

Salmonella Vaccines for Animals and Birds and Their Future Perspective

B.R. Singh*

ICAR Research Complex for NEH Region, Nagaland Centre, Jharnapani, Medziphema-797 106, Nagaland, India

Abstract: Vaccines are the most powerful biologicals which have modulated the economic, social and cultural life of human beings. Certain diseases have haunted humanity for centuries but are now extinct due to vaccines. On the other hand, some diseases such as salmonellosis, that were uncontrollable in the past, still cause pandemics today. There are more than 2500 serovars of *Salmonella* and vaccines made from any one serovar do not confer cross-protection against another, no matter how much antigenic similarity there is between the two. *Salmonella* strains are able to cause disease and to adapt to different types of animals whilst still maintaining their zoonotic and interspecies transfer potential. Three major types of vaccines are being used to control salmonellosis: killed bacteria, subunit vaccines and live attenuated vaccines. Effective vaccines against some host adapted and common serovars have been developed but their use has led to the emergence of other serovars. The problem has become more complex because increased international trade and travel has helped *Salmonella* strains to cross continental boundaries. It seems unlikely that we will be able to develop an effective *Salmonella* vaccine in the near future that is able to control all forms of salmonellosis, even in a single animal species. Recent advances in *Salmonella* vaccines will be reviewed including the use of *Salmonella* as vector for delivery of multivalent DNA and recombinant vaccines for controlling salmonellosis and other infectious diseases as well as for the control of cancer.

Key Words: *Salmonella*, Vaccines, Competitive exclusion, DIVA, Marker, Live, Killed.

INTRODUCTION

Few scientific discoveries have had such an impact on world health as the discovery of vaccines. The phenomenon that individuals who recovered from some infectious diseases were resistant to subsequent re-infection was observed by Edward Jenner and Louis Pasteur and provided the impetus for the early development of vaccines. Thanks to the advances in immunology and molecular biology the field of Vaccinology has undergone considerable development during the last century mainly because of new techniques: attenuation and inactivation of pathogens, cell-culture of viruses, genetic engineering and acellular component identification. In recent years considerable progress has occurred in areas such as combination vaccines, new adjuvants, proteomics, reverse vaccinology and vaccines for noninfectious diseases. These various revolutions [1] have resulted in the appearance of many different types of vaccines such as whole cell inactivated vaccines, bacterins (*Pasteurella multocida*, *Salmonella*), live attenuated vaccines (tuberculosis and *Salmonella* Typhi infections), toxoids (tetanus and diphtheria toxoids, *Salmonella* toxoid), acellular vaccines or subcellular vaccines or subunit vaccines (pertussis, *Salmonella* infections), polysaccharide vaccines (*Haemophilus influenzae* type B, Vi capsular vaccine for *Salmonella* Typhi infection), recombinant protein vaccines (hepatitis B, antigens expressed in yeast cells and *Salmonella*), anti-

idiotypic vaccines (hepatitis B, rabies, human immunodeficiency virus-HIV), synthetic peptide vaccines (hepatitis B, foot and mouth disease), DNA and mRNA vaccines, live vectored vaccines such as vaccinia-VRG, an oral rabies vaccine, pox and adenoviruses exploited as vectors).

Although, there is no systematic surveillance in operation in India and other south East Asian countries, salmonellosis, an important zoonotic disease, is an endemic problem in the region [2]. More than 2500 serovars of genus *Salmonella* have been identified, contributing to massive global losses in human and animal productivity as a result of diarrhoea [3-5]. A few strains, particularly host-adapted ones also cause heavy mortality in young, immunocompromised and stressed populations. Year after year, millions of people suffer with salmonellosis and about one third of the foodborne disease outbreaks in humans are caused by *Salmonellae* alone [6]. Transmission of salmonellosis is often associated with animal and plant products and more than 235 *Salmonella* serovars were found to be prevalent in India alone [7-11].

Of the many vaccines tried for control of salmonellosis, killed vaccines are serovar specific and produce only short lived immunity. Live vaccines may turn infective in immunocompromised individuals, in elderly and in infants as well as in healthy people because of the zoonotic potential of *Salmonella* [12].

Despite these limitations many different types of vaccines, broadly classified as killed vaccines or bacterins, subunit vaccines and live vaccines have been developed to control salmonellosis. Advantages and disadvantages of each type of vaccine are summarized in Table 1.

*Address correspondence to this author at the ICAR Research Complex for NEH Region, Nagaland Centre, Jharnapani, Medziphema-797 106, Nagaland, India; Tel: 0091-3862-247250; Fax: 0091-3862-247241; Mobil: 0091-9612207966; E-mail: brs1762@yahoo.co.in, brs1762@gmail.com

Table 1. Advantages and Disadvantages of Live and Inactivated Vaccines

Criteria	Live Vaccine	Inactivated Vaccine
Oral dosing	Good immunity	No or poor immunity
Duration of immunity	Long	Short
Requirement of adjuvant	No	Yes
Cross protection from related strains	Present	Rare
Safety on inoculation	Varies	Often safer
Horizontal spread of the vaccine strain	Possible	Not applicable
Vertical spread of vaccine strain	Possible	Not possible
Potential contamination	Possible	Remote chance
Stability and maintenance	Poor and difficult	Good and easy
CMI induction	Good	Poor
Secretary IgA and local mucosal immunity	Good	No
Reversion of vaccine strain to pathogenic	Possible	No
Persistence in the vaccinee	Yes	No
Interference from normal flora of vaccinee	Possible	No
Cost of the vaccine	Less	More
Requirement for immunomodulators	No	Yes
Vaccine marker	Genetic markers	Serological markers
Potential for vector vaccine development	Good	Poor
Potential for use in multivalent combination	Less	Good
Changes in growth conditions during production have impact on immunogenicity	Less	More

