

Dynamic Fluorescence Imaging of Orally-administered Tumor-targeting *Salmonella typhimurium* A1-R Expressing Green Fluorescent Protein Trafficking Through the Gastrointestinal System to Target Fibrosarcomas in Nude Mice

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Abstract

Background/Aim: *Salmonella typhimurium* A1-R (A1-R) expresses green fluorescent protein (GFP) and has the ability to selectively target and inhibit all major cancer types in murine models without persistently infecting healthy tissue. A1-R is being developed for tumor targeting by oral administration. The aim of the present study was to demonstrate real-time imaging of orally-administered A1-R in a fibrosarcoma nude-mouse model and to visualize its trafficking through the gastrointestinal system to the tumor and normal organs.

Materials and Methods: A1-R-GFP (3.3×10^8 colony-forming units/ml) was administered orally to HT1080 human fibrosarcoma nude-mouse models which were fasted the day before administration. Fluorescence images of A1-R-GFP inside the gastrointestinal tract at 0, 2 and 4 hours after oral gavage were captured. The number of colonies of A1-R-GFP in tumors and liver were determined at 4 hours, and on days 1, 3 and 4 by growth from homogenized tumor and liver tissue on agar plates.

Results: The trafficking of A1-R-GFP through the murine gastrointestinal tract post-gavage was monitored in real-time via GFP fluorescence imaging. Bacteria, initially observed in the stomach, migrated to the small intestine and the colon and subsequently to the subcutaneously-implanted fibrosarcoma. A1-R-GFP proliferated in the tumors over time. In contrast, A1-R-GFP in the liver diminished over time.

Conclusion: The present study showed the pathway of orally administered A1-R-GFP in the gastrointestinal system and to the tumor and liver. A1-R selectively proliferated continuously in tumors and was cleared from the liver. These results are critical for future clinical trials of orally-administered A1-R-GFP.



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Keywords: *Salmonella typhimurium* A1-R, green fluorescent protein (GFP), oral administration, gastrointestinal trafficking, dynamic fluorescence imaging, tumor-targeting, HT1080, fibrosarcoma, liver.

Introduction

Bacterial therapy of cancer has a history of more than 200 years. William B. Coley treated patients with sarcoma, starting 130 years ago, with live bacteria with much success (1-3), but was arbitrarily forced to stop in the 1930s. Since the end of the previous century, bacterial therapy of cancer has been developed pre-clinically including a few phase I clinical trials (4, 5).

We have engineered tumor-targeting *Salmonella typhimurium* A1-R (A1-R), tagged with green fluorescent protein (GFP), having auxotrophic mutations for leucine and arginine that prevent sustained infection in healthy tissues. A1-R has broad efficacy against all the main cancer types with minimal adverse effects in mouse models (6-45).

Jia *et al.* have shown the promise of oral administration of *Salmonella typhimurium* VNP20009 against cancers in mice (46, 47). The aim of the present study was to demonstrate real-time fluorescence imaging of orally-administered A1-R expressing GFP to visualize the trafficking of A1-R through the gastrointestinal system and subsequently to the liver and tumors in nude mice.

Materials and Methods

Mice. Nude mice (4-6 weeks, athymic nu/nu; AntiCancer Inc., San Diego, CA, USA) were utilized. All studies were performed in accordance with a protocol approved by the AntiCancer Institutional Animal Care and Use Committee, adhering to the principles and procedures outlined in the National Institutes of Health Guide for the Care and Use of Animals (6-9). All experiments adhered to the Animal Research: Reporting of In Vivo Experiments (ARRIVE) guidelines 2.0.

Cells. HT1080 human fibrosarcoma cells were obtained from the American Type Culture Collection (Manassas, VA,

USA). The cells were cultured in Dulbecco's modified Eagle's medium (DMEM) (GIBCO, Grand Island, NY), supplemented with 10% fetal bovine serum and 1 IU/ml penicillin/streptomycin.

