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Beyond conventional antibiotics for the future treatment of methicillin-resistant *Staphylococcus aureus* infections: two novel alternatives.

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3 **Title : Beyond conventional antibiotics for the future treatment of methicillin-**
4 **resistant *Staphylococcus aureus* infections: Two novel alternatives.**

5

6

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21

22 Running title: Future options for treatment of MRSA

23

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25

ABSTRACT

26 The majority of antibiotics currently used to treat methicillin-resistant
27 *Staphylococcus aureus* (MRSA) infections, target bacterial cell wall synthesis or protein
28 synthesis. Only daptomycin has a novel mode of action. Reliance on limited targets for
29 MRSA chemotherapy, has contributed to antimicrobial resistance. Two alternative
30 approaches to the treatment of *S. aureus* infection, particularly those caused by MRSA,
31 that have alternative mechanisms of action and that address the challenge of antimicrobial
32 resistance are cationic host defence peptides and agents that target *S. aureus* virulence.
33 Cationic host defence peptides have multiple mechanisms of action and are less likely
34 than conventional agents to select resistant mutants. They are amenable to modifications
35 that improve their stability, effectiveness and selectivity. Some cationic defence peptides
36 such as bactenecin, mucroporin and imcroporin have potent *in-vitro* bactericidal activity
37 against MRSA. Anti-pathogenic agents also have potential to limit the pathogenesis of *S.*
38 *aureus*. These are generally small molecules that inhibit virulence targets in *S. aureus*
39 without killing the bacterium and therefore have limited capacity to promote resistance
40 development. Potential anti-pathogenic targets include the sortase enzyme system, the
41 accessory gene regulator (*agr*) and the carotenoid biosynthetic pathway. Inhibitors of
42 these targets have been identified and these may have potential for further development.

43

INTRODUCTION

44 Serious infections caused by *Staphylococcus aureus* are important globally in the
45 hospital setting and in the community. These range from minor infections of the skin and
46 soft tissue, to life-threatening systemic infections, such as bloodstream infections (BSI)
47 and endocarditis. Methicillin resistant *S. aureus* (MRSA) is resistant to most

49 conventional β -lactam antibiotics due to the carriage of the *mecA* gene encoding an
50 alternative penicillin binding protein, PBP2a for which β -lactams have low affinity
51 (Hartman & Tomasz, 1984, Reynolds & Brown, 1985). The majority of MRSA isolates
52 are resistant to drugs in the other antibiotic classes including aminoglycosides and
53 macrolides (Fluit, *et al.*, 2001). Our diminishing arsenal of anti-infectives for the
54 treatment of systemic MRSA infections highlights the need for alternative antimicrobial
55 agents with superior properties in terms of efficacy, reduction of toxicity and resistance.

56 Among the agents currently recommended by the Infectious Diseases Society of
57 America, for the treatment of MRSA infections are vancomycin, clindamycin,
58 daptomycin, linezolid, trimethoprim, tetracycline and streptogramins (Liu, *et al.*, 2011).
59 However, increasingly *in-vitro* resistance to currently-used agents is reported and clinical
60 failures have occurred (Soriano, *et al.*, 2008, Yoon, *et al.*, 2008, Baltz, 2009, Prabhu, *et*
61 *al.*, 2011, Gould, *et al.*, 2012, Ruiz de Gopegui, *et al.*, 2012). As summarised in Figure 1,
62 new members of existing anti-bacterial classes in the late phases of clinical trials, with
63 potential for the treatment of MRSA infections include ceftobiprole, ceftaroline,
64 dalbavancin, oritavancin (peptidoglycan synthesis inhibitors) and iclaprim (folate
65 synthesis inhibitor). Ceftobiprole and ceftaroline are novel advanced generation
66 cephalosporins with a broad activity spectrum and strong affinity for PBP2a with
67 ceftobiprole showing stability to β -lactamases (Zhanel, *et al.*, 2008, Dauner, *et al.*, 2010).
68 Dalbavancin and oritovancin are semi-synthetic lipoglycopeptides with a heptapeptide
69 core similar to vancomycin. In addition to effects on the cell wall, these agents also
70 disrupt cell membrane integrity through membrane depolarization. They also have longer
71 half lives allowing for less frequent dosing compared to vancomycin and teicoplanin

72 (Zhanel, *et al.*, 2010). The success of these newer agents remains to be assessed
73 clinically. It is clear that large pharmaceutical companies preferentially appear to favour
74 the development of new generation classical antibiotic classes, with improved properties.
75 This may be because, compared to new agents with alternative mechanisms of action,
76 their safety and efficacy is well established *in-vivo* and they are amenable to
77 pharmaceutical preparation. However, in view of the propensity to develop resistance
78 associated with conventional current antibiotics and their derivatives, the long-term future
79 of anti-staphylococcal agents may involve an exploration of agents with alternative and
80 multiple modes of anti-bacterial activity. Additional properties such as anti-pathogenic or
81 immunomodulatory activity would also be desirable in novel MRSA drugs. Such adjunct
82 properties would be particularly important for the treatment of community-associated
83 MRSA (CA-MRSA) which is associated with enhanced virulence that may be toxin-
84 mediated (Voyich, *et al.*, 2005). The investigation of alternative therapeutic agents with
85 novel mechanisms of action remains largely an activity for academic researchers and
86 small biotechnology companies. This type of research has resulted in pre-clinical
87 developments in the areas of innate immune defence peptides and anti-pathogenic agents
88 with potential as novel anti-MRSA therapeutics. For example, cationic peptides offer
89 multiple and alternative modes of action that may circumvent the problem of
90 antimicrobial resistance. Significant improvements, to the chemistry of such peptides,
91 have increased their attractiveness in terms of pharmacokinetics, toxicity and cost. Anti-
92 pathogenic agents can potentially attenuate the virulence of MRSA and therefore this
93 therapeutic approach may have significantly less propensity to contribute to antimicrobial
94 resistance. These novel approaches to the treatment of MRSA infections, though in their
95 infancy in terms of pharmaceutical development, may provide alternative or

96 complementary therapy in the future. Recent developments in these areas and their future
97 potential as novel anti-infectives are discussed.

