

## Costimulatory molecules and visceral leishmaniasis

### *Moléculas coestimulatórias e Leishmaniose visceral*

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#### Palavras-chave

Costimulatory molecules  
Immune response  
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Visceral Leishmaniasis (VL) is an endemic disease caused by the protozoan *Leishmania infantum*, in South America. Most cases of VL have asymptomatic presentation with the outcome related to genetic factors and the host immune response, where a predominance of Th1 response profile and its cytokines provides resistance to the parasite. Costimulatory molecules are directly involved with the outcome of the immune response and several costimulatory pathways have been characterized, some involved with activation, while others with its inhibition. The parasites like *Leishmania* could manipulate the expression of some costimulatory molecules favoring an immune response profile suitable to ensure its permanence in the host, favoring the development of active forms of the disease. Some experimental models already been used to prove that the manipulation of costimulatory pathways can be used by some pathogens, but in the visceral leishmaniasis remain unclear. It was reviewed the role of costimulatory molecules CD28, CTLA-4, OX-40 and ICOS and how the manipulation of some pathways can be used by the *Leishmania* to promote its persistence.

#### Keywords

Moléculas coestimulatórias  
Resposta imune  
Infecção  
Leishmaniose visceral

A *Leishmaniose Visceral (LV)* é uma doença endêmica causada pelo protozoário *Leishmania infantum*, na América do Sul. A maioria dos casos de LV tem apresentação assintomática com desfecho relacionado a fatores genéticos e à resposta imune do hospedeiro, onde o predomínio do perfil de resposta Th1 e suas citocinas proporciona resistência ao parasita. Moléculas coestimulatórias estão diretamente envolvidas com o resultado da resposta imune e várias vias coestimulatórias foram caracterizadas, algumas envolvidas com a ativação, enquanto outras com sua inibição. Os parasitas, como a *Leishmania*, poderiam manipular a expressão de algumas moléculas coestimulatórias favorecendo um perfil de resposta imune adequado para garantir sua permanência no hospedeiro, favorecendo o desenvolvimento de formas ativas da doença. Alguns modelos experimentais já foram utilizados para comprovar que a manipulação das vias coestimulatórias pode ser utilizada por alguns patógenos, mas na leishmaniose visceral permanecem obscuros. Foi revisa o papel das moléculas coestimulatórias CD28, CTLA-4, OX-40 e ICOS e como a manipulação de algumas vias pode ser utilizada pela *Leishmania* para promover sua persistência.

## INTRODUCTION

Visceral leishmaniasis (VL) is an endemic disease in several countries around the world, caused by the protozoan of the genus *Leishmania*, especially *L. donovani* and *L. infantum* (VAN GRIENSVEN; DIRO, 2019), transmitted by female sand flies during the blood meal (SELVAPANDIYAN et al., 2019). According to data from the World Health Organization (WHO), more than 90% of global cases of VL have been reported in eight countries: Brazil, Eritrea, Ethiopia, India, Kenya, Somalia, South Sudan and Sudan (WHO-WORLD HEALTH ORGANIZATION, 2021).

Most cases of VL have asymptomatic presentation, but the active disease can lead to death in a portion of individuals, even with treatment (RODRIGUES-NETO et al., 2018). Typical manifestations include, weight loss, chronic fever, and hepatosplenomegaly, with pancytopenia on blood examination. The effective immune response against the

parasite is associated with macrophage activation and predominance of Th1 cell profile (VAN GRIENSVEN; DIRO, 2019), while susceptibility is associated with the predominance of the Th2 profile and its cytokines (KUMAR; BHATIA; PAI, 2017). The signalling induced by antigenic MHC/peptide interaction with T cell receptor is a prerequisite to T cell activation, but insufficient to initiate T cell responses by itself. Further signalling by costimulatory molecules is crucial to optimal priming, expansion and differentiation of T cells. Thus, during the immune response, the expression of certain costimulatory molecules, and the cytokines induced by them, have a decisive role in the status of the immune response that the individual will present, therefore, it has a central action in the susceptibility or resistance to certain pathogens (BEYERSDORF; KERKAU, 2020; OYEWOLE-SAID et al., 2020; PANNETON et al., 2019).

