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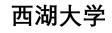
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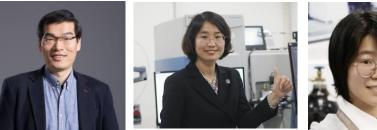
Enhanced inflammation and suppressed adaptive immunity in COVID-19 with prolonged RNA shedding

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Cell Discovery 8, Article number: 70 (2022) Cite this article

1 Altmetric Metrics

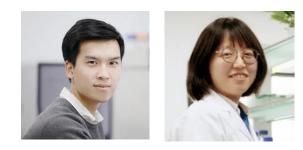






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OUTLINE

- Background and research gap
- Overview of clinical patients, samples and study design
- Immunological analysis between the LC and SC groups
- Differentially expressed proteomes and metabolomes between the LC and SC groups
- Integration of proteomic and metabolomic data
- Risk factors for COVID-19 prognosis

BACKGROUND

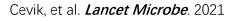
The duration of viral RNA shedding

	Mean duration of viral shedding (95% CI), days	SE	Variance		luration I shedding,	Relative weight
Al-Jasser et al (2019) ⁹⁹	13-2 (12-3-14-0)	0.4	0.2	249	-	37.58
Alkendi et al (2019)100	18·5 (16·3–20·7)	1.1	1.2	58		33-85
Park et al (2018)101	14.3 (10.8–17.7)	1.8	3.2	17	-	28·57
Overall	15-3 (11-6-19-0)	1.9	3.6	324	\diamond	
					0 20	40
					Duration of viral shedding (days)	

The mean duration of MERS-CoV shedding is less than 20 days

	Mean duration of viral shedding (95% CI), days	SE	Varlance	Total duration of viral shedding, days	Relati weigh
ang et al (2020) ²⁹	19-3 (18-8–19-7)	0.2	0	32	- 2.53
Cai et al (2020) ²⁴	12·3 (11·9–12·6)	0-2	0	298	- 2.53
lu et al (2020) ³⁵	14-3 (12-9-15-6)	0-7	0-5	59	- 2-48
(im et al (2020) ⁴	8.3 (6.9-9.8)	0.7	0.5	28	2-48
e et al (2020)57	7-5 (5-6-9-4)	1.0	0.9	12	2.44
o et al (2020)68.	18·2 (15·3–21·1)	1.5	2.1	10	- 2-34
ing et al (2020) ⁴⁵	10.5 (9.4-11.6)	0.6	0.3	66	- 2.50
Qian et al (2020) ⁷¹	11.7 (10.1-13.2)	0.8	0-6	24	- 2-47
Vu et al (2020) ³⁸	15.7 (14.2-17.2)	0.8	0-6	74	2-47
(iao et al (2020) ⁴³	22.8 (20.4-25.1)	1.2	1-4	56	- 2-40
(u et al (2020) ³⁶	17-3 (16-1-18-5)	0.6	0.4	113	2.49
(u et al (2020) ¹²	6.0 (3.6-8.4)	1.2	1.5	10 -	2-39
/ongchen et al (2020) ³⁴	13.3 (2.8-23.9)	5.4	28.9	21 —	1.18
/oung et al (2020) ²⁰	13-3 (9-2-17-3)	2.1	4-2	18	
2hou et al (2020)40	31.7 (27.9-35.4)	1.9	3.6	41	2.21
2hou et al (2020) ³³	20.3 (19.6-21.1)	0.4	0.1	191	- 2.52
2hu et al (2020) ⁸²	25-0 (16-2-33-8)	4.5	20-2	10	1-41
akurai et al (2020) ⁴¹	8.7 (7.8-9.5)	0-4	0-2	90	2.52
To et al (2020)58	16-5 (14-0-19-0)	1.3	1.7	23	- 2.38
luang et al (2020) ⁴⁹	22.0 (20.9-23.1)	0.6	0.3	200	2.50
lang et al (2020) ⁴⁷	18.3 (16.9-19.8)	0.8	0.6	120	- 2-48
5hi et al (2020) ³¹	28.0 (26.6-29.4)	0.7	0.5	246	2-48
falmy et al (2020) ⁴²	21.0 (19.4-22.6)	0.8	0.7	119	- 2.47
Then et al (2020) ²⁶	12.0 (11.3-12.7)	0.4	0-1	284	2.52
lu et al (2020)53	7.1 (4.3-9.8)	1.4	2.0	24 -	2.35
50 ng et al (2020)	27.3 (21.2-33.5)	3.1	9-8	21	1·83
(ang et al (2020)54	19.7 (17.9-21.5)	0.9	0-8	45	2-45
Wu et al (2020) ⁷⁹	17-3 (15-8-18-9)	0.8	0-6	91	- 2-47
2 (2020)22 (hang et al	9.5 (7.8-11.2)	0-9	0-7	23	2-46
u et al (2020)64	30.0 (26.5-33.5)	1.8	3.1	50	- 2.26
fan et al (2020) ¹⁷	15.8 (13.9-17.6)	1.0	0.9	67	2-44
(ujawski et al (2020) ¹⁶	15.5 (11.2-19.8)	2.2	4-9	12	2.12
(an et al (2020) ³⁷	24.3 (22.4-26.2)	1.0	0-9	120	2-44
(ang et al (2020) ⁸¹	16.1 (14.9-17.3)	0.6	0.4	213	- 2.50
(u et al (2020) ⁸⁰	12.0 (9.1-14.9)	1.5	2.2	14	2.33
luang et al (2020) ²¹	17.9 (15.6-20.2)	1.2	1-4	33	
Chen et al (2020) ²⁵	11.0 (10.8-11.2)	0.1	0	249	2:53
Thang et al (2020)61	9.5 (7.1-11.9)	1-2	1.5	16 -	- 2-39
i et al (2020)66	53.9 (50.7-57.1)	1.6	2.7	36	> 2.29
Pongpirul et al (2020)70	16-3 (7-8-24-9)	4.3	18.9	11 -	1.45
fan et al (2020) ¹⁰	13.3 (8.6–17.9)	2.4	5.5	10	2.08
Wang et al (2020) ⁷⁷	16.0 (13.1-18.9)	1.5	2.2	18	- 2.33
2ha et al (2020)46	13.8 (12.6-15.1)	0.6	0.4	31	2-49
Overall	17.0 (15.5-18.6)	0.8	0-6	3229	

