

Changes in immunological characteristics of summer crew during a short term expedition to Antarctica

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Abstract

The aim of this study was to examine the effect of extreme climatic conditions and isolation on levels of pre-selected immunological parameters in humans. This article describes changes in immunological parameters measured in members of the 9th Czech Antarctic Scientific Expedition during their field work in Antarctica in summer time. The total of 15 sera samples were collected in the morning shortly before the expedition, the second collection was proved in the middle and the third in the end of stay at the Czech Polar station (Mendel station). The statistically significant difference appeared in eight of 11 parameters, from which the value of C3, C4, IgA, and number of monocytes decreased; level of IgG and number of non segmented neutrophils increased. The difference was showed also in the middle of stay, when the level of IgM, number of neutrophils and lymphocytes in the first part of stay decreased, in the second increased. The way of life in the station, physical performance and extreme climatic condition, probably positively affected the results of some studied immunological parameters.

Key words: Antarctica, extreme environment, austral summer, expedition, Mendel station, immunoglobulins

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Introduction

Antarctica is a continent with the most extreme climate (Turner et al. 2009, Muller et al. 1995b). The continent is inhabited only by temporary residents mostly consisting of scientists and support personnel. Long-term stays in Antarctica (or generally in the polar regions) may have significant

impacts on human health. Extreme cold, high levels of ultraviolet radiation, magnetic field disturbances, major differences in circadian cycle and extreme isolation are the main stressors in this area.

Several studies of immune changes in humans during long-term isolation have

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been performed, most of them took part in Antarctica and on the International Space Station (e.g. Rykova et al. 2006, Stratis et al. 2023). These studies revealed that during long-term stays in isolation and in extreme environmental conditions, multiple changes in the immune system may develop. Some changes were observed also during short-term stays in the polar regions.

Cell-mediated immune responses in relation to long-term isolation have been a part of long-term medical research programme of ANARE (Australian National Antarctic Research Expedition). The Australian authors have monitored immune responses of Australian winter-over groups on Antarctic and sub-Antarctic research stations during 1984-1992 period and found overall decrease in cell-mediated immune response by 36% (hypoergy). The underlying mechanisms of this finding were unclear (Muller et al. 1995a, Williams et al. 1986) and studied by Australian authors further. Tingate et al. (1997) have published the results of a long-term research. The authors reported the alterations in T-cell function, significant reduction in T-cell proliferation in response to phytohaemagglutinin, reduction in serum levels of pro-inflammatory cytokines and reactivation of latent herpesviral and Epstein-Barr-viral infections have been observed in winter-over Australian Antarctic expeditioners.

The effect of long-term isolation and extreme environmental conditions on humoral immune response in humans has been the object of a few studies by Muller et al. (1995a,b), Mishra et al. (2011, 2014) and Yadav et al. (2012). Immunoglobulins are one of the most important components of the immune system. Alterations in serum immunoglobulin levels may decrease the susceptibility to infectious diseases. In the study by Mishra et al. (2011), serum IgA has been assessed as a possible biomarker of environmental stress. The authors observed increase in IgA and

decrease in IgG serum levels during a 1-month ship journey to Antarctica and the same pattern during the 2-month stay at Maitri research station, Antarctica (Mishra et al. 2011). The authors stated that one month may be a sufficient period for the development of impaired immune responses in relation to isolation and environmental stress (Mishra et al. 2011). Another study performed at Maitri station confirmed increase in serum IgA, interferon gamma and TNFalpha during different periods of Antarctic winter in participants of the 28th Indian Antarctic Scientific Expedition (Yadav et al. 2012). In both Indian studies, levels of IgM showed no changes during Antarctic residence. The possible explanation for increases in serum IgA level during the isolation period is the role of hypothalamic-pituitary-adrenal axis in response to the environmental stress (Yadav et al. 2012). In contrary, Shearer et al. (2001) have evaluated the effect of an 8-month period of isolation on primary (IgM) and secondary (IgG) antibody responses to bacteriophage ΦX-174 at the Australian Antarctic station Casey. The expeditioners showed no signs of defective antibody responses during the stay in Antarctica (Shearer et al. 2001).

Mucosal immunity has been examined as a part of Australian Antarctic medical research programme in the 1990s. Francis et al. (2002) and Gleeson et al. (2000) have observed temporary decreases in serum IgA and IgM levels in different periods of year during long-term stays of personnel wintering at Australian Antarctic stations Mawson, Davis and Casey. Importantly, decreased salivary concentrations of IgA and IgM are associated with impaired mucosal immunity and higher risk of acquiring respiratory infection (Gleeson and Pyne 2000).

