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Jaroslava Chupáčová Comenius University in Bratislava, Slovakia

Elisa Borghi San Paolo Medical School, Milan, Italy

Giulia Morace San Paolo Medical School, Milan, Italy

See next page for additional authors

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Authors

Jaroslava Chupáčová, Elisa Borghi, Giulia Morace, Agata Los, and Helena Bujdáková



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RESEARCH ARTICLE

Anti-biofilm activity of antibody directed against surface antigen complement receptor 3-related protein—comparison of Candida albicans and Candida dubliniensis

Jaroslava Chupáčová¹, Elisa Borghi², Giulia Morace², Agata Los^{1,†} and Helena Bujdáková^{1,*}

¹Department of Microbiology and Virology, Comenius University in Bratislava, Faculty of Natural Sciences, Ilkovičova 6, 84215 Bratislava, Slovakia and ²Università degli Studi di Milano, Department of Health Sciences, San Paolo Medical School, Via A. di Rudini 8, 20142 Milan, Italy

*Corresponding author: Comenius University in Bratislava, Faculty of Natural Sciences, Department of Microbiology and Virology, Ilkovičova 6, 842 15 Bratislava, Slovakia. Tel/Fax: +421-2-602-96-436/480; E-mail: helena.bujdakova@uniba.sk

[†]**Present address:** Dublin Institute of Technology, Food and health Research Centre, School of Food Science and Environmental Health, Dublin 1, Ireland. **One sentence summary:** Antibody directed against complement-receptor 3 related protein (CR3-RP) interfere with biofilm formation in Candida albicans and Candida dubliniensis.

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ABSTRACT

Candida albicans and *C. dubliniensis* are related yeasts that differ in the expression of virulence-associated proteins involved in adherence and biofilm development. CR3-RP (complement receptor 3-related protein) is one of the surface antigens expressed by *Candida* species. The main objective of this research was to elucidate the effect of the polyclonal anti-CR3-RP antibody (Ab) on adherence and the biofilm formed by *C. albicans* SC5314 and *C. dubliniensis* CBS 7987 and two clinical isolates *in vitro*, *ex vivo* and *in vivo*. A comparison of species, and of treated vs. non-treated with the anti-CR3-RP Ab showed a reduction in adherence (22%–41%) that was dependent on the time point of evaluation (60, 90 or 120 min), but did not prove to be species-dependent. Confocal microscopy revealed a decreased thickness in biofilms formed by both species after pre-treatment with the anti-CR3-RP Ab. This observation was confirmed *ex vivo* by immunohistochemistry analysis of biofilms formed on mouse tongues. Moreover, anti-CR3-RP Ab administration, 1 h post-infection, has been shown to promote larval survival compared to the control group in a *Galleria mellonella* infection model. Our data suggest a potential activity of the anti-CR3-RP Ab relevant to immunotherapy or vaccine development against biofilm-associated *Candida* infections.

Keywords: Candida albicans; Candida dubliniensis; CR3-RP; adherence; biofilm

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INTRODUCTION

Candida species (spp.) are a part of the normal human microbiota. Candida dubliniensis mostly colonizes the oral cavity and/or respiratory tract (Mahelová and Růžička 2017), especially in HIVinfected individuals (Coleman et al. 1997; Sullivan et al. 2004; Wahab et al. 2014), while Candida albicans is a common inhabitant of the gastrointestinal tract, urogenital tract and oral cavity (Sardi et al. 2013; Höfs, Mogavero and Hube 2016). Candidiasis is the most common global fungal infection (Sardi et al. 2013). Candida albicans has been isolated in more than 50% of candidiasis; however, the number of non-albicans spp. able to cause serious candidiasis has increased in recent years (Yapar 2014; Pu et al. 2015; Sandhu et al. 2017). Although C. dubliniensis is phylogenetically very similar to C. albicans, it differs in some genes, especially those coding for virulence-associated proteins. Candida dubliniensis lacks more than 168 genes characteristic of its 'yeastcousin' C. albicans (Jackson et al. 2009), the majority of them encoding proteins related to the yeast-to-hyphae transition, tissue invasion or biofilm development (Moran et al. 2004; Jackson et al. 2009; Moran, Coleman and Sullivan 2012). Moreover, C. dubliniensis manifests a higher predisposition to develop resistance to fluconazole (Sullivan et al. 1995; Moran, Coleman and Sullivan 2012; Jordan et al. 2014). On the other hand, both C. albincans and C. dubliniensis are able to form a biofilm (Sullivan et al. 2004; Borghi et al. 2014). Adherence is the first and most crucial step in biofilm development, and various surface antigens participate in this process (Chaffin 2008; Gow and Hube 2012; Hebecker et al. 2014). CR3-RP (complement receptor 3-related protein) is one of the cell surface antigens of Candida spp. with functional and structural similarity to the human complement receptor 3 (CR3) expressed on neutrophils, macrophages and monocytes. CR3-RP has been demonstrated to bind human complement fragment iC3b and to mediate leukocyte diapedesis (Heidenreich and Dierich 1985; Bujdáková et al. 1997). Additionally, CR3-RP seems to be an important immunogenic mannoprotein participating in adhesion and biofilm development (Bujdáková et al. 2008, 2010). A fragment of CR3-RP was sequenced (DINGGGATLPQ), and according to this sequence, CR3-RP was categorized into the DING protein family (named after DINGGG N termini) (Bujdáková et al. 2008; Bernier 2013). Some other surface proteins contributing to biofilm development have been described, such as Eap protein, the Als protein family, the Hwp1 or MP65 proteins (Gomez et al. 1996; Nailis et al. 2010; Finkel and Mitchell 2011; Araújo, Henriques and Silva 2017). Additionally, antibodies generated after the immunization of animals with some of the above proteins seems to be promising in tools focused on fighting yeast infections (Fujibayashi et al. 2009; Mishra, Ali and Shukla 2015;

| Table | 1. | List | of | tested | strains | and | their | origin |
|-------|----|------|----|--------|---------|-----|-------|--------|
|-------|----|------|----|--------|---------|-----|-------|--------|

Torosantucci et al. 2017). Recent studies showed that antibodies targeting Als3 (Coleman et al. 2009), MP65 (De Bernardis et al. 2007) or another 42.7 kDa unnamed surface antigen in the *Candida* cell wall (Mishra, Ali and Shukla 2015) decreased adhesion and biofilm formation.

