## **ORIGINAL ARTICLE**

# Relation Between Sex Hormones and Covid-19

IHSAN RAISAN IBRAHIM1, TALIB RAHIEM HUSSAIN2

<sup>1</sup>Professor, clinical and laboratory department ,College of pharmacy ,university of Al Qadisiyah,Iraq

<sup>2</sup>Master of science in general cardiology, Al Refai general hospital .,medical college ,university of sumer .lraq Correspondence to: Ihsan Raisan Ibrahim, Email: ihsan.raisan@qu.edu.iq

#### **ABSTRACT**

Coronavirus is one of the major viruses that mainly attack human respiratory system . there are similarities in symptoms between COVID-19 and earlier Coronavirus infections such as fever , dry cough , however , COVID-19 showed unique clinical feature , that involve the targeting of the lower airways as evident by upper respiratory tract symptoms such as rhinorrhea , sneezing and sore throat .

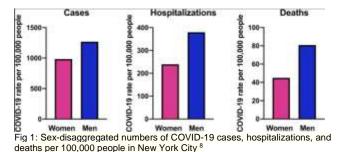
The severity of ČOVID- 19 as indicated by hospitalization , admission to intensive care unit , has been greater in men than women . Many hypotheses have been found to explain this difference in susceptibility and severity of the disease . The difference in immune response between sex is consider the main factor in outcomes of viral infection . Estrogen has immunoenhancing effect on the immune system , while testosterone has immunosuppressive role , also progesterone inhibits inflammatory innate immune response . In this review , its concluded that sex hormones have relation with COVID-19 severity .lt was concluded that estrogen and progesterone reduce disease severity in contrast , testosterone increase the severity and susceptibility for COVID-19 .

Keywords: sex hormones ; immunity ; Covid - 19

#### INTRODUCTION

COVID 19 and its relation to geneder: Outbreak of COVID-19 infection caused international risk on health in the world SARS COC-2 that cause COVID-19 infection is similar to SARS COV which responsible for occuarance of acute respiratory syndrome <sup>1</sup>. Data suggested that fewer women are dying from COVID-19 Pandemic than men , hospitalization rated of death admission to intensive care unit has been two – fold greater in men than women in Europe <sup>2</sup>. In addition , most countries recorded high range of death in men compared with women . Sex – bias factor has important role in immunological response to viral infection <sup>3</sup>.In Wuhan , mortality , morbidity and admission to intensive care unit are found at high rates among men than women <sup>4</sup>.

Differences in morbidity and mortality in patietswith COVID-19 may resulted from levels of androgens and estrogens <sup>5</sup>. Disparity in COVID-19 severity may be explained by differences in immune response,sex hormones, genetic factors and gender – behaviour differences <sup>6</sup>. Geneder related factors may affect COVID-19 severity,angiotensin converting enzyme 2(ACE2) as well as serine protease TMPRSS2 participate in viral infection ,sex hormones can affect both factors <sup>7</sup>. It was reported the greater rates of hospitalization and death among men than women in New York city (Fig 1).



Sex hormones and immunity: Sex – based difference in immune response can be mainly attributed to sex hormones . Sex hormones have receptors on immune cells such as B- cells , T-cells and monocytes which , in turn . affect innate and adaptive immune response  $^9$  . Estrogen , progesterone and testosterone have impact on antibodies production by B- cells and activity of granulocytes and natural killer cells  $^{10}\,$ .

Estrogens have important role in immune response through stimulation the proliferation and differentiation of monocytes and lymphocytes <sup>11</sup> . It has shown that estrogen activate the differentiation of B- cells <sup>12</sup> . additionally , estrogen exert anti –

inflammatory effect by activation of T- lymphocytes <sup>13</sup>. Estrogen exert the effect on immune cells by estrogen receptors .Estrogen Receptors activate development of immune cells and regulate innate and adaptive immune response <sup>14</sup>. On the other hand estrogen increase Gamma – interferone IFN levels which , in turn , regulate all cells of the immune system , this activation can explain several autoimmune disease in women <sup>15</sup>.