The mean duration of SARS-CoV-2 RNA shedding is usually from 10-25 days.

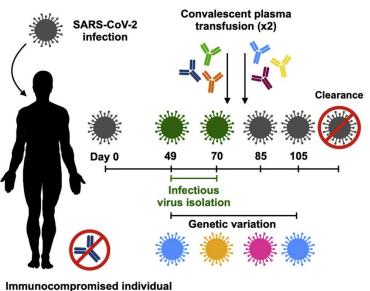


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The relationship between the phenotype and viral RNA shedding

Table 1



Long-term SARS-CoV-2 Shedding

Cancer (CLL)

· Hypogammaglobulinemia

Avanzato, et al. *Cell*. 2020

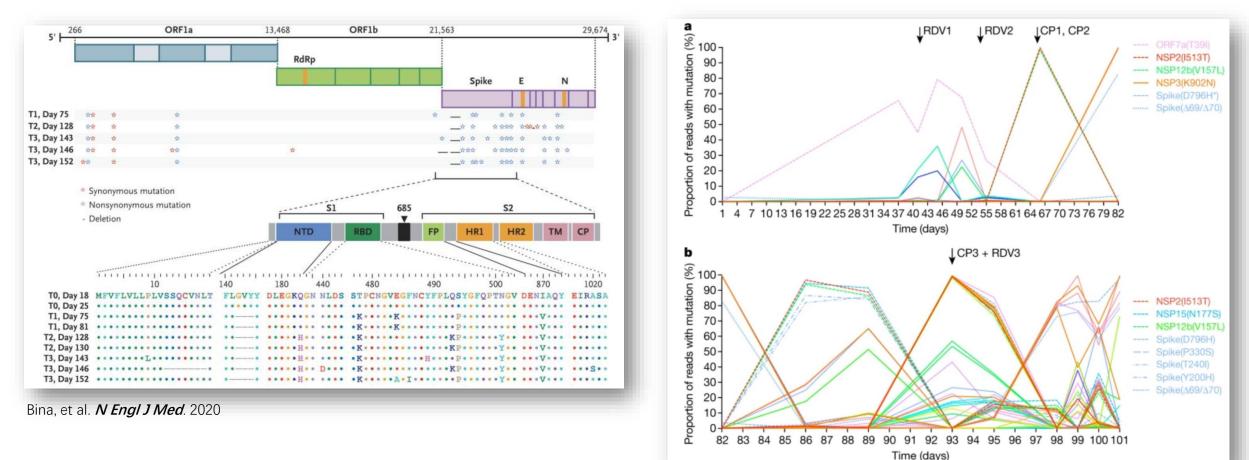
Comparison of Clinical Characteristics and Treatment Responses Between Groups With Different Shedding Durations