EXPECTED QUALITIES OF A VETERINARY SALMONELLA VACCINE

There is no ideal vaccine available for control of salmonellosis. Such a vaccine must be cheap, minimally reactive, induces mucosal immunity and has self-boostering quality. It should be a single dose oral vaccine, preferably live and invasive but still safe to induce durable immunity but not causing any disease in progeny of vaccinated animals either on vertical or horizontal transmission. However, an ideal vaccine should afford a life-long protection. Except for broilers and pig which are reared for a short duration of 2-3 months, no *Salmonella* vaccine affords protection even for 1 year. An ideal vaccine must be enabling differentiation of vaccinated from infected animals (DIVA vaccine). A good vaccine candidate must easily be distinguished from wild type *Salmonella* in a basal bacteriology laboratory by antigenic or genetic or phenotypic markers. Some of the identifiable phenotypic characters such as susceptibility to low or high temperature and requirement of some specific ingredients for growth (auxotrophic) have been incorporated into modern vaccine candidates along with their compatibility with growth promoting antibiotics, probiotics and prebiotics. However such phenotypic markers must be non-transferable to the wild type homologous or heterologous strains. A vaccine should not deteriorate on storage if killed and should be stable and non-reverting to pathogenic if live. It should not be interfering with colonization of normal mucosal flora necessary for pathogen exclusion mechanism in healthy individuals, should not cause development of tolerance on

overuse, and must not be interfering with other vaccines to be used in tandem.

KILLED VACCINES

Initial work on development of *Salmonella* vaccine started in late nineteenth century with attenuated vaccine [13] for typhoid infection in human beings. Later, in 1956, Smith [14] developed 9R and 9S strains of *S. enterica* ssp. *enterica* serovar Gallinarum (*S. Gallinarum*) for control of fowl typhoid. Subsequently killed vaccines were used successfully with confidence of safety to stamp out salmonellosis from equines. Later, many different *Salmonella* serovars were used to produce killed bacterins for veterinary use such as *S. Typhimurium* [15, 16], *S. Abortusequi* [17-22], *S. Dublin* [23], *S. Virchow* [24], *S. Gallinarum* [25] and *S. Enteritidis* [26, 27].

In India, the most successful killed vaccine was made from formalin killed, alum precipitated *S. Abortusequi* in 1955 [17]. The vaccine was found to be much superior than earlier vaccines giving up to 86% protection in mice as compared to heat killed phenolized vaccine which could protect only 50% of the vaccinated population.

Incremental improvements in existing and new killed vaccines came after use of various adjuvants which enhanced not only immunogenicity but also increased length of the protection periods. Chrome alum [18], alhydrogel [20, 24], mineral oil [21, 24, 25], potash alum [22], Freund's incomplete [22] and Freund's complete [24] adjuvant (FCA) have

been used in different *Salmonella* vaccines. For inactivating *Salmonella* in killed vaccine agents such as heat [15, 16], β -propiolactone (BPL), glutaraldehyde [20] and formaldehyde [16, 22-24] have been tried to preserve the antigenicity and increase the efficacy of vaccines. Another technique to improve antigenicity of the vaccine was to enhance expression of better immunogenic antigens on *Salmonella* during *in-vitro* growth of the vaccine candidate. It was attempted through mimicking *in-vivo* conditions as culturing the vaccine strain in iron-deficient medium [28], used to produce Selanvac, a commercially available *Salmonella enterica* subsp. *enterica* serotype Enteritidis PT4 bacterin. Another approach to increase efficacy of vaccines was use of immunopotentiators such as thymulin, zinc [27], levamisole and vitamin E [29]. To make broad-spectrum *Salmonella* vaccines, the concept of multivalent vaccines came was applied. Cooper and Mac Farlane [30] vaccinated sheep with a bivalent *Salmonella* vaccine but immunity could not be enhanced beyond 3-4 months and complete protection was not achieved [12].

The importance of killed vaccines was evident in control of salmonellosis in equines and birds. In developed countries with sufficient infrastructure facilities, use of killed vaccines along with flock sanitation and regular infection-monitoring led to eradication of a few *Salmonella* serovars such as *S. enterica* subsp. *enterica* serotype Abortusequi from equids and *S. enterica* subsp. *enterica* serotype Pullorum/ Gallinarum from birds. But the same could not be repeated in resource-poor countries. In later years, the niche emptied by the host adapted strains of *Salmonella* in equids and birds was successfully filled with more dangerous and potentially zoonotic serovars as *S. enterica* subsp. *enterica* serotype Typhimurium and *S. enterica* subsp. *enterica* serotype Enteritidis in horses and birds, respectively [28].

Comparative analysis of live and killed vaccines revealed that killed vaccines are usually less effective for three reasons. Firstly, they only contain surface antigens that give an incomplete protective antibody response; secondly, they fail to elicit cell-mediated immune response, which is important for long-term protection from salmonellosis and finally; they fail to elicit production of secretory immunoglobulin (sIgA) response critical for protection of mucosal surfaces from colonization with the pathogen. Attempts to overcome all three problems, by culturing vaccine candidates under iron limiting microaerophilic conditions, through use of adjuvant to induce cell mediated immunity (CMI) and mucosal immunity (sIgA) gave only partial success [31].

FUTURE OF KILLED VACCINES

Despite many weaknesses (Table 1) killed vaccines are often preferred. Meta-analytic review of three typhoid vaccines namely live attenuated, Vi subunit and whole-cell killed vaccines used in more than 1.8 million recipients has revealed that the killed vaccine afforded the best protection [32]. The major point of criticism that killed vaccines afford a short-lived immunity was of little relevance as the protection period could not be extended beyond six months even after use of most of the live *Salmonella* vaccines. The only exception was a recently developed *S. e.* Abortusequi vaccine, which was reported to afford protection for 11 to 14 months after booster inoculation.

