# <sup>1</sup> <u>Opinion Article</u> <sup>2</sup> Can selenite be an ultimate inhibitor of Ebola and other <sup>3</sup> viral infections?

#### 4 ABSTRACT

5 It is known that the virulence of Ebola and other RNA enveloped viruses involves in the first step their attachment to host cell membranes. Following this initial step the virus enters the 6 7 target cell cytoplasm by forming hydrophobic spikes that make holes in the membrane lipid bilayer. Formation of such spikes is catalyzed by the reduced form of viral protein disulfide 8 9 isomerase (PDI<sub>red</sub>)thus initiating chain of disulfide exchange reactions. Consequently, hydrophobic protein epitopes become exposed, which in the absence of proper chaperones form 10 hydrophobic 'spikes' capable of penetrating the host cell membranes. In this communication 11 evidence is discussed showing that the chain of disulfide exchange events can be inhibited by a 12 13 small redox molecule – sodium selenite. It is suggested that this inexpensive and readily available food supplement can be an ultimate inhibitor of Ebola and other enveloped viral 14 infections. 15

16 Key words: Ebola virus, hydrophobicity, protein disulfide exchange, sodium selenite

#### 17 Introduction

Selenium (Se) is a ubiquitous element that participates in various biochemical reactions in 18 human body. This metalloid, akin to sulfur, is present in numerous proteins forming so-called 19 mixed disulfides [1] that participate in thiol-disulfide exchange reactions [2]. Although 20 physiological function of selenium compounds is not well known, it has been recognized that Se 21 deficiency is associated with certain degenerative diseases[3, 4]. However, not all Se derivatives 22 23 are biologically active, and amongst various inorganic forms of Se, the best studied is its four-24 valention (selenite) that readily interacts with protein sulfhydryls (P-SH). Selenite can also interfere with and/or modify thiol/disulfide exchange reactions, particularly those occurring 25 during the attachment of viral glycoproteins to the host cell membranes catalyzed by protein 26 disulfide isomerase (PDI). Therefore, this specific form of inorganic selenium, which 27

inexpensive and readily available as a food supplement, can be used as an effective inhibitor of

29 Ebola and other enveloped virus infections.

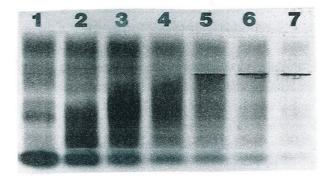
## 30 Disulfide exchange reactions in human proteins

31 Properties and functions of native proteins are maintained by intra-molecular disulfide bonds that

32 are positioned in such a way as to hide hydrophobic regions inside their tertiary structure[5].

- However, when one or more of the disulfides is reductively cleaved, the hydrophobic groups of
- polypeptide chain(s) are unmasked and allow them to react readily one with another [6].
- 35 Consequently, in the absence of proper chaperones the unfolded polypeptide chains become
- incorrectly refolded with the formation large hydrophobically bonded aggregates (Fig.1).

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Figure 1 shows that the limited reduction of plasma proteins results in the formation of large

40 aggregates that are not dissociable during gel electrophoresis and that are remarkably resistant to

dissolution by chaotropic solvents and proteolytic enzymes. We have previously shown that 41 similar insoluble aggregates are formed from fibrinogen under the reductive influence of iron-42 generated hydroxyl radicals [7] that was suggested to form a protective coat (parafibrin) around 43 the tumor cells and prevent their elimination by NK cells [8]. It is important for this paper to 44 note that the formation of parafibrin was demonstrated by us to be preventable by sodium 45 selenite and other oxidizing agents [9]. The unfolded polypeptides can also form complexes with 46 the hydrophobic tails of lipid molecules forming holes in the cell membrane bilayer [10]. It is 47 generally believed that this mechanism is responsible for the virus entry into the host cytoplasm 48 thus allowing its survival and multiplication [11]. 49

