

### Role Of Interleukin 17 A In *Entamoeba Histolytica* Patients Of AL Najaf Al Ashraf City

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#### Abstract

Amebiasis caused by *E. histolytica* varies greatly in presentation and can range from asymptomatic colonization to mild diarrhea to dysentery. *Entamoeba histolytica* is one of the most important and broadly prevalent protozoan parasites, causing significant public health and health problems in developing countries. This study comprised 150 blood sample from both gender (75 blood sample from patient bloody diarrhea with *E.histolytica* and 75 blood sample from patient with diarrhea but no diagnosis *E.histolytica* ) The result showed Serum level of IL-17 A in patient bloody diarrhea with *E.histolytica* and patient with diarrhea but no diagnosis *E.histolytica* and patient with diarrhea but no diagnosis *E.histolytica*.

#### Introduction

Amebiasis caused by *E. histolytica* varies greatly in presentation and can range from asymptomatic colonization to mild diarrhea to dysentery and finally to an invasive disease of the liver, lung, or brain (Verkerke *et al* .,2012).*Entamoeba histolytica* is one of the most important and broadly prevalent protozoan parasites, causing significant public health and health problems in developing countries (Fletcher *et al* .,2012).Severe infections inflame the mucosa of the large intestine causing amoebic dysentery. The parasites can also penetrate the intestinal wall and travel to organs such as the liver via blood stream causing extraintestinal amoebiasis(Al-Hadraawy *et al* .,2015). *E. histolytica* are often spread by contaminated food and or drinking water and possibly from person to person through fecal oral contact(Pham Duc *et al* .,2011). Symptoms may include bloody diarrhea, mild diarrhea ,tissue death, abdominal pain and peritonitis (Farrar et al .,2013).

Cell-mediated cytokines production (IFN- $\gamma$  and IL-17) plays a crucial role in protecting against amebiasis (AL-Majid and Hafez, 2021). During infection with *E.histolytica* .a lectin found on the surface of the parasite that recognizes the sugars galactose (Gal) and N-acetyl-d-galactosamine (GalNAc) found in the membranes of host cells ,is responsible for the attachment of trophozoites to intestinal epithelial cells (GalNAc) (Martínez-Ocaña *et al.*, 2020).

#### Materials and methods

#### **Patients Group**

Samples collection (75 Stool sample and 75 blood sample) were collected in this study and during the period from (1/10/2022) to (30/2/2023) from all ages of patient from both sex (Males and Females). Every patient was reported though a specifically prepared questionnaire which included name ,gender, age ,living , Previouse and address for every patient at (Al-Sader Medical City / AL-Haidarya general hospital / AL-Hakeem general hospital ) and all aged taked All of the

patients in this study filled out a direct questionnaire,

#### **Control Group**

which control group were 75 blood sample from Patient with diarrhea but not diagnosis *E.histolytica*. The control group was used only for comparing parameter. The control samples were approximately similar with the samples patients in terms of number, ratio of age, in addition to the

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place of living also country side and city. Also, ask a special question sheet for the control samples. Where blood was drawn from a vein to measure immunological parameters (IL-17A).

### Samples Collection (stool and blood)

#### **Collecting Stool Samples**

Stool specimens were collected in a sterile, dry Container and transferred to the parasitology department for direct examination macroscopically and microscopically.

#### **Blood Samples Collection**

Patients who were diagnosed with having intestinal parasites had venous blood samples taken and Patient with diarrhea but without parasitic infection With a 3-ml medical syringe, the sample was transferred to clean plastic tubes and let to sit for a set amount of time before being centrifuged (3000 rpm ) takes 20 minutes to extract serum from blood and put in eppendroff and then placed in the freezer at -20 degrees Celsius to freeze within 4 hours of collection for immunological tests by ELISA.

### Test Interleukin 17A (IL-17A) ELISA Kit Standard Curve of Interleukin 17A

Measurement method: End point method Calculation method:Non-linear regression Fit the equation:y = A[i] \* x + B[i], correlation coefficient =0.553

Figure 3.4: Standard Curve of Interleukin-17A

#### Result

Table (1): sociodemographic characteristics of respondents for both groups

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\*t -test, significant at 0.05.

\*\* Mann-Whitney

#### Table (2): T-test comparison between study groups according to the IL7 A

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### Table (3): Regression Coefficients for the relationship between I.L. 17A and the previous infection for both groups

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a.Dependent Variable: TGF beta

b.Predictor

c.\*Significant at level 0.05.

