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## Guest Editorial

### Stress, Inflammation, and Autoimmunity: The 3 Modern Erinyes



There is no more relevant time to be addressing the effect of stress as the health, economic, and emotional stressors associated with coronavirus disease 2019 have engulfed the entire planet.<sup>1</sup> Stress has been particularly apparent among health care workers, who are more exposed and susceptible to infection as well as to the emotional strain of caring for patients with severe acute respiratory syndrome coronavirus 2.<sup>2</sup>

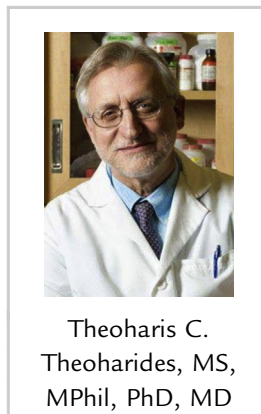
Stress, inflammation, and autoimmunity may stand for the Erinyes of modern times. In ancient Greek mythology, the Erinyes, also known as the Furies, were female chthonic deities of vengeance, especially for crimes committed against the natural world order.<sup>3</sup> The first mention of stress possibly contributing to disease pathology was by Hippocrates, who advised a patient with asthma to contain his anger because Hippocrates believed it contributed to the patient's condition.<sup>4</sup>

Mounting evidence has shown that stress<sup>5,6</sup> adversely affects many different diseases, especially autoimmune,<sup>7,8</sup> and inflammatory<sup>9,10</sup> disorders, such as aging,<sup>11</sup> allergies,<sup>12,13</sup> Alzheimer disease,<sup>14</sup> asthma,<sup>15,16</sup> autism spectrum disorder,<sup>17,18</sup> cancer,<sup>19,20</sup> coronary artery disease,<sup>21,22</sup> multiple sclerosis,<sup>23</sup> and myalgic encephalomyelitis/chronic fatigue syndrome.<sup>24</sup>

Stress typically activates the hypothalamic–pituitary–adrenal axis, the “fight or flight” system developed to ensure the survival of the organism, via release of catecholamines and corticosteroids from the adrenal glands. Acute stress increases the readiness of the organism and typically decreases the function of the immune system. In contrast, prolonged stress has the opposite effect, contributing to chronic inflammation<sup>25</sup> via blunting the cortisol effect and/or activation of the tissue immune cells—the mast cells.<sup>26</sup>

Mast cells contribute to both health and disease.<sup>27,28</sup> Mast cells are located around blood vessels and nerves in all tissues, including the brain, acting as sensors of environmental and pathogenic “danger” signals<sup>29</sup> by secreting multiple proinflammatory mediators.<sup>30,31</sup> Mast cells may mediate the proinflammatory effect of stress in response to stimulation by neurohormonal triggers,<sup>32</sup> especially the key stress mediator corticotropin-releasing hormone.<sup>33</sup> In fact, corticotropin-releasing hormone stimulates mast cells and is synthesized by mast cells.<sup>34</sup>

In this May issue of the *Clinical Therapeutics*, part 1 of the Stress and Immunity Update emphasizes the effect of stress on skin immune processes.<sup>35–38</sup> Scientists address the effect of stress on itch and chronic urticaria, as well as the effect of stress on levels of immune molecules and neurotransmitters. The June issue will focus on the effects of acute and chronic stress on neuroimmune processes and the reprogramming of the immune system.



