MEMBRANE VESICLES DERIVED FROM BORDETELLA BRONCHISEPTICA: ACTIVE

2 CONSTITUENT OF A NEW VACCINE AGAINST INFECTIONS CAUSED BY THIS PATHOGEN

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ABSTRACT

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> Bordetella bronchiseptica, a Gram-negative bacterium, causes chronic respiratory-tract infections in a wide variety of mammalian hosts—humans included, albeit rarely. We recently designed B. pertussis and B. parapertussis experimental vaccines based on outer-membrane vesicles derived from each pathogen and obtained protection against the respective infections in mice. Here, we demonstrate that outermembrane vesicles derived from virulent-phase B. bronchiseptica (OMVBbvir⁺) protect mice against sublethal infection from different B. bronchiseptica strains, two isolated from farm animals and one from a human. In all infections, we observed that the B. bronchiseptica load was significantly decreased in the lungs of the vaccinated animals: the lung-recovered colony-forming units diminished by at least 4 logs below those detected in the lungs of non-immunized animals (p<0.001). In the OMVBbvir⁺immunized mice, we detected IgG-antibody titers against B. bronchiseptica wholecell lysates along with an immune serum having bacterial-killing activity that both

recognized B. bronchiseptica lipopolysaccharides and polypeptides such as GroEL and OMPc and conferred an essential protective capacity against B. bronchiseptica infection as detected by passive in-vivo-transfer experiments.

Stimulation of cultured splenocytes from immunized mice by OMVBbvir⁺ resulted in the presence of IL-5, INF- γ , and IL-17 production; indicating that the vesicles induced a mixed Th2, Th1, and Th17 T-cell-immune-response profile. We detected by adoptive transfer assay that spleen cells from OMVBbvir+-immunized mice also contributed to the observed protection against B. bronchiseptica infection. Outer-membrane vesicles from the avirulent-phase B. bronchiseptica and the resulting induced immune sera were also able to protect mice against B. bronchiseptica infection

IMPORTANCE

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Bordetella bronchiseptica, a Gram-negative bacterium, causes chronic respiratory-tract infections in a wide variety of mammalian hosts—humans included, albeit rarely. Several vaccines aimed at preventing B. bronchiseptica infection have been developed and used, but a safe and effective vaccine is still needed. The significance and relevance of our research lies in the characterization of the outermembrane vesicles (OMVs) derived from B. bronchiseptica as the source of a new experimental vaccine. We demonstrated here that our formulation based on OMVs derived from virulent-phase B. bronchiseptica (OMVBbvir⁺) is effective against the infection caused by B. bronchiseptica isolates obtained from different hosts: farm animals and a human. In-vitro and in-vivo characterization of humoral and cellular immune responses induced by the OMVBbvir⁺ vaccine enabled a better understanding of the mechanism of protection necessary to control B. bronchiseptica infection. Here we also demonstrated that OMVs derived from B. bronchiseptica in the avirulent phase and the corresponding induced humoral immune response are also able to protect mice from B. bronchiseptica infection. This realization provides the basis for novel vaccine developments against not only the acute stages of the disease but also in stages of disease or infectious cycle where avirulence factors could play a role.

Key words

Bordetella bronchiseptica; Outer-membrane vesicles; Vaccine; Phenotypic phases

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Introduction

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Bordetella bronchiseptica is a Gram-negative bacterium that causes respiratory diseases in a variety of mammalian hosts [1]. Though this pathogen rarely infects humans, certain reports have indicated that B. bronchiseptica can infect immunecompromised patients or those with underlying respiratory diseases [2-4]. The respiratory infections caused by this zoonotic pathogen could also become chronic, though exhibiting few or no symptoms [5, 6]. The persistence of B. bronchiseptica in hosts seems to be facilitated through a modification of the expression of bacterial constituents mainly controlled by a two-component regulatory system encoded by the bvgAS locus [7, 8]. This system senses signals from the external environments, regulates the expression of hundreds of genes, and controls different phenotypic phases [9]. The prophylaxis of diseases caused by B. bronchiseptica is achieved through vaccination, but to date no satisfactory vaccine to confer protection in animals against the acute or chronic infection caused by B. bronchiseptica has been developed. Some of the current vaccines are composed of either killed wild-type bacterial strains (administered parentally) or live attenuated strains (administered intranasally) [10, 11]. Most of the vaccines containing the killed bacteria induce high serum antibody titers but do not always provide an effective protection against infection [10]. The data on the safety and efficacy of live attenuated vaccines are scarce. Moreover, this kind of vaccine is not well accepted because the strains included in the vaccines may revert to full or partial virulence since the basis of the original attenuation is still unknown. As to the acellular B. bronchiseptica vaccines, one is composed of the immunogenic Bordetella colonization factor-A protein while others contain pertactin (PRN), the outer-membrane protein that is a highly immunogenic virulence factor [12-15]. Although these vaccines appear to resolve mainly the issue related to adverse side reactions, no conclusive evidence has been garnered to support their immunogenicity [13, 16]. Therefore, the identification of appropriate bacterial components for the development of a new vaccine is still needed. In this search, the characteristic constituents of the avirulent phase could be included in such an evaluation since this phase seems to be involved in the infectious process [6, 8, 17].

In the work reported here, we investigated whether a vaccine based on OMVs

derived from B. bronchiseptica in either the virulent or the avirulent phenotypic phase

would be able to generate a protective immunity against an infection caused by B.