Killed vaccines, whilst not very effective, are still the best for use where the disease is eradicated and are the preferred choice for eradication of an endemic strain from a herd or when dealing with an outbreak of salmonellosis. Under these instances, herd specific killed vaccines have been found to be more effective than the established live attenuated vaccines [33, 34]. Killed vaccines are criticized for their inability to induce good CMI and mucosal immunity which are thought to be more important in affording solid protection against salmonellosis than humoral antibodies. Recent studies in Africa on non-typhoidal *Salmonella* infections in children [35] revealed that protective antibodies play a greater role in protection in children against bacteraemia caused by non-typhoidal salmonellosis than CMI. Therefore, a suitable killed vaccine which may cause formation of protective antibodies at early childhood is the need of the day.

SUB-UNIT VACCINE

Poor performance of killed vaccines forced researchers in 1980s to develop other types of *Salmonella* vaccines employing sub-cellular components of *Salmonella* and as a result several subunit vaccines came into being. Common sub-cellular components of *Salmonella* used for development of vaccines are: outer membrane proteins (OMPs), porins, toxins and ribosomal fractions. Such vaccines tried in different animals had variable success [12, 22, 36-45]. OMP of *S. Gallinarum* [36, 37] adjuvanted with mineral oil caused 100% clearance of challenge strain of *S. Gallinarum* in birds vaccinated with 400 μ g OMP/bird. The immune response of OMPs from *S. Heidelberg* [38] and *S. Gallinarum* [39] could be improved through lipid-conjugation with immunostimulating complex (ISCOM) and bacterin, respectively. In India, Gupta and co-workers [22] found ribosomal fractions and non-ribosomal proteins (non-denatured bacterial cell envelopes) of *S. Typhimurium* to be a potential vaccine candidate in a rabbit model.

Most of the subunit vaccines failed to afford significant protection [46] either in field or in experimental models except a toxoid vaccine [40] made from *S. Weltevreden* toxins which provided 100% protection in a mice model against lethal challenge with homologous toxins and *S. Weltevreden*. The toxoid afforded incomplete protection against heterologous *Salmonella*. Salt precipitated protein toxoid made from *S. Abortusequi* afforded better protection than conventional killed and other subcomponent vaccines [41, 45]. Mishra and Sharma [43] reported good efficacy of the toxoid vaccine against salmonellosis in poultry (Patents, US 6,605, 285 B2 and India-189049-96). A toxoid from *S. Weltevreden* prepared after polymyxin-B extraction, salt precipitation, dialysis, gel filtration and formalin inactivation and adjuvanted with FCA provided 100% protection. When the the toxoid was used without any adjuvant only 60-70% protection was recorded in vaccinated birds. Studies of Kumar [42] revealed immunopotentiality of the toxoid with use of vitamin E, the vaccination of birds with vitamin E-potentiated toxoid protected 75-90% of birds after homologous and heterologous lethal challenge, while toxoid potentiated with vitamin E plus selenium afforded only 70-80% protection. Aluminium hydroxide adjuvanted toxoid afforded 70% protection to birds on lethal challenge. Later on [44] toxoid prepared from purified pooled enterotoxin and

cytotoxins adjuvanted with saponin proved far better. The birds vaccinated with saponified toxoid at a dose of 75-100 µg per birds subcutaneously, protected 100% birds against homologous as well as heterologous challenges and a booster dose after 90 days of the primary immunization provided lifelong immunity to vaccinated birds. The vaccine prevented multiplication of the challenge organism in the internal organs and eventually checked shedding of the challenge strain. Nevertheless a major draw-back with subunit vaccines is their complicated protocols of manufacturing and high cost of production.

FUTURE OF SUBUNIT VACCINES

Hope for development of a broad spectrum *Salmonella* vaccine lies with sub-component and cytotoxin-I toxoid vaccines. Sharma and his group [40, 43] have not only revived interest in subcomponent vaccines, but also demonstrated their potential through development of an effective broad spectrum *S. Weltevreden* toxoid vaccine (Patents, US 6,605, 285 B2 and India-189049-96) for control of salmonellosis caused by different serovars of *Salmonella enterica* as *S. Gallinarum*, *S. Pullorum* and *S. Enteritidis* in poultry birds [43] and *S. Abortusequi* in equids [41] inducing an immunity lasting for more than 90 days. Moreover there is potential of development of recombinant toxoids, multivalent toxoids and combining the toxoids of *Salmonella* with toxoids or whole cell bacterins of other enteric and systemic infectious agents.

LIVE ATTENUATED VACCINES

Attenuated avirulent live *Salmonella* vaccine candidates have received considerable attention since the dawn of vaccinology due to solid immunity conferred by them on oral administration and recently because of their potential as mucosal vaccines and as prototype vaccine vectors for delivery of DNA vaccines and development of theracines [47]. Several live attenuated *Salmonella* strains, either with unknown mutations or with site specific mutations created through genetic deletions or insertions [14, 48-74], have been used in humans, birds and animals exploiting host-specific strains or wide host range *Salmonella* serovars (Table 2).