	All Pa	All Patients (N = 113)		Viral Shedding Duration After Illness Onset			
	n	Values	n	<15 Days (n = 37)	n	≥15 Days (n = 76)	P ^a
Age, years, median (IQR range)	113	52 (43, 63)	37	48 (34, 61)	76	54.5 (45, 63)	.033
Male sex, % (n)	113	58.4 (66)	37	40.5 (15)	76	67.1 (51)	.00
Exposure history in Hubei, % (n)	113	62.8 (71)	37	67.6 (25)	76	60.5 (46)	.46
Exposure history to confirmed patients, % (n)	113	40.7 (46)	37	51.4 (19)	76	35.5 (27)	.10
Duration from illness onset to hospital admission, median (IQR), days	113	5 (3, 8)	37	4 (2, 6)	76	6 (4, 9)	.00
Patients with severe disease at admission, % (n)	113	28.3 (32)	37	16.2 (6)	76	34.2 (26)	.04
Comorbidity, % (n)							
Hypertension	113	23.0 (26)	37	8.1 (3)	76	30.3 (23)	.00
Diabetes	113	8.0 (9)	37	5.4 (2)	76	9.2 (7)	.71
Coronary heart disease	113	5.3 (6)	37	5.4 (2)	76	5.3 (4)	1
Current smoker	113	7.1 (8)	37	8.1 (3)	76	6.6 (5)	.71
Treatment, % (n)							
Corticosteroid	113	56.6 (64)	37	40.5 (15)	76	64.5 (49)	.02
Umifenovir	113	48.7 (55)	37	43.2 (16)	76	51.3 (39)	.42
Ribavirin	113	16.8 (19)	37	8.1 (3)	76	21.1 (16)	.08
Invasive mechanical ventilation	113	15.9 (18)	37	2.7 (1)	76	22.4 (17)	.00

