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Regulation of extracellular ATP of human erythrocytes treated with α -hemolysin. Effects of cell volume, morphology, rheology and hemolysis.

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Abstract

Alpha-hemolysin (HlyA) of uropathogenic strains of *Escherichia coli* irreversibly binds to human erythrocytes (RBCs) and triggers activation of ATP release and metabolic changes ultimately leading to hemolysis.

We studied the regulation of extracellular ATP (ATPe) of RBCs exposed to HlyA. Luminometry was used to assess ATP release and ATPe hydrolysis, whereas changes in cell volume and morphology were determined by electrical impedance, ektacytometry and aggregometry.

Exposure of RBCs to HlyA induced a strong increase of [ATPe] (3-36-fold) and hemolysis (1-44-fold), partially compensated by [ATPe] hydrolysis by ectoATPases and intracellular ATPases released by dead cells. Carbenoxolone, a pannexin 1 inhibitor, partially inhibited ATP release (43-67 %).

The un-acylated toxin ProHlyA and the deletion analog HlyA Δ 914-936 were unable to induce ATP release or hemolysis.

For HlyA treated RBCs, a data driven mathematical model showed that simultaneous lytic and non-lytic release mainly governed ATPe kinetics, while ATPe hydrolysis became important after prolonged toxin exposure.

HlyA induced a 1.5-fold swelling, while blocking this swelling reduced ATP release by 77 %. Blocking ATPe activation of purinergic P2X receptors reduced swelling by 60-80 %. HlyA-RBCs showed an acute 1.3-2.2-fold increase of Ca²⁺ⁱ, increased crenation and externalization of phosphatidylserine. Perfusion of HlyA-RBCs through adhesion platforms showed strong adhesion to activated HMEC cells, followed by rapid detachment. HlyA exposed RBCs exhibited increased sphericity under osmotic stress, reduced elongation under shear stress, and very low aggregation in viscous media.

Overall results showed that HlyA-RBCs displayed activated ATP release, high but weak adhesivity, low deformability and aggregability and high sphericity.

Keywords: hemolysin; ATP-transport; hemolysis; adhesion, aggregation; *E.coli*

Abbreviations: HlyA, α -hemolysin; ATPe, extracellular ATP; ProHlyA, un-acylated protoxin HlyA, HlyA Δ 914-936, HlyA-deletion protein; RBCs, erythrocytes; pnx1, pannexin 1; CBX, carbenoxolone; HlyA-RBCs and Pro-RBCs, RBCs exposed to HlyA and ProHlyA respectively; c-RBCs, untreated RBCs; Hb, hemoglobin; Vt, cell volume; Apy, apyrase; Ca²⁺ⁱ, intracellular calcium; PS, phosphatidylserine; Vm, membrane potential; SEM, scanning electron microscopy; ATPiv, intravascular ATP.

Introduction

Human erythrocytes (RBCs) can release ATP when exposed to beta-adrenergic stimulation, mechanical deformation, cell adhesion, blood flow turbulence, hypoxia or acidosis (1,2). These treatments mimic several conditions to which RBCs are exposed in the vasculature, e.g. when passing microvascular beds or the contracting skeletal muscle (3–6).

A reduction of ATP release from RBCs has been associated with diseases such as type II diabetes and cystic fibrosis (7–9), while RBCs infection with *Plasmodium falciparum* or exposure to bacterial α -hemolysin correlated with activation of ATP release (10,11).

Intracellular ATP can be released by hemolysis (12) and/or by regulated transport (13). Candidate conduits for regulated ATP release in these cells include several anionic channels (VDAC, maxi anions, volume regulated ion channel and tweety, (13–16), and pore forming proteins like pannexin 1 (pnx1) and P2X7 purinergic receptor (17,18). In addition, α -hemolysin (HlyA) was shown to activate ATP exit of RBCs, presumably by forming pores through which the nucleotide transverses the plasma membrane (10,19).

HlyA is an exotoxin secreted by some pathogenic strains of *E. coli* that causes lysis of several mammalian cells, including RBCs from humans and other mammalian species (20). *In vivo* HlyA has been associated with urinary tract infections and septicemia (21,22). HlyA is synthesized as the protoxin ProHlyA, which is activated by acylation at two internal lysines, Lys-563 and Lys-689. Acylation turns binding of the toxin to the cell membrane irreversible, initiating a series of events leading to hemolysis (23).

The mechanisms enabling ATP release by HlyA are scarcely known, and the putative existence of a receptor for the toxin in erythrocytes remains controversial (24,25). Toxin recognition of RBCs appears to require a short sequence from the C-terminal domain (aminoacid residues 914-936) capable of binding to glycoporphins at the RBC surface (26). A deletion mutant lacking these residues lacked hemolytic activity (26), but its effects on ATP release were not tested.

On the other hand, while it has been suggested that during HlyA exposure an early non-lytic ATP release precedes hemolysis (10), parallel dynamic changes in cell volume (V_t) and morphology of RBCs were observed, with unknown consequences on extracellular ATP (ATPe) homeostasis. This is important inasmuch as the extent of ATP release from RBCs, activated by different stimuli, was shown to depend on the capacity of these cells to swell or deform, both in physiological as well as pathological contexts (2,27).

In addition to ATP release, other processes may control ATPe regulation. On the one hand, increased [ATPe], caused by activated ATP exit, can be partly compensated by ectoATPase activity by one or more ectonucleotidases of RBCs and *-in vivo-* of other blood and vascular cells (28). The activities of these enzymes generate extracellular accumulation of ADP and adenosine which, together with ATPe, constitute potent ligands capable of activating purinergic receptors functionally expressed in RBCs (29,30) and endothelial cells (31).

The physiological effects of such ligand-receptor interactions can be manifold. In RBCs, P2X7 activation by ATPe promoted hemolysis (19), a process which should lead to lytic ATP release. In the absence of hemolysis, we found that ATPe activation of P2X2 triggered swelling dependent ATP release (32,33). On the other hand, accumulation of extracellular ADP from ATPe, due to ectonucleotidase activity, led to activation of P2Y13 coupled to inhibition of ATP release (29,33). Thus ATPe regulation depends on the dynamic interaction among ATP release pathways, purinergic receptors signaling and ectonucleotidases.

In this study we characterized how these processes affect ATP regulation of RBCs exposed to HlyA and structural toxin analogs. We made a quantitative assessment of ATPe kinetics, together with a comprehensive description of the main processes controlling HlyA dependent ATP regulation of RBCs. Additionally, we tested the interaction between HlyA and RBCs under different conditions resembling physio-pathological contexts. I.e., ATPe regulation of RBCs was assessed when cells were perfused through a rat mesenteric vascular bed, and video/electron microscopies and rheological techniques were used to assess the capacity of HlyA treated RBCs to change shape, deform or aggregate.

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2. Materials and Methods

All reagents in this study were of analytical grade. Bovine serum albumin (BSA), carbenoxolone, digitonin, sucrose, A438079, A740003, human haemoglobin, apyrase (EC 3.6.1.5), firefly luciferase (EC 1.13.12.7), guanidinium hydrochloride, ionomycin, A23175, ATP and dextran 400 were purchased from Sigma (St. Louis, MO, USA). The BCECF-AM, Fluo4-AM, D-luciferin, bis-(1,3-dibutylbarbituric acid)trimethine oxonol (DiBAC₄(3)) were purchased from Invitrogen/Molecular Probes Inc. (Eugene, OR, USA). NF110 was purchased from TOCRIS (Bristol, United Kingdom).

2.1 Media used

Tris-Chloride (TC) buffer (in mM) 20 Tris, 150 NaCl, pH 7.4 at 25 °C.

Isosmotic medium (in mM) 137 NaCl, 2.7 KCl, 2.5 Na₂HPO₄, 1.50 KH₂PO₄, 1.32 CaCl₂, 1.91 MgSO₄, 5 glucose, pH 7.4 at 25 °C, 300 mosM and supplemented with 0.1 % BSA.

Hyperosmotic medium (in mM) 137 NaCl, 2.7 KCl, 4.72 Na₂HPO₄, 1.50 KH₂PO₄, 1.32 CaCl₂, 1.91 MgSO₄, 5 glucose, 30 mM sucrose, pH 7.4 at 25 °C, 325 mosM and supplemented with 0.1 % BSA.

Krebs Ringer solution (in mM): 130 NaCl, 4.7 KCl, 1.17 Na₂HPO₄, 1.16 MgSO₄, 24.0 mM NaHCO₃, 2.5 CaCl₂, 6 glucose, pH 7.4 at 25 °C.

2.2 Isolation of human erythrocytes

Immediately after blood collection, plasma, platelets and leukocytes were removed by centrifugation (900 x g at 20 °C for 3 min). The supernatant and buffy coat were removed and discarded. Isolated red blood cells (RBCs) were resuspended and washed three times in isosmotic medium. Packed RBCs were resuspended in isosmotic medium to the corresponding final hematocrit.

2.3 Liposomes preparation

Large unilamellar vesicles (LUVs) of 100 nm were made of palmitoyl-oleoyl-phosphatidylcholine:sphingomyelin:cholesterol (POPC:SM:CHO) in a molar ratio of 2:1:1. They were prepared by mixing the appropriate amount of synthetic pure lipids dissolved in chloroform/methanol (2:1, v/v). Samples were dried under a stream of nitrogen and then placed at high vacuum for 2 h in a glass chamber connected to a vacuum pump. Samples were then hydrated in isosmotic medium containing 50 mM ATP, and exposed to 10 rounds of freezing- thawing before extrusion (10 times) through 100 nm filters in a mini extruder (Avestin, Canada). Non-encapsulated ATP was removed by exclusion chromatography (PD-10, GE Healthcare).

2.4 Purification of HlyA, ProHlyA and HlyAΔ916-934

Different *E. coli* overproducing strains were used to produce and release HlyA and mutants. *E. coli* WAM1824 (*E. coli* JM15 strain transformed with pSF4000) produced and release HlyA (34) and *E. coli* WAM 783 (*E. coli* DH1 strain transformed with pSF4000ΔBamHI, in which a portion of the hlyC gene has been deleted) produced the un-acylated inactive protein ProHlyA (35).

Both *E. coli* strains were gently provided by Dr. Welch (University of Wisconsin Medical School, Madison, Wisconsin). *E. coli* BL21 strain transformed with pSU124 (26) produced HlyAΔ914-

936, i.e., a deletion HlyA mutant lacking 914–936 residues. The plasmid was gently given by Dr. Ostolaza (Universidad del País Vasco, Bilbao, Spain).

All cultures were grown over night at 37 °C in Luria–Bertani medium to late log phase ($D_{600nm}=0.9–1.0$). The HlyA Δ 914-936 producing strain was induced by 0.4 mM IPTG when 0.6 D was reached. Bacteria were then pelleted, and the supernatants concentrated and partially purified by precipitation with 20 % (v/v) cold ethanol at pH 4.5. Pellets containing HlyA, ProHlyA or HlyA Δ 914-936 were collected by centrifugation (14,500 x g at 20 °C for 1 h, Sorvall centrifuge rotor SSA 34) and then resuspended in TC buffer supplemented with 6 M guanidinium hydrochloride. SDS-PAGE gels of these preparations showed a main band at 110 kDa corresponding to more than 90 % of the total protein (Suppl. Fig. 1 A). Protein content of each sample was determined by Bradford (36). To evaluate protein functionality, its hemolytic activity was determined as described below. The resulting proteins were stored at –70 °C in guanidinium hydrochloride.

Throughout text, RBCs exposed to HlyA ProHlyA and HlyA Δ 914-936 were denoted as HlyA-RBCs Pro-RBCs and HlyA Δ 914-936-RBCs, respectively. Untreated RBCs (i.e., controls) were denoted as c-RBCs.

2.5 Hemolytic assays

Two sets of hemolytic assays were carried out. The first assay evaluated the functionality of the HlyA after purification, while the second assay was performed to establish the HlyA concentration used in experiments with RBCs.

To evaluate HlyA functionality, its hemolytic activity was determined by light scattering of a RBCs suspension exposed to increasing concentrations of the toxin. Briefly, 100 μ L of HlyA stock solution was serially diluted in isosmotic buffer (0-69 ng/ μ L) in a 96-well microtiter plate and mixed with 100 μ L of RBCs suspension (3 % hematocrit). The plate was then incubated at 37 °C for 30 min and the absorbance at 600 nm measured with a Multimode Detector DTX 880 Beckman Coulter (Suppl. Fig. 1 B).

To establish the concentration of HlyA to be used in experiments, the hemolytic activity was determined by measuring hemoglobin concentration of the supernatants of RBCs suspensions exposed to increasing concentrations of HlyA. Briefly, 100 μ L of RBCs suspension (20 % hematocrit) was added to 100 μ L of serial 2-fold dilutions of HlyA (0.5-138 ng/ μ L) in a microtiter plate. The plate was incubated at 37 °C for 5 min, the suspensions were then collected and centrifuged (12600 x g at 20 °C for 30 s) and the hemolysis was quantified as released hemoglobin by measuring absorbance at 405 nm. Results were expressed as percentage of hemolyzed RBCs (% Hemolysis) as function of HlyA concentration (in log scale) (Suppl. Fig. 1 C). Except otherwise stated, an HlyA concentration producing 0.5 % hemolysis after 5 min was used for most experiments (4.5-5 ng/ μ L). For experiments using ProHlyA and HlyA Δ 914-936, a 10-fold higher concentration than that used for HlyA was used.

2.6 ATP measurements

Extracellular ATP (ATPe) and intracellular ATP (ATPi) were measured using firefly luciferase, which catalyzes the oxidation of luciferin in the presence of ATP to produce light (37,38). Because luciferase activity at 37° C is only 10 % of that observed at 20 °C (39), to maintain full luciferase activity, ATP measurements were performed in a cool chamber of a custom-built luminometer acclimated at 20 °C. Under the experimental conditions, assay volume did not

change during the course of the experiment. Two different types of luminometry determinations were performed, *off-line* and *on-line*.

2.6.1 *Off-line* measurements

For *off-line* luminometry determinations, ATPe was measured as previously described (7,8,32,40,41). Briefly, 100 μL of 20 % RBCs suspension were exposed at 37 °C to 100 μL of HlyA in iso- or hyperosmotic media, in the absence and presence of different blockers. Afterwards, 1.5 μL of the suspension was diluted in 45.5 μL of isosmotic medium (final hematocrit 0.32%) to quantify [ATPe] at different times of toxin exposure. Light emission was transformed into ATPe concentration by means of a calibration curve. That is, at the end of each experiment ATP from 2 to 10 μM was sequentially added to the assay medium from a stock solution of pure ATP dissolved in RBC medium. Hemolysis was assessed in paired samples (see method below). The presence of free hemoglobin originated from the hemolysis of RBCs did not interfere with the luminometric signal (not shown). Results were expressed as ATPe in μM .

2.6.2 *On-line* measurements

On-line luminometry measurements were carried out with ATP-loaded liposomes, similarly to experiments with RBCs performed before (33). Briefly, liposomes (1.7×10^{10} , 1.7×10^{11} or 2.5×10^{11}) were laid on coverslips mounted in the assay chamber of the luminometer, incubated with 40 μL of luciferin-luciferase mix reaction and exposed to different concentrations of HlyA. Under the experimental conditions, assay volume did not change during the course of the experiment. In separate experiments, liposomes were permeabilized with digitonin (300 $\mu\text{g}/\text{mL}$) to induce full ATP release. Light emission was transformed into ATPe concentration vs. time by means of a calibration curve for each experiment, where increasing concentrations of ATP from 0.5 to 10 μM were sequentially added to the assay medium from a stock solution of pure ATP dissolved in RBC medium. Results were expressed as [ATPe] at every time point of a kinetic curve, with [ATPe] expressed as μM (Suppl. Fig. 2). Alternatively, increases in [ATPe] were evaluated at 20 min post stimulus.

Additionally, *on-line* luminometry measurements were performed to estimate [ATPi] as describe previously (42). Briefly, RBCs (1.0×10^5) were laid on coverslips, incubated with 45 μL of luciferine-luciferase mix reaction for 5 min and permeabilized with digitonin (50 $\mu\text{g}/\text{mL}$). Light emission was transformed into ATPe concentration vs. time by means of a calibration curve for each experiment, as described above. After considering the total volume occupied by RBCs present in the chamber, and the relative solvent cell volume, intracellular ATP (ATPi) amounted to 2.02 ± 0.10 (N=15).

2.7 Hemoglobin measurements

For each sample taken to assess ATPe by *off-line* luminometry, a paired sample was taken to assess hemolysis. Accordingly, paired samples were centrifuged at 12600 x g and 20 °C for 30 sec and the presence of free hemoglobin in the supernatant was determined by light absorption at 405 nm. Results are expressed as percentage of hemolyzed RBCs (% Hemolysis) with respect to the total number of RBCs.

