

Identifying therapeutic strategies in Gulf War Illness using systems biology

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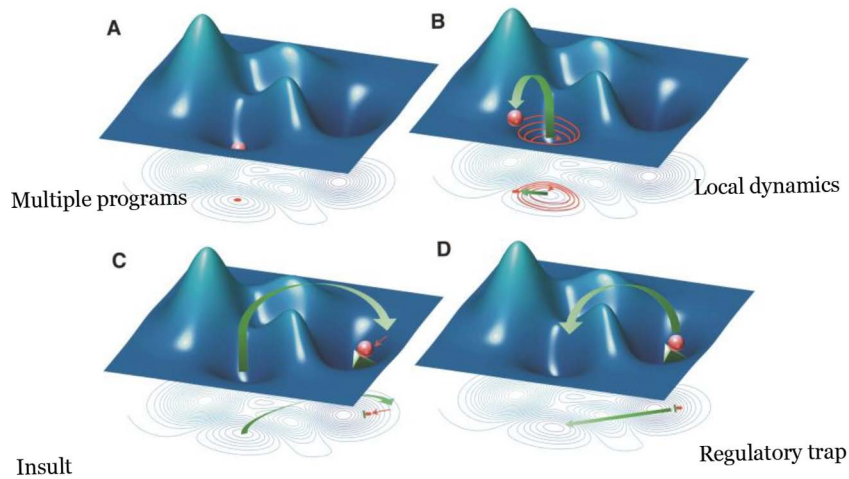
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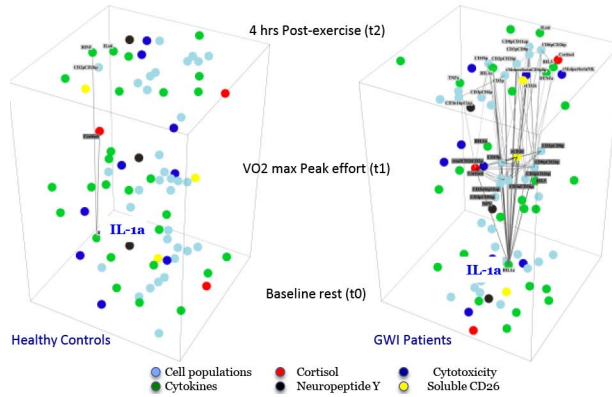


Persistence and homeostasis



The mediators

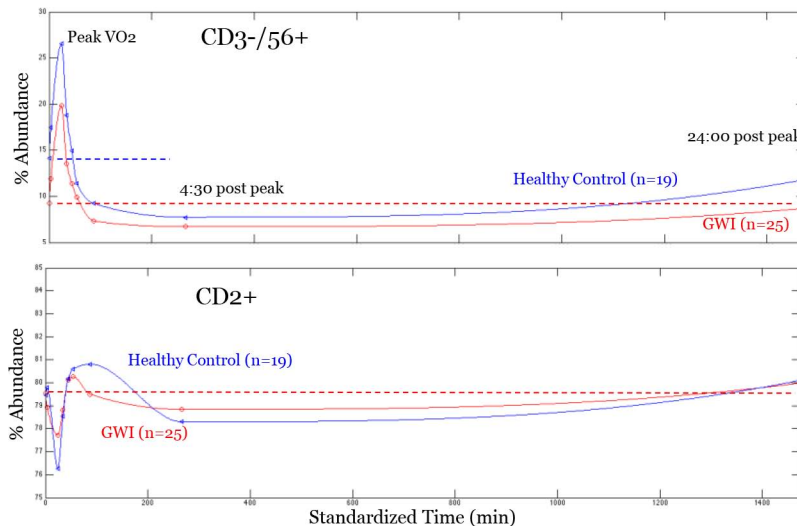
- Characteristic networks *emerge* from small changes



Characteristic IL-1a cascade
(Anakinra *under review by DoD*)

