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Article

# Botulinum Toxin Complex Serotype B-Okra Exerts Oral Toxicity by Disrupting the Intestinal Epithelial Barrier

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## Abstract

Botulinum toxin (BoNT) causes flaccid paralysis by blocking the release of neurotransmitters. BoNTs associate with neurotoxin-associated proteins (NAPs) to form a medium progenitor toxin complex (PTC) (M-PTC) and large PTC (L-PTC). The L-PTC serotype A-62A (L-PTC/A\_62A) specifically targets intestinal M cells for invasion, whereas L-PTC serotype B-Okra (L-PTC/B\_Okra), which exhibits higher oral toxicity, is mainly taken up by enterocytes. Hemagglutinin (HA) is a NAPs that promotes BoNT absorption from the intestine and has carbohydrate-binding and barrier-disrupting activities. In this study, we established an *in vitro* reconstitution and purification system for recombinant L-PTC/B\_Okra and created a recombinant L-PTC/B\_Okra mutant rL-PTC/BB-KA with carbohydrate-binding activity but not barrier-disrupting activity. rL-PTC/BB-KA significantly reduced the oral toxicity. Our results demonstrate that the toxin of B-Okra disrupts the epithelial barrier of enterocytes and exerts oral toxicity.

**Keywords:** *Clostridium botulinum*; botulinum toxin; botulinum toxin complex; *in vitro* reconstitution; hemagglutinin; E-cadherin; epithelial barrier

**Key Contribution:** Botulinum toxin complex serotype B-Okra disrupts the epithelial barrier of enterocytes; leading to high oral toxicity

## 1. Introduction

Botulinum toxin (BoNT) is the most potent toxin that causes botulism, a life-threatening condition characterized by flaccid paralysis. BoNT blocks neurotransmitter release by cleaving soluble *N*-ethylmaleimide-sensitive-factor attachment protein receptor (SNARE) proteins at the presynaptic terminals of neurons [1]. BoNTs are produced by *Clostridium botulinum* and related species as progenitor toxin complexes (PTCs) with neurotoxin-associated proteins (NAPs) [2]. NAPs comprise a non-toxic non-hemagglutinin (NTNHA) and three hemagglutinins (HAs: HA1, HA2, and HA3). NTNHA associates with BoNT to form M-PTC and protects the toxin from digestion and destabilization in gastrointestinal juice [2,3]. The HA complex is assembled from six HA1, three HA2, and three HA3 [4,5], and associates with medium PTC (M-PTC) to form large PTC (L-PTC), which exhibits approximately 700-fold higher oral toxicity than M-PTC [2,6]. HA facilitates the intestinal absorption of BoNTs through at least two activities: carbohydrate-binding [5,7–12] and barrier-disrupting [11–18]. L-PTC binds to the luminal surface of the intestinal epithelial cells via HA's carbohydrate-binding activity [7,19–25]. After transcytosis from the apical to the basolateral surface,

HA binds to E-cadherin and inhibits cell-cell adhesion; HA disrupts the epithelial barrier, resulting in the paracellular transport of BoNT across the intestine [13,15,17].