98

99 **CATIONIC HOST DEFENCE ANTIMICROBIAL PEPTIDES AND THEIR THERAPEUTIC**
100 **POTENTIAL**

101 Cationic antimicrobial peptides (CAMPs) are a group of ubiquitous peptides that
102 are part of the host innate immune system of animals and plants and these molecules have
103 several properties that make them promising candidates for development as agents for the
104 treatment of microbial infections including those caused by MRSA. (Hancock &
105 Patrzykat, 2002, Zhang & Falla, 2006). Native CAMPs are structurally diverse, varying
106 in size, sequence, content of α helical or β -sheet motifs, disulphide bridges and linear
107 extended structures. Despite their structural diversity CAMPs are all polycationic and
108 amphipathic, two features thought to facilitate their antimicrobial mechanism (Dathe, *et*
109 *al.*, 1997). The main mechanism of anti-microbial action of HDPs is biophysical rather
110 than biochemical, where the target is the cytoplasmic membrane structure itself (Figure
111 2). In Gram-positive and Gram-negative organisms, the antimicrobial activity of CAMPs
112 is initiated through electrostatic interactions with the anionic phospholipid head-groups of
113 the cell envelope that may lead to either membrane perturbations as has been shown for
114 human β -defensins (Yeaman, *et al.*, 1998) and magainins (Westerhoff, *et al.*, 1989) or
115 translocation across the membrane and interaction with various intracellular targets as
116 occurs for cathelicidins such as LL-37 and bactenecin (Sadler, *et al.*, 2002).

117 Three host defence peptides have completed, or are in phase III clinical trials; the
118 magainin 2 analogue pexiganan (MSI-78) for the prevention of diabetic foot ulcers,

119 iseganan, from pig protegrin for the treatment of oral mucositis and omiganan for the
120 prevention of catheter infections and acne. Pexiganan failed to be approved by the FDA
121 due to non-superiority to approved agents but it remains one of the best studied CAMPs.
122 Clinical trials involving HDPs have to date, mainly been limited to topical applications
123 although some, such as the human lactoferrin fragment hLF1-11, for bacteremia and
124 fungal infection, being developed for systemic applications are in early clinical trials. The
125 sequences, properties, *in-vitro* activities and phase of development of some of these
126 peptides, that may also have potential as *S. aureus* anti-infectives are outlined in Table 1.

127 Classic antibiotics target biochemical properties such as folate, peptidoglycan,
128 nucleic acid and protein synthesis, which are often mediated through enzyme inhibition
129 or inhibition of binding to intracellular targets. However, the ability of HDPs to kill
130 multi-resistant bacteria and to poorly select resistant mutants may be related to the
131 contribution of additional alternative and multiple pathways to their mechanism of action,
132 such as depolarisation of the bacterial membrane, pore formation and the induction of
133 degradative enzymes and disruption of intracellular targets (Hadley & Hancock, 2010).

134 The potential direct antimicrobial activity of mammalian host defence peptides
135 can be complemented by a chemotactic activity for phagocytes and memory and effector
136 T cells (Figure 1). Additionally, they mediate the recruitment of immature dendritic cells,
137 by direct chemotactic activity or by upregulation of chemokine production in
138 macrophages, and promote maturation of these dendritic cells directly or indirectly by
139 inducing production of inflammatory cytokines (IL-1 β , TNF α) (Bowdish, *et al.*, 2005,
140 Bowdish, *et al.*, 2006, Yeung, *et al.*, 2011). Although these latter activities result in the
141 local release of pro-inflammatory cytokines, host defence peptides can also reduce the

142 systemic production of TNF α , IL-1 β and IL-6, as has been demonstrated for LL-37
143 (Mookherjee, *et al.*, 2006). Therefore, HDP modulation of the immune response to
144 bacteria appears to involve not only enhancement of specific pro-inflammatory responses,
145 but also suppression of other elements of the pro-inflammatory response, the additive
146 effects of which contribute to a more controlled inflammatory response after the initial
147 potent cytokine response (Yeung, *et al.*, 2011). Some of these immunomodulatory
148 properties alone are sufficient to prevent or clear infection. This was demonstrated by the
149 efficacy in a mouse model of infection, of an immune defence regulator peptide, IDR1,
150 which is devoid of direct antimicrobial activity, but which can selectively activate innate
151 immune responses (Scott, *et al.*, 2007). This peptide has recently entered phase I clinical
152 safety trials and is intended for use in the prevention of infection in chemotherapy-
153 induced immune-suppression. More recently another immune defence regulator, derived
154 from the sequence of the bactenecin peptide IDR-1002 has shown enhanced chemokine
155 induction with a stronger protective effect in an *in-vivo* model of *S. aureus* infection
156 (Nijnik, *et al.*, 2010, Turner-Brannen, *et al.*, 2011). The combination of selective
157 recruitment of effector cells and suppression of inflammatory cytokines found for these
158 peptides would result in a balanced anti-infective response with reduced risk of
159 uncontrolled inflammation.

160

161 **CATIONIC HOST DEFENCE PEPTIDES WITH POTENTIAL AS MRSA ANTI-INFECTIVE**
162 **AGENTS.**

163 Although approximately 17 cationic peptides are in clinical trials to date (though
164 not all in the MRSA therapeutic area) (Yeung, *et al.*, 2011), most of these are for topical

165 application. While alternative topical agents may be useful for skin and soft tissue
166 infections, the potential of cationic peptide or HDPs as dual
167 immunomodulatory/bactericidal agents in *S. aureus* infections may be realised through
168 their development as systemic agents. Two of the best studied natural human HDPs are
169 the cathelicidin, LL-37 and human beta defensin (HBD). These HDPs are released from
170 a variety of cells in response to bacterial challenge. However, it has been suggested that
171 their relatively low *in-vivo* levels and their inactivation by serum constituents are
172 inconsistent with an effective direct killing activity *in-vivo* (Bowdish, *et al.*, 2005). As
173 described above, their immunomodulatory activities have been demonstrated and these
174 may be more important than their direct killing properties (Figure 2). In the area of *S.*
175 *aureus* anti-infectives, both LL-37 and HBDs have served as templates for the
176 development of derivatives with improved potential for therapeutic application and lower
177 potential for toxicity than the natural peptides. For example, the combination of HBD
178 with a specific immune-modulatory peptide (mannose-binding lectin) has recently proved
179 effective in a MRSA mouse wound infection model (Li, *et al.*, 2010, Li, *et al.*, 2010). LL-
180 37 and its synthetic derivatives have shown both *in-vitro* anti-bacterial activity and
181 inhibition of *S. aureus* biofilm formation and no significant haemolysis of erythrocytes (a
182 marker of cell toxicity) was reported up to 100 µg/ml of each derivative (Dean, *et al.*,
183 2011). A non-peptide structural mimetic of defensin, with low toxicity, PMX-30063D is
184 currently in clinical development for infections involving *S. aureus*.