#### Discussion

The current study result in table(1) shows that most of the respondents (29.3%) were in the, age group (27-36 years) for the study cases group, this agree with result mentioned in the studies that were recently published, as it proved that Amoebiasis most commonly affects young to middle-aged adults (Kumanan *et al.*, 2020; Chou and Austin, 2020; Ngobeni *et al.*, 2022).

The effect of spreading of *E.histolytica* in young to middle-aged adults occurs for travellers to countries with poor sanitation (developing countries) (Chou and Austin, 2020).

For the study control group, if also be found the same result in the same condition. At the same time, there isn't a statistically significant difference between groups (0.051); this design confirms this result.

As for gender, the males in the study group (cases group) were more than females (58.7%); however, in the study group (control group), the females (53.3%) were more than males. Also, there isn't a statistically significant difference between groups (0.14) this result was confirmed by Saafa and Al-

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Kaeebi, (2017) who reported that 58.3% of males and 41.6% of females in Al-Qadisiyah provinc were infected.

The result mention by Mohammed *et al.*, (2022) in Sulaymaniyah Governorate , and they also mentioned that , that males recorded a higher infection rate was (17.7%), while the female was (14.3%), (p > 0.05) and this result was not a statistically significant difference thus this distribution was compatible with our distribution of respondents according gender.

The differences in infection rates between males and females might be caused by the different according social behavior and working time t, between the two gender, as males normally are the working sex, in the society which made them in contact with the environment .(Al-Hilfi *et al.*, 2021).

According to the living area, the respondents from urban were more than the rural area for both groups. The groups do, however, differ significantly from one another (0.026). For the previous infected history, this result shows that the fact more respondents in the cases group were negative (70.7%), and there is a the existence of a statistically significant distinction between groups ( 0.001).

Mohammed *et al.*, (2022) mentioned that Prevalence in rural (20.3%), in ,urban (13.8%), (p < 0.05). and this un compatible with our distribution of respondents according of residence .

Table (2) show result of current study IL-17A concentration level was increased and overexpressed in patients with E.histolytica in compared, with the profile observed in the control group (negative group) (Gonzalez Rivas *et al.*, 2018). These results contradict what was reached in our current study, the level of IL-17A concentration in amoeba patients showed our results (Mean $\pm$  Std.Deviation 22.31646  $\pm$  11.853930) is lower than, that of the control group (Mean $\pm$  Std.Deviation 31.81830  $\pm$  38.777407).

Our findings supports the data of Hikmah, (2022) regarding , the effects of IL-17A, This cytokines is important in the control of *E. histolytica* infection.

Also our results of the present study ,don't agree with Nhidza *et al.*, (2020), where mentioned that in the group of patients with E.histolytica infection, IL17A and TNF $\alpha$ , two cytokines, both showed elevated levels in their concentration, in comparison with control group and The immune response was shown to have a proinflammatory profile nature by this.

The result of this table (3) shows ,that there is a regression relationship a weak relationship between IL-17A and the previous infection (0.22), and 12.5% of cases can predict them using IL-17A for cases. However, there is a weak regression relationship between IL-17A and the previous infection (0.04), and 8.9% of the control group can predict them using IL-17A interleukin.

The primary effector function of IL-17 is neutrophil accumulation and IL-17, although its primary effector function is to recruit neutrophils and boost production proinflammatory cytokines and antimicrobial peptides (Valeri and Raffatellu, 2016).

Studies of amoebiasis infections show that Th17 cells mediate host defense by limiting parasite invasion and multiplication. Patients with infections had higher than normal levels of IL-17, which was linked to more effective neutrophil and macrophage killing of the parasite (Samanta, 2023).

Despite IL-17A has protective effect against E.histolytica infection, There is clear evidence that IL-17 has a The harmful effect, as IL-17 neutralization provides some protection against the deadly disease, by balancing the heightened inflammation caused by IL-17 with the co-production of IL-10 and IFN- $\gamma$ . Together, these studies contradict previously published studies and add to the growing body of evidence supporting IL-17's pathological role in parasite infections. Therefore, it is still unclear whether IL-17 plays a protective or pathologic role during parasitic infection (Deloer *et al.*, 2017). **References** 

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