

REVIEW ARTICLE

Exosomes on the border of species and kingdom intercommunication



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Over the last decades exosomes have become increasingly popular in the field of medicine. While until recently they were believed to be involved in the removal of obsolete particles from the cell, it is now known that exosomes are key players in cellular communication, carrying source-specific molecules such as proteins, growth factors, miRNA/mRNA, among others. The discovery that exosomes are not bound to intraspecies interactions, but are also capable of interkingdom communication, has once again revolutionized the field of exosomes research. A rapidly growing body of literature is shedding light at novel sources and participation of exosomes in physiological or regenerative processes, infection and disease. For the purpose of this review we have categorized 6 sources of interest (animal products, body fluids, plants, bacteria, fungus and parasites) and linked their innate roles to the clinics and potential medical applications, such as cell-based therapy, diagnostics or drug delivery. (Translational Research 2019; 210:80–98)

Abbreviations: BTG 1 = B-cell translocation gene; CAR-T = chimeric antigen receptor T-cells; CRISP = cysteine-rich secretory proteins; CRNN = cornulin; DC = dendritic cell; DSS colitis = dextran sulfate sodium induced colitis; EPDEN = edible plant derived exosome-like nanoparticles; ERM = Ezrin Radixin Moesin family; ESC = embryonic stem cell; GELN = grape exosome-like nanoparticles; GPC 1 = Glypican-1; GTSP1 = Glutathione S-transferase P; GXM = glucuronoxylomannan; HUVEC = Human umbilical vein endothelial cells; IL-1 = Interleukin 1; iPSC = induced pluripotent stem cell; IQGAP = Ras GTPase-activating-like protein; lcnARSR = long non coding RNA Activated in renal cell carcinoma with Sunitinib Resistance; LGTV = Langkat virus; MCP1 = Monocyte chemoattractant protein 1; MHC = major histocompatibility complex; miRNA = micro RNA; mRNA = messenger RNA; MSC = mesenchymal stem cell; mTOR = mechanistic Target of Rapamycin; Muc5b = Mucin 5b; nm = nanometer; OMV = outer membrane vesicle; PEDF = Pigment epithelium-derived factor; PME = pectin methyltransferase; SNX 25 = Sorting Nexin 25; TACSTD2 = Tumor-associated calcium signal transducer 2; TLR4 = Toll-like receptor 4; TNBS = Trinitrobenzenesulfonic acid; TNF- α = Tumor necrosis factor α

INTRODUCTION

Exosomes were first described in mammalian cell culture by Trams et al in 1981 as the cargo of shed

microvesicles,¹ believed to be mainly involved in the removal of obsolete molecules from the cell and cell wall.² After key findings such as their role in

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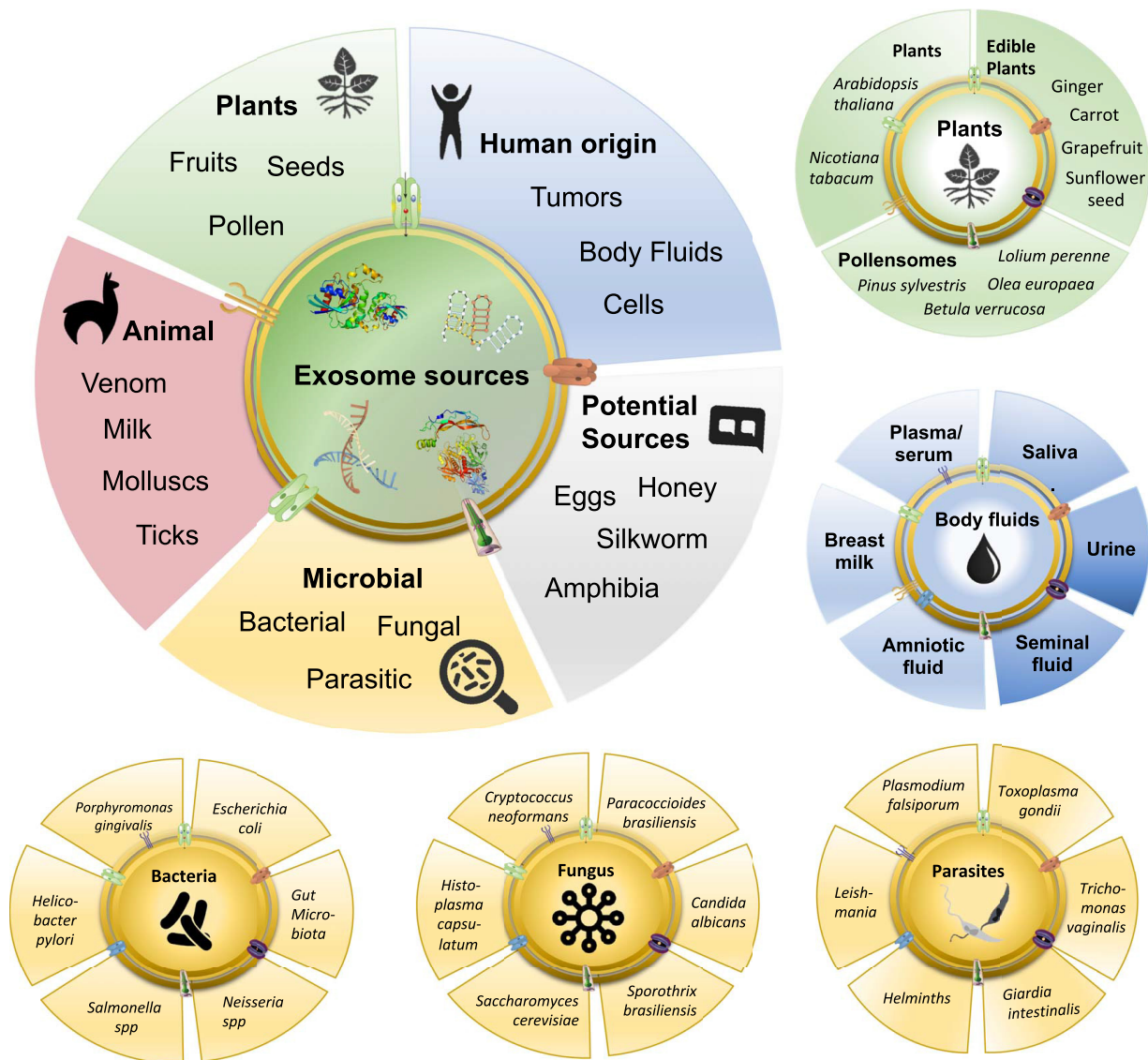


