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## Review Article

# Oxidative Stress in *Plasmodium*: Role of Glutathione Revisited

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## ABSTRACT:

Malaria is still one of the three leading infectious disease in the world. Plasmodium, unicellular eukaryotic parasite responsible for the disease is under immense oxidative stress during the erythrocytic stages of its life cycle. The parasite overcomes the oxidative stress generated endogenously and by host immune system through its antioxidant and redox systems. Plasmodium possesses glutathione and thioredoxin redox systems with overlapping but distinct functions that help it to maintain redox state. Glutathione is the most abundant low molecular weight thiol redox buffer in all living cells that is detrimental for the maintenance of intracellular redox status. Glutathione functions as an antioxidant protecting cells against the deleterious effects of oxidant free radicals and also in detoxification process reactions in parasite. Interfering with glutathione redox system of parasite can be a novel way to combat the disease. The present review describes the recent findings in role and mechanism of glutathione in maintaining the redox status during oxidative stress in infection with Plasmodium

**Keywords:** Malaria, *Plasmodium*, Glutathione, Antioxidant, Oxidative stress.

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## INTRODUCTION

Malaria has been a scourge of humanity since antiquityandremains soeventoday. It is one of the major public health problems recognized by World health Organisation (WHO) globally that is leading cause of morbidity and mortality in developing nations. According to WHOs world malaria report 2020 there were 241 million cases and 6,27,000 malaria deaths in world in year 2020 an increase from 227million cases in year 2019. Sub Saharan African countries carry the maximum malaria burden accounting for 95% of all reported

cases and 96% of malaria deaths in 2020 (WHO 2020). The greatest burden of this disease caused by apicomplexean protozoan parasite *Plasmodium* is in the tropical and subtropical countries of the world. Malaria is a reemerging life-threatening disease and due to emergence of resistance to antimalarials and non-availability of any potent vaccine and limited chemotherapeutic alternatives there is a dire need to elucidate the biochemical makeup of malaria parasite and identify and validate new potential drug targets in the parasites metabolism to develop new antimalarials and vaccine.

Oxidative stress is defined as a disturbance or imbalance that occurs in a cell or tissue when there is production and accumulation of reactive oxygen species (ROS). In a normal healthy cell balance is maintained between compounds (pro-oxidants) capable producing harmful reeradicals and compounds (antioxidants) that absorb or scavenge these free radicals. The oxidant-free radicals are independent existence species that possess one or more unpaired electrons, have a very short half-life, are highly reactive and exhibit damaging property towards macromolecules like conformational modifications in proteins that also functions as enzymes, lesions in deoxyribonucleic acid and in lipids causing their peroxidation which is a radical chain reaction that spreads rapidly affecting other lipids. These ROS that perform several physiological roles like cell signaling are generated as by-products of oxygen metabolism, environmental factors like UV rays, ionizing radiations, pollutants and xenobiotics (Pizzino et al., 2017). Theses ROS include O2 (superoxide), OH (hydroxyl), HO2 (hydroperoxyl), ROOC (peroxyl) as free radicals and H<sub>2</sub>O<sub>2</sub>, O<sub>3</sub> and O<sub>2</sub> (singlet oxygen) as non-radicals or nitrogen (N2) derived species (RNS)mainly NO (nitric oxide), ONOO-(peroxynitrite), NO<sub>2</sub> (nitrogendioxide).

During oxidative stress when production of ROS increases or when the levels of antioxidants decreases there is serious cell damage if this stress is prolonged and massive. Oxidative stress and free radicals have been implicated with different degree of implication in onset and progression of many diseases like cancer, cardiovascular diseases and diabetes (Taniyama and Griendling 2003). Antioxidants play an important role in scavenging these reactive species terminating the chain reaction of free radical formation by donating an electron to eliminate the unpaired condition of these species before they damage the cell and its structure like proteins, nucleic acid and lipids. Body maintain an antioxidant system by deploying certain enzymes called antioxidant enzymes that provide an important defense against free Glutathione peroxidase radicals. catalase (CAT), glutathione reductase (GR), thioredoxin reductase (TrxR), superoxide dismutase (SOD) are the most important ones. Cells also deploy a number of non-enzymatic antioxidants like vitamin E (tocopherol),

vitamin C (ascorbate), and tripeptide glutathione (GSH) to protect themselves from ROS induced cellular damage. Glutathione besides acting as a cofactor for a number of enzymes also reduces ROS non-enzymatically and behave as a reductant for vitamin E and vitamin C.

