- 1 Title: Monitoring in real time the cytotoxic effect of *Clostridium difficile* upon the
- 2 intestinal epithelial cell line HT29

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Abstract

 The incidence and severity of Clostridium difficile infections (CDI) has been increased not only among hospitalized patients, but also in healthy individuals traditionally considered as low risk population. Current treatment of CDI involves the use of antibiotics to eliminate the pathogen, although recurrent relapses have also been reported. For this reason, the search of new antimicrobials is a very active area of research. The strategy to use inhibitors of toxin's activity has however been less explored in spite of being a promising option. In this regard, the lack of fast and reliable in vitro screening methods to search for novel anti-toxin drugs has hampered this approach. The aim of the current study was to develop a method to monitor in real time the cytotoxicity of C. difficile upon the human colonocyte-like HT29 line, since epithelial intestinal cells are the primary targets of the toxins. The label-free, impedance based RCTA (real time cell analyser) technology was used to follow overtime the behaviour of HT29 in response to C. difficile LMG21717 producing both A and B toxins. Results obtained showed that the selection of the medium to grow the pathogen had a great influence in obtaining toxigenic supernatants, given that some culture media avoided the release of the toxins. A cytotoxic dose- and time-dependent effect of the supernatant obtained from GAM medium upon HT29 and Caco2 cells was detected. The sigmoid-curve fit of data obtained with HT29 allowed the calculation of different toxicological parameters, such as EC50 and LOAEL values. Finally, the modification in the behaviour of HT29 reordered in the RTCA was correlated with the cell rounding effect, typically induced by these toxins, visualized by time-lapsed captures using an optical microscope. Therefore, this RTCA method developed to test cytotoxicity kinetics of C. difficile supernatants upon IEC could be a valuable in vitro model for the screening of new anti-CDI agents.

1. Introduction

Clostridium difficile is a Gram-positive, spore forming, anaerobic bacterium that inhabits the large intestine of healthy individuals. However, when the intestinal microbiota is disturbed (e.g. administration of oral antibiotics) this microorganism is able to overgrowth leading to different pathologies, such as C. difficile infections (CDI) in humans and animals (Rupnik et al., 2009). The main mechanism of virulence in C. difficile is related to the production of the two large protein toxins TcdA (308 kDa) and TcdB (260 kDa) and some variants are also able to produce the binary CDT toxin (Rupnik, 2008). Both A and B toxins have the same enzymatic activity, although TcdA acts mainly as enterotoxin whereas TcdB has a broad cytotoxic activity. Both toxins act as glycosyltransferases inactivating host cell GTPases, then causing disruption of the actin cytoskeleton and leading to colonocyte death via apoptosis; this produces a loss of intestinal epithelial barrier function by opening tight junctions between cells, which increased intestinal permeability and fluid accumulation, followed by the onset of diarrhoea (Jank and Aktories, 2008; Voth and Ballard, 2005). Toxins also induce the release of cytokines which lead to the activation of neutrophils, mast cells, enteric nerves and sensory neurons within the intestinal lamina propria. These, in turn, induce the release of neuropeptides and pro-inflammatory cytokines resulting in an inflammatory response and pseudomembrane formation (Shen, 2012; Sun et al., 2015). C. difficile is responsible for 20 to 30% of antibiotic-associated diarrhoea and is the most frequent in nosocomial diarrhoea (Abou-Chakra et al., 2014). The CDI manifestation ranges from asymptomatic carriage to clinical problems: from mild diarrhoea to more severe disease syndromes, including abdominal pain, fever and leucocytosis. Fulminant or severe complicated CDI is characterized by inflammatory lesions and the formation of pseudomembranes in the colon, toxic megacolon or bowel