Fig 1. Illustration of the different sources for the production of exosomes, covering human, plants, animal and microbial origins. Human tissues include: tumors, cells and body fluids. Non-exhaustive examples of plants, body fluids, parasites, fungus and bacteria are depicted in the diagrams. Novel potential sources of interest for the identifications of exosomes are also highlighted in the chart, including honey, silkworm, eggs and amphibia.

expression of antigens³ and ability to transfer mRNA/miRNA,⁴ they are now established as one of the main factors in intercellular communication. By definition, exosomes are between 30 and 150 nm in size, and in an attempt to differentiate exosomes from other vesicles, the International Society for Extracellular Vesicles defined a number of criteria in their 2014 and 2018 position papers. This included isolation from extracellular fluid as well as analysis of markers that are expected to be present such as transmembrane, lipid bound extracellular proteins (CD9, CD63, CD81, integrins) or cytosolic proteins (endosome, membrane binding proteins, synthenins), but also markers that are

expected to not be present, such as intracellular proteins (calnexin, histones, cytochrome C).^{5,6} Aside from markers defining exosomes, it has been shown that exosome cargo can be associated with the phenotype, metabolic status, and biological role of their cell of origin.^{4,7,8} Many articles and reviews have focused on the use of mammalian cells and body fluids as a source for the production and isolation of exosomes. These “conventional” sources display an important basis in understanding roles of exosomes in physiological processes, as well as for their use in the clinics as biomarkers and therapy, as reviewed by Jing et al.⁹ Over the last decades, a growing body of literature has

shown that a number of other sources display interesting characteristics, shedding light into biological processes and furthermore could potentially be beneficial alternatives for medical applications. For the purposes of this review, we have categorized exosomes into human and nonhuman sources, with the latter divided into (a) animal product-derived exosomes, (b) bacterial/fungal/parasitic exosomes, and (c) plant-derived exosomes (Fig 1).

HUMAN SOURCES OF EXOSOMES

It is well known that mesenchymal stem cell (MSCs) partly exert their regenerative and therapeutic effect through the release of soluble factors, which have been mechanistically linked to exosomes in a number of pre-clinical studies¹⁰⁻¹⁵ and clinical settings. Interestingly, exosomes secreted by MSCs of different sources (eg, bone marrow, umbilical cord^{11,16}) display different physiological, pathologic, or regenerative function as mediators of cell-cell communication. For example, while exosomes derived from bone-marrow MSCs promote tumor induced angiogenesis in prostate and breast cancer, exosomes derived from menstrual fluid MSCs act as blockers.¹²

Embryonic stem cells (ESCs) were hypothesized to increase pluripotency of hematopoietic progenitor cells after horizontal transfer of ESC mRNA.⁷ Therapeutically, it has been reported that after myocardial infarction ESC-exosomes may promote endogenous repair mechanisms and enhance cardiac function.¹⁷ Induced pluripotent stem cell demonstrated in preclinical models a protective effect on limbs from ischemic injury by promoting angiogenesis through the activation of angiogenesis-related gene expression¹⁸ as well as a hepatoprotective effect in ischemia-reperfusion injury by suppression of inflammatory responses and inhibition of apoptosis.¹⁹

Dendritic cells (DCs), macrophages, and lymphocytes secrete immunologically active exosomes that could modulate physiological and pathologic processes, as well as innate and adaptive immunity.²⁰ Since 1998, DC-derived exosomes have demonstrated a high potential as immunotherapy to treat cancer, when Zitvogel et al showed that they carry functional MHC I and II molecules, and are able to induce an antitumor immune responses in vivo.²¹ Since then, several phase I or II clinical trials of DC-exosomes to treat different tumors have been reported, with increased survival and mild vaccination-related side effects.²²⁻²⁴ Exosomes of chimeric antigen receptor T cells (CAR-T) display a promising alternative for anti-cancer-immunotherapy Tang et al proposed the use of CAR-T exosomes as a safer

alternative to CAR-T cell therapy, in order to avoid some adverse effects (eg, cytokine release syndrome) observed in clinical trials utilizing cells.²⁵

Tumors in various tissues have been shown to be secretory active, and with the advancement of exosome research have also been demonstrated to secrete exosomes (eg, breast, colorectum, kidney, brain, and pancreas).²⁶⁻²⁹ Exosomes derived from metastasis were shown to contain cargo promoting migration, proliferation, invasion, and angiogenesis while non-metastatic-exosomes contained mostly proteins involved in cell-cell/cell-matrix adhesion and polarity maintenance.³⁰ Interestingly, several studies have shown that tumor-derived exosomes play a role in drug resistance. Safaei et al demonstrated in an in vitro model that cells resistant to the chemotherapeutic agent cisplatin produce higher numbers of exosomes, and that those exosomes containing cisplatin effectively decrease the intracellular concentration of the agent.³¹ It also has been hypothesized that the property of breast cancer cells to transmit chemoresistance is probably mediated by their release of exosomes, which may alter the chemosusceptibility of recipient cells by a horizontal transfer of miRNAs modulating cell cycle distribution and drug-induced apoptosis.³²

To target the issue drug delivery across the blood brain barrier, Yang et al used exosomes from mammalian culture to test their properties to deliver drugs (eg, Paclitaxel) in a zebrafish model, demonstrating the ability of fish cells to take up mammalian/human cell-derived exosomes.³³

Human body fluid-derived exosomes. As most cells and tissues produce exosomes, it is not surprising that they utilize body fluids as transportation vehicles in physiological processes such as cell-to-cell signaling,³⁴ immune responses,³⁵ and in certain pathologic processes. Since exosomes secreted into biological fluids carry a cell-distinctive cargo signature, they have potential to serve as biomarkers in diagnostics, as well as for prognosis and tracking treatment response in pathologies such as vascular and autoimmune disorders and cancer³⁶ (Table 1).

Regarding saliva, relatively few studies have investigated the presence, composition, and function of exosomes. Ogawa et al discovered in an initial study that dipeptidyl peptidase IV, actin, polymeric immunoglobulin receptor, immunoglobulin A, and galectin-3 were associated to saliva-derived exosomes.³⁷ In a follow-up study the presence of 2 different types of exosomes in saliva was discussed: one of the groups contained proteins involved in migration, coagulation, and inflammation (proteins of ERM family: ezrin, radixin, and moesin; annexins), and gelforming proteins (mucin 5B), while the other group expressed metabolically active dipeptidyl peptidase IV, cleaving CXCL11 and

Table 1. Exosomes derived from body fluids, their role in physiologic processes and medicine, as well as cargo molecules studied

