



# BIO-312

# Genomic Solutions

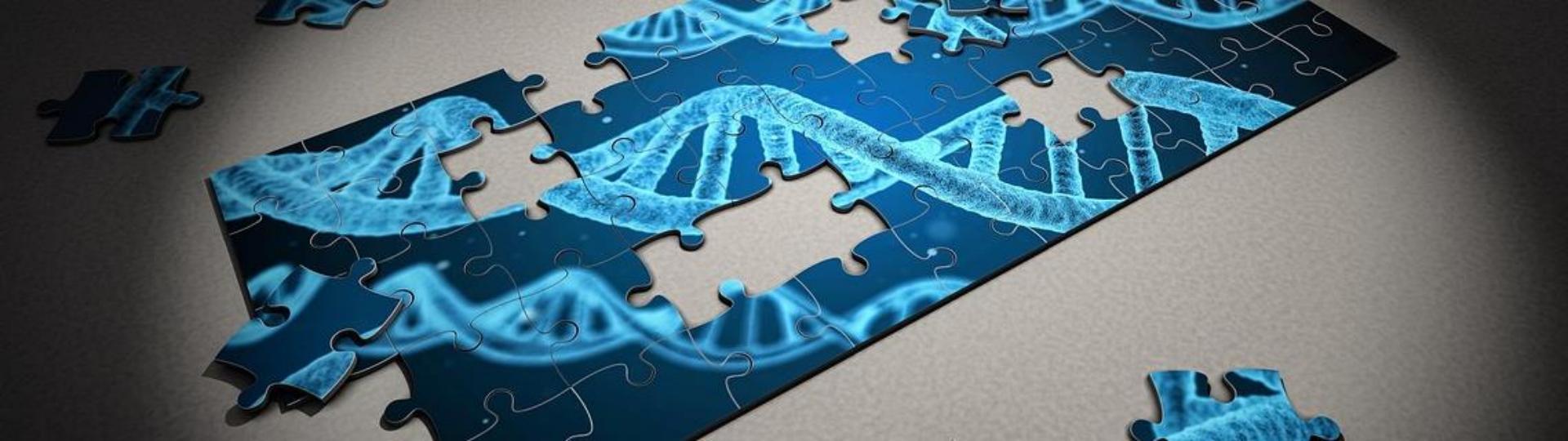
# to Sustainable

# Development

# For interactive questions

Web browser: **echo360poll.eu**

Session ID:



# Sex differences in immunity

# Sex Differences in Immunity



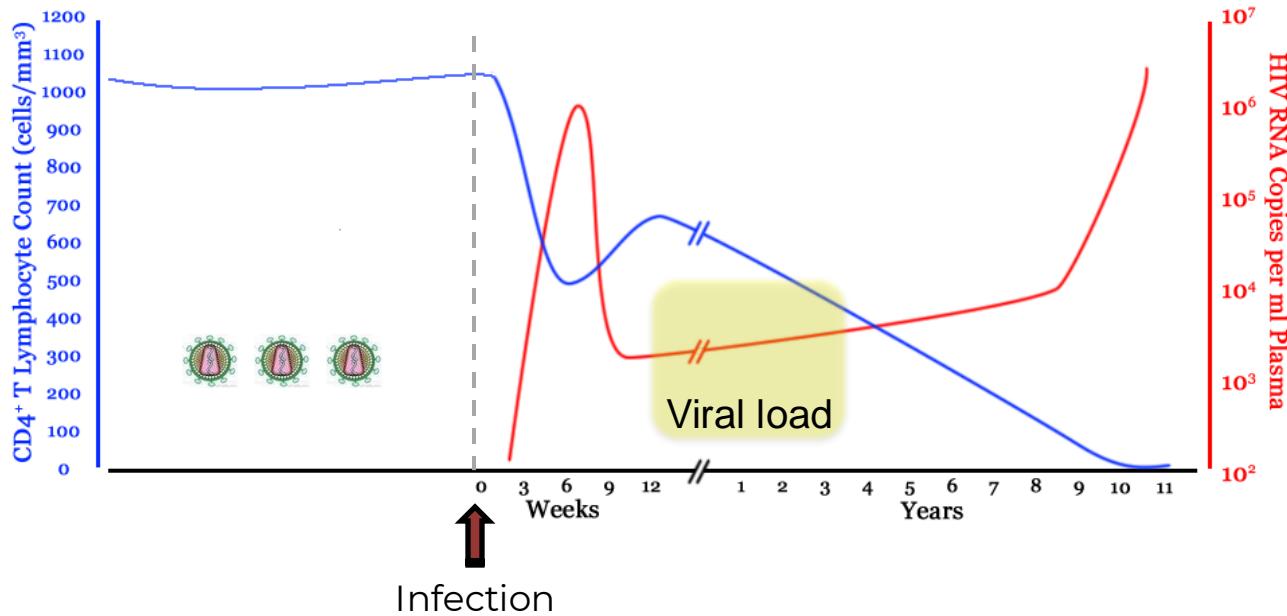
**Sex-based Immune Differences**  
Explore the biological and physiological variations in immune function between males and females.