### **OXIDATIVE STRESS IN MALARIA**

Host parasite interactions are complex and still not completely understood. A delicate balance between pro-oxidants and antioxidant molecules exist between the parasite and its host as both is capable of producing reactive Oxidative stress and its role and mechanism during *Plasmodium* infection remains unclear even today. Oxidative stress generated by the production of free radicals have been proposed to play an important role in physiopathogenesis of malaria. Plasmodium is exposed to oxidative stress during its intraerythrocytic development and is highly sensitive to such stress being inimical for its growth and survival (Hunt and Stocker 1990, Becker et al., 2004). This involvement could be due to pathogenic mechanism triggered by the parasite, production of free radicals or hosts immune response to ward off the infection. Plasmodium infection induces activation of host immune defence mechanism causing respiratory burst involving macrophages and neutrophils that generate ROS and RNS. Over production of these radical species constitute the state of oxidative stress as a response from the host towards infection and in case of malaria can lead to destruction of Plasmodium parasite. In vitro studies showing killing of Plasmodium yoeli upon incubation with glucose and glucose oxidase by production of H<sub>2</sub>O<sub>2</sub> and by superoxide O2 produced upon incubating P. yeoli with xanthin and xanthin oxidase demonstrate destruction Plasmodium due to oxidative stress. Increased malondialdehyde (MDA) an important lipid marker along-with peroxidation oxidative stress markers have been found in high levels in infected humans and rats as compared to normal controls suggesting increased production of free radical species (Sohail et al 2007, Guha et al 2006, Sobolewski et al 2005). Large amounts of toxic metabolites are generated by the parasite due to its high metabolic rate and rapid propagation leading to oxidative stress during erythrocytic

schizogony. *Plasmodium* living in ROS-rich environment require iron and oxygen for the formation of ROS via Fenton reaction (Liochev and Fridovich 1999).

Guha et al, (2006) showed that malaria infection induces hepatic apoptosis through augmentation of oxidative stress mitochondrial pathway. Immune mechanism in malaria is not fully understood but it is generally accepted that free radical species kill the intraerythrocytic malaria parasite (Brunnet 2001, Clark and Cowden 2003). The parasite killing occurs by the production of ROS by phagocytes like monocytes and production of interferon gamma (IFN<sub>Y</sub>), TNF-α and IL-12 by Th1 cells that activate macrophages to secrete parasiticidal NO and ROS (Taylor et al 1993). Potter et al., (2005) has suggested that phagocyte derived ROS were not crucial for the clearance of malaria parasite, at-least in murine models but the sensitivity of parasite towards the oxidative stress can still be a critical factor for its survival. ROS generating systems are known to kill murine malaria parasites and P. falciparum (Berman et al, 1991, Marva et al, 1991). Moreover, the importance of ROS/RNS has been established in elimination of parasite as most of anti-malarial drugs act by the mechanism in which these species participate. These reactive species are also known to regulate immune responses either by stimulating or inhibiting the production of certain cytokines, transcription factors or even regulating cell death processes (Arruda et al 2004).

The role of antioxidants and oxidative stress in pathogenesis of malaria in humans remain unclear with some authors suggesting a protective role, whereas others suggesting a relation to physiopathology of the disease (Sohail et al 2007). Recent studies have suggested a crucial role of ROS/RNS produced as a result of oxidative stress in development of systemic complications caused by malaria. Atmana and Ginsberg (1993) have reported twice the amount of H<sub>2</sub>O<sub>2</sub> and OH radical's production in P. falciparum infected RBCs as compared to normal erythrocytes. During oxidative functional and structural changes occur in plasma membrane of infected RBC due to lipid peroxidation that causes haemolysis, which has been linked to increased levels of

thiobarbituric acid reactive substances (TBARS), which have been considered as index for lipid peroxidation. Chandra et al., (2006) reported an increase in TBRAS in P. falciparum infected individuals, while levels of antioxidant vitamins E and C were decreased.