perforation, sepsis, shock and death (Faris et al., 2010). CDI have traditionally been assumed to be restricted to health-care settings. However, it is known that certain environments, animals and foods are predictable sources of C. difficile, although zoonotic and foodborne transmissions have not been confirmed vet (Rodriguez-Palacios et al., 2013). The main groups of risk are elders hospitalized and patients after hospitalization receiving antibiotics. However, CDI is increasing in younger populations, with no previous contact either with the hospital environment or with antibiotics, and in specific populations that were previously considered of low risk, such as children and pregnant women (Carter et al., 2012). In the recent years, the incidence and mortality of CDI has significantly increased due to the emergence in North America and Europe of strains with increased virulence, or hyper-virulent isolates, belonging to restriction endonuclease type BI, North American pulsed-field type 1 and PCR-ribotype 027. In addition, emerging strains belonging to PCR-ribotype 017 and 078, which are also associated with severe disease, have been isolated in parts of Asia and Europe (Bouillaut et al., 2013; Drudy et al., 2007; Kim et al., 2008). Hyper-virulent strains are characterized by significantly production of more A and B toxins and by their resistance to fluoroguinolones; they often produce more spores, in comparison to historical strains, and they synthesise the binary toxin CDT (C. difficile transferase) belonging to the family of binary ADP-ribosylating toxins (Gerding et al., 2014; Schwan et al., 2014).

Therapies against CDI comprise the use of antibiotics such as metronidazole or vancomycin, however in some cases this treatment does not prevent for the relapse of CDI. Emerging therapeutic options are currently under investigation for treatment of CDI (Mathur et al., 2014); in this regard, it is of pivotal relevance the use of fast, reliable, and accurate methods allowing the screening of new potential agents against *C. difficile* toxicity. This was the aim pursued in the current work, in which intestinal

cellular lines were used as biological model to follow in real time the toxic effect of a *C*.

difficile strain producing both A and B toxins.

2.1. C. difficile culture conditions and quantification of toxins

2. Material and methods

Both strains were routinely grown (for 16 h) in Clostridium Medium [RCM, Oxoid, Thermo Fisher Scientific Inc., Waltham, MA] in Hungate tubes. Incubations took place at 37°C under anaerobic conditions (80% N₂, 10% CO₂, 10% H₂) in a MG500 chamber (Don Whitley Scientific, West Yorkshire, UK). Several broth media (Table 1, supplementary Table S1) and incubation periods (24, 48, 72 and 120 h) were tested to select the best conditions for survival and toxigenic activity. The OD (600 nm), pH and counts, made

difficile activity.

The concentration of A and B toxins produced by *C. difficile* LMG21717 was determined by independent ELISA tests (tgcBIOMICS GmbH, Bingen,

Germany) following the manufacturer's instructions.

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2.2. Cell-line cultures

The intestinal epithelial cell (IEC) lines HT29 (ECACC 91072201) and Caco2 (ECACC 86010202) were purchased from the "European Collection of Cell Cultures" (Salisbury, UK) and stored at IPLA under liquid N₂. Both cell lines were maintained under standard conditions using two specific media: supplemented McCoy's medium (or MM), for HT29, and supplemented Dulbecco's modified Eagle medium (or DMEM), for Caco2 (Hidalgo-Cantabrana et al., 2014). Both media were added, as well, with a mixture of antibiotics (50 μg/ml streptomycin-penicillin, 50 μg/ml gentamicin and 1.25 μg/ml B). All media and reagents were purchased from Sigma-Aldrich (Sigma-Aldrich Co., St. Louis, MO). For maintenance, the cell lines were incubated at 37°C, 5% CO₂ atmosphere in a CO₂-Series Shel-Lab incubator (Sheldon Manufacturing Inc., OR, USA) and were weekly trypsinized. A few consecutive passages were used: from p146 to p148, for HT29, and from p47 to p48, for Caco₂. Cells were grown in 25 cm² bottles with vented (0.2 μm membrane) cap (Falcon®, Corning Inc. Life Science, Tewksbury, MA) and after 5 or 7 days of incubation these cultures were used to harvest cells for the real time experiments.