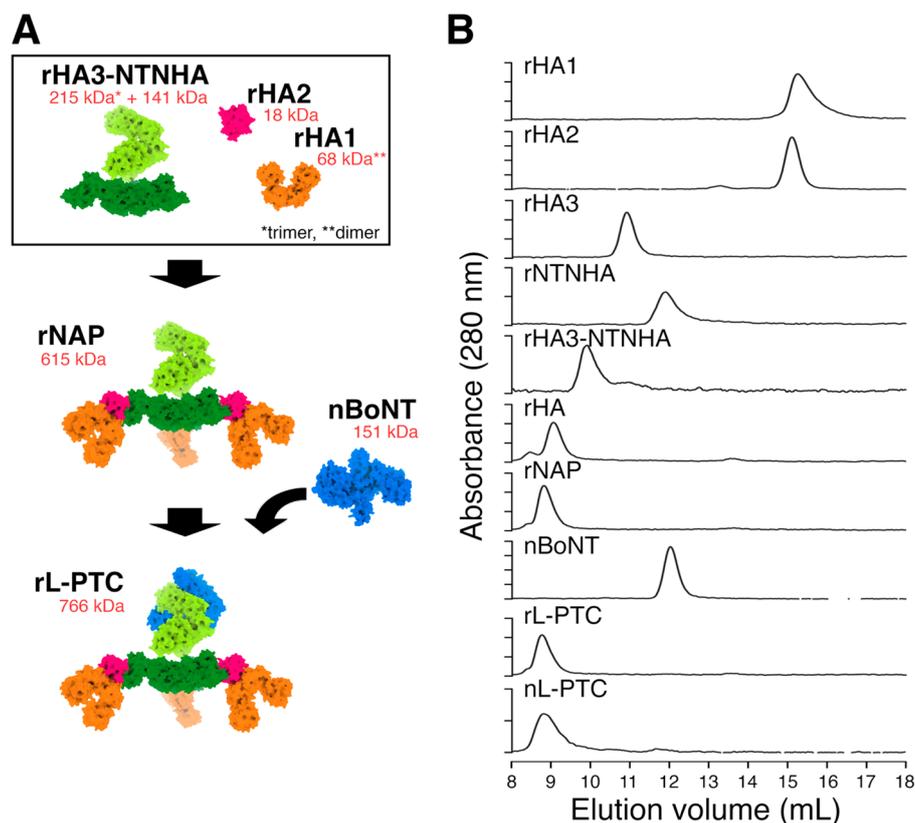
BoNTs have been classified into seven serotypes (A-G), of which serotypes A, B, E, and F cause human botulism [26]. L-PTCs are classified as “hyper-oral-toxic (HOT)” or “non-HOT” based on their relative oral toxicity levels [2,6,25]. These classes can be categorized based on the carbohydrate-binding activity of HA [25]. L-PTC serotype A-62A (L-PTC/A\_62A), a non-hyper-oral-toxic toxin, targets intestinal microfold (M) cells for entry [23], exerting oral toxicity by disrupting the epithelial barrier around M cells [17,23]. In contrast, L-PTC serotype B-Okra (L-PTC/B\_Okra), which exhibits 20–80 fold greater oral toxicity and is classified as HOT-type, is taken up by enterocytes (also known as intestinal absorptive cells) [25]. The HA of L-PTC/B\_Okra increased the intestinal permeability of FITC-dextran and PTCs [13], although the effect of the barrier-disrupting activity of L-PTC/B\_Okra on oral toxicity remains unclear.

In this study, we established an *in vitro* reconstitution and purification system for recombinant L-PTC/B\_Okra and created a recombinant L-PTC/B\_Okra mutant with carbohydrate-binding activity, but not barrier-disrupting activity (rL-PTC/BB-KA). Our results demonstrate that the barrier-disrupting activity of the HOT-type toxin L-PTC/B\_Okra is critically involved in its oral toxicity.

