

Optimization of an Adjuvant-Only Vaccine as a Horizontal Infection-Prevention Strategy

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Abstract

Background: Traditional vaccines protect vertically against pathogen-specific infections - a much narrower approach than horizontal, pathogen-agnostic approaches. Development of a broad-spectrum vaccine that protects against drug-resistant healthcare-associated infections (HAIs) would greatly improve healthcare. We previously reported that a unique combination of three-adjuvant provides short- to intermediate-term protection against Gram-negative and -positive bacterial infection, without the use of protein antigens. We now report dose optimization and effects of a fourth adjuvant (mannan).

Methods: We immunized mice subcutaneously with placebo or a combination of different adjuvants (aluminum hydroxide, monophosphoryl lipid A, whole glucan particles, and/or mannan). Three days after the immunization, mice were challenged with a lethal intravenous infection of *Acinetobacter baumannii*, *Klebsiella pneumoniae*, *Staphylococcus aureus*, or *Rhizopus oryzae*

Results: Lowering the dose of the triple-adjuvant regimen (aluminum hydroxide, monophosphoryl lipid A, whole glucan particles) conferred partial protection against bloodstream infections caused by XDR strains of *A. baumannii*. When mannan was added to the low-dose triple-adjuvant regimen, the quadruple-adjuvant combination provided protection similar to the high-dose triple-adjuvant regimen. In addition, Alhydrogel, MPL, and mannan provided similar if not better protection compared to the quadruple-adjuvant combination against bloodstream infections caused by *S. aureus* and even neutropenic mice from disseminated mucormycosis.

Conclusion: These data strongly encourage the translation of an adjuvant-only vaccine as a horizontal infection-prevention strategy for patients at risk of HAIs.

Methods

Immunization

Subcutaneous 200 μ L injection in scruff of neck

- Alhydrogel, 1.3%
- MPL (monophosphoryl lipid A) 10 μ g
- WGP (whole glucan particle) 100 μ g
- Mannan 100 μ g

Challenge

250 μ L tail-vein injection with antibiotic-resistant clinical isolates of

- *S. aureus* (LAC)
- *A. baumannii* (HUMC1)
- *K. pneumoniae* (KPC-KP1)
- *R. oryzae* (99-880)



