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Reprogramming Exosomes as Nanoscale Controllers of Cellular Immunity

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Abstract

Exosomes are naturally occurring membranous vesicles secreted by various types of cells. Given their unique and important biological and pharmacological properties, exosomes have been emerging as a promising form of nanomedicine acting via efficient delivery of endogenous and exogenous therapeutics. Here we explore a new concept of utilizing endogenously derived exosomes as artificial controllers of cellular immunity to redirect and activate cytotoxic T cells toward cancer cells for killing. This was achieved through genetically displaying two distinct types of antibodies on exosomal surface. The resulting synthetic **multivalent antibodies re**targeted **exosomes** (SMART-Exos), which express monoclonal antibodies specific for T-cell CD3 and cancer cell-associated epidermal growth factor receptor (EGFR), were shown to not only induce cross-linking of T cells and EGFR-expressing breast cancer cells but also elicit potent antitumor immunity both *in vitro* and *in vivo*. This proof-of-concept study demonstrates a novel application of exosomes in cancer immunotherapy and may provide a general and versatile approach for the development of a new class of cell-free therapy.

Exosomes are nanosized membrane vehicles secreted by various types of cells and are found in most body fluids.^{1,2} As endogenous nanocarriers, exosomes play important roles in mediating cell–cell communication.^{3–5} The membrane of exosome is characterized by a

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Supporting Information

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Additional experimental materials and methods and supplementary table and figures (PDF)

The authors declare the following competing financial interest(s): The authors have filed a patent application on this work.

phospholipid bilayer and abundant tetraspanin CD9, which promotes direct membrane fusion with target cells and facilitates cellular delivery of therapeutic agents. Furthermore, CD47 found on exosomes is shown to inhibit clearance of exosomes by circulating monocytes and macrophages.⁶ Importantly, relative to viral and synthetic nanocarriers which tend to show high immunoreactivity, endogenously derived exosomes are expected to display significantly reduced immunogenicity. Given these unique and pharmacologically important properties, exosomes have been emerging as a new and attractive form of nanomedicine.

A considerable number of preclinical and clinical studies revealed that exosomes with various forms of therapeutic cargos have high potential for the treatment of many human diseases.^{4,7-15} Multiple types of cells were utilized to produce exosomes for therapeutic development.^{7-9,16,17} Using different physical and chemical methods, exosomes were packed with exogenous interfering RNAs and chemotherapeutics for drug delivery.^{6,8,11,18-21} The extensive applications of exosomes in therapeutic delivery raise the question of whether endogenously derived exosomes could be harnessed as artificial cellular immunity controllers to redirect immune effector cells and modulate their immunoreactivity. Such exosome-based nanoagents may possess unique and/or enhanced pharmacological properties for the development of novel therapeutics.

Here we explore this new concept through design, generation, and characterization of an innovative class of exosomes, termed as **synthetic multivalent antibodies retargeted exosomes** (SMART-Exos) (Figure 1). This was achieved through genetically displaying two distinct types of antibodies on exosomal surface. The generated SMART-Exos simultaneously targeting T-cell surface CD3 and cancer cell-associated epidermal growth factor receptor (EGFR) were shown to bind to both T cells and EGFR-expressing triple negative breast cancer (TNBC) cells. *In vitro* cytotoxicity studies revealed that the SMART-Exos induce potent and specific killing of EGFR-positive TNBC cells in the presence of nonactivated human peripheral blood mononuclear cells (PBMCs). *In vivo* efficacy studies using mouse xenograft models demonstrated excellent antitumor activities for the SMART-Exos. As a proof of concept, the SMART-Exos not only demonstrate a new strategy in developing therapeutic exosomes but also may provide a broadly applicable platform technology for next-generation immunotherapeutics.

Considering unique and invaluable features of exosomes, we envisioned that functional display of two types of antibodies on exosomal surface could result in an innovative class of therapeutic exosomes with potentially high potency and specificity for recruiting and activating endogenous cytotoxic effector cells toward target cancer cells for destruction. To test this notion, SMART-Exos targeting T-cell CD3 and EGFR were designed and generated. Overexpressed EGFR is frequently found in TNBC and about 90% of TNBC patients show expression of EGFR.²²⁻²⁵