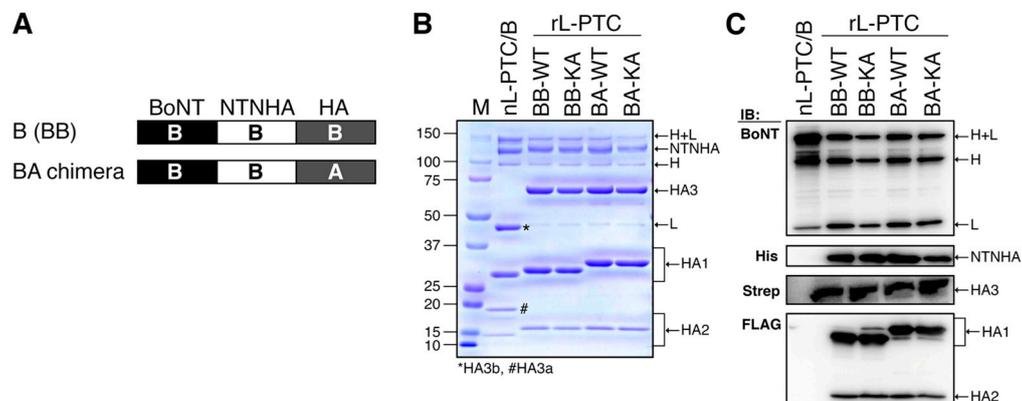
## 2. Results

### 2.1. In Vitro Reconstitution and Purification of Recombinant L-PTC (rL-PTC)

To elucidate the impact of HA differences between L-PTC/B and L-PTC/A on oral toxicity, we created rL-PTC/B (also termed rL-PTC/BB-WT) and a chimeric rL-PTC/B comprising HA/A instead of HA/B (rL-PTC/BA-WT) (Figures 1 and 2A-C) [25]. HA3 Lys607 is crucial for the binding of HA to E-cadherin, and its alanine substitution (K607A, KA) impairs E-cadherin binding and barrier-disrupting activities [16]. We also generated rL-PTCs containing HA3-K607A (rL-PTC/BB-KA and rL-PTC/BA-KA) (Figure 2B,C). These rL-PTCs contained similar amounts of BoNT/B, NTNHA/B, and HAs (Figure 2B,C).



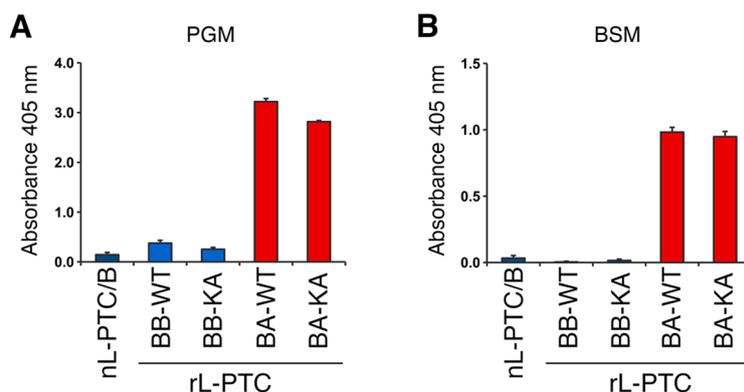
**Figure 1.** *In vitro* reconstitution of recombinant large progenitor toxin complex derived from *C. botulinum* serotype B-Okra (rL-PTC/B). (A) Schematic model of *in vitro* reconstitution of rL-PTC. (B) Size exclusion chromatography (SEC) analysis. Recombinant proteins (rL-PTC/B, rNAP/B, rNTNHA/B, and rHAs/B) and native proteins (nL-PTC/B and nBoNT) were subjected to SEC. Protein elution profiles were monitored at 280 nm.



**Figure 2.** The molecular compositions of the purified rLPTCs. (A) Schematic diagram of rL-PTC serotype B-Okra (rL-PTC/B or rL-PTC/BB) and chimeric rL-PTC (rL-PTC/BA) comprising BoNT/B, NTNHA/B, and HA derived from A-62A (HA/A). The purified nL-PTC/B, rL-PTC/BB, and rL-PTC/BA were analyzed by SDS-PAGE with CBB staining (B) and western blotting (C). WT: wild type, KA: HA3-K607A mutant.

