



## Complement-mediated Killing of *Leishmania martiniquensis* Promastigotes

A. Phumee<sup>a</sup>, P. Siriyasatien<sup>b</sup>, W. Saksirisampant<sup>b\*</sup>

<sup>a</sup> Department of Medical Technology, School of Allied Health Sciences, Walailak University, Nakhon Si Thammarat, Thailand.

<sup>b</sup> Department of Parasitology, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand.

### Authors' contributions

This work was carried out in collaboration among all authors. Authors WS designed the work and contributed to the drafting of the manuscript. Authors WS, AP conducted laboratory work and interpretation of the results, authors AP, WS Performed the data analysis. All authors have approved the final manuscript and agree to be held accountable for all aspects of the work.

### Article Information

#### Open Peer Review History:

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here: <https://www.sdiarticle5.com/review-history/82743>

Original Research Article

Received 06 November 2021

Accepted 13 January 2022

Published 15 January 2022

### ABSTRACT

**Background:** Leishmaniasis caused by various species is now an emerging autochthonous disease. *L. martiniquensis* was described first from a human case in Martinique island and to date is frequently causing human infections in many countries. To eliminate the invading pathogen, complement activation of the innate system plays an effective role in the host's defense. This study aims to test the parasitocidal activity of the complement activation against *L. martiniquensis* promastigotes.

**Methods:** An in vitro examination of parasite mortality rate incubated in fresh normal human serum (NHS) was performed compared to heat-inactivated, and ion chelated sera.

**Results:** We observed a lethal effect on the parasite when exposed to fresh NHS. Our parasites when tested with heat-inactivated at 56 °C for 30 min and ethylene diamine tetra acetic acid (EDTA) chelated sera indicated complement dependent parasitocidal activity. Ethyleneglycol tetraacetic acid (EGTA) chelated, and EDTA+MgCl<sub>2</sub> treated sera demonstrated that *L. martiniquensis* promastigotes activated the complement via alternative pathway. This pathway was also revealed when the parasite was subjected to zymosan treated sera and that of the heat inactivated (50 °C for 15 min). Interestingly, positive mannose-binding lectin (MBL) of the parasite surfaces demonstrated by using anti- MBL antibody immunofluorescent test.

**Conclusion:** The parasitological activity is antibody independent mediated via the alternative pathway. The involvement of MBL could not exclude. These preliminary data might provide a further study for the explanation of the immune evasion strategy of the *Leishmania* species.

**Keywords:** Complement; *leishmania martiniquensis*; promastigote; alternative pathway; mannose-binding lectin.

## 1. INTRODUCTION

Leishmaniasis is caused by parasites belonging to the genus *Leishmania* [1]. More than 20 species have been determined as human pathogens which endemic in many countries, including, the Middle East, Central and North America, Indian subcontinent, and Mediterranean basins [1]. The parasites have a digenetic life cycle, composed of the vertebrate host (amastigote stage) and an insect vector (promastigote stage) [2]. The disease is transmitted to vertebrate hosts by the bite (intradermal inoculation of the promastigote) of an infected female sandfly [3]. *L. martiniquensis*, firstly discovered on Martinique Island, is now the cause of autochthonous disease in the majority of cases of many countries [4,5]. Clinical presentation of this species infection includes diffuse cutaneous, visceral, and overlapping diffuse cutaneous and visceral forms [6,7]. The infected cases are mostly found in immunocompromised patients [8]. Innate response principally plays an important first line against pathogens. A number of studies showed the lethal effect on various pathogens which depend upon the complement activation by forming the membrane attack complex (MAC) and promoting an inflammatory reaction [9,10]. There are three major pathways of the complement system: classical, alternative, and lectin. The binding of antibodies to the parasites will initiate the classical pathway, while the binding of mannose-binding lectin (MBL) can activate the lectin pathway. An alternative pathway can be directly activated by the pathogen's molecule [11]. *Leishmania* stays inside the host cell in form of amastigote might be the manner for escaping complement attack, as a survival strategy and propagation are not well understood [12]. The humoral factor of the complement system showed the lethal effect on many species includes *L. major*, *L. mexicana*, *L. chagasi*, *L. infantum*, and others [13]. In vitro of those studies, more than 80% of the promastigotes exhibited lysis within minutes after being cultured

with fresh normal human sera (NHS). The process was mediated by the alternative pathway of complement which is antibody independent [13].

