



# Lactococcus lactis as an Effective Mucosal Vaccination Carrier: a Systematic Literature Review

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Lactococcus lactis has potential as a mucosal vaccine delivery system. L. lactis can express antigens from bacteria or viruses, which are tightly controlled using nisin. Although L. lactis-based vaccine shows great promise, no product is ready for human use. Several studies have been conducted to develop L. lactis-based vaccine, and the efficacy of these vaccines has been evaluated in many scientific articles. This paper aims to review key aspects of current knowledge on the promising characteristics of L. lactis and to suggest its implications for vaccine design. Articles were obtained online using inclusion and exclusion criteria through Harzing's Publish or Perish. The article assessment used the Joanna Briggs Institute critical appraisal checklist for quasi-experimental studies. The efficacy evaluation of 24 articles showed that L. lactis-based vaccine can induce IgA and IgG as humoral immune responses; T CD4, T CD8, and B cells as cellular immune responses; and various proinflammatory cytokines such as IFN-γ, TNF-α, IL-2, IL-4, IL-8, IL-10, IL-12, IL-17. L. lactis is suitable as a vector carrier for oral or nasal mucosal vaccines targeting bacterial and viral infections. The development of L. lactis as a vaccine delivery system is promising.

Keywords: Lactococcus lactis, cellular immunity, humoral immunity, mucosa, vaccine, vaccine evaluation

# Introduction

Lactic Acid Bacteria (LAB) are an excellent candidate for manipulation as a mucosal vaccine carrier. LAB is resistant to acidic conditions in the gastrointestinal system and can effectively deliver vaccines to the intestinal area. One of the LAB widely applied as a carrier vaccine is *Lactococcus lactis* (*L. lactis*). Naturally, *L. lactis* enhances the immune response to pathogens by inhibiting their colonization in the gastrointestinal tract and boosting the immunological system of the mucous membrane intestine [1]. The ability of *L. lactis* to pass through the intestinal tract without colonization, its Gram-positive status (it does not contain endotoxins), its safety for consumption, genetic material is easy to manipulate, its ease of handling, its rapid growth, its ability to express stable recombinant proteins (antigens), and its low production costs due to the lack of protein purification are further significant benefits of using *L. lactis* as a mucosal vaccine carrier [2, 3]. In addition, peptidoglycan in *L. lactis* has benefits as an adjuvant, in addition to being a location for antigen expression, this peptidoglycan can bind to various pattern recognition receptors (PRRs) [4]. Peptidoglycan can interact with Toll-Like Receptors (TLR2), NOD-Like Receptors (*e.g.*, NOD1 and NOD2), C-Type Lectin Receptor (*e.g.*, Dectin-1) so that it will trigger an innate immune response to *L. lactis*-based vaccine [5, 6].

*L. lactis* as a mucosal vaccine carrier is called *L. lactis*-based vaccine can overexpress antigen using the NICE (nisin-controlled gene expression) system to control their protein expression [7]. The mechanism of nisin induction in the NICE system involves the histidine kinase NisK, which captures the nisin-induced signal and undergoes autophosphorylation, transferring the phosphate group to the NisR response regulator protein, thereby activating the NisA promoter [8, 9]. *L. lactis*-based vaccine can stimulate the immune response when administered orally or nasally. When administered orally, *L. lactis*-based vaccine will go to the gut, Peyer's patches [10]. On the intestine, M cells transport the antigen carried by *L. lactis* through the lumen epithelium of intestine via a transcytosis mechanism to the dendritic or antigen-presenting cells (APCs) in the space between Peyer's patches, known as the intrafollicular region (IFR). APCs then present the antigen peptides to B and T lymphocytes to induce an adaptive immune response [11].

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As previously described, there are many benefits of using L. lactis, especially as a as a mucosal vaccine carrier and producer of recombinant proteins such as antigens that can activate innate and adaptive immune responses. This research may facilitate future scientific advancements on utilizing L. lactis as a mucosal vaccine carrier/ L. lactis-based vaccine. We believe conducting further research on L. lactis as a vaccine delivery system is essential. This paper aims to review critical points of current knowledge on the promising characteristics of L. lactis-based vaccine to suggest its implications for vaccine design.

# **Materials and Methods**

The descriptive research uses a systematic literature review (SLR) methodology. The systematic literature review was informed by data extrapolated from a concurrent comprehensive analysis, which sought to integrate and appraise the implementation of *L. lactis* as a vector for mucosal vaccine delivery systems or called *L. lactis*based vaccine. The search and selection of literature, in the form of scientific articles, followed the Preferred Reporting Items for Systematic Literature Reviews and PRISMA protocol [12].

## **Identification Strategy**

The article search was conducted in three databases, namely Crossref and PubMed, using Harzing's Publish or Perish application with keywords such as "Lactococcus lactis" OR "L. lactis" AND "vaccine" OR "Vaccines" and "immunity" AND "mucosal" OR "Mucosal".

## **Study Selection**

Articles had to meet the following inclusion criteria: 1) research articles published in the last ten years (2013– 2023); 2) English-language articles indexed in the databases used; 3) true experimental studies; 4) original articles; 4) studies meeting PICO criteria (population: research using L. lactis to enhance the immune response; intervention: giving recombinant L. lactis on trial in vitro and in vivo; comparison: animal trial without treatment (control); giving *L. lactis* without gene insert; outcome: improving the immune system; 5) vaccines for infectious diseases; 6) critical evaluation score of  $\geq$  50%. In contrast, the exclusion criteria included: 1) a review article, thesis, or protocol; 2) an in-silico study; 3) combination of adjuvants; 4) articles not available in full text; 5) studies not related to vaccine delivery system 6) studies focusing only on a probiotic; 7) vaccines for animals; 8) clinical trials; 9) non-living bacteria delivery system.

#### **Data Assessment**

Data quality analysis was conducted using critical evaluation tools, specifically the Joanna Briggs Institute critical appraisal checklist for quasi-experimental studies. The checklist consists of 9 questions, where a "yes" answer is worth 1 point, and "no," "unclear," or "not applicable" answers are valued at 0 points. The results of this analysis are supported by the quality analysis of the journals, considering their quartile rankings and impact factor values [13, 14].

#### **Data Analysis**

Descriptive statistical methods were employed to encapsulate the research attributes incorporated within this systematic review. The data is presented using Microsoft Excel, VOSviewer and R Studio.

#### Results

The initial search resulted in 2729 articles discussing using L. lactis as a mucosal vaccine carrier. After removing duplicates, 1883 articles remained. A quick screening of the title and abstract reduced this number to 146 articles. Further screening against the exclusion criteria resulted in 24 articles. All articles were assessed using the Joanna Briggs Institute critical appraisal, and it was determined that 24 articles were included in the analysis of this study.

Fig. 3 describes L. lactis-based vaccine. Mice are preferred as experimental animals because they are easier to handle. The antigen protein expression target location is extracellularly preferred by adding signal peptides because the immune system can directly recognize and represent the antigen. L. lactis, as a mucosal vaccination carrier, can also be combined with additional adjuvants. When challenged, the author also reported protection in experimental animals against bacterial or viral infections.

# Discussion

The results of screening in PubMed, CrossRef, and Scholar databases using the corresponding keywords yielded a total of 2,729 articles. An initial analysis was conducted to eliminate duplicate titles reducing the total number to 1,883 articles. Further analysis was conducted to select titles and abstracts articles, narrowing down the selection to 146 articles available for full access. Additional exclusions were made based on content relevance, resulting in a final selection of 24 articles for analysis (Fig. 1).

L. lactis is a nonpathogenic Gram-positive bacterium widely used in the dairy industry. L. lactis has been widely explored for its potential as a vector for delivering therapeutic molecules such as vaccine antigens. The application of L. lactis as a mucosal vaccine delivery system has been widely investigated over the past two decades, demonstrating its versatility in expressing heterologous proteins, cytokines, and enzymes. L. lactis has been proposed as a safe platform for the mucosal vaccine carrier, and it can be genetically modified to express specific antigens on its surface, intracellularly, or extracellularly [39].

