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**Citation:** Gil-Alonso S, Jauregizar N, Eraso E, Quindós G (2015) Postantifungal Effect of Micafungin against the Species Complexes of *Candida albicans* and *Candida parapsilosis*. PLoS ONE 10(7): e0132730. doi:10.1371/journal.pone.0132730

Editor: Joy Sturtevant, Louisiana State University, UNITED STATES

Received: March 13, 2015

Accepted: June 17, 2015

Published: July 13, 2015

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**Data Availability Statement:** All relevant data are within the paper.

Funding: This work was supported by Consejería de Educación, Universidades e Investigación (GIC12 210-IT-696-13), the Departamento de Industria, Comercio y Turismo (S-PR12UN002, S-PE13UN025) of Gobierno Vasco-Eusko Jaurlaritza, and UPV/EHU (UFI 11/25). Elena Eraso and Guillermo Quindós have received grant support from Consejería de Educación, Universidades e Investigación (GIC12 210-IT-696-13) and Departamento de Industria, Comercio y Turismo (S-PR12UN002, S-PE13UN121) of Gobierno Vasco-Eusko Jaurlaritza, Fondo de **RESEARCH ARTICLE** 

# Postantifungal Effect of Micafungin against the Species Complexes of *Candida albicans* and *Candida parapsilosis*

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# Abstract

Micafungin is an effective antifungal agent useful for the therapy of invasive candidiasis. Candida albicans is the most common cause of invasive candidiasis; however, infections due to non-C. albicans species, such as Candida parapsilosis, are rising. Killing and postantifungal effects (PAFE) are important factors in both dose interval choice and infection outcome. The aim of this study was to determinate the micafungin PAFE against 7 C. albicans strains, 5 Candida dubliniensis, 2 Candida Africana, 3 C. parapsilosis, 2 Candida metapsilosis and 2 Candida orthopsilosis. For PAFE studies, cells were exposed to micafungin for 1 h at concentrations ranging from 0.12 to 8 µg/ml. Time-kill experiments (TK) were conducted at the same concentrations. Samples were removed at each time point (0-48 h) and viable counts determined. Micafungin (2  $\mu$ g/ml) was fungicidal ( $\geq$  3 log<sub>10</sub> reduction) in TK against 5 out of 14 (36%) strains of C. albicans complex. In PAFE experiments, fungicidal endpoint was achieved against 2 out of 14 strains (14%). In TK against C. parapsilosis, 8 µg/ml of micafungin turned out to be fungicidal against 4 out 7 (57%) strains. Conversely, fungicidal endpoint was not achieved in PAFE studies. PAFE results for C. albicans complex (41.83 ± 2.18 h) differed from C. parapsilosis complex (8.07 ± 4.2 h) at the highest tested concentration of micafungin. In conclusion, micafungin showed significant differences in PAFE against C. albicans and C. parapsilosis complexes, being PAFE for the C. albicans complex longer than for the C. parapsilosis complex.

# Introduction

Invasive candidiasis is a leading cause of mortality worldwide, being *Candida albicans* the predominant cause of candidemia and invasive candidiasis. However, candidiasis due to non-*C. albicans* species, such as *Candida parapsilosis*, *Candida glabrata*, *Candida tropicalis*, *Candida krusei*, *Candida lusitaniae*, *Candida guilliermondii*, are increasing. Some of these species Investigación Sanitaria (FIS PI11/00203), and UPV/ EHU (UFI 11/25).

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Competing Interests: In the past 5 years, Elena Eraso has received grant support from Astellas Pharma, and Pfizer SLU. Guillermo Quindós has received grant support from Astellas Pharma, Gilead Sciences, Pfizer SLU, Schering Plough and Merck Sharp and Dohme. He has been an advisor/ consultant to Merck Sharp and Dohme, and has been paid for talks on behalf of Abbvie, Astellas Pharma, Esteve Hospital, Gilead Sciences, Merck Sharp and Dohme, Pfizer SLU, and Schering Plough. The authors have no other relevant affiliations or financial involvement with any organization or entity with a financial interest in or financial conflict with the subject matter or materials discussed in the manuscript apart from those disclosed. No writing assistance was utilized in the production of this manuscript. This does not alter the authors' adherence to PLOS ONE policies on sharing data and materials.

exhibit resistance or reduced susceptibility to fluconazole and other triazoles, echinocandins or amphotericin B. *C. parapsilosis* is associated to infections in neonates and young adults, usually related to the presence of central venous catheter and hyperalimentation [1]. *C. parapsilosis* is usually susceptible to most antifungal agents, but there are reports of infections caused by isolates with decreased susceptibility to azoles and echinocandins [2]. Molecular identification methods have unveiled new cryptic species within *C. albicans* and *C. parapsilosis* species complexes, such as *Candida dubliniensis* and *Candida africana* within the *C. albicans* complex or *Candida metapsilosis* and *Candida orthopsilosis* within *C. parapsilosis* complex. These cryptic species show differences in antifungal susceptibility and virulence, being their epidemiology and antifungal susceptibility a matter of increased interest [3–5].

