Review Article Human immune system during sleep

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Abstract: A joint function of tissues, organs and cells for the protection of body develops immune system. The human immune response against various infections during sleep, its mechanism, neuroimmune interactions, immunoregulatory effect of sleep along with sleep deprivation and role of cytokines in sleep deprivation were addressed. It is revealed that human immune system and sleep both are associated and influenced by each other. Sleep deprivation makes a living body susceptible to many infectious agents. In the result, immune system of human body is altered by releasing immunomodulators in the response of infections as reported by various researchers. Basic reasons and mechanisms of most of the poor sleep networks and release of proinflammatory modulators are still uncertain. The current situation requires improved sleep habits to make immune system efficient for a healthy life.

Keywords: Sleep, innate immunity, cytokines, infectious agents, circadian rhythms

Introduction

Sleep is a physiological process that shows recuperative and regulatory characteristics [1, 2]. Immune system response is regulated by three physiological events such as wakefulness, non-rapid eye movement that is NREM or slow sleep, and rapid eye movement that is REM sleep [3]. Various pathogens constantly attack living organisms, and the immune system which is composed of complicated networks of physical and biochemical components keep the organism existent [4].

In the 1970's, the association between sleep and the immune system was first recognized when muramyl peptide acquired from bacterial peptidoglycan or Factor S from human urine was isolated chemically as sleep inducing factor [5]. Immunoregulatory cytokine, i.e. interleukin (IL)-1, a key player in sleep regulation has levels associated with sleep propensity in the brain induced by muramyl dipeptide and Factor S related peptidoglycans [6]. So, it is expedient that sleep regulated cytokines effect the immune system [7].

In a similar manner, inflammatory mediators increase due to constant sleep loss that alter CNS processes and behavior during immune

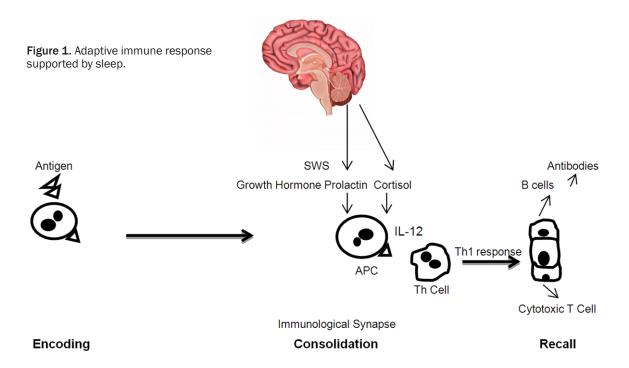
feedback to infection, including sleep [8]. Thus, during the intense phase response to infection or in chronic inflammation regulatory molecules cytokines are shared by sleep and the immune system involve in both physiological and disturbed sleep phase [9]. In my present study, I will discuss the human immune response against various infections during sleep, immunoregulatory effect of sleep along with sleep deprivation and role of cytokines in sleep regulation.

Mechanism of adaptive immune response supported by sleep

Fragments of antigen are presented to T helper (Th) cells along with the two types of cells which are involved in the formation of immunological synapse by APC that are antigen presenting cells that may pick and process invading antigen. Th1 response is induced by natural release of interleukin (IL)-12 APC and the function of antigen specific cytotoxic T cells along the production of antibodies by B-cells is supported by it [10] as shown in **Figure 1**.

Neuroimmune interactions

Particular anatomical and physiological conditions are based upon neuroimmune interac-



tions whereas chemokines and modulators, cytokines and neurotransmitters, hormones are intercellular signals that may be shared by immune cells, neurons and glia cells [11, 12]. In both directions, blood-brain barrier can be crossed by some of the shared signals [13, 14]. In cerebrospinal fluid, nerve endings and at meningeal borders immune cells come in their close contact and flow in all directions throughout the body [15, 16].

