

Bacteria engineering for diagnostics and therapeutics

TJC 20220712

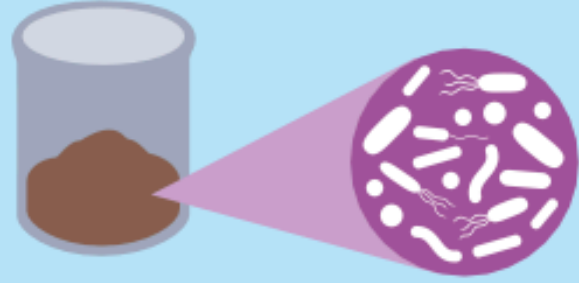
Hui Zhang

Applications of engineered bacteria

- Bacteria engineered to deliver therapies that degrade in the stomach or bloodstream.
- Achieve effective treatment with reduced systemic drug exposure.
- Record transient signals, such as reactive inflammatory metabolites, for noninvasive testing.

Microbiome-based therapeutics

Faecal microbiota transplantation



- Transfer of faeces or complex communities derived by in vitro culture or purification of spores
- Demonstrated efficacy for treatment of recurrent *Clostridioides difficile* infections

- Advantages: transfer of intact community, proven efficacy in clinic
- Challenges: screening of donor samples, scalability, potential variability in efficacy depending on donor

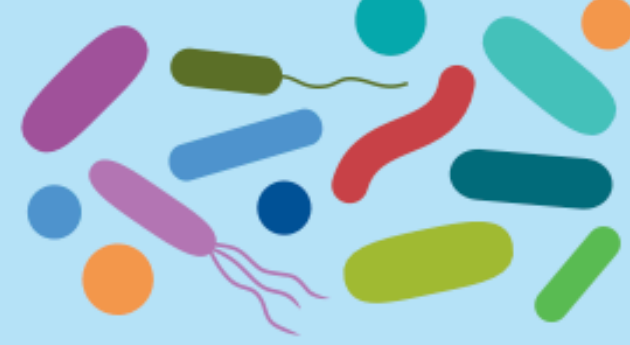
Diet and prebiotics



- Supplementation of microbiota-targeted substrates, such as specific dietary fibres to promote a desired compositional changes in the microbiota, or production of a desired metabolite

- Advantages: relatively easy to prepare, safety
- Challenges: predicting outcomes of supplementation across different microbiota compositions, length of impact following supplementation, targeted species or activities must be present

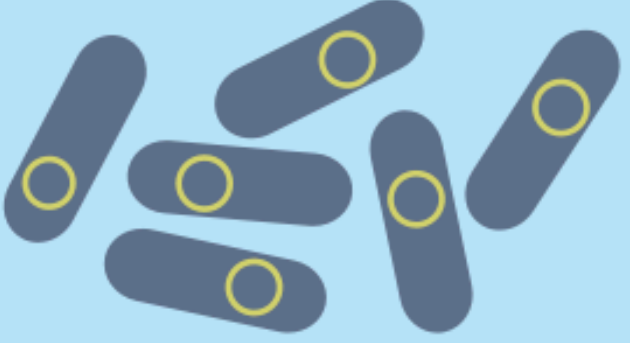
Symbiotic microbial consortia



- Transfer of a group of isolates, selected or designed to promote specific microbiota functions

- Advantages: known composition of consortia, individual isolates and potentially self-sustaining community can be screened for safety
- Challenges: isolate selection, replicating phenotypes emerging from complex bacterial interactions, growing desired isolates in culture

Engineered symbiotic bacteria



- Transfer of bacteria that colonize the targeted site and are engineered to have a desired function or deliver a desired product or metabolite

- Advantages: potential for producing desired metabolites or compounds in the correct location using a platform strain background that could be engineered for multiple purposes
- Challenges: limited ability to manipulate many species of the microbiota, have to demonstrate safety of modifications

Microbiota-derived proteins and metabolites

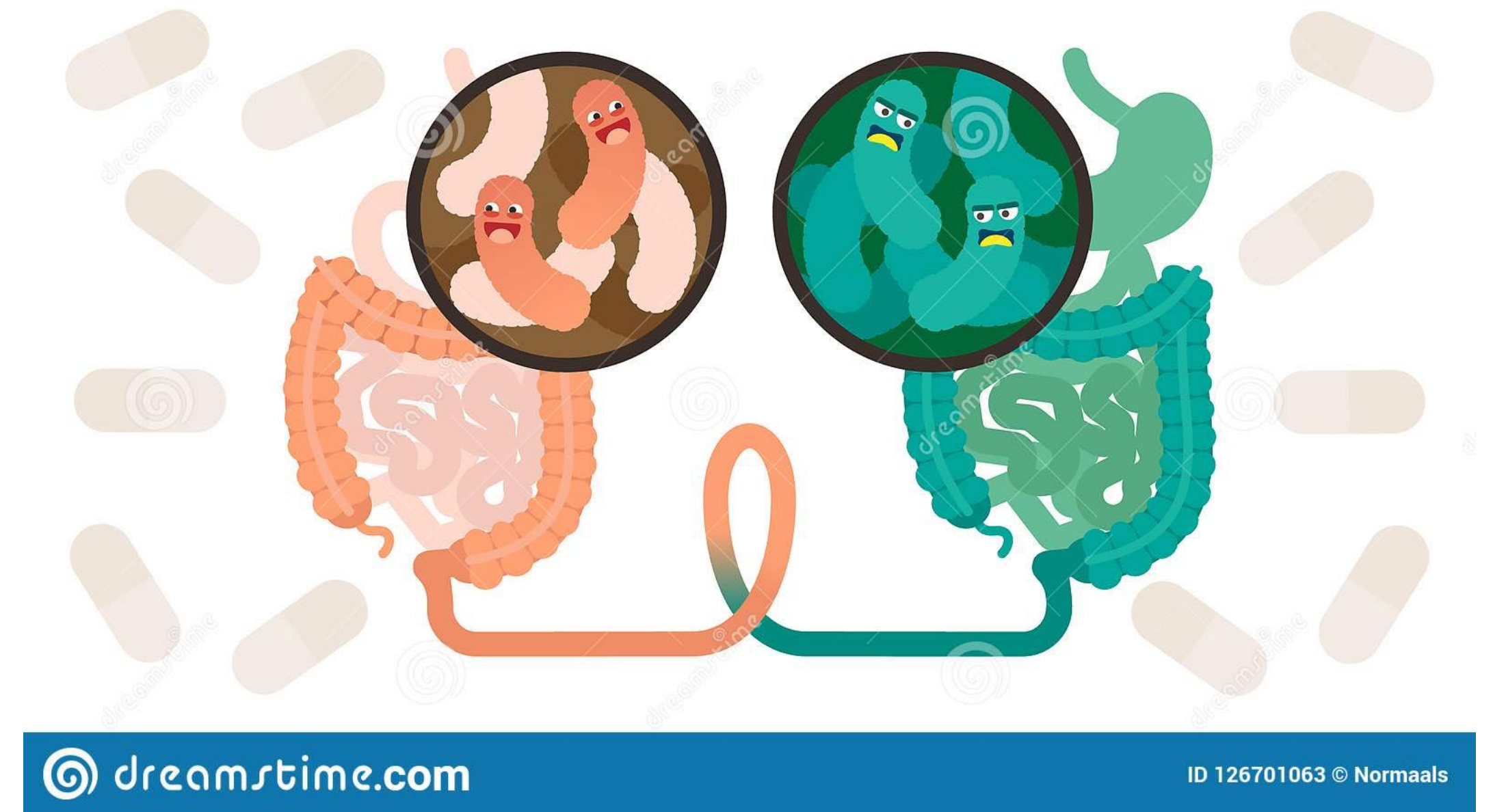


- Direct supplementation with beneficial proteins or metabolites

- Advantages: relatively easy to prepare, assess safety, likely to follow conventional pharmaceutical development pathways
- Challenges: determining and delivering adequate concentrations to desired site

Faecal microbiota transplantation

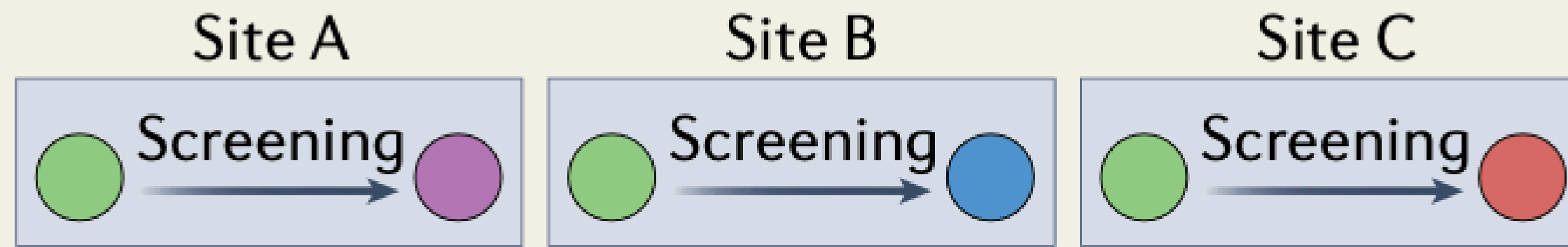
- [Clostridioides difficile infection](#)
- Inflammatory bowel disease
- Constipation
- Neurological diseases:
 - Parkinson's disease
 - Multiple sclerosis



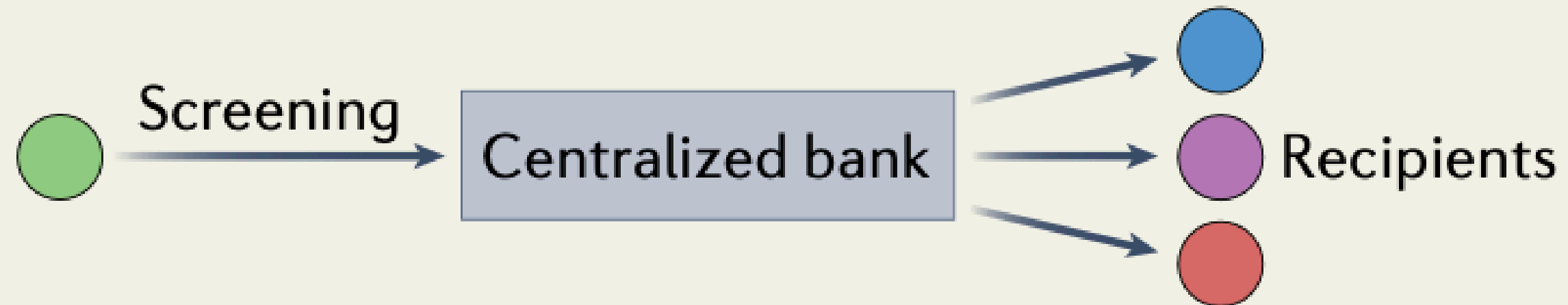
a Source

Heterologous

Patient-directed donation

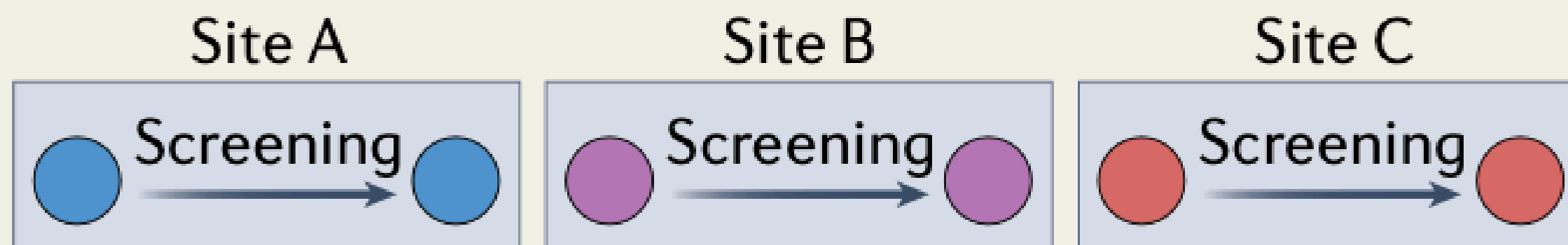


Stool bank or universal donor



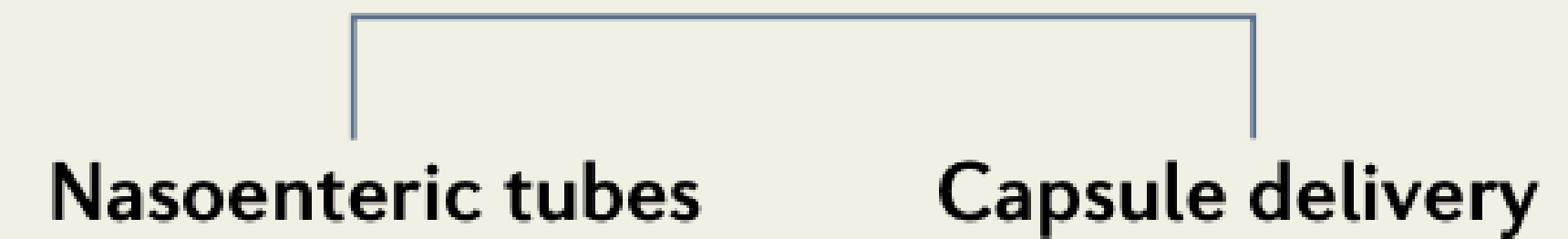
Autologous

Provided by the recipient while the microbiota is in a healthy state and frozen for later administration



b Administration

Upper gastrointestinal tract



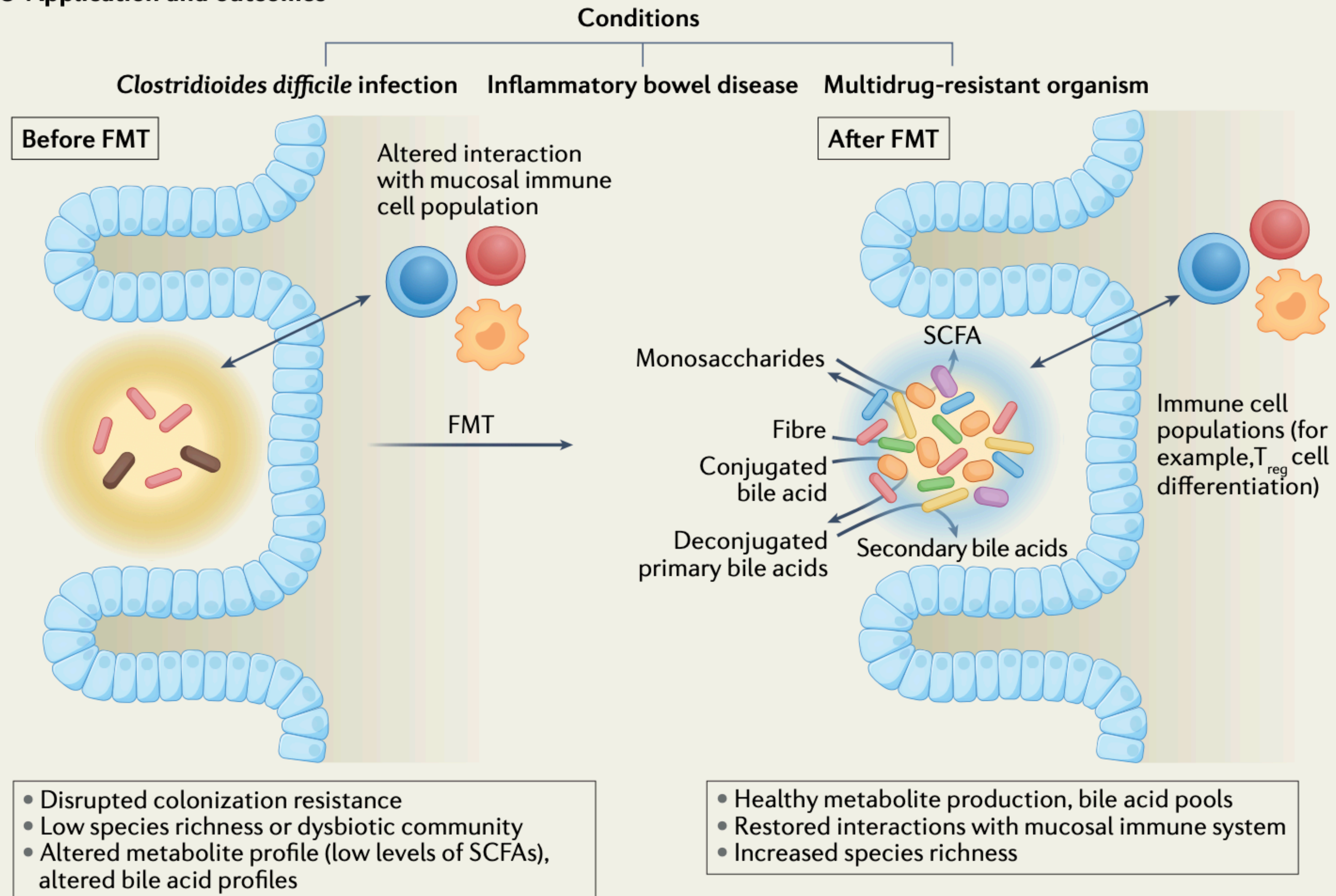
- Lower volumes, concentrated material
- Exposure of small intestinal immune cells to transferred microorganisms

Lower gastrointestinal tract



- Potential for direct delivery to impacted sites
- Larger volumes possible

c Application and outcomes



Engineered bacteria can function in the mammalian gut long-term as live diagnostics of inflammation

David T Riglar^{1,2}, Tobias W Giessen^{1,2}, Michael Baym^{1,3} , S Jordan Kerns^{1,2,6}, Matthew J Niederhuber^{1,2}, Roderick T Bronson⁴, Jonathan W Kotula^{1,2,6}, Georg K Gerber⁵ , Jeffrey C Way² & Pamela A Silver^{1,2}

