

## Expression and characterization of cholera toxin B—pneumococcal surface adhesin A fusion protein in *Escherichia coli*: ability of CTB-PsaA to induce humoral immune response in mice

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### Abstract

Cholera toxin B subunit (CTB) is responsible for CT holotoxin binding to the cell and has been described as a mucosal adjuvant for vaccines. In this work, the *ctxB* gene was genetically fused to the *psaA* gene from *Streptococcus pneumoniae*, a surface protein involved in its colonization in the host that is also considered a vaccine antigen candidate against this pathogen. The CTB-PsaA fusion protein was expressed in *Escherichia coli*, and the purified protein was used for intranasal immunization experiments in Balb/C mice. CTB-PsaA was able to induce both systemic and mucosal antibodies evaluated in serum, saliva, and in nasal and bronchial wash samples, showing that CTB-PsaA is a promising molecule to be investigated as *S. pneumoniae* vaccine antigen candidate.

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Cholera toxin B subunit (CTB) is the pentameric non-toxic portion of cholera toxin (CT), responsible for the holotoxin binding to the GM1 ganglioside receptor, a glycolipid that is constitutively expressed in most cells in the body, including leucocytes. CTB is also described as a potent mucosal adjuvant. Chemical conjugations with CTB have been performed using many different heterologous antigens, such as *Schistosoma mansoni* [1] and SIV virus [2] proteins, as well as polysaccharide antigens [3,4] from *Streptococcus pneumoniae*. Coadministered protein antigens from *S. pneumoniae*

with CTB also provided protective immunity against *S. pneumoniae* challenge [5]. In addition, some works have reported genetic fusions of CTB with several antigens, such as epitopes from hepatitis C virus [6] and foot-and-mouth disease virus [7]. Both conjugation and genetic fusion to CTB can elicit strong mucosal antibody responses to the linked antigens. These strategies aimed the delivery of the covalently attached antigens to the mucosal cells, via GM1 ganglioside.

In many developing and developed countries, *S. pneumoniae* is the most important cause of bacterial pneumonia, meningitis, bacteremia, and otitis media [8]. Due to the ineffectiveness of the available polysaccharide vaccine (Pneumovax 23) in young children (<2 years), elderly, and patients with immunodeficiencies,

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such as AIDS [9], a number of protein vaccines have been investigated. In contrast to polysaccharide vaccines, conjugated and protein-based vaccines can elicit a T cell-dependent immune response. In fact, new conjugated vaccines, composed of 7–11 polysaccharides from different prevailing serotypes in USA conjugated with a bacterial toxoid, such as CRM-197, are efficient vaccines in the groups mentioned above [9]. However, besides the high cost of this vaccine, there is also a possibility that large-scale use of the conjugated vaccines may result in a shift in prevailing serotypes from those that are present in the vaccines to those that are not included in the formulation [9]. For these reasons, several pneumococcal surface proteins have been tested as candidate vaccines; one of them is PsaA (Pneumococcal surface antigen A), a highly conserved protein within all 90 pneumococcal serotypes [5]. PsaA appears to have a role in promoting bacterial adhesion to host cells since mutant PsaA<sup>-</sup> pneumococci are avirulent in a mouse model [10–12]. This effect may be due to the absence of some adhesins, such as the choline binding protein A (CbpA) modulated by the presence or absence (in PsaA<sup>-</sup> mutant pneumococci) of Mn<sup>2+</sup> or Zn<sup>2+</sup> [11]. In addition to this, anti-PsaA antibodies naturally developed in humans or when elicited by recombinant PsaA in animals can prevent the adherence of pneumococci to nasopharyngeal epithelial cells [13].

Colonization of the mucosal surface of the human nasopharynx is the crucial first step in the pathogenesis of all pneumococcal diseases, and in the most serious cases, the pathogen can reach the bloodstream [14]. Therefore, stimulation of the mucosal-associated lymphoid tissue (MALT), which releases pathogen-specific secretory immunoglobulin A (sIgA), can prevent both mucosal colonization and pathogen spread into the systemic circulation [3]. In this study, a CTB-PsaA fusion protein was expressed in *Escherichia coli* in an active pentameric form. Purified protein was used to evaluate the ability to induce the systemic and mucosal antibody production.