**Genetic Factors**  
Examine the role of genetic factors in shaping sex-based differences in immunity.

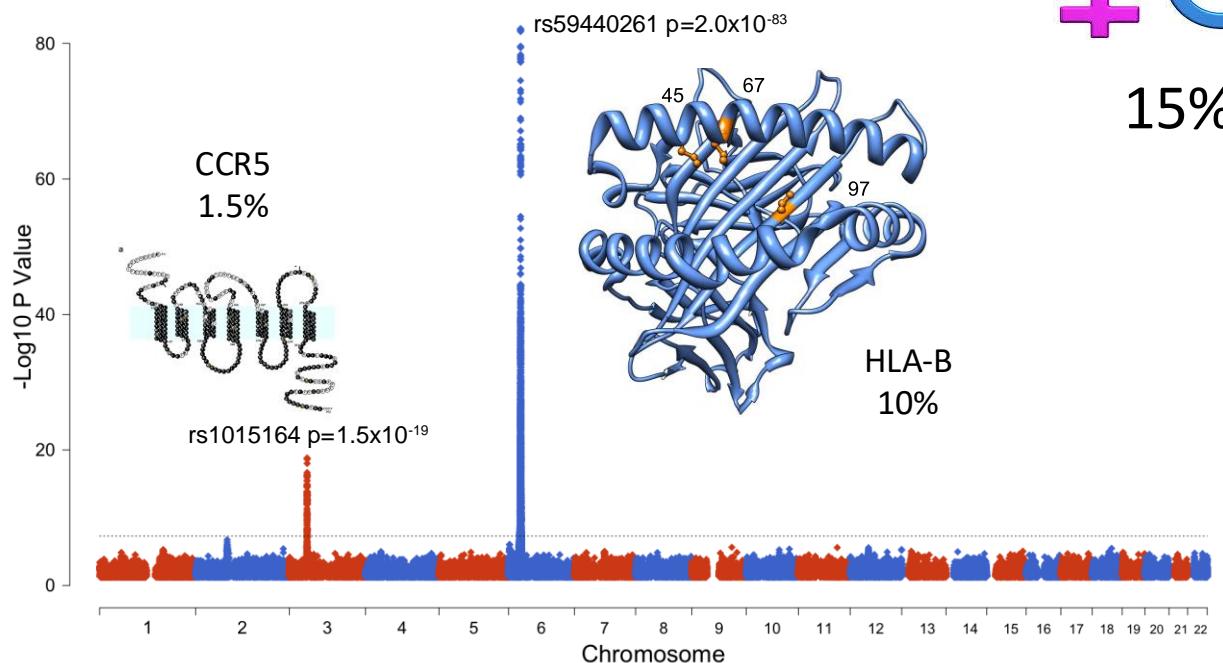
**Hormonal Influences**  
Discuss how sex hormones, such as estrogen and testosterone, impact the immune system's response.

**Implications for Health and Disease**  
Explore how sex-based immune variations affect the prevalence, severity, and treatment of various health conditions.

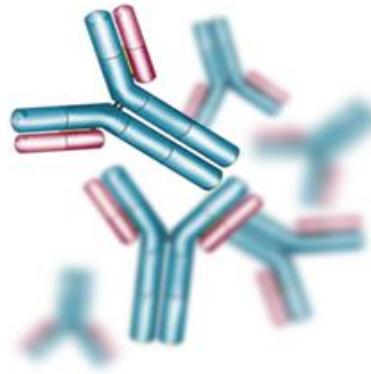
# HIV control



# HIV control

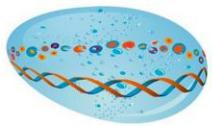


## IgG responses to common infections



- Indicator of past infection or vaccination
- Correlate of protection (variable)
- Relevance for autoimmune disorders

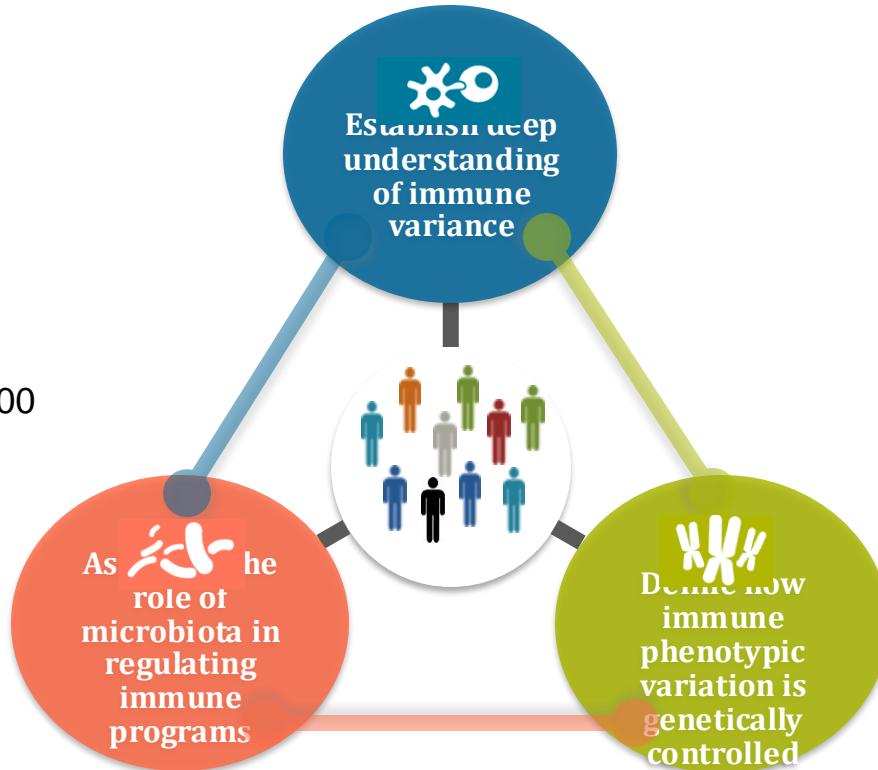
# Genomics of the healthy immune response



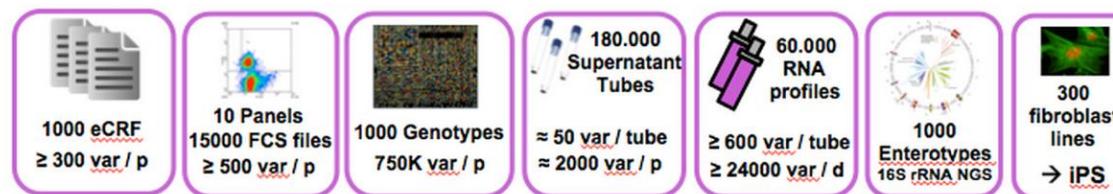
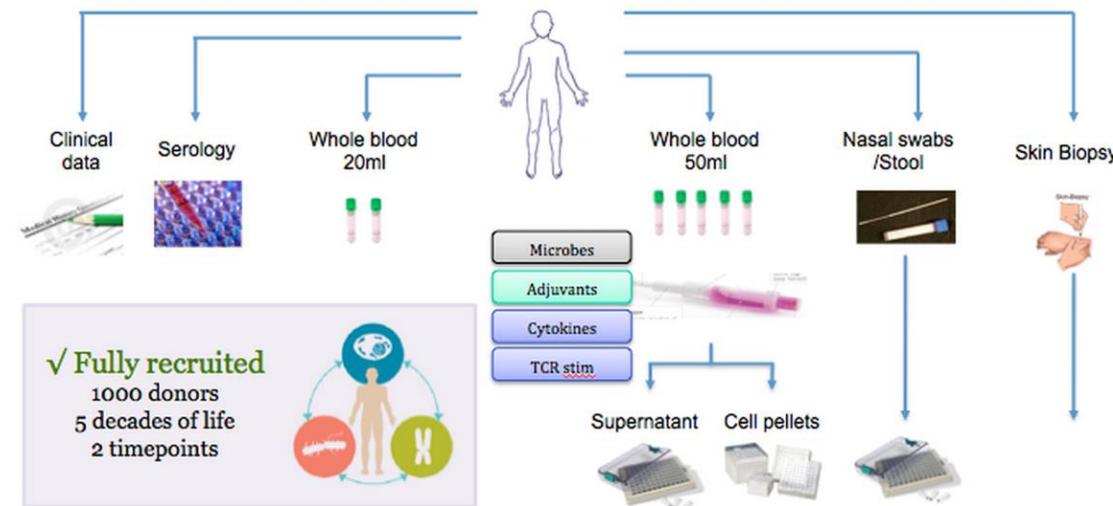
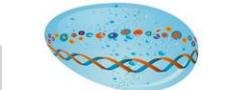
**Milieu Intérieur**  
Vers une médecine personnalisée