## 2.2. Carbohydrate-Binding Activity

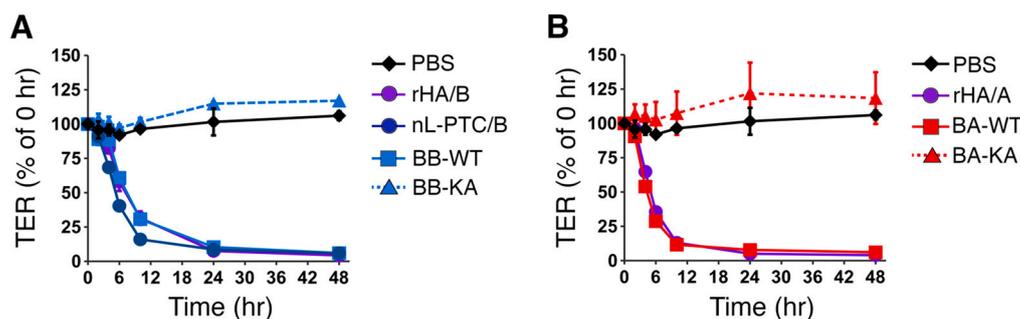
L-PTC binds to the intestinal epithelium through the carbohydrate-binding activity of HA [7,19–25]. We assessed the carbohydrate-binding activity of rL-PTCs by ELISA using porcine gastric mucin (PGM) and bovine submaxillary mucin (BSM) [16]. Similar to nL-PTC/B, rL-PTC/BB-WT and rL-PTC/BB-KA bound to PGM and BSM (Figure 3). HA/A has more extended carbohydrate-binding pockets than HA/B and binds to mucins with high affinity (Figure 3) [25]. Similar to rL-PTC/BB, rL-PTC/BA-WT and rL-PTC/BA-KA exhibited similar binding affinities for PGM and BSM (Figure 3). These data show that rL-PTC KA mutants have carbohydrate-binding activity comparable to that of rL-PTC-WT.



**Figure 3.** Carbohydrate-binding activities of rL-PTCs. HA-mediated binding of L-PTCs to porcine gastric mucin (PGM, A) and bovine submaxillary mucin (BSM, B). 10 nM L-PTCs were added to PGM- or BSM-coated ELISA plates, and then the plates were probed with anti-BoNT/B anti-serum. Data are representative of at least four independent experiments. Values are mean  $\pm$  S.E. of triplicate wells.

### 2.3. Epithelial Barrier-Disrupting Activity

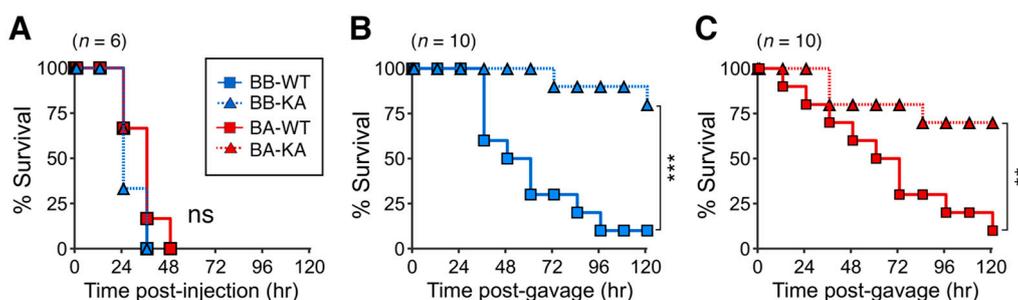
HA/A and HA/B inhibit cell-cell adhesion in epithelial cells by binding to E-cadherin, resulting in epithelial barrier disruption [11–18]. HA2 and HA3<sup>mini</sup> (aa 380-626) are responsible for the binding of HA to E-cadherin. Notably, the recombinant HA/B (rHA/B) harboring the HA3-K607A mutant is deficient in barrier-disrupting activity [16–18]. rL-PTC/BB-WT and rL-PTC/BA-WT disrupted the epithelial barrier of Caco-2 cell monolayers, similar to nL-PTC/B, rHA/B, and recombinant rHA/A (rHA/A) (Figure 4). In contrast, rL-PTC/BB-KA and rL-PTC/BA-KA had no effect on the epithelial barrier function (Figure 4). These data indicate that the HA3 K607A mutation impairs the barrier-disrupting activities of L-PTC and HA.