Micafungin inhibits the synthesis of  $1,3-\beta$ -D-glucan, an essential molecule of many pathogenic fungi wall architecture, and exhibits an excellent activity against a great number of *Candida* species many resistant to azoles [6]. Thus, micafungin is a very useful drug for the first line therapy of invasive candidiasis [7].

Postantifungal effect (PAFE) allows for sustained killing of fungus when it is exposed briefly to an antifungal, being a concentration-dependent process [8]. The existence of PAFE depends on both the fungal species and the class of the antifungal drug. Whereas antifungal drugs that have long PAFE may be given less frequently, the antifungal drugs with short PAFE may require a frequent administration [9]. For this reason, the PAFE may have a main clinical relevance in the design of dosing regimens for antifungal agents, such as micafungin. The PAFE of micafungin against various species of *Candida* has been evaluated in a few studies [10–13]. The aim of this study was to determinate the PAFE of micafungin against the species inside of the *C albicans* and *C parapsilosis* complexes.

## **Materials and Methods**

#### Microorganisms

A total of 21 *Candida* strains were selected for testing: 14 strains from the *C. albicans* complex (*C. albicans*: 5 blood isolates [UPV/EHU 99–101, 99–102, 99–103, 99–104 and 99–105] and 2 reference strains [NCPF 3153 and 3156]; *C. dubliniensis*: 4 blood isolates [UPV/EHU 00–131, 00–132, 00–133, 00–135] and 1 reference strain [NCPF 3949]; *C. africana*: 1 vaginal isolate [UPV/EHU 97–135] and 1 reference strain [ATCC 2669]) and 7 strains from the *C. parapsilosis* complex (*C. parapsilosis sensu stricto*: 1 blood isolate [UPV/EHU 09–378] and 2 reference strains [ATCC 22019 and ATCC 90018]; *C. metapsilosis*: 1 blood isolate [UPV/EHU 07–045] and 1 reference strain [ATCC 96143]; *C. orthopsilosis*: 1 blood isolate [UPV/EHU 07–035] and 1 reference strain [ATCC 96139]). Fungal isolates were obtained from the culture collection of the Laboratorio de Micología Médica, Universidad del País Vasco/Euskal Herriko Unibertsitatea (UPV/EHU), Bilbao, Spain. Isolates were identified by their metabolic properties using the ATB ID 32C method (bioMérieux, Marcy l'Étoile, France) and by molecular methods, as previously described [14,15].

# Antifungal Agents

Micafungin (Astellas Pharma, Madrid, Spain) was dissolved in dimethyl sulfoxide (DMSO), to obtain a stock solution of 5120  $\mu$ g/ml. The dilutions were prepared in RPMI 1640 medium with L-glutamine, 0.2% glucose and without NaHCO<sub>2</sub> buffered to pH 7 with 0.165 M morpholinepropanesulfonic acid (MOPS) (Sigma-Aldrich, Madrid, Spain). Stock solutions were stored at – 80°C until use.

### In Vitro Susceptibility Testing

MICs, defined as minimum concentrations that produce  $\geq$ 50 growth reduction, were determined following M27-A3 and M27-A3 S4 documents [16,17]. All MICs were measured in RPMI 1640 medium buffered to pH 7.0 with 0.165 M MOPS and results were read after 24 h of incubation.

## **Time-Kill Procedures**

Time-kill studies (TK) were performed as previously described [18–20]. Strains were subcultured on Sabouraud dextrose agar (SDA) plates prior to testing. Cell suspensions were prepared in sterile water by picking 3 to 5 colonies from a 24 h culture and the resulting suspension was prepared at 1 McFarland ( $\approx 10^{6}$  CFU/ml). One milliliter of the cell suspension was added to vials containing 9 ml of RPMI. TK were carried out on microtiter plates for the BioScreen C computer-controlled microbiological incubator (BioScreen C MBR, LabSystems, Helsinki, Finland) in RPMI (final volume 200  $\mu$ l) by using an inoculum of 1–5 x 10<sup>5</sup> CFU/ml. On the basis of MICs, micafungin concentrations tested were 0.12, 0.5 and 2 µg/ml for the C. albicans complex and 0.25, 2 and 8 µg/ml for the C. parapsilosis complex. These micafungin concentrations are achieved in serum after standard therapeutic doses [21]. Inoculated plates were incubated 48 h at  $36 \pm 1^{\circ}$ C ( $30 \pm 1^{\circ}$ C for *C. africana*). At predetermined time points (0, 2, 4, 6, 24, and 48 h), 10  $\mu$ l (0–6 h) or 6  $\mu$ l (24–48 h) were collected from each culture well (control and test solution wells), serially diluted in phosphate buffered saline (PBS) and aliquots plated onto SDA. The lower limit of accurate and reproducible detectable colony forming units (CFU) counts was 200 CFU/ml. When the CFUs were expected to be less than 200 per milliliter, samples of 5 µl were taken directly from the test solution and plated. After incubation of the plates at  $36 \pm 1^{\circ}$ C for  $48 h (30 \pm 1^{\circ}$ C for *C. africana*), *Candida* colonies were counted. Each experiment was performed twice for each isolate. Plots of averaged colony counts (log10 CFU/ml) versus time were constructed and compared against a growth control (in the absence of drug). Also the antifungal carryover effect was determined as formerly reported [22].