Body fluid	Proposed function	Analysed cargo molecule	Reference
Amniotic fluid	Sex determination	CD24	178
Aqueous humor	Role in intra-ocular pressure	glaucoma-causing protein, myocilin	179
	Pathogenesis of glaucoma	miR-486-5p, miR-204, miR-184	180
Ascites (peritoneal lavage fluid)	Biomarker gastric cancer	miR-21, miR-1225-5p, miR-320c, miR-1202, miR-1207-5p, miR-4270	181
	Biomarker ovarian cancer	CD24, EpCAM	182
Blood (plasma, serum)	Biomarker hematological tumors	CD9, CD13, CD19, CD30, CD38, CD63	183
	Biomarker prostate cancer	CD9, CD63; N-linked glycans	184,185
	Biomarker lung cancer		186,
	Biomarker ovarian cancer	Claudin-4; miR-21, miR-141, miR-200a, miR-200c, miR-200b, miR-203, miR-205 and miR-214	187,188
	Biomarker brain cancer	Heatshock proteins; miR-21, miR-222, miR-124-3p; Endothelia Growth Factor Receptor variant 3;	189–191
	Prediction drug resistance renal cell carcinoma	IncARSR	192
	Biomarker breast cancer	survivin-2B	193
	Prediction drug resistance breast cancer	GSTP1	194
	Biomarker colorectal cancer	GPC1	195,196
	Biomarker pancreas cancer	GPC1	197
	Biomarker pre-eclampsia	placental alkaline phosphatase, has-miR-486-1-5p, has-miR-486-2-5p	44,45
	Biomarker rheumatoid arthritis	lncRNA, HOTAIR	198
	Biomarker acute coronary syndrome	miR-208a	199
Breast milk	Promote intestinal epithelial cell growth and epithelial–mesenchymal transition		200,201
	Influence immune responses		47–49
Bronchoalveolar lavage fluid	Presence of histocompatibility complex class II and co-stimulatory molecules in exosomes	MHC class I and II, CD54, CD63, CD86	47
Cerebrospinal fluid	Influence neuron cell proliferation <i>in vitro</i>		202
	Biomarker for glioblastoma	miR-21	203
Follicular fluid	Biomarkers (oocyte quality)	miRNA expression patterns	50
	Age associated differential miRNA	miRNA expression patterns	204
Malignant pleural effusions	Proteomic characterization	SNX25, BTG1, PEDF, thrombospondin 2	205
Saliva	Biomarker (microarray analyses of mRNA)		206
	Biomarker Sjorens syndrome	miRNA expression patterns	207
	Catabolism of bioactive peptides; regulatory role in local immune defense in the oral cavity	CD26, immunoglobulin A, polymeric immunoglobulin receptor	37
	Biomarker lung cancer	PIFA1, CRNN, MUC5B, IQGAP	208
Seminal fluid	Delivery of regulatory signals to the recipient mucosa	Non-coding RNAs	54
	Sperm maturation and function		51–53
Synovial fluid	Association with citrullinated proteins (rheumatoid arthritis)	Fibrin alpha-chain fragment, fibrin beta-chain, fibrinogen beta-chain precursor, fibrinogen D fragment, Sp alpha (CD5 antigen-like protein) receptor	209
	Gender specific changes in osteoarthritis	miRNA expression patterns	210
	Role in disease progression of osteoarthritis		211

(continued)

Table 1. (Continued)

Body fluid	Proposed function	Analysed cargo molecule	Reference
Tears	Characterization in healthy individuals		212
Urine	Reflect defects in distal renal tubular acidosis		213
	Biomarker bladder cancer	lncRNA HOTAIR, tetraspanins, TACSTD2	214–216
	Biomarker renal cell carcinoma	miRNA and protein expression patterns	217,218
	Biomarker prostate cancer		219
	Paracrine modulation of tubular transporters in kidney		220
	Biomarker early IgA nephropathy;	Aminopeptidase N, vasorin precursor, α -1-antitrypsin, and ceruloplasmin	221
	Biomarker polycystic kidney disease;	Polycystin-1 and polycystin-2 expression	162
	Biomarker diabetic nephropathy	Wilm's tumor-1 protein	163
	Role at the fetal-maternal interphase (in kidney)	CD24	222
	Biomarker kidney transplantation	Neutrophil gelatinase-associated lipocalin	223
Express prostatic secretions		224	
Biomarker active lupus nephritis	miR29c	225,226	

CXCL12.³⁸ Berckmann et al investigated the phenomenon of regenerative wound licking and discovered that saliva-derived exosomes contain tissue factor, with the ability of triggering coagulation of fresh wounds.³⁹

In urine, exosomes are produced throughout the entire length of the nephron and have been found to fulfill a variety of interesting and specific functions. They appear to play a role in host defense of the urinary tract by inhibiting bacterial growth via induction of bacterial lysis,⁴⁰ but have also been associated to intercellular signaling by transferring Aquaporin 2 (a vasopressin-regulated water-channel protein involved in urine concentration).^{41,42}

During pregnancy, placental and amniotic fluid exosomes have been hypothesized to be involved in a number of processes related to fetal development. A study by Salomon et al analyzed the concentration and bioactivity of exosomes in normal pregnancies over time. They found that both indicators increase significantly during early pregnancy and subsequently decline, and that early pregnancy exosomes promote endothelial cell migration.⁴³ An increase of placental exosomes is suspected to be of interest for detection of pre-eclampsia—an obstetrical disorder associated to severe complications during pregnancy⁴⁴⁻⁴⁶—and micro-RNAs has-miR-486-1-5p and has-miR-486-2-5p have been found to be potential markers for the disorder.⁴⁵ Another interesting fluid containing exosomes is human breast milk. Admyre et al demonstrated the presence of exosomes in breast milk, with the capacity to influence immune response.⁴⁷ However, recent

studies determined differences in the exosomal content and phenotype between early and mature breast milk, probably originated from immune cells present in breast milk or from breast epithelial cells.^{48,49} A study using follicular fluid—important for the oocyte and the fertilization process—and plasma of female patients undergoing intracytoplasmic sperm injection, identified a series of exosomal microRNAs that are highly represented in follicular fluid compared to plasma. These upregulated miRNAs are involved in crucial pathways for follicle growth and oocyte maturation.⁵⁰

In males, the seminal fluid has also been shown to be a source of exosomes, facilitating sperm maturation, and function.⁵¹⁻⁵³ Cargo of seminal exosomes could potentially exert regulatory functions to the recipient mucosa.^{54,55} Numerous studies also related these exosomes with immunologic and antimicrobial activity, spermatozoa motility and as potential biomarkers for several diseases, as reviewed by Ronquist et al, Arienti et al, and Aalberts et al.⁵⁶⁻⁵⁸

ALTERNATIVE SOURCES OF EXOSOMES

Animal–fluid-derived exosomes. Structurally, animal-derived exosomes do not differ from human body fluid-derived exosomes. However, a number of interesting, animal-specific biological functions and mechanisms have been observed in the past years.