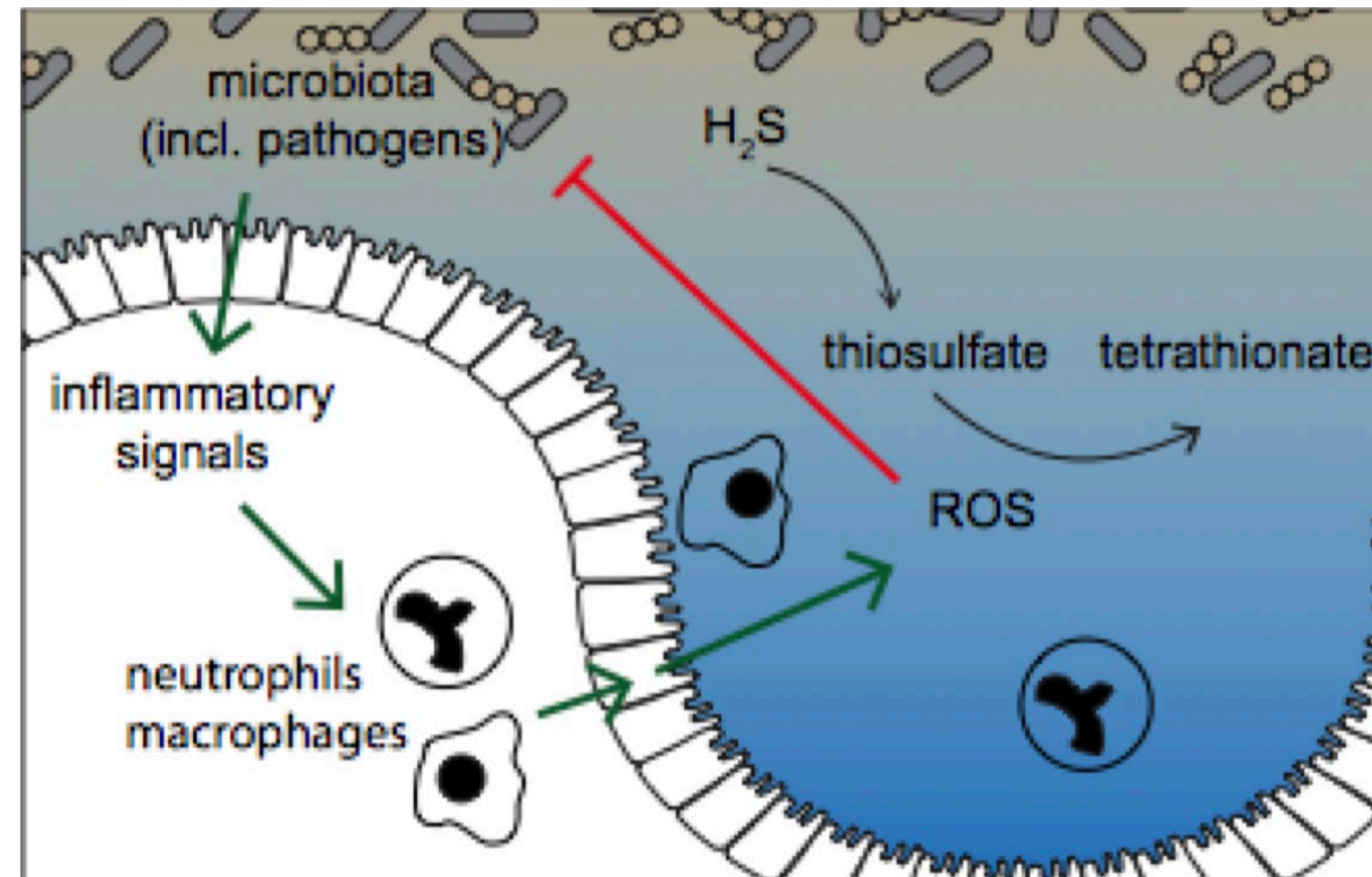
Advantages

- The gut environment is largely inaccessible.
- Products of digestion or those released by the host or microbiome can be modified by the microbiome, or absorbed by the host, before excretion.
- Live, engineered bacteria can be used as non-invasive diagnostics to detect transient (or highly localized) molecules in the gut, or as therapeutics.

Concerns about engineered bacteria

- Susceptibility of synthetic genetic circuits to mutation: loss of engineered function, lack of growth of the recombinant strain in a host and environment-dependent manner.
- Unpredictable function during extended gut colonization: cleared from the body within ~1 month.
- Stable, engineered bacterial strains that maintain their function for 6 months in the mouse gut.

Aim: to detect tetrathionate, an inflammatory marker



- transient product of reactive oxygen species (ROS), which are produced during inflammation, can be used as a terminal electron acceptor for anaerobic respiration, providing a growth advantage to these pathogens during inflammation.
- Induced by *S. typhimurium* and *Yersinia enterocolitica*.
- Tetrathionate is detected in these bacteria by the **TtrR/TtrS** two-component system and can be used as a terminal electron acceptor for anaerobic respiration, providing a growth advantage to these pathogens during inflammation.
- A range of other bacteria, including pathogens, may also be able to grow preferentially using tetrathionate.

study the ability of the strain to **colonise** and **function** in the murine gut over an extended time period.

reduce burden and allow long- term circuit retention without selection.

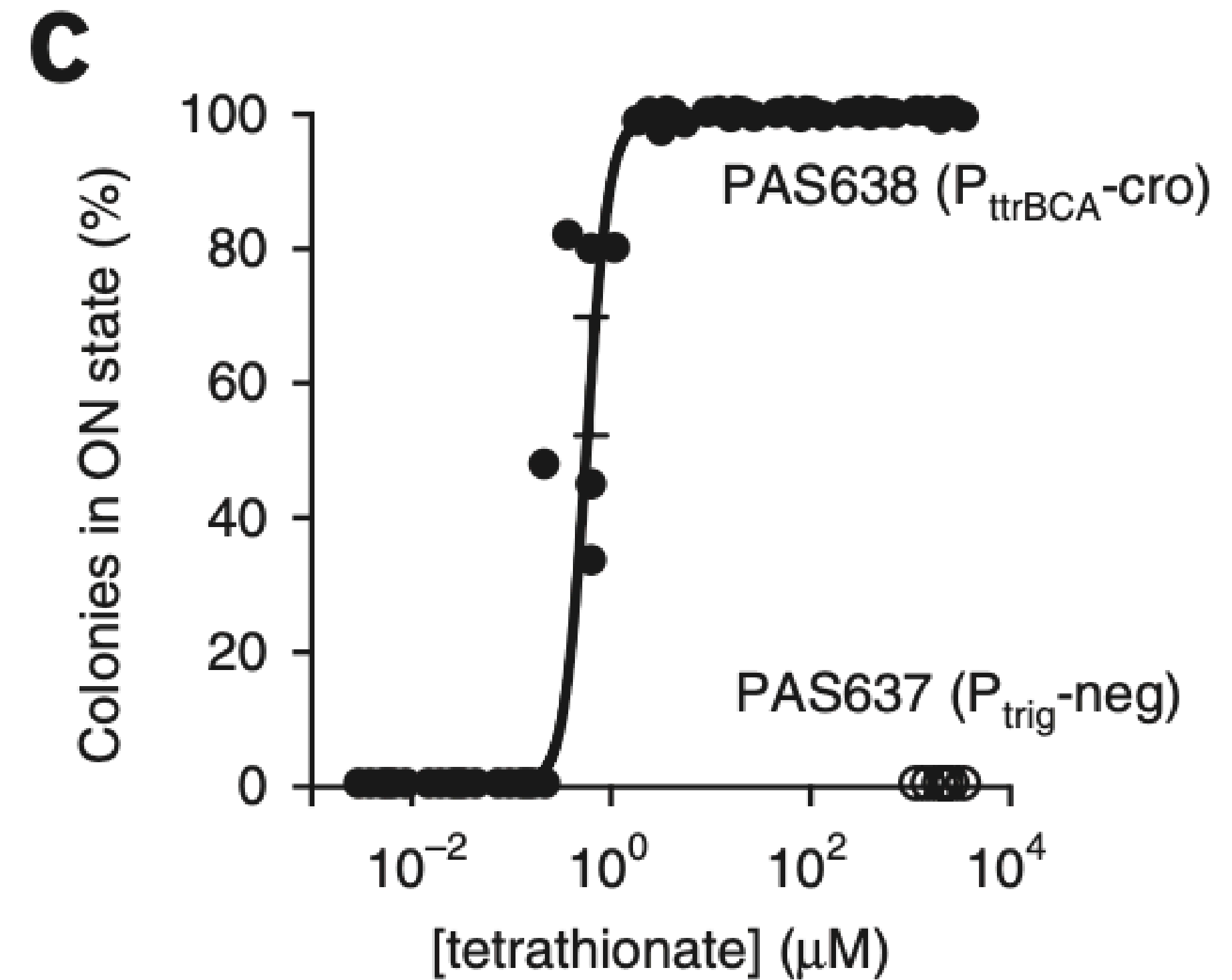
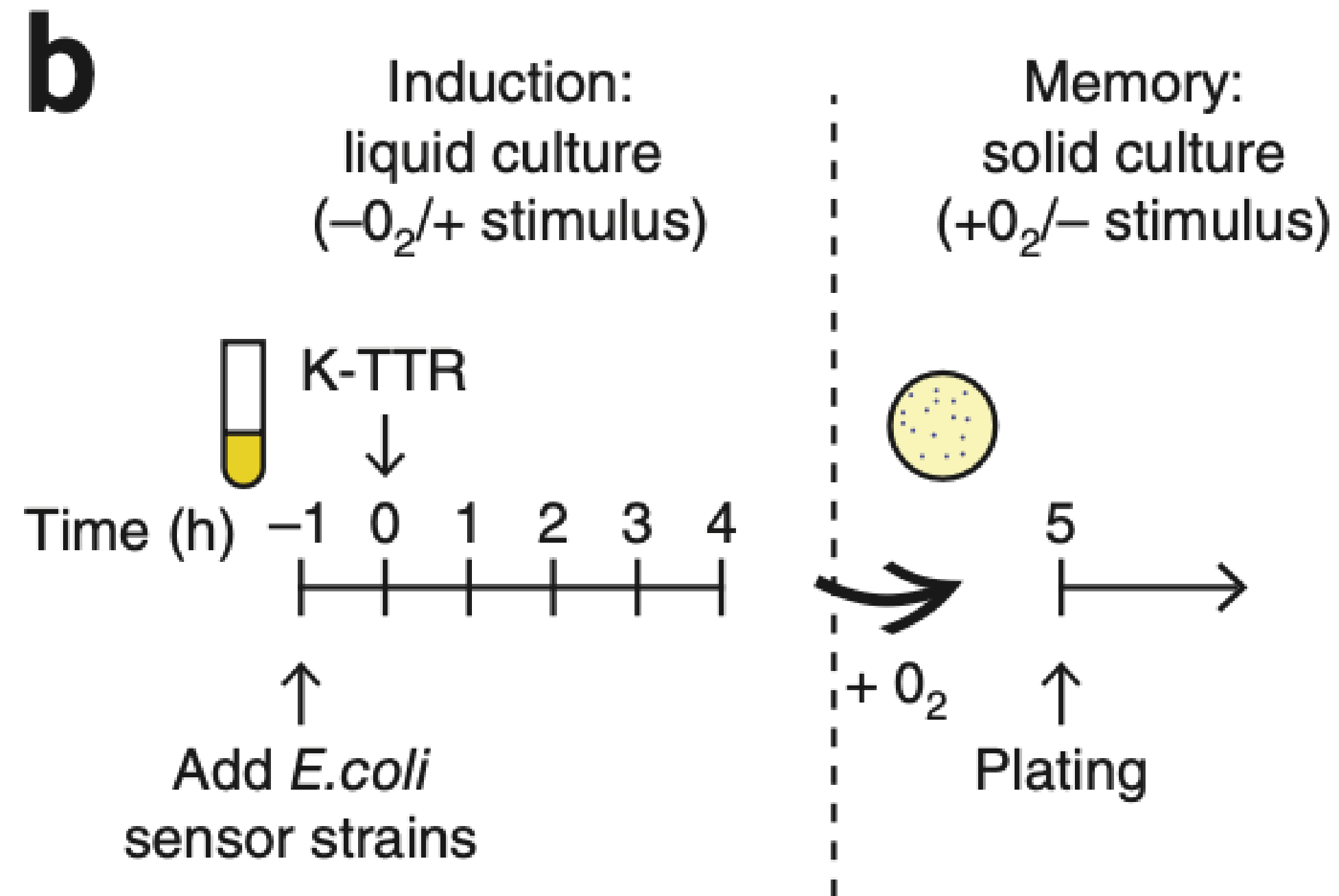
reduce burden and allow long- term circuit retention without selection.



On : Cro and β -gal₊/Cl-

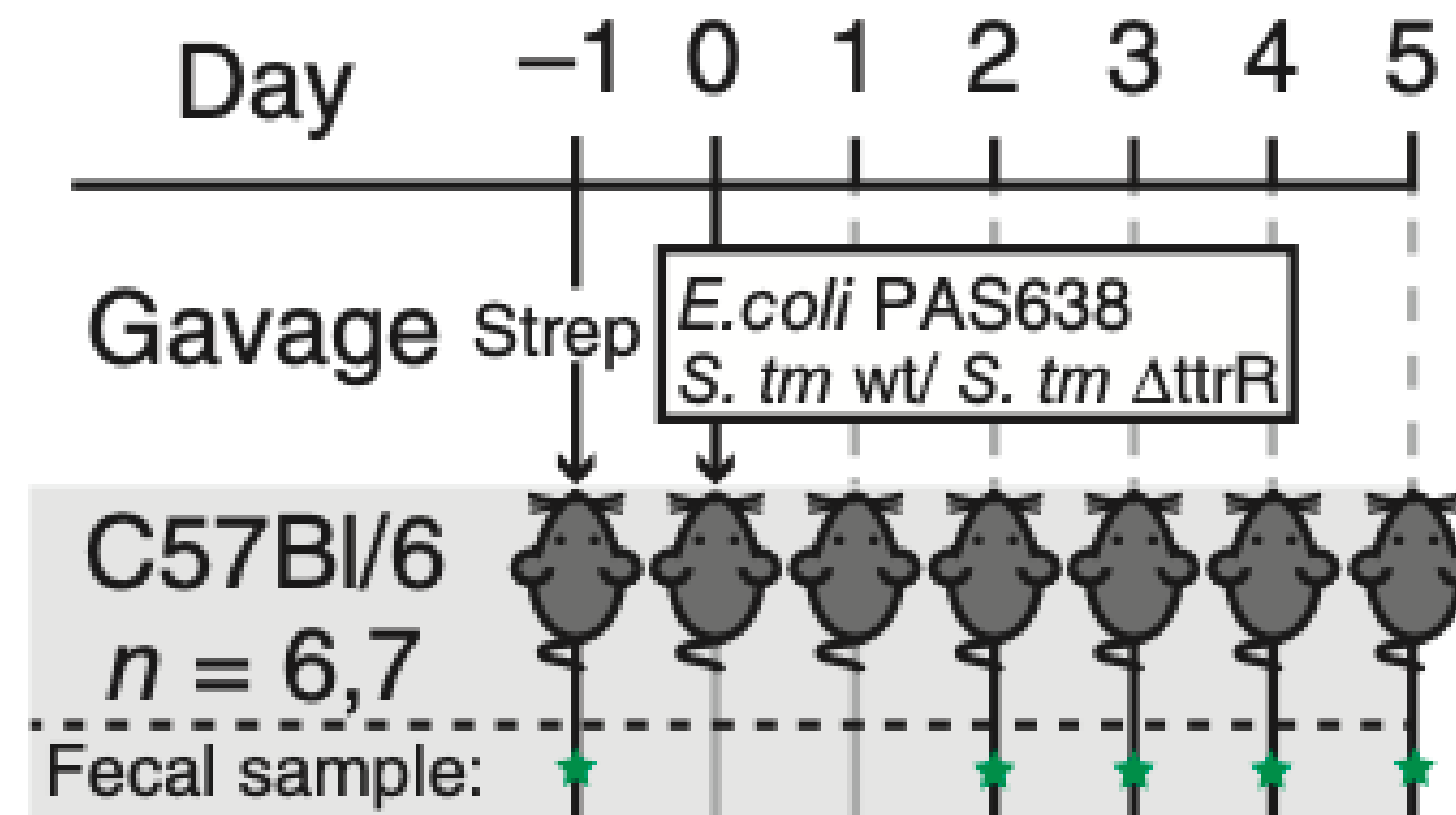
E. coli strain PAS638

In vitro test



PAS638 could record tetrathionate exposure

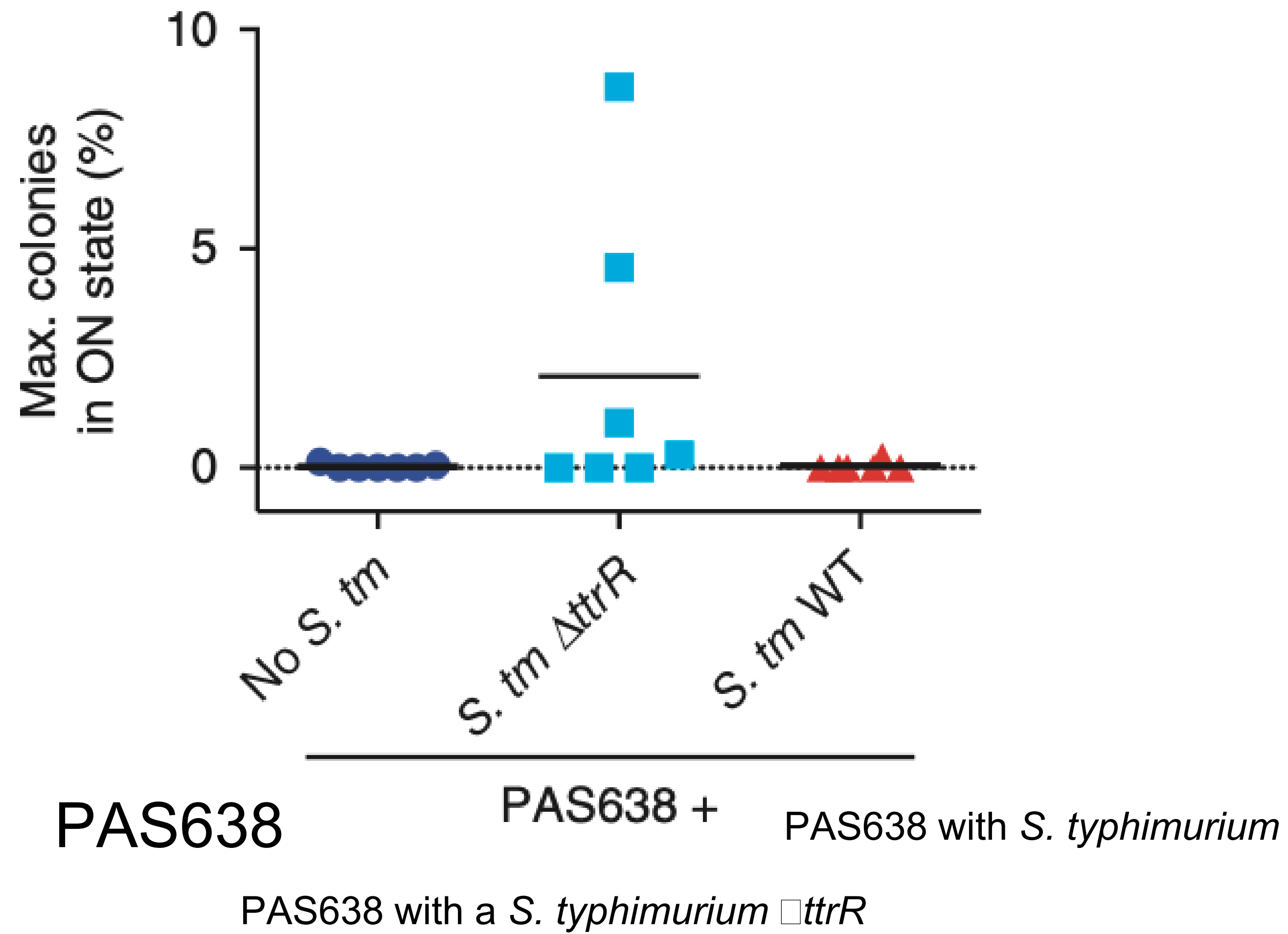
In vivo test in a murine *S. typhimurium*-induced colitis model



streptomycin treatment: to reduce colonization resistance for *S. typhimurium*;

