

The Role of Extracellular Vesicles in Colorectal Cancer

Yujian Xia, MD, PhD^{1,†} , Chaoran Yu, MD, PhD^{2,†} , Ernest Johann Helwig, MD³, and Yousheng Li, MD, PhD²

Technology in Cancer Research & Treatment
Volume 22: 1-6
© The Author(s) 2023
Article reuse guidelines:
sagepub.com/journals-permissions
DOI: 10.1177/15330338231185008
journals.sagepub.com/home/tct



Abstract

Extracellular vesicles (EVs) are a class of spherical vesicles that are produced by active secretion of cells and encapsulated by phospholipid bilayers. In recent years, numerous studies have shown that EVs play pivotal roles in the regulation of intercellular communication between colorectal cancer (CRC) cells and target cells, and can regulate the proliferation, metastasis, and infiltration of tumor cells by regulating the microenvironment of tumor cells. EVs carry specific molecular substances in source CRC cells and are expected to serve as new molecular markers for the detection of cancers. This review highlights the current state of research and progress of potentially incorporating EVs in the diagnosis and treatment of CRC.

Keywords

Colorectal cancer, extracellular vesicles (EVs), treatment, diagnosis

Received: September 20, 2022; Revised: April 18, 2023; Accepted: June 8, 2023.

Introduction

With average life expectancies increasing globally, malignant tumors are set to become one of the main causes of death in the global community and an important obstacle to further prolong life expectancy.¹ In 2020, there were more than 19.3 million newly diagnosed cancer patients and 10.0 million cancer deaths worldwide.² Colorectal cancer (CRC) ranks as one of the most diagnosed cancers, with an incidence rate of roughly 1.9 million cancer cases and 915 900 deaths worldwide.² Currently, CRC ranks second in cancer incidence and fourth for cancer mortality in China.³ From 2000 to 2016, the incidence and mortality rates of CRC showed an increase year by year. Despite the adoption of various treatment strategies such as surgical resection and combined chemotherapy, there is still a lack of effective treatments in certain scenarios due to possibility of tumor recurrence and metastasis.⁴ Therefore, the overall prognosis of CRC patients worldwide remains poor, especially at advanced stages.^{5,6} This is further compounded by the fact that current screening tests do not have a high detection rate for early CRC. The lack of effective screens means there is an urgent need for improved screening modalities to improve the early detection rate of CRC. In recent years, liquid biopsy research on CRC biomarkers and extracellular vesicles (EVs) has undoubtedly provided a promising direction, and have now become one of the main focuses of the current CRC research field.

EVs are a class of spherical vesicles that are produced by the active secretion of cells and are encapsulated by phospholipid bilayers and range in size from nanometers to micrometers (Figure 1).⁷⁻¹⁰ EVs are rich in proteins, lipids, and nucleic matter and participate in the exchange of materials and information between cells.¹¹⁻¹³ It originates from the direct budding of membrane-encased vesicles or by fusion on the surface of multivesicular body.^{14,15} EVs also have different qualitative physicochemical properties and biochemical characteristics. EVs can be divided into three types based on their particle size,

¹ Department of General Surgery, The First Affiliated Hospital of Soochow University, Suzhou, Jiangsu, People's Republic of China

² Department of General Surgery, Shanghai Ninth People's Hospital, Shanghai Jiao Tong University School of Medicine, Shanghai, People's Republic of China

³ Tongji Medical College of Huazhong University of Science and Technology, Wuhan, People's Republic of China

[†]Yujian Xia and Chaoran Yu contributed equally.

Corresponding Author:

Yujian Xia, Department of General Surgery, The First Affiliated Hospital of Soochow University, Suzhou, Jiangsu, People's Republic of China.
Email: xiayj_suda@126.com

Yousheng Li, Department of General Surgery, Shanghai Ninth People's Hospital, Shanghai Jiao Tong University School of Medicine, Shanghai, People's Republic of China; Shanghai 200011, P.R.China.
Email: guttx@hotmail.com



generation method, and membrane surface markers: Exosomes (50-100 nm), microvesicles (100-1000 nm), apoptotic bodies (50-500 nm), and so on.¹⁶ Among them, exosomes are the most widely studied, followed by microvesicles.¹⁷ In recent years, numerous studies have shown that EVs can act as transmitters of genetic information, carrying and transmitting signal molecules to adjacent and distant cells, thereby regulating the physiological and pathological states of cells.¹⁸⁻²⁵ Therefore, EVs play pivotal roles in the regulation of intercellular communication between tumors cells and target cells, and can regulate the proliferation, metastasis, and infiltration of tumor cells by regulating the microenvironment of tumor cells.²⁶ EVs carry specific molecular substances in the source tumor cells, and could serve as new molecular markers for the detection of cancers.²⁷ The lipid structure of EVs can protect the contents from being degraded, while EVs have specific receptors that provide some inherent targeting capabilities.²⁸⁻³⁰ These advantages are conducive to the enrichment of drugs in the lesion after systemic administration, thereby reducing the drug dosage requirements and the toxic side effects of systemic administration.³⁰ The special structure of the spherical carrier is also a good tool for new drug development.^{31,32} This review highlights the research progress of EVs in the diagnosis and treatment of CRC.

