

Review article

Transgenic carrot plant-made edible vaccines against human infectious diseases

Nipatha Issaro¹, Dezhong Wang², Min Liu¹, Boonrat Tassaneetrithep³, Chintana Phawong⁴, Triwit Rattanarojpong⁵, Chao Jiang^{*1,2}

¹School of Pharmaceutical Sciences, Wenzhou Medical University, Wenzhou 325035, China.

²Biomedicine collaborative Innovation Center, Wenzhou University, Wenzhou 325035, China.

³Division of Instruments for Research Office for Research and Development, Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok 10700, Thailand.

⁴Division of Clinical Immunology, Department of Medical Technology, Faculty of Associated Sciences, Chiang Mai University, Chiang Mai 50200, Thailand.

⁵Faculty of Science, King Mongkut's University of Technology Thonburi, Bangkok10140, Thailand.

Key words: Carrot, adjuvant, antigen, edible vaccine, systemic and mucosal immune responses.

***Corresponding Author: Dr. Chao Jiang,** School of Pharmaceutical Science, Wenzhou Medical University, Wenzhou 325035, China.

Abstract

Infectious diseases are becoming a severe public health problem in every part of the world. In response to this, transgenic plants have turned into a new noticeable platform for the production of edible biopharmaceutical proteins, which will be evaluated for their efficiency as edible vaccines to protect against various infectious diseases in humans. Carrot is one plant species that has been used for producing biopharmaceutical proteins. Adjuvants to improve the immune response and bioencapsulation to provide a system for delivering antigens in a way that protects them from the low pH and enzyme digestion inside the gastrointestinal tract have also been developed. The use of transgenic carrot to express the target antigens has been a promising for the production of edible vaccines, because it consists of immunodominant epitopes. The edible vaccines developed so far using carrot could have a crucial role in protecting against various infectious diseases along with the potential to induce both systemic and mucosal immune responses in a mouse model. Herein, we summarize the progress of carrot-based expression systems that have been evaluated for edible vaccine development in the last five years.

Introduction

Various infectious diseases occur worldwide, many of which have been around for hundreds of years, recorded throughout history [1]. Vaccination is the most important to prevent infectious disease in human because of the morbidity and mortality rates have been increasing in many parts of the world. Edible vaccines have been used as an alternative source of protection against some infectious diseases, with benefits that include cost-effectiveness, safety, injection-free, easy to administer without trained personnel, no side effects, high stability, no requirements for special storage conditions, and ease of scaling up production. However, some limitation needs to be improved, including the dosage, vaccine proteins are denatured at the high temperature which could affect the immunogenicity level [2-5]. Most of the research efforts carried out so far have attempted to develop more effective and safer vaccines. The development of edible vaccines is based on the use of recombinant proteins (antigens), which are transgenically in the plant system. Plant-based edible vaccines induce protective immune responses after administration, stimulate innate immunity and memory responses to the target antigen, and use a capable delivery system [6-7].

Molecular farming and genetic engineering technologies have been focused on the development of an effective

vaccine that is able to retain appropriate antigenic and immunogenic properties [8-10], which have gained interest. One approach to enhance the immune response and efficient delivery of plant-made edible vaccine is adjuvant such as cholera toxin B subunit (CTB) [11], *Escherichiacoli* heat-labile enterotoxin B subunit (LTB) [12], Rabies virus N protein [13], and human deltaferon (dIFN) [14]. Moreover, the plant cell matrix of bioencapsulation is capable of mediating the delivery of a functional enzyme to the systemic compartment, its high frequency of booster immunization, more realistic immunization approach, ease of administration, multi-dose vaccinations, and the fact that it is very convenient to administer to children make plant-based edible vaccines very promising [15-18]. Of the plants that have, to date, had recombinant proteins successfully expressed in them, some have been used for promising edible vaccine production, including lettuce, potato, tomato, rice, spinach, and maize. They have advanced to phase I clinical trials [19-20], but will have to pass the Food and Drug Administration's (FDA) approval process before being available on the pharmaceutical market. The FDA's views in a genetically modified food which is a combined product was used to evaluate and control of plant-made edible vaccine under good reaping and safety practice regulations [21-22]. In 2009, the first carrot cell was developed a therapeutic protein is verified by FDA to treat Gaucher's

disease and the product was released to the market in 2012 [23-25]. Otherwise, the utilizations of transgenic carrot plant to produce edible vaccines are being developed.