The transmembrane (TM) domain of human platelet-derived growth factor receptor (PDGFR) was exploited as a fusion partner to display antibodies on exosomal surface, which has been widely used in expressing proteins on mammalian cells surfaces.^{26,27} To ensure coexpression of two types of antibodies on the same exosome and minimize decreased

affinities due to potential steric hindrance between two antibody scaffolds, single polypeptides consisting of two single-chain variable fragment (scFv) antibodies targeting CD3 and EGFR were genetically linked to the TM domain of PDGFR. Considering potential effects of the orientation of individual antibodies on physicochemical and biological properties of SMART-Exos, two fusion constructs were designed (denoted as α CD3/ α EGFR and α EGFR/ α CD3) (Figure S1), in which an anti-human CD3 UCHT1 scFv antibody ($V_{L\alpha CD3}$ - $V_{H\alpha CD3}$),²⁸ was genetically fused with N- or C-terminus of the anti-human EGFR cetuximab scFv antibody ($V_{H\alpha EGFR}$ - $V_{L\alpha EGFR}$). The V_H and V_L for both scFvs were arranged in different orientations to minimize potential mispairing. Flexible (GGGGS)₄ linkers were inserted between two scFv antibodies. Additionally, α EGFR and α CD3 scFv antibodies were separately fused with PDGFR TM domain for generation of single antibody-PDGFR fusions as controls (Figure S1). Each fusion contained an N-terminal hemagglutinin (HA) epitope tag.

Expressed SMART-Exos were isolated by differential centrifugation from chemically defined media of Expi293F cells (a suspension-adapted HEK293 cell line) transfected with expression constructs.²⁹ Approximately 100 μ g of SMART-Exos (1.3×10^{10} particles) could be generated from 30 mL of cell culture post-transfection. Compared with immune cell- or tumor cell-derived exosomes, which are involved in modulation of immune responses in cancer,^{30,31} exosomes derived from HEK293 cell line were demonstrated to be immunologically inert,³² providing an excellent source of exosomes for the addition of new functions.

Immunoblot analysis indicated that all scFv antibodies were expressed in exosomes. Moreover, SMART-Exos showed expression of exosomal marker CD9, CD81, and CD63, similar to native exosomes (Figure 2a). Flow cytometric analysis indicated that α CD3/ α EGFR SMART-Exos and α EGFR/ α CD3 SMART-Exos can tightly bind to both MDA-MB-468 and Jurkat cells (Figure 2b), demonstrating that the dual scFv antibodies on exosomal surface allow to target exosomes to both EGFR- and CD3-expressing cells. These results also suggest no significant mispairing for coexpressed scFvs. Compared with α EGFR/ α CD3 SMART-Exos, α CD3/ α EGFR SMART-Exos exhibited slightly higher binding affinity to both cell lines and were selected for subsequent *in vitro* and *in vivo* studies. None of the SMART-Exos displayed significant binding to MDA-MB-453 cells (CD3⁻ EGFR⁻) (Figure S2). Nanoparticle tracking analysis (NTA) of α CD3/ α EGFR SMART-Exos indicated a size distribution peaking at 100 nm in diameter (Figure 2c), consistent with previous studies.^{6,8,33,34} The ζ -potential of α CD3/ α EGFR SMART-Exos was determined to be -25 ± 4.1 mV, consistent with previous reports.³⁵⁻³⁹ The α CD3/ α EGFR SMART-Exos were visualized by transmission electron microscopy (Figure 2c).

To demonstrate simultaneous binding of α CD3/ α EGFR SMART-Exos to both antigens, SMART-Exos-mediated cross-linking of fluorescently labeled MDA-MB-468 (red) and Jurkat (green) cells was analyzed by confocal microscopy. In contrast to a mixture of α CD3 and α EGFR SMART-Exos, α CD3/ α EGFR SMART-Exos induced significant cross-linking of MDA-MB-468 and Jurkat cells ($P < 0.001$; Figures 2d and S3a). Few Jurkat cells were bound to MDA-MB-453 cells in the presence of α CD3/ α EGFR SMART-Exos or a mixture of α CD3 and α EGFR SMART-Exos (Figure S3b,c). Furthermore, PKH67-labeled α CD3/

α EGFR SMART-Exos (green) were observed at the interface of MDA-MB-468 (red) and Jurkat cells (no fluorescent label) (Figure 2e). These results demonstrate cell–cell interactions mediated by α CD3/ α EGFR SMART-Exos.