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bronchiseptica. Vaccines based on OMVs against B. pertussis or B. parapertussis infections have recently been developed by our group [18-22]. The administration of OMV-based vaccines confers a complete protection against B. pertussis or B. parapertussis in mice. The protection against B. pertussis is long lasting and is mediated by both antibodies and CD4⁺ T cells [20]. We have made the interesting observation that the protective capacity of OMVs obtained from a B. pertussis strain that expressed the avirulent phenotype was lower than that of the OMVs from virulent-phase B. pertussis, but the two were nevertheless protective in the mouse model used [23].

These results in combination permit the hypothesis that OMVs derived from B. bronchiseptica from either the virulent or the avirulent phase could constitute a suitable candidate for a vaccine against bordetellosis. In fact, the findings described here support this hypothesis since the protection experiments performed in the murine intranasal-challenge model demonstrated that the OMV-vaccine derived from virulent B. bronchiseptica was able to effect a significant decrease in the lung colonization of different B. bronchiseptica strains obtained from different hosts—i. e., farm animals or a human. Furthermore, by performing in-vitro and in-vivo experiments, we detected that both a humoral response possessing killing capacity and immune splenic cells contributed to the protection induced by the OMVBbvir+vaccines. Moreover, we have also observed that protective capacity could be induced with a vaccine formulated from OMVs obtained from B. bronchiseptica in the avirulent phase.

MATERIALS AND METHODS

Bacterial strains and growth conditions

Bordetella bronchiseptica strain 9.73 (isolated from a rabbit) [24] and the mutant derivative strain defective in expression of the BvgA protein (blocked in avirulent phase) [25] were used throughout this study. Bordetella bronchiseptica strains were grown on Bordet Gengou agar medium (Difco, Houston TX, USA) supplemented with 10% (v/v) defibrinated sheep blood (blood was from Laboratorio Argentino S.A.). For challenge in the animal experiments, the strains from rabbits B. bronchiseptica 9.73 and B. bronchiseptica RB50 (Bb_{ra}RB50, kindly provided by Dr. Peggy Cotter of the University of North Carolina) and B. bronchiseptica AR705 $(Bb_{hu}AR705$, an Argentine clinical isolate obtained from a pediatric patient with cystic fibrosis) were also used.

Isolation of outer-membrane vesicles (OMVs)

To obtain OMVs from the bacterial cells, we used the method previously described by us [18, 22, 26]. The procedure stated in brief: Culture samples from the decelerating growth phase of the bacteria were centrifuged at 10,000 x g for 20 min at 4 °C and the pellet obtained resuspended in 20 mM Tris-HCl, 2 mM EDTA, pH 8.5 (TE Buffer). Of the resulting pellet, approximately 1 g (wet weight) was resuspended in 5 ml of the TE Buffer. OMV release was promoted by sonication in ice-water; the cells were then removed by centrifugation at 10,000 x g and the OMV supernatant concentrated by ultracentrifugation at 40,000 x g for 3 h. The OMVs thus obtained were stored at 4 °C. Thereafter the OMVs were examined by electron microscopy after negative staining [22].

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Protein assay

151 Protein content was estimated by the Bradford method with BSA as a standard 152 [27].

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One-dimensional electrophoresis and immunoblotting

OMV proteins were separated by sodium-dodecyl-sulfate-polyacrylamide-gel electrophoresis (SDS-PAGE), transferred onto polyvinylidene difluoride (Immobilon P, Millipore USA) and probed with either a polyclonal anti(adenylate-cyclase hemolysin) [anti(AC-Hly)] antibody (1:300), an anti-PRN antibody (1:500), an antifimbriae (-FIM) antibody (1:500), an anti-flagellin (-FLA; 1:2,000) antibody, or anti-GroEL, an antibody against a protein analogous to the E. coli chaperonin GroEL (1:5,000) followed by incubation with anti(mouse IgG) conjugated with alkaline phosphatase at a 1:1,000 dilution. Nitroblue tetrazolium and 5-bromo-4-chloro-3indolyl-phosphate were used as the phosphatase substrates according to the manufacturer's protocol (Biodynamics SRL Buenos Aires Argentina). Some of the proteins present in the vesicles were identified by mass spectrometry after the initial separation by one-dimensional electrophoresis, as previously described [28, 29].

Bordetella bronchiseptica-lipopolysaccharide (LPS) electrophoresis was performed at room temperature and constant voltage. The LPS were visualized by the BioRad silver-staining technique.

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Formulation of vaccines

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To use the OMVs as acellular vaccines, the vesicle preparations were detoxified by mixing with aqueous formaldehyde (0.37% [v/v] and incubating at 37 °C overnight, and aluminum hydroxide (0.2 mg/ml) was then added as an adjuvant.

To prepare whole-cell vaccine (WCVBbvir⁺), a suspension containing 2 x 10¹⁰ colony-forming units (CFUs)/ml of heat-killed (56 °C for 20 min) B. bronchiseptica 9.73 were detoxified in the same manner and were then mixed with aluminum hydroxide (0.2 mg/ml) as an adjuvant.

Expression of inflammatory markers upon systemic delivery of OMVs

In order to assess the proinflammatory capacity of the OMV-based vaccine formulation, mouse-blood samples were collected 4 h after each immunization by submandibular bleeding. Serum interleukin-6 (IL-6) was measured by enzyme-linked immunosorbent assay (ELISA) with the kit BD OptiEIA (BD Biosciences, CA USA) according to the manufacturer's instructions.

Active immunization and intranasal challenge

Four-week-old female BALB/c mice obtained from Biol SAIC, Argentina were used for all assays. As described previously [29], the immunization protocols comprised a two-dose schedule with the formulations described above over a period of 2 weeks. Two weeks after the second immunization, mice were subjected to a nasal challenge with a sublethal dose (10^5-10^6) CFUs in 40 µl) of B. bronchiseptica strain. The lungs of the challenged mice were excised and collected for bacterial counts at 7 days after the challenge. The number of CFUs was determined as previously described [29]. At least three biological replicates were performed.

