

***Streptococcus pneumoniae* evades host cell phagocytosis and limits host mortality  
through its cell wall anchoring protein PfbA**

Running title: PfbA inhibits phagocytosis and limits host responses

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## Abstract

*Streptococcus pneumoniae* is a Gram-positive bacterium belonging to the oral streptococcus species, mitis group. This pathogen is a leading cause of community-acquired pneumonia, which often evades host immunity and causes systemic diseases, such as sepsis and meningitis. Previously, we reported that PfbA is a  $\beta$ -helical cell surface protein contributing to pneumococcal adhesion to and invasion of human epithelial cells in addition to its survival in blood. In the present study, we investigated the role of PfbA in pneumococcal pathogenesis. Phylogenetic analysis indicated that the *pfbA* gene is specific to *S. pneumoniae* within the mitis group. Our *in vitro* assays showed that PfbA inhibits neutrophil phagocytosis, leading to pneumococcal survival. We found that PfbA activates NF- $\kappa$ B through TLR2, but not TLR4. In addition, TLR2/4 inhibitor peptide treatment of neutrophils enhanced the survival of the *S. pneumoniae*  $\Delta pfbA$  strain as compared to a control peptide treatment, whereas the treatment did not affect survival of a wild-type strain. In a mouse pneumonia model, the host mortality and level of TNF- $\alpha$  in bronchoalveolar lavage fluid were comparable between wild-type and  $\Delta pfbA$ -infected mice, while deletion of

*pfbA* increased the bacterial burden in bronchoalveolar lavage fluid. In a mouse sepsis model, the  $\Delta pfbA$  strain demonstrated significantly increased host mortality and TNF- $\alpha$  levels in plasma, but showed reduced bacterial burden in lung and liver. These results indicate that PfbA may contribute to the success of *S. pneumoniae* species by inhibiting host cell phagocytosis, excess inflammation, and mortality.

## Importance

*Streptococcus pneumoniae* is often isolated from the nasopharynx of healthy children, but the bacterium is also a leading cause of pneumonia, meningitis, and sepsis. In this study, we focused on the role of a cell wall anchoring protein, PfbA, in the pathogenesis of *S. pneumoniae*-related disease. We found that PfbA is a pneumococcus-specific anti-phagocytic factor that functions as a TLR2 ligand, indicating that PfbA may represent a pneumococcal-specific therapeutic target. However, a mouse pneumonia model revealed that PfbA deficiency reduced the bacterial burden, but did not decrease host mortality. Furthermore, in a mouse sepsis model, PfbA deficiency increased host mortality. These results suggest that *S.*

*pneumoniae* optimizes reproduction by regulating host mortality through PfbA; therefore, PfbA inhibition would not be an effective strategy for combatting pneumococcal infection. Our findings underscore the challenges involved in drug development for a bacterium harboring both commensal and pathogenic states.

## Introduction

*Streptococcus pneumoniae* is Gram-positive bacteria belonging to the mitis group that colonizes the human nasopharynx in approximately 20% of children without causing clinical symptoms (1-3). On the other hand, *S. pneumoniae* is also a leading cause of bacterial pneumonia, meningitis, and sepsis worldwide. The pathogen is estimated to be responsible for the deaths of approximately 1,190,000 people annually from lower respiratory infection (4). Following the introduction of pneumococcal conjugate vaccines, *S. pneumoniae* is still responsible for two thirds of all cases of meningitis (5). In addition, antibiotic selective pressure causes resistant pneumococcal clones to emerge and expand all over the world and the World Health Organization listed *S. pneumoniae* as one of antibiotic-resistant "priority pathogens" (6). Centers for

Disease Control and Prevention data from active bacterial core surveillance for 2009 to 2013 indicated that pneumococcal conjugate vaccines work as a useful tool against antibiotic resistance (7). However, these vaccines also generate selective pressure, and non-vaccine serotypes of *S. pneumoniae* are increasing worldwide (8, 9).

During the process of invasive infection, *S. pneumoniae* needs to evade host immunity and replicate in the host after colonization. In these steps, pneumococcal cell surface proteins work as adhesins and/or anti-phagocytic factors. There are two types of motifs for pneumococcal cell surface localization, a cell wall anchoring motif, LPXTG (10), and choline-binding repeats interacting with pneumococcal phosphorylcholine (11). Choline-binding proteins (CBPs) localize on the pneumococcal cell wall via the phosphorylcholine moiety of teichoic acids, while LPXTG-anchored proteins are covalently attached to the cell wall. Several LPXTG-anchored proteins and CBPs contribute to the adhesion to host epithelial cells through the interaction with host factors (10-13). Some pneumococcal cell surface proteins also contribute to bacterial survival by limiting complement deposition or inhibiting phagocytosis (11, 14-17). On the other hand, the host recognizes *S. pneumoniae* and regulates immune responses

using pattern recognition receptors, including the Toll-like receptors (TLRs), nucleotide oligomerization domain-like receptors, and retinoic acid-inducible gene-I-like receptors (18). In addition, extracellular bacteria are recognized by TLR2 and TLR4 located on the host cell surface. TLR2 recognizes pneumococcal cell wall components and lipoproteins, while TLR4 senses a pore-forming toxin, pneumolysin (18, 19). Generally, both TLR2 and TLR4 agonists induce neutrophil activation and inhibit the apoptosis (20). However, in mouse influenza A virus and *S. pneumoniae* co-infection model, a TLR2 agonist decreased inflammation and reduced bacterial shedding and transmission (21). TLRs play important, but redundant, roles in the host defense and regulating inflammatory responses against pneumococcal infection. Appropriate immune responses contribute to pneumococcal clearance, while excessive inflammation can lead to serious tissue damage.

We previously reported that plasmin- and fibronectin-binding protein A (PfbA) plays a role in fibronectin-dependent adhesion to and invasion of epithelial cells, and that an *S. pneumoniae* PfbA-deficient mutant strain exhibited decreased survival in human blood (22, 23). PfbA is an LPXTG-anchored protein that features a right-handed

100 parallel  $\beta$ -helix with a groove or cleft, formed by three parallel  $\beta$ -sheets and connecting  
 101 loops (24, 25). Since the distribution and structural arrangement of the groove residues  
 102 in the  $\beta$ -helix make it favorable for binding to carbohydrates, PfbA binds to D-galactose,  
 103 D-mannose, D-glucosamine, D-galactosamine, *N*-acetylneuraminic acid, D-sucrose, and  
 104 D-raffinose (26). PfbA also binds to human erythrocytes by interacting with  
 105 *N*-acetylneuraminic acids on the cells (27).

106 In this study, we investigated the role of PfbA in pneumococcal pathogenesis.  
 107 Phylogenetic analysis indicated that *pfbA* is specific to *S. pneumoniae* among the mitis  
 108 group *Streptococcus*. Our *in vitro* analysis revealed that PfbA works as an  
 109 anti-phagocytic factor and that the protein causes NF- $\kappa$ B activation via TLR2. In  
 110 addition, Toll-interleukin 1 receptor adaptor protein (TIRAP) inhibition increased the  
 111 survival rate of the *pfbA* mutant strain after incubation with neutrophils, while the  
 112 wild-type (WT) strain was not affected. Mouse infection assays suggested that PfbA  
 113 contributes to pneumococcal survival in at least some organs. However, in a mouse  
 114 sepsis model, *pfbA* mutant strain-infected mice showed significantly higher mortality



115 and TNF- $\alpha$  levels in blood. Our findings indicate that PfbA is a pneumococcus-specific

116 anti-phagocytic factor and suppresses host excess inflammation.

117

# 118 **Materials and Methods**

## 119 **Bacterial strains and construction of mutant strain**

120 *Streptococcus pneumoniae* strains were cultured in Todd-Hewitt broth (BD  
121 Biosciences, San Jose, CA, USA) supplemented with 0.2% yeast extract THY medium,  
122 BD Biosciences) at 37°C. For selection and maintenance of mutants, spectinomycin  
123 (Fujifilm Wako Pure Chemical Corporation, Osaka, Japan) was added to the medium at  
124 120 µg/mL. The *Escherichia coli* strain XL10-Gold (Agilent, Santa Clara, CA, USA)  
125 was used as a host for derivatives of plasmid pQE-30. All *E. coli* strains were cultured  
126 in Luria-Bertani (LB) broth supplemented with 100 µg/mL carbenicillin (Nacalai  
127 Tesque, Kyoto, Japan) at 37°C with agitation.

