



## Review

# Human serum albumin from recombinant DNA technology: Challenges and strategies<sup>☆</sup>

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## ABSTRACT

**Background:** As the most abundant protein in the blood, human serum albumin (HSA) plays an important role in maintaining plasma oncotic pressure and fluid balance between the body's compartments. HSA is thus widely used in the clinic to treat diseases. However, the shortage of and safety issues arising from using plasma HSA (pHSA) underscore the importance of recombinant HSA (rHSA) as a promising substitute for pHSA.

**Scope of review:** Here, we review the production of rHSA, from expression to downstream processing, and highlight the scalability and cost-effectiveness of the two main expression platforms. We also discuss the biosafety of commercially available pharmaceutical rHSA with respect to impurities and contaminants, followed by an analysis of recent progress in preclinical and clinical trials. We emphasise the challenges of producing pharmaceutical-grade rHSA.

**Major conclusions:** rHSA can be highly expressed in various hosts and seems to be identical to pHSA. rHSA generated from yeast appears to be as efficient and safe as pHSA in a series of preclinical and clinical trials, whereas rHSA from rice seeds exhibits great potential for more cost-effective production. Cost-effective products with no adverse effects will likely play a vital role in future human therapeutics.

**General significance:** Our understanding of pharmaceutical-grade rHSA production has improved with respect to expression hosts, biochemical properties, downstream processing, and the detection and removal of impurities. However, due to the large dosages required for clinical applications, the production of sufficient quantities of rHSA still presents challenges. This article is part of a Special Issue entitled Serum Albumin.

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## 1. Introduction

Human serum albumin (HSA), the most abundant protein in the human plasma (40–50 g/L), is a hydrophilic, non-glycosylated protein with a molecular mass of approximately 66.5 kDa. HSA is synthesised in the liver and mainly functions as a regulator of plasma colloid oncotic pressure and as a carrier for many exogenous and endogenous metabolites and drugs [1]. This protein is widely used in the clinic to treat hypoproteinaemia, foetal erythroblastosis, fluid loss due to burn injuries or haemorrhagic shock, and ascites caused by cirrhosis of the liver [2–4]. HSA is also utilised as an excipient, stabilizer or a supplement to cell culture for the production of recombinant pharmaceuticals [5–7].

Over the past decades, the market demand for HSA has greatly increased due to its wide applications. The need for HSA for therapeutic

applications is estimated to be more than 500 t worldwide. The commercial production is mostly based on fractionating human plasma, which is limited by blood donations in such countries such as China, Brazil, and India. Moreover, plasma-derived HSA (pHSA) presents the potential risk of spreading blood-derived pathogens, even though the manufacture of pHSA has been greatly improved in recent years [8,9]. Therefore, regulatory agencies have encouraged pharmaceutical companies to use non-animal-derived sources for pharmaceutical production [10]. The production of HSA using recombinant DNA technology has thus been adopted as an alternative method for obtaining large quantities of pathogen-free HSA.

Various hosts, both prokaryotic and eukaryotic, have been used to produce recombinant human serum albumin (rHSA). However, none of these hosts has been proven to be cost-effective on an industrial scale. The production of rHSA faces many challenges, especially in large-scale manufacturing and biosafety. In this review, we discuss the rHSA from different expression systems, predominantly focusing on the protein's expression levels, downstream processing, cost-efficacy, and safety issues associated with impurities.

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## 2. rHSA expression

High dosages of HSA are required for clinical applications, typically in excess of 10 g/dose, such as for the treatment of hypoalbuminaemia or traumatic shock. Since, the unit price of HSA is very low (\$3.00–\$5.00 per gram) [11]. To commercially produce rHSA at an economically feasible level, a very high expression level is thus the minimum requirement [12]. A high deposition of recombinant protein could trigger unexpected toxic effects in the host, and the recombinant protein levels could also be diminished by degradation or aggregation. Additionally, HSA consists of a single polypeptide chain of 585 amino acids that is folded into three helical domains. There are 35 cysteines in HSA, and 34 of them form disulphide bonds. Such complicated disulphide-bond formation in this large recombinant protein could be a burden on the protein synthesis and folding system, potentially resulting in the low expression or incorrect folding of rHSA when rHSA highly expressed in the host cells. Therefore, it is difficult to meet the requirement if expression level is not high enough and the processing is not cost-effective. Since then, many efforts have been made to improve the expression level of rHSA in past decades, including bacteria, yeast, animals, and plant cells. However, these issues have not been solved since recent work [13].

### 2.1. rHSA expression in bacteria

Bacteria, such as *Escherichia coli*, were initially considered to be the most efficient platforms for rHSA production due to these organisms' well-established molecular tools, high growth rate and cultivation capacity, and significant yield of recombinant proteins [14]. *E. coli* was the earliest host to be used to produce rHSA and is currently the most common production platform for various recombinant proteins. A cDNA encoding *hsa* gene has been inserted into an expression cassette and transformed into *E. coli*, yielding an expression level of approximately 2.5 g/L. The majority of the protein is insoluble, in the form of inclusion bodies, which may be due to the protein aggregation and lack of proper folding in the cytoplasm [15,16]. Expression in *Bacillus subtilis* results in soluble secreted rHSA, but with incorrect cleavage of the signal sequence at the N-terminus [17]. As we know, incorrect folding or processing is not compatible with production of all recombinant protein in various expression systems, especially, in prokaryotes such as *E. coli*. Recently, however, *E. coli* was successfully engineered to express disulphide-rich proteins via the co-expression of the foldases and the chaperones, suggesting a novel molecular strategy for the expression of rHSA in prokaryotes [16,18].

### 2.2. rHSA expression in yeast

The production of rHSA in eukaryotes was initially challenging. The expression of rHSA in yeast resulted in aggregation, forming inclusion-like bodies as observed in *E. coli* [19]. Thus, collecting the secreted protein from the culture medium was adopted as the main strategy for rHSA production in yeast [19–32]. To achieve the cost-effective production of rHSA, at least several grams of the protein must be secreted into the culture medium for the starting material to be processed [12]. To enhance rHSA expression, different yeast strains, including *Saccharomyces cerevisiae* [19–23,33], *Hansenula polymorpha* [24–26], *Kluyveromyces lactis* [27,28,34] and *Pichia pastoris* [29–32], were designed to express rHSA for industrial use. Expression levels ranging from milligrams to grams per litre were obtained in yeast by employing different strategies, such as the introduction of various promoters, the insertion of introns into the *hsa* genes, and the use of signal peptides (Table 1). Additionally, many other approaches have been exploited to enhance the secretion levels, including the optimisation of the culture medium [35], the use of cyclic fed-batch [36] and repeated fed-batch cultures [29,37].