Results

A. baumannii IV in C3H

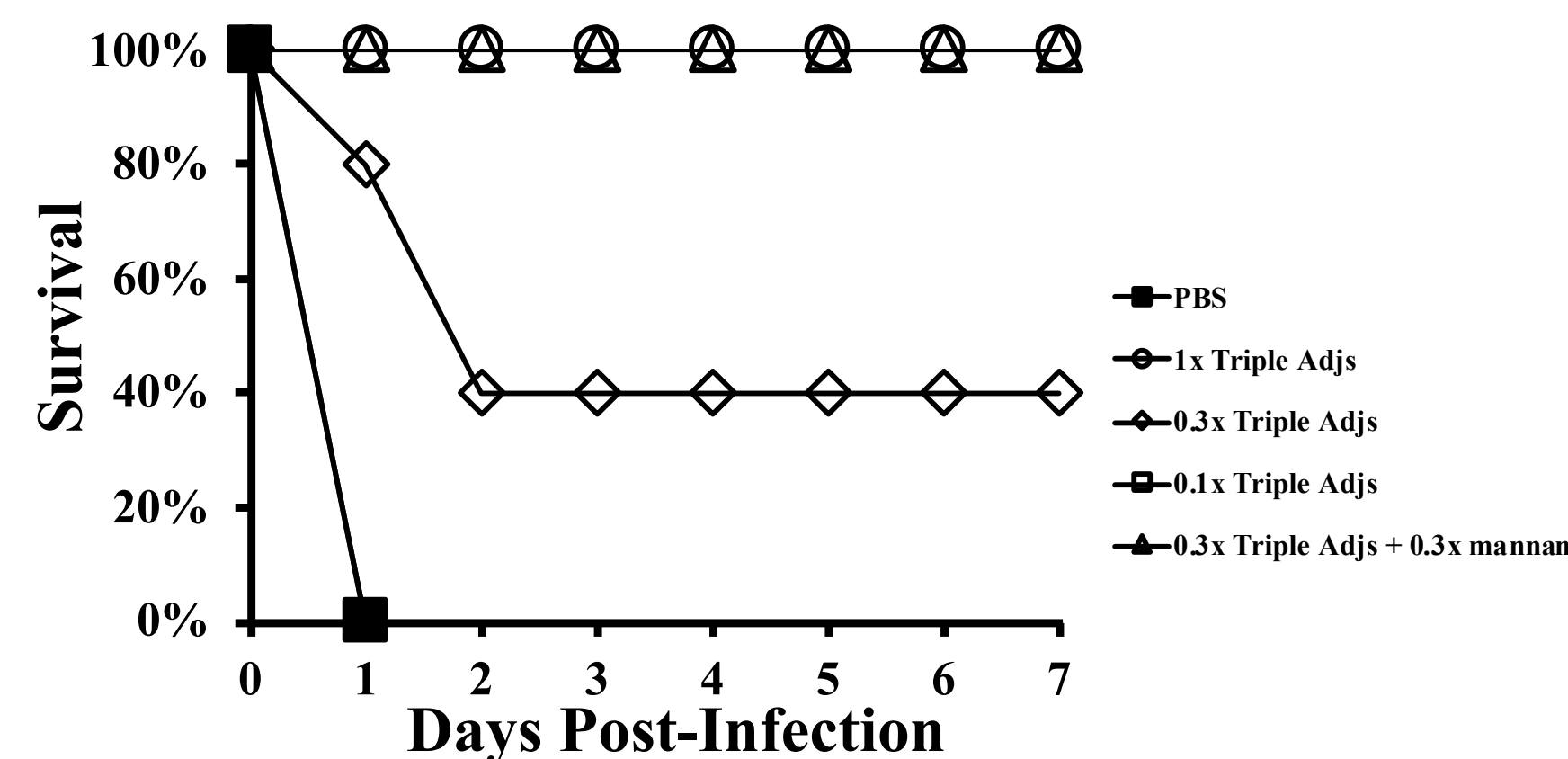


Figure 1. Comparing adjuvants with vs without mannan, including mannan improved survival of mice immunized with a lower dose of adjuvants when challenged with HUMC1 (an antibiotic-resistant clinical isolate of *A. baumannii*).