It is well established that RNA-virus multiplication starts with a critical event of its attachment to 50 the host cell membrane followed by virus entry into the cell [12, 13, 14]. To achieve this goal 51 Ebola and other double-stranded RNA viru  $\bigcirc$  are equipped with a relatively simple albeit not 52 obvious mechanism involving modulation of gp120 glycoprotein moiety [15]. After the initial 53 viral contact with the host cellular membrane a number of enzymes are activated that lead to the 54 55 reduction of at least one disulfide bond in the gp120 molecule [16, 17, 18]. Importance of this reaction for the human HIV infection was demonstrated in experiments with the use of agents 56 57 that interfered with the thiol/disulfide interchange [19]. So far, two enzymes were shown to be of importance in this exchange, namely protein disulfide isomerase (PDI) [20,21], and thioredoxin 58 59 reductase (Trx-R) [22, 23].

#### 60 Selenium and its therapeutic potential

Selenium (Se) is a ubiquitous albeit not uniformly distributed element in the soil of various 61 62 regions of Earth [24]. It is generally known that Se deficiency, both in the agricultural food products and in the human organism, is associated with various degenerative diseases, notably in 63 viral infections [25,26,27]. In view of the fact that supplementation with this element proved to 64 be beneficial for human heal 10 g. Keshan disease in China [28], numerous studies have been 65 66 undertaken to document beneficial effects of Se in human pathology. However, so far no unequivocal results have been reported, most likely because there is very little understanding of 67 the relationship between chemical forms of Se and its biological activity. 68

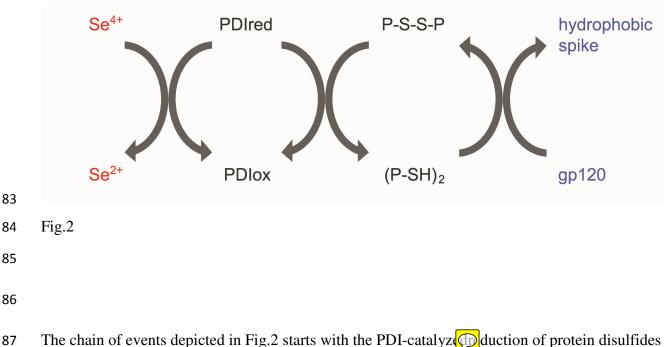
69 There are two classes of selenium compounds – inorganic and organic. In the former, the element occurs as a four-valent ( $Se^{4+}$ ) and six-valent ( $Se^{6+}$ ) cations. In the organic compounds 70 71 selenium exists as selenide mostly in the form of selenocysteine. In human body there are several selenoproteins, the function of which is not clearly understood. It should be, however, 72 73 strongly emphasized that the biological activity of inorganic forms of Se depends on their electronic structure. Thus, only  $Se^{4+}$  (selenite) abut not  $Se^{6+}$  (selenate) is a redox active entity. 74 75 This basic chemical fact is a source of misunderstanding when researches lump all forms of Se and just label them 'selenium'. It should be born in mind that only *four-valent* Se in the form of 76 sodium selenite can interact with free sulhydryl (-SH) groups of proteins to oxidize them to 77 disulfides according to the following formula: 78

79  $(P-SH)_2 + Se^{4+} \rightarrow P-S-S-P + Se^{2+}$ , where

80 *P* stands for protein polypeptide chain, and  $Se^{2+}$  is the reduced form of selenite. This chemical

81 equation is applicable to the mechanism by which selenite inhibits thiol/disulfide exchange

82 initiated by the viral PDI (Fig.2).



The chain of events depicted in Fig.2 starts with the PDI-catalyze duction of protein disulfides in the virus glycoprotein that opens up its hydrophobic epitopes. In the absence of specific chaperones the hydrophobic "spike" of gp120 makes a hole in the host bilayer membrane through which the virus can enter into the host cytoplasm with all its pathological consequences.