128 *S. pneumoniae* TIGR4 isogenic *pfbA* mutant strains were generated as previously  
129 described with minor modifications (22, 28, 29). Briefly, the upstream region of *pfbA*,  
130 an *aad9* cassette, the downstream region of *pfbA*, and pGEM-T Easy vector (Promega,  
131 Madison, WI, USA) were amplified by PrimeSTAR<sup>®</sup> MAX DNA Polymerase (TaKaRa  
132 Bio, Shiga, Japan) using the specific primers listed in Supplementary Table 1. The DNA  
133 fragments were assembled using a GeneArt<sup>®</sup> Seamless Cloning and Assembly Kit  
134 (Thermo Fisher Scientific, Waltham, MA, USA). The constructed plasmid was then

transformed into *E. coli* XL-10 Gold, and the inserted DNA region was amplified by PCR. The products were used to construct mutant strains by double-crossover recombination with the synthesized competence-stimulating peptide-2. The mutation was confirmed by PCR amplification of genomic DNA isolated from the mutant strain.

## Cell culture

Human promyelocytic leukemia cells (HL-60, RCB0041) were purchased from RIKEN Cell Bank (Ibaraki, Japan). HL-60 cells were maintained in RPMI 1640 medium (Thermo Fisher Scientific) supplemented with 10% FBS, and were incubated at 37°C in 5% CO<sub>2</sub>. HL-60 cells were differentiated into neutrophil-like cells for 5 days in culture media containing 1.2% DMSO (30, 31). Cell differentiation was confirmed by nitro blue tetrazolium reduction assay (30).

Human TLR2/NF-κB/SEAP stably transfected HEK293 cells and human TLR4/MD-2/CD14/NF-κB/SEAP stably transfected HEK293 cells (Novus Biologicals, Centennial, CO, USA, currently sold by InvivoGen, San Diego, CA, USA) were maintained in DMEM with 4.5 g/L glucose, 10% FBS, 4 mM L-glutamine, 1 mM

151 sodium pyruvate, 100 units/mL penicillin, 100 µg/mL streptomycin, 10 µg/mL  
152 blasticidin, and 500 µg/mL G418 and DMEM with 4.5 g/L glucose, 10% FBS, 4 mM  
153 L-glutamine, 1 mM sodium pyruvate, 100 units/mL penicillin, 100 µg/mL streptomycin,  
154 10 µg/mL blasticidin, 2 µg/mL puromycin, 200 µg/mL zeocin, and 500 µg/mL G418,  
155 respectively. A secreted alkaline phosphatase reporter assay was performed according to  
156 the manufacturer's instructions (Novus Biologicals).

157

## 158 **Phylogenetic analysis**

159 Phylogenetic analysis was performed as described previously (17, 32, 33), with  
160 minor modifications. Briefly, homologues and orthologues of the *pfbA* gene were  
161 searched using tBLASTn (34). The sequences were aligned using Phylogears2 (35, 36)  
162 and MAFFT v.7.221 with an L-INS-i strategy (37), and ambiguously aligned regions  
163 were removed using Jalview (38, 39). The best-fitting codon evolutionary models for  
164 phylogenetic analyses were determined using Kakusan4 (40). Bayesian Markov chain  
165 Monte Carlo analyses were performed with MrBayes v.3.2.5 (41), and  $4 \times 10^6$   
166 generations were sampled after confirming that the standard deviation of split

frequencies was  $< 0.01$ . To validate phylogenetic inferences, maximum likelihood phylogenetic analyses were performed with RAxML v.8.1.20 (42). Phylogenetic trees were generated using FigTree v.1.4.2 (43) based on the calculated data.

### **Human neutrophil and monocyte preparation**

Human blood was obtained via venipuncture from healthy donors after obtaining informed consent. The protocol was approved by the institutional review boards of Osaka University Graduate School of Dentistry (H26-E43). Human neutrophils and monocytes were prepared using Polymorphprep (Alere Technologies AS, Oslo, Norway), according to the manufacturer's instructions. Human blood was carefully layered on the Polymorphprep solution in centrifugation tubes, which were then centrifuged at  $450 \times g$  for 30 min in a swing-out rotor at  $20^{\circ}\text{C}$ . Monocyte and neutrophil fractions were transferred into tubes containing ACK buffer (0.15 M  $\text{NH}_4\text{Cl}$ , 0.01 M  $\text{KHCO}_3$ , 0.1 mM EDTA), then centrifuged, washed in phosphate-buffered saline, and resuspended in RPMI 1640 medium.

### 183 **Neutrophil bactericidal assays**

184       The pneumococcal cells grown to the mid-log phase were resuspended in PBS.

185       TIGR4 strains ( $3-11 \times 10^3$  CFUs/well) with or without rPfbA (0, 10, or 100 nM) were

186       combined with human neutrophils or neutrophil like-differentiated HL-60 cells ( $2 \times 10^5$

187       cells/well), and R6 strains ( $1.4-2.0 \times 10^2$  CFUs/well) were combined with human

188       neutrophils ( $1 \times 10^5$  cells/well). The mixture was incubated at 37°C in 5% CO<sub>2</sub> for 1, 2,

189       and 3 h. Viable cell counts were determined by plating diluted samples onto TS blood

190       agar. The growth index was calculated as the number of CFUs at the specified time

191       point/number of CFUs in the initial inoculum. Bacterial phagocytosis was blocked by

192       addition of cytochalasin D (20 µM), and pneumococcal killing was blocked by protease

193       inhibitor cocktail set V (Merck, Darmstat, Germany; 500 µM AEBSF, 150 nM

194       Aprotinin, 1 µM E-64, and 1 µM leupeptin hemisulfate, EDTA-free) at 1 h before

195       incubation. To determine whether TLR2 and TLR4 signaling affect pneumococcal

196       survival, 100 µM TIRAP (TLR2 and TLR4) inhibitor peptide or control peptide (Novus

197       Biologicals) were added to neutrophils at 1 h before incubation.

198

## Time-lapse microscopic analysis

For time-lapse observations, isolated neutrophils were resuspended in RPMI 1640 at  $1 \times 10^6$  cells/mL. Next, 10  $\mu$ L of *S. pneumoniae* R6 wild type or  $\Delta pfbA$  strains ( $1 \times 10^6$  CFUs) was added to 2 mL of the cells, and the mixture was incubated and observed at 37°C. Time-lapse images were captured using an Axio Observer Z1 microscope system (Carl Zeiss, Oberkochen, Germany).

## Flow cytometric analysis of phagocytes

Recombinant PfbA (rPfbA) or BSA was coated onto 0.5- $\mu$ m-diameter fluorescent beads (FluoroSphere, Thermo Fisher Scientific), according to the manufacturer's instructions. rPfbA was purified as previously described (22). Isolated neutrophils or monocytes were then resuspended in RPMI 1640 at  $1.0 \times 10^7$  cells/mL, after which 900  $\mu$ L of RPMI 1640 containing 1  $\mu$ L of rPfbA-, BSA-, or non-coated fluorescent beads was added to 100  $\mu$ L of cells, and then the mixtures were rotated at 37°C for 1 h. The cells were washed twice and fixed with 2% glutaraldehyde-RPMI 1640 at 37°C for 1 h, then washed again three times and analyzed with a CyFlow flow cytometer (Sysmex,

Hyogo, Japan) using FlowJo software ver. 8.3.2 (BD Biosciences, Franklin Lakes, NJ, USA).

# **TLR2/4 SEAPorter assay**

HEK cells expressing TLR2 or TLR4 were stimulated with *S. pneumoniae* and/or rPfbA for 16 h, according to the manufacturer's instructions (Novus Biologicals). To avoid the effect of bacterial replication on this assay, *S. pneumoniae* were pasteurized by incubation at 56°C for 30 min. To perform the assay under the same condition, rPfbA was also incubated at 56°C for 30 min. Lipopolysaccharides from *Escherichia coli* O111:B4 (Sigma-Aldrich Japan Inc., Tokyo, Japan) for the TLR-4 cell line and Pam3CSK4 and Zymozan (Novus Biologicals) for the TLR-2 cell line were used as positive controls under the same conditions. Secreted alkaline phosphatase (SEAP) was analyzed using the SEAPorter Assay (Novus Biologicals) according to the manufacturer's instructions. Quantitative data (ng/mL) were obtained using a standard curve for the SEAP protein.