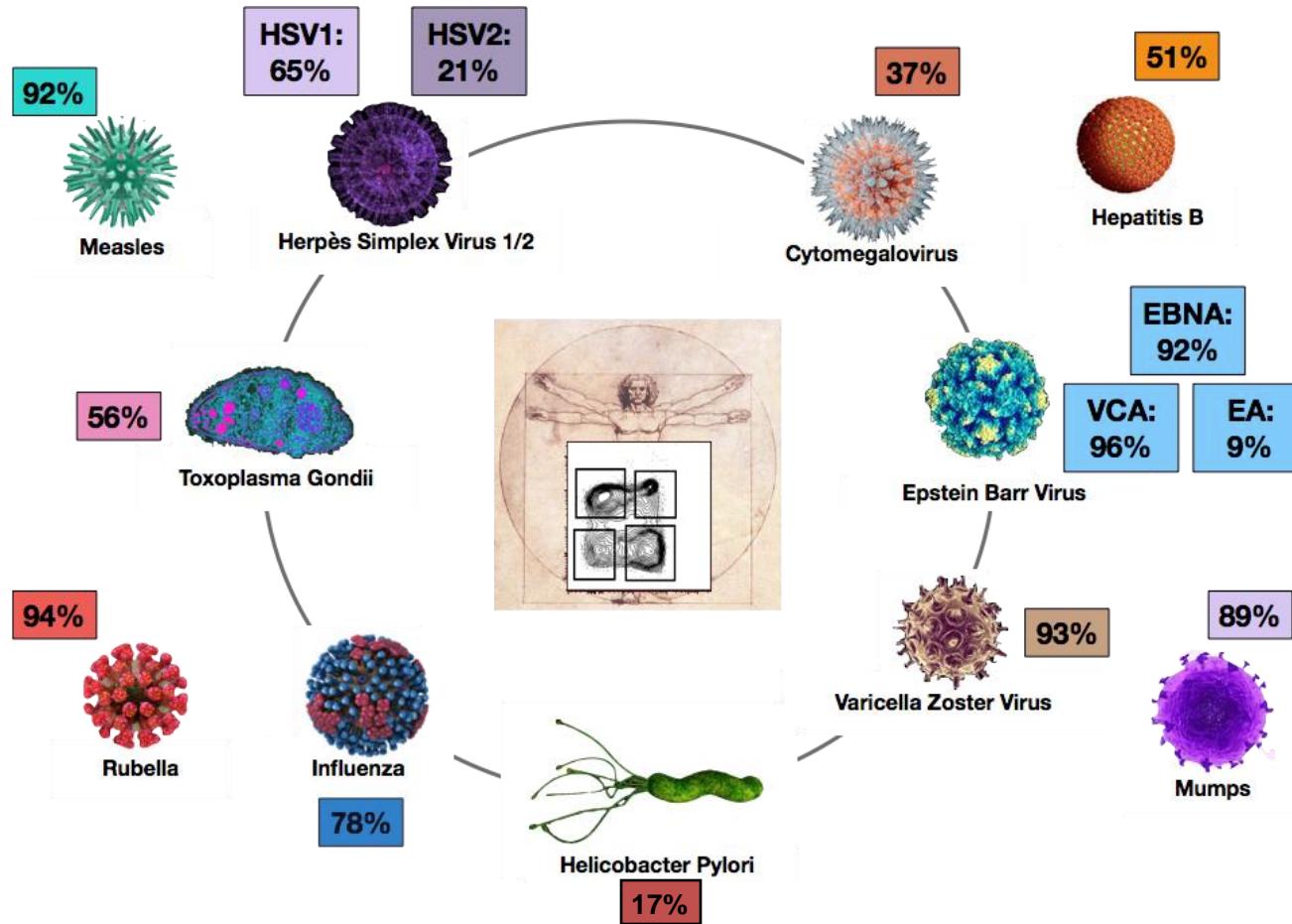
Healthy individuals,  
stratified by

- age (20 to 70, 200 per decade)
- gender (1:1 ratio)

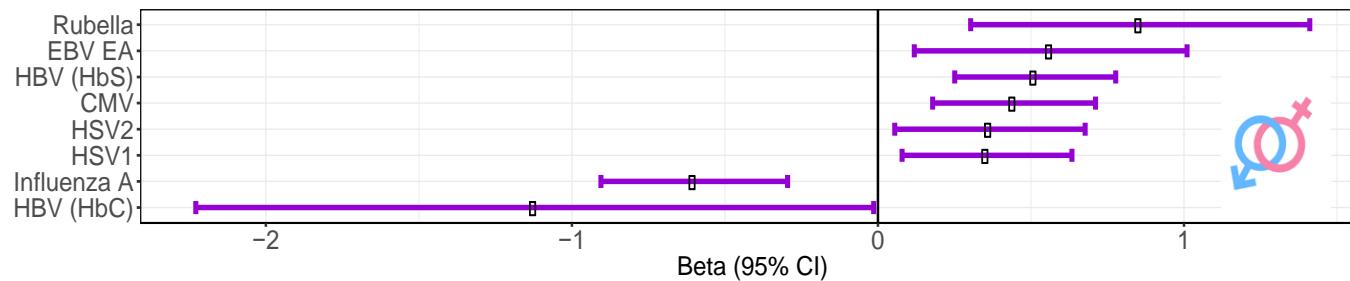


# 1,000 healthy donors cohort





# Impact of sex on IgG levels



Science

# Why the coronavirus is killing more men than women

Men have weaker immune systems that, in some cases, may actually sabotage the body's response to an invader. But social and cultural factors may also play a role.