Conventional treatment for VL is associated with the use of anti-*Leishmania* drugs, which have variable effectiveness, depending on the individual's immune response and also on

the geographic region in the world where VL was acquired (SELVAPANDIYAN et al., 2019), thus, new therapeutic approaches, such as those that block costimulatory molecules with monoclonal antibodies, for example, are necessary to make treatment more effective and with fewer side effects.

It was reviewed here the most recent knowledge about the role of the costimulatory molecules CD28, CTLA-4, OX-40 and ICOS of T lymphocytes in the immune response. The action on these pathways is a possible form of resistance of parasites, such as *Leishmania*, to ensure the success in infections.

## IMMUNE RESPONSE

Protective immune response against *Leishmania* infection is mediated by cellular immunity, Th1 response correlates with resistance, while Th2 is associated with susceptibility to infection (SRIVASTAVA et al., 2012). The immune response to *Leishmania* can be assessed using experimental animal models that may represent the best way to analyze the infection (MURRAY, 2020; SAINI; RAI, 2020). In these experimental models, the protective immune response observed in the liver includes granuloma formation, which contributes to the parasite elimination. It is well documented that cytokines such as interferon gamma (IFN- $\gamma$ ), interleukin 12 (IL-12) and low levels of tumor necrosis factor (TNF) contribute to parasite control in granulomas (BACELLAR et al., 1996; ENGWERDA et al., 2004). In the spleen, however, active infection is associated with excess of TNF and granuloma formation is clearly decreased or absent. Another major cytokine is interleukin 10 (IL-10) which plays a central role in susceptibility to *Leishmania* infection in both liver and spleen (MESQUITA et al., 2018; MOULIK et al., 2021).

In a recent past, IL-10 was considered a cytokine strictly related to Th2 profile, showing implication in a large number of pathologies (ANURADHA et al., 2014; HUANG et al., 2014; KUMAR et al., 2013). Nowadays, it is no longer considered an exclusively Th2 cytokine, playing an important role in modulating both Th1 and Th2 immune responses. It has well documented that IL-10 is induced by high levels of TNF- $\alpha$  (ATO et al., 2002), having an prominent role in controlling TNF- $\alpha$ -induced tissue damage, while promoting parasitic persistence by inhibiting macrophages activation (BELKAID et al., 2001). IL-10 is a regulatory cytokine presumed to be induced as part of a homeostatic network to protect tissues from collateral damage caused by excessive inflammation (KUMAR; NYLÉN, 2012; SUKHAATAR et al., 2020).

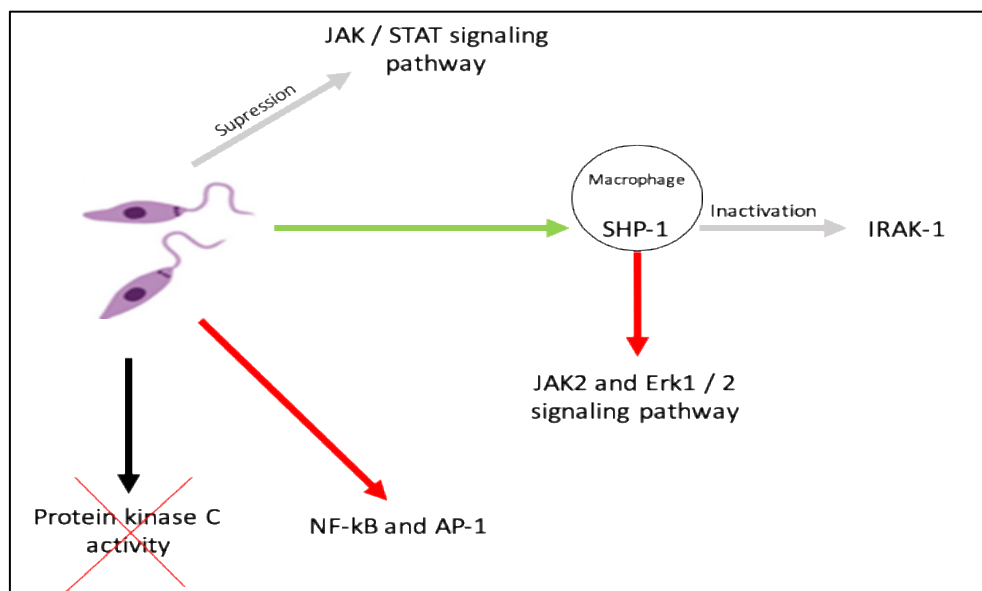
Visceral leishmaniasis (VL) was classically associated with a predominance of Th2 immune response and its preferential