This study is the continuation of a previous work (Bujdáková et al. 2008, 2010) investigating the role of CR3-RP in Candida adherence, the first stage of biofilm development, and provides new information about the therapeutic potential of the anti-CR3-RP antibody (Ab). This work tried to obtain knowledge about the role of CR3-RP and anti-biofilm properties of the anti-CR3-RP Ab against C. albicans and C. dubliniensis. The results also assessed the virulence power of C. albicans and C. dubliniensis in vitro, ex vivo on mouse tongue biofilms and in vivo, in the Galleria mellonella model of invasive candidiasis.

MATERIALS AND METHODS

Candida strains and growth conditions

Clinical isolates and reference strains of C. albicans and C. dubliniensis used in experimental research are included in Table 1. All strains were preserved at -80°C in 1 mL of yeast extract peptone dextrose broth (YPD broth, 1% yeast extract, 2% peptone, 2% Dglucose; all from Biolife, Milan, Italy) supplemented with 30% sterile glycerol (Centralchem, Bratislava, Slovakia). Afterwards, strains were subcultured on an YPD agar plate (YPD medium supplemented with 2% agar, Biolife, Milan, Italy). Prior to experimental work, strains were cultured on selective CHROMagar Candida (Becton, Dickinson, Germany). The correct identification of all strains was confirmed by specific PCR (Tamura et al. 2001) discriminating between C. albicans and C. dubliniensis. The protocol and results are in Supplementary material 1, Supporting Information. For some experiments, two reference strains (C. albicans SC5314 and C. dubliniensis CBS 7987) and two clinical isolates (C. albicans H2 and C. dubliniensis 29) were selected.

CR3-RP expression and quantification

The polyclonal antibody anti-CR3-RP (anti-CR3-RP Ab) was used (Bujdáková et al. 2008) in the experiments to block CR3-RP function. The antibody was diluted 1:100 in sterile phosphatebuffered saline (PBS, 137 mM NaCl, 2.7 mM KCl, 10 mM Na₂HPO₄, 2 mM KH₂PO₄, pH 7.4, all chemicals from AppliChem, Darmstadt, Germany) freshly prepared before each experiment.

The presence of CR3-RP was determined in yeast lysates by sodium dodecyl sulfate polyacrylamide gel electrophoresis (SDS-PAGE) and by western blot using an appropriate dilution

| Origin | | | | |
|--|--|--|--|--|
| Reference strain (Gillum, Tsay and Kirsch 1984) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Reference strain (Centraal Bureau voor Schimmelcultures, Delft, The Netherlands) | | | | |
| Clinical isolate (HIV + patient, Dublin, Ireland, kindly provided by prof. Derek Sullivan) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Clinical isolate (HIV + patient, Slovakia ^a) | | | | |
| Clinical isolate (HIV + patient, Slovakiaª) | | | | |
| | | | | |

^aClinical isolates were obtained from the Clinic of Infectology and Geographical Medicine, University Hospital Bratislava, Slovakia.

of anti-CR3-PR Ab. CR3-RP expression was quantified using an Enzyme-linked immunosorbent assay (ELISA). These experiments were performed according to a previously described procedure (Bujdáková *et al.* 2008; Paulovičová *et al.* 2015). The detailed protocol and results are described in Supplementary material 2, Supporting Information.

Effectiveness of anti-CR3-RP Ab on adherence and biofilm formation in vitro

All strains were tested for biofilm-forming ability by XTT reduction assay (Ramage *et al.* 2001; Li, Yan and Xu 2003). The detailed protocol and results are provided in Supplementary material 3, Supporting Information. After the initial screening, the reference strains *C. albicans* SC5314 and *C. dubliniensis* CBS 7987 and two clinical isolates, *C. albicans* H2 and *C. dubliniensis* 29, were selected for further experiments.

One loopful of single colonies was transferred to 20 mL of YPD broth and cultivated for 16 h at 37°C with gentle shaking (100 rpm, Orbital Shaker OS-20, Biosan, Riga, Lithuania). Cells were harvested by centrifugation (5 min, 3000× g, 15°C, Universal 32 R Hettich Zentrifugen, Tuttlingen, Germany), followed by two-step washing with 20 mL of PBS. Pellets were then resuspended in 10 mL of PBS, counted using a hemocytometer and adjusted to a final concentration of 1×10^7 cells/mL. One milliliter of the obtained suspensions were centrifuged, and the pellets were first incubated with 100 μ L of 10% gelatine (Oxoid, Hampshire, UK) in PBS (v/v) at room temperature (RT) with shaking (130 rpm). After 1 h, cells were washed twice with PBS and pre-incubated with the anti-CR3-RP Ab. The control sample was prepared by PBS treatment without antibody. All suspensions were incubated for 1 h at 4°C with shaking (130 rpm, 5 min), and then washed twice with 100 μ L of PBS. After washing, cells were adjusted to a density of 1 \times 10 6 cells/mL in fresh RPMI-MOPS medium-Roswell Park Memorial Institute 1640 medium (RPMI 1640 medium, Biowest, Nuaillé, France) without phenol red, supplemented with 2% D-glucose and buffered to pH 7.0 with 0.165 M morpholinopropane sulfonic acid (MOPS, Serva, Heidelberg, Germany).

