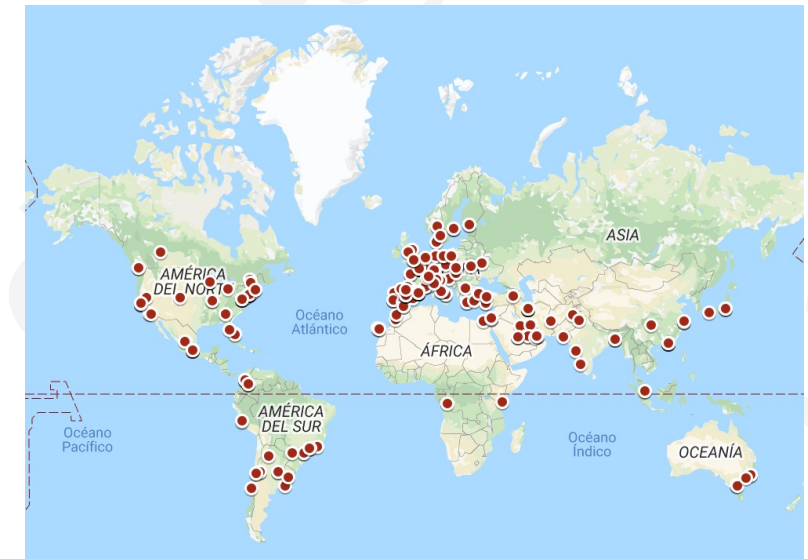


COVID HUMAN GENETIC EFFORT

Jean-Laurent Casanova and Helen Su

>40 sequencing hubs worldwide

>400 participating centers worldwide



November 1st, 2021:
>13,000 subjects recruited

**COULD INBORN ERRORS OF IMMUNITY OR THEIR AUTOIMMUNE PHENOCOPY
UNDERLIE LIFE-THREATENING COVID-19?**

INBORN ERRORS OF TYPE I IFNs

17 TYPE I IFNs (13 IFN- α , IFN- β , IFN- ϵ , IFN- κ , IFN- ω), ALL BINDING TO THE IFNAR1/IFNAR2

INBORN ERRORS OF TYPE I IFN RESPONSE PATHWAY: **SEVERE VIRAL ILLNESSES, INCLUDING LIVE ATTENUATED VIRAL VACCINE DISEASES** (E.G. MMR, YFV)

AR IFNAR1 DEFICIENCY: SEVERE REACTION TO MMR, YFV VACCINES, HSE, LIFE-THREATENING COVID-19

AR IFNAR2 DEFICIENCY: SEVERE REACTION TO MMR, AND YFV VACCINES

AR TYK2 DEFICIENCY: VARIOUS "MILD" VIRAL DISEASES, HSV

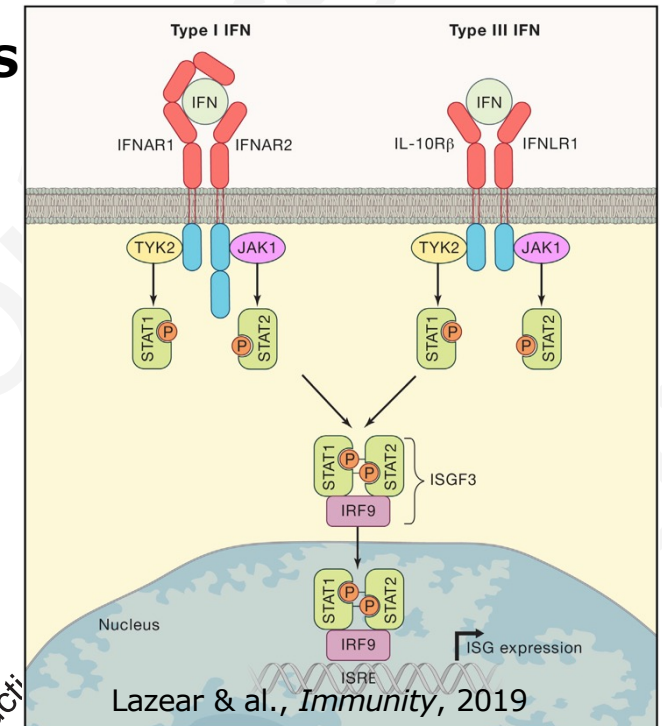
AR PARTIAL JAK1 DEFICIENCY: MILD VIRAL INFECTIONS

AR STAT1 DEFICIENCY: VARIOUS VIRAL LIFE-THREATENING DISEASES, HSV1/CMV/EBV/IAV/VZV

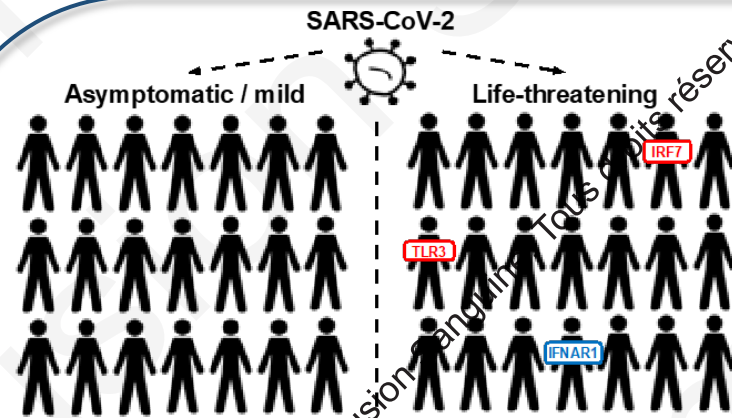
AR STAT2 DEFICIENCY: SEVERE REACTIONS TO MMR, SEVERE VIRAL DISEASE, RECURRENT HSV/VZV/CMV/IAV INFECTIONS

AR IRF9 DEFICIENCY: SEVERE IAV PNEUMONIA, BILIARY PERFORATION AFTER MMR

COULD INBORN OF TYPE I IFN IMMUNITY UNDERLIE LIFE-THREATENING COVID-19?



INBORN ERRORS OF TYPE I IFN IMMUNITY UNDERLIE LIFE-THREATENING COVID-19 PNEUMONIA

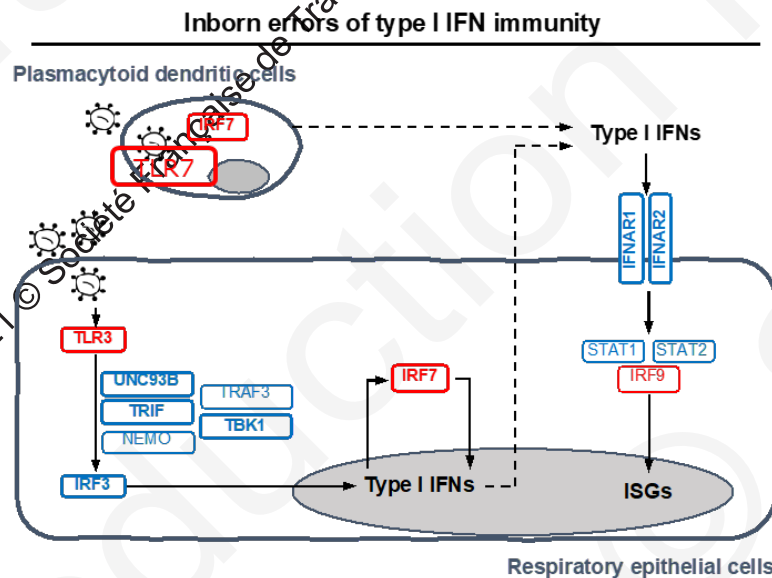


659 patients with critical COVID-19 pneumonia versus 534 subjects with asymptomatic benign infection:

3.5% carried rare variants of the TLR3- and IRF7-dependent IFN-I pathway

1202 male patients (0.5 to 99yrs, [52.9yrs]) with unexplained critical COVID-19 pneumonia

~ 1% of male patients had XR-TLR7 deficiency and impaired TLR7-dependent IFN-I induction



COULD PHENOCOPIES OF TYPE I IFN IEI ALSO UNDERLIE LIFE-THREATENING COVID-19?