After optimising the regulatory genetic elements that control rHSA expression and the culture conditions, methylotrophic strains, including *S. cerevisiae* [22,38] and *P. pastoris* [29,30,35] seem to be the most attractive options for industrial rHSA production. These strains are preferable because the *alcohol oxidase 2* (AOX2) promoter, which controls the expression of the target gene, is very strong and strictly regulated in yeast. In *S. cerevisiae*, expression level is estimated to be higher than 3 g/L, based on Novozymes reports ([http://www.biopharma.novozymes.com/en/information-centre/posters-and-presentations/Documents/ACTIP08\\_LesEvans\\_1811108.pdf](http://www.biopharma.novozymes.com/en/information-centre/posters-and-presentations/Documents/ACTIP08_LesEvans_1811108.pdf)). The use of the AOX2 promoter and repeated fed-batch fermentation results in much higher rHSA expression, reaching up to 10 g/L in *P. pastoris* [37,39].

The proteolytic degradation of rHSA has always been observed when rHSA is secreted into the culture broth by either *S. cerevisiae* or *P. pastoris* [19,29], especially in prolonged cultures with periodic feeding [22]. This degradation has been attributed to an endogenous acidic protease that acts in an acidic pH-dependent manner [22]. A degradation rate of up to 660 mg of rHSA/L/h was observed at pH 4.3, which caused a significant decrease in rHSA production in yeast [29]. A strategy to reduce HSA degradation has been attained by disrupting the gene encoding an aspartyl protease (YAP3) [21]. The putative proteases causing such instability of rHSA in yeast remain unclear. However, to reduce the impact of proteases in existing *P. pastoris*-based protein expression systems, a new system called PichiaPink™ was recently developed. The rHSA expression level in PichiaPink™ reached 334 mg/L without any obvious degradation [40]. With the degradation issue solved, high, stable expression levels can be achieved in both *S. cerevisiae* and *P. pastoris*. These levels are suitable for rHSA production on an industrial scale, so the system is being adopted (Novozymes and Mitsubishi) for this purpose.

### 2.3. rHSA expression in transgenic animals

Animal cells are considered to be ideal hosts for the production of pharmaceutical proteins because the mammalian hosts can generate high-quality proteins that are identical in their biochemical features to those derived from human cells, such as solubility, structure, biological activity and nearly identical glycosylation. Thus, mammalian cell culture has been used extensively and effectively to produce many biopharmaceuticals including vaccines and antibodies. Nevertheless, the high-dosage clinical applications of and large market demand for rHSA require much higher expression levels than the levels needed for vaccines and antibodies. To obtain elevated rHSA levels, the most ideal expression platform is the blood, but it is very difficult to isolate the recombinant plasma proteins by downstream purification [41]. The mammary gland, another abundant, fluid-containing secretory tissue, is emerging as a promising alternative bioreactor for the production of pharmaceutical proteins, including rHSA [42–46]. rHSA was first expressed under the inducible promoter of  $\beta$ -lactoglobulin ( $\beta$ -LG), which highly and specifically guided rHSA expression in the mammary gland and the milk. The concentration of rHSA in the milk of transgenic mice reached 2.5 mg/mL [42]. More recently, rHSA was expressed in both virgin and lactating mice [43]. Interestingly, the rHSA expression level in mouse milk was increased to 10 g/L by combining different introns in the native *hsa* gene [44], suggesting that introns may play important roles in the maintenance of rHSA mRNA in animal cells. To further enhance rHSA expression, the promoter of whey acidic protein (WAP) was introduced to produce rHSA in mice, but this production was less efficient than using the  $\beta$ -LG promoter to induce rHSA expression in mouse milk. Approximately 25% of the transgenic lines produced highly secreted levels of rHSA, with levels of 0.1–2.0 mg/mL and 1–20 mg/mL in the WAP and  $\beta$ -LG groups, respectively. Further investigation determined that the rHSA expression level could stably reach up to 3.54 g/L when *hsa* minigene 1 was fused with the goat  $\beta$ -LG promoter and its 5' upstream regulatory region [47]. However, approximately one-half (57–58%) of the transgenic lines in

**Table 1**  
rHSA expression in various hosts.

Host	HSA coding sequence	Regulatory elements	Expression level	Remarks/company	References
<i>E. coli</i>	cDNA	TRP	2.5 g/L	Aggregation	[15]
<i>B. subtilis</i>	Fused cDNA	$\alpha$ -my <sub>Bjp</sub> or npr <sub>Bnp</sub>	Not specific	Incorrect processing	[17]
<i>S. cerevisiae</i>	cDNA	PRB1	20–150 mg/L	Degradation, aggregation	[19,20]
<i>S. cerevisiae</i>	cDNA	GAL10	3–4 g/L	Novozymes	
<i>S. cerevisiae</i>	cDNA	GAL10 or GAPDH	30 mg/L	Degradation	[33]
<i>S. cerevisiae</i>	cDNA	AOX1	73–334 mg/L	PichiaPink™	[40]
<i>P. pastoris</i>	cDNA	AOX2	8–12 g/L	Repeated fed-batch culture; Mitsubishi	[29,35,37] [39]
<i>P. pastoris</i>	cDNA	AOX1	1.34 g/L	Cyclic fed-batch culture	[36]
<i>P. pastoris</i>	cDNA	AOX2	40–80 mg/L	Oleic acid addition	[35]
<i>H. polymorpha</i>	cDNA	GAP	0.55 g/L		[24]
<i>H. polymorpha</i>	cDNA	PMA1	460 mg/L		[25]
<i>H. polymorpha</i>	cDNA	MOX	1.3 g/L		[26]
<i>K. lactis</i>	cDNA		3 g/L		[27]
<i>K. lactis</i>	cDNA	PGK	62 mg/L		[28]
<i>K. lactis</i>	cDNA	PGK	> 50 mg/ml		[34]
<i>K. lactis</i>	cDNA	KIADH4	1 g/L	Fed-batch culture	[38]
Mice	Minigene 1	Sheep $\beta$ -LG	2.5 g/L		[42]
Mice	Minigene 1–2	Sheep $\beta$ -LG	0.001–0.035 g/L		[42]
Mice	Minigene 1–6	Sheep $\beta$ -LG	0.002–10 g/L		[44]
Mice	Whole gene	Sheep $\beta$ -LG	N.D.		
Mice	cDNA	Sheep $\beta$ -LG	N.D.		[42]
Mice	Whole gene	Mouse WAP	0.16 g/L		[45]
Mice	Minigene 1–6	Mouse WAP	0.001–1.6 g/L		[45]
Mice	Minigene 1	Goat $\beta$ -LG	1–2 g/L		[43]
Mice	Minigene 1	Goat $\beta$ -LG	0.21–3.54 g/L		[47]
Mice	cDNA	Mouse WAP	0.05–11.95 g/L		[46]
Cattle	cDNA	Goat $\beta$ -LG	1–2 g/L		[48]
Silkworm	cDNA	Ser1 + BmNPV enhancer + IE1	3.0 $\mu$ g/mg		[49]
Potato	cDNA	CaMV 35S	0.02% TSP	Soluble	[50]
Tobacco suspension cell	cDNA	CaMV 35S	11.88 $\mu$ g/mL	Very low expression	[54]
Tobacco leaf	cDNA	16S	11.1% TSP	Aggregation	[52]
Potato tuber	cDNA	B33	0.1–0.2% TSP		[51]
Rice suspension cell	cDNA	$\alpha$ Amy3	11.5% TSP		[53]
Rice seed	cDNA	Gt13a	1.40–10.58% TSP	Healthgene Biotech	[55]