Malaria parasite is enclosed parasitophorous vacuole and is surrounded by haemoglobin (Hb) inside host RBC. The parasite obtains its nourishment of amino acids by degrading Hb. Ingestion of Hb into acidic food vacuole of parasite leads to spontaneous oxidation of Fe2+ to Fe3+ with the formation of superoxide anions (O2-). This reaction leads to the formation of toxic O2 intermediates, H<sub>2</sub>O<sub>2</sub> and hydroxyl radicals, thereby increasing the oxidative burden. Free heme is a powerful free radical generator, which is harmful to both host and parasite causing morphological and molecular damages. Fe2+ contained in heme group can catalyse Fenton and Haber Weiss reactions generate free radicals (Fig.

Figure 1:

Ferriprotoporphyrin IX (FP IX) which is released upon Hb degradation is toxic to Plasmodium (Banyal and Fitch 1982). Toxic FP IX can cause parasite death or damage to the membrane if it is not neutralized as Plasmodium does not possess haemoxygenase (Tilley et al, 2001). The parasite protects itself from the effects of toxic FP IX that latter is detoxified through biomineralization. Binding of FP IX to a substance similar to protein results in the formation of haemozoin. FP IX binding protein appears to be histidine rich protein or FP IX may also react with glutathione (GSH) (Atamna and Ginsburg 1993). Famin and Ginsburg (2003) identified a number of other FP IX binding enzymes in the 6-phosphogluconate parasite e.g., dehydrogenase, aldolase, lactate dehydrogenase glyceraldehyde-3and

phosphate dehydrogenase. These moieties and ROS are targeted by chloroquine that prevents the polymerization of haeme to haemozoin, promoting accumulation of free haeme. Chloroquine thus increases availability of intracellular haeme disrupting plasma membrane structure and increasing oxidative stress in Plasmodium. Also, cellular response to haemozoin entails release of cytokine like TNF-a and IL-1 and generation of ROS like NO. Research on heme/haemozoin induced oxidative stress is exciting and opens new vista in development of new antimalarials. Sobolewski et al., (2005) reported that haemoglobin protects Plasmodium from ROS, but the parasite possesses intrinsic defence mechanism against it. The parasite evades ROS as a consequence of ROS quenching by Hb, an antioxidant mechanism that has been overlooked (Alayash 2004). The oxidation process of haeme group is controlled within RBCs by methaemoglobin reductase system. Antioxidants or their associated enzymes have been implicated to play a role in preventing or reducing the formation of methaemoglobin in murine host and thereby in preventing the host from methaemoglobinemia during rodent malaria infection (Srivastava et al., 2001).

### **EFFECT UPON HOST**

During its development inside host RBCs not only does the *Plasmodium* parasite exhibit structural changes but the host cells also undergo alterations that support the survival and propagation of the parasite. Development of parasite inside RBCs causes structural changes on erythrocyte surface that increases its viscosity and increases its adhesion to endothelial walls of capillaries thus avoiding its entry into spleen via circulation and preventing its destruction by immune cells present in blood and spleen, a defence mechanism adopted by parasite. There is change in erythrocyte membrane fluidity due to alteration in erythrocyte lipid composition and protein cross linking. Additionally, there is accumulation of erythrocyte band 3 protein, which forms skeletal multi-protein complex with lipid and proteins that confer mechanical integrity and viscoelasticity to RBCs to withstand sheer forces and squeeze through capillaries and also to involve in the attachment of Р. falciparum-infected

erythrocytes to endothelial cells in tissues (Winograd and Sherman 2004). This increased viscosity of RBCs is responsible for blocking of finer blood vessels in organs like kidney, lungs and brain causing cerebral malaria which causes maximum mortality in children infected with P. falciparum (Phiri et al, 2009). Other changes induced by Plasmodium on the erythrocyte of include peroxidation of erythrocytes containing large amounts of polyenoic fatty acids (OH-PUFA) like 12 and 15-hydroxy-arachidonic acid (HETE) (Schwarzer et al 2003). This increased lipid peroxidation and oxidative stress affects membranes of parasitized ervthrocytes making them stiff and rigid which are subsequently removed in spleen during circulation that further increases anaemia, a characteristic feature of malaria as P. falciparum infection accelerates aging of these cells and contribute to development of anaemia (Omodeo-Sale et al 2003). Histidine rich protein and 3-erythrocyte membrane protein of *P. falciparum* (PfEMP3) are the other important proteins that promote increased membrane parasitized stiffness in erythrocytes. Expression of var gene of P. falciparum produces protein Plasmodium falciparum membrane protein 1 (PfEMP1) that is expressed on surface of RBC that is responsible for cytoadherence of RBC by which it is able to connect to different host molecules located on vascular endothelium like intercellular adhesion molecule type 1 (ICAM1), platelet endothelial cell adhesion molecule (PECAM), hyaluronic acid and others which clog blood vessels obstruct blood flow (Petterson et al 2005).