AUTO-ABS AGAINST TYPE I IFNs

IN SOME PATIENTS TREATED WITH IFN- α 2b OR IFN- β (1981-)

IN A SMALL MINORITY OF WOMEN WITH SLE (1982-)

IN NEARLY ALL PATIENTS WITH THYMOMA (2003-)

IN NEARLY ALL PATIENTS WITH APS-1 (*AIRE*) (2006-)

IN SEVERAL PATIENTS WITH IPEX (*FOXP3*) (2018-)

IN ONE PATIENT WITH SEVERE VARICELLA (ION GRESSER) (1984)

IN A FEW PATIENTS WITH COMBINED ID (*RAG1*, *RAG2*) (2015)

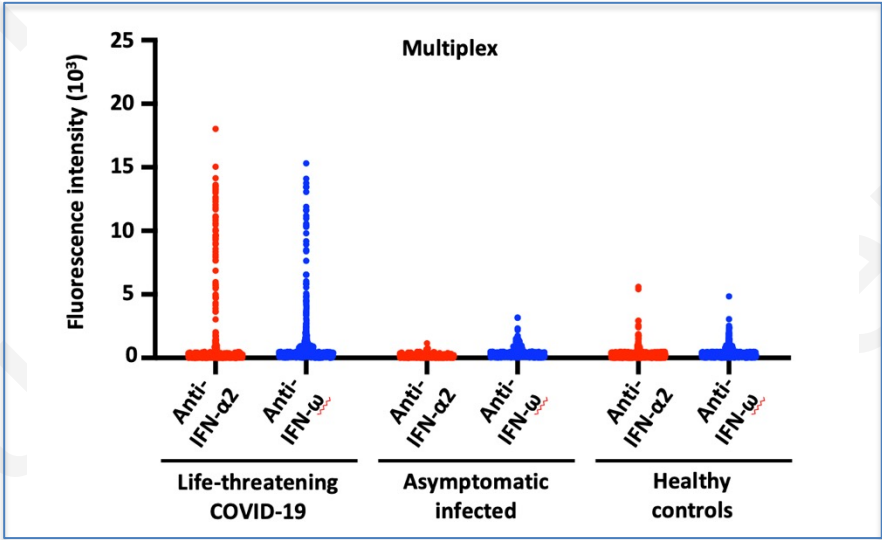
CLINICALLY SILENT

SEVERE VZV INFECTION

UNUSUAL VIRAL ILLNESSES

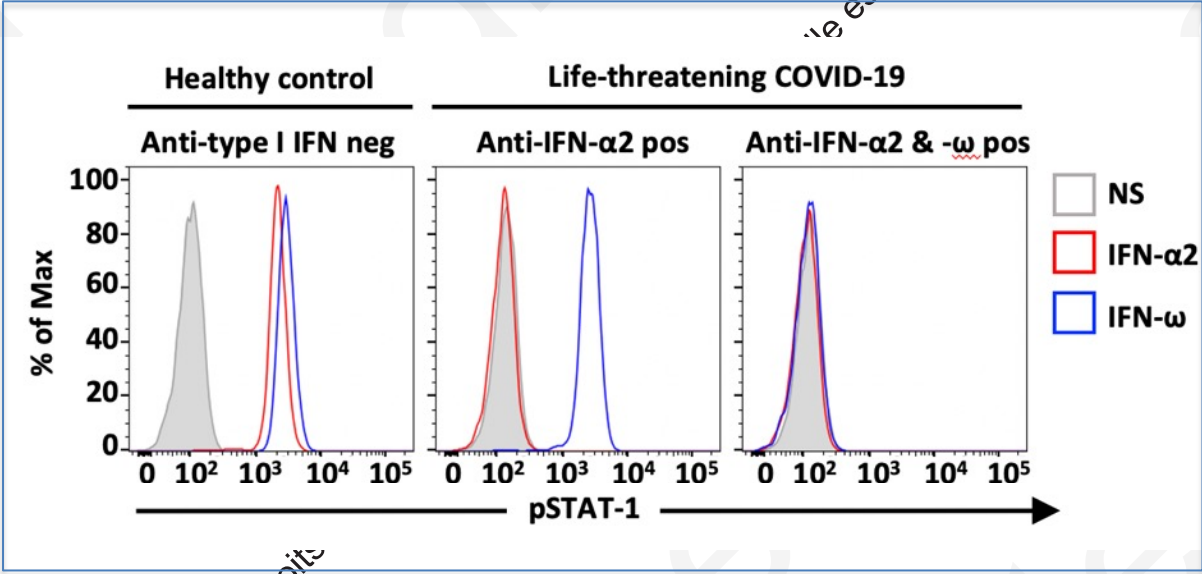
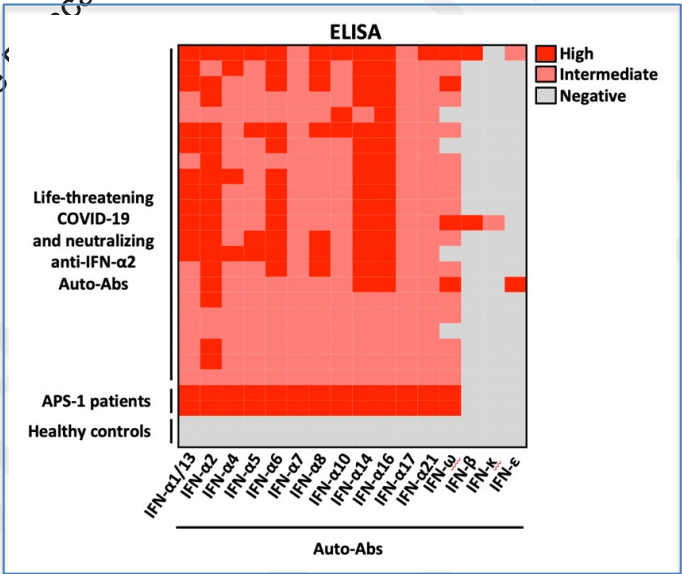
COULD AUTO-ABS TO TYPE I IFNs UNDERLIE LIFE-THREATENING COVID-19?

HIGH TITERS OF ANTI-TYPE I IFN NEUTRALIZING AUTO-ABS IN >10% OF PATIENTS WITH SEVERE COVID-19



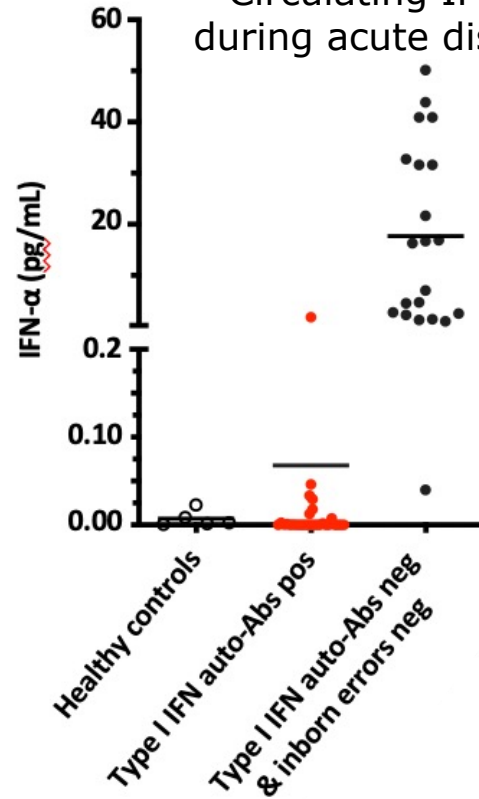
	N total	Anti-type I IFN auto-Abs positive		p-value
		N	%	
Life-threatening COVID-19	987	101	10.2	
Asymptomatic or mild infected	663	0	0	$p < 10^{-16}$
Healthy controls	1224	4	0.3	$p < 10^{-16}$