expansion. Although VL was associated with a Th2 profile, with elevation of cytokines such as IL-4 and IL-13 (NYLÉN; SACKS, 2007; SUNDAR et al., 1997), many studies suggest that this inclination toward the Th2 profile in human VL is unclear, ie there is no clear dichotomy observed in murine models (KHADEM; UZONNA, 2014). Typically, VL is associated with an increased production of multiple cytokines and chemokines such as IL-10, IL-4, IFN- $\gamma$ , TNF- $\alpha$  and IL-12 (COSTA et al., 2012; DAYAKAR et al., 2019; SINGH et al., 2012). Although it may colonize other cells such as neutrophils and dendritic cells (OUALHA et al., 2019; LIU; UZONNA, 2012), the main target of *Leishmania* are the macrophages. Even if these cells have effective mechanisms to destroy intracellular pathogens through toxic metabolites such as nitric oxide and reactive oxygen species, they cannot eliminate the parasite that evades the host immune response by attenuating the proinflammatory signaling pathway (PODINOVSKAIA; DESCOTEAUX, 2015).

Although IL-10-related pathways may explain relevant aspects of parasitic persistence that promotes VL development, other factors include changes in macrophage signaling pathways (SAUNDERS; MCCONVILLE, 2020; SHIO et al., 2012). It has been suggested that *Leishmania* may activate macrophage protein SHP-1 (Src homology region 2 domain-containing phosphatase-1), which inhibits activation of the signaling pathway of JAK2 (Janus kinase 2) and Erk1 / 2 (extracellular signal-regulated kinases 1 and 2) (Figure 1) (ZHOU et al., 2014).

**Figure 1: Changes in macrophage signaling pathways may explain relevant aspects of parasitic persistence that promotes VL development.** Leishmania may activate macrophage protein SHP-1, which inhibits activation of the signaling pathway of JAK2 and Erk1 / 2, and SHP-1 also interferes with Toll-like (TLRs) macrophage receptor signaling, inactivating IRAK-1.

Moreover, other parasite-mediated changes include blockade of protein kinase C activity, inhibition of NF- $\kappa$ B and transcriptional functions of AP-1 and suppression of JAK / STAT signaling pathway. Green arrow – activation; Red arrows – inhibition; SHP-1 (Src homology region 2 domain-containing phosphatase-1); JAK2 (Janus kinase 2); Erk1 / 2 (extracellular signal-regulated kinases 1 and 2); IRAK-1 (interleukin 1 receptor-associated kinase 1); NF- $\kappa$ B (factor nuclear kappa B); AP-1 (activator protein 1); JAK / STAT (The Janus kinase/signal transducers and activators of transcription).



SHP-1 also interferes with Toll-like (TLRs) macrophage receptor signaling, directly inactivating IRAK-1 (interleukin 1 receptor-associated kinase 1) (ABU-DAYYEH et al., 2008; MARTINY et al., 1999). Other parasite-mediated changes include blockade of protein kinase C activity (DESCOTEAUX A; MATLASHEWSKI G; TURCO SJ, 1992; MCNEELY; TURCO, 1987), inhibition of NF- $\kappa$ B (factor nuclear kappa B) and transcriptional functions of AP-1 (activator protein 1) (CONTRERAS et al., 2010; GHOSH et al., 2002) and suppression of JAK / STAT signaling pathway (The Janus kinase/signal transducers and activators of transcription) (Figure 1) (BLANCHETTE et al., 1999; FORGET; GREGORY; OLIVIER, 2005).

Many of these manipulations are mediated by molecules present on the surface of the parasite, such as LPGs (lipophosphoglycans) and gp63 (PARASHAR; MUKHOPADHYAY, 2017; VIEIRA et al., 2019), resulting in decreased inflammatory cytokines and reactive nitrogen and oxygen intermediates, thus, the parasite can survive and grow inside macrophages.

The clinical evolution of *L. infantum* infection is influenced by the development of the host immune response. Classically, active systemic infection with parasite expansion to the spleen, liver, lymph nodes, bone marrow, and other organs is accompanied by high levels of anti-Leishmania antibodies, decreased interferon- $\gamma$  (CARVALHO et al., 1985; TRINCHIERI,

1997) and IL-12 production and IL-10 elevation (BACELLAR et al., 1996; SAHA et al., 2007).