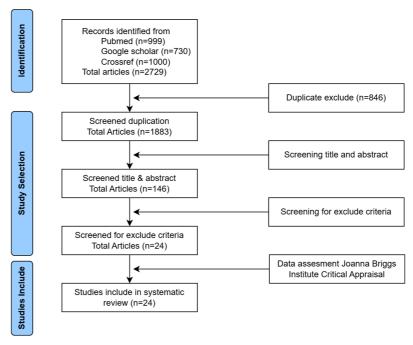
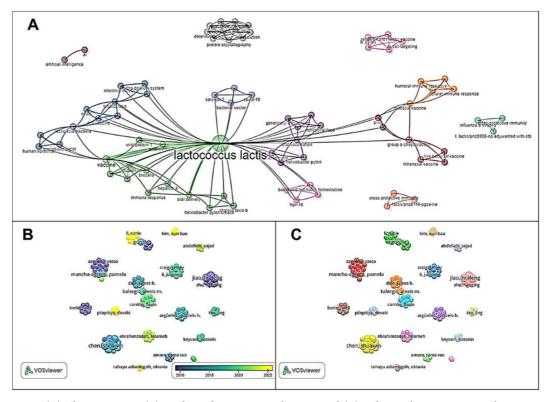


Fig. 1. PRISMA flow diagram for study selection.



**Fig. 2.** (A) Thematic Map, (B) Author Characteristics by Year and (C) Relationship Between Authors. (A) shows that *L. lactis* has been extensively studied as a mucosal vaccine carrier with various keywords connected to *L. lactis*. (B) Author Characteristics by Year shows the analysis of authors connected to *L. lactis*-based vaccine. This result shows that the research topic on *L. lactis* as a mucosal vaccination carrier continues to be carried out and develops yearly. (C) Relationship Between Authors shows the pattern of collaboration and research networks between authors on *L. lactis*-based vaccine. There are 130 authors and co-authors, but only 18 researchers are directly related to each other. Research on *L. lactis* as a mucosal vaccination carrier has been widely reported in various countries. These highlight the promising potential for developing *L. lactis* as a mucosal vaccine carrier.

## Lactococcus lactis Based Vaccine Experimental Descriptions

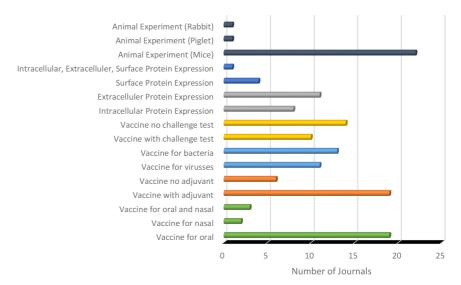


Fig. 3. L. lactis Based Vaccine Experimental Descriptions.

L. lactis has a good safety history because of its benefits in food fermentation. It survives in the digestive tract for 2-3 days and does not attack the intestinal mucosal surface [40]. L. lactis does not have lipopolysaccharides, so it will not strongly stimulate the host's immune response, so it is safe when given repeatedly [3, 24, 41]. L. lactis also possesses immunomodulatory abilities as a probiotic bacterium. It can enhance the activity of phagocytic cells, which engulf and destroy pathogens [42, 43]. Expression of recombinant proteins such as antigens is very effective in L. lactis. This is due to the tight control with the addition of the inducer Nisin [31]. Antigens can be expressed intracellularly, extracellularly, or on the surface of L. lactis by adding signal peptides to the gene of interest [19, 28]. Antigens expressed intracellularly require immune cells to degrade or phagocytose L. lactis-based vaccine first to uptaken the antigen. This differs from antigens expressed extracellularly or on the surface of L. lactis-based vaccine, immune cells can directly recognize antigens so that the immune response of memory or antibodies to antigens can be produced faster [24, 32]. In addition, L. lactis-based vaccine also stimulate the production of proinflammatory cytokines, which are essential molecules in regulating immune responses and inflammation. Among the cytokines produced with the help of L. lactis are IFN- $\gamma$  and TNF- $\alpha$ . IFN- $\gamma$  plays a significant role in activating immune cells, such as macrophages and T cells, which combat infection. TNF- $\alpha$  is also essential in mediating the inflammatory response that helps to destroy pathogens and repair damaged tissues [44-46].

## **Protein Expression System and Location**

The Nisin Controlled Gene Expression (NICE) system employed by  $L.\ lactis$  is a highly effective and easy to use gene expression method. The procedure involves introducing a specific quantity of the Nisin inducer (0.1-5 ng/ml) into the growth medium [47]. The NICE system operates through a signal transduction mechanism involving two primary proteins, NisK and NisR. NisK is a sensor protein located on the membrane, while NisR is a response regulator protein in the cytoplasm. Nisin as an inducer can interact with NisK, causing it to undergo autophosphorylation. The phosphate group is then transferred to NisR, activating it. NisR initiates transcription of the target gene on the plasmid by binding to the downstream part of the PnisA promoter. The uniqueness of the NICE system lies in its ability to control protein expression with high precision, allowing for efficient and controlled protein production. This mechanism makes  $L.\ lactis$  a valuable tool in biotechnology research and applications, particularly in vaccine production [7, 47-49].

L. lactis-based vaccine can be expressed as cell surface antigen. One method for designing the gene of interest involves adding a signal peptide, a technique extensively explored for its potential in developing L. lactis-based vaccine. The studies in Table 1 and Fig. 3 demonstrate the successful antigen expression on the surface of L. lactis, which can stimulate immune responses [19, 21, 23, 36]. The pgsA signal peptide is particularly effective for expressing proteins on the surface of L. lactis. The pgsA protein facilitates protein translocation across the cytoplasmic membrane, allowing for effective secretion into the extracellular space or anchorage to the cell wall [50]. Several studies in Table 1, such as those by [23], have successfully utilized the pgsA signal peptide in L. lactis/pNZ8110-pgsA-NA that has been constructed, highlighting its critical role in facilitating protein display on the surface of L. lactis-based vaccine.

Fig. 3 and Table 1 also report several studies concerning extracellular protein expression in *L. lactis*. The signal peptide used for extracellular protein expression differs from the signal peptide used for protein expression on the cell surface. The USP45 signal peptide has been employed to enable the secretion of target proteins by *L. lactis* [32]. The Usp45 signal peptide is added to the N-terminus of the target protein to facilitate its secretion by *L. lactis* 