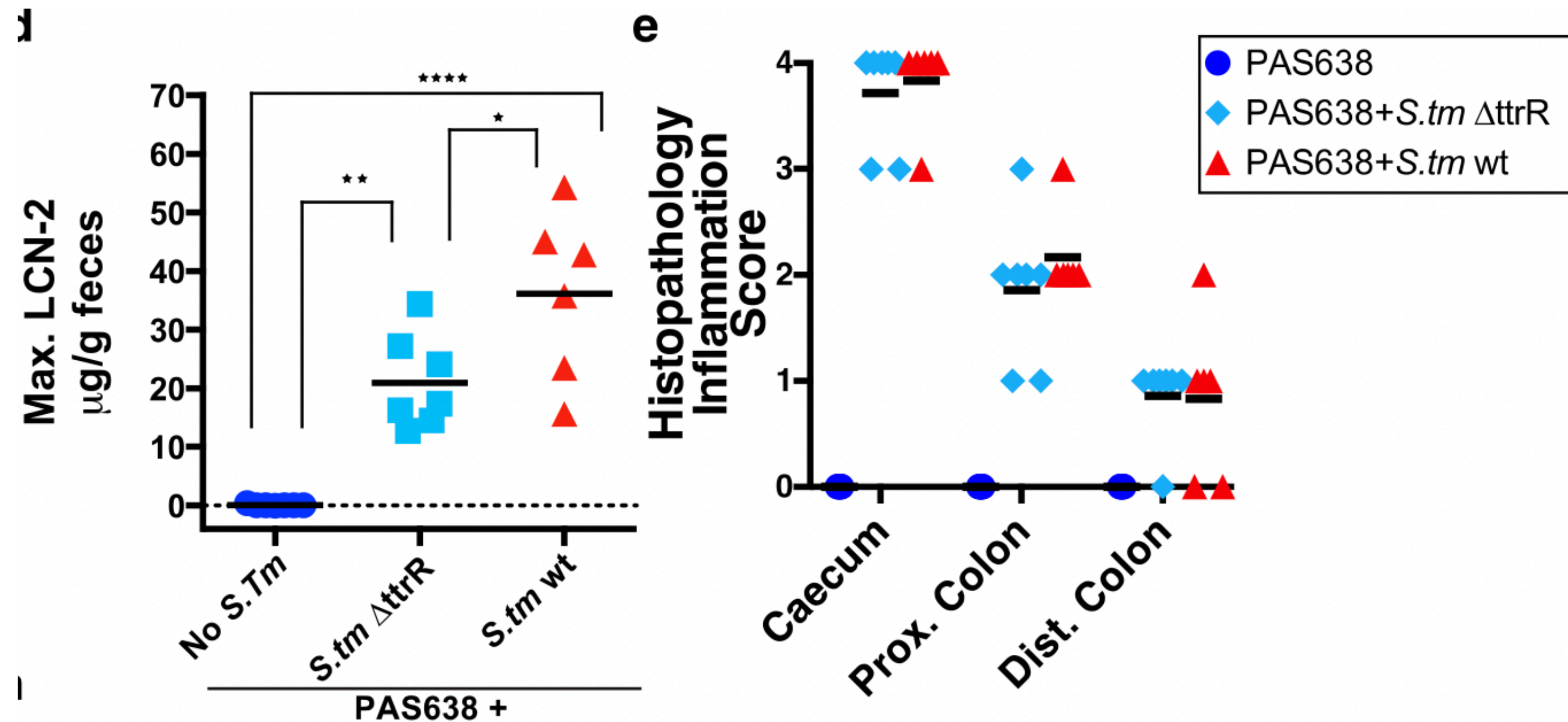
oral gavage:

fecal samples were analyzed days 2–5 after administration



$\square ttrR$ variant is unable to express tetrathionate reductase

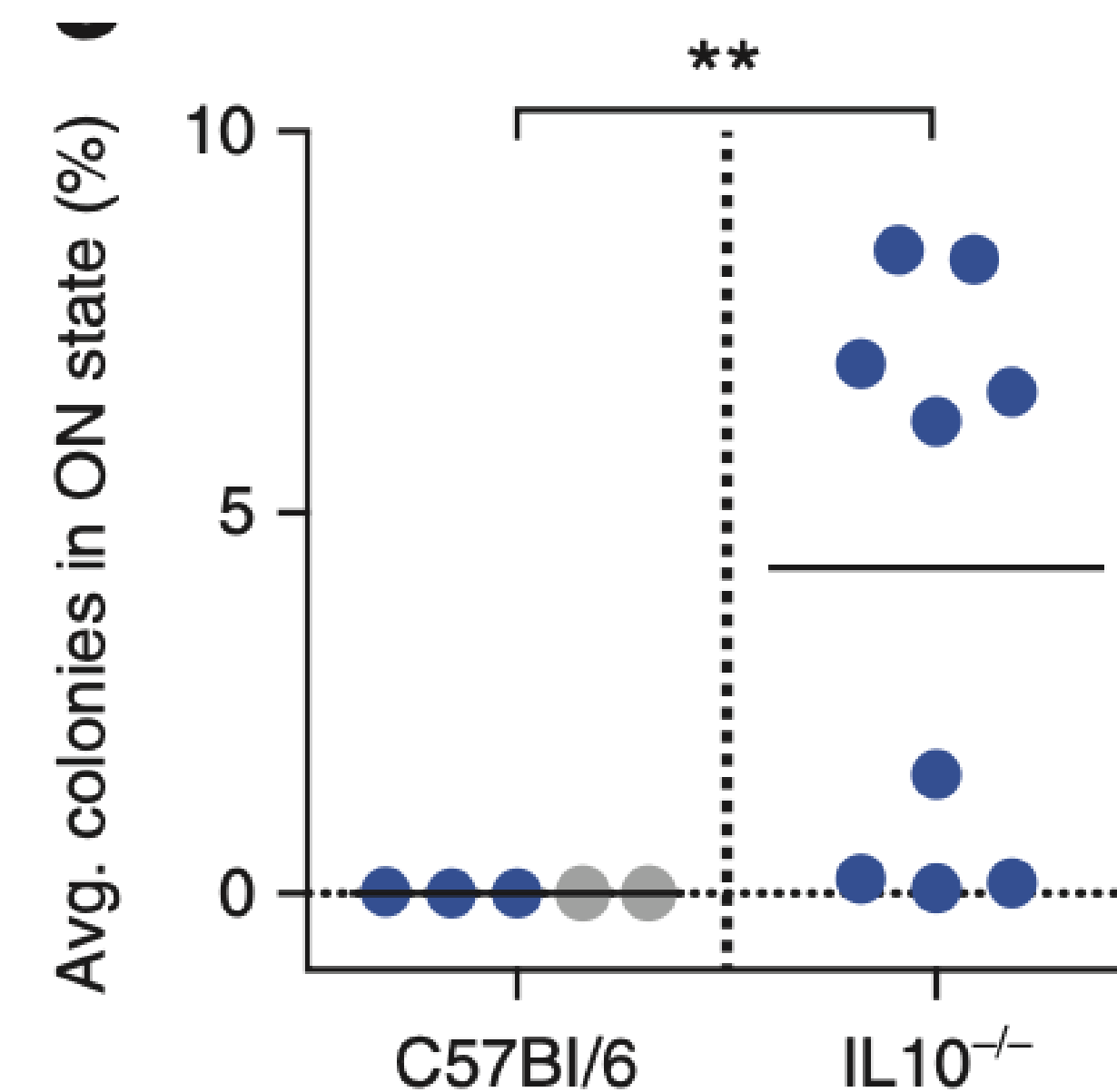
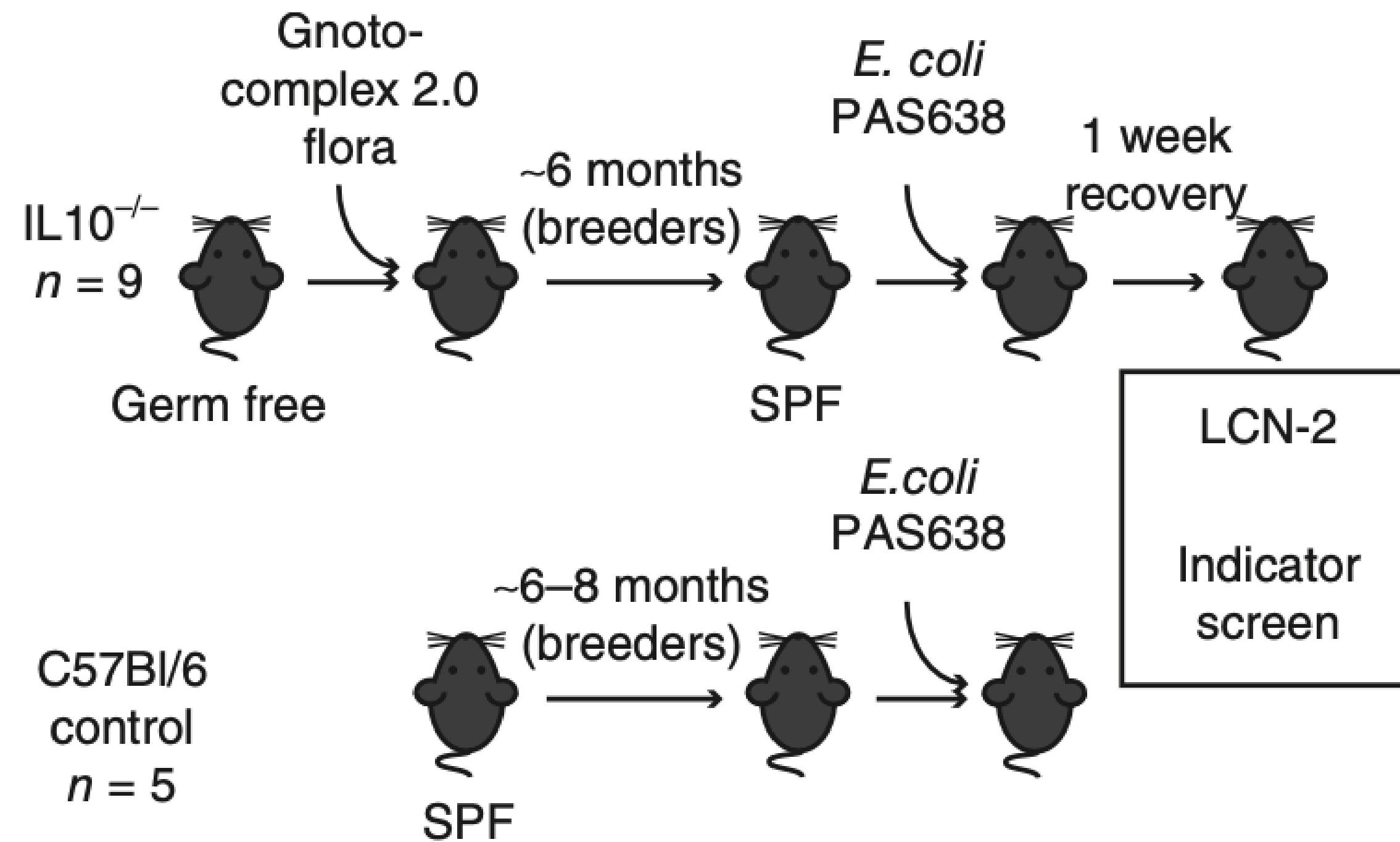
quantification of the lipocalin-2 (LCN-2) for inflammation detection



engineered memory strain specifically senses tetrathionate;

tetrathionate sensing corresponds to a more acute inflammatory response *in vivo*.

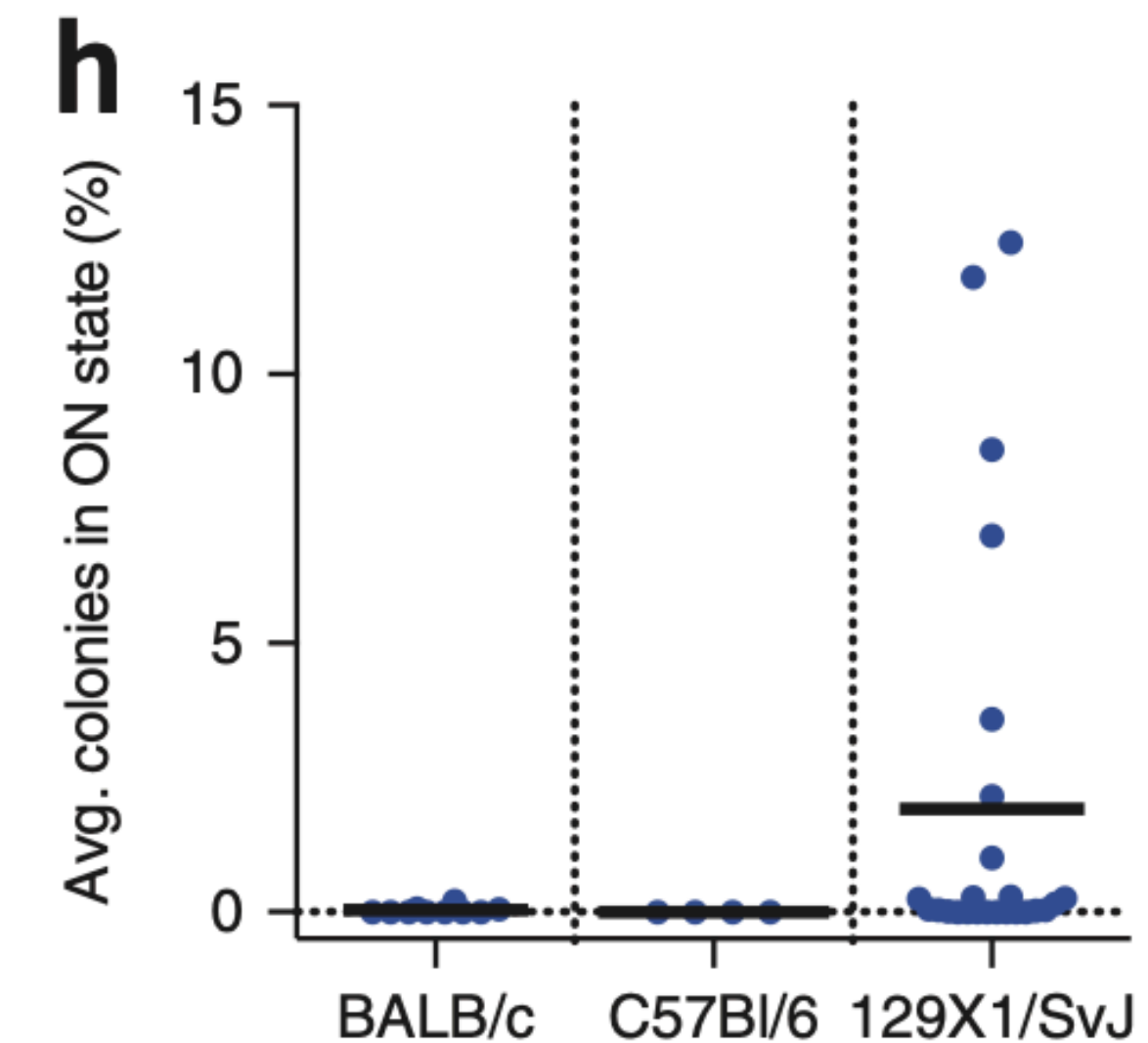
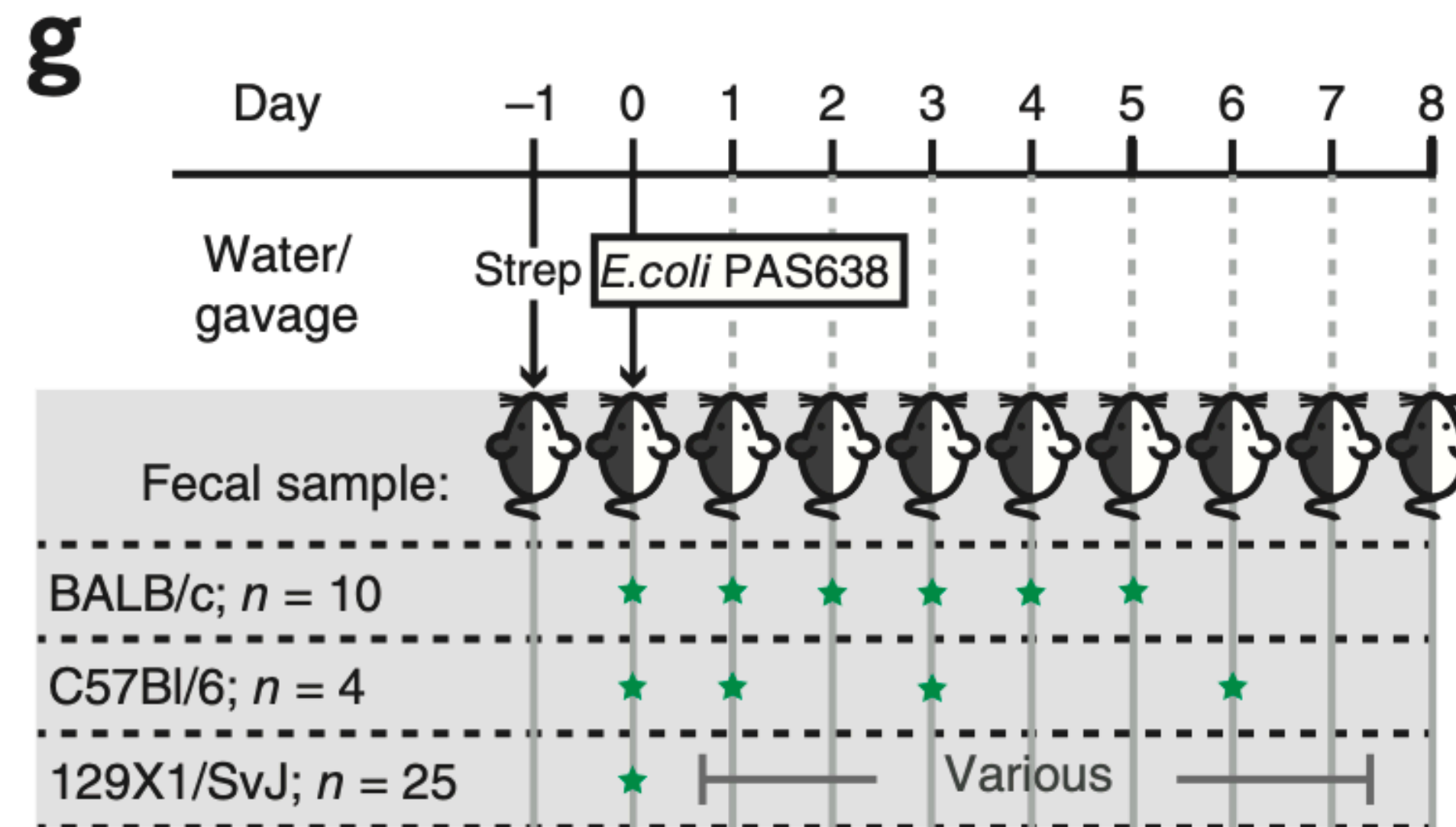
To test whether PAS638 could detect subclinical inflammation