Further immunological research in Antarctica was focused on reactivation of latent viral infections during periods of long-term isolation. In most of the studies, increased frequency of herpesviral and Ep-

stein-Barr viral infections have been observed after long-term residency in Antarctica (Muller et al. 1995b, Tingate et al. 1997).

Majority of the Antarctic studies on changes in immune system have been performed during Antarctic winter or even

one-year-long periods of isolation at research polar stations. The aim of our study was to assess the effect of a 2-month stay (during Antarctic summer) at a research station in Antarctica on 11 pre-selected immunological parameters.

Material and Methods

Background (site description)

Mendel research station is a summer-operated Antarctic facility owned and run by Masaryk University, Czech Republic. The station is situated at the northern coast of James Ross Island, Antarctica, coordinates of the station are 63° 48' 05.06" S, 57° 53' 09.07" W, altitude 9 m a.s.l. (Prošek et al. 2013). Scientific research programme is focused on climatology, geology, paleontology, glaciology, biology of lower plants, microbiology and others. The 9th Czech Antarctic Scientific Expedition

(CASE) took part between December 2014 and February 2015. Twelve scientists and 3 support personnel participated in the expedition. The outside air temperature (AT) on James Ross Island during the stay in Antarctica was AT_{\max} 9.3°C, AT_{\min} -4.4°C and AT_{mean} 0.8°C. Measured ground radiation (GR) during the stay was GR_{\max} 1028 W.m⁻²; GR_{mean} 219 W.m⁻². Maximum recorded wind speed (WS) was 22.1 m.s⁻¹, WS_{mean} was 4.6 m.s⁻¹ (Kavan et al. 2016).

Subjects

Fifteen healthy subjects – participants of the 9th Czech Antarctic Scientific Expedition were included, of these 3 women and 12 men. Age of the participants ranged between 25 and 61 years (mean 37.9 years, median 35 years), mean Body Mass Index (BMI) was 25.36 (\pm 3.55). All the subjects

were healthy, none of the subjects was using any regular medication. For most of the expeditioners, the daily program usually included several hours of field work along with several hours of laboratory work.

Laboratory analyses

The procedures of pre-departure and during-Antarctic stay were identical. Blood samples have been collected in 3 series from the antecubital vein using one S-Monovette tube (plasma gel, 7.5 ml) (Sarstedt, Prague, Czech Republic). The first series were collected in the Czech Republic between December 23rd and 29th, 2014 (pre-departure), the second series after the first month of the Antarctic stay

(on January 20th, 2015) and the third series before the end of the stay in Antarctica (on February 10th, 2015). Of the 45 collected samples, sera were separated and frozen at -20°C, as partially described by Žáková et al. (2015).

Hematocrit and leucocrit were evaluated using the Bürker chamber in the laboratory of Mendel research station, Antarctica. Blood differential tests were performed

by counting subtypes of white blood cells (WBC) from peripheral blood using a microscope. A drop of blood from the sample was put on a glass slide and the Papanicolaou staining was used. In the blood differential, numbers of polymorphonuclear neutrophils, immature band neutrophils, lymphocytes, monocytes, eosinophiles and basophils were counted.

Serum levels of C-reactive protein (CRP), immunoglobulins M, G and A (IgM, IgG, IgA) and of complement com-

ponents C3 and C4 were assessed using reagent sets (BioSystems S.A., Barcelona, Spain) and ELISA reader (turbidimetric method) Rainbow (SLT Instruments, Oxford, UK). The blood samples taken in Antarctica were analyzed directly at Mendel research station.

Research within the project proceeded in accordance with the law (No. 96/2001 Coll. M. S. on Human Rights and Biomedicine and Act No. 101/2000 Coll. Privacy).

Ethical approval

Ethical approval for the study was obtained from the Ethical committee of the Faculty of Science, Masaryk University, Czech Republic and Ethical committee of

University Hospital Brno, Czech Republic. Written informed consent was obtained from each studied subject.

Statistical analyses

For each parameter, mean values, their standard deviations (SD) and medians were calculated. Paired t-test was used to com-

pare data from the Czech Republic and from Antarctica. Results were considered to be statistically significant if $p < 0.05$.

Results and Discussion

Changes in immunoglobulin A, M, G as well as blood characteristics evaluating the differences between initial state, *i.e.* data recorded before the Antarctic expedition and the two check points during the expedition stay at the Mendel Antarctic station (January 21st and February 10th, respectively) are summarized in Table 1. General trends in these parameters are shown in Fig. 1. In all expedition members, IgM in the second part of stay and IgG in the first part of stay showed increasing trend (Fig. 1), while IgA decreased with time of stay at the Mendel station.

