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Running Title: Direct translocation of the cell penetrating peptide octaarginine across the plasma membrane.

Keywords: Cell penetrating peptides, cholesterol, endocytosis, fluorescence microscopy, methyl-ß-cyclodextrin, octaarginine,

Abbreviations used: CPP, cell penetrating peptide; M β CD, methyl- β -cyclodextrin; M β CD:Chol, methyl- β -cyclodextrin:cholesterol complex; PBS, phosphate buffered saline; PI, propidium iodide; R_L8, octaarginine; SFM, serum free medium, Tf, transferrin.

ABSTRACT

The exact mechanisms by which cell penetrating peptides such as oligoarginines and penetratin cross biological membranes has yet to be elucidated, but this is required if they are to reach their full potential as cellular delivery vectors. Here, qualitative and quantitative analysis of the influence of temperature, peptide concentration and plasma membrane cholesterol on the uptake and subcellular distribution of the model cell penetrating peptide octaarginine was performed in a number of suspension and adherent cell lines. When experiments were performed on ice, the peptide at 2 µM extracellular concentration efficiently entered and uniformly labelled the cytoplasm of all the studied suspension cells but a ten-fold higher concentration was required to observe similar results in adherent cells. At 37°C and at higher peptide concentrations, time-lapse microscopy experiments showed that the peptide rapidly translocated the entire plasma membrane of suspension cells, with no evidence of a requirement for nucleation zones to promote this effect. Cholesterol depletion with methyl-β-cyclodextrin enhanced translocation of octaarginine across the plasma membrane of suspension cells at 37°C but decreased overall peptide accumulation. Under the same conditions in adherent cells this agent had no effect on peptide uptake or distribution. Cholesterol depletion increased the overall accumulation of the peptide at 4°C in KG1a cells, but this effect could be reversed by re-addition of cholesterol as methyl-β-cyclodextrincholesterol complexes. The results highlight the relatively high porosity of the plasma membrane of suspension cells to this peptide, especially at low temperatures, suggesting this feature could be exploited for delivering bioactive entities.

INTRODUCTION

Cell penetrating peptides (CPPs) or protein transduction domains have now been described for two decades [1, 2]. During this period several different CPP classes have been described that contain a variety of sequences and electrostatic charges, but all show a common ability to traverse biological membranes [3]. The best characterised include peptides rich in basic residues arginine and lysine such as the HIV-Tat peptide and synthetic oligoarginines (R6-R18) [4]. Much of the interest in CPPs stems from their proven ability to not only traverse membranes but to also act as delivery vectors, in vitro and vivo, for bioactive macromolecules with therapeutic potential such as siRNA, plasmids, peptide nucleic acids and proteins [5-7]. The precise mechanisms employed by CPPs to translocate through biological membranes is still largely unknown, and as different classes of CPPs exist it is unlikely that a single model will emerge to cover all the different classes. Translocation was initially believed to be mediated by endocytosis, a notion that was then superseded with the finding that cellular uptake was independent of temperature, receptor and energy [8, 9]. In the wake of findings that fixation of cells was responsible for significant artefacts relating to uptake and localisation [10, 11], the concept of an endocytic uptake mechanism gained stronger prominence as the primary route for cellular CPP entry [12-15]. More recent data, however, suggest that the fraction of peptide that gains access to cells directly through the plasma membrane, rather than via endocytosis, is highly dependent on the extracellular peptide concentration and the presence of serum in the growth media [16-20]. These studies relate mostly to cationic variants such as HIV-Tat and oligoaarginines.

Our previous studies showed that two leukaemia cell lines, KG1a and K562 were porous to both HIV-TAT peptide and octaarginine (R8) when relatively low concentrations of the peptides ($\leq 2 \mu$ M) was incubated with the cells on ice (4°C) [21]. As expected no endocytic vesicles were observed, rather the labelling was diffuse in the cytosol, the nucleus and in the case of the D-form of R8, enriched in the nucleolus. Cytosolic diffusion and nuclear accumulation of the D-form of R8 peptide was also reported with incubations at 4°C in adherent HeLa cells [22] and uptake of RRRRRRW, was found to be higher at 4°C compared with 37°C in PC-12 and Chinese Hamster cells [23]. These adherent cells were however incubated with higher peptide concentrations of between 5 and 10 μ M.

Cholesterol is a major constituent of the mammalian plasma membrane, accounting for between 30 - 40 mol% of the total lipid content [24]. The conformational structure of cholesterol facilitates close interaction with the saturated fatty acid tail of sphingolipids [25], and together with glycosylphosphatidylinositol-anchored proteins, it is found enriched in distinct regions of the plasma membrane called lipid rafts [26]. Cholesterol is fundamental for the function of biological membranes and regulates, amongst other things, plasma membrane fluidity and endocytosis [27]. Cholesterol is required to maintain caveolae structure and for their invagination as caveosomes [28-30], but extraction of plasma membrane cholesterol with methyl- β -cyclodextrin (M β CD) also affects clathrin mediated uptake and macropinocytosis [31-33]. Cholesterol depletion has previously been reported to inhibit the uptake of Tat peptides in two cell lines [34], however M β CD treatment caused an enhanced cytoplasmic labelling of KG1a suspension and adherent HeLa cells at physiological temperatures using peptide concentrations of 2 and 10 μ M respectively [16, 17]

We have performed qualitative and quantitative analysis of the cellular uptake and distribution of fluorescently labelled octaarginine in suspension cell lines (KG1a, KG1 K562) and adherent cells (HeLa and A549) at different temperatures and further investigated a role for cholesterol in peptide uptake. Overall the results show that the plasma membrane of

suspension cells have significantly greater permeability to this peptide at both low and physiological temperatures but this is not due to a peptide-induced increase in cell porosity. We also show that the effects of M β CD effects on KG1a cells is specifically due to cholesterol extraction rather than other common effects associated with this agent [35].