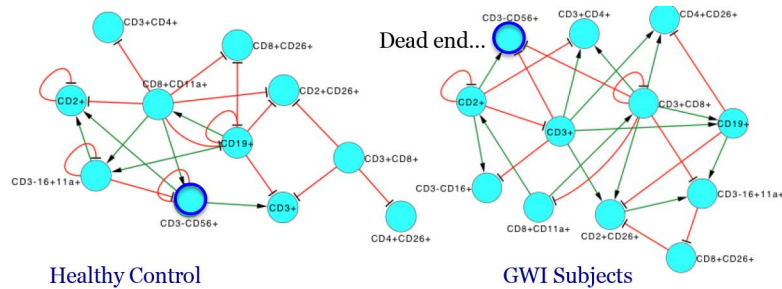


The populations



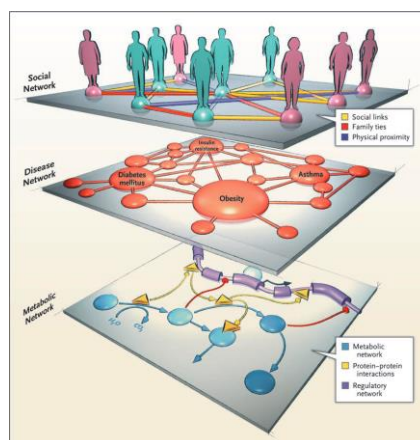
The populations

- Evolving structure implies *information flow*



Decreased CD3-/56+ NK *information throughput* (betweenness) in GWI

From transcript to behavior

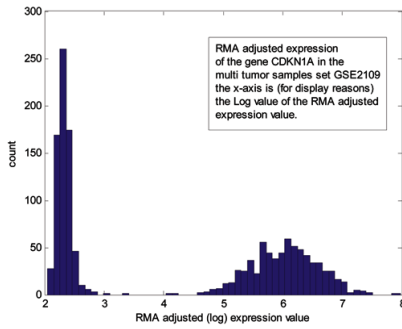


Vertical as well as horizontal integration

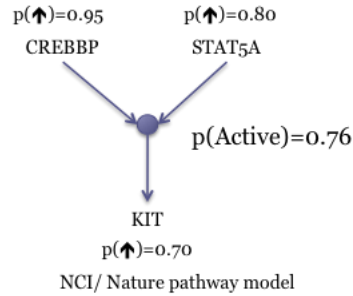
Barabási A.-L. Network Medicine — From Obesity to the "Diseasome". *N Engl J Med* 2007; 357:4

A transcript-based logic

- Estimating compliance and activity of known pathways



Up and Down states

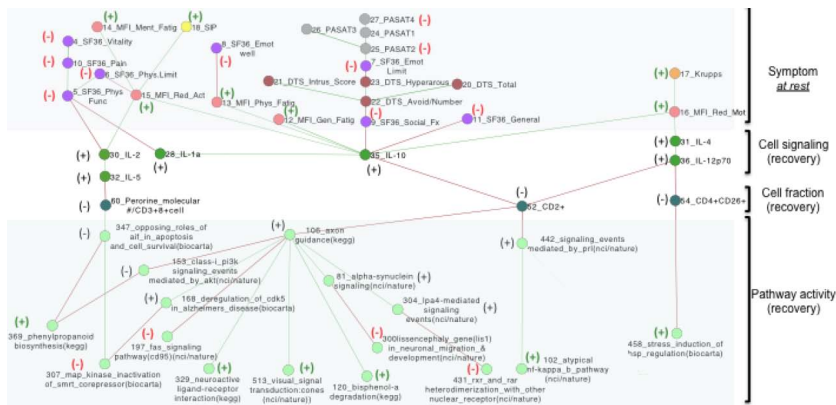


A discrete pathway logic



From pathway to behavior

- Quality of life mediated at behavioral interface...



IL-1, IL-10 link fatigue, cognition to [neurogenesis](#) and [NF-κB](#) activity



Naltrexone and NF- κ B

PLC β /PKC/IKK

- Mu-opioid receptor (MOR) \rightarrow NF- κ B induction
- increased IL-1; exaggerated IL-6, TNF- α response to mitogen.