The present study examines the lethal effect on *L. martiniquensis* promastigotes when incubated with fresh NHS, and various conditions of sera treatment. To destroy or inactivate all complement systems and have only the alternative pathway done, sera were heated at 56°C, 30 min, and 50°C, 15 min. Serum treatment with divalent chelate ions of EDTA (calcium and magnesium chelating) to inactivation both classical and alternative pathways were used. In addition, those treated with EGTA (calcium chelating) to destroy only the classical pathway have also been studied. More testing is undertaken in zymosan treated serum because this polysaccharide composed primarily of glucan and mannan residues can predominantly activate the complement system through the alternative complement pathway. The suspected MBL on our *L. martiniquensis* promastigotes surface was revealed by an anti-MBL immunofluorescence antibody test. Results obtained from this study may increase understanding of the host innate defense of the complement system, the parasite evasion strategies, and immuno-pathogenicity of the infection.

## 2. MATERIALS AND METHODS

### 2.1 Parasite, Sera, and Chelating Agents

*L. martiniquensis* promastigotes used were that from a leishmaniasis patient of southern Thailand (CU1 isolate) [14]. The parasites were cultured in Schneider's Insect Medium (Sigma-Aldrich, USA) at a pH of 6.7 supplemented with 10% heat-inactivated fetal bovine serum, 100 U/ml penicillin, and 100 µg/ml streptomycin. The cells were maintained at 25±2°C and inspected for viability every 24 h under an inverted microscope (Olympus, Japan). In this experiment, stationary phase promastigotes were harvested by

centrifugation (1,100xg at 20°C for 10 min) and washed twice in 1x phosphate buffer saline (PBS) (Sigma-Aldrich, USA).

Five sera donors (male, age 21-22 years old) from the 3<sup>rd</sup>-year-student of the faculty of Allied Health Sciences, Chulalongkorn University, who have no history of leishmaniasis, and are negative for Leishmanial antibody test were consent to use. The blood was taken, allowed to clot at 4°C for 2 h, and subjected to a refrigerated centrifuge (400xg for 20 min). The decanted NHS was aliquoted and stored at -80°C until further use. The experiments were carried out with sera that were frozen and thawed only once in order to minimize the inactivation of complement.

Different chelating agents, EDTA (Sigma-Aldrich, USA) and EGTA (Sigma-Aldrich, USA) were prepared as a stock solution of 12 mM. Mg<sup>++</sup> ion in form of MgCl<sub>2</sub> (Sigma-Aldrich, USA) was provided at a concentration of 8 mM in order to add in the chelated sera for accession the requirement ion for alternative pathway process. Zymosan suspension (Sigma-Aldrich, USA) in PBS and boiled to sterilize was prepared. The concentration of the chelating agents and zymosan suspension used as described [15] were tested for viability prior to treatment because high concentrations of the agents may directly affect the parasite.

Fresh NHS were mixed with a chelating agent and zymosan (ratio 1:1), and incubated at 37 C for 30 min. The zymosan was removed from the treated sera by centrifugation at 2,000 rpm for 30 min at 4 C. The pre-treated sera were all then centrifuged at 3,200 rpm for 20 min prior to use.

## 2.2 *In vitro* Test for Parasitocidal Activity

The lethal effect on *L. martiniquensis* promastigotes (10<sup>6</sup> parasites/ml) was determined by reacting the with various conditions/ treatment of the sera and incubated at 25±2°C in a plastic tissue culture plate (Corning, USA) at a ratio of 1:1 (volume by volume) for 15, 30, and 60 min.

Analysis of *L. martiniquensis* promastigotes killing was performed by gently mixing of 20 µl reacted promastigotes with 20 µl of trypan blue solution stock (Sigma-Aldrich, USA), and kept at room temperature for 5 min. Then, 10 µl of the

cells were counted on a hemocytometer for the number of viable (unstained with trypan blue) and dead (stained with trypan blue) cells. The mortality rate in percentage was calculated.