On per-oral vaccination, *Salmonella* invade and multiply in the mucosa associated lymphatic tissues (MALT) and gut-associated lymphatic tissues (GALT) such as Peyer's patches and then reach systemic sites through mesenteric lymph nodes. This characteristic dissemination pattern allows *Salmonella* to stimulate cell-mediated, humoral and secretory antibody immune responses. A good live *Salmonella* vaccine should be totally avirulent both for animals and humans, highly immunogenic providing long lasting protection from invasion and colonization of *Salmonella* in internal organs and gastro-intestinal tract. The immunity induced by good live vaccine must be solid against different *Salmonella* serotypes. Suitable live vaccine candidates are genetically stable possessing two or more attenuating defined deletion mutations, and their invasion and dissemination in the body should remain unaffected by the diet of the host and such strains should be easy to grow, store and administer [12]. Thus during development of live vaccine candidates, major emphasis is laid on creating a

strain capable of invasion in GALT and MALT which can survive and multiply for a period of time just sufficient for eliciting a protective response. This goal has been achieved by introducing mutations that make the bacteria dependent on normal body constituents (which are rapidly depleted on infection) for their multiplication i.e. the mutations are preventing the pathogen to propagate further. The *aro* mutations (blocking synthesis of aromatic amino acids) in *aroA* mutants of *S. Typhimurium*, *S. Enteritidis*, *S. Dublin* and *S. Choleraesuis* are examples of some successful live vaccine candidates. The immunogenicity of *aro* mutants is excellent but their long survival in the host remains a problem in some cases [61, 69]. Mutations that cripple the pathogens' ability to survive in a host by diminishing resistance to non-specific host defense mechanisms such as Δcya , Δcrp (deficient in adenylate cyclase and the cAMP receptor proteins) and $\Delta htrA$ (lacking heat response proteins) have also been used to develop good vaccine candidates [64, 75]. Mutations in genes encoding for regulatory components such as, *phoP/phoQ*, a two component regulatory system which regulates genes for acid phosphatases and for the ability of *Salmonella* to survive in macrophages and sigma factor, a universal regulator for many genes [66] and DNA adenine methylase (Dam), which regulates the production of a number of adhesins required for *Salmonella* infection [71] have also been exploited to obtain successful *Salmonella* vaccine candidates.

Reviews of live *Salmonella* vaccines [12, 30, 76] have concluded that they are superior to killed and subunit vaccines in controlling *Salmonella* infections and revealed their potential as a prototype messenger for DNA vaccines and theracines. Studies revealing various aspects of environmental safety associated with live attenuated vaccines [75, 77] have further cleared the clouds over their safety and stability by showing that strains containing defined deletion mutations cannot revert back even after long co-existence with wild type parent or heterologous strains either *in vitro* or *in vivo*. Live *Salmonella* vaccines have also been proved effective and compatible with probiotics and prebiotics with added benefits [78].

Recent studies on *aroA-htrA* mutants of *S. Abortusequi* [75] proved their suitability as an oral vaccine in all types of equids with no apparent adverse effect. The mutant strain (S-30) has also been found safe through intra-vaginal and subcutaneous routes even in doses as high as 10^9 cfu per guinea pig. Safety testing in foals, pregnant mares and stallions revealed that the vaccine is safe through oral inoculation in doses as high as 4.2×10^{12} cfu/animal and the vaccine was immunogenic in doses as low as 1×10^{10} cfu/ animal. However, the vaccine produced unacceptable side-effects when inoculated through subcutaneous and intramuscular routes in equids and caused abscesses at the site of inoculation. Challenge tests in mares after 8 months of vaccination revealed that the vaccine afforded 100% protection against fatal challenge with wild type lethal strains inoculated in 100 times the abortion-causing dose (5.7×10^{10} cfu/ animal through intraperitoneal route). In the study, none of the immunized mare aborted and excreted the wild type strains after a challenge infection. Further studies on *aroA⁻htrA⁻* vaccine strain of *S. Abortusequi* revealed that the strain could easily be differentiated from

Table 2. Live Attenuated Vaccines Candidates Used for Control of Salmonellosis in Experimental and Domestic Animals

Type of Mutation for Attenuation	Strains/ Serovars [Reference]	Test Animals	Comments
Cell wall lipopolysaccharide chains (Rough strain)	9R (rough) <i>S. Gallinarum</i> [14, 48-52]	Chicken	Afforded protection against virulent parent up to 12 to 32 weeks (when given after NaHCO ₃) and cross protection against <i>S. Typhimurium</i> and <i>S. Enteritidis</i> . Adjuvants interfere with protection. Effectiveness decreases after two months of vaccination.
Adaptation in another nonspecific host or some specific growth-medium	Strain 51 of <i>S. Dublin</i> [53-56]	Chicken, calves	Cleared the vaccine strain from 99% birds but could not clear <i>S. Typhimurium</i> . Gave better protection in calves than killed <i>S. Dublin</i> bacterin. Calves had a little diarrhoea and febrile reaction to vaccine. Both cell mediated and humoral immune responses were induced.
<i>galE</i> mutant	<i>S. Typhimurium</i> [57], <i>S. Choleraesuis</i> and <i>S. Typhi</i> [58]	Mice, calves	Significantly reduced faecal shedding of the homologous challenge but there was no significant humoral immune response.
<i>aroA</i> mutant	<i>S. Dublin</i> and <i>S. Choleraesuis</i> [59], <i>S. Typhimurium</i> [60], <i>S. Enteritidis</i> [61], <i>S. Abortusequi</i> [62, 63]	Mice, Chicken, Calves, guinea pigs	Excellent immunogenicity but prolonged carriage. Oral vaccination protected against intravenous challenge. Vaccination induced transient diarrhoea. Vaccine strain could be detected in blood. Induced pyrexia on parenteral inoculation.
<i>AcyA Acrp</i> mutant	<i>S. Typhimurium</i> [64]	Mice	Protection up to 4 months days post vaccination on challenge with 10 ⁹ CFU, strong mucosal, humoral and cellular immune response.
<i>PhoP/phoQ</i> mutant	<i>S. Typhimurium</i> [65, 66]	Mice	Found immunogenic, their frequency of reversion to virulent forms is relatively high rendering them unsafe
<i>vPla</i> mutant	<i>S. Typhimurium</i> [67]	Mice	Highly immunogenic but reminiscent virulence was detected.
<i>nuoG</i> mutant	SG9NGK- <i>S. Gallinarum</i> [68]	Chicken	Afforded more than 75 % protection.
<i>aroA'secC</i> mutant	<i>S. Gallinarum</i> [69]	Chicken	Conferred 100% protection against homologous challenge.
<i>htrA</i> mutants	<i>S. Abortusequi</i> [63, 70]	Guinea pigs	Afforded 80-100% protection on oral, intravaginal, and parenteral inoculation
<i>dam</i> mutant	F98- <i>S. Typhimurium</i> [71]	Chicken	Highly attenuated, elicited cross-protection immune response against <i>S. Enteritidis</i> too.
<i>dam'phoA</i> mutants	ZJ111, <i>S. Typhimurium</i> [72]	Chicken	Safe and effective against homologous challenge.
<i>dam'aroA</i> mutants	<i>S. Typhimurium</i> [73, 74]	C57BL/6J mice	Safe and effective against homologous challenge.
<i>aroA'htrA</i> mutants	<i>S. 30</i> , <i>S. Abortusequi</i> [63, 75]	Mice, guinea pigs and equines	Safe through oral, intra-vaginal and subcutaneous routes but reactogenic through subcutaneous and intramuscular routes, 100% protection up to 11 months in guinea pigs and pregnant mares. Safe in pregnant animals as well as in foals.