Somehow, sensory nerve fibers, sympathetic and peptidergic may also create connections between primary lymphatic tissues that are bone marrow and thymus and secondary lymphatic tissues such as lymph nodes and spleen [17, 18]. Immune functions not only regulated by autonomous and endocrine nervous system through hormones and neural innervations but also through lymph flow, blood pressure and blood flow [18, 19], oxygen, fatty acids and via supply of substrates like glucose [20-22].

Poor sleep and health

Downturn in activity and vigilance is not only indicated by sleep deprivation but it is an integral process that restrains many physiological functions [23, 24].

Our capacity to remain healthy is badly effected by loss of sleep and sense of comfort, physiological framework accompanied by health is badly influenced by poor sleep [25]. Our demand for sleep is also increased in most of the ailments as observed [26]. Perceptivity to infectious diseases and deterioration of systemic circulation of leukocytes is increased by petty alterations due to lack of sleep [27]. However, there is a huge complexity in both the immune system and sleep [28, 29].

Infections, infectious diseases and immune system response

CNS is tainted by infectious diseases related to sleep disorders under the immune response against the infection whereas other systems like respiratory and endocrine systems are also affected by sleep disruption [30].

Virus as infectious agent

Immunodeficiency virus that is HIV and influenza are caused by viruses [31]. Despite of declining body temperature, rapid eye movement sleep (REM), is decreased and non-rapid eye movement sleep (NREM) is increased by influenza virus leading towards fever, fatigue and sleep disturbances [32]. Thus, temperature such as fever is increased in response to an infection to kill the cells causing the sickness as defense tool of body [33].

Bacteria as infectious agent

The whole functioning of the body is extremely altered in response to bacteria that cause diseases [34]. In humans waking and REM sleep along with greater non-REM sleep is declined by *Salmonella abortus* endotoxin considerably [35]. Thus, waking and sleep discontinuation with daytime drowsiness is enhanced by reducing the total duration of NREM by *Salmonella abortus* endotoxin [36].

Parasite as infectious agent

Sleep patterns and transformations of some behaviors are changed to promote parasitic infection and complete their life cycle [37]. Transformation from wakefulness to REM sleep is baptized as sleeping sickness by Human African Trypanosomiasis HAT that effects sleep framework and nervous system to cause circadian rhythm dysfunction [38]. Whereas a long time sleep leads to the less extent of parasitic infection and the sleep is developed to secure humans from parasitic infections [39].

Sleep deprivation and immunoregulatory effect of sleep

In case of severe and persistent loss of sleep such as insomnia, alcoholism, stress and during the period of aging, balance of cytokine is shifted from type 1 to type 2 leading towards type 2 function [40]. In all these groups proinflammatory cytokines are enhanced constantly [41, 42].

Ascetic alcoholics and people with less deprivation of sleep have high levels of TNF- α and IL-6 whereas tumor necrosis factor cytokine (TNF- α) levels are compared to control in sleep narcoleptics and apneics [41]. T-helper (CD3+, CD4+), T-cytotoxic (CD8+) cell numbers and decreased natural killer (NK) cell activity is reduced in insomniacs along with elevated levels of inflammatory cytokines [43]. Whereas daily framework of cellular and immune events cause to decrease overall immune functions in normal adults by experimentally induced sleep loss [44-46].

There is an inhibitory effect on hypothalamic pituitary adrenal HPA axis due to deep sleep in comparison to the HPA axis activation or organization of glucocorticoids which leads to arousal and sleeplessness [47]. So, 24-hours increment in corticotropin and cortisol secretion, most frequent disorder insomnia along with a CNS hyperarousal disorder is caused [48].

Glucocorticoid and catecholamine plasma levels are increased for HPA axis activation clearly associated with lack of sleep due to removal of parasympathetic constituent of NREM sleep [49]. So, in the morning after a night of sleep loss, fluctuated level of activation and normal level of cortisol becomes noticeable [50].

Role of cytokines in sleep regulation

A benchmark to be accomplished for a supposed sleep regulatory molecule is inducing physiological sleep along with its receptors in the living entity that fluctuate with the circadian rhythm or inactivation of the substance or its receptor cause to reduce voluntary sleep [6].

