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Analysis of pathogenic genes in dengue virus

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Abstract

Dengue virus (DENV) remains a significant global health threat, presenting intricate challenges in its epidemiology, vector control, and the quest for effective vaccines and treatments. The challenges encompass the complex epidemiology marked by four serotypes, difficulties in vector control, and the ongoing pursuit of a universally effective vaccine. Antiviral therapeutics tailored to DENV are also under exploration. Despite these challenges, advancements in vaccine development, innovative vector control strategies, and precision medicine offer promising avenues for future management. Early warning systems and digital health technologies stand out as transformative tools for surveillance and clinical management. Global collaboration, community engagement, and climate-resilient approaches are identified as crucial elements for sustained Dengue control.

Keywords: Dengue virus, Flaviviridae, infection, mosquitoes, pathogenic

Introduction

Dengue virus (DENV), belonging to the Flaviviridae family, remains a persistent global health concern, characterized by its widespread morbidity and mortality. As the causative agent of dengue fever, transmitted primarily through *Aedes* mosquitoes, DENV harbors a complex genome comprising an approximately 11-kilobase positive-sense RNA molecule. This genome intricately encodes both structural and non-structural proteins, each playing pivotal roles in orchestrating the various stages of the viral life cycle. The molecular intricacies underlying DENV pathogenesis have become the focal point of rigorous scientific inquiry. The virus employs a sophisticated strategy, mediated by key pathogenic genes, to facilitate successful replication and evade the host immune response. These genes govern critical processes, including viral entry, RNA replication, translation of viral proteins, and assembly of new viral particles. The unraveling of regulatory networks and molecular interactions governing these processes is essential for a comprehensive understanding of DENV pathogenicity (Murugesan and Manoharan, 2020) ^[5].

Dengue Virus Genome Structure

The genomic structure of Dengue virus (DENV) is integral to its replication, virulence, and pathogenicity. DENV, a member of the Flaviviridae family, features a single-stranded positive-sense RNA genome with a length of approximately 11 kilobases. This genomic RNA serves as a template for both viral protein translation and RNA replication. A distinctive aspect of the Dengue virus genomic structure is the presence of a single polyprotein precursor. This polyprotein, composed of a linear sequence of amino acids, undergoes cleavage by both viral and host proteases to yield individual proteins crucial for various stages of the viral life cycle.

The key constituents of the genomic structure of Dengue virus include (Dang *et al.*, 2020) ^[2].

Single-Stranded RNA: The genetic material of DENV is a single-stranded positive-sense RNA molecule, allowing for efficient translation and replication processes.

Polyprotein Precursor: The viral genome encodes a polyprotein precursor that undergoes specific cleavages to generate structural and non-structural proteins. This polyprotein includes three structural proteins-Capsid (C), Membrane (prM/M), and Envelope (E)-and seven non-structural proteins-NS1, NS2A, NS2B, NS3, NS4A, NS4B, and NS5.

Serotypes

Dengue virus (DENV) manifests in four distinct serotypes, identified as DENV-1 through

DENV-4, each distinguished by unique variations in the envelope (E) protein. The antigenic diversity inherent in these serotypes is pivotal in shaping the immune response, where infection by one serotype does not confer immunity to others. Subsequent infections with a different serotype elevate the risk of severe disease manifestations, such as Dengue Hemorrhagic Fever or Dengue Shock Syndrome, owing to antibody-dependent enhancement. The coexistence of multiple serotypes in endemic regions adds complexity to dengue fever epidemiology and presents challenges in vaccine development. Addressing the distinct features of each serotype is crucial, underscoring the necessity for comprehensive strategies to effectively manage and mitigate the global impact of the disease (Yung *et al.*, 2015)^[8].

Transmission

Transmission is a pivotal component of the Dengue virus (DENV) life cycle, where the primary mode involves the bite of infected female *Aedes* mosquitoes, notably *Aedes aegypti* and, to a lesser extent, *Aedes albopictus*. These mosquitoes acquire DENV by feeding on the blood of an individual during the acute phase of the infection. Following ingestion, the virus undergoes an incubation period within the mosquito, becoming competent for transmission during subsequent blood meals. Crucially, direct human-to-human transmission does not occur, emphasizing the dependence of the virus on its mosquito vector to complete the transmission cycle. Factors such as urbanization, climate conditions, and human mobility significantly contribute to the proliferation of *Aedes* mosquitoes, heightening the risk of dengue transmission in diverse regions. Effective preventive and control measures focus on reducing mosquito breeding sites, employing insecticides, and implementing public health initiatives to minimize mosquito bites, thereby interrupting the transmission cycle. A comprehensive understanding of DENV transmission dynamics is essential for the development of targeted interventions aimed at mitigating the global impact of dengue fever on public health (Islam *et al.*, 2015)^[9].

Mechanism of Infection

The mechanism of Dengue virus (DENV) infection in humans involves a sophisticated interplay between the virus and the host's immune system, encompassing several intricate stages (Bhatt *et al.*, 2021)^[11].