wild type *S. Abortusequi* through simple bacteriological, biochemical and immunological methods, indicating its DIVA potential [79].

FUTURE OF LIVE VACCINES

Although the utility of live vaccines in eradication of salmonellosis is limited, there is vast potential for their use as vector for DNA vaccines and as recombinant antigens [12, 80-90] which might lead to evolution of multivalent vaccines in coming decades (Table 3). Recombinant DNA technology combined with defined gene deletion method for attenuation has made it feasible to develop vaccines against a broad range of human and animal pathogens. The vector potential of *Salmonella* vaccine strains have been exploited for expression of a number of antigens of bacterial, viral, protozoan and eukaryotic antigens [12, 82]. Besides, *Salmonella* vaccines are foreseen as one of the most potent vectors for oral delivery of multivalent DNA and plasmid-vectored vaccines [47, 88].

The use of live *Salmonella* vaccines as theracines for delivery of therapeutic molecules in nano-medicine and cancer therapy is increasing rapidly. Live vaccine strains of *Salmonella* naturally accumulate in tumors due to slightly anoxic environment of tumors, and continue to thrive there protected from the immune system which further deplete oxygen to levels lethal to tumor cells and this might lead to cure from cancer [89]. As tumors require a supply of blood in order to continue to grow and spread, one approach to control tumor growth might be cutting off the blood supply to the tumor rather than direct killing of the cancer cells. Exploiting the above two facts, i.e., affinity of *Salmonella* towards tumor tissues and requirement of fast growing blood vessels in tumors can lead to effective cancer therapy. The principle has been confirmed experimentally and a *S. Typhimurium*-based DNA vaccine expressing vascular endothelial growth factor (VEGF) receptor-2 (Flk1) and IL-12, has been used to first trigger an immune response to the VEGF antigen and then to stimulates T-cell to seek out and

Table 3. Some Important Antigens Expressed in *Salmonella* Mutants (CVD908 *aroC*⁻*aroD*⁻ Mutant of *S. Typhi*, *aroA*⁻, *dam*⁻*aroA*⁻ and *dam*⁻*phoP*⁻ Mutants of *S. Typhimurium* etc.)

