



## **Inhalation with ACE-2-Expressing-Lung-Exosomes for Prophylactic Protection and Treating SARS-CoV-2 Infection and Disease**

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SARS-CoV-2 infectivity depends on binding its S protein with the entry-receptor “hACE-2” a promising strategic treatment, therefore, is this interaction inhibition [1-3]. Some SARS-CoV-2 variants, such as B.1.1.7 (Alpha), B.1.617.2 (Delta), and B.1.1.529 (Omicron) variants were highly resistant to mRNA-1273 vaccine-induced humoral immunity or BNT162b2 [4-6]. A recent study demonstrated that in a female mouse model, inhalation of ACE-2-expressing-human-lung-spheroid-cells (LSC)-derived exosomes (LSC-Exo) (Figure 1) could protect the host throughout the whole lung by biodistribution and deposition against COVID-19 (SARS-CoV-2) infection by SARS-CoV-2 binding, blocking the interaction of host cells with SARS-CoV-2, and virus neutralization both in vitro and in vivo [7]. This study also revealed decrease of viral loads and protection of SARS-CoV-2-induced disease [7]. Three different types of inhalation devices are commonly used; jet, ultrasonic, and vibrating mesh (all are nebulizer) (Figure 2) [8]. In non-human primates and rats studies, when nebulized with eFlow, human immunoglobulin preparations were deposited into the airways as well as treated-lung alveoli [9]. VR942, an anti-interleukin (IL)-13 mAb is a first-in-class for dry-powder inhalers (DPIs) [10].

In conclusion, ACE-2-expressing-human-lung-spheroid-cells-derived exosomes could be a promising-broad-spectrum bioprotectant against SARS-CoV-2 variants and other emerging virus variants. By using common nebulizer inhalation, it can be administrated other therapeutic agents for treating the patients' lung and respiratory system.

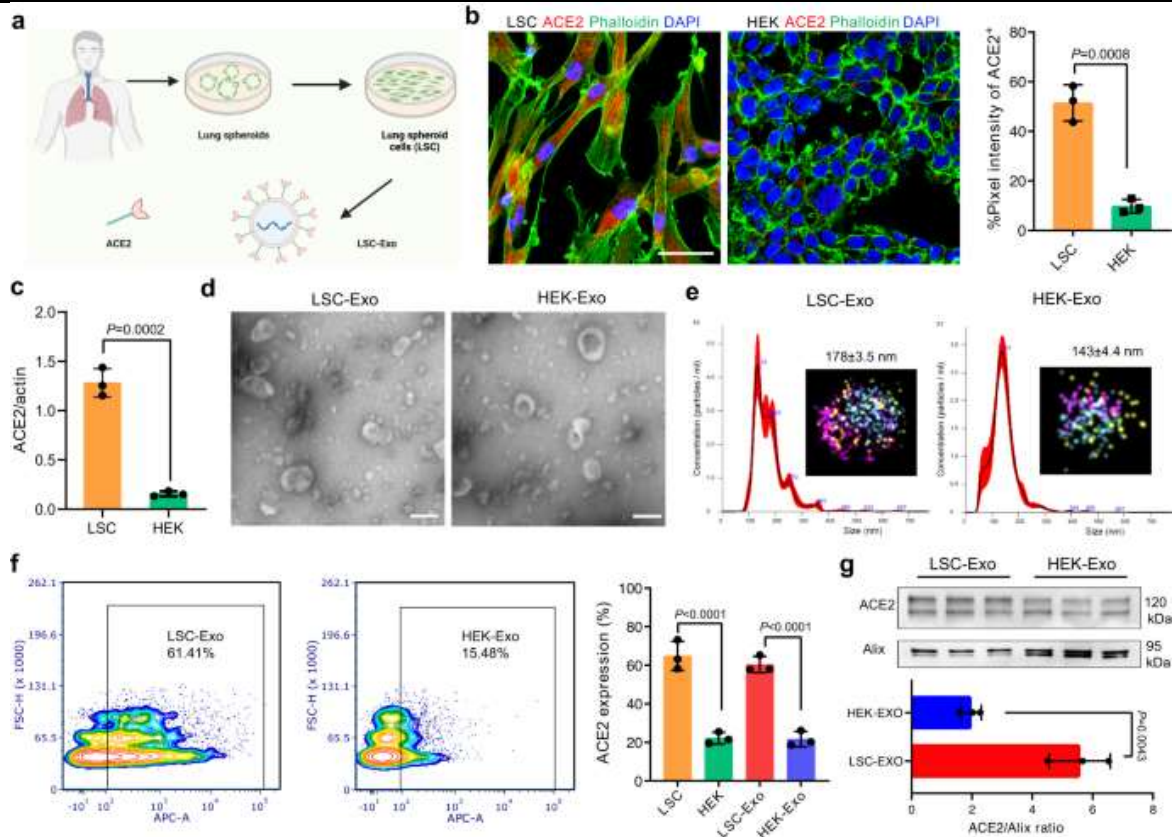


Figure 1 : A. Demonstrating extraction scheme of LSC and LSC-Exo from healthy donors, created with Biorender.com. B. Demonstrating immunofluorescence staining and quantification analysis of ACE-2 on LSC and HEK. Scale bar: 50  $\mu$ m. n = 3. C. Demonstrating Western blot quantification of ACE-2 expression in LSC and HEK, which derived from the same experiments and processed in parallel. n = 3. D. Demonstrating representative TEM images of LSC-Exo and HEK-Exo from 3 independent experiments. Scale bar: 100  $\mu$ m. E. Demonstrating measurements of size distribution of LSC-Exo and HEK-Exo via nanoparticle tracking analysis. Inset: 3-color dSTORM image of CD63-Alexa Fluor®-488, PE-CD9, APC-CD81 of LSC-Exo or HEK-Exo. F. Demonstrating quantification of ACE-2 expression on LSC-Exo and HEK-Exo by flow cytometry. n = 3 [7].