185 CAMPs from a wide range of non-human sources including pig protegrin,
186 temporins and syphaxins from frog skin and buforin from toad have been investigated for
187 their *in-vitro* activity towards *S. aureus* including MRSA (Table 1). However, there is

188 further merit in the discovery of peptides of non-human and ancient origin because
189 evolutionary dynamics may have driven the modification of effector molecules in early
190 organisms while largely conserving the signalling pathways and pattern recognition
191 systems that respond to infection. Therefore, they have unique structures that may
192 potentially activate specific immune responses that contribute to a more measured
193 inflammatory response, with limited possibility of cross-resistance to natural HDPs.
194 Candidate peptides that may be exploited for specific systemic application for MRSA
195 infections include peptides derived from ancient organisms such as mucroporin and
196 imcroporin from the venom of the scorpion and the recently described c-arminin1a from
197 the eumetazoa *Hydra*. Mucroporin is a 17 amino acid peptide from the venom of *Lychas*
198 *mucronatus* that rapidly kills bacteria by membrane disruption. The native peptide is
199 active against MRSA (MIC= 25 µg/ml) and other multi-resistant organisms and an
200 improved MIC of 5 µg/ml and a broader spectrum of activity, have been reported for an
201 amino acid substituted derivative, mucroporin 1 (Dai, *et al.*, 2008). Imcroporin is an
202 immune defence peptide from the venom of *Isometrus maculatus* and *in-vitro* activity has
203 also been demonstrated against MRSA strains (MIC = 20-50 µg/ml). The peptide
204 demonstrated less than 10 % haemolysis of erythrocytes at the MIC and was comparable
205 to vancomycin in survival studies on mice infected with *S. aureus* (Zhao, *et al.*, 2009). A
206 recombinant 31 amino acid peptide, c-arminin 1a, from the ancient fresh water animal of
207 the Eumetazoa species, *Hydra magnipapillata*, has been recently shown to have potent
208 anti-MRSA activity *in-vitro* (0.4 µM), does not demonstrate haemolytic activity and its
209 activity is independent of the salt concentration (Augustin, *et al.*, 2009). In sequence, this
210 peptide does not resemble any known protein and it lacks cysteine residues, which would

211 facilitate its synthesis and production in large quantities. These properties make c-arminin
212 an attractive molecule for further exploitation. The search for ancient cationic peptide
213 structures with potent activity towards multi-resistant clinically important bacteria such as
214 MRSA is on-going but has already revealed potential candidates that may serve as lead
215 compounds.

216

217 **CHALLENGES IN DEVELOPING HOST DEFENCE PEPTIDES AS THERAPEUTIC AGENTS.**

218

219 The major obstacles to the development of cationic peptides as systemic
220 therapeutics are concerns about their potential toxicity or immunogenicity and their poor
221 stability. In addition concerns about development of peptide resistance and unknown
222 effects of synthetic HDPs on the natural innate response to infection, have been raised.
223 Host defence peptides are expensive to produce in commercial quantities and this issue
224 has also affected their potential for development.

225 The relative lack of negatively-charged lipids on mammalian cell surfaces and
226 their weak membrane potential gradient may selectively protect eukaryotes from the
227 action of cationic peptides. However, some cationic peptides such as LL-37 can
228 translocate across mammalian cell membranes because their sequence resembles that of
229 nuclear signalling peptides. Limited data is available on the cytotoxic effects of cationic
230 peptides on mammalian cells. LL-37 does not show significant haemolytic activity at
231 concentrations greater than its antimicrobial activity but *in-vitro* cytotoxic effects have
232 been reported that are dependent on the nature and metabolic state of the target cells and
233 on the evolutionary form of the mature peptide.(Tomasinsig, *et al.*, 2009). Due to their
234 small size and linear structure the majority of host defence peptides are considered to be
235 weakly immunogenic but antibodies have been successfully raised against some cationic

236 peptides such as defensins, hCAP-18 and lactoferrin (Panyutich, *et al.*, 1991, Shimazaki,
237 *et al.*, 1996, Sorensen, *et al.*, 1997). *In-vivo* toxicity is an area that has not been
238 systematically assessed for cationic host defence peptides and this may be because so few
239 have proceeded to this level in clinical trials.

240 It has been suggested that HDPs, if developed as MRSA anti-infectives, would
241 have low propensity to select resistant mutants compared to classical antibiotics. This is
242 based on the multiple mechanisms of action of HDPs. However, bacteria and the human
243 host have co-evolved and *S. aureus* adaptations have been described for a small number
244 of host defence peptides. For example reduced susceptibility to defensin and protegrins
245 has been demonstrated in *S. aureus* which is mediated by incorporation of positively
246 charged L-lysine into the cytoplasmic membrane and is catalysed by the product of the
247 *mprF* gene (Peschel, *et al.*, 2001, Ernst, *et al.*, 2009). Interestingly, this membrane
248 modification also contributes to *S. aureus* resistance to the CAMP-like agent daptomycin,
249 which is currently in clinical use for MRSA infections. An investigation of the evolution
250 of CA-MRSA shows that USA 300 and USA500 strains are more resistant to the innate
251 immune defence peptides, dermicidin and indolicidin than isolates from the epidemic
252 clones from which they originated (Li, *et al.*, 2009). Despite these reported resistances,
253 the immune-modulatory properties of HDPs, which may arguably be more important than
254 their direct antimicrobial therapeutic properties, are not influenced by conventional
255 resistance mechanisms and this is where HDPs may offer a real advantage over
256 conventional antibiotics.

257 Natural HDPs may be released either locally at the site of infection or
258 systemically in response to infection (Yang & Oppenheim, 2004). Some authors have
259 argued that the augmentation of these triggers or the provision of analogous triggers of

260 host immunity may dampen the natural innate or adaptive responses to infection or may
261 cause excessive stimulation of inappropriate immune responses. Inappropriate antibody
262 responses to the administration of self-proteins have been infrequently reported. The
263 possibility of unpredictable effects on the natural host immune response highlights the
264 importance of detailed characterisation of the innate immune response. These
265 investigations would include characterisation of signalling pathways of pattern
266 recognition agonists, regulatory elements of innate immunity and selective
267 immunomodulatory effects of HDPs.