Interleukin-10-deficient mice (IL10^{-/-}): features of human IBD, do not have acute colitis because they have been raised in gnotobiotic and barrier

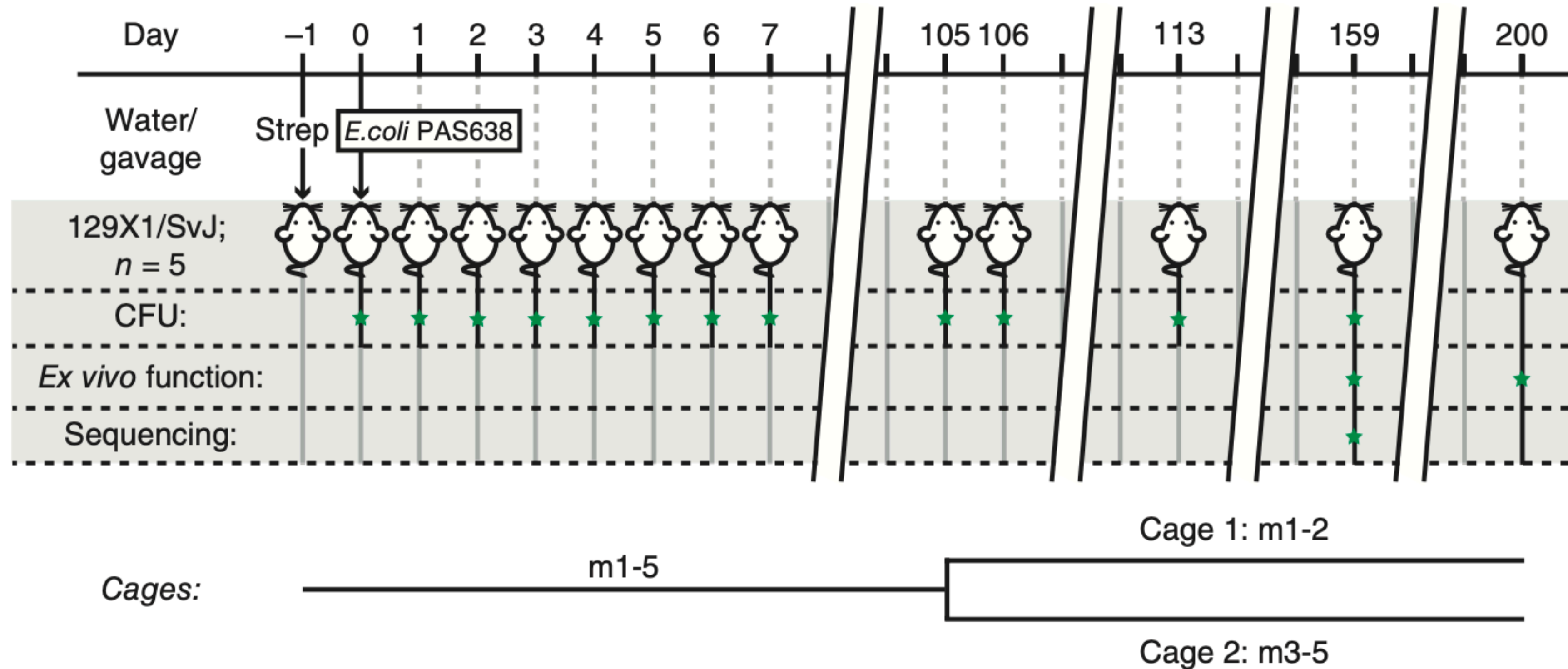
PAS638 can detect elevated tetrathionate in a physiologically relevant subclinical inflammation

evaluate PAS638 in different mouse backgrounds



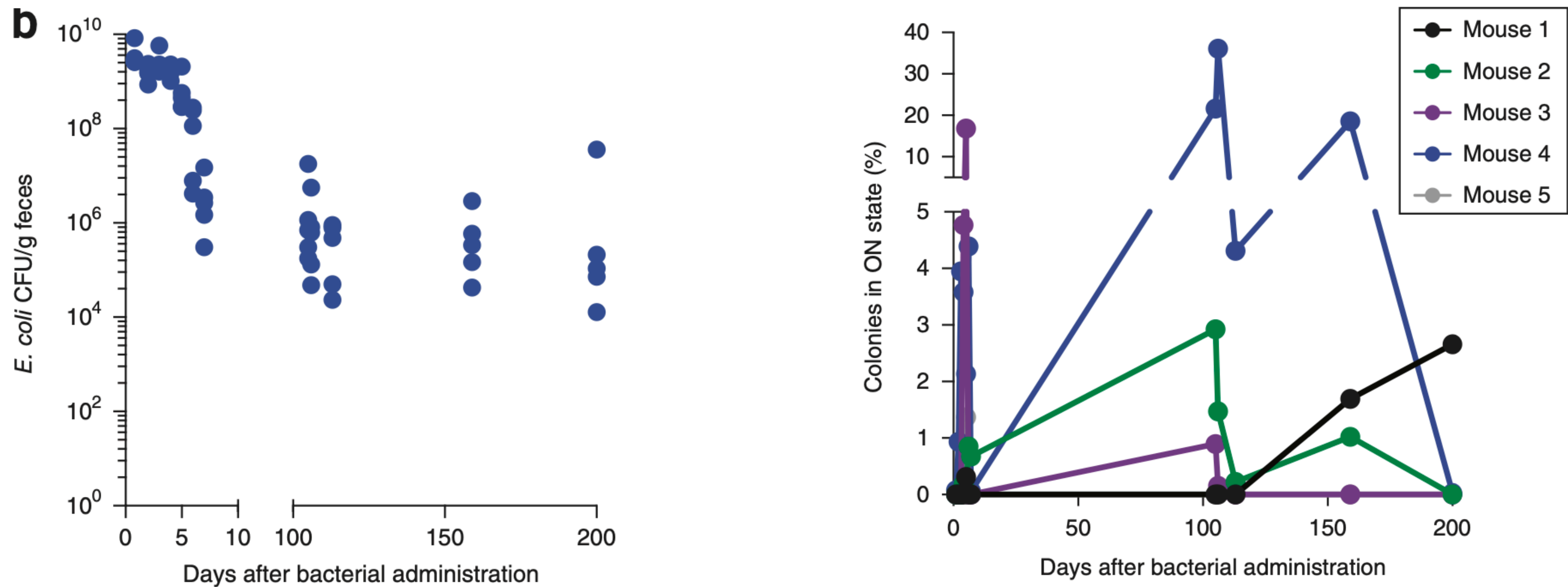
129X1/SvJ strain has documented defects in macrophage recruitment to sites of inflammation

long-term monitoring of tetrathionate



200 days, >1600 bacteria generations, intermittent faecal testing

PAS638 remained colonized at detectable levels without continued antibiotic selection



colonies in the memory-on state were detected at each time point

Whole genome sequencing confirmed circuit stability

Mouse	Ex vivo function				Sequence analysis (d159)		
	Percentage 'off' colonies retaining ability to turn 'on'		Percentage 'on' colonies retaining ability to turn 'off'		Chromosome Incl trigger and memory elements	Plasmid 1 <i>Colicin</i> -like	Plasmid 2 <i>Citrobacter rodentium</i> -like
	d159	d200	d159	d200			
1	100% (6/6)	100% (68/68)	100% (5/5)	100% (19/19)	100%	11%	100%
2	100% (6/6)	100% (250/250)	100% (6/6)	N/A	100%	8%	100%
3	99% (112/113)	100% (243/243)	N/A	N/A	100%	100%	100%
4	100% (179/179)	100% (136/136)	100% (6/6)	100% (1/1)	100%	100%	100%
5	100% (6/6)	100% (109/109)	N/A	N/A	100%	100%	100%

No mutations or rearrangements were detected on the chromosome, including the synthetic gene elements

colonies that were in the memory-off state in fecal samples at day 159 and day 200 retained the ability to respond to tetrathionate *ex vivo*;

colonies that were in the memory-on state in fecal samples retained an ability to turn off memory under repeated streaking on agar plates.

Summary

synthetic bacterial devices can colonize the complex host mammalian gut and be used to monitor and analyze the course of a disease over an extended timeframe.

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Article

Bacterially Derived Tryptamine Increases Mucus Release by Activating a Host Receptor in a Mouse Model of Inflammatory Bowel Disease

mucins from
epithelial goblet cells

genetic factors
gut microbiota

luminal contents
(polysaccharides)

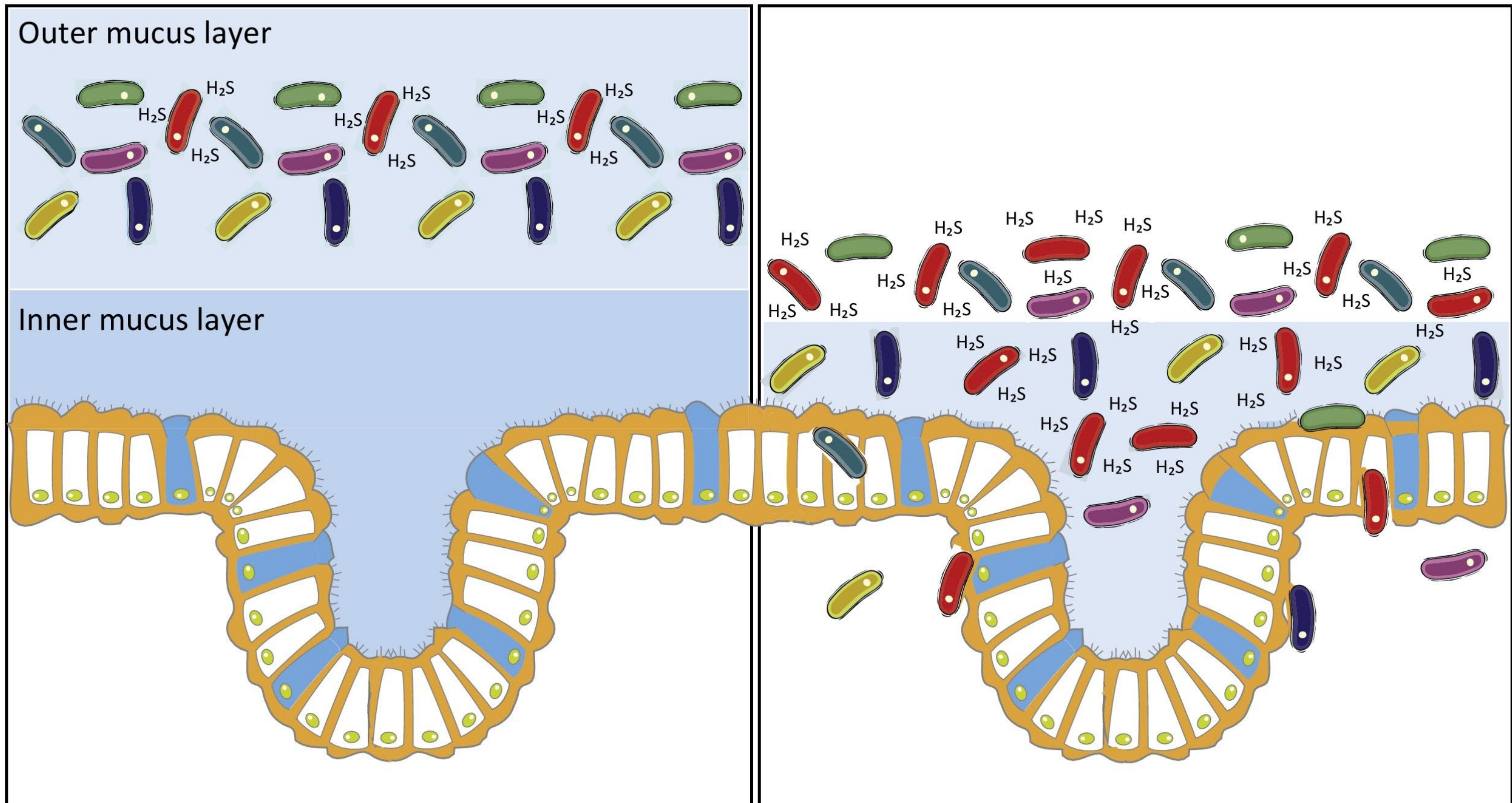
bioactive metabolites
(neuropeptides, short
chain fatty acids)

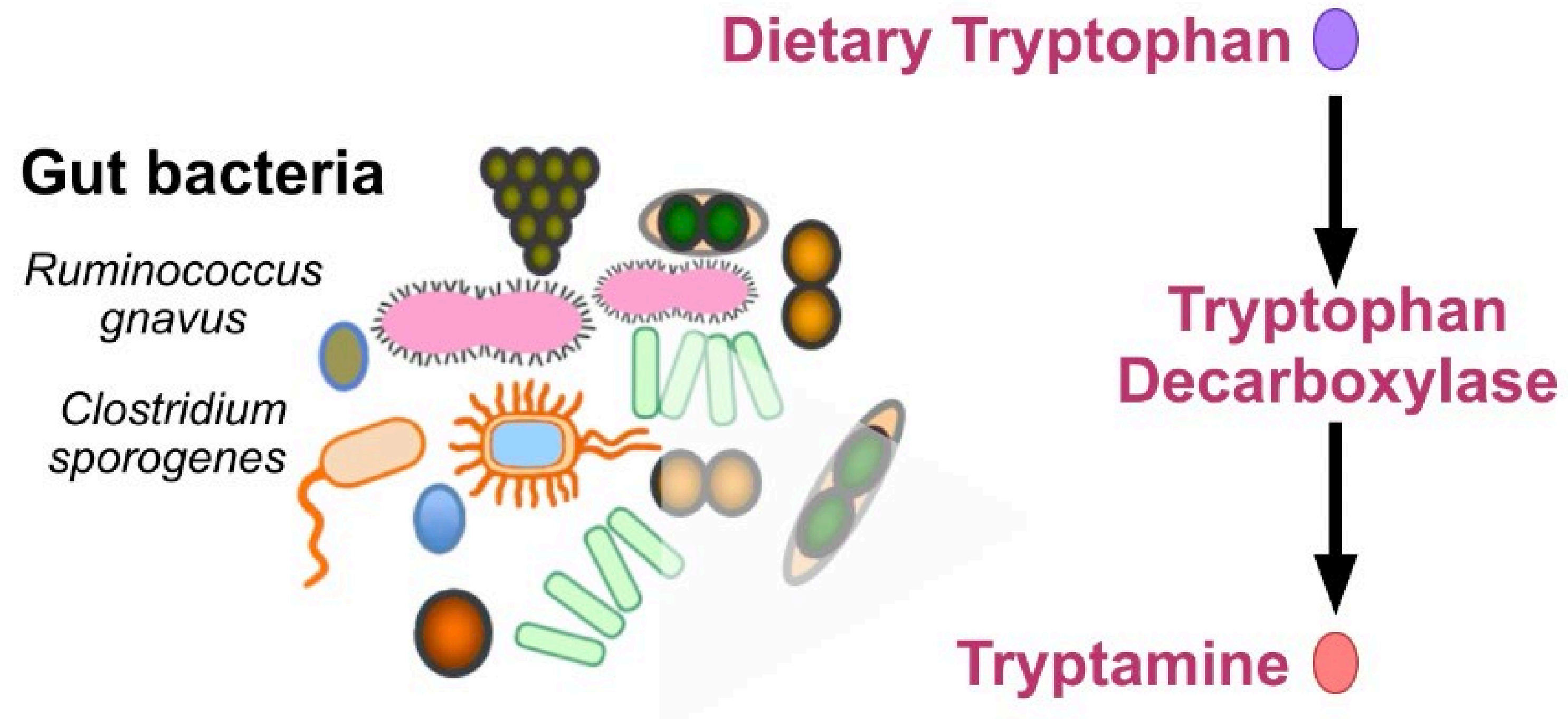
neurotransmitters (e.g.
5-HT)

immune factors
(inflammatory
cytokines)