 $Table \ 1. \ Characteristics \ of \ The \ Studies \ Included.$ 

| No | Author   | Study models              | Dosage (CFU)   | Humoral immunity   | Cellular Immunity  | Cytokines  | Challenged Test  | L. lactis<br>Strain | Plasmid               |
|----|--|---------------------------|--|--|--|--|--|---------------------|-----------------------|
| 1  | (Sun et al., 2019)<br>[15]                               | BALB/<br>c mice           | 1 × 10 <sup>11</sup> CFU                                   | ↑ IgG (Serum) &<br>sIgA (Faecal)   | -  | -  | -  | NZ3900              | pNZ8149               |
| 2  | (Craig <i>et al.</i> ,2019)<br>[16]                      | Piglets                   | 10 <sup>9</sup> -10 <sup>12</sup> CFU                      | ↑ IgG (Serum) &<br>sIgA (Faecal)   | -  | -  | -  | NZ9000              | pNZ8150               |
| 3  | (Zhang <i>et al.</i> , 2016) [17]                        | BALB/<br>c mice           | $5 \times 10^{14}$   | ↑ IgG (Serum) &<br>sIgA not<br>significantly<br>increased (Faecal)         | -  | -  | -  | NZ3900              | pNZ8119               |
| 4  | (Lei, Peng, Jiao, et al., 2015) [18]                     | BALB/<br>c mice           | $1\times10^{12}$   | ↑ IgG (Serum) & sIgA (Intestine)   | -  | ↑ IFN-γ &<br>IL-4<br>(Splenocytes)                               | ↓ <i>Influenza</i> titre<br>(Lung)   | NZ9000              | pNZ8008               |
| 5  | (Lei, Peng, Zhao,<br>Jiao, <i>et al.</i> , 2015)<br>[19] | BALB/<br>c mice           | $1\times10^{12}$   | ↑ IgG (Serum), IgA<br>(Intestine)  | -  | -  | ↓ <i>Influenza</i> titre<br>(Lung)   | NZ9000              | pNZ8008               |
| 6  | (Pereira <i>et al.</i> , 2015) [20]                      | BALB/<br>c mice           | $1 \times 10^8$  | ↑ sIgA (Colon<br>tissue, (Serum), &<br>faecal)                             | -  | ↑ IFN-γ,<br>TNF-α & IL-<br>12 (Spleen)                           | -  | MG1363<br>FnBPA+    | pValac                |
| 7  | (J-Khemlani et al., 2023) [21]                           | FVB/<br>n mice            | $1 \times 10^8$  | ↑ IgG & IgA<br>((Serum), BAL,<br>faecal & nasal)                           | -  | -  | -  | MG1363              | pLZ12-Km2<br>P23R     |
| 8  | (Mohseni<br>et al., 2019) [22]                           | C57BL/<br>6 mice          | $1 \times 10^9$  | ↑ IgG (Serum) &<br>IgA (Vaginal fluid)                                     | -  | ↑ IL-2 & IFN-γ (Splenocytes & intestinal)                        | -  | NZ9000              | pNZ8123               |
| 9  | (Lei, Peng,<br>Zhao, Ouyang,<br>et al., 2015) [23]       | BALB/<br>c mice           | $1\times10^{12}$   | ↑ IgG (Serum) &<br>IgA (Intestine<br>washes & upper<br>respiratory washes) | -  | -  | ↓ <i>Influenza</i> virus titre (Lung)  | NZ9000              | pNZ8110               |
| 10 | (Castro <i>et al.</i> , 2021) [24]                       | BALB/<br>c mice           | $1 \times 10^8$  | ↑ sIgA (Colon)   | -  | ↑ IFN-γ,<br>TNF-α, & IL-<br>17<br>(Splenocytes)                  | -  | MG1363<br>FnBPA+    | pValac                |
| 11 | (Torkashvand et al., 2018) [25]                          | BALB/<br>c mice           | $1 \times 10^8$  | ↑ IgG (Serum) &<br>IgA (Lung)  | -  | ↑ IFN-γ<br>(Spleen)  | -  | NZ3900              | pNZ8149               |
| 12 | (Diaz-Dinamarca et al., 2020) [26]                       | C57BL/<br>6 mice          | $1 \times 10^{10}$   | ↑ IgG (Serum), IgA<br>(Faecal & intestine)                                 | ↑ dendritic cell<br>(CD45+, MHC-II+;<br>CD103+, CD11c+,<br>CD11b) and (CD45+,<br>MHC-II+; CD11b+,<br>CD103-) | -  | ↓ Group B<br>Streptococcus<br>colonization<br>(Vaginal tract)                | NZ9000              | pNZ8124               |
| 13 | (Yurina et al., 2023) [27]                               | BALB/<br>c mice           | 5 × 10 <sup>9</sup> (Oral)/<br>1 × 10 <sup>9</sup> (Nasal) | ↑ IgG (Serum), IgA<br>(Serum)  | ↑ plasma cell (CD138),<br>CD4, and CD8   | -  | -  | NZ3900              | pNZ8149               |
| 14 | (Xuan <i>et al.</i> , 2022) [28]                         | BALB/<br>c mice           | $3\times10^{10}$   | ↑ IgG (Serum), IgA<br>(Fecal)  | -  | -  | -  | IL1403              | pILPtuf.Mb            |
| 15 | (Chamcha et al., 2015) [29]                              | BALB/<br>c mice           | $5 \times 10^9$  | ↑ IgG (Serum &<br>faeces) & IgA &<br>(Serum, faeces, &<br>vaginal wash)    | ↑ CD8 & dendritic cell<br>(CD11b+ CD8α–)   | -  | -  | MG1363              | pJRS9550              |
| 16 | (Li <i>et al.</i> , 2014) [30]                           | BALB/<br>c mice           | $2 \times 10^9$  | ↑ IgG (Serum),<br>IgG1 (Serum), IgG2<br>(Serum), IgA<br>(Faecal)           | -  | -  | ↓ Urease<br>Helicobacter pylori<br>activity                                  | NZ9000              | pCYT,<br>pMG<br>& pHJ |
| 17 | (Peng et al., 2018) [31]                                 | BALB/<br>c mice           | $5\times10^{10}$   | ↑ IgG (Serum) &<br>SIgA (Faecal)   | -  | ↑ IL-2. IFN-<br>γ. IL-8, IL-10.<br>IL-12, IL-17,<br>IL-2, & IL-4 | ↓ Urease<br>Helicobacter pylori<br>activity                                  | NZ3900              | pNZ8110               |
| 18 | (Ahmadi<br>Rouzbahani<br>et al., 2021) [32]              | New<br>Zealand<br>rabbits | $5 \times 10^9$  | ↑ IgG (Serum) &<br>IgA   | -  | -  | ↓ Enterotoxigenic<br>Escherichia coli<br>CFU                                 | NZ3900              | pNZ8149               |
| 19 | (Wozniak<br>et al., 2018)<br>[33]                        | BALB/<br>c mice           | $1 \times 10^9$  | ↑ IgG (Serum &<br>BAL)   | -  | -  | ↓ Streptococcus<br>pyogenes<br>colonization                                  | NZ3900              | pNZ8149               |
| 20 | (Shirdast <i>et al.</i> , 2021) [34]                     | BALB/<br>c mice           | $1\times10^{10}$   | ↑ IgM (Serum), IgG<br>(Serum), IgA<br>(Mucosa & serum)                     | -  | -  | -  | NZ9000              | pNZ7021               |
| 21 | (Xu et al.,<br>2019) [35]                                | BALB/<br>c mice           | $1 \times 10^9$  | ↑ IgG (Serum), IgA<br>(Faecal)   | -  | -  | -  | MG1363              | pMG36e                |
| 22 | (Temprana <i>et al.</i> , 2018) [36]                     | BALB/<br>c mice           | No Information   | ↑ IgG dan IgA  | -  | -  | ↓ <i>Rotavirus</i><br>shedding   | NZ9000              | No<br>information     |
| 23 | (Guo et al., 2022) [37]                                  | BALB/<br>c mice           | $1 \times 10^{10} \& 3 \times 10^{9}$                      | ↑ IgG (Serum) and<br>sIgA (intestine,<br>stomach, faeces)                  | -  | ↑ IFN-γ, IL-<br>4, IL, 17  | ↓ qPCR, CFU,<br>Urease activity, &<br>gastritis score<br>Helicobacter pylori | NZ9000              | plSAM                 |
| 24 | (Berlec et al., 2013) [38]                               | BALB/<br>c mice           | $2\times10^{10}$   | ↑ IgG (Serum) &<br>IgA   | -  | -  | -  | NZ9000              | pNZ8148               |

[28]. In the study by [26], the pNZ8124:sip vector containing the lactococcal Usp45 signal peptide sequence (SP usp45) fused to the PnisA promoter was successfully constructed, allowing the target protein to be expressed extracellularly by L. lactis.

[17] reported the successful utilization of the Usp45 signal peptide for the extracellular expression of the Helicobacter pylori Lpp20 antigen using L. lactis. This study also demonstrated that extracellular vaccination with H. pylori Lpp20 was more effective. Other researchers, such as [15, 22, 25, 30-32, 34, 35, 37] have also proven that the usp45 signal peptide can be used to express extracellular recombinant proteins in L. lactis.

## Lactococcus lactis Strain

Several strains of L. lactis are commonly used in vaccine delivery systems. Table 1 shows that L. lactis strains NZ9000 and NZ3900 are widely used as mucosal vaccine carriers. Both strains cannot grow on media containing only lactose as a carbon source due to the deletion of the LacF gene, necessitating a plasmid carrying the LacF gene operon. The LacF gene detection system is a selection system that determines whether cells carry the plasmid or not. In addition, both strains have the PnisA promoter, allowing for tightly controlled protein expression [7, 47, 51].