In vitro cytotoxicity assays were next performed. In the presence of human PBMCs, α CD3/ α EGFR SMART-Exos exhibited highly potent and specific cytotoxicity against MDAMB-468 cells with an EC_{50} of 11.6 ± 1.6 ng mL⁻¹ and significantly decreased cytotoxicity for MDA-MB-453 cells ($EC_{50} > 1000$ ng mL⁻¹) (Figure 3a). The α CD3/ α EGFR SMART-Exos could induce significant cytotoxicity for target cells with an E:T ratio as low as 1. When the E:T ratios were increased to 4 and above, comparable maximal killings were achieved at same concentrations of SMART-Exos (Figure 3b). Additionally, cytotoxicity of α CD3/ α EGFR SMART-Exos were determined for TNBC cell lines with various levels of EGFR expression (Figure S4), including MDA-MB-468 (EGFR⁺⁺⁺), BT20 (EGFR⁺⁺), and MDA-MB-231 (EGFR⁺) cells. The α CD3/ α EGFR SMART-Exos showed potent cytotoxicity for MDA-MB-468, BT20, and MDA-MB-231 cells with EC_{50} values in a range of 12–143 ng mL⁻¹, positively correlating with levels of EGFR expression (Figures 3c and S5). These results demonstrate remarkable potency and specificity of α CD3/ α EGFR SMART-Exos for inducing immune attack of EGFR-positive TNBC cells.

Next, T-cell activation was characterized (Figures 4 and S6). It was shown that T cells can be potently activated by α CD3/ α EGFR SMART-Exos and the SMART-Exos-mediated T-cell activation is dependent on EGFR-expressing MDA-MB-468 cells (Figure 4). On the basis of T-cell activation markers CD25 and CD69, it was found that α CD3/ α EGFR SMART-Exos can result in dose-dependent activation of T cells in the presence of EGFR-positive MDA-MB-468 cells (Figure S6). These results demonstrate potent activation of human T cells by α CD3/ α EGFR SMART-Exos in a target cell-dependent manner.

A pharmacokinetic study was performed for α CD3/ α EGFR SMART-Exos in mice. The intravenously administered α CD3/ α EGFR SMART-Exos exhibited a characteristic two-phase pharmacokinetic behavior with an elimination half-life of 172.5 ± 42.0 min (Figure S7), comparable to the half-lives determined for exosomes from different cell types.^{40–42} To evaluate *in vivo* antitumor activity of α CD3/ α EGFR SMART-Exos, human TNBC xenograft mouse models were established using MDA-MB-468 cells. Shortly after treatment was initiated, tumor shrinkage was observed in the treatment group, whereas the PBS-treated mice displayed steady increase of tumor size. After treatment was stopped, no significant tumor regrowth was observed in the treatment group ($P < 0.001$) (Figure 5a). These results demonstrate excellent *in vivo* efficacy of the SMART-Exos for established tumors in mice. Moreover, no overt toxicity or loss of body weight was observed for mice in PBS- or SMART-Exos-treated groups (Figure S8). Flow cytometric analysis indicated that in contrast to tumors from PBS-treated mice that show low levels of intratumoral T cells, significant T-cell infiltrations were observed in SMART-Exos-treated animals (Figures 5b and S9), suggesting specific recruitment of cytotoxic T cell to the microenvironment of tumors by the administered SMART-Exos.

This study shows, for the first time, functional display of two distinct types of monoclonal antibodies on exosome surface for inducing antitumor immunity in a controlled and directed