K. pneumoniae IV in C3H

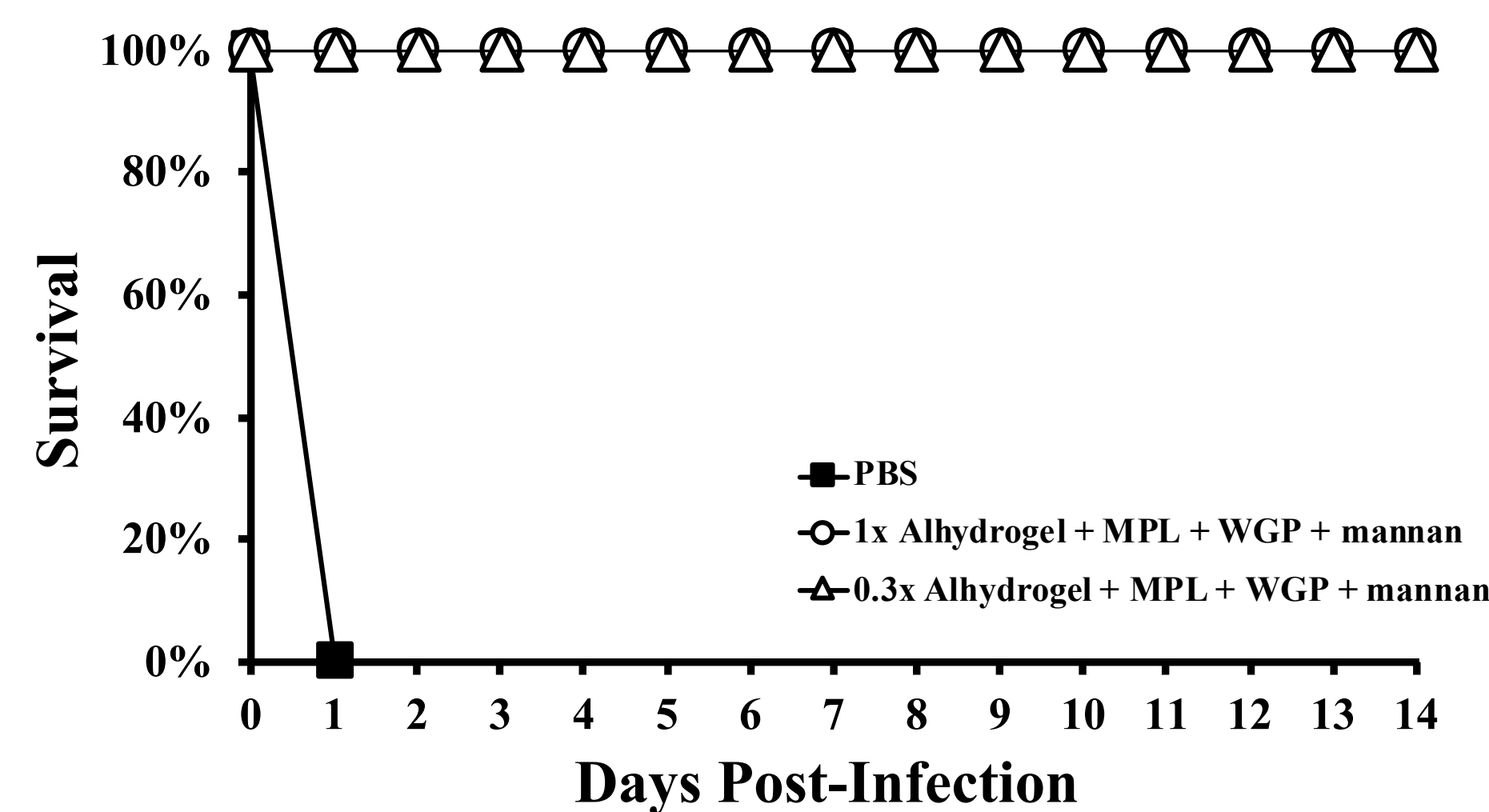


Figure 2. Mice were immunized with the combination of quadruple adjuvants and then infected 3 days later with the Gram-negative bacterium *K. pneumoniae* (strain KPC-KP1).

R. oryzae IV in BALB/c

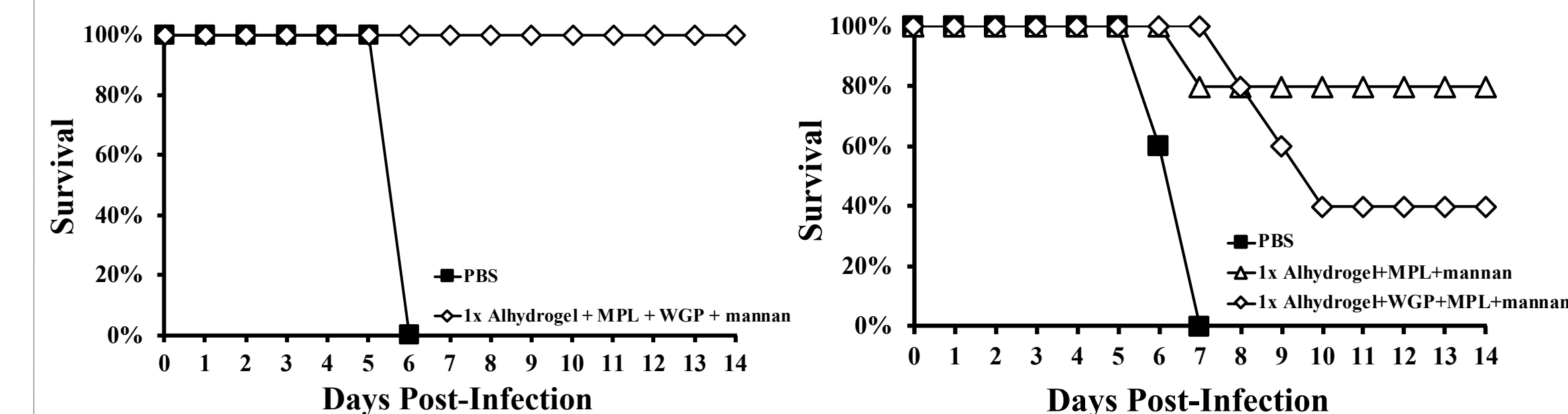


Figure 3. Neutrophil-depleted mice were immunized with various adjuvant groups and then infected 3 days later with the fungus *R. oryzae* (stain 99-880) at either A) 1.2E3 or B) 2.9E3 spores/mouse.