Progesterone lowered inflammatory response by interfering with NF - KB pathway which , in turn , decrease production of proinflammatory cytokines 16 . Progesterone treatment in mice infected with influenza A virus , declined pulmonary inflammation in addition progesterone can inhibit TLRs and NF-KB production in macrophage, supporting the concept, that progesterone migh cause inhibition of innate immune response <sup>17</sup> . Progesterone has immune suppressive properties by suppressing TLRs through decreasing miR - 155 in macrophage wich in turn .suppresses TLRs induced IL-6 and IFN-β production <sup>16</sup> .Progesterone has anti - inflammatory effect , it's showed that progesterone inhibit gene expression of IL - 1B , IL - 6 , IL - 8 and TNF -  $\alpha$  induced by E. coli 18 .In the cystol, progesterone binds to progesterone receptor .this binding interfere with NFkB resulting in reduction in the inflammatory response (Fig 2) Testosterone inflammation in patients with diabetes, prostate cancer and coronary artery disease through the decrease in pro inflammatory cytokines IL 1B, IL – 6 and TNF – $\alpha$  and increase IL – 10 as anti – inflammatory cytokines 19. On the other hand, treatment with testosterone decreased pro inflammatory cytokines in old hypogonadol men <sup>20</sup>. Testosterone is considered as immuno - suppressive agent , which may explain higher severity and susceptibility of viral infection such as COVID-19 in men 21.

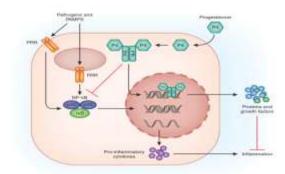


Fig 2: Progesterone reduces inflammatory response P4:progesterone,PR:progesterone receptor .PAMPs: pathogen associated molecular patterns.PRRs:pattern recognition receptors 16

Sex hormones and viral infection: Corona virus SARS - COV-2 use ACE2 as receptor for entery in infected cell . On the other hand, spike protein of the virus activated by transmembrane serine protease 2, TMPRSS2  $^{22}$ . ACE2 expression has important role in susceptibility of epithelial cells in airways to the infection with SARS - COV  $^{23}$ . Expression of ACE2 and TMPRSS2 can be influence by sex hormones . ACE2 protein are highly expressed in male mice than female , while estrogen downregulate expression of ACE2 , So this may explain that SARS . COV is more available in males than females  $^{24}$  .

Spike protein is necessary for viral entery in target cells and for virus spread . TMPRSS2 activates spike protein of virus for viral entery through cell membrane  $^{25}$ . Androgens activate upregulation of TMPRSS2 expression and this may explain the male predominance in COVID- 19 infection ,while Estrogen lowered ACE2 expression in mice . It's reported that androgens upregulated TMPRSS2 expression in prostrate cancer cell lines  $^{26}$ . Some researchers concluded that TMPRSS2 inhibition may prevent viral entry . It's revealed in one study that use of TMPRSS2 in combination with hydroxyl chloroquine has effective role against SARS.COV-2  $^{27}$ . Androgen receptor mediated TMPRSS2 transcription , elevation of TMPRSS2 in men may explain sex based disparities in the severity of COVD-19  $^{26}$ .

Recent study found that plasma concentrations of ACE2 , were higher in men than women <sup>29</sup> . also high activity of ACE2 was found in male rats compared to females <sup>30</sup> . Androgen receptor elements are located on transcription site of TMPRSS2 <sup>31</sup> . Androgens can affect TMPRSS2 in prostate , as well as in the lung . It was shown that patients with prostate cancer receiving androgen inhibitors have lower risk of COVID-19 compared to those who didn't receive the drug <sup>32</sup> . SARS . COV-2 infection downvergluted ACE2 in tissues reducing the protective role of ACE2 in lungs , heart , kidney and gut <sup>33</sup> .S glygoprotein of SARS-CoV-2 is activated byTMPRSS2, which stimulates virus enterance , androgen receptor upregulates TMPRSS2 transcription (Fig 3).

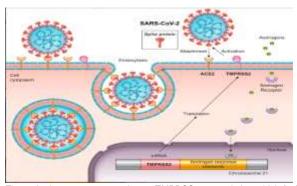


Fig 3: . Androgen receptor activates TMPRSS2 transcription which facilitates SARS-CoV-2 virus –cell membrane fusion  $^{34}$  .

Recent study recorded that ACE2 expression is elevated in Lung and trachea in obese male mice in comparison with obese females , also TMPRSS2 expression was higher in trachea of obese male mice compared with females  $^{35}$ . Lungs of male mice have high expression of an dragon receptors than females  $^{36}$ . On the other hand , ACE2 was highly expressed by synthetic androgen and downregulated by androgen receptor  $\,$  blocker  $^{37}$ 

## CONCLUSION

its concluded that sex hormones have relation with COVID-19 severity. It was concluded that estrogen and progesterone reduce disease severity in contrast, testosterone increase the severity and susceptibility for COVID-19.