**Figure 4.** Barrier-disrupting activities of rL-PTCs. 10 nM L-PTCs (nL-PTC/B; rL-PTC/BB-WT, BB-WT; rL-PTC/BB-KA, BB-KA; rL-PTC/BA-WT, BA-WT; rL-PTC/BA-KA, BA-KA) and rHAs (rHA/B, rHA/A) (A: serotype B-Okra and BB, B: serotype A-62A and BA) were added to the basolateral chamber of the Caco-2 cell monolayers. Data are representative of at least two independent experiments. Values are mean  $\pm$  S.E. of duplicate (nL-PTC/B) or triplicate (the others) wells.

### 2.4. Toxicities of rL-PTC

We assessed the BoNT toxicity of rL-PTCs by intraperitoneal (i.p.) administering 200  $\mu$ g of rL-PTCs to mice. L-PTCs absorbed from the intestines or injected into the bloodstream dissociate into BoNT and NAP in the circulation [2,3]. In other words, intraperitoneal injection resulted in the toxicity of BoNT alone in the L-PTC complex. rL-PTC/BB-WT, rL-PTC/BB-KA, rL-PTC/BA-WT, and rL-PTC/BA-KA exhibited similar BoNT toxicity (Figure 5A). The oral toxicity of rL-PTCs was assessed by intragastrically (i.g.) administering 200 ng of rL-PTC/BBs or 2  $\mu$ g rL-PTC/BAs to mice. rL-PTC/BB-WT exhibited at least a 10-fold higher oral toxicity than rL-PTC/BA-WT, indicating that the difference in HA in L-PTC affected oral toxicity (Figure 5B,C) [25]. rL-PTC/BB-KA, which lacks barrier-disrupting activity (Figure 4A), exhibited dramatically reduced toxicity (Figure 5B), similar to that of rL-PTC/BA-KA (Figure 5C). These data demonstrate that barrier-disrupting activity is crucial for the oral toxicity of both serotypes, B-Okra and A-62A.



**Figure 5.** Mouse intraperitoneal and oral toxicities of rL-PTCs. (A) Female BALB/c mice were injected i.p. with 100 pg rL-PTCs ( $n = 6/\text{group}$ ). (B, C) Female BALB/c mice were gavaged with 200 ng rL-PTCs/BB ( $n = 10/\text{group}$ , B) and 2  $\mu\text{g}$  rL-PTCs/BA ( $n = 10/\text{group}$ , C). ns: not significant,  $**P < 0.01$ ,  $***P < 0.001$ ; by log-rank test.

### 3. Discussion

The large botulinum toxin complex (L-PTC) comprises 14 protein subunits, including BoNT, NTNHA, HA1, HA2, and HA3, in a 1:1:6:3:3 stoichiometry [4,5]. Consistent with a previous study on rL-PTC/A\_62A [17], we established *an in vitro* reconstitution and purification system for rL-PTC/B\_Okra using nBoNT/B\_Okra and its recombinant components (Figures 1 and 2). The rL-PTC/BB-KA mutant exhibited carbohydrate-binding and BoNT activities comparable to those of rL-PTC/BB-WT and nL-PTC/B (Figures 3 and 5A), but lacked barrier-disrupting activity (Figure 4). Our findings indicate that the KA mutation impaired the oral toxicity of rL-PTC/B (Figure 5B). These data demonstrated that barrier-disrupting activity is essential for the oral toxicity of L-PTC/B\_Okra.

