

Innovations in Inorganic and Materials Chemistry

# Systemic Toxicity of Aluminium Adjuvants

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http://www.keele.ac.uk/aluminium/



https://www.hippocraticpost.com/?s=Exley



There are no <u>clinically-approved</u> (aluminium) adjuvants!

There are only clinically-approved vaccines.

The safety of adjuvants is established alongside the safety of vaccines.

So, why are aluminium adjuvants used as placebos in vaccine safety trials?!

#### For example, in demonstrating the 'safety' of HPV vaccines



#### Quadrivalent Vaccine against Human Papillomavirus to Prevent High-Grade Cervical Lesions

The FUTURE II Study Group\*



# So, what do we know about aluminium adjuvants that are used in clinically-approved vaccines?



https://www.frontiersin.org/articles/10.3389/fchem.2016.00048/full







So, how do aluminium adjuvants work?

How might understanding this also begin to explain the known adverse events associated with their use in vaccines?



Exley et al., (2010) The Immunobiology of aluminium adjuvants; how do they really work? Trends in Immunology, 31,103-109



# The Critical Environment of the Injection Site

**A**. Dilution of the vaccine preparation into the muscle interstitial fluid (MIF) results in an array of potential agonists of the immune cascade including; (1)  $Al^{3+}_{(aq)}$ ; (2) free antigen (AG); (3) particulate adjuvant (ADJ); (4) ADJ with associated AG; (5) AG-Al complex; (6) MIF ligand-Al complex; (7) ADJ with associated MIF ligand; (8) MIF ligand-AG complex; (9) particulate iron (as contaminant of adjuvant) either free or with adsorbed Al/AG and resultant reactive oxygen species (ROS); (10) ADJ with associated MIF ligand-AG complex; (11) ADJ with associated MIF ligand-Al complex. MIF ligands might include biomolecules such as; ATP, albumin, transferrin, citrate, fibrinogen.

### What Happens to the Aluminium Adjuvant?



#### Vaccine preparations (adjuvants in 0.9% NaCl)



interquartile range of the data while blue dashed lines indicate the maxima and minima. Orange crosses indicate Z-average cumulant size values (nm) while light blue crosses represent the median peak size value (nm). Error bars represent the  $\pm$ SE of the measurement where n = 5.



Fig 2: Recovery of Al (%) following selective filtration of Alhydrogel, Adju-Phos & Imject alum in 0.9% NaCl post initial formulation (0hrs). Error bars represent the %RSD of the measurement where n = 5.



Fig 3: TEM image of Alhydrogel in 0.9% NaCl (0hrs). Mag. 10,000X, scale bar 2µm.



Fig 4: TEM image of Adju-Phos in 0.9% NaCl (0hrs). Mag. 30,000X, scale bar 1µm.



where n = 5.





Fig 7: Size distributions of Alhydrogel in R10 medium following 0, 1 & 24hrs incubation (37°C). Box plots are representative of the interquartile range of the data while blue dashed lines indicate the maxima and minima. Orange crosses indicate Z-average cumulant size values (nm) while light blue crosses represent the median peak size value (nm). Error bars represent the  $\pm$ SE of the measurement where n = 5.



Fig 8: Recovery of Al (%) following selective filtration of Alhydrogel in R10 medium following 0, 1 & 24hrs incubation (37°C). Error bars represent the %RSD of the measurement where n = 5.



Fig 9: TEM image of Alhydrogel in R10 medium (0hrs). Mag. 30,000X, scale bar 1µm. Warsaw, 2019







Fig 11: Size distributions of Adju-Phos in R10 medium following 0, 1 & 24hrs incubation (37°C). Box plots are representative of the interquartile range of the data while blue dashed lines indicate the maxima and minima. Orange crosses indicate Z-average cumulant size values (nm) while light blue crosses represent the median peak size value (nm). Error bars represent the  $\pm$ SE of the measurement where n = 5.



Fig 12: Recovery of Al (%) following selective filtration of Adju-Phos in R10 medium following 0, 1 & 24hrs incubation (37°C). Error bars represent the %RSD of the measurement where n = 5.



Fig 13: TEM image of Adju-Phos in R10 medium (0hrs). Mag. 30,000X, scale bar 2µm.



#### Conclusions

> In 0.9% NaCl, negatively charged Adju-Phos has a larger overall particle size than positively charged Alhydrogel

- \* Alh ~ 72%  $\leq 2.7 \mu m$

➤ At the site of injection both adjuvants become negatively charged upon administration

➢ Following administration Alhydrogel has a larger abundance of particles available for phagocytosis.