Cow milk, one of the most abundant components of the western diet, contains 2 different membrane-

originating vesicles. The majority of vesicles are milk fat globule membranes, however a small part of vesicles has been found to be exosomes, which are distinctly different in proteome and function. Reinhardt et al assessed the proteome of milk-derived exosomes and in KEGG pathway analysis found the majority to be involved in endocytosis, regulation of the actin cytoskeleton, and chemokine signaling. Interestingly, 23 proteins associated to cancer pathways have also been identified.⁵⁹ Several studies were performed assessing differences between early and late stage milk production, but also between healthy and pathologic milk. When looking at colostrum (early stage milk) in comparison mature milk using functional enrichment analysis, Samuel et al found an enrichment in acute phase response proteins, which are associated to inhibition of bacterial growth, but also in proteins associated to platelet activation and inflammatory responses. This suggests an involvement of colostrum exosomes in infant immune response and growth.⁶⁰ Exosomal changes have also been observed in *Staphylococcus aureus* mastitis, where exosome proteome shifts toward host defense proteins compared to healthy cows.⁶¹

Furthermore, in the context of nutraceuticals, Mobley et al discovered in an in vitro study that hydrolyzed whey protein exosomes increased skeletal muscle protein synthesis and anabolism. They hypothesized this effect is more likely to be due to a novel mechanism that increases translation initiation factors, as opposed to enhancing mTOR signaling or bovine-specific microRNA.⁶²

Besides milk, other interesting animal sources for exosomes have been described. In oysters, exosomes have been found to be involved in reparative mechanisms. When the outer shell is damaged, a thin layer of extracellular matrix is formed into which exosomes containing crystalline shell components are deposited, initiating the process of forming the structured folia mineral.⁶³ Interestingly, Zhou et al discovered that tick-derived exosomes might be involved in transmission of viruses. They cultivated *Ixodes Scapularis* cells infected with Langat virus (LGTV) and detected replicative LGTV RNA as well as E- and NS-1 proteins in the exosomes. In functional studies, they demonstrated that viral RNA can be transmitted via exosomes into human cells in a clathrin dependent manner, and furthermore are able to cross the blood brain barrier. Once neurons become infected, they are also able to spread the virus via their own exosomes and further disseminate the infection.⁶⁴

Cameiro et al were the first to report the presence of exosomes in snake venom, finding similar vesicles of 40-80 nm in size in the venom glands as well as in collected venom of *Crotalus durissus terrificus*, but leaving the mechanism of action of these exosomes unexplained.⁶⁵ A

subsequent study by Ogawa et al investigated cargo and composition of vesicles derived from *Gloydius blomhoffii blomhoffii* venom and found dipeptidyl peptidase IV, aminopeptidase A, ecto-5'-nucleotidase, as well as actin and in truncated form angiotensin II, substance P, cholecystokinin-octapeptide, glucose-dependent insulinotropic polypeptide and glucagon-like peptide-1. Testing bioactivity in vitro, they found that exosome-like vesicles were able to cleave these regulatory peptides and concluded that the vesicles following envenomation may play a role in altering blood pressure due to the presence of substance P and neuropeptide Y, as well as glucose homeostasis, with dipeptidyl peptidase IV found to inactivate hormones such as the insulin-release stimulators glucose-dependent insulinotropic polypeptide and glucagon-like peptide-1.⁶⁶ Corassolla Carregali et al described similar findings for the species *Agkistrodon contortrix contortrix*, *Crotalus atrox*, *Crotalus viridis*, and *Crotalus cerberus oreganus*, finding proteins in the vesicles associated to the following subgroups: snake venom metalloprotease, serine protease, phospholipase A2, CRISP and disintegrin, among others. In functional assays they were able to demonstrate metalloproteinase and fibrinogenolytic activity as well as cytotoxicity in HUVEC cells.⁶⁷

Microbial exosomes

Bacterial exosomes. Bacterial exosomes—or outer membrane vesicles (OMVs)—have shown to be released by all studied Gram-negative bacteria independent of their pathogenicity. Kuehn et al listed in their 2005 review species such as *Escherichia coli*, *Shigella* spp., *Neisseria* spp., *Bacteroides* (including *Porphyromonas*) spp., *Pseudomonas aeruginosa*, *Helicobacter pylori*, *Vibrio* spp., *Salmonella* spp., *Brucella melitensis*, *Campylobacter jejuni*, *Actinobacillus actinomycetemcomitans*, *Xenorhabdus nematophilus*, and *Borrelia burgdorferi*,⁶⁸ but to date many more have been investigated. Sizes of OMVs range from 50 to 250-300 nm (diameter) and shedding occurs constitutively, but appears to be increased under stress.^{69,70} Interestingly, OMVs can carry cargo such as DNA, RNA, proteins, or LPS in the intravesicular lumen but also in the outer shell, having the membrane as an active component. OMVs have shown to be internalized by mammalian cells and their uptake has been associated to four main mechanisms summarized by O'Donoghue et al: (1) macropinocytosis,⁷¹ the process of membrane ruffling, and subsequent vesiculation and unspecific uptake of extracellular components^{72,73}; (2) clathrin-dependent endocytosis⁷⁴, where clathrin-coated pits are formed to capture and internalize cargo⁷⁵; (3) non-clathrin mediated endocytosis through lipid rafts, either via caveolins⁷⁶ or small GTPases⁷⁷; and (4) direct membrane fusion.⁷⁷

Bacteria-derived OMVs have shown to play a role in several important bacteria-bacteria and bacteria-host

interactions. Derived from commensal bacteria, OMVs participate in intestinal homeostasis, which has been studied by Shen et al in a TNBS induced mouse model. Treated with *Bacteroides fragilis* PSA containing OMVs, an immune-modulatory effect was triggered, reflected in enhanced regulatory T cell as well as anti-inflammatory cytokine production that prevented colitis in mice.⁷⁸ Kang et al analyzed feces-derived bacteria and OMVs in a DSS colitis mouse model, to assess changes in the gut microbiota, finding a decrease in the commensal strains *Akkermansia muciniphila* and *Bacteroides acidifaciens*. Oral application of *A. muciniphila* OMVs ameliorated symptoms associated to DSS colitis, suggesting that not only live bacteria, but also their OMVs could be used for potential therapies.⁷⁹