## PAFE

PAFE studies were performed as described previously with slight differences [23]. Standard 1 McFarland turbidity cell suspensions were prepared in sterile distilled water, from which 1 ml was added to 9 ml of RPMI. Micafungin concentrations were the same as described for the TK. Following an incubation of 1 h, micafungin was removed by a process of 3 cycles of repeated centrifugations (2000 rpm, 10 min) and washed with PBS. After the final centrifugation, the fungal pellet was suspended in 600 µl of RPMI. All samples were incubated on microtiter plates for the BioScreen C at  $36 \pm 1^{\circ}$ C, with a final volume of 200 µl. At the same predetermined time points described for the TK, samples were serially diluted in PBS and inoculated onto a SDA plate for CFU counting. When the colony counts were expected to be less than 200 CFU/mL, samples of 5 µl were taken directly from the test solution and plated. After incubation of the plates at  $36 \pm 1^{\circ}$ C for 48 h, *Candida* colonies were counted. The lower limit of accurate and reproducible detectable colony counts was 200 CFU/ml. PAFE was calculated for each isolate as the difference in time required for control (in the absence of drug) and treated isolates to grow 1  $\log_{10}$  following drug removal. PAFE was also determined using the following equation: PAFE = T-C, where T = time required for counts in treated cultures to increase by 1  $log_{10}$  unit above that seen following drug removal and C = time required for counts in control to increase by  $1 \log_{10}$  unit above that following the last washing.

#### PAFE and TK data comparison

Fungicidal activity was described as a  $\geq$  3 log 10 (99.9%) reduction, and fungistatic activity was defined as a < 99.9% reduction in CFU from the starting inoculum size [24]. Plots of averaged colony counts (log10 CFU per milliliter) versus time were constructed and compared against a growth control. The ratios of the log killing during PAFE experiments to the log killing during time kill experiments were calculated. Time-kill and PAFE experiments were performed simultaneously.

#### Statistical Analysis

Analysis of variance was performed to determine significant differences in PAFE (in hours) among species and concentrations, using GraphPad Prism 5.01 (GraphPad Software, San Diego, CA; USA). A *p* value < 0.05 was considered significant.

#### Results

No antifungal carryover effect was detected in TK. Micafungin MICs for isolates from *C. albicans* and *C. parapsilosis* complexes are shown in Table 1.

The results of TK and PAFE experiments for *C. albicans*, *C. dubliniensis* and *C. africana* are shown in Table 2. Micafungin showed prolonged PAFE ( $\geq$  37.5 h) against all strains of *C. albicans* complex with 2 µg/ml (p < 0.0001). With one of these strains (UPV/EHU 99–101) PAFE was > 43 h with 0.5 µg/ml. During TK tests, micafungin was fungicidal against 5 out of 14 (36%) strains of *C. albicans* complex (*C. albicans* NCPF 3156, UPV/EHU 99–101, 99–102, 99–105 and *C. dubliniensis* UPV/EHU 00–135). The extent of micafungin log-killing in TK ranged from 0.08 to 5.22 log at 2 µg/ml. After micafungin removal in PAFE experiments, fungicidal

Strain	MIC (µg/ml)
C. albicans NCPF 3153	0.25
C. albicans NCPF 3156	0.12
C. albicans UPV/EHU 99–101	0.25
C. albicans UPV/EHU 99–102	0.25
C. albicans UPV/EHU 99–103	0.12
C. albicans UPV/EHU 99–104	0.25
C. albicans UPV/EHU 99–105	0.12
C. dubliniensis NCPF 3949	0.25
C. dubliniensis UPV/EHU 00–131	0.25
C. dubliniensis UPV/EHU 00–132	0.12
C. dubliniensis UPV/EHU 00–133	0.12
C. dubliniensis UPV/EHU 00–135	0.06
C. africana UPV/EHU 97–135	0.12
C. africana ATCC 2669	0.06
C. parapsilosis ATCC 22019	2
C. parapsilosis ATCC 90018	1
C. parapsilosis UPV/EHU 09–378	2
C. metapsilosis ATCC 96143	2
C. metapsilosis UPV/EHU 07–045	2
C. orthopsilosis ATCC 96139	1
C. orthopsilosis UPV/EHU 07–035	1

doi:10.1371/journal.pone.0132730.t001

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#### Table 2. PAFE results for C. albicans complex.