2.3. Monitoring cell-line behaviour in real-time

- The RTCA (real time cell analyser) xCELLigence equipment (ACEA Bioscience Inc.,
- San Diego, CA), which monitors three independent 16-well E-plates (

), was used to test the behaviour of the IEC

136 (Hidalgo-Cantabrana et al., 2014). The equipment was introduced in a Heracell-240

Incubator (Thermo Electron LDD GmbH, Langenselbold, Germany), set at 37°C with

5% CO₂ atmosphere, and it was connected with a computer that controls and records the

RTCA-curves. Initially, both IEC were titrated to determine the number of cells needed for further experiments. A cell suspension (1x10⁶ cell/ml) was made in the corresponding medium for each IEC and, afterwards, serial ½ dilutions were prepared. Finally, 200 µl of the different cell suspensions were seed, in duplicated wells, in two independent 16-well E-plates (Fig. 1A). These micro-plates were hold in the equipment and incubated at 37°C, 5% CO₂ to record the cell index (CI) every 15 min, for 50 h. The CI is an arbitrary unit that indicates variations of the impedance in gold-microelectrodes, placed in the bottom of the E-plates, as consequence of the IEC attachment and growth as well as due to morphological changes.

2.4. Monitoring the cytotoxic effect of C. difficile upon IEC

To analyse the cytotoxic effect of *C. difficile* LMG21717 both IEC were used in confluent (monolayer) state and the standard working parameters were defined accordingly to the titration results (Fig. 1B). An initial number of 2x10⁵ cells (in 100 µl) were seed per well, thus allowing the formation of a monolayer around 14-15 h post-seeding. After 7-8 h of post-confluent state (around 22 h of total incubation) culture medium was removed; then different *C. difficile* samples (in 200 µl) were added and the monitoring continued (every 10 min) for additional 23±1 h under the standard incubation conditions. The duration of a typical experiment was 44 h, which ends with the data analysis carried out with the RTCA software 1.2.1 (ACEA Bioscience).

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2.5. Image monitoring in real-time conditions

2.6. Statistical analysis

The statistical package IBM SPSS Statistics for Window Version 22.0 (IBM Corp., Armonk NY) was used to asses differences in response (normalized CI) of HT29 due to the supernatant dose by means of one-way ANOVA test. Afterwards, differences among doses were determined by the Duncan mean comparison test which allowed identifying the LOAEL (lowest observed adverse effect level) and NOAEL (non-observed adverse

effect level) doses (Jeffery et al., 2004). Finally, the EC50 (concentration at which the half of the maximum adverse effect was detected) at a defined time point was calculated by the RTCA software 1.2.1 (ACEA Bioscience) from the normalized-CI vs. log concentration data fitted to a sigmoidal-curve.

3. Results

3.1. C. difficile cultures in GAM has the highest toxic effect upon HT29 C. difficile upon IEC was obtaining a toxigenic supernatant. For that In the remaining media, the control sample (MM without C. difficile factors) and by the time at which the factors factors (Table 2). In agreement with the absence of growth, both supernatants and pellets collected from 48-h cultures in RCM, BHI-C, BHI-Suppl, or BHI-C-FSB

showed the highest normalized CI values along all monitored period (Fig. 2A and B) or at the defined 4-h point (Table 2). Remarkably, the pellet harvested from BHI medium retained all toxigenic activity, since its corresponding supernatant showed a normalized-CI near cero. An intermediate pattern was denoted for C. difficile grown in RCM+BHI+FSB given that produced the most toxigenic pellet, but being able to release part of the toxins to the supernatant. Finally, the two media containing GAM produced the more toxic supernatants and also their corresponding pellets showed low normalized-CI values, i.e. high toxicity. In order to be able to choose one of these two GAM media, the normalized-CI after 4-h was calculated for both factors harvested from grown cultures after 72 and 120 h of C. difficile incubation. The supernatant collected from GAM, without supplementation, showed the highest toxigenic capability which remained stable during prolonged C. difficile culturing periods (Fig. 2C). Therefore, as conditions to obtain toxigenic supernatants for further experiments we have selected cultivation of C. difficile LMG21717 in GAM medium for 48 h. The concentration of toxin A and toxin B quantified under these conditions was 210±51 ng/ml and 16±8 ng/ml, respectively. The supernatant collected from these culture conditions was stored at -80°C until its use, since we have detected that higher temperature (-20°C) of storage reduced the activity of the supernatants (data no shown).