## 231     **RNA extraction and miRNA array**

232             We performed microRNA array analysis using neutrophil like-differentiated HL60  
233     cells incubated with *S. pneumoniae* strains and/or 100 nM rPfbA for 1 h. We compared  
234     rPfbA-treated and non-treated cells, wild type and  $\Delta pfbA$ -infected cells, and  $\Delta pfbA$  with  
235     and without rPfbA-infected cells. In each cell sample, six replicates were pooled and  
236     total RNA including microRNA was isolated from the pooled cells by miRNeasy Mini  
237     Kit (Qiagen, Hilden, Germany). Approximately 1000 ng RNA was used for microarray  
238     analysis using Affymetrix GeneChip miRNA 4.0 arrays (Affymetrix, Santa Clara, CA,  
239     USA) through Filgen Inc. (Nagoya, Japan). Briefly, the quality of total RNA was  
240     assessed using a Bioanalyzer 2100 (Agilent). Hybridization was performed using a  
241     FlashTag Biotin HSR RNA Labeling Kit, GeneChip Hybridization Oven 645, and  
242     GeneChip Fluidics Station 450. The arrays were scanned by Affymetrix GeneChip  
243     Scanner 3000 7G. The GeneChip miRNA 4.0 arrays contain 30,424 total mature  
244     miRNA probe sets including 2,578 mature human miRNAs, 2,025 pre-miRNA human  
245     probes, and 1,196 Human snoRNA and scaRNA probe sets.

246

## 247 **Mouse infection assays**

248        Mouse infection assays were performed as previously described (17, 33, 44, 45).

249        For the lung infection model, CD-1 mice (Slc:ICR, 8 weeks, female) were infected

250        intratracheally with  $4.3\text{-}6.7 \times 10^6$  CFUs of *S. pneumoniae*. For intratracheal infection,

251        the vocal cords were visualized using an operating otoscope (Welch Allyn, NY, USA),

252        and 40  $\mu\text{L}$  of bacteria was placed onto the trachea using a plastic gel loading pipette tip.

253        Mouse survival was monitored twice daily for 14 days. At 24 h after intratracheal

254        infection, bronchoalveolar lavage fluid (BALF) was collected following perfusion with

255        PBS.

256        For the sepsis model, CD-1 mice (Slc:ICR, 8 weeks, female) were infected

257        intravenously with  $3.3\text{-}6.5 \times 10^5$  CFUs of *S. pneumoniae* via the tail vein. Mouse

258        survival was monitored twice daily for 14 days. At 24 and 48 h after infection, blood

259        aliquots were collected from mice following induction of general euthanasia. Brain,

260        lung, and liver samples were collected following perfusion with PBS. Brain and lung

261        whole tissues as well as the anterior segment of the liver were resected. Bacterial counts

262        in the blood as well as organ homogenates were determined by separately plating serial

dilutions, with organ counts corrected for differences in organ weight. Detection limits were 50 CFUs/organ and 50 CFUs/mL in blood.

The concentrations of TNF- $\alpha$  in BALF and plasma were determined using a Duoset<sup>®</sup> ELISA Kit (R&D Systems, Minneapolis, MN, USA). Mice plasma was obtained by centrifuging the heparinized blood. All mouse experiments were conducted in accordance with animal protocols approved by the Animal Care and Use Committees at Osaka University Graduate School of Dentistry (28-002-0).

## Statistical analysis

Statistical analysis of *in vitro* and *in vivo* experiments was performed using a nonparametric analysis, Mann-Whitney *U* test, or Kruskal-Wallis test with Dunn's multiple comparisons test. Mouse survival curves were compared using a log-rank test.  $p < 0.05$  was considered to indicate a significant difference. The tests were carried out with Graph Pad Prism version 6.0h (GraphPad Software, Inc., San Diego, CA, USA).

## 277     **Results**

### 278     **The *pfbA* gene is specific to *S. pneumoniae* among mitis group *Streptococcus***

279             We searched *pfbA*-homologues by tBLASTn and performed phylogenetic analysis  
 280     (Fig. 1 and Supplementary Fig. 1). The *pfbA* gene homologues were identified in *S.*  
 281     *pneumoniae*, *Streptococcus pseudopneumoniae*, and *Streptococcus merionis*. Although  
 282     16S rRNA sequences cannot distinguish mitis group species, the 16S rRNA of  
 283     *Streptococcus* sp. strain W10853 showed 99.387% identity to that of *S.*  
 284     *pseudopneumoniae*. Interestingly, *S. pneumoniae*-related species such as *Streptococcus*  
 285     *mitis* and *Streptococcus oralis* did not contain the homologues, whereas *S. merionis* had  
 286     a gene of which the query cover and identity were over 50%. *S. merionis* strain  
 287     NCTC13788 (also known as WUE3771, DSM 19192, and CCUG 54871), isolated from  
 288     the oropharynges of Mongolian jirds (*Meriones unguiculatus*), contained 16S rRNA that  
 289     belongs in a cluster distinct from the mitis group (46). This result indicates that the *pfbA*  
 290     gene is specific to *S. pneumoniae* and *S. pseudopneumoniae* in the mitis group.

291

### 292     **PfbA contributes to evasion of neutrophil killing**

293 To investigate whether PfbA contributes to evasion of neutrophil killing, we  
 294 determined pneumococcal survival rates after incubation with human neutrophils. After  
 295 3 h incubation, the TIGR4  $\Delta pfbA$  strain showed a significantly decreased bacterial  
 296 survival rate. In addition, to clarify whether the observed effects were attributed to PfbA,  
 297 we also performed the assay with rPfbA. In the presence of 100 nM rPfbA, TIGR4  
 298  $\Delta pfbA$  strain demonstrated a recovered survival rate nearly equal to that of the wild-type  
 299 strain (Fig. 2A). In pneumococcal survival assays with neutrophil-like differentiated  
 300 HL60 cells, TIGR4 strains showed similar results (Fig. 2B). We also performed the  
 301 assay using the non-encapsulated strain R6 and human neutrophils. The R6  $\Delta pfbA$  strain  
 302 showed significantly decreased survival rates as compared to the wild-type strain after  
 303 incubation for 1, 2, and 3 h (Fig. 2C). As the R6 strain showed this phenotype at earlier  
 304 time points than the TIGR4 strain, we performed pneumococcal survival assays using  
 305 R6 strains with inhibitors (Fig. 2D). Neutrophil phagocytic killing of *S. pneumoniae*  
 306 requires the serine proteases (47). Thus, we used a protein inhibitor cocktail as a  
 307 positive control of a neutrophil killing inhibitor. While the R6  $\Delta pfbA$  strain showed  
 308 significantly decreased survival rates at 1 h after incubation with human fresh

neutrophils in the absence of inhibitors, treatment with an actin polymerization inhibitor, cytochalasin D, reduced the differences among the wild-type and  $\Delta pfbA$  strains as well as the protein inhibitor cocktail. These results indicate that PfbA contributes to pneumococcal evasion of neutrophil phagocytosis.

### **PfbA inhibits neutrophil phagocytosis directly**

We confirmed the anti-phagocytic activity of PfbA using flow cytometry and PfbA-coated fluorescent beads (Fig. 3A). The fluorescence intensity of neutrophils and monocytes incubated with PfbA-coated beads was substantially lower as compared with cells incubated with non- or BSA-coated beads. These results indicated that neutrophils and monocytes phagocytosed the non- and BSA-coated fluorescent beads, whereas the PfbA-coated fluorescent beads escaped phagocytosis by neutrophils and monocytes.

We performed real-time observations for time-lapse analysis of the interaction between *S. pneumoniae* and neutrophils (Fig. 3B). *S. pneumoniae* strain R6 wild-type and  $\Delta pfbA$  strains were separately incubated with fresh human neutrophils in RPMI 1640 medium. After coming into contact with neutrophils, the  $\Delta pfbA$  strain was

phagocytosed within 1 min, whereas the wild-type strain was not phagocytosed after more than 5 min. Time-lapse analysis also showed the  $\Delta pfbA$  strain engulfed by neutrophil phagosomes. These results suggest that PfbA can directly inhibit phagocytosis.

### **PfbA works as a TLR2 ligand and may inhibit phagocytosis through TLR2**

Some lectins of pathogens work as ligand for TLR2 and TLR4 (48). We previously reported that PfbA can interact with glycolipid and glycoprotein fractions of red blood cells, several monosaccharides, D-sucrose, and D-raffinose (26, 27). Hence, to determine whether PfbA works as a TLR ligand, we performed a SEAP assay using HEK-293 cells stably transfected with either TLR2 or TLR4, NF- $\kappa$ B, and SEAP (Fig. 4A). Pam3CSK4 and Zymozan were used as positive controls for the TLR2 ligand, while LPS was used for TLR4. The SEAP assay indicated that pasteurized *S. pneumoniae* TIGR4 wild-type cells activated NF- $\kappa$ B via TLR2, whereas  $\Delta pfbA$  cells did not stimulate cells expressing either TLR2 or TLR4. Pasteurized rPfbA also activated NF- $\kappa$ B dose-dependently through TLR2, but not TLR4. In addition, in the presence of pasteurized rPfbA,  $\Delta pfbA$

cells activated the cells expressing TLR2. Thus, PfbA is responsible for pneumococcal NF- $\kappa$ B activation through TLR2.