ELISA

Plates were coated with sonicated B. bronchiseptica (whole-cell lysates) in 0.5 M carbonate buffer, pH 9.5 in an overnight incubation at 4 °C and then blocked with 3% (v/v) skimmed milk in blocking buffer (2 h at 37 °C) before incubation with serially diluted mouse-serum samples (1 h at 37 °C). The bound IgG was detected after a 2-h incubation with horseradish-peroxidase- (HRP)-conjugated goat anti-(mouse IgG) at a titer of 1:20,000 (Thermo Fisher Scientific, Buenos Aires Argentina). For measuring IgG isotypes, detection of bound antibody was determined

with HRP-labeled subclass-specific anti-(mouse IgG1) at 1:8,000 or IgG2a (1:1,000; Sigma Aldrich, USA). As substrate 1.0 mg/ ml o-phenylendiamine (OPD, Bio Basic Canada Inc) in 0.1 M citrate-phosphate buffer, pH 5.0 containing 0.1% hydrogen peroxide was used. For measuring IgG isotypes, the detection of bound antibody was determined with the peroxidase bound to subclass-specific anti-mouse-IgG1 (1:8,000) or -IgG2a (1:1,000; Sigma, Aldrich). Optical densities (ODs) were measured with Titertek Multiskan Model 340 microplate reader (ICN, USA) at 492 nm, and the OD was plotted as a function of the log of the (serum dilution)⁻¹. The inflection point of the curve was determined by the GraphPadPrims® software. Titers were defined as the reciprocal of the serum dilution giving an OD corresponding to the inflection point of the curve.

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Bactericidal Assay

The bactericidal activity of the sera collected from mice two weeks after immunization with the OMVBbvir⁺ vaccine (i. e., the immune sera) and from nonimmunized mice (i. e., the naïve sera) were tested in vitro. Both, immune and naïve sera inactivated by heat, and phosphate-buffered saline (PBS) were use as controls. Virulent B. bronchiseptica 9.73 were grown on Bordet Gengou agar medium and diluted to 1 x 10⁵ CFUs/ml in PBS containing MgCl₂ 0.05 M, CaCl₂ 0.15 mM. Fortyfive µl of serum or PBS were mixed with 5 µl of a suspension containing 500 CFUs of the bacteria. After 1 h of incubation at 37 °C, serial dilutions of the samples were spread on Bordet Gengou agar plates and incubated for 48-72 h to determine the CFUs. At least three biological replicates were performed.

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Analysis of cellular response elicited by vaccination

The cellular response was analyzed as previously described [20]. The procedure stated in brief: Spleen cells from mice immunized with the OMV-based vaccine were harvested 8 weeks after the last immunization and seeded in 48-well culture plates at 10⁶ per well in a volume of 500 µl of RPMI 1640 cell-culture medium supplemented with 10% (v/v) fetal-bovine serum (Invitrogen, Buenos Aires Argentina) containing 100 IU/ml penicillin and 100 µg/ml streptomycin. All the spleen cells were either stimulated with OMVs derived from B. bronchiseptica (5 µg/ml) or exposed to medium alone. Supernatants were removed after 72 h of

incubation at 37 °C in an atmosphere of 5% CO₂ and the production of interferon-y (IFN-γ), IL-17, and IL-5 determined by ELISA (BD Biosciences, CA USA), according to the conditions specified by the manufacturer.

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Adoptive transfer

Pooled serum (100 µl) or spleen cells (5 x 10⁶) from non-immunized mice or from mice immunized with the OMV-based vaccine two weeks previously were transferred intraperitoneally to female BALB/c mice. Twenty-four hours thereafter the mice were infected with a sublethal dose (10^5-10^6) CFUs 40 in µl) of B. bronchiseptica 9.73 and the subsequent protection assessed by determining the CFU counts in the mouse lungs 7 days after the challenge. In order to evaluate the contribution of CD4⁺ T cells in the protection, adoptive transfer assays were also performed using spleen cells obtained from animals immunized with OMVBbvir+ and depleted in CD4⁺ T cells. Depletion of CD4⁺ T cells in vaccinated mice was performed by intraperitoneal injection with the monoclonal antibody from GK1.5 hybridoma (61.2 mg/ml) specific for CD4. The dosing schedule consisted in the administration to the donor animals of 200 µl of the antibody the day before spleens were collected for the passive immunization protocol. After spleen cells transfer, receptor animals received 2 doses of anti-CD4 antibody to ensure the depletion. Depletion of CD4+ T cells was confirmed by a reduction of at least 95% of the lymphocyte CD4 (+) population in blood and spleen by flow cytometry. Donor mice treated with control isotype (IgG2bk) were included in the assays for comparison purposes.

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Statistical analysis

The data were evaluated statistically by one-way analysis of variance (ANOVA) followed by the Tukey test *post-hoc* (via the GraphPad Prism® software). Differences were considered significant at a p < 0.05.

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RESULTS

Isolation and characterization of the OMVs obtained from B. bronchiseptica 9.73 grown in the virulent phase

The OMV samples obtained from *B. bronchiseptica* 9.73 grown in the virulent phase (OMVBbvir⁺) were negatively stained and examined by electron microscopy

(Fig. 1, Panel A). The procedure was repeated at least 8 times, and in all the samples the size range (at dimensions of 50-150 nm) was both consistent from batch to batch and similar to that previously described for OMV preparations derived from B. pertussis [22]. To further characterize these OMVBbvir⁺, one-dimensional electrophoresis (Fig. 1, Panel B) and immunoblotting (Fig. 1, Panel C) were performed. By this assay we could detect that the OMVBbvir⁺ isolates contained AC-Hly, PRN, and FIM2 (Fig. 1, Panel C).

