



---

## **Lapin Challenge Model for Laboratory Development of an Oral Carbohydrate Based Vi Vaccine for Typhoid**

Ibrahim M S Shnawa<sup>a\*</sup>, Mahdi H M AL-Amar<sup>b</sup>

<sup>a</sup>*College of Biotechnology, University of Qasim, Qasim And Hilla University College, Babylon/IRAQ*

<sup>b</sup>*Department of Biology, College of Science, University of Kufa/IRAQ*

<sup>a</sup>*Email: ibrahimshnawa3@gmail.com*

### **Abstract**

A vaccine seed strain VSS of *Salmonella enterica* serovar typhoid was elected from local isolates of human enteric fever. A cell free culture filtrate antigen was prepared from VSS for in-vitro use. Vi antigen was separated, characterized from propagation of VSS in a suitable growth media. Incomplete Freund adjuvant IFA was as immune preconditioner and as immunostimulant. In three groups of rabbits each of five. First, saline control, second IFA preconditioned and the third was the Vi-IFA combination in which, the vaccine specific immune priming protocol was IFA through SC route to one week only. Followed by oral 3mg/5ml dosages in a week a part for five weeks. Two to three days post to the sixth week dose, live *S. typhi* challenge dose of 1.5/10 to five was applied per Os for the three groups. Saline control group got clinical infection, IFA group has shown 80% immune efficacy and the Vi-IFA group has shown 100% immune efficacy. Vi-IFA prototype experimental vaccine formulation proved to be; pure, safe, immunogenic, non-allergenic and immune effective against experimental live challenge. It induces humoral agglutinins, hem agglutinin and inhibits migration of leukocyte in capillary test. Confirmation of these findings in other nonhuman primate model is suggestive.

**Keywords:** Adjuvant; challenge; enteric fever; model; lapin; prototype; seed strain; vaccine.

---

*Received: 9/1/2023*

*Accepted: 10/5/2023*

*Published: 10/15/2023*

---

\* Corresponding author.

## **1. Introduction**

Typhoid circulating agglutinins had been used as an infection probe for human typhoid fever at Babylon province 1996[1]. Typhoid seroprevalence had been reported at Babylon province area[2]. Mucosal and systemic *S.typhi* antibodies in typhoid patient have been determined by Ferial Abd[3]. AlSarhan 2014[4] reported secondary cryoglobulinemia associated with typhoid fever. ALMOosawi and his colleagues [5], have been documented the development of Vi typhoid vaccine in a guinea pig model. The aim of the present investigation was aimed at developing Vi typhoid vaccine in a lapin challenge model.

## **2. Material And Methods**

### ***2.1 Prototype Vi typhoid Vaccine Development***

From the VaccineSeed Strain VSS [6, 7], an 18 hr growth onto DCA plate, five colonies of analogous morphotypes were transferred to sterile Brain heart infusion broth BHIB tube and incubated for 2 hrs at 37C. From this growth, 0.1 ml of the growth transferred to a series of flasks containing 100cc BHIB and incubated at 37C in a shaking incubator with 60 cycle/minute for 24 hrs to obtain high density growth. The growth in the series of flasks, inocula were transferred and quadrately streaked on to DCA medium for purity check. The propagated growth were centrifuged in cooling centrifuge at 5000 rpm for 20 minutes. The pellets which represent the vaccine bacteria cells were dried for 48hrs at 37C incubator. The dried pellet cell populations were mixed with ethanol and centrifuged at 5000 rpm for 20 minutes. The precipitate was mixed with acetone and centrifuged again. Pellets were washed twice with ether and precipitate dried in an incubator at 40C. This pellet represented the vaccine bacterial dry weight. Ten grams of dry weight was suspended in a sterile 0.9 sodium chloride solution and shaken for 30 minutes. The suspension was centrifuged at 3000rpm for 30 minutes. Supernatants were withdrawn and dialyzed against running tap water for 12 hrs. NaCl was added to the dialyzing solution up to 0.9%. This preparation was precipitated with ethanol slowly to form 0.1, 0.2 and 0.3 M. The formed precipitate at each added concentration were collected by centrifugation. Pellets were dissolved in distilled water. Acetic acid was then added up to 0.1 M. The obtained purified precipitate was redissolved in DW and treated with acetic acid to 1M concentration. The solution was refluxed in a reflux condenser for 24 hrs then dialyzed and ppt in ethanol. PPTs were dispensed in 3 mg/ml amounts in ampoules and stored at 4 C[8].