Next, to determine whether TLR signaling suppresses survival of pneumococci incubated with neutrophils, we performed a neutrophil survival assay using a TIRAP inhibitor peptide (Fig. 4B). Data are presented as the ratio calculated by dividing CFUs in the presence of inhibitor peptide by CFUs in the presence of control peptide. TIRAP is an adaptor protein involved in MyD88-dependent TLR2 and TLR4 signaling pathways. Since the TIRAP inhibitor peptide blocks the interaction between TIRAP and TLRs, the peptide works as a TLR2 and TLR4 inhibitor. The inhibitor peptide treatment increased survival rates of the  $\Delta pfbA$  strain, but did not affect wild-type survival rates. These results indicate that PfbA contributes to the evasion of neutrophil phagocytosis, and TIRAP inhibitor treatment did not change survival rates of pneumococci incubated with neutrophils. On the other hand, the *S. pneumoniae*  $\Delta pfbA$  strain is more easily phagocytosed by neutrophils as compared to the wild-type strain, and this phenotype is abolished by TIRAP inhibitor.



356 Stimulation of the human monocytic cell line THP1 by a TLR ligand, LPS, induces  
357 miR-146a/b expression in an NF- $\kappa$ B-dependent fashion, and this induction inhibits  
358 innate immune responses (49). In addition, pneumococcal infection of human  
359 macrophages induces expression of several microRNAs, including miR-146a, in a  
360 TLR-2-dependent manner, which prevents excessive inflammation (50). We performed  
361 microRNA array analysis using neutrophil like-differentiated HL60 cells, *S.*  
362 *pneumoniae* strains and rPfbA (Supplementary Fig. 2, Accession number: GSE128341).  
363 We compared rPfbA-treated and non-treated cells, wild type and  $\Delta$ *pfbA*-infected cells,  
364 and  $\Delta$ *pfbA* with and without rPfbA-infected cells. The analysis revealed only one  
365 microRNA, hsa-miR-1281, that was commonly downregulated by 2-fold or greater in  
366 the presence of PfbA as compared to in its absence (Supplementary Fig. 2, magenta  
367 circle). On the other hand, there were no commonly upregulated miRNAs, including  
368 miR-146a/b. In addition, the expression of eight microRNAs was commonly changed in  
369 wild-type infection and  $\Delta$ *pfbA* infection with rPfbA as compared to infection with  
370  $\Delta$ *pfbA* only. Five micro RNAs (hsa-miR-4674, hsa-miR-3613-3p, hsa-miR-4668-5p,  
371 hsa-miR-3197, and hsa-miR-6802-5p) were upregulated, while three (hsa-miR-3935,

hsa-miR-1281, and hsa-miR-3613-5p) were downregulated. However, the role of these miRNAs in infectious process remains unclear.

### **PfbA deficiency reduces pneumococcal burden in BALF but does not alter host survival rate in a mouse pneumonia model**

To investigate the role of PfbA in pneumococcal pathogenesis, we infected mice with *S. pneumoniae* strains intratracheally and compared bacterial CFUs and TNF- $\alpha$  levels in BALF from mice 24 h after infection. There were no differences observed in survival time between mice infected with wild type and  $\Delta pfbA$  strains (Fig. 5A). However, recovered CFUs of wild-type bacteria were significantly greater than those of  $\Delta pfbA$  strains in mouse BALF. In addition, the level of TNF- $\alpha$  in BALF was almost the same in wild type and  $\Delta pfbA$  infection (Fig. 5B).

### **PfbA deficiency increases pneumococcal pathogenicity in a mouse sepsis model**

We also investigated the role of PfbA in mice following intravenous infection as a model of sepsis. In the infection model, the  $\Delta pfbA$  strain showed significantly higher

388 levels of virulence as compared to the wild-type strain (Fig. 6A). Furthermore, we  
389 compared the TNF- $\alpha$  levels in plasma and examined the bacterial burden in blood, brain,  
390 lung, and liver samples obtained at 24 and 48 h after intravenous infection (Fig. 6B, 6C  
391 and Supplementary Fig. 3). At 24 h after infection, TNF- $\alpha$  ELISA findings showed a  
392 significantly greater level in the plasma of *pfbA* mutant strain-infected mice as  
393 compared to the wild-type strain-infected mice. The numbers of CFUs of both the  
394 wild-type and *pfbA* mutant strains in the blood and brain samples were comparable. On  
395 the other hand, in the lung and liver samples, the *pfbA* mutant strain-infected mice  
396 showed slightly but significantly reduced numbers of CFUs as compared with the  
397 wild-type strain-infected mice. At 48 h after infection, there were no significant  
398 differences in TNF- $\alpha$  level and bacterial burden in each organ between the wild-type-  
399 and *pfbA* mutant strain-infected mice (Supplementary Fig. 3). Bacteria were not  
400 detected in the blood of two of the wild-type strain-infected mice and five of the *pfbA*  
401 mutant strain-infected mice. Meanwhile, three of the wild-type strain-infected mice  
402 yielded more than  $10^6$  CFUs/mL, while seven of the wild-type strain-infected mice did.

403 The *pfbA* mutant strain infection caused a polarized bacterial burden in the host at 48 h  
404 after infection as compared to wild type infection.

## 405 Discussion

406 In the present study, we found that *pfbA* is a pneumococcal-specific gene that  
 407 contributes to evasion of neutrophil phagocytosis. We determined that PfbA can activate  
 408 NF- $\kappa$ B through TLR2. TIRAP inhibition increased the survival rate of  $\Delta$ *pfbA* strain  
 409 incubated with neutrophils, while this inhibition did not affect a wild-type strain  
 410 survival. In a mouse model with lung infection, the bacterial burden of the  $\Delta$ *pfbA* strain  
 411 was significantly reduced as compared with that of wild-type strain, but the TNF- $\alpha$  level  
 412 was comparable between the strains. Overall, there was no significant difference in the  
 413 survival rates of mice infected with the wild-type *S. pneumoniae* strain- and those  
 414 infected with the  $\Delta$ *pfbA* strain. Furthermore, in a mouse model with blood infection, the  
 415  $\Delta$ *pfbA* strain showed a significantly higher TNF- $\alpha$  level than the wild-type strain. These  
 416 results suggest that PfbA may suppress the host innate immune response by acting as an  
 417 anti-phagocytic factor interacting with TLR2.

418 Prior studies have shown that *S. pneumoniae* under selective pressure can adapt to  
 419 the environment by importing genes from other related streptococci, such as those in the  
 420 mitis group (51-54). Although *S. mitis* and *S. oralis* are oral commensal bacteria, these

421 species contain various pneumococcal virulence factor homologues. Some mitis group  
 422 strains harbor several choline-binding proteins including autolysins, pneumolysin,  
 423 sialidases, and others (11, 55, 56). In this study, we found that *pfbA* homologues were  
 424 absent among mitis group strains without *S. pneumoniae* for which whole genome  
 425 sequences were available, whereas the *pfbA* gene is highly conserved among  
 426 pneumococcal strains. Interestingly, a streptococcal species with clear evolutionary  
 427 separation from the mitis group, *S. merionis*, contained a *pfbA* orthologue. This result  
 428 indicates that *pfbA* is a pneumococcal-specific gene and that ancestral *S. pneumoniae*  
 429 likely obtained the gene by horizontal gene transfer from non-mitis group streptococcal  
 430 species.

431 Although lipoproteins are major TLR2 ligands as well as peptidoglycans in *S.*  
 432 *pneumoniae* (19), we found that rPfbA can activate NF- $\kappa$ B solely in HEK293 cells  
 433 expressing TLR2, but not those expressing TLR4. Since *E. coli* does not have the  
 434 capacity to glycosylate proteins (57), rPfbA-mediated TLR2 activation would be  
 435 independent of pneumococcal glycosylation. Plant and pathogen lectins can induce  
 436 NF- $\kappa$ B activation through binding to TLR2 *N*-glycans, while a classical ligand such as

Pam3CSK4 can activate NF- $\kappa$ B glycan-independently (48). TLR2 has four *N*-glycans whose structures still remain unknown, and the *N*-glycans are critical for the lectins to induce TLR2-mediated activation (48). PfbA binds to various carbohydrates via the groove residues in the  $\beta$ -helix (26, 27). There is a possibility that PfbA induces TLR2 signaling by binding to TLR2 *N*-glycans.