Table 1 and Fig. 1 show that L. lactis NZ9000 has been used to express viral proteins, bacterial antigens, and fusion proteins. This demonstrates its versatility in vaccine development. L. lactis NZ9000 has been used as a live bacterial vaccine platform to present antigens from pathogens such as Group A Streptococcus, Helicobacter pylori, and influenza [16, 18, 52]. In addition, L. lactis NZ9000 has been used to express antigens from pathogens such as Brucella melitensis [34], Human papillomavirus [22], Hepatitis A VP1-P2a antigen [38] and Neuraminidase protein from Influenza A [39] demonstrating its potential in developing vaccines against viral infections. This strain can deliver antigens to mucosal sites and induce mucosal and systemic immune responses. One of the advantages of using L. lactis NZ9000 is its ability to stimulate both humoral and cellular immune responses. Studies in Table 1 have shown that oral and mucosal immunization with L. lactis NZ9000 expressing specific antigens can elicit strong antibody responses, including IgG and IgA, and activate T cells, which promote a strong immune response against a variety of pathogens.

In addition to the NZ9000 strain, L. lactis NZ3900 has also been widely used in the development of L. lactisbased vaccine, as shown in Table 1. L. lactis NZ3900 has been genetically engineered to maximize the expression of vaccine proteins. For example, [27] demonstrated that *L. lactis* NZ3900 was used to deliver the Highly Conserved Region Spike S2 antigen for oral and nasal immunization in BALB/c mice. Other studies have also reported success in developing L. lactis-based vaccine that express bacterial or viral antigens in L. lactis NZ3900, such as antigens from H. pylori [15, 17, 31] pertussis toxin and filamentous hemagglutinin from Bordetella pertussis [25], antigens from Enterotoxigenic Escherichia coli [32] and M-protein antigens derived from Group A Streptococcus *pyogenes* [33]. This shows that this strain can express antigens from bacteria or viruses.

#### **Doses and Route**

Dosage is a critical component in vaccine development and administration. Dosage is crucial as it ensures the vaccine's efficacy and safety. The vaccine dose determines the amount of antigen given to the body to trigger a strong immune response with the least side effects. Dosage determination begins with preclinical studies, followed by several phases of clinical trials [53-55].

Table 1 shows that the dose of *L. lactis*-based vaccine is measured in colony forming units (CFU) and can be adjusted according to the experimental animals used besides determining the number of CFU [37, 56]. Dosages for L. lactis-based vaccine can start from as low as 10<sup>6</sup> CFUs and can range up to 10<sup>9</sup> CFUs or more, depending on the immunogenicity of the antigen and the delivery method [57, 58] Vaccination with a prime-boost strategy can also be applied, initial dose (prime) is followed by one or more subsequent doses (boost) to increase the immune response. The interval and frequency between doses and the total dose are also important factors. The interval and frequency of vaccination can range from a few weeks to several months to build a stronger and more durable immune response [26, 59, 60, 61]. Moreover, the route of administration plays a role in determining the dosage. Oral administration might require higher doses than nasal administration due to the degradation of bacteria in the gastrointestinal tract [27, 62]. Stabilizers and adjuvants are often included to protect the bacteria and enhance the immune response [63].

Based on Table 1, in various experimental animal models other than mice, larger doses are generally observed; for instance, piglets receive doses ranging from  $10^9$  to  $10^{12}$  CFU [16] and rabbits receive  $5 \times 10^9$  CFU [32]. In contrast, vaccine doses administered to mice ranged from  $1x10^8$  CFU [20] to  $5 \times 10^{14}$  CFU [17]. The route of administration also influences the dosage of *L. lactis-based* vaccine, with the oral route requiring higher doses of approximately  $5 \times 10^9$  CFU compared to the nasal route, which utilizes doses around  $1 \times 10^9$  CFU [27].

The dose of a L. lactis-based vaccine administered via the oral route tends to be higher than that given nasally due to several factors related to the body's immune system and physical barriers in the gastrointestinal (GI) tract. The first factor is exposure to digestive enzymes and the harsh environment of the GI tract. The oral route exposes the vaccine to acidic pH and digestive enzymes like pepsin and proteases, which can degrade the L. lactis-based vaccine and reduce its efficacy. Therefore, a higher dose is needed to ensure enough L. lactis-based vaccine survive to stimulate an immune response [27, 64]. The second factor is the immune system's complexity in the gutassociated lymphoid tissue (GALT), which includes structures like Peyer's patches that efficiently sample and respond to antigens. Additionally, normal intestinal flora competes with and may neutralize L. lactis-based vaccine. These two main factors necessitate higher doses for oral [65-67].

*L. lactis*-based vaccine administered nasally is directly exposed to the nasal-associated lymphoid tissue (NALT). The nasal mucosa, especially NALT, is more efficient at antigen uptake, resulting in a strong immune response. This allows for a lower dose of *L. lactis*-based vaccine than oral administration [68].

#### **Experimental Animals**

Experimental animals are essential in preclinical studies for developing *L. lactis*-based vaccine. Commonly used experimental animals include rats and mice, chosen for their physiological and immunological similarities to humans. These animals are relatively inexpensive and easy to obtain. Preclinical studies on these animals are critical for assessing vaccine safety, immunogenicity, and efficacy [26, 69].

The study in Fig. 3 shows that 92% of the studies used mice (specifically BALB/c, C57BL/6, and FVB/n strains), while the remaining studies employed piglets and rabbits. Specific inbred strains such as BALB/c and C57BL/6 mice are preferred within these species. Inbred strains ensure genetic uniformity, reducing variability in immune responses and improving reproducibility of results.

#### **Vaccine Evaluation**

The efficacy of L. lactis-based vaccine can be measured by assessing the immune response they produce. The primary immune response in *L. lactis*-based vaccine is the mucosal immune response, which can be assessed by measuring IgA or IgG antibodies circulating systemically. The levels of these antibodies indicate the strength of the humoral immune response triggered by L. lactis-based vaccine [19, 25, 32]. Table 1 shows that all studies related to L. lactis-based vaccination reported a significant increase in humoral immune responses. The parameters for assessing humoral immune responses include IgG and IgA antibodies, with IgG evaluation generally performed on serum and IgA assessment on feces, tissues (intestine, colon, nose), and nasal fluid. In addition to antibodies, the assessment of cellular immune responses is crucial for evaluating the efficacy of L. lactis-based vaccine. This can be done by measuring the activation of T cells, especially CD4 T cells and CD8 T cells, which are essential in coordinating the immune response and directly targeting infected cells [24, 29]. In addition to humoral and cellular immune responses, the efficacy of L. lactis-based vaccine can be assessed by measuring the cytokine profile. One common cytokine measured is interferon-gamma (IFN-γ). IFN-γ, which can provide an overview of the polarization of CD4 T cell responses, including Th1 cells pathways [20, 25]. Table 1 shows that several researchers have reported a significant increase in IFN- $\gamma$  in experimental animals immunized with *L. lactis*-based vaccine. As previously mentioned, IFN-γ analysis in the study [20] was used to assess Th1 cell activation. Activated Th1 cells will release IFN-γ to help activate cytotoxic T cells, NK cells, and macrophage cells. As a step to initiate the immune response, *L. lactis*-based vaccine directly interacts with the mucosal surface of the gastrointestinal tract or nose, depending on the route of administration. The mucosal surface is rich in Microfold (M) and dendritic cells as an Antigen Precenting Cell (APC). Microfold (M) cells are important in the mucosal immune system on intestine. Unlike other epithelial cells, M cells do not have a mucus layer on their apical side, thus facilitating antigen uptake on intestine [26]. M cells also facilitate the transport of L. lactis and its associated antigens to underlying immune cells, especially dendritic cells [70].