Preparation and administration of *Salmonella typhimurium* A1-R-GFP (AntiCancer Inc., San Diego, CA, USA)) were cultured overnight in Luria-Bertani (LB) medium (Fisher Sci., Hanover Park, IL) supplemented with ampicillin and subsequently diluted 1:10 in LB medium. Bacteria were collected during the late-log phase, rinsed with phosphate-buffered saline (PBS), and subsequently diluted in PBS for oral administration in nude-mouse models (6-9).

Establishment of HT1080 tumors in nude mice. Nude mice received a subcutaneous injection of HT1080 cells (1×10^6) in the right flank. Subcutaneous tumors were established by one month post-injection. The tumors were excised at one month and minced into 3-4 mm³ fragments before being implanted into the right flank of additional nude mice. Subcutaneous tumors for experimentation were established 2 weeks later.

Real-time intravital imaging after oral administration of A1-R-GFP to the HT1080-fibrosarcoma nude-mouse model. Mice with HT1080 tumors received a single oral dose of 3.3×10^8 colony-forming units (CFU) of A1-R-GFP in 100 μ l PBS. The mice were fasted 1 day prior to oral administration. Images were captured inside the peritoneum of the mice at 0, 2 and 4 hours after A1-R-GFP administration, using a BioSpectrum Advanced 900 (Analytik Jena US LLC, Upland, CA, USA).

Quantification of *Salmonella typhimurium* A1-R in tumors and liver following oral administration. Mice with HT1080 tumors (n=3 per timepoint) received 3.3×10^8 CFU A1-R-GFP via oral administration. The subcutaneous tumor and

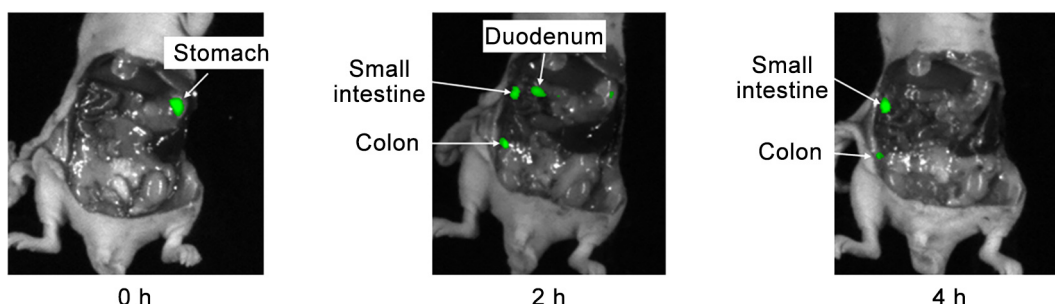


Figure 1. Real-time intravital fluorescence imaging of *Salmonella typhimurium* A1-R-GFP. Imaging was performed 0, 2 and 4 hours after oral administration of A1-R. GFP: Green fluorescent protein. Please see Materials and Methods for details.