Diseases/ Pathogens/ Source of Antigens	Antigens Expressed in/ Carried on <i>Salmonella</i> [References]
<p>Eukaryotic Pathogens</p> <p><i>Eimeria tenella</i></p> <p><i>Plasmodium falciparum</i></p> <p><i>Onchocerca volvulus</i></p> <p><i>Echinococcus granulosus</i></p> <p><i>Leishmania mexicana</i></p> <p><i>Plasmodium berghei</i></p> <p><i>Leishmania major</i></p> <p><i>Schistosoma haematobium</i></p>	<p>Antigen 5401 [72]</p> <p>Circum sporozoite protein (CSP) [105]</p> <p>Glutathione S-transferase [106]</p> <p>Surface antigen [107]</p> <p>protein gp63 [108]</p> <p>Merozoite Surface Protein-1 [109]</p> <p>T-cell epitope [110] and gp63 [111]</p> <p>glutathione S-transferase [112]</p>
<p>Bacteria</p> <p>Anthrax (<i>Bacillus anthracis</i>)</p> <p>Pertussis (<i>Bordetella pertussis</i>)</p> <p>Tetanus (<i>Clostridium tetani</i>)</p> <p>Pneumococcal infections (<i>Pneumococcus</i> species)</p> <p><i>Streptococcus mutans</i></p> <p><i>Escherichia coli</i></p> <p><i>Neisseria meningitidis</i></p> <p>Tularemia (<i>Francisella tularensis</i>)</p> <p>Cholera (<i>Vibrio cholerae</i>)</p> <p><i>Yersinia</i> spp.</p> <p>Typhoid (<i>S. Typhi</i>)</p> <p>Leprosy (<i>Mycobacterium leprae</i>)</p> <p><i>Mycobacterium bovis</i></p> <p>Dysentery (<i>Shigella</i> sp.)</p> <p>Diphtheria (<i>Corynebacterium diphtheriae</i>)</p> <p><i>Helicobacter pylori</i></p> <p>Streptococcosis (<i>Streptococcus</i> sp.)</p> <p>Listeriosis</p> <p>Campylobacter infection (<i>C. jejuni</i>)</p> <p>Brucellosis (<i>Brucella abortus</i>)</p>	<p>Protective antigen (PA) [90]</p> <p>P-69, FHA, PTX51 [113, 114]</p> <p>Tetanus toxin fraction C [114]</p> <p>Alpha-helical region of PspA (pneumococcal surface protein A) [82]</p> <p>Saliva-binding region (SBR) [85]</p> <p>LTB, CFA1, Ki capsule, K88, CST [115-118]</p> <p>28 kDa outer membrane protein (OMP) [119]</p> <p>17 kDa OMP [120]</p> <p>Cholera toxin B subunit (CTB), O antigen [121, 122]</p> <p>Invasin, F1 capsular antigen [123], invasin [132]</p> <p>Vi antigen [124]</p> <p>Many antigens (85A, EAST6, Pst 3, Hsp 65) [80]</p> <p>30-kDa antigen [125]</p> <p>Many 'O' antigens [81, 126]</p> <p>Diphtheria toxin [127]</p> <p>HpaA and UreB [128]</p> <p>M protein, pneumolysin toxin [85], colonization and virulence antigens [129], antigen A [130]</p> <p>Protective antigens and haemolysins [131]</p> <p>Surface antigen [133]</p> <p>31-kilodalton protein antigen [134]</p>
<p>Viruses</p> <p>Rabies</p> <p>Herpes simplex virus</p> <p>Melanoma virus</p> <p>Hepatitis B virus</p> <p>Measles virus</p> <p>Human papillomavirus</p> <p>Influenza A virus</p> <p>Simian papilloma virus</p> <p>Transmissible gastroenteritis virus</p> <p>Murine fibrosarcoma virus</p> <p>FMD Virus</p> <p>Human immunodeficiency Virus</p> <p>Antigens for Tumor Control</p> <p>Antigens for Contraception</p>	<p>Glycoprotein [135]</p> <p>Glycoprotein D [136]</p> <p>NYESO-1 antigen [137], melanoma differentiation antigens Gp100 [138]</p> <p>HBs antigen [83, 139]</p> <p>HA antigen [81]</p> <p>Type 16 E7 epitopes [139]</p> <p>Nucleoprotein [140]</p> <p>SIV capsid antigen [141]</p> <p>Coronavirus S protein [142]</p> <p>Murine fibrosarcoma antigen [143]</p> <p>FMDV antigen expressing DNA [144]</p> <p>HIV-1 gag antigen [145]</p> <p>Endoglin (CD 105) an antigen having therapeutic value in breast cancer, CCL-21 (a secretory chemokine) to cure lung cancer, murine vascular endothelial growth factor (VEGF) receptor-2 (flk1), IL-2 etc. [73-74, 84, 86-89]</p> <p>Fox sperm LDH-C4 antigen [146] and human sperm surface antigen [147]</p>

destroy the blood vessels that feed growing tumors. One such vaccine [89] has prevented tumor growth in vaccinated mice after two weeks on challenge injection of melanoma, colon cancer cells and lung cancer cells. The therapy with another attenuated *Salmonella* Typhimurium vaccine strain encoding Flk1 and interleukin-12 has also been reported to be effective against tumors. The benefits of such recombinant vaccines lie in their multivalent nature which might work against many types of tumor cells simultaneously. The use of vaccines as therapy to treat cancer could potentially have several advantages over conventional therapies that directly target tumors [84, 89]. A DNA vaccine encoding secretory chemokine CCL21 and an inhibitor of apoptosis protein survivin could be delivered orally through doubly attenuated *S. Typhimurium* (*dam*⁻ and *aroA*⁻) mutant. The vaccine enhanced activation of antigen-presenting dendritic cells, and also CD8⁺ T cells to produce an effective immune response against the survivin self-antigen. Vaccination resulted in eradication or suppression of pulmonary metastases of non-small cell lung carcinoma both in prophylactic and therapeutic trials in C57BL/6J mice [74]. Another oral *Salmonella* based anti-cancer DNA vaccine to specifically target tumor cells has been developed through cloning and expression of endoglin (CD 105), a tumor specific antigen. The vaccine led to suppression of pulmonary metastases of D2F2 breast carcinoma cells in a syngeneic mouse tumor model [87]. Other factors potentially able to break the immunotolerance to cancer antigens such as murine ubiquitin peptide epitopes gp10025-33 and TRP-2181-188 have also been cloned in and delivered by an oral *Salmonella* vaccine. The protective immunity against tumors obtained through *Salmonella* vectored vaccine is mediated by MHC class I antigen-restricted CD8⁺ T cells that secrete TH1 cytokine IFN and induce tumor rejection and growth suppression. The vaccine has been found experimentally successful in mice exposed to lethal challenge with B16G3.26 murine melanoma cells [73].

NON-VACCINE IMMUNOLOGICALS

Although live attenuated vaccines are being claimed as the most effective means of immunoprophylaxis against *Salmonella*, they do have a few drawbacks. Firstly, vaccinated animals continue to shed the vaccine strain for some time, making it difficult to differentiate between vaccinated and infected animals unless specific diagnostic methods are used. Secondly, the possibility of reversal of attenuated *Salmonella* vaccine strains to virulent forms cannot be ruled out. Thirdly, the live vaccines give protection against homologous *Salmonella* serovars from which the vaccine has been prepared, thus leaving the vaccinated animal potentially susceptible to thousands of other *Salmonella* serovars. Moreover, live attenuated *Salmonella* vaccines while protecting against virulent *Salmonella*, paradoxically may induced profound immuno-suppression against non-*Salmonella* antigens and may also suppress lymphoproliferative response to mitogens [34]. Thus, in the quest for novel means of controlling salmonellosis, Lowry and coworkers [91] found that immunoprophylactic use of a few lymphokines in young turkey poults and broiler chicks can reduce the horizontal transmission of *Salmonella* in poultry. Thus the study suggested the possibility of using non-vaccine immunolo-

gicals as part of a preventive strategy against *Salmonella* in poultry.