## ANTIOXIDANTS IN PLASMODIUM

The nightmare for the parasite residing inside RBCs is ROS which are produced not only by the host in response to infection but also generated by parasite itself that interferes with physiology of RBCs and promote or felicitate its internalization in RBCs and hepatocytes. Aerobic respiration transport mechanism being the major source of free radical ROS/RNS generation in *Plasmodium* (Percario et al, 2012). The parasite is known to possess its own NADPH generating hexose monophosphate shunt pathway which wards off the damages caused by parasite's ROS or the host RBCs and immune cells (Atamana et

al, 1994). Also to avoid the oxidative stress the parasite has adapted to anaerobic mode of life style as it lacs catalases and glutathione peroxidase. *Plasmodium* protects itself against oxidative stress by a number of host or parasite encoded enzymes, vitamin C and E and proteins like glutathione and thioredoxin. Additionally, the parasite has adopted new mechanisms like apicoplast mechanism along with reduction in its own production of ROS to prevent oxidative damage arising from the host.

### **GLUTATHIONE**

Glutathione is generally referred to tripeptide L-gamma-glutamyl-l-cystenylglyceine in both reduced and dimeric forms. Monomeric glutathione is known as reduced glutathione (GSH) and the dimeric form as oxidised glutathione, glutathione disulphide or diglutathione (GSSG). Glutathione is the most abundant low molecular weight thiol redox buffer in all living cells and therefore, detrimental for maintenance of intracellular redox status. Various pathways involving biosynthesis of leukotrienes, proteins and glutathione nucleic acids depend on metabolism (Reed 1990). Liver is the net synthesiser of circulating GSH and organs like kidney salavage GSH through y-glutamyl transpeptidase reaction (Denke and Fanburg 1989). The ratio between GSH and GSSG is maintained more towards reduced form of glutathione inside the cell mainly by the action of glutathione reductase (GR), which utilises NADPH as a cofactor supplying the necessary reducing equivalents. GSSG efflux pump exports excess GSSG to maintain the intracellular redox balance and the high levels of GSH are maintained by de novo synthesis (Griffith 1999). GSH functions as a general redox thiol buffer and a cofactor for a variety proteins including glutathione-Stransferases (GSTs) and glutathione peroxidases (Sies dependent 1999). Glutathione protects the cell against the deleterious effects of oxidant-free radicals and pro-oxidants-drugs, whereas reduced GSH plays an important role in detoxification of FP IX. Plasmodium possesses a number of GSH dependent enzymes systems and is also important for detoxification and disulphide exchange reactions.

Srivastava and Beutler (1969) have reported an increase in GSH turnover with accumulation of GSSG during oxidative stress and controlled through the ATP dependent transport. To replenish the lost glutathione, RBCs synthesise GSH from amino acids Glu, Cys, and Gly through the activity of gamma glutamyl cysteine synthetase(a rate limiting step that catalyses the ligation of L-glutamate and L-cysteine) and glutathione synthetase. Majority of GSH is consumed in the reaction catalysed by GST for the detoxification of xenobiotics and in the removal of toxic metabolic products. The loss of GSH is recovered by two step reaction mechanism from amino acids glutamate, cysteine, and glycine. The first rate limiting step is ligation of glutamate and cysteine by gamma glutamyl cysteine synthetase (yGCS) followed by the reaction of glutathione synthetase (GS) adding glycine and resulting in GSH (Meierjohann et al, 2002).