## 2.3 Immunofluorescence Analysis

An immunofluorescence test was performed to detect MBL on the parasite surface. Our cultured *L. martiniquensis* promastigotes with fresh NHS and 56°C 30 min heated sera were smeared onto microscope slides, air-dried, and fixed in 4% paraformaldehyde (Sigma-Aldrich, USA). The cells were permeabilized with 1xPBS containing 1% BSA and 0.1% Triton for 10 min. Slides were washed and reacted with rabbit monoclonal anti-MBL antibody (Abcam, Cambridge, UK) in PBS and tris-buffer containing 10% normal horse serum at concentration 1:500 for 2 h at room temperature. The slides were then incubated with a secondary antibody (goat anti-rabbit IgG fluorescence (Alexa fluor®488) (Abcam, Cambridge, UK) at a concentration of 1:1000 and left for 30 min before examination under a fluorescence microscope at 494 nm (Olympus, Japan).

## 3. RESULTS

Incubation of *L. martiniquensis* promastigotes with fresh NHS exhibited the maximum killing of the parasite (74.0, 94.6 and 90.6%) at 15, 30, and 60 mins, respectively (Fig. 1). This lethal effect of sera became undetectable by diluting the serum beyond 1:16. (Table 1). The effects were all significantly abrogated (5.6-5.8%) in heated serum (at 56°C for 30 min) which indicated that the activity was heat-labile, suggesting the involvement of complement in the process. Based on the variance, among the different incubation periods (15, 30, and 60 mins) they are not significantly different which indicated that the complement action can complete within a short time period (15 mins). Factor B of the alternative pathway appeared to be more labile than other complement components. The mortality rate of our parasite in 50°C for 15 min heated sera showed a significant decrease from 90.6% to 27.8% (at 60 mins) which was associated with the alternative pathway activation (Fig. 1).

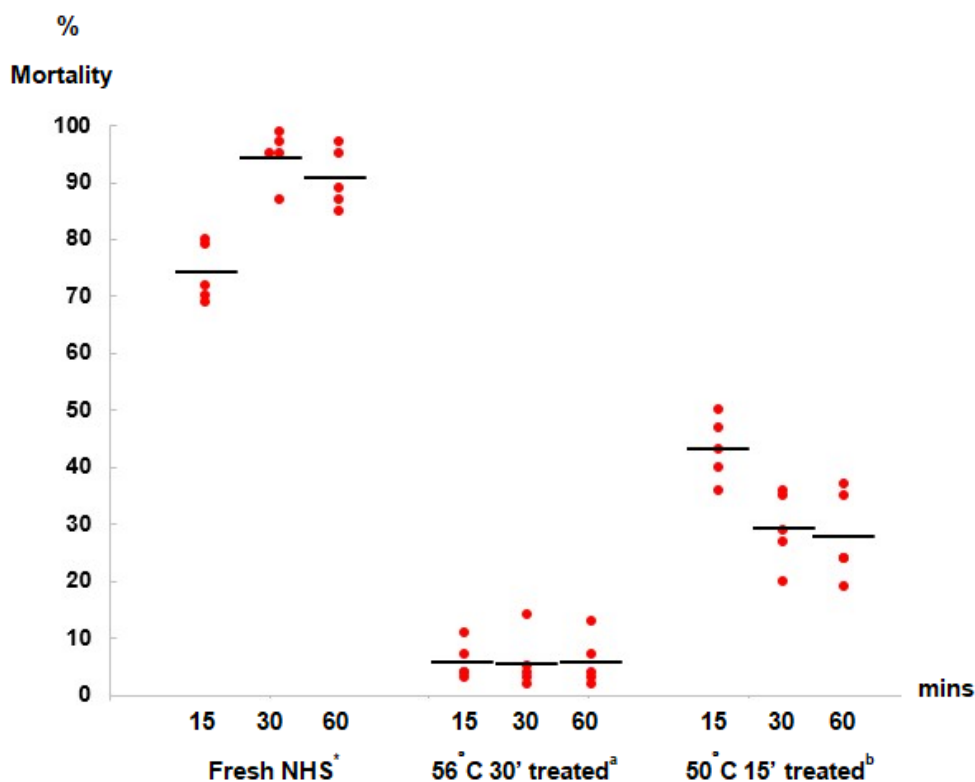
To obtain further evidence for supporting the above suggestion, our fresh NHS was then

treated with a chelating agent. All divalent cations including Ca<sup>++</sup> and Mg<sup>++</sup> would be chelated in EDTA treated sera, thus all the three pathways of complement activation are blocked. When EGTA was added to the serum, only Ca<sup>++</sup> would be chelated and the alternative pathway which requires Mg<sup>++</sup> could still be activated. In the experiment, alternative pathway activation was optimized by adding an extraneous source of Mg<sup>++</sup> to the EDTA treated serum for essential ions providing.