Diagnostic Application of EVs

The prognoses of CRC patients is associated with its corresponding disease stage. The 5-year survival rate of patients with early-stage CRC can reach roughly 90%, while the 5-year survival rate of patients with advanced-stage CRC is less than 20%.³³ Many patients with CRC have no obvious clinical manifestations in the early stage, leading this to be a unique problem in the field of CRC diagnosis but also allows for the incorporation of potential biomarkers in exploring treatment new treatment options. Evidence indicates that tumor cell EVs contain multiple types of RNAs with tumor specificity and can serve as potential biomarkers.³⁴ In previous studies, EV miRNA found in CRC patients was linked to a CRC diagnosis. Zhang et al³⁵ found that the expression levels of miR-17-5p, miR-181a-5p, miR-18a-5p, and miR-18b-5p were significantly increased in CRC plasma exosomes, suggesting that these miRNAs may serve as potential noninvasive diagnostic biomarkers for CRC. Moreover, studies indicate that specific miRNAs (miR-92a-3p, miR-196b-5p, miR-146a-5p, and miR-155-5p) upregulated in malignant tissues were released and detected in the plasma, which support their potential as non-invasive diagnostic markers of CRC.^{36,37} In addition to miRNAs, lncRNAs are also abundantly enriched in EVs from CRC patients, which is of significance in CRC diagnosis.³⁸ The serum level of EVs containing linc01836 expression was increased in cancer serum from CRC patients and declined after resection.³⁹ Additionally, high linc01836 expression was associated with lymph node metastasis and histological stage.³⁹ At the same time, combined detection of linc01836,

Cyfra21-1, and CEA in serum used for diagnosis of CRC could potentially improve sensitivity.³⁹ In addition, the study showed that the expression levels of 6 serum lncRNAs (LNCV6_116109, LNCV_108266, LNCV6_98390, LNCV6_38772, LNCV6_84003 and LNCV6_98602) in CRC patients were significantly increased and had potential to be used as biomarkers for early diagnosis of CRC.⁴⁰ With the development of RNA-seq technology, scientists have identified tens of thousands of EVs containing circRNAs that can interact with miRNAs and transcription factors to regulate gene expression. EV-circRNAs are involved in various biological functions of cancer and play an important role in the occurrence and development of CRC. Thus, the serum level of EVs containing circLPAR1 and circ_PTPRA expression declined in cancer serum from CRC patients and recovered after resection.^{41,42} Moreover, proteins in CRC EVs can also regulate the occurrence and progression of CRC. Zhang et al⁴³ found that the level of CPNE3 was significantly increased in CRC patients, especially in patients with advanced TNM or distant metastasis. Combined detection of CPNE3 and CEA in the diagnosis of CRC showed a sensitivity of 81.2% and specificity of 84.8%.⁴³ Furthermore, it is worth investigating whether combined detection of these effective biomarkers could further improve the diagnostics of CRC detection.

Therapeutic Application of EVs

EVs can potentially become an optimal therapy for CRC given the fact that it demonstrates promising properties concerning drug delivery, antigen presentation, and less biological barriers.⁴⁴⁻⁴⁸ As an easy-to-use, nontoxic carrier can be produced with targeted cargo, including proteins, micromolecules as well as RNA, with comparable biological stability and can be transported without enzymatic interference or phagocytosis.^{49,50}

Certain experiments have shown the potential role of EVs in CRC. EVs loaded with miR-379 inhibited proliferation and spread of colorectal tumor cells.⁵¹ Other investigations showed that EVs demonstrated a pro-angiogenesis role in CRC via miR-221-3p pathway, and showed a novel diagnostic power with a signature of four miRNAs, including miR-19a-3p, miR-203-3p, miR-221-3p, and let-7f-5p.⁵² As an optimal chemotherapy encapsulation candidate, EVs not only reduce possible side effects but may also boost therapeutic efficiency. To reduce the severe side effects of chemotherapeutic drugs on vital organs, encapsulation of chemotherapeutic molecules in nanocarriers is a reasonable solution to reduce the risk of their side effects and improve therapeutic efficiency. Recently, researchers bioengineered a doxorubicin-loaded AS1411 aptamer exosome to target CRC cells.⁵³ Drug delivery can be a remarkable tool and could represent a massive achievement in both safety and efficiency for various therapies. Examples of improved performance were seen, for example, in the chemotherapeutic performance of oxaliplatin which demonstrated that it could be enhanced by EVs-delivered miR-1915-3p.⁵⁴ Meanwhile,