(A) Healthy colon

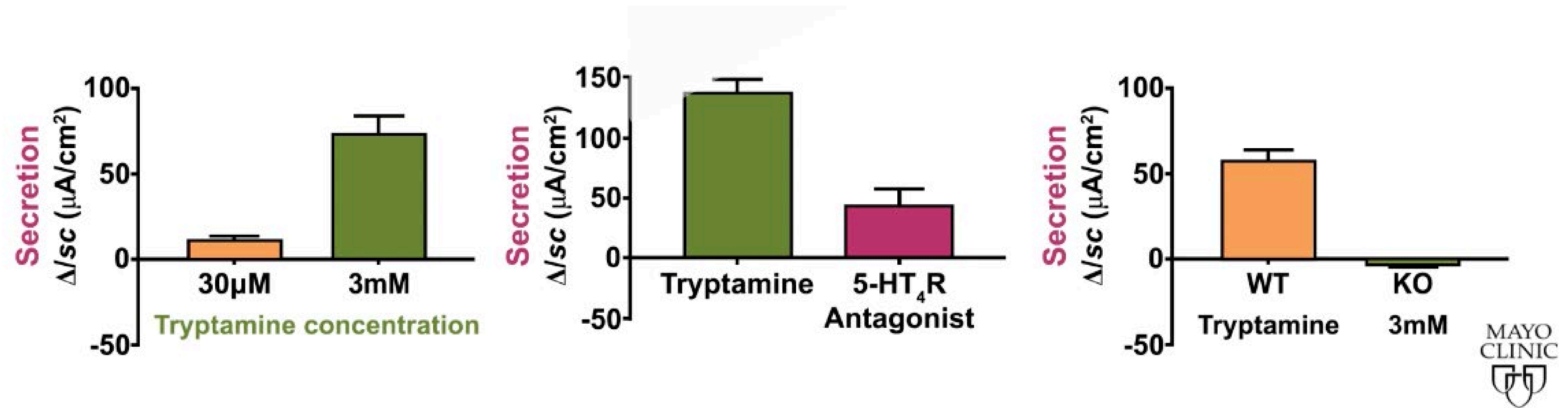
(B) Colon of IBD patients





Pathway generally only exists in bacteria

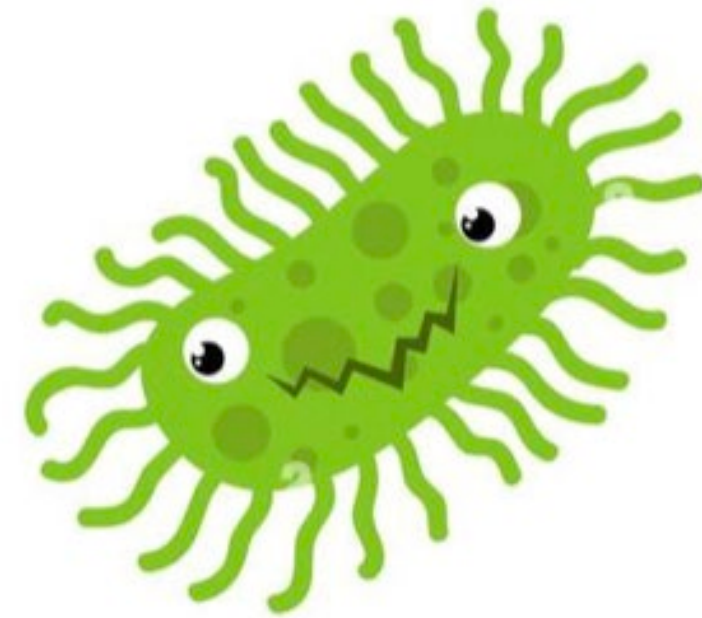
Tryptamine increases colonic secretion and tissue preparations



Biological effects of tryptamine are mediated through the 5-HT₄ receptor, a G-protein-coupled receptor.

The secretory effect of tryptamine is dependent on 5-HT₄R activation and is blocked by 5-HT₄R antagonists.

gene encoding tryptophan decarboxylase



R. gnavus



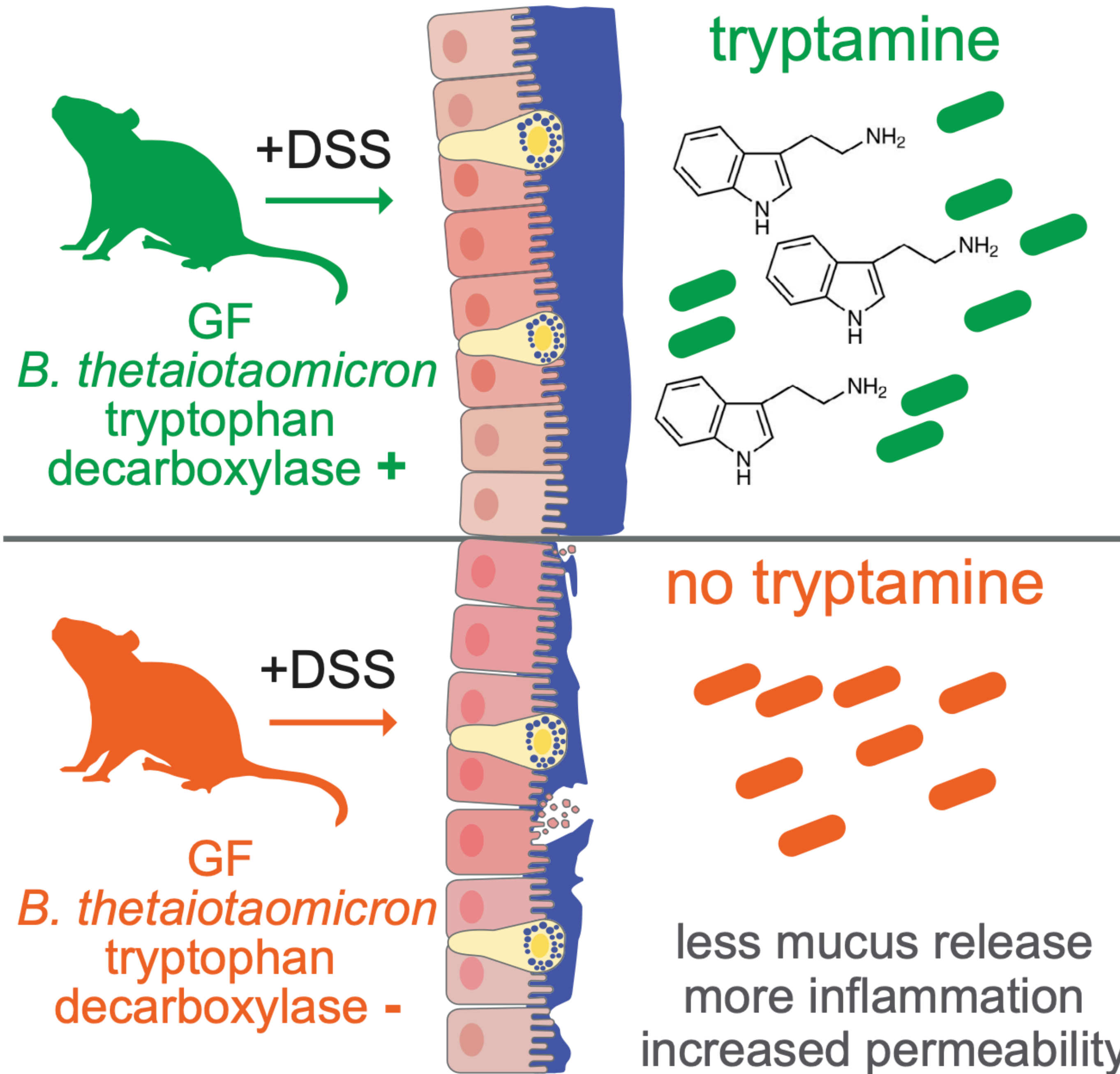
B. thetaiotaomicron

genetically tractable

effectively colonizes the gut

potentially can be used as a biotherapeutic

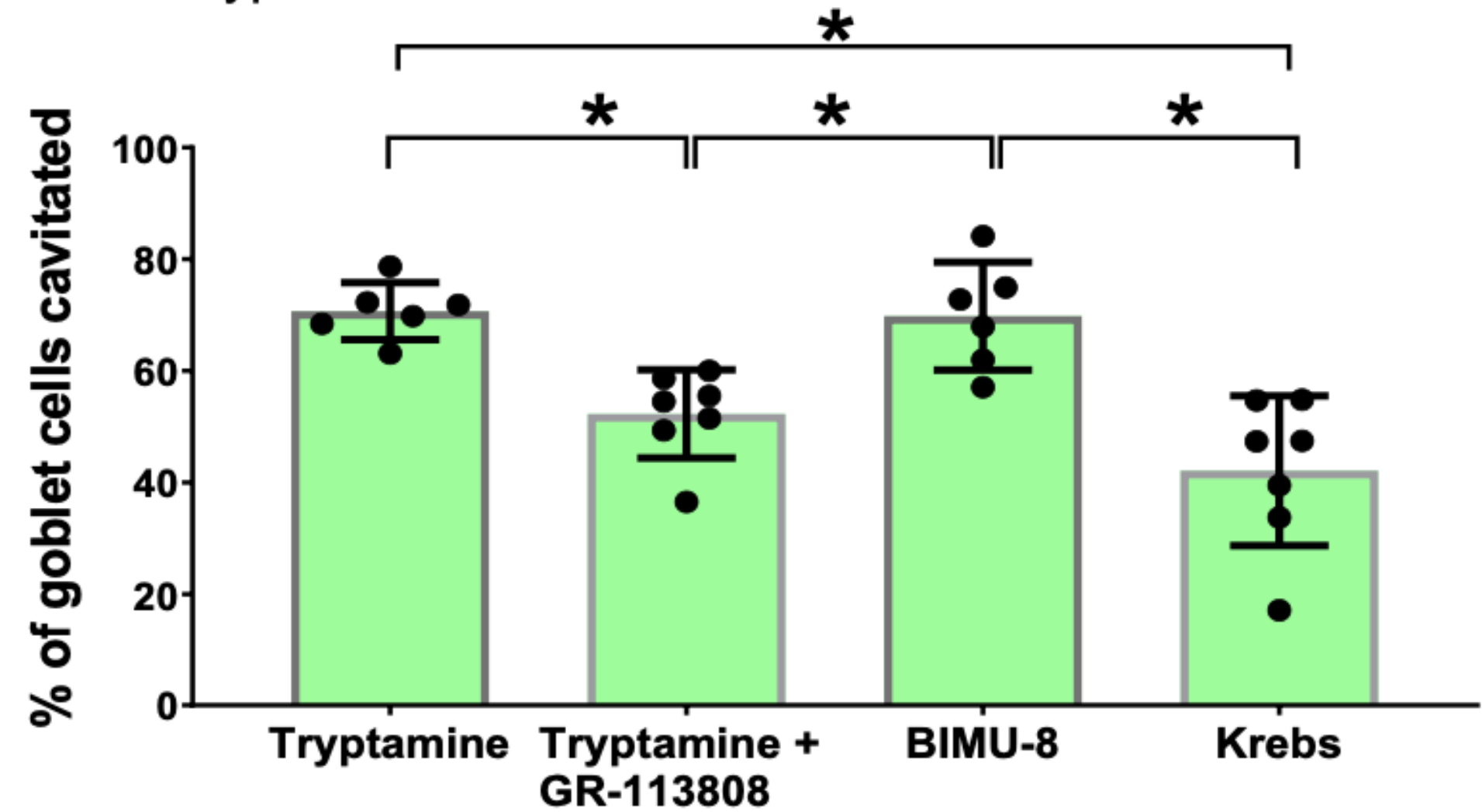
colonize germ free mice with either *B. thetaiotaomicron* Trp D+ or vector-only control *B. thetaiotaomicron* Trp D- and supplemented the drinking



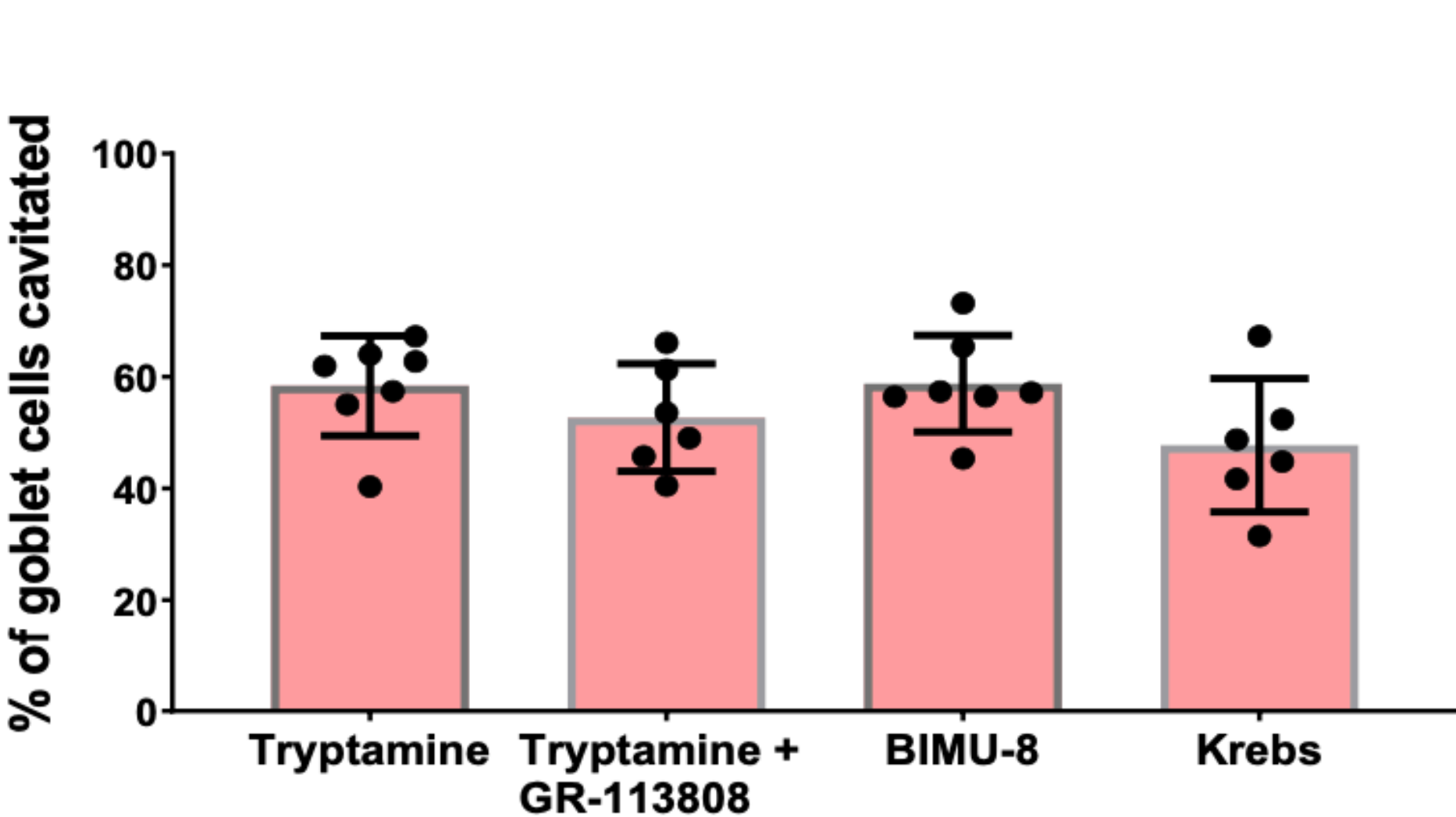
DSS: dextran sodium sulfate

Tryptamine Evokes Mucus Release Ex Vivo, Which Is Blocked by 5-HT4R Antagonist and Absent in 5-HT4R KO Mice