2.8 Intracellular ATPase activity

Intracellular ATPase activity was determined by *off-line* luminometry, following the decrease of exogenous ATP added to a lysate of RBCs. Briefly, 2×10^6 and 1×10^7 RBCs were lysed in a medium with 1 mM PMSF and incubated with ATP (1 to 120 μM) at 37 °C. [ATP] was measured in 1.5 μL aliquots by *off-line* luminometry after 5 and 10 min of ATP addition. Recorded light output was transformed into ATPe concentration by means of a calibration curve. To calculate intracellular ATPase activity, linear functions were fitted to experimental data and the parameters of best fit resulting from the regression were used to calculate the initial rates of ATPe extinction (i.e., intracellular ATPase activity). Results were expressed as $\mu\text{M}/\text{min}$.

2.9 Ecto-ATPase activity

EctoATPase activity was determined by *off-line* luminometry, following the decrease of exogenous ATP added to a suspension of intact RBCs. Briefly, 200 μL RBCs suspensions of 10 % hematocrit (containing approx. 2.22×10^8 cells) were incubated with ATP (2 to 153 μM) at 37 °C. ATPe concentration was measured in 1.5 μL aliquots of the suspension every 2 min for 10 min. Recorded light output was transformed into ATPe concentration by means of a calibration curve. Linear functions were fitted to experimental data and the parameters of best fit were used to calculate initial rates of ATPe extinction, a measure of EctoATPase activity. Paired samples were collected for parallel hemolysis assessment, so as to estimate and subtract ATPe consumption due to intracellular ATPase activity of lysed cells. Results were expressed as $\mu\text{M}/\text{min}$.

2.10 Apyrase activity

Apyrase activity was assessed by on-time luminometry, following the decay of ATP solutions after addition of apyrase. Briefly, 1 μL of ATP solutions ranging from 0.03 to 30 μM were added to 45 μL of luciferin-luciferase mix reaction and ATP kinetics was measured *on-line* as described above. After attaining a stable signal, 1 μL of apyrase (2 to 80 U/mL) was added and luminescence decay was continuously monitored for 2 min. Recorded light output was transformed into ATPe concentration by means of a calibration curve. Exponential functions were fitted to experimental data and the parameters of best fit were used to calculate the initial rate of ATPe extinction, i.e. Apyrase activity. Results were expressed as $\mu\text{M}/\text{min}$. For apyrase $t_{1/2}$ values were calculated as $\ln(2)/k$, where k is the kinetic coefficient of the exponential function.

2.11 Cell volume measurements

Changes in cell volume were measured using the coulter counting principle with either Scepter 2.0 (Merck Millipore Japan, Tokyo, Japan) or a Casy analyzer (Schärfe System, Reutlingen, Germany).

2.11.1 Cell Scepter measurements

The Scepter cell counter was used to assess volume of RBCs suspensions exposed to HlyA. Briefly, 100 μL of 20 % RBCs suspensions were exposed at 37 °C to 100 μL of HlyA in iso- or hyperosmotic media, in the absence or presence of different blockers. After 5 and 10 min of HlyA exposure, samples were diluted and aspirated using 40 μm tip sensors, according to the manufacturer's recommendation. Cell counts and cell volume distributions were acquired. Histograms were normalized to standard RBCs volume values (43) and cell volume values

(expressed as total volume, V_t) were obtained from the weighted arithmetic mean of each histogram.

2.11.2 Casy measurements

Alternatively, cell volume was measured using a Casy cell analyzer. Briefly, 300 μL of 40 % RBCs suspensions were exposed to HlyA in isosmotic media, in the absence and presence of apyrase (10 U/mL). 10 μL of the suspensions were taken at different time of HlyA exposure and diluted 400-fold before measurements. Cell volume values obtained were expressed as total volume (V_t).

2.12 Endothelial cell culture in biochips and flow adhesion assay

Human micro vascular endothelial cell line 1 (HMEC-1) cells were seeded at 10^7 cells/mL in Vena8 Endothelial+ Biochips (Cellix Ltd, Dublin, Ireland) previously coated with 40 μL of 0.2% gelatin in PBS. Cells were then incubated at 37 °C for 24 h to allow cell attachment and cultured for 48 hs using a Kima pump (Cellix Ltd.). Medium was changed via a peristaltic pump system every 2 hours with a 300 $\mu\text{L}/\text{min}$ flow. Cells were then activated with $\text{TNF}\alpha$ (10 ng/mL) at 37 °C for 24 hours and medium was changed every 2 hours. RBCs were washed and resuspended in isosmotic medium supplemented with 0.5% BSA at 2% hematocrit. Adhesion assays were initiated by perfusion of the RBCs at a 0.2 dyn/cm^2 for 10 min. This was followed by 5-min of washes at 0.5, 1 and 2 dyn/cm^2 . The whole process was controlled using the Exigo pumps and the Cellix software. Images were taken 1 min before wash using the Zeiss AxioObserver microscope, with a 10X objective. Images were acquired using the ZEN software. Adherent RBCs were counted from 6 representative areas.

2.13 Microscopy

Morphology of RBCs was studied by videomicroscopy of viable cells and by Scanning Electron Microscopy (SEM) of glutaraldehyde fixed cells.

2.13.1 Videomicroscopy.

RBCs suspensions (1 % hematocrit) were exposed to vehicle, HlyA, ProHlyA or HlyA Δ 914-936 at 20 °C. Preparations were immediately mounted on slides and observed by light microscopy (Biotraza LCD XSP-167SP). Images were acquired for 30 min using a charge-coupled device camera at 100X magnification. Control samples were run with non-treated RBCs.

2.13.2 Scanning Electron Microscopy

RBCs were treated with HlyA or ProHlyA for 30 min and then fixed in 2.5% glutaraldehyde. Fixed samples were then coated with graphite by thermal evaporation of charcoal (0.150 Torr at 50 Amp for 30 s) using a Desk Carbon Accessory coater (DENTON VACUUM). Coated samples were placed in a holder and observed by SEM (SJEOL model JSM-IT300-LV). Images were acquired with a Secondary Electron Detector at 30 kV, 10-30 spot size and work distance of 10 mm at high vacuum. Control samples were run with non-treated RBCs.

2.14 Deformability

Deformability changes of RBCs treated with HlyA (or analog proteins) were analyzed by ektacytometry using a LoRRca MaxSis equipment (MechatronicsVR, Hoorn, Netherlands), which quantifies the magnitude of cell elongation as a function of applied osmolality, or as a

function of shear stress. The system has been described elsewhere in detail (44). Briefly, a laser beam is directed to RBCs suspended in polyvinylpyrrolidone (PVP), which are subjected to an osmotic gradient or to a gradient of shear stress, and the diffraction pattern produced by the deformed cells is analyzed by a microcomputer. Based upon the geometry of the elliptical diffraction pattern, an elongation index (EI) is calculated as: $EI = (L-W)/(L+W)$, where L and W are the length and width of the diffraction pattern. An increased EI indicates greater cell deformation and hence greater RBC deformability.

When EI was evaluated as a function of medium osmolarity (80-690 mosm/Kg), yielding characteristic osmoscan curves (Fig. 12 A). The assay was carried out using 250 μ L aliquots of 44 % RBCs suspensions exposed to HlyA at 37 °C. Samples were taken 2.5 and 3.5 min after treatment. Control samples were run with non-treated RBCs.

From osmoscan curves five parameters were obtained (45): EI min (minimal EI of the curve), O min (osmolality at EI min), EI max (maximal EI), O max (osmolality at EI max) and O hyper (osmolality in the hyperosmotic region). The O min directly correlates with the osmolality producing 50 % hemolysis using a standard osmotic resistance test; EI max corresponds to the maximal elongation of the curve; O hyper corresponds to osmolality at 50 % of EI max and reflects the hydration state, increased intracellular viscosity secondary to osmotic water loss and hemoglobin concentration.

When deformability was evaluated as a function of shear stress, a thin layer of RBCs suspended in PVP at 37 °C was placed between two concentric cylinders and shear stress (0.3 – 30 Pascal) was applied. The assay was carried out with 25 μ L of 44 % RBCs suspensions exposed to HlyA (or analog proteins) at 37 °C. Samples were taken 2.5 and 3.5 min after treatment. Control samples were run with non-treated RBCs. All measurements were carried out at 37 °C.

Although deformability measurements were run in media without dextran, to compare results of these experiments with those on aggregability (see below), a few experiments were run in the presence of 3 % dextran 400. Both for shear stress curves and osmoscans, results were similar in the absence and presence of this compound (data not shown).

2.15 Aggregability

Aggregation properties of RBCs were determined at 37 °C by laser backscatter vs. time, using a LoRRca MaxSis equipment (MechatronicsVR, Hoorn, Netherlands). A syllectogram was created by plotting laser backscattered intensity (Isc) vs.time.

RBCs suspensions (40 % hematocrit) were exposed to vehicle (controls), ProHlyA or HlyA for 5 min at 22°C, in the presence of 3% dextran 400 to promote aggregation. Samples were subjected to high shear for 2 s to dissociate pre-existing RBCs aggregates. Shearing was then stopped abruptly and the changes in Isc were monitored for another 2 min.

2.16 Calcium content

Intracellular calcium content of RBCs was assessed before and after exposure of HlyA or analog proteins.

RBCs suspensions (0.3 % hematocrit) were loaded with 5 μ M Fluo4-AM at 37 °C for 60 min, washed and resuspended in isosmotic medium. 100 μ L of RBCs suspensions were loaded in 96-well black-walled, clear-bottom plates (Corning, Inc). Real time fluorescence measurements were carried out using a fluorometric plate reader (Synergy HT. Biotek, BioTek Instruments,

Inc., Winooski, VT, USA). The fluorescent signal was recorded in each well simultaneously every 5 s (λ_{exc} : 485 ± 20 nm; $\lambda_{\text{emission}}$ 528 ± 20 nm). After 10 min of stable baselines, RBCs were exposed to vehicle or HlyA (or analog proteins) in the absence or presence of different blockers. At the end of the experiment, 5 μM ionomycin was added as positive control. Results were normalized to baseline values and expressed as relative Cytosolic Calcium Content (F_t/F_0), i.e., the ratio of fluorescence signal at t (F_t) over fluorescence signal before treatment (F_0).

2.17 Assessment of membrane externalization of phosphatidylserine (PS)

The exposure of PS to the outer membrane leaflet of RBCs was measured using lactadherin binding by flow cytometry using a FACS Canto II flow cytometer (BD Biosciences). Briefly, RBCs suspensions (40 % hematocrit) were incubated at 37 °C and exposed to no toxin (control), HlyA or ProHlyA for 2, 3.5, 5 and 10 min. Samples were then centrifuged (10,000 \times g for 10 s) and resuspended in isosmotic medium to a 400-fold dilution; 100 μL of this suspension was then incubated with 100 μL of FITC-conjugated lactadherin (1/25 dilution, Cryopep Enterprise, Montpellier, France) for 10 min at room temperature in the dark. Next, samples were diluted 2-fold in isosmotic medium for measurement. Data was analyzed using the FlowJo software (Tree Star). Results were expressed as percentage of positive RBCs and mean fluorescence intensity. In parallel experiments, RBCs were exposed to 10 μM A231875 (a Ca^{2+} ionophore) as positive controls.

2.18 Membrane Potential (Vm)

The effects of HlyA on V_m of HlyA-treated RBCs were estimated by monitoring changes in fluorescence intensity using DiBaC₄(3) (46) as described previously (47). Briefly, RBCs suspensions were diluted in isosmotic medium with 1 μM DiBaC₄(3) to a final 0.03 % hematocrit. Fluorescence intensities were quantified at 515 nm (λ excitation = 490 nm) every 3 s with continuous stirring at 100 rpm in a PerkinElmer LS-55 spectro fluorometer (PerkinElmer Ltd., Beaconsfield, United Kingdom). RBCs were exposed to HlyA after 5 min of cell stabilization. Values of V_m were expressed as a fluorescence ratio (F_t/F_0), where F_0 represents the signal of the 5 min baseline and F_t denotes the signal at given time point.

In separated experiments, calibrations of the fluorescence signal were performed. Briefly, RBCs loaded with DiBaC₄(3) were centrifuged at 12000 \times g for 30 s and then resuspended at 0.03 % hematocrit in isosmolar solutions with varying K^+ concentrations (1.5 to 150 mM, Table 3). Fluorescence was registered for 5 min and then 2 μM valinomycin was added. Results were expressed as relative fluorescence intensity (F_t/F_0), where F_0 denotes the signal obtained in the absence of valinomycin and F_t represents the signal at the stationary state after valinomycin addition. All measurements were performed at 37 °C.

2.19 Mean mesenteric arterial bed pressure (MABP)

Adult male Sprague-Dawley rats (250 ± 30 g) were anaesthetized with Isoflurane (5 and 2 % for induction and maintenance, respectively).

The small bowel (jejunum and ileum) with the vascular pedicle (superior mesenteric artery and portal vein) was isolated following a microsurgical procedure previously described (48).

The whole preparation was placed in an organ bath filled with Krebs solution and kept at 37 °C. The superior mesenteric artery and the portal vein were cannulated with polyethylene tubing and perfused with isosmotic medium at 37 °C (1 mL/min) for 10 min in order to eliminate all rat erythrocytes. A pressure transducer (Letica TRI-201) was connected to the mesenteric artery inflow line and changes were measured continuously. The signals from the force transducers were amplified and driven into an analog–digital board (DT16EZ, Data Translation, Marlboro, MA, USA) mounted in a computer. *On-line* recordings and files for later processing were obtained with the software Labtech Notebook Pro (Laboratory Technology, Wilmington, MA, USA). Then the preparation was washed with isosmotic medium and subsequently perfused with HlyA- or ProHlyA-treated RBCs (10% hematocrit) at 37 °C (1 mL/min). Under each condition, the MABP was constantly monitored and samples of fluids leaving from portal vein were taken at 2-min intervals for ATP and Hb assessment.

2.20 Rat mesentery histology

Following perfusion of RBCs suspension under the different treatments (i.e., controls, HlyA and ProHlyA treated RBCs), samples of the rat small intestine were taken for histological examination of the blood vessels. Briefly, samples were fixed in 10 % formaldehyde solution for 72 h, dehydrated in ascending grades of ethyl alcohol (70 %, 80 %, 90 % and 95 %), then cleared in terpinol and embedded in paraffin and sectioned at 6 mm. The sections were deparaffinized in xylene, embedded in descending grades of ethyl alcohol, washed in water and then stained with hematoxylin and eosin.

2.21 Ethics Statement

Human blood was obtained by venipuncture from healthy volunteers the day each study was performed. The study has been approved by the COBIMED (Committee for Bioethics and Investigation, Facultad de Ciencias Médicas, Universidad Nacional de La Plata, protocol 43) and by CEIC (Committee for Ethics on Clinical Investigation, Facultad de Farmacia y Bioquímica, Universidad de Buenos Aires EXP-UBA: 0048676/2017), according to the requirements of the Declaration of Helsinki and the Argentinean legislation concerning Public Health (laws 25326 and 26529). Written informed consent was given by the donors.

Animal handling followed and conformed to the animal welfare guidelines according to NIH (USA) standards. The study has been approved by the Faculty ethical committee for the use of animals in biological research (protocol P04-01-2017).

2.22 Data analysis

Statistical significance was determined using one-way analysis of variance followed by a Turkey–Kramer test of multiple comparisons. A *P* value < 0.05 was considered significant. Numbers of determinations (*n*) from independent preparations (*N*) are indicated.

3. Results

The effects of HlyA and structural mutants proteins on ATPe regulation were first studied on isolated RBCs suspended in isosmotic medium. In addition, to account for responses in a more *in vivo* context, some experiments were carried out using RBCs challenged by osmotic gradients, shear forces, and perfused through adhesion platform or a rat isolated mesentery bed.

3.1 HlyA-dependent ATPe regulation of RBCs

In the absence of hemolysis ATPe kinetics depends on the dynamic balance between non lytic ATP release by protein conduits of viable cells (increasing [ATPe]) and ATPe hydrolysis by one or more ectonucleotidases (decreasing [ATPe]), i.e. ectoATPase activity. In addition, hemolysis induced by HlyA may release ATP and ATPases. These intracellular enzymes, when released in the extracellular space, could hydrolyze ATPe. It follows an assessment of each of these processes potentially affecting ATPe regulation.

3.2 HlyA induced ATP release

ATPe release was evaluated by *off-line* luminometry at 37 °C using a 10 % hematocrit. HlyA concentration was adjusted to result in 0.5 % hemolysis after 5 min of exposure (Suppl. Fig. 1). Paired samples were taken to assess hemolysis by measuring extracellular Hb (see Methods). RBCs exposure to HlyA produced a non-linear accumulation of ATPe, with [ATPe] amounting to $27.8 \pm 8.6 \mu\text{M}$ after 10 min exposure, i.e., a 36-fold increase over control values (Fig. 1 A). This increase correlated with activation of hemolysis from 0.20 ± 0.03 to 9.02 ± 2.26 % (Fig. 1 A). Prior to calculating lytic and non-lytic ATP release, a characterization of ATPases affecting ATPe regulation was performed.