In our study concentration of 6 mM of neither the EDTA nor EGTA had any effect when incubated with our promastigote. Four mM MgCl<sub>2</sub> added to the parasite culture medium also did not affect our parasite survival. The fresh NHS was treated with EGTA at a final concentration of 6 mM to selectively chelate Ca<sup>2+</sup>, thus stopping both the classical and MBL pathways activation, but not the alternative pathway which requires Mg ions. This did not subsequently decrease the parasiticidal activity, since the parasite was

mostly killed in EGTA treated serum (78.2% mortality rate, (range 65-82% Table 1). The results indicate that the parasiticidal activity was inhibited in EDTA-treated sera whereas most promastigotes were killed in EGTA treated sera, suggesting the involvement of alternative pathways in this process. The addition of MgCl<sub>2</sub> (4 mM) in EDTA chelated sera showed that *L. martiniquensis* promastigotes can activate the alternative complement pathway. (86.4% mortality rate, (range 78-95%) Table 1).

However, we confirmed the pathway by pretreatment of fresh NHS with zymosan. Zymosan is known to activate or consume complement predominantly via the alternative pathway. Incubating the promastigotes with this agent (40 mg/ml) exhibited no effect on the parasite. In the experiment, the alternative depleted serum reduced the percentage of the mortality (from 90.6 ± 2.3 to 47.8 ± 5.6%, Table1).



**Fig. 1. Percentage of parasite mortality rate incubated with undiluted fresh normal human sera, heat-treated sera (56 °C 30 min) and (50°C 15 min) against *L. martiniquensis* promastigotes at the different time intervals of 15, 30, and 60 mins**

\*, Fresh normal human serum is the untreated sera of control used in the system.

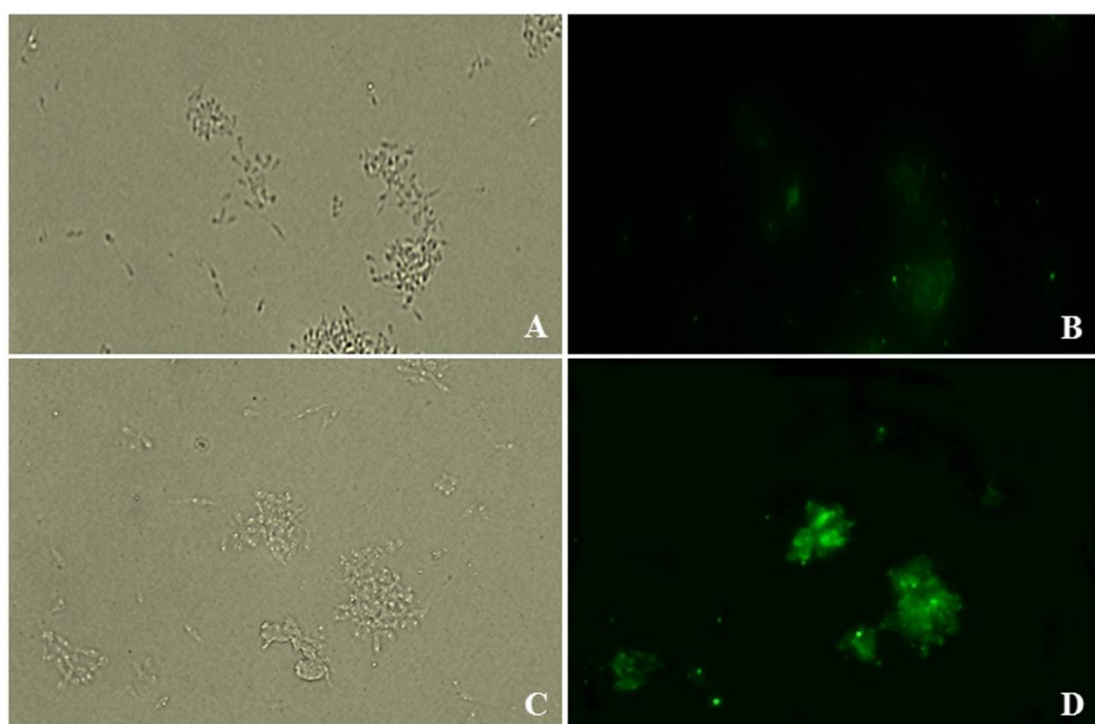
<sup>a b</sup>, Values within a row with different treatment are significantly different ( $P < 0.01$ ; T-test)