Isolate	Micafungin (µg/ml)	Killing (log)		PAFE/TK <sup>1</sup>	PAFE (h)
		тк	PAFE		
C. albicans NCPF 3153	0.12	0.21	NA <sup>2</sup>		0
	0.5	0.38	NA		0
	2	0.08	0.28	100	> 44
C. albicans NCPF 3156	0.12	NA	NA		0
	0.5	1.49	NA		0
	2	5.07	1.55	0	> 42
C. albicans UPV/EHU 99–101	0.12	2.25	0.56	2.04	0
	0.5	2.85	1.58	5.37	> 43
	2	5.1	1.81	0	> 43
C. albicans UPV/EHU 99–102	0.12	1.54	0.65	12.89	2.4
	0.5	2.26	0.42	1.44	0
	2	5	4.67	46.77	> 39.46
C. albicans UPV/EHU 99–103	0.12	NA	NA		0
	0.5	NA	NA		0
	2	1.49	0.52	10.68	> 44
C. albicans UPV/EHU 99–104	0.12	NA	0.27		0
	0.5	NA	0.02		0
	2	0.46	0.63	100	> 42
C. albicans UPV/EHU 99–105	0.12	0.63	0.62	98	0
	0.5	2.62	0.52	0.8	0
	2	5.22	0.55	0	> 42
C. dubliniensis NCPF 3949	0.12	0.12	0.04	82.56	0
	0.5	NA	0.11		0
	2	0.5	0.21	51.27	> 42
C. dubliniensis UPV/EHU 00–131	0.12	NA	NA		0
	0.5	NA	NA		20
	2	0.43	NA		44
C. dubliniensis UPV/EHU 00–132	0.12	NA	NA		0
	0.5	NA	NA		0
	2	0.51	NA		> 44
C. dubliniensis UPV/EHU 00–133	0.12	NA	NA		0
	0.5	0.02	NA		0
	2	0.7	0.4	50.1	42
C. dubliniensis UPV/EHU 00–135	0.12	0.86	NA		0
	0.5	2.22	0.24	1.05	0
	2	5	4.67	46.77	> 42
C. africana ATCC 2669	0.12	0.1	0.12	100	0
	0.5	0.1	0.12	100	0
	2	0.19	0.28	100	> 37.7
C. africana UPV/EHU 97–135	0.12	0.12	0.01	77.27	0
	0.5	0.08	0.24	100	3
	2	0.46	0.58	100	> 37.5

<sup>1</sup> Ratio of the log killing during PAFE experiments to the log killing during time-kill experiments.

<sup>2</sup> NA, not applicable (without any reduction in colony counts compared with the starting inoculum).

doi:10.1371/journal.pone.0132730.t002

endpoint was achieved against 2 out of 14 (14%) strains of *C. albicans* complex (*C. albicans* UPV/EHU 99–102 and *C. dubliniensis* UPV/EHU 00–135). Moreover, the extent of killing during PAFE experiments ranged from 0.28 to 4.67 log with 2 μg/ml.

The mean value of PAFE/TK ratio was 43.25 (with 2 µg/ml) for *C. albicans* complex. Against 4 out of 14 strains (29%), the PAFE/TK ratio of micafungin at the highest tested concentration was 100, indicating that 1-hour exposure to micafungin accounted for up to 100% of the overall killing observed during TK. Additionally, a ratio of 100 at concentrations  $\leq$  2 µg/m was observed for *C. africana* (Table 2).

Table 3 summarizes the results of time-kill and PAFE experiments for *C. parapsilosis*, *C. metapsilosis* and *C. orthopsilosis* at each micafungin concentration. During TK, micafungin at 8 μg/ml caused significant reductions from the starting inoculum of each strain, with a killing activity that ranged from 1.67 to 5.43 log. However, during PAFE experiments, 1-hour exposure of the strains to micafungin did not cause important reductions in colony counts. PAFE of micafungin ranged 3.8 to 15.7 h (with 8 μg/ml); the longest PAFE (15.7 h) was reached against *C. parapsilosis* UPV/EHU 09–378. Micafungin at 8 μg/ml demonstrated fungicidal activity in TK against 4 out 7 (57%) strains from *C. parapsilosis* complex (*C. parapsilosis* UPV/EHU 09–378, *C. metapsilosis* ATCC 96143, UPV/EHU 07–045 and *C. orthopsilosis* ATCC 96139). However, after micafungin removal in PAFE experiments, it was not reached fungicidal endpoint against any of the tested strains. The lack of similarity between TK and PAFE data was also detected in the mean PAFE/TK ratio of 0.49, with 8 μg/ml, suggesting that 1-hour exposure to

Isolate	Micafungin (µg/ml)	Killing (log)		PAFE/TK <sup>1</sup>	PAFE (h)
		тк	PAFE		
C. parapsilosis ATCC 22019	0.25	NA <sup>2</sup>	NA		0
	2	NA	NA		0
	8	1.67	0.08	2.56	6
C. parapsilosis ATCC 90018	0.25	0.16	NA		0
	2	0.12	NA		0
	8	2.12	0.07	0.89	5.3
C. parapsilosis UPV/EHU 09–378	0.25	NA	NA		0
	2	0.07	0.31	100	0
	8	5.27	0.22	0	15.7
C. metapsilosis ATCC 96143	0.25	0.02	NA		0
	2	NA	NA		0
	8	5.42	NA		5.4
C. metapsilosis UPV/EHU 07–045	0.25	NA	0.03		0
	2	NA	NA		0
	8	5.24	0.11	0	9.3
C. orthopsilosis ATCC 96139	0.25	NA	NA		2
	2	NA	NA		2
	8	5.43	NA		11
C. orthopsilosis UPV/EHU 07–035	0.25	NA	NA		0
	2	NA	NA		0
	8	1.91	NA		3.8

Table 3. PAFE results for C. parapsilosis complex.