fashion. By selectively recruiting cytotoxic T cells to cancer cells, the spherical and multivalent dual-targeted SMART-Exos may promote the formation of immunological synapses and enhance the activation of immune effector cells. Notably, the SMART-Exos can possibly be loaded with a variety of therapeutic cargos for selective delivery to target cells to enhance efficacy. Moreover, through functionally displaying two or more types of monoclonal antibodies and/or effector proteins, SMART-Exos may provide a general and versatile platform technology for the development of a new class of exosome-based therapeutics. Compared with conventional nanoparticles, exosomes are expected to possess high biocompatibility, increased serum stability and efficiency for therapeutic delivery, and low immunogenicity. But in-depth characterization of exosomal composition may be required for developing therapeutic exosomes with improved efficacy and reduced side effects. In conclusion, the SMART-Exos characterized by genetically encoded, surface-displayed monoclonal antibodies exhibit excellent activity and specificity in eliciting potent anticancer immunity against EGFR-positive TNBC cells both *in vitro* and *in vivo*. Future studies include biodistribution and toxicity, *in vivo* mechanism(s) of action, and generation of SMART-Exos targeting other immune effector cells and/or disease-associated antigens.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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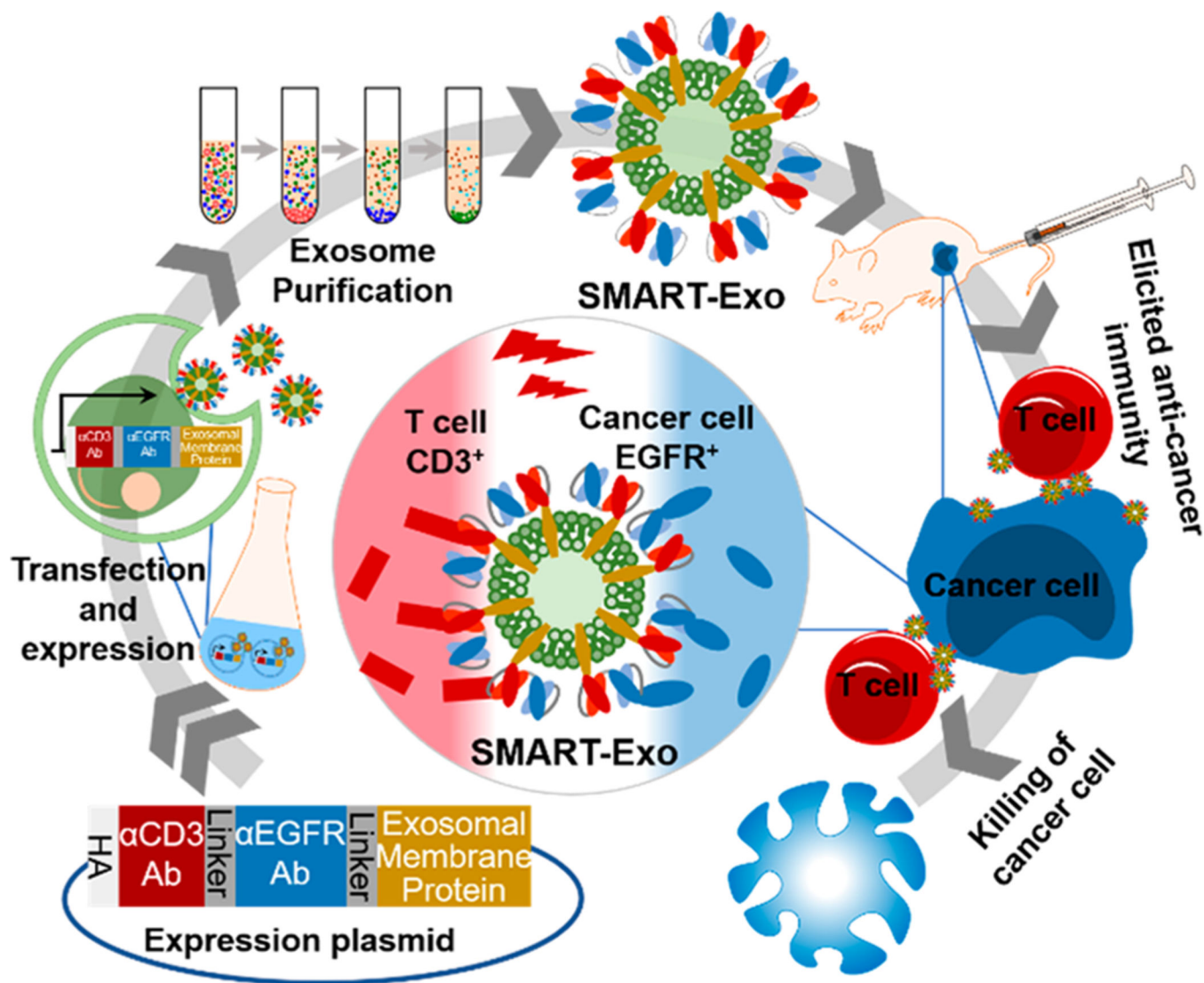


Figure 1. Schematic of the design and generation of α CD3/ α EGFR synthetic multivalent antibodies retargeted exosomes (SMART-Exos).