L. lactis-based vaccine and antigens captured by M cells and dendritic cells (APCs) on intestine are transported through the process of transcytosis to the basal side, such as Peyer's Patches (PPs). The APC cells phagocytize and internalize antigen and L. lactis-based vaccine along with its protein components. Antigens are presented by MHC-I and MHC-II molecules, presenting them to T and B cells, thereby triggering an adaptive immune response [18, 30, 32, 37]. Induced B cells differentiate into plasma cells, specifically prepared to produce antibodies. This immunological interaction involves CD4 T cells (Th cells), which send necessary signals through cytokines to promote class-switch recombination in B cells, leading to IgA production [71, 72]. These IgA-producing plasma cells then migrate to the lamina propria, where they continue to secrete dimeric IgA. Subsequently, IgA binds to the polymeric immunoglobulin receptor (pIgR) on epithelial cells, facilitating its translocation across the cell and its eventual release into the lumen as secretory IgA (sIgA). The region between the follicles around the PPs, called the Intrafollicular Region (IFR), is rich in T cells and dendritic cells and regulates the adaptive immune response. Through this mechanism, vaccine antigens carried by L. lactis will be presented and generate both innate and adaptive immune responses [73-76].

The IgA antibodies produced by *L. lactis*-based vaccinations significantly impact mucosal immunity. Mucosal IgA antibodies are crucial in the initial defense against infections that enter the body via mucosal surfaces. Fecal IgA antibodies are used as markers of secretory IgA in the gastrointestinal tract, providing valuable insights into the immune response associated with the gut. Moreover, Immunoglobulin A (IgA) antibodies found in nasal tissue and nasal fluid can also indicate immunity in the respiratory mucosa. Tissue IgA measurement can yield insights into the localization of specific IgA within tissues [77, 78]. IgA levels can be assessed by analyzing samples of feces, tissue (such as the gut, colon, and nose), and nasal fluid, as shown in Table 1. For example, oral vaccination with *L. lactis* expressing antigens from pathogens such as *H. pylori* or the *Influenza* has increased IgA antibodies, contributing to protective immunity [29-31]. This also proves that IgA can be formed to defend against pathogens like bacteria or viruses.

*L. lactis*-based vaccine can stimulate humoral immune responses of IgG antibodies. Studies in Table 1 have shown that vaccination based on *L. lactis* expressing antigens can increase significant IgG antibody responses [29, 37, 52]. In Table 1, oral vaccination based on *L. lactis* expressing antigens from pathogens such as *H. pylori* [15, 30, 31, 37], *Influenza* [19], [39], *Bordetella pertussis* [25], and *HIV*-1 [29] has been shown to induce IgG antibodies contributing to humoral immunity.

In producing IgG or IgA antibodies, L. lactis-based vaccine are recognized by APCs in the mucosa. Dendritic cells present the antigen to CD4 T cells via MHC-II. CD4 T cells release cytokines such as IL-4 (Interleukin-4) and IL-6 (Interleukin-6), which are then responded to by B cells [25, 36]. This interaction allows B cells to mature into plasma cells. With the help of IL-4 and IL-21 from Th2 cells, plasma cells are prepared to produce IgG antibodies [79-82]. Additionally, class switching in plasma cells for IgA production occurs under the influence of TGF-β, IL-21, and IL-17 [83-86].

IgG antibodies can specifically bind to the pathogen antigen that triggers their production, thus forming an antigen-antibody complex. This facilitates pathogen recognition and elimination. IgG antibodies also neutralize pathogens, thereby enhancing the phagocytic response. Phagocytes, such as macrophages, have Fc receptors that bind to the Fc portion of IgG antibodies, triggering phagocytosis of pathogens opsonized by IgG antibodies[24, 37]. Additionally, IgG antibodies can activate the complement system, leading to the formation of a complex that damages pathogen membranes and triggers cell lysis [31, 32]. IgA antibodies can prevent pathogen adhesion to the mucosal surface through neutralization. The IgA antigen-antibody complex can be captured by immune cells such as macrophages and dendritic cells in the mucosa, which can then destroy and remove the complex from the body. In the digestive tract, the IgA antigen-antibody complex is secreted through feces [87, 88].

L. lactis -based vaccines can also induce cellular immune responses. Table 1 shows that not all studies report an increased cellular immune response; however, significant increases were observed in the studies by [26, 27, 29]. Vaccination using L. lactis -based vaccines increases dendritic cell activation by measuring MHC-II expression, CD4 T cells, CD8 T cells, and plasma cells by measuring CD138 expression. Dendritic cells play a critical role in initiating and modulating the cellular immune response. These cells function as antigen-presenting cells (APCs) by processing antigens and presenting them on major histocompatibility complex (MHC) molecules to T cells, activating the immune response. When vaccines utilizing L. lactis are administered, they deliver antigens directly to the host's immune system. Upon administration, these bacteria or their components are internalized by dendritic cells. The antigens from the bacteria are then processed and presented via MHC-II molecules on the surface of the dendritic cells. Vaccines based on L. lactis enhance the expression of MHC-II molecules on dendritic cells. This augmented expression improves the capacity of dendritic cells to present antigens to CD4 T cells, thereby potentiating the immune response. As MHC-II molecules present antigens, CD4 T cells are more effectively activated. These activated CD4 T cells subsequently aid in activating B cells, resulting in antibody production and cytotoxic T cells, which can destroy infected cells [89, 90].

The antigens expressed by L. lactis extracellularly are broken down into smaller peptide fragments. Dendritic cells play an active role in this process. After capturing antigens, dendritic cells migrate to the lymph nodes, where they further process the antigens into smaller fragments and load them onto MHC-I molecules, essential for CD8 T cell activation. MHC-I molecules on the surface of dendritic cells interact with TCRs on naive CD8 T cells, leading to CD8 T cell activation. CD8 T cells then differentiate into cytotoxic T lymphocytes (CTLs). CTLs leave the lymph nodes and patrol the body, seeking cells that express the same antigen presented by L. lactis. Upon finding infected cells, CTLs release perforin and granzymes, which destroy the target cells [91, 92].

Evaluation of vaccine efficacy in animal models is critical. This is typically done through a challenge test involving exposing vaccinated experimental animals to pathogens. This test can determine the vaccine's ability to prevent infection or reduce the severity of the disease caused by the infection [15, 34]. Vaccine efficacy evaluation parameters include measuring the number of pathogens, clinical symptoms, immune responses, and survival rates in experimental animals, providing valuable information about the vaccine's effectiveness [15, 34]. A common challenge test assessment is histopathological evaluation, which determines the number of bacteria or viruses used to evaluate vaccine efficacy [93, 94]. Table 1 has several methods of evaluating vaccine efficacy other than immunologically. These evaluation methods include measurement of viral titer (viral load) [18, 19, 23], and virulence factor measurement [30, 31, 37]. Challenge tests can provide an in-depth understanding of the effects of vaccines on the immune system and disease development. Studies of challenge tests on mucosal vaccines administered or ally or intranasally have shown that the immune response plays a vital role in protecting against infection by pathogenic microorganisms [93].

# Conclusion

L. lactis is suitable as a vector carrier for oral or nasal mucosal vaccines for bacterial and viral infections. L. lactisbased vaccine can induce cellular and humoral immune responses that protect against these infections. Research related to *L. lactis* as a mucosal vaccine carrier has great potential to continue to be carried out and developed.

## **Author Contributions**

Suryanata Kesuma: methodology, formal analysis, data curation, writing - original draft preparation Tri Yudani Mardining Raras: data curation, writing- review and editing Sri Winarsih: data curation, writing- review and editing Takeshi Shimosato: methodology, writing- review and editing Valentina Yurina: conceptualization, supervision, writing- review and editing

# Conflict of Interest

The authors have no financial conflicts of interest to declare.