**Table 1. Effect of chelating agents on parasiticidal activity of fresh normal human sera against *L. martiniquensis* promastigotes**

Treatment of Fresh normal human sera	% Mortality at 60 min incubation	
	range	mean $\pm$ SE
Untreated**	85-97	96,6 $\pm$ 2.3
1:4 diluted	70-80	73.2 $\pm$ 1.9
1:8 diluted	4-36	16.2 $\pm$ 5.4
1:16 diluted	4-15	8.8 $\pm$ 2.0
1:32 diluted	2-10	4.8 $\pm$ 1.4
6 mM EDTA	28-40	32,6 $\pm$ 2.2 <sup>c</sup>
6 mM EGTA	65-82	78,2 $\pm$ 3.6
6 mM EDTA + 4 mM MgCl <sub>2</sub>	78-95	86,4 $\pm$ 3.1
40 mg/ml Zymosan	33-62	47,8 $\pm$ 5.6 <sup>c</sup>

\*\* Untreated is the control used in the system

<sup>c</sup> Values within a column with different treatment are significantly different ( $P < 0.01$ ; T- test)



**Fig. 2. Bright-field microscopic images of immunofluorescence staining using an anti-MBL antibody (magnification 40x) for *L. martiniquensis* promastigotes incubated in heated NHS at 56°C for 30 min (A, B) and fresh NHS (C, D)**

We observed the presence of MBL on our promastigotes surface incubated with fresh NHS by immunofluorescence test using a monoclonal anti-MBL antibody. Surface MBL-negative binding was detected when the parasite was cultured in heat-activated NHS (at 56 °C for 30 min) (Fig. 2 A, B). In contrast, the anti-MBL antibody showed positive staining around the surface of the cell which was exposed to fresh NHS (Fig. 2 C, D).

#### 4. DISCUSSION

In this study, the data presented suggest that *L. martiniquensis* promastigotes can be readily killed when exposed to fresh NHS. The lethal effect of the serum is complement-dependent, since the activity was inhibited by heat inactivation (56 °C for 30 min) and by EDTA treatment. It is generally accepted that EDTA would chelate all divalent cations including Ca<sup>2+</sup>

and  $Mg^{2+}$ , thus all pathways of complement activation are blocked [11]. Only  $Ca^{2+}$  ions would be chelated by EGTA, thus the alternative pathways requiring  $Mg^{2+}$  ions would still be activated [11]. Parasite mortality is diminished by pre-treatment of the serum with either zymosan or anti-human factor B which indicated a proceeding activation of the alternative pathway. The selective factor B can be destroyed by heating the serum at  $50^{\circ}C$  for 15 min. The activity can be restored by the addition of purified human factor B (data not shown). The involvement of the alternative pathway in these parasiticidal processes is strongly suggested.

Investigation for MBL of the surface demonstrated positive using the immunofluorescence test. MBL is a well-known complement activator and an efficient opsonin. Binding and promoting lysis of live promastigotes of *L. braziliensis* by MBL were reported [16]. Results of our study show that the biological circumstance of the parasiticidal action in normal serum has not been unexpected. The clinical outcome and severity reported of this disease greatly depend upon the species of *Leishmania* and the host immune situation [17,18]. Our results are the first to demonstrate the complement-mediated killing of the species *L. martiniquensis* promastigotes in vitro study. The results were compared to the treating/ chelating NHS which revealed that the parasiticidal activity depends upon the alternative pathway; an antibody-independent process. This parasite killing process requires  $Mg^{2+}$  but not  $Ca^{2+}$  since the process was inhibited by zymosan treated sera which suggested an activation proceeds via an alternative pathway. However, the involvement of the MBL pathway might not exclude.