Notice: Minigene x: the HSA gene containing introns x; TSP: total soluble protein.

the WAP and  $\beta$ -LG groups failed to secrete detectable rHSA levels into the milk [45,47]. Recently, high expression level of rHSA (11.9 g/L) in mice has been obtained by using WAP promoter (Table 1) [46]. Despite such high secretion, rHSA from mice would hardly be able to fulfil the market demand for HSA because of the low yield of milk.

With the successful improvement of rHSA production in smaller animals, bigger animals with higher milk yields, such as cattle and sheep, have also been used to produce rHSA. Typically, a goat  $\beta$ -LG ( $\beta$ -LG) promoter and a bovine growth hormone polyadenylation (polyA) sequence are fused to the *hsa* gene, and a chicken  $\beta$ -globin insulator is used to overcome the position effects. The expression level varies from 1–2 g/L in cattle with normal lactation to 40 g/L in cattle exhibiting a shortened duration of lactation (Table 1) [48].

Beyond mammary glands, the cocoon of the silkworm (*Bombyx mori*), which contains vast quantities of silk proteins secreted by the silk glands, has also been exploited to produce rHSA. rHSA specifically accumulates in the sericin layers, with an expression level of up to 3.0  $\mu$ g/mg, when driven by the *sericin-1* (*Ser1*) gene promoter, the *B. mori* nucleopolyhedrosis virus enhancer *hr3* (BmNPV), and the viral transactivator *IE1*. Approximately 83% of the rHSA expressed in transgenic cocoons can be selectively extracted in soluble form using phosphate-buffered saline [49].

#### 2.4. rHSA expression in transgenic plants

Similar to animal cells, plant cells are eukaryotic and capable of protein synthesis and modification. Plant cells have thus been proposed as a promising alternative to microbe- and mammalian cell-based systems for pharmaceutical protein production. These

cells couple eukaryotic protein processing with higher yields, lower cost, and no risk of infection with human pathogens. These advantages render plant cells an attractive platform for rHSA production.

The first attempt to produce rHSA in plants employed tobacco leaves and potato tubers. A very low expression level of 0.02% of the total soluble protein (TSP) was obtained, which was likely due to proteolytic degradation [50]. Furthermore, rHSA accumulates to up to 0.2% of the TSP by being targeted to the apoplasts of the potato tubers [51]. The expression of rHSA increases to up to 11.1% of the TSP by fusing with the untranslated regions in the tobacco-leaf chloroplasts. Unfortunately, the rHSA is incorrectly folded and degraded, even in large inclusion bodies [52].

An alternative approach to expressing rHSA in plant cells is the use of plant-cell suspension cultures. An expression level of 11.5% of TSP in the medium (15 mg/L) was achieved in a rice cell culture driven by a sugar starvation-induced promoter [53]. Very recently, rHSA expressed in tobacco Bright Yellow-2 cells reached levels of 11.88 mg/L in the culture medium [54]. However, these expression levels were much lower than the levels achieved in the yeast secretion system, suggesting that further optimisation of the plant cell cultures is necessary to improve rHSA production.

More recently, rice endosperm cells were used in our laboratory as a host for rHSA expression. The highest rHSA expression level reached 10.58% of the TSP by using an endosperm-specific promoter, vacuole targeting, and genetic codon optimisation [13]. The expression of rHSA was 20-fold higher than the minimum rHSA level that is commercially required. Because cereal crop seeds are a natural organ for protein synthesis and storage, these seeds could provide the ideal place for high-yield rHSA synthesis and processing [55].

### 3. Downstream rHSA processing

Because the clinical dosage of HSA often exceeds 10 g per vial, the challenge of obtaining high-purity rHSA must be addressed. For example, assuming a purity of 99.9999%, 10 µg of impurities would be administered in a single dose of rHSA (10 g/dose). Such trace impurities from the host cell could elicit an adverse response in the human body. Therefore, the potential toxic and immunologically active contaminants in rHSA must be removed. Thus, an efficient and economical manufacturing process is essential and challenging for the commercial production of rHSA.

The conventional purification of pHSA from blood uses cold ethanol fractions, leading to a purity of 95%. The purity could be improved to up to 99% via the application of the chromatographic method to the cold ethanol fractions. However, many unexpected adverse events that were attributed to contaminants in the pHSA solution have been observed [56,57]. The downstream processing of recombinant biopharmaceuticals varies depending on the properties of the product and the expression system. Many methods have been developed to isolate rHSA from different hosts, mainly in the form of pretreatments, chromatography, and formulations (Fig. 1). We will discuss these techniques in more detail, as follows:

#### 3.1. Pretreatments in different expression platforms

Because high-dosage of rHSA is required for clinical treatments and huge market volume, rHSA production requires a large scale of high-density fermentations in *Pichia pastoris* or large-volume extractions from rice seeds. So, the pretreatment of such large amount of materials must be employed. However, tons of extracted solution or medium require clarification and stabilisation before chromatography, and the challenge is how to separate the biomass from the starting materials with a high recovery rate. Consequently, pretreatments such as cell lysis, rHSA extraction, and clarification are very important for downstream processing.