Fig. 1. Effects of HlyA on [ATPe], ATPe hydrolysis and hemolysis of RBCs.

(A) Kinetics of [ATPe] and hemolysis of HlyA-treated RBCs. RBCs suspensions (10% hematocrit) were exposed to HlyA at 37 °C for 2-10 min and [ATPe] (grey bars, left axis) and hemolysis (white bars, right axis) were quantified. At $t=0$, RBCs were treated with vehicle in the absence of HlyA. Results are expressed as μM ATPe and as percentage of hemolyzed RBCs (%Hemolysis) with respect to the total number of RBCs. Results are mean values \pm S.E.M. ($t=0$ min, $N=20$, $n=16$; $t=2-4$ min and 6-8min, $N=4$, $n=8$; $t=5$ min and 10, $N=8$, $n=16$). **(B) ATPe hydrolysis by EctoATPase and Intracellular ATPase activities.** EctoATPase activity ($\text{ATPase}_{\text{EA}}$) and ATPase activity of intracellular ATPases ($\text{ATPase}_{\text{IA}}$) were estimated as a function ATP (μM). Each point of the curves represents the rate of ATP extinction ($\mu\text{M}/\text{min}$). For EctoATPase activity (close triangles), 2.22×10^8 viable cells were used, while intracellular ATPase activity was performed with hemolyzates from 2×10^6 cells (white circles) or 10^7 cells (white squares). Dashed lines represent the fitting of linear functions to experimental data. Results are mean values \pm S.E.M. **(C) Relative contribution of ATP fluxes to ATPe kinetics of HlyA-treated RBCs.** Experimental data on ATPe kinetics and hemolysis (A), ectoATPase and intracellular ATPase activities (B) were fed into a mathematical algorithm to estimate the relative contribution of these processes to [ATPe] when RBCs were exposed to HlyA for 0-10 min. Details of the mathematical procedure are given in the Suppl. File. $\text{ATPe}_{\text{I}} = \text{ATPe}$ produced by hemolytic release of intracellular ATP; $\text{ATPe}_{\text{IA}} = \text{ATPe}$ consumed by intracellular ATPases released by hemolysis; $\text{ATPe}_{\text{EA}} = \text{ATPe}$ consumed by EctoATPase activity. $\text{ATPe}_{\text{NL}} = \text{ATPe}$ produced by non-lytic release of intracellular ATP, calculated by using the algorithm. *Inset:* Data from main graph during the first 5 min.

Numbers of determinations (n) from independent preparations (N) are indicated. HlyA concentration was adjusted to result in 0.5% hemolysis after 5 min at 37 °C, value obtained from data of Suppl. Fig.1.

3.3 ATPases

Changes in [ATPe] were detected by *off-line* luminometry. EctoATPase activity was assessed by adding exogenous ATP (2–153 μM) to a suspension of RBCs in the absence of toxin, and following the rate of ATPe decay. Values of initial decay rates for each [ATPe] were used to build a substrate curve. EctoATPase activity vs. [ATPe] was approximated by a linear function with slope of the curve (K_{EA} , see Eq. 6 of Suppl. File) amounting to 0.052 min^{-1} (Fig. 1 B).

To assess intracellular ATPase activity, RBCs were lysed and homogenized. Exogenous ATP (1–120 μM) was added to the reaction mixture containing aliquots of homogenate samples in the absence of toxins, and the rate of [ATPe] decay was followed. Repeating this procedure for each [ATP] allowed to build a substrate curve. ATPase activity vs. [ATP] was approximated by a linear function with slope of the curve (K_{IA} , see Eq. 7 of S1 File) amounting to 0.014 min^{-1} (Fig. 1 B).

Results showed that intracellular ATPase activity increased with the volume of the homogenate -representing the number of dead cells- and with [ATP].

Having experimentally determined ATPe kinetics, ectoATPase activity, and intracellular ATPase activity of HlyA-exposed RBCs (HlyA-RBCs), we built a simple numerical algorithm (see Suppl. File) to calculate the dynamic contribution of each ATP flux to [ATPe] kinetics.

3.4 Modeling ATPe kinetics

When modeling ATPe kinetics, ATP efflux and ATPe hydrolysis were treated as ATP fluxes. Thus, following HlyA exposure, [ATPe] may increase by lytic (J_L , i.e. lytic flux) and non-lytic (J_{NL} , i.e. non-lytic flux) ATP release, and decrease by hydrolysis due to ectoATPase activity (J_{EA} , i.e. ectoATPase flux) or intracellular ATPases of hemolyzed RBCs (J_{IA} , i.e. intracellular ATPase flux).

ATPe kinetics was expressed as:

$$d[\text{ATPe}]/dt = J_{NL} + J_L - J_{EA} - J_{IA}$$

This equation was fed with experimental data as follows:

$d[\text{ATPe}]/dt$, J_L , J_{EA} and J_{IA} were estimated by fitting empirical functions to experimental data of Figs. 1 A-B. We then used these functions to calculate the magnitudes of the fluxes, and their contribution to [ATPe], at any time from 0-10 min. A detailed description of the calculations is given in the Suppl. File. The only unknown flux was J_{NL} , whose kinetics was derived using the other fluxes and the values of $d[\text{ATPe}]/dt$.

Following this procedure, results of Figs. 1 A-B could be expressed as in Fig. 1 C, where the relative contribution of each flux to ATPe kinetics can be seen.

ATPe kinetics was dominated by simultaneous lytic and non-lytic release of ATP. ATPe hydrolysis by J_{EA} and J_{IA} was relatively low, although their strength increased with time, thus reducing [ATPe] by 23 % at 10 min post stimulus.

The lytic component (ATP_L) was relevant at all times of toxin exposure, and it amounted to 32 % of total ATPe at 10 min post stimulus, vs. 50 % for the contribution of non-lytic ATPe (ATP_{NL}) release to total ATPe.

3.5 Non-lytic HlyA-dependent ATP release

Lytic ATP release did not fully account for the observed increase of [ATPe] in HlyA-RBCs, since a simultaneous non-lytic ATP efflux (J_{NL}) was activated. Both J_L and J_{NL} were relatively low at first, but steeply increased beyond 7 min of toxin exposure.

By considering the intracellular ATP content of RBCs (32) and the number of viable cells at any time, the energetic cost of viable cells to produce J_{NL} was calculated. As shown in Table 1, for

the first 5 min of toxin treatment the contribution of J_{NL} to [ATPe] kinetics required <1 % of intracellular ATP. Thus it did not impose an energetic burden to RBCs. In the late phase of the response (8-10 min), however, the required intracellular ATP steeply increased to approx. 11 %.

Table 1. Time course of ATP_{NL}, and its relationship to intracellular ATP

Time (min)	ATPe _{NL} (μM)	% ATPe _{NL} /ATPe _{intra}
0	0.16	0.07
2	0.43	0.19
4	1.16	0.51
5	1.92	0.85
6	3.17	1.4
8	8.64	4.04
10	23.58	11.39

ATPe_{NL} is shown as ATP_{NL} values (μM), taken from Fig 1 C, or relative (%) to the experimentally determined intracellular ATP content (ATPe_{intra}). In the experimental conditions, intracellular ATP of RBCs amounts to 2.05 mM (32).

The mechanisms mediating this flux were studied. RBCs were exposed to HlyA protein analogs differing slightly in structure with HlyA. In addition, the effects of HlyA on ATP loaded liposomes were tested. Finally, RBCs were pre-incubated with carbenoxolone (CBX), a well-known pnx1 inhibitor, prior to HlyA challenge.

3.6 HlyA and protein analogs

To gain insight into structure-function relationships, RBCs were exposed to ProHlyA and HlyAΔ914-936. ProHlyA is the un-acylated precursor of HlyA, known to be hemolytically inactive (49,50), while HlyAΔ914-936 is a HlyA deletion protein lacking a short segment (residues 914–936) known to bind glycoporphins on the surface of RBCs membranes (26).

To assess ATP release, RBCs were exposed to these toxin analogs for 5 or 10 min at a concentration ten times that used for HlyA. Results showed a small, but non-significant [ATPe] increase with either compounds (Fig. 2 A). Nevertheless, HlyAΔ914-936 and ProHlyA were functional, in that they induced crenation of RBCs (see section 3.10). Moreover, although HlyA acutely increased Ca²⁺_i (a signal of eryptosis), HlyAΔ914-936 and ProHlyA were unable to induce increases of Ca²⁺_i content (see section 3.10). Thus both fatty acids covalently bound to the toxin, converting ProHlyA into HlyA, and the protein segment responsible for glycoporphins binding on RBCs membrane are important structural components of HlyA enabling ATP release.

Fig. 2. ATPe and hemolysis from RBCs exposed to HlyA and protein analogs and ATP release from ATP-loaded liposomes.

(A) Effects of HlyA and protein analogs on [ATPe] and hemolysis of RBCs. RBCs suspensions (10 % hematocrit) were exposed to HlyA, ProHlyA or HlyAΔ914-936 at 37 °C. At 5 and 10 min samples were taken to quantify [ATPe] (grey bars, left axis) and hemolysis (white bars, right axis). Controls were assessed using RBCs suspensions treated with vehicle. Results are expressed as μM ATPe and as percentage of hemolyzed RBCs (% Hemolysis) with respect to the total number of RBCs. Results are mean values ± S.E.M. (N=8, n=16) (*, significant vs. Control; &, significant vs mutants; ns, non-significant between each other and Control). **(B) ATP release of ATP-loaded liposomes exposed to HlyA.** [ATPe]

increments as a function of liposome number for different HlyA concentrations. Liposomes (1.7×10^{10} , 1.7×10^{11} and 2.5×10^{11}) were exposed to 11 ng/ μ L (white bars) and 22 ng/ μ L (grey bars) of HlyA and ATP release was measured by *on-line* luminometry. Results are expressed as μ M ATPe and are mean values \pm S.E.M. ($N=2$, $n=4$) of [ATPe] at 20 min post stimulus. Results were obtained from similar ATPe kinetics curves shown in Suppl. Fig. 2 B. **(C) Effects of carbenoxolone on HlyA-induced ATP release and hemolysis.** RBCs suspensions (10 % hematocrit) were pre-incubated for 10 min with or without 100 μ M carbenoxolone (CBX), followed by HlyA addition. At 5 and 10 min samples were taken to quantify [ATPe] (grey bars, left axis) and hemolysis (white bars, right axis). Controls were assessed using RBCs suspensions treated with vehicle. Results are expressed in μ M ATPe and as percentage of hemolyzed RBCs (% Hemolysis). Results are mean values \pm S.E.M. ($N=4$, $n=8$) (*, significant vs. Control; &, significant vs. CBX treatment).

Numbers of determinations (n) from independent preparations (N) are indicated. HlyA concentration was adjusted as in Fig. 1. Concentrations of ProHlyA or HlyA Δ 914-936 were 10 times the concentration used for HlyA. $P < 0.05$ was considered significantly different.

3.7 Liposomes

It was previously argued that HlyA *per se* was able to oligomerize and form a pore capable of releasing ATP, so that no endogenous ATP conduit would be needed to explain non-lytic ATP release from RBCs (10).

Based on this hypothesis, we decided to test HlyA dependent ATP release by *on-line* luminometry on liposomes made of PC:SM:Cho (2:1:1), a lipid composition similar to that of the external monolayer of RBCs (51). Liposomes were loaded with 50 mM ATP. To compare results with those using RBCs, extravesicular ATP was denoted as ATPe.

In the absence of HlyA, basal ATPe remained constant at 0.47 μ M, showing no ATP leak. Addition of 300 μ g/mL digitonin to disrupt liposomes, on the other hand, led to a strong increase of [ATPe] (Suppl. Fig. 2 A).

Exposure to HlyA induced an acute, 1.3-fold increase of [ATPe] (Suppl. Fig. 2 B). ATPe release correlated directly –but non-linearly– with liposome number and HlyA concentration (Fig.2 B). However, to make ATPe detectable relatively high HlyA concentrations (2-5-fold higher than that used with RBCs) and a high intravesicular [ATP] (24-fold higher than intracellular [ATP] of RBCs) had to be used. To compare HlyA induced ATP efflux in liposomes vs RBCs, maximal values of [ATPe] increase (at 10 min post-stimulus for RBCs, Fig. 1 A and at 20 min post-stimulus for liposomes, Fig.2 B) were normalized per surface area. Results showed that normalized efflux (μ M/ μ m²) amounted to 8.50×10^{-10} (RBCs) and 9.55×10^{-11} (liposomes). I.e., RBCs exhibited a 9-fold higher ATP release, even when –as mentioned above– liposomes contained a much higher intracellular ATP concentration and were exposed to a higher HlyA concentration.

3.8 Effect of carbenoxolone (CBX)

The small increase of [ATPe] induced by exposing liposomes to HlyA suggest that the toxin *per se* is not mediating most of ATP efflux of RBCs. Thus, we investigated whether HlyA induced ATP release of RBCs can be inhibited by CBX, an inhibitor of the ATP conduit pnx1. Accordingly, RBCs were pre-incubated with 100 μ M CBX and [ATPe] was determined at 5 and 10 min post-stimulus. Results showed that CBX + HlyA reduced 43-67 % of [ATPe] increase and 43-61 % of hemolysis (Fig. 2 C) induced by HlyA alone.

By using the mathematical algorithm (see Modeling ATPe kinetics above and Suppl. File), the influence of CBX on both the lytic and non-lytic fluxes on ATPe kinetics could be calculated, showing that CBX inhibited both fluxes (Suppl. Fig. 3).

3.9 Interaction between cell volume and [ATPe]

Our previous accounts have shown that [ATPe] and V_t can be mutually regulated in RBCs exposed to amphipathic peptides (33,52). Thus, a series of experiments were conducted to study the relationship between these two variables in HlyA-RBCs.

Results of Fig. 3 A showed the kinetics of V_t challenged by HlyA. V_t was measured by the Coulter Counter principle. Cells very slightly shrunk during the first min post stimulus, followed by continuous swelling up to 40 % of initial control values.

Fig. 3. Effect of HlyA on RBCs volume (V_t). ATPase activity of Apyrase

(A) Time course of V_t of HlyA-exposed RBCs. RBCs suspensions (40 % hematocrit) were pre-incubated for 10 min with or without 10 U/mL of apyrase (Apy) prior to HlyA exposure. Inset: Data from main graph during the first 2.5 min post stimulus. Results are mean values \pm S.E.M. ($N=1$, $n=3$). **(B) Volume of HlyA-exposed RBCs.** RBCs suspensions (10 % hematocrit) were pre-incubated at 37 °C for 10 min with or without 10 U/mL Apy, followed by HlyA exposure for 5 and 10 min. Control values refer to RBCs exposed to vehicle. Results are mean values \pm S.E.M. (Control, $N=13$, $n=20$; HlyA, $N=9$, $n=15$; HlyA-Apy, $N=5$, $n=8$). **(C-D) Kinetics of ATP hydrolysis by Apyrase.** The rate of ATP hydrolysis by apyrase (5-20 U/mL) was determined by following the decay of [ATP] 3 μ M **(C)** and 30 μ M **(D)** by *on-line* luminometry. Results are mean values ($N=1$, $n=2$). The continuous lines represent fittings of exponential functions to experimental data.

Numbers of determinations (n) from independent preparations (N) are indicated. HlyA concentration was adjusted as in Fig. 1.

Shape dynamics assessed by optical microscopy showed morphological transitions from birefringent discocyte (i.e., normal shape of control RBCs) to echinocyte (spiculated shape) to spherocyte (nearly spherical) (see section 3.10).

Pre-incubation with excess apyrase (10 U/ml), a well-known ATPe scavenger (53), did not change V_t kinetics (Fig. 3 A), thus suggesting that ATPe was not affecting V_t . This was unexpected since we observed before that ATPe can activate RBCs swelling (33). We then focused on the late swelling phase of the response to HlyA, analyzing average values of V_t taken from volume distribution profiles (V_t histograms, see Suppl. Fig. 4 A).

As expected from V_t kinetics (Fig. 3 A), HlyA induced a 46 % and 60 % V_t increase after 5 and 10 min of toxin exposure, respectively (Fig. 3 B), while in ProHlyA treated RBCs (Pro-RBCs) and non-treated RBCs (c-RBCs) no swelling could be detected (Suppl. Fig. 4 B).

As previously observed, pre-incubation with apyrase did not alter swelling of HlyA-RBCs (Fig. 3 B). Thus, either [ATPe] had no effect on V_t increase, or apyrase was not efficiently removing ATPe under the experimental conditions. We thus used *on-line* luminometry to assess the capacity of apyrase to consume exogenous ATP in the absence of RBCs. Using 0.03-30 μ M ATP (covering the range of endogenous [ATPe] observed in Fig. 1), apyrase dose-dependently (5-80 U/mL) decreased [ATPe], with $t_{1/2}$ ranging from 0.01-0.31 min (Fig. 3 C-D and Suppl. Fig. 5). Results implied that ATPe removal by the enzyme was not instantaneous, so that substantial ATPe can still be present when using apyrase in RBCs suspensions treated with HlyA. Thus, as an alternative to removing ATPe, we blocked the effect of the nucleotide on specific purinergic receptors. In particular, we hypothesize that changes in V_t could be controlled by P2X receptor activation by ATPe. In RBCs functional P2X2 and P2X7 subtypes were reported (54,55).