### **REFERENCES**

1 Coronaviridae Study Group of the International Committee on Taxonomy of Viruses: The species severe acute respiratory

- syndrome-related coronavirus: classifying 2019-n CoV and naming it SARS-CoV-2, Nat. Microbiol 2020;5:536-544.
- 2 Cai H: Sex difference and smoking predisposition in patients with COVID-19. Lancet Respir Med 2020 ,8(4):e 20.
- 3 Morgan R, Klein SL: The intersection of sex and gender in the treatment of influenza. Curr. Opin. Virol 2019; 35: 35–41.
- 4 Chen N , Zhou M, Dong X, Qu J, Gong F, Han Y, et al.: Epidemiological and clinical characteristics of 99 cases of 2019 novel coronavirus pneumonia in Wuhan, China: a descriptive study.Lancet Lond Engl 2020:395(10223):507—13.
- 5 Lipsa A,and Prabhu JS: Gender disparity in COVID-19: Role of sex steroid hormones. Asian Pacific journal of tropical medicine 2021; 14(1), 5.
- 6 Raza, HA, Sen P, Bhatti, OA, and Gupta, L: Sex hormones, autoimmunity and gender disparity in COVID-19. Rheumatology International 2021, 1-12.
- Foresta C, Rocca, MS, and Di Nisio A. Gender susceptibility to COVID-19: a review of the putative role of sex hormones and X chromosome. Journal of Endocrinological Investigation 2021; 44(5), 951-956.
- Klein SL, Dhakal, S, Ursin RL., Deshpande S, Sandberg K, & Mauvais-Jarvis F: Biological sex impacts COVID-19 outcomes. PLoS pathogens 2020; 16(6).
- 9 Su L, Sun Y, Ma F, Lü P, Huang H, & Zhou, J: Progesterone inhibits Toll-like receptor 4-mediated innate immune response in macrophages by suppressing NF-kB activation and enhancing SOCS1 expression. Immunology letters . 2009; 125 (2): 151-155.
- Oertelt-Prigione S: The influence of sex and gender on the immune response. Autoimmunity reviews 2012; 11(6-7): 479-485.
- Olsen NJ, Kovacs WJ: Gonadal steroids and immunity. Endocr Rev 1996; 17(4):369–384.
- 12 Grimaldi CM, Jeganathan V, Diamond B. Hormonal regulation of B cell development: 17 beta-estradiol impairs negative selection of high-affinity DNA-reactive B cells at more than one developmental checkpoint. J Immunol 2006; 176(5):2703–10..
- 13 Lélu K, Laffont S, Delpy L, Paulet PE, Périnat T, Tschanz SA, & Guéry, JC: Estrogen receptor α signaling in T lymphocytes is required for estradiol-mediated inhibition of Th1 and Th17 cell differentiation and protection against experimental autoimmune encephalomyelitis. The Journal of Immunology 2011; 187(5), 2386-2393
- 14 Kovats S: Estrogen receptors regulate innate immune cells and signaling pathways. Cellular immunology 2015; 294(2), 63-69.
- 15 Karpuzoglu-Sahin E, Hissong BD, & Ahmed SA.: Interferon-γ levels are upregulated by 17-β-estradiol and diethylstilbestrol. Journal of reproductive immunology 2001; 52(1-2), 113-127.
- Hall OJ, & Klein, S L; Progesterone-based compounds affect immune responses and susceptibility to infections at diverse mucosal sites. Mucosal Immunology 2017; 10(5): 1097-1107
- 17 Sun Y, Cai J, Ma F, Lü P, Huang H, & Zhou, J: miR-155 mediates suppressive effect of progesterone on TLR3, TLR4-triggered immune response. Immunology letters 2012;146(1-2), 25-30.
- 18 Cui L, Wang H, Lin J, Wang Y, Dong J, Li J, & Li J: Progesterone inhibits inflammatory response in E. coli-or LPS-Stimulated bovine endometrial epithelial cells by NF-κB and MAPK pathways. Developmental & Comparative Immunology, 105, 103568.
- Mohamad, NV, Wong SK, Hasan WN, Jolly JJ, Nur-Farhana MF, Ima-Nirwana S, & Chin KY: The relationship between circulating testosterone and inflammatory cytokines in men. The Aging Male 2019.22(2):129-140.
- 20 Maggio M, Basaria S, Ceda GP, Ble A, Ling SM, Bandinelli S, ... & Ferrucci L: The relationship between testosterone and molecular markers of inflammation in older men. Journal of endocrinological investigation 2005; 28(11): 116-119.
- 21 Moulton VR: Sex hormones in acquired immunity and autoimmune disease. Front Immunol. 2018; 9:1-21.
- 22 Hoffmann M, Kleine-Weber H, Krüger N, Müller M, Drosten C, & Pöhlmann S: The novel coronavirus 2019 (2019-nCoV) uses the SARS-coronavirus receptor ACE2 and the cellular protease TMPRSS2 for entry into target cells. BioRxiv 2020, doi: 10.1016/j.cell.2020.02.052.
- Jia, HP, Look, DC, Shi L, Hickey M, Pewe L, Netland J, ... & McCray Jr, PB. :ACE2 receptor expression and severe acute respiratory syndrome coronavirus infection depend on differentiation of human airway epithelia. Journal of virology 2005; 79(23), 14614-14621
- 24 Liu J. Ji H, Zheng W, Wu X, Zhu JJ, Arnold AP, & Sandberg K: Sex differences in renal angiotensin converting enzyme 2 (ACE2)