Furthermore, pathogenic bacteria utilize OMV shedding to distribute virulence factors, such as adenylate cyclase toxin by *Bordetella pertussis*,⁸⁰ phospholipase C by *Acentobacter baumannii*⁸¹ and *P. aeruginosa*,⁸² shiga toxin by *Shigella dysenteriae*⁸³ and *Escherichia coli* O157:H7,⁸⁴ as well as VacA by *Helicobacter pylori*⁸⁵ or alkaline phosphatase by *Vibrio shilonii*⁸⁶ and *Myxococcus xanthus*.⁸⁷ Furthermore, antibiotic resistance can be increased due to OMVs, as strains such as *P. aeruginosa*,⁸⁸ *Stenotrophomonas maltophilia*,⁸⁹ and *Staphylococcus aureus*⁹⁰ have shown to shed OMVs containing β -lactamase; and *A. baumannii* is capable of transferring OXA-24 carbapenemase via OMVs, demonstrating a new route of disseminating antibiotoxic resistance via horizontal gene transfer.⁹¹

Aside from distribution of specific virulence factors, OMVs have demonstrated to modulate immune reactions. Effects on the immune response include stimulation of chemokine release, such as IL-1 β , IL-6, IL-8, or MCP1, but also direct interaction with immune cells such as neutrophils, macrophages or DCs.⁹²⁻⁹⁴ One interesting example for the significance and versatility of OMVs is *Porphyromonas gingivalis*, which is a keystone pathogen in oral biofilm formation and periodontal disease. Grenier et al showed in an early study that *P. gingivalis* OMVs are decreasing responsiveness to Chlorhexidin, one of the most frequently used oral antibacterial washes.⁹⁵ Continuous exposure to *P. Gingivalis* OMVs also decreased responsiveness of monocytes, which has been speculated to be related to induction of tumor necrosis factor tolerance in a TLR4- and mTOR-mediated way.⁹⁶ One of *P. gingivalis* virulence factors is gingipain, an endopeptidase involved in nutrient collection, which is also found on OMVs and has been shown to be involved in altering host cell functions and decreasing viability.⁹⁷ Gingipain is capable of modulating the host immune response by degradation of immunoglobulin, inactivation of cytokines, increasing vascular permeability, among others.⁹⁸ One mechanism of

gingipain immune modulation is worth highlighting: the biphasic effect on the complement system. In early stages of *P. gingivalis* infection gingipain activates the C1 complex, creating a local inflammatory response which is believed to increase nutrient supply and improve colonisation, while in later stages it can inactivate complement factors (C3, C4, C5) leading to resistance to the complement system.⁹⁹ Failing to elicit a sufficient immune response as well as altering host cell viability does not only lead to the local issue of chronic periodontitis, but also should be seen as part of the bigger picture: *P. gingivalis* has been described as an important pathogen in a number of systemic diseases including arteriosclerosis, cardiovascular disease, Buerger disease, diabetes mellitus, and Alzheimer's disease. For most of these diseases the role of OMVs has not been elucidated yet, however, Yang et al discovered that these OMVs promote calcification of vascular smooth muscle cells through RunX2—a transcription factor involved in osteogenic differentiation—in a ERK1/2 dependent manner,¹⁰⁰ linking arteriosclerosis to *P. gingivalis* OMVs.¹⁰¹

While OMVs of Gram-negative bacteria are well studied, OMVs of Gram-positive bacteria are acknowledged as such, but mechanisms behind their secretion and function are fairly unknown. One of the first Gram-positive bacterial OMVs to be studied more extensively was derived from *S. aureus*. As mentioned above, these OMVs have shown to contain β -lactamase as cargo, decreasing antibiotic treatment efficacy. Kim et al found the presence of *S. aureus* OMVs in house dust⁹⁰ and furthermore revealed their involvement in pulmonary inflammatory disease as well as atopic dermatitis.¹⁰²

Interestingly, pathogenicity and immune modulation of OMVs is not limited to mammals, but also appears in plants. One of the factors in pathogenicity of bacteria in plants is degradation of the cell wall, usually by secretion of enzymes into the extracellular space (type II secretion). Solé et al analyzed *Xanthomonas campestris* pv. *vesicatoria* secretome as well as its OMVs, and found that degradative enzymes (xylanase) can be found both secreted as well as in vesicles, suggesting an alternative sustained route of virulence factor delivery.¹⁰³ Bahar et al demonstrated in an in vitro *Arabidopsis thaliana* model that OMVs trigger a reactive oxygen species release, change in pH, as well as overexpression of flg22-induced receptor-like kinase 1 and At5g57220 which are associated to defense mechanisms.¹⁰⁴

Fungal exosomes. The presence of fungal exosomes has first been described a decade ago and until now has been reported for a number of fungal strains, such as *Cryptococcus neoformans*, *Saccharomyces cerevisiae*, *Histoplasma capsulatum*, *Paracoccidioides brasiliensis*, *Pichia fermentans*, *Candida albicans*, and *Sporothrix brasiliensis*.¹⁰⁵⁻¹¹¹ Until today, the structure of the

fungal cell wall, consisting of a lipid bilayer as well as chitin, glucans, and glycoproteins¹¹² raises questions on the mechanism of vesicle release as well as uptake. Wolf et al visualized *Cryptococcus neoformans* vesicles traversing the cell wall¹⁰⁵ and Joffe et al hypothesized in their review on potential roles of fungal exosomes, that one of the potential mechanisms for entering cells could involve cell-wall degrading enzymes in fungal exosomes, naming *Saccharomyces cerevisiae* or *Histoplasma capsulatum* as examples, among others.^{106,107,113}

Functionally, fungal exosomes appear to be involved in cell-cell communication as well as fungal virulence. It has been shown for *Cryptococcus neoformans*—a major pathogen especially for immune-compromised humans and causative agent of cryptococcosis that vesicles contain GXM and glucosylceramide, as well as other virulence factors such as urease, laccase, acid phosphatase, and several antioxidant proteins such as superoxide dismutase, thioredoxin, thioredoxin reductase, thiol-specific antioxidant protein, and catalase A.¹¹⁴ Kazuo Ikeda et al demonstrated that *Sporothrix brasiliensis* extracellular vesicles lead to higher expression of IL-12p40 and TNF- α by DCs in vitro, and an increased virulence in a skin lesion mouse model.¹¹¹ An interesting example for the interplay of fungal cells and exosome-related virulence is *Cryptococcus gattii*. Bielska et al showed an increased in virulence of this strain can be related to their extracellular vesicles by the following mechanism: macrophages in the infected host internalize *C. gattii* extracellular vesicles, which are trafficked to Cryptococci residing within the phagosome, causing an increase in proliferation and therefore driving pathogenesis.¹¹⁵