Accordingly, cells were incubated with 600 nM A438079 and 200 nM A740003 (two P2X7 blockers) or 10 μ M NF110 (a blocker of P2X1-3) before toxin addition. Results showed the three treatments led to a 52 % (5 min post stimulus)-73 % (10 min post stimulus) reduction of

[ATPe] (Fig. 4 A and B, respectively), and a 53 % (5 min post stimulus)-66 % (10 min post stimulus) reduction of hemolysis (Fig. 4 C and D, respectively) when compared with the effects of the toxin alone.

Fig. 4. Effect of P2X receptors on [ATPe], cell volume and hemolysis of HlyA-exposed RBCs

RBCs suspensions (10 % hematocrit) were used to measure [ATPe] (grey bars) and hemolysis (white bars) at 5 min (A) and 10 min post stimulus (B). Cell volume (Vt) was measured in separate samples (C). Before HlyA addition (for 5 or 10 min), RBCs suspensions were pre-incubated for 10 min in the absence (controls) or presence of the following P2X antagonists: 200 nM A740003 (P2X7), 600 nM 438079 (P2X7), 10 μ M NF110 (P2X1-2). For hemolysis experiments at 5min HlyA exposure, additional treatments were used, i.e, RBCs were pre-incubated with [10 μ M NF110 + 200 nM A740003] or [100 μ M CBX + 10 μ M NF110 + 200 nM A740003].

A-B: Results are mean values \pm S.E.M. ($N=4$, $n=8$). (*, significant vs. Control; &, significant vs. inhibitors).

C: Results are mean values \pm S.E.M. (Control, $N=13$, $n=20$; HlyA, $N=9$, $n=15$; Inhibitors, $N=5$, $n=8$). (*, significant vs. Control; &, significant vs. HlyA). Numbers of determinations (n) from independent preparations (N) are indicated. HlyA concentration was adjusted as in Fig. 1. $P < 0.05$ was considered significantly different.

Co-incubation with 10 μ M NF110 + 200 nM A740003 or 100 μ M CBX + 10 μ M NF110 + 200 nM A740003 did not reduce hemolysis beyond reductions obtained with the inhibitors applied separately (Fig. 4 C).

Since inhibition of HlyA dependent [ATPe] increase was similar for A438079 and A740003, and was already observed after 5 min, we tested the effects of A438079 and NF110 on Vt following 5 min exposure to the toxin. It can be seen that NF110 significantly reduced 80 % of the swelling response caused by HlyA, while A438079 produced a similar reduction trend, although results were not significant (Fig. 4 E).

As a final test for the reciprocal regulation of swelling on ATP release, RBCs were exposed to HlyA dissolved in a slight hyperosmotic medium (Hyper-HlyA). During toxin exposure, final medium osmolarity was 10 % over isosmotic values (i.e., 330 mOsm). As observed in Fig. 5 A, swelling was reduced by 70-96 % in Hyper-HlyA, as compared to HlyA under isosmotic conditions. Hyper-HlyA also decreased ATPe release and hemolysis of RBCs (Fig 5 B-C).

Fig. 5. Effect of hyperosmolarity on cell volume, ATPe and hemolysis of HlyA-exposed RBCs

RBCs suspensions (10 % hematocrit) were used to measure [ATPe] (grey bars) and hemolysis (white bars) (A). Cell volume (Vt) was measured in separate samples (B). Cells were exposed to HlyA dissolved in isosmotic medium (300 mOsm) or hyperosmotic medium (330 mOsm) at 37 $^{\circ}$ C, for 5 and 10 min. Control experiments were run in isosmotic medium in the absence of HlyA. Results are mean values \pm S.E.M. (A: $N=4$, $n=8$; B: Control, $N=13$, $n=20$; HlyA, $N=9$, $n=15$; Hyper, $N=4$, $n=5$) (*, significant vs. Control; &, significant vs. hyperosmotic treatment).

Numbers of determinations (n) from independent preparations (N) are indicated. HlyA concentration was adjusted as in Fig. 1. $P < 0.05$ was considered significantly different.

3.10 Calcium content, cell shape, PS exposure and membrane potential

To explain mechanisms allowing the observed changes in Vt, ATPe and hemolysis, additional parameters were monitored.

Shrinking was postulated to be triggered by calcium increase, and this should correlate with crenation and PS exposure. The biphasic Vt response, on the other hand, could be due to changes in the net flux of osmolyte ions, in which case changes in the membrane potential (Vm) of the RBCs would be expected.

Accordingly, under HlyA, our results showed an acute increase of Ca^{2+}_i concentration (1.3-2.2-fold; Fig. 6 A-C), which could not be blocked by NF110 or A74003 (Fig. 6 B), increased crenation followed by swelling (Fig. 7 B-C), and irreversible PS externalization (Fig. 6 D and Table 2), which are typical features of eryptosis (56).

Fig. 6. Effects of HlyA and protein analogs on calcium content and phosphatidylserine (PS) externalization.

(A-B) Cytosolic Calcium Content. RBCs suspensions (0.3 % hematocrit) were loaded with Fluo4-AM and exposed to ProHlyA or HlyA **(A)**; additionally, before HlyA exposure RBCs suspensions were pre-incubated for 10 min with the following P2X antagonists: 200 nM A740003 (P2X7), 10 μ M NF110 (P2X1-2) or 10 μ M NF110 + 200 nM A740003. **(B)**. Calcium content was measured after exposure to HlyA or ProHlyA. Ionomycin was used as positive control. Controls were assessed with vehicle. **(C) Kinetics of calcium content of HlyA-RBCs.** RBCs suspensions (0.3 %) were loaded with Fluo4-AM and exposed to HlyA. Time changes in fluorescence intensity were recorded every 5 s for 10 min. Results are mean values \pm S.E.M. (**A-B:** Control, $N=8$, $n=20$; ProHlyA, $N=8$, $n=13$; HlyA Δ 914-936, $N=8$, $n=13$; HlyA, $N=8$, $n=46$. **C:** $N=3$, $n=12$; NF110, $N=4$, $n=8$; A740003, $N=4$, $n=8$; NF110+A740003, $N=4$, $n=8$) (*, significant vs. Control; &, significant vs. ProHlyA and HlyA Δ 914-936). **(D) Phosphatidylserine (PS) exposure as function of time for HlyA-treated RBCs.** RBCs suspensions (10 % hematocrit) were incubated at 37 °C and exposed to HlyA for 2-10 min. PS exposure was expressed as percentage of positive control and are means values \pm S.E.M. ($N=4$, $n=5$). Control values refer to RBCs exposed to vehicle. Numbers of determinations (n) from independent preparations (N) are indicated. $P < 0.05$ was considered significantly different.

Table 2. Values of phosphatidylserine exposure after different treatments.

Control	ProHlyA	HlyA	A23175
0.56 \pm 0.09	0.61 \pm 0.05	28.04 \pm 0.95	93.60 \pm 1.77

RBCs were treated with ProHlyA, HlyA or ionophore A23187 (positive control). Results were obtained after incubation RBCs for 10 min under the different conditions. Results are expressed as percentage of positive controls and are means values \pm S.E.M. ($N=4$, $n=5$). Numbers of determinations (n) from independent preparations (N) are indicated.

Moreover, the membrane potential (V_m) showed an acute hyperpolarization followed by depolarization (Fig. 8 A-B and Table 3), with roughly similar kinetics to that observed for V_t (Fig. 3 and correlation plot of Fig. 8 C).

Fig. 7. Effects of HlyA and protein analogs on RBCs morphology

(A-D) Live cell imaging. Light microscopy images of RBCs suspensions exposed to vehicle **(A)**, HlyA (0.011 and 0.132 ng/ μ L; **B-C**), ProHlyA (1.32 ng/ μ L; **D**) or HlyA Δ 914-936 (1.32 ng/ μ L; **E**) at 20 °C. **(F-H) SEM micrographs.** RBCs were treated with vehicle **(F)**, HlyA **(G)** or ProHlyA **(H)** for 30 min at 20 °C. Samples were fixed in 2.5% glutaraldehyde and coated with graphite. Images were acquired with a Secondary Electron Detector at 30 kV and high vacuum. **(F (a))** scale = 20 μ m, **(b)** scale = 5 μ m; **G (a-b)** scale = 5 μ m, different field; **H (a)** scale = 10 μ m, **(b)** scale = 2 μ m).

When RBCs were exposed to ProHlyA or the deletion protein HlyA Δ 914-936, only crenation was observed (Fig. 7 D-E) with no changes in Ca^{2+}_i concentration (Fig. 6 B). Moreover, ProHlyA produced no PS externalization (Fig. 6 D and Table 2), although changes in morphology could be verified at higher spatial resolution using SEM. That is, exposure of RBCs to ProHlyA induced the formation of echinocytes (Fig. 7 H), with no hemolysis. On the other hand, HlyA treated RBCs exhibited different morphological changes, where echinocytes and spherocytes could be observed, together with hemolyzed cells (Fig. 7 G).

Fig. 8. Membrane potential (V_m) of HlyA-exposed RBCs

RBCs suspensions were loaded at 37 °C with DiBaC₄(3) and the effects of HlyA on V_m were tested. Results are expressed as fluorescence relative to basal values (untreated RBCs): F_t/F_0 . **(A) Kinetics of V_m RBCs exposed to HlyA.** From 0-5 min, relative basal V_m time course was measured. At 5 min RBCs were exposed to HlyA ($N=3$, $n=5$), and V_m was recorded. The arrow indicates addition of HlyA. **(B) Relative Fluorescence Intensity of DiBaC₄(3) as function of K^+ concentration ($[K^+]$).** DiBaC₄(3) loaded RBCs were exposed to isosmolar solutions with increased $[K^+]$ in the presence of valinomycin. **(C) Correlation between V_t and V_m .** Data from A was plotted as V_m against values of V_t from Fig. 3 A at different times of HlyA exposure. Numbers of determinations (n) from independent preparations (N) are indicated.

Table 3. Values of K^+ concentration used in Fig 8 B

$[K^+]$ (mM)
150
137
90
60
30
20
12
1.5

3.11 Adhesion

HlyA-induced PS externalization, as observed in Fig. 6 D, can lead *in vivo* to adhesion of RBCs to vascular endothelial cells (VECs). Thus we tested whether HlyA was able to induce RBCs adhesion to VECs. RBCs suspensions were perfused under controlled flow in adhesion platforms coated with HMEC cells. Fluid flow was initially low (0.2 dyn/cm²) to allow adhesion, and then increased in 5 min steps to 0.5, 1 and 2 dyn/cm² to induce detachment. Irrespective of the treatment (control, ProHlyA or HlyA), adhesion was higher at low flow (0.2 dyn/cm²), and decreased steadily with flow increments. As seen in Fig. 9 B and Table 4, in HlyA-RBCs adhesion to VECs was strongly increased, as opposed to c- and Pro-RBCs (Fig 9. A and C). However, adhesive forces were weak, as increments in flow induced a high detachment (Fig. 9, panels from left to right).

Fig. 9. Effect of HlyA on RBCs adhesion to endothelial vascular cells

Representative images of RBCs adhesion to HMEC. RBCs suspensions (2 % hematocrit) treated with vehicle (A), HlyA (B) or ProHlyA (C) were perfused under controlled flow through adhesion platforms coated with HMEC cells. Fluid flow was initially low (0.2 dyn/cm²) to allow adhesion, and then increased in 5 min steps to 0.5, 1 and 2 dyn/cm² to induce detachment. Red arrows indicate adhered RBCs.

Table 4. Number of adhered RBCs to HMEC cells

Control	ProHlyA	HlyA
10 ± 3	5 ± 2	1506 ± 740

Control refers to RBCs-treatment with vehicle. Results are mean values ± S.E.M. ($N=2$, $n=3$). Numbers of determinations (n) from independent preparations (N) are indicated.

3.12 ATP release of RBCs in a rat mesentery model

HlyA-RBCs exhibited enhanced ATP release by lytic and non-lytic processes. Here, we wondered whether this response is reproduced in a more *in vivo* environment, i.e., when HlyA-

RBCs are continuously perfused through a rat mesenteric vascular bed. This is a heterologous organ system where the entire vascular pedicle and the small intestine remain intact (57).

Mean mesenteric arterial bed pressure (MABP, estimated as pressure in mmHg) was continuously recorded, and intravascular levels of ATP (ATPiv) and free Hb (to estimate lytic ATP release) were measured at discrete times in perfusate samples that leave the arterial bed through the portal vein.

Suppl. Fig. 6 A showed a picture of the model system where the superior mesenteric artery and the portal vein were cannulated for vascular perfusion. Details on the setup are given in Methods. Krebs Ringer solution at 37 °C was perfused at 1 mL/min. After MABP stability, 10 % RBCs suspensions were perfused at the same rate, and MABP was constantly monitored.

As a control for the functional integrity of the smooth muscle cells and the endothelium of the arterial bed, we observed that 10 μ M noradrenaline strongly increased MABP due to smooth muscle contraction, while with 20 μ M acetylcholine a significant decrease was observed, suggesting a functional endothelium (Suppl. Fig. 6 B); basal values of MABP were obtained when buffer perfusion washed out these compounds.

In separate experiments, the mesentery was perfused with assay media containing ProHlyA or HlyA, in the absence or presence of RBCs, and ATPiv and MABP were measured.

ATPiv was $0.13 \pm 0.08 \mu\text{M}$ with isosmotic medium perfusion, and $0.29 \pm 0.14 \mu\text{M}$ in the presence of RBCs (Fig. 10 A). Perfusion of free HlyA or ProHlyA in the absence of RBCs produced minor changes on ATPiv (0.31 ± 0.11) (Fig. 10 B) while perfusion of ProHlyA plus RBCs further increased ATPiv to $1.19 \pm 0.42 \mu\text{M}$, with hemolysis amounting to $0.57 \pm 0.38 \%$ after 10 min of perfusion (Fig. 10 C). However, when HlyA and RBCs were co-perfused, ATPiv increased from $2.01 \pm 0.47 \mu\text{M}$ at $t=1-2$ min, to $27.28 \pm 7.26 \mu\text{M}$ at $t=9-10$ min, and hemolysis increased from 4 to 33 % (Fig. 10 D). Parallel determinations of ATPiv and Hb allowed us to estimate the relative contribution of lytic and non-lytic mechanisms of RBCs ATP release when RBCs were flowing inside the arterial bed. As seen in Fig. 10 D, the non-lytic component of ATP release was the major component explaining ATPiv.

Fig. 10. ATP release of RBCs in a rat mesenteric vascular bed and its effect on vascular pressure

Vehicle (buffer) or RBCs suspensions (10 % hematocrit) were perfused through a rat mesentery preparation. Mean mesenteric arterial bed pressure (MABP) was recorded and samples of the perfusates were collected at different times (T1-T5) for assessment of ATP. The latter was denoted as intravascular ATP (ATPiv). **(A)** Perfusion of vehicle or control RBCs suspensions (c-RBCs). **(B)** Perfusion of either ProHlyA or HlyA dissolved in buffer, in the absence of RBCs. **(C-D)** Perfusion of RBCs suspension in the presence of either ProHlyA (ProHlyA-RBCs, **C**) or HlyA (HlyA-RBCs, **D**). Samples of the perfusates were collected for assessment of hemoglobin and ATP. Hemoglobin concentration was used to estimate lytic ATP (ATP_L). The difference between [ATPiv] and [ATP_L] was calculated and denoted as non-lytic ATP (ATP_{NL}). A stacked graph was built to show the contribution of lytic and non-lytic ATP release from RBCs to [ATPiv]. **(E) Effect of HlyA-treated RBCs on MABP.** Assessment of MABP, estimated as Force in mmHg was continuously recorded.

A-D: Results are mean values \pm S.E.M. (A, C and D: $N=2$; B: $N=3$). **E:** Results are mean values \pm S.E.M. of the highest values registered for each treatment. ($N=9$, c-RBCs; $N=6$, HlyA-RBCs; $N=3$, HlyA-RBCs) (*, significant vs. c-RBCs and Pro-RBCs).

Numbers of independent preparations (N) are indicated. Concentration of ProHlyA was 10 times the value for HlyA. $P < 0.05$ was considered significantly different.

On the other hand, in RBCs and Pro-RBCs, MABP values were 18.14 ± 3.32 and 17.32 ± 5.22 mmHg respectively, but when RBCs were perfused plus HlyA, the pressure increased 2-fold

(38.3 ± 7.8 mmHg) compared to RBCs alone (Fig. 10 E), suggesting an additional contractile effect induced by HlyA. Thus, we tested in separate experiments the effect of Hb and exogenous ATP to evaluate their separate effects on vessel contraction. Results showed that high Hb ($>10 \mu\text{M}$) can induce vasoconstriction, while exogenous ATP did not significantly affect MABP (Suppl. Fig. 6 C-D).