268 Development of host-defence peptide-based agents for systemic administration
269 will require considerable efforts to overcome some of the limitations mentioned above.
270 However, improvements that address some of the limitations of promising candidate
271 peptides have been reported. Substitution of *D*-amino acids into the peptide sequence of
272 LL-37 derivatives was shown to minimise proteolysis and increase antibacterial activity
273 (Stromstedt, *et al.*, 2009) and the *in-vitro* cytotoxic effects of LL-37 have been reduced
274 by truncation of the sequence while antibacterial activity is retained (Nell, *et al.*, 2006).
275 Modifications that increase overall charge or amphipathicity increase potency, allowing
276 lower concentrations to be used (Chen, *et al.*, 2005). Pharmacokinetic properties have
277 improved with the conversion of some host defence peptides, to peptidomimetic or
278 peptoid forms, use of *D*- or β - amino acids and PEGylation (Hong, *et al.*, 1999,
279 Hamamoto, *et al.*, 2002, Hancock & Sahl, 2006, Imura, *et al.*, 2007). Some of these host
280 defence mimics, in addition to their excellent drug-like properties, failed to generate
281 resistant derivatives of *S. aureus in-vitro* compared to ciprofloxacin or norfloxacin (Tew,
282 *et al.*, 2006).

283 Targeted delivery of host defence peptides to the site of infection may further
284 improve the therapeutic potential of these molecules. The increased local concentrations
285 that could be reached with this approach could potentially remove constraints due to
286 higher relative MICs for some HDPs. Improved delivery has had some success in the area
287 of host defence peptides as candidates for anticancer therapy, including conjugation to a
288 ‘tumour-homing’ motif, peptide hormone or antibody, bioconversion to an active agent
289 by tumour-specific enzymes and liposomal technology (Ellerby, *et al.*, 1999, Marks, *et*
290 *al.*, 2005, Mader & Hoskin, 2006, Chakrapani, *et al.*, 2008, Jia, *et al.*, 2008, Song, *et al.*,
291 2009). The identification and assessment of similar targeting approaches for delivery of
292 defence peptides to sites of infection is in its infancy with antibody conjugation of a
293 synthetic derivative of a salivary host defence peptide, histatin serving as an example.
294 While pro-peptide inactivity in this case has not been clearly demonstrated, with
295 improved design, the approach has clear therapeutic potential (Szynol, *et al.*, 2006). In the
296 MRSA field, the further development of cationic peptides for systemic use as targeted
297 candidates against MRSA will depend on the selection of appropriate effective,
298 candidates that are amenable to chemical modification and the design of bacterial or site
299 of infection-mediated targeting approaches.

300 Another limitation to the therapeutic application of peptide based anti-infectives is
301 the high cost associated with chemical synthesis in large quantities. Synthetic mimics of
302 antimicrobial peptides that have an unnatural backbone but maintain the biophysical
303 characteristics of CAMPs offer a cost advantage (Rotem & Mor, 2009). Recently the
304 economic feasibility of chemical synthesis on a multi-tonne scale has been demonstrated
305 for the biomimetic anti-retroviral agent, enfuvirtide (Bray, 2003). Large-scale
306 recombinant production of the fungal defensin, plectasin, has been achieved at

307 commercially viable yield and purity, from cultures of the yeast, *Aspergillus oryzae*
308 (Mygind, *et al.*, 2005). Methodologies for large-scale industrial production of seven
309 recombinant host defence peptides representative of those that are currently undergoing
310 clinical trials, have recently been developed by fusion to sumoase protease (SUMO),
311 cloning into *E. coli* and a two step purification of the fusion product from the culture.
312 This expression system gave high yields of intact and biologically active peptides and has
313 demonstrated a cost-effective means of HDP production under good laboratory
314 manufacturing processes (GMP) that would be required for human therapeutic
315 applications (Bommarius, *et al.*, 2010).

316

317 **THERAPEUTIC APPROACHES THAT TARGET MRSA VIRULENCE**

318 Another novel approach to the development of anti-staphylococcal agents with
319 reduced capacity to elicit bacterial resistance is the development of ‘anti-pathogenic’
320 agents. These agents are designed to interfere with bacterial virulence mechanisms
321 including binding to host tissues, evasion of phagocytosis, biofilm production and the
322 production of toxins. The limited anti-bacterial activity of such agents may minimise the
323 development of resistance while controlling the pathogenic process through diminished
324 bacterial virulence. Controlling pathogenic processes in this way, may allow the host
325 immune response to more effectively overcome the infection. However, these agents
326 could serve as adjuncts for immunocompromised patients. This anti-pathogenic approach,
327 which relies on the identification and characterisation of appropriate virulence targets, has
328 been an academic research pursuit for over two decades. Promising targets that may be
329 disrupted amongst *S. aureus*, in the development of novel anti-pathogenic drugs include
330 the accessory gene regulator (*agr*), sortase enzyme system, the carotenoid biosynthetic

331 pathway and other recently discovered regulatory pathways. These systems contribute to
332 the ability of *S. aureus* to effectively invade and damage the host and therefore their
333 modulation represents a novel strategy in the anti-infective field and should be further
334 explored.

335

336 **THE QUORUM SENSING RESPONSE**

337 The quorum-sensing response in *S. aureus* describes the coordinated expression of
338 virulence genes in response to bacterial cell density and is modulated by complex
339 regulatory systems, the best characterised of which is the accessory gene regulator (*agr*).
340 *Agr* modulation contributes to the expression of a variety of virulence genes at different
341 stages of infection through quorum sensing auto-inducing peptide (AIP) signals.
342 (Novick, 2003, Cheung, *et al.*, 2004). This role for *agr* in the inverse coordinated
343 expression of genes that promote colonization and invasion has prompted many
344 researchers to pursue *agr* as an anti-virulence target. Specific molecules in the *agr*
345 system, AIP and RNAPIII (the effector molecule) have been investigated as potential
346 targets for inhibition (Dell'Acqua, *et al.*, 2004, Qazi, *et al.*, 2006, Balaban, *et al.*, 2007,
347 George, *et al.*, 2008). A global inhibitor of *S. aureus* AIPs was designed based on
348 structure-function analysis and consists of a truncated thiolactone region of AIP-II (Lyon,
349 *et al.*, 2000) and more recently investigations of a series of synthetic mimetics of this
350 region have revealed the minimum structural requirements for inhibition (George, *et al.*,
351 2008). Early administration of an AIP analogue attenuated abscess formation in a
352 mouse subcutaneous abscess model but based on their findings, the authors suggest that
353 administration of such quorum sensing inhibitors for *S. aureus* infections may be only of
354 prophylactic value based on the kinetics of AIP activation (Wright, *et al.*, 2005).