This criterion is fulfilled by cytokines as immune mediators as they are versatile proteins and they are involved in different physiological and pathological mechanisms in the CNS along with immune response [51, 52].

Sleep proneness is associated with IL-1 levels in the brain, being highest at sleep onset, along cytokines such as IL-2, IL-6, IL-8, IL-15 and IL-18 are reported to increase NREM sleep whereas some proinflammatory cytokines manage physiologic body temperature and inclination [53]. Best established cytokines are IL-4 and IL-10 and cytokines that cause discontinuity in NREM sleep are less observed and the production of IL-1 and TNF- α is restricted by inhibiting nuclear factor kappa-light-chain-enhancer of activated B cells (NF κ B) activation by the activity of these cytokines [6].

Conclusion and recommendations

Communication network between the neuroendocrine and immune systems allows the body to maintain homeostasis, especially when it has to respond to a stimulus, such as an infection. The metabolic functions of the body to eradicate the pathogen are transformed during an infection. However, the brain mechanisms of sleep and the immune response are not completely figured out. Generally, the effects of immune modulators cytokines, the sleep mechanisms, the resulting changes in the sleep-wake cycle and the effect of neurotransmitters in regulating sleep during an immune response are the processes which are associated. Subsequent studies reported that sleep deprivation decreases lymphocyte blastogenesis, NK cell activity and upregulates IL-1 and IL-2.

Furthermore, extensive surveys, search of literature and research on sleep patterns and their alterness during illness including novel approach to the mechanisms of cytokines, their receptors and role in immune system of human body is required.

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References

- Benington JH and Heller HC. Restoration of brain energy metabolism as the function of sleep. Prog Neurobiol 1995; 45: 347-360.
- [2] Mackiewicz M, Shockley KR, Romer MA, Galante RJ, Zimmerman JE, Naidoo N, Baldwin DA, Jensen ST, Churchill GA, Pack AI. Macromolecule biosynthesis: a key function of sleep. Physiol Genomics 2007; 31: 441-457.
- [3] Cardinali DP, García AP, Cano P, Esquifino AI. Melatonin role in experimental arthritis. Curr Drug Targets Immune Endocr Metabol Disord 2004; 4: 1-10.
- [4] Imeri L, Opp MR. How (and why) the immune system makes us sleep. Nat Rev Neurosci 2009; 10: 199-210.
- [5] Krueger JM, Karnovsky ML, Martin SA, Pappenheimer JR, Walter J, Biemann K. Peptidoglycans as promoters of slow-wave sleep. II. Somnogenic and pyrogenic activities of some naturally occurring muramyl peptides; correlations with mass spectrometric structure determination. J Biol Chem 1984; 259: 12659-62.
- [6] Krueger JM. The role of cytokines in sleep regulation. Curr Pharm Des 2008; 14: 3408-16.
- [7] Psndi-Perumal SR, Cardinali DP and Chrousos GP. Neuroimmunology of Sleep. New York, Springer Science+Business Media, LLC 2007.
- [8] Dantzer RO, Connor JC, Freund GG, Johnson RW, Kelley KW. From inflammation to sickness and depression: when the immune system subjugates the brain. Nature Rev Neurosci 2008; 9: 46-56.
- [9] Cardinali DP and Esquifino AL. Neuroimmunoendocrinology of the cervical autonomic nervous system. Biomed Rev 1998; 9: 47-59.