Carrot (*Daucus carota* L.), which belong to the *Apiaceae* (Umbelliferae) family, is an important horticultural crop that is commonly consumed in its raw form [26]. Extensive studies have been reported on transgenic carrot plant system due to its high nutritional content, such as vitamin A, β -carotene, carotenoids, lutein, and fiber cellulose [27]. Interestingly, the carotenoids in transgenic carrot could increase lymphocytes, monocytes and immune system in animal models [28]. Currently, several edible products have been made in the transgenic carrot [6], that can induce both systematic and mucosal immune responses (IgA and IgG) in animal models [29]. One breakthrough of the transgenic carrot has been the ability to produce edible vaccines. This review focuses on the progress of transgenic carrot-based edible vaccine development.

Transformation of carrot

The direct and indirect methods are most prevalently used by plant transformations and that methods have been utilized for antigen transformation in the carrot system [26].

The direct-method does not require a vector and uses biolistics (particle bombardment) to transfer the foreign antigen was coated with tungsten or gold as the micro-carrier into the target plant including plant genome, protoplast, and chloroplast [26]. The indirect transformation method is based on the delivery of transgenes by the plant pathogen, *Agrobacterium tumefaciens*, which carries a tumor-inducing plasmid (Ti-plasmid) [30]. Almost all strategies used for gene transformation into the carrot genome have used *Agrobacterium tumefaciens*. This

involves DNA being inserted into a T-region of disarmed *Agrobacterium* Ti plasmid, achieved by co-culturing it with plant cells under genes encoding the plant hormones (auxins and cytokinins) [30-31]. The benefits of this method include, stability, simplicity, cost effectiveness, and the ability of a large fragment and multiple genes being introduced into the plant cell [30-32].

In order to obtain a high level of recombinant proteins were combined with signal sequence peptide, and the selectable marker gene under the control of the 35S promoter of the cauliflower mosaic virus (CaMV) that is promoter used in plants, before being expressed in the carrot [27]. The antigens were fused to signal peptides such as Ser-Glu-Lys-Asp-Glu-Leu (SEKDEL) [16, 29, 33] and His-Asp-Glu-Leu (HDEL) at the C-terminus [34]. They were expressed in the endoplasmic reticulum (ER) where they are highly useful in increasing protein stabilization (without the protein glycosylation process) and enhancing protein expression [33-35].

The transgenic carrot plant based edible vaccines have rarely combined with signal peptide, which could be performed protein accumulation which specific to targeting and some of them was successfully improved the yield accumulation (Table 1). The selectable marker genes used for carrot transformation were *nptII* gene and *bar* gene. They are classical marker genes that have been used to select the transformants plants for kanamycin resistance (neomycin phosphotransferase) and resistance to the herbicide Basta(phosphinothricinacetyl transferase), respectively [36]. Basta has been successfully used to select the transformed carrot cells in liquid medium and for the regeneration of adult transformed plants by Rojas-Anaya *et al* [13].

Table1. Parts of transgenic carrot used for different vaccines

Infectious Disease	Promoter	Protein Signal Peptide	Target of Expression System	Expression Level	References
<i>Hepatitis B virus</i>	CaMV35S	HDEL	Leaves	36 ng/g fresh weight	[34]
<i>Human Immunodeficiency Virus type 1 (HIV-1)</i>	CaMV35S	SEKDEL	Taproot	62 ng /g fresh weight	[16,29]
<i>Helicobacter pylori</i>	CaMV35S	n.d.	Root	25 μ g /g fresh weight	[37]
<i>Chlamydia trachomatis</i>	CaMV35S	n.d.	Cell suspension	3% TSP	[17]
<i>Cholera and ETEC diarrhea</i>	CaMV35S	n.d.	Callus	3 μ g of protein /g of tap root	[5,38]
<i>Mycobacterium tuberculosis</i>	CaMV35S	n.d.	Taproots	28.140 μ g of TSP	[14]
<i>Rabies virus</i>	CaMV35S	n.d.	Taproots	0.2 to 1.4% TSP	[13]
<i>Porcine cysticercosis</i>	CaMV35S	n.d.	Callus	14 μ g/g dry weight	[39]