The kinetics of adhesion were assessed in polystyrene 96well plates (Sarstedt, Nümbrecht, Germany) at five selected time points (0, 30, 60, 90, 120 min), according to the protocol of Sohn et al. (2006) with some modifications. Briefly, 100 μ L aliquots of suspensions (treated with Ab and untreated) were pipetted to 96-well plates and evaluated for adherence (at 37°C). At every time point, non-adherent cells were removed by two washing steps with PBS. The viability of adherent cells was evaluated by measuring their ability to reduce 2,3-bis(2-methoxy-4-nitro-5sulfophenyl)-2H-tetrazolium-5-carboxanilide sodium salt (XTT, Sigma-Aldrich, St. Louis, USA) to water-soluble formazan-XTT reduction assay. Briefly, 100 μ L of XTT solution (0.5 mg mL⁻¹ of XTT; 1 µM Menadion, Sigma-Aldrich, St. Louis, USA) was added in each well and incubated for 1 h at RT in the dark. The metabolic activity of cells was measured at 490 nm with a microplate reader (MRX II, Dynex, USA). Results were calculated as a mean value \pm standard deviation (SD) from at least five parallel wells and from two independent experiments.

Biofilm-forming ability was assessed according to the modified protocol described by Li, Yan and Xu (2003). Yeast cell suspensions (treated with Ab and untreated), prepared as described above, were adjusted to a final concentration of 1×10^6 cells/mL in fresh RPMI-MOPS medium. An aliquot of $100 \,\mu$ L/well was then seeded into 96-well plates (flat bottom, Sarstedt, Nümbrecht,

Germany) and incubated for 90 min at 37°C. After the adherence phase, non-adherent cells were removed and adherent cells were washed twice with PBS. Adherent cells were then overlaid with 100 μ L of fresh RPMI-MOPS medium and incubated at 37°C for a further 48 h. The viability of the mature biofilm was evaluated by XTT reduction assay as described above. Each experiment was performed in five parallel wells and performed twice. Data were expressed as mean values \pm SD.

Confocal laser scanning microscopy

Fungal biofilms of *C. albicans* SC5314 and *C. dubliniensis* CBS 7987, developed from yeast suspensions treated or untreated with anti-CR3-RP Ab, were formed on 13-mm-diameter round coverslips (Sarstedt, Germany) placed in a 24-well plate. Biofilm forming conditions were the same as for the *in vitro* biofilm assay. After incubation at 37°C for 48 h, coverslips were gently washed with PBS, stained with Calcofluor White (0.05% v/v; Sigma Aldrich, Germany), and mounted on a glass coverslip for confocal laser scanning microscopy (CLSM) visualization (TCS SP2, Leica, Wetzlar, Germany). Serial sections in the x-y plane were obtained along the z-axis. Three-dimensional reconstructions of the biofilm were obtained using the instrument's software.

Ex vivo biofilm assay on mouse tongue

Reference strains C. albicans SC5314 and C. dubliniensis CBS 7987 were selected for this experiment. Experiments were performed according to the protocol previously described by Černáková et al. (2015). The yeast cell suspension was pre-incubated with 100 μ L of anti-CR3-RP Ab as described above. Afterward, biofilms were formed on the tongues of BALB/c female 7-8 weeks mice (Charles River, Germany) for 72 h. Mouse tongues from healthy animals were incubated, immediately after extraction, in a Petri dish in 4 mL of RPMI-MOPS medium for 90 min at 37°C with shaking (100 rpm) in the presence of the yeast suspension (1 \times 10⁷ cells/mL). After the adhesion phase, tongues were washed once with PBS to remove non-adherent cells. Finally, tongues were transferred to a wet chamber and incubated at 37°C in the presence of 5% CO₂ for a further 72 h. Afterward, the tongues were transferred into sterile 1.6 mL cryotubes (Sarstedt, Nümbrecht, Germany) overlaid with 1 mL of Cryomount medium (Histolab AB, Askim, Sweden), and stored in liquid nitrogen until use. Before staining, tongues were cut in a cryostat (Opticon, Carl Zeiss, Jena, Germany) and 14 μm sections were placed on Superfrost Plus slides (Gerhard Menzel GmBH, Brunswick, Germany) and stained with Periodic Acid Schiff (PAS, Diapath, Martinengo, Italy). Several sections from each tongue were evaluated using light microscopy (Carl Zeiss Microscope AxioLab.A1, Jena, Germany). Two independent experiments were performed with two replicates for each sample.