In experiments using RBCs in the absence and presence of HlyA, tissue samples were taken to evaluate the morphology of RBCs inside the vascular system. Tissue sections were stained with hematoxylin-eosine (58) and observed by light microscopy. In the absence of toxins, RBCs of arteries, capillaries and veins showed a conserved morphology. With HlyA, on the other hand, RBCs showed altered morphology and apparent clumping (Fig. 11).

Fig. 11. Histology of rat mesenteric vascular bed.

Histology of the rat mesentery preparations from Fig. 10. Several samples of the jejunum were taken. The sections were stained with hematoxylin and eosin and the vessels were assessed by light microscopy

(A-B) Rat mesentery perfused with control RBCs (c-RBCs, treated with vehicle). (A) shows an artery (magnified on a) and a vein (magnified on b) containing RBCs. (B) shows a capillary (magnified on c). **(C-H) Rat mesentery perfused with HlyA-exposed RBCs (HlyA-RBCs).** Pictures show an artery (C), veins (D-E) and capillaries (F-H) containing RBCs.

The paraffin embedded preparations are representative from several experiments.

3.13 Deformability

Deformability changes of c-, Pro-, HlyA Δ 914-936- and HlyA-RBCs were analyzed by ektacytometry, which quantifies the magnitude of cell elongation as a function of applied osmolality (80-690 mosm/kg), or as a function of shear stress (0.2-30 Pa).

When the elongation index (EI) was measured at gradually changing osmolality but constant shear stress, it produced characteristic osmoscan curves shown in Fig. 12 A.

Fig. 12. Effect of HlyA and protein analogs on RBCs deformability.

(A) Deformability vs osmolality. Deformability (elongation index, EI) of RBCs as a function of applied osmolality (80-690 mOsm/Kg) at constant shear stress (30 Pa). Before measurements, RBCs suspensions (40% hematocrit) were exposed to HlyA, ProHlyA, HlyA Δ 914-936 or vehicle (Control), for 2.5 min or 3.5 min. **(B) Deformability vs shear stress.** EI values of RBCs as function of shear stress (0.2-30 Pa), at constant iso-osmolality. Prior to measurements, RBCs suspensions (44% hematocrit) were exposed for 5 min to ProHlyA ($N=4$), HlyA ($N=8$), HlyA Δ 914-936 ($N=1$) or vehicle (Control, $N=9$). Upper and lower panels show reconstructed-images of the shape of Control and HlyA-treated RBCs, respectively, at different values of shear stress. Results are mean values \pm S.E.M. Numbers of independent preparations (N) are indicated. HlyA, ProHlyA and HlyA Δ 914-936 concentrations were adjusted as indicated before.

The maximum point of the curves (EI max) represents the osmolality at which cells have the highest deformability. EI can decrease on both arms of the curve by either a reduction in surface area-to-volume ratio (S/V) or an increase in intracellular viscosity (59).

As expected, for c-RBCs the curve exhibited a maximum near 320 mOsm, suggesting that they deformed optimally in isosmolar conditions. Pro-RBCs and HlyA Δ 914-936-RBCs showed a similar response. In HlyA-RBCs the toxin time-dependently shifted the curve to the right. This is indicative of HlyA-RBCs increasing V_t and sphericity and reducing the cellular viscosity determined by the intracellular hemoglobin concentration. Thus a higher osmolality (O hyper) was required to achieve a similar deformability to that observed with c- and Pro-RBCs (Suppl. Fig. 7).

In a second series of experiments, EI was tested as a function of shear stress in isosmotic conditions. C-RBCs, Pro-RBCs and HlyA Δ 914-936-RBCs showed a non-linear increase of EI as a function of shear stress. This is compatible with RBCs extending their long axis with the flow, as the shape changes from an oblate-like spheroid to a prolate-like ellipsoid (Fig. 12 B). HlyA-RBCs, on the other hand, had a relatively low EI at all levels of applied shear stresses, probably reflecting that cells were not prone to form ellipsoids, as simulated images illustrate (insets of Fig. 12 B).

3.14 Aggregability

In typical syllectograms, a refraction index (Isc) depends on the interaction forces between two adjacent RBCs, which in turn vary with viscosity, cell shape and membrane damage. Experiments were run in the presence of dextran (400 kDa), which mimics viscous effect of plasma proteins. Aggregates are dispersed with increasing shear forces, and reform under low shear force conditions. In c- and Pro-RBCs, roughly similar syllectograms were obtained; an increase in Isc (upstroke) was observed when, after the rotor stopped, RBCs were assumed to retake their normal shape and orient randomly. This was followed by a decrease in Isc values when cells aggregated (Fig. 13 A). Pro-RBCs usually adopt an echinocyte-like shape (Fig. 7 D), which may induce higher interaction forces between pairs of cells, thereby explaining the higher Isc values at $t=0$.

Fig. 13. Effect of HlyA on aggregability of RBCs

(A) Syllectograms. Refraction index (Isc) vs time. Before measurements, RBCs suspensions (40 % hematocrit) were exposed to HlyA, ProHlyA or vehicle (Control) for 5 min, an aggregability was measured in the presence of 3 % dextran 400 (400 kDa) by light scatter. Results are mean values \pm S.E.M. ($N=7$). **(B-D) Micrographies by optical microscopy** of RBCs treated with vehicle **(B)**, ProHlyA **(C)** and HlyA **(D)**, in the presence of 3 % dextran 400. Numbers of independent preparations (N) are indicated.

In contrast, the HlyA-RBCs curve was flat. In line with osmoscans showing higher O hyper values (Suppl. Fig. 7) and the observed swelling (Fig. 3), HlyA-RBCs are assumed to be more spherical, thus decreasing contact area between adjacent cells and refracting the laser in a lesser extent, thereby yielding the observed small Isc values. HlyA-RBCs were not able to recover their normal shape, nor could they aggregate.

To account for morphological changes, similarly treated RBCs suspensions containing dextran 400 were observed by light microscopy at 40X magnification (Fig. 13 B-D), showing typically stacked RBC from c-RBC (Fig. 13 B); echinocyte-like shape from Pro-RBCs (Fig. 13 C), and spherocyte-like shape from HlyA-RBCs (Fig. 13 D).

4. Discussion

HlyA of uropathogenic strains of *E. coli* is known to interact with RBCs in the intravascular milieu, triggering ATP release and metabolic changes leading to hemolysis (19,60). In this context, the main goal of this study was to identify the key factors controlling ATPe kinetics of RBCs exposed to HlyA, and to explore how these changes influence the behavior of RBCs exposed to different environments mimicking several features found *in vivo*. Accordingly, we first assessed ATPe hydrolysis and intracellular ATP release, and its modulation by purinergic receptors and Vt, and then analyzed how HlyA affects metabolic and rheological properties of RBCs suspensions, the adhesion of RBCs to endothelial platforms, and ATP release of RBCs perfused through a heterologous mesentery.

4.1 ATPe regulation

Exposure of RBCs to low concentrations of HlyA led to acute ATP release and hemolysis. In addition, ATPe was hydrolyzed by intracellular ATPases of lysed RBCs and ectoATPase activity of RBCs. By fitting a data driven model to experimental data of ATPe kinetics, lytic ATP release, ectoATPase activity and intracellular ATPase activity, we were able to calculate the non-lytic component of ATP release, and quantify the relative contribution of each of these processes to ATPe kinetics.

This analysis showed that ATPe kinetics of HlyA-RBCs was mainly governed by simultaneous lytic and non-lytic ATP release. Enzymatic ATPe hydrolysis was relative low at acute exposures times. This is consistent with low hemolysis and therefore low ATPe hydrolysis by intracellular ATPases, together with relatively low ectoATPase activity, which is a feature of mature RBCs from mammalian species, including humans (32,42,61). There may be more than one ENTPDase accounting for ectoATPase activity (62,63), whereas no ectophosphatase activity was detected in RBCs (64).

Despite low ATPe hydrolysis, since under HlyA exposure [ATPe] increases continuously and ectoATPase and intracellular ATPase activities are linearly dependent on [ATPe], their contribution to ATPe kinetics is higher at high incubation times, causing reductions of up to 22 % at the end of the experiments.

The contribution to ATPe hydrolysis by ectoATPase activity could be even higher since, as we showed before (42) ATP at the cell surface, where the active sites of ectonucleotidases are located, is 2.4 higher than bulk ATPe measured in RBCs assay medium.

In addition to direct [ATPe] decrease by enzymatic hydrolysis, we and others have shown that the resulting ADPe can activate P2Y13 receptors mediating a decrease of cAMP content, coupled to reduced ATP release (29,33). Although, as show in this study, ATPe to ADPe conversion might be very low in RBCs, while ectoADPase activity is relatively high (64), *in vivo* intravascular ATP hydrolysis by plasma exoenzymes, ectonucleotidases of other blood cell types or the vascular wall might provide sufficient ADPe to promote inactivation of ATP release of RBCs (65).

4.2 Non-lytic ATP release

To characterize non-lytic ATP efflux (J_{NL}), we first compared the effects of HlyA and ProHlyA, the un-acylated precursor of HlyA. In rabbit RBCs ProHlyA is able to insert into cell membranes (50). However, acylation at internal lysines K563 and K689 –turning ProHlyA into HlyA- was

necessary for the toxin to become hemolytic (66). The observed absence of ATP release with ProHlyA in this study suggests that acylation is also important to trigger non-lytic ATP exit from RBCs. Although the role of toxin acylation remains unclear, studies on the effects of chemical denaturants, ANS binding and sensitivity to proteases suggest that HlyA –unlike ProHlyA– may expose intrinsically disordered regions mediating intracellular signaling leading to hemolysis (50,66). This is in line with our results showing that HlyA, but not ProHlyA, was able to irreversibly externalize PS and increase cytosolic Ca^{2+} of RBCs, two events coupled to eryptosis (67). Alternatively, FRET experiments using label toxins showed that HlyA, but not ProHlyA, was able to oligomerize on ghost erythrocytes membranes suggesting that these disordered regions might promote protein-protein interactions, controlling the oligomerization of the toxin (68). An oligomer, in turn, should create a 2-3 nm pore capable of mediating ATP efflux from RBCs (69). However, the existence of such a pore has been challenged due to lack of direct evidence by electron microscopy or crystal structure analysis (24,25).

Thus, to test if HlyA induced ATP release by direct interaction with the phospholipid membrane, with no other proteins involved, we exposed HlyA to liposomes loaded with ATP. We used liposomes composed of PC:SM:Cho mimicking the composition of the outer hemilayer of RBCs (51). This lipid mixture presents liquid order domains similar to the membrane microdomains involved in oligomerization and the lytic mechanism of the toxin (68,70). Although HlyA was reported to promote efflux of fluorochromes and even ATP from liposomes (10,71), the magnitude of this flux was not assessed. In our hands, using PC:SM:Cho liposomes, ATP efflux mediated by high HlyA concentrations was measurable, but very low, when compared to similar results using HlyA-RBCs. Thus, even if HlyA can indeed form an oligomeric pore liposomes, our results imply that the toxin is not forming an ATP conduit.

Thus, it seems that HlyA effect on ATP release may require the interaction with endogenous membrane proteins of RBCs. HlyA was found to bind to N-linked oligosaccharides to their β 2-integrin receptors (72), raising the possibility that binding of the toxin to various cells might occur through the recognition of glycosylated membrane components, such as gangliosides and glycoproteins. We then exposed RBCs to HlyA Δ 914-936, a deletion analog protein unable to bind glycophorins, a highly abundant family of membrane proteins of RBCs. A previous study showed that HlyA Δ 914-936 was not hemolytic on RBCs, and that the peptide Trp914–Arg936 had no lytic activity on RBCs, although it could bind to glycophorins in reconstituted liposomes (26).

Again, as with ProHlyA, although HlyA Δ 914-936 induced RBCs crenation in the absence of Ca^{2+} increase, it neither alters [ATP_e] nor hemolysis. In HlyA-RBCs, on the contrary, a steep acute Ca^{2+} increase correlated with a crenatocyte to spherocyte transition, followed by hemolysis. This means that, at least for RBCs, glycophorins seem important for HlyA activity, although other proteins might as well be interacting with the toxin. These results are also in agreement with the need of higher concentration of HlyA to induce detectable ATP release from liposomes.

In looking for endogenous ATP transport systems, we analyzed the role of pnx1, an ubiquitous ATP conduit in cells (18). Particularly, we tested the effect of CBX, a glycyrrhetic acid derivative known to inhibit pnx1 in a wide variety of cell types (73,74). Pnx1 was predicted to form four α -helical transmembrane domains exposing two extracellular loops, with multiple residues in the first extracellular loop mediating CBX dependent pnx1 inhibition (75). In RBCs, CBX sensitive pnx1 acts as a conduit for ATP efflux of RBCs challenged by amphipatic peptides,

swelling, hypoxia and beta adrenergic stimulation (32,42,75,76). However, in HlyA-RBCs the effects of CBX can be more complex since, as we observed in this study, CBX exposure led to a parallel inhibition of [ATPe] and hemolysis of HlyA-RBCs. This is compatible with the model of Fig. 14, since a decrease of J_{NL} (by CBX blockage in this case) can diminish swelling and therefore decrease the extent of hemolysis.

We then simulated the effect of CBX on ATP efflux of viable cells (i.e, J_{NL}). Predictions showed that J_{NL} is composed of two fluxes, a CBX-sensitive (presumably pnx1) and CBX-tolerant flux. CBX reduction of J_{NL} was low in the early phase of toxin exposure ($\approx 20\%$ at 5min), but high at late exposure times ($\approx 80\%$ at 10 min) (Suppl. Fig. 3).

4.3 Interaction between cell volume and [ATPe]

Analyzing changes in V_t induced by HlyA is important for various reasons. First, HlyA activity in RBCs has been associated with changes in V_t (60). Second, hypo- and isosmotic swelling are strong inducers of non-lytic ATP release from RBCs (32,73,77), while excessive swelling can induce hemolysis, thereby activating lytic ATP efflux. Third, we observed before that treating RBCs with an amphipatic peptide induced interacting changes of [ATPe] and V_t (33).

Results of this study showed that following HlyA exposure, RBCs slightly crenate and shrunk during the first min, followed by continuous swelling, which preceded a steep increase in hemolysis.

As volume histograms (Suppl. Fig. 4), volume kinetics (Fig. 3 A) and morphology dynamics (Fig. 7 B-C) show, the accompanying V_t and shape changes of RBCs are heterogeneous, both within a single RBCs sample, and between samples from different individuals. This is because RBCs, with its limited lifespan, represent an heterogeneous population expressing different molecules as they age. In addition, polymorphisms of P2X2-P2X7 receptors from RBCs (78) may contribute to variations in V_t kinetics of RBCs samples from different individuals, particularly in the context of the observed P2X dependent swelling.

The biphasic V_t kinetics was also reported by Skals et al. (60), who showed that Ca^{2+i} increase led to net KCl efflux mediated by $KCa_{3.1}$ and $TMEM16A$ channels, causing the shrinking phase, while subsequent swelling was assumed to be caused by sodium uptake. An early phase dominated by K^+ conductance, followed by a late phase dominated by Na^+ conductance, is compatible with our results showing a hyperpolarization followed by a depolarization of the membrane potential, with roughly similar kinetics to that of V_t .

Since swelling *per se* is known to activate ATP exit of RBCs (32,73), we tested the extent to which HlyA induced ATP release depends on the observed swelling, and the underlying causative relationships linking changes in V_t and [ATPe].

Next, we analyzed the extent to which swelling promotes ATP release. When HlyA was added in a hyperosmotic medium to counteract swelling, ATPe release was highly inhibited. Interestingly, according to osmoscans, hyperosmotic conditions allowed HlyA-RBCs to regain elongation of untreated cells. Thus, swelling mediated most of HlyA triggered ATP release. We then tested whether ATPe could affect swelling. We first found that pre-incubation with excess apyrase, an ATPe remover (30,53), did not alter swelling. However, experiments testing apyrase activity in the absence of cells showed that, even if this enzyme reduced [ATPe] dose-dependently, ATPe was still present in the medium for several minutes. This transient presence of ATPe could be sufficient to trigger purinergic signaling. In particular, ATPe is the only natural ligand of ionotropic P2X receptors, of which RBCs exhibit functional P2X2 and P2X7 subtypes

(54,55) . P2X7 receptors are more abundant than P2X2 on RBCs (54), but exhibit much lower affinity for ATP (79).

Activation of these receptors may lead to the net transport of cations altering intracellular osmolarity and therefore Vt (80). Pre-incubation with antagonists of either P2X7 or P2X1-2, reduced HlyA dependent [ATPe] increase by 52-73 %, and hemolysis by 53-66 %. Thus, as with CBX, these blockers inhibited both the lytic and the non-lytic component of ATP release. Moreover, P2X blockage strongly reduced swelling. Thus P2X receptors are working as a bridge, connecting swelling with activation of ATP release. The fact that P2X antagonists were unable to block Ca^{2+} uptake precludes their participation in the early shrinking phase of the volumetric response.