Xu, et al. Clinical infectious diseases. 2020



The relationship between the viral RNA shedding prolonged and evolution

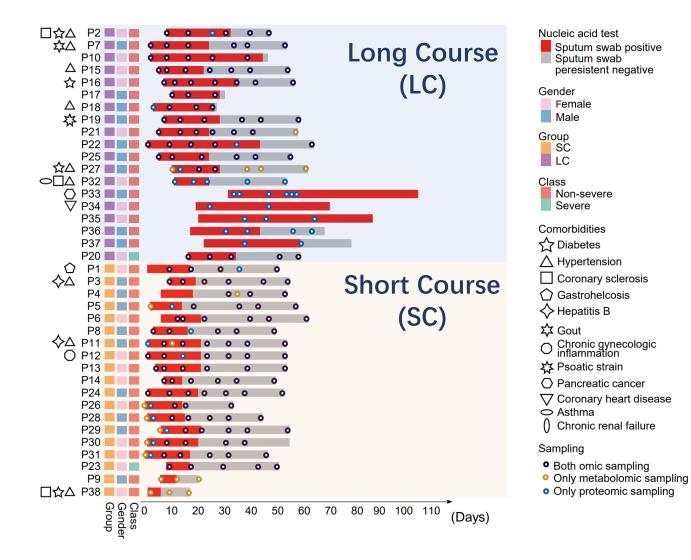


Kemp, et al. *Nature*. 2021

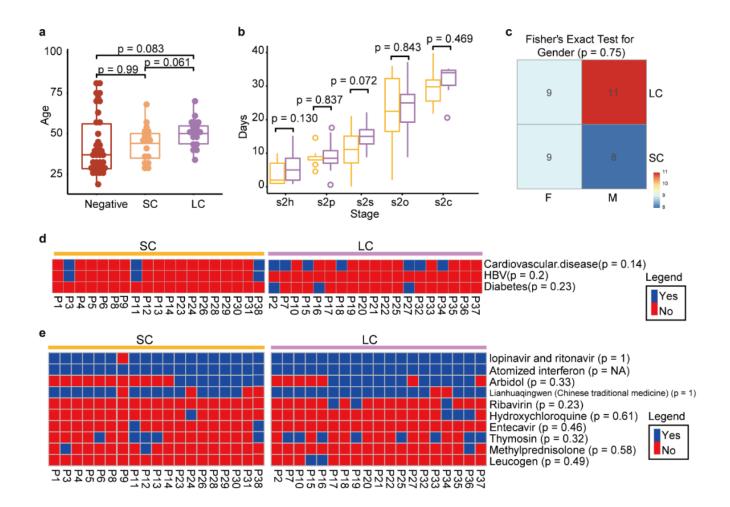
Few studies have characterized host responses of patients with long viral RNA shedding at the molecular level.



THE OVERVIEW OF CLINICAL PATIENTS



NO SIGNIFICANT CLINICAL DIFFERENCES



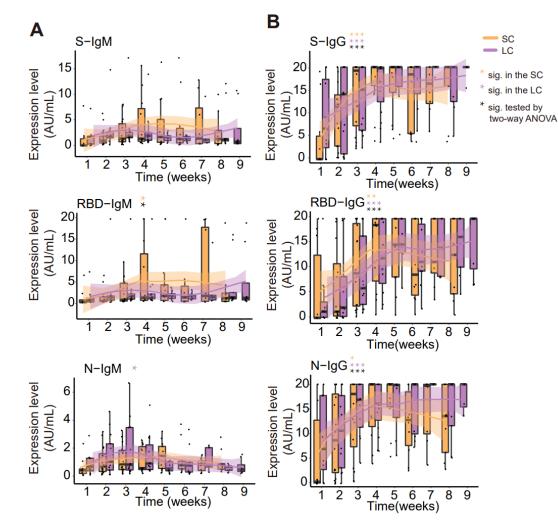
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STUDY DESIGN

Virological detection Sputum samples COVID-19 patients (N = 38, n = 298) Ctrl patients (N = 35, n = 70)	PCR → SARS-CoV-2 RNA	Immunological detection Antibodies:Anti S/RBD/N IgG/IgM (N = 37, n = 190 Serum samples) Immune cells, cytokines Flow cytometry (N = 34, n = 43 Whole blood samples)				
	Patients &	& Samples				
Batch design Batches (n = 18) Samples (n = 224) Technical replicates(n = 44) ↓ Inactivation 56°C 30 min Depletion of high abundance proteins & digestion ↓ TMT pro-126 ↓ TMT pro-127N ↓ TMT pro-127N ↓ TMT pro-127N ↓ TMT pro-128N ↓ TMT pro-133C ↓ TMT pro-134N ↓		(LC) (N = 35) Samples (n = 193)				
Proteomic analysis	/gene products	Metabolomic analysis				

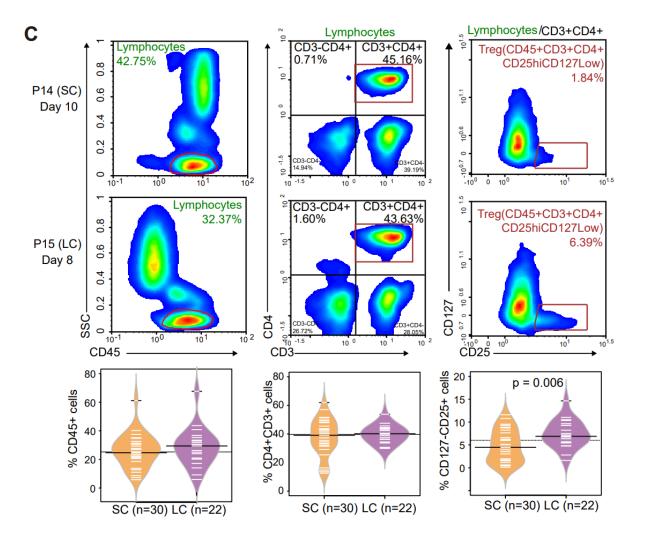
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THE TIME-SERIES IMMUNOLOGICAL DETECTION