91 The most effective way to prevent this event is by inhibition of protein disulfide reduction that can readily be achieved with a timely administration of *sodium selenite*. This concept provides 92 93 an explanation, however tentative, why Se deficiencies are associated with enhanced infectivity of Ebola and other viruses [29]. Additionally, it is of interest to note that selenite inhibits TrxR 94 activity in a dose dependent manner [30], and at the same time increases NK cells potency [31]. 95 The latter may explain the fact that those ca. 30 percent of people who are resistant to Ebola 96 97 infections may have adequate blood concentrations of selenite and/or other electrophilic substances that can inhibit disulfide exchange and/or activate NK cells. An important argument 98 in favor of the importance of PDI activation in virus infections is the recently reported finding 99 that the inhibition of protein disulfide exchange prevents thrombo-hemorrhagic events so 100 101 characteristic for the Ebola-induced disease [32,33].

Of note, another small molecule, melatonin, was recently suggested as a potential therapeutic agent in Ebola virus infections [34]. In addition to this hormone's main functions in sleep and circadian rhythm regulations, melatonin is known to scavenge hydroxyl radicals by virtue of aromatic hydroxylation [35,36]. Hence it is possible that PDI-catalyzed disulfide exchange reaction involves intermediate free radicals vulnerable to the scavenging action of melatonin [37].

In view of the fact that sodium selenite is readily available as an inexpensive food supplement, 108 the concept presented in this article is particularly important for the protection of large 109 populations against threat of Ebola epidemics [38]. However, unjustified fear of selenite 110 "toxicity" has to be overcome, with the understanding that not all forms of this chemical exhibit 111 similar beneficial health effects. Although small doses of 100 µg/day of sodium selenite were 112 113 reported to increase the rate of poliovirus clearance, they may not be sufficient to prevent other viral infections [39, 40]. Other researchers have also reported that larger than recommended 114 doses of sodium selenite including continuous *i.v.* infusions were well tolerated by humans [41, 115 42] and by experimental animals [43]. However, it has to be noted that sodium selenite should 116 117 not be administered together with ascorbic acid, because this vitamin reduces selenite to an inactive divalent selenium ion. 118

Finally, it is not surprising albeit not immediately obvious that sodium selenite has been used toin the prevention and/or treatment of various forms of cancer [44, 45]. Similarly to viral PDI,

selenite inhibits disulfide exchange reactions in plasma proteins (specifically fibrinogen) and inthis way prevents the formation of a hydrophobic protective coat around tumor cells [8].

## 123 Conclusions

124 In spite of enormous complexity of biology and pathology of Ebola and other enveloped RNA viruses, there is one reaction that deserves our closer attention. This is the attachment of viral 125 126 gp120 glycoprotein, which initiates the fusion and entry of virus to the host cell. This process is controlled by a redox modulation of protein disulfide exchange that can be a target for antiviral 127 therapies. In this article evidence is presented that a specific chemical form of selenium, sodium 128 selenite, may offer an effective weapon against Ebola and other viral infections by the inhibition 129 130 of thiol/disulfide exchange reactions thus preventing virus entry and proliferation. Although this article reveals only tip of the iceberg, it is hoped that it will stimulate research efforts aimed at 131 preventing the emerging threat of Ebola virus epidemics by the use sodium selenite and other 132 redox-active molecules. 133

## 134 Legend to figures:

#### 135 **Fig.1**.

Agarose-gel electrophoretic pattern of human plasma incubated at 37°C with a reducing agent *dithiothreitol* at various times from 0 (line 1) to 30 min. (line 7). This figure shows that the reduction of disulfide bonds in plasma proteins results in a time-dependent formation of huge hydrophobic aggregates that are not dissociable in the electric field. Other experiments (data not shown) have revealed that such aggregates are remarkably resistant the proteolytic degradation.