**The Washington Post**  
*Democracy Dies in Darkness*

## Why are women more prone to long Covid?

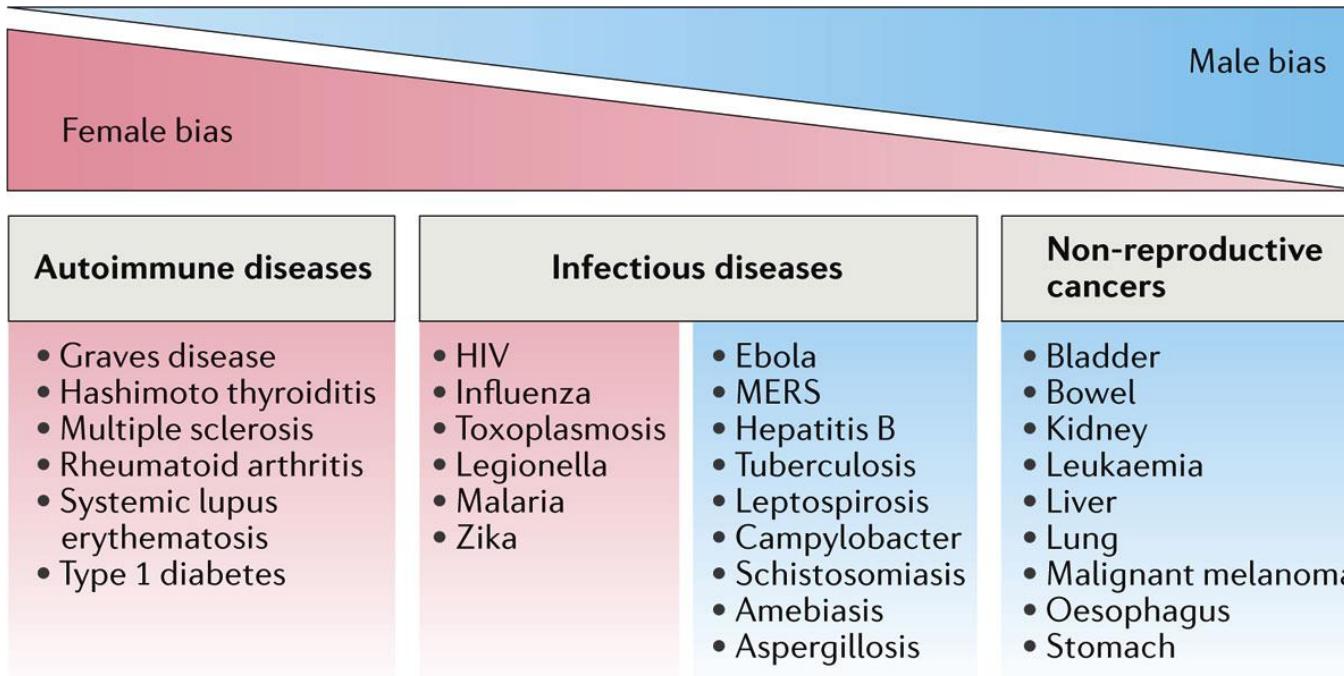


theguardian

Table 1 | Sex differences in immune responses in different species

Common name	Species	Immune component	Sex difference
Sea urchin	<i>Paracentrotus lividus</i>	Number of immunocytes, cytotoxic activity, phagocytosis and haemolysis	Greater in females than in males
Fruit fly	<i>Drosophila melanogaster</i>	Activation of Toll and immune deficiency signalling	Greater in females than in males
Scorpionfly	<i>Panorpa vulgaris</i>	Haemolysis and phagocytosis	Greater in females than in males
Wall lizard	<i>Podarcis muralis</i>	Macrophage phagocytosis	Greater in females than in males
Eurasian kestrels	<i>Falco tinnunculus</i>	Hypersensitivity responses	Greater in females than in males
Great tit	<i>Parus major</i>	Hypersensitivity responses	Greater in females than in males
House mouse	<i>Mus musculus</i>	Pro-inflammatory cytokine responses, T cell proliferation and antibody responses	Greater in females than in males
Rhesus macaque	<i>Macaca mulatta</i>	Pro-inflammatory cytokine responses and antibody responses	Greater in females than in males
Human	<i>Homo sapiens</i>	Type I interferon activity, T cell numbers and antibody responses	Greater in females than in males

# Clinical consequences of sexual dimorphism of immune responses



# Autoimmune Disorders and Sex Differences

## Prevalence of Autoimmune Conditions in Females

Autoimmune disorders are more prevalent in females compared to males, often with a ratio of 3:1 or higher.

## Potential Mechanisms

Hormonal differences, genetic factors, and immune system dynamics may contribute to the disproportionate prevalence of autoimmune conditions in females.

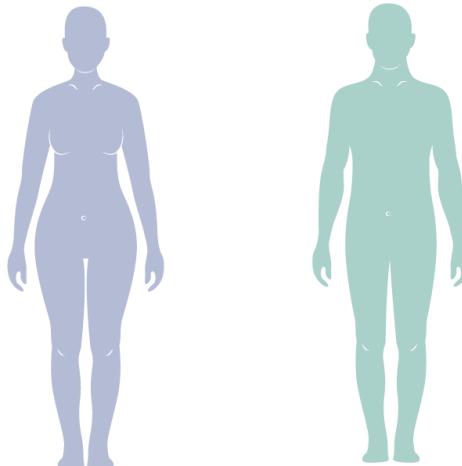
## Diagnostic Challenges

The higher prevalence of autoimmune disorders in females can lead to diagnostic challenges, as symptoms may be more common or present differently in women compared to men. This can result in delayed diagnoses or misdiagnoses.