## Materials and methods

**Cloning steps and screening of the recombinant plasmids.** The *psaA* gene (867 bp), from *S. pneumoniae* serotype 6B (strain 472/96 from the Instituto Adolfo Lutz, São Paulo, Brazil), was amplified from plasmid pCI-*psaA* [15] by PCR. The mixture was subjected to a program consisting of a DNA denaturation step at 94°C for 5 min, 25 cycles at 94°C for 45 s, 58°C for 45 s, and 72°C for 1 min. The following oligonucleotides were used: For: 5' CCC **ACG CGT GCT AGC GGA** AAA AAA GAT ACA ACT TCT GG 3' and Rev: 5' CC **AAG CTT TTA TTT TGC CAA TCC TTC AGC** 3'. In bold are the *MluI* and *HindIII* restriction sites, respectively.

After amplification, the *psaA* fragment was gel-purified using the kit "Concert Gel Purification" (Invitrogen), as described by the manufacturer. The PCR fragment was cloned into the *MluI* and *HindIII* sites of the pAE-ctxB, a construct previously obtained [16], in

order to generate the pAE-ctxB-*psaA* plasmid. The pAE-*psaA* was obtained by the digestion of the construct previously described with *NheI*, present in the upstream regions of both *ctxB* and *psaA* genes, and further religation.

**Expression and purification of the recombinant proteins.** BL21(SI) *E. coli* strain was used to express CTB [16], PsaA, and CTB-PsaA. BL21(SI) *E. coli* competent cells (Invitrogen) were transformed with the pAE-ctxB, pAE-*psaA* or pAE-ctxB-*psaA* plasmids and grown overnight at 30°C. Ampicillin-resistant colonies were inoculated in 5 mL on 2YTON-amp (2YT broth without NaCl) and grown overnight at 30°C. In the following day, cultures were diluted 30-fold in 2YTON-amp and grown until A<sub>600</sub> reached 0.8, when NaCl was added to the medium at a final concentration of 300 mM. After 3 h, cells were harvested by centrifugation and bacterial pellets were lysed by the addition of 1-fold SDS-PAGE sample buffer. Aliquots of total extracts were analyzed by 15% (for CTB) [16], 12% (for PsaA and CTB-PsaA) SDS-PAGE. The best clone was chosen for expression in a larger scale (1 L). Recombinant PsaA and CTB-PsaA were expressed in a soluble form, whereas CTB was recovered from the inclusion bodies [16]. Cells were collected by centrifugation, resuspended in 100 mL lysis buffer, pH 8.0 (100 mmol L<sup>-1</sup> NaCl and 20 mmol L<sup>-1</sup> Tris-Cl), and lysed by French pressure. Cellular lysates were centrifuged at 26,000g for 15 min.

All proteins were expressed with a 6× His tag at N-terminus to facilitate the purification through Ni<sup>2+</sup>-charged column chromatography. After the adsorption of PsaA or CTB-PsaA proteins to Ni<sup>2+</sup> Chelating Sepharose Fast Flow resins (Amersham Biosciences), washes with 10 volumes of binding buffer (100 mmol L<sup>-1</sup> NaCl, 20 mmol L<sup>-1</sup> Tris-Cl, pH 8.0) containing 5, 20, 40, and 60 mmol L<sup>-1</sup> imidazole were performed. Proteins were eluted with 5 volumes of the same solution containing 1 mol L<sup>-1</sup> imidazole. Fractions were analyzed by 12% SDS-PAGE. Proteins were dialyzed in one step. The equilibrium was established using 2 L of a 10 mmol L<sup>-1</sup> Tris-Cl, pH 8.0, 20 mmol L<sup>-1</sup> NaCl, 0.1% (m/v) glycine solution. The CTB purification was made as previously described [16].

**Western blot.** Nitrocellulose membranes, after protein transfer from 15% SDS-PAGE, were blocked with 5% (m/v) non-fat milk in 0.05% Tween 20/phosphate buffered saline (PBS-T). Membranes were washed three times for 10 min with PBS-T, and further incubated with a proper dilution of mouse polyclonal anti-CTB or anti-PsaA antibodies in 5% non-fat milk-PBS-T, for 1 h, followed by washing as described above. Membranes were incubated with a proper dilution of anti-mouse IgG peroxidase conjugate (Sigma) in 5% non-fat milk-PBS-T, washed with the same procedure, and revealed with ECL reagent (Amersham Biosciences).