TSP = Total soluble protein, n.d. = not determined

Mucosal immune response and oral tolerance

The gut-associated lymphoid tissue (GALT) is an important organ of the immune system, and it is the preliminary organ to be exposed to antigens [40]. GALT has a vital role in creating a tolerogenic environment, which tolerance induction occurs upon suppression of the immune system [41]. Tolerance induction is dependent on the dose of antigen (high dose) and the number of regulatory T-cells (Tregs) (low dose) [40]. While the Peyer's patches (PP) are the inductive sites in the gut immune system [42], which have been found to be the site of oral tolerance induction. They are also the largest lymph nodes in the body, and are essential for mucosal tolerance. Peyer's patches consists of macroscopic lymphoid tissue, assembled in the submucosa along the length of the small intestine, along with mesenteric lymph nodes (MLNs) [40]. Additionally, dendritic cells (DCs) in the MLNs that recognize antigens are important components of the intestinal immune system involved in the induction of oral tolerance [43].

Adjuvants and bioencapsulation

In order to produce a successful edible vaccine that can be effectively administrated, the antigens need to be fused to an adjuvant under T lymphocyte regulation; this has a crucial role in regulation of the immune response by T helper lymphocytes, which will respond to antigens presented by antigen presenting cells (APC). The antigen is taken up by Microfold cells (M-cells) and an immune response against the target infectious disease is initiated. Interleukin-12 (IL-12) enhanced Th1-immune responses and promotes the secretion of immunoglobulin G (IgG) into the blood and immunoglobulin A (IgA) from B lymphocytes within mucosal lymphoid tissue [44].

Adjuvants enhance the immune response to a specific antigen and induce immunological memory of antigen vaccines [45]. They also have the potential to stimulate both systemic and mucosal immune responses [17]. The carrot expression system has been used to study various adjuvants such as cholera toxin B subunit (CTB) [11], *Escherichiacoli* heat-labile enterotoxin B subunit (LTB) [12], rabies virus N protein [13] and human deltaferon (dIFN) [14]. CTB is an immunogenic carrier, which act as an adjuvant to antigen vaccines and stimulates antibody production. In addition, it enhances the immunogenicity of the antigen in human and animals [46]. LTB is a non-toxic potent immunogen [38], that has been used as vaccine adjuvant to induce a strong immune response and has been approved for use in clinic application in humans [47]. Rabies virus N protein is a major antigen capable of inducing virus-specific helper T cells and antibodies [48]. It can be co-expressed with antigen of interest for particular vaccines and has been shown to enhance the body's immune response to vaccine [49]. The *dIFN* gene is encoded deltaferon, a recombinant analogue of displays

the immunomodulatory properties of an adjuvant [50]. It has been used to increase the mucosal immunogenicity of antigens and to induce both humoral and cell-mediated immune responses in mouse models [14].

Bioencapsulation of the immunogen within the plant cell matrix [47], such as pectin and cellulosic cell walls, has been useful in maintaining vaccine stability, and protecting against enzyme digestion and low pH in the stomach. Bioencapsulation has been shown to induce high immunogenicity, and it allows the antigen protein to be released into the gut lumen and other mucosal tissues [5,13,14,37,51-55]. The plant cell wall is similar to liposomes and microcapsules, so in the development of edible vaccines, it could offer oral priming [30].

The development of carrot plant-made edible vaccines

Carrot can be manipulated to produce novel edible vaccines, and new sources of biopharmaceuticals. Research efforts have attempted to deal with the problem with emerging infectious diseases considering the need for low cost vaccines, high production, and the need for availability in developing countries. Several carrot plants-based vaccines that have been developed in the last five years are described below.

Helicobacter pylori vaccine

Helicobacter pylori is a species of bacteria that colonizes the stomach, and causing chronic gastritis, peptic ulcers. It has been linked to gastric cancer and mucosal-associated lymphoid tissue lymphoma [56]. Ure B, a *H. pylori* -protective antigen, could prevent bacterial infection. The Ure B recombinant protein was combined with cholera toxin B subunit (CTB) and then transformed into the carrot plant genome using the CaMV35 S promoter, *Agrobacterium tumefaciens* strain LBA4404. Finally, the transformed plant cells were selected using kanamycin. The recombinant protein was successfully produced and accumulated in the root with a yield of up to 25 µg/g of fresh weight. The extracted Ure B protein was fed in mouse models at a dose 5 g transgenic carrot roots and was shown to the effectively induce mucosal immune response and a highly specific antibody titer [37].