## References

- 1. Yuste A, Arosemena EL, Calvo MÀ. 2021. Study of the probiotic potential and evaluation of the survival rate of *Lactiplantibacillus plantarum* lyophilized as a function of cryoprotectant. *Sci. Rep.* 11: 19078.
- 2. Yurina V. 2018. Live bacterial vectors-a promising DNA vaccine delivery system. Med. Sci. 6: 27.
- 3. Azizpour M, Hosseini SD, Jafari P, Akbary N. 2017. *Lactococcus lactis*: a new strategy for vaccination. *Avicenna J. Med. Biotechnol.* 9: 163-168.
- 4. Smelt MJ, de Haan BJ, Bron PA, van Swam I, Meijerink M, Wells JM, et al. 2012. L. plantarum, L. salivarius, and L. lactis attenuate Th2 responses and increase Treg frequencies in healthy mice in a strain dependent manner. PLoS One 7: e47244.
- 5. Müller-Anstett MA, Müller P, Albrecht T, Nega M, Wagener J, Gao Q, et al. 2010. Staphylococcal peptidoglycan co-localizes with Nod2 and TLR2 and activates innate immune response via both receptors in primary murine keratinocytes. PLoS One 5: e13153.
- 6. Moreira LO, Zamboni DS. 2012. NOD1 and NOD2 signaling in infection and inflammation. Front. Immunol. 3: 35118.
- Mierau I, Kleerebezem M. 2005. 10 Years of the nisin-controlled gene expression system (NICE) in Lactococcus lactis. Appl. Microbiol. Biotechnol. 68: 705-717.
- Bermúdez-Humarán LG, Kharrat P, Chatel JM, Langella P. 2011. Lactococci and lactobacilli as mucosal delivery vectors for therapeutic proteins and DNA vaccines. Microb. Cell Fact. 10: S4.
- 9. Bermúdez-Ĥumarán LG. 2009. Lactococcus lactis as a live vector for mucosal delivery of therapeutic proteins. Hum. Vaccin. 5: 264-267.
- Ni X, Liu Y, Sun M, Jiang Y, Wang Y, Ke D, et al. 2024. Oral live-carrier vaccine of recombinant Lactococcus lactis inducing prophylactic protective immunity against Helicobacter pylori infection. Probiotics Antimicrob. Proteins doi: 10.1007/s12602-024-10360-x. Online ahead of print.
- 11. Azizpour M, Hosseini SD, Jafari P, Akbary N. 2017. *Lactococcus lactis*: a new strategy for vaccination. *Avicenna J. Med. Biotechnol.* 9: 163-168.
- Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. 2021. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 372:n71. doi: 10.1136/bmj.n71.
- The Joanna Briggs Institute. 2017. Quasi-experimental studies (non-randomized experimental studies). 2017. The Joanna Briggs Institute. 1-7.
- 14. Haile ZT. 2022. Critical appraisal tools and reporting guidelines. J. Hum. Lact. 38: 21-27.
- 15. Sun N, Zhang R, Duan G, Peng X, Wang C, Chen S, et al. 2019. A food-grade engineered Lactococcus lactis strain delivering Helicobacter pylori Lpp20 alleviates bacterial infection in H. pylori-challenged mice. Biotechnol. Lett. 41: 1415-1421.
- 16. Craig K, Dai X, Li A, Lu M, Xue M, Rosas L, et al. 2019. A lactic acid bacteria (LAB)-based vaccine candidate for human Norovirus. Viruses 11: 213.
- 17. Zhang R, Peng X, Duan G, Shi Q, Chen S, Wang C, et al. 2016. An engineered *Lactococcus lactis* strain exerts significant immune responses through efficient expression and delivery of *Helicobacter pylori* Lpp20 antigen. *Biotechnol. Lett.* 38: 2169-2175.
- 18. Lei H, Peng X, Jiao H, Zhao D, Ouyang J. 2015. Broadly protective immunity against divergent influenza viruses by oral co-administration of *Lactococcus lactis* expressing nucleoprotein adjuvanted with cholera toxin B subunit in mice. *Microb. Cell Fact.* 14: 111.
- 19. Lei H, Peng X, Zhao D, Jiao H, Ouyang J. 2015. Cross-protection of *Lactococcus lactis*-displayed HA2 subunit against homologous and heterologous *influenza* A viruses in mice. *Arch. Virol.* 160: 3011-3019.
- Pereira VB, Saraiva TDL, Souza BM, Zurita-Turkc M, Azevedo MSP, De Castro CP, et al. 2015. Development of a new DNA vaccine based on mycobacterial ESAT-6 antigen delivered by recombinant invasive Lactococcus lactis FnBPA<sup>+</sup>. Appl. Microbiol. Biotechnol. 99: 1817-1826.
- J-Khemlani AH, Pilapitiya D, Tsai CJY, Proft T, Loh JMS. 2023. Expanding strain coverage of a group A Streptococcus pilusexpressing Lactococcus lactis mucosal vaccine. Immunol. Cell Biol. 101: 545-555.
- Mohseni AH, Taghinezhad-S S, Keyvani H, Razavilar V. 2019. Extracellular overproduction of E7 oncoprotein of Iranian human papillomavirus type 16 by genetically engineered Lactococcus lactis. BMC Biotechnol. 19: 8.
- 23. Lei H, Peng X, Zhao D, Ouyang J, Jiao H, Shu H, et al. 2015. Lactococcus lactis displayed neuraminidase confers cross protective immunity against influenza A viruses in mice. Virology 476: 189-195.
- 24. De Castro CP, Souza BM, Mancha-agresti P. 2021. *Lactococcus lactis* FNBPA (pValac: e6ag85a) induces cellular and humoral immune responses after oral immunization of mice. *Front. Microbiol.* 12: 6676172.
- Torkashvand A, Bahrami F, Adib M, Ajdary S. 2018. Mucosal and systemic immune responses elicited by recombinant *Lactococcus lactis* expressing a fusion protein composed of pertussis toxin and filamentous hemagglutinin from *Bordetella pertussis*. *Microb. Pathog.* 120: 155-160.
- Diaz-Dinamarca DA, Hernandez C, Escobar DF, Soto DA, Muñoz GA, Badilla JF, et al. 2020. Mucosal vaccination with Lactococcus lactis-secreting surface immunological protein induces humoral and cellular immune protection against group B Streptococcus in a murine model. Vaccines 8: 146.
- 27. Yurina V, Rahayu Adianingsih O, Widodo N. 2023. Oral and intranasal immunization with food-grade recombinant *Lactococcus lactis* expressing high conserved region of *SARS-CoV-2* spike protein triggers mice's immunity responses. *Vaccine X* 13: 100265.
- 28. Xuan B, Park J, Yoo JH, Kim EB. 2022. Oral immunization of mice with cell extracts from recombinant *Lactococcus lactis* expressing SARS-CoV-2 spike protein. *Curr. Microbiol.* 79: 167.
- 29. Chamcha V, Jones A, Quigley BR, Scott JR, Amara RR. 2015. Oral immunization with a recombinant *Lactococcus lactis* -Expressing *HIV*-1 antigen on group A *Streptococcus* pilus induces strong mucosal immunity in the gut. *J. Immunol.* 195: 5025-5034.
- Li X, Xing Y, Guo L, Lv X, Song H, Xi T. 2014. Oral immunization with recombinant Lactococcus lactis delivering a multi-epitope antigen CTB-UE attenuates Helicobacter pylori infection in mice. Pathog. Dis. 72: 78-86.
- 31. Peng X, Zhang R, Duan G, Wang C, Sun N, Zhang L, et al. 2018. Production and delivery of Helicobacter pylori Nap A in Lactococcus lactis and its protective efficacy and immune modulatory activity. Sci Rep. 8. 6435.
- 32. Ahmadi Rouzbahani H, Mousavi Gargari SL, Nazarian S, Abdollahi S. 2021. Protective immunity against enterotoxigenic *Escherichia coli* by oral vaccination of engineered *Lactococcus lactis. Curr. Microbiol.* 78: 3464-3473.
- 33. Wozniak A, Scioscia N, García PC, Dale JB, Paillavil BA, Legarraga P, et al. 2018. Protective immunity induced by an intranasal multivalent vaccine comprising 10 *Lactococcus lactis* strains expressing highly prevalent M-protein antigens derived from Group A *Streptococcus Microbiol. Immunol.* 62: 395-404.
- 34. Shirdast H, Ebrahimzadeh F, Taromchi AH, Mortazavi Y, Esmaeilzadeh A, Sekhavati MH, et al. 2021. Recombinant Lactococcus lactis displaying Omp31 antigen of Brucella melitensis can induce an immunogenic response in BALB/c mice. Probiotics Antimicrob. Proteins 13: 80-89.
- 35. Xu P, Wang Y, Tao L, Wu X, Wu W. 2019. Recombinant *Lactococcus lactis* secreting viral protein 1 of *enterovirus* 71 and its immunogenicity in mice. *Biotechnol. Lett.* 41: 867-872.
- Temprana CF, Argüelles MH, GutierrezNM, Barril PA, Esteban LE, Silvestre D, et al. 2018. Rotavirus VP6 protein mucosally delivered by cell wall-derived particles from *Lactococcus lactis* induces protection against infection in a murine model. PLoS One 13: e0203700.