<sup>1</sup> Ratio of the log killing during PAFE experiments to the log killing during TK experiments.

<sup>2</sup> NA, not applicable (without any reduction in colony counts compared with the starting inoculum).

doi:10.1371/journal.pone.0132730.t003

micafungin accounted for only a 2% of the overall killing observed during time-kill experiments; only one strain, *C. parapsilosis* UPV/EHU 09–378, showed a ratio of 100, with 2 µg/ml (Table 3).

PAFE results for *C. albicans* complex (41.83 ± 2.18 h) differed from *C. parapsilosis* complex (8.07 ± 4.2 h) with the highest concentration of micafungin tested (p < 0.0001). This difference is also evident when comparing *C. albicans* and *C. parapsilosis* complexes curves from PAFE assays (Figs <u>1</u> and <u>2</u>). Micafungin caused lethality (with 2 µg/ml) against *C. albicans* complex (Fig <u>1</u>) that persisted during the 48 h testing period; however, in Fig <u>2</u> similar log (CFU/ml) slopes between micafungin and control can be observed.

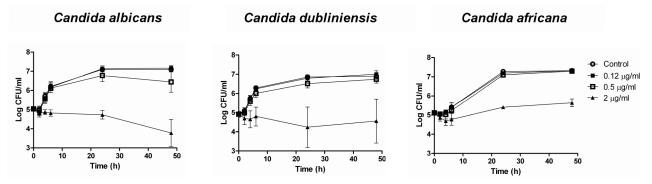
#### Discussion

TK and PAFE experiments of micafungin against *Candida* have usually included a low number of isolates [10–13]. This is the first study that has evaluated PAFE of micafungin against *C. dubliniensis*, *C. africana*, *C. metapsilosis* and *C. orthopsilosis*. *C. dubliniensis* and *C. africana* are cryptic species from *C. albicans*. Similarly *C. metapsilosis* and *C. orthopsilosis* are cryptic species from *C. parapsilosis*. These species have different in vitro susceptibility to antifungal agents [3,4,25]. Additionally, PAFE is an important factor in both dose interval choice and outcome.

MICs for *C. albicans* and *C. parapsilosis* complexes were consistent with other studies of micafungin activity in vitro against these species [26]. Moreover, we also found that micafungin reached fungicidal endpoint against 4 out of 7 strains of *C. albicans* (with 2  $\mu$ g/ml) and against 1 out of 3 strains of *C. parapsilosis* (with 8  $\mu$ g/ml), during TK experiments. This fungicidal activity has also been reported by Smith et al. [11] against both species.

After micafungin removal, Nguyen et al. [11] observed fungicidal activity against 1 out 4 strains of *C. albicans*, 1 out of 3 strains of *C. parapsilosis*, 2 out of 3 strains of *C. glabrata* and 1 out of 2 strains of *C. krusei* (with range concentrations 0.12 to 8  $\mu$ g/ml). Similarly, in the current study, the fungicidal endpoint was reached against 1 out of 7 strains of *C. albicans* at the highest tested concentration (2  $\mu$ g/ml). Nevertheless, after micafungin removal, no fungicidal endpoint was achieved against *C. parapsilosis* [11].

Micafungin (8 µg/ml) displayed PAFE against *C. parapsilosis* complex that ranged from 3.8 to 15.7 h, being the longest PAFE against *C. parapsilosis* UPV/EHU 09–378. These results are similar to previous reported by Smith et al. [10] Other authors have demonstrated that a short exposure (1 h) of *C. albicans* to low concentrations (0.125 to 1 µg/ml) of micafungin, resulted in a PAFE of 5 h [12]. Our current findings demonstrate that micafungin produced a longer PAFE against *C. albicans* than those previously reported, being the PAFE > 40 h with 2 µg/ml