Galleria mellonella infection model

Sixth instar G. mellonella larvae were purchased from Allevamento Cirà (Como, Italy). Larvae were stored in wood shavings in the dark at 18°C until the experiment, and used within 1 week of being delivered. Sixteen randomly selected G. mellonella larvae (weight range 200–300 mg) were used per experimental group in all assays. Experiments were performed with the reference strains C. albicans SC5314 and C. dubliniensis CBS 7987 as well as with the clinical isolates of C. albicans H2 and C. dubliniensis 29. The tested anti-CR3-RP Ab was diluted 1:100 in PBS. Larvae were inoculated through the last left proleg using a Hamilton syringe (Hamilton Company, Reno, USA). Multiple injections were performed through different prolegs. The killing assay was performed as previously described (Fuchs *et al.* 2010; Borghi *et al.* 2014). The experimental groups were as follows: larvae inoculated with 2×10^5 yeast cell/larva and 1 h after infection with the anti-CR3-RP Ab; larvae inoculated with 2×10^5 yeast cell/larva and 1 h after infection with PBS; larvae inoculated with 10 μ L of the anti-CR3-RP Ab (to evaluate toxicity); larvae inoculated with PBS (to monitor the injection trauma); untouched larvae (negative control). Caterpillars were then incubated at 37° C in plastic Petri dishes (Sarstedt, Nümbrecht, Germany) for 9 days and scored daily for survival. Larvae were considered dead when they displayed no movement in response to touch. Killing experiments were performed twice.

Statistical analyses

Results were evaluated by statistical analysis using one-way ANOVA (analysis of variance, free online statistical software available at http://in-silico.net/). Differences were considered statistically significant at P < 0.05(*), highly significant at P < 0.01 (**) and extremely significant at P < 0.001 (***).

The G. mellonella killing assay was analyzed using a log rank test, and Hazard Ratio (HR) was used as the descriptive measure (GraphPad Prism 7).

RESULTS AND DISCUSSION

Expression and quantification of CR3-RP protein

Candida albicans and C. dubliniensis express many antigens that are important virulence factors (Jackson et al. 2009; Hoyer and Cota 2016). CR3-RP is assumed to be one of the cell surface mimicry proteins participating in the immune response as well as in adherence during biofilm formation (Bujdáková et al. 2008, 2010). Moreover, its synthetically derived analog seems to represent a promising immunological tool not only for Candida serodiagnostics, but also an interesting target for antifungal therapy (Paulovičová et al. 2015). While the presence of CR3-RP in C. albicans has been already demonstrated, as well as in C. glabrata, C. krusei and Saccharomyces cerevisiae (Bujdáková et al. 1997; Paulovičová et al. 2015), data on C. dubliniensis are lacking. Magee et al. (2008) reported that C. dubliniensis harbors only 29 specific genes compared to C. albicans, which has 168 unique genes for this species. However, both species have been shown to be closely related in the expression of proteins involved in adhesion and biofilm development (Sullivan et al. 2004; Magee et al. 2008; Jackson et al. 2009).

In our study, the presence of CR3-RP was confirmed by SDS-PAGE followed by western blot in all analyzed *C. dubliniensis* strains (Supplementary data 2, Supporting Information; Fig. S2A and S2B, Supporting Information). The ELISA test revealed that CR3-RP expression is strain-dependent and not species-dependent (Supplementary data 2, Supporting Information; Fig. S2C, Supporting Information). The most significant expression was determined for the reference strain *C. albicans* SC5314; its expression was 50% higher (P < 0.05) than the *C. dubliniensis* CBS 7987 reference strain. The clinical isolates of *C. albicans* H2 and *C. dubliniensis* 29, used in the further experiments, were also selected on the basis of CR3-RP expression, and were found to be very similar to the one of *C. albicans* SC5314. Differences in protein expression among *Candida* isolates have already been reported (Bujdáková, Lell and Gruber 1999). Additionally, Alaei

et al. (1993) suggested differences in the expression of the CR3-RP with respect to the morphological forms of *Candida* cultivated at 30°C, with higher expression of CR3-RP in the mycelial form. The observations were also later confirmed by Bujdáková *et al.* (1997).

Effect of the anti-CR3-RP Ab on adherence and biofilm development in vitro

Previous studies revealed that C. albicans pre-treated with the anti-CR3-RP Ab is not able to sufficiently adhere to a polystyrene surface, and to buccal epithelial cells, and to form a biofilm in vitro. It was postulated that this effect was achieved by an efficient CR3-RP blocking by polyclonal anti-CR3-RP Ab (Bujdáková et al. 2008, 2010). Taking into account this information, it was interesting to determine whether the anti-CR3-RP Ab is able to efficiently prevent adherence and biofilm development in both C. albicans and C. dubliniensis. At first, all strains were screened for the ability to form a biofilm (Supplementary data 3, Supporting Information; Fig. S3, Supporting Information). It was observed that C. albicans were stronger biofilm producers than C. dubliniensis isolates. These observations were also proved by many other studies comparing the adhesion and biofilm development of C. albicans and C. dubliniensis (Ásmundsdóttir et al. 2009; Kolecka et al. 2011; Jordan et al. 2014).