**SDS-PAGE of the CTB-PsaA and GM1-ELISA.** The ability of the CTB-PsaA fusion protein to fold into pentamers was analyzed by a 6% SDS-PAGE. For this, samples were not boiled and a sample buffer that did not contain β-mercaptoethanol was used.

The ability of the pentamers to bind to its cellular receptor was assessed by GM1-ELISA. This protocol was adapted from a reference published elsewhere [17]. Briefly, microtiter 96-well plates were coated with 10 μg mL<sup>-1</sup> GM1 ganglioside in PBS, pH 7.2, or BSA in 0.05 mol L<sup>-1</sup> carbonate-bicarbonate buffer, pH 9.6, at 37°C for 16 h. After washing three times with PBS-T, the plates were blocked by incubation with a 1% (m/v) BSA-PBS-T solution for 30 min at room temperature. The recombinant proteins were diluted, from 300 to 0.3 ηmol L<sup>-1</sup>, in 1% BSA-PBS-T, added to the plates, and incubated for 2 h at room temperature. Unbound proteins were removed from the plate by washing three times with PBS-T, and then, a proper dilution of commercial anti-CT polyclonal antibody (Sigma) was added to the plates and incubated for 1 h at room temperature. After washing three times with PBS-T, a peroxidase-conjugated goat anti-rabbit IgG (Sigma), in a proper dilution, was added to the plate and incubated for 1 h at room temperature. After washing, plates were revealed by the addition of 8 mg *o*-phenylenediamine (OPD) in 20 mL of a 0.2 mol L<sup>-1</sup> citrate-phosphate buffer, pH 5.0, in the presence of 10 μL H<sub>2</sub>O<sub>2</sub>.

The reaction was stopped by the addition of  $4\text{molL}^{-1}$   $\text{H}_2\text{SO}_4$ . The absorbance was measured at 492nm.

**Immunization of mice with CTB-PsaA fusion protein.** Seven-week-old female Balb/C mice (six per condition) were immunized intranasally twice a week for three consecutive weeks. Ten microliters was inoculated in each nostril using a micropipette. The following conditions were used: saline, CTB (4  $\mu\text{g}$ ), PsaA (1  $\mu\text{g}$ ), PsaA (1  $\mu\text{g}$ )+CTB (4  $\mu\text{g}$ ), PsaA (1  $\mu\text{g}$ )+CT (4  $\mu\text{g}$ ), as a positive control, and CTB-PsaA fusion protein (1 and 5  $\mu\text{g}$ ). After 21 days, mice were bled by the retroorbital plexus. For the collection of saliva, a 0.01% pilocarpine solution was injected intraperitoneally. The animals were sacrificed, and nasal and bronchial washes were performed [18]. Anti-PsaA IgG from serum and IgA from saliva and nasal and bronchial washes were determined by ELISA as described below.

**ELISA.** Microtiter plates (Maxisorp-NUNC) were incubated at  $4^\circ\text{C}$  for 16h with  $10\mu\text{g mL}^{-1}$  PsaA in  $0.05\text{molL}^{-1}$  carbonate-bicarbonate buffer, pH 9.6. After three washes with PBS-T, plates were blocked with 10% (m/V) non-fat milk-PBS-T for 1h at  $37^\circ\text{C}$ , and then, washed three times with PBS-T. Serum, saliva or nasal and bronchial wash dilutions were added to the plates in 1% (m/V) bovine serum albumin (BSA) and incubated at  $37^\circ\text{C}$  for 1h. After washing, proper dilutions of a peroxidase-conjugated goat anti-mouse IgG (Sigma) or a peroxidase-conjugated goat anti-mouse IgA (Sigma) were added to the plates and incubated for an additional hour at  $37^\circ\text{C}$ . Plates were revealed by the addition of 8mg *o*-phenylenediamine (OPD) in 20mL of a  $0.2\text{molL}^{-1}$  citrate-phosphate buffer, pH 5.0, in the presence of  $10\mu\text{L}$   $\text{H}_2\text{O}_2$ . The reaction was stopped by adding  $4\text{molL}^{-1}$   $\text{H}_2\text{SO}_4$ . The absorbance was measured at 492nm.