VACCINES FOR POULTRY SALMONELLOSIS

In poultry, salmonellosis is a multi-etiology zoonotic infection. Fowl typhoid and pullorum disease are caused by *S. Gallinarum* and *S. Pullorum*, bird-specific, host-adapted serovars, respectively. Most of the early attempts to produce an effective killed vaccine to control salmonellosis in poultry were of little practical value [92, 93]. A live rough strain (9R) vaccine developed in the early 1950s [14] was protective and, unlike killed vaccines, it did not interfere in the disease eradication programme, even where the disease is to be eradicated by using the whole-blood agglutination test. At most, 10% vaccinated birds may turn reactors in the test [50, 94]. Gupta and Mallick [49] reported better protection with adjuvanted 9R vaccine but their findings were soon contradicted [51]. Although requirement of oral dosing of sodium bicarbonate [48] before 9R vaccine delivery to birds was cumbersome, cross protection conferred by 9R vaccine against *S. Typhimurium* [95-97] was an added advantage. The 9R strain possesses some virulence [50, 98-100] therefore its use in young chicken of certain susceptible breeds is often a problem. Protection level by 9R vaccine is often questioned (~ 60% against challenge with virulent *S. Gallinarum*) and OMP based subunit vaccine was reported to be a better option [37, 50]. The use of rough strains as vaccines is further jeopardized because of frequent isolation of rough strains from food animals [7, 8, 101].

Elimination (curing) of a virulence plasmid from a *S. Gallinarum* strain greatly reduced virulence of *S. Gallinarum*, but the strain was able to persist in the reticuloendothelial system of the chicken for some time to induce good protective immune response [102]. However, the plasmid cured strain could not be exploited as vaccine because all vaccinated birds reacted positively by whole blood agglutination test for fowl typhoid. The vaccine faced strong criticism due to its inapplicability in regions where whole blood test is used as screening method for control of salmonellosis in poultry. In 3-week-old chickens, the plasmid-cured derivative was virtually avirulent, but residual virulence was enough to cause disease in newly hatched chickens, thus the vaccine could not be used in the field. Besides, acquisition of the plasmid from wild strains present in intestines of vaccinated birds remained a potential threat.

Short term and incomplete protection afforded by killed vaccines, long term persistence and fecal excretion of live vaccine candidate (9R and plasmid cured strains) in immunized birds failed to curtail worldwide prevalence of fowl typhoid. Besides, consistently increasing frequency of isolation of antibiotic resistant *S. Gallinarum* and foodborne zoonotic *Salmonellae* are pressing hard for evolution of improved *Salmonella* vaccine. Singh and Sharma [40] reported 100% protection in mice vaccinated with *S. Weltevreden* formalized toxoid, and similar methodology was used to develop a successful toxoid vaccine which provided long lasting immunity to birds against salmonellosis [42-44]. The same subunit toxoid vaccine also protected the chicks in early age due to maternal transfer of *Salmonella* antibodies in egg yolk.

USE OF *SALMONELLA* VACCINES FOR COMPETITIVE EXCLUSION OF THE PATHOGENS

In the late 20th century, *Salmonella* enteritidis has emerged as a major egg-borne zoonotic infection probably due to overuse of *S. Gallinarum* vaccines. Meta-analysis of epidemiological data of poultry salmonellosis revealed an inverse relationship between the incidence of *S. Gallinarum* infection in chickens and egg-associated *S. Enteritidis* infections in humans from England, Wales, and the United States. The findings indicated that *S. Enteritidis* might have emerged as a result of a gap filling mechanism, having probably filled the ecologic niche vacated by *S. Gallinarum* as a result of extensive use of *S. Gallinarum* vaccines in poultry. Increased colonization of *S. Enteritidis* in birds could be associated with increased excretion of the pathogen by the birds in the environment and increased prevalence of the pathogen in poultry products leading to a marked increase in human infections from *S. Enteritidis* [103]. *Salmonella* Enteritidis is unlikely to be eliminated from poultry by relying solely on the test-and-slaughter method of disease control because, unlike *S. Gallinarum*, *S. Enteritidis* can be reintroduced into flocks from its rodent reservoirs. Instead, vaccination would be effective in excluding *S. Enteritidis* from domestic fowl because it would eliminate one of the risk factors (loss of flock immunity against the O9-antigen), which had probably contributed to the emergence of *S. Enteritidis* as a foodborne pathogen. In fact, much of the decline in human *S. Enteritidis* cases in England and Wales since 1994 has been attributed to the use of an *S. Enteritidis* vaccine in poultry [104]. However, serologic evidence suggesting that *S. Gallinarum* is more immunogenic than *S. Enteritidis* indicates that a more effective approach for eliciting protection in chickens would be immunization with a live attenuated *S. Gallinarum* vaccine. Colonization of avirulent *S. Gallinarum* in birds shall restore the natural balance (exclusion of *S. Enteritidis* by a natural competitor) that existed before human interventions implemented early in the 20th century and may also exclude the threat of rodents and human mediated transmission of *S. Gallinarum* (as the pathogen is host restricted serovar) in flocks desired to be free from antibodies or the bacteria, which is not possible with the use of *S. Enteritidis* vaccine.