We previously demonstrated that L-PTC/A\_62A enters the host through intestinal microfold (M) cells in Peyer's patches [23]. Once in the intestine, the NAP of L-PTC/A\_62A disrupts the epithelial barrier around M cells [23]. Additionally, Lee *et al.* [17] reported that the absence of this barrier-disrupting activity significantly impaired the oral toxicity of rL-PTC/A\_62A. The HA of L-PTC/A\_62A augmented oral toxicity by compromising the barrier integrity of intestinal M cells. In contrast, we recently revealed that hyper-oral-toxic (HOT)-type toxin of serotype B-Okra, unlike non-HOT-type toxin of serotype A-62A, enters the host not only through intestinal M cells but also through the absorptive epithelial cells (enterocytes) of the small intestine [25]. We found that L-PTC/B disrupts the epithelial barrier of enterocytes in the small intestine [13], and the absence of this activity reduces the oral toxicity of rL-PTC/B\_Okra (Figure 5B). In summary, we demonstrated that HA of the HOT-type toxin contributes to the high oral toxicity by compromising the barrier integrity of enterocytes.

### 4. Materials and Methods

#### 4.1. Plasmid Construction

Genomic DNA was extracted and purified from *C. botulinum* serotype B strain Okra and serotype A strain 62A. NTNHA (aa 1-1197) derived from the serotype B BoNT complex (NTNHA/B)-encoding gene, was cloned into the *NheI-SalI* site of the pET28b(+) vector (Merck) (pET28b-His-NTNHA/B). HA3 (aa 19-626) encoding genes derived from serotype B and A BoNT complexes (HA3/B and HA3/A, respectively) were cloned into the *KpnI-SalI* site of the pET52b(+) vector (Merck) (pET52b-strep-HA3/B or /A). DNA fragments encoding His-NTNHA/B and strep-HA3s were amplified by PCR and cloned into the *XbaI-SacI* and *NdeI-XhoI* sites of pETDuet(+) (Merck) using a GeneArt™ Seamless Cloning and Assembly kit (Thermo Fisher Scientific). Site-directed mutagenesis was performed using the PrimeSTAR Max Polymerase (TaKaRa Bio, Shiga, Japan). The inserted regions of these plasmids and the presence of mutations were confirmed using DNA sequencing.

#### 4.2. Protein Expression and Purification

To obtain the recombinant HA3-NTNHA (rHA3-NTNHA) complexes, *Escherichia coli* Rosetta2 (DE3) cells (Merck) transformed with the co-expression plasmids were grown in Terrific Broth (TB) media. Protein expression was induced using the Overnight Express™ Autoinduction System 1 (Merck) at 18°C for 48 hr. The cells were then harvested and lysed in a lysis buffer (50 mM Tris-HCl, pH 7.4, and 300 mM NaCl) by sonication. The His-tagged proteins were bound to HisTrap HP (Cytiva) and eluted with His elution buffer (50 mM Tris-HCl pH 7.4, 300 mM NaCl, 300 mM imidazole). To purify the HA3-NTNHA complex, the eluates were loaded onto StrepTrap HP (Cytiva) equilibrated with PBS (pH 7.4), and the bound proteins were eluted with 3 mM D-desthiobiotin.

Recombinant FLAG-tagged HA1 serotypes B and A (rHA1/B-FLAG and rHA1/A-FLAG, respectively) and recombinant FLAG-tagged HA2 serotypes B and A (FLAG-rHA2/B and FLAG-rHA2/A, respectively) were prepared as previously described [11]. Native BoNT serotype B-Okra (nBoNT/B) was prepared as described previously [29].

All proteins were dialyzed against PBS (pH 7.4 or 6.0) and stored at -80°C until needed. Protein concentrations of the samples were determined using a Pierce BCA assay (Thermo Fisher Scientific).

#### 4.3. *In Vitro* Reconstitution and Purification

Recombinant HA complexes (rHA: HA1 + HA2 + HA3) and recombinant HA1, HA2, and HA3 proteins were mixed at a molar ratio of 4:4:1 in PBS (pH 7.4). To reconstitute recombinant NAP complexes (rNAP: NTNHA + HA), recombinant HA1, HA2, and HA3-NTNHA were mixed at a molar ratio of 12:12:1 in PBS (pH 7.4). The mixtures were then incubated at 37°C for 3 hr. The complexes were purified using StrepTrap HP and dialyzed against phosphate-buffered saline PBS (pH 6.0).