There is a question of which complement pathways are critical in resistance or clearance of *Leishmania* in the infected vertebrate host. An alternative complement pathway is seen as the major essential pathway that can eliminate various species of the *Leishmania* pathogen [13]. *L. donovani* (the Sudan strain), *L. major* (strains 1-S and 252), *L. braziliensis guyanensis*, *L. dependent* on human serum and would activate the alternative complement pathway [13,19]. Complement mediated clearance of *L. tropica* and *L. enriettii* promastigotes by NHS was shown to be antibodies or C4 independent, but

mediated by the alternative pathway following the formation of C5b-9 MAC [20,21]. The IgM antibody in *Leishmania* activated the complement by the classical pathway leading to promastigote agglutination and death as in *L. donovani* was reported [22-24]. *Leishmania* promastigotes that are covered by a surface protein such as the gp63 metalloproteinase, proteophosphoglycans (PPGs), abundant lipophosphoglycan (LPG), and the MBL have been shown [18,25].

Serum MBL binding of *L. braziliensis* promastigotes also suggested the possible contribution of the lectin pathway in the pathogen killing [16]. MBL is a calcium-dependent plasma lectin that can bind to various microorganisms. It has shown a strong association with the severity of microbial infections [12,26]. The binding of MBL by the pathogen could subsequently spur complement activation by increasing uptake of PMN (opsonophagocytosis) [11]. This process needs further research and observation for the species *L. martiniquensis*. It may explain the increased risk of these microorganism infections in MBL-deficient individuals [27]. Interestingly, there are reports demonstrating that the level of MBL is directly associated with pathogenesis and the likelihood of developing visceral leishmaniasis upon *L. chagasi* infection [28,29].

Nevertheless, to promote parasite clearance many mechanisms and/or pathways have been elucidated during the recent decades. Interaction between parasites and macrophages, different species are recognized by a variety of host cell receptors not only complement receptors (CRs), and mannose receptors but also Fc receptors (FcRs), fibronectin, and others [30]. These may impact the fate of intracellular parasite conditions as well as the course of infection. In addition, in this protozoa, infection autophagy has been currently shown to adaptively interact with the host cells in controlling leishmaniasis [31].

## 5. CONCLUSIONS

Data presented in this experiment suggested that *L. martiniquensis* promastigotes are readily killed following exposure to fresh NHS. To the best of our knowledge, this is the first study examining alternative pathways and the presenting of surface MBL of this species of *L. martiniquensis* promastigotes. Future studies should focus attention on the important role of the complement

system and interaction of the host cell (macrophage) receptor and the parasite *L. martiniquensis* to help deepen our understanding of parasite evasion strategies, host immunity, and pathogenicity.

## CONSENT AND ETHICAL APPROVAL

The experimental procedures used in this study were approved by the Institutional Review Board of the Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand (COA No. 768/2012). Sera donors were explained for the purpose with written informed consent.

## ACKNOWLEDGEMENTS

We would like to thank the Program Management Unit for Human Resources & Institutional Development, Research and Innovation - CU (Grant No. B16F630071), Thailand Science Research Innovation (TSRI)-CU (Grant No. FRB640001), and NIH/NIAID/CREID/07-049-7012-52338 for supporting. Moreover, we greatly appreciated the help from Mr. Nattaphon Jarujun and Wasin Suwanrattanamanee and Ms. Jaruratt Prownebon the staff of Department of Parasitology, Faculty of Medicine, Chulalongkorn University, Thailand.

## COMPETING INTERESTS

Authors have declared that no competing interests exist.