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IL-6 levels after immunization

Usually after the systemic immunization of an animal, a rise in proinflammatory cytokines can be detected. The levels are related to the proinflammatory capability of the formulation employed. IL-6 is among the proinflammatory cytokines usually chosen as an indicator of this activity [30]. In our experiments, the OMVBbvir⁺-containing formulations induced levels of IL-6 (425.54 \pm 34.00 pg/ml) that were significantly lower than those detected for the B. bronchiseptica whole-cell vaccine (53,673.08 \pm 5,987.44 pg/ml).

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Protection against intranasal B. bronchiseptica challenge after vaccination with OMVBbvir⁺

To evaluate the protective capability of the OMVBbvir⁺ vaccine against B. bronchiseptica challenge, we used the murine model of intranasal infection. The CFUs recovered from the lungs of the OMVBbvir⁺-immunized mice were compared with those assayed in mice immunized with the B. bronchiseptica 9.73 whole-cell vaccine prepared in our laboratory from wild-type bacteria in the virulent phase (WCVBbvir⁺, Fig. 2, Panel A). Significant differences in the lung bacterial counts between the OMVBbvir⁺-immunized animals and non-immunized mice were obtained (p < 0.001; Fig. 2, Panel A). The number of colonies recovered from the lungs of the OMVBbvir⁺-immunized mice at day 7 after challenge was at least 4 logs lower than those detected in the non-immunized animals and similar to those from the WCVBbvir⁺-immunized mice (Fig. 2, Panel A).

We next sought to investigate if the protective capability induced by the OMVBbvir⁺ vaccine extended to strains other than B. bronchiseptica 9.73. To that end, we performed in-vivo protection assays using two other strains of B. bronchiseptica for challenge, one from a farm animal ($Bb_{ra}RB50$) and the other

recovered from a pediatric patient with cystic fibrosis (BbhuAR705). Mice were accordingly immunized twice with the OMVBbvir⁺ formulation and then challenged 2 weeks after the second immunization with a sublethal dose of each B. bronchiseptica strain:—i. e., Bb_{ra}RB50 and Bb_{hu}AR705. As a negative control we used nonimmunized mice. For both strains used in the bacterial challenge, significant differences in lung B. bronchiseptica colony-formation counts of more than 4 logs were obtained between the immunized animals and the negative control group (p <0.001; Fig. 2, Panel B).

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Characterization of the humoral immune response induced by OMVBbvir⁺

To characterize the immune response induced by the OMVBbvir⁺ vaccine derived from B. bronchiseptica 9.73, titers of antibody were quantitatively measured (Table 1). In comparison with the antibody levels detected in negative-control animals, higher serum levels of specific IgG were found at 14 days after the OMV priming (Table 1). Further tests were then conducted to determine the antibody subtypes. Mice immunized with OMVBbvir⁺ produced high titers of specific IgG1 and IgG2a antibodies. The specific IgG1 titer was higher than that of the specific IgG2a (IgG1:IgG2a = 2.2; Table 1). Examination of these IgG subclasses indicated that the mice had responded to the OMVBbvir⁺ vaccination with a mixed Th1/Th2 profile, but with mainly a skewed Th2-type immune response.

To identify the main immunogenic proteins present in the OMVs, we analyzed the antibody profile by immune proteomics. This analysis was achieved by examining the reactivity of sera induced by the OMVBbvir⁺ vaccine against proteins from the OMV derived from B. bronchiseptica. Fig. 3, Panel A shows protein bands detected in OMVBbvir⁺ that cross-reacted with sera induced by vaccination with OMV. The identity of some of those antigens was determined after the selected immunoreactive bands were excised from the one-dimensional electrophoretic gels and then analyzed by mass spectrometry. Bands a, and b in Fig. 3, Panel A, for example, were identified as the GroEL-like protein and the outer-membrane protein OMPc, respectively. The mass-spectrometric identification of the protein indicated as GroEL in particular was subsequently confirmed by immunoreactivity with a GroEL-specific antibody (not shown).

To investigate the presence of specific antibodies against the LPS in the OMVBbvir⁺-immune serum, we performed a Western-blot analysis to determine the

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mobility on SDS PAGE of the purified wild-type B. bronchiseptica 9.73 LPS. The 3 expected bands were observed: a diffuse one (the lipid-A-KDO core O antigen) containing the O antigen (a single sugar polymer consisting of 2,3-dideoxy-di-Nacetylgalactosaminuronic acid) and the two other faster migrating bands—i. e., Band A (the lipid-A-KDO core) and Band B (lipid-A-KDO) [31]. As anticipated, these LPS-associated bands were recognized by the immune serum induced by OMVBbvir⁺ vaccination (Fig. 3, Panel B).

Since the activated components of complement had been previously reported to mediate—at least in part—the killing of B. bronchiseptica bacteria by direct bacterial lysis, we next performed a killing assay with immune serum [32]. For this determination, a suspension of 500 B. bronchiseptica 9.73 bacteria was incubated in 50 µl of 90% (v/v) serum in PBS to ensure that the serum components were not limiting. This assay revealed that the B. bronchiseptica 9.73 bacteria were sensitive to the immune sera (to a degree of ca. 50% survival), but resistant to naïve serum (i. e., with 100% surviving; Fig. 3, Panel C). In control experiments using heat-inactivated sera we found 100% of bacterial survival for both immune and naïve sera.