doi:10.1371/journal.pone.0132730.g001

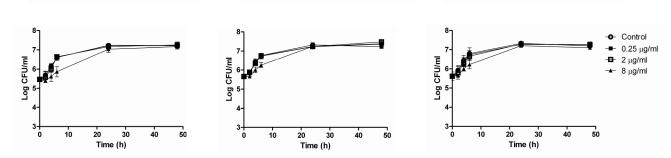
against all strains. Manavathu et al. [12] compared PAFE of different antifungal drugs against *C. albicans* and *Aspergillus fumigatus* and stated that antifungal drugs with fungicidal activity tend to possess longer PAFE than fungistatic ones. On the other hand, Ernst et al. [23] observed that fluconazole displayed no measurable PAFE against none of the studied microorganisms, while echinocandins displayed prolonged PAFE of greater than 12 h against *C. albicans* with concentrations  $\leq 0.12 \mu$ g/ml. Our current findings differed from these ones, as no measurable PAFE was detected against *C. albicans* at such low micafungin concentrations (0.12 µg/ml) except for one strain, UPV/EHU 99–102. In order to investigate the effect of exposure time on the observed PAFE, Ernst et al. studied the PAFE of caspofungin and amphotericin B after 0.25, 0.5 and 1 h exposure times concluding that PAFE was not affected by the exposure time: 0.25 h exposure produced the same PAFE as 1 h exposure [23]. Similarly, Moriyama et al. reported that the maximum PAFE against *Candida* occurred with caspofungin exposures of 5 or 15 minutes [8]. As performed in other PAFE experiments, in which PAFE was determined after 1 h exposure [10–12], we have studied the PAFE of micafungin after 1 h exposure.

In another study, Ernst et al. also found PAFE with micafungin against *C. albicans, C. krusei*, *C. tropicalis* and *C. glabrata*, [13]. Micafungin and anidulafungin had greater activity than caspofungin, and none of the echinocandins depicted fungicidal activity against *C. parapsilosis*. However, the three echinocandins reached the fungicidal endpoint against *C. orthopsilosis* and *C. metapsilosis* [19]. Results from our study differ from these reports as we have found that micafungin was fungicidal only against one strain of *C. parapsilosis*.

Previous studies have evaluated PAFEs of anidulafungin and caspofungin against *Candida*, and have shown that anidulafungin achieved fungicidal activity against *C. parapsilosis*, but not against *C. albicans*, and caspofungin did not show fungicidal activity [27,28].

Our PAFE studies demonstrated that micafungin produced concentration-dependent, strain-dependent and complex-dependent antifungal activity following drug removal. PAFE was measurable at the higher concentration, and this effect was enhanced by increasing the concentration of the antifungal drug, with highest concentration resulting in the longest PAFE in each case. One of the most notable findings of this study was the PAFE of micafungin against *C. albicans* complex. Micafungin exerted prolonged PAFE against *C. albicans* complex, and 1 h exposure to micafungin accounted for up to 100% of the overall killing observed during TK experiments in 29% of the studied strains. The results are consistent with a rapid onset of anticandidal activity of micafungin, which might be explained by a rapid association with its target (1,3- $\beta$ -D-glucan synthase). Alternatively, it has also been suggested that the drug, as a large lipopeptide with a fatty acid side chain, could rapidly intercalate with the phospholipid bilayer of the *Candida* cell membrane and subsequently access its target over time [29].

Candida orthopsilosis



Candida metapsilosis

**Fig 2.** Mean TK curves from PAFE assays against 3 *C* parapsilosis sensu stricto, 2 *C*. metapsilosis and 2 *C*. orthopsilosis strains. Each data point represents the mean result ± standard deviation (error bars). Open circles ( $\circ$ ): control; filled squares ( $\blacksquare$ ): 0.25 µg/ml; open squares ( $\square$ ): 2 µg/ml; filled triangles ( $\blacktriangle$ ): 8 µg/ml.

doi:10.1371/journal.pone.0132730.g002

Candida parapsilosis

Recently, Ellepola et al. studied the PAFE of nystatin, amphotericin B, ketoconazole and fluconazole against oral *C. dubliniensis* isolates, concluding that nystatin, amphotericin B and ketoconazole produced a detectable PAFE, whereas fluconazole did no display any measurable PAFE [30,31]. This finding is consistent with previously published by Ernst et al. [23]. Kovács et al. reported caspofungin PAFE in 2 *C. albicans* strains [32].

In conclusion, micafungin showed significant differences in PAFE against *C. albicans* and *C. parapsilosis* complexes, being PAFE of micafungin for the *C. albicans* complex longer than against the *C. parapsilosis* complex. These differences in the PAFE could be explained by the distinct microorganism growth characteristics, the antifungal drug binding affinity to the targets, or differences in the amount of  $\beta$ -glucan in the fungal cell wall. These PAFE differences for *C. parapsilosis* and other *Candida* species might have important therapeutic implications. The current data could be useful in optimizing dosing regimens for micafungin against *C. albicans*, *C. dubliniensis*, *C. africana*, *C. parapsilosis*, *C. metapsilosis* and *C. orthopsilosis*. However, further animal studies and human clinical trials are needed to explore their potential clinical usefulness and applications.

### **Author Contributions**

Conceived and designed the experiments: NJ EE GQ SGA. Performed the experiments: SGA NJ. Analyzed the data: SGA NJ EE GQ. Contributed reagents/materials/analysis tools: EE GQ. Wrote the paper: SGA NJ EE GQ.