Chlamydia trachomatis vaccine

Chlamydia trachomatis is a gram negative bacterium belonging to the genus *Chlamydia*. It is an infectious disease, transmitted via sexual contact. The infection-occurs in men and women and has been linked to pelvic inflammatory disease, infertility, ectopic pregnancy in women, and epididymitis and orchitis in men [57]. *Chlamydia trachomatis* antigenic-epitopes for helper and cytotoxic T lymphocytes, contain a major outer membrane protein (MOMP), which consists of VS2 and

VS4 loops that could decrease hydrophobicity, and the viable domain regions (VDS) of the MOMP. The expression level of chimeric MOMP was shown to be -up to 3% of the total soluble protein in carrot cells when driven by the CaMV 35S promoter via *Agrobacterium tumefaciens*. The transformed carrot cells were selected on herbicide Basta. To date, however, no *Chlamydia trachomatis* protein has been used for oral immunization in animal models [17].

Cholera and ETEC diarrhea vaccine

Diarrheal diseases caused by *Vibrio cholerae* and enterotoxigenic *Escherichia coli* (ETEC) are infectious diseases, caused by contaminated drinking water in tropical climates, and have become global health problems. The immunodominant epitopes of ETEC was chosen as the vaccine target antigen and the adjuvant chosen was *Escherichiacoli* heat-labile enterotoxin B subunit (LTB). The LTB gene was transformed into carrot cells using the *Agrobacterium tumefaciens* strain LBA4404 and selected on kanamycin. An immune response in mice was successfully elicited using 10 µg of carrot-derived LTB. This dose also elicited a significant serum anti-LTB antibody level and showed specific IgG antibody responses in the intestine. Even though IgA antibody levels were detected in the large intestine of mice, levels of transgenic carrot expressed LTB protein was lower than that of pure recombinant LTB administration. However, the level obtained was high enough to protect mice against the cholera toxin, and a Th2 response was induced by IgG and IgA via oral administration [5].

***Mycobacterium tuberculosis* vaccine**

Tuberculosis is a chronic infectious disease caused by the bacterium, *Mycobacterium tuberculosis* (*M. tuberculosis*), which is one of the main global health problems in humans. Several protein subunits of *M. tuberculosis* vaccines have been considered, including those that are secreted from the bacterial cell wall. Tuberculosis vaccine expression in plant cells consists of antigen to activate CD4⁺ helper and CD8⁺ cytotoxic T lymphocytes and induce protective immunity. The CFP10-ESAT6 and human deltaferon (dIFN) fusion genes, along with the CaMV 35S promoter were transferred into the carrot genome using *Agrobacterium tumefaciens*. Mice were immunized by oral administration at a dose 5 gtransgenic carrot. The antigens could induce both cell-mediated and humoral immunity and could also reduce the cytotoxic effect in a mouse model [14,52].

Human immunodeficiency virus type 1 (HIV-1) vaccine

Human immunodeficiency virus type 1 (HIV-1) is a serious viral disease, that causes a long-life infection with no cure to date. There is also no vaccine available, so

there has been an extensive research effort to produce a subunit HIV-1 vaccine. One such vaccine that retained the antigen epitope was considered for its safety aspect. The HIV-1 subtype C p24 protein was used to produce an oral vaccine in Carrot and Cress (*Arabidopsis thaliana*). The SEKDL amino acid sequence was combined with the p24 protein and used to produce the antigenic protein in the ER under the control of the CaMV 35S promoter. Positive transformants were selected on herbicide Basta. The product of recombinant the p24_SEKDEL protein was produced at a yield of 62 ng p24/g fresh weight in carrot cells, which was lower than expression in cress (139 ng p24 protein/g fresh weight). The protein produced was highly stable during cultivation and accumulated in the endoplasmic reticulum (ER) [29]. Mice that were immunized by oral administration at a dose 720 ng of p24 antigen (40 g of fresh weight transgenic carrot), followed by a booster intramuscular injection, were found to have antigen specific IgG antibodies that induced humoral immune response and induced neutralizing antibodies in patients [16,29].