## Treatment Considerations

Addressing the sex-based differences in autoimmune disorders is crucial for improving treatment outcomes. Tailored therapies and dosing regimens may be necessary to account for the unique biological and hormonal profiles of females and males.

# Sexual dimorphism and cancer risk



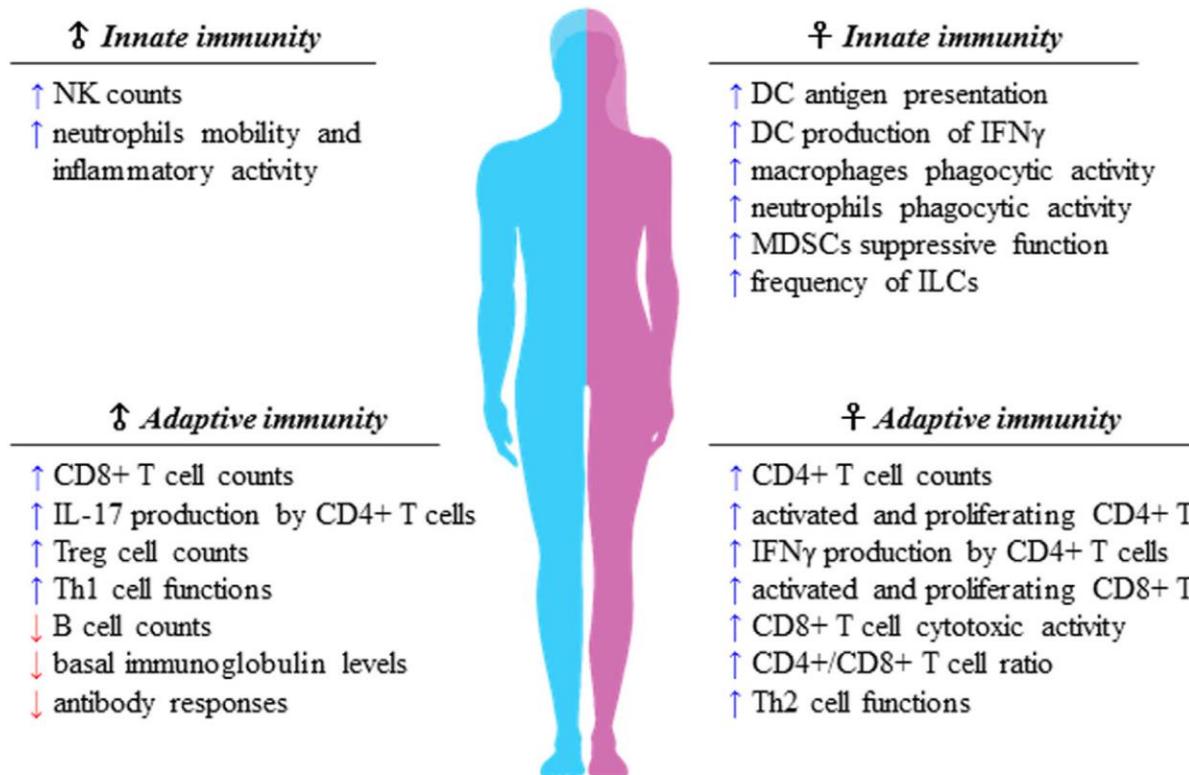
## Factors reducing cancer risk

- Greater innate immunity
- Greater adaptive immunity
- Enhanced resolution of inflammation
- Advantageous microbiota

## Factors increasing cancer risk

Higher risk of pathogenic infections

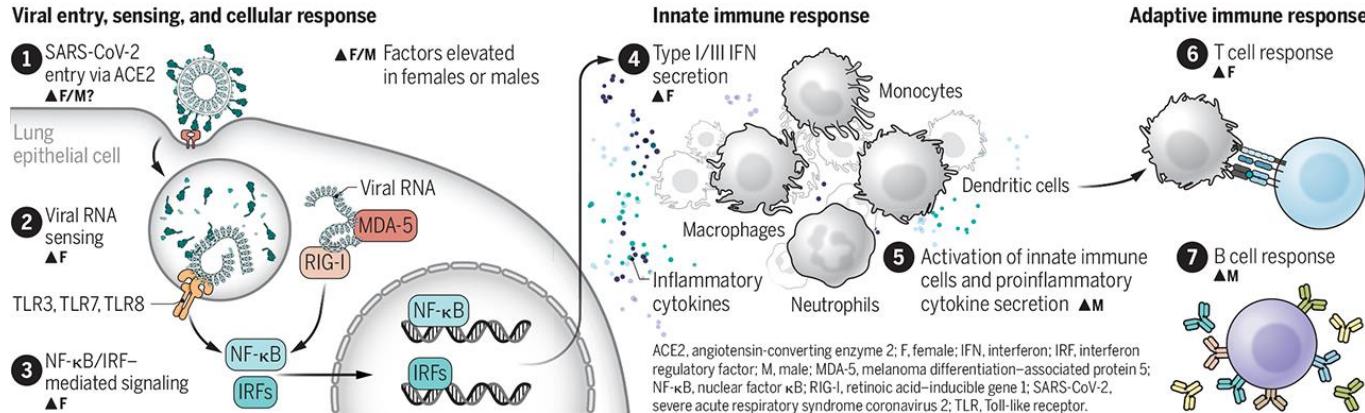
# Sexual dimorphism of immune responses



# Sexual dimorphism in SARS-CoV-2 infection

## Sex differences in factors that affect infection and immunity in COVID-19

SARS-CoV-2 binds to ACE2 to initiate host cell entry. This activates the viral RNA sensors TLR3/7/8 and RIG-I–MDA-5, which induce secretion of IFNs and other inflammatory cytokines, leading to innate and adaptive immune responses. In each of these steps, sex differences may shape the antiviral immune response.