## REFERENCES

1. Maxfield L, Crane JS. Leishmaniasis. Treasure Island (FL): StatPearls Publishing; 2017. Accessed 5 September 2017. Available: <https://www.ncbi.nlm.nih.gov/books/NBK430685/>
2. Akhoundi M, Kuhls K, Cannet A, Votýpka J, Marty P, Delaunay P, Sereno D. A historical overview of the classification evolution and dispersion of Leishmania parasites and sandflies. PLOS Neglected Tropical Diseases. 2016;3(3):e0004349. DOI: 101371/journalpntd0004349
3. Mhadhbi M, Sassi A. Infection of the equine population by Leishmania parasites. Equine Veterinary Journal. 2020;52(1):28-33. DOI: 101111/evj13178
4. Jariyapan N, Daroontum T, Jaiwong K, Chanmol W, Intakhan N, Sor-Suwan S, Siriyasatien P, Somboon P, Bates MD, Bates PA. Leishmania (Mundinia) orientalis n sp (Trypanosomatidae) a parasite from Thailand responsible for localised cutaneous leishmaniasis. Parasites and Vectors. 2018;18(1):351. DOI: 101186/s13071-018-2908-3
5. Pothirat T, Tantiworawit A, Chaiwarith R, Jariyapan N, Wannasan A, Siriyasatien P, Supparatpinyo K, Bates MD, Kwakye-Nuako G, Bates PA. First isolation of Leishmania from Northern Thailand: case report identification as *Leishmania martiniquensis* and phylogenetic position within the Leishmania enriettii complex. PLOS Neglected Tropical Diseases. 2014;4(12):e3339. DOI: 101371/journalpntd0003339
6. Chusri S, Hortiwakul T, Silpapojakul K, Siriyasatien P. Consecutive cutaneous and visceral leishmaniasis manifestations involving a novel Leishmania species in two HIV patients in Thailand. American Journal of Tropical Medicine and Hygiene. 2012;87(1):76-80. DOI: 104269/ajtmh201211-0749
7. Suankratay C, Suwanpimolkul G, Wilde H, Siriyasatien P. Autochthonous visceral leishmaniasis in a human immunodeficiency virus (HIV)-infected patient: the first in Thailand and review of the literature. American Journal of Tropical Medicine and Hygiene. 2010;82(1):4-8. DOI: 104269/ajtmh201009-0434
8. Leelayoova S, Siripattanapong S, Manomat J, Piyaraj P, Tan-Ariya P, Bualert L, Mungthin M. Leishmaniasis in Thailand: A review of causative agents and situations. American Journal of Tropical Medicine and Hygiene. 201;796(3):534-542. DOI: 104269/ajtmh16-0604
9. Abbas AK, Lichtman AH, Pillai S. Cellular and molecular immunology. 10th ed. San Francisco: Saunders Publishers; 2021.
10. Shao S, Sun X, Chen Y, Zhan B, Zhu X. Complement evasion: An effective strategy that parasites utilize to survive in the host. Frontiers in Microbiology 2019;20:532. DOI: 103389/fmicb201900532
11. Bellanti JA. Immunology IV Clinical applications in health and disease. 4th ed. Washington DC: I Care Press; 2012.