## 141 Fig.2.

142 Chain of events initiated by viral protein disulfide isomerase (PDI<sub>red</sub>). It should be noted that a 143 singular event of the withdrawal of two electrons from the sulfhydryl groups of PDI<sub>red</sub> and their 144 transfer to the selenite cation (Se<sup>4+</sup>) results in the inhibition of protein disulfide reduction in the 145 gp120 molecules and subsequently prevents the formation of a hydrophobic spike.

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## 151 **REFERENCES**

152	1.	Wessjohann , L.A., Schneider, A., Abbas, M. and Brandt, W. (2007). Selenium in
153		chemistry and biochemistry in comparison to sulfur. Biol. Chem. 388,997–1006.
154	2.	Hondal, R.J., Marino, S.M. and Gladyshev, V.N. (2013). Selenocysteine in thioldisulfide-like
155		exchange reactions. Antioxid. Redox Signal. 18, 1675–1689.
156	3.	Rayman, M.P. (2000). The importance of selenium to human health. Lancet, 356, 233-
157		234.
158	4.	Lipinski, B. and Egyud, L.G.(1992). Thiol-induced crosslinking of human blood proteins.
159		Implications fortumor immunity. Bioorg. Med. Chem. Lett. 2, 919-924. Jackson, M.J.,
160		Broome, C.S. and McArdle, F.(2003). Marginal dietary selenium intakes in the UK: Are
161		there functional consequences? J.Nutr. 133, 1557S-1559S.
162	5.	Anfinsen, C.B. (1973). Principles that govern the folding of protein chains. <i>Science</i> ,
163		<b>181,</b> 223-30.
164	6.	Lipinski, B. and Egyud, L.G.(1992). Thiol-induced crosslinking of human blood proteins.
165		Implications fortumor immunity. <i>Bioorg. Med. Chem. Lett.</i> <b>2</b> , 919-924.
166	7.	Lipinski, B.and Pretorius E. (2012). Novel pathway of iron-induced blood coagulation:
167		implications for diabetes mellitus and its complications. Pol. Arch. Med. Wewn. 122, 115-
168		122.
169	8.	Lipinski, B. (2014). Cancer wars: significance of protein unfolding and its inhibition with
170		natural amphiphilic substances. Front. Oncol. doi:10.3389/fonc.2014.00183.
171	9.	Pretorius, E., Bester, J., Vermeulen, N. and Lipinski, B. (2012). Oxidation inhibits iron-
172		induced blood coagulation. Curr. Drug Targets, 14, 13-19.
173	10.	Stahelin, R.V. (2014). Membrane binding and bending in Ebola VP40 assembly and
174		egress. Front. Microbiol. 5,300. Doi: 10.3389/fmicb.2014.00300.
175	11.	Abell, B.A. and Brown, D.T. (1993). Sindbis virus membrane fusion is mediated by
176		reduction of glycoprotein disulfide bridges at the cell surface. J. Virol. 67, 5496–5501.
177	12.	Eckert, D.M. and Kim, P.S. (2001). Mechanisms of viral membrane fusion and its
178		inhibition. Annu. Rev. Biochem. 70,777–810. doi: 10.1146/annurev.biochem.70.1.777.
179	13.	Hofmann-Winkler, H., Kaup, F. and Pohlann, S. (2012). Host cell factors in filovirus
180		entry: Novel players, new insights. Viruses, 4, 3336-3362.
181	14.	Matthias, L.J. and Hogg, P.J. (2003). Redox control on the cell surface: implications for
182		HIV-1 entry. Antioxid. Redox Signal.5,133–138. doi: 10.1089/152308603321223621.
183	15.	Stantchev, T.S., Paciga, M., Lankford, C.R., Schwartzkopff, F., Broder, C.C. and Clouse,
184		K.A. (2012). Cell-type specific requirements for thiol/disulfide exchange during HIV-1
185		entry and infection. Retrovirology, doi: 10. 1186/1742-4690-9-97.
186	16.	Markovic, I., Stantchev, T.S., Fields, K.H., Tiffany, L.J., Tomic, M., Weiss, C.D.,
187		Broder, C.C., Strebel, K. and Clouse, K.A. (2004). Thiol/disulfide exchange is a
188		prerequisite for CXCR4-tropic HIV-1 envelope-mediated T-cell fusion during viral entry.
189		<i>Blood</i> , 103,1586-94.
190	17.	Zhou, Y. and Simmons, G. (2012). Development of novel entry inhibitors targeting
191		emerging viruses. Expert Rev. AntiInfect. Ther. 10, 1129-1138.
192	18.	Diwaker, D., Mishra, K.P. and Ganju, L. (2013). Potential roles of protein disulfide
193		isomerase in viral infections. ActaVirol.57, 293-304.
194	19	Ryser, H.J., Levy, E.M., Mandel, R. and Disciullo, G.J.(1994). Inhibition of human
195		immunodeficiency virus infection by agents that interfere with thioldisulfide interchange
196		upon virus-receptor interaction. Proc. Natl. Acad. Sci.USA, 91, 4559–4563.

