

## Interferon A Natural Key Against To Viral Infections

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### ABSTRACT:

Interferons (IFNs) are proteins produced by a variety of cells in the inflammatory response to infections. Their production is triggered by the immune system in response to pathogens or cytokines. Interferon was discovered by Alick Isaacs and Jean Lindenmann in 1957. It was originally thought that interferon could be used as a general anti-viral agent and in anti-cancer therapy. There are many different types of interferons, now known as interferons “alpha,” “beta,” “gamma” and “lambda,” with different cellular receptors and modes of action, and there are possibly 24 different types of alpha interferon. Independently and simultaneously, a group of Japanese scientists found an “interfering factor,” which upon subsequent analysis turned out to be interferon, probably of the alpha type.

**Key words:** Alpha interferon, Beta interferon, Gamma interferon, Applications.

### I. INTRODUCTION:

#### Discovery of Interferon:

No history of virology would be complete without a discussion of interferons and how they led to the discovery and identification of cytokines (small proteins that influence the activity of the immune system and nearby cells), their function in innate immunity, and their pharmaceutical properties as anti-viral and anti-cancer agents. The cloning of the interferon gene and its production in *E. coli* initiated the biotechnology revolution. As was the case of many other major discoveries in science, interferon was a fortuitous discovery.

In 1957, Alick Isaacs (1921–1965) and a post-doctoral Swiss student, Jean Lindenmann, were studying the phenomenon of “viral interference”—the ability of one virus to inhibit the replication of another virus. When 10-day-old

chick chorioallantoic membranes from chick embryos were infected with heat or UV inactivated influenza virus, a material was produced that interfered with subsequent viral replication. The experimental procedure is illustrated in Fig. 7.1. Influenza virus production (or inhibition) was measured by hemagglutination, the ability of the virus to interact and agglutinate red blood cells. They termed the interfering substance “interferon”. The end point of the titration was the identification of that well (on a plate of small wells) with partial agglutination; the reciprocal of the influenza dilution thus observed was taken as the interferon titer (concentration).

### TYPES OF INTERFERONS AND ITS APPLICATIONS

Interferons:

- Interferons are the set of proteins which are released by virus infected cells in vivo and which reacts with uninfected cells so as to render them resistant to infection to virus.
- It belongs to the class of glycoproteins and cytokines. Interferons are named for their ability to interfere with viral replication.
- However virus-encoded genetic elements has the ability to antagonize the interferon response contributing to viral pathogenesis and viraldiseases
- Interferons have various functions they activate immune cells such as natural killer cells and macrophages they increase host defenses by regulating antigen presentation by virtue of increasing the expression of major histocompatibility complexantigens.
- Immune cells communicate with one another in many different ways, including through the production of cytokines.
- Cytokines are proteins that cells expel, or

secrete, that can travel to other cells in the body, bind to receptor proteins on the cell surface, and relay a message.