Rabies virus vaccine

Rabies virus is a deadly infectious viral disease that is a global public health problem. There is no cure for rabies after symptoms have started, meaning it have a very highly mortality rate, with an estimated 50,000 human deaths in annually worldwide, 90% of which occur in developing countries [58]. The rabies virus glycoprotein (rabies G protein) antigen was designed from using the cytoplasm domain, transmembrane, and actodomain, which could protect against viral infection and induce neutralizing antibodies. Rabies G protein was expressed in carrot cell under the control of the CaMV 35S promoter using the microprojectile bombardment method. The transformed cells were then selected for using herbicide Basta. Mice were immunized with 2 g of raw carrot plus 50 µg of rabies virus N protein by the oral route and were shown to have developed protective rabies antibodies. Rabies virus N protein was used as the adjuvant to prevent enzyme digestion in the gastrointestinal tract and enhance immunogenicity [13].

Porcine cysticercosis vaccine

Porcine cysticercosis is caused by the larvae of the *Taenia solium* (*T. solium*) in pigs. *T. solium* is transmitted via the oral-fecal route to humans if infected under-cooked pork is consumed. It can cause neurocysticercosis in the human central nervous system (CNS) and is associated with chronic headache, blindness, seizures, hydrocephalus, meningitis, and dementia [59]. The recombinant GST-HP6/TSOL18 gene of the anti- *T. solium* cysticercosis antigen was expressed in carrot cells under the control CaMV 35S promoter and using *Agrobacterium tumefaciens* strain GV3101. The electroporation method was used of the transformation,

and positive cells were selected using kanamycin. Protein expression levels reached approximately 14 µg/g dry-weight of carrot calli. Mice immunized with 700 ng of recombinant HP6/TSOL18 antigen showed the potential to be protected against the cysticercosis infection. The mice showed a significant reduction in parasite burden, increased high levels of IgG serum antibodies, and increased mucosal IgA antibodies in the intestines [39].

Conclusion

Although there is no transgenic carrot plant-made edible vaccine, which has been approved in clinical trials. But the advances in the production of edible vaccine in the carrot system could be helped to protect against infectious diseases in animal models, and eventually humans. However, there are some limitations to using the carrot system has a low protein expression. Despite this, edible vaccine development and production is still urgently needed. The mechanism of plant bioencapsulation developed, using the plant cell wall, has been shown to be effective, with both mucosal and systemic immune responses being elicited. At present we know that the carrot system is a possibility for the alternative production of edible vaccines; however, more studies are needed to focus on the challenges of carrot-made edible vaccines for infectious diseases, such as low production costs and ease of delivery.

Conflicts of Interest

The authors declare that there is no conflict of interests regarding the publication of this paper.

Acknowledgment

This work was supported by a 2014 Chinese Government Scholarship (CSC) (CSC number: 2014DFH511).