Parasite-derived exosomes. Within the last decades, studies enlightening the role of parasitic EVs in parasite-parasite communication as well as in parasite-host interaction have become increasingly popular. As in the case of bacteria and fungal vesicles, exosomes of parasites carry virulence factors that are taken up by host cells and participate in pathogen dissemination. Li et al observed that *Toxoplasma gondii*, an obligate intracellular apicomplexan parasite, has the ability to modulate macrophage activation in vitro and trigger humoral and cellular immune responses, suggesting a potential strategy for vaccine development.¹¹⁶ In Malaria infection caused by *Plasmodium falciparum*, increased levels of vesicles were detected in the patients serum,¹¹⁷ containing small regulatory RNAs, that have been found to code for exported proteins as well as proteins involved in drug resistance.¹¹⁸ Furthermore, Regev-Rutzki et al revealed that *P. falciparum* utilize exosomes to transfer drug resistance.¹¹⁹

Silverman et al speculated in their 2012 review that *Leishmania* exosomes play a key role in the initial

phases of infection. They propose that GP63 and EF-1a are delivered to the host cells, activating host protein-tyrosine phosphatases and preventing IFN- γ -induced signaling, and as a consequence weaken the proinflammatory cytokine response.¹²⁰⁻¹²³ A similar finding was reported for *Trichomonas vaginalis*, the causative parasite of trichomoniasis. *Trichomonas* exosomes were found to modulate the macrophage response and change the cytokine profile, inducing IL-10 production and decreasing IL-6, IL-13, and IL-17, which suggests an overall decrease in inflammatory processes during infection.¹²⁴ The intestinal parasite *Giardia intestinalis* has been found to respond to environmental changes (eg, decrease of pH) with increased secretion of exosomes, which is utilized to increase its attachment to the host cells. Furthermore, *Giardia* exosomes are taken up by immature DCs, increasing their activation.¹²⁵

Besides these negative effects, some parasitic exosomes may have beneficial effects for humans. Harnett et al discussed in their review how parasitic helminths are able to suppress host immune responses,¹²⁶ which raises interest in their use as therapeutics for autoimmune conditions such as inflammatory bowel disease or rheumatoid arthritis.^{127,128} Several groups demonstrated that helminth exosomes are taken up by mammalian cells such as small intestinal epithelial cells and macrophages, and downregulate expression of IL-5, IL-6, IL-13, and TNF, which are associated to immune responses.^{129,130} However, the question remains whether treatment with exosomes collected from helminths would be sufficient to elicit a therapeutic effect.

Plant exosomes. Plant cells differ structurally from animal cells, especially in one of the key structures for exosome release: the outer membrane. While animal cells possess a phospholipid bilayer enabling exosome release into the extracellular space, plant cells are additionally encased within a cell wall consisting of polysaccharides, in between which paramural bodies—exosome-like vesicles—are released from the cell membrane. In the model organism *Arabidopsis thaliana* it has been discovered that plant exosomes are carrying miRNAs, sRNAs (small RNAs, 18-24 nt) as well as tyRNAs (tiny RNAs, 10-17 nt), in addition to proteins, lipids, and metabolites. Comparing the cargo to the presence of the mi/s/tyRNAs in the apoplast, different appearance patterns could be found, suggesting a specific loading pattern and a use for long-distance delivery.¹³¹ Furthermore, plant cell exosomes are believed to be involved in host-defense mechanisms, such as defense against parasites, for example, *Arabidopsis thaliana* against *Pseudomonas syringae*¹³² or barley (*Hordeum vulgare*) against mildew fungus (*Blumeria graminis*).¹³³

As a first group to identify exosome-like nanoparticles in edible plants, Regente et al revealed the

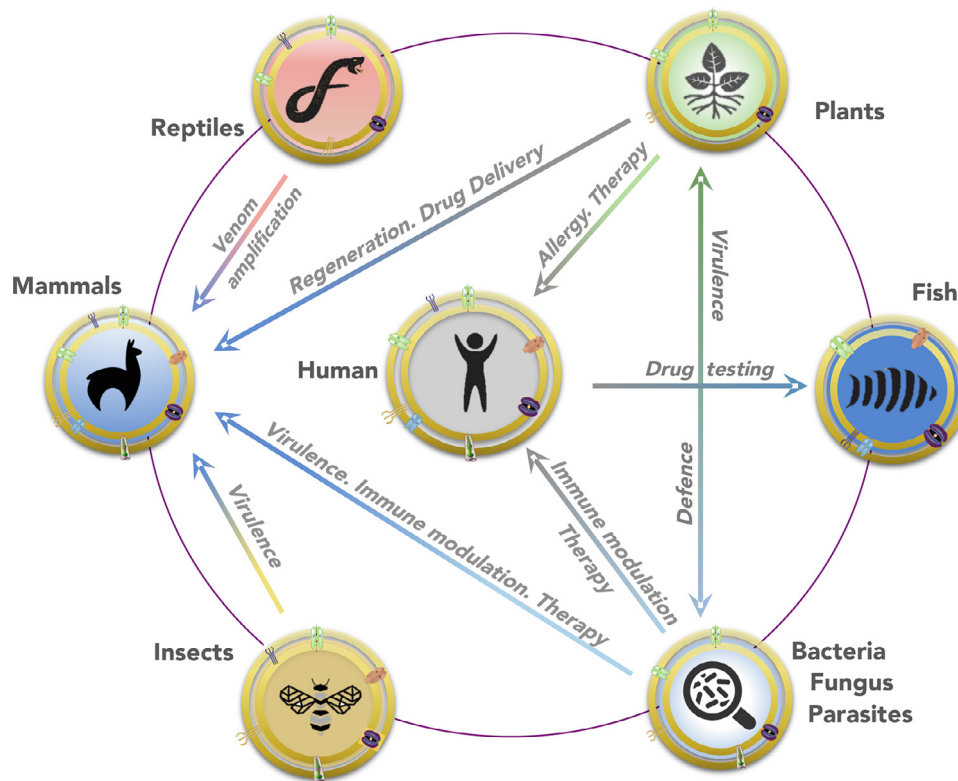


Fig 2. Overview of exosome interkingdom communication, including microbes (bacteria, fungus, parasites), plants, insects, reptiles and fish. Mammals and humans are depicted separately, to depict differences between model organism and clinical trials. Arrow origin indicates species donating exosomes, while arrow tip indicates at exosome receiving species. Arrows are accompanied by the most important effect exosomes elicit in the recipient species or most common use.

apoplastic fluid of sunflower seeds contains microvesicles carrying GTPase Rab cargo.¹³⁴ Liang et al discovered circulating plant miRNA (watermelon) in human plasma, speculating about the presence of microvesicles.¹³⁵