3.2. C. difficile toxic effect is dose dependent

Next, we aimed at determining whether the toxigenic effect was dependent on the amount of supernatant added and if was maintained during prolonged periods. To achieve this goal experiments upon HT29 monolayers were performed using a wide supernatant-percentage range. Immediately after the supernatant addition, it is noticeable the increase in the impedance (CI) signal, which it can be easily followed in

 the normalized-CI graphic (Fig.). The maximum normalized-CI values are reached morphology and shape of the eukaryotic cells. Afterwards, the CI signal showed a 0.9941) of normalized-CI vs. log concentration (percentages) obtained 4-h after effect (p<0.05), was 0.0781% which corresponded to 164 and 12.5 pg/ml of TcdA and tested that causes no toxic effect, was 0.0391% (390.8 ppm). The concentration TcdA and TcdB, respectively). After longer periods of co-incubation (22-h) the

could be reproduced in another biological model. In this regard, Caco2 and HT29 cell lines have extensively being used in research to mimic the human intestinal epithelium. Under confluent and differentiated state both cell lines express characteristic of enterocytes, but Caco2 monolayers are composed exclusively of absorptive cells, whilst HT29 also includes mucus-secretory Goblet cells (Hilgendorf et al., 2000). Then in our study the IEC line Caco2 was confronted with the *C. difficile* toxigenic supernatant in percentages ranging from 10% to 0.16% (Fig. 4). Indeed, although we have observed a toxigenic effect of the *C. difficile* supernatant upon Caco2 monolayers, the normalized-CI values showed a different tendency with respect to that of HT29. After a short 4-h contact period, only concentrations of *C. difficile* supernatants higher than 1.25% were toxic; this cut-off percentage went down to 0.63% for prolonged coincubation period (Table 3). Therefore, the intrinsic characteristics of each IEC accounted for the development of a model to address the toxigenic effect of this pathogen.

3.3. Visualization of *C. difficile* toxic effect

Image analysis was performed in order to correlate with the events that are recorded with the RTCA technology. HT29 monolayers were tested with 2.5% *C. difficile* supernatant and several images were captured in real time over time (Fig. 5, and supplementary video). Initially, before the supernatant addition, HT29 cells displayed typical morphology of an intestinal monolayer with most adjacent cells well connected,

indicating that tight junctions and cytoskeleton are intact. In a short period after supernatant addition, around 2 h, the cells into the monolayer become to acquire a spherical shape and tend to detach from the adjacent ones. This is in agreement with the way of action of the toxins which disarray actin cytoskeleton and finally induce cell death.

4. Discussion

Treatment for CDI involves the use of antibiotics to eliminate the pathogen or, more recently, the restoration of the intestinal microbiota to avoid relapse (van Nood et al., 2013) which is still a controversial issue limiting its widespread use. Novel, -alternative to antibiotics-, antimicrobial strategies towards C. difficile are currently under evaluation; for example, the use of other microbial-origin molecules such as bacteriocins (Gebhart et al., 2015) and bacteriophage endolysins (Dunne et al., 2014). Another less explored strategy is the use of drugs targeting C. difficile toxins which could act as co-adjuvants to palliate the acute effect induced by the pathogen (Tam et al., 2015). In this article, we report the optimization of a label-free, impedance-based RTCA method to follow the cytotoxicity kinetics of human colonocyte-like cells exposed to C. difficile supernatants, method that could be used for the screening of new toxin-activity inhibitors. Different label-free technologies, alternative to classic labelbased endpoint methods, are currently been used in different research fields such as evaluation of new drugs (Xi et al., 2008) and cancer development studies (Limame et al. 2012), but also for assessment of the toxic effect of infectious bacteria upon host cells (Slanina et al., 2011; Ye et al., 2015). Specifically the RTCA technology, also known as RC-CES (real time-cell electronic sensing), was recently applied to develop methods allowing the clinical diagnosis of toxigenic C. difficile in different biological samples