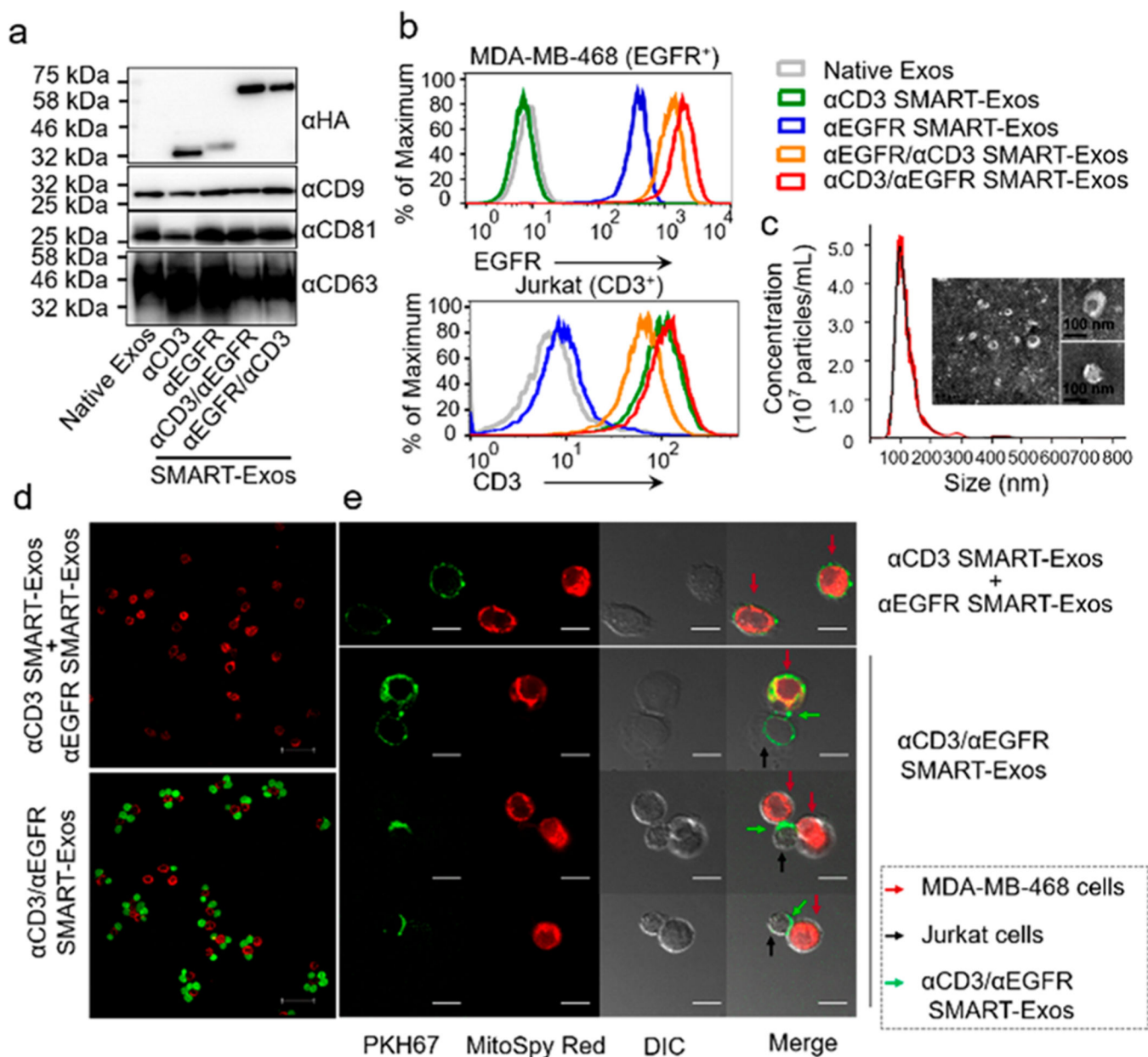


Figure 2. Characterization of SMART-Exos. (a) Immunoblot analysis of SMART-Exos. (b) Flow cytometric analysis of the binding of SMART-Exos to MDA-MB-468 and Jurkat cells. (c) Size distribution and negative staining transmission electron microscopy (TEM) images of α CD3/ α EGFR SMART-Exos. (d) Confocal microscopic analysis of cross-linking of Jurkat (green) and MDA-MB-468 cells (red) induced by α CD3/ α EGFR SMART-Exos. A mixture of α CD3 and α EGFR SMART-Exos was used as a control. Scale bars: 50 μ m. (e) Confocal imaging of α CD3/ α EGFR SMART-Exos (green) participating in cross-linking of MDA-MB-468 (red) and Jurkat (no fluorescent label) cells. A mixture of PKH67-labeled α CD3 and α EGFR SMART-Exos was used as a control. Scale bars: 10 μ m.