355 The potential of targeting *agr* for the treatment of device-related infections, which
356 are difficult to treat with conventional antibiotics due to biofilm production, has been
357 demonstrated by inhibition of this regulatory system with RNAIII-inhibiting peptide
358 (RIP). This peptide caused a significant dose and duration-dependent reduction in
359 bacterial load in MRSA graft infections in rats, which was further reduced when RIP was
360 administered in combination with teicoplanin (Balaban, *et al.*, 2007, Simonetti, *et al.*,
361 2008). The therapeutic efficacy and safety of RIP and two synthetic analogues of RIP
362 have also been shown in histopathological studies in a mouse model of *S. aureus* sepsis
363 (Ribeiro, *et al.*, 2003). Although the target of RNAIII activating peptide (TRAP) has
364 controversially been shown not to function in *S. aureus* pathogenesis (Shaw, *et al.*, 2007),
365 RIP has been shown to reduce staphylococcal infection in several *in-vivo* models of
366 infection and no toxicity has been noted. With regard to biofilm dispersal however, it has
367 conversely been shown *in-vitro*, that *agr* inhibition is required for biofilm formation and
368 biofilm dispersal has been demonstrated with the addition of AIP to up-regulate *agr*-
369 induced protease production (Boles & Horswill, 2008).

370

371 More recently the non-ribosomal secondary metabolite, aureusamine was
372 reported to regulate virulence gene expression and the isogenic *ausA* mutant, which failed
373 to haemolyse blood agar, had attenuated virulence in a mouse model of infection
374 compared to the wild-type strain (Wyatt, *et al.*). This reported role for aureusamine in
375 virulence gene regulation was later found to be due to an inadvertent mutation in the
376 *SaeR* two component regulator system (Sun, *et al.*, 2011). The controversies surrounding
377 the genetic stability of the *agr* locus in laboratory strains and the complexity of the roles
378 of RIP, AIP and aureusamine in *S. aureus* pathogenesis has hampered progress in

379 targeting quorum sensing systems for the discovery of novel anti-infectives. Nonetheless
380 these studies have been important in demonstrating the therapeutic potential of targeting
381 virulence mechanisms and have prompted the study of other pleiotrophic regulators. With
382 regard to novel therapeutic agents to inhibit *agr*-mediated virulence expression, the
383 discovery of new molecules may be advanced due to the development of a simple,
384 inexpensive assay to allow screening of large numbers of molecules for their effects on *S.*
385 *aureus* virulence. This system is based on the observation of colour changes in response
386 to the candidate molecule, in the growth media of *S. aureus* strains with *lacZ* fusions to
387 the *agr*-regulated genes, *spa* and *hla*, in the presence of a beta-galactosidase substrate
388 (Nielsen, *et al.*, 2010)

389 .

390 ***S. AUREUS* SORTASE ENZYMES**

391 Attachment of *S. aureus* to host endothelial tissue is facilitated by proteins that
392 recognise specific tissue components such as fibrinogen, fibrin and collagen. The activity
393 of these, so called microbial surface components recognising adhesive matrix molecules
394 (MSCRAMMS) is dependent on their covalent attachment to bacterial peptidoglycan.
395 The anchoring of these molecules to the cell wall is catalysed by a group of cysteine
396 transpeptidases called the sortase enzymes (Figure 3), which in *S. aureus* include two
397 isoforms, SrtA and SrtB (Mazmanian, *et al.*, 1999, Mazmanian, *et al.*, 2002). SrtA is
398 constitutively expressed while SrtB is expressed in response to low iron conditions.
399 Deletion of the sortase A gene (*srtA*) in *S. aureus*, results in failure to display
400 MSCRAMMs and therefore attachment to host components including IgG, fibronectin
401 and fibrinogen. In a mouse model of *S. aureus* infection, mutants lacking *srtA* had a 2 log
402 reduction in bacterial growth in multiple organs and a 1.5 log increase in lethal dose

403 compared to the wild type (Mazmanian, *et al.*, 2000). Later investigations demonstrated
404 that *srtA* knock-out mutants showed reduced virulence in models of septic arthritis and
405 endocarditis (Jonsson, *et al.*, 2003, Weiss, *et al.*, 2004).

406 It has been recently shown that disruption of *srtA* in five biofilm-producing
407 clinical isolates of MRSA results in significant reduction (up to six fold) in glucose-
408 induced biofilm formation which can be reversed by complementation (O'Neill, *et al.*,
409 2008). The SrtB enzyme has a role specifically in the attachment of iron acquisition
410 proteins such as IsdA, isdB etc and mutants that lack the *SrtB* gene are also associated
411 with reduced virulence in the mouse model of septic arthritis but only in the later stages
412 of infection when iron is limited in the environment (Jonsson, *et al.*, 2003).

413 The pathogenesis of *S. aureus* in persistent infections is linked to its ability to
414 survive within macrophages where it is protected from the host immune response.
415 Expression of *SrtA* has also been shown to be critical to phagosomal survival of *S. aureus*
416 as *SrtA* mutants are efficiently killed by macrophages (Kubica, *et al.*, 2008). These
417 studies suggest that SrtA specifically may be a potential target for the development of
418 novel anti-infective agents and may have specific application for complicated or
419 persistent *S. aureus* infection including those involving biofilms. Selective toxicity by
420 sortase inhibition is possible as there is no related sortase homologue in eukaryotic cells.
421 The localisation of SrtA within the cell-membrane of *S. aureus* and other Gram-positive
422 organisms offers an advantage in terms of the ease of access to this target where the
423 activity of potential inhibitors will not rely on transport across the cell envelope. It has
424 been speculated that bacterial resistance to sortase inhibition would be reduced compared
425 to classical antibiotics given that *SrtA* mutants have similar growth rates to the wild type
426 (Weiss, *et al.*, 2004). The lack of disruption to essential gene function by *SrtA* mutation