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## REFERENCES

1. Li Z, Ge J, Yang M, et al. Vicarious traumatization in the general public, members, and non-members of medical teams aiding in COVID-19 control. *Brain Behav Immun*. 2020 Mar 10;20:30309–30313. <https://doi.org/10.1016/j.bbi.2020.03.007>. pii: S0889-1591 [Epub ahead of print].
2. Chen Q, Liang M, Li Y, et al. Mental health care for medical staff in China during the COVID-19 outbreak. *Lancet Psychiatry*. 2020;7:e15–e16.
3. Theo Project. Erinyes [website] <https://www.theoi.com/Khthonios/Erinyes.html>. Accessed March 31, 2020.
4. Douwes J, Brooks C, Pearce N. Stress and asthma: Hippocrates revisited. *J Epidemiol Community Health*. 2010;4:561–562.
5. Szabo S, Tache Y, Somogyi A. The legacy of Hans Selye and the origins of stress research: a retrospective 75 years after his landmark brief "letter" to the editor of nature. *Stress*. 2012;15:472–478.
6. Chrousos GP. Stress, chronic inflammation, and emotional and physical well-being: concurrent effects and chronic sequelae. *J Allergy Clin Immunol*. 2000;106:S275–S291.
7. Boscolo P, Youinou P, Theoharides TC, Cerulli G, Conti P. Environmental and occupational stress and autoimmunity. *Autoimmun Rev*. 2008;7:340–343.
8. Dube SR, Fairweather D, Pearson WS, Felitti VJ, Anda RF, Croft JB. Cumulative childhood stress and autoimmune diseases in adults. *Psychosom Med*. 2009;71:243–250.
9. Sternberg EM, Chrousos GP, Wilder RL, Gold PW. The stress response and the regulation of inflammatory disease. *Ann Intern Med*. 1992;117:854–856.
10. Theoharides TC, Cochrane DE. Critical role of mast cells in inflammatory diseases and the effect of acute stress. *J Neuroimmunol*. 2004;146:1–12.
11. Bauer ME, Jeckel CM, Luz C. The role of stress factors during aging of the immune system. *Ann N Y Acad Sci*. 2009;1153:139–152.
12. Marshall GD, Tull MT. Stress, mindfulness, and the allergic patient. *Expert Rev Clin Immunol*. 2018;14:1065–1079.
13. Patterson AM, Yildiz VO, Klatt MD, Malarkey WB. Perceived stress predicts allergy flares. *Ann Allergy Asthma Immunol*. 2014;112:317–321.
14. Kempuraj D, Mentor S, Thangavel R, et al. Mast cells in stress, pain, blood-brain barrier, neuroinflammation and Alzheimer's disease. *Front Cell Neurosci*. 2019;13:5.
15. Theoharides TC, Enakuaa S, Sismanopoulos N, et al. Contribution of stress to asthma worsening through mast cell activation. *Ann Allergy Asthma Immunol*. 2012;109:14–19.
16. Vig RS, Forsythe P, Vliagoftis H. The role of stress in asthma: insight from studies on the effect of acute and chronic stressors in models of airway inflammation. *Ann N Y Acad Sci*. 2006;1088:65–77.
17. Theoharides TC, Kavalioti M, Tsilioni I. Mast cells, stress, fear and autism spectrum disorder. *Int J Mol Sci*. 2019;20:3611.
18. Ratnaseelan AM, Tsilioni I, Theoharides TC. Effects of mycotoxins on neuropsychiatric symptoms and immune processes. *Clin Ther*. 2018;40:903–917.
19. Antoni MH, Dhabhar FS. The impact of psychosocial stress and stress management on immune responses in patients with cancer. *Cancer*. 2019;125:1417–1431.
20. Theoharides TC, Rozniecki JJ, Sahagian G, et al. Impact of stress and mast cells on brain metastases. *J Neuroimmunol*. 2008;205:1–7.
21. Alevizos M, Karagkouni A, Panagiotidou S, Vasiadi M, Theoharides TC. Stress triggers coronary mast cells leading to cardiac events. *Ann Allergy Asthma Immunol*. 2014;112:309–316.
22. Wirtz PH, von Känel R. Psychological stress, inflammation, and coronary heart disease. *Curr Cardiol Rep*. 2017;19:111.
23. Karagkouni A, Alevizos M, Theoharides TC. Effect of stress on brain inflammation and multiple sclerosis. *Autoimmun Rev*. 2013;12:947–953.
24. Theoharides TC. A Timely multidisciplinary update on myalgic encephalomyelitis/chronic fatigue syndrome. *Clin Ther*. 2019;41:610–611.
25. Chrousos GP. The hypothalamic-pituitary-adrenal axis and immune-mediated inflammation. *N Engl J Med*. 1995;332:1351–1362.
26. Theoharides TC, Valent P, Akin C. Mast cells, mastocytosis, and related disorders. *N Engl J Med*. 2015;373:163–172.
27. Siebenhaar F, Redegeld FA, Bischoff SC, Gibbs BF, Maurer M. Mast cells as drivers of disease and therapeutic targets. *Trends Immunol*. 2018;39:151–162.
28. Olivera A, Beaven MA, Metcalfe DD. Mast cells signal their importance in health and disease. *J Allergy Clin Immunol*. 2018;142:381–393.
29. Theoharides TC. Danger signals and inflammation. *Clin Ther*. 2016;38:996–999.
30. Theoharides TC, Alysandratos KD, Angelidou A, et al. Mast cells and inflammation. *Biochim Biophys Acta*. 2012;1822:21–33.

31. Mukai K, Tsai M, Saito H, Galli SJ. Mast cells as sources of cytokines, chemokines, and growth factors. *Immunol Rev.* 2018;282:121–150.
32. Theoharides TC. Neuroendocrinology of mast cells: challenges and controversies. *Exp Dermatol.* 2017;26:751–759.
33. Slominski AT, Zmijewski MA, Zbytek B, Tobin DJ, Theoharides TC, Rivier J. Key role of CRF in the skin stress response system. *Endocr Rev.* 2013;34:827–884.
34. Theoharides TC, Donelan JM, Papadopoulou N, Cao J, Kempuraj D, Conti P. Mast cells as targets of corticotropin-releasing factor and related peptides. *Trends Pharmacol Sci.* 2004;25:563–568.
35. Pondeljak N, Lugović-Mihić L. Stress-induced interaction of skin immune cells, hormones, and neurotransmitters. *Clin Ther.* 2020;42:757–770.
36. Yosipovitch G, Golpanian RS, Kim HS. The effects of stress on itch. *Clin Ther.* 2020;42:745–756.
37. Konstantinou GN, Konstantinou GN. *Clin Ther.* 2020;42:771–782.
38. Cvitanović H, Milošević M, Bešlić IB, Lugović-Mihić L. *Clin Ther.* 2020;42:783–799.