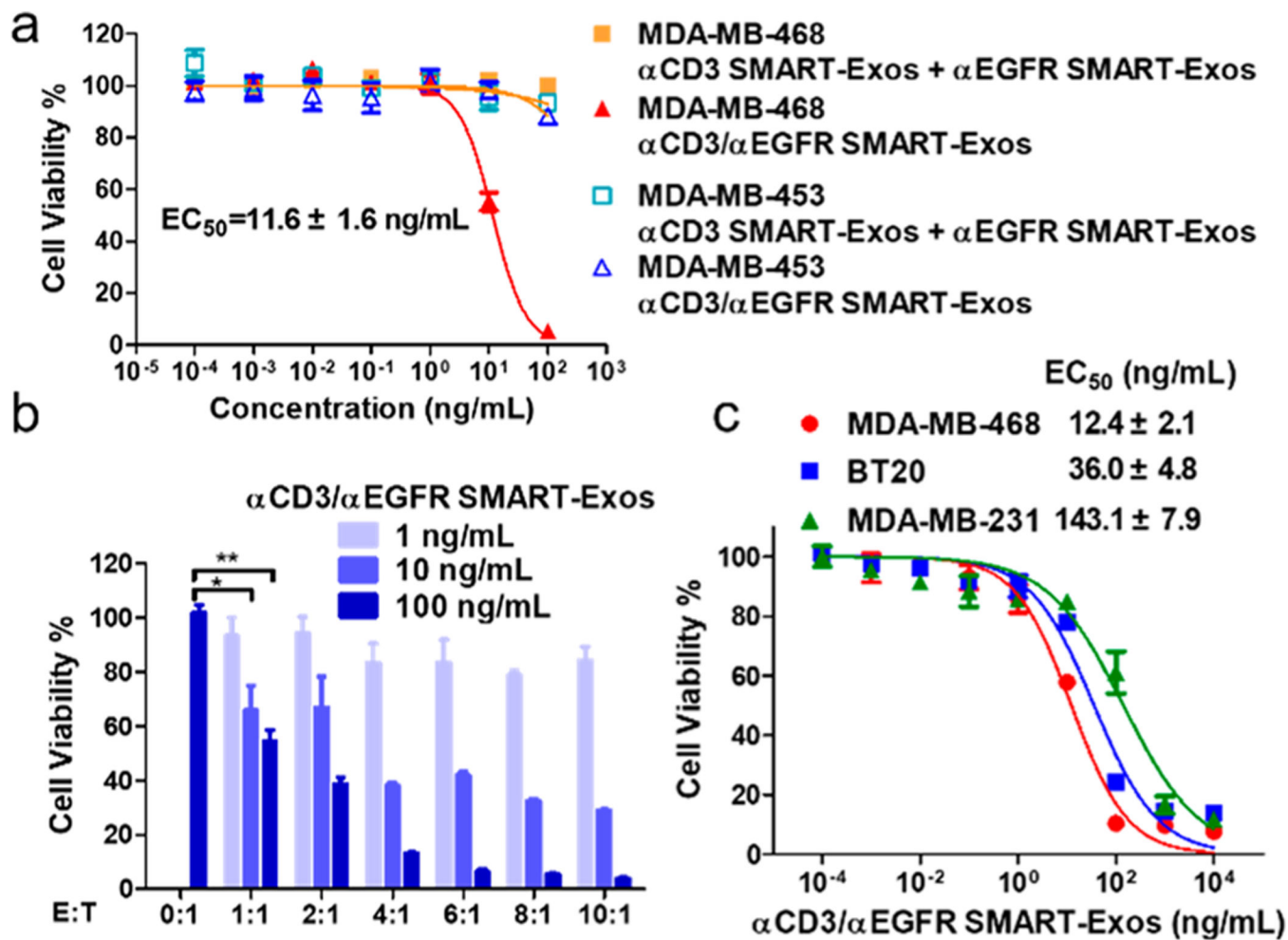


Figure 3.