 such as HS27 cells (fibroblast) obtained from human (Huang et al., 2014b; Ryder et al., 2010), mRG1-1 cells genetically modified from CHO cells (epithelial morphology) which come from Hamster ovary (He et al., 2009; Steele et al., 2012) or Vero cells (epithelial morphology) obtained from a monkey kidney (Yu et al., 2015). However, given that the aim pursued in our work was to develop a method allowing the screening of new potential bio-actives against *C. difficile* toxicity acting within the human gut, we have choose as cellular model an intestinal epithelial line since enterocytes are the primary action targets of these toxins. Additionally, although the results obtained with HT29 cells in proliferative state were similar (data no shown), we worked in a confluent state (monolayer) because this better mimic the physiological conditions of an intestinal epithelium.

One of the remarkable findings observed in the context of our work was the fact that the culture media used to grow *C. difficile* under laboratory conditions had great influence in the release (secretion) of the toxins to the supernatant. Indeed, the non-selective BHI medium, classically used for growing this bacterium, retained almost all toxigenic activity attached to the bacterial pellet, whereas the two media based on GAM were those more effective releasing the toxins. It has been reported that culture conditions, i.e. micro- and macronutrient composition, have strong influence in both induction and repression of toxin production (Lei et al., 2013). In fact it was proven that common rich media components, such as yeast beef and pork are able to *in vitro* and *in vivo* inhibit the toxicity of *C. difficile* toxin A (Duncan et al., 2009). In addition, culture media also influence the composition of *C. difficile* protein secretome, including their toxins (Boetzke et al. 2012). The exact mechanism of TcdA and TcdB secretion is unknown

such as the formation of a holin-like protein, are still controversial (Govind et al., 2012; Olling et al., 2012). Therefore, to *in vitro* evaluate the efficacy of any potential toxin's inhibitor, the laboratory *C. difficile* culture conditions must be carefully chosen. In this regard, our RTCA strategy allowed a fast, reliable and tailor-made method for the selection of culturing and toxin secretion conditions.

The data of cytotoxicity kinetics obtained from the dose-response curve showed Additionally, a strong dose-response behavior was detected with a good fit $(R^2 > 0.99)$ to induced a significantly toxic effect upon HT29 cells, after a short exposition-period (4 h), was 164 and 12.5 pg/ml for toxin A and B, respectively. In this regard, it has been reported that TcdB is at least 100-fold more potent than TcdA upon other non-intestinal like cells. As far as we could achieve after an exhaustive literature search, there are not

 enrichment process was incorporated during stool preparation (Huang et al., 2014b). In parallel, He and collaborators (2009) reported in mRG1-1 cells detection limits about 10 pg/ml and 10 ng/ml for TcdB and TcdA, respectively, after prolonged (~ 20 h) incubation time.; the range of the latter decreased to 1-10 pg/ml if the assay is carried out in the presence of the anti-*C. difficile* toxin A monoclonal antibody A1H3, since the mRG1-1 cells were engineered to express the murine Fc gamma receptor (FcγRI)-α-chain, thus increasing the sensitivity of the assay. The model develop by this group was also successfully used in the detection of toxins present in blood plasma of CDI animal models (Steele et al., 2012) and in two cases of human *C. difficile* toxemia (Yu et al., 2015). These reports underlines that the detection limits are very dependent on the cellular model used, as well as on the preparation of complex biological samples.

Results obtained with our RTCA cytotoxic assay were confirmed with the images captured every 15-min with the time lapsed optical microscope. A time-dependent cell rounding of HT29 cells was observed, which it is a typical morphological change observed in different cell lines treated with *C. difficile* toxins (Steele et al., 2012; May et al. 2013). This loss of shape is due to modification in the cellular cytoskeleton induced by the toxins, which are able to depolymerize or disassemble F-actins (May et al., 2013). Another label-free, end-point independent technology to measure cellular events involves the use of a lens-free, video microscopy platform (Kesavan et al., 2014). The image-monitoring in real time records similar events than those measured by the impedance-based RTCA, such cell adhesion, spreading, division and death. Indeed, this alternative high-throughput imaging-based methodology was also used to identify new *C. difficile* TcdB inhibitors that protected human (non-enterocyte) cells, in this case CHO, Vero and IMR-90, from cell rounding (Tan et al., 2015).