Human macrophages challenged with *S. pneumoniae* induce a negative feedback loop, preventing excessive inflammation via miR-146a and potentially other miRNAs on the TLR2-MyD88 axis (50). On the other hand, pneumococcal endopeptidase O enhances macrophage phagocytosis in a TLR2- and miR-155-dependent manner (58). Furthermore, miR-9 is induced by TLR agonists and functions in feedback control of the NF- $\kappa$ B-dependent responses in human monocytes and neutrophils (59). These studies indicate that host phagocytes are regulated by a complex combination of pattern recognition receptor signaling and miRNA induction. We predicted that PfbA suppresses phagocytosis via the induction of miRNAs in a TLR2 dependent fashion. However, an miRNA array showed that the levels of the involved miRNAs were not changed over 2-fold in the presence or absence of PfbA. One possible hypothesis is that

453 PfbA induces different miRNA responses from classical TLR ligands via  
 454 glycan-dependent recognition. Although PfbA can downregulate miR-1281 in  
 455 differentiated HL-60 cells, the role of miR-1281 in phagocytes remains unclear. Further  
 456 comprehensive studies are required to investigate the role of miRNAs in host innate  
 457 immunity.

458 Unexpectedly, our mouse pneumonia and sepsis models indicated that *pfbA*  
 459 deficiency reduces pneumococcal survival in the host, but does not decrease or  
 460 increases host mortality. We previously reported that PfbA works as an adhesin and  
 461 invasin of host epithelial cells (22). The reduction of bacterial burden in host organs can  
 462 be explained by the synergy of adhesive and anti-phagocytic abilities. On the other hand,  
 463 the *S. pneumoniae*  $\Delta$ *pfbA* strain showed equivalent or greater induction of inflammatory  
 464 cytokines as compared with the wild-type strain. Generally, a deficiency of TLR ligands  
 465 would suppress inflammatory responses. However, a deficiency of PfbA would cause  
 466 more efficient bacterial uptake by phagocytes and promote inflammatory responses. In  
 467 addition, there is a possibility that the negative feedback loop induced by PfbA is lost  
 468 and causes excess inflammation. High mortality does not mean bacterial success, as



host death leads to the limitation of bacterial reproduction. PfbA may be beneficial for pneumococcal species by increasing the bacterial reproductive number through suppression of host cell phagocytosis and host mortality. PfbA showed high specificity for and conservation in *S. pneumoniae* species. The assumed negative feedback loop may not be as significant in non-pathogenic mitis group *Streptococcus*.

In single toxin-induced infectious diseases such as diphtheria and tetanus, highly safe and protective vaccines are established. On the other hand, in multiple factor-induced diseases such as those caused by *S. pneumoniae*, *S. pyogenes*, and so on, there are either no approved vaccines or existing vaccines still need optimization. Our study indicates that PfbA is a pneumococcal specific cell surface protein, which contributes to evasion from phagocytosis. Therefore, PfbA would not be suitable as a vaccine antigen, since the protein suppresses pneumococcal virulence in a mouse sepsis model. Further investigation of the intricate balance between host immunity and pathogenesis is required to establish the basis for drug and vaccine design.

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491

## 492 **Author contributions**

493       M.Y. and S.K. designed the study. M.Y. performed bioinformatics analyses. M.Y.,  
494       Y.H., M.T., and M.O. performed the experiments. M.Y., T.S., M.N., Y.T., and S.K.  
495       contributed to the setup of the experiments. M.Y. wrote the manuscript. Y.H., M.T.,  
496       M.O., T.S., M.N., Y.T., and S.K. contributed to the writing of the manuscript.

497

## 498 **Conflict of interest**

499       The authors declare that they have no competing interests.

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## Figure Legends

### **Figure 1. Bayesian phylogenetic analysis of the *pfbA* gene.**

The codon-based Bayesian phylogenetic relationship was calculated using the MrBayes program. Strains with identical sequences are listed on the same branch. The percentage of posterior probabilities is shown near the nodes. The scale bar indicates nucleotide substitutions per site.

### **Figure 2. PfbA contributes to pneumococcal survival after incubation with**

**neutrophils. A.** Growth of TIGR4 strains incubated with human fresh neutrophils. **B.**

Growth of TIGR4 strains incubated with neutrophil-like differentiated HL-60 cells.

Bacterial cells were incubated with human neutrophils or differentiated HL-60 cells in

the presence or absence of rPfbA for 1, 2, and 3 h at 37°C in a 5% CO<sub>2</sub> atmosphere.

Next, the mixture was serially diluted and plated on TS blood agar. Following

incubation, the number of CFUs was determined. Growth index was calculated by

dividing CFUs after incubation by CFUs of the original inoculum. **C.** Growth of R6

strains incubated with human fresh neutrophils. *S. pneumoniae* strains were added to

human neutrophils without serum and gently mixed for 1, 2, or 3 h at 37°C. Next, the mixtures were serially diluted and plated on TS blood agar. After incubation, the number of CFUs was determined. **D.** Growth of R6 strains incubated with human fresh neutrophils in the presence of inhibitors. *S. pneumoniae* strains were added to human neutrophils with or without cytochalasin D, or protease inhibitor cocktail in the absence of serum, then gently mixed for 1 h at 37°C. The percent bacterial survival was calculated based on viable counts relative to the wild-type strain. These data are presented as the mean values of six samples, with S.E. values represented by vertical lines. Differences between several groups were analyzed using a Kruskal-Wallis test followed by Dunn's multiple comparisons test (A, B). The Mann-Whitney's U test was used to compare differences between two independent groups (C, D). Three experiments were performed, with data from a representative experiment is shown.

**Figure 3. PfbA suppresses host cell phagocytosis. A.** Uptake of fluorescent

PfbA-coated beads by neutrophils and monocytes. Human neutrophils and monocytes were separately incubated with PfbA-, BSA-, or non-coated fluorescent beads for 1 h at

37°C. Phagocytic activities were analyzed using flow cytometry. Data are presented as histograms. The value shown for the percent of maximum was determined by dividing the number of cells in each bin by the number of cells in the bin that contained the largest number of cells. The bin is shown as a numerical range for the parameter on the X-axis. **B.** Time-lapse analysis of the interaction between *S. pneumoniae* and neutrophils. *S. pneumoniae* wild-type and  $\Delta pfbA$  strains were incubated with neutrophils. The elapsed times from contact with neutrophils are shown in the upper part of the figures. Arrows indicate when *S. pneumoniae* cells contacted neutrophils. Arrowheads indicate *S. pneumoniae* engulfed by a neutrophil phagosome.

**Figure 4. PfbA activates NF- $\kappa$ B via TLR2, and TLR2/4 inhibitor enhances  $\Delta pfbA$  strain survival.** **A.** Secreted alkaline phosphatase (SEAP) porter assay using TLR2/NF- $\kappa$ B/ SEAPorter or TLR4/MD-2/CD14/NF- $\kappa$ B SEAPorter HEK293 cell lines. The cells were plated in 24-well plates at  $5 \times 10^5$  cells/well. After 24 h, cells were stimulated with various amount of rPfbA, pasteurized *S. pneumoniae* ( $\sim 5 \times 10^6$  CFU), 1  $\mu$ g/mL Pam3CSK4, 10  $\mu$ g/mL Zymozan, or 25 ng/mL LPS for 24 h. SEAP was

analyzed using the SEAPorter Assay Kit. Data are presented as the mean of six wells. SE values are represented by vertical lines. Differences in pneumococcal infection group and rPfbA addition group were analyzed using a Kruskal-Wallis test followed by Dunn's multiple comparisons test, respectively. **B.** TLR2/4 inhibitor peptide enhances survival of the TIGR4  $\Delta pfbA$  strain incubated with human neutrophils. *S. pneumoniae* TIGR4 wild type strain or  $\Delta pfbA$  strain bacteria were incubated with human neutrophils in the presence of TLR2/4 inhibitor peptide or control peptide. After 1, 2, and 3 h, the mixture was serially diluted and plated on TS blood agar. Following incubation, the number of CFUs was determined. The CFU ratio was calculated by dividing CFUs in the presence of inhibitor peptide by CFUs in the presence of control peptide. Data are presented as the mean of six wells. S.E. values are represented by vertical lines. Differences between groups were analyzed using Mann-Whitney's U test.