However Ju et al were the first to investigate the effect of plant exosomes on the mammalian digestive system. Exosome-like nanoparticles were isolated from grapes (GELN) and their effect on intestinal stem cells was assessed *in vitro*, as well as in a colitis mouse model *in vivo*. GELN were found to not only be taken up by intestinal cells, but also to increase proliferation and organoid formation *in vitro*. In a dextran sulphate sodium-induced colitis model, mice ingesting grape exosomes revealed a decreased onset of colitis, indicating the regenerative and protective effect of these exosomes.¹³⁶ In a follow-up study exosomes from ginger, carrot, grapefruit as well as grape were analyzed concerning pathways for interspecies communication. It was shown that those exosomes were taken up by macrophages and intestinal stem cells, and furthermore that exosomes from different plant sources activated different pathways in mammalian cells. While ginger

mainly induced interleukin 10 and heme-oxygenase 1 expression in macrophages, grape, and grapefruit were found to induce Wnt/TCF4 expression. Furthermore, grapefruit, ginger, and carrot promoted activation of nuclear factor (erythroid-derived 2)-like 2. The authors of the study conclude that “the data suggest a role for EPDEN mediated interspecies communication by inducing expression of genes for anti-inflammation cytokines, antioxidation, and activation of Wnt signaling, which are crucial for maintaining intestinal homeostasis.”¹³⁷ It is noteworthy that communication between plants and animals can be classified as “interkingdom” communication, rather than interspecies (Fig 2). Zhou et al provided new insight into interkingdom crosstalk in their 2017 review, pointing out the importance of miRNA as well as sRNA, which they argue to travel through the organism via two potential mechanisms: on the one hand sRNA are taken up by intestinal cells and subsequently packaged into exosomes and secreted, and on the other hand—referring to¹³⁷—within plant exosomes themselves.¹³⁸ Interestingly, plant exosomes have not only been shown to interact with fungal and mammalian cells,

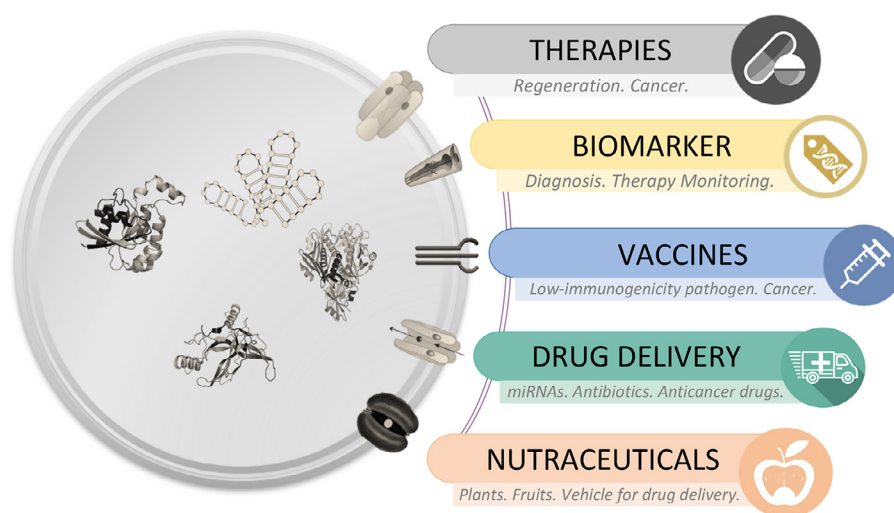


Fig 3. Exosomes identified from the different tissues or species can be used in a plethora of different biomedical applications. The administration of exosomes can be applied as cell-based therapies, vaccine or as nutraceuticals. The identification of exosomes in body fluids can be utilized to identify diseases and monitor therapy progression (biomarkers). Finally, the loading of exosomes with miRNA, proteins or small molecules represents a new delivery system for drugs and antibiotics.

but also with bacteria. Yu et al discovered that commensal bacteria such as *Escherichia coli* MG1655 and *Lactobacillus plantarum* take up exosomes derived from coconut water (*Cocos nuciferi*).¹³⁹

A reoccurring future perspective is the use of plant exosomes in a therapeutic setting, either utilizing known therapeutic properties of plants or package plant exosomes with a therapeutic cargo. In a preclinical study, Wang et al utilized grapefruit-derived exosomes to deliver doxorubicin 2 to different cancer models, showing a decreased growth of the tumors. Furthermore, the same exosomes were loaded with curcumin and tested in a colitis model, revealing a protective effect in DSS colitis.¹⁴⁰ Zhuang et al investigated the effect of intranasal administration of micro RNA 17 encapsulated into folic acid coated grapefruit vesicles on brain tumors and found a selective uptake into FL-26 tumor cells in vitro and delayed tumor growth in a mouse model.¹⁴¹ Li et al reported a tumor-inhibiting effect of ginger-derived exosomes, when decorated with orientable arrowtail RNA for siRNA delivery.¹⁴²

Another interesting aspect in plant exosomes are pollen-derived exosomes, or pollensomes. Prado et al first analyzed protein content of *Olea europaea* pollen-derived exosomes (as well as *Betula verrucosa*, *Pinus sylvestris* and *Lolium perenne*), to then further investigate their role in allergy. They found proteins associated to a number of cellular functions, such as metabolism and signaling (eg, fructokinase), protein synthesis and processing (eg, peptidyl-prolyl-isomerase), but also cell wall expansion (eg, PME) or membrane transport (eg, H⁺-ATPase 6), and concluded that the interplay of those

play a crucial role in pollen tube growth and successful fertilization. They also found proteins related to defense responses (eg, phenylcoumaran benzylic ether reductase, heat shock protein 70), and allergen-associated proteins (Ole e 1, Ole e 11 (a PME), and Ole e 12).¹⁴³ In a subsequent clinical study, they investigated allergenic potential of Olea pollensomes and found increased patients IgE-binding, human basophil activation, and positive skin reactions. To address the question whether pollensomes are a laboratory phenomenon or naturally occurring, they collected aerobiological samples and isolated pollensomes, concluding that pollensomes could be vehicles for pollen allergens, potentially playing crucial roles in allergic reactions.¹⁴⁴

APPLICATIONS AND CHALLENGES

Over the last years, research on potential applications for exosomes has caught the attention of a number of clinical fields. The proposed benefits range from easily accessible to versatile and safe cell-free therapy, and due to their known regenerative potential, MSCs have been a popular source for exosomes.

However, as mentioned throughout the review, other sources appear to offer interesting opportunities in medicine. Understanding the role of exosomes in pathology might augment in developing treatments, but also associate symptoms to pathogens (eg, *P. gingivalis* OMVs in arteriosclerosis). Therefore, throughout the following section we will describe several potential applications for exosomes with direct benefit in clinics and medicine (Fig 3).