#### References

- 1. Quindós G. Epidemiology of candidaemia and invasive candidiasis. A changing face. Rev Iberoam Micol. 2014; 31: 42–48. doi: 10.1016/j.riam.2013.10.001 PMID: 24270071
- Moudgal V, Little T, Boikov D, Vazquez JA. Multiechinocandin- and multiazole-resistant Candida parapsilosis isolates serially obtained during therapy for prosthetic valve endocarditis. Antimicrob Agents Chemother. 2005; 49: 767–769. PMID: <u>15673762</u>
- Pfaller MA, Boyken L, Hollis RJ, Kroeger J, Messer SA, Tendolkar S, et al. In vitro susceptibility of invasive isolates of *Candida* spp. to anidulafungin, caspofungin, and micafungin: six years of global surveillance. J Clin Microbiol. 2008; 46: 150–156. PMID: <u>18032613</u>
- Tavanti A, Davidson AD, Gow NA, Maiden MC, Odds FC. Candida orthopsilosis and Candida metapsilosis spp. nov. to replace Candida parapsilosis groups II and III. J Clin Microbiol. 2005; 43: 284–292. PMID: 15634984
- Lockhart SR, Messer SA, Pfaller MA, Diekema DJ. Geographic distribution and antifungal susceptibility of the newly described species *Candida orthopsilosis* and *Candida metapsilosis* in comparison to the closely related species *Candida parapsilosis*. J Clin Microbiol. 2008; 46: 2659–2664. doi: <u>10.1128/JCM</u>. <u>00803-08</u> PMID: <u>18562582</u>
- Emri T, Majoros L, Toth V, Pocsi I. Echinocandins: production and applications. Appl Microbiol Biotechnol. 2013; 97: 3267–3284. doi: <u>10.1007/s00253-013-4761-9</u> PMID: <u>23463246</u>
- Quindós G, Eraso E, Javier Carrillo-Munoz A, Cantón E, Pemán J. In vitro antifungal activity of micafungin. Rev Iberoam Micol. 2009; 26: 35–41. doi: 10.1016/S1130-1406(09)70006-3 PMID: 19463275
- Moriyama B, Henning SA, Penzak SR, Walsh TJ. The postantifungal and paradoxical effects of echinocandins against *Candida* spp. Future Microbiol. 2012; 7: 565–569. doi: <u>10.2217/fmb.12.31</u> PMID: <u>22568712</u>
- Oz Y, Kiremitci A, Dag I, Metintas S, Kiraz N. Postantifungal effect of the combination of caspofungin with voriconazole and amphotericin B against clinical *Candida krusei* isolates. Med Mycol. 2013; 51: 60–65. doi: <u>10.3109/13693786.2012.697198</u> PMID: <u>22746405</u>
- Smith RP, Baltch A, Bopp LH, Ritz WJ, Michelsen PP. Post-antifungal effects and time-kill studies of anidulafungin, caspofungin, and micafungin against *Candida glabrata* and *Candida parapsilosis*. Diagn Microbiol Infect Dis. 2011; 71: 131–138. doi: <u>10.1016/j.diagmicrobio.2011.06.018</u> PMID: <u>21865002</u>
- Nguyen KT, Ta P, Hoang BT, Cheng S, Hao B, Nguyen MH, et al. Characterising the post-antifungal effects of micafungin against *Candida albicans*, *Candida glabrata*, *Candida parapsilosis* and *Candida krusei* isolates. Int J Antimicrob Agents. 2010; 35: 80–84. doi: <u>10.1016/j.ijantimicag.2009.09.003</u> PMID: <u>19889519</u>