95 of 101 patients with Auto-antibodies (94%) were men
51 of 101 (50%) were > 65 years of age
In informative cases: preceded infection

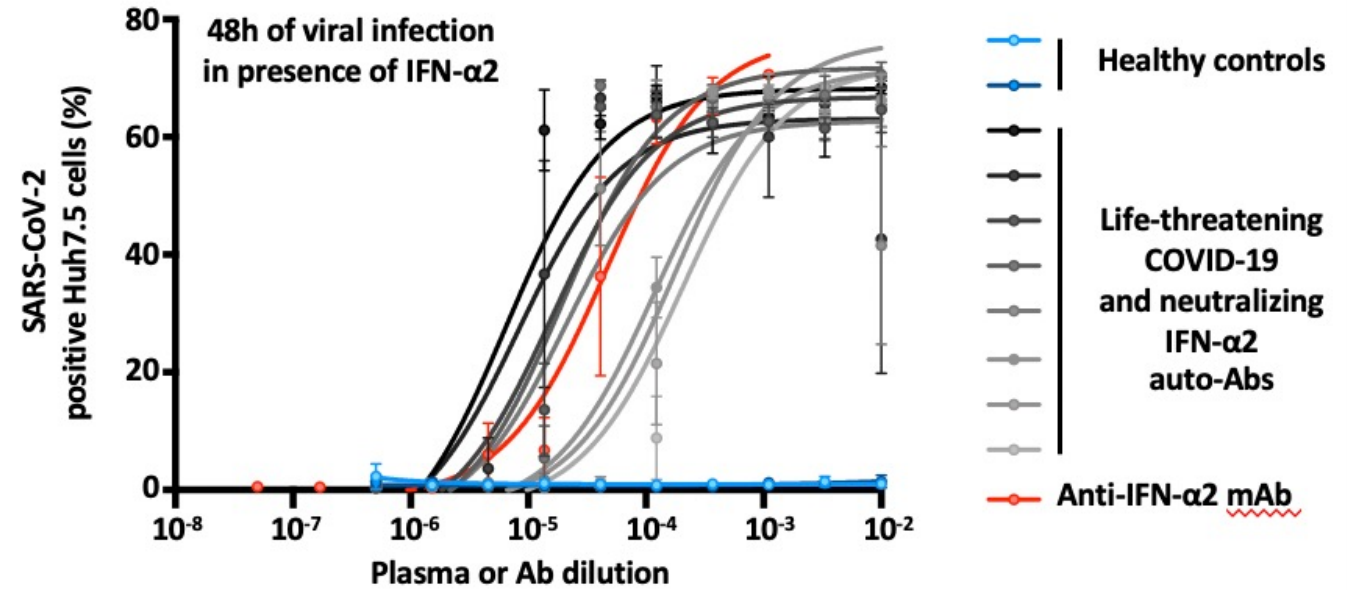


THE ANTI-IFN-I AUTO-ABS BLOCK THE PROTECTIVE EFFECT OF IFN- α AGAINST SARS-CoV2

Circulating IFN- α during acute disease

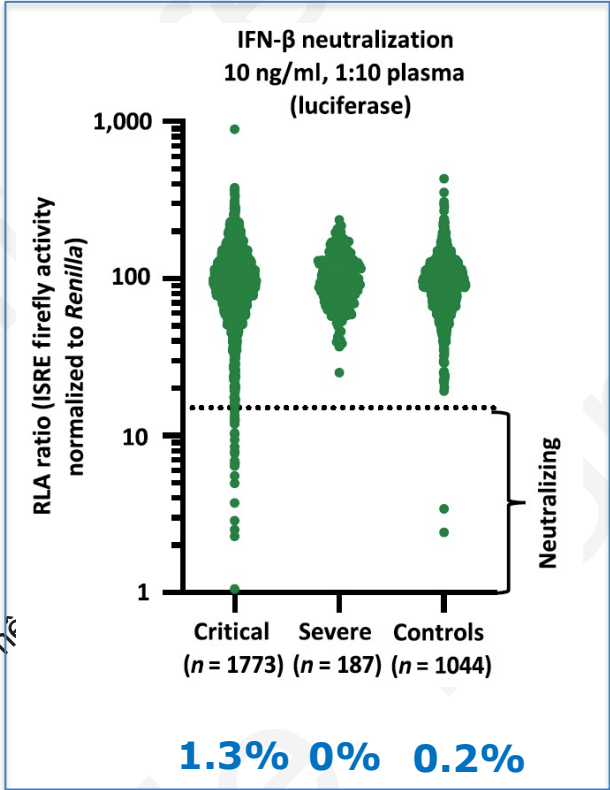
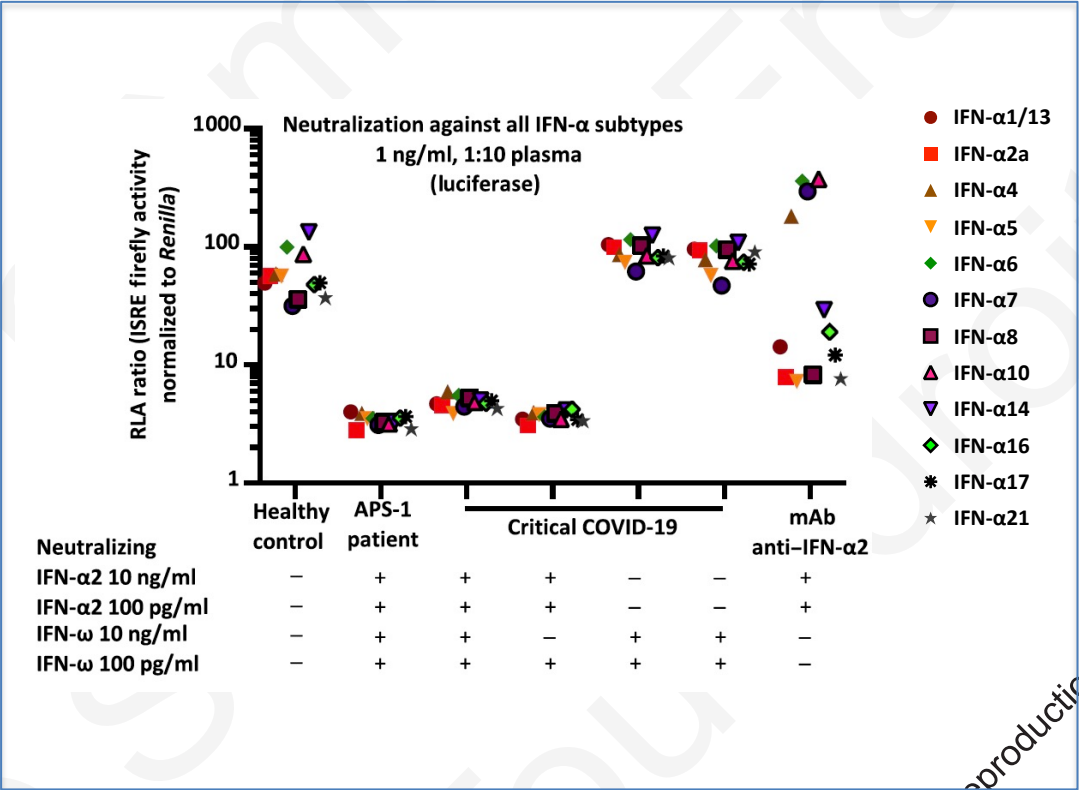
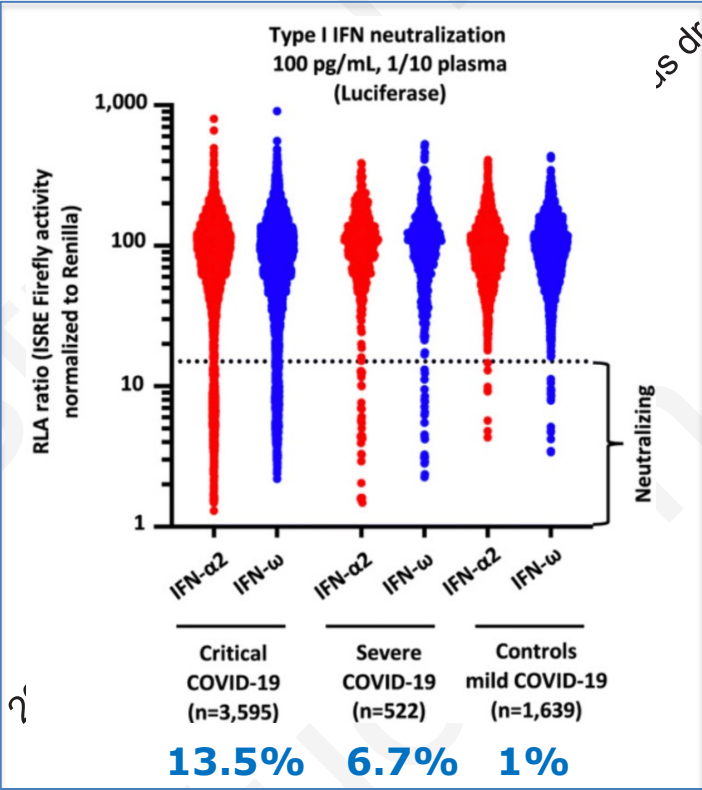