- activity are  $17\beta$ -oestradiol-dependent and sex chromosome-independent. Biology of sex differences 2010; 1(1), 1-11.
- 25 Glowacka I, Bertram S, Müller A, Allen P, Soilleux E, Pfefferle, S, ... & Pöhlmann S: Evidence that TMPRSS2 activates the severe acute respiratory syndrome coronavirus spike protein for membrane fusion and reduces viral control by the humoral immune response. Journal of virology 2011; 85(9), 4122-4134.
- 26 Stopsack KH, Mucci LA, Antonarakis ES, Nelson PS, & Kantoff PW:TMPRSS2 and COVID-19: serendipity or opportunity for intervention?. Cancer discovery 2020; 10(6): 779-782.
- 27 Fernandez EV, Reece KM, Ley A M, Troutman SM, Sissung TM, Price D K, ... & Figg WD: Dual targeting of the androgen receptor and hypoxia-inducible factor 1α pathways synergistically inhibits castration-resistant prostate cancer cells. Molecular pharmacology 2015; 87(6), 1006-1012.
- 28 Gadi N, Wu, SC, Spihlman AP & Moulton VR: What's Sex Got to Do With COVID-19? Gender-Based Differences in the Host Immune Response to Coronaviruses. Frontiers in immunology 2020; 11, 2147.
- 29 Sama IE, Ravera A, Santema BT, van Goor H, Ter Maaten JM, Cleland JGF,et al: Circulating plasma concentrations of angiotensinconverting enzyme 2 in men and women with heart failure and effects of renin–angiotensin–aldosterone inhibitors. Eur Heart J. 2020;41:1810–7.
- 30 Dalpiaz PLM, Lamas AZ, Caliman IF, Ribeiro RF, Abreu GR, Moyses MR, et al: Sex hormones promote opposite effects on ACE and ACE2 activity, hypertrophy and cardiac contractility in spontaneously hypertensive rats. PLoS One. 2015,10(5):e0127515.

- 31 Shen LW, Mao HJ, Wu YL, Tanaka Y, Zhang W. TMPRSS2: A potential target for treatment of influenza virus and coronavirus infections. Biochimie 2017;142:1-10.
- 32 Montopoli M, Zumerle S, Vettor R, Rugge M, Zorzi M, Catapano CV, et al: Androgen-deprivation therapies for prostate cancer and risk of infection by SARS-CoV-2: a population-based study (n=4532). Ann Oncol Off J Eur Soc Med Oncol 2020.
- 33 Patel VB, Zhong J-C, Grant MB, Oudit GY: Role of the ACE2/Angiotensin 1-7 Axis of the; Renin-Angiotensin System in Heart Failure. Circ Res 2016 118:1313–26
- 34 Gargaglioni LH & MarquesD A:Let's talk about sex in the context of COVID-19. Journal of applied physiology 2020.;128(6), 1533-1538.
- 35 Sarver, DC, & Wong GW: Obesity alters Ace2 and Tmprss2 expression in lung, trachea, and esophagus in a sex-dependent manner: Implications for COVID- 19. Biochemical and biophysical research communications 2021;, 538: 92-96.
- Zhou ZX, Lane M V., Kemppainen JA, French FS, Wilson EM:Specificity of ligand- dependent androgen receptor stabilization: receptor domain interactions influence ligand dissociation and receptor stability. Mol Endocrinol 1995;9(2):208–18
- Baratchian, M, McManus JM, Berk M, Nakamura, F, Mukhopadhyay S., Xu, W., ... & Sharifi N: Sex, androgens and regulation of pulmonary AR, TMPRSS2 and ACE2 BioRxiv 2020, 10.1101/2020.04.21.051201