# Why?

*male*

1 2 3 4 5

6 7 8 9 10

11 12 13 14 15

16 17 18 19 20

21 22 X Y

*female*

1 2 3 4 5

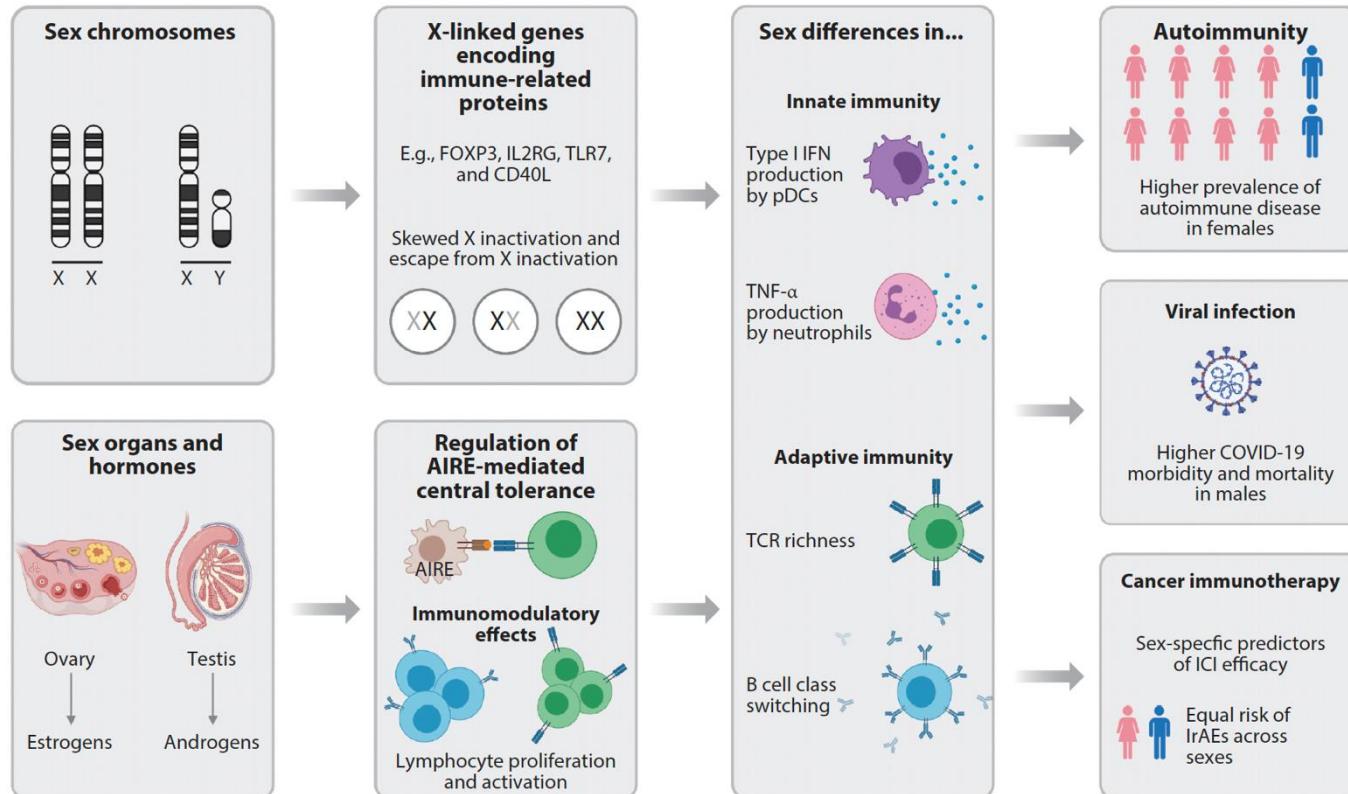
6 7 8 9 10

11 12 13 14 15

16 17 18 19 20

21 22 X X

# Why?



# X chromosome

SCIENCE IMMUNOLOGY | RESEARCH ARTICLE

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AUTOIMMUNE DISEASE

## ***TLR7 escapes X chromosome inactivation in immune cells***

Mélanie Souyris,<sup>1</sup> Claire Cenac,<sup>1</sup> Pascal Azar,<sup>1</sup> Danièle Daviaud,<sup>1</sup> Astrid Canivet,<sup>1</sup>  
Solange Grunenwald,<sup>2</sup> Catherine Pienkowski,<sup>3</sup> Julie Chaumeil,<sup>4</sup>  
José E. Mejía,<sup>1</sup> Jean-Charles Guéry<sup>1\*</sup>

*“... the TLR7 gene evades silencing by X chromosome inactivation in immune cells from women.”*

*“... enhanced TLR7 expression owing to biallelism contributes to the higher risk of developing SLE and other autoimmune disorders in women.”*

# TLR7 & Covid



SHORT REPORT



## Association of Toll-like receptor 7 variants with life-threatening COVID-19 disease in males: findings from a nested case-control study