The increased production of anti-Leishmania antibodies observed during active disease has been associated with an impaired immune response, since the antibodies produced opsonize the pathogens that, when phagocytized by macrophages, can stimulate the production of IL-10 and TGF- $\beta$ , in these cells, leading to decreased microbicidal capacity, facilitating the persistence of the parasite (KHADEM; UZONNA, 2014).

During VL, a remarkable immunological feature is the inability of peripheral blood mononuclear cells (PBMCs) to mount a curative immune response (HO et al., 1983; SACKS et al., 1987), which is reflected in the PBMCs failure to effectively proliferate or produce IFN- $\gamma$  in response to Leishmania antigens (CARVALHO et al., 1985, 1989). This does not appear to be an innate defect since individuals with VL, after treatment, are able to mount an immune response compatible with Leishmania resistance (NYLÉN et al., 2007), so there is a temporary immunosuppression, during acute disease, and parasite-specific. Studies have shown that this inability to produce IFN- $\gamma$  following specific Leishmania stimulation is not observed during active VL, in studies using whole blood samples (SINGH et al., 2012). But this fact could not be proven in a study with VL patients from Ethiopia that showed at time of diagnosis the IFN- $\gamma$  production is

impaired (ADEM et al., 2016). The contradictory findings can be explained by differences in disease severity between countries, genetic variation between parasites or differences in host genetic factors.

After antigenic stimulation, CD4<sup>+</sup> and CD8<sup>+</sup> T lymphocytes initiate a proliferation program that is directly associated with the acquisition of effector functions and, ultimately, leads to the formation of memory cells (BRUMMELMAN; PILIPOW; LUGLI, 2018). Acquired effector functions are associated with T lymphocytes activation, that promote increased production of transcription factors among them, NF- $\kappa$ B and NFAT (nuclear factor of activated T-cells) (CHAPMAN; BOOTHBY; CHI, 2020). These factors increase the transcription of some genes, and are essential for the profile showed by the cell, that is, it promotes the production of cytokines and other receptors that determine their activation status, such as effector cells, or can determine the expression of molecules related to other functions. Activation-induced changes affect many classes of molecules including, but not restricted to, CD4 and CD8 co-receptor molecules, and these changes are involved with survival, cell cycle control, adhesion, and migration, as well as their effector function (HU; ZOU; SU, 2018). Thus, we can say that T cellular activation is a key immune event that produces broad phenotypic and functional modifications in T lymphocytes which is capable of differentiation into various functional forms like Th-1, Th-2, Th-17, Treg and  $\gamma\delta$ -T cells etc. These T cells have important role in the inflammatory diseases and also play vital role to prevent our body from hyperimmune activation, autoimmunity, immunodeficiency and the complete execution of infectious agents like *Leishmania* (JAWED; DUTTA; MAJUMDAR, 2019).

It is well established that for cellular activation to occur two complementary signals are required: the recognition of a specific antigen by the T cell (signal 1), given by the interaction between the T cell receptor (TCR)/ peptide/ main histocompatibility complex (MHC), on the surface of antigen presenting cells (APCs), and a costimulatory signal non antigen-specific (signal 2) provided by interactions between surface molecules of APCs and the T cell (LAFFERTY; ANDRUS; PROWSE, 1980). In fact, early work by Jenkins and Schwartz showed that in the absence of costimulatory signals, T cells become anergic, a state marked by the inability of T lymphocytes to respond to subsequent antigenic stimulation, leading to the model that costimulation has a critical role in controlling the fate of T cell responses: activation or anergy (JENKINS et al., 1990; SCHWARTZ et al., 1989).