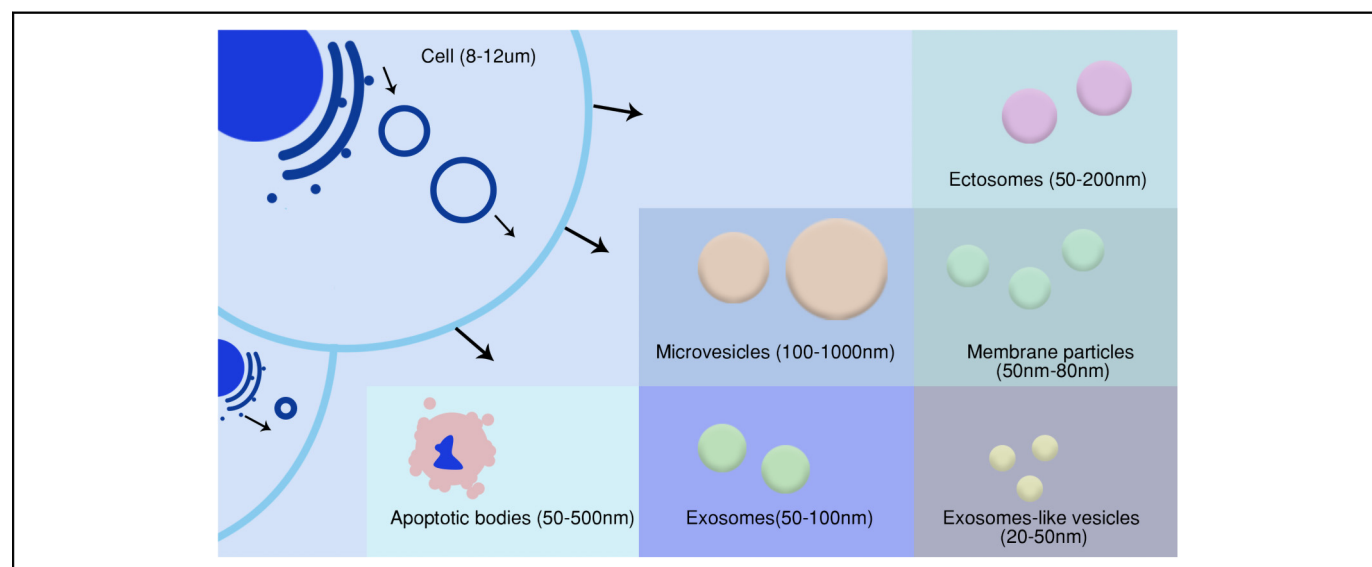


Figure 1. Illustration of different sizes in cell, apoptotic bodies, microvesicles, ectosomes, membrane particles, exosomes-like vesicles, and exosomes.