Therapy: Due to their innate role in tissue regeneration, MSCs have been used as a source of regenerative exosomes for a variety of conditions, such as wound healing,^{145,146} ischemic pathologies such as stroke^{147,148} and heart infarct,^{149,150} as well as liver fibrosis¹⁶ and sepsis.¹⁵¹ Promising anticancer therapies include exosomes derived from DCs, but also chimeric antigen presenting T cells^{21,25} and ginger-derived exosomes.¹⁴² Exosomes derived from microbiota bacteria, helminth parasites, and grapes have shown to alleviate symptoms in intestinal pathologies such as colitis.^{79,129,130,136}

Vaccines: OMVs have offered an opportunity to develop vaccines for pathogens with low immunogenicity, such as *N. meningitidis* serogroup B (MenB), which traditionally bears the risk of autoimmunity due to the low immunogenicity of its capsular polysaccharides. Since the 1970s, parenteral vaccines using wildtype OMVs are in use in several countries (Norway, Cuba, New Zealand), with an efficacy of 70%-83%. Other examples for wildtype OMVs include *Vibrio cholerae* (dOMV_C), *Bordetella pertussis* (dOMV_{BP}), and *Mycobacterium smegmatis*.¹⁵² In a new trend, genetically modified bacteria are used to improve vaccine efficacy. In case of MenB, a strain was genetically engineered to have constitutive expression of the outer membrane protein FetA, which again has been shown to induce bacteriocidal antibodies in humans.¹⁵³ Interestingly, OMV based vaccines are also being considered for vaccinating fish against diseases such as francisellosis.¹⁵⁴

Over the years several studies have investigated exosomes as anticancer vaccines. Zitvogel et al in 1998 showed DC-derived exosomes bear functional MHC I and II molecules able to induce an antitumor immune responses, which has led to several clinical trials.²²⁻²⁴ However, further research is necessary in this field in order to transfer these therapies into everyday clinical therapies.

Drug delivery: Exosomes display a number advantages as nanocarriers for drug delivery, such as penetration into deep tissues, a characteristic zeta potential (measure of electric charge in disperse nanoparticle systems)¹⁵⁵ allowing prolonged circulation as well as their intrinsic cell-targeting properties.¹⁵⁶ Mouse lymphoma cell line-derived exosomes loaded with curcumin have been shown to decrease inflammation in septic mice.¹⁵⁷ Loaded with doxorubicin, DC-derived exosomes lead to inhibition of breast tumor growth.¹⁵⁸ Yang et al were able to demonstrate that exosomes derived from cancer cell lines transport doxorubicin and paclitaxel across the blood brain barrier in an interkingdom model using zebrafish (*Danio Rerio*).³³ Macrophage and monocyte-derived exosomes were shown to be able to transport the antioxidant catalase to the

brain in an attempt to treat Parkinson's disease in a mouse model.¹⁵⁹

Biomarkers: Cancer-derived exosomes as well as body-fluid-derived exosomes have shown great potential for the use as biomarkers in early diagnosis and therapy monitoring.^{43,160,161} Analysis of urinary exosome contents have been extensively investigated for their use as potential biomarkers for renal dysfunction and injury (eg, polycystic kidney disease¹⁶² or diabetic nephropathy).¹⁶³ Furthermore, placental exosomes are of interest for detection of pre-eclampsia, an obstetric disorder associated to severe complications during pregnancy.⁴³ Also, serum-derived exosomes have been shown to assist in diagnosis of glioblastoma, Parkinson's disease but also Alzheimer's disease.¹⁶⁴⁻¹⁶⁶

Nutraceuticals: are an emerging field, and exosomes derived from whey and edible plants such as grape or grapefruit, which have been shown to be taken up by mammalian cells and exert beneficial effects on the digestive tract. Furthermore they were shown to be modifiable in their cargo (eg, adding doxorubicin or curcumin), altering their properties^{136,140} and presenting a cost-efficient and versatile alternative to cell-culture-derived exosomes.

Challenges: Currently, the use of exosomes in the clinics is facing a number of challenges in the manufacturing process, as reviewed by Colao et al.¹⁶⁷ The main method used for labscale isolation of exosomes—ultracentrifugation—has been demonstrated to isolate both, microvesicles and exosomes without discriminating between the 2 types without extensive processing.¹⁶⁸ Furthermore, changing from labscale ultracentrifugation to more scalable isolation techniques such as tangential flow filtration resulted in different exosome cargos and functional outcomes.^{169,170} Aside from manufacturing, Yang et al identified drug loading and delivery to target cells as potential challenges for exosome therapy.¹⁷¹

POTENTIAL SOURCES AND PERSPECTIVES

While numerous sources have already been examined for the presence and biological role of exosomes, others—even though the presence of exosomes can be assumed—appear to be understudied. Carneiro et al as well as Ogawa et al discovered exosomes in snake venom, which is secreted by venom glands and related to salivary glands. Consequently, other secretes produced by salivary-related glands could be a potential source for exosomes. Examples include *Bombyx mori* silk, *Aerodramus saliva* (which hardens when in contact with air), puffer fish secrete, octopus mucus, shrew saliva as well as lizard and iguana venom.¹⁷² Furthermore it can be

hypothesized that bee products such as honey or royal jelly may contain exosomes not just due to their origin (hypopharyngeal and mandibular glands), but also because of their lipid and membrane-derived fatty acids contents.^{173,174} Given that human placenta has been demonstrated to produce exosomes, placental tissue throughout species could be a source of exosomes, such as, bird eggs, but also fish or amphibian eggs. Several animals with remarkable characteristics have been thoroughly studied to identify underlying molecular mechanisms, however have not been evaluated for the presence of exosomes yet. This includes the axolotl due to its ability to regenerate limbs,¹⁷⁵ animals known to produce bioadhesives,¹⁷⁶ as well as snail mucus as it has been shown to exert regenerative effects.¹⁷⁷

CONCLUSIONS

Exosomes have been found in all taxonomic kingdoms and offer numerous opportunities to study physiological processes and pathologies, as well as regeneration. As exosomal communication is not confined to interspecies interaction, the potential to discover new pathologic mechanisms (eg, participation of OMVs in Alzheimer's disease) as well as novel therapies appears endless. Until now only a few nonmammalian sources have been tested in preclinical or clinical settings and the potential of exosomes has not been exhaustively studied. Several probable exosomes sources such as bee products or indigenous medicinal plants have not been investigated yet. If exosomes are proven to be the active compounds of natural products then their isolation from those sources could offer the opportunity of bringing traditional medicine into the 21st century. Aside from their innate cargo, exosomes from several taxonomic kingdoms have been shown to be loadable with therapeutic agents such as curcumin, doxorubicin or paclitaxel, acting as nanocarrier drug delivery systems in mammals. Medical applications of exosomes include therapeutic approaches such as anticancer therapies, vaccines against microbes with low immunogenicity but also cancer, drug delivery systems, and biomarkers for several conditions. Alternative sources of exosomes such as bacteria, parasites or plants offer cost-effective and easily scalable alternatives to conventional therapeutic exosome sources such as cultivated MSCs.

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