Similarly to immunoglobulins, C3 and C4 complements decreased with the expedition time at Mendel station and showed

the differences (between the state before the expedition and second checkpoint, *i.e.* February 10th) described below: Level of C4, C3 complement, concentrations of IgA ($p < 0.01$), IgM ($p < 0.05$), and IgG ($p < 0.01$).

Statistically significant differences were found in 2 out of the 6 tested parameters related to urine (the pH value and the number of leukocytes in 1 μ l of urine – Žáková et al. 2015). In recent study, we have found statistically significant differences in the values of HDL cholesterol and uric acid. Statistically significant differences were, however, not observed in the values of total cholesterol, triglycerides, BMI, weight, energy, and meat intake (*c.f.* data from Žáková and Zezulová 2016).

Parameter	Before	CH 1	20.1.	CH 2	10. 2.	CH 3
C3 [g.L ⁻¹]	1.10 (0.59)	*	0.32 (0.02)		0.66 (0.21)	**
C4 [g.L ⁻¹]	0.34 (0.06)		0.36 (0.11)	**	0.27 (0.04)	**
Immunoglobulin A [g.L ⁻¹]	0.66 (0.12)	**	0.42 (0.16)	**	0.50 (0.06)	**
Immunoglobulin M [g.L ⁻¹]	0.17 (0.05)	**	0.10 (0.09)	**	0.16 (0.19)	*
Immunoglobulin G [g.L ⁻¹]	4.12 (0.17)	*	4.54 (0.49)		4.43 (0.30)	**
Leukocrit [10 ⁹ .L ⁻¹]	7.00 (2.33)		6.79 (1.38)		6.79 (1.72)	
Non-segmented neutrophils [10 ⁹ .L ⁻¹]	3.85 (2.96)		16.69 (4.47)	*	14.47 (4.93)	
Neutrophils [10 ⁹ .L ⁻¹]	66.31 (7.05)		70.46 (5.88)	*	36.07 (9.44)	
Monocytes [10 ⁹ .L ⁻¹]	5.54 (2.56)		3.92 (2.16)	**	3.67 (1.44)	
Lymphocytes [10 ⁹ .L ⁻¹]	22.31 (5.28)		8.46 (2.56)	*	42.80 (9.37)	
Eosinophiles [10 ⁹ .L ⁻¹]	1.85 (2.41)		0.29 (0.45)		2.20 (2.31)	

Table 1. Changes in immunological characteristics of the expedition crew (means and standard deviations – in brackets) evaluated before expedition, and two times during the Czech expedition to James Ross Island (Mendel station). The dates (20.1., and 10.2.) denote to January, 20th, and February 10th, 2015 respectively. Statistically significant differences are indicated by asterisks (* – $p < 0.05$; ** – $p < 0.01$).

Body Mass Index (BMI) after the stay was 25.43 (\pm 3.27) and did not show any statistically significant difference when compared to the BMI recorded before expedition. This is surprising and relates probably to food quantity and quality provided during the expedition. Earlier Antarctic expeditions of comparable short-term duration reported loss in body weight (Brotherhood et al. 1986). Overwintering crews, however, show increase in body weight and body fat as reported for Antarctica (*e.g.* Simpson and Mynard (2012) for the Rothera, UK station staff) and Arctic (Maciejczyk et al. 2017 for Polish polar station in Hornsund, Svalbard). However, even no change in body weight and BMI is reported from overwintering Antarctic crews (Bhatia and Pal 2013). Therefore, some variations BMI in Antarctic overwintering crews are considered to be season-dependent (Belkin and Karasik 1999, 2001; Simpson 2010) and attributed to the Ant-

arctic residence impacts on energy dynamics and aerobic fitness attributed to raised basal metabolic rates and increased thermogenesis.

Previous studies on immunoglobulins showed that stress do alter the immunity. Changes in IgA are the first line of defence against stressing environmental factors because of IgA dominance in the mucosal immune system. It is well established that many of the stressors present in the Antarctic environment are known to affect the mucosal immune system (Gleeson et al. 2000, Gleeson and Pyne 2000, Mishra et al. 2011, 2014). Our data indicate a decrease in immunoglobuline A. This is well comparable to the evidence reported for Indian Antarctic crew (Mishra et al. 2011). In the study, immunoglobuline G levels decreased with stress, as documented for the Antarctic crew passing different levels of seasickness during ship journey from Cape Town to Indian Antarctic station Maitri.