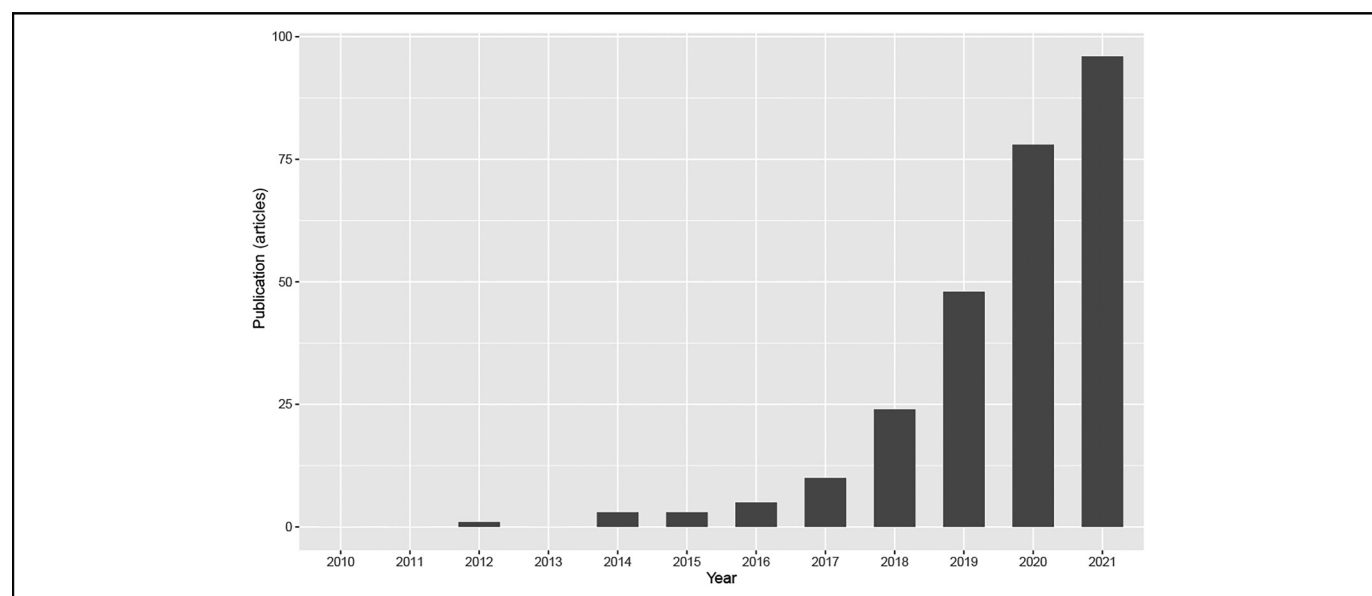


Figure 2. Publications of EVs and bioinformatics retrieved from PubMed from 2010 to 2021.

a circulating exosome miRNA signature (miR-6087/miR-132-5p/miR-93-3p/miR-320d) has been identified to have adjuvant chemotherapeutic benefits.⁵⁵ Chemosensitivity of CRC can also be impacted by exosomes, as CircPTEN derived from exosome enhanced chemosensitivity by modulating glycolysis via miR-766-5p/TRIM67.⁵⁶

On the other hand, delivery by EVs may also promote disease progression of CRC as well. For instance, EVs-delivered miRNA-25 targeted SIRT6 inhibition and further enhanced the tumor progression via the Lin28b/NRP-1 axis in CRC.⁵⁷ Another study indicated that EVs derived from cancer-associated fibroblasts with lncRNA SNHG3 could facilitate tumor proliferation by activating the miR-34b-5p/HuR/HOXC6 signaling pathway.⁵⁸

Immunotherapy is increasingly essential in treatment managements for CRC, aiming to suppress metastatic tumor cells and disease progression via remodeling the immune system.⁵⁹ Cancer vaccines are some of the most promising applications. EVs with heat shock protein and major histocompatibility complex-1 derived from tumor cells demonstrate a unique CEA-specific antitumor response.⁶⁰ Another recent study showed that miR-124-3p enriched tumor-derived EVs exerted a significant antitumor immune activity in a CT-26 induced in vivo model.⁶¹ Interestingly, immunotherapeutic responses could be correlated to EVs-based m⁶A regulator gene methylation modification pattern in colon cancer.⁶² A m⁶A-related exosome gene score can be developed to characterize potential immune phenotypes and diverse immunotherapy strategies.⁶²

Table 1. Summary of Clinical Trials Relating to Extracellular Vesicles (EV)/Exosomes/Microparticle Registered on the ClinicalTrial.gov.

ClinicalTrial.gov Identifier	Study official title	Number of patients	Study type	Responsible party
NCT04523389	Contents of circulating extracellular vesicles: Biomarkers in CRC Patients	172	Observational	Centre Hospitalier Universitaire Dijon
NCT04394572	Identification of New Diagnostic Protein Markers for Colorectal Cancer (EXOSCOL01)	80	Observational	Centre Hospitalier Universitaire de Reims.
NCT05375604	A Study of exoASO-STAT6 (CDK-004) in Patients With Advanced Hepatocellular Carcinoma (HCC) and Patients With Liver Metastases From Primary Gastric Cancer and Colorectal Cancer (CRC)	30	Interventional (clinical trial)	Codiak BioSciences
NCT04298398	Impact of Group Psychological Interventions on Extracellular Vesicles in People Who Had Cancer (MindGAP-P)	108	Interventional (clinical trial)	Instituto Portugues de Oncologia, Francisco Gentil, Porto
NCT02694562	Microparticle Enhanced Cytotoxic Transarterial Embolization Therapy (MIRACLEIII)	18	Interventional (clinical trial)	Boston Scientific Corporation
NCT03969784	Microparticles in Peritoneal Carcinomatosis of Colorectal Origin	40	Interventional (clinical trial)	Assistance Publique Hopitaux De Marseille