To reconstitute recombinant L-PTC (rL-PTC), nBoNT/B and rNAP proteins were mixed at a molar ratio of 3:1 in PBS (pH 6.0) and incubated at 37°C for 3 hr. The rL-PTC complexes were bound to  $\alpha$ -Lactose gels (EY laboratories) equilibrated with PBS (pH 6.0) and then eluted with 0.2 M lactose. Purified proteins were dialyzed against PBS (pH 6.0). The protein concentrations of the samples were determined using a Pierce BCA assay.

#### 4.4. Size Exclusion Chromatography

10  $\mu$ g of each protein were loaded onto Superdex 200 Increase 10/300 GL column (Cytiva) equilibrated with PBS (pH 6.0) using ÄKTA pure (Cytiva).

#### 4.5. Western Blotting

Equimolar amounts of protein were separated by 15% SDS-PAGE and transferred onto Immobilon-P™ PVDF membranes (Merck). After blocking with 5% skim milk, the membranes were incubated with antibodies against BoNT/B (rabbit, anti-serum [13]), His tag (mouse monoclonal Ab, clone OGHIS, MBL), Strep-tag II tag (mouse monoclonal Ab, Cat. 71590-3, Merck), and FLAG tag (mouse monoclonal Ab, clone M2, Merck), followed by appropriate HRP-conjugated secondary antibodies (Jackson ImmunoResearch). Subsequently, the membranes were developed using ECL Select (Cytiva) and visualized with an ImageQuant™ LAS 4000 mini (Cytiva).

#### 4.6. Mucin ELISA

96-well ELISA plates (IWAKI) were coated with 100 ng/mL porcine gastric mucin (PGM; M1778, Sigma) and bovine submaxillary mucin (BSM; M3895, Sigma) at 37°C for 1 hr. After blocking with 1% BSA/PBS-T (pH 6.0), the plates were incubated with 10 nM L-PTCs or HAs at 37°C for 1 hr. After washing with PBS-T (pH 6.0), the plates were probed with antibodies against BoNT/B or FLAG tags, followed by incubation with the appropriate HRP-conjugated secondary antibodies. Subsequently, the plates were developed using ABTS (Merck), and the absorbance at 405 nm was measured.

#### 4.7. Transepithelial Electrical Resistance (TER) Assay

TER was measured using a Millicell-ERS (Merck), as described previously [13]. Briefly, Caco-2 cell monolayers were established on Transwell™ filters (Corning) and 10 nM L-PTCs or HAs were added to the basolateral chambers. TER was measured at different time points up to 48 h post-addition.

#### 4.8. Mouse Bioassay

Female BALB/c mice aged 7-8 wk were purchased from Japan SLC. The mice were fasted for 4 h before the challenge. For intraperitoneally (i.p.) administration, the mice were injected i.p. with 100

pg of rL-PTCs in 300 µL of bioassay buffer (0.1% gelatin, 10 mM NaPi, pH 6.0). For intragastric (i.g.) administration, the mice were gavaged i.g. with 200 ng of rL-PTC/BBs or 2 µg of rL-PTC/BAs in 300 µl of bioassay buffer. The mice were re-fed 1 h after the challenge, and the survival rate was assessed every 12 h over the subsequent five days. The toxins were administered in a single-blind manner, and intoxication was scored by two investigators.

**Author Contributions:** Conceptualization, S. A.; investigation, C. M., S. A., and T. M.; data analysis, M. Z.; data curation, C. M. and S. A.; writing—original draft preparation, S. A.; writing—review and editing, S. A. and Y. F.; supervision, Y. F. All authors have read and agreed to the published version of the manuscript.

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**Informed Consent Statement:** Not applicable.

**Data Availability Statement:** Not applicable.

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**Conflicts of Interest:** The authors declare no conflict of interest.

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