- [10] Lange T and Born J. T cell and antigen presenting cell activity during sleep. In: BrainImmune. Accessed 31 Oct 2011.
- [11] Besedovsky HO, del Rey A. Immune-neuro-endocrine interactions: facts and hypotheses. Endocr Rev 1996; 17: 64-102.
- [12] Ransohoff RM. Chemokines and chemokine receptors: standing at the crossroads of immunobiology and neurobiology. Immunity 2009; 31: 711-721.
- [13] Capuron L, Miller AH. Immune system to brain signaling: neuropsychopharmacological implications. Pharmacol Ther 2011; 130: 226-238.
- [14] Dickstein JB, Moldofsky H, Lue FA and Hay JB. Intracerebroventricular injection of TNF-alpha promotes sleep and is recovered in cervical lymph. Am J Physiol 1999; 276: 1018-1022.
- [15] Ron-Harel N, Cardon M and Schwartz M. Brain homeostasis is maintained by "danger" signals stimulating a supportive immune response within the brain's borders. Brain Behav Immun 2011; 25: 1036-1043.
- [16] Schwartz M and Kipnis J. A conceptual revolution in the relationships between the brain and immunity. Brain Behav Immun 2011; 25: 817-819.
- [17] Nance DM and Sanders VM. Autonomic innervation and regulation of the immune system (1987-2007). Brain Behav Immun 2007; 21: 736-745.
- [18] Ottaway CA, Husband AJ. Central nervous system influences on lymphocyte migration. Brain Behav Immun 1992; 6: 97-116.
- [19] Maestroni GJ. Neural regulation of dendritic cell function. Adv Exp Med Biol 2001; 495: 111-119.
- [20] Besedovsky HO and del Rey A. Central and peripheral cytokines mediate immune-brain connectivity. Neurochem Res 2001; 36: 1-6.
- [21] Fox CJ, Hammerman PS and Thompson CB. Fuel feeds function: energy metabolism and the T-cell response. Nat Rev Immunol 2005; 5: 844-852.
- [22] Straub RH, Cutolo M, Buttgereit F and Pongratz G. Energy regulation and neuroendocrine-immune control in chronic inflammatory diseases. J Intern Med 2010; 267: 543-560.
- [23] Krueger MH, Roth T and Demet WC. Principles and Practice of Sleep Medicine, Elservier Saunders, Philadelphia, Pa, USA, 4th edition, 2005.
- [24] Siegel JM. Clues to the functions of mammalian sleep. Nature 2005; 437: 1264-1271.
- [25] Krueger JM and Fang J. Host defense. In: Kryger MH, Roth T, Dement WC. eds. Principles and Practice of Sleep Medicine 2000; 3: 255-265.
- [26] Bryant PA, Trinder J and Curtis N. Sick and tired: does sleep have a vital role in the im-

mune system? Nat Rev Immunol 2004; 4: 457-467.

- [27] Everson CA. Clinical assessment of blood leukocytes, serum cytokines, and serum immunoglobulins as responses to sleep deprivation in laboratory rats. Am J Physiol Regul Integr Comp Physiol 2005; 289: 1054-1063.
- [28] Majde JA and Krueger JM. Links between the innate immune system and sleep. J Allergy Clin Immunol 2005; 116: 1188-1198.
- [29] Ricardo JS, Cartner L, Oliver SJ, Laing SJ, Walters R, Bilzon JL and Walsh NP. No effect of a 30-h period of sleep deprivation on leukocyte trafficking, neutrophil degranulation and saliva IgA responses to exercise. Eur J Appl Physiol 2009; 105: 499-504.
- [30] Ibarra-Coronado EG, Pantaleón-Martínez AM, Velazquéz-Moctezuma J, Prospéro-García O, Méndez-Díaz M, Pérez-Tapia M, Pavón L, Morales-Montor J. The bidirectional relationship between sleep and immunity against infections. J Immunol Res 2015; 2015: 678164.
- [31] Fang J, Tooley D, Gatewood C, Renegar KB, Majde JA and Krueger JM. Differential effects of total and upper airway influenza viral infection on sleep in mice. Sleep 1996; 19: 337-342.
- [32] Toth LA and Williams RW. A quantitative genetic analysis of slow-wave sleep and rapid-eye movement sleep in CXB recombinant inbred mice. Behavior Genetics 1999; 29: 329-337.
- [33] Edwin C and Kornelia D. Sleep and the immune system. Association of Polysomnographic Technologists 2006.
- [34] Krueger JM, Pappenheimer JR and Karnovsky ML. Sleeppromoting effects of muramyl peptides. Proc Natl Acad Sci U S A 1982; 79: 6102-6106.
- [35] Pollmächer T, Schreiber W, Gudewill S, Vedder H, Fassbender K, Wiedemann K, Trachsel L, Galanos C, Holsboer F. Influence of endotoxin on nocturnal sleep in humans. Am J Physiol 1993; 264: R1077-1083.
- [36] Toth LA and Kreuger JM. Alteration of sleep in rabbits by Staphylococcus aureus infection. Infection and Immunity 1988; 56: 1785-1791.
- [37] Donovick PJ and Burright RG. The consequences of parasitic infection for the behavior of the mammalian host. Environ Health Perspect 1987; 73: 247-250.
- [38] Buguet A, Bisser S, Josenando T, Chapotot F and Cespuglio R. Sleep structure: a new diagnostic tool for stage determination in sleeping sickness. Acta Tropica 2005; 93: 107-117.
- [39] Preston BT, Capellini I, McNamara P, Barton RA and Nunn CL. Parasite resistance and the adaptive significance of sleep. BMC Evolutionary Biology 2009; 9: 7.