**Figure 5. In a mouse pneumonia model, deficiency of *pfbA* decreases pneumococcal burden in the lung but does not affect host mortality. A.** CD-1 mice were infected

intratracheally with the *S. pneumoniae* TIGR4 wild-type or  $\Delta pfbA$  strain ( $3-18 \times 10^6$  CFUs). Mice survival was recorded for 14 days. The differences between groups were analyzed using a log-rank test. **B.** Bacterial CFUs and TNF- $\alpha$  in BALF collected from CD-1 mice after intratracheal infection with *S. pneumoniae*. CD-1 mice were infected intratracheally with the *S. pneumoniae* TIGR4 wild type or  $\Delta pfbA$  strain ( $4-7 \times 10^6$  CFUs). BALF was collected at 24 h after pneumococcal infection, and bacterial CFUs and TNF- $\alpha$  levels in the BALF were determined. S.E. values are represented by vertical lines. Statistical differences between groups were analyzed using Mann-Whitney's U test. The data obtained from three independent experiments were pooled.

**Figure 6. In a mouse sepsis model, the deficiency of *pfbA* increases the virulence and TNF- $\alpha$  level in blood but decreases the bacterial burden in the lung and liver.**

CD-1 mice were infected intravenously with the *S. pneumoniae* TIGR4 wild type or  $\Delta pfbA$  strain ( $3-6 \times 10^6$  CFUs). **A.** Mouse survival was monitored for 14 days. Statistical differences between groups were analyzed using a log-rank test. **B.** CD-1 mice were infected intravenously with the *S. pneumoniae* TIGR4 wild type or  $\Delta pfbA$

772 strain ( $6-9 \times 10^6$  CFUs). Plasma samples were collected from these mice at 24 h after  
 773 infection. Values are presented as the mean of 16 or 18 samples. Vertical lines represent  
 774 the mean  $\pm$  S.E. Statistical differences between groups were analyzed using  
 775 Mann-Whitney's U test. **C.** The bacterial burden in the blood, brain, lung, and liver  
 776 were assessed after 24 h of infection. S.E. values are represented by vertical lines. All  
 777 mice were perfused with PBS after blood collection, organ samples were collected.  
 778 Statistical differences between groups were analyzed using Mann-Whitney's U test. The  
 779 mouse survival data were obtained from three independent experiments, and the TNF- $\alpha$   
 780 level and bacterial burden values obtained from two independent experiments were  
 781 pooled.  
 782