Enzyme glutathione reductase (E.C. 1.6.4.2) is responsible for keeping glutathione in its reduced state. It belongs to the pyridinenucleotide disulphide oxidoreductase family of homodimeric flavoenzymes that also includes thioredoxin reductase and lipoamide dehydrogenase. Both human GR Plasmodium GR are essential for the survival of malaria parasite inside the erythrocytes (Gilberger et al, 2000). Plasmodial a potential GR has been considered therapeutic target for antimalarials and the difference in structure between human GR and Plasmodium GR may allow the design of inhibitors that specifically bind to parasite GR. The knowledge of three dimensional structure of human and Plasmodial GR will facilitate inhibitor formulation that specifically target the parasite protein. Methylene blue is one such compound known to be specific inhibitor of parasite GR (Becker et al, 2004). Marozine 2019 reported that nitroaromatic compounds non- or uncompetitively inhibited Plasmodium falciparumGR. During malaria infection the activity of GR increased in rodent RBCs parasitized with P. yeolii. Our studies also show increased GR activity in rodent RBCs parasitized with P. berghei infection (Kapoor and Banyal 2009). Activity of GR was higher in P. falciparum parasitized RBCs compared to non-infected RBCs in patients showing failure of therapeutic response to amodiaquine (Zuluaga et al, 2007).

Parasitized erythrocytes are under enhanced oxidative stress due to proteolytic oxidation of host haemoglobin inside the acidic food vacuole of the parasite and the levels of GSH are greatly reduced which indicate stress challenge. A significant amount of GSH is consumed in the reactions catalysed by the glutathione transferases (GSTs) detoxification of xenobiotics and removal of metabolic products. Balance maintained in the parasite as it possesses capacity for de novo synthesis for GSH and reduction of GSSG. It is efficiently equipped with antioxidant measures that protect it from oxidative injury, whereas the host cell compartment is oxidatively distressed. The parasite possesses a functional glutathione synthesis pathway. The two enzymes involved in synthesis -y-glutamylcysteinesyhthetase (vGCS) and glutathione synthetase (GS) have been reported in P. falciparum (Meierjohann et al,2002) and P. berghei (Sharma and Banyal 2007).

The parasitized host cells lose GSH via GSSG efflux pump, and the efflux of GSSG in infected cells is relatively more as compared to normal RBCs and the new permeability channels induced by the parasite in the RBC during invasion mediate it (Meierjohann et al 2002). With this efflux a redox ratio of GHS/GSSG cannot be maintained inside the cell. Plasmodium-infected cells contain about half the amount of GSH compared to noninfected RBCs despite having an active GSH de novo synthesis and functional glutathione redox system. This is attributed mainly due to high efflux of GSSG in infected RBCs. The increased oxidative stress due to malaria parasite causes oxidation of a large amount of GSH and its depletion in the cell. To maintain an adequate GSH/GSSG redox ratio there is a need for increased GSSG efflux from the cell. Plasmodium and its host erythrocytes contain functional GR but the enzyme is not able to reduce GSSG efficiently to prevent the efflux of GSSG from parasitized RBCs. Recent studies on P. berghei GR knockout have revealed it to be non-essential for the survival of parasite in infected erythrocytes and its functions being compensated by thioredoxin redox system (Pastrana Mena et al, 2010 and Buchholz et al, 2010).

Glutathione, besides serving as an antioxidant and acting as a redox buffer is involved in a variety of detoxification reactions in malaria parasite. FP IX produced Hb degradation and turning into haemozoin needs to be changed from its toxic form to the non-toxic state so that it does not lyse the parasite. This generally occurs due to the presence of different FP IX binding molecules in the parasite like histidine rich protein (HRP) and enzymes of glutathione metabolism. FP IX also binds to and inhibit the activity of parasite glyceraldehyde -3-phosphate dehydrogenase (PfGADPH), GR and protein disulphide isomerase in P. falciparum (Campanale et al 2003). GSH non-enzymatically degrades FP IX and if this process is weakened then more of toxic FP IX remains un-sequestered and damages the parasite.

Another important antioxidant enzyme found in *Plasmodium* is glutathione transferase (GST). GSTs are a group of multifunctional enzymes that directly depend on GSH and are involved in detoxification of xenobiotics by way of mercapturic acid pathway. Apart from their role in catalysing conjugation of electrophilic substrate to GSH they also have peroxidase and isomerase activity. P. falciparum is known to possess only single homodimeric GST that differs from its human counterpart. Compound CB-27 has exhibited antiplasmodial activity towards P.berghei GST without inhibiting the human ortholog (Colon-Lorenzo et al., 2020). GSTs protect cells from ROS-induced oxidative stress by detoxifying them. It conjugates to toxic reactive compounds like 4-hydroxynonenal cholesterol oxide which are generated during oxidation of membranes. GST has also been proposed as a potential target for development of novel antimalarials.