Perspective

It is important to remember that the increased focus on novel techniques of bioinformatics will also increase the knowledge base of EVs. It has greatly contributed to the thriving advances in both basic and clinical investigations. During the last ten years, there has been a substantial increase in publications dealing with the field of exosome and bioinformatics (Figure 2). This includes potential diagnostic biomarkers, mutation features, and translational assessments of first-line therapies, along with clinical trials, which could be benefits from bioinformatic contributions. Clinical investigations, either focusing on the biomarker or therapeutic values of exosomes, have been registered. Numerous ongoing clinical trials relating to EVs and CRC in ClinicalTrial.gov have been summarized (Table 1). In other words, EVs-based biomarkers, and novel therapies are set to become some of the most innovative contributors in clinical practices in the near future.

Conclusion

EVs have shown tremendous bench-to-bed potential with excellent properties relating to cellular sensitivity, specificity, and pharmaceutical stability. Although it remains difficult for standardized processing, EVs have the potential to be influential and widely used given their remarkable potential. A variety of applications, RNAs/proteins/drugs, or other molecules, makes EVs an ideal carrier for both chemotherapy and immunized treatment in CRC. Future investigation of EVs will be improved by bioinformatics and lead to more focused methods for optimization, purification, functional characterization, and ideally, better in vivo results.

Authors contributions

Yousheng Li, Yujian Xia, Chaoran Yu, and Johann Helwig Ernest conceived and revised the ideal of the study. Yousheng Li, Yujian Xia, Chaoran Yu, and Johann Helwig Ernest wrote the paper. Yousheng

Li, Yujian Xia, Chaoran Yu, and Johann Helwig Ernest revised the final manuscript. All authors discussed the results and approved the final manuscript.

Availability of Data and Materials

The datasets supporting the conclusion of this article are included within the article.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The authors received no financial support for the research, authorship, and/or publication of this article.

ORCID iDs

Yujian Xia  <https://orcid.org/0000-0001-8780-1780>

Chaoran Yu  <https://orcid.org/0000-0001-6096-6489>

References

1. Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*. November 2018;68(6):394-424. doi:10.3322/caac.21492
2. Ferlay J, Colombet M, Soerjomataram I, et al. Cancer statistics for the year 2020: An overview. *Int J Cancer*. April 5 2021. doi:10.1002/ijc.33588
3. Zheng R, Zhang S, Zeng H, et al. Cancer incidence and mortality in China, 2016. *Journal of the National Cancer Center*. 2022;2(1):1-9. doi:10.1016/j.jncc.2022.02.002
4. Sartore-Bianchi A, Loupakis F, Argiles G, Prager GW. Challenging chemoresistant metastatic colorectal cancer: Therapeutic strategies from the clinic and from the laboratory. *Ann Oncol*. August 2016;27(8):1456-1466. doi:10.1093/annonc/mdw191