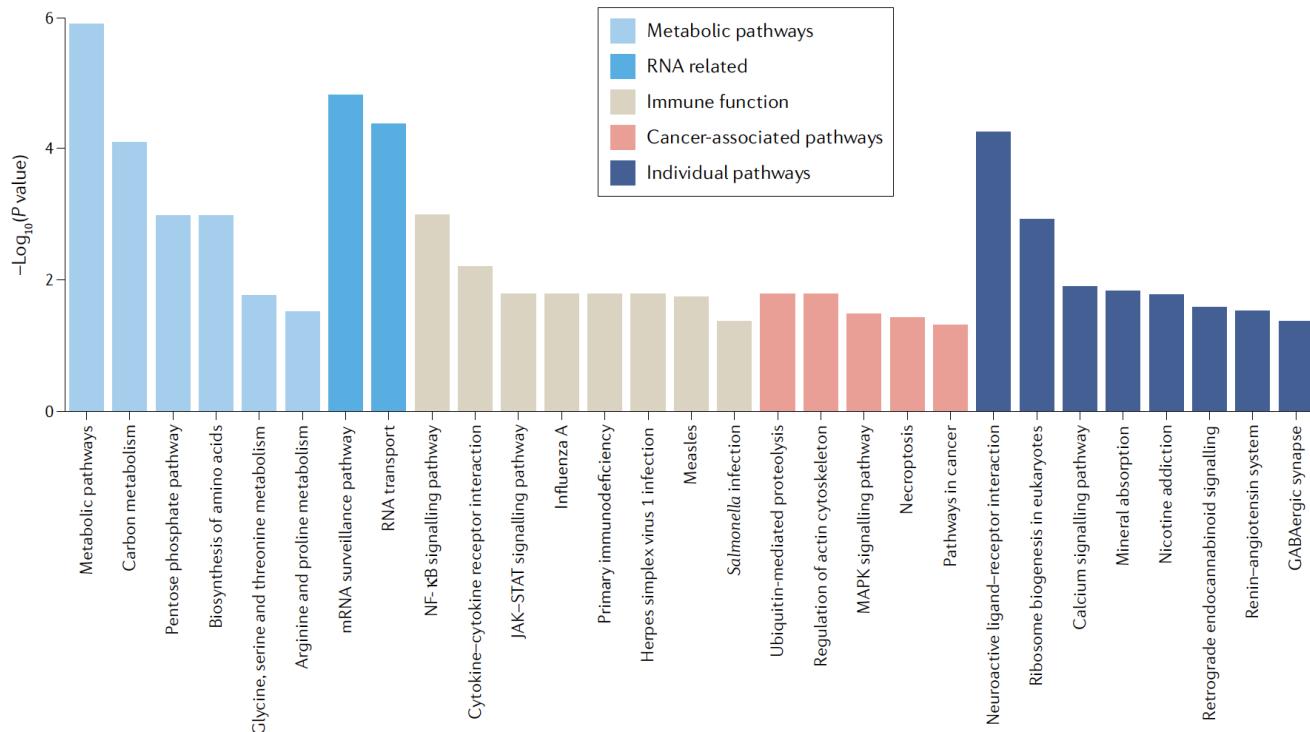
Chiara Fallerini<sup>1,2†</sup>, Sergio Daga<sup>1,2†</sup>, Stefania Mantovani<sup>3†</sup>, Elisa Benetti<sup>2</sup>, Nicola Picchietti<sup>4,5</sup>, Daniela Francisci<sup>6,7</sup>, Francesco Paciosi<sup>6,7</sup>, Elisabetta Schiaroli<sup>6</sup>, Margherita Baldassarri<sup>1,2</sup>, Francesca Fava<sup>1,2,8</sup>, Maria Palmieri<sup>1,2</sup>, Serena Ludovisi<sup>3,9</sup>, Francesco Castelli<sup>10</sup>, Eugenia Quiros-Roldan<sup>10</sup>, Massimo Vaghi<sup>11</sup>, Stefano Rusconi<sup>12,13</sup>, Matteo Siano<sup>12</sup>, Maria Bandini<sup>14</sup>, Ottavia Spiga<sup>5,15</sup>, Katia Capitani<sup>1,16</sup>, Simone Furini<sup>2</sup>, Francesca Mari<sup>1,2,8</sup>, GEN-COVID Multicenter Study<sup>1</sup>, Alessandra Renieri<sup>1,2,8\*</sup>, Mario U Mondelli<sup>3,9</sup>, Elisa Frullanti<sup>1,2</sup>

JAMA | Preliminary Communication

## Presence of Genetic Variants Among Young Men With Severe COVID-19

Caspar I. van der Made, MD; Annet Simons, PhD; Janneke Schuurs-Hoeijmakers, MD, PhD; Guus van den Heuvel, MD; Tuomo Manner, PhD; Simone Kersten, MSc; Rosanne C. van Deuren, MSc; Marloes Steehouwer, BSc; Simon V. van Reijmersdal, BSc; Martin Jaeger, PhD; Tom Hofste, BSc; Galuh Astuti, PhD; Jordi Corominas Galbany, PhD; Vyne van der Schoot, MD, PhD; Hans van der Hoeven, MD, PhD; Wanda Hagemolen van den Have, MD, PhD; Eva Klijn, MD, PhD; Catrien van den Meer, MD; Jeroen Fiddelaers, MD; Quirijn de Mast, MD, PhD; Chantal P. Bleeker-Rovers, MD, PhD; Leo A. B. Joosten, PhD; Helger G. Yntema, PhD; Christian Gilissen, PhD; Marcel Nelen, PhD; Jos W. M. van der Meer, MD, PhD; Han G. Brunner, MD, PhD; Mihai G. Netea, MD, PhD; Frank L. van de Veerdonk, MD, PhD; Alexander Hoischen, PhD