Pretreatments should increase the recovery of rHSA and reduce the impurities as much as possible. To achieve these aims, ammonium sulphate precipitation and heat treatment (65–68 °C) are used in rHSA pretreatments, based on the thermal stability of HSA. The heat treatment is mainly adopted to extract rHSA and to inactivate the proteases in yeast or plants [58,59]. Heat treatment also elevates the total protein recovery and simultaneously increases the number of impurities [54,58].

Ultrafiltration with various cut-off values (1000–100,000 Da) diminishes impurities of higher or lower molecular weights in the crude rHSA extraction solutions [58,60]. To simplify the extraction process, an ethanol/K<sub>2</sub>HPO<sub>4</sub> aqueous two-phase extraction was recently developed to separate rHSA from the yeast culture broth, which dramatically decreased the proportion of host proteins in the initial recovery step [61]. Isoelectric precipitation also effectively removes the impurities of rHSA produced in rice seeds, which exhibits obviously different biochemical features. Starches and certain proteins from rice grain are unstable in an acidic environment, which is beneficial for the use of chromatography in future processing.

Centrifugation is the main method used to remove host-cell fragments from crude rHSA extracts, with the goal of clarifying the extracts [53,54]. However, it is very difficult to centrifuge tons of solution for large-scale rHSA production. A frame filter press has been used to separate yeast cells from a culture, but this process is slow and operates in an open system, increasing the risk of pyrogen contamination. STREAMLINE, which combines solid-liquid separation and cation-exchange chromatography, has been adopted to improve and simplify the purification process, greatly shortening the processing time and increasing the rHSA yield [62]. For example, membrane filtration has been used to effectively clarify the starch and crude protein extraction solutions for OsrHSA (*Oryza sativa* recombinant HSA, OsrHSA) production from rice seeds.

#### 3.2. Chromatography-based purification

Chromatography is generally used to achieve significant levels of high-purity rHSA. As shown in Fig. 1, various chromatographic methods (ion-exchange, hydrophobic, chelating, affinity, and mixed-mode chromatography resins) followed by ultrafiltration have been successfully used to purify rHSA. During downstream processing, affinity chromatography is the most popular method for isolating pharmaceutical proteins. Affinity chromatography using Cibacron Blue can selectively and effectively separate HSA from plasma, which is widely used in the specific isolation of albumin from plasma [63]. However, rHSA is difficult to elute from the resin due to the resin's high affinity (1 M NaCl/NaSCN), and Cibacron Blue is too expensive to use in large-scale production [49,64]. There is also the potential for contamination of Cibacron Blue from the resin in the final products, which could be a risk for clinical applications. Therefore, ion exchange, hydrophobic, and chelating chromatography are the main separation strategies used to purify rHSA from yeast.

The purity of yeast-derived rHSA reaches more than 99.95% by combining ultrafiltration, ion-exchange and lipophilic affinity chromatography [60]. The purity of rHSA has largely been improved by optimising the conditions of ultrafiltration, heat treatment, and chromatography over the course of several decades [59]. The entire process for purifying rHSA from yeast contains at least 12 steps, which mainly consist of filtrations and chromatography. The final purity of the rHSA is 99.99999996%, and the concentration of yeast-derived contaminants in the purified rHSA is less than 0.1 ng/g, as determined by enzyme-linked immunosorbent assay (ELISA) [65]. In contrast, mannan polysaccharides from *P. pastoris* have not been detected in rHSA prepared by anion-exchange chromatography with pulsed amperometric detection [66]. Despite the very high purity of such rHSA, which eliminates any clinical risks, it is nearly impossible to produce in a cost-effective way, or at least as economically as pHSA, given the complicated processing that is required. Alternative purification strategies have been introduced, including STREAMLINE technology and mixed-model resin [39,62]. There has been much progress in this area, such as the improvement of rHSA production by approximately 50% in terms of processing time and 45% in terms of yield by STREAMLINE.

Several strategies have been employed to develop a cost-effective protocol for isolating OsrHSA from rice grain. These strategies include

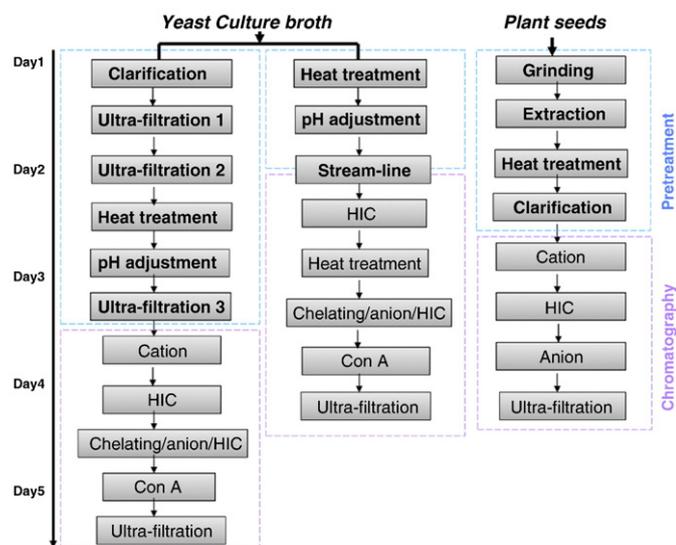


Fig. 1. Downstream processes of rHSA derived from yeast and plant. The steps involving in pretreatment and chromatography were highlighted as light blue and purple, respectively. HIC, hydrophobic interaction chromatography.

the pretreatment of grain; extraction with heat following acidic precipitation; and several steps of cation, anion, and hydrophobic chromatography and ultrafiltration to achieve a purity of greater than 99.9%, as detected by silver staining and high-performance liquid chromatography (HPLC) [13,67]. A recovery rate of 2.75 g/kg of brown rice was achieved on both the pilot scale (110 g/lot) and the industrial scale (>1 kg/lot; unpublished data). Recently, further improvements to the downstream processing of OsrHSA increased the final purity to 99.9999%, according to the EIA's guidelines for characterising the impurities from rice (unpublished data). The process of purifying OsrHSA from rice grain seems to be more efficient and less time- and labour-intensive than the purification of rHSA from yeast. This process also has a great potential to produce rHSA in a cost-effective way, given that a safety assessment is accomplished at this purity.