- 37. Guo L, Zhang F, Wang S, Li R, Zhang L, Zhang Z, et al. 2022. Oral immunization with a M cell-targeting recombinant L. Lactis vaccine LL-plSAM-FVpE stimulate protective immunity against H. pylori in mice. Front. Immunol. 13: 918160.
- 38. Berlec A, Malovrh T, Zadravec P, Steyer A, Ravnikar M, Sabotič J, et al. 2013. Expression of a hepatitis A virus antigen in Lactococcus lactis and Escherichia coli and evaluation of its immunogenicity. Appl. Microbiol. Biotechnol. 97: 4333-4342.
- Lei H, Peng X, Shu H, Zhao D. 2015. Intranasal immunization with live recombinant *Lactococcus lactis* combined with heat-labile toxin B subunit protects chickens from highly pathogenic *avian influenza* H5N1 virus. *J. Med. Virol.* 87: 39-44.
- Sáez D, Fernández P, Rivera A, Andrews E, Oñate A. 2012. Oral immunization of mice with recombinant *Lactococcus lactis* expressing Cu, Zn superoxide dismutase of *Brucella abortus* triggers protective immunity. *Vaccine* 30: 1283-1290.
- 41. Morello E, Bermúdez-Humarán LG, Llull D, Solé V, Miraglio N, Langella P, Poquet I. 2008. *Lactococcus lactis*, an efficient cell factory for recombinant protein production and secretion. *J. Mol. Microbiol. Biotechnol.* 14: 48-58.
- 42. Tian H, Li J, Chen X, Ren Z, Pan X, Huang W, et al. 2023. Oral delivery of mouse β-Defensin 14 (mBD14)-producing *Lactococcus lactis* NZ9000 attenuates experimental colitis in mice. *J. Agric. Food Chem.* 71: 5185-5194.
- 43. Lee DH, Park HK, Lee HR, Sohn H, Sim S, Park HJ, et al. 2022. Immunoregulatory effects of Lactococcus lactis-derived extracellular vesicles in allergic asthma. Clin. Transl. Allergy 12: 12138.
- 44. Bermúdez-Humarán LG, Langella P, Cortes-Perez NG, Gruss A, Tamez-Guerra RS, Oliveira SC, et al. 2003. Intranasal immunization with recombinant *Lactococcus lactis* secreting murine interleukin-12 enhances antigen-specific Th1 cytokine production. *Infect. Immun.* 71: 1887-1896.
- Han KJ, Lee NK, Park H, Paik HD. 2015. Anticancer and anti-inflammatory activity of probiotic Lactococcus lactis NK34. J. Microbiol. Biotechnol. 25: 1697-1701.
- 46. Baek J, Kim JH, Kim W. 2023. Potential anti-allergy and immunomodulatory properties of *Lactococcus lactis* LB 1022 observed in vitro and in an atopic dermatitis mouse model. *J. Microbiol. Biotechnol.* 33: 823-830.
- Kleerebezem M, Beerthuyzen MM, Vaughan EE, De Vos WM, Kuipers OP. 1997. Controlled gene expression systems for lactic acid bacteria: transferable nisin-inducible expression cassettes for *Lactococcus*, *Leuconostoc*, and *Lactobacillus* spp. *Appl. Environ*. *Microbiol.* 63: 4581-4584.
- 48. Frelet-barrand A. 2022. *Lactococcus lactis*, an attractive cell factory for the expression of functional membrane proteins. *Biomolecules* 12: 180.
- Kazi TA, Acharya A, Mukhopadhyay BC, Mandal S, Arukha AP, Nayak S, et al. 2022. Plasmid-based gene expression systems for lactic acid bacteria: a review. Microorganisms 10: 1132.
- 50. Lei H, Sheng Z, Ding Q, Chen J, Wei X, Lam DMK, et al. 2011. Evaluation of oral immunization with recombinant avian influenza virus HA1 displayed on the *Lactococcus lactis* surface and combined with the mucosal adjuvant cholera toxin subunit B. Clin. Vaccine Immunol. 18: 1046-1051.
- 51. De Ruyter PGGA, Kuipers OP, Beerthuyzen MM, Van Alen-Boerrigter I, De Vos WM. 1996. Functional analysis of promoters in the nisin gene cluster of *Lactococcus lactis*. *J. Bacteriol.* 178: 3434-3439.
- 52. Yagnik B, Sharma D, Padh H, Desai P. 2018. In vivo delivery of pPERDBY to BALB/c mice by LacVax DNA-I and comparison of elicited immune response with conventional immunization methods. *Gene Ther.* 25: 485-496.
- 53. Hillary VE, Ceasar SA. 2023. An update on COVID-19: SARS-CoV-2 variants, antiviral drugs, and vaccines. Heliyon 9: 13952.
- 54. Alzarea AI, Khan YH, Alatawi AD, Alanazi AS, Alzarea SI, Butt MH, et al. 2022. Surveillance of post-vaccination side effects of COVID-19 vaccines among Saudi population: a real-world estimation of safety profile. Vaccines (Basel) 10: 924.
- 55. Petrelli F, Luciani A, Borgonovo K, Ghilardi M, Parati MC, Petrò D, et al. 2022. Third dose of SARS-CoV-2 vaccine: a systematic review of 30 published studies. J. Med. Virol. 94: 2837-2844.
- 56. Dorneles EMS, Sriranganathan N, Lage AP. 2015. Recent advances in Brucella abortus vaccines. Vet. Res. 46: 76.
- 57. Steidler L, Robinson K, Chamberlain L, Schofield KM, Remaut E, Le Page RW, et al. 1998. Mucosal delivery of murine interleukin-2 (IL-2) and IL-6 by recombinant of *Lactococcus lactis* coexpressing antigen and cytokine. *Infect. Immun.* 66: 3183-3189.
- 58. Bahey-El-Din M, Gahan CGM, Griffin BT. 2010. *Lactococcus lactis* as a cell factory for delivery of therapeutic proteins. *Curr. Gene Ther.* 10: 34-45.
- 59. Da'Dara AA, Li C, Yu X, Zheng M, Zhou J, Shollenberger LM, et al. 2019. Prime-boost vaccine regimen for SjTPI and sjc23schistosome vaccines, increase efficacy in water buffalo in a field trial in China. Front. Immunol. 10: 284.
- 60. Flaxman A, Marchevsky NG, Jenkin D, Aboagye J, Aley PK, Angus B, et al. 2021. Reactogenicity and immunogenicity after a late second dose or a third dose of ChAdOx1 nCoV-19 in the UK: a substudy of two randomised controlled trials (COV001 and COV002). Lancet 398: 981-990.
- 61. Gillard P, Caplanusi A, Knuf M, Roman F, Walravens K, Moris P, et al. 2013. An assessment of prime-boost vaccination schedules with AS03A-adjuvanted prepandemic H5N1 vaccines: a randomized study in European adults. Influenza Other Respir. Viruses 7: 55-65.
- 62. Yang H, Cao S, Huang X, Liu J, Tang Y, Wen X. 2009. Intragastric administration of attenuated *Salmonella typhimurium* harbouring transmissible gastroenteritis virus (TGEV) DNA vaccine induced specific antibody production. *Vaccine* 27: 5035-5040.
- 63. Wang J, Peng Y, Xu H, Cui Z, Williams RO. 2020. The COVID-19 vaccine race: challenges and opportunities in vaccine formulation. AAPS PharmSciTech. 21: 225.
- 64. Sudo H, Tokunoh N, Tsujii A, Kawashima S, Hayakawa Y, Fukushima H, et al. 2023. The adjuvant effect of bacterium-like particles depends on the route of administration. Front. Immunol. 14: 1082273.
- 65. Brandtzaeg P. 2009. Mucosal immunity: induction, dissemination, and effector functions. Scand. J. Immunol. 70: 505-515.
- 66. Asensi GF, de Sales NFF, Dutra FF, Feijó DF, Bozza MT, Ulrich RG, et al. 2013. Oral immunization with *Lactococcus lactis* secreting attenuated recombinant *staphylococcal enterotoxin* B induces a protective immune response in a murine model. *Microb. Cell Fact.* 12: 32.
- 67. Kim WU, Lee WK, Ryoo JW, Kim SH, Kim J, Youn J, Min SY, et al. 2002. Suppression of collagen-induced arthritis by single administration of poly (lactic-co-glycolic acid) nanoparticles entrapping type II collagen: a novel treatment strategy for induction of oral tolerance. Arthritis Rheum. 46: 1109-1120.
- 68. Takaki H, Ichimiya S, Matsumoto M, Seya T. 2018. Mucosal immune response in nasal-associated lymphoid tissue upon intranasal administration by adjuvants. *J. Innate Immun.* 10: 515-521.
- Cai L, Xu H, Cui Z. 2022. Factors lmiting the translatability of rodent model-based intranasal vaccine research to humans. AAPS PharmSciTech 2022. 23: 191.
- Dongarrà ML, Rizzello V, Muccio L, Fries W, Cascio A, Bonaccorsi I, et al. 2013. Mucosal immunology and probiotics. Curr. Allergy Asthma Rep. 13: 19-26.
- 71. Steinman RM, Hawiger D, Liu K, Bonifaz L, Bonnyay D, Mahnke K, Iyoda T, et al. 2003. Dendritic cell function in vivo during the steady state: a role in peripheral tolerance. Ann. NY Acad. Sci. 987: 15-25.
- Sato A, Hashiguchi M, Toda E, Iwasaki A, Hachimura S, Kaminogawa S. 2003. CD11b+ Peyer's patch dendritic cells secrete IL-6 and induce IgA secretion from naive B cells. J. Immunol. 171: 3684-3690.
- Park JI, Cho SW, Kang JH, Park TE. 2023. Intestinal Peyer's patches: structure, function, and in vitro modeling. Tissue Eng. Regen. Med. 20: 341-353.