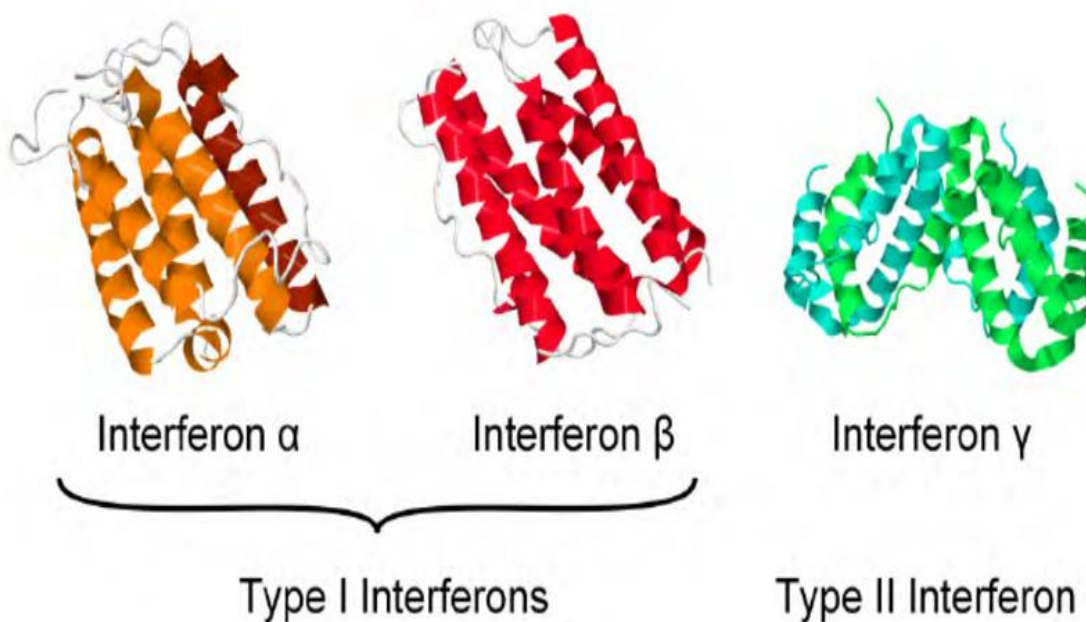
- One important class of cytokines is interferons (IFNs), which play a vital role in protecting cells against viral infections.
- In fact, the name “interferon” reflects the fact that these cytokines were discovered based upon their ability to interfere with the

production of viral particles.

**TYPES OF INTERFERONS:**

- Based on the type of receptor through which they signal, human interferons have been classified into three major types :

S.no	TYPES	SOURCE
1.	Alpha-interferon	Monocytes and B-Lymphocytes
2.	Beta-interferon	Fibroblasts and epithelial cells
3.	Gama-interferon	T-cells



**Interferon type 1/ Alpha interferon:**

- All type 1 interferons bind to specific cell surface receptor complex known as the Alpha

interferon receptor that consists of IFNAR1 and IFNAR2 chains.

- In general, type 1 interferons are produced

when body recognizes a virus that has invaded it. They are produced by fibroblasts and monocytes.

- However the production of type 1 IFN- $\alpha$  is inhibited by another cytokine known as interleukin-10.
- Once released type 1 interferons binds to

specific receptors on target cells, which leads to expression of proteins that will prevent the virus from producing and replicating its RNA and DNA.

- Alpha interferon can be used to treat hepatitis B and C infections.

