ETHzürich Enhancing bacteriophage therapeutics through in situ production and release of heterologous antimicrobial effectors

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Background

While conventional antibiotics remain the most effective treatments against bacterial infections, the global emergence and spread of antimicrobial resistance (AMR) highlight the need for developing novel and more pathogen-specific antimicrobial interventions.

Bacterial viruses - bacteriophages - are highly promising alternatives because of their pathogen specificity and ability to self-replicate at infection sites; however, as observed with antibiotics, bacteria also develop resistances to phage therapy.

Using genetic engineering we can bypass the inherent limitations of natural phages as therapeutics. Here, we describe the development of phages for target-specific effector gene delivery and host-dependent production of colicin-like bacteriocins and cell wall hydrolases (endolysins). Using urinary tract infection (UTI) as a model, we show how heterologous effector phage therapeutics (HEPTs) suppress resistance and improve uropathogen killing by dual phage- & effector-mediated targeting.



≻<mark>ቆ☆ (></mark> 9₽ > **Released effector activity** effector gen Lysis and release E. coli K. pneumoniae Host / producer E. faecalis



Genes for colicin E7 or klebicin M are engineered into the structural cassette of phages E2 and K1 genomes to generate HEPTs targeting E. coli (E2::colE7) or K. pneumoniae (K1::kvarM).





Heterologous effector phage therapeutics (HEPTs) enable pathogen-specific gene delivery and production of antimicrobial effector genes (yellow). Upon phage-induced host cell lysis, effector proteins (e.g., colicins) are released alongside progeny virions to exert a secondary antimicrobial activity against defined bacterial targets. HEPTs were designed against uropathogens E. coli, K. pneumoniae, and E. faecalis (not shown here).

The HEPT Principle: A Two-Pronged Attack!

Genetic Engineering Strategies at ETH Zurich



Combined with Companion Diagnostics



HEPTs are More Effective than Wildtype Phages



Versus mono-cultures. Turbidity reduction assays combined with timepoint plating (★) demonstrates improved antimicrobial activity (i.e., bacterial regrowth is avoided or delayed) for E2::colE7 (left) and K1::kvarM (right) compared to WT phage treatment of uropathogenic E. coli and K. pneumoniae monocultures, respectively.



Combination treatment of E. coli / K. pneumoniae co-cultures using combinations of selftargeting HEPTs (left) or cross-targeting HEPTs (right). Cultures of E. coli and K. pneumoniae were adjusted to 1x10⁸ CFU/mL, mixed at a ratio of 1:1, and infected with the indicated WT phages and/or HEPTs (5x10⁷ PFU/mL). Optical density was monitored over 18 h, followed by differential plating on chromogenic coliform agar (matching box and curve colors).

39 urine samples were subjected to a bioluminescence-based (E2::*nluc*) reporter phage assay to identify phage E2-sensitive *E. coli* in patient urine within 4.5 h. Killing of patient isolates was assessed *in vitro* (synthetic human urine; SHU) using E2::*colE7* or E2 WT.



The colicin-E7 carrying HEPT phage presents enhanced killing of *E. coli* in fresh patient urine as well as in SHU, provided that the isolate is susceptible to both phage and effector, e.g., colicin E7.

The Future of HEPTs as Therapeutics



This therapeutic approach is unique and may lead to a breakthrough in the fight against antibiotic resistance worldwide by providing an alternative and effective treatment for UTIs, catheter-associated UTIs (CAUTIs), and other important bacterial infections.