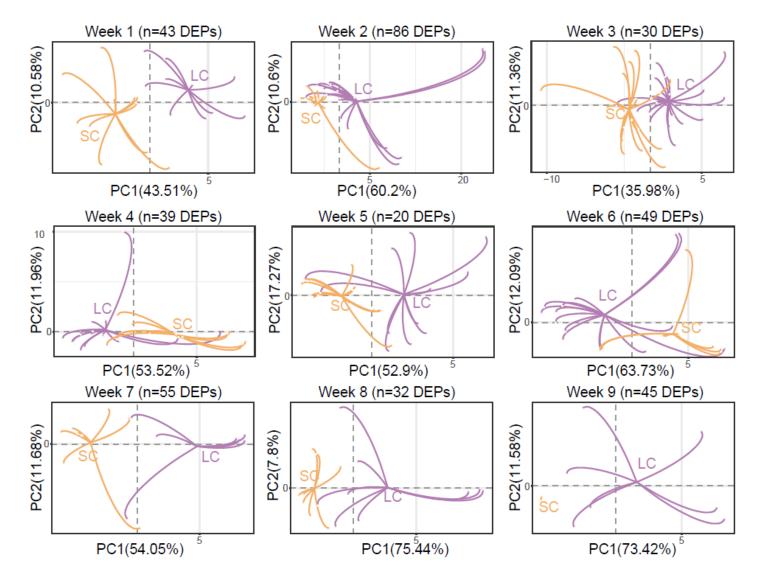
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DOWNREGULATION OF TREG CELLS



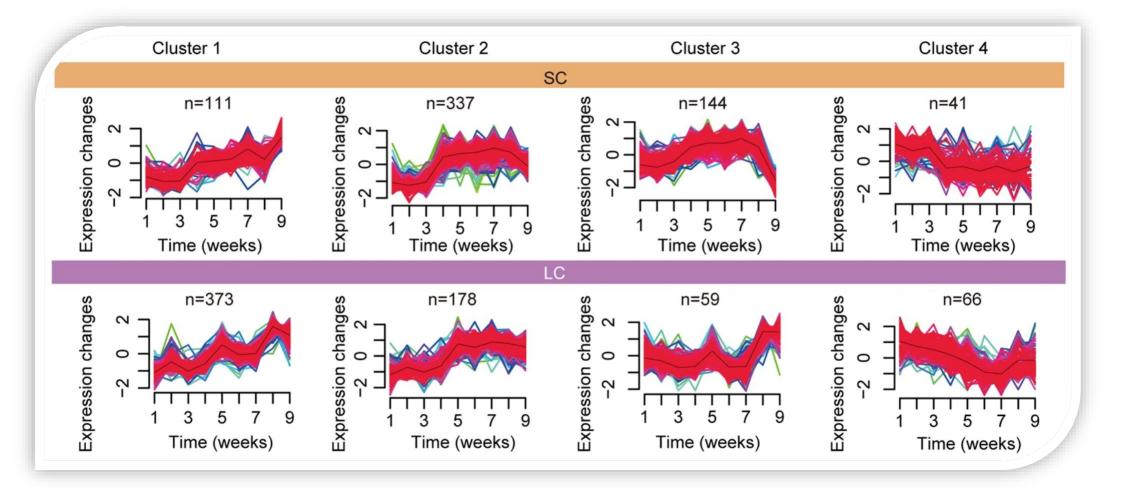
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DIFFERENCE BETWEEN THE LC AND SC