SARS-CoV-2 replication in presence of IFN- α

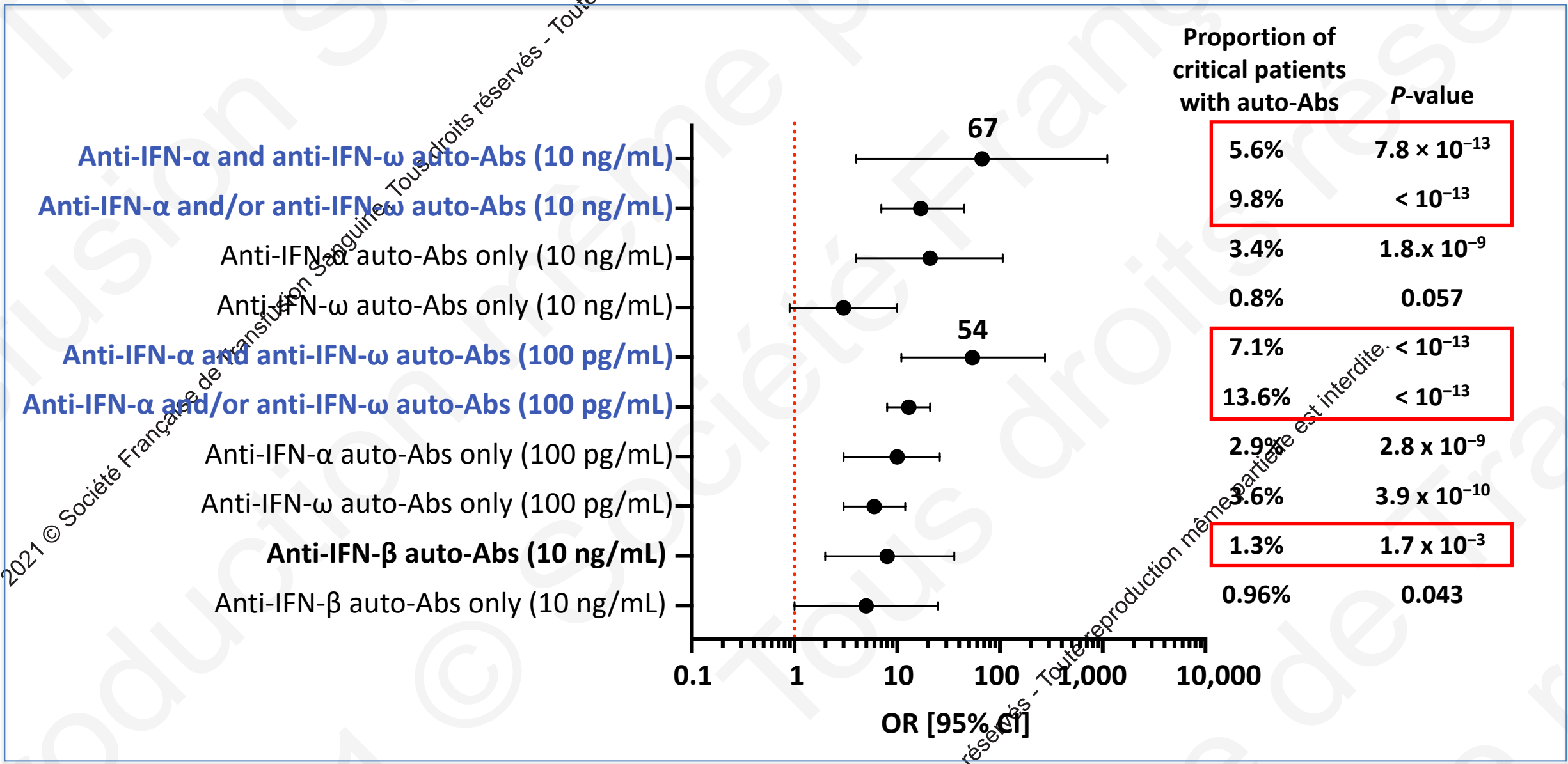


ANTI-IFN-I AUTO-ABS CAN BLOCK TYPE I IFN FUNCTION, *IN VIVO* AND *IN VITRO* INCLUDING IN THE UPPER RESPIRATORY TRACT

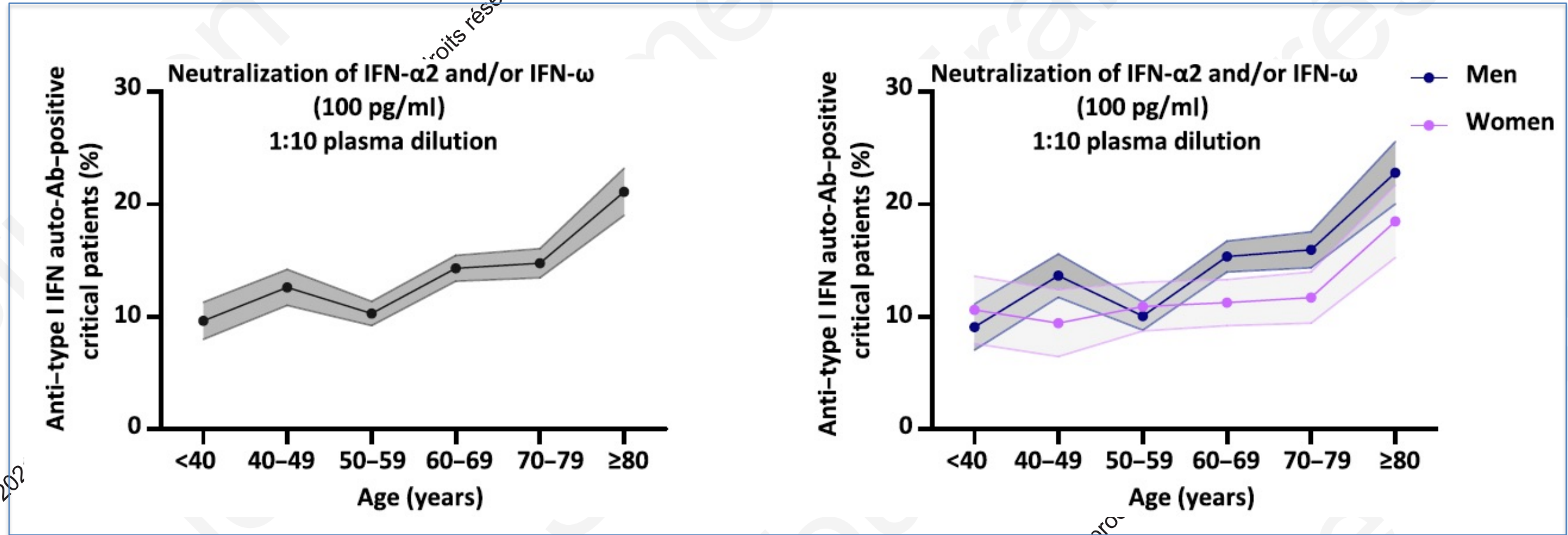
ANTI-TYPE I IFN AUTO-ABS NEUTRALIZING 100 pg/mL OF IFN-α AND/OR IFN-ω IN ALMOST 20% OF SEVERE/CRITICAL COVID-19 PATIENTS