197	20	. Khan, H.A. and Mutus, B. (2014). Protein disulfide isomerase a multifunctional protein
198		with multiple physiological roles. Front. Chem.Doi: 10.3389/fchem.2014.00070.
199	21	Dickerhof, N., Klefmann, T., Jack, R. and McCormick, S. (2011). Bacitracin inhibits the
200		reductive activity of disulfide isomerase by disulfide bond formation with free cysteines
201		in the substrate-binding domain. FEBS J.278, 20134-43.
202	22	. Reiser, K., François, K.O., Schols, D., Bergman, T., Jörnvall, H., Balzarini, J., Karlsson,
203		A. and Lundberg, M. (2012). Thioredoxin-1 and protein disulfide isomerase catalyze the
204		reduction of similar disulfides in HIV gp120. Int. J. Biochem. Cell. Biol.44,556-62.
205	23	. Yoshihara, E., Masaki, S., Matsuo, Y., Chen, Z., Tian, H. and Yodoi, J. (2013).
206	20	Thioredoxin/Txnip:redoxisome, as a redox switch for the pathogenesis of diseases. <i>Front</i> .
207		<i>Immunol</i> .Doi: 10.3389/fimmu.2013.00514.
208	24	. Cowgill, U.M. (1985). The distribution of selenium and cancer mortality in the
209	21	continental US. <i>Biol. Trace Elem. Res.</i> <b>5</b> , 345-361.
210	25	Beck, M.A., Levander, O.A. and Handy, J. (2003). Selenium deficiency and viral
210		infection. J. Nutr.133,1463S-1467S.
212	26	. Dworkin, D.M. (1994) Selenium deficiency in HIV infections and the acquired
212	20	immunodeficiency syndrome (AIDS). <i>ChemBiol Interact.</i> <b>91</b> ,181-6.
213	27	. Harthill, M. (2011). Review: micronutrient selenium deficiency influences evolution of
215	21	some viral infectious diseases. <i>Biol. Trace Elem. Res.</i> <b>143</b> , 1325-36.
215	28	. Chen J. An original discovery: selenium deficiency and Keshan disease (an endemic
210	20	heart disease). Asia Pac J ClinNutr. 2012;21:320-6.
217	29	. Gill, H. and Walker, G. (2008). Selenium, immune function and resistance to viral
218	2)	infections. <i>NutrDiet</i> .65(Suppl 3),S41-S47.
220	30	. Huang F., Huang, J., Lv, Q., Yang, Y., Wu, G. and Xu, C. (2013). Selenite induces
220	50	apoptosis in colorectal cells through interaction with thioredoxin reductase. <i>BMB Rep.</i>
222		pii: 2370
223	31	. Kiremidjian-Schumacher, L., Roy, M., Wiche, H.I. and Stotzky, G. (1996).
223	51	Supplementation with selenium augments the function of natural killer and lymphokine-
225		activated killer cells. <i>Biol. Trace Element Res.</i> <b>52</b> , 227-39.
225		activated Riffer Cens. Diot. Trace Liement Res. 52, 227-57.
226	32	. Flaumenhaft, R., Furie, B. and Zwicker, J.I. (2014). Therapeutic implications of protein
227		disulfide isomeraseinhibition in thrombotic disease. Arterioscler. Thromb. Vasc. Biol.pii:
228		ATVBAHA.114.303410.
229	33	. Mor-Cohen, R. (2014). Disulfide bonds as regulators of integrin function in thrombosis
230		and hemostasis. Antioxid. Redox Signal. 2014 Oct 14
231	34	. Tan, D.X., Reiter, R.J. and Manchester, L.C. (2014). Ebola virus disease: Potential use of
232		melatonin as a treatment. J. Pineal Res. 2014 Sep 27. doi: 10.1111/jpi.12186.
233	35	. Galano, A., Tan, D.X. and Reiter, R.J.(2013). On the free radical scavenging activities of
234		melatonin's metabolites, AFMK and AMK.J. Pineal Res. 54, 245-57. doi:
235		10.1111/jpi.12010.
236	36	. Lipinski, B. (2011). Hydroxyl radical and its scavengers in health and disease. Oxid. Med.
237		Cell Longev. DOI: 10.1155/2011/809969.
238	37	. Hudson, D.A., Gannon, S.A. and Thorpe, C. Oxidative protein folding: From thiol-
239		disulfide exchange reactions to the redox poise of the endoplasmic reticulum. Free Radic.
240		Biol. Med.pii: S0891-5849(14)00354-2. doi: 10.1016/j.freeradbiomed.2014.07.037
241	38	. Sanmartin, C., Plano, D., Font, M. and Palop, J.A. (2011). Selenium and clinical trials:
242		new therapeutic evidence for multiple disease. Curr. Med. Chem. 18, 4635-50.
		=