To examine the specific role of antibodies in the control and clearance of B. bronchiseptica, serum from naïve or immunized animals was adoptively transferred into naïve animals 24 h before challenge with B. bronchiseptica (5 x 10⁵ CFUs B. bronchiseptica 9.73). This OMVBbvir⁺-induced serum—collected from the mice 14 days after the second dose—cleared B. bronchiseptica from the mouse lungs by day 7 after the inoculation (at a reduction of 3.5 logs), whereas naïve serum had no significant effect (Fig. 3, Panel D).

All the results presented here indicated that the OMVBbvir⁺ vaccine induced a robust humoral immunity that effected an induced protection against B. bronchiseptica—at least partially—as a consequence of the killing activity of the serum.

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Induction of a mixed Th1, Th2, and Th17 immune response by OMVBbvir⁺ vaccination

To characterize the T-cell profile induced by the OMVBbvir⁺ vaccine, we determined the levels of IFN- γ , IL-17, and IL-5 (markers of the respective Th1, Th17, and Th2 immune responses) produced by stimulated spleen-cell cultures (Fig. 4). Lymphocyte-proliferation assays revealed that OMVBbvir⁺ vaccination effectively

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stimulated lymphocyte proliferation (not shown). Two months after immunization, higher concentrations of IFN- γ (5,514.48 \pm 1,198.51 pg/mL; Fig. 4, Panel A) and IL-17 (8,645.97 ± 1,796.29 pg/mL; Fig. 4, Panel B) were produced by spleen cells from OMVBbvir⁺-immunized mice than those present in non-immunized mice (Fig. 4). IL-5 was also detected (469.14 ± 67.03 pg/mL) in the supernatants of stimulated splenocytes from OMVBbvir⁺-immunized mice (Fig. 4, Panel C). All these findings strongly indicate that OMVBbvir⁺ vaccination induces a mixed Th1-Th17-Th2 spleen-cell profile.

To investigate the role of OMVBbvir⁺ immune spleen cells in protection, we injected BALB/c mice i.p. with 5 x 10⁶ intact spleen cells from nonimmunized animals or from mice that had been immunized with OMVBbvir⁺ vaccine 2 weeks before. Twenty-four hours later, the mice were infected with 5 x 10^5 CFUs of B. bronchiseptica 9.73 and then sacrificed 7 days later to determine the number of CFU counts in the lungs (Fig. 4, Panel D). The transfer of spleen cells from immunized animals, but not from the non-immunized mice, resulted in a reduction in bacterial colonization of approximately 2 logs. To look specifically at the function of CD4⁺ T cells in the protection against B. bronchiseptica colonization; spleen cells from mice immunized with OMVBbvir⁺ and treated with anti-CD4 antibody were administered to naive mice 24 h before challenge with a sublethal dose of B. bronchiseptica. Depletion of CD4⁺ T cells in the spleen of the donor animals, increased the counts of bacteria recovered from the lungs of the recipient animals. The bacterial counts detected in these animals were similar to those found in the lungs of mice that received the spleen cells of naive animals (Fig. 3 Panel D).

All these results indicate that spleen cell-mediated immunity, and in particular the CD4⁺T cells, plays a role in the protection against B. bronchiseptica induced by the OMVBbvir⁺ vaccine.

Protection against intranasal B. bronchiseptica challenge after vaccination with OMV from B. bronchiseptica blocked in the avirulent phase

Since the avirulent phase of B. bronchiseptica could be involved in some stage of the infectious cycle (i.e during the chronic infection), we sought to evaluate whether an experimental vaccine containing the OMV derived from B. bronchiseptica 9.73 blocked in the avirulent phase (OMVBbvir) was able to confer protection against B. bronchiseptica infection. To this end, OMVs were obtained from a mutant

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previously constructed in our laboratory that was defective in the two-component signal-transduction regulatory system BvgA of B. bronchiseptica [25]. The characterization of OMVBbvir evidenced no differences from the OMVBbvir in their size distribution, as evaluated by electron microscopy (Fig. 5, Panel A); but certain changes in the electrophoretic profile were detected, even though the major components were the same as those of the OMVBbvir (Fig. 5, Panel B, left lane). The lack of expression of the main virulence factors and the expression of the flagellin as an avirulent marker were evidenced upon immunoblotting (Fig. 5, Panel B, right lanes). After this initial characterization of the OMVs, intranasal B. bronchiseptica challenges were performed. In those experiments, we analyzed the effect of two previous administrations of the OMVBbvir preparation on the subsequent colonization of the lungs of the experimental mice by the B. bronchiseptica strain 9.73 $(\approx 10^6 \text{ CFUs in } 40 \text{ µl}; \text{ Fig. 5, panel C and D})$. The results were compared with those obtained for mice that had been preimmunized with the OMVBbvir⁺ vaccine (Fig. 5, Panel C). PBS-injected mice served as a negative control. Significant differences in the lung bacterial counts between the immunized animals and the negative control group were observed (p <0.001; Fig. 5). Of major significance was the observation that protection against B. bronchiseptica challenge was also achieved at same level by the OMVBbvir-immunization. The number of CFUs recovered from the lungs at day 7 after challenge likewise dropped by at least 4 orders of magnitude compared to that of the non-immunized mice (Fig. 5, Panel C).

For this experimental vaccine, we also evaluated the specific role of induced antibodies in the control and clearance of B. bronchiseptica. For that purpose, serum from naïve or immunized animals was adoptively transferred into naïve animals 24 h before a challenge with B. bronchiseptica (5 x 10⁵ CFUs of B. bronchiseptica 9.73). As had been detected with the OMVBbvir⁺ vaccine, the OMVBbvir⁻-induced serum—collected from mice 14 days after the second dose—cleared B. bronchiseptica (by a reduction of 3.5 logs) from the lungs of the challenged mice by day 7 postinoculation, whereas the naïve serum had no significant effect (Fig. 5, Panel D).