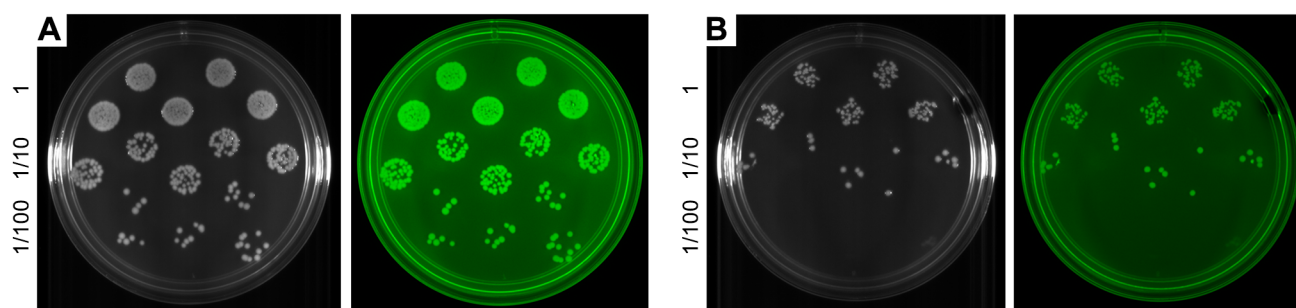


Figure 2. Representative images of GFP-labeled *Salmonella typhimurium* A1-R cultured (A1-R-GFP) on LB agar from the tumors and the livers of mice on day 1 after oral administration of A1-R-GFP. (A) Bright-field (left) and fluorescence (right) images of A1-R-GFP colonies grown from tumors on LB agar. (B) Bright-field (left) and fluorescence (right) images of A1-R-GFP colonies grown on LB agar from livers. The numbers at the side indicate the degree of dilution. GFP: Green fluorescent protein. Please see Materials and Methods for details.

liver were excised after 4 hours, 24 hours, 3 days and 4 days after A1-R-GFP administration. The tumor and liver were homogenized, and their supernatants were cultured on LB agar containing ampicillin. The quantity of infectious bacteria per gram of tumor or organ was determined.

Results

Real-time imaging of orally administered A1-R-GFP in a nude-mouse model of fibrosarcoma. The trafficking of A1-R-GFP through the murine gastrointestinal tract post-gavage was monitored in real time *via* intravital imaging. Bacteria were initially observed in the stomach, migrated to the duodenum, small intestine and colon (Figure 1).

Quantification of A1-R-GFP in the tumor and liver. A1-R-GFP derived from excised tumor tissue and cultured on LB agar increased over time following oral administration of A1-R-GFP. In contrast, the quantity of colonies that were cultured from the excised liver diminished over time following the oral administration of A1-R-GFP (Figure 2 and Figure 3).

Discussion

For at least 200 years, it has been documented that bacterial infections can induce regression of cancer in patients. During the late 19th and early 20th centuries, Dr. William B. Coley administered bacteria to patients with cancer with much success (1-3). Coley was arbitrarily forced to cease bacterial therapy of cancer in the 1930s. Since the end of the last century, bacterial therapy has been researched