### ***2.2 Vi Prototype Vaccine Developmental Features***

The Vi chemical identity was determined by Molish's test[8]. The purity was checked by quadri streak method on DCA[8]. Safety check through SC injection of the Vi prototype vaccine in five normal rabbits left for five days then eviscerated for checking any gross pathological and histological visceral changes[9]. Immunization protocol was made as in [10], Table - 1. Delayed skin hypersensitivity test DTH[11], agglutination and hemagglutination [12,13], and leukocyte inhibitory factor was performed as in [14]. Rabbit's live challenge was done and briefed as; in the third day after the 6th week, 5 ml of containing  $1.5 \times 10^5$  to  $5 \times 10^5$  CFU of live *S.typhi*. Infected immune primed and control rabbits were watched for five days for survivors, morbidity and mortality rates[5]

**Table 1:** Rabbits Immunisation protocols.

Immune Priming	Rout	Dose	Dosage frequency in time term	Number of test rabbits
Vi-IFA	IFA/SC Vi-IFA/oral	1 ml. 3mg/5ml	1 week Five weeks,one week a part	5 rabbits
IFA	SC	1 ml.	1 week	5 rabbits
Saline	Oral	5ml.		5 rabbits

### 3. Results

#### 3-1 Purity

The quadri streaked Vi prototype vaccine preparation onto DCA plates have shown neither growth of contaminants nor growth of salmonella typhi colony morphotpes.

#### 3.2 Safety

The prepared prototype Vi vaccine preparation SC injected and eviscerated rabbits have shown neither gross pathological nor histo-pathological changes.

#### 3.3 Immune Identity

The sera of Vi-IFA and IFA primed rabbits have shown seropositiviity with Vi and Cell free culture filtrate antigens via agglutination and hem-agglutination tests

#### 3.4 Allergenicity

Both of IFA non-specific and Vi-IFA specific immune primed rabbits have shown erythem in first few hour post to ID injection of CFCF antigen in their skins without any evidence of the following induration and necrosis event.Vi rat model injected with 1 ml IM and SC routes for one week the ID injected with 0.1 ml.CFCF antigen have shown erythema, induration and necrosis 48 hrs post ID priming.

#### 3-5 Immunogenicity

The IFA primed rabbit have shown nill titres before live challenge with S.typhi.While postchallenge with life S typhi have shown titre means of anti O 160 anti H 120 agglutinins.While before challenge hemagglutinin titres were nill.The after challenge hemagglutinin titre means were 505.The Vi-IFA primed rabbits before challenge gave agglutinin titre means of 256 for both anti-O and anti-H.The postchallenge agglutinin titre means were 256 for anti-O and 320 for anti-H.The prechallenge and postchallenge hemagglutini titre means were 1024.Leukocyte inhibitory factor studies reveals that there were significant inhibition of leukocyte in pre and postchallenge Vi-IFA primed rabbits with dense splenic hyperplasia as compared to non-significant inhibition of leukocyte migration in IFA primed in prechallenge and significant in postchallenge state accompanied by moderate splenic hyper plasia,Table 2.Vi-IFA mediate humoral(agglutinin and hemagglutinin responses) and

cellular immune responses(LIF responses).

**Table 2:** Leukocyte Inhibitory factor LIF in immune primed rabbits.

Vaccine priming	LIF inPre-experimental	LIF inPre-challenge	LIF in postchallenge	Splenic hyperplasia
Vi-IFA	0.93-0.95	0.35-0.45	0.35-.45	Dense splenic hyperplasia
IFA	0.9-0.96	0.9-0.95	0.3-0.35	Moderate hyperplasia
Saline control	0.95-0.97	0.95-0.97	0.95-0.97	Normal splenic tissue architecture

### 3-6 Immune Efficacy

The survive percentages of postchallenged rabbits was 5:5 100% in Vi-IFA primed group and 4:5, 80% in IFA group and 0:5 0% in saline control group.