ANTI-TYPE I IFN AUTO-ABS: MAJOR RISK FACTORS OF CRITICAL COVID-19



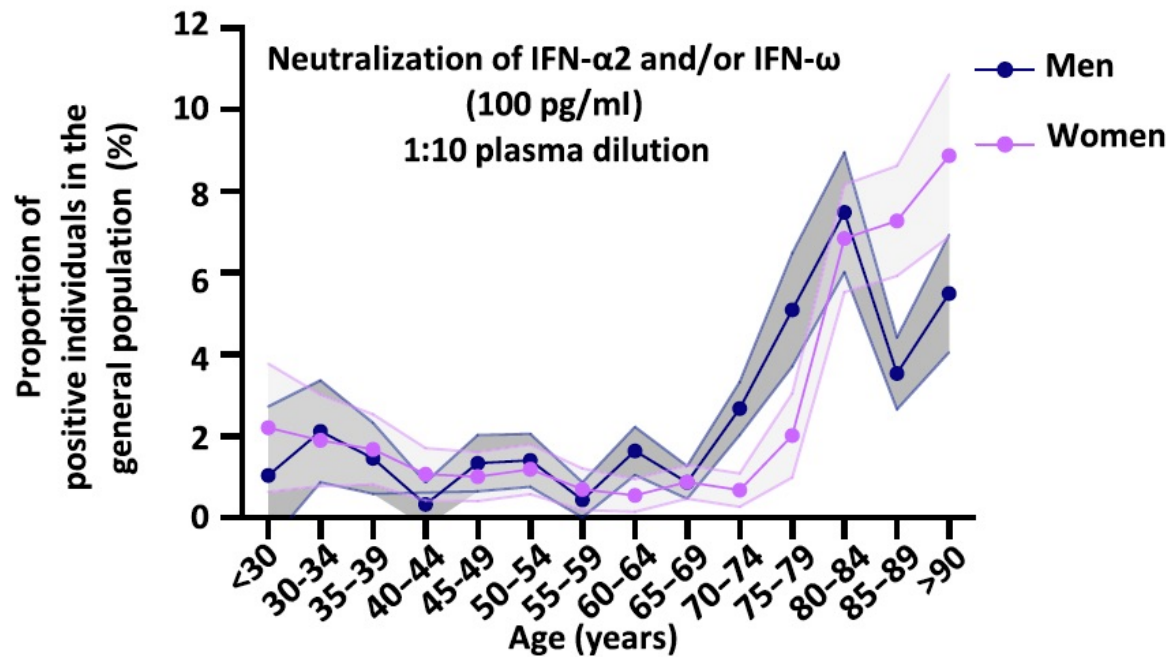
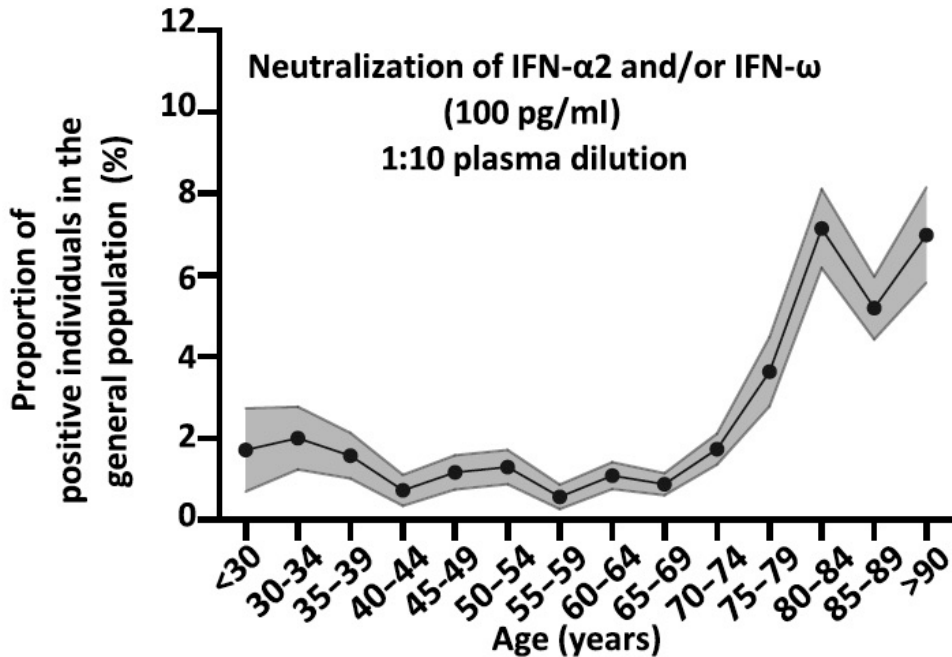
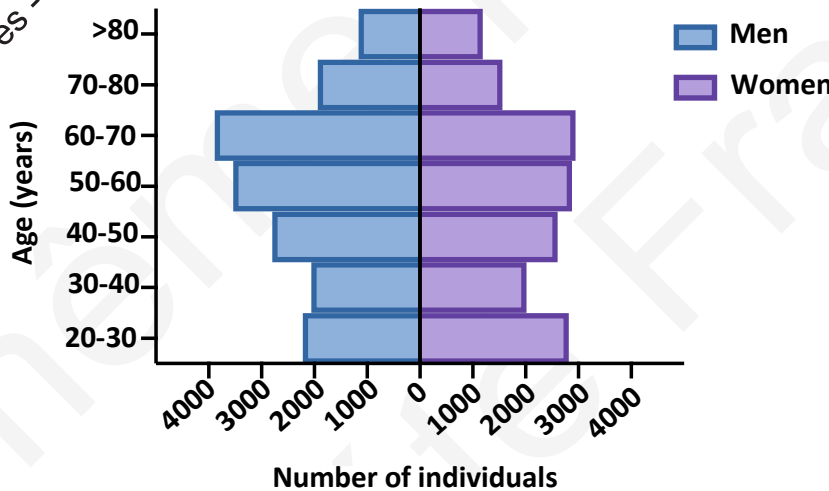
ANTI-TYPE I IFN AUTO-ABS ACCOUNT FOR 20% OF CRITICAL COVID-19 AFTER 80YO AND OF THE TOTAL FATAL CASES



AUTO-ABS NEUTRALIZING IFN- α 2 AND/OR IFN- ω INCREASE WITH AGE IN CRITICAL COVID-19 PATIENTS
HIGH PREVALENCE OF NEUTRALIZING AUTO-ABS AGAINST TYPE I IFNS IN THE ELDERLY WITH CRITICAL COVID-19
NEUTRALIZING AUTO-ABS AGAINST TYPE I IFNS IN ~ 20% OF ALL DECEASED INDIVIDUALS

ANTI-TYPE I IFN AUTO-ABS SHARPLY INCREASE IN THE GENERAL POPULATION >70YO

> 34,000 individuals



ANTI-TYPE I IFN AUTO-ABS

Autoantibodies against type I IFNs in patients with life-threatening COVID-19

Paul Bastard^{1,2,3,*}, Lindsey B. Rosen⁴, Qian Zhang³, Eleftherios Michailidis⁵, Hans-Heinrich Hoffmann⁵, Yu Zhang⁴, Karim Dorgham⁶, Quentin Philippot^{1,2}, Jérémie Rosain^{1,2}, Vivien Béziat^{1,2,3}, Jérémy Manry^{1,2}, Elana Shaw⁴, Liis Haljasmägi⁷, Pärt Peterson⁷, Lazaro Lorenzo^{1,2}, Lucy Bizien^{1,2}, Sophie Trouillet-Assant^{8,9}, Kerry Dobbs⁴, Adriana Almeida de Jesus⁴, Alexandre Belot^{10,11,12}, Anne Kallaste¹³, .../...