Besides these antioxidant enzymes falciparum possesses a number of structurally related plasmaredoxin, proteins like glutaredoxin and thioredoxin which function as redox messanger which interact with variety of reactive proteins and metabolites (Holmgren 2000). Glutaredoxins are GSH utilising proteins that are characterized by the active site sequence CPYC and coded by the gene PFCO27IC in P. falciparum (Rahlfs et al, 2001). These proteins protect against the oxidative damages and also serve as hydrogen donor for ribonucleotide reductase and associated with transcriptional control. Plasmaredoxin, a highly conserved and exclusively found in Plasmodium is a 22 kDa redox-active protein that provides electrons for ribonucleotide reductase, the enzyme catalysing the first step of DNA synthesis. Peroxiredoxins (Prx) are ubiquitous peroxidases that provide peroxide detoxifying capacity to malaria parasite in the absence of catalase and glutathione peroxidase. Prx help in reducing the oxidative stress by reducing the levels of iron released by interfering with GSH-mediated degradation of FP IX and help to keep FP-derived ROS at levels below the parasite antioxidant system can manage (Kawazu et al 2005).

### **CONCLUSION**

Oxidative stress and free radicals are known to be detrimental to health and contribute to initiation and progression of several diseases. Antioxidants are able to counteract oxidative stress and mitigate its effects. Oxidative stress is a multifactorial phenomenon in malaria. Erythrocytic stages of malaria parasite responsible for the pathogenesis of disease are under enhanced oxidative stress. Plasmodium depends upon several antioxidant enzymes and proteins like glutathione for its protection from the deleterious effects of ROS. A delicate balance exists between the antioxidants and redox status in growing parasite interference in this balance can be used as a mechanism to disrupt the growth of parasite the progression and stop disease. Glutathione and its metabolites need to be assessed and validated as new antimalarial targets.

### **REFERENCES**

- **1.** Alayash, A.I. (2004). Oxygen therapeutics: can we tame haemoglobin? *Nat Rev Drug Discov*, 3, 152-159.
- 2. Arruda, M.A., Rossi, A.G., Freitas, M.S., Bajra, F.C., Graca, S.A.V. (2004) Heme inhibits human neutrophil apoptosis: involvement of phosphoinositide 3-kinase, MAPK and NF-kB. *J Immunol*, 173, 2023-2030.
- **3.** Atamna, H. and Ginsburg, H. (1993). Origin of reactive oxygen reactive species in erythrocytes infected with *Plasmodium falciparum*. *Mol Biochem Parasitol*, 61, 231-234.

- **4.** Atmana, H., Pascarmona, G., Ginsburg, H. (1994). Hexose monophosphate shunt activity in intact Plasmodium falciparum infected erythrocytes and in free parasites. *Mol BiochemParasitol*, *67*, 79-89.
- 5. Banyal, H.S. & Fitch, C.D. (1982). Ferriprotoporphorin IX binding substances and the mode of action of chloroquine against malaria. *Life Sci*, 31, 1137-1142.
- **6.** Becker, K., Tilley, L., Vennerstrom, J.L., Roberts, D., Rogerson, S., Ginsburg, H (2004). Oxidative stress in malaria parasite infected erythrocytes: host parasite interactions. *Int J Parasitol*, 34, 163-189.
- 7. Berman, P.A., Human, L., Freese, J.A. (1991). Xanthin oxidase inhibits growth of *Plasmodium falciparum* in human erythrocytes *in vitro*. *J Clin Invest*, 88, 1848-1855.
- **8.** Brunnet, L.R. (2001). Nitric oxide in parasitic infection. *Int Immunopharmacol*,1, 1457-1467.
- Buchhloz, K., Putrianti, Ed et al (2010). Molecular genetics evidence for the in vivo roles of the two major NADPH dependent disulphide reductases in the malaria parasite. *J Biol Chem*, 285,37388-37395.
- **10.** Campanale, N., Nickel, C. et al, (2003). Identification and characterization of heme-interacting proteins in the malaria parasite *Plasmodium falciparum*. *J Biol Chem*, 278, 27354-27361.
- **11.** Chandra, P., D'Souza, V., D'Souza, B. (2006). Comparative study on lipid peroxidation and antioxidant vitamin E and C in *falciparum* and *vivax* malaria. *Ind J Biochem*, 21, 103-106.
- **12.** Clark, I.A., Cowden, W.B. (2003). The pathophysiology of *falciparum* malaria. *PharmacolTherapeau*, 99, 221-260.
- **13.** Colon-Lorenzo, E., Colon-Lopez, D., Vega-Rodrigues, J et al, (2020). Structure-Based screening of *Plasmodium berghei* glutathione S-Transferase identifies CB-27 as novel antiplasmodial compound. *Front Pharmacol*, 11, 246-262
- **14.** Denke, S.M., Fanburg, B.L. (1989). Regulation of cellular glutathione. *Am J Physiol*, 257, L163-L173.
- **15.** Famin, O., Ginsburg, H. (2003). The treatment of *Plasmodium falciparum* infected with chloroquine leads to accumulation of ferriprotoporphorin IX bound to particular parasite proteins and