### 3.3. Biochemical and functional fidelity

As expected, rHSA expressed in rice or yeast (*Pichia pastoris*, pprHSA) exhibits the same amino-acid sequence and molecular weight as pHSA, according to the tryptic peptides of pprHSA and mass spectrometry analysis [68,69]. Additionally, the physicochemical and immunochemical properties of OsrHSA and pprHSA in terms of viscosity, colloid osmotic pressure, and antigenicity are not significantly different from the properties of pHSA [70].

In terms of structure, OsrHSA from rice and pprHSA from yeast are identical to pHSA. As shown in Fig. 2, all of them folds into a heart shape formed by three helical domains, designated I, II, and III, with fatty acids bound to the hydrophobic cavities. The alignment of the crystal structures of OsrHSA and pprHSA to the structure of pHSA generates root-mean-square deviations of 0.605 Å and 0.374 Å, respectively (Fig. 2B). No obvious differences in the main-chain conformations are found among the structures of pprHSA, OsrHSA, and pHSA. Eight fatty acids bind to both OsrHSA and pprHSA (Fig. 2C) at the same site as in pHSA. Additionally, 17 pairs of

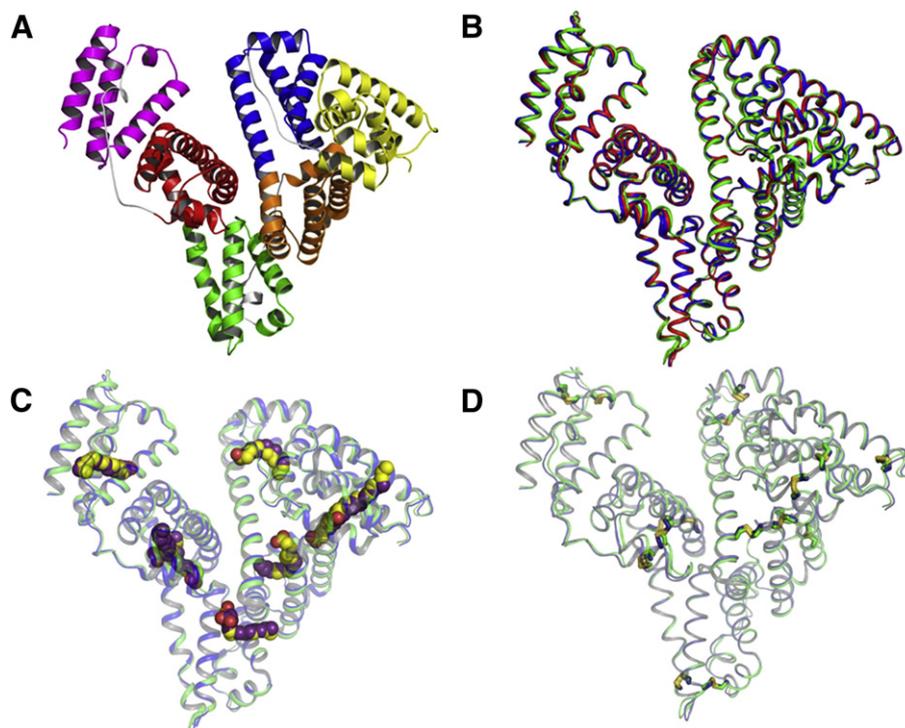
disulphide bonds are precisely formed in plant cells and yeast cells (Fig. 2D) [13,71]. pprHSA and OsrHSA are also structural identical to pHSA in terms of thermal stability and binding to such ligands as warfarin, naproxen, and ibuprofen [69]. These conformational and functional similarities to pHSA were also observed for rHSA from transgenic silkworms and cattle [48,49]. In fact, rHSA can correctly fold in most eukaryotic cells and maintain its binding activities.

A further characterisation of rHSA indicates that rHSA retains biological activity in vivo. Supplementing culture medium with rHSA dramatically promotes the growth of several different cell lines, including CHO cells, Vero cells, hybridomas, and embryonic stem cells [13,72]. pprHSA has been used as a substitute for pHSA in the culture medium for IVF and may eliminate the risk of transmitting animal viruses and plasma-derived impurities [73,74]. More importantly, the highly purified rHSA from yeast and rice exhibits a therapeutic efficacy in liver ascites that is equivalent to the efficacy of pHSA [13,75]. Additionally, the intravenous administration of rHSA dose-dependently decreases the abdominal circumference and increases the urine volume and colloid osmotic pressure, even in combination with other chemical therapeutics [76].

However, rHSA from different hosts could have slightly dissimilar biochemical properties. For example, OsrHSA has an improved thermal stability in liposomes compared with pprHSA, possibly due to the presence of different fatty acids in OsrHSA [77]. Moreover, pprHSA has a much higher free sulphhydryl content than pHSA [78]. The same result was also obtained in embryonic culture, revealing that rHSA was more reduced than pHSA, but redox variations were also noted between different OsrHSA batches and pprHSA batches as the same of pHSA [79].

### 3.4. Scalability and cost-effectiveness of rHSA

The cost-effective and scalability of rHSA production is very critical for commercialization of rHSA because the price of HSA is as low as 3.00–5.00 US dollars per gram and the high market demand for HSA (500 t/year) [11]. The production of rHSA in a cost-effective



**Fig. 2.** Structures of rHSA from yeast and rice. A, Overall structure of recombinant human serum albumin; B, Comparison of recombinant HSA from rice (green, PDB: 3SQJ) or yeast (blue, PDB: 1E7G) to HSA from plasma (red, PDB: 2I2Z), the RMSDs of two rHSAs to pHSA were 0.605 and 0.374 Å respectively; C, Fatty acids binding in rHSAs. The fatty acids bound to rHSA from plant (green) and yeast (blue) was represented by sphere colouring as yellow and brown. D, Disulfides in rHSA from yeast and rice. Disulfide bonds were shown as yellow sticks.

way, or at least as economically as pHSA, is the most critical milestone in the development of recombinant technology for this purpose. For example, rHSA expressed in *E. coli* aggregates into inclusion bodies, so unfolding and refolding the protein upon the addition and removal, respectively, of a chemical reagent is required to produce biologically active rHSA. Although rHSA can be refolded into its native state by these treatments, low recovery has greatly increased the cost of the process, rendering such treatments unsuitable for industrial production.

For animal bioreactors, the most negative aspect of rHSA production is the timing and capital needed to transition to an industrial scale. Such production requires 3.5 months for mice, 15 months for pigs, 28 months for sheep, and 32 months for cows [80]. Additionally, the cost of the upkeep of cows using Good Agricultural Practices (GAP) is estimated to be \$10,000/cow/year [81]. Therefore, it is time- and capital-consuming to produce rHSA from transgenic animals.