The kinetics of adhesion (Fig. 1), determined by incubating yeast cells with/without anti-CR3-RP Ab, revealed that the C. albicans SC5314 reference strain and C albicans and C. dubliniensis clinical isolates were able to occupy a polystyrene surface within 60 min (Fig. 1C and D). A prolonged incubation time (120 min) increased the saturation capacity of the C. albicans SC5314 reference strain (Fig. 1A). At this time point, no differences in adherence capability between clinical isolates and reference strains were observed. On the other hand, the C. dublinienis CBS 7987 reference strain (Fig. 1B) needed a longer time to achieve a similar saturation to that of the other strains. A comparison of the strains treated and non-treated with the anti CR3-RP Ab showed a maximal reduction in C. albicans SC5314 (30% in 90 min) and C. dubliniensis (41% in 90 min). For clinical isolates, the reduction was 22% (in 60 min) for C. albicans H2 (Fig. 1C) and 27% (120 min) for C. dubliniensis 29 (Fig. 1D). These results corresponded to an evaluation of the biofilm. The next research compared a biofilm developed by cells treated with anti-CR3-RP Ab with an untreated one. Significant differences (P < 0.05 for all samples) were observed in the biofilm formed by the cells from the suspension pre-incubated with anti-CR3-RP Ab in all tested strains (Fig. 2). The maximum reduction was 60% for both clinical isolates H2 and 29. Differences were also observed in the standard strains. The reduction was 30% and 36% for C. albicans SC5314 and for C. dubliniensis CBS 7987, respectively. It is of interest that the maximal reduction in biofilm viability was observed in the strains that expressed a higher amount of CR3-RP (C. albicans SC5314 < C. albicans H2 < C. dubliniensis 29, Fig. S2C, Supporting Information). Candida dubliniensis CBS 7987 expressed the lowest amount of CR3-RP (Supplementary data, Fig. S2C, Supporting Information), thus the reduction was not significant. As previously reported by Bujdáková, Lell and Gruber (1999), a difference in the expression of the CR3-RP is associated with the ability of a yeast to switch to the mycelial form. Indeed, this aspect was further investigated in terms of C. albicans vs. C. dubliniensis. The CLSM visualization of biofilms formed by both reference strains is shown in Fig. 3. The C. albicans SC5314 biofilm was thicker (around 28 μ m thick) and characterized mostly by the presence of hyphae and pseudohyphae (Fig. 3A). In contrast, the C. dubliniensis CBS 7987 biofilm was thinner (20 μ m) and



Figure 1. Effectiveness of anti-CR3-RP Ab on adherence at the beginning of biofilm formation. Figures represent the ability of the tested strains to adhere onto a polystyrene surface after treatment with the anti-CR3-RP Ab, compared with control samples treated with PBS. (A) Candida albicans SC5314, (B) C. dubliniensis CBS 7987, (C) C. albicans H2, (D) C. dubliniensis 29.



Figure 2. Effectiveness of anti CR3-RP Ab on development of biofilm formed by C. albicans SC5314, C. albicans H2, C. dublinienis CBS 7987 and C. dubliniensis 29. Yeast suspensions were pre-treated with the anti-CR3-RP Ab (light gray columns) and control samples with PBS (dark gray columns—controls) prior to the induction of biofilm formation. Differences were significant (* $P \le 0.05$).

consisted mainly of yeast cells (Fig. 3B). Pre-incubation with the anti-CR3-RP Ab before biofilm formation resulted in a thickness reduction of about 36% and 40% for *C. albicans* SC5314 (Fig. 3C) and *C. dubliniensis* CBS7987 (Fig. 3D), respectively. Interestingly, despite differences in the morphological forms characterizing

the biofilms, the proportional reduction was very similar. Previous studies on *in vitro* biofilms formed by *C. albicans* revealed that the addition of anti-CR3-RP Ab at the beginning of biofilm formation also significantly decreases biofilm viability (Bujdáková et al. 2008).



Figure 3. Confocal microscopy images of biofilms formed by C. albicans SC5314 (A and C) and C. dubliniensis CBS 7987 (B and D). Candida albicans suspensions were as follows: (A) PBS (control, thickness 28 μ m); (C) anti-CR3-RP Ab (thickness 18 μ m). Candida dubliniensis suspensions were pre-incubated with the following: (B) PBS (control, thickness 20 μ m); (D) anti-CR3-RP Ab (thickness 12 μ m). The full arrow points to the mycelial form and interrupted arrow points to the yeast form. Bars represent 20 μ m.

A decrease in the adhesion of yeasts to human buccal epithelial cells after treatment with anti-CR3-RP Ab by about 35% was also observed (Bujdáková et al. 2010). The use of blocking antibodies targeting Candida surface proteins has been described in many studies as a promising tool for combating Candida infection (De Bernardis et al. 2007; Coleman et al. 2009; Torosantucci et al. 2017). The study by Gomez et al. (1996) described the cell wall mannoprotein MP65 of C. albicans to be an important protein participating in adhesion. Experiments using specific anti-MP65 antibodies demonstrated a decreased adhesion of C. albicans to vaginal epithelial cells (De Bernardis et al. 2007). Fujibayashi et al. (2009) also described the blocking of cell wall antigens involved in adhesion with three anti-Candida IgY antibodies produced in egg yolk. The authors also suggested a possible cross-reaction of antibodies with Als3 and Hwp1 proteins, resulting in a decrease in adhesion and biofilm formation (Fujibayashi et al. 2009). Additionally, Torosantucci et al. (2009) described the protective properties of the IgG2b isotype of an anti- β -glucan monoclonal antibody that was able to inhibit in vitro hyphal growth and adherence to human epithelial cells. It is of interest that CR3-RP was originally detected through an interaction with the monoclonal antibody OKM1, isotype IgG2b (Alaei et al. 1993; Bujdáková et al. 1997), also used for purifying the fragment of this protein that was subsequently administrated for the immunization of rabbits and collection of the polyclonal anti-CR3-RP Ab (Bujdáková *et al.* 2008).