#### What About the Cellular Response to Aluminium Adjuvants?

https://aacijournal.biomedcentral.com/articles/10.1186/s13223-018-0305-2



### Native THP-1 cells (R10)





# Alhydrogel®

**2.5 - 100** μg/mL

# **50**µg/mL

2.5µg/mL









# **100**µg/mL

25µg/mL



- Alhydrogel<sup>®</sup> found localised in cell cytoplasm.
- ABA particles were found internalised in THP-1 cells (*ca* 1.0µm).
- Alhydrogel was found readily internalised at all [ABA]s.
- ABA particulates were also found **associated with plasma membranes** at 100µg/mL of the adjuvant.





## Adju-Phos®

**2.5 - 100** μg/mL





**100**µg/mL

25µg/mL



Adju-Phos<sup>®</sup> found localised in cell cytoplasm only.

Discreet ABA
particles were
found internalised
in THP-1 cells,
however their
identification were
sometimes difficult.

Adju-Phos was readily internalised at 2.5 and 25µg/mL of the ABA.

Uptake less pronounced at 50 and 100µg/mL of the adjuvant.







# So, What About the Toxicity of Aluminium Adjuvants?





as elucidated using the live/dead cytotoxicity assay. Plum and blue bars represent Alhydrogel and Adju-Phos respectively. Error bars are representative of ±SD of 3 individual replicates and statistical significance is shown between treatments and respective control groups

#### Conclusions

For the two aluminium adjuvants used in clinically approved vaccines, intracellular particulates of Alhydrogel<sup>®</sup> and Adju-Phos<sup>®</sup>, were observed localised in cell cytoplasm only.

Only co-culture with Adju-Phos<sup>®</sup> resulted in the release of extracellular genetic material.

Higher concentrations of aluminium adjuvants cocultured with THP-1 cells were observed to result in their reduced cellular uptake (50 & 100µg/mL Adju-Phos<sup>®</sup>).

#### **Conclusions cont.**

The cytotoxicities of the two aluminium adjuvants used in clinically-approved vaccines are significantly different with Adju-Phos<sup>®</sup> expected to induce greater toxicity at the injection site.

The observed lower toxicity of Alhydrogel<sup>®</sup> despite its high intracellular burden may predispose this adjuvant to its translocation to (potentially) target tissues/ organs away from the injection site.

## Serious Adverse Events?

Khan *et al. BMC Medicine* 2013, **11**:99 http://www.biomedcentral.com/1741-7015/11/99



#### **RESEARCH ARTICLE**

BMC Medicine

**Open Access** 

# Slow CCL2-dependent translocation of biopersistent particles from muscle to brain

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## Serious Adverse Events?

**Original Article** 

#### Granulomas Following Subcutaneous Injection With Aluminum Adjuvant-Containing Products in Sheep

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http://journals.sagepub.com/doi/10.1177/0300985818809142

New and important research on sheep and recently published in the journal Veterinary Pathology now provides direct evidence of the fate of aluminium adjuvants following sub-cutaneous injection. The research confirms the accumulation of aluminium adjuvant in lymph glands. However, it also shows that while lymph glands are a target destination for aluminium adjuvant for the whole vaccine this is not the case when only the aluminium adjuvant is injected. Essentially the handling of aluminium adjuvant is different between whole vaccine and that which is mainly used as the control or placebo in vaccine safety trials. These seminal data for sheep raise new and important questions about how vaccine safety trials are conducted in humans and offer further insight into the role of aluminium adjuvants in serious adverse events following vaccination.

### Serious Adverse Events?

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journal homepage: www.elsevier.com/locate/jtemb

#### Aluminium in brain tissue in autism

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https://www.sciencedirect.com/science/article/pii/S0946672X17308763

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Trace Element



Intrameningeal lumogallion-reactive aluminium identified in the hippocampus (**a** & **c**) and frontal lobe (**b** & **d**) of a 50-year-old male donor diagnosed with autism. https://www.sciencedirect.com/science/article/pii/S0946672X17308763



Intravasculature lumogallion-reactive aluminium identified in the hippocampus (**a** – **d**) of a 50-year-old male donor diagnosed with autism. https://www.sciencedirect.com/science/article/pii/S0946672X17308763 Warsaw, 2019



Lumogallion-reactive aluminium identified in the hippocampus (**a** & **c**) and parietal (**b** & **d**) lobe of a 15-year-old male donor diagnosed with autism.

https://www.sciencedirect.com/science/article/pii/S0946672X17308763

The Birchall Centre, Keele University and Centro de Investigación Científica de Yucatán

THE THIRTEENTH KEELE MEETING ON Aluminium

Future Challenges in the Aluminium Age

#### 27 March 2019

Hotel Uxmal Resort Maya Yucatán, México