Yeast fermentation has been used extensively to produce recombinant pharmaceutical enzymes and cytokines. The products derived from yeast have been profitable due to the products' low dosage and high expression levels, which effectively reduce the overall cost. However, it is difficult to economically produce rHSA in yeast. The high market demand for rHSA requires investment in the instruments used for fermentation. Additionally, to eliminate potentially toxic contaminants, more complicated downstream processing is needed, which further increases the capital investment. Thus, the development of efficient and economical downstream processing could be the key to decreasing the cost of rHSA production in yeast.

In plants, the yields of rHSA have substantially improved. Recent data revealed that the expression level exceeded the estimated cost-efficacy threshold (0.1 g/kg) for the industrial production of rHSA [13,51,52]. Further evaluation, based on economic principles, suggested that rHSA from transgenic tobacco could reduce production costs and generate annual profits of millions of dollars for innovative firms [82]. More recently, the large-scale production of OsrHSA with purity >99% and a production rate of 2.75 g/kg of brown rice were achieved in our laboratory. Furthermore, OsrHSA production can be easily scaled to kilogram levels within one season once a highly expressing transgenic line is obtained. The production scale is very flexible because the seeds can retain intact recombinant protein for as long as three years [83], and the advantages over other systems include scalability, safety, and cost-effectiveness. In particular, rice endosperm cells not only provide a stable site for the deposition of recombinant proteins, preventing degradation by proteases, but also can be stored at ambient temperatures for several years. Furthermore, the entire rice genome sequence can guide the design of downstream processing, such as extraction and purification protocols, and the safety evaluation of host-cell proteins required by the FDA [84]. Thus, increasing evidence indicates that rice or cereal crop endosperm is a promising platform for producing therapeutic proteins.

However, large-scale rHSA synthesis requires the field production of genetically modified plants. Additionally, the downstream processing of rHSA should conform to GMP (Good Manufacturing Practice) and produce a sufficiently pure and homogeneous product with acceptably low levels of contaminants. GMP issues include the characterisation of the identities of contaminants and adherence to both standard operating protocols (SOPs) for genetically modified (GM) plants and regulatory guidelines for field planting regarding environmental safety [85]. For OsrHSA production from rice, many measures have been adopted to prevent the possible transfer of OsrHSA transgenic rice into the environment from the field trail, including the establishment of an isolation zone (>100 m) and a buffer zone around the field (>1.5 m); fencing; and well-established SOPs for sowing, planting, harvesting, drying, transporting, processing, and storage. In fact, there is a very low frequency (0.04–0.80%) of pollen-mediated gene flow between GM rice and adjacent non-GM plants [86], which can be easily

decreased to a negligible level by short spatial isolation [87]. Because the recovery rate of OsrHSA (2.75 g/kg) is much higher than the rate estimated for tobacco (1.0 g/kg) [13,88], the production of OsrHSA for pharmaceutical applications may be cost-effective.

#### 4. Biosafety of rHSA

There is rapidly growing public concern regarding blood-derived pathogen transmission and the potential heterogeneity and oxidation status of commercial pHSA, suggesting that rHSA is a promising substitute. In the last few decades, numerous studies have reported that rHSA is safe and efficacious in various clinical applications, with no cases of infection or allergy [89–92]. rHSA has already been approved as excipients in pharmaceutical products, such as Recombumin®, which has been used in childhood vaccines for measles, mumps and rubella following approval by the Type V Biologics Master File (BMF) of the FDA. rHSA product from Novozymes Biopharma. are also permitted as drug stabilizers and carriers [93,94]. However, no rHSA has been approved for high-dosage therapeutic use by regulatory agencies because such dosages pose a high immunogenic risk due to residual exogenous materials. For safe and efficacious therapeutic use, rHSA preparations must contain dimers and polymers at less than 1.0%, contaminations with host-cell proteins (HCPs) at less than 0.0001% and endotoxins at less than 0.05 EU/mg. As shown in Fig. 3, we designed a flowchart to develop rHSA for clinical use, according to our research. Systematic characterisations of intermediate and final products are required, including HCPs, DNA, endotoxins, and aggregation.

##### 4.1. Residual host-cell proteins

Residual HCPs are major components of impurities in recombinant biopharmaceutical products, which are highly likely to be immunogenic. Certain levels of HCPs will elicit immune responses and possibly result in clinically relevant adverse events [95]. Because traces of any HCPs might cause severe immune reactions, the purity of rHSA is required to be greater than 99.999%, as recommended by regulatory authority [96].

To achieve acceptable HCP levels, various strategies have been employed. To date, the industrial techniques used to remove HCPs include salting out, isoelectric precipitation, aqueous two-phase extraction, and chromatography [97,98]. Strictly controlled residual HCP levels necessitate the development of rapid, accurate, and sensitive detection methods as part of rHSA production. Analytical techniques, such as sodium dodecyl sulphate-polyacrylamide gel electrophoresis (SDS-PAGE), Western blotting, and HPLC [99,100] have been typically adopted to detect and characterise HCPs, but those methods are not adequately sensitive or accurate. Thus, the more sensitive and accurate ELISA has been considered to be the golden standard for detecting HCPs. Until now, most detection technologies approved by the FDA recognised HCP levels ranging from 1–100 ppm via ELISA-based methods [101–103]. It is even more challenging to detect trace levels of HCPs without missing any components. Therefore, designing appropriate late stage-specific ELISA methods for assessing final products is essential due to the complexity of antibodies to various HCP populations and the potential variation in HCPs between the downstream rHSA purification steps. In one case, a highly sensitive ELISA was developed for the assessment of rHSA from *P. pastoris*. None of the HCPs in pprHSA was detected by ELISA at an rHSA concentration of 250 mg/mL, which is equal to less than 1.0 ng of HCP/mL [66].