427 or inhibition, together with significantly attenuated virulence potential associated with
428 loss of sortase activity suggests that selective pressure would not be as significant for
429 these possible agents as it is for antibiotics such as penicillin or aminoglycosides where
430 the target is essential for cell survival and where selective pressure would favour the
431 development of resistance. Numerous molecules have been investigated as potential
432 inhibitors of sortase enzymes. Some of the most promising of these have been discovered
433 by small molecule screening and were selected based on their ‘drug-like’ structures. For
434 example, Oh and colleagues discovered a novel class of *S. aureus* sortase inhibitors, the
435 diarylacrylonitriles, from a library of 1000 small molecules. Modification of the lead
436 compound from the initial screen, resulted in a reduction in IC_{50} from 231 μM to 9.244
437 μM (Oh, *et al.*, 2004). These authors have further shown that this molecule, (Z)-3-(2,5-
438 dimethoxyphenyl)-2-(4-methoxyphenyl) acrylonitrile (DMMA) was effective in an *in-*
439 *vivo* mouse model of *S. aureus* infection. Survival rates increased and joint and bone
440 infections decreased in the treated animals compared to controls (Oh, *et al.*, 2010). The
441 aryl (β -amino) ethyl ketones (AAEKs) were also selected from a large screening library
442 of small molecules. These are mechanism-based enzyme inhibitors that have selectivity
443 for *S. aureus* SrtA with IC_{50} and K_i values in the low micromolar range (lead compounds
444 IC_{50} 15-47 μM) (Maresso, *et al.*, 2007). More recently, pyridazinone and pyrazolethione
445 analogues, selected from over 300,000 small molecules, have been shown to reversibly
446 inhibit SrtA with IC_{50} s in the high nanomolar range (Suree, *et al.*, 2009).

447 Sortase remains an attractive candidate as an antivirulence target and the
448 discovery of several distinct sortase inhibitors with activities in the nano- to micro-molar
449 range and with drug-like properties is encouraging. However, challenges remain that

450 require further investigation. The inhibition of sortase enzymes, by preventing the display
451 of surface antigen, may dampen the host immune response which is required for bacterial
452 clearance. Furthermore, bacterial clearance, even for virulence attenuated bacteria,
453 requires active opsonophagocytic killing which may be impaired in the
454 immunocompromised patient. A pharmacological evaluation of sortase inhibitors should
455 be carried out, to assess therapeutic efficacy and toxicity. Further discoveries are needed
456 to increase the pool of molecules available for further investigation as potential
457 therapeutic agents. The further advancement of these discoveries will be initially guided
458 by their properties in *in-vivo* models of infection.

459

460 **STAPHYLOXANTHIN BIOSYNTHESIS**

461 The antioxidant properties of the carotenoid pigment, staphyloxanthin, responsible
462 for the golden colour of *S. aureus*, protects the organism from reactive oxygen species
463 produced by neutrophils (Liu, *et al.*, 2005). This finding suggests that modulation of this
464 metabolic pathway may have anti-pathogenic effects. In a mouse subcutaneous model of
465 infection, mice infected with *S. aureus* mutants lacking this pigment have significantly
466 reduced bacterial loads and no visible lesions compared to the wild-type strain (Liu, *et*
467 *al.*, 2005). Increased bacterial clearance of staphyloxanthin mutant compared to the wild-
468 type was also shown by these authors in a murine model of nasal colonization (Liu, *et al.*,
469 2008).

470 One of the key enzymes in staphyloxanthin biosynthesis is *S. aureus*
471 dehydrosqualene synthase (SQS or CrtM) which catalyses the condensation of two
472 molecules of isoprenoid farnesyl diphosphate to form dehydrosqualene. Interestingly,
473 there is overlap between the early steps of staphyloxanthin biosynthesis and human

474 cholesterol biosynthesis. Human SQS and the bacterial enzyme CrtM have 30 %
475 sequence identity but have been shown to share significant structural features (Liu, *et al.*,
476 2008). Furthermore, compounds originally developed as cholesterol-lowering agents have
477 been shown to inhibit *S. aureus* CrtM in the nanomolar range and have been investigated
478 as potential anti-pathogenic agents (Liu, *et al.*, 2008). Two cholesterol lowering agents,
479 lapaquistat acetate and squalastatin interact with both human squalene synthase and *S.*
480 *aureus* CrtM at specific common residues (Kahlon, *et al.*, 2010). Among the most potent
481 inhibitors of CrtM that also prevent staphyloxanthin formation in cellular assays, are the
482 phosphosulphonates with K_i in the range 1.5-135 nM and the diphenyl ether
483 phosphonoacetamides with K_i in the range 30-70 nM. The most potent of the
484 phosphosulphonates (designated BPH652) was further tested because it had advanced
485 through preclinical animal testing and two human clinical trials as a cholesterol-lowering
486 agent (Sharma, *et al.*, 1998a, Sharma, *et al.*, 1998b). No inhibition of the growth of three
487 human cell-lines was found up to a concentration of 300 μ M BPH652. The *in-vivo*
488 activity of BPH652 has also been determined in a mouse model of systemic *S. aureus*
489 infection and 96 % reduction in *S. aureus* colony forming units was achieved in the
490 treated group (Song, *et al.*, 2009). The question of selectivity for the *S. aureus* CrtM over
491 human SQS has also been addressed by these authors and several halogen-substituted
492 derivatives show selectivity for the bacterial enzyme (Song, *et al.*, 2009).

493 The diphenyl ether phosphonoacetamides have further improved properties in
494 terms of their uptake into cells ($IC_{50} = 8nM$) while retaining their selectivity for the
495 bacterial enzyme and their negligible toxicity in human cell lines (Song, *et al.*, 2009). The
496 inhibition of the staphyloxanthin pathway in *S. aureus*, as anti-virulence agents is

497 attractive, because many cholesterol-lowering agents have previously undergone clinical
498 trials and their toxicities and pharmacokinetic properties are already known (Liu, *et al.*,
499 2008). Further testing of the improved molecules described above, in animal infection
500 models will be eagerly awaited.

501 The pigmentation of *S. aureus* due to staphyloxanthin can be exploited in the
502 development of technologies for rapid screening of candidate inhibitory molecules and
503 one such system has been used successfully to identify at least four known inhibitors of
504 lipid metabolism that reduce staphyloxanthin pigmentation, from a natural compounds
505 library (Sakai, *et al.*, 2012).