John S. Tsang^{70,71}, Raphaela Goldbach-Mansky⁴, Kai Kisand⁷, Michail S. Lionakis⁴, Anne Puel^{1,2,3}, Shen-Ying Zhang^{1,2,3}, Steven M. Holland⁴, Guy Gorochov^{6,72}, Emmanuelle Jouanguy^{1,2,3}, Charles M. Rice⁵, Aurélie Cobat^{1,2,3}, Luigi D. Notarangelo⁴, Laurent Abel^{1,2,3}, Helen C. Su⁴, Jean-Laurent Casanova^{1,2,3,4,2,73,*}

SCIENCE 2020

Autoantibodies neutralizing type I IFNs are present in ~4% of uninfected individuals over 70 years old and account for ~20% of COVID-19 deaths

Paul Bastard^{1,2,3,*}, Adrian Gervais^{1,2}, Tom Le Voyer^{1,2}, Jérémie Rosain^{1,2}, Quentin Philippot^{1,2}, Jérémy Manry^{1,2}, Eleftherios Michailidis⁴, Hans-Heinrich Hoffmann⁴, Shohei Eto⁵, Marina Garcia-Prat⁶, Lucy Bizien^{1,2}, Alba Parra-Martínez⁶, Rui Yang³, Liis Haljasmägi⁷, Mélanie Migaud^{1,2}, Karita Särekannu⁷, Julia Maslovskaja⁷, Nicolas de Prost^{8,9}, .../...

Peter K. Gregersen⁷², Lorenzo Piemonti⁷⁴, Carlos Rodriguez-Gallego^{158,159}, Luigi D. Notarangelo³⁴, Helen C. Su^{34,160}, Kai Kisand⁷, Satoshi Okada⁵, Anne Puel^{1,2,3}, Emmanuelle Jouanguy^{1,2,3}, Charles M. Rice⁴, Pierre Tiberghien^{19,20}, Qian Zhang^{1,2,3}, Aurélie Cobat^{1,2,3}, Laurent Abel^{1,2,3}, Jean-Laurent Casanova^{1,2,3,105,*}

SCI IMMUNOL 2021

Preexisting autoantibodies to type I IFNs underlie critical COVID-19 pneumonia in patients with APS-1

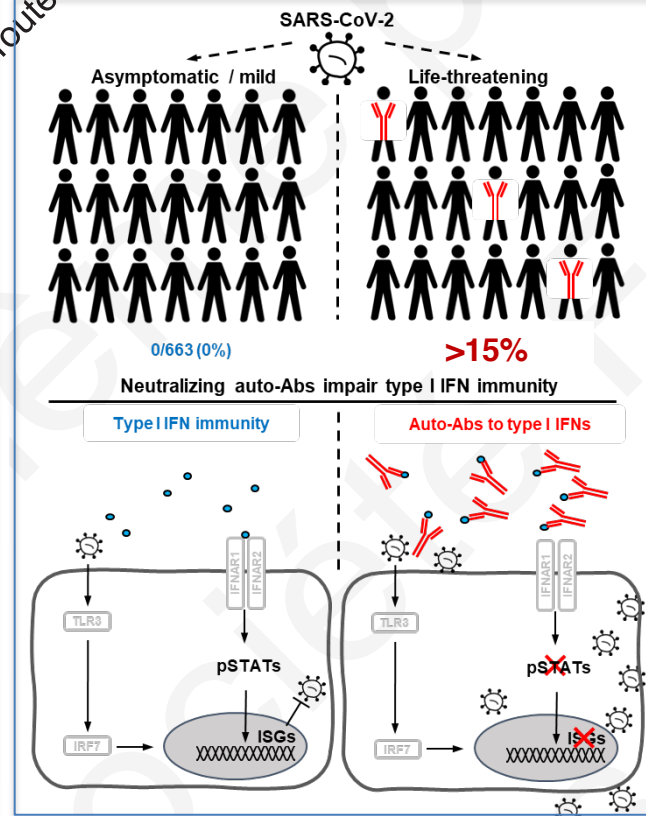
Paul Bastard^{1,2,3}, Elizaveta Orlova⁴, Lela Sozaeva⁴, Romain Lévy^{1,2}, Alyssa James⁴, Monica M. Schmitt⁴, Sebastian Ochoa⁴, Maria Kareva⁴, Yulia Rodina⁴, Adrian Gervais^{1,2}, Tom Le Voyer^{1,2}, Jérémie Rosain^{1,2}, Quentin Philippot^{1,2}, Anna-Lena Neehus^{1,2}, Elana Shaw⁴, Mélanie Migaud^{1,2}, Lucy Bizien^{1,2}, Olov Ekwall^{1,2}, Stefan Berg⁴, Guglielmo Beccuti⁴, Lucia Ghizzoni⁴, Gérard Thiriez^{1,2}, Arthur Pavot^{1,2}, Cécile Goujard^{1,2}, Marie-Louise Frémont^{1,2}, Edwin Carter^{1,2}, Anya Rothenbuhler^{1,2}, Agnès Lingart^{1,2}, Brigitte Mignot^{1,2}, Aurélie Comte^{1,2}, Nathalie Cheikh^{1,2}, Olivier Hermine^{1,2}, Lars Breivik^{1,2}, Eystein S. Husebye^{1,2,22}, Sébastien Humbert^{1,2}, Pierre Rohrlrich^{1,2}, Alain Coaquette^{1,2}, Fanny Vuotto^{1,2}, Karine Faure^{1,2}, Nizar Mahlaoui^{1,2}, Primoz Kotnik^{1,2}, Tadej Battelino^{1,2}, Katarina Trebusak Podkrajsek^{1,2}, Kai Kisand^{1,2}, Elise M.N. Ferré^{1,2}, Thomas DiMaggio^{1,2}, Lindsey B. Rosen^{1,2}, Peter D. Burbelo^{1,2}, Martin McIntyre^{1,2}, Nelli Y. Kann^{1,2}, Anna Shcherbina^{1,2}, Maria Pavlova^{1,2}, Anna Kolodkina^{1,2}, Steven M. Holland^{1,2}, Shen-Ying Zhang^{1,2}, Yanick J. Crow^{1,2}, Luigi D. Notarangelo^{1,2}, Helen C. Su^{1,2}, Laurent Abel^{1,2,3}, Mark S. Anderson^{1,2}, Emmanuelle Jouanguy^{1,2,3}, Bénédicte Neven^{1,2}, Anne Puel^{1,2,3}, Jean-Laurent Casanova^{1,2,3,35}, and Michail S. Lionakis⁴

J EXP MED 2021

Auto-antibodies to type I IFNs can underlie adverse reactions to yellow fever live attenuated vaccine