- 74. Nakamura Y, Kimura S, Hase K. 2018. M cell-dependent antigen uptake on follicle-associated epithelium for mucosal immune surveillance. *Inflamm. Regen.* 38: 15.
- 75. Kobayashi N, Takahashi D, Takano S, Kimura S, Hase K. 2019. The roles of Peyer's patches and microfold cells in the gut immune system: relevance to autoimmune diseases. *Front. Immunol.* **10:** 2345.
- 76. Azizi A, Kumar A, Diaz-Mitoma F, Mestecky J. 2010. Enhancing oral vaccine potency by targeting intestinal M cells. *PLoS Pathog.* 6: e1001147.
- 77. Puhach O, Bellon M, Adea K, Bekliz M, Hosszu-Fellous K, Sattonnet P, et al. 2023. SARS-CoV-2 convalescence and hybrid immunity elicits mucosal immune responses.
- 78. Hamuro K, Saito H, Saito T, Kohda N. 2022. Identification of antigens recognized by salivary IgA using microbial protein microarrays. *Biosci. Microbiota Food Health* 41: 177-184.
- 79. Kitamura N, Mori A, Tatsumi H, Nemoto S, Hiroi T, Kaminuma O. 2011. Zinc finger protein, multitype 1, suppresses human Th2 development via downregulation of IL-4. *Int. Arch. Allergy Immunol.* **155:** 53-56.
- 80. Sun T, Wang Y, Song X, Li R, Mei F, Yang M, et al. 2023. Impaired humoral immunity identified in inactivated SARS-CoV-2 vaccine recipients without anti-spike RBD antibodies. Microbiol. Spectr. 11: e0278322.
- 81. González-Torres C, González-Martínez H, Miliar A, Nájera O, Graniel J, Firo V, et al. 2013. Effect of malnutrition on the expression of cytokines involved in Th1 cell differentiation. Nutrients 5: 579-593.
- 82. Zhou B, Huang H, Gui F, Bi S, Du H, Cao L. 2022. Enhancement of intestinal mucosal immunity and immune response to the footand-mouth disease vaccine by oral administration of danggui buxue decoction. Front. Vet. Sci. 9: 1045152.
- 83. Cao AT, Yao S, Gong B, Nurieva RI, Elson CO, Cong Y. 2015. Interleukin (IL)-21 promotes intestinal IgA response to microbiota. *Mucosal Immunol.* 8: 1072-1082.
- 84. Huang X, Yang W, Yao S, Bilotta AJ, Lu Y, Zhou Z, et al. 2020. IL-21 promotes intestinal memory IgA responses. J. Immunol. 205: 1944-1952.
- 85. Berkowska MA, Schickel JN, Grosserichter-Wagener C, de Ridder D, Ng YS, van Dongen JJM, *et al.* 2015. Circulating human CD27–IgA+ memory B cells recognize bacteria with polyreactive Igs. *J. Immunol.* 195: 1417-1426.
- 86. Wu W, Sun M, Chen F, Cao AT, Liu H, Zhao Y, et al. 2016. Microbiota metabolite short-chain fatty acid acetate promotes intestinal IgA response to microbiota which is mediated by GPR43. Mucosal Immunol. 10: 946-956.
- 87. Corthésy B. 2013. Multi-faceted functions of secretory IgA at mucosal surfaces. Front. Immunol. 4: 185.
- 88. Hellwig SMM, Van Spriel AB, Schellekens JFP, Mooi FR, Van de Winkel JGJ. 2001. Immunoglobulin A-mediated protection against *Bordetella pertussis* infection. *Infect. Immun.* 69: 4846-4850.
- Villena J, Medina M, Vintiñi E, Alvarez S. 2008. Stimulation of respiratory immunity by oral administration of *Lactococcus lactis*. Can. J. Microbiol. 54: 630-638.
- Aliberti J, Viola JPB, Vieira-de-Abreu A, Bozza PT, Sher A, Scharfstein J. 2003. Cutting edge: bradykinin induces IL-12 production by dendritic cells: a danger signal that drives Th1 polarization. J. Immunol. 170: 5349-5353.
- 91. William R Heath, Gabrielle T Belz, Georg M N Behrens, Christopher M Smith, Simon P Forehan, Ian A Parish, et al. 2004. Cross-presentation, dendritic cell subsets, and the generation of immunity to cellular antigens. Immunol. Rev. 199: 9-26.
- Chemali M, Radtke K, Desjardins M, English L. 2011. Alternative pathways for MHC class I presentation: a new function for autophagy. Cell. Mol. Life Sci. 68: 1533-1541.
- 93. Jiang Y, Jia S, Zheng D, Li F, Wang S, Wang L, et al. 2019. Protective immunity against canine distemper virus in dogs induced by intranasal immunization with a recombinant probiotic expressing the viral H protein. Vaccines 7: 213.
- 94. de Val BP, Vidal E, Villarreal-Ramos B, Gilbert SC, Andaluz A, Moll X, et al. 2013. A multi-antigenic adenoviral-vectored vaccine improves BCG-induced protection of goats against pulmonary tuberculosis infection and prevents disease progression. PLoS One 8: e81317.