Participation of CR3-RP in biofilm formed on mouse tongues

Results from in vitro investigations revealed the participation of CR3-RP in the adhesion and biofilm development of Candida spp. This was also confirmed by a newly developed model on mouse tongues (Fig. 4). This ex vivo model for biofilm studies was first described by Černáková et al. (2015). Candida albicans SC5314 and C. dubliniensis CBS 7987 were used for biofilm formation on tongues. As for in vitro experiments, the biofilm of C. albicans SC5314 (Fig. 4A) was thick and composed of hyphae or pseudohyphae, whereas the C. dubliniensis CBS 7987 biofilm was thinner and formed of yeasts. We observed a decrease in biofilm thickness after anti-CR3-RP Ab pre-treatment (Fig. 4C and D). The two species exhibited differences in invasiveness; with only C. albicans able to penetrate the inner layers of tongue tissue. This observation is in agreement with previous studies (Kolecka et al. 2011; Jordan et al. 2014). In particular, by using an ex vivo RHE 'reconstituted human epithelium' model, Kolecka and coworkers showed that C. dubliniensis is unable to penetrate deeper into the tissue, and has a lower tendency to filament. The lower ability of



Figure 4. Cryo cut sections of mouse tongues after 72 h post biofilm-formation by C. albicans SC5314 (A and C) and C. dubliniensis CBS 7987 (B and D). Candida albicans suspensions were pre-incubated with the following: (A) PBS (control); (C) anti-CR3-RP Ab. Candida dubliniensis suspensions were pre-incubated with the following: (B) PBS (control); (D) anti-CR3-RP Ab. Bars represent 20 μ m.

C. *dubliniensis* to form a biofilm could be mainly associated with the expression level of genes encoding the morphological transition. *Candida* albicans SC5314 exhibited the upregulation of hypha-specific genes within 30 min post-inoculation, resulting in a rapid induction of filamentation and increased RHE damage. *Candida* dubliniensis CD36 did not exhibit a detectable upregulation of hypha-specific genes, grew in yeast form and caused limited RHE damage (Spiering *et al.* 2010). Besides the differences in biofilm morphology, our study also confirmed the significant reduction in biofilm biomass after anti-CR3-RP Ab treatment.

Galleria mellonella survival assay

The use of alternative ethical issue-free models, like the invertebrate *G. mellonella*, for studying *Candida* pathogenesis and the effectiveness of antimicrobial compounds, seems to be very promising, because of the low cost, easy manipulation and the potential to provide a great deal of information, as evidenced by experiments (Borghi *et al.* 2014; Jacobsen *et al.* 2014; Rajendran *et al.* 2015; Maguire, Duggan and Kavanagh 2016). We initially tested whether the anti-CR3-RP Ab could be toxic for *G. mellonella* larvae. No differences in larval survival were observed compared with both PBS-injected and untouched control group

larvae. After excluding any toxic effects, the anti CR3-RP Ab was further used as therapeutic treatment 1 h post-infection with C. albicans and C. dubliniensis. Killing curves demonstrated that anti-CR3-RP Ab treatment slightly improved the survival of larvae infected with both C albicans (HR 1.49, 95% confidence interval [CI] 0.7237–3.06) and C. dubliniensis (HR 1.41, 95% CI 0.6867– 2.896) reference strains (Fig. 5A and B, respectively). The effectiveness of anti-CR3-RP Ab administration was also shown in larvae infected with the clinical isolates C. albicans H2 (HR 1.501, 95% CI 0.6474–3.481) (Fig. 5C) and C. dubliniensis 29 (HR 2.132, 95% CI 0.7449–6.1) (Fig. 5D).

The increase in survival correlated with strain-dependent differences in adhesion and biofilm formation capabilities. In agreement with the previous observation describing a decreased virulence of *C. dubliniensis* (Henriques, Azaredo and Oliveira 2006; Jordan et al. 2014), a higher survival of larvae was observed after infection with *C. dubliniensis*. We hypothesize that the increase in larvae survival, after treatment with the anti-CR3-RP Ab, could be caused by negating the functionality of CR3-RP via its blocking. Vilela et al. (2002) and Ásmundsdóttir (2009) used an *in vivo* model of systemic candidiasis in mice; microscopy analyses of autoptically collected organs revealed that *C. albicans* was more virulent and its biofilm was characterized by the presence



Figure 5. Kaplan–Meier curves showing the effect of anti-CR3-RP Ab-treatment on *G. mellonella* larval survival after *C. albicans* or *C. dubliniensis* systemic infection. (A) *C. albicans* SC5314, (B) *C. dubliniensis* CBS 7987, (C) *C. albicans* H2 and (D) *C. dubliniensis* 29. Larvae were primary inoculated with the yeast suspension and 1 h later treated with (i) PBS (control), (ii) anti-CR3-RP Ab.

of hyphae and pseudohyphae; in contrast, in the *C. dubliniensis* biofilm, only yeast cells were visible.

In conclusion, our results confirmed a lower virulence of C. *dubliniensis* compared with the phylogenetically similar C. *albicans*. The Candida surface protein CR3-RP was shown to actively participate in adhesion and biofilm development. The effectiveness of the anti-CR3-RP Ab on biofilm formation through a decrease in adhesion in both Candida spp. is evident. The precise mechanism of action is unfortunately still unclear. We hypothesize that the anti-CR3-RP Ab could covalently bind the CR3-RP protein in the Candida cell wall, affecting its function. Additionally, the obtained results with the anti-CR3-RP Ab in all models, and mainly *in vivo* in *G. mellonella*, suggest its possible use in immunotherapy or vaccine development against biofilm-

SUPPLEMENTARY DATA

Supplementary data are available at FEMSPD online.

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Conflict of interest. None declared.