5. Xia Y, Chen J, Liu G, et al. STIP1 Knockdown suppresses colorectal cancer cell proliferation, migration and invasion by inhibiting STAT3 pathway. *Chem Biol Interact.* May 25 2021;341:109446. doi:10.1016/j.cbi.2021.109446
6. Dekker E, Tanis PJ, Vleugels JLA, Kasi PM, Wallace MB. Colorectal cancer. *Lancet.* October 19 2019;394(10207):1467-1480. doi:10.1016/S0140-6736(19)32319-0
7. Zaborowski MP, Balaj L, Breakefield XO, Lai CP. Extracellular vesicles: Composition, biological relevance, and methods of study. *Bioscience.* August 1 2015;65(8):783-797. doi:10.1093/biosci/biv084
8. Van Rooij E, Purcell AL, Levin AA. Developing microRNA therapeutics. *Circ Res.* February 3 2012;110(3):496-507. doi:10.1161/CIRCRESAHA.111.247916
9. Liu C, Bayado N, He D, et al. Therapeutic applications of extracellular vesicles for myocardial repair. *Front Cardiovasc Med.* 2021;8:758050. doi:10.3389/fcvm.2021.758050
10. Charoenviriyakul C, Takahashi Y, Morishita M, Matsumoto A, Nishikawa M, Takakura Y. Cell type-specific and common characteristics of exosomes derived from mouse cell lines: Yield, physicochemical properties, and pharmacokinetics. *Eur J Pharm Sci.* January 1 2017;96:316-322. doi:10.1016/j.ejps.2016.10.009
11. Mathieu M, Martin-Jaular L, Lavieu G, Thery C. Specificities of secretion and uptake of exosomes and other extracellular vesicles for cell-to-cell communication. *Nat Cell Biol.* January 2019;21(1):9-17. doi:10.1038/s41556-018-0250-9
12. Kowal J, Tkach M, Thery C. Biogenesis and secretion of exosomes. *Curr Opin Cell Biol.* August 2014;29:116-125. doi:10.1016/jceb.2014.05.004
13. Kalluri R, LeBleu VS. The biology, function, and biomedical applications of exosomes. *Science.* February 7 2020;367(6478). doi:10.1126/science.aau6977
14. Cocucci E, Meldolesi J. Ectosomes and exosomes: Shedding the confusion between extracellular vesicles. *Trends Cell Biol.* June 2015;25(6):364-372. doi:10.1016/j.tcb.2015.01.004
15. Anand S, Samuel M, Kumar S, Mathivanan S. Ticket to a bubble ride: Cargo sorting into exosomes and extracellular vesicles. *Biochim Biophys Acta Proteins Proteom.* December 2019;1867(12):140203. doi:10.1016/j.bbapap.2019.02.005
16. Van der Pol E, Boing AN, Harrison P, Sturk A, Nieuwland R. Classification, functions, and clinical relevance of extracellular vesicles. *Pharmacol Rev.* July 2012;64(3):676-705. doi:10.1124/pr.112.005983
17. Herrmann IK, Wood MJA, Fuhrmann G. Extracellular vesicles as a next-generation drug delivery platform. *Nat Nanotechnol.* July 2021;16(7):748-759. doi:10.1038/s41565-021-00931-2
18. Wu P, Zhang B, Ocansey DKW, Xu W, Qian H. Extracellular vesicles: A bright star of nanomedicine. *Biomaterials.* February 2021;269:120467. doi:10.1016/j.biomaterials.2020.120467
19. Coccozza F, Grisard E, Martin-Jaular L, Mathieu M, Thery C. Snapshot: Extracellular vesicles. *Cell.* July 9 2020;182(1):262-262 e1. doi:10.1016/j.cell.2020.04.054
20. Zhang DX, Vu LT, Ismail NN, Le MTN, Grimson A. Landscape of extracellular vesicles in the tumour microenvironment: Interactions with stromal cells and with non-cell components, and impacts on metabolic reprogramming, horizontal transfer of neoplastic traits, and the emergence of therapeutic resistance. *Semin Cancer Biol.* September 2021;74:24-44. doi:10.1016/j.semcancer.2021.01.007