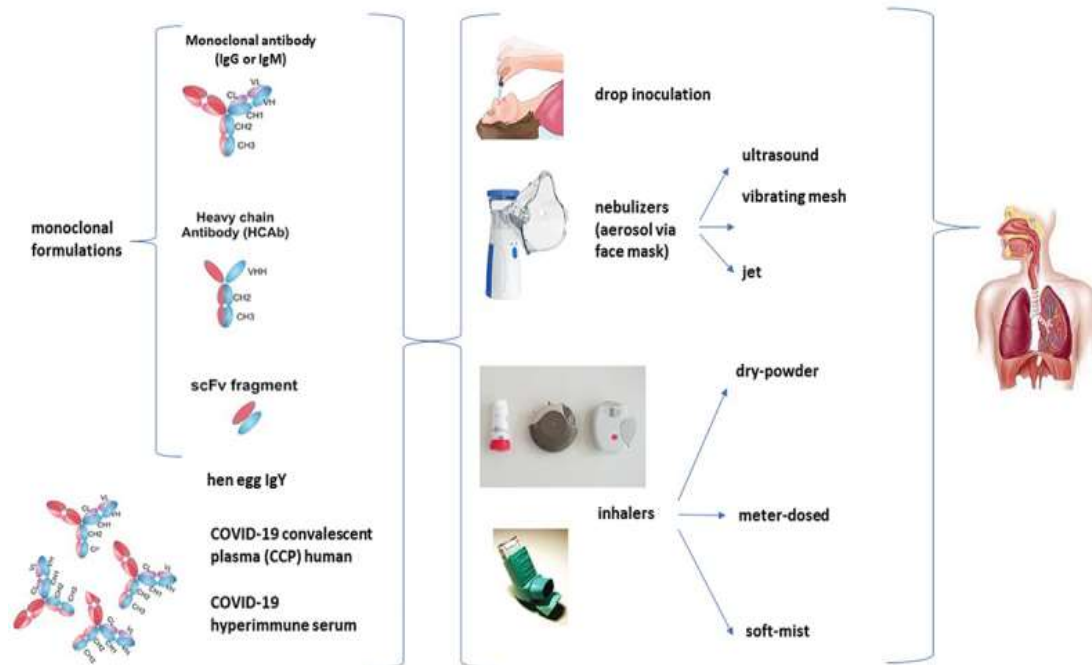


Figure 2 : Demonstrating potential therapeutic approaches for respiratory delivery of passive immunotherapeutics against SARS-CoV-2 (COVID-19) [8].

## References

1. Lan J, et al. Structure of the SARS-CoV-2 spike receptor-binding domain bound to the ACE-2 receptor. *Nature* 2020; 581 : 215-220.
2. Huang X, et al. Nanotechnology-based strategies against SARS-CoV-2 variants. *Nat Nanotechnol* 2022; 17 : 1027-1037.
3. Zhang L, et al. An ACE-2 decoy can be administered by inhalation and potently targets omicron variants of SARS-CoV-2. *EMBO Mol Med* 2022; 14 : e16109.
4. Garcia-Beltran WF, et al. Multiple SARS-CoV-2 variants escape neutralization by vaccine-induced humoral immunity. *Cell* 2021; 184 : 2372-2383.e2379.
5. Pouwels KB, et al. Effect of Delta variant on viral burden and vaccine effectiveness against new SARS-CoV-2 infections in the UK. *Nat Med* 2021; 27 : 2127-2135.
6. Hui KPY, et al. SARS-CoV-2 Omicron variant replication in human bronchus and lung ex vivo. *Nature* 2022; 603 : 715-720.

7. Wang Z, Hu S, Popowski KD, Liu S, Zhu D, Mei X, et al. Inhalation of ACE-2-expressing lung exosomes provides prophylactic protection against SARS-CoV-2. *Nature Communications* 2024; 15 : 2236. DOI : <https://doi.org/10.1038/s41467-024-45628-x>
8. Moroni-Zengraf P, Usmani OS, Halpin DMG. Inhalation devices. *Can Resp J* 2018; 2018 : 5642074. DOI : [10.1155/2018/5642074](https://doi.org/10.1155/2018/5642074)
9. Vonarburg C, Loetscher M, Spycher MO, Kropf A, Illi M, Salmon S, et al. Topical application of nebulized human IgG, IgA, and IgAM in the lungs of rats and non-human primates. *Respir Res* 2019; 20 (1) : 99. DOI : [10.1186/s12931-019-1057-3](https://doi.org/10.1186/s12931-019-1057-3)
10. Burgess G, Boyce M, Jones M, Larsson L, Main MJ, Morgan F, et al. Randomized study of the safety and pharmacodynamics of inhaled interleukin-13 monoclonal antibody fragment VR942. *EBioMedicine* 2018; 35 : 67-75. DOI : [10.1016/j.ebiom.2018.07.035](https://doi.org/10.1016/j.ebiom.2018.07.035)