References

- Brachman PS: Infectious diseases—past, present, and future. *International Journal of Epidemiology* 2003; 32:684-686.
- Kong Q, Richter L, Yang YF, Arntzen CJ, Mason HS and Thanavala Y: Oral immunization with hepatitis B surface antigen expressed in transgenic plants. *Proceedings of the National Academy of Sciences* 2001; 20:11539.
- Marquet-Blouin E, Bouche FB, Steinmetz A and Muller CP: Neutralizing immunogenicity of transgenic carrot (*Daucus carota* L.)-derived measles virus hemagglutinin. *Plant molecular biology* 2003; 51:459-469.
- Aliahmadi A, Rahmani N and Abdollahi M: Plant-derived human vaccines; an overview. *International Journal of Pharmacology* 2006; 2: 268-279.
- Rosales-Mendoza S, Soria-Guerra RE, Lopez-Revilla R, Moreno-Fierros L and Alpuche-Solis AG: Ingestion of transgenic carrots expressing the *Escherichia coli* heat-labile enterotoxin B subunit protects mice against cholera toxin challenge. *Plant Cell Reports* 2008; 27:79-84.
- Daniell H, Singh ND, Mason H and Streatfield SJ: Plant-made vaccine antigens and biopharmaceuticals. *Trends Plant Science* 2009; 14: 669-679.
- Ulmer JB, Valley U, and Rappuoli R: Vaccine manufacturing: challenges and solutions. *Nature Biotechnology* 2006; 24:1377-1383.
- Saejung W, Fujiyama K, Takasaki T, Ito M, Hori K, Malasit P, Watanabe Y, Kurane I and Seki T: Production of dengue 2 envelope domain III in plant using TMV-based vector system. *Vaccine* 2007; 25: 6646-6654.
- Rosales-Mendoza S and Tello-Olea MA: Carrot Cells: A Pioneering Platform for Biopharmaceuticals Production. *Molecular Biotechnology* 2015; 57:219-232.
- Thomas S and Luxon BA: Vaccines based on structure-based design provide protection against infectious diseases. *Expert Review of Vaccines* 2013; 12:1301-1311.
- Arakawa T, Yu J and Langridge WH: Food plant-delivered cholera toxin B subunit for vaccination and immunotolerization. *Advances in experimental medicine and biology* 1999; 464:161-178.
- Rigano MM, Alvarez ML, Pinkhasov J, Jin Y, Sala F, Arntzen CJ and Walmsley AM: Production of a fusion protein consisting of the enterotoxigenic *Escherichia coli* heat-labile toxin B subunit and a tuberculosis antigen in *Arabidopsis thaliana*. *Plant Cell Reports* 2004; 22:502-508.
- Rojas-Anaya E, Loza-Rubio E, Olivera-Flores MT and Gomez-Lim M: Expression of rabies virus G protein in carrots (*Daucus carota*). *Transgenic Research* 2009; 18:911-919.
- Permyakova NV, Zagorskaya AA, Belavin PA, Uvarova EA, Nosareva OV, Nesterov AE, Novikovskaya AA, Zav'yalov EL, Moshkin MP and Deineko EV: Transgenic carrot expressing fusion protein comprising M. tuberculosis antigens induces immune response in mice. *BioMed Research International* 2015; 2015:417565.
- Rosales-Mendoza S and Salazar-Gonzalez JA: Immunological aspects of using plant cells as delivery vehicles for oral vaccines. *Expert Review of Vaccines* 2014; 13:737-749.