- [40] Opp MR. Sleep and psychoneuroimmunology. Immunol Allergy Clin North Am 2009; 29: 295-307.
- [41] Irwin M, Clark C, Kennedy B, Christian Gillin J, Ziegler M. Nocturnal catecholamines and immune function in insomniacs, depressed patients, and control subjects. Brain Behav Immun 2003; 17: 365-72.
- [42] Vgontzas AN, Zoumakis E, Bixler EO, Lin HM, Follett H, Kales A, Chrousos GP. Adverse effects of modest sleep restriction on sleepiness, performance, and inflammatory cytokines. J Clin Endocrinol Metab 2004; 89: 2119-26.
- [43] Savard J, Laroche L, Simard S, Ivers H, Morin CM. Chronic insomnia and immune functioning. Psychosom Med 2003; 65: 211-21.
- [44] Dinges DF, Douglas SD, Hamarman S, Zaugg L, Kapoor S. Sleep deprivation and human immune function. Adv Neuroimmunol 1995; 5: 97-110.
- [45] Heiser P, Dickhaus B, Schreiber W, Clement HW, Hasse C, Hennig J, Remschmidt H, Krieg JC, Wesemann W, Opper C. White blood cells and cortisol after sleep deprivation and recovery sleep in humans. Eur Arch Psychiatry Clin Neurosci 2000; 250: 16-23.
- [46] Redwine L, Hauger RL, Gillin JC, Irwin M. Effects of sleep and sleep deprivation on interleukin-6, growth hormone, cortisol, and melatonin levels in humans. J Clin Endocrinol Metab 2000; 85: 3597-603.
- [47] Chrousos GP. Stress and disorders of the stress system. Nat Rev Endocrinol 2009; 5: 374-81.
- [48] McEwen BS. Sleep deprivation as a neurobiologic and physiologic stressor: allostasis and allostatic load. Metabolism 2006; 55: 20-23.
- [49] Leproult R, Copinschi G, Buxton O, Van Cauter E. Sleep loss results in an elevation of cortisol levels the next evening. Sleep 1997; 20: 865-70.
- [50] Meerlo P, Sgoifo A and Suchecki D. Restricted and disrupted sleep: effects on autonomic function, neuroendocrine stress systems and stress responsivity. Sleep Med Rev 2008; 12: 197-210.
- [51] Besedovsky HO and Del RA. Immune-neuroendocrine interactions: facts and hypotheses. Endocr Rev 1996; 17: 64-102.
- [52] Wu YW, Croen LA, Torres AR, Van De Water J, Grether JK, Hsu NN. Interleukin-6 genotype and risk for cerebral palsy in term and nearterm infants. Ann Neurol 2009; 66: 663-70.
- [53] Szelenyi J. Cytokines and the central nervous system. Brain Res Bull 2001; 54: 329-38.