A Wild type



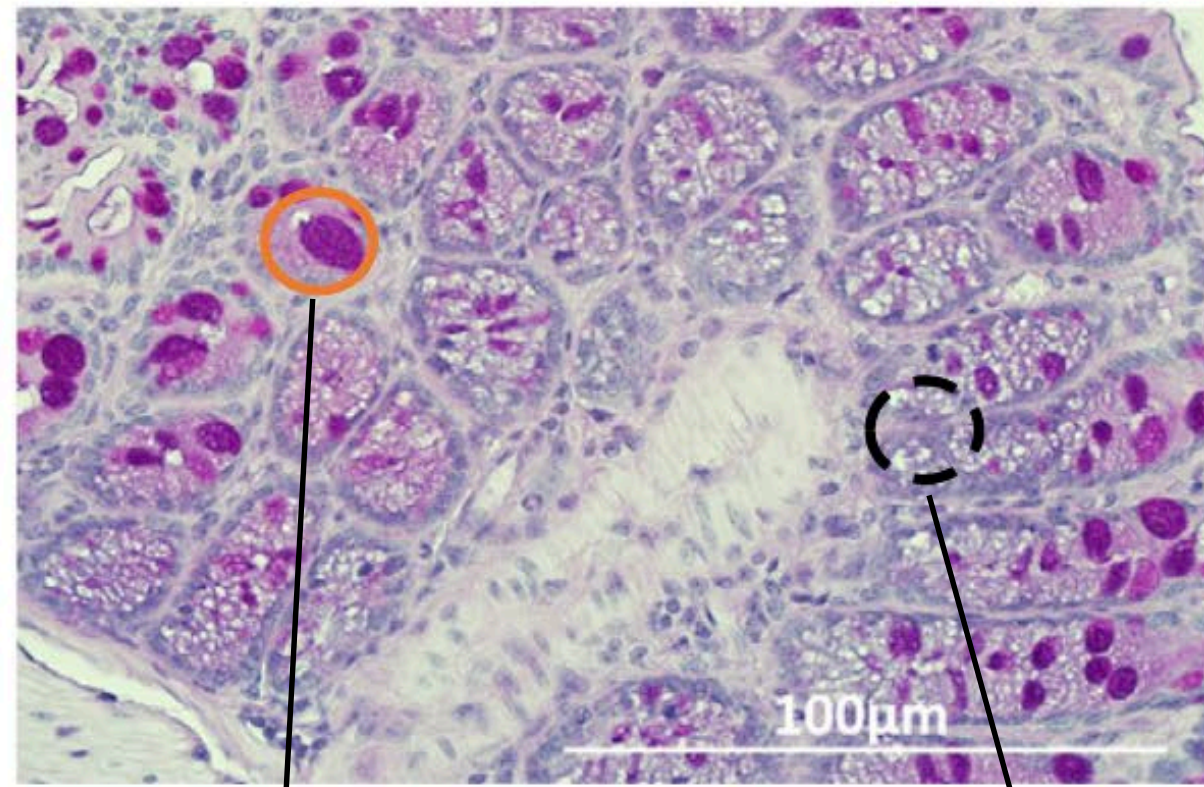
B Knock out



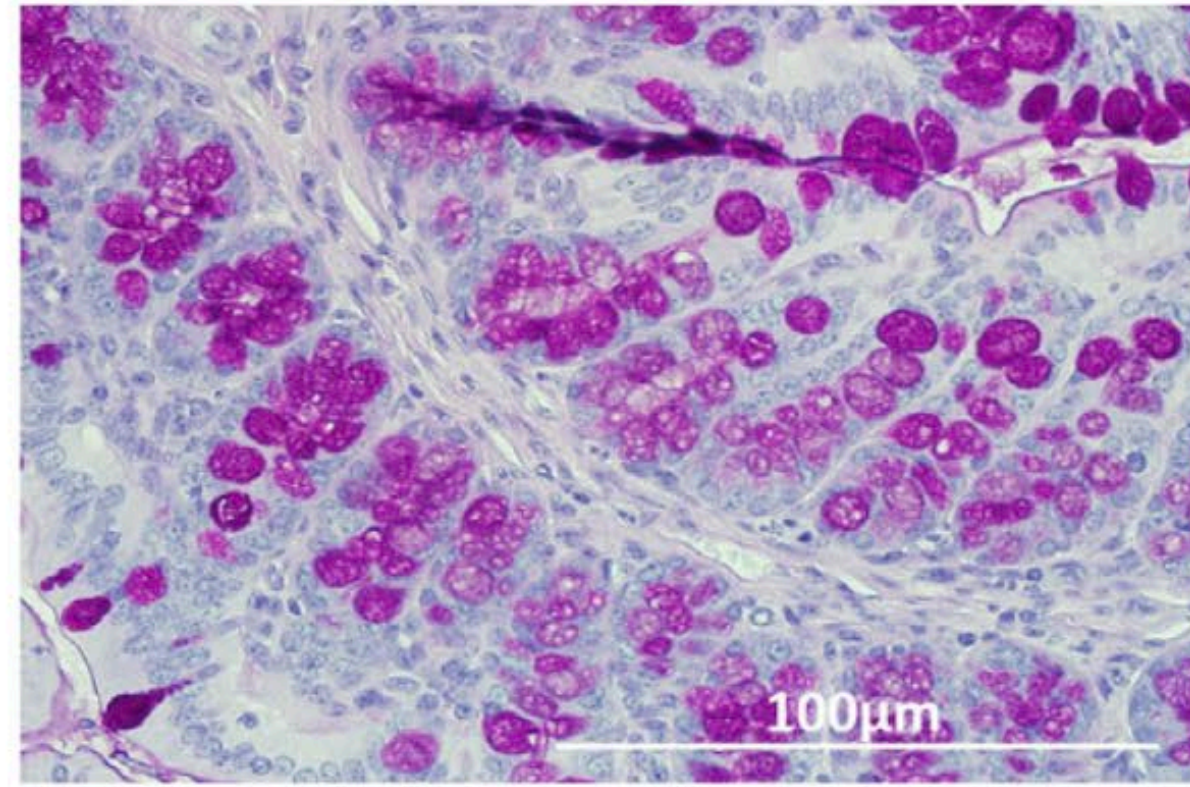
tryptamine(3mM): 5-HT4R-specific agonist, physiological concentration
GR-13808 (30 nM): 5-HT4R-antagonist GR-13808
BIMU-8 (10 mM) : a known pharmacologic 5-HT4R-agonist
Krebs: control

Goblet cell cavitation following treatment with BIMU-8 was comparable to

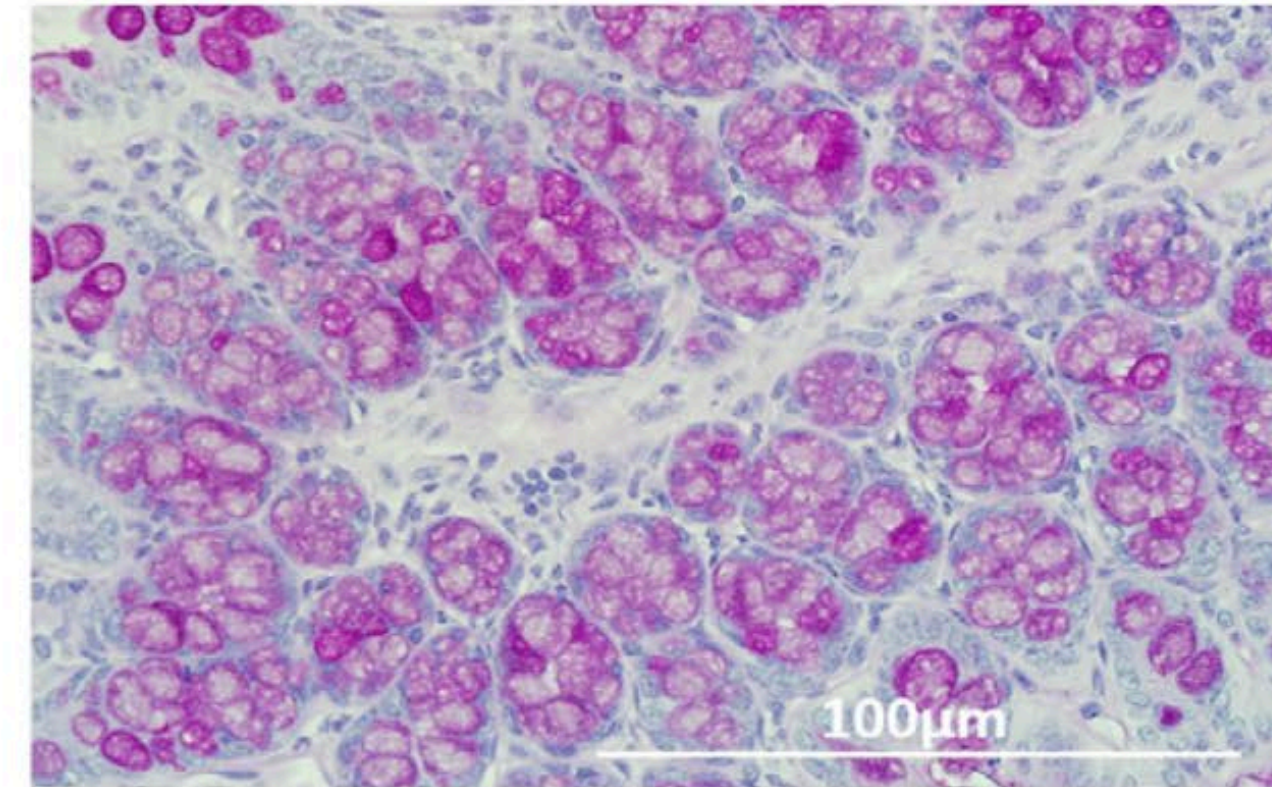
C Tryptamine



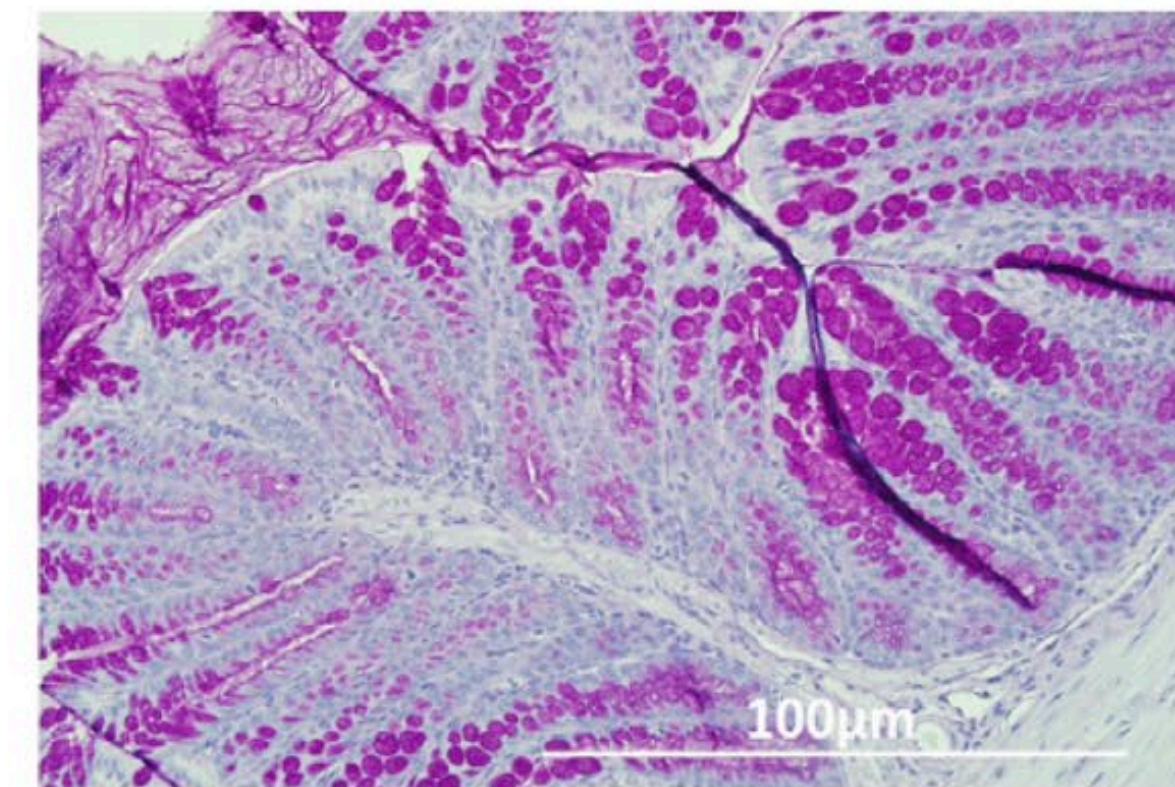
D Tryptamine+GR-113808



E BIMU-8



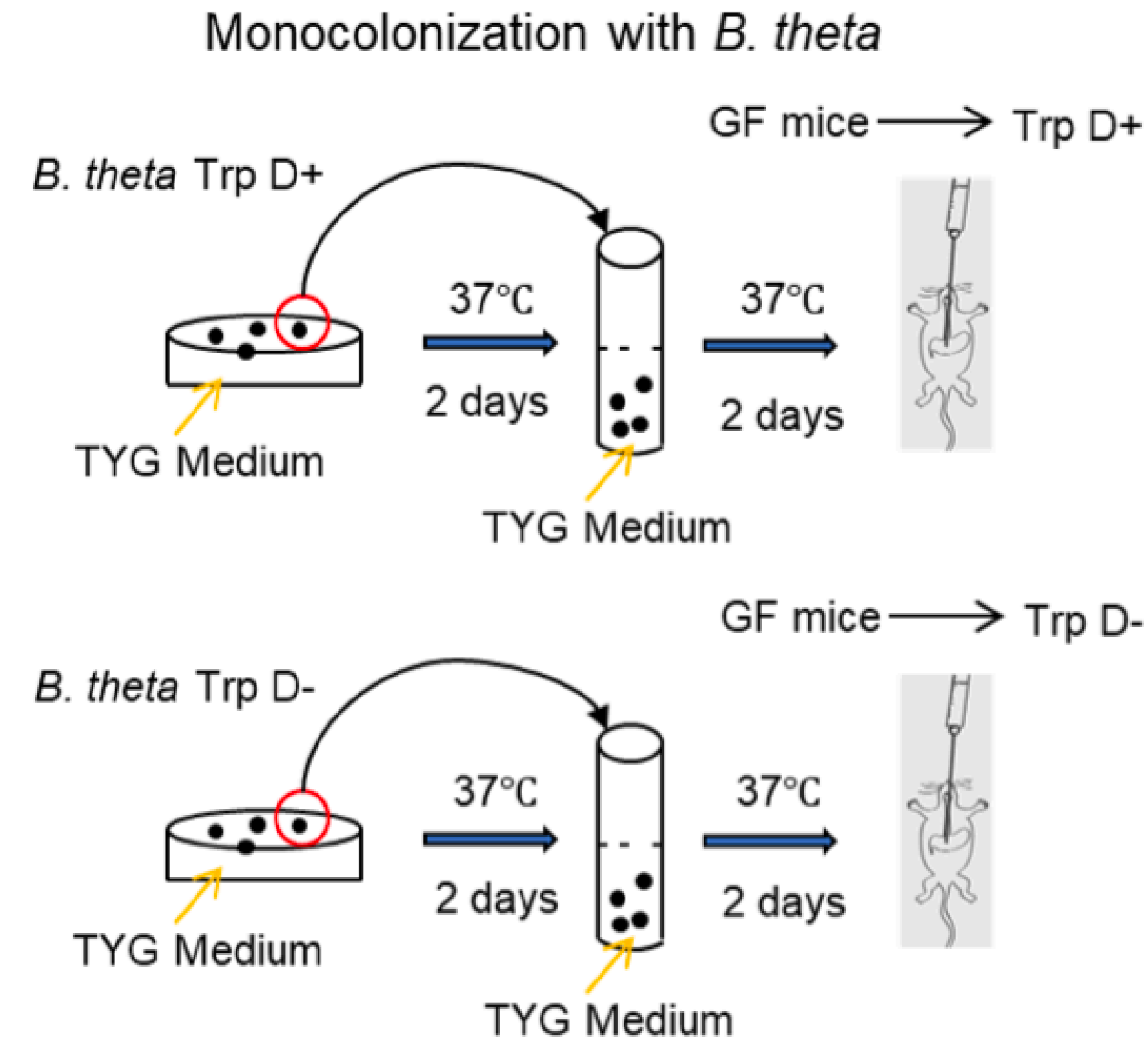
F Kreb's



intact goblet cells cavitated goblet cells

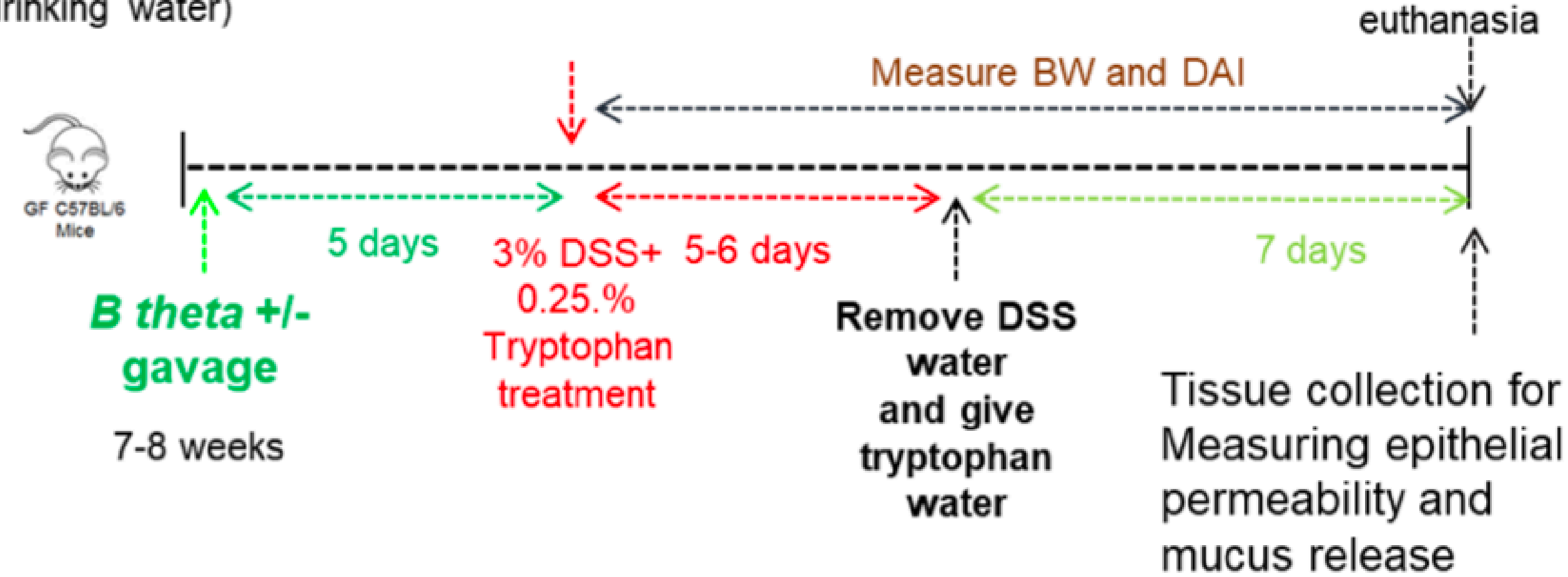
tryptamine causes goblet cell cavitation and stimulates mucus release in the mouse prox

in vivo tryptamine production by *B. theta* Trp D+ strain increased mucus release and pr