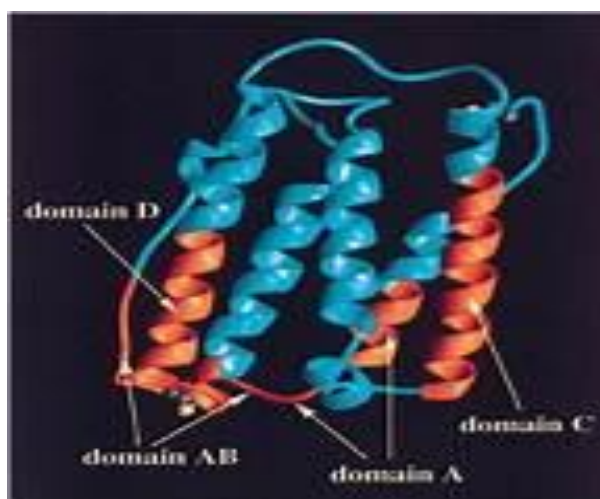


Fig:1. Alpha interferon

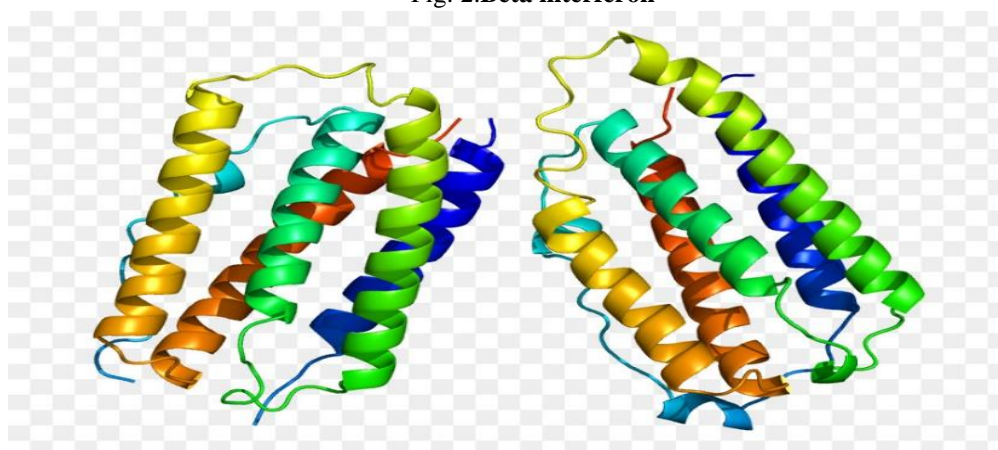
**Interferon type 2/ Beta interferon:**

- This is also known as immune interferon and is activated by interleukin-12.
- Beta interferon is also released by cytotoxic T

cells and alpha interferon are T helper cells

- They block the proliferation of the type-2 T helper cells
- Beta interferon binds to interferon GR which consists of IFNGR1 and IFNGR2 chains

Fig: 2. Beta interferon



**Interferon type 3/ Delta interferon:**

- Signal through a receptor complex consisting of IL10R2 and IFNLR1
- Discovered more recently than type 1 and type 2 interferon recent information demonstrates the importance

of type 3 interferon in some types of virus or fungal interactions

- In general type 1 and 2 interferon are responsible for regulating and activating the immuneresponse.
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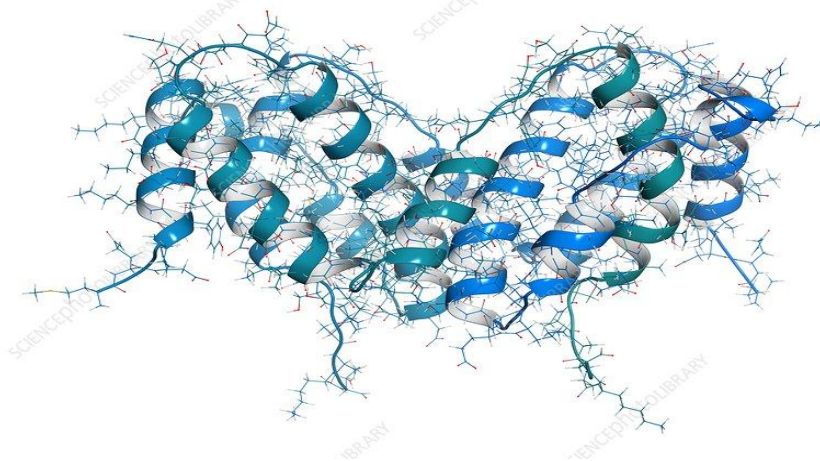


Fig:3 Gamma Interferon

**Applications of interferon:**

- Interferons could be ideal agents for combating viral diseases. They inhibit viral multiplication at such low concentration which is non-toxic to uninfected cells.
- One interferon can inhibit many viruses. But there are certain draw-backs which stand in their use.
- Firstly, for application in humans, interferon must be of human origin, though interferons produced in monkey kidney cell cultures are also effective in humans.
- Interferons are produced in very small quantities and it is difficult to get them in sufficient quantity in pure form for clinical application.
- Another factor is that interferons are effective only for short periods and as such can be used against only acute infections, like influenza.
- The difficulty of obtaining sufficient quantity of pure interferon for clinical use has been overcome by cloning the  $\alpha$ -IFN and  $\beta$ -IFN human genes in bacteria and yeast.
- By growing these transgenic organisms in mass culture, it has been possible to obtain clinically usable interferons in sufficiently

large quantities.