JLB

Article

Opioid-induced chemokine expression requires NF- κ B activity: the role of PKC ζ

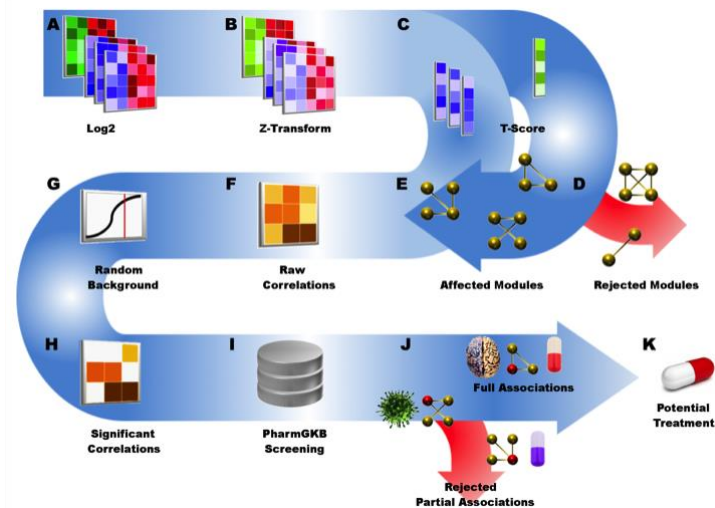
Christine Happel,^{1,2,3} Michèle Kutler,^{1,2} and Thomas J. Rogers^{1,2,3,4}

¹The Institute for Cancer Research and Molecular Biology, ²Center for Substance Abuse Research, and Departments of ³Microbiology and Immunology and ⁴Pharmacology, Temple University School of Medicine, Philadelphia, Pennsylvania, USA
RECEIVED JULY 15, 2010; REVISED SEPTEMBER 15, 2010; ACCEPTED SEPTEMBER 25, 2010. DOI: 10.1189/jlb.0710087

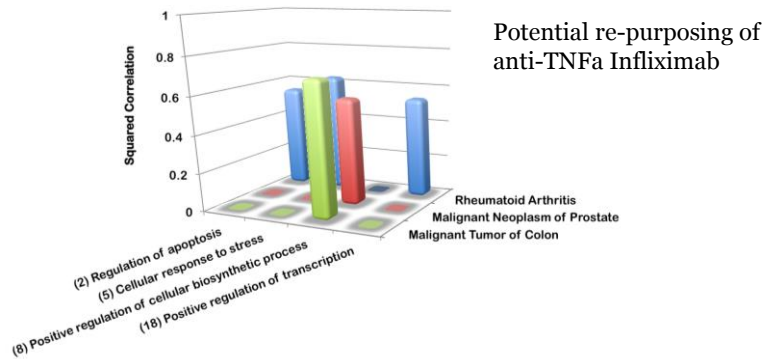
Happel et al., 2011



Mining Drug-action data



Mining Drug-action data



Significant correlation r^2 of Gulf War Illness with 3 of 54 candidate illnesses based on gene expression in 4 of 54 DAVID functional modules GEO database



Emerging avenues

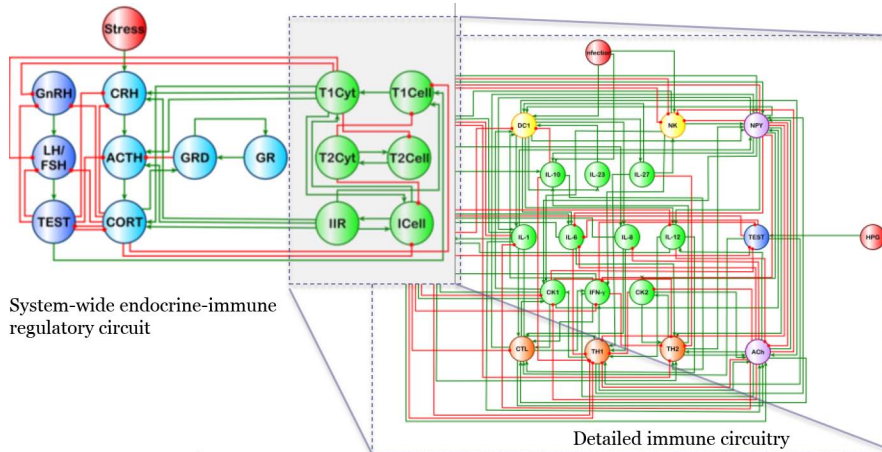
- Candidate targets
 - IL-1 modulation of inflammatory cascade (*Anakinra –under review by DoD*)
 - NF-kB modulation (μ -opioid receptor antagonist Naltrexone)
 - Re-purposing from RA of anti-TNF α (Infliximab)

- But *how* exactly should these be manipulated?