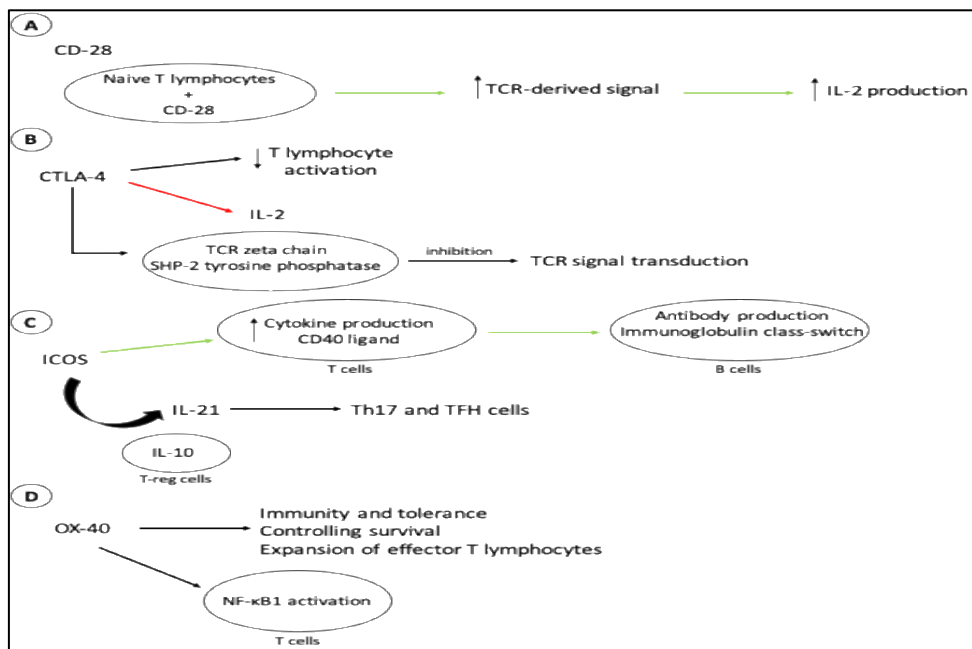
Several costimulatory pathways have been characterized, some involved with activation, while others with inhibition of immune response (BEYERSDORF; KERKAU, 2020; OYEWOLE-SAID et al., 2020; WATANABE et al., 2005). Positive signaling

pathways are balanced by negative signaling to promote the suitable control of T and B cell activation. Costimulatory molecules such as B7 and CD28, CD40 ligand (CD40L) and CD40, ICOS (inducible co-stimulatory molecule), and ICOS ligand (ICOS-L), and OX40 (CD134) and their ligand, OX40L, are critical for T and B cell activation; Inhibitory molecules such as B7 and CTLA-4 (cytotoxic T lymphocyte antigen-4), and PD-1 (programmed cell death-1) and PD-1 ligand (PD1-L), promote an inhibition of T lymphocyte activation (HUBO et al., 2013; WILLSMORE et al., 2021).

The costimulatory molecules mentioned above belong mainly to three families: the CD28 family, the B7 family and the TNF family (SHARPE, 2009). The CD28 costimulatory molecule is a glycoprotein, a member of the immunoglobulin superfamily, expressed on the T cell membrane as disulfide-linked homodimers (ESENSTEN et al., 2016). It is expressed on the surface of most CD4 T cells and in approximately 50% of CD8 T cells, has like ligands B7-1 (CD80) and B7-2 (CD86) receptors, also members of the immunoglobulin superfamily, and that are expressed in APCs such as dendritic cells, macrophages and activated B cells (SHARPE, 2009). Although B7-1 and B7-2 are co-expressed and share a similar general structure, they differ in their temporal response to stimulus, with induction of B7-2 occurring initially and usually at a much higher level than B7-1, in some APCs (ESENSTEN et al., 2016). B7-1 and B7-2 expression is controlled by cytokines and cell-cell interactions.

CD28 is considered the primary costimulatory molecule, that complements TCR-mediated signaling and promotes T cell activation, and ensures their proliferation and survival. Initial activation of naive T lymphocytes requires CD28 signaling to increase TCR-derived signal and promote IL-2 production for effective expansion of antigen-specific T cells (Figure 2A) (WAKAMATSU; MATHIS; BENOIST, 2013). It has been suggested that CD28 activation is involved in multiple pathways such as PI3K (phosphatidylinositol 3-kinase). In one way, PI3K is required for the activation of other molecules, which in turn regulate many targets along the signaling cascade that are involved in functions as diverse as proteins translation and cellular metabolism (KISHORE et al., 2017). CD28 gene deficient mice or treated with CD28 blocking antibodies exhibit a marked reduction in lymphoproliferative response (GLADOW et al., 2020). In addition, some studies have already demonstrated associations of CD28 gene polymorphisms with the development of some autoimmune and infectious diseases (SORIANO et al., 2002; TEUTSCH et al., 2004).