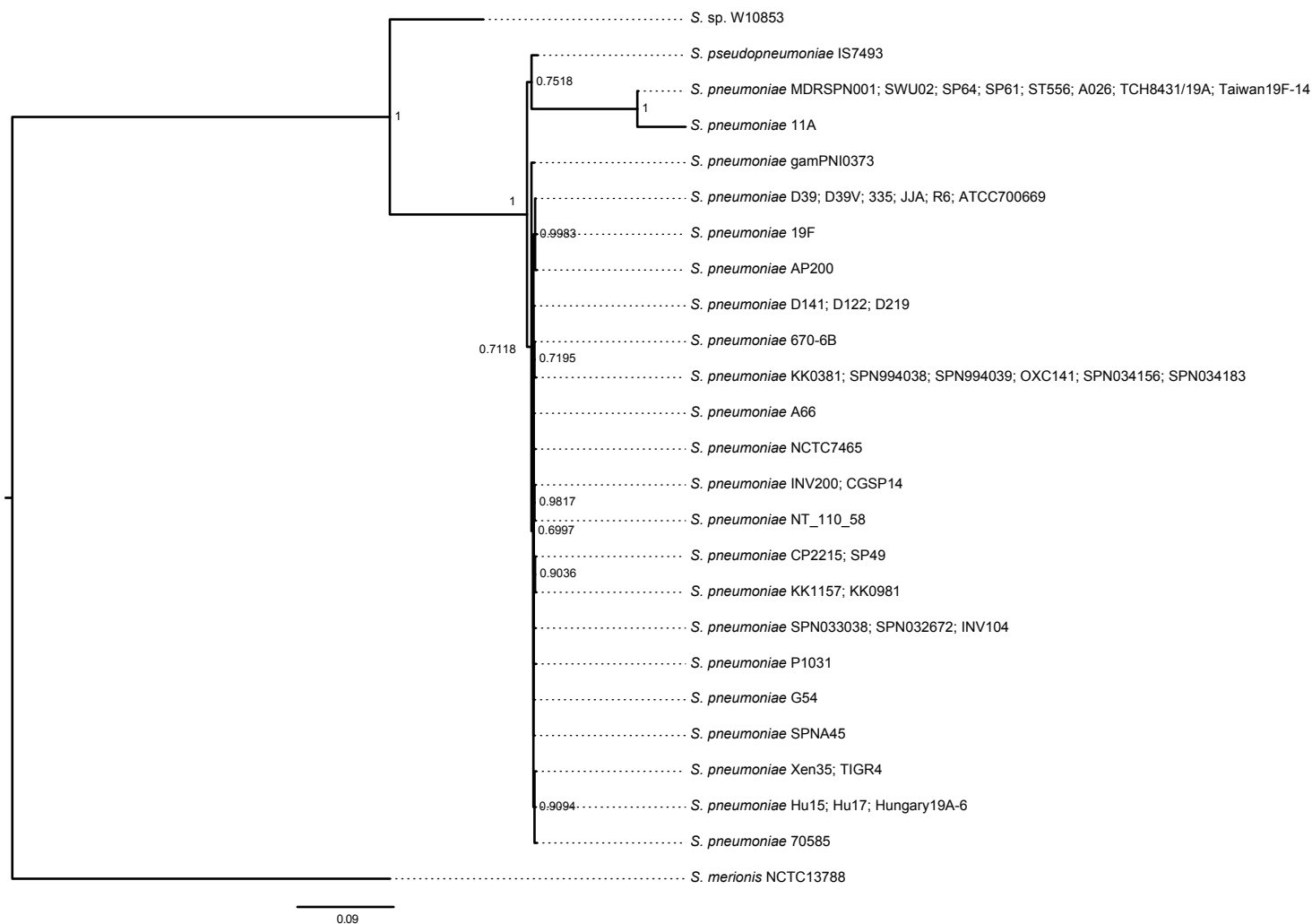


Figure 1. Yamaguchi *et al.*

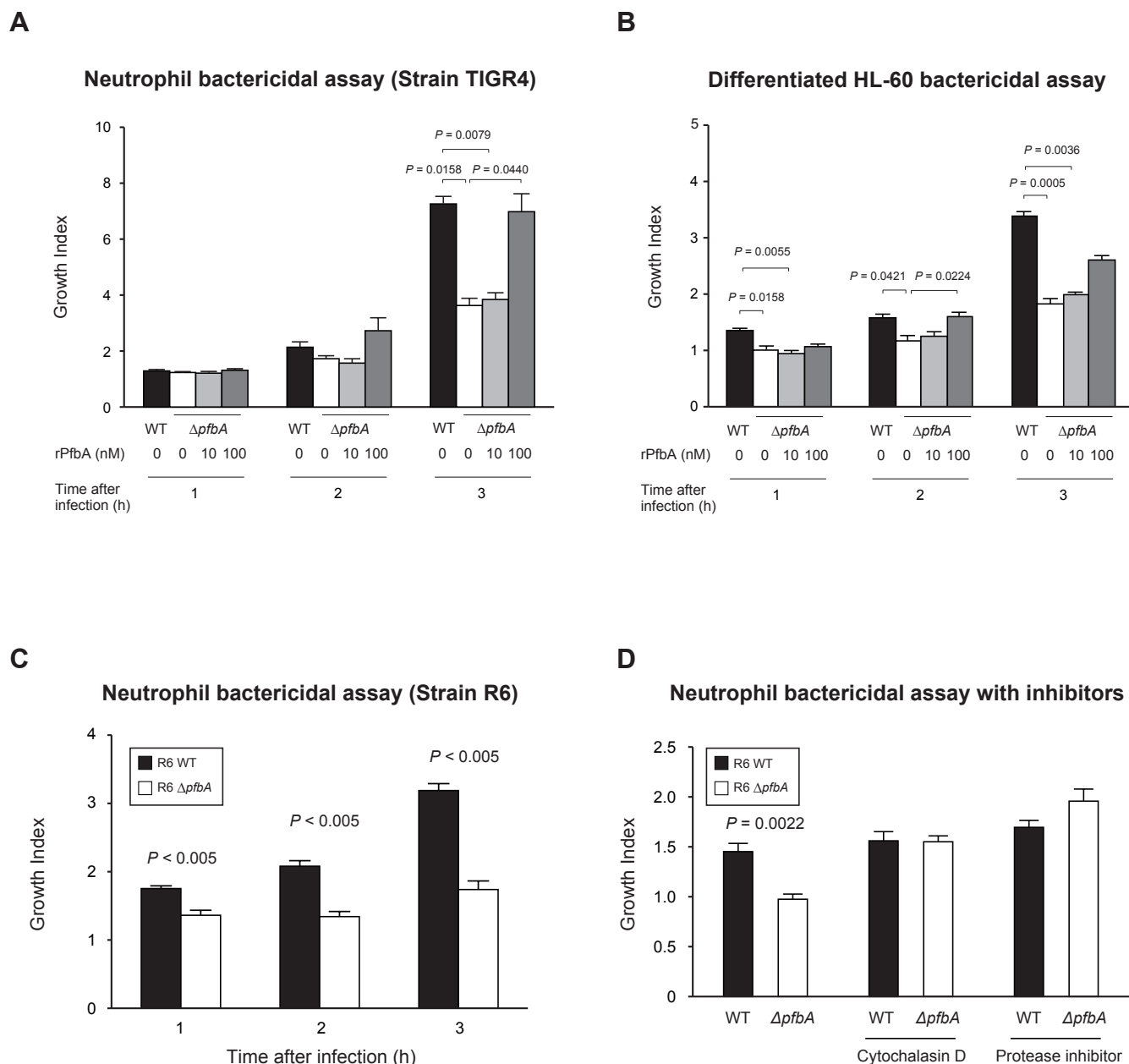
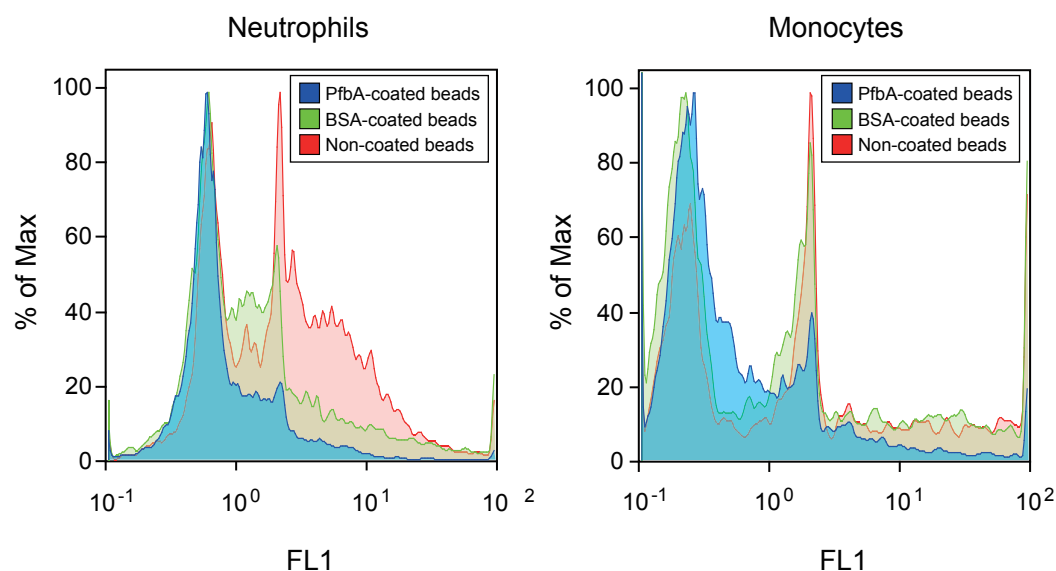


Figure 2. Yamaguchi *et al.*



**A**



**B**

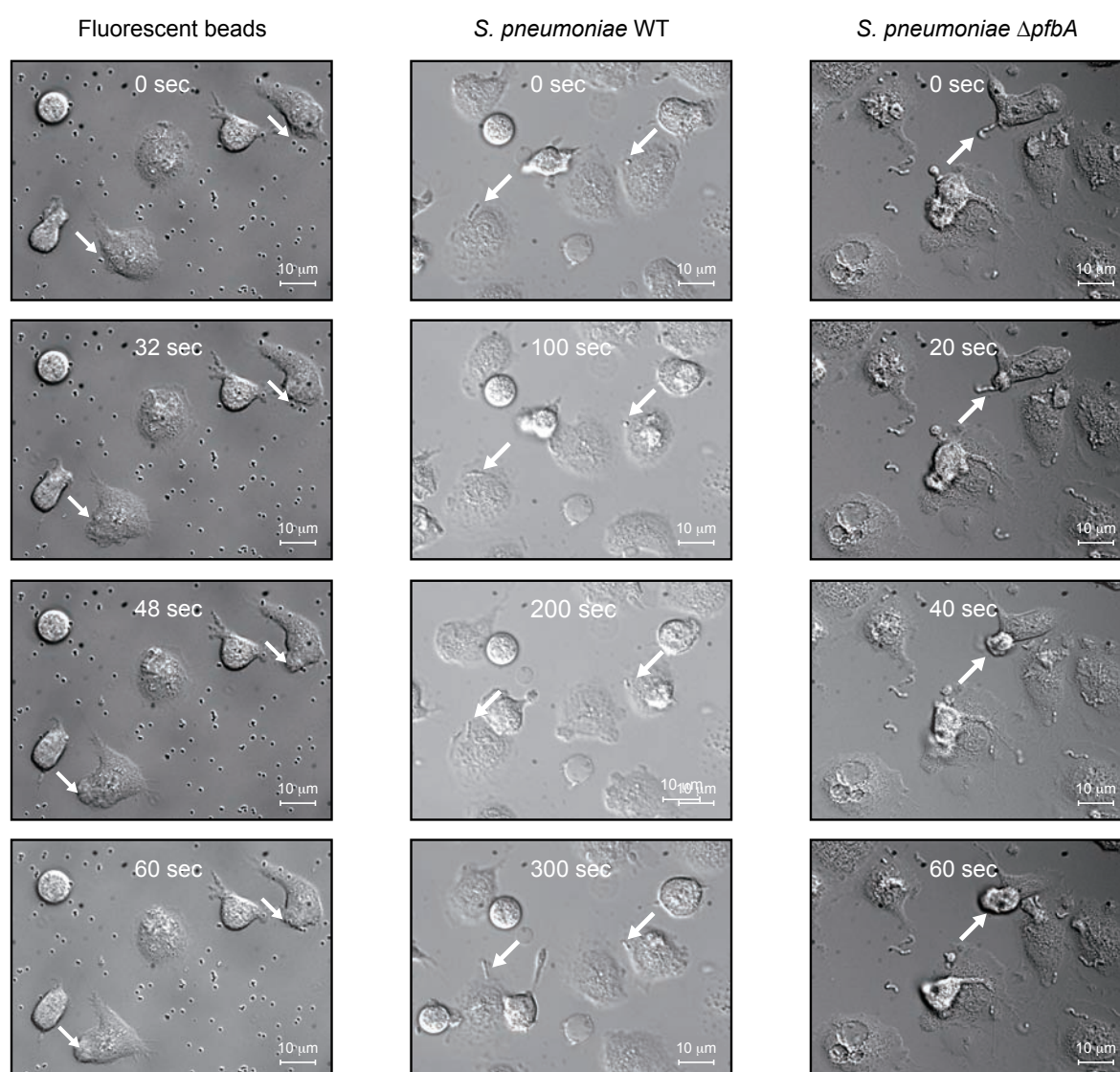
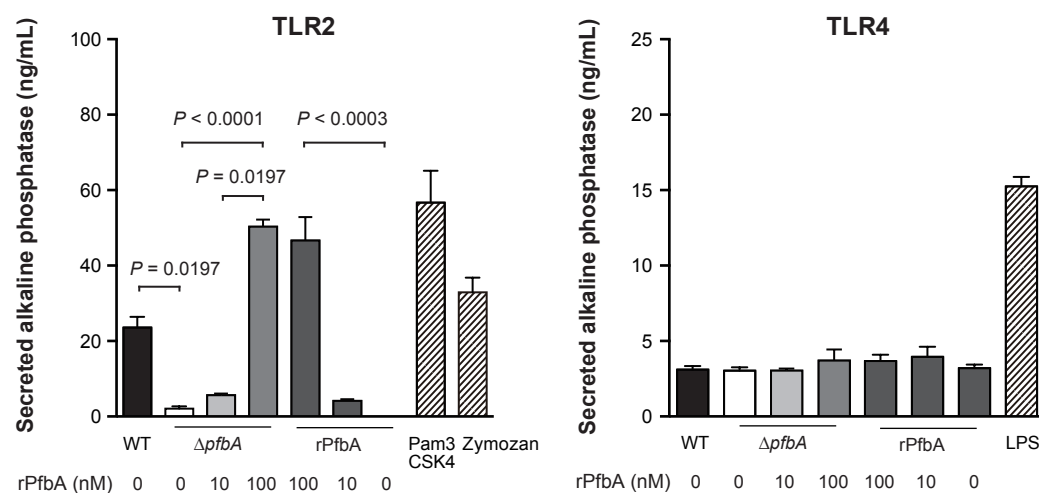


