Summary of: Immunological and hematological outcomes following protracted low dose/low dose rate ionizing radiation and simulated microgravity

Key findings and quantitative results:

- **Immune System:** No significant differences in immune differentials were observed. However, hematological system analyses revealed large disparities in red blood cell differentials and morphology. Spleen DEG were associated with signal transduction, metabolism, cell cycle, chromatin organization, and DNA repair pathways. Immune modifications persisted to 1 week post-simulated spaceflight.
- **Hematological System:** CBC showed no significant differences between controls and post-simSpace. RBC and HGB levels were significantly reduced. MCH, MCV, and RDW were significantly increased. MCHC and HCT levels were not significantly different.
- **Pathways:** Five major functional pathways were affected: metabolism, cell cycle, chromatin organization, DNA repair, and signal transduction. Multiple genes were upregulated in the spleen, including cation transporters, solute carrier genes, and ubiquitin pathways. Downregulated genes were involved in inflammation, cell cycle, and DNA repair pathways.
- **Long-term Consequences:** The study highlights the need for personalized medicine to address the complex interplay of immune and hematological responses. The prolonged effects of spaceflight on the immune and hematological systems suggest a need for readjustment during readaptation to Earth's gravity. The study underscores the importance of longitudinal studies to understand the full impact of spaceflight on astronauts.
- **Limitations:** The study's cross-translation to humans is limited. Baseline and longitudinal results are not provided. The absence of galactic cosmic ray radiation testing parameters further restricts the study's applicability.
- **Conclusion:** The study identifies key DEG and DEG pathways engaged in systemic blood circulation. The results suggest that prolonged exposure to deep spaceflight environments has lasting effects on the immune and hematological systems. The need for personalized medicine to address the complex interplay of immune and hematological responses is highlighted.