**Figure 2: Costimulatory molecules are involved with activation and inhibition of immune response.** **A.** Initial activation of naive T lymphocytes requires CD28 signaling to stimulate the TCR-derived signal and promote IL-2 production for effective expansion of antigen-specific T cells. **B.** CTLA-4 delivers an inhibitory signal that promotes decreased T lymphocyte activation and inhibits IL-2 production. Its association with TCR zeta chain and with SHP-2 tyrosine phosphatase, in T cells, promote the inhibition of TCR signal transduction. **C.** ICOS promotes increased cytokine production by T lymphocytes and increases CD40 ligand (CD40L) expression, stimulating the production of antibodies by B lymphocytes, and also participates in the immunoglobulin class-switch. ICOS can also regulate IL-21 production, which in turn regulates the expansion of Th17 and TFH cells, and play an important role in the production of IL-10 by Treg cells. **D.** OX-40 plays a central role in immunity and tolerance, controlling survival and expansion of effector T lymphocytes. Its activation strongly contributes to the overall level of NF-κB1 activation in T lymphocytes. Green arrows – activation; Red arrow – inhibition; TCR (T cell receptor); Th17 (T helper 17); TFH (T follicular helper cells); NF-κB1 (Nuclear Factor Kappa B Subunit 1).



CTLA-4, also known as CD152, is expressed on the T lymphocyte membrane. Like CD28 and B7, they are also members of the immunoglobulin superfamily. CTLA-4 binds to the same CD28 receptors, B7-1 and B7-2, but it binds with a much higher affinity to B7 molecules, about 20 times more than CD28 (BRZOSTEK; GASCOIGNE; RYBAKIN, 2016). Although CTLA-4 and CD28 share sequence homology, CTLA-4 acts antagonistically to CD28, and delivers an inhibitory signal that promotes decreased T lymphocyte activation, besides to inhibits IL-2 production and cell cycle progression (Figure 2B) (KRUMMEL; ALLISON, 1996; WALUNAS; BAKKER; BLUESTONE, 1996). CTLA-4 has been suggested to inhibit TCR signal transduction by inhibiting tyrosine phosphorylation of SHP-2 phosphatases (LEE et al., 1998). Studies show that CTLA-4 can act by inhibiting T cell response activation in two

different ways: competing with CD28 or sequestering B7 molecules of CD28, and also actively transducing signal through T lymphocytes, via their intracellular domains (SEIDEL; OTSUKA; KABASHIMA, 2018).

The importance of CTLA-4 in the immune response was well documented by experimental models showing that in CTLA-4 knockout mice, an intense lymphoproliferative disorder is observed, which is fatal within 3-4 weeks after birth, supporting the role of this molecule as a negative regulator of T lymphocyte activation, and that it is critical for the control of lymphocyte homeostasis (WATERHOUSE et al., 1995). Furthermore, the role of CTLA-4 in numerous diseases has been demonstrated (GOKHALE et al., 2013; HUANG et al., 2013; WANG et al., 2020). While CD28 is expressed by naive

and activated T cells, CTLA-4 is expressed only in activated cells, at a much lower level.

B7 and CD28 gene families have grown substantially with the exploration of the human genome, and the pathways defined by these new members regulate the activation, inhibition and fine-tuning of T lymphocyte immune responses. Other costimulatory molecules also play a key role in maintaining immune response homeostasis, including ICOS and OX-40. ICOS, a new member of the CD28 family, has great amino acid homology to CD28 and CTLA-4 (HUTLOFF et al., 1999), having ICOS-L (also known as B7-H2, B7RP-1, GL50) as a ligand, a molecule related to B7-1 and B7-2 ligands (LING et al., 2000). Unlike the constitutively expressed CD28 molecule, ICOS is induced on the surface of T lymphocytes only after activation of these cells, being found in small quantities in naive T cells (SOLINAS; GU-TRANTIEN; WILLARD-GALLO, 2020). ICOS ligand is found in APCs, and through its binding to ICOS promotes increased cytokine production by T lymphocytes, as well as increasing CD40 ligand (CD40L) expression, helping in the production of antibodies by B lymphocytes, and also participates in the immunoglobulin class-switch (Figure 2C) (LIU et al., 2021).