506

507

508 CONCLUSION

509 The anti-infectives industry appears to rely on the development of further
510 generations of conventional antibiotics which have improved properties but do not offer
511 new modes of action. Here, we have highlighted areas where basic and applied research
512 has demonstrated the potential of novel anti-MRSA therapies. It is clear however that
513 further research is required to determine when and how these compounds can be
514 administered. Investment in generating convincing *in-vivo* data that supports a protective
515 role for novel therapeutic agents with minimum side-effects is required. Given that the
516 majority of patients requiring therapeutic intervention for *S. aureus* infection are
517 immunocompromised, it appears that both of the approaches discussed here, would have
518 potential as adjuvant therapies rather than their exclusive use as anti-infectives. It is
519 interesting therefore, that synergistic *in-vitro* and *in-vivo* effects have been reported using
520 a combination of two HDPs and vancomycin (Cirioni, *et al.*, 2006) and a potential

521 advantage of the administration of pexiganan with β -lactam antibiotics has also been
522 demonstrated (Giacometti, *et al.*, 2005). These combined applications would potentially
523 extend the therapeutic effectiveness of current antibiotics. Anti-virulence approaches,
524 aimed at modulating the pathogenic effects of *S. aureus* infection, could also be
525 investigated in conjunction with conventional antibiotics.

526

527 **Figure Legends**

528

529

530

531 **Figure 1. New MRSA agents in clinical use (*) and MRSA agents in development**

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533

534

535 **Figure 2. Dual effects of host defence peptides**

536

537 Host defence peptides can exert anti-bacterial effects directly by forming pores in the cell
538 membrane or can modulate the immune response to infection by inducing transcription of
539 cytokines or directing cellular components of the immune system such as neutrophils,
540 dendritic cells, monocytes and macrophages to the site of infection.

541

542

543 **Figure 3. Mechanism of sortase processing of MSCRAAMS.** Sortase B cleaves at the

544 LPXTG motif to allow display of MSCRAAMS at cell surface. Their display facilitates

545 adhesion to host cells. If sortase is inhibited, the bacterial cell has reduced adhesion to the

546 host cell as the surface adhesins are not displayed.

547 IL8

548

549 **TRANSPARENCY DECLARATION**

550 HH has had recent research collaborations with Steris Corporation, 3M, Inov8 Science,
551 Pfizer & Cepheid. He has also recently received lecture & other fees from 3M, Novartis
552 & Astellas. DF, MD none to declare.
553

Table 1. Examples of natural cationic peptides with potential for development as *S. aureus* anti-infectives

Peptide Name	Source	Amino acid sequence	Proposed mechanism	MIC in mg/L ^a	Stage of development
Buforin II	Asian Toad (<i>Bufo bufo gargarizans</i>) stomach	TRSSRAGLQWPVGRVHRL LRK	Translocation and interaction with nucleic acids (Park, <i>et al.</i> , 1998)	8 ^b (Giacometti, <i>et al.</i> , 2000)	Pre-clinical
LL-37	Human (neutrophils and epithelial cells)	LLGDFFRKSKEKIGKEFKR IVQRIKDFLRNLVPRTES	Translocation and interaction with intracellular target. Monocyte, T-cell, neutrophil chemotaxis	31 (Bals, <i>et al.</i> , 1998)	Pre-clinical
Bac8c	Synthetic derivative of bactenecin from bovine neutrophils	RIWVIWRR	Membrane depolarisation and cytoplasmic permeabilization (Spindler, <i>et al.</i> , 2011)	2 (Hilpert, <i>et al.</i> , 2005)	Pre-clinical
Temporin10a	Frog (<i>Rana ornativentris</i>) skin	FLPLASLFSRLL	Pore formation, membrane depolarization (Kim, <i>et al.</i> , 2001)	0.014 ^c (Kim, <i>et al.</i> , 2001)	Pre-clinical
Syphaxin (SPX1-22)	Frog (<i>Leptodactylus siphax</i>) skin	GVL DILKGA AKDLAGHVA TKVINKI	Not elucidated	31.9 ^c (Dourado, <i>et al.</i> , 2007)	Pre-clinical
Iseganan (IB-367)	Derivative of protegrin from porcine neutrophils	RGGL ^c YCRGRFC ^c V ^c GR	Pore formation, membrane depolarization (Sokolov, <i>et al.</i> , 1999)	4 (Mosca, <i>et al.</i> , 2000)	Treatment of oral mucositis. Phase III clinical trials
Pexiganan (MSI-78)	Magainan analogue	GIGKFLKKAKKFGKAFVKI LKK	Cell membrane disruption and pore formation	16-64 ^d (Fuchs, <i>et al.</i> , 1998)	Topical treatment of diabetic foot ulcers. Phase III clinical trials
PMX-30063D	Defensin peptide mimetic	n/a	Membrane disruption	≤ 2 ^e	Acute SSTI. Phase II clinical trials

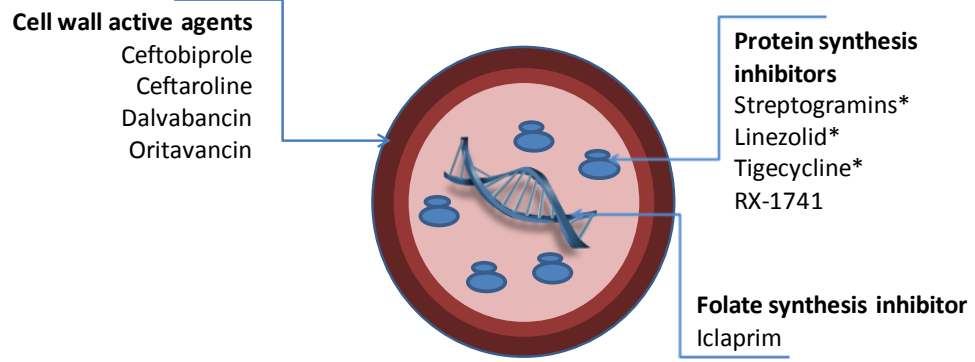
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558 ^a Clinical Laboratory Standards Institute (CLSI) broth microdilution method with modifications, unless indicated otherwise.559 ^b 90% inhibition, standard CLSI methods.560 ^c Units have been converted from μM to mg/L561 ^d Mean MIC at which 90 % of *S. aureus* (n=10) or MRSA (n=15) isolates were inhibited

562

563 ^e http://irgnews.com/sites/default/themes/publisher/images/companies/PYMX/PYMX-PMX-30063_fs.pdf