## Results and discussion

### Expression and purification of the recombinant proteins

Recombinant PsaA, CTB-PsaA, and CTB (as described in [16]) were expressed in BL21 (SI) *E. coli* strain and purified through a  $\text{Ni}^{2+}$ -charged column chromatography. Cellular extracts of induced BL21 (SI) and purified CTB-PsaA (45kDa) and PsaA (32kDa) are shown in Fig. 1. Quantification of the recovered proteins revealed that they reached a yield of about 40mg of purified protein per liter of induced culture.

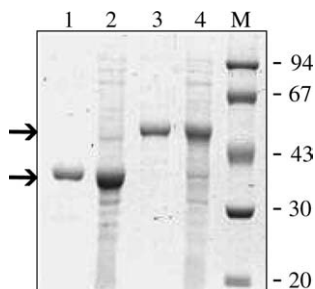


Fig. 1. Expression and purification of recombinant PsaA and CTB-PsaA fusion protein. Cellular extracts and purified proteins were loaded onto 12% SDS-PAGE. Lanes 2 and 4 show cellular extracts from *E. coli* BL21 (SI) expressing PsaA (32kDa) and CTB-PsaA (45kDa), respectively, whereas lanes 1 and 3 show their respective recombinant proteins in a purified form. Protein bands are indicated by arrows.

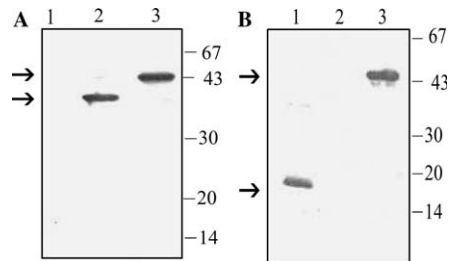


Fig. 2. Western blot analysis of recombinant CTB-PsaA fusion protein. Nitrocellulose membranes were revealed, after incubations with the antibodies anti-PsaA (A) and anti-CTB (B) antibodies and immunoconjugates. CTB-PsaA is in lane 3. Recombinant CTB (lane 1), PsaA (lane 2) were used as controls. Protein bands are indicated by arrows.

### Western blot

The CTB-PsaA fusion protein was strongly and specifically recognized by polyclonal anti-PsaA and anti-CTB antibodies in an immunoblot assay (Figs. 2A and B, respectively). PsaA and CTB were used as positive controls. A single band corresponding to CTB-PsaA can be observed in the immunoblot, indicating that the fusion protein did not undergo degradation.

### Pentamer formation

To analyze the ability of CTB-PsaA to form pentamers, the protein was resuspended in sample buffer without  $\beta$ -mercaptoethanol and was directly loaded onto a 6% SDS-PAGE (Fig. 3A). In the reduced and boiled samples, a single band of 45kDa (Fig. 3A, lane 1) was observed, whereas, in the non-reduced and non-boiled samples, a band of about 225kDa, the predicted size of the pentameric form of CTB-PsaA, was detected (Fig. 3A, lane 2).

To confirm the ability of the CTB-PsaA pentamers to bind GM1, a GM1-ELISA was performed (Fig. 3B). Recombinant CTB and CTB-PsaA were able to bind GM1 in a dose-dependent manner. In addition to this, their curves presented the same profile. As negative controls, we used PsaA that should not be able to bind GM1 and all the proteins were evaluated using BSA as the coating protein. Considering these results, we assumed that the fold of CTB-PsaA may be correct, at least for the CTB portion and, it seems that the presence of five molecules of PsaA in the structure does not abrogate the binding of the pentamer to its receptor.