- 1. Virus Entry:** Following a mosquito bite, DENV gains entry into the human host through the inoculation of virus-containing saliva. The initial interaction occurs at the site of the bite, where dendritic cells and skin-resident macrophages become early targets of infection.
- 2. Cellular Attachment and Entry:** DENV primarily targets cells expressing specific cellular receptors, such as dendritic cells, monocytes, and macrophages. The viral envelope protein (E protein) mediates attachment to host receptors, facilitating viral entry through endocytosis.
- 3. Viral Replication:** Upon entry into host cells, the viral RNA genome is released into the cytoplasm. The host cellular machinery is then exploited for the translation of the viral polyprotein, subsequently processed into individual proteins by viral and cellular proteases. RNA replication occurs in virus-induced replication complexes, leading to the generation of new viral RNA genomes.

- 4. Viremia and Dissemination:** Successful replication results in the release of new viral particles, leading to viremia—the presence of the virus in the bloodstream. DENV disseminates to various tissues, targeting a range of cell types, including endothelial cells, hepatocytes, and cells of the immune system.
- 5. Immune Response:** The host's immune system recognizes the presence of the virus, initiating both innate and adaptive immune responses. While an effective immune response can clear the infection, an imbalanced or dysregulated response may contribute to immunopathology, particularly in secondary infections.
- 6. Antibody-Dependent Enhancement (ADE):** Individuals who have previously been infected with one serotype of DENV are at risk of more severe disease upon secondary infection with a different serotype. ADE occurs when non-neutralizing antibodies from the first infection enhance viral entry into cells during subsequent infections, leading to increased viral replication.
- 7. Clinical Manifestations:** DENV infection can manifest in a spectrum of clinical outcomes, from asymptomatic or mild febrile illness to severe forms, including Dengue Hemorrhagic Fever (DHF) and Dengue Shock Syndrome (DSS). Severe disease is often associated with vascular leakage, thrombocytopenia, and coagulopathy.

Pathogenic Genes Involved

The identification and characterization of pathogenic genes within the genome of Dengue virus (DENV) are crucial for understanding the molecular mechanisms underlying its virulence and pathogenicity. The DENV genome, approximately 11 kilobases in size, is a single-stranded positive-sense RNA molecule that encodes both structural and non-structural proteins. Here, we delve into the details of some key pathogenic genes and their functions (Dang *et al.*, 2020)^[2].

Structural Proteins

- 1. Envelope (E) Protein:** The E protein is crucial for viral entry into host cells. It mediates fusion between the viral and host cell membranes, facilitating the release of the viral genome into the cytoplasm.
- 2. Capsid (C) Protein:** The C protein is involved in the packaging of the viral RNA. It plays a role in the formation of the nucleocapsid, which protects the viral genome during replication.
- 3. Membrane (prM/M) Protein:** The prM/M protein is a precursor to the M protein and is essential for viral assembly. It helps in the proper folding of the E protein and prevents its premature fusion with host cell membranes.

Non-Structural Proteins

- 1. NS3 Protein:** NS3 is a multifunctional protein with protease and helicase activities. It is crucial for viral replication and the processing of the viral polyprotein.
- 2. NS5 Protein:** NS5 is the largest and most conserved non-structural protein. It possesses RNA-dependent RNA polymerase activity, essential for viral replication. NS5 also plays a role in modulating the host immune response.
- 3. NS1 Protein:** NS1 is involved in viral replication and

immune evasion. It is secreted into the extracellular space and has been implicated in vascular leakage, a characteristic feature of severe dengue disease.

4. **NS2A and NS2B Proteins:** NS2A and NS2B proteins contribute to viral replication and assembly. NS2B forms a complex with NS3, creating a functional protease essential for polyprotein processing.
5. **NS4A and NS4B Proteins:** NS4A and NS4B are involved in viral replication and the modulation of host cellular responses. They contribute to the formation of replication complexes within host cells.

Epidemiology

The geographic distribution of dengue is scrutinized, particularly in tropical and subtropical areas where the virus is endemic, guiding the allocation of resources for preventive measures. Investigations into the dynamics of *Aedes* mosquitoes, primary vectors of DENV, aid in predicting and preventing outbreaks. Socioeconomic factors are explored, revealing disparities in disease impact. Clinical surveillance informs the understanding of dengue's clinical spectrum, while the tracking of serotype distribution and outbreak investigations enhances preparedness and response. Environmental influences, including climate factors, are considered in epidemiological research, which also emphasizes the importance of robust surveillance systems for early detection and response. Mathematical modeling aids in predicting outbreaks and evaluating intervention strategies (Kularatne and Dalugama, 2022) ^[4].

Current Treatment Strategies & Vaccines

Vaccines

Developing effective vaccines against Dengue virus (DENV) has posed considerable challenges due to the presence of four distinct serotypes and the risk of antibody-dependent enhancement (ADE). As of my last knowledge update in January 2022, Dengvaxia (CYD-TDV), developed by Sanofi Pasteur, is the only licensed dengue vaccine. It provides partial protection against all four dengue serotypes and is approved for use in specific endemic regions. However, its administration is subject to precise recommendations and may be contraindicated in individuals without prior dengue exposure (Torres-Flores *et al.*, 2022) ^[7].