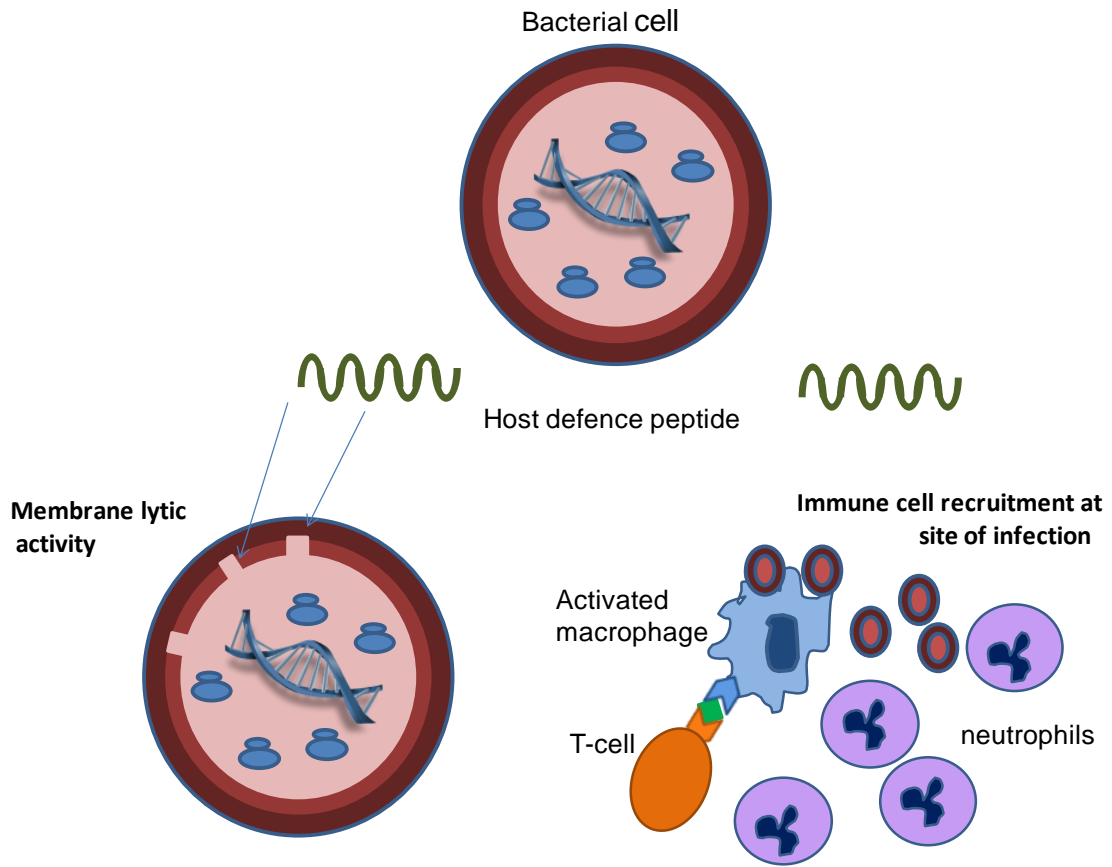
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566 Figure 1

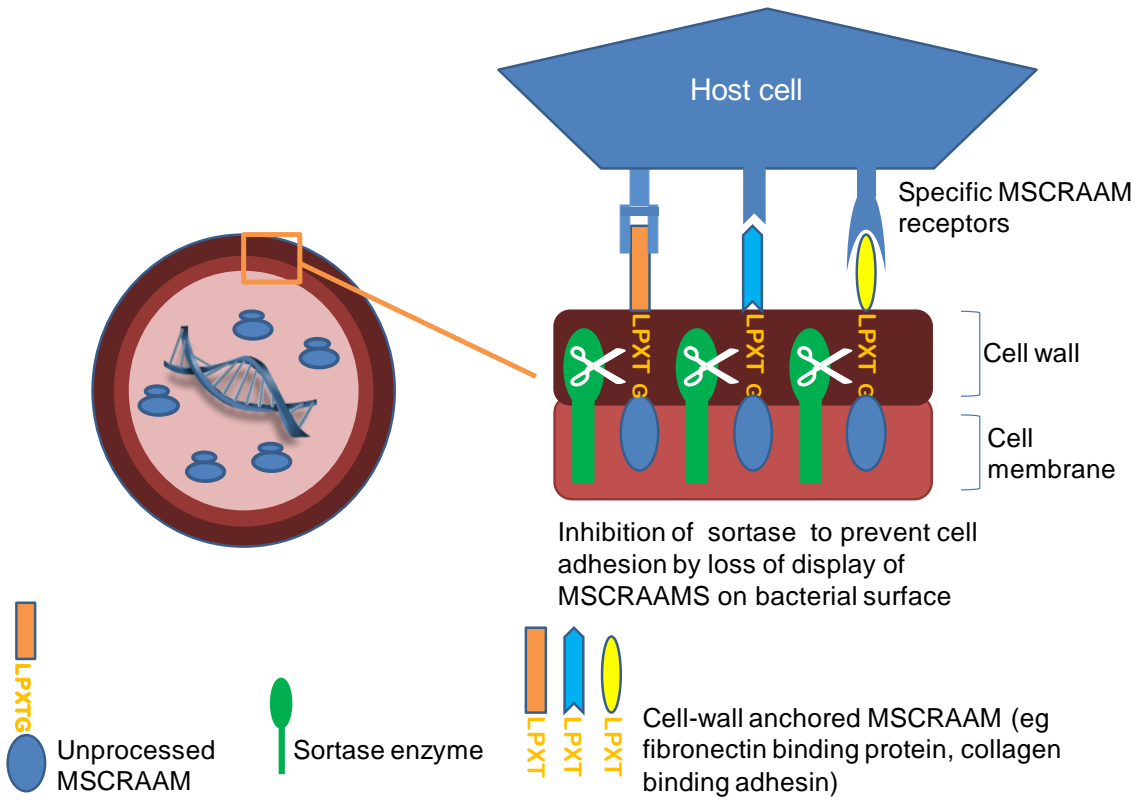
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873 **Figure Legends**

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877 **Figure 1. New MRSA agents in clinical use (*) and MRSA agents in development**

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881 **Figure 2. Dual effects of host defence peptides**

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883 Host defence peptides can exert anti-bacterial effects directly by forming pores in the cell

884 membrane or can modulate the immune response to infection by inducing transcription of

885 cytokines or directing cellular components of the immune system such as neutrophils,

886 dendritic cells, monocytes and macrophages to the site of infection.

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889 **Figure 3. Mechanism of sortase processing of MSCRAAMS.** Sortase B cleaves at the

890 LPXTG motif to allow display of MSCRAAMS at cell surface. Their display facilitates

891 adhesion to host cells. If sortase is inhibited, the bacterial cell has reduced adhesion to the

892 host cell as the surface adhesins are not displayed.

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