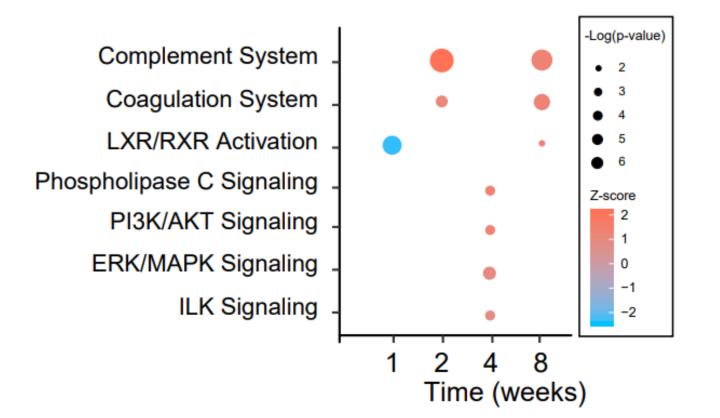
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DELAYED IMMUNE RESPONSE IN THE LC GROUP

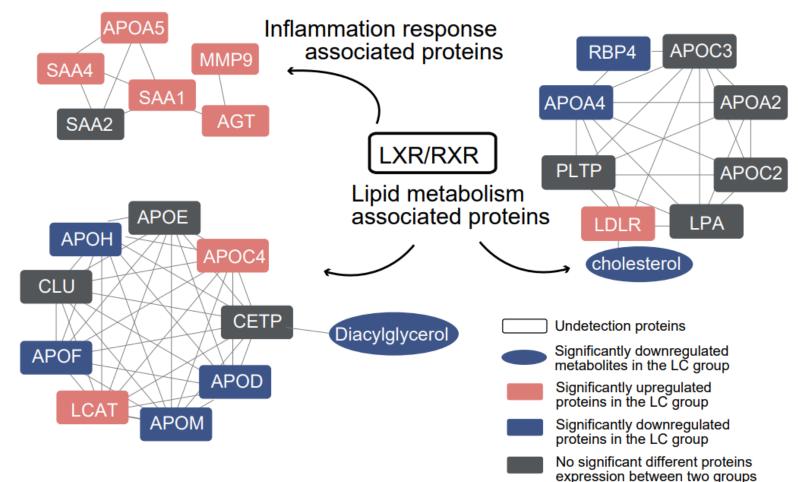


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LXR/RXR WAS INHIBITED IN THE LC GROUP

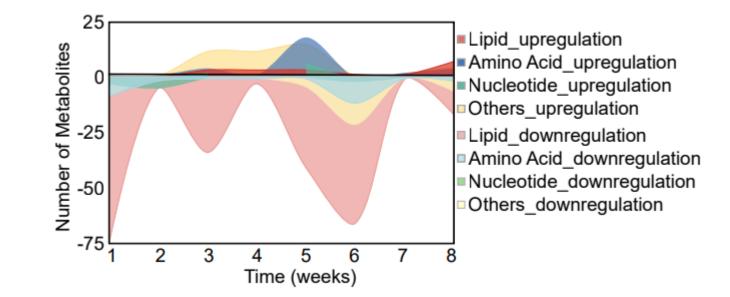


LXR/RXR MEDIATED LIPID REGULATION AND IMMUNITY IN THE LC GROUP

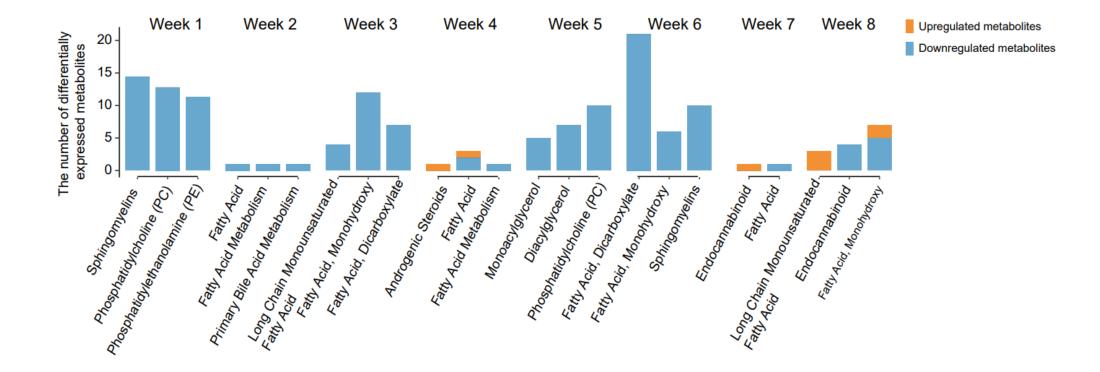


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DOWNREGULATED LIPID IN THE LC GROUP