### 3-7 Vi-IFA prototype Vaccine Developmental Criteria

The VI-IFA combination in separate application sites proved to be;pure, safe, immunogenic and efficieous with no evident adverse effects,Table-3.

**Table 3:** The Vi- IFA prototype vaccine developmental features.

Features	Vi-IFA	IFA	Vi local [ 5 ]	Vi commercial[5 ]
Understanding disease UD	UD	UD	UD	UD
Understanding Causal UC	UC	UC	UC	UC
Purity P	P	P	P	P
Safety S	S	S	S	S
Immunogenicity Imm	Imm	Imm	Imm	Imm
Efficacy E	E,100%	E 80 %	E90 %	E70%

## 4 Dissucssion

The search for typhoid vaccine in multiple versions hold the position of every present issue in past,present and future[15, 19].To develop a vaccine ; all what we need is vaccinal strain, series of developmental features , suitable lab animal models in preclinical phase of development and numbers of volunteers for the clinical phases of development [20 ].The typhoid versions of vaccine that have been tried were as; whole cell,attenuated, conjugate and molecular makes [15, 19].The theme of the present work was to develop a prototype Vi-IFA typhoid vaccine version in a lapin model.

Understanding the pathogenesis and the causal of typhoid is a pre-requist for undestanding vaccine developmental phases[20, 21].The pathogenic mechanisms of enteric fever infection and disease is started by the translocation of infectious events from the intestinal mucosa to blood stream followed by the sytemic dissemination of the invading salmonellas to the distal organs facilitating the emergence of the enteric fever disease.Enteric infectious disease cause more than billion disease episodes per year worldwide and claim

nearly two million lives each year mostly in lesser developed countries[20, 21].

Several systemic vaccines have been developed for human typhoid fever[ 15 ].Though mucosal vaccines are preferable due to the fact that the infection are mostly encountered at mucosal surfaces[15, 16].This necessitate the development of mucosal vaccines which may be hampered by the; limited knowledge of childhood gut mucosal immune system,lack of suitable mucosal adjuvant and rather unclear correlates to immune protection and limited knowledge of the factors affecting oral vaccines in children of developing countries.The application of oral vaccines through vaccination protocol may initiate mucosal antibodies in small intestine ,colon,rectum and blood [15] .Among the known typhoid mucosal vaccines is Vi vaccine versions[17].

Mice,rat, guinea pig, and chimpanzees were the common experimental animals for investigation of pathogenesis and vaccine development for salmonellas[22] .Immuno-competent mouse found valid both for pathogenesis and vaccine production[23].Rabbit have been proved to be the model of use in matching pathogenesis of S.typhi[24, 25] .Chimpanzee a non-human primate laboratory animal have been proved to be valid for both studying pathogenesis and vaccine development of typhoid[26, 27].Huq and his colleagues [28] have been tempting Vi,Vi-OMP conjugates in a mice model and reported high antibody responses in Vi-OMP conjugates than in Vi alone.Vi, and Vi conjugates have shown memory B cell activation in mice model[29].,Table – 4 .Vi conjugate vaccine has shown to sustain the efficacy of immune responses[30].

**Table 4:** Developmental immune features of various vaccines of Salmonella typhi in laboratory animal model.

Vaccine version	Laboratory animal model	Findings	References
Vi	Guinea pig	Efficacy 90 %	ALMousawi and his colleagues [5]
Vi,Vi-protein combinations	Mice	Combination vaccine showed interference,significant influence on B cell affinity maturation	Zhang and his colleagues [29]
Vi-IFA	Rabbit	Rabbit Challenge model showed 100% efficacy	This study

Repeated oral dosing protocol together with IFA SC priming rabbits highen the immunity of Vi-IFA in primed rabbits and records 100% immune efficacy as compared to 80% protection in IFA primed rabbits,Table -3 and 90% in VI primed guinea pigs[5].The Vi-IFA vaccine development lapin challenge model,Tables- 1-4,Oral multiple doses of Vi make vaccine units available in contact with mucosal immune cells together with the action of separately SC injected IFA induces continuous cell-cell cooperation events during the immune response inducing high humoral and cellular responses affecting the production of specific antibodies and activation of T lymphocytes specific to S.typhi vaccine units[19].