- to the inhibition of the parasite 6-phosphogluconate dehydrogenase. *Parasite*, 10, 31-50.
- **16.** Gilberger, T.W., Schirmer, R.H., Walter, R.D., Muller, S. (2000). Deletion of parasite specific insertions and mutations of the catalytic triad in glutathione reductase from chloroquine sensitive *Plasmodium falciparum* 3d7. *Mol Biochem Parasitol*, 107, 169-179.
- **17.** Griffith, O.W. (1999). Biological and pharmacological regulation of mammalian glutathione synthesis. *Free RadicBiol Med*, 27, 922-935.
- **18.** Guha, M., Kumar, S., Choubey, V., Maity, P., Bandopadhaya, U. (2006). Apoptosis in liver during malaria: Role of oxidative stress and implication of mitochondrial pathway. *FASEB J*, 20, E439-E449.
- **19.** Holmgren, A. (2000). Antioxidant functions of thioredoxin and glutaredoxin systems. *Antioxid Redox Signal*, 2, 811-820.
- **20.** Hunt, N.H., Stocker, R. (1990). Oxidative stress and redox status of malaria infected erythrocytes. *Blood Cells*, 16, 499-526.
- **21.** Kapoor, G., Banyal, HS (2009). Glutathione reductase and thioredoxin reductase: novel antioxidant enzymes from *Plasmodium berghei*. *Korean J Parasitol*, 4, 91-95.
- **22.** Kawazu, S., Ikenouse, N. et al (2005). Role of 1-Cys peroxiredoxin in heme detoxification in the human malaria parasite *Plasmodium falciparum*. *FEBS J*, 272, 1784-1791.
- **23.** Liochev, S.I., Fridovich, I. (1999). Superoxide and iron: partners in crime. *IUBMB Life*,48, 157-161.
- 24. Maroziene, A., Lesanavicius, M., Davioud-Charvet et al (2019). Antiplasmodial activity of nitroaromatic compounds: correlation with their reduction potential and inhibitory action on plasmodium falciparum glutathione reductase. *Molecules*, 24 (24), 4509.
- **25.** Marva, E., Chevion, M., Golenser, J. (1991). The effects of free radicals induced by paraquat and copper on the in vitro development of *Plasmodium falciparum*. *Free Rad Rev.* 12-13, 137-146.
- **26.** Meierjohann, S., Walter, R.D., Muller, S. (2002). Regulation of intracellular glutathione levels in erythrocytes infected with chloroquine sensitive and chloroquine resistant *Plasmodium falciparum*. *Biochem J*, 368, 761-768.