S. aureus IV in BALB/c

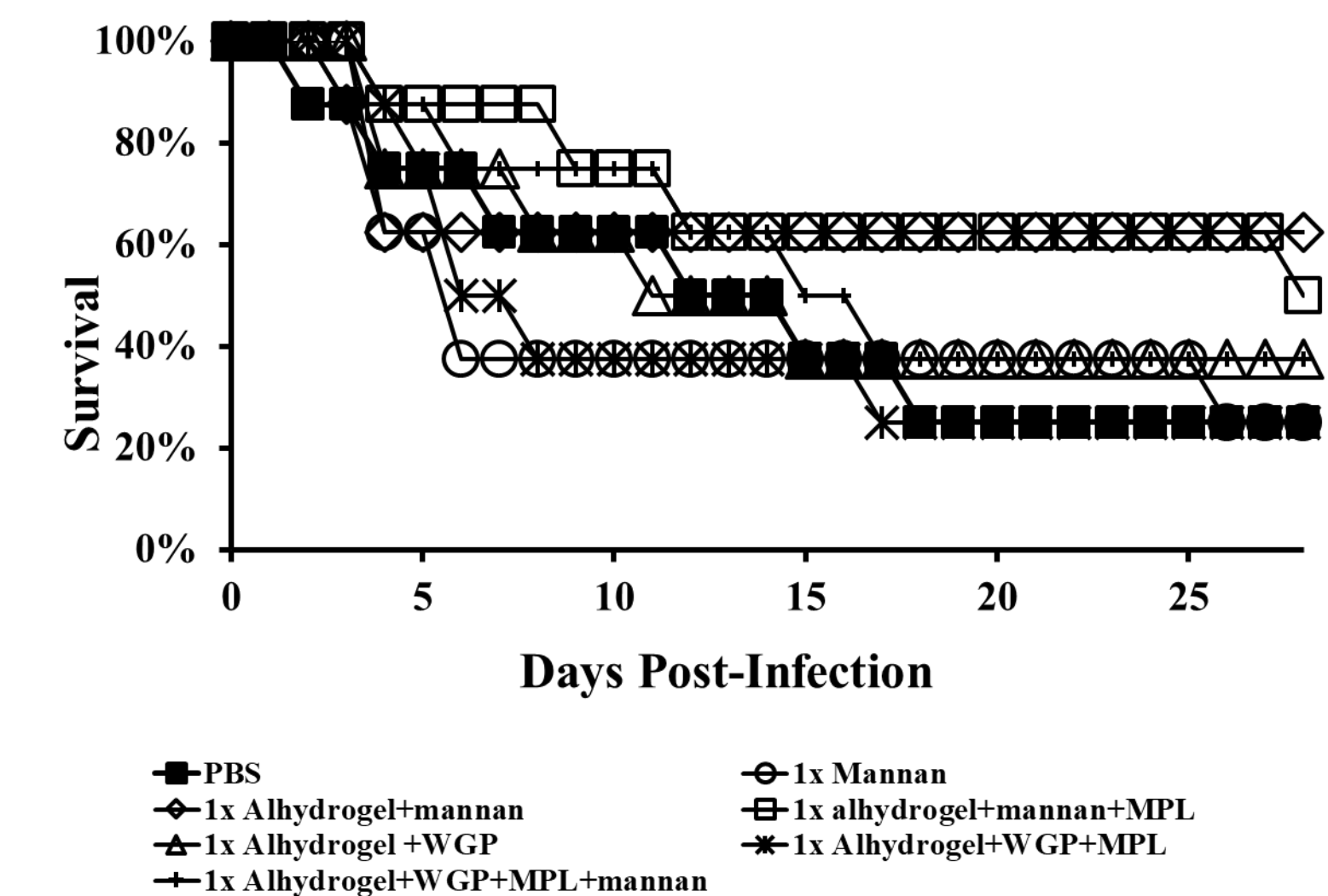


Figure 4. Mice were immunized with the quadruple adjuvants and then infected 3 days later with the Gram-positive bacterium *S. aureus* (stain LAC).

Conclusions and Future Directions

- Immunization with only adjuvants protected different strains of mice against a variety of pathogens from different kingdoms.
- Mannan, when used in conjunction with the three other adjuvants, provided additional protection and a low-dose quadruple-adjuvant combination resulted in similar protection as compared to a high-dose triple-adjuvant regimen.
- These data strongly encourage the translation of these adjuvants as a horizontal infection-prevention strategy for patients at risk of HAIs.
- In the future, we plan to study the mechanism of protection and further optimize dosing.