Figure 3. Yamaguchi *et al.*

**A**



**B**

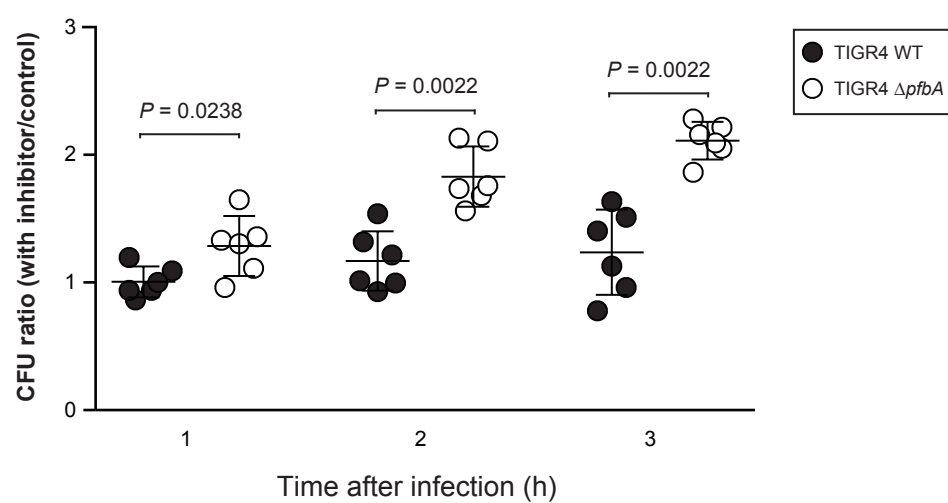
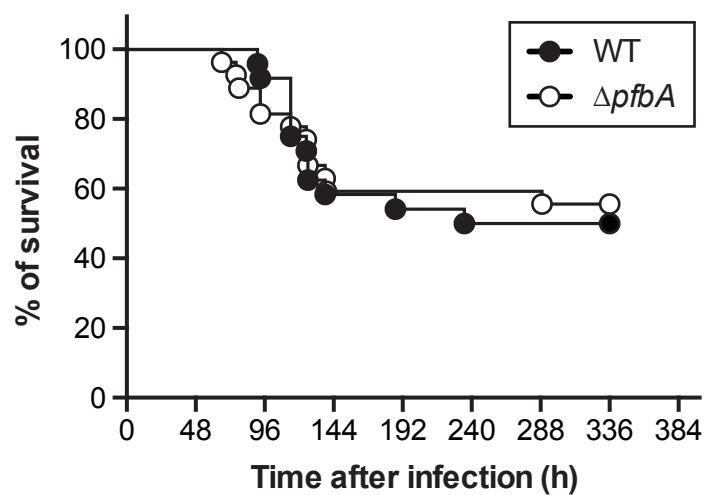


Figure 4. Yamaguchi *et al.*

**A**



**B**

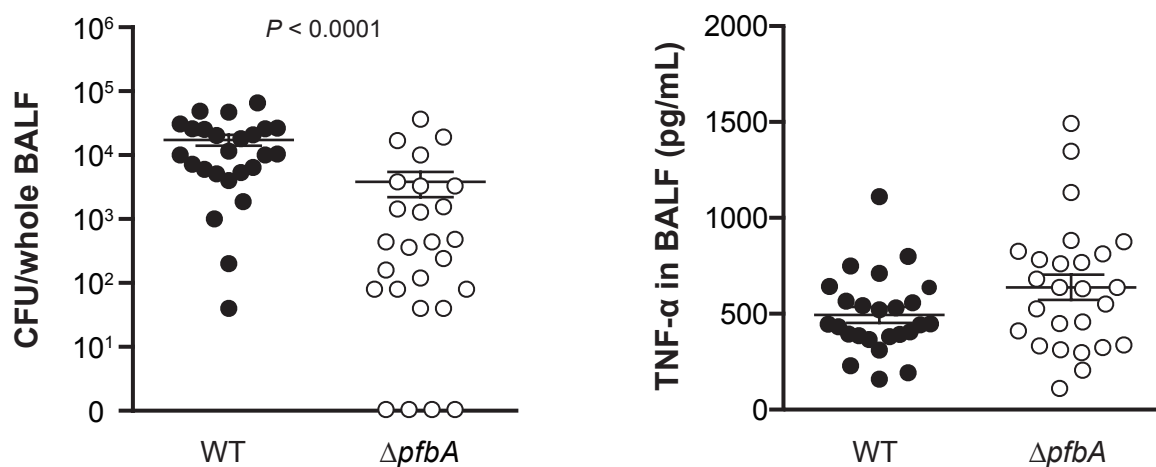


Figure 5. Yamaguchi *et al.*

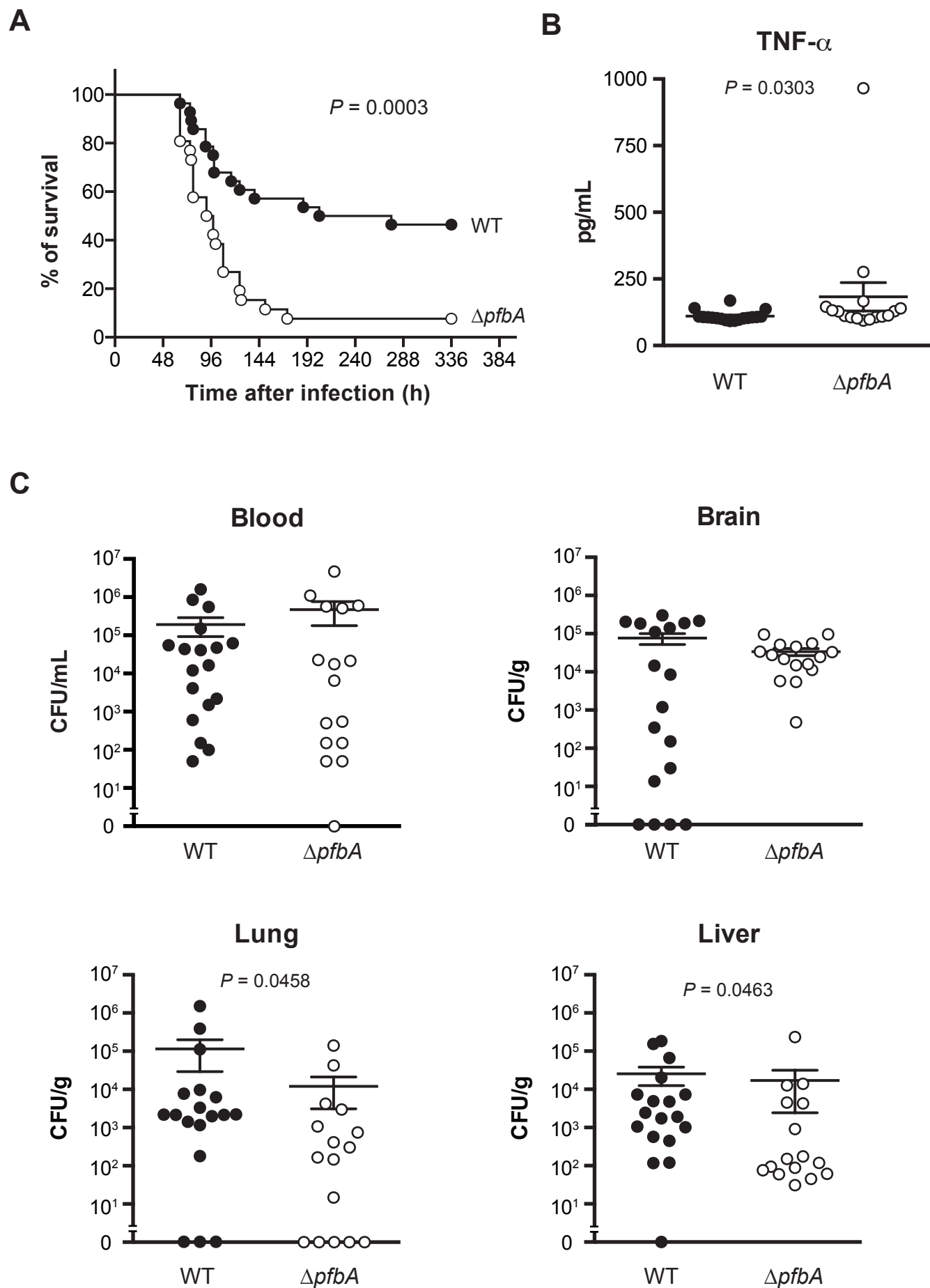


Figure 6. Yamaguchi *et al.*