REFERENCES

- Alaei S, Larcher C, Ebenbichler C et al. Isolation and biochemical characterization of the iC3b receptor of Candida albicans. Infect Immun 1993;61:1395–9.
- Araújo D, Henriques M, Silva S. Portrait of Candida species biofilm regulatory network genes. Trends Microbiol 2017;25:62–75.
- Ásmundsdóttir LR, Erlendsdóttir H, Agnarsson BA et al. The importance of strain variation in virulence of Candida dubliniensis and Candida albicans: results of a blinded histopathological study of invasive candidiasis. Clin Microbiol Infec 2009;15: 576–85.
- Bernier F. DING proteins: numerous functions, elusive genes, a potential for health. *Cell Mol Life Sci* 2013;**70**:3045–56.
- Borghi E, Romagnoli S, Fuchs BB et al. Corrrelation between *Candida albicans* biofilm formation and invasion of the invertebrate host Galleria mellonella. Future Microbiol 2014;9: 163–73.
- Bujdáková H, Lell C, Gruber A et al. The influence of subinhibitory concentrations of conventional and experimental antifungal drugs on the expression of the iC3b binding protein in Candida albicans strains during filamentation. Pathog Dis 1999;26:1–10.

- Bujdáková H, Paulovičová E, Borecká-Melkusová S et al. Antibody response to the 45kDa Candida albicans antigen in an animal model and potential role of the antigen in adherence. J Med Microbiol 2008;57:1466–72.
- Bujdáková H, Paulovičová E, Paulovičová L et al. Participation of the Candida albicans surface antigenin adhesion, the first phase of biofilm development. FEMS Immunol Med Mic 2010;59:485–92.
- Bujdáková H, Würzner R, Klobušický M et al. Expression and quantification of the iC3b-binding protein in different Candida albicans strains and their morphological stages. FEMS Immunol Med Mic 1997;18:147–52.
- Černáková L, Chupáčová J, Židlíková K et al. Effectiveness of the photoactive dye methylene blue versus caspofungin on the Candida parapsilosis biofilm in vitro and ex vivo. Photochem Photobiol 2015;**91**:1181–90.
- Coleman D, Sullivan DJ, Harrington B et al. Molecular and phenotypic analysis of *Candida dubliniensis*: a recently identified species linked with oral candidosis in HIV-infected and AIDS patients. *Oral Dis* 1997;1:S96–101.
- Coleman DA, Oh SH, Zhao X et al. Monoclonal antibodies specific for *Candida albicans* ALS3 that immunolabel fungal cells in vitro and in vivo and block adhesion to host surfaces. *J Microbiol Meth* 2009;**78**:71–8.
- Chaffin WL. Candida albicans cell wall proteins. Microbiol Mol Biol Rev 2008;**72**:495–544.
- De Bernardis F, Liu H, O/Mahony R et al. Human domain antibodies against virulence traits of *Candida albicans* inhibit fungus adherence to vaginal epithelium and protect against experimental vaginal candidiasis. J Infect Dis 2007;**195**: 149–57.
- Finkel JS, Mitchell AP. Genetic control of Candida albicans biofilm development. Nature Rev Microbiol 2011;9:109–18.
- Fuchs B, O'Brien E, El Khoury JB et al. Methods for using Galleria mellonella as a model host to study fungal pathogenesis. Virulence 2010;1:475–82.
- Fujibayashi T, Nakamura M, Tominaga A et al. Effects of IgY against *Candida albicans* and *Candida* spp. adherence and biofilm formation. *Jpn J Infect Dis* 2009;**62**:337–42.
- Gillum AM, Tsay EY, Kirsch DR. Isolation of the Candida albicans gene for orotidine-5'-phosphate decarboxylase by complementation of S. cerevisiae ura3 and E. coli pyrF mutations. Mol Gen Genet 1984;**198**:179–82.
- Gomez MJ, Torosantucci A, Arancia S et al. Purification and biochemical characterization of a 65-kilodalton mannoprotein (MP65), a main target of anti-Candida cell-mediated immune responses in humans. Infect Immun 1996;**64**:2577–84.
- Gow NA, Hube B. Importance of the Candida albicans cell wall during commensalism and infection. Curr Opin Microbiol. 2012;15:406–12.
- Hebecker B, Naglik JR, Hube B et al. Pathogenicity mechanisms and host response during oral *Candida albicans* infections. *Expert Rev Anti Infect Ther* 2014;**12**:867–79.
- Heidenreich F, Dierich MP. Candida albicans and Candida stellatoidea, in contrast to other Candida species, bind iC3b and C3d but not C3b. Infect Immun 1985;**50**:598–600.
- Henriques M, Azaredo J, Oliveira R. Candida albicans and Candida dubliniensis: comparison of biofilm formation in terms of biomass and activity. Br J Med Sci 2006;63:5–11.
- Höfs S, Mogavero S, Hube B. Interaction of *Candida albicans* with host cells: virulence factors, host defence, escape strategies, and the microbiota. *J* Microbiol 2016;**54**:149–69.
- Hoyer LL, Cota E. Candida albicans Agglutinin-like sequence (Als) family vignettes: a review of Als protein structure and function. Front Microbiol 2016;7, DOI: 10.3389/fmicb.2016.00280