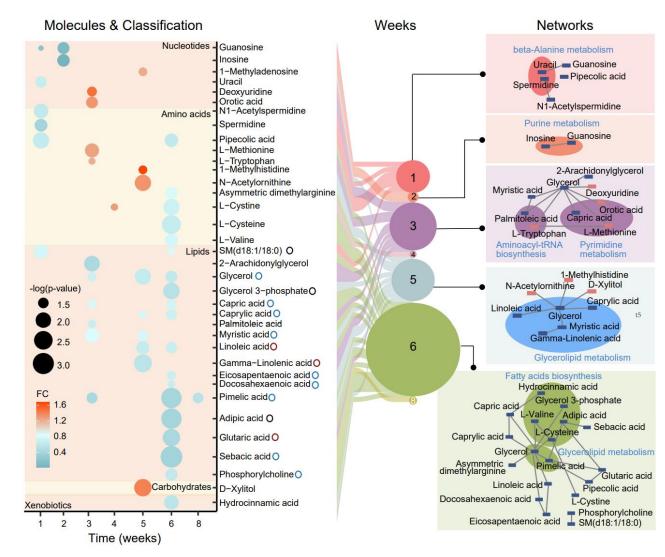




The most significantly downregulated lipids in the LC group are sphingomyelins, phosphatidylcholine (PC), and PC is a well-known as a kind of anti-inflammation factor.