Paul Bastard^{1,2,3}, Eleftherios Michailidis⁴, Hans-Heinrich Hoffmann⁴, Marwa Chbihi^{1,2}, Tom Le Voyer^{1,2}, Jérémie Rosain^{1,2}, Quentin Philippot^{1,2}, Yoann Seelthner^{1,2}, Adrian Gervais^{1,2}, Marie Materna^{1,2}, Patricia Mouta Nunes de Oliveira^{1,2}, Maria de Lourdes S. Maia^{1,2}, Ana Paula Dinis Ano Bom^{1,2}, Tamiris Azamor^{1,2}, Deborah Araújo da Conceição^{1,2}, Ekaterini Goudouris^{1,2}, Akira Homma^{1,2}, Günther Slesak^{1,2}, Johannes Schäfer^{1,2}, Bali Pulendran^{1,2}, Joseph D. Miller^{1,2}, Ralph Huits^{1,2}, Rui Yang^{1,2}, Lindsey B. Rosen^{1,2}, Lucy Bizien^{1,2}, Lazaro Lorenzo^{1,2}, Maya Chrabieh^{1,2}, Lucia V. Eraso^{1,2}, Flore Rozenberg^{1,2}, Mohamed Maxime Jeljel^{1,2}, Vivien Béziat^{1,2,3}, Steven M. Holland^{1,2}, Aurélie Cobat^{1,2,3}, Luigi D. Notarangelo^{1,2}, Helen C. Su^{1,2}, Rafi Ahmed^{1,2}, Anne Puel^{1,2,3}, Shen-Ying Zhang^{1,2,3}, Laurent Abel^{1,2,3}, Stephen J. Seligman^{1,2,3}, Qian Zhang^{1,2,3}, Margaret R. MacDonald^{1,2,3}, Emmanuelle Jouanguy^{1,2,3,33}, Charles M. Rice^{4,33}, and Jean-Laurent Casanova^{1,2,3,17}

J EXP MED 2021



❖ ~15% OF PATIENTS WITH LIFE-THREATENING COVID-19 HAVE AUTO-ABS TO TYPE I IFNs, 20% ELDERLY, 20% OF DEATHS

❖ PREVALENCE INCREASES WITH AGE IN THE GENERAL POPULATION, >4% AFTER 70 YO

❖ NEUTRALIZE TYPE I IFNs *IN VIVO*, *IN VITRO*, AND BLOCK TYPE I IFN PROTECTIVE EFFECT AGAINST SARS-CoV-2

❖ ! CLINICAL IMPLICATIONS (SCREENING; IFN-β/PLASMA EXCHANGE, VACCINATION, OR MAB THERAPY)

❖ EXCLUSION FROM DONATING CONVALESCENT PLASMA OR FOR ONGOING CLINICAL TRIALS, OR AT LEAST THEY SHOULD BE TESTED BEFORE PLASMA DONATIONS ARE ACCEPTED

CRUCIAL ROLE OF TYPE I IFNs IN PROTECTIVE IMMUNITY AGAINST SARS-CoV-2

THE PATIENTS AND THEIR FAMILIES

LABORATORY OF HUMAN GENETICS OF INFECTIOUS DISEASES



PAUL BASTARD

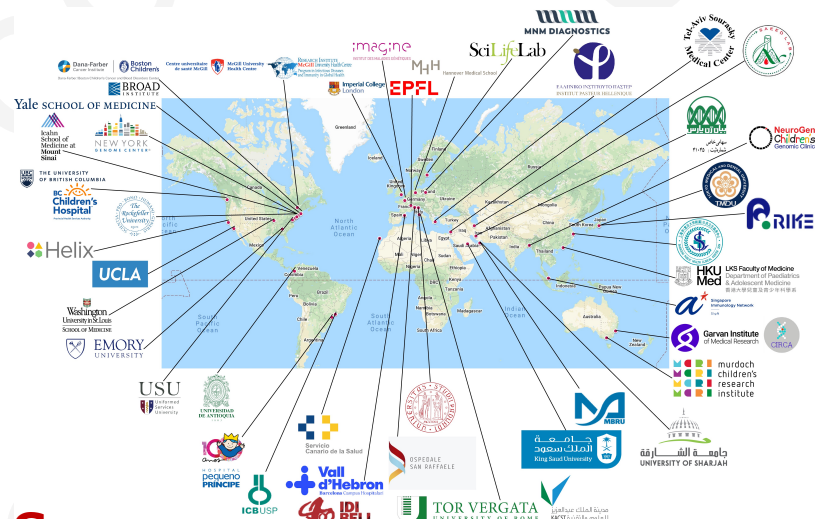


JEAN-LAURENT CASANOVA AND HELEN SU

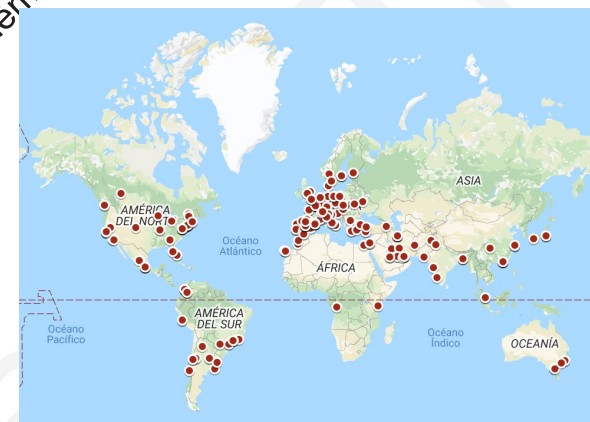
COVID
HUMAN
GENETIC
EFFORT

1000's COLLABORATORS WORLDWIDE

ESPECIALLY ÉTABLISSEMENT FRANÇAIS DU SANG



400 PARTICIPATING CENTERS



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ANTI-CYTOKINE AUTO-ABS BLOCK THE TARGET CYTOKINE BIOLOGICAL FUNCTION

- A UNIQUE INFECTIOUS PHENOTYPE, **MIMICKING** THAT OF PATIENTS WITH GERMLINE MUTATIONS OF THE GENES ENCODING THE CORRESPONDING CYTOKINES/RECEPTORS/SIGNALING MOLECULES

MYCOBACTERIAL DISEASE

AUTO-ANTIBODIES (ABS) TO **IFN- γ** (2003-)
INBORN ERRORS OF IFN- γ (*IFNG*, *IFNGR1*, *IFNGR2*) (1996-)