To this end, we laboratory develop Vi-IFA prototype experimental vaccine for typhoid disease with an evident and characteristic immune developmental features,Table e– 3 as;Pure,safe,immunogenic,non-allergenic in rabbit and allergenic in rat and immune efficacious.It induces specific S.typhi agglutinin and hemagglutinin antibodies

and significantly inhibits leukocyte migration in pre and post challenge immune states. Rabbits were proved to be valid immune model for laboratory development of Vi vaccine of typhoid. The authors hold the idea that the vaccine design presented in Tables – 1-4 is being novel achievement since it holds valid lapin model for typhoid vaccines in contrast to the in common issue that lapin are only valid to pathogenesis study of Salmonellas[22].

## 5 Suggestion

The authors are of the opinion that running this prototype vaccine Vi-IFA in non-human primates like chimpanzees model is advisable since the use of more than one mammalian immune system strengthen the drawn conclusion concerning the efficacy of prototype vaccine under laboratory development stages.

## 6 Conclusion

Vi –IFA prototype typhoid vaccine was developed via lapin live challenge model. Rabbits were proved to be valid models for development of Vi vaccine development.

## References

- [1] IMS Shnawa, WAZ Hindi “Febrile circulating agglutinins” *ALTekani Res* . 1996.
- [2] IMS Shnawa , BHH AlAmedie “Humoral Immune Profiles, infection forms and epidemiology of typhoid” *.Babylon.University .J Journal Vol..3(9): pp 554-561 ,2004.*
- [3] FJ Abd .Comparative Study Between Local And Systemic Humoral Immune Responses in typhoid patients. MSC Thesis, Biology Department College of Science, University of Babylon/IRAQ 2000.
- [4] IMS Shnawa, A J ALSerhan. Mixed IgG-IgM-IgA cryoglobulin responses in human typhoid patients. *IOSR Journal. Pharmacology. Biological. Science. Vol.9(2):pp 26-29 ,2014*
- [5] ATM ALMosawei ,M I Majeed , WBAH ALrekaby .Comparative Study of the polysaccharide typhoid vaccines effectiveness from local strain with commercial vaccine, *Journal of .Health. Medicine. and Nursing. Vol.23:55-66,2016*
- [6] MacCFadin *JF Lippincott William anWilkins. Biochemical Tests For Identification of Medical Bacteria. 3rd ed., 2000*
- [7] Robyt JF ,White BJ. *Biochemical Techniques Theory And Practice, Long Grove IL Wavelnd Press, 40-72, 1987.*
- [8] Kwapinski JBG *.Methodology Of Immunochemical And Immunological Research. Wiley-Interscience, New York, 1972, 287-316.*