21. Villarroya-Beltri C, Baixauli F, Gutierrez-Vazquez C, Sanchez-Madrid F, Mittelbrunn M. Sorting it out: Regulation of exosome loading. *Semin Cancer Biol.* October 2014;28:3-13. doi:10.1016/j.semcancer.2014.04.009
22. ELA S, Mager I, Breakefield XO, Wood MJ. Extracellular vesicles: Biology and emerging therapeutic opportunities. *Nat Rev Drug Discov.* May 2013;12(5):347-357. doi:10.1038/nrd3978
23. Pegtel DM, Gould SJ. Exosomes. *Annu Rev Biochem.* 2019;88(1):487-514. doi:10.1146/annurev-biochem-013118-111902
24. Van Niel G, D'Angelo G, Raposo G. Shedding light on the cell biology of extracellular vesicles. *Nat Rev Mol Cell Biol.* April 2018;19(4):213-228. doi:10.1038/nrm.2017.125
25. Becker A, Thakur BK, Weiss JM, Kim HS, Peinado H, Lyden D. Extracellular vesicles in cancer: Cell-to-cell mediators of metastasis. *Cancer Cell.* December 12 2016;30(6):836-848. doi:10.1016/j.ccell.2016.10.009
26. He M, Qin H, Poon TC, et al. Hepatocellular carcinoma-derived exosomes promote motility of immortalized hepatocyte through transfer of oncogenic proteins and RNAs. *Carcinogenesis.* September 2015;36(9):1008-1018. doi:10.1093/carcin/bgv081
27. Rak J. Extracellular vesicles—biomarkers and effectors of the cellular interactome in cancer. *Front Pharmacol.* 2013;4:21. doi:10.3389/fphar.2013.00021
28. Kooijmans SAA, Fliervoet LAL, van der Meel R, et al. PEGylated and targeted extracellular vesicles display enhanced cell specificity and circulation time. *J Control Release.* February 28 2016;224:77-85. doi:10.1016/j.jconrel.2016.01.009
29. Han Y, Gao Z, Chen L, et al. Multifunctional oral delivery systems for enhanced bioavailability of therapeutic peptides/proteins. *Acta Pharm Sin B.* September 2019;9(5):902-922. doi:10.1016/j.apsb.2019.01.004
30. Elsharkasy OM, Nordin JZ, Hagey DW, et al. Extracellular vesicles as drug delivery systems: Why and how? *Adv Drug Deliv Rev.* 2020;159:332-343. doi:10.1016/j.addr.2020.04.004
31. Borrelli DA, Yankson K, Shukla N, Vilanilam G, Ticer T, Wolfram J. Extracellular vesicle therapeutics for liver disease. *J Control Release.* March 10 2018;273:86-98. doi:10.1016/j.jconrel.2018.01.022
32. Liao W, Du Y, Zhang C, et al. Exosomes: The next generation of endogenous nanomaterials for advanced drug delivery and therapy. *Acta Biomater.* March 1 2019;86:1-14. doi:10.1016/j.actbio.2018.12.045
33. Sineshaw HM, Robbins AS, Jemal A. Disparities in survival improvement for metastatic colorectal cancer by race/ethnicity and age in the United States. *Cancer Causes Control.* April 2014;25(4):419-423. doi:10.1007/s10552-014-0344-z
34. Bobrie A, Krumeich S, Reyat F, et al. Rab27a supports exosome-dependent and -independent mechanisms that modify the tumor microenvironment and can promote tumor progression. *Cancer Res.* Oct 1 2012;72(19):4920-4930. doi:10.1158/0008-5472.CAN-12-0925
35. Zhang H, Zhu M, Shan X, et al. A panel of seven-miRNA signature in plasma as potential biomarker for colorectal cancer diagnosis. *Gene.* March 1 2019;687:246-254. doi:10.1016/j.gene.2018.11.055