# Enrichment of gene pathways on the X chromosome

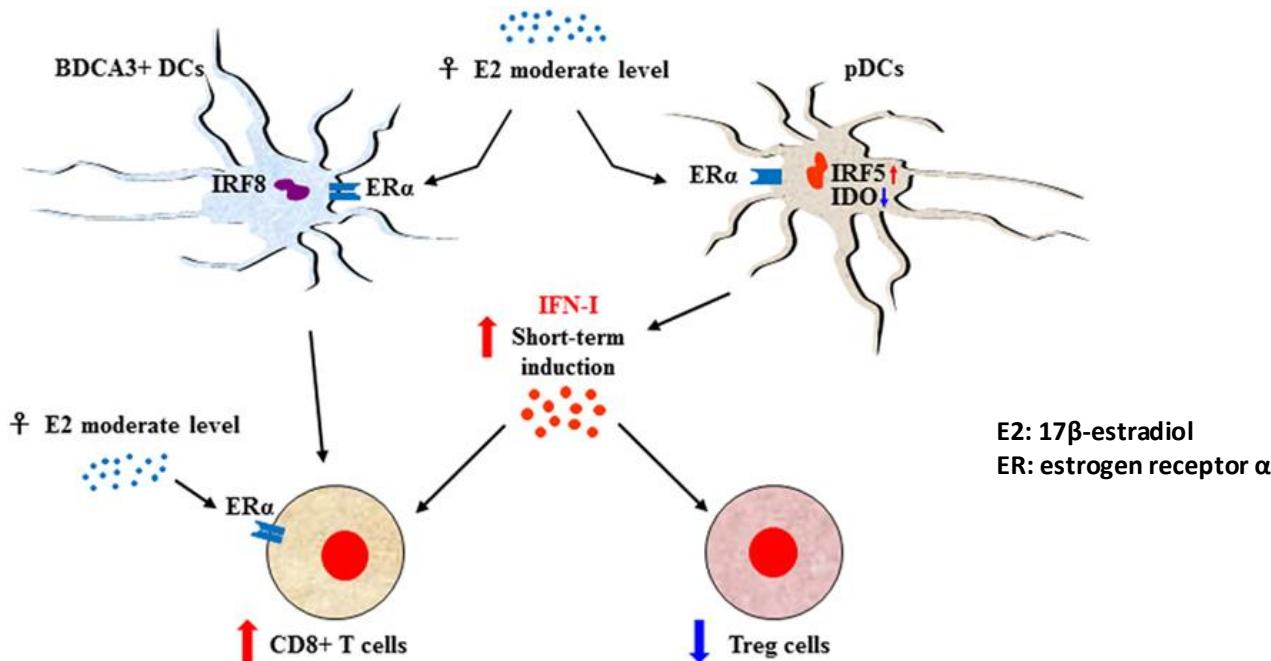


		<b>Turner Syndrome</b>	<b>Klinefelter Syndrome</b>
<b>Chromosomal Abnormality</b>	Missing one X chromosome (45,X)	Extra X chromosome (47,XXY)	
<b>Sex Hormone Levels</b>	Low estrogen (ovarian insufficiency)	Low testosterone levels	
<b>Autoimmune Disease Risk</b>	High risk	Moderately high risk	
<b>Autoimmune Diseases</b>	Hashimoto's thyroiditis, Type 1 diabetes, Celiac disease, Rheumatoid arthritis	Lupus, Rheumatoid arthritis, Multiple sclerosis, Type 1 diabetes	
<b>Immune Cell Composition</b>	↓ Naive T cells, ↓ Regulatory T cells (Tregs), ↑ B cells (autoantibody production)	↑ CD4+ T cells, ↓ CD8+ T cells, ↑ B cell	
<b>Infection Susceptibility</b>	Higher risk of bacterial and viral infections	Higher risk of viral infections	
<b>Vaccination Response</b>	Effective but may require booster doses due to weaker immune memory	Stronger vaccine responses due to higher B cell activity	
<b>Potential Interventions</b>	Estrogen replacement therapy may improve immune function	Testosterone therapy may help regulate immune responses	

# Hormones

- **Progesterone:** has broad anti-inflammatory effects
- **Estrogens:** enhance cell-mediated and humoral immune responses
- **Androgens:** decrease immune cell reactivity

# Hormones



# Other influences: microbiome

## **Sex Differences in the Gut Microbiome Drive Hormone-Dependent Regulation of Autoimmunity**

Janet G. M. Markle,<sup>1,2</sup> Daniel N. Frank,<sup>3</sup> Steven Martin-Toth,<sup>1</sup> Charles E. Robertson,<sup>4</sup>  
Leah M. Feazel,<sup>3</sup> Ulrike Rolle-Kampczyk,<sup>5</sup> Martin von Bergen,<sup>5,6,7</sup> Kathy D. McCoy,<sup>8</sup>  
Andrew J. Macpherson,<sup>9</sup> Jayne S. Danska<sup>1,2,9\*</sup>

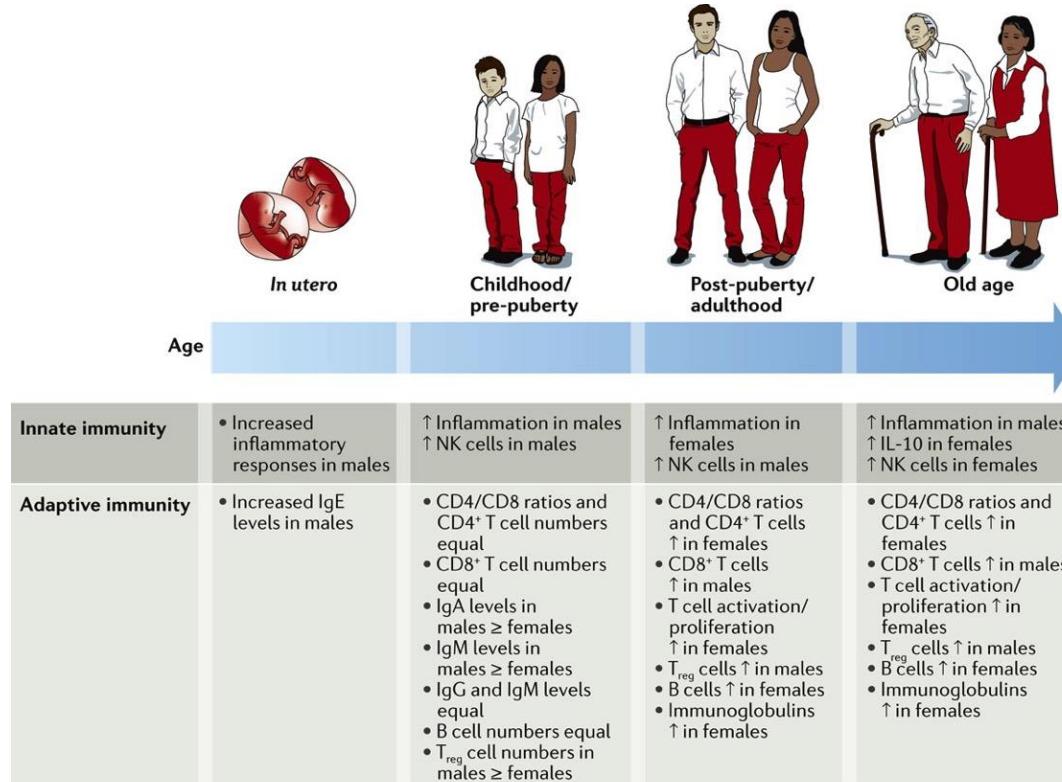
1 MARCH 2013 VOL 339 SCIENCE [www.sciencemag.org](http://www.sciencemag.org)

In the nonobese diabetic (NOD) mouse model of type 1 diabetes:

“... Transfer of gut microbiota from adult male [mice] to immature females altered the recipient’s microbiota, resulting in elevated testosterone and metabolomic changes, reduced inflammation (...) and robust T1D protection.”

“... the microbiota may be able to regulate sex hormones and influence an individual’s susceptibility to autoimmunity.”

# Other influences: age - life course



# Conclusions

- Sex differences in immune responses are important
- In general, males have weaker immune responses and are at higher risk of infections and cancer
- In general, females have more robust immune responses leading to increased risk for autoimmunity
- Sex differences in immune responses reflect complex interactions between hormones, genes and environment
- Most studies of immune function did not include both sexes... and that's bad!