Finally, is worth noting that the cellular model used to carry out cytotoxic assays, even if the cells are from the same tissue type, had an impact the results obtained; we have previously observed similar findings in other types of studies using different IEC lines (Hidalgo-Cantabrana et al., 2014). In relation to the aim of the current work, this cell-dependent effect is especially relevant to test the efficacy of any potential anti-toxin bioactive since toxicological parameters, such as EC50 or LOAEL, can vary. Thus, although a broad screening can be performed with a single cell line, it would be advisable the use of more than one cellular type for the definition of the efficacy range of any novel candidate to inhibit *C. difficile* toxic activity.

5. Conclusion

In this work we have developed a valuable *in vitro* model to test cytotoxicity kinetics of *C. difficile* supernatants upon IEC, which could be eventually used in the screening of new anti-CDI agents. The model allows the preliminary selection of the appropriate culture conditions, as well as the choice of the accurate doses, to undertake the further toxicological assays of *C. difficile* toxins. However, it must be taken into consideration the variability of the results related to the model of eukaryotic cell used to analyze cytotoxicity. In addition, we consider that this model could be extended to the study of other microbial cyto-toxins.

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Table 1. Composition of culture media used to select the best conditions for growth and toxin production of *Clostridium difficile* LMG21717.

Medium	Composition	Brands ¹
RCM	(supplementary table S1)	Oxoid
ВНІ	(supplementary table S1)	Oxoid
GAM	(supplementary table S1)	Nissui
RCM+BHI+FSB	1 vol RCM + 1 vol BHI + Foetal Serum Bovine (5%)	Oxoid, Sigma
BHI-C	BHI + L-cysteine (0.25%)	Oxoid, Sigma
BHI-Suppl.	BHI + L-cysteine (0.25%) + yeast extract (0.5%) + sodium thioglycolate (0.1%)	Oxoid, BD-Difco, Sigma
BHI-C-FSB	BHI + L-cysteine (0.25%) + Foetal Serum Bovine (5%)	Oxoid, Sigma
GAM-FSB	GAM + Foetal Serum Bovine (5%)	Nissui, Sigma

¹ Oxoid, Thermo Fisher Scientific Inc., Waltham, MA; Nissui Pharmaceutical Co., Ltd., Tokyo, Japan; Sigma-Aldrich Co., St. Louis, MO; BD-Difco, Becton Dickinson Co., Franklin Lakes, NJ.

Table 2 Cultures of *Clostridium difficile* LMG21717, after 48 h of incubation, made in different media used to select the best conditions for growth and toxigenic activity. The highest toxigenic activity was established at the lowest normalized-cell index (CI) value obtained from the intestinal cell lines HT29 and Caco2 after 4 h of *C. difficile* factors addition.

	C. difficile		Normalized-CI HT29		
Media	pН	OD	CFU/ml	Supernatant	Pellet
RCM	5.62	1.26	$< 10^5$	-0.0191	-0.0793
BHI	5.88	1.10	$8.3x10^{7}$	-0.0912	-0.6199
RCM+BHI+FSB	5.64	1.66	$1.1x10^{7}$	-0.3077	-0.7109
GAM	5.88	1.25	$1.6x10^{7}$	-0.7052	-0.5211
BHI-C	5.47	1.52	$< 10^{5}$	-0.0566	-0.1958
BHI-Suppl.	5.51	1.72	$< 10^{5}$	-0.1069	-0.2708
BHI-C-FSB	5.50	1.24	$< 10^{5}$	-0.0739	-0.1721
GAM-FSB	5.84	1.64	$1.4x10^{7}$	-0.7267	-0.6820

Table 3 Normalized-cell index (CI) values obtained from the intestinal cell lines HT29 and Caco2 after 4 h and 22 h of addition of different concentrations of *Clostridium* difficile LMG21717 toxigenic supernatants.