### Immunization of mice with CTB-PsaA fusion protein

Intranasal immunization was performed in Balb/C mice in order to evaluate the ability of CTB-PsaA fusion protein to induce antibody production. Results are shown in Table 1. Five micrograms of CTB-PsaA fusion protein induced the greatest levels of both anti-PsaA

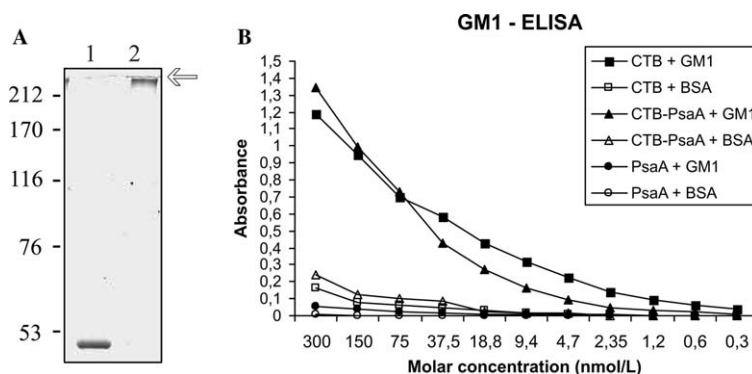


Fig. 3. Analysis of CTB-PsaA pentamer formation (A) and its ability to bind GM1 receptor (B). (A) To evaluate the CTB-PsaA pentamer formation, 4  $\mu$ g of the protein was loaded onto a 6% SDS-PAGE. Lane 1 shows the sample boiled and in reducing conditions, whereas lane 2 shows the same protein not submitted to boiling in non-reducing conditions. A band of about 225 kDa, indicated by an arrow, can be observed in non-boiled and non-reduced samples. (B) In order to verify the pentamer ability to bind GM1 gangliosides, a GM1-ELISA, using recombinant CTB-PsaA, CTB, and PsaA, was performed. The ELISA was performed by coating a 96-well plate with GM1 or BSA.

Table 1  
Induction of antibodies by CTB-PsaA after nasal immunization

	IgG	IgA		
	Serum	Saliva	Nasal wash	Bronchial wash
Saline	<20	<2	<2	<2
CTB	20	<2	<2	<2
PsaA	20	<2	<2	<2
PsaA + CTB	<20	<2	2	<2
PsaA + CT	2560	4	16	<2
CTB-PsaA 1 $\mu$ g	320	8	4	<2
CTB-PsaA 5 $\mu$ g	2560	128	32	4

Reciprocal IgG titers from pooled serum and IgA titers from pooled saliva, and nasal and bronchial washes are shown in this table. The titer was defined as the last dilution in which an absorbance of 0.1 can be observed. These results are representative of two experiments.

IgG in the serum and IgA in saliva, in nasal and bronchial washes, even better than PsaA + CT, the positive control. The effect of the fusion protein in the antibody production was dose-dependent, since a lower amount of CTB-PsaA (1  $\mu$ g) elicited a lower titer of both systemic and mucosal antibodies. The other conditions in which the antigen was administered, such as PsaA, PsaA + CTB, were not able to induce detectable levels of IgG and IgA.

In conclusion, the use of CTB-PsaA fusion protein for vaccination has several advantages. In terms of manufacturing the final product, the antigen and the adjuvant constitute the same molecule. Thus, it requires only one fermentation step. Moreover, CTB-PsaA was expressed in high levels in a soluble form and it can be directly purified, whereas CTB is expressed in inclusion bodies [16], requiring denaturing–renaturing steps. This work shows that CTB-PsaA can be produced in large amounts in the active form, which is easily assessed by 6% SDS-PAGE and GM1-ELISA. In contrast to conjugation processes, in which the proportion between the proteins is much more difficult to control, the genetic

fusion produces a hybrid molecule, with a determined number of antigen molecules. The CTB pentamer moiety is capable to bind the receptor and to deliver five molecules of the antigen. This may contribute to the higher immunogenicity observed for this protein than for coadministered CTB and PsaA, or PsaA alone. In terms of protective immune response, some experiments have to be performed in order to verify if the adjuvant effect evoked by the CTB portion is maintained by the CTB-PsaA fusion protein. A suitable model to assess this information is the nasopharyngeal colonization by pneumococci. In this case, CTB-PsaA can be evaluated in terms of effective immune response inducer as an immunogen as well as an adjuvant to other vaccine, such as non-capsulated pneumococci [19]. In the light of these results, CTB-PsaA may be a promising candidate to be included in a pneumococcal vaccine formulation.

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