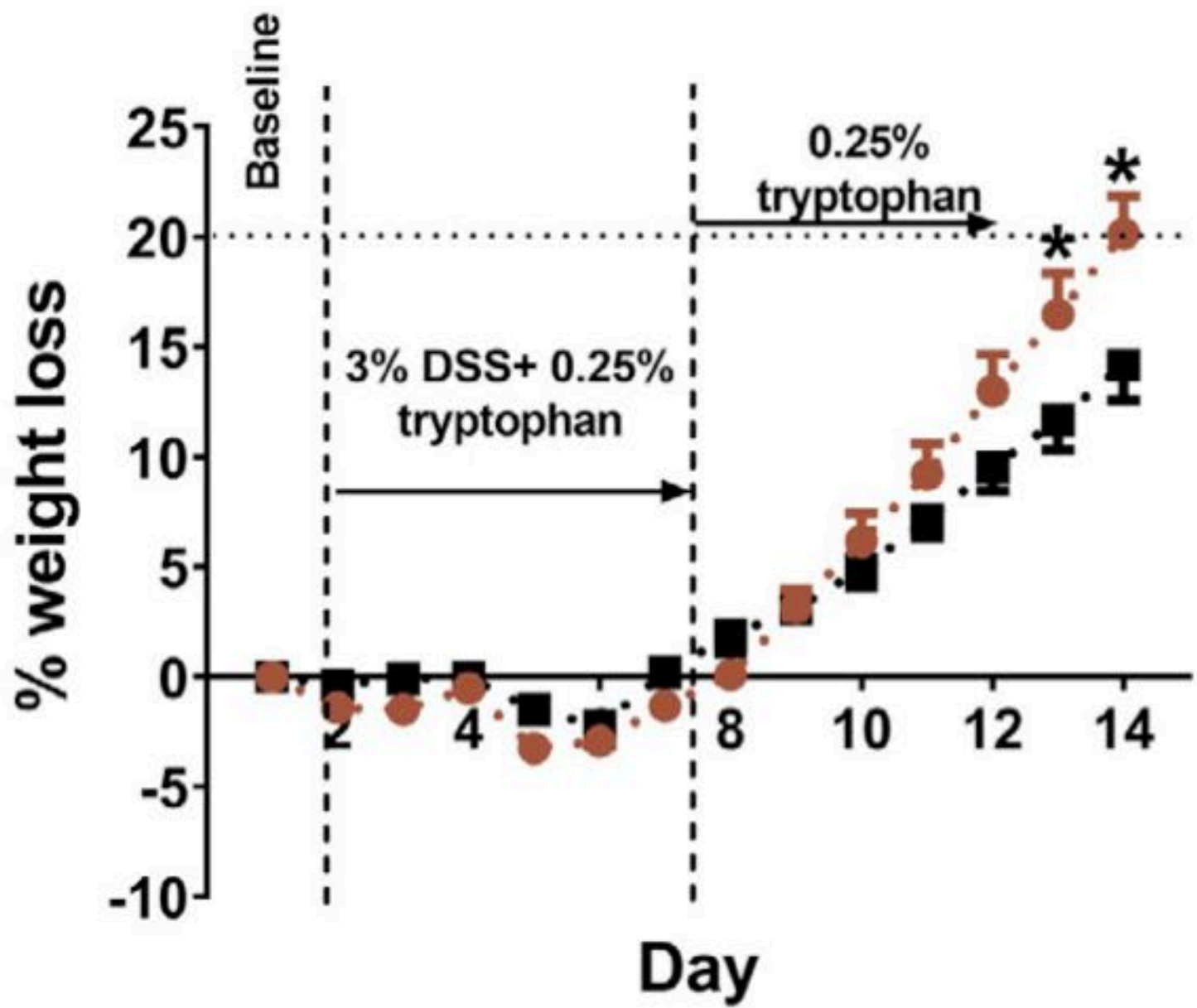
Timeline

Mice have free access to food and medicated water (water containing 0.25% tryptophan supplemented in drinking water)

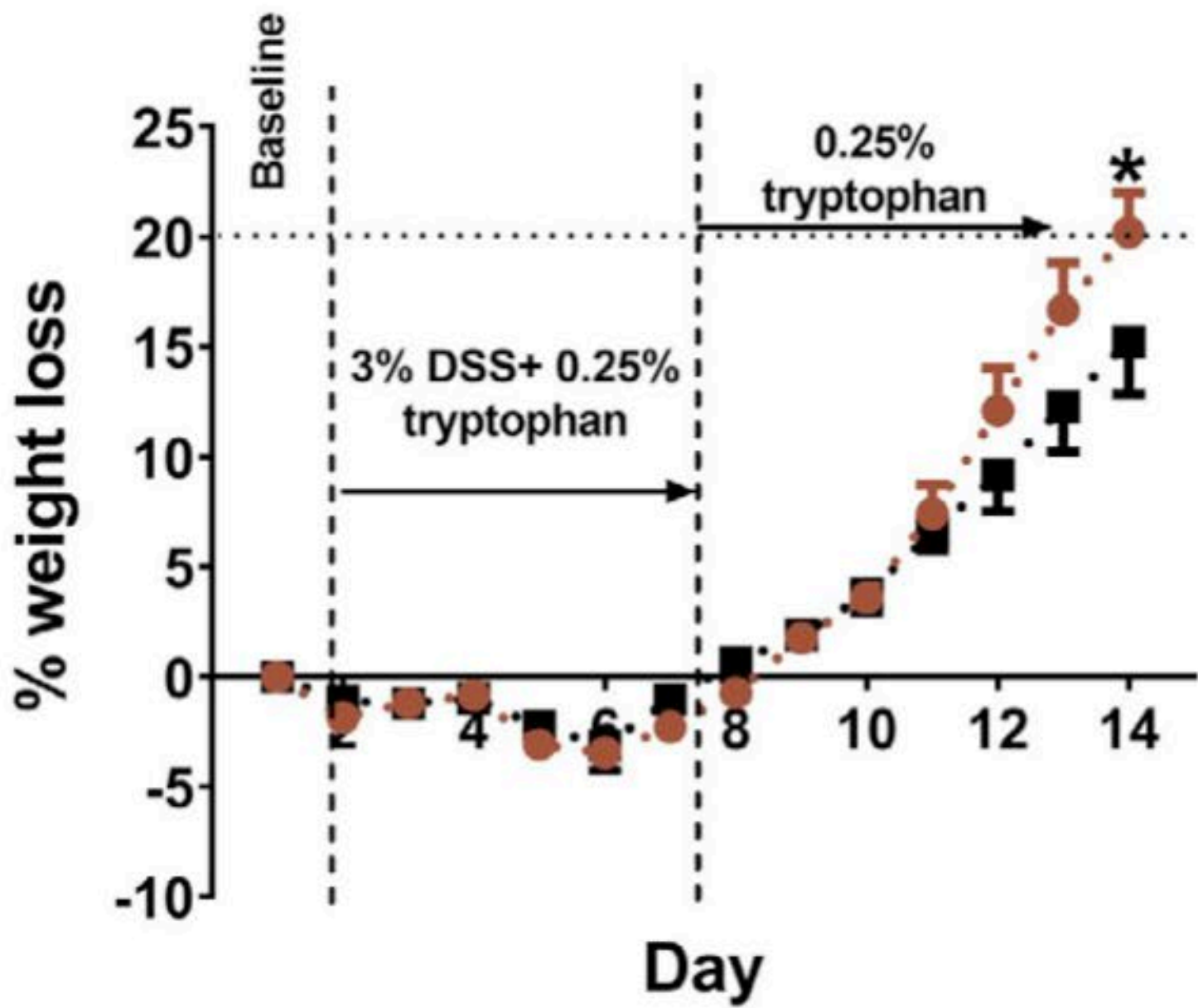


Bacterially Derived Tryptamine Attenuates Weight Loss Following DSS A

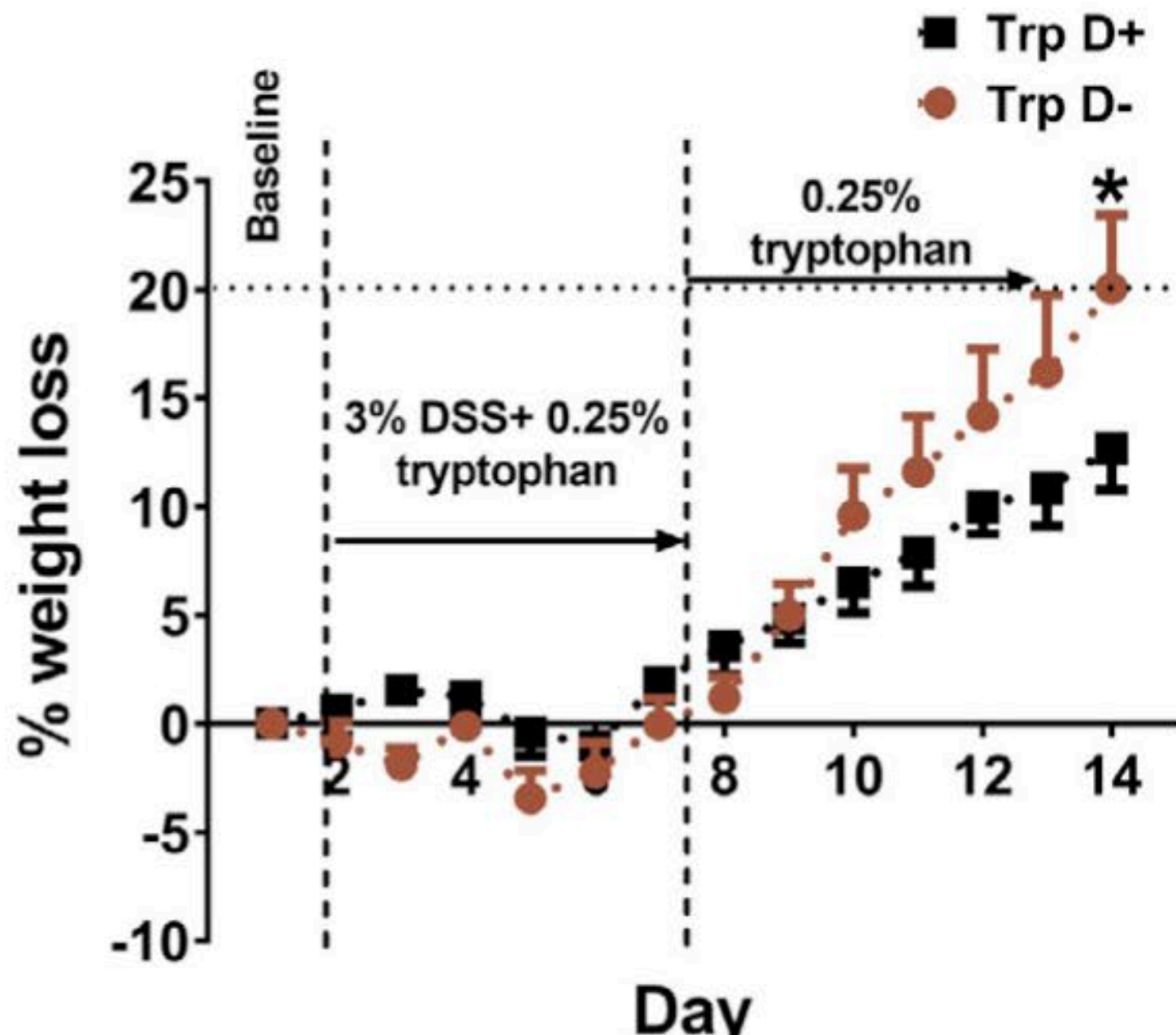
A Males and Females



B Males



C Females

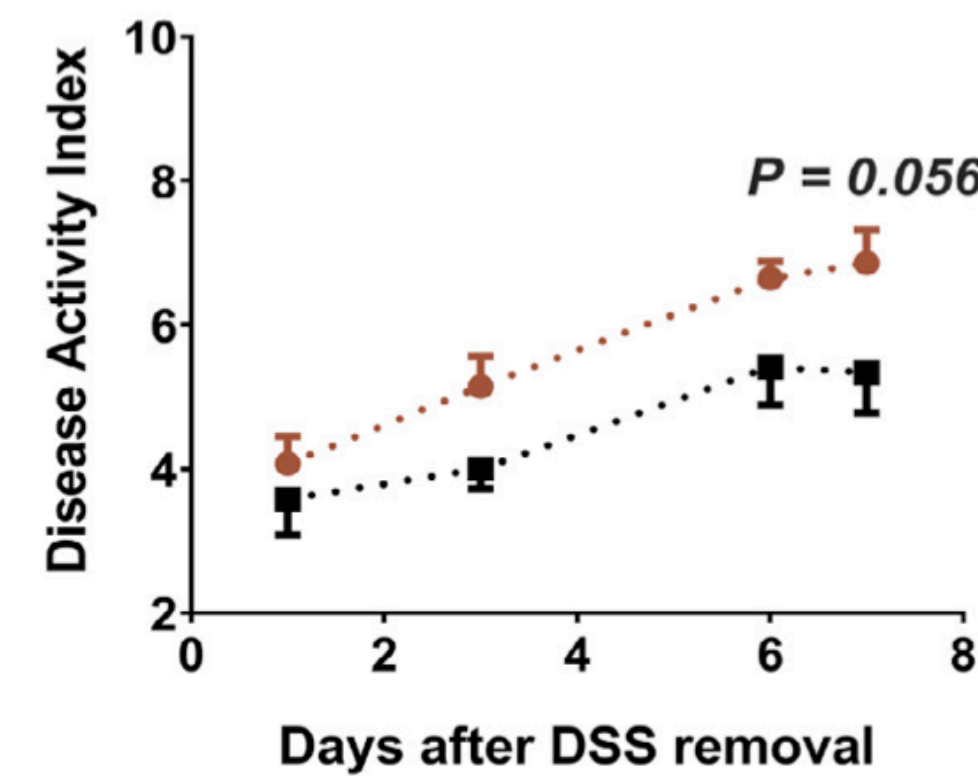


B. thetaiotaomicron Trp D+ monocolonized mice showed significantly lower percentage weight loss compared to Trp D- monocolonized mice, and

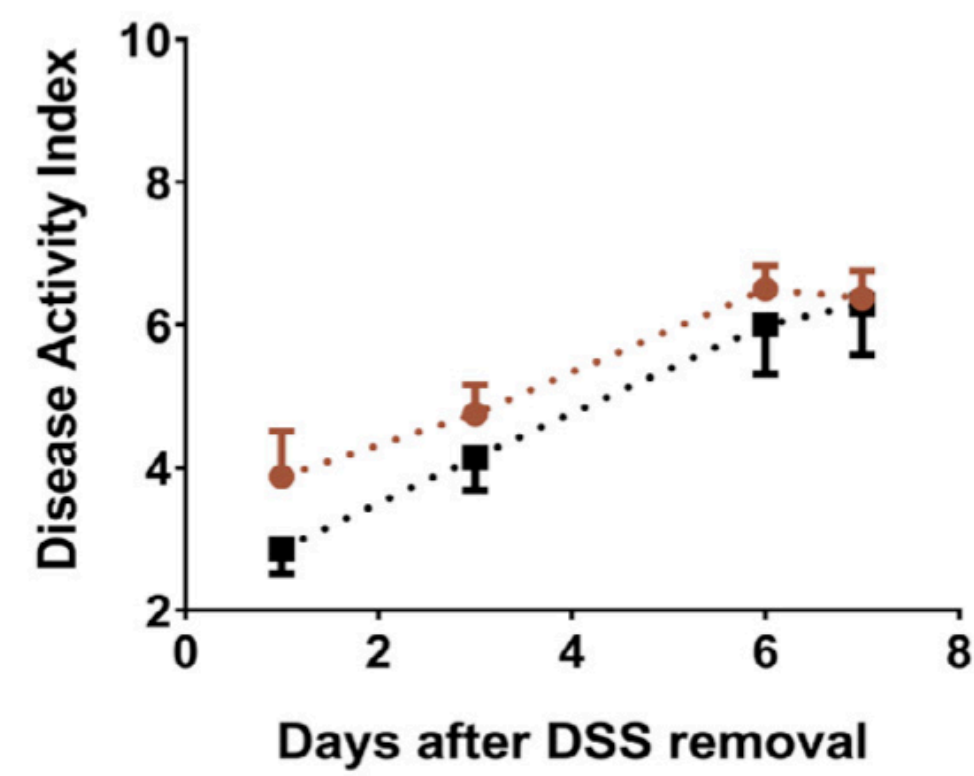
Bacterially Derived Tryptamine Reduces DAI in Female Mice

Score	Weight loss	Stool Consistency	Bleeding
0	None	Normal	Normal
1	1-5%		
2	5-10%	Loose stool	Hemoccult +
3	10-20%		Visible blood in stool only
4	>20%	Diarrhea	Gross bleeding (visible)