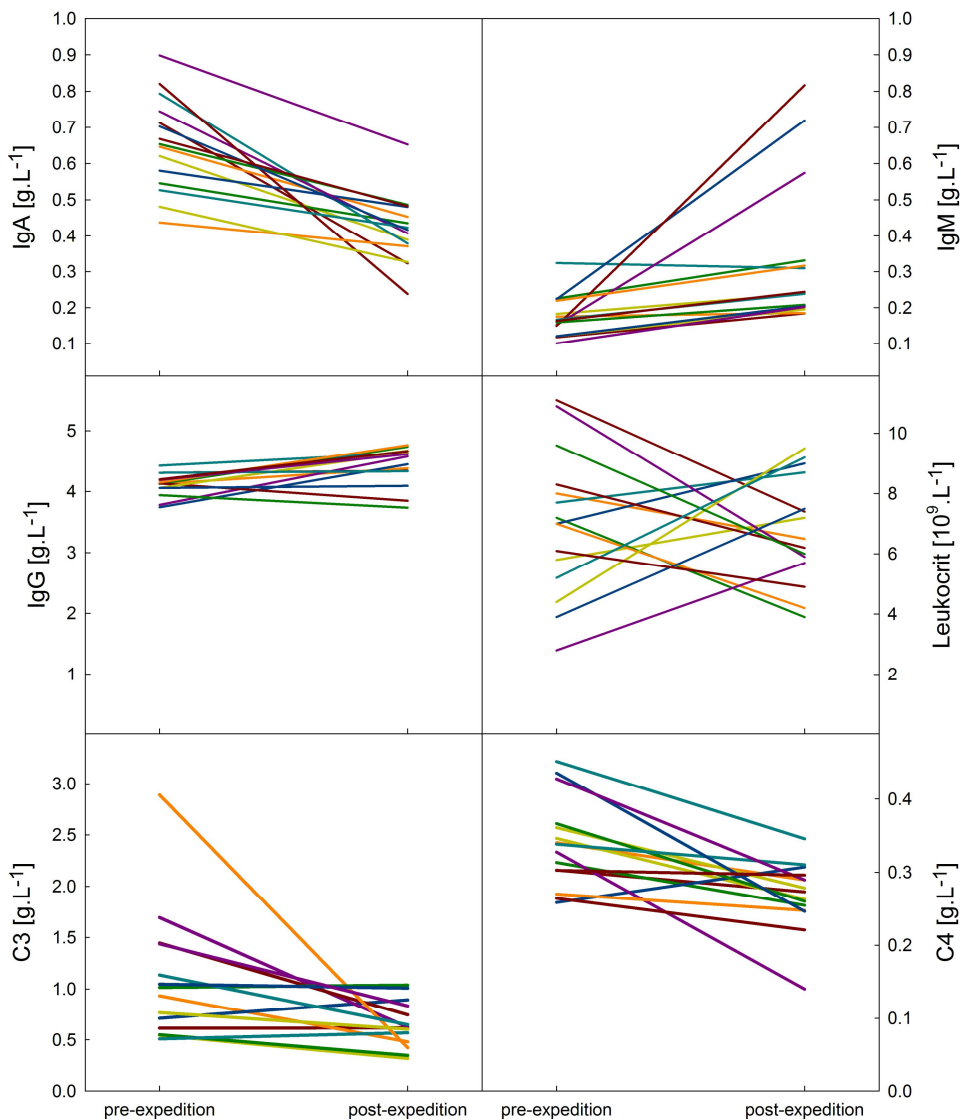


Fig. 1. Immunological parameters evaluated for 15 members of the austral summer season crew of the Mendel station (James Ross Island, Antarctica, before the expedition (1 at x-axis) and at the end of expedition (2 at x-axis)).

Both parameters (IgA, IgG) showed linear relationship with severity of seasickness. Our data on IgA and IgG had the same trends with stress strength (*i.e.* duration of the Antarctic expedition) as those reported by Mishra et al. (2011). Moreover, our data on IgA were not in agreement with a pioneering study of Roberts-

Thomson et al. (1985) reporting that individuals on the Antarctic ice-cap showed an increase in their IgA levels. Contrastingly, recent study of Bhushan et al. (2021) brings an evidence that both salivary and serum IgA increased as a result of Antarctic expedition of Indian crew (Bharati station and Larseman Hill camp).

Appart of serum IgA, several studies reported a significant change in salivary IgA as a consequences of intense physical exercise (see e.g. Nieman et al. 2002, Castilho et al. 2022). The relation, between serum/salivary IgA and coping with extreme Antarctic environment is, however, still poorly understood. The reason is that in Antarctic crews, the expedition members perform various activities which require different extensive physical activity. Therefore, the supression of imunology, typically demonstrated by IgA decrease is still to be studied in respect to stress sources for particular crew members including physiological factors (Ursin et al. 1991).

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