- Lindh I, Brave A, Hallengard D, Hadad R, Kalbina I, Strid A and Andersson S: Oral delivery of plant-derived HIV-1 p24 antigen in low doses shows a superior priming effect in mice compared to high doses. *Vaccine* 2014; 32:2288-2293.
- Kalbina I, Wallin A, Lindh I, Engstrom P, Andersson S and Strid K: A novel chimeric MOMP antigen expressed in *Escherichia coli*, *Arabidopsis thaliana*, and *Daucus carota* as a potential *Chlamydia trachomatis* vaccine candidate. *Protein Expression and Purification* 2011; 80:194-202.
- Esmael H and Hirpa E: Review on Edible Vaccine. *Academic Journal of Nutrition* 2015; 1:40.
- Su J, Zhu L, Sherman A, Wang X, Lin S, Kamesh A, Norikane JH, Streatfield SJ, Herzog RW and Daniell H: Low cost industrial production of coagulation factor IX bioencapsulated in lettuce cells for oral tolerance induction in hemophilia B. *Biomaterials* 2015; 70:84-93.
- Takeyama N, Kiyono H and Yuki Y: Plant-based vaccines for animals and humans: recent advances in technology and clinical trials. *Therapeutic Advances in Vaccines* 2015; 3:139-154.
- Lal P, Ramachandran VG, Goyal R and Sharma R: Edible vaccines: Current status and future. *Indian journal of medical microbiology* 2007; 25:93-102.
- Concha C, Canas R, Macuer J, Torres MJ, Herrada AA, Jamett F and Ibanez C: Disease prevention: An opportunity to expand edible plant-based vaccines? *Vaccines* 2017; 5.
- Walsh G: Biopharmaceutical benchmarks 2014. *Nature biotechnology* 2014; 32:992-1000.
- Tekoah Y, Shulman A, Kizhner T, Ruderfer I, Fux L, Nataf Y, Bartfeld D, Ariel T, Gingis-Velitski S, Hanania U and Shaaltiel Y: Large-scale production of pharmaceutical proteins in plant cell culture—the protalix experience. *Plant biotechnology journal* 2015; 13:1199-1208.
- Rosales-Mendoza S, Salazar-González JA, Decker EL and Reski R: Implications of plant glycans in the development of innovative vaccines. *Expert review of vaccines* 2016; 15:915-925.
- Baranski R: Genetic Transformation of Carrot (*Daucus carota*) and Other Apiaceae species. *Transgenic Plant Journal* ©2008 Global Science Books; 2008.
- Hardegger M and Sturm A: Transformation and regeneration of carrot (*Daucus carota* L.). *Molecular Breeding* 1998; 4:119-127.
- Ekam VS, Udosen EO and Chigbu AE: Comparative effect of carotenoid complex from Golden Neo-Life Dynamite (GNLD) and carrot extracted carotenoids on immune parameters in albino Wistar rats. *Nigerian journal of physiological sciences: official publication of the Physiological Society of Nigeria* 2006; 21:1-4.
- Lindh I, Wallin A, Kalbina I, Savenstrand H, Engstrom P, Andersson S and Strid A: Production of the p24 capsid protein from HIV-1 subtype C in *Arabidopsis thaliana* and *Daucus carota* using an endoplasmic reticulum-directing SEKDEL sequence in protein expression constructs. *Protein Expression and Purification* 2009; 66:46-51.
- Pirkoohi MH and Zibae S: Plant-based recombinant vaccines. *International Journal of Agriculture and crop Sciences* 2013; 6:27-30.