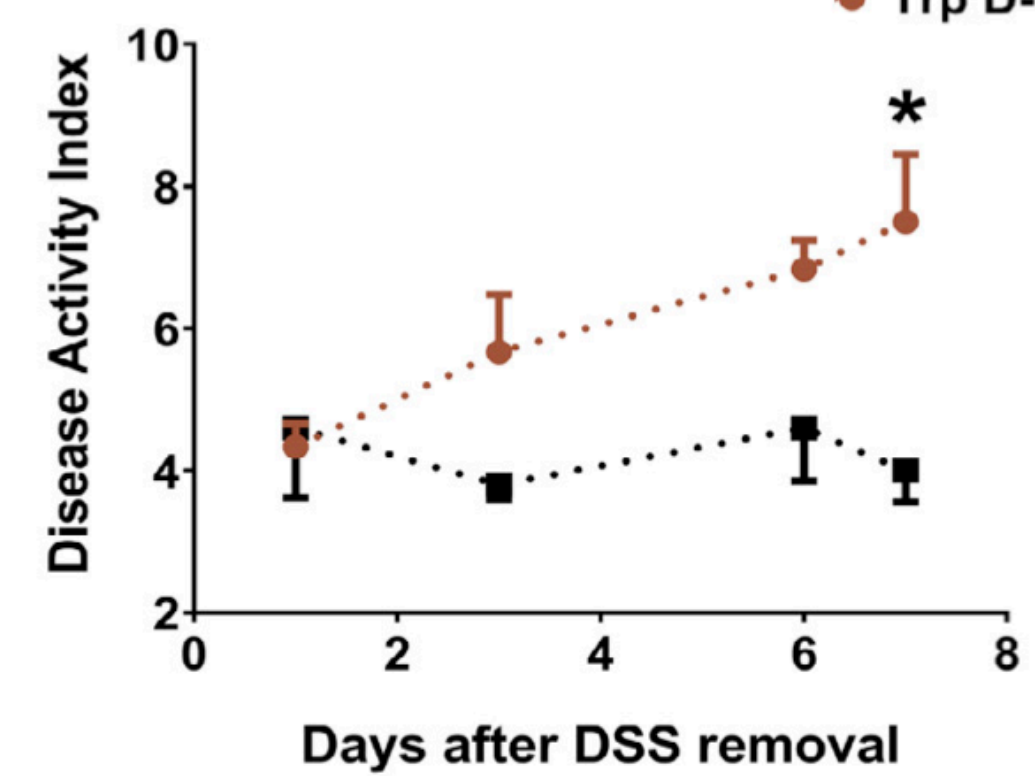
A Males and Females



B Males



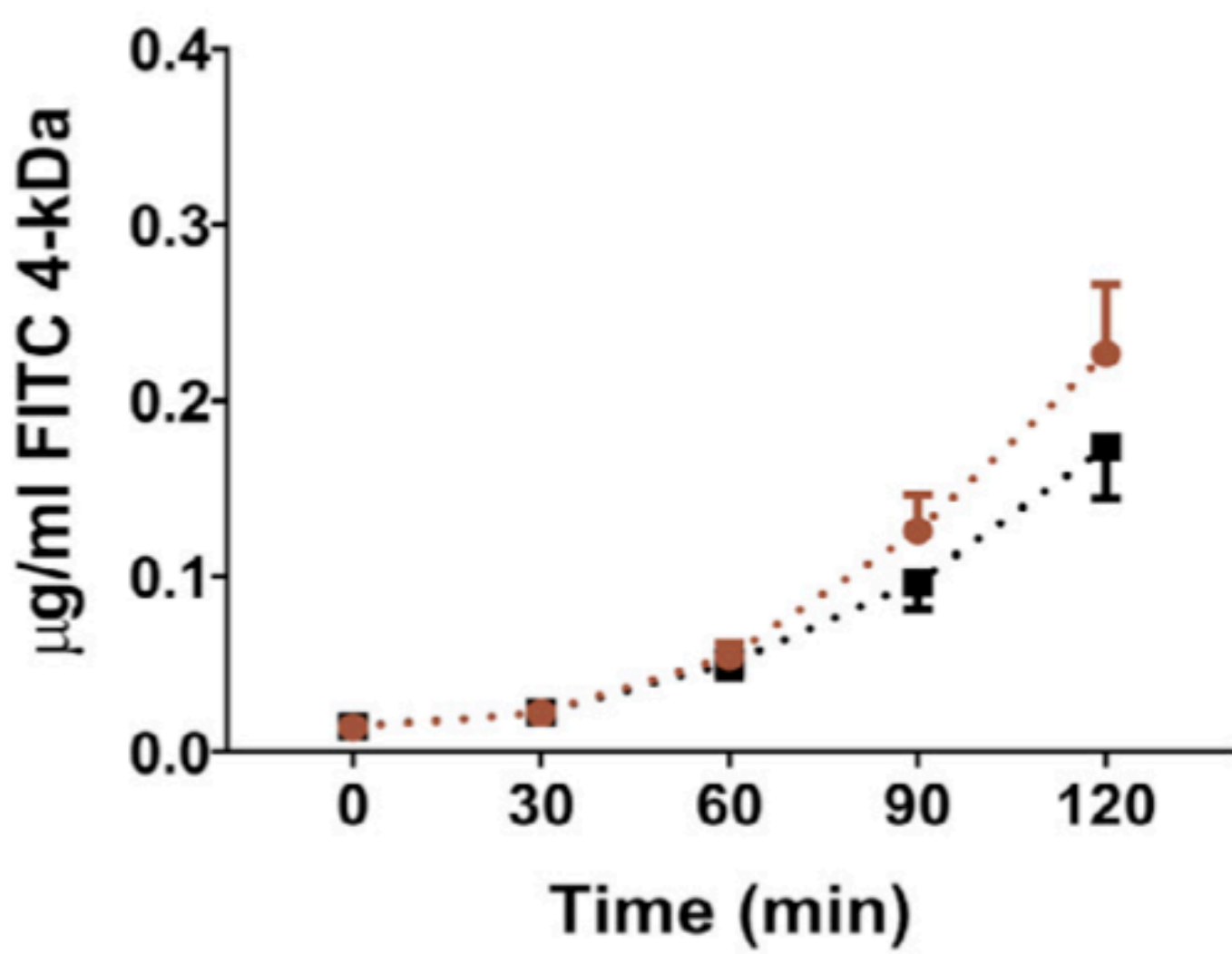
C Females



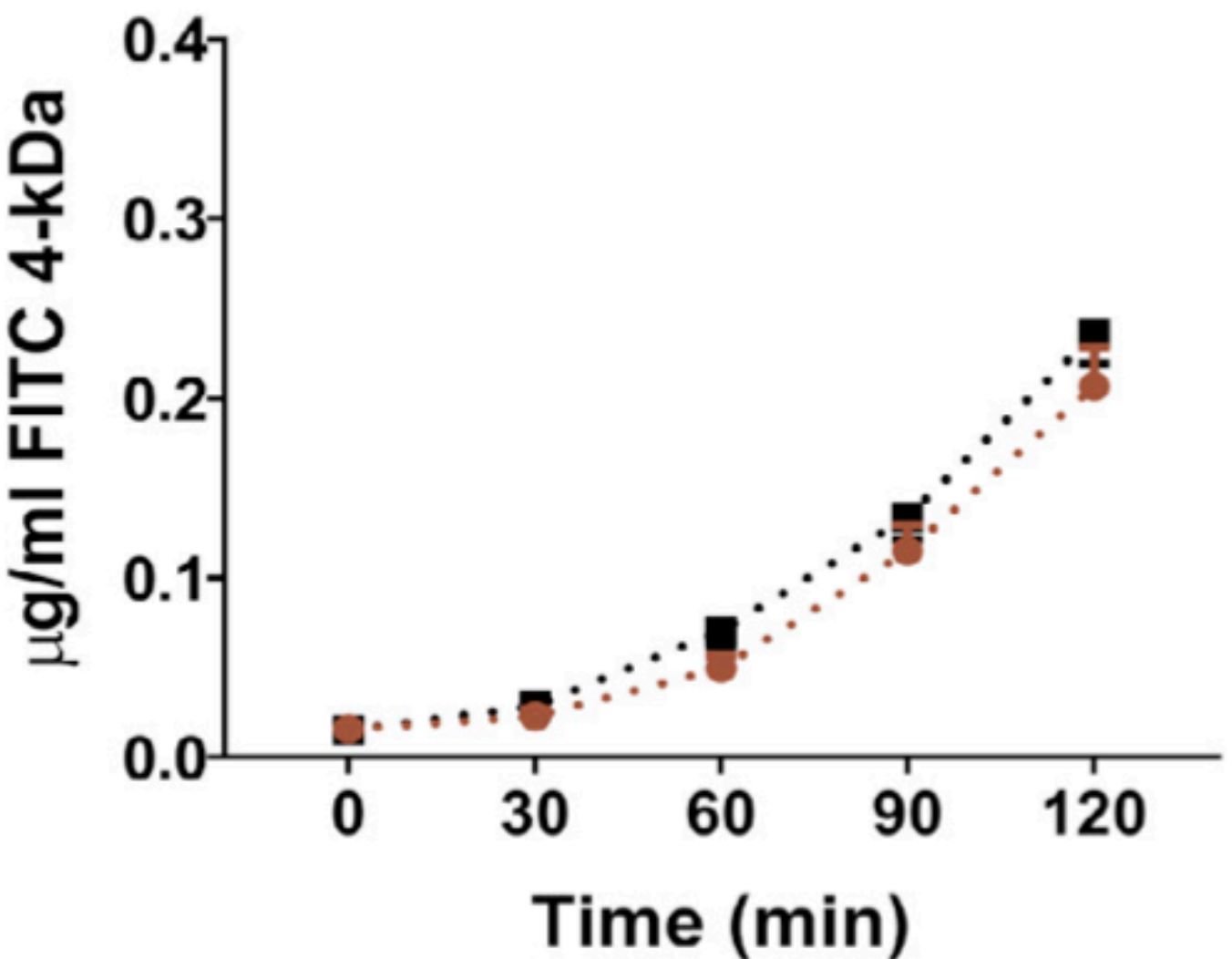
DAI: Disease Activity Index, severity index used to assess severity of colitis in DSS-treated mice

Bacterially Derived Tryptamine Reduces DSS-Induced Epithelial Barrier D

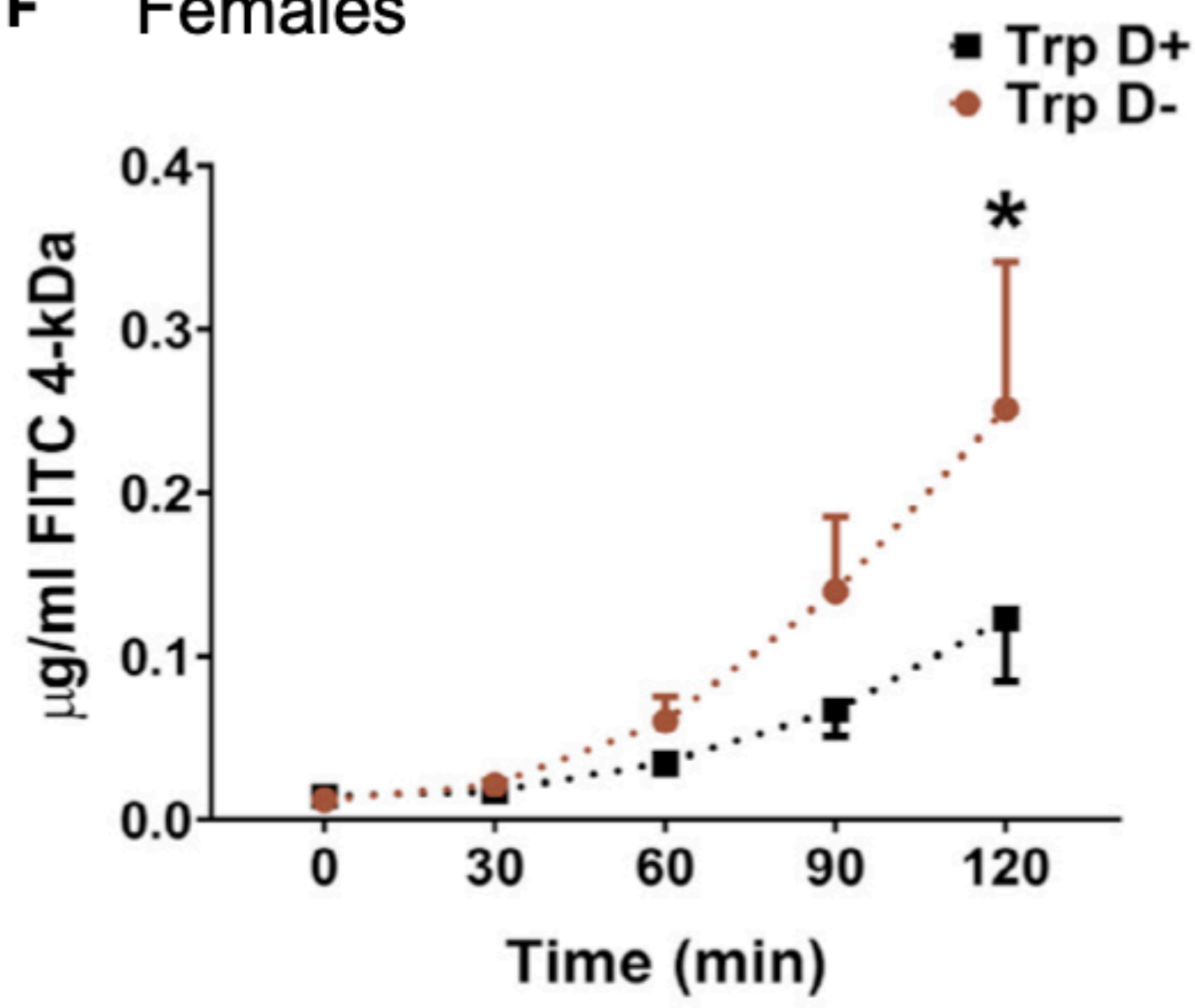
D Males and Females



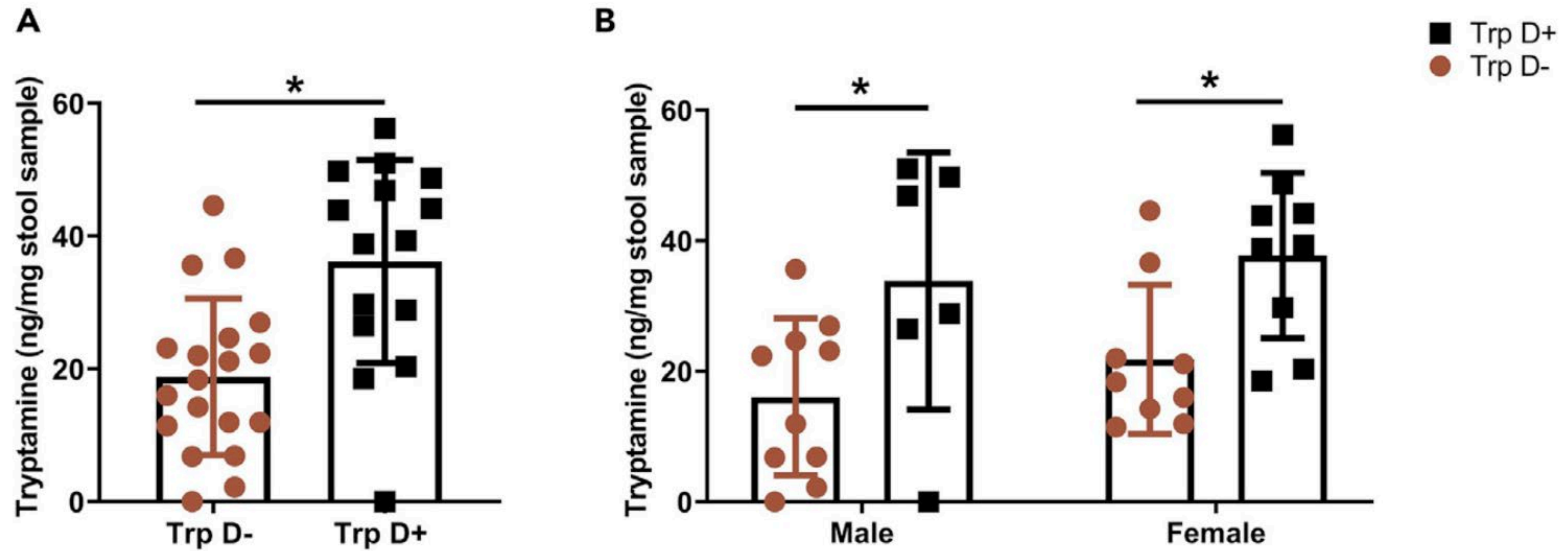
E Males



F Females

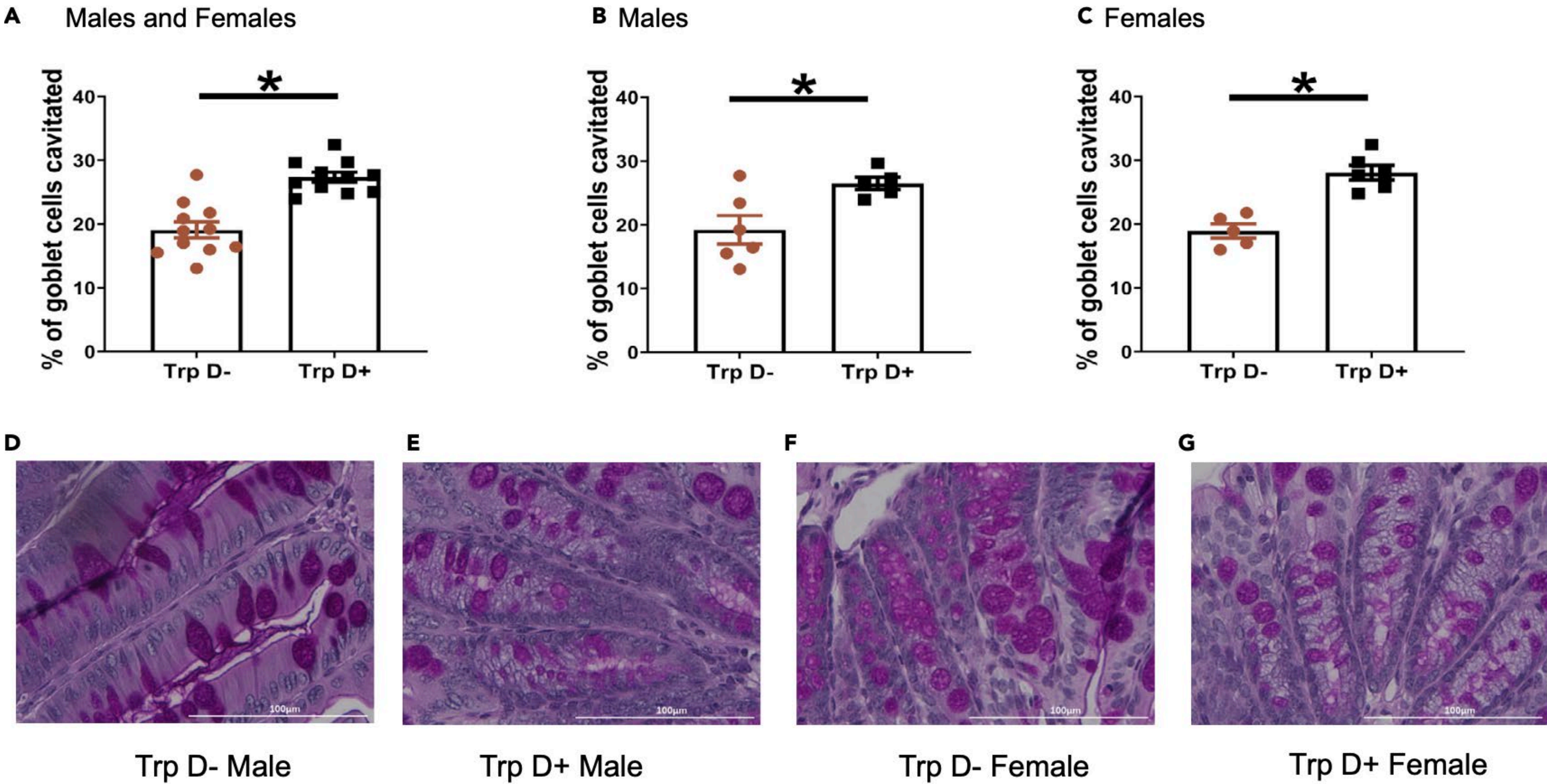


change in 4-kDa FITC flux across proximal colon tissue over two hours in both male and female DSS-treated Trp D+ and Trp D monocolonized r



sex differences observed in the DAI and colonic permeability between Trp D+ and Trp D- n

Bacterially Derived Tryptamine Increases In Vivo Mucus Release Following DSS Administration



summary

- Precise control of tryptamine production in the gut by engineering commensal bacteria can help reinforce the mucus barrier and improve overall colitis burden in response to noxious stimuli in mice.
- This study is an example of how communication between gut bacteria and the host can be exploited for development of novel therapeutics.

Thanks for listening!