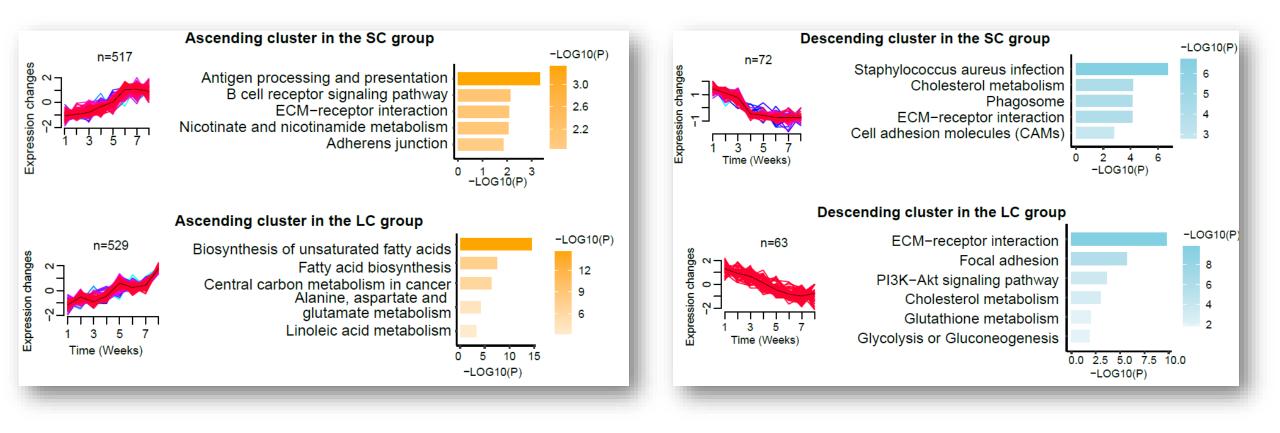


DOWNREGULATED ANTI-INFLAMMATORY LIPIDS IN THE LC GROUP

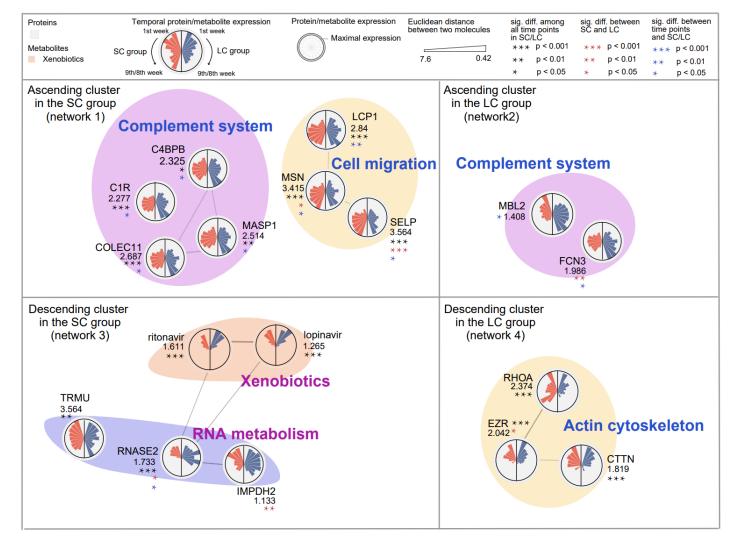


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PROTEOMICS AND METABOLOMICS INTEGRATION



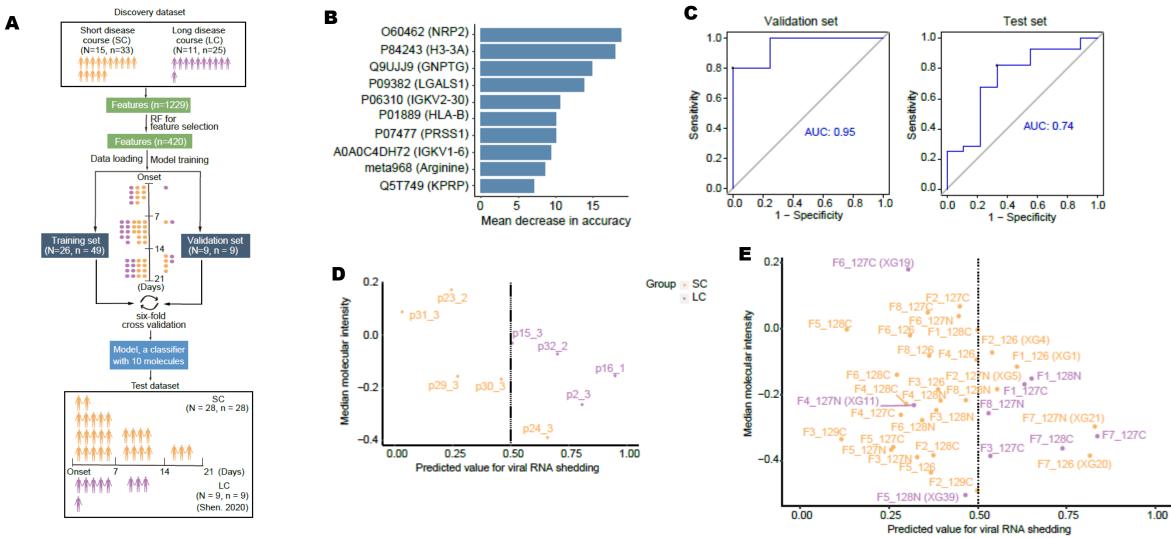
KNN-BASED NETWORK ANALYSIS



Activated lectin pathway, suppressed cell migration, and enhanced viral replication plausibly contribute to prolonged RNA shedding.



MOLECULAR RISK FACTORS FOR PROLONGED VIRAL RNA SHEDDING PERIOD



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CONCLUSION

- To understand the molecular mechanisms underlying prolonged viral RNA shedding in COVID-19 patients, we profiled a deep and time-resolved landscape of their plasma proteome and metabolome.
- These patients exhibited prolonged inflammation and suppressed adaptive immunity.
- Prolonged viral RNA shedding was associated with ten potential risk factors, including NRP2, H3-3A, GNPTG, LGALS1, IGKV2-30, HLA-B, PRSS1, IGKV1-6, KPRP, and arginine.