	Normalized-CI			
C. difficile	HT29		Caco2	
supernatant	4 h	22 h	4 h	22 h
10%	-0.6253	-0.8468	-0.2741	-0.6662
5%	-0.5665	-0.8228	-0.2596	-0.6427
2.5%	-0.4935	-0.7956	-0.1151	-0.6367
1.25%	-0.4125	-0.7728	0.0191	-0.6135
0.63%	-0.3262	-0.7303	0.0576	-0.4668
0.31%	-0.2301	-0.6923	0.0048	0.0279
0.16%	-0.1604	-0.6198	-0.0756	0.1079
0 (control)	0	0	0	0

Figure legend

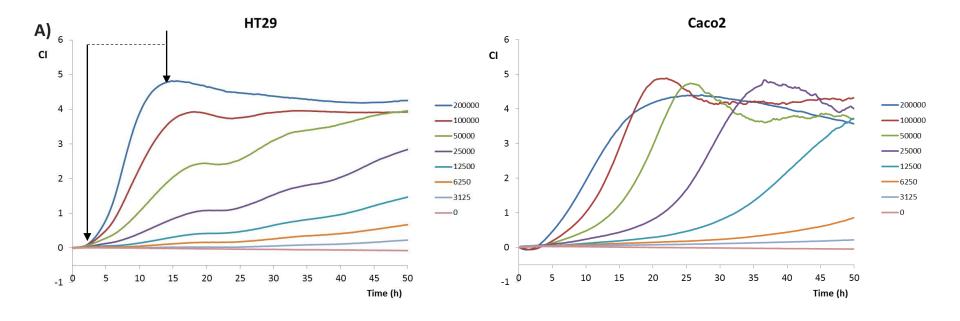
FIG. 1 Titration of HT29 and Caco2 cells dependent on the initial number of cells seeded (**A**). Experimental design used to test the toxic effect of *C. difficle* LMG21717 (**B**) and microscopic visualization of the HT29 cell morphology immediately after seeding (left microphotograph) and when the confluent monolayer state was reached (right microphotograph).

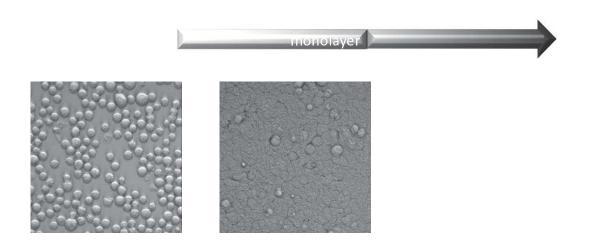
FIG. 2 Behaviour of HT29 monolayers in the presence of the toxigenic supernatants and pellets collected from *C. difficile* cultures grown for 48 h in different culture media. Normalized cell index (CI) obtained from E-plates to test McCoy's medium supplemented with 20% of supernatants from each medium (A) or with pellets resuspended (1/10 vol. of the initial 48-h culture) in McCoy's medium (B). The CI was normalized by the control (non-supplemented McCoy's medium) sample at the time of the supernatant or pellet addition. Normalized-CI values 4-h after addition of factors obtained from 48, 72 and 120 h of *C. difficile* cultures in media containing GAM (C).