The results presented in this final section would clearly indicate that both the OMVBbvir vaccine and its induced humoral immunity possessed the capability of protecting mice against an infection caused by B. bronchiseptica.

441 DISCUSSION

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In this report we describe the development and evaluation of OMVs obtained from B. bronchiseptica as vaccines against lung colonization. As we had previously observed in the OMVs derived from B. pertussis, the sizes of the OMVs from B. bronchiseptica 9.73 (at dimensions of 50-150 nm) were consistent from batch to batch. Furthermore, the well known principal B. bronchiseptica surface immunogens such as PRN, AC-Hly, and FIM were also detected in the OMVs through immunoblotting. The OMVBbvir⁺ thus characterized were then used in the murine model to examine their safety and protective capability. In the first experiments described, we performed comparisons with a whole-cell vaccine prepared in our laboratory since a previous report had indicated that the same type of formulation in dogs reduced the disease burden and the lesions in the vaccinated animals relative to those of infected naïve controls [10]. We observed that two doses of our experimental OMVBbvir⁺ vaccine administered 2 weeks before B. bronchiseptica challenge fully protected the BALB/c mice against the colonization of different B. bronchiseptica strains obtained from diverse hosts—two representative ones being shown: a farm animal and a human). As to the safety of these preparations, in comparison with the whole-cell vaccine, we observed only a minimal rise in the levels of the proinflammatory IL-6 in serum just after OMV vaccination. These results would position the OMV-based vaccines above the classic cellular preparations; as OMVBbvir⁺ induces equal levels of protection, but along with adequate levels of safety. Another significant and relevant result detected with our experimental vaccine was that ability to induce protection against different isolates of B. bronchiseptica obtained from diverse hosts. This result becomes especially pertinent upon consideration of the diversity of genotypes already reported for B. bronchiseptica [33, 34] since this finding would indicate that the formulation of a specific OMV-based vaccine for each specific isolate would be unnecessary.

In the present work, we also detected that the antibody titers of OMVBbvir⁺vaccinated mice were higher on day 14 after the second dose and before B. bronchiseptica challenge than those of the non-immunized control group. Moreover, this OMVBbvir⁺-vaccine-induced immune serum recognized a group of antigens that included OMPc and the GroEL-like protein along with LPS. That the OMPc and GroEL-like protein had been previously detected in mice immunized with OMV derived from B. pertussis [23] was of interest to us. As discussed in a previous publication, both proteins in Bordetella and other microorganisms have been

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described as promising vaccine targets [35, 36]. By immunoblotting assays we also detected that the OMVBbvir+ was able to induce antibodies against these LPS, an immunogenic bacterial component with proven protective capability [37]. Based on the detection of these protection-inducing immunogens, we next sought to investigate if the OMVBbvir+ vaccine-induced antibodies alone were sufficient to confer protection against B. bronchiseptica. The passive-transfer assays we therefore performed demonstrated that the vaccine-induced serum reduced the number of viable bacteria in the lungs by about 4 logs. This protective role of the antibodies was in accordance with previous results reported by other authors [38]. In fact, protection against B. bronchiseptica infection had been evidenced with antibodies induced by either infection or vaccination [38] through mechanisms that appeared to be different: whereas the immunity induced by previous infection offered significant protection even in the absence of complement or the induction of the monocyte IgG receptors Fc \square Rs, the vaccination-induced protection required both complement and the Fc \square Rs [38].

In addition, we found that CD4⁺ T cells also contributed to the protection exhibited by the OMVBbvir⁺-based vaccine. The protection against *B. bronchiseptica* infection induced by the OMV-based vaccine seems to involve a dual mechanism involving both a humoral and a cellular immune response as was evidenced by adoptive transfer experiments.

Based on our previous results with OMVs derived from B. pertussis in the avirulent phase, [23] and taking into account the potential role of that phase in the induction of B. bronchiseptica the infection process (i.e chronic infection), we decided to evaluate if the OMVs derived from B. bronchiseptica blocked in the avirulent phase (OMVBbvir⁻) were also able to induce protection. The OMVBbvir⁻ formulation indeed proved to be protective, as judged by the significant decrease of 4 logs observed in the lung bacterial counts between avirulent OMVBbvir-immunized mice and the non-immunized control group (p <0.001; Fig. 5, panels C and D). The detected flagella of B. bronchiseptica in the OMVBbvir preparation probably contributes to the protective capacity of the OMVBvir formulation since it has been described as a potent proinflammatory factor that induces chemokines, cytokines and expression of the host defense gene [39]. In addition, it was demonstrated that B. bronchiseptica flagellin is able to effectively signal through both human and mouse the Toll-like receptor 5 [39]. The protective effect is elicited by non-replicative

avirulent components that have thus far not been reported as capable of conferring protection against B. bronchiseptica. To our knowledge, the only report regarding a vaccine with avirulent B. bronchiseptica, was done in dogs with a live, intact avirulent strain [40]. Moreover, the authors demonstrated that the vaccinated dogs were protected against colonization by as early as 48 h after immunization [40].

Considered all together, the results presented here provide clear evidence that the OMVs derived from B. bronchiseptica exhibit a high level of protection against B. bronchiseptica that is not dependent on bacterial virulence-factor expression. Moreover, we further demonstrate that the protection induced by these OMVBb-based vaccines is mediated mainly by antibodies but also by CD4+T cells.

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- 531 and EB are fellows from CONICET.

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675 Table 1. Serum IgG and isotypes antibodies titers.