- Manavathu EK, Ramesh MS, Baskaran I, Ganesan LT, Chandrasekar PH. A comparative study of the post-antifungal effect (PAFE) of amphotericin B, triazoles and echinocandins on Aspergillus fumigatus and Candida albicans. J Antimicrob Chemother. 2004; 53: 386–389. PMID: <u>14729762</u>
- Ernst EJ, Roling EE, Petzold CR, Keele DJ, Klepser ME. In vitro activity of micafungin (FK-463) against Candida spp.: microdilution, time-kill, and postantifungal-effect studies. Antimicrob Agents Chemother. 2002; 46: 3846–3853. PMID: <u>12435687</u>
- Miranda-Zapico I, Eraso E, Hernández-Almaraz JL, López-Soria LM, Carrillo-Muñoz AJ, Hernández-Molina JM, et al. Prevalence and antifungal susceptibility patterns of new cryptic species inside the species complexes *Candida parapsilosis* and *Candida glabrata* among blood isolates from a Spanish tertiary hospital. J Antimicrob Chemother. 2011; 66: 2315–2322. doi: <u>10.1093/jac/dkr298</u> PMID: <u>21795259</u>
- Pemán J, Cantón E, Quindós G, Eraso E, Alcoba J, Guinea J, et al. Epidemiology, species distribution and in vitro antifungal susceptibility of fungaemia in a Spanish multicentre prospective survey. J Antimicrob Chemother. 2012; 67: 1181–1187. doi: 10.1093/jac/dks019 PMID: 22351683
- Clinical and Laboratory Standards Institute. M27-A3. Reference method for broth dilution antifungal susceptibility testing of yeast. Clinical and Laboratory Standard Institute, Wayne, PA. 2008;.
- Clinical and Laboratory Standards Institute. M27-A3 S4. Reference method for broth dilution antifungal susceptibility testing of yeast. Clinical and Laboratory Standard Institute, Wayne, PA. 2012;.
- Gil-Alonso S, Jauregizar N, Cantón E, Eraso E, Quindós G. Comparison of the in vitro activity of echinocandins against *Candida albicans*, *Candida dubliniensis*, and *Candida africana* by time-kill curves. Diagn Microbiol Infect Dis. 2015; 82: 57–61. doi: <u>10.1016/j.diagmicrobio.2015.01.010</u> PMID: <u>25703894</u>
- Cantón E, Espinel-Ingroff A, Pemán J, del Castillo L. In vitro fungicidal activities of echinocandins against *Candida metapsilosis*, *C. orthopsilosis*, and *C. parapsilosis* evaluated by time-kill studies. Antimicrob Agents Chemother. 2010; 54: 2194–2197. doi: <u>10.1128/AAC.01538-09</u> PMID: <u>20145083</u>
- Cantón E, Pemán J, Hervas D, Espinel-Ingroff A. Examination of the in vitro fungicidal activity of echinocandins against *Candida lusitaniae* by time-killing methods. J Antimicrob Chemother. 2013; 68: 864– 868. doi: <u>10.1093/jac/dks489</u> PMID: <u>23228935</u>
- Catalán González M, Montejo Gonzalez JC. Anidulafungin: a new therapeutic approach in antifungal therapy. Pharmacology of anidulafungin. Rev Iberoam Micol. 2008; 25: 92–100. PMID: <u>18473503</u>
- Cantón E, Pemán J, Gobernado M, Viudes A, Espinel-Ingroff A. Patterns of amphotericin B killing kinetics against seven *Candida* species. Antimicrob Agents Chemother. 2004; 48: 2477–2482. PMID: <u>15215097</u>
- Ernst EJ, Klepser ME, Pfaller MA. Postantifungal effects of echinocandin, azole, and polyene antifungal agents against *Candida albicans* and *Cryptococcus neoformans*. Antimicrob Agents Chemother. 2000; 44: 1108–1111. PMID: 10722525
- Lewis RE, Diekema DJ, Messer SA, Pfaller MA, Klepser ME. Comparison of Etest, chequerboard dilution and time-kill studies for the detection of synergy or antagonism between antifungal agents tested against *Candida* species. J Antimicrob Chemother. 2002; 49: 345–351. PMID: 11815578
- Lockhart SR, Messer SA, Pfaller MA, Diekema DJ. Geographic distribution and antifungal susceptibility of the newly described species *Candida orthopsilosis* and *Candida metapsilosis* in comparison to the closely related species *Candida parapsilosis*. J Clin Microbiol. 2008; 46: 2659–2664. doi: <u>10.1128/JCM.</u> <u>00803-08</u> PMID: <u>18562582</u>
- Pfaller MA, Espinel-Ingroff A, Bustamante B, Cantón E, Diekema DJ, Fothergill A, et al. Multicenter study of anidulafungin and micafungin MIC distributions and epidemiological cutoff values for eight *Candida* species and the CLSI M27-A3 broth microdilution method. Antimicrob Agents Chemother. 2014; 58: 916–922. doi: 10.1128/AAC.02020-13 PMID: 24277027
- Nguyen KT, Ta P, Hoang BT, Cheng S, Hao B, Nguyen MH, et al. Anidulafungin is fungicidal and exerts a variety of postantifungal effects against *Candida albicans*, *C. glabrata*, *C. parapsilosis*, and *C. krusei* isolates. Antimicrob Agents Chemother. 2009; 53: 3347–3352. doi: <u>10.1128/AAC.01480-08</u> PMID: <u>19364856</u>
- Clancy CJ, Huang H, Cheng S, Derendorf H, Nguyen MH. Characterizing the effects of caspofungin on Candida albicans, Candida parapsilosis, and Candida glabrata isolates by simultaneous time-kill and postantifungal-effect experiments. Antimicrob Agents Chemother. 2006; 50: 2569–2572. PMID: 16801448
- 29. Denning DW. Echinocandin antifungal drugs. Lancet. 2003; 362: 1142–1151. PMID: 14550704
- **30.** Ellepola AN, Joseph BK, Chandy R, Khan ZU. The postantifungal effect of nystatin and its impact on adhesion attributes of oral *Candida dubliniensis* isolates. Mycoses. 2014; 57: 56–63.

- Ellepola AN, Chandy R, Khan ZU. Post-antifungal effect and adhesion to buccal epithelial cells of oral Candida dubliniensis isolates subsequent to limited exposure to amphotericin B, ketoconazole and fluconazole. J Investig Clin Dent. 2014; doi: <u>10.1111/jicd.12095</u>
- Kovacs R, Gesztelyi R, Perlin DS, Kardos G, Doman M, Berenyi R, et al. Killing rates for caspofungin against *Candida albicans* after brief and continuous caspofungin exposure in the presence and absence of serum. Mycopathologia. 2014; 178: 197–206. doi: <u>10.1007/s11046-014-9799-4</u> PMID: <u>25118874</u>