FUTURE OF *SALMONELLA* VACCINES AS MUCOSAL VACCINES

Mucosal vaccines are the ultimate targets for control of many diseases. It is now quite clear that mucosally administered immunogens when delivered with appropriate adjuvants or in an appropriate form, can stimulate the most effective systemic immune response against not only those pathogens invading through mucosal lining but more effectively against those which have predilection site and invasion sites remote from the gut. *Salmonella* being a gut invading bacteria efficiently deliver required antigens while moving in the body. Therefore, oral vaccine against tetanus developed through cloning of DNA coding for an immunogenic non-toxic fraction of tetanus toxin into an attenuated *Salmonella* strain proved more efficacious than any other type of tetanus vaccine. Many antigens of immunogenic potential for control of parasitic [72, 105-112], bacterial [80-82, 85-86, 90, 113-134] and viral [81, 83, 135-145] infections, tumor growth [73, 74, 84, 86-89] and also for contraception [146, 147] have

already been expressed in attenuated *Salmonella* strains, a step towards development of multivalent mucosal vaccines (Table 3). Studies revealed that *Salmonella* vaccines as vector for DNA and plasmid-vectored vaccines bear a vast potential. Live oral *Salmonella* vaccines may be the future prototype vaccine vector for passenger immunogens in humans and animals [47] and mucosal delivery of a battery of antigens [105-150]. Live attenuated *Salmonella* may overcome limitations with conventional methods of DNA immunization because of plasmid stability conferred on oral DNA delivery by the use of attenuated *Salmonella* vaccine strains. Studies have shown success of BRD509, *S. Typhimurium* oral vaccine candidate, transformed with plasmid having a DNA vaccine cassette comprising the C fragment of tetanus toxin under control of the cytomegalovirus (CMV) promoter. The cloning plasmids including pBBR122, pACYC184, pRSF1010/CAT, pBR322 and pAT153 were stably retained by BRD509 and induced a tetanus toxin-specific neutralizing antibody response following oral delivery [151].

Mucosal vaccines can be administered intranasally, intravaginally, and orally. The immunity acquired is not limited to the local mucosal site of administration, so intranasal administration can produce antibody at alternative mucosal sites as well as systemically. Combining DNA and mRNA vaccines with a mucosal route delivery may be even more ideal for any disease control programme [152].

FUTURE AS MARKER AND DIVA VACCINES

Marker vaccines include those attenuated vaccine candidate strains of pathogens which can easily be identified while circulating and isolated from vaccinated or unvaccinated populations by having easily identifiable phenotypic marker, such as heavy metal or selected antibiotic resistance markers and fluorescence generating genes. Apart from the rough strains used in poultry birds, most of the genetically engineered vaccines for control of *Salmonella* infection have at least one suitable marker. These types of vaccines induce protective responses easily be differentiated from those immune responses caused by natural infections. The OIE (World Animal Health Organization, WAHO) has recommended that a vaccine must have both, differentiating infected from vaccinated animals (DIVA) and marker(s) qualities before being released for wide spread veterinary use. It is much more pertinent in cases where prevalence of causative agent is high as for *Salmonella* infections. The success of such vaccines has come true in control of avian influenza in Italy. In planning *Salmonella* as vector for delivery of various antigens of parasitic, bacterial and viral origin will automatically take care of DIVA strategy in vaccines designed for delivery of multiple antigens. Steps towards development of DIVA vaccines essentially require an antigenic differentiation in parent and the mutant vaccine candidate, recently *S. Abortusequi* S-30 oral double mutant (*aroA*/*htrA*) vaccine candidate developed for control of salmonellosis in equids has been shown to possess the DIVA potential [79].

CONCLUSION

Extensive work on killed vaccines for successful control of salmonellosis caused by host adapted serovars like *S. Typhi* (human typhoid), *S. Gallinarum* (fowl typhoid) and *S. Abortusequi* (abortion in equines) revealed that they confer

only short lived immunity. Killed vaccines also failed to afford desired protection in genetically susceptible animals, which are better protected by use of suitable live vaccine [12, 153] but the opposite is also true [35], thus development of either killed or live vaccine is not the end point in field of *Salmonella* vaccinology. Research groups are currently developing live attenuated vaccine strains of *Salmonella* not only to control salmonellosis but to exploit their potential as mucosal multivalent vaccine candidates. The most common problems with development of live vaccines include 1) attenuation through a genetic lesion in the same gene which in different *Salmonella* serovars may have different attenuating effect [34] and 2) different attenuated strains even of same serovar having deletion of the same gene may not be having similar vaccine potential [60]. Besides, the same mutant found effective in one animal species may not have the same performance in others, for instance the same *aroA* mutant strain of *S. Typhimurium* on oral vaccination gave good results in human but failed to protect chicken, however when route of inoculation was changed to intramuscular (im) it was found useful indicating that route of inoculation might have great impact on outcome of vaccination results [154, 155]. Moreover protective response of live *Salmonella* vaccine can vary in the population due to many factors such as competition of the vaccine strain with resident flora in different host species leading to altogether different outcomes, variability of predilection sites for invasion or colonization of the same serovar in different animals and finally competition with resident *Salmonella* and trapping of vaccine by cross reacting sIgA. It has been observed that sIgAs against an antigenically related *Salmonella* serovar cross protects the niche from colonization by the vaccine strain which may adversely effect the outcome of vaccination. Thus, if *Salmonella* is to be used both as vaccine and as a vector to carry DNA or plasmid for development of multivalent vaccines there is an urgent need to develop specific strains for different animal populations. It is apparent that considerably more research is required to develop vaccines able to protect the target animal from a wide range of common *Salmonella* serovars and this is likely to be achieved in the near future by use of biogenetic engineering tools.

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