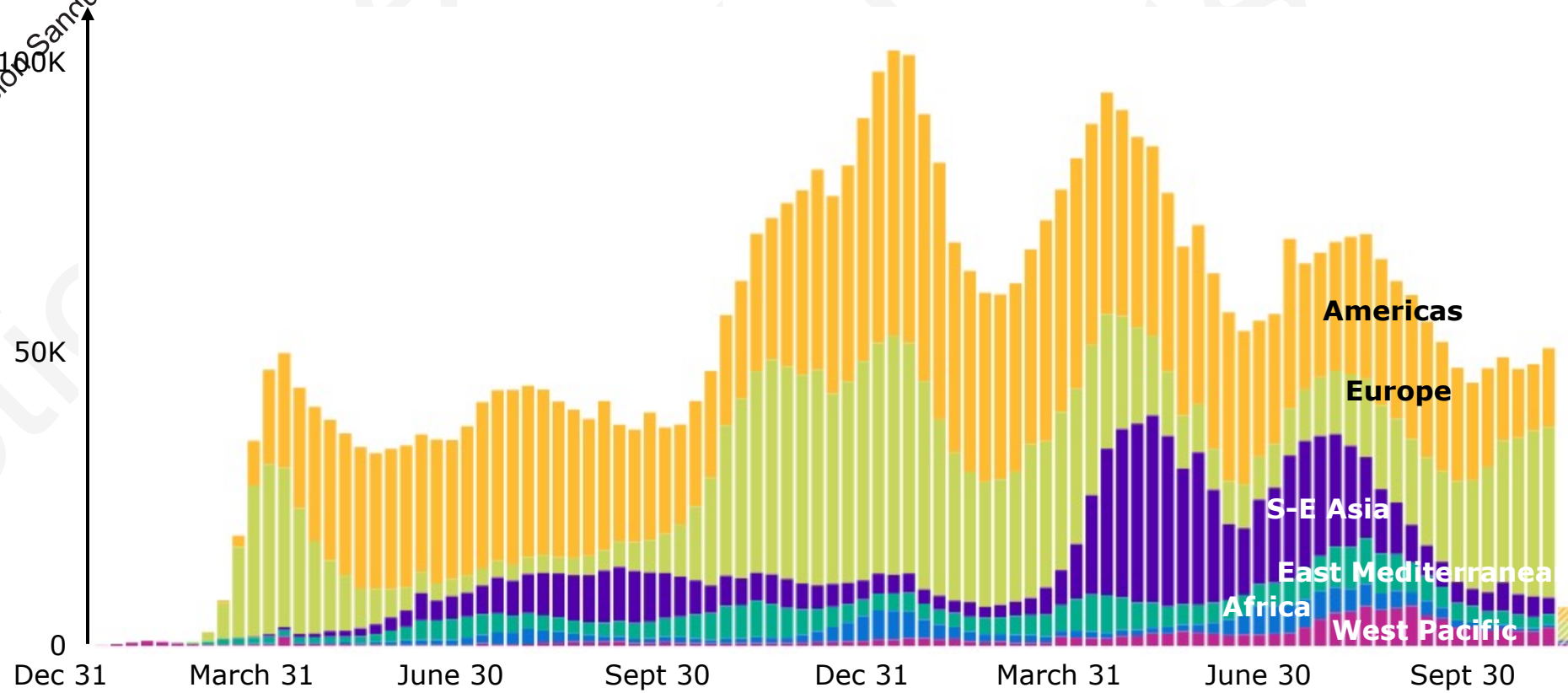
MUCOCUTANEOUS CANDIDIASIS

AUTO-ABS TO **IL-17A** AND **IL-17F** (2010-)
INBORN ERRORS OF IL-17 (*IL17F*, *IL17RA*, *IL17RC*) (2011-)

STAPHYLOCOCCAL DISEASE

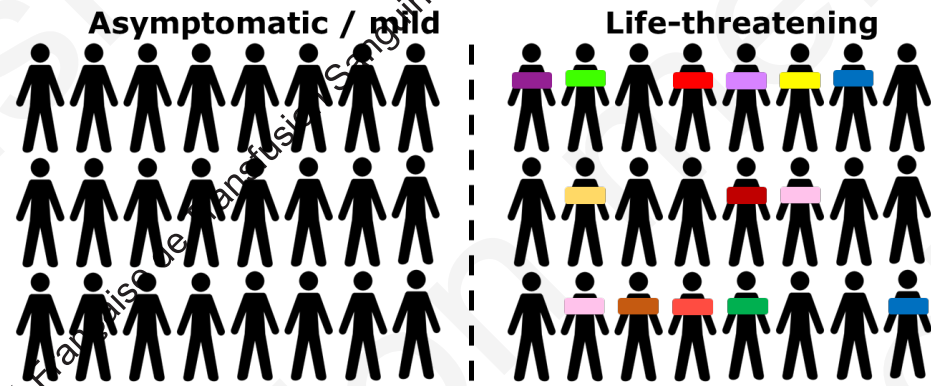
AUTO-ABS TO **IL-6** (2008-)
INBORN ERRORS OF IL-6 (*IL6R*) (2019-)

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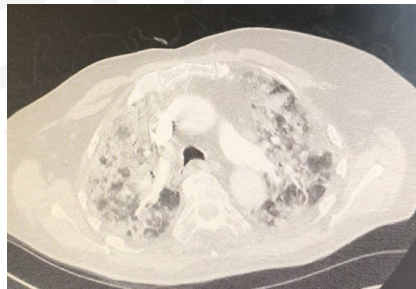
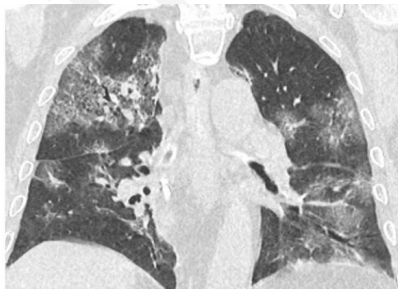


COVID HUMAN GENETIC EFFORT

SARS-CoV-2



Life-threatening COVID-19 pneumonia



ARDS (Chest X-ray) Severe Covid pneumonia (Chest CT) Critical pneumonia, ARDS (Chest CT)

>400 participating centers worldwide

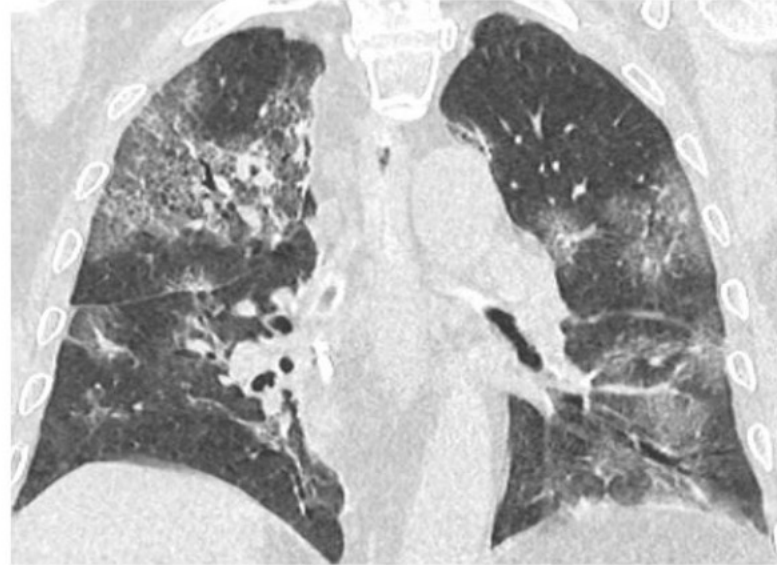


Life-threatening COVID-19 pneumonia

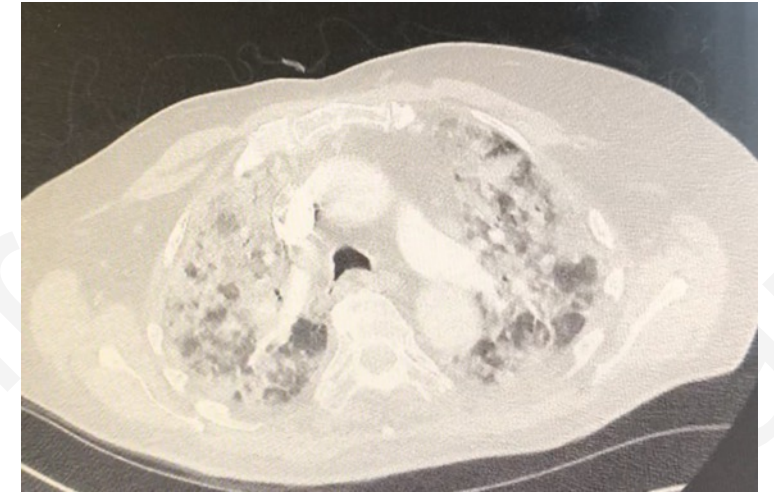
ARDS (Chest X-ray)



Severe Covid pneumonia (Chest CT)



Critical pneumonia – ARDS (Chest CT)



Prevalence is low, and most infected individuals are asymptomatic or mildly symptomatic

How do we explain such interindividual variability ?