4.4 Adhesion

Although RBCs do not adhere to vascular endothelial cells under physiological conditions, adherence occurs in many pathologies associated with vascular occlusion (67,81). During UPEC infection, when HlyA is produced and released in the intravascular space, the onset of inflammatory processes may up-regulate various adhesive molecules of endothelial cells (60), while eryptosis induced by HlyA, with concomitant PS externalization (as observed in this study), might turn RBCs more adhesive. This possibility is particularly important in the context of ATPe regulation of RBCs (analyzed in (82)), since we observed before that adhesion of these cells to chemically different adherent molecules positively modulates the activation of ATP release by swelling (32). To mimic this scenario, we perfused HlyA-RBCs at various controlled flows through artificial vessels coated with activated HMEC cells. Adhesion of HlyA-RBCs was very high at low flow. However, adhesive forces were weak, as increments in flow led to almost full detachment from HMEC cells. This means that, under HlyA exposure, PS externalization of RBCs might correlate with their higher adhesion to vascular endothelial cells, particularly in regions of low flow. However weak adhesion should not lead to vascular occlusion.

4.5 Rat mesenteric vascular bed. Monitoring lytic and non-lytic ATP release

Since HlyA can induce ATP exit by lytic and non-lytic mechanisms, can this response be observed in a vascular system? To answer this question, we used a rat mesentery model where the entire mesenteric vascular system and the irrigated small intestine remained intact, and HlyA-RBCs (vs. c- and Pro-RBCs) were perfused at controlled flow. In this heterologous system intravascular pressure can change, and mechanical forces due to peristaltic movements can occur.

When HlyA-RBCs were perfused, significant increases of intravascular ATP (ATPiv) and Hb were observed, while Pro-RBCs induced much lower responses. As observed before when assessing [ATPe] of isolated RBCs suspensions, [ATPiv] increments were due to lytic and non-lytic components of ATP release. Since no damage to the endothelium occurred and HlyA alone did not change [ATPiv], the observed elevated [ATPiv] should derive mostly from intracellular ATP of RBCs.

Higher [ATPiv] increases than observed could be expected *in vivo*, where hematocrits are about 3-fold higher than that used in our experimental setup. Moreover, the accumulated ATPiv can underestimate ATP release by HlyA-RBCs, since in the vascular environment the nucleotide can have various fates. I.e., it can act as a substrate for ecto- and exonucleotidases

and phosphatases of plasma, blood cells and the vascular endothelium (55,62,65), generating various di- and trinucleotides, and adenosine. These compounds may bind purinergic receptors mediating a variety of responses (55,83). In particular, ATPe to ADPe conversion, promoting elevated intravascular ADP, might activate thrombocytes, so that HlyA might potentiate thrombocyte aggregation and pro-coagulation, thereby leading to thrombosis episodes (10). In addition, as our group and others have shown before, *E. coli* can take up and metabolize exogenous ATP (84,85), a process incrementing the energetic status of bacteria. Thus, since intravascular UPEC produce HlyA, some of these processes might be relevant during progression of the infection.

4.6 Deformability and aggregability of HlyA-RBCs

RBCs acutely crenated when challenged by ProHlyA or HlyA. In addition HlyA, unlike ProHlyA, induced increments of cytosolic Ca^{2+} and PS externalization. Moreover, the mutually activating loop coupling increments of [ATPe] and V_t triggered irreversible swelling. All these changes may have altered the rheological properties of HlyA-RBCs, with consequences on blood flow.

We thus monitored changes in deformability when HlyA-RBCs were exposed to shear stress or osmolality gradients. These stimuli are relevant *in vivo*, since RBCs are mobile cells exposed to mechanical forces when passing through small capillaries of the circulation and/or to osmotic gradients, especially in the kidney (86). Additionally we monitored HlyA-RBCs aggregability, since plasma proteins may render RBCs more liable to aggregate, particularly under low flow, causing vascular obstruction.

Osmoscan curves were roughly similar for c- HlyA Δ 914-936- and Pro-RBCs. However, in HlyA-RBCs, a significant right-shift of the osmoscan was observed, suggesting increased sphericity and swelling, and consequently reduced cellular viscosity.

We then tested deformability as a function of shear stress. C-, HlyA Δ 914-936- and Pro-RBCs exhibited large scale deformations, implying that the long axis of the cell extended with increased shear rates. In contrast, HlyA-RBCs displayed low deformability under similar conditions, which agrees well with the increment of ceramide contents in the outer leaflet of RBC membrane treated with the toxin, as previously demonstrated (20). Thus, HlyA-RBCs should be less capable to deform in narrow vessels, and as swollen cells more fragile to hypotonic stress. On the other hand, less deformable cells exposing PS may foster engulfment by phagocytes and potential clearance from the circulation (87).

We then turned our attention to HlyA-RBCs aggregation. The tendency of RBCs to aggregate is an important determinant of blood viscosity. Aggregates are dispersed with increasing shear forces, and reform under low-flow conditions. Thus, *in vivo* aggregation affects the fluidity of blood, especially in the low-shear regions of the circulatory system (88,89).

In syllectograms, c- and Pro-RBCs behaved roughly similar. I.e., basal I_{sc} values were compatible with complete disaggregation at moderate shear rate and upstroke signal was compatible with RBCs recovering their normal shape and orientating randomly. This was followed by a time dependent decrease of I_{sc} , reflecting aggregation. In this and other studies (50) Pro-RBCs were shown to adopt an echinocyte shape, which may induce higher interaction forces between pair of cells and thus explain the higher I_{sc} values at $t=0$.

In contrast, HlyA-RBCs syllectograms were flat, suggesting no changes in shape during upstroke. In line with osmoscans showing low elongation and V_t kinetics and volumetric

histograms showing swelling, HlyA-RBCs are assumed to be more spherical, thus decreasing contact area between adjacent cells, which may explain the observed reduced aggregation.

4.7 Summarizing main findings

Main results are depicted in Fig. 14. HlyA is activated by acylation of ProHlyA (1). The acylated moiety, as well as the glycophorin binding site of HlyA (absent in HlyA Δ 914-936) proved to be important for toxin activity (2). HlyA triggered simultaneous lytic and non-lytic ATP release (3), both using isolated RBCs, or RBCs suspensions flowing through a rat mesentery model, leading to increased [ATPe]. This increase was in part counteracted by ATPe hydrolysis due to ectoATPase activity (4), and to ATPase activity of lysed cells (5). Binding of ATPe to P2X (6) triggered progressive swelling (7), which correlates with higher cell sphericity and lower deformability under osmotic gradients and shear stress, and low aggregability in viscous media. Low swelling activated mainly non-lytic ATP release, while high swelling produced hemolysis, leading to lytic ATP release and increases of MABP under flow. Swelling and hemolysis transduce into further increases of [ATPe], closing the signaling circuit.

Fig 14: Regulation of ATPe in HlyA-exposed RBCs, and its modulation by cell volume and hemolysis

Exposure to HlyA induces ATP release by lytic (J_L) and non-lytic (J_{NL}) mechanisms, causing [ATPe] increase, which is partially counteracted by ATPe hydrolysis due to ectoATPase (J_{EA}) and intracellular ATPase (J_{IA}) activities. ATPe activates P2X receptors coupled to cell swelling (V_t). Swelling below a critical volume V_c ($V_t < V_c$) activates J_{NL} , favoring a higher symmetry (Fig 12) and lower aggregability (Fig. 13) of RBCs. Values of $V_t > V_c$ lead to hemolysis and activation of J_L ; likewise, hemolysis can release intracellular ATPases, thereby activating J_{IA} , which decreases [ATPe]. Finally, in a mesenteric system, hemolysis can increase intravascular pressure (MABP).

The effects described above are absent when RBCs are treated with ProHlyA and HlyA Δ 914-936.

ATPi and ATPe denote intracellular and extracellular ATP, respectively.

Hemolysis provided two processes ameliorating the effects of the loop; dying cells will decrease the amount of cells activating non-lytic ATP release and simultaneously release intracellular ATPases capable of decreasing [ATPe]. According to the scheme cell death, by promoting [ATPe] increase, can signal P2X receptors of surviving cells, modulating the reciprocal regulation of ATPe and V_t .

To the extent that P2X blockers break the signaling loop promoting RBCs hemolysis, they –or improved variants- may offer a protection mechanism against HlyA hemolysis in UPEC infected patients.

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Author contribution

P.J.S. formulated the project.

M.F.L.D., S.D.L., N.L., C.L.A., V.M., M.A.O., V.H., and P.J.S. conceived and designed the experiments.

M.F.L.D., S.D.L., V.H., M.A.O. and P.J.S. gave advice on experimental design and hypothesis.

M.F.L.D., N.L., C.L.A., S.D.L., M.V.E., N.E., D.E.R., L.E.V., V.M., M.A.O., V.H. and P.S. performed the experiments.

M.F.L.D., N.L., C.L.A., S.D.L., V.M., M.A.O., V.H., N.E., D.E.R. and P.J.S. analyzed the data.

R.G.L. designed the mathematical algorithm

M.F.L.D., M.A.O., V.M., V.H. and P.J.S. contributed reagents-materials.-analysis tools.

M.F.L.D. and P.J.S. wrote the manuscript.

All authors reviewed and approved the manuscript.

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Highlights

- α -hemolysin induces ATP release by lytic and non-lytic mechanisms.
- α -hemolysin requires interaction with membrane proteins to induce ATP release.
- α -hemolysin induces reciprocal regulation of cell volume and ATP release, mediated by P2X receptors
- α -hemolysin induces lytic and non-lytic ATP release of erythrocytes perfused through a mesentery.
- α -hemolysin induces shrinkage followed by irreversible swelling and high adhesivity of erythrocytes to endothelial cells.

ACCEPTED MANUSCRIPT

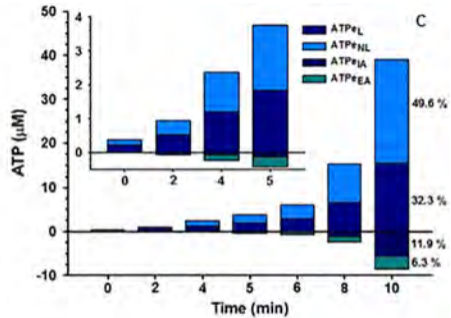
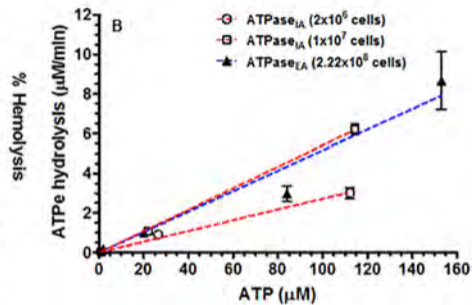
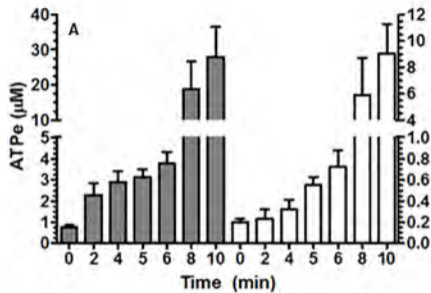


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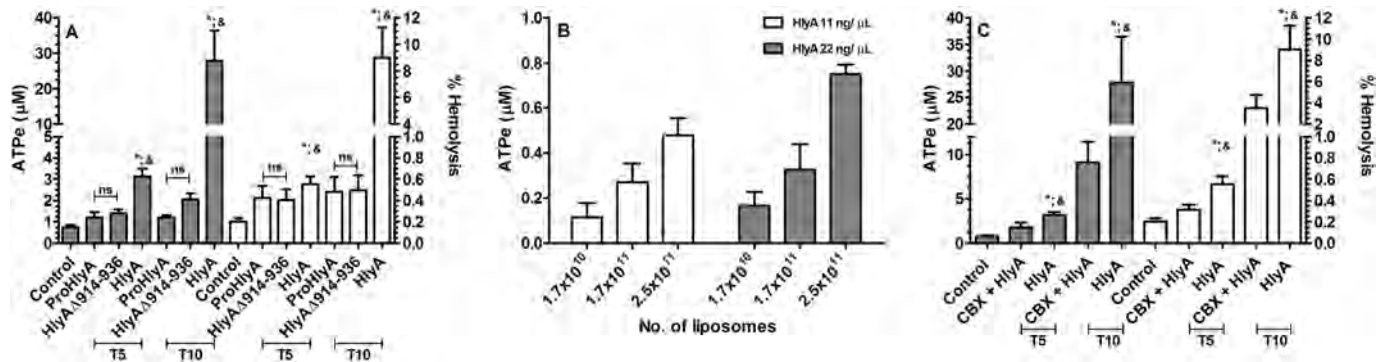


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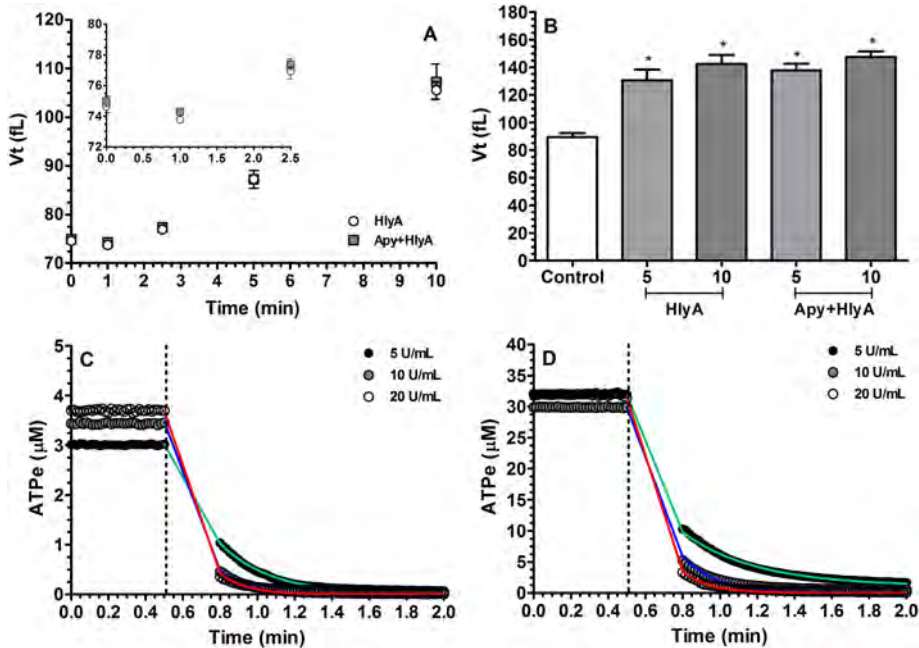


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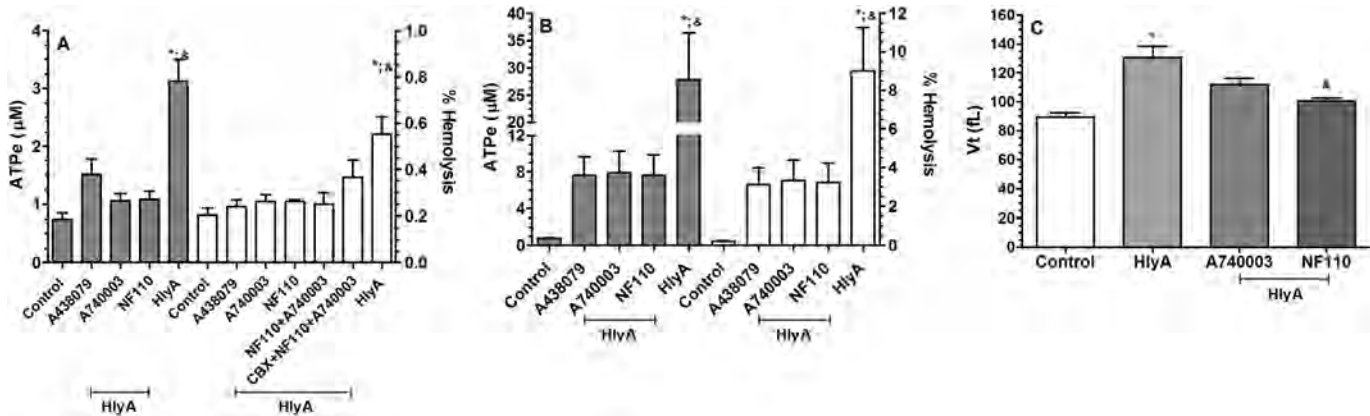