- Alpha-interferon has been marketed in 1984 under the trade name Intron A.
- In the following years, this biotechnologically produced interferon has been approved for clinical use against diseases like genital herpes caused by herpes-virus, hepatitis B and C.
- Beta-interferon has also been biotechnologically produced and marketed under the trade name betaseron. It has been used in a disease called multiplesclerosis.
- A recombinant g-interferon has been found effective against an inherited chronic disease, called granulomatous disease.

**II. CONCLUSION:**

It has been replaced in the treatment of viral infections by small molecules that inhibit specifically viral enzymes, and such molecules may have fewer side effects. Interferon is still an important molecule to study since it elucidates the workings of the immune system. It is an important “backup” in the event of a sudden outbreak of an unknown virus epidemic. Interferon later became a standard treatment for a number of types of human cancers, including hairy cell leukemia, Kaposi’s sarcoma in AIDS patients, chronic myelogenous leukemia (CML), and papilloma infections.

Interferon has also been used in many clinical trials with inconclusive results. A small group of asymptomatic HIV-infected individuals were treated with IFN- $\alpha$ 2b: 41 % had decreased viral titer, and no patients in the IFN- $\alpha$  group developed AIDS-defining opportunistic infection, compared with 5 patients in the placebo group. However, 35 % of the patients in the treatment group withdrew from the study because of the severity of the side effects. Other clinical trials have not been so successful.

#### REFERENCE:

- [1]. Pestka S (July 2007). "The interferons: 50 years after their discovery, there is much more to learn". *The Journal of Biological Chemistry*.
- [2]. W.E. Stewart II (2013-04-17). *The Interferon System*. Springer Science & Business Media.
- [3]. Nagano Y, Kojima Y (October 1954). "[Immunizing property of vaccinia virus inactivated by ultraviolet rays]".
- [4]. Ho M, Enders JF (March 1959). "An Inhibitor of Viral Activity Appearing in Infected Cell Cultures".
- [5]. Tan YH, Tischfield J, Ruddle FH (February 1973). "The linkage of genes for the human interferon-induced antiviral protein and indophenol oxidase-B traits to chromosome G-21". *The Journal of Experimental Medicine*.
- [6]. Tan YH (March 1976). "Chromosome 21 and the cell growth inhibitory effect of human interferon preparations".
- [7]. Meager A, Graves H, Burke DC, Swallow DM (August 1979). "Involvement of a gene on chromosome 9 in human fibroblast interferon production".
- [8]. Berthold W, Tan C, Tan YH (June 1978). "Chemical modifications of tyrosyl residue(s) and action of human-fibroblast interferon". *European Journal of Biochemistry*.
- [9]. Berthold W, Tan C, Tan YH (July 1978). "Purification and in vitro labeling of interferon from a human fibroblastoid cell line". *The Journal of Biological Chemistry*
- [10]. Tan YH, Barakat F, Berthold W, Smith-Johannsen H, Tan C (August 1979). "The isolation and amino acid/sugar composition of human fibroblastoid interferon". *The Journal of Biological Chemistry*.
- [11]. Zoon KC, Smith ME, Bridgen PJ, Anfinsen CB, Hunkapiller MW, Hood LE (February 1980). "Amino terminal sequence of the major component of human lymphoblastoid interferon".
- [12]. Boudinot P, Langevin C, Secombes CJ, Levraud JP (2016). *The Peculiar Characteristics of fish Type I "Interferon"*.
- [13]. Navratil V, de Chasse B, Meyniel L, Pradezynski F, André P, Rabourdin-Combe C, Lotteau V (July 2010). "System-level comparison of protein-protein interactions between viruses and the human type I interferon system network". *Journal of Proteome Research*.
- [14]. Matthews SJ, McCoy C. Peginterferon alfa-2a: a review of approved and investigational uses. *Clin Ther*.
- [15]. Bukowski RM, Tendler C, Cutler D, Rose E, Laughlin MM, Statkevich P. Treating cancer with PEG Intron: pharmacokinetic profile and dosing guidelines for an improved interferon-alpha-2b formulation. *Cancer*.
- [16]. Bose P, Verstovsek S. Updates in the management of polycythemia vera and essential thrombocythemia. *Ther Adv Hematol*.
- [17]. Lasfar A, Zloza A, Cohen-Solal KA. IFN-lambda therapy: current status and future perspectives.
- [18]. De Andrea M, Ravera R, Gioia D, Gariglio M, Landolfo S. The interferon system: an overview.
- [19]. Thomas H, Foster G, Platis D. Mechanisms of action of interferon and nucleoside analogues. *J Hepatol*.
- [20]. Hu X, Miller L, Richman S, Hitchman S, Glick G, Liu S, Zhu Y, Crossman M, Nestorov I, Gronke RS, Baker DP, Rogge M, Subramanyam M, Davar G. A novel PEGylated interferon beta-1a for multiple sclerosis: safety, pharmacology, and biology. *J Clin Pharmacol*.
- [21]. Sleijfer S, Bannink M, Van Gool AR, Kruit WH, Stoter G. Side effects of interferon-alpha therapy.
- [22]. Todd PA, Goa KL. Interferon gamma-1b. A review of its pharmacology and therapeutic potential in chronic granulomatous disease.
- [23]. Hauschild A, Gogas H, Tarhini A, Middleton MR, Testori A, Dréno B, Kirkwood JM. Practical guidelines for the management of interferon-alpha-2b side