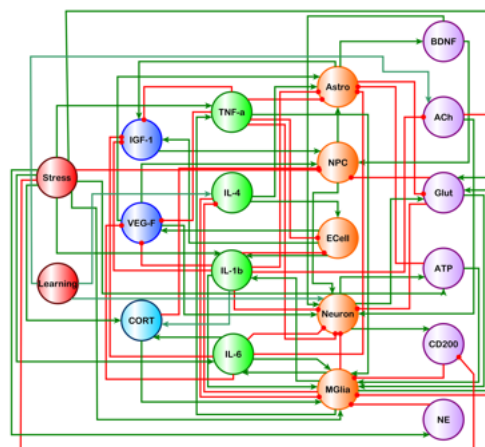
Using what we know

- *directed interaction* meets *a priori* knowledge



Using what we know

- Simulating neuro-inflammation using *a priori* knowledge

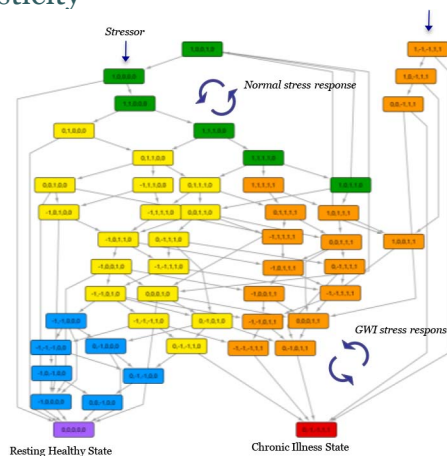


Regulatory contribution

- Regulatory contribution: overlap with naturally occurring regimes
 - Depressed testosterone
 - Elevated cortisol, NPY
 - Pro-inflammatory immune signature (classic Th1 and Th17)
 - Align with persistent neuro-inflammatory cascade
- Compounded by altered wiring – epigenetic modifications?

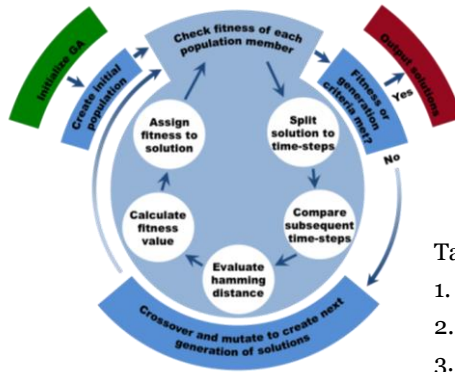
Frame by frame sequence

- Alternate realities of neuroendocrine-immune plasticity



Stability analysis of HPA-HPG-immune co-regulation (Craddock et al., 2014)

Treatment trajectory



Target combines *multiple objectives*:

1. Solution must adhere to model
2. Converge to healthy stable point
3. Be minimally invasive

Emerging avenues

- Designing interventions that make optimal use of the body's own "regulatory pull"
 - Early simulations indicate coordinated manipulation of multiple targets may be required.
 - Targets include combined GR blockade and Th1 modulation (e.g. anti-TNF α)
 - So far no viable single-point intervention escapes regulatory pull

Using a little muscle



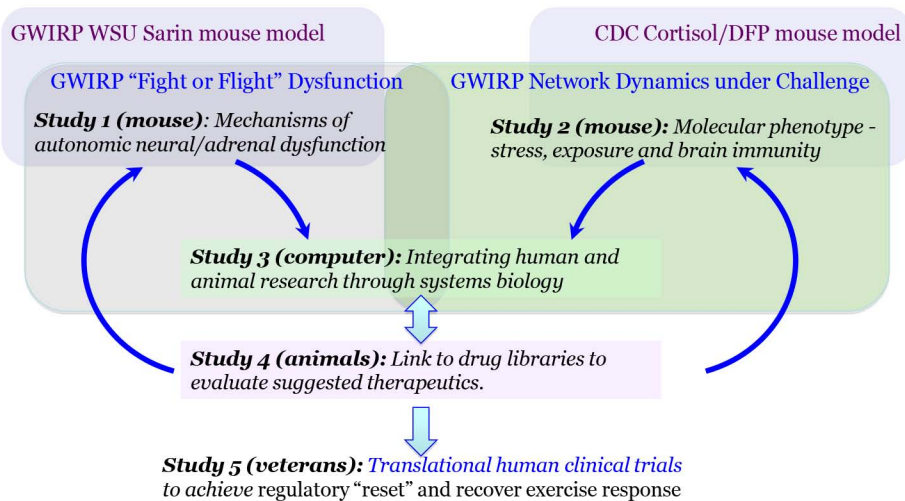
Pegasus Platform
CCS University of Miami

Supercomputer
to bedside

One week run time on 7000 CPU generating 0.3 TB of data



Building momentum with critical mass



Acknowledgement of Funding