243 244 245 246 247 248 249 250	<ol> <li>Manzanares, W. and Hardy, G. (2009). Selenium supplementation in the critically ill: posology and pharmacokinetics. <i>Curr. Opin. Clin. Nutr. Metab. Care</i>, 12, 273-80.</li> <li>Cermelli, C., Vincenti, M., Scaltriti, E., Bazzani, E., Beretti, F., Vivoli, G. and Portolani M. (2002). Selenite inhibition of Coxsackie virus B5 replication; implications on the etiology of Keshan disease. <i>J.TraceElem.Med.Biol</i>.16, 41-6.</li> <li>Burk, R.F., Nortsworthy, B.K., Hill, K.E., Motley, A.K. and Byrne, D.W. (2006). Effects of chemical forms of selenium on plasma biomarkers in high-dose human supplementation trial. <i>Cancer Epidemiol. Biomarkers Prev</i>.15, 804-810.</li> </ol>
251	42. Forceville X. (2013). The effect of selenium therapy on mortality in patients with sepsis
252	syndrome: simple selenium supplementation or real (5 H2O)·Na2SeO3 pharmacological
253	effect?Crit Care Med. 41,1591-2. doi: 10.1097/CCM.0b013e31829106e5.
254	43. Bhattacharya, R.S., Husbeck, B., Feldman, D. and Knox, S.J. (2008). Selenite treatment
255	inhibits LACP-4 tumor growth and prostate specific antigen secretion in a xenograft
256	model of human prostate cancer. Int. J. Radiat. Oncol. Biol. Phys. 72, 935-940.
257	44. Lipinski B. Prostate cancer vaccines, fibrin and selenium: A conceptual review. <i>Open</i>
258	Prostate Cancer J. (2010). <b>3,</b> 69-73.
259	45. Kralova, V., Brigulova, K., Cervinka, M. and Rudolf, E. (2009). Antiproliferative and
260	cytotoxic effects of sodium selenite in human colon cancer. <i>Toxicol. In Vitro.</i> 23, 1497-
261	1503.
262	
263	
264	
265	