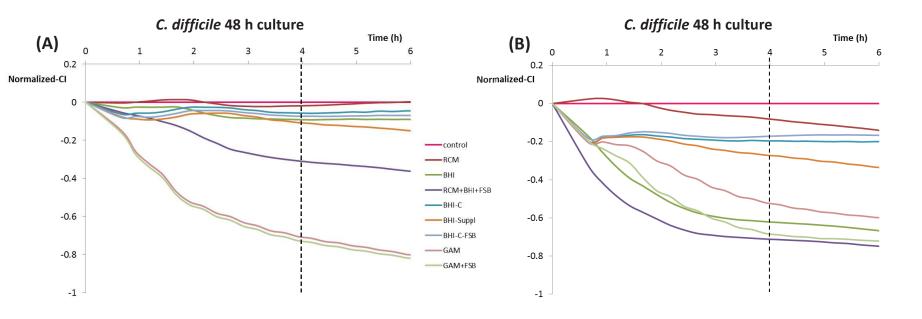
FIG. 3 Behaviour of HT29 monolayers in the presence of different percentages of the toxigenic supernatant collected from *C. difficile* cultures grown for 48 h in GAM. Mean values of data after normalization of the CI by the control sample (non-supplemented McCoy's medium) and by the time of the supernatant addition Dose-response data (mean and SD) fitted to a sigmoidal trend line curve allowing the identification of the EC50 (concentration where supernatant produced 50% of the maximum toxic effect), LOAEL (lowest observed adverse effect level, p<0.05) and NOAEL (non-observed adverse effect level) doses

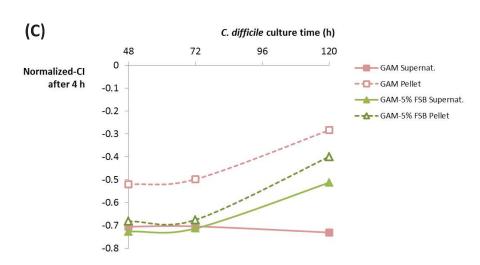
FIG. 4 Behaviour of Caco2 monolayers in the presence of different percentages of the toxigenic supernatant collected from *C. difficile* cultures grown for 48 h in GAM. The CI was normalized by the control (non-supplemented DMEM) sample at the time of the supernatant addition.

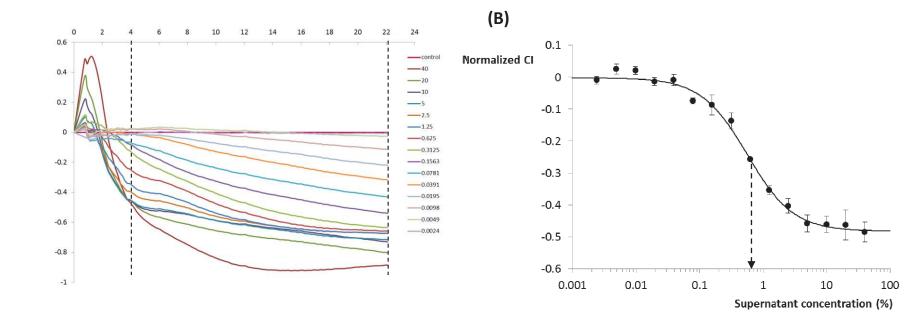
FIG. 5 Visualization over time (from 0 to 24 h, photo-capture interval of 1h, 40 min) under inverted optical microscope (objective x40) of the HT29 monolayer in the presence of 2.5% *C. difficile* toxigenic supernatant collected from 48 h cultures in GAM medium. Arrows indicate some areas of monolayer disaggregation. (See Supplementary video, made with a selection of 100 microphotographs captured at 10 min interval, from 0 to 24 h).

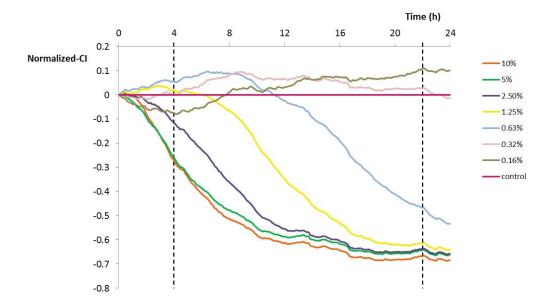












O h	1 h, 40 min	3 h, 20 min	5 h	6 h, 40 min
8				
8 h, 20 min	10 h	11 h, 40 min	13 h, 20 min	15 h
16 h, 40 min	18 h, 20 min	20 h	21 h, 40 min	23 h, 10 min
		4	4	1
		7 75		
V	4	4	4	4

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