- 27. Meierjohnn, S., Walter, R.D., Muller, S. (2002). Glutathione synthetase from *Plasmodium falciparum*. *Biochem J*, 363, 833-838
- **28.** Omodeo-Sale, F., Motti, A., Basilico, N., Parapini, S., Olliaro, P., Taramalli, D. (2003) Accelerated senescence of human erythrocytes cultured with *Plasmodium falciparum*. *Blood*, 102, 705-711.
- **29.** Pastrana-Mena, R., Dinglasan, R.R. et al (2010). Glutathione reductase null-malaria parasites have normal blood stage growth but arrested during development in mosquitoe. *J Biol Chem*, 285, 27045-27056.
- **30.** Percario, S., Moreira, D.R., Gomes, B.A.Q. et al, (2012). Oxidative stress in Malaria. *Int J Mol Sci*, 13, 16346-16372.
- **31.** Petterson, F., Vogt, A. M. et al, (2005) Whole body imaging of sequestration of Plasmodium falciparum in rat. *Infect Immun*, 73, 7736-7746.
- **32.** Phiri, H., Montgomery, J., Molyneux, M., Craig, A. (2009) Competitive endothelial adhesion between *Plasmodium falciparum* isolates under physiological flow conditions. *Malar J*, 8, 214-221.
- **33.** Pizzino, G., Irrera, N. et al (2017). Oxidative stress: Harms and benefits for human health. *Oxidative Med and Cellular Longivity*, 2017, 1-13.
- **34.** Potter, S.M., Mitchell, A.J. et. al. (2005). Phagocyte derived reactive oxygen species do not influence the progression of murine blood stage malaria infection. *Infect Immunol*, 73, 4941-4947.
- **35.** Rahlfs, S., Fischer, M., Becker, K. (2001). *Plasmodium falciparum* possesses a classical glutaredoxin and a second glutaredoxin like protein with PICOT homology domain. *J Biol Chem*, 276, 37133-37140.
- **36.** Reed, D.J. (1990). Glutathione: toxicological implications. *Annu Rev PharmacolToxicol*, 30, 603-631.
- **37.** Schwarzer, E., Kuhun, H., Valente, E., Arese, P. (2003) Malaria-parasitized erythrocytes and haemozoin non enzymatically generate large amounts of hydroxy fatty acids that inhibit monocyte functions. *Blood*, 101, 722-728.
- **38.** Sharma, S.K., Banyal, H.S. (2007). Glutathione synthetase in *Plasmodium berghei*. *J ParasitDis*, 31, 33-37.
- **39.** Sies, H. (1999). Glutathione and its role in cellular functions. *Free Radic Bio IMed*, 27, 916-921.

- **40.** Sobolewski, P., Gramaglia, I., Frangos, J.A. et al. (2005). *Plasmodium berghei* resists killing by reactive oxygen species. *Infect and Immunol*, 73, 6704-6710.
- **41.** Sohail, M., Kaul, A., Raziuddin, M., Adak, T. (2007). Decreased glutathione-Stransferase activity: Diagnostic and protective role in vivax malaria. *Clin Biochem*, 40, 377-382.
- **42.** Srivastava, S., Alhomida, A.S., Siddiqui, N.J., Pandey, V.C. (2001). Changes in rodent erythrocyte methemoglobin reductase system produced by two malaria parasites viz *Plasmodium yoeliinigeriensis* and *Plasmodium berghei*. *Comp Biochem Physiol Biochem Mol Bio*, 12, 725-731.
- **43.** Srivastava, S.K., Beutler, E. (1969). The transport of oxidised glutathione from human erythrocytes. *J Biol Chem*, 244, 9-16.
- **44.** Taniyama, Y., Griendling, K.K. (2003). Reactive oxygen species in the vasculature: molecular and cellular

- mechanisms. *Hypertension*, 42(6), 1075-1081.
- **45.** Taylor-Robinson, A.W., Philips, R.S., Steven, A. et al. (1993). The role of Th1 and Th2 cells in a rodent malaria infection. *Science*, 260, 1931-1934.
- **46.** Tilley, L., Loria, P., Floey, M. (2001). Chloroquine and other quinoline antimalarials. In: Rosenthal PJ, Ed. Antimalarial chemotherapy. Towtowa NJ: Humana Press 87-122.
- **47.** Winoqrad, E., Sherman, W. (2004). Malaria infection induces a conformational change in erythrocyte band 3 protein. *Med BiochemParasitol*, 138, 83-87.
- **48.** World Health Organisation (2020). World malaria report 2020. https://who.int/publication.
- **49.** Zuluaga, L., Pabon, A. et al. (2007). Amodiaquine failure associated with erythrocytic glutathione in *Plasmodium falciparum* malaria. *Malar I, 6, 47*.

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