	Total IgG	IgG2a	IgG1	IgG1:IgG2a
OMVBbvir ⁺ immunized	259.6 ± 32.4	250.2 ± 71.9	558.7 ± 124.3	2.2
Non-immunized	9.3	ND	11.3	

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LEGENDS TO THE FIGURES

- 678 Fig. 1. Panel A: Transmission-electron-microscopy image of the negatively stained
- 679 preparations obtained from B. bronchiseptica 9.73 in the virulent phase (OMVBbvir⁺;
- 680 scale bar: 200 nm). Panel B: Analysis of OMVBbvir⁺ by 12.5% (w/v) SDS-PAGE.
- 681 The bands were visualized by staining with Coomassie brilliant blue R-250.
- 682 Molecular weights in kDa are indicated on the left. Panel C: Immunoblots of
- 683 OMVBbvir⁺ and purified proteins indicating the bands binding to anti-AC-Hly-, anti-
- 684 PRN-, and anti-FIM2-specific polyclonal mouse antibodies. In the figure, the sources
- 685 of the samples are indicated above the panels.

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Fig. 2. Effect of (i.p.) immunization with active OMVBbvir⁺ in the mouse-intranasalchallenge model. WCVBbvir⁺ was used as a positive control. Panel A: B. bronchiseptica 9.73 was used as challenge bacteria (5 x 10⁵ CFUs in 40 µl). Panel B: Rabbit B. bronchiseptica RB50 and the human clinical isolate B. bronchiseptica AR705 were also used as challenge bacteria (5 x 10⁵ CFUs in 40 µl). In all instances three biological replicates were performed, with the results from a representative one being presented. Results depicted are the means of four mice per group at 7 days after challenge. The line indicates the lower limit of detection. In both panels, the number of bacteria recovered from the mouse lungs, expressed as the log₁₀means ± SEM (error bars) of the CFUs per lungs, is plotted on the *ordinates* for the samples from the lungs of the experimental groups indicated on the abscissas. The bronchiseptica strains used for the challenges are depicted above the panels. The asterisks (*) indicate significant differences at a p < 0.001.

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Fig. 3. Panel A: Analysis of OMVBbvir⁺ antigenic reactivity by 12.5% (w/v) SDS-PAGE visualized by staining with Coomassie Brilliant Blue (Lane 1). Molecular weights in kDa are indicated on the left. Immunoblots (Lane 2) with the OMVBbvir⁺protein sample were probed against polyclonal antiserum obtained from mice immunized with OMVBbvir+. Bands a and b were identified as GroEL and OMPc respectively. Panel B: Analysis of purified B. bronchiseptica LPS by 15% (w/v) SDS-PAGE (Lane 1) and by immunoblotting with the polyclonal antiserum obtained from mice immunized with OMVBbvir+ (Lane 2). The arrows indicate the locations of the O antigen and the bands A and B that were recognized by the antiserum used in immunoblotting in Lane 2. Panel C: In-vitro-killing assay of B. bronchiseptica with immune sera derived from OMVBbvir+-vaccinated animals and from non-immunized mice. Three biological replicates were performed, with the results from a representative one being presented. The asterisks (*) indicate significant differences at a p <0.05. In the panel, the percent survival of the bacteria is plotted on the *ordinate* for each of the sera indicated on the abscissa. Panel D: Effect of passive immunization with sera collected from OMVBbvir⁺ immunized mice. B. bronchiseptica 9.73 was used as the challenge bacterium (5 x 10⁵ CFUs in 40 µl). Three biological replicates were performed, with the results from a representative one being presented. The data are the mean values from four mice per group at 7 days after challenge. The line indicates the lower limit of detection. In the panel, the number of bacteria recovered from the mouse lungs, expressed as the \log_{10} (means \pm SEM [error bars]) of the CFUs per lungs, is plotted on the ordinate for each of the experimental groups on the abscissas. The asterisks (*) indicate significant differences at a p < 0.001.

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Fig. 4. Panels A-C: Cytokine production by splenocytes from immunized mice. BALB/c mice were immunized with two doses of OMVBbvir+ or left nonimmunized. Two months after the final immunization, the mice were sacrificed and their cultured spleen cells stimulated with OMVBbvir+ or simply incubated in the culture medium (negative control). After 72 h, the concentrations of IFN- γ (Panel A), IL-17 (Panel B), and IL-5 (Panel C) were determined by ELISA in the culture supernatants. The results are expressed as the mean values (± the standard error) of three experiments with 4 mice per group. Significant differences were analyzed for each cytokine between non-immunized and immunized mice (p \leq 0.01, Panel A) or p <0.001 (panels B and C). In each of the three panels, the concentration of the cytokine indicated on the *ordinate* in -pg.ml⁻¹ that was assayed in the culture supernatant is plotted for the two experimental conditions—exposure to medium or vesicles designated on the abscissa. Panel D: Effect of passive immunization with spleen cells collected from OMVBbvir⁺ immunized mice with or without depletion of CD4⁺ T cells. Donor animals were i.p. injected with anti-CD4 antibody or the corresponding isotype control 24 h before the spleens were collected. After the i.p. injection of spleen cells from OMVBbvir+-immunized or non-immunized mice, as indicated on the abscissa, the recipient mice were challenged with B. bronchiseptica $9.73~(5~x~10^5$ CFUs in 40 µl). Three biological replicates were performed, with the results from a representative one being presented. The data represent the means of four mice per group at 7 days after challenge. The line indicates the lower limit of detection. In the panel, the number of bacteria recovered from the mouse lungs, expressed as the log₁₀means ± SEM (error bars) of the CFUs per lungs, is plotted on the *ordinate* for the samples from the lungs of the mice receiving the spleen cells from the source indicated on the abscissa. In all four panels, the white bars indicate spleen cells from non-immunized mice and the black bars those from immunized mice. The asterisks (*) indicate significant differences at a p < 0.001.