ICOS has been suggested to regulate, through a series of signaling cascades, broad characteristics of the T lymphocyte response such as growth, proliferation and survival. Importantly, these primary characteristics could be restricted to specific T cell subpopulations, by the environmental context of the immune response, and their impact on the expression of T lymphocyte lineage-specific transcription factors such as T-bet and GATA-3 (SIMPSON; QUEZADA; ALLISON, 2010). The ICOS / ICOS-L pathway plays a critical role in stimulating effector responses of T lymphocytes and T-dependent B lymphocytes, in addition to regulating T-cell immune tolerance (SOLINAS; GU-TRANTIEN; WILLARD-GALLO, 2020). ICOS has been shown to be an important immune system receptor promoting the precise regulation of effector T lymphocytes, moreover, is important for the generation of the CXCR5 chemokine receptor, in T follicular helper cells (TFH), the only subset of T cells that regulate germinal center reactions and humoral immunity (LE et al., 2018).

Studies using ICOS-deficient mice (ICOS<sup>-/-</sup>) indicate that this molecule can regulate IL-21 production, which in turn regulates the expansion of Th17 (T helper 17) and TFH cells (PAULOS et al., 2010; SHARPE, 2009). ICOS also plays an important role in the production of IL-10 by Treg cells. It has been observed that ICOS deficiency in humans leads to defective IL-10 and IL-17 production, with impaired affinity maturation and immunoglobulin class switching, in germinal centers, resulting in deep hypogammaglobulinemia (SCHEPP et al., 2017).

Another molecule of great importance in the costimulation process is OX-40, also known as ACT35, CD134 or TNFRSF4. It is a glycoprotein, belonging to the TNFR superfamily (tumor necrosis factor receptor), having like ligand OX-40L (WEBB; HIRSCHFIELD; LANE, 2016). OX-40 is not constitutively expressed in T lymphocytes and is found only after activation of these cells, already its ligand is found in APCs such as macrophages and dendritic cells (MASSARELLI et al., 2019). It has been suggested that the interaction between OX-40 and its ligand plays a central role in immunity and tolerance, controlling survival, expansion of effector T lymphocytes and T cell homeostasis, as well as acting on the generation, reactivation and maintenance of memory T lymphocytes (Figure 2D) (CROFT et al., 2009; HUBO et al., 2013). The interaction of OX-40 with its ligand tightly regulates CD4 and CD8 T cells, and some studies have highlighted its ability to modulate NK and NKT cell function, as well as mediate crosslinking with APCs and various other cell types like mast cells, smooth muscle cells and endothelial cells (BURGESS et al., 2004; IMURA et al., 1996; NAKAE et al., 2006; ZINGONI et al., 2004).

Studies have shown that OX-40 strongly contributes to the overall level of NF- $\kappa$ B1 activation in T lymphocytes (SONG; SO; CROFT, 2008). CD4 T lymphocytes that lose OX-40 do not maintain elevated levels of anti-apoptotic proteins, members of the Bcl-2 family, including Bcl-2, Bcl-xL, and Bfl-1 (ROGERS et al., 2001), a finding that correlates directly with reduced NF- $\kappa$ B1 activity (SONG; SO; CROFT, 2008). Several studies have proven the protective effect of OX-40 / OX-40L blockade, in inflammatory diseases models such as asthma, arteriosclerosis as well as with autoimmune diseases like experimental autoimmune encephalomyelitis, diabetes and colitis (CROFT et al., 2009; KAUR; BRIGHTLING, 2012).

As can be seen, the immune response depends on the proper expression of costimulatory molecules, which can be stimulated or inhibited in certain situations in favor of the host and which can be manipulated by the parasites in their own favor, resulting in active disease in many situations.

## DISCUSSION

T cell costimulation plays a decisive role in the final destination of these cells, whether it is activation, with active production of cytokines and effector cells, or with inhibition, modulating the immune response to low levels or even inhibiting the response, leading to an anergy state. The production of cytokines, induced by these costimulatory molecules, can also affect the subtype of T cell response, thus, the induction of different subtypes (Th1, Th2, Th17, ...) may benefit resistance or susceptibility to some diseases. Because of this, costimulatory molecules have been the subject of much research, implying their role in many diseases. Studies

have shown that blocking these molecules can be used as a potential therapeutic target (FANG et al., 2020; WYKES; LEWIN, 2018).