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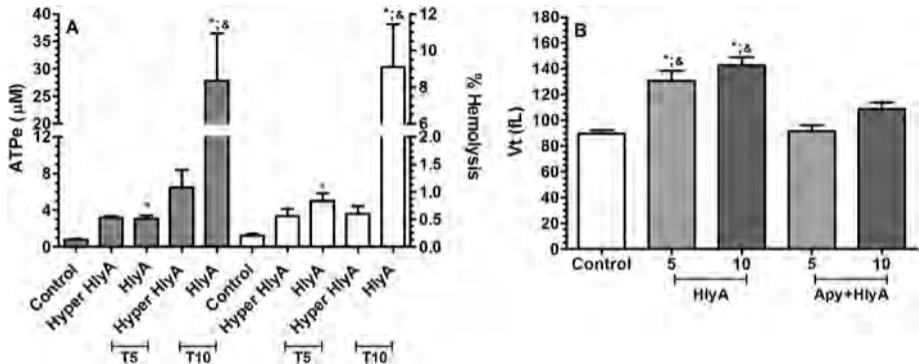


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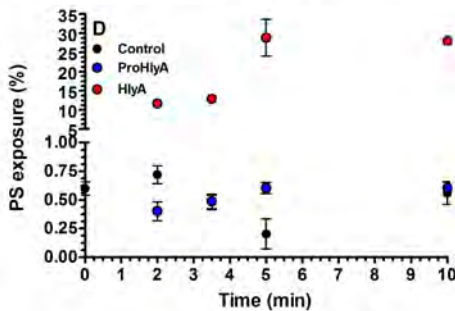
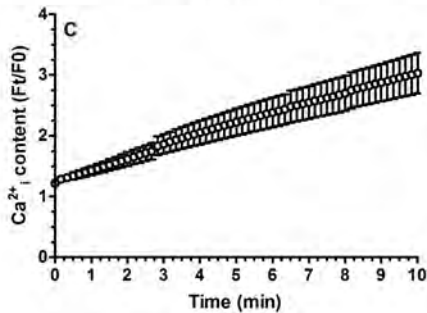
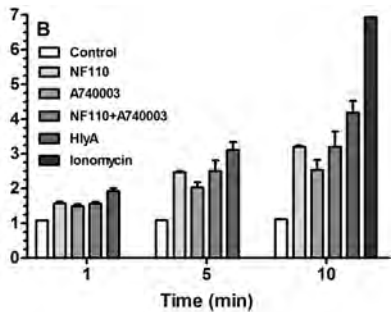
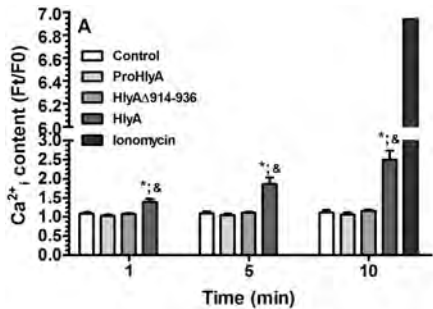


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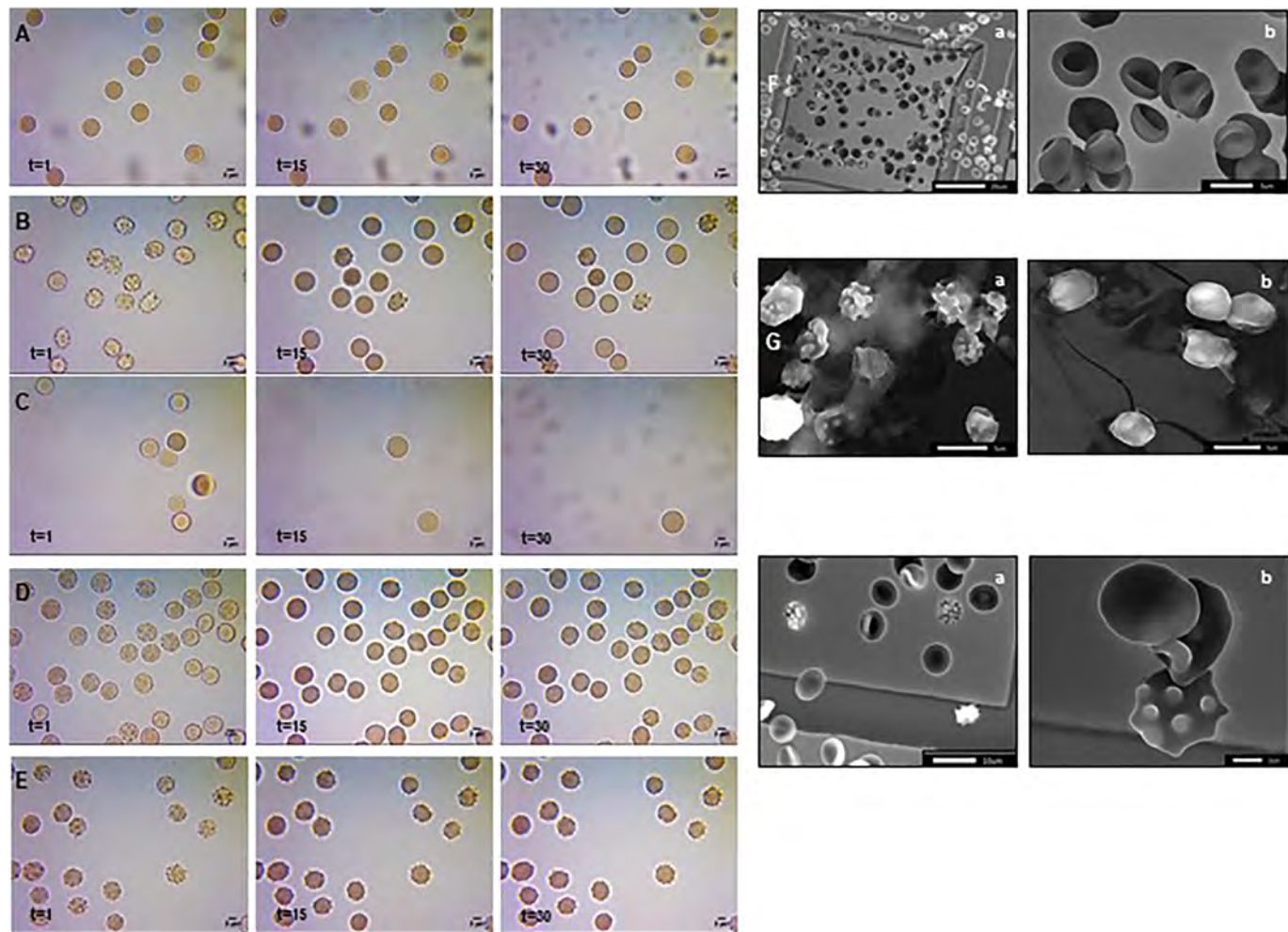


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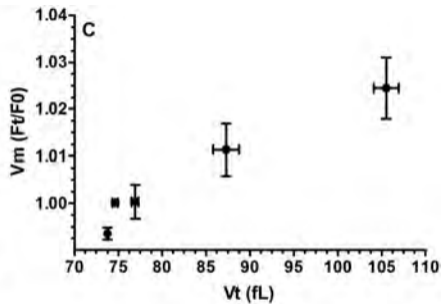
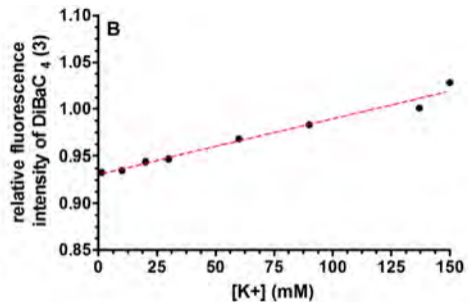
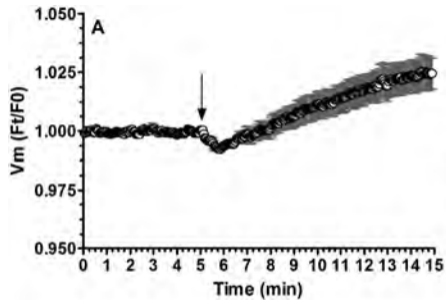


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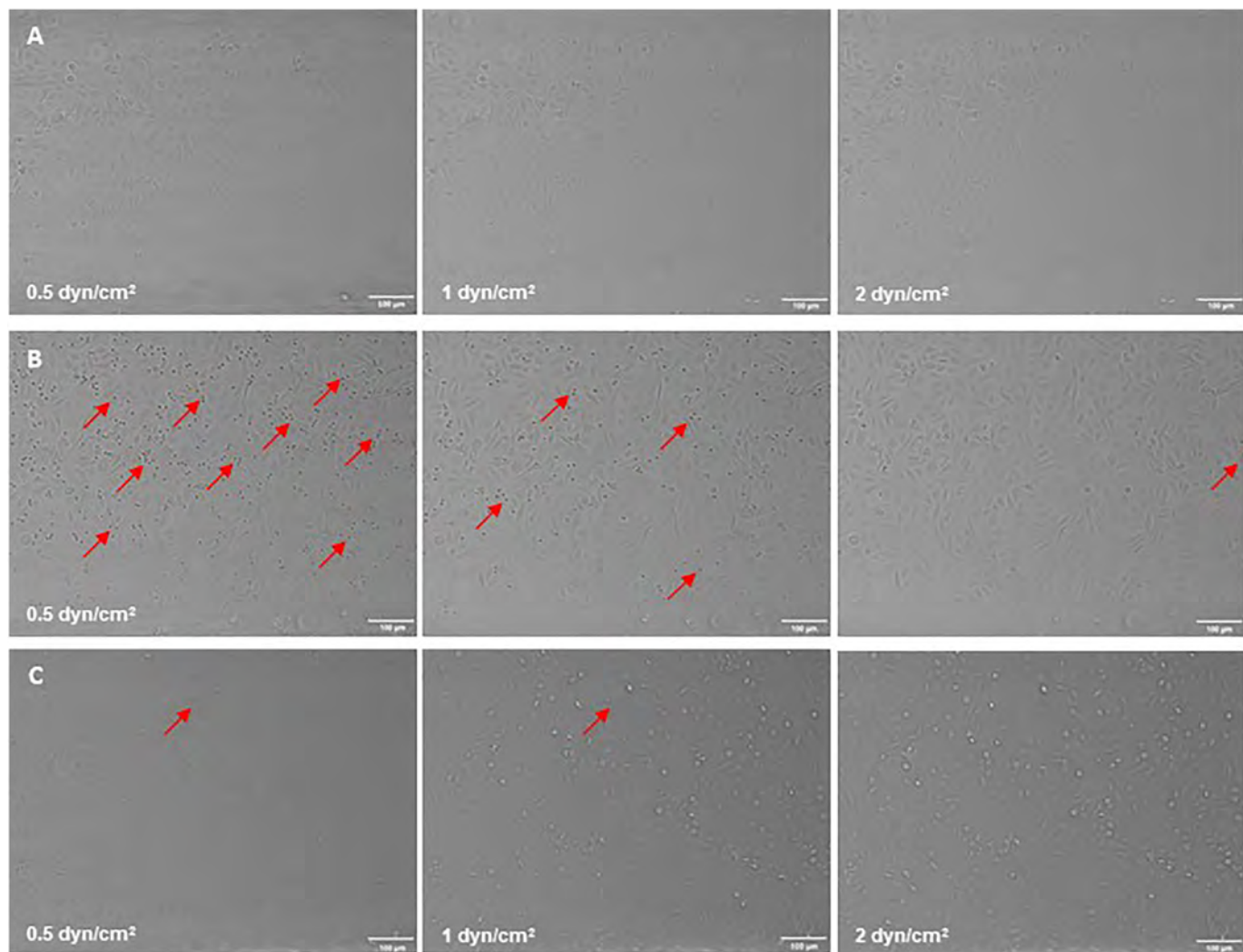


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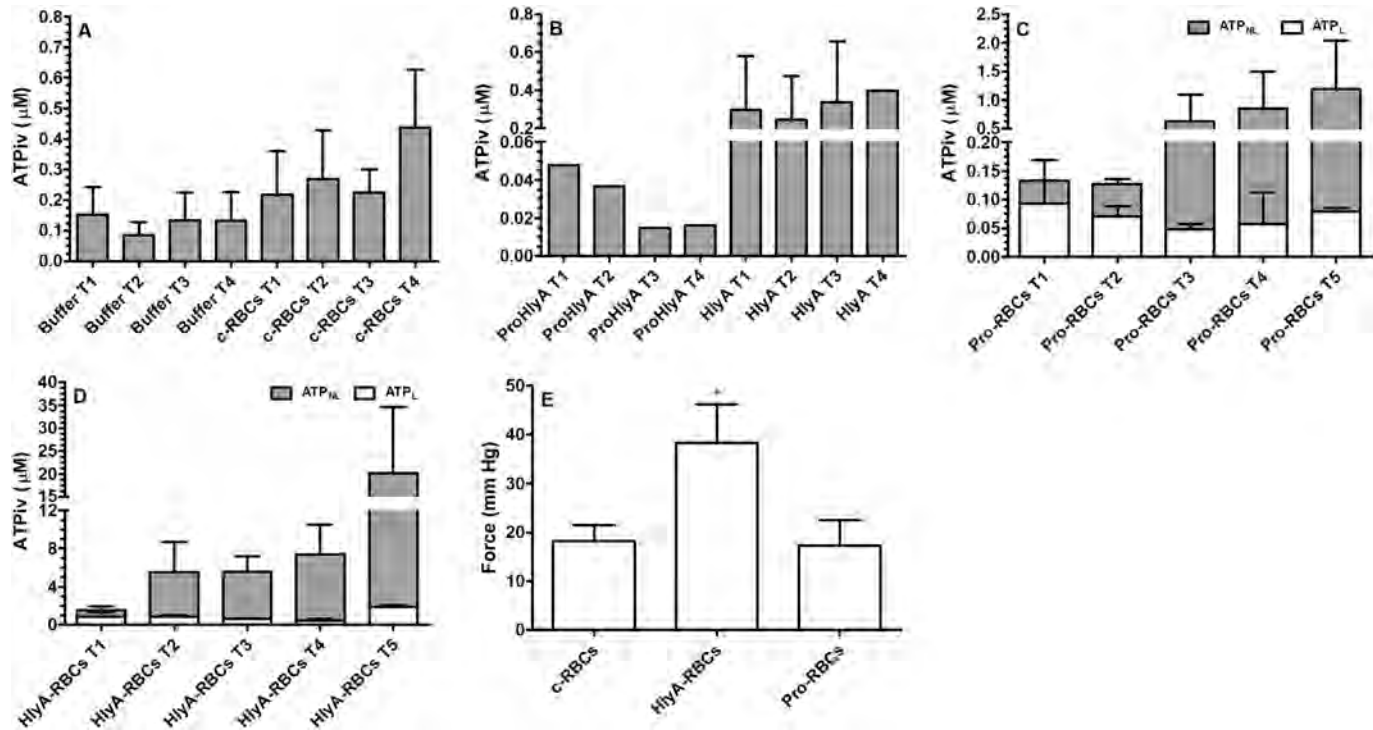


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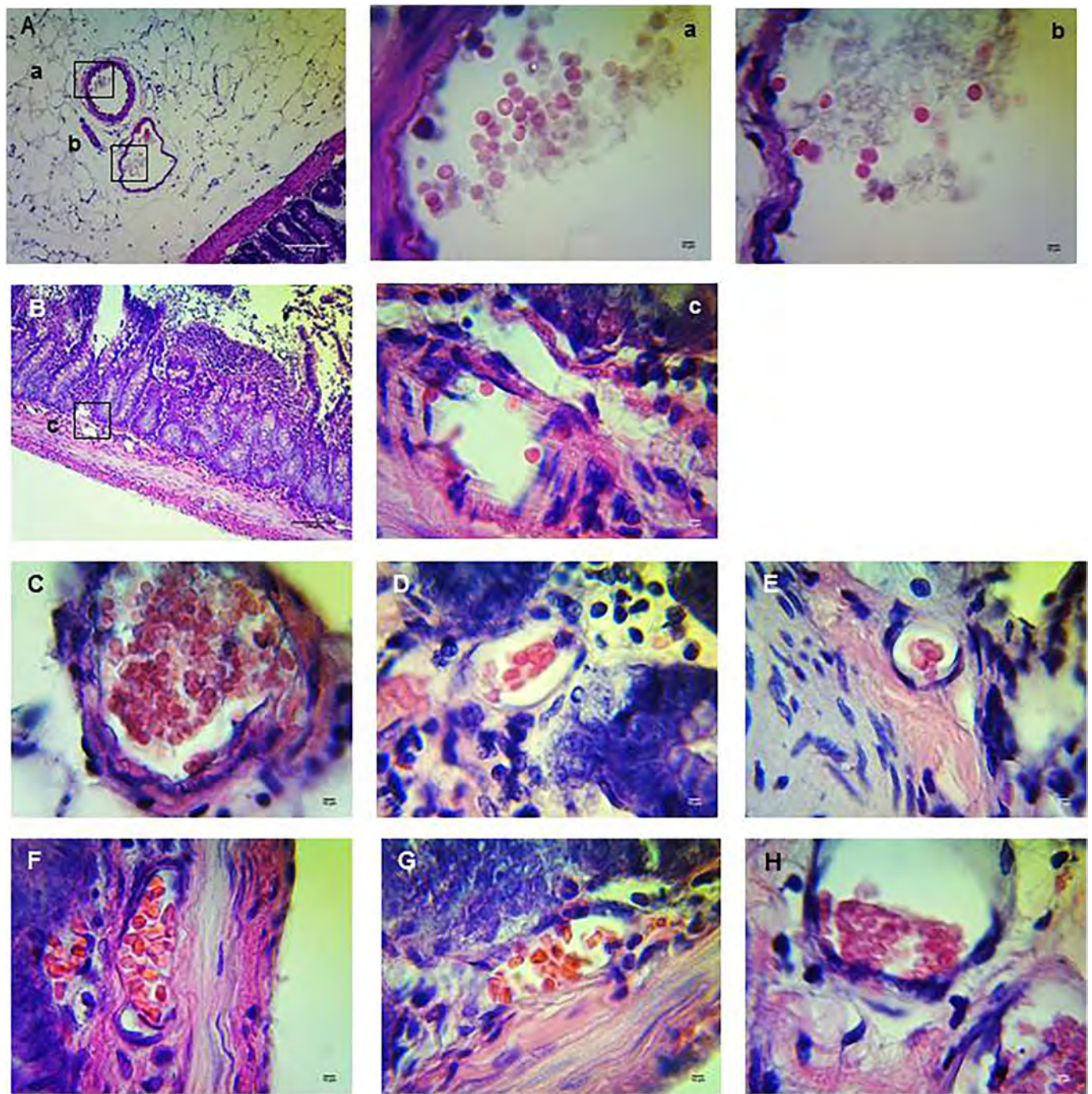