36. Wang D, Wang X, Song Y, et al. Exosomal miR-146a-5p and miR-155-5p promote CXCL12/CXCR7-induced metastasis of colorectal cancer by crosstalk with cancer-associated fibroblasts. *Cell Death Dis.* April 20 2022;13(4):380. doi:10.1038/s41419-022-04825-6
37. Fellizar A, Refuerzo V, Ramos JD, Albano PM. Expression of specific microRNAs in tissue and plasma in colorectal cancer. *J Pathol Transl Med.* May 2022;3. doi:10.4132/jptm.2022.02.19
38. Kotelevets L, Chastre E. Extracellular vesicles in colorectal cancer: From tumor growth and metastasis to biomarkers and nanomedications. *Cancers (Basel).* February 9 2023;15(4). doi:10.3390/cancers15041107
39. Shen L, Zong W, Feng W, et al. Upregulated Linc01836 in Serum promisingly serving as a diagnostic and prognostic biomarker for colorectal cancer. *Front Pharmacol.* 2022;13:840391. doi:10.3389/fphar.2022.840391
40. Hu D, Zhan Y, Zhu K, et al. Plasma exosomal long non-coding RNAs serve as biomarkers for early detection of colorectal cancer. *Cell Physiol Biochem.* 2018;51(6):2704-2715. doi:10.1159/000495961
41. Zheng R, Zhang K, Tan S, et al. Exosomal circLPAR1 functions in colorectal cancer diagnosis and tumorigenesis through suppressing BRD4 via METTL3-eIF3 h interaction. *Mol Cancer.* February 14 2022;21(1):49. doi:10.1186/s12943-021-01471-y
42. Yang Y, Yang N, Jiang J. Exosomal circ_PTPRA inhibits tumorigenesis and promotes radiosensitivity in colorectal cancer by enriching the level of SMAD4 via competitively binding to miR-671-5p. *Cytotechnology.* February 2022;74(1):51-64. doi:10.1007/s10616-021-00506-y
43. Sun B, Li Y, Zhou Y, et al. Circulating exosomal CPNE3 as a diagnostic and prognostic biomarker for colorectal cancer. *J Cell Physiol.* February 2019;234(2):1416-1425. doi:10.1002/jcp.26936
44. Kowal J, Tkach M. Dendritic cell extracellular vesicles. *Int Rev Cell Mol Biol.* 2019;349:213-249. doi:10.1016/bs.ircmb.2019.08.005
45. Lindenbergh MFS, Stoorvogel W. Antigen presentation by extracellular vesicles from professional antigen-presenting cells. *Annu Rev Immunol.* April 26 2018;36:435-459. doi:10.1146/annurev-immunol-041015-055700
46. Yang T, Fogarty B, LaForge B, et al. Delivery of small interfering RNA to inhibit vascular endothelial growth factor in zebrafish using natural brain endothelia cell-secreted exosome nanovesicles for the treatment of brain cancer. *AAPS J.* March 2017;19(2):475-486. doi:10.1208/s12248-016-0015-y
47. Yang T, Martin P, Fogarty B, et al. Exosome delivered anticancer drugs across the blood-brain barrier for brain cancer therapy in danio rerio. *Pharm Res.* June 2015;32(6):2003-2014. doi:10.1007/s11095-014-1593-y
48. de Abreu RC, Fernandes H, da C, et al. Native and bioengineered extracellular vesicles for cardiovascular therapeutics. *Nat Rev Cardiol.* November 2020;17(11):685-697. doi:10.1038/s41569-020-0389-5
49. Lu M, Xing H, Xun Z, et al. Exosome-based small RNA delivery: Progress and prospects. *Asian J Pharm Sci.* January 2018;13(1):1-11. doi:10.1016/j.ajps.2017.07.008
50. Zhao Y, Liu P, Tan H, Chen X, Wang Q, Chen T. Exosomes as smart nanoplatforms for diagnosis and therapy of cancer. *Front Oncol.* 2021;11:743189. doi:10.3389/fonc.2021.743189
51. Clancy C, Khan S, Glynn CL, et al. Screening of exosomal microRNAs from colorectal cancer cells. *Cancer Biomark.* 2016;17(4):427-435. doi:10.3233/CBM-160659
52. Dokhanchi M, Pakravan K, Zareian S, et al. Colorectal cancer cell-derived extracellular vesicles transfer miR-221-3p to promote endothelial cell angiogenesis via targeting suppressor of cytokine signaling 3. *Life Sci.* November 15 2021;285:119937. doi:10.1016/j.lfs.2021.119937
53. Hosseini NF, Amini R, Ramezani M, Saidijam M, Hashemi SM, Najafi R. AS1411 aptamer-functionalized exosomes in the targeted delivery of doxorubicin in fighting colorectal cancer. *Biomed Pharmacother.* September 10 2022;155:113690. doi:10.1016/j.biopha.2022.113690
54. Xiao Z, Liu Y, Li Q, et al. EVs delivery of miR-1915-3p improves the chemotherapeutic efficacy of oxaliplatin in colorectal cancer. *Cancer Chemother Pharmacol.* December 2021;88(6):1021-1031. doi:10.1007/s00280-021-04348-5
55. Wang Y, Chen X, Lin H, et al. A Prehepatectomy circulating exosomal microRNA signature predicts the prognosis and adjuvant chemotherapeutic benefits in colorectal liver metastasis. *Cancers (Basel).* August 24 2021;13(17). doi:10.3390/cancers13174258
56. Li C, Li X. Exosome-Derived circ_0094343 promotes chemosensitivity of colorectal cancer cells by regulating glycolysis via the miR-766-5p/TRIM67 axis. *Contrast Media Mol Imaging.* 2022;2022:2878557. doi:10.1155/2022/2878557
57. Wang S, Zhang Z, Gao Q. Transfer of microRNA-25 by colorectal cancer cell-derived extracellular vesicles facilitates colorectal cancer development and metastasis. *Mol Ther Nucleic Acids.* March 5 2021;23:552-564. doi:10.1016/j.omtn.2020.11.018
58. Zhao J, Lin H, Huang K, Li S. Cancer-associated fibroblasts-derived extracellular vesicles carrying lncRNA SNHG3 facilitate colorectal cancer cell proliferation via the miR-34b-5p/HuR/HOXC6 axis. *Cell Death Discov.* August 3 2022;8(1):346. doi:10.1038/s41420-022-01116-z
59. Sarvizadeh M, Ghasemi F, Tavakoli F, et al. Vaccines for colorectal cancer: An update. *J Cell Biochem.* June 2019;120(6):8815-8828. doi:10.1002/jcb.28179
60. Dai S, Wan T, Wang B, et al. More efficient induction of HLA-A*0201-restricted and carcinoembryonic antigen (CEA)-specific CTL response by immunization with exosomes prepared from heat-stressed CEA-positive tumor cells. *Clin Cancer Res.* October 15 2005;11(20):7554-x7563. doi:10.1158/1078-0432.CCR-05-0810
61. Rezaei R, Baghaei K, Hashemi SM, Zali MR, Ghanbarian H, Amani D. Tumor-Derived exosomes enriched by miRNA-124 promote anti-tumor immune response in CT-26 tumor-bearing mice. *Front Med (Lausanne).* 2021;8:619939. doi:10.3389/fmed.2021.619939
62. Zheng J, Feng P, Chen D, et al. M(6)A regulator-based exosomal gene methylation modification patterns identify distinct microenvironment characterization and predict immunotherapeutic responses in colon cancer. *Oxid Med Cell Longev.* 2022;2022:9451480. doi:10.1155/2022/9451480