The increase in the levels of CTLA-4 expressed in T lymphocytes, for example, can be used as a strategy of Leishmania to promote anergy of the cellular immune response during active disease, a view that can be reinforced by the findings of Murphy et al., in an experimental model, which demonstrated that CTLA-4 blockade increases host resistance to infection by *Leishmania donovani*, and Pedicord et al., who demonstrated, in mice, that CTLA-4 blockade increases the number of CD8 memory cells capable to produce IFN- $\gamma$  and TNF- $\alpha$  (MURPHY et al., 1998; PEDICORD et al., 2011).

It can be suggested that such modulation made by *L. infantum* may favor its survival, since it has been reported that CTLA-4 can induce the TGF- $\beta$  production (NOUËL et al., 2015), and may thus prevent the production of nitric oxide by macrophages and drive the response to a Th2 profile, since it can also interfere with the IFN- $\gamma$  production, a role that may have special relevance in the development of active VL. Associated with this role, it can also be suggested that the increased expression of CTLA-4 during active VL could, in part, explain the inability of T lymphocytes to mount a suitable cellular response, since it has been suggested that the molecule can modulate the signal threshold necessary for proliferation and cytokine production by T lymphocytes (SMIDA et al., 2013; WAN et al., 2018). Apparently, this response is not completely inhibited, as we can see with data from the production of cytokines in our group that show that after specific stimulus, even during active disease, there is a production of IFN- $\gamma$  (Unpublished data). The importance of CTLA-4 in the context of visceral leishmaniasis (HAJILOOI et al., 2014) and cutaneous leishmaniasis (AL-GHABBAN et al., 2021) has gained prominence in recent years, having already been found polymorphisms in this gene, associated with these diseases.

The increase in the percentage of OX-40 during active VL may be involved with the development of a Th2 profile, as observed in experimental animal models, favoring the parasite persistence (KAUR; BRIGHTLING, 2012). Other studies also show that signaling by OX-40, preferably, promotes differentiation in the Th2 profile in the absence of IL-12 and independent of IL-4 (ITO et al., 2005; MADDUR et al., 2014). Another well-documented feature of OX-40, is the ability to promote the expansion and survival of effector cells, in this way, could be directly associated with the maintenance of the Th2 response with production of cytokines of this profile (LIN et al., 2018).

It has been suggested that ICOS regulates general features of T lymphocytes such as growth, proliferation and survival (RAO, 2018). Functional studies using knockout mice or blocking antibodies for ICOS have suggested that the costimulatory molecule is important for Th2 immune responses, preferably inducing the production of IL-4 and IL-10 (COYLE et al., 2000; DONG et al., 2001; GONZALO et al., 2001; MCADAM et al., 2000; TESCIUBA et al., 2001; WANG et al., 2013). Several investigation lines have identified PI3K as

an important mediator in ICOS signaling. Pharmacological inhibition of PI3K during signaling by ICOS results in reduced production of IL-4, IL-10 and IL-21, demonstrating the importance of PI3K in the secretion of cytokines characteristic of the Th2 and Tfh profile (follicular T helper) (FEITO et al., 2003; GIGOUX et al., 2009).

There are no studies in the literature that have evaluated the ICOS costimulatory molecule in visceral leishmaniasis, but in cutaneous leishmaniasis (LC) Miyahira et al., demonstrated, in an experimental model of *L. major* infection, that the use of blocking antibodies for ICOS or ICOS deficient BALB / c mice have a better prognosis, indicating the role of ICOS in inducing the Th2 profile (MIYAHIRA et al., 2003). In addition, Nouailles et al., has shown, in experimental models of *Mycobacterium tuberculosis* infection, that the absence of ICOS in the late stage of the infection, is responsible for the increase of IFN- $\gamma$  production by effector CD4 T cells, which favors protection against infection (NOUAILLES et al., 2011).

More broadly, manipulation of costimulatory pathways may provide new targets for immunotherapy, increasing anti-Leishmania immunity. We hope to achieve new ways of combating pathogens in the near future. A good example of manipulating the co-stimulatory pathways, in our favor, was the release of the use of Ipilimumab, a drug based on the blockade of CTLA-4, for the treatment of melanoma (LIPSON; DRAKE, 2011). Thus, based on the literature and preliminary unpublished data, can be inferred that approaches that include the molecules, CTLA-4 and ICOS, may have potential success in the control of visceral leishmaniasis, providing additional means of treating the disease. Blocking these molecules can facilitate the parasite elimination by increasing the apoptosis of infected cells and / or the release of reactive intermediates by macrophages.

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