In vitro cytotoxicity of α CD3/ α EGFR SMART-Exos. (a) Cytotoxicity of α CD3/ α EGFR SMART-Exos for MDA-MB-468 (EGFR⁺) or MDA-MB-453 (EGFR⁻) cells. (b) Dose-dependent cytotoxicity of α CD3/ α EGFR SMART-Exos for MDA-MB-468 cells at various E:T ratios. * $P < 0.05$ or ** $P < 0.01$. (c) Dose-dependent cytotoxicity of α CD3/ α EGFR SMART-Exos for three TNBC cell lines. Human PBMCs (effector cells) were incubated with TNBC cells (target cells) at an E:T ratio of 10 (a) and (c) or various E:T ratios (b) in the presence of α CD3/ α EGFR SMART-Exos. A mixture of α CD3 and α EGFR SMART-Exos was used as a control in (a).

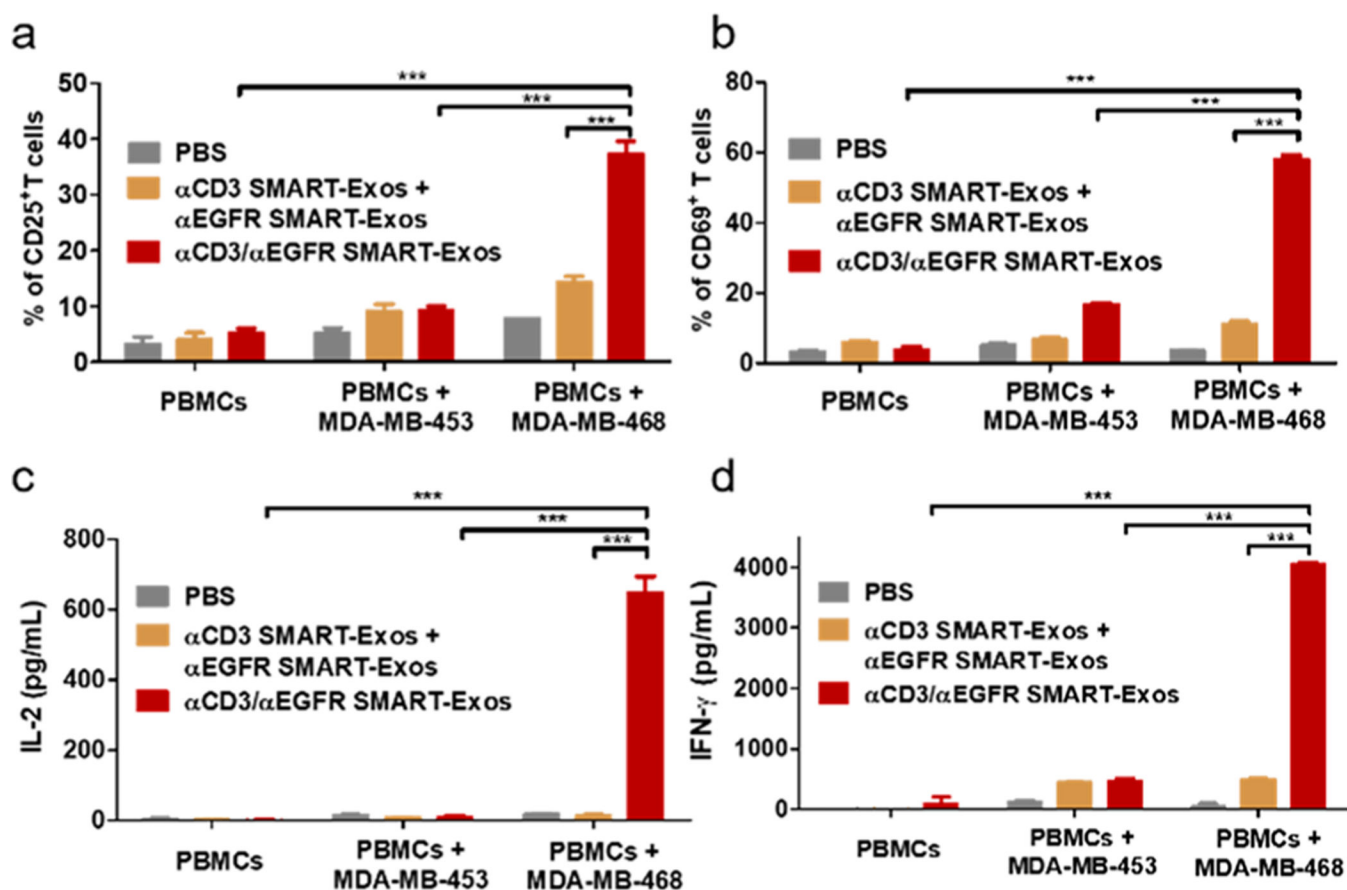


Figure 4.

