



LUND UNIVERSITY

Chronic helicobacter infection of the human liver and bile are common and may trigger autoimmune disease.

Wadström, Torkel; Ljungh, Åsa

Published in:
Current Gastroenterology Reports

2002

[Link to publication](#)

Citation for published version (APA):
Wadström, T., & Ljungh, Å. (2002). Chronic helicobacter infection of the human liver and bile are common and may trigger autoimmune disease. *Current Gastroenterology Reports*, 4(5), 349-50. <http://www.current-reports.com/contents.cfm?Volume=4&Issue=5>

Total number of authors:
2

General rights

Unless other specific re-use rights are stated the following general rights apply:
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

Read more about Creative commons licenses: <https://creativecommons.org/licenses/>

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

LUND UNIVERSITY

PO Box 117
221 00 Lund
+46 46-222 00 00

Chronic *Helicobacter* Infection of the Human Liver and Bile Are Common and May Trigger Autoimmune Disease

Torkel Wadström, MD and Åsa Ljungh, MD

Address

Department of Medical Microbiology, Dermatology, and Infection,
Lund University, Sölvegatan 23, S-223 62 Lund, Sweden.
E-mail: torkel.wadstrom@mmb.lu.se</P

Current Gastroenterology Reports 2002, 4:349–350

Current Science Inc. ISSN 1522-8037

Copyright © 2002 by Current Science Inc.

After the rapid decline of leptospirosis as a cause of bacterial hepatitis and jaundice in Eastern Europe before the mid-20th century, research on viral hepatitis has exploded. It seems likely that continuing discovery of "new viruses" has delayed the search for new fastidious microbes as possible initiating causes of chronic human liver disease. However, the discovery of important new intestinal pathogens such as *Campylobacter jejuni* as a dominating cause of diarrhea in humans, and *Helicobacter pylori* as the dominating cause of chronic gastritis worldwide, has encouraged studies in various animal species as well. Today more than 20 *Helicobacter* species are well defined and isolated from the stomach, intestine, and liver of rodents and other animals. Several of these species have also been detected in extragastric specimens from humans with chronic infection and malignant diseases [1,2]. The recent discovery that two bile-tolerant species, *H. bilis* and *H. hepaticus*, cause chronic hepatitis in mice prompted studies for these and other gastric, usually bile-tolerant species, like *H. pylori* and intestinal bile-resistant organisms such as *H. cinaedi* and *H. pullorum*, first classified as new *Campylobacter* species [3–5]. Avenaud *et al.* [6] detected a new species, *Helicobacter* "liver," with close similarity to *H. pylori* in liver tissue of patients with malignant liver disease, later confirmed by us [7].

Some of these species cause acute and chronic infections, primarily in patients with HIV-AIDS and other immunosuppressive states. Interestingly, recent studies in interleukin-10 knockout and SCID mice show that these immunodeficient mice commonly develop chronic colitis and possibly chronic hepatitis as well [1,8]. Such a syndrome was first described in the past year in rhesus monkeys, and it may thus exist in other primates, including humans [9]. One new *Helicobacter* species was also

described recently in a semiprimate, the cotton-top tamarin, with chronic inflammatory bowel disease (IBD)-like colitis [10]. The first report that *H. hepaticus* and *H. bilis* cause chronic cholangitis and biliary disease came from Chile with a proposal of a zoonotic transmission from rodents, and possibly other existing reservoirs [11]. This report encouraged studies on the possible role of these and other fastidious microorganisms of such putative animal pathogens in primary sclerosing cholangitis (PSC) and primary biliary cirrhosis (PBC) [3,5]. Together, these results, and a first report on *Helicobacter* detection by polymerase chain reaction (PCR) in cholangiocarcinoma that developed in PSC patients and patients with other liver cancers [12], suggest that more extensive systemic studies are needed. It seems likely that adaptation to gastric bile reflux may select for various gastric and intestinal *Helicobacter* species and other microaerophilic microbes to invade the biliary tract and human liver by 1) an ascending infection or 2) transport by bloodborne macrophages similar to the situation in chronic salmonellosis in animals and humans.

However, the continuous discovery of nonculturable new species such as *H. suis* (previously *H. heilmannii*) strongly suggests that PCR-based as well as immunodiagnostic methods should be developed to study these infections and their relation to ulcerative colitis and other forms of IBD, MB Sjögren syndrome, and possibly other autoimmune diseases. The development of specific serology for *H. pullorum* indicates that intestinal infections with this pathogen may be common in Scandinavia (Wadström T, Unpublished results), and that a search for other emerging foodborne pathogens such as *Arcobacter* species should be performed based on recent congress reports suggesting these microbes as possible new human liver pathogens. Moreover, animal models to study these infections should be developed, and further attempts to cultivate the organisms from liver specimens in naturally and experimentally infected animals should be performed.

References

1. Fox JG, Schauer DB, Wadström T: **Enterohepatic *Helicobacter* spp.** *Curr Opin Gastroenterol* 2001, 17:S28–S31.

2. O'Rourke J, Grehan M, Lee A: **Non-pylori Helicobacter species in humans.** *Gut* 2001, 49:601–606.
3. Bulajic MMM, Jovanovic IRBMM, Loehr M: **Helicobacter pylori infection in patients with bile duct malignancies.** *Gut* 2000, 47:A90.
4. Monstein HJ, Jonsson Y, Zdolsek J, Svanvik J: **Identification of Helicobacter pylori DNA in human cholesterol gallstones.** *Scand J Gastroenterol* 2002, 37:112–119.
5. Wadström T, Ljungh Å, Willén R: **Primary biliary cirrhosis and primary sclerosing cholangitis are of infectious origin!** *Gut* 2001, 49:454.
6. Avenaud P, Marais A, Monteiro L, *et al.*: **Detection of Helicobacter species in the liver of patients with and without primary liver carcinoma.** *Cancer* 2000, 89:1431–1439.
7. Nilsson HO, Taneera J, Castedal M, *et al.*: **Identification of Helicobacter pylori and other Helicobacter sp by PCR, hybridization and partial DNA sequencing in human liver samples from patients with primary sclerosing cholangitis or primary biliary cirrhosis.** *J Clin Microbiol* 2000, 38:1072–1076.
8. Chin EY, Dangler CA, Fox JG, Schauer DB: **Helicobacter hepaticus infection triggers inflammatory bowel disease in T cell receptor a,b mutant mice.** *Compar Med* 2000, 50:586–594.
9. Fox JG, Handt L, Sheppard BJ, *et al.*: **Isolation of Helicobacter cinaedi from the colon, liver, and mesenteric lymph node of a Rhesus monkey with chronic colitis and hepatitis.** *J Clin Microbiol* 2001, 39:1580–1585.
10. Saunders KE, Shen Z, Dewhirst FE, *et al.*: **Novel intestinal Helicobacter species isolated from cotton-top tamarins (Sanguinus oedipus) with chronic colitis.** *J Clin Microbiol* 1999, 37:146–151.
11. Fox JG, Dewhirst FE, Shen Z, *et al.*: **Hepatic Helicobacter species identified in bile and gallbladder tissue from Chileans with chronic cholecystitis.** *Gastroenterology* 1998, 114:755–763.
12. Nilsson HO, Mulchandani R, Tranberg KG, *et al.*: **Helicobacter species identified in human livers from patients with cholangio- and hepatocellular carcinoma.** *Gastroenterology* 2001, 120:323–324.