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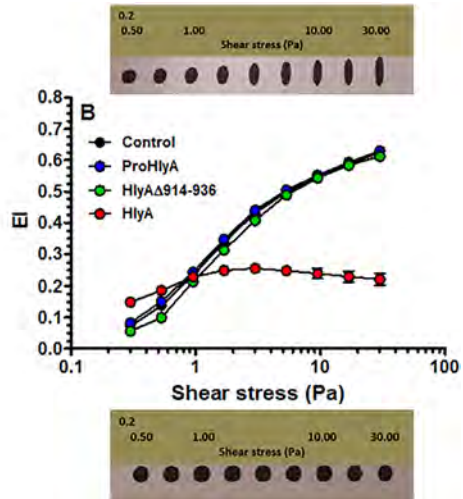
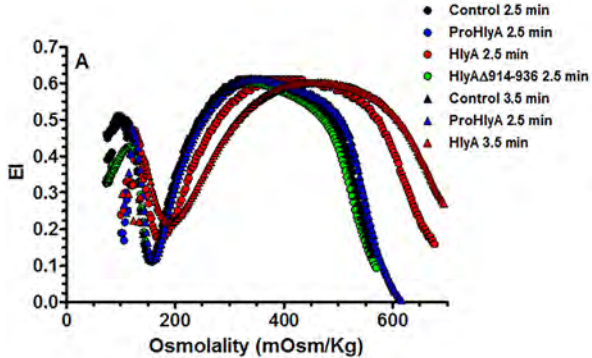


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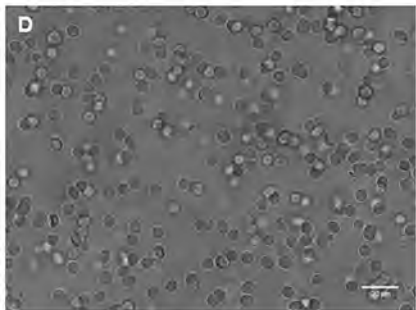
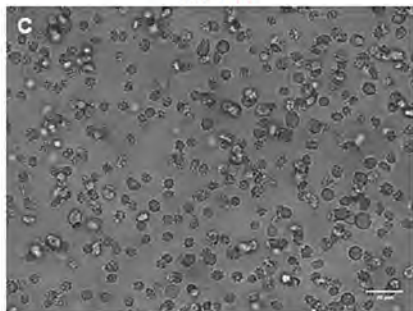
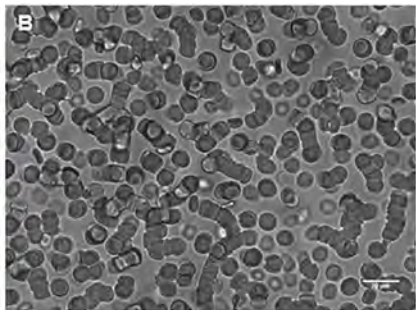
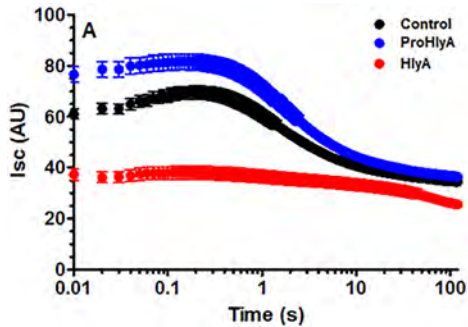


Figure 13

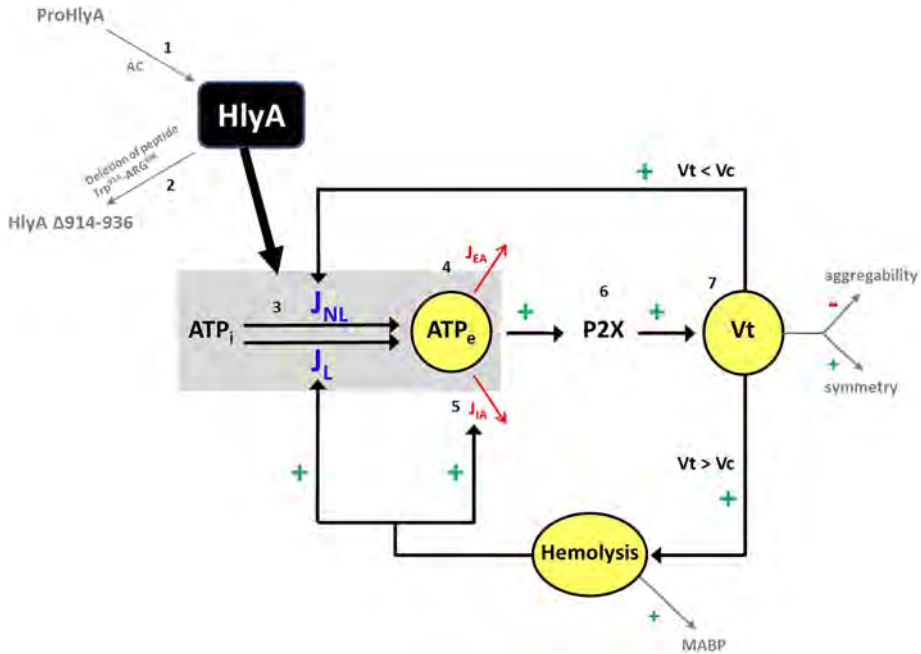


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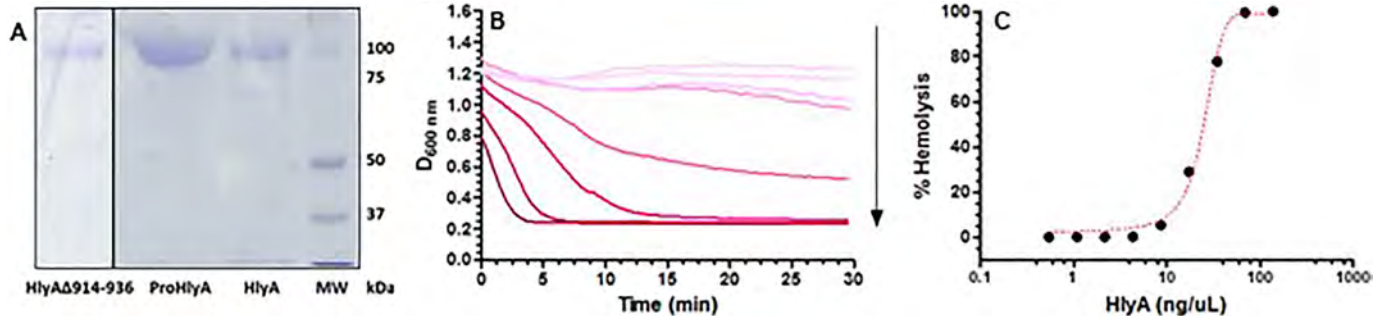


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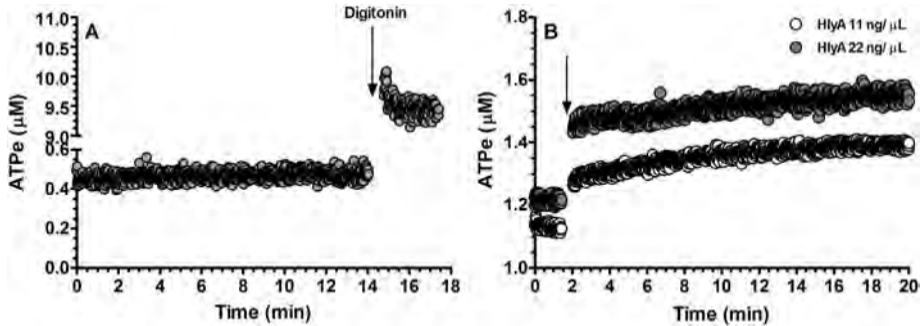


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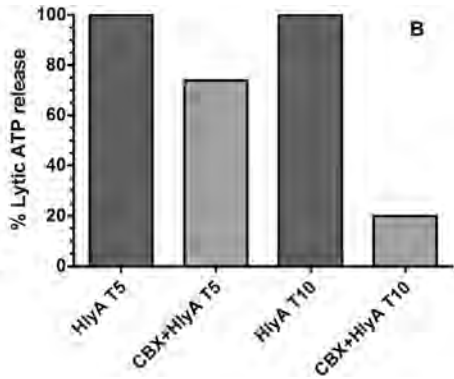
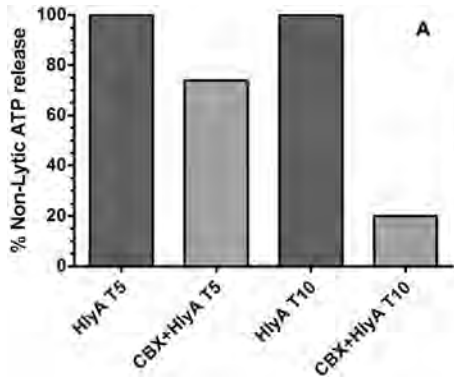


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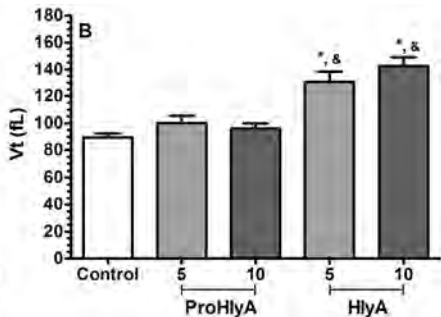
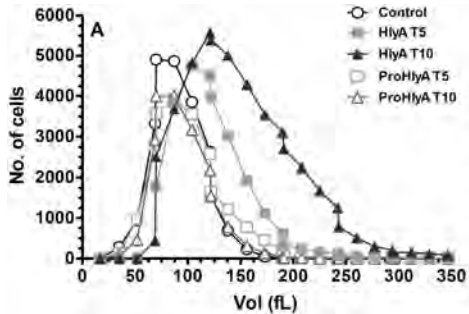


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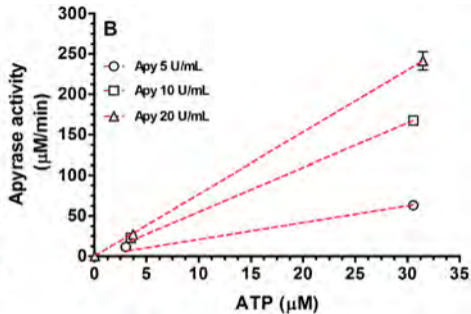
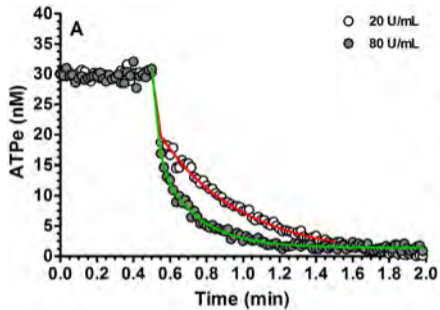


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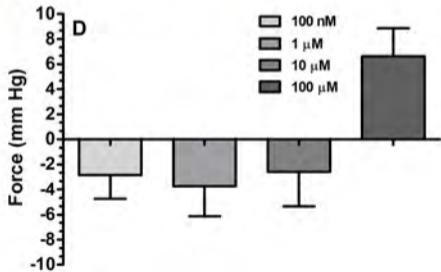
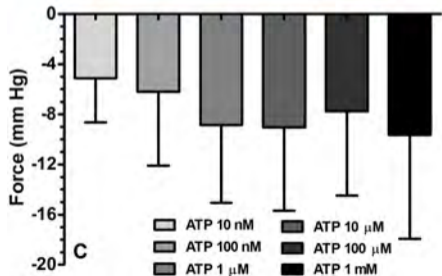
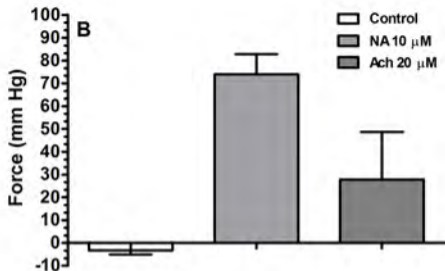


Figure 20

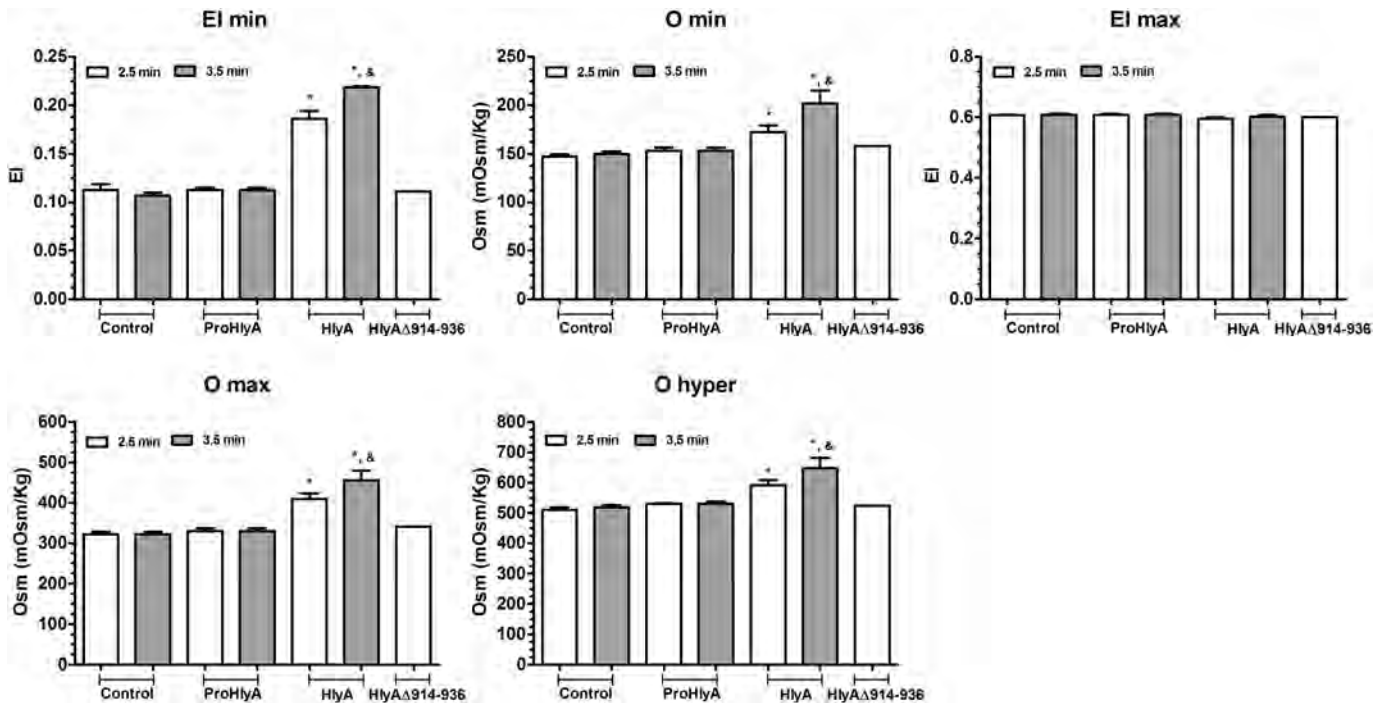


Figure 21