- Jackson AP, Gamble JA, Yeomans T et al. Comparative genomics of the fungal pathogens Candida dubliniensis and Candida albicans. Genome Res 2009;**19**:2231–44.
- Jacobsen ID. Galleria mellonella as a model host to study virulence of Candida. Virulence 2014;5:237–9.
- Jordan RPC, Williams DW, Moran GP et al. Comparative adherence of *Candida albicans* and *Candida dubliniensis* to human buccal epithelial cells and extracellular matrix proteins. *Med* Mycol 2014;**52**:254–63.
- Kolecka A, Zavrel M, Hernandez-Barbado R et al. Biofilm formation and adhesive/invasive properties of Candida dubliniensis in comparison with Candida albicans. Centr Eur J Biol 2011;6:893–901.
- Li X, Yan Z, Xu J. Quantitative variation of biofilms among strains in natural populations of Candida albicans. Microbiology 2003;149:353–62.
- Magee BB, Sanchez MD, Saunders D et al. Extensive chromosome rearrangements distinguish the karyotype of the hypovirulent species Candida dubliniensis from the virulent Candida albicans. Fungal Genet Biol 2008;45:338–50.
- Maguire R, Duggan O, Kavanagh K. Evaluation of Galleria mellonella larvaeas an in vivo model for assessing the relative toxicity of food preservating agents. Cell Biol Toxicol 2016;**32**: 209–16.
- Mahelová M, Růžička F. Methods of *Candida dubliniensis* identification and its occurrence in human clinical material. *Folia Microbiol* 2017, DOI: 10.1007/s12223-017-0510-2
- Mishra NN, Ali S, Shukla PK. A monoclonal antibody against 47,2 kDa cell surface antigen prevents adherence and affects biofilm formation of *Candida albicans*. World J Microbiol Biotechnol 2015;**31**:11–21.
- Moran G, Stokes C, Thewes S *et al*. Comparative genomics using *Candida albicans* DNA microarrays reveals absence and divergence of virulence-associated genes in *Candida dubliniensis*. *Microbiology* 2004;**150**:3363–82.
- Moran GP, Coleman DC, Sullivan DJ. Candida albicans versus Candida dubliniensis: Why is C. albicans more pathogenic? Int J Microbiol 2012, DOI: 10.1155/2012/202951
- Nailis H, Kucharíková S, Řičicová M et al. Real-time PCR expression profiling of genes encoding potential virulence factors in *Candida albicans* biofilms: idenification of model-dependent and –independent geneexpression. BMC Microbiol 2010;10:114–25.
- Paulovičová E, Bujdáková H, Chupáčová J et al. Humoral immune response to Candida albicans complement receptor 3-related protein in the atopic subjects with vulvovaginal candidiasis. Novel sensitive marker for Candida infection. FEMS Yeast Res 2015;**15**, DOI: 10.1093/femsyr/fou001
- Pu S, Niu S, Zhang C et al. Epidemiology, antifungal susceptibilities and risk factors of invasive candidiasis from 2011 to 2013 in a teaching hospital in southwest China. J Microbiol Immunol Infect 2015, DOI: 10.1016/j.jmii.2015.01.005.
- Rajendran R, Borghi E, Falleni M et al. Acetylcholine protects Candida albicans against infection by inhibiting biofilm formation and promoting hemocyte function in Galleria mellonella infection model. Eukaryot Cell 2015;**14**:834–44.
- Ramage G, Vandewalle K, Wickes NL et al. Characteristics of biofilm formation by Candida albicans. Rev Iberoam Micol 2001;18:163–70.
- Sandhu R, Dahiya S, Sayal P et al. Increased role of nonalbicans *Candida*, potential risk factors, and attributable mortality in hospitalized patients. *J Health Res and Rev* 2017;4: 78–83.
- Sardi JC, Scorzoni L, Bernardi T et al. Candida species: Current epidemiology, pathogenicity, biofilm formation, natural

antifungal products and new therapeutic options. *J Med Microbiol* 2013;**62**:10–24.

- Sohn K, Senyürek I, Fertey J et al. An in vitro assay to study the transcriptional response during adherence of *Candida albicans* to different human epithelia. *FEMS Yeast Res* 2006;6:1085–93.
- Spiering MJ, Moran GP, Chauvel M et al. Comparative transcript profiling of Candida albicans and Candida dubliniensis identifies SFI2, a C. albicans gene required for virulence in a reconstituted epithelial infection model. Eukaryot Cell 2010;9: 251–6.
- Sullivan DJ, Moran GP, Pinjon E et al. Comparison of the epidemiology, drug resistance mechanisms and virulence of Candida dubliniensis and Candida albicans. FEMS Yeast Res 2004;4:369–76.
- Sullivan DJ, Weterneng TJ, Hayne KA et al. Candida dubliniensis sp. nov: phenotypic and molecular characterization of novel species associated with oral candidosis in HIV-infected individuals. Microbiology 1995;**141**:1507–21.
- Tamura M, Wanatabe K, Mikami Y et al. Molecular characterization of new clinical isolates of *Candida albicans* and *Can*-

dida dubliniensis in Yapan, analysis reveals a new genotype of C. albicans with group I intron. J Clin Microbiol 2001;**39**: 4309–15.

- Torosantucci A, Chiani P, Bromuro C *et al.* Protection by antibeta-glucan antibodies is associated with restricted beta-1,3 glucan binding specificity and inhibition of fungal growth and adherence. *PLoS One* 2009;4:5392.
- Torosantucci A, Tumbarello M, Bromuro C et al. Antibodies against a β -glucan-protein complex of *Candida albicans* and its potential as indicator of protective immunity in candidemic patients. *Sci Rep* 2017;**7**:2722, DOI: 10.1038/s41598-017-02977-6.
- Vilela MMS, Kamei K, Sano A et al. Pathogenicity and virulence of Candida dubliniensis: comparison with Candida albicans. Med Mycol 2002;40:249–57.
- Wahab AA, Taj-Aldeen SJ, Kolecka A et al. High prevalence of Candida dubliniensis in lower respiratory tract secretion from cystic fibrosis patients may be related to increased adherence properties. Int J Infect Dis 2014;24:14–9.
- Yapar N. Epidemiology and risk factors for invasive candidiasis. Ther Clin Risk Manag 2014;**10**:95–105.