Treatment

Currently, there is no specific antiviral treatment for dengue fever. The primary approach involves supportive care to alleviate symptoms and prevent complications, particularly in severe cases. Key facets of dengue fever treatment encompass (Tayal *et al.*, 2023) ^[6].

1. **Fluid Replacement:** Maintaining fluid balance is critical, especially in severe dengue cases. Intravenous fluid administration helps prevent dehydration and manages plasma leakage, a hallmark of severe dengue.
2. **Fever Control:** Acetaminophen is commonly used to control fever and alleviate pain. Non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, are generally avoided due to the associated risk of bleeding complications.
3. **Monitoring and Early Detection:** Regular monitoring of vital signs and hematocrit levels is vital for the early identification of plasma leakage. Early detection enables prompt intervention, significantly reducing the

risk of severe outcomes.

4. **Hospitalization:** Severe dengue cases, including Dengue Hemorrhagic Fever (DHF) and Dengue Shock Syndrome (DSS), often necessitate hospitalization. Intensive care may be required to manage complications and provide supportive therapy.
5. **Platelet Transfusion:** In cases of severe thrombocytopenia (low platelet count), platelet transfusions may be considered to prevent or manage bleeding complications.

Challenges

Addressing the challenges posed by Dengue virus (DENV) encompasses a multifaceted landscape spanning epidemiology, clinical management, and public health initiatives. The intricate nature of dengue's epidemiology, marked by four serotypes and variable immunity levels, complicates the formulation of effective control strategies and vaccines. Vector control efforts, primarily targeting *Aedes* mosquitoes, encounter hindrances due to their adaptability to urban environments, breeding habits, and the emergence of insecticide-resistant strains. The global dissemination of dengue, fueled by factors like globalization and climate change, introduces additional intricacies to containment endeavors. Diagnostic complexities arise from the similarity of dengue symptoms with other febrile illnesses, necessitating the development of reliable and expeditious diagnostic tools. The absence of specific antiviral treatments presents challenges, while the development of a secure and efficacious dengue vaccine is impeded by the imperative to confer protection against all serotypes and concerns linked to antibody-dependent enhancement. Limited public health infrastructure in endemic regions, the impact of climate change, and the imperative for community engagement further amplify the hurdles associated with Dengue. A holistic approach, incorporating diverse disciplines and global collaboration, is indispensable to navigate these challenges effectively.

Future Prospect

Current endeavors concentrate on refining existing dengue vaccines and creating novel ones, with a specific focus on improving efficacy and achieving a universal vaccine capable of robust protection against all four serotypes. The investigation of targeted antiviral drugs, designed to inhibit viral replication without adverse effects, emerges as a promising avenue for therapeutic development. Innovations in vector control methods, such as genetically modified mosquitoes and novel insecticides, aim to offer sustainable approaches for reducing *Aedes* mosquito populations. Precision medicine, which tailors interventions based on individual patient characteristics, holds promise for enhancing clinical management and diminishing the risk of severe outcomes. The integration of advanced surveillance systems, climate-resilient strategies, and global collaboration is crucial for early detection, prevention, and control. Empowering communities through education, digital health technologies, and community engagement initiatives will play a pivotal role in achieving sustained dengue control. The future landscape of Dengue management relies on a comprehensive and collaborative approach, amalgamating scientific breakthroughs, technological innovations, and proactive public health measures to alleviate the global burden of this viral

infection.

Conclusion

In summary, addressing the challenges and future prospects associated with Dengue virus (DENV) demands a unified and interdisciplinary effort to effectively manage its impact on global public health. The identified challenges, spanning the intricate epidemiology, vector control complexities, and the ongoing pursuit of an optimal vaccine and specific antiviral treatments, underscore the multifaceted nature of combatting Dengue. Nevertheless, the future presents optimistic developments with progress in vaccine development, antiviral therapeutics, and inventive vector control strategies. Precision medicine, early warning systems, and digital health technologies stand poised to revolutionize clinical management and surveillance methodologies. Global collaboration, community engagement, and climate-resilient approaches emerge as critical components for sustaining dengue control. Navigating the evolving landscape of Dengue management requires a comprehensive and collaborative approach, integrating scientific progress, technological innovations, and proactive public health measures. This approach is essential for reducing the global burden of Dengue and safeguarding communities worldwide.

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Author Contribution

Data collection and analysis for this project were skillfully carried out by a team comprising Satapdi Dey. The conceptualization, design, and comprehensive refinement of the article were led by Suranjana Sarkar, Dr. Semanti Ghosh, Bidisha Ghosh, and Dr. Subhasis Sarkar.

Conflict of Interest

The authors declare that there are no conflicts of interest.

Declaration

The authors affirm the accuracy and truthfulness of the information presented in this document to the best of their knowledge.

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