T-cell activation induced by α CD3/ α EGFR SMART-Exos. Human PBMCs were incubated with α CD3/ α EGFR SMART-Exos or a mixture of α CD3 and α EGFR SMART-Exos in the absence or presence of MDA-MB-453 or MDA-MB-468 cells. The percentages of CD25⁺ (a) and CD69⁺ (b) T cells were analyzed by flow cytometry. The levels of secreted IL-2 (c) and IFN- γ (d) cytokines were determined by ELISA. *** $P < 0.001$.

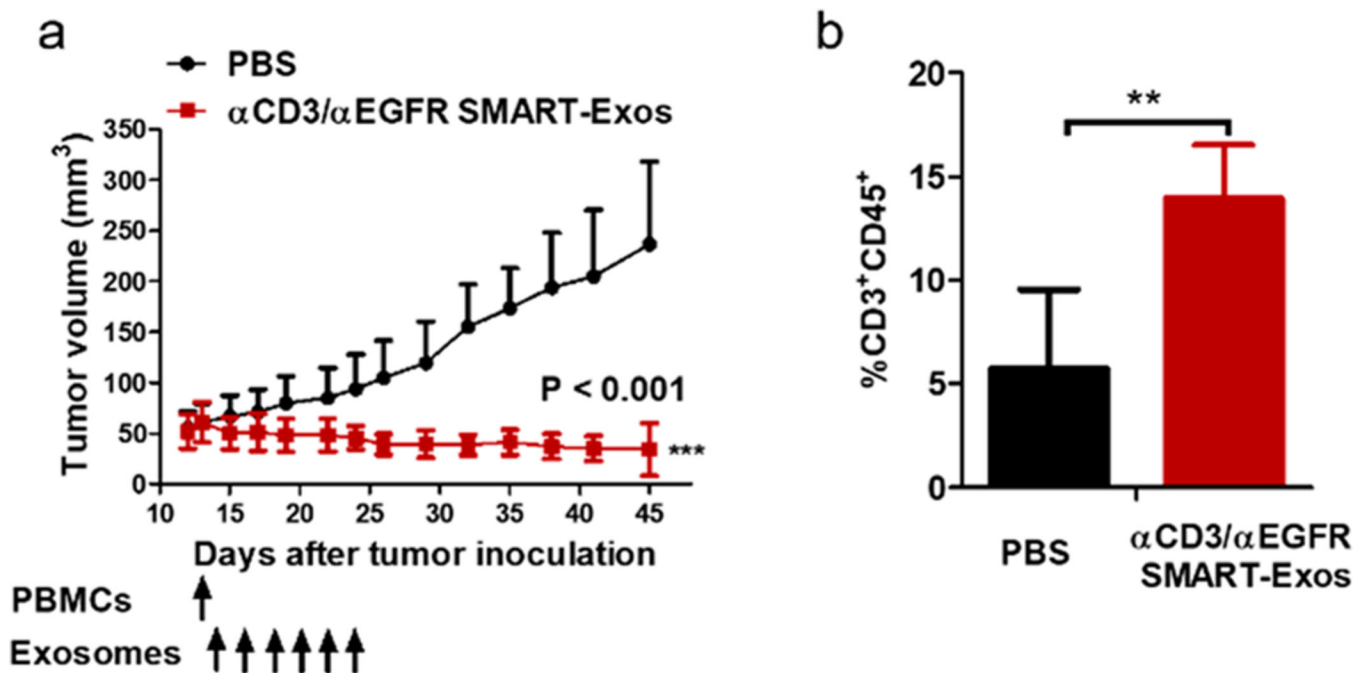


Figure 5.

In vivo evaluation of α CD3/ α EGFR SMART-Exos. (a) *In vivo* efficacy of SMART-Exos. MDA-MB-468 cells were s.c. inoculated into the flank of female immunodeficient NSG mice ($n = 5$). Nonactivated human PBMCs were i.p. injected into the mice. One day post-PBMCs injection, mice were i.v. injected with PBS or α CD3/ α EGFR SMART-Exos (10 mg kg^{-1} ; 2.8×10^{10} particles per mouse) every other day for a total of six times. Data are shown as mean \pm SD. *** $P < 0.001$. (b) *In vivo* T-cell infiltration induced by α CD3/ α EGFR SMART-Exos. ($n = 5$; ** $P < 0.01$).