12. Walker DM, Oghumu S, Gupta G, McGwire BS, Drew ME, Satoskar AR. Mechanisms of cellular invasion by intracellular parasites. *Cellular and Molecular Life Sciences*. 2014;71(7):1245-1263. DOI: 101007/s00018-013-1491-1
13. Gurung P, Kanneganti TD. Innate immunity against *Leishmania* infections *Cellular Microbiology*. 2015;17(9):1286-1294. DOI: 101111/cmi12484
14. Phumee A, Jariyapan N, Chusri S, Hortiwakul T, Mouri O, Gay F, Limpanasithikul W, Siriyasatien P. Determination of anti-leishmanial drugs efficacy against *Leishmania martiniquensis* using a colorimetric assay. *Parasite Epidemiology and Control*. 2020; 19:e00143. DOI: 101016/j.parepi2020e00143
15. Sirisinha S, Rattanasiriwilai W, Puengtornwatanakul S, Sobhon P, Saitongdee P, Koonchornboon T, Complement-mediated killing of *Opisthorchis viverrini* via activation of the alternative pathway. *International Journal for Parasitology*. 1986;16(4):341-346.
16. Ambrosio AR, De Messias-Reason J. *Leishmania* (Viannia) *braziliensis*: Interaction of mannose-binding lectin with surface glycoconjugates and complement activation An antibody-independent defence mechanism. *Parasite Immunology*. 2005;27(9):333-340. DOI: 101111/j1365-3024200500782x
17. Maia CS, Monteiro MC, Gavioli EC, Oliveira FR, Oliveira GB, Romão PR. Neurological disease in human and canine leishmaniasis-clinical features and immunopathogenesis. *Parasite Immunology*. 2015;37(8):385-393. DOI: 101111/pim.12203
18. Veras PST, Ramos PIP, de Menezes JPB. In search of biomarkers for pathogenesis and control of leishmaniasis by global analyses of *Leishmania*-infected macrophages. *Frontiers in Cellular and Infection Microbiology*. 2018;19;8(8):326. DOI: 103389/fcimb201800326
19. Mosser DM, Burke SK, Coutavas EE, Wedgwood JF, Edelson PJ, *Leishmania* species: Mechanisms of complement activation by five strains of promastigotes. *Experimental Parasitology*. 1986; 62(3):394-404. DOI: 101016/0014-4894(86)90048-2
20. Hoover DL, Nacy CA, Macrophage activation to kill *Leishmania tropica*: defective intracellular killing of amastigotes by macrophages elicited with sterile inflammatory agents. *Journal of Immunology*. 1984;132(3):1487-1493.
21. Mosser DM, Edelson PJ. Activation of the alternative complement pathway by *Leishmania* promastigotes: parasite lysis and attachment to macrophages. *Journal of Immunology*. 1984;132(3):1501-1505.
22. Domínguez M, Toraño A. Immune adherence-mediated opsonophagocytosis: The mechanism of *Leishmania* infection. *Journal of Experimental Medicine*. 1999; 4(1):25-35. DOI: 101084/jem189125
23. Mendes APO, Oliveira BC, Pereira AMS, Castro MCAB, Souza MA, Brito MEF, Araújo FF, Teixeira-Carvalho A, Martins-Filho OA, Pereira VRA. American tegumentary leishmaniasis diagnosis using *L (V) braziliensis* fixed promastigotes: a comparative performance of serological tests and spontaneous cure identification. *BMC Infectious Diseases*. 2019; 29(1):1015. DOI: 101186/s12879-019-4642-7
24. Navin TR, Krug EC, Pearson RD. Effect of immunoglobulin M from normal human serum on *Leishmania donovani* promastigote agglutination complement-mediated killing and phagocytosis by human monocytes. *Infection and Immunity*. 1989;57(4):1343-1346. DOI: 101128/IAI5741343-13461989
25. Yao C, Donelson JE, Wilson ME. The major surface protease (MSP or GP63) of *Leishmania* sp Biosynthesis regulation of expression and function. *Molecular and Biochemical Parasitology*. 2003;132(1):1-16. DOI: 101016/s0166-6851(03)00211-1
26. Shen W, Xiao L, Li Y, Zhou D, Zhang W. Association between polymorphisms in mannose-binding lectin 2 gene with pulmonary tuberculosis susceptibility. *Hereditas*. 2020;3(1):33. DOI: 101186/s41065-020-00146-w
27. van Asbeck EC, Hoepelman AI, Scharringa J, Herpers BL, Verhoef J. Mannose binding lectin plays a crucial role in innate immunity against yeast by enhanced complement activation and



- enhanced uptake of polymorphonuclear cells. BMC Microbiology. 2008;18(8):229.  
DOI: 101186/1471-2180-8-229
28. Alonso DP, Ferreira AF, Ribolla PE, de Miranda Santos IK, do Socorro Pires e Cruz M, Aécio de Carvalho F, et al. Genotypes of the mannan-binding lectin gene and susceptibility to visceral leishmaniasis and clinical complications. The Journal of Infectious Diseases. 2007;15(8):1212-1217.  
DOI: 101086/512683
29. Santos IK, Costa CH, Krieger H, Feitosa MF, Zurakowski D, Fardin B, Gomes RB, Weiner DL, Harn DA, Ezekowitz RA, Epstein JE. Mannan-binding lectin enhances susceptibility to visceral leishmaniasis. Infection and Immunity. 2001; 69(8):5212-5215.  
DOI: 101128/IAI6985212-5215 2001
30. Ueno N, Wilson ME. Receptor-mediated phagocytosis of Leishmania: Implications for intracellular survival. Trends in Parasitology. 2012;28(8):335-44.  
DOI: 10.1016/j.pt.2012.05.002.
31. Veras PST, de Menezes JPB, Dias BRS. Deciphering the role played by autophagy in leishmania infection. frontiers in immunology. 2019;1(10):2523.  
DOI: 10.3389/fimmu.2019.02523

© 2022 Phumee et al.; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

*Peer-review history:*

*The peer review history for this paper can be accessed here:  
<https://www.sdiarticle5.com/review-history/82743>*