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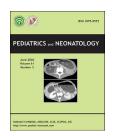
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Letter to the Editor

Role of thymopoiesis and inflamm-aging in COVID-19 phenotype



Dear Editor:

We have read the article by Hong H. et al. with interest in which the authors highlighted that SARS-CoV-2 pneumonia is reported in fewer cases of children and that pediatric clinical manifestations are relatively milder compared with those of adult patients.¹

This point is of valuable interest. Among the causes, the most important mechanisms underlying severe adult COVID-19 pneumonia cases are a reduction in CD4+ and CD8+ T cells and a decrease in regulatory T cells. These decreases are probably due to the high expression of proinflammatory cytokines, such as tumor necrosis factor (TNF)- α , interleukin (IL)-1, and IL-6, in COVID-19 patients.²

Furthermore, it is known that characteristic changes occur in the T cell compartment with age and these contribute to the increased incidence and severity of infections in elderly subjects. The production of naïve T cells is severely impaired due to a decreased output of lymphoid cells from the involution of the thymus.³

The thymus is a central lymphoid organ, which is responsible for the generation of T lymphocytes under the control of the local cellular microenvironment, mainly represented by thymic epithelial cells (TEC).⁴

Thymopoiesis leads to the maturation of peripheral naïve T cells with diverse recognition capacity against various microorganisms, such as RNA viruses, and subsets of Tregs to inhibit overactive immune responses. One of the most important age-related immune changes is the impaired generation of primary T cell responses against infection. ^{3,4}

Further, adult patients with severe case of COVID-19 had a cytokine release storm with an increase of several proinflammatory molecules, including TNF- α , IL-1, and IL-6.

Not surprisingly, a progressive propensity toward a proinflammatory phenotype, identified as inflamm-aging, plays a key role in the remodeling of the immune system at older ages, with evidence pointing to an inability to fine-control inflammation.⁵

Thus, in our opinion, the role of the thymus could be crucial in the modulation of the immune response toward SARS-CoV-2 leading to a less severe phenotype in children when compared with those in adult COVID-19 patients. On the other hand, inflamm-aging associated with the absence of thymopoietic mechanisms could be a predisposing condition that sustains the cytokine release storm as is most often reported in adult COVID-19 subjects, especially in the older COVID-19 patients.

Further studies are needed to clarify the impact of thymopoiesis and inflamm-aging on COVID-19 phenotypes. These studies could be useful not only for considering new therapeutic strategies but also for better addressing the studies that focus on inflammatory profiles and biomarkers of COVID-19 patients for pneumonia risk stratification.

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Declaration of Competing Interest

The authors declared that there are no conflicts of interests.

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