- [9] A Plotkin .*Pharma Fact Book*, 2012, pp52-64.
- [10] IMS Shnawa, QNO Thewaini , “Lapin mucosal versus systemic humoral and cellular immune responses post to intratesticular administration of heat killed C.fetus.” *J.Baby.Uni* ..7(3):538-543, 2002.
- [11] MK Bach , RJ Smith , ML Wasserman .*Animal Models for testing inflammatory and hypersensitivity reactions.In Text book of Immunopharmacology, Dale MM,Foreman JC eds.*Blackwell Scientific Publications,London,1984, pp 253-264.
- [12] JS Garvey , N E Cremer , DH Sussdorf .*Methods In Immunology*, 3rd .ed. Reading Adison-Wesely Publishing CO., 1977 ,pp 53-267.
- [13] Stevens CD.*Clinical Immunology and Serology.A Laboratory Perspective*,3rd ed. Philadelphia FA Davis Company ,2010, ppp109-116,137-150.
- [14]M.Soberg . “In-vitro migration inhibition of peripheral blood leukocyte in delayed type hypersensitivity “*Acta.Medica.Scandonavica*.Vol.184: pp 13-25,1968
- [15] C Cz erkinsky ,J Holmgoen . “Vaccine against enteric infection for the developing World Phi ”.*Trans Roy.Soc.B*. Vol.370 : pp20150142,2015
- [16] S Wang ,H Liu , X Zhang , F Qian . “Intranasal and oral vaccination with protein based antigens;Advantages,challenges and formulation strategie ”. *v.Protein Cell* Vol. 6(7): pp 480-503.2015
- [17] SA Marothe , A Labiri , VD Negi , D Chakravortty . “Typhoid fever and vaccine development:A partially answeredquestion ”.*Indian.Journal.Medical.Research*.Vol.135(2):PP 161-169.2012
- [18] A Colliuod , SARothen ,G Dietrich G . “Developing and manufacturing attenuated live bacterial vaccine ”. *BioPharm Int*.Vol.6:pp1-12,2008
- [19] CO Tacket ,MFPasetti ,Sztein ,S Livio , MM Levine . “Immune responses to an oral typhoid vaccine strain that is modified to constitutively express Vi. Capsular polysaccharide”. *Journal Infectious Disease*.Vol.190(3):pp 565-570,2004.
- [20] IMS Shnawa . “Vaccine Technology At Glance ”., UK ,Boffin Access,2019 .
- [21] NIH . “Understanding Vaccines.National Institute of Allergy and Infectious Diseases,NIH publication Number98-4219., 1998,pp 20-24.
- [22] EE Higginson ,R Simon ,SM Tennant . “Animal models for Samonellosis: Application in vaccine research.Clinical ”. *Vaccine.Immunology*.Vol.23 : pp 746-756.,2016

- [23] R Simon , SM Tennant , GE Gakn , MM Levine . “Mouse model to assess the efficacy of nontyphoidal Salmonella vaccines revealing the role of host innate susceptibility and route of challenge”. *Vaccine* Vol.29 : pp 5094-5105,2011
- [24] KL Ronald ,SA Tirge ,SK Kochi , C-H Jung . “Reactogenicity and immunogenicity of live attenuated Salmonella enterica serovar paratyphi A enteric fever vaccine candidates ”. *Vaccine* Vol.28: pp 3679-3687,2010
- [25] A Panda ,I Tatarov , BJ Masek , J Hardick . et al. “A rabbit model for non-typhoidal Salmonella bacteremia.Comparative.Immunology.Microbiology ”.*Infectious.Diseases.* Vol.37 : pp 211-220,2014
- [26] G Esdall , S Gaines ,M Landy . ,WD Tigertt , H Sperinz et al. “Studies on infection and immunity in experimental typhoid fever in Chimpanzee orally infected with salmonella typhosa ”.*Journal of Experimental.Medicine.*Vol.112: pp 143-166,1960.
- [27] S Gaines , H Sprinz , J G Tully , WD Tigertt 1968. “Studies on infection and immunity in experimental typhoid feverVIII the distribution of Salmonella typhi inChimpanzee tissue following oral challenge and the relationship between number of bacteria and morphologic lesions”. *Journal of Infectious.disease.* Vol.118; pp293-306,1968
- [28] S Huq , S Sengupta S, A Khan , AK Mukhopadhyay , MK Bhan et al. “immune response of S.typhi –derived Vi polysaccharide and outer membrane protein a conjugate in mice”. *Pediatric.Nematology.*Vol.Feb 23.10.1016./pedneo.2022.12.011,2023.
- [29] F Zhang , EM Boerth , J Gong ,M S Nicol., K Lucas et al.2023. “A Bivalent MAPS vaccine induces protective antibody responses against Salmonella typhi and paratyphi A.Vaccines Vol.11(1):91.doi.10.3390/vaccines 11010091.2023
- [30] SE Jossi ,M Arcuri ,RR Persaud ,E Palmeiri E , M Perez-Toledo et al . “Vi polysaccharide and conjugate vaccine afford similar early IgM or IgG independent control of infection but boosting with conjugate Vi vaccine sustains the efficacy of immune responses ”. *Frontier.Immunology.* Vol.14: pp ,2023