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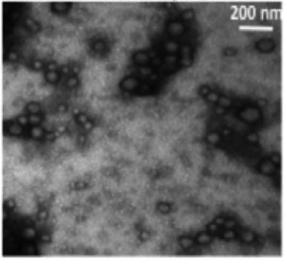
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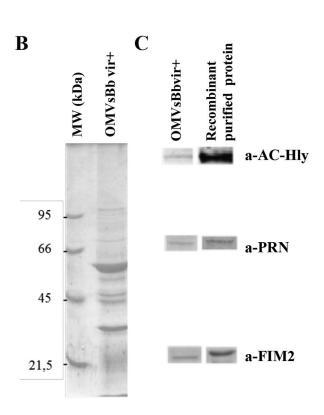
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Fig. 5. Panel A: transmission-electron-microscopy image of negatively stained OMVs obtained from B. bronchiseptica 9.73 in the avirulent phase (OMVBbvir⁻; scale bar: 200 nm). Panel B: Analysis of OMVBbvir by 12.5% (w/v) SDS-PAGE with visualization by Coomassie Brilliant Blue. Molecular weights are indicated (on the left side). On the right side, immunoblots of OMVBbvir and the purified recombinant proteins AC-Hly, PRN, FLA, and FIM2, as detected by the respective specific polyclonal mouse antibodies. Panel C: Effect of active (i.p.) immunization with OMVBbvir in the mouse intranasal challenge model. Panel D: Effect of passive immunization with sera collected from OMVBbvir-immunized mice. For panels C and D, B. bronchiseptica 9.73 was used as the challenge bacterium (1 x 10⁶ CFUs in 40 µl). Three biological replicates were performed, with the results from a representative one being presented. The data represent the means of four mice per group at 7 days after challenge. The line indicates the lower limit of detection. In the panels, the number of bacteria recovered from the mouse lungs, expressed as the log₁₀means ± SEM (error bars) of CFUs per lungs, is plotted on the *ordinates* for the lung samples from the mice receiving the immunogen—in the form of vesicles (Panel C) or serum (Panel D)—indicated on the abscissas. The asterisks (*) indicate significant differences at a p < 0.001.

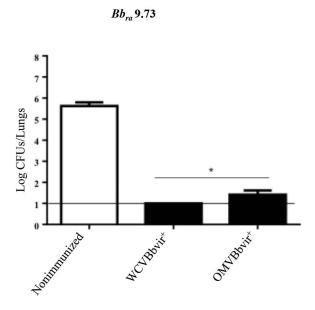


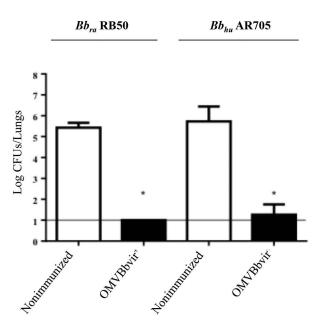


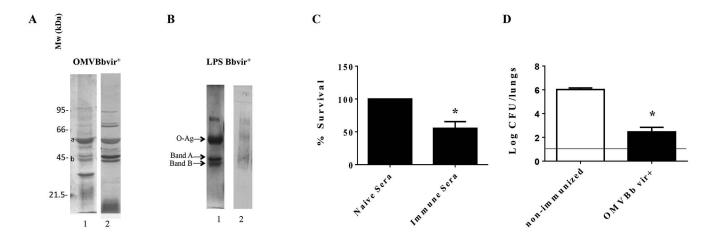


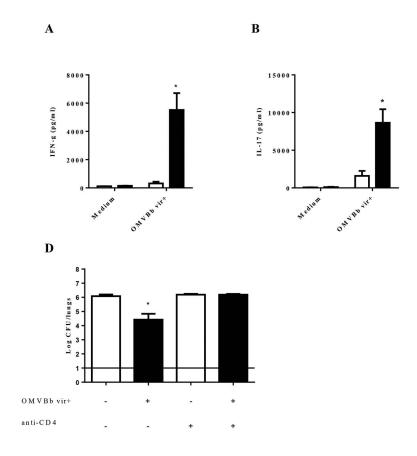


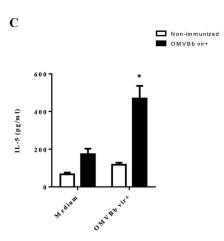
B A











Recombinant purified protein

a-AC-Hly

a-PRN

a-FLA

a-FIM2

Serum transfer

3

2

Non-infinite

OMVsBb vir-

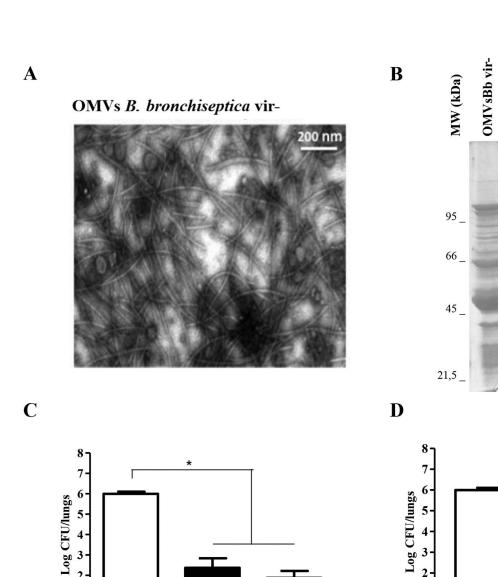
4

3

2

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Consinumitied



OM VBb vit

OMVBB vite