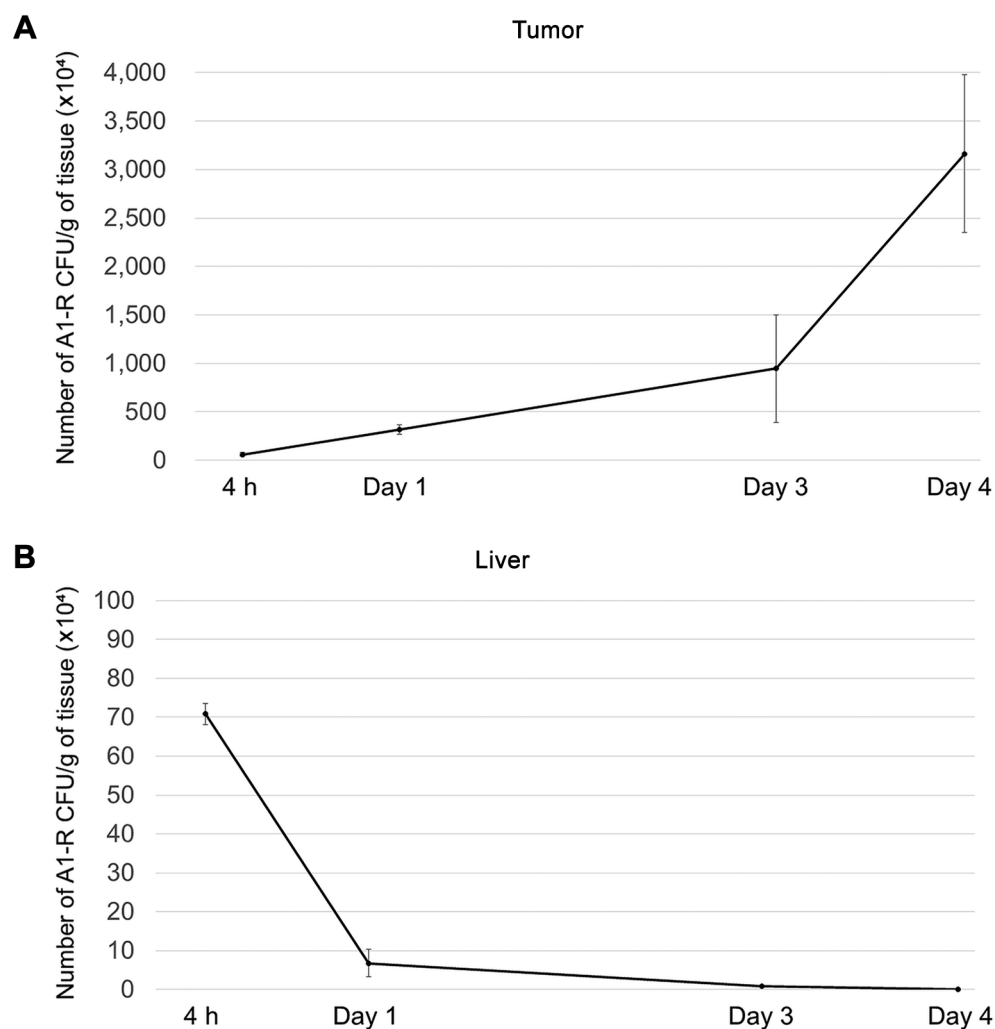


Figure 3. Number of *Salmonella typhimurium* A1-R-GFP colony-forming units (CFU) in tumors and liver after oral administration of A1-R-GFP (mean \pm standard deviation). A: The number of A1-R-GFP colonies derived from the tumor, increased over time when cultured on LB agar. B: In contrast, the number of A1-R colonies derived from the liver decreased over time when cultured on LB agar. Please see Materials and Methods for details.

pre-clinically with *Salmonella typhimurium*, with a phase I clinical trial of another strain of *Salmonella typhimurium* VNP20009 (48, 49). In our laboratory, A1-R inhibited and eradicated metastatic cancer when administered *via* multiple routes in murine models (6-45).

Our goal is to develop A1-R as an oral probiotic against cancer. In the present study, the transition of A1-R-GFP through the murine gastrointestinal tract post-gavage was monitored by intravital real-time fluorescence imaging (50). Bacteria were initially observed in the stomach,

migrated to the small intestine and to the colon, shown by intravital direct imaging. A1-R-GFP can target and grow within tumors and promote T-cell infiltration into the tumor and this can promote cancer immunotherapy (45).

A1-R is a specific autotrophic strain of *Salmonella typhimurium* developed by our laboratory which requires leucine and arginine for proliferation. A1-R can proliferate in the presence or absence of oxygen and targets all tumor types tested and inhibits their growth (6-45). The specific nutritional requirements of A1-R are satisfied in the

nutrient-dense environment of tumors, whereas its growth is considerably restricted in normal tissue due to its auxotrophy (6-8). The present results showed while the number of A1-R colonies increased over time in the tumor, they disappeared in the liver within 4 days.

The present findings indicate the potential of orally administered A1-R as a probiotic for the treatment of cancer. A strain of *Salmonella typhimurium* expressing human IL-2 has been tested in humans via oral administration in a phase I clinical trial without toxicity or adverse events (51).

Conflicts of Interest

The Authors declare no competing interests.

Authors' Contributions

SM and RMH designed the study. SM performed experiments. SM was a major contributor to writing the manuscript and RMH revised the manuscript. MZ, KM, BMK, MS, MB, NY, KH, HK, SM, KI, TH, HT and SD critically read and approved the final manuscript.

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