- effects in patients receiving adjuvant treatment for melanoma: expert opinion. *Cancer*.
- [24]. Grassegger A, Höpfl R. Significance of the cytokine interferon gamma in clinical dermatology.
- [25]. Lugaresi A. Addressing the need for increased adherence to multiple sclerosis therapy.
- [26]. Isaacs, A., Lindenmann, J., Valentine, R. C. (1957). Virus interference. II. Some properties of interferon. *Proceedings of the Royal Society of London Series B, Containing papers of a Biological character Royal Society*
- [27]. Lindenmann J, Burke DC, Isaacs A. Studies on the production, mode of action and properties of interferon. *British Journal of Experimental Pathology*.
- [28]. Burke DC, Isaacs A. Further studies on interferon. *British Journal of Experimental Pathology*. 1958;39(1):78–84. [PMC free article]
- [29]. Burke DC. Early days with interferon. *Journal of Interferon Research*.
- [30]. Nagano Y, Kojima Y, Sawai Y. Immunity and interference in vaccinia; inhibition of skin infection by inactivated virus. *Comptes Rendus des Seances de la Societe de Biologie et de Ses Filiales*.
- [31]. Ozato K, Uno K, Iwakura Y. Another road to interferon: Yasuichi Nagano's journey. *Journal of interferon & cytokine research: the official journal of the International Society for Interferon and Cytokine Research*.
- [32]. Gresser I. Interferon: an unfolding tale. *Journal of Interferon & Cytokine Research: The Official Journal of the International Society for Interferon and Cytokine Research*.
- [33]. Orchansky P, Novick D, Fischer DG, Rubinstein M. Type I and Type II interferon receptors. *Journal of Interferon Research*.
- [34]. Novick D, Cohen B, Rubinstein M. The human interferon alpha/beta receptor: characterization and molecular cloning.
- [35]. Sheppard P, Kindsvogel W, Xu W, Henderson K, Schlutsmeyer S, Whitmore TE, Kuestner R, Garrigues U, Birks C, Roraback J, et al. IL-28, IL-29 and their class II cytokine receptor IL-28R. *Nature Immunology*.