Another challenge is the characterisation of individual HCPs. Because an HCP could cause potential allergies at a very low level, it is necessary to obtain as detailed information as possible on the HCPs in final rHSA products intended for high-dosage applications, even if acceptable levels of residual HCPs are achieved. A better understanding of the components of final rHSA products thus helps to avoid the perceived risks of trace HCPs. Recently, proteomic studies

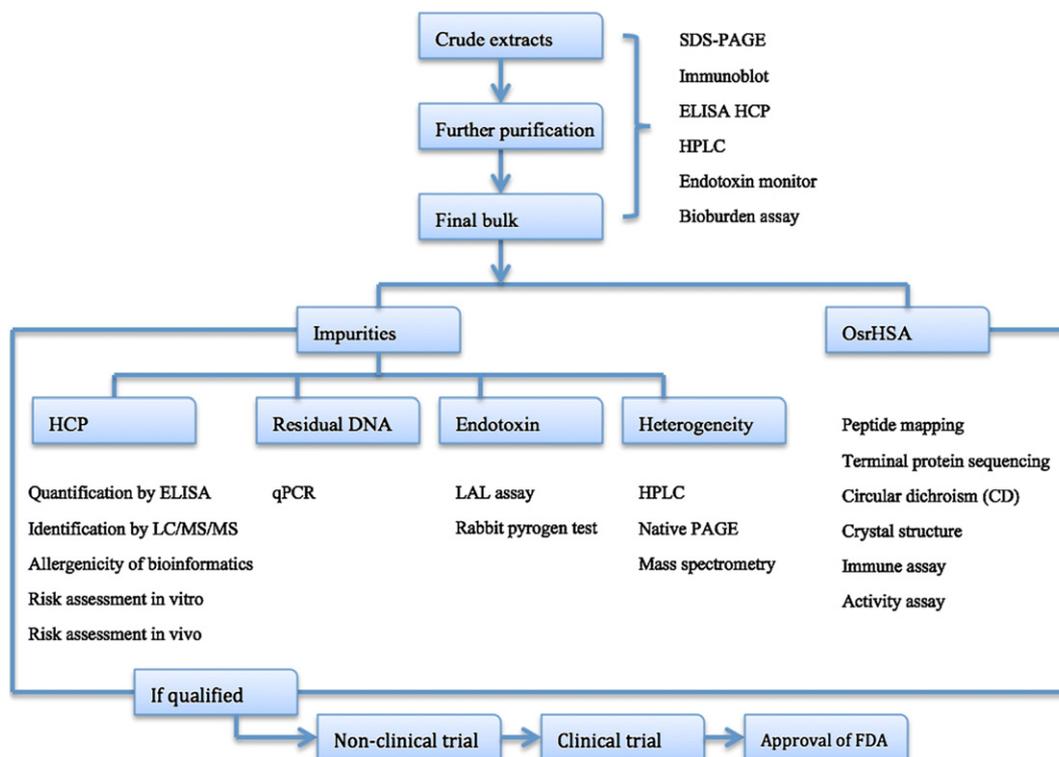


Fig. 3. Qualified control of OsrHSA for clinical application.

largely improved our capacity to identify HCPs, particularly when coupled with such techniques as two-dimensional gel electrophoresis, two-dimensional liquid chromatography and peptide library beads [104–106]. Once the identity of an individual HCP is confirmed, it is easy to further analyse the protein's properties and effects on the human body via a bioinformatics approach using an online database. According to the guidelines proposed by the Food and Agriculture Organization (FAO) and the World Health Organization (WHO), allergens can be predicted based on protein sequences [107,108]. Many potential allergens and antioxidants are present in yeast and rice, so it is essential to establish validation methods for reducing residual HCP levels and individual allergens in rHSA [66,109–112]. For example, in our laboratory, potentially adverse proteins are monitored during each processing step by Western blotting with specific antibodies against crude protein extracts from rice grain.

In all cases, the products should be sufficiently characterised prior to a well-designed preclinical safety study (ICH S6) [113]. For the high-dosage use of pharmaceutical rHSA, it is necessary to establish the safety assessment protocol for HCP before preclinical trials. In our laboratory, four-weeks toxicity of HCP from rice seed in Sprague–Dawley rats has been evaluated by intravenous injection, indicating that human body is less allergenic sensitive to plant proteins than that of yeast or bacteria (unpublished data).

#### 4.2. Residual host-cell DNA

Residual DNA (rDNA) present in recombinant products is another safety issue in the production of rHSA. Consequently, residual DNA is often restricted to less than 100 pg per dose of a purified product, according to the authorities regulating recombinant bioproducts [114]. In 1997, the acceptable rDNA content increased to 10 ng/dose in the case of certain high-dosage clinical applications [115,116].

It is challenging to completely remove nucleic acids (DNA or RNA) when purifying a biomolecule. Certain cationic polymer adsorbents,

such as chitosan beads and histidine-immobilised polymer beads [117–119], have been very useful as adsorbents for anionic, bio-related nucleic acids. However, because of the high adsorption of both nucleic acids and acidic proteins, commercially available cationic polymer adsorbents could fail to remove DNA from rHSA preparations [120]. Therefore, an alternative strategy should be employed to remove nucleic acids from rHSA.

The nucleic acids must also be quantified to detect the genetic material remaining in recombinant pharmaceuticals. Thus far, numerous quantitative methods have been developed, such as the PicoGreen assay, the hybridisation assay, the threshold immunoassay, and qPCR [103,121,122]. Certain biosensors are also used to detect residual DNA, such as monomolecular layers of alkylthiols, capacitive biosensors, surface plasmon resonance sensors, and quartz crystal microbalance [100,123]. Among these methods, qPCR is highly recommended by the regulatory authorities to quantify the DNA present in biopharmaceutical products [124–126]. Because a sensitive technique should be the key means of detecting residual nucleic acids in rHSA products, qPCR may be the best choice due to this method's ability to sensitively and quickly recognise repetitive DNA sequences. Higher sensitivity may be achieved by whole genome amplification [127]. Although there are no data regarding the rDNA in rHSA, we used a conserved fragment of the ribosome 5 s gene to conduct TaqMan qPCR to assess rHSA derived from plants.

#### 4.3. Endotoxins

Endotoxins, also known as lipopolysaccharide, are the primary contaminants in commercially available biological products. Endotoxins can cause side effects in drug-receiving organisms, such as endotoxin shock, tissue injury, and even death if the endotoxin levels are elevated enough. The high batch rejection of biopharmaceutical products is commonly attributed to excess endotoxins. Therefore, strict control over this type of contaminant is closely related to the quality and safety of biopharmaceutical materials [128]. According to the European

Pharmacopoeia, endotoxin levels must be lower than five endotoxin units (EU) per kilogram of body weight in intravenous applications, 10 EU/mg for insulin, and 100 EU/mg for interferons [129]. Because hundreds of milligrams of HSA per kilogram of body weight are used in the clinic, the threshold endotoxin levels should be maintained at a particularly low level.