31. Imani J, Berting A, Nitsche S, Schaefer S, Gerlich W and Neumann K-H: The integration of a major hepatitis B virus gene into cell-cycle synchronized carrot cell suspension cultures and its expression in regenerated carrot plants. *Plant cell, tissue and organ culture* 2002; 71:157-164.
32. Laere E, Ling APK, Wong YP, KoH RY, Lila MAM and Hussein S: Plant Based Vaccines: Production and Challenges. *Journal of Botany* 2016; 2016.
33. Xu J, Ge X and Dolan MC: Towards high-yield production of pharmaceutical proteins with plant cell suspension cultures. *Biotechnology Advances* 2011; 29:278-299.
34. Deineko EV, Zagorskaya AA, Pozdnyakov SG, Filipenko EA, Permyakova NV, Sidorchuk YV, Uvarova EA, Pozdnyakova LD, Shumny VK, Vlasov VV, Hammond RV and Shchelkunov SN: Comparative analysis of HBV M-antigen production in leaves of individual transgenic carrot plants. *Doklady Biochemistry and Biophysics* 2009; 425:76-79.
35. Guan Z-j, Guo B, Huo Y-l, Guan Z-p, Dai J-k and Wei Y-h: Recent advances and safety issues of transgenic plant-derived vaccines. *Applied microbiology and biotechnology* 2013; 97:2817-2840.
36. Miki B and Mchugh S: Selectable marker genes in transgenic plants: applications, alternatives and biosafety. *Journal of Biotechnology* 2004; 107:193-232.
37. Zhang H, Liu M, Li Y, Zhao Y, He H, Yang G and Zheng C: Oral immunogenicity and protective efficacy in mice of a carrot-derived vaccine candidate expressing UreB subunit against *Helicobacter pylori*. *Protein Expression and Purification* 2010; 69:127-131.
38. Rosales-Mendoza S, Soria-Guerra RE, de Jesus Olivera-Flores MT, Lopez-Revilla R, Arguello-Astorga GR, Jimenez-Bremont JF, Garcia-de la Cruz RF, Loyola-Rodriguez JP and Alpuche-Solis AG: Expression of *Escherichia coli* heat-labile enterotoxin b subunit (LTB) in carrot (*Daucus carota* L.). *Plant Cell Reports* 2007; 26:969-976.
39. Monreal-Escalante E, Govea-Alonso DO, Hernandez M, Cervantes J, Salazar-Gonzalez JA, Romero-Maldonado A, Rosas G, Garate T, Fragoso G, Sciutto E and Rosales-Mendoza S: Towards the development of an oral vaccine against porcine cysticercosis: expression of the protective HP6/TSOL18 antigen in transgenic carrots cells. *Planta* 2016; 243:675-685.
40. Weiner HL, Cunha APd, Quintana F and Wu H: Oral Tolerance. *Immunological reviews* 2005; 206:232-259.
41. Kwon KC and Daniell H: Low-cost oral delivery of protein drugs bioencapsulated in plant cells. *Plant Biotechnology Journal* 2015; 13:1017-1022.
42. Mowat AM: Anatomical basis of tolerance and immunity to intestinal antigens. *Nature Reviews Immunology* 2003; 3:331-341.
43. Worbs T, Bode U, Yan S, Hoffmann MW, Hintzen G, Bernhardt G, Förster R and Pabst O: Oral tolerance originates in the intestinal immune system and relies on antigen carriage by dendritic cells. *Journal of Experimental Medicine* 2006; 203:519-527.
44. Freytag LC and Clements JD: Mucosal adjuvants. *Vaccine* 2005; 23:1804-1813.
45. Zeng L: Mucosal adjuvants: Opportunities and challenges. *Human Vaccines & Immunotherapeutics* 2016; 12:2456-2458.
46. Mishra N, Gupta PN, Khatri K and Vyas SP: Edible vaccines: A new approach to oral immunization. *Indian Journal of Biotechnology* 2008; 7:283-294.
47. Rigano MM, Guzman GD, Walmsley AM, Frusciant L and Baron A: Production of Pharmaceutical protein in solanaceae food crops. *International Journal of Molecular Science* 2013; 14:2753-2773.
48. Fu ZF, Dietzschold B, Schumacher CL, Wunner WH, Ertl HC and Koprowski H: Rabies virus nucleoprotein expressed in and purified from insect cells is efficacious as a vaccine. *Proceedings of the National Academy of Sciences of the United States of America* 1991; 88:2001-2005.
49. Li J, Fei L, Mou Z, Wei J, Tang Y, He H, Wang L and Wu Y: Immunogenicity of a plant-derived edible rotavirus subunit vaccine transformed over fifty generations. *Virology* 2006; 356:171.
50. Tat'kov S, Smirnova O, Tsivkovskii R, Kochneva G, Kuz'micheva G, Khristoforov V, Kosarev I, Chernykh E, Khonina N and Lebedev L: Mutant human gamma-interferon with a truncated C-terminus and its properties. *Doklady biochemistry: proceedings of the Academy of Sciences of the USSR, Biochemistry section* 2000; 372:112.
51. Aggani SL: Edible Vaccines: A new Approach for Immunization in Plant Biotechnology. *Scholars Academic Journal of Pharmacy* 2013; 2: 227-232.
52. Uvarova EA, Belavin PA, Permyakova NV, Zagorskaya AA, Nosareva OV, Kakimzhanova AA and Deineko EV: Oral Immunogenicity of plant-made *Mycobacterium tuberculosis* ESAT6 and CFP10. *BioMed Research International* 2013; 2013.
53. Chan HT and Daniell H: Plant-made oral vaccines against human infectious diseases-Are we there yet?. *Plant Biotechnology Journal* 2015; 13:1056-1070.
54. Carter Iii JE and Langridge WHR: Plant-Based Vaccines for Protection Against Infectious and Autoimmune Diseases. *Critical Reviews in Plant Sciences* 2002; 21:93-109.
55. Streatfield SJ and Howard JA: Plant production systems for vaccines. *Expert Review of Vaccines* 2003; 2:763-775.
56. Jaskiewicz K, Louw JA and Marks IN: Local cellular and immune response by antral mucosa in patients undergoing treatment for eradication of *Helicobacter pylori*. *Digestive Diseases and Sciences* 1993; 38:937-943.
57. Mishori R, McClaskey EL and WinklerPrins VJ: Chlamydia trachomatis infections: screening, diagnosis, and management. *American Family Physician* 2012; 86:1127-1132.
58. Hendekli CM: Current therapies in rabies. *Archives of Virology* 2005; 150:1047-1057.
59. Evans CA, Gonzalez AE, Gilman RH, Verastegui M, Garcia HH, Chavera A, Pilcher JB and Tsang VC: Immunotherapy for porcine cysticercosis: implications for prevention of human disease. *Cysticercosis Working Group in Peru. The American Journal of Tropical Medicine and Hygiene* 1997; 56:33-37.