Various strategies have been employed to meet specific product requirements for endotoxin decontamination, such as ultrafiltration based on size exclusion, affinity and ion-exchange chromatography, and charged-membrane/depth filtration following electrostatic/hydrophobic interactions [130]. Generally, effective decontamination can reduce endotoxins to acceptable levels during common industrial processing according to GMP.

Karplus et al. reported failing to remove endotoxins when decontaminating bovine catalase using affinity-sorbent polymyxin B-Sepharose according to standard protocols [130]. This finding implies that potential interactions between endotoxins and biologically active substances may prevent a portion of endotoxins from being removed by typical procedures. In fact, endotoxins can bind to HSA via HSA's binding sites and compete with the fatty acids, likely interfering with endotoxin removal [131–133]. The dissociation of protein-endotoxin complexes may be an effective way of improving endotoxin reduction. An example of IgG decontamination was reported by employing the surfactant octyl- $\beta$ -glucopyranoside to dissociate human IgG-endotoxin complexes and subsequently supporting endotoxin adsorption to polymyxin B-Sepharose [130]. Moreover, a method for reducing endotoxin levels in protein solutions by the use of Triton X-114 has been reported [134]; in this method, the surfactant facilitated the dissociation of endotoxins from the protein. However, all of these methods create a new problem of removing the residual surfactant. Additionally, detergents such as Triton X-114 have the potential to destroy the proper structure of rHSA.

Understanding the interactions between endotoxins and rHSA may significantly contribute to efficient endotoxin removal. For example, based on the noncompetition between albumin and endotoxins with polymyxin B, this type of filling resin may be a potentially powerful tool for removing endotoxins from rHSA solutions [135–137]. In our laboratory, endotoxins resulting from OsrHSA mainly come from rice grain, which were removed by adopting the appropriate pH, salt concentration, organic solution, and chromatographic medium at different steps of downstream processing. It is also challenging to detect endotoxins in rHSA because certain fatty acids interfere with such detection. Several assays have been established to determine endotoxin levels, such as the rabbit pyrogen test, the *Limulus* amoebocyte lysate (LAL) assay, the chicken embryo lethality assay, and the galactosamine-primed mice lethality test [138–140]. Among those tests, the LAL assay is used extensively because of the test's sensitivity, convenience, and low cost. However, many interfering factors in the coagulation cascade could result in a false-negative or false-positive result in a LAL assay. For instance, in one study, rHSA binding to endotoxins yielded a complex, leading to a false result [135]. Therefore, when assessing rHSA, other bioassays should be adopted as a complement to the LAL assay, such as the rabbit pyrogen test and whole-blood stimulation assays [141].

## 5. Preclinical and clinical trails

For engineered recombinant proteins with high-dosage clinical applications, it is vital to conduct a series of preclinical and clinical tests to validate the safety and efficacy of rHSA before clinical use. To assess the differences in the biological function of rHSA and pHSA, either rHSA or pHSA labelled with  $^{125}\text{I}$  was intravenously injected into rats. No significant differences were noted in the rats' physiological symptoms, including the half-life of the HSA in the blood, urinary, and faecal excretions and the HSA's organ and tissue distributions [75]. Similarly, an animal model has been established

to evaluate rHSA efficacy for the treatment of ascites during liver cirrhosis coupled with hypoalbuminaemia. Studies using this model have proven that pprHSA and OsrHSA are similar effective to pHSA for the treatment of liver cirrhosis [13,75]. Moreover, the putatively identical function of rHSA and pHSA in the treatment of liver cirrhosis induced in rats by carbon tetrachloride has been reported, resulting in decreased abdominal circumference and simultaneously improved blood colloid osmotic pressure and increased urine volume [75]. No immune reactions have been reported in these animal-based preclinical tests of rHSA. In summary, the identical efficacy of rHSA and pHSA demonstrates the feasibility of rHSA as a drug for treating liver ascites due to hypoalbuminaemia.

In clinical trials, the rHSA products from *P. pastoris* and *S. cerevisiae* are the most thoroughly studied. In particular, the safety and pharmacodynamics of pprHSA have been assessed in healthy volunteers both intravenously and intramuscularly. Nine incidences of drug-related, potentially allergic responses (four recipients of rHSA and five recipients of pHSA) were reported in the intramuscular study, indicating the similar frequency of critically adverse effects between groups [90]. As in animal tests, the dose of rHSA did not significantly influence the protein's tolerability. Moreover, rHSA performed similarly to pHSA in safety and pharmacodynamics tests, with no significant differences between rHSA and pHSA in both overall and treatment-related adverse events [90,91,142]. Furthermore, a phase III investigation by a Japanese company confirmed the high efficacy and low potential risks of pprHSA [92].

Cytokine release from leukocytes is a promising indicator of immunotoxicity in humans [143,144]. Thus, considering animal welfare and economic reasons, it becomes more important to develop an alternative assay *in vitro* based on human immune cells to precisely predict the immune reaction to rHSA *in vivo*.

## 6. Concluding remarks and perspectives

To date, rHSA has been successfully expressed using genetic engineering, and large-scale production has been achieved in yeast and rice. rHSA shows great promise as a substitute for pHSA in future clinical applications and may help resolve the shortage and safety issues associated with pHSA. However, feasible, economical commercialisation depends not only on the maintenance of biological activity but also on low-cost downstream processing and scaling. Recently, transgenic rice has been used as a novel bioreactor and has demonstrated great potential to cost-effectively produce sufficient quantities of safe OsrHSA. Further improvements in rHSA expression in various hosts and in rHSA purification will likely result in an affordable product.

Safety is the primary public concern when rHSA is proposed for clinical use. The risk of an allergenic response must be completely eliminated before clinical use. Although plant components are considered less likely to induce immune reactions than compounds derived from microbes, rHSA bioprocessing is still required to remove impurities to acceptable levels given the large dosages required for pharmaceutical applications. A well understanding of the complexities of impurities and contaminants from the host cells and processing could guide to develop the protocol for removal of HCPs, endotoxins and nucleic acids as much as possible. However, it remains very challenging to establish appropriate impurity removal and detection methods in rHSA manufacturing.

In conclusion, the limited supply and risks of viral transmission of pHSA have justified the development of rHSA. The need for an ample supply of rHSA at an affordable cost, without jeopardising quality, is now the driving force behind recombinant DNA technology, as long as this approach yields the financial returns expected by biotechnology companies. Additionally, we expect that rHSA may expand its role, either clinically or industrially, in the future.

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