EXPERIMENTAL

Reagents

Alexa Fluor[®] 488-C5-maleimide and Alexa Fluor[®] 488 Transferrin (Tf) were purchased from Invitrogen (Paisley, U.K). Propidium Iodide (PI), Methyl- β -cyclodextrin (M β CD), Cholesterol and Filipin III were from Sigma-Aldrich (Gillingham, UK). Glass bottomed culture dishes (35 mm) for microscopy were from MatTek Corporation, (Ashland, USA). All tissue culture reagents were from Invitrogen (Paisley, U.K).

Peptide synthesis and conjugation.

The $R_L R_L R_L R_L R_L R_L R_L R_L C_L$ peptide (designated $R_L 8$ here) was obtained from American Peptide Company (California, USA) and labelled using Maleimide-C5-Alexa488 sodium salt as previously described [16]. Purification of $R_L 8$ -Alexa488 was by HPLC using a C18 Luna 100 Å 5 µm semi preparative column (Phenomenex, Macclesfield, UK) and its mass (2126.52) was confirmed using electrospray time of flight mass spectroscopy (actual Mr = 2126.40).

Cell culture

All cell lines were maintained in a humidified 5% CO₂ incubator at 37°C. Human acute myeloid leukaemia KG1, KG1a cells, and chronic myeloid leukaemia K562 cells were cultured and maintained at a confluency of 0.5-2 x 10⁶ cells/mL in RPMI 1640 medium, supplemented with 10% (v/v) foetal calf serum, 100IU/mL penicillin and 100 μ g/mL streptomycin. Human cervical carcinoma, HeLa, and lung epithelial carcinoma A549 cells were maintained as a subconfluent monolayer in D-MEM supplemented with 10% (v/v) foetal calf serum, 100 µg/mL streptomycin.

Cellular localisation of R_L8-Alexa488 and Alexa488-Tf in suspension and adherent cells.

KG1a, KG1 and K562 cells (0.5×10^6) were washed in complete media and equilibrated at 4 or 37°C for 15 min. The medium was replaced with fresh temperature equilibrated medium containing 2 or 5 μ M R_L8-Alexa488 or 100 nM Alexa488-Tf and the cells were then incubated with the probes at these temperatures for 1 h. Cells were then washed twice in serum-free RPMI 1640 medium (SFM), once in imaging medium (SFM without Phenol red) and finally resuspended in 500 μ L of imaging medium. 100 μ L of the cell suspension was transferred to the centre of glass bottomed 35mm culture dishes and the cells were allowed to settle for 30 s – 1min. They were then analyzed on a Leica SP5 confocal laser scanning microscope equipped with an Ar and HeNe laser and a 63 x oil immersion objective.Cells were either imaged through a single section or through the z axis to generate maximum projection images. Images were finally arranged using Adobe Photoshop.

A549 and HeLa cells (1.8×10^5) were seeded into sterile glass-bottomed, 35mm culture dishes and allowed to adhere for 24 hrs under tissue culture conditions. The cells were equilibrated at 4 or 37°C for 15 min prior to replacement of the medium with fresh temperature equilibrated complete medium containing 2,5 or 20 μ M R_L8-Alexa488 or 100 nM Alexa488-Tf. The cells were incubated at these temperatures for 1 h, washed twice in SFM, once in imaging medium and finally resuspended in 500 μ L of imaging medium for immediate analysis by confocal microscopy as described.

Time lapse microscopy of RL8-Alexa488 uptake in KG1a cells

Cells (1 x 10^5) were washed in complete media, resuspended in imaging media containing 10% FBS and transferred to 35 mm imaging dishes that were then placed on a 37°C imaging platform on the confocal microscope. R_L8-Alexa488 was added to final concentrations of 2 or

10 μ M and the cells were allowed to settle for ~ 30 s, images were then acquired every 30 seconds for 10 min. The bright field and fluorescence frames were then processed as side-byside animations using the Leica LAS AF software.

Flow Cytometry

Suspension cells (5 x 10^5) were equilibrated at 4 or 37°C for 15 min, prior to incubation for 1 h with 0 - 5 µM R_L8-Alexa488 at either 4 or 37°C. Cells were then washed three times with ice cold phosphate buffered saline (PBS 2.7 mM KCl, 137 mM NaCl, 10 mM Na₂HPO₄.2H₂O, 1.8 mM KH₂PO₄) and resuspended in 200 µL PBS. Cellular fluorescence was then immediately quantified using a Becton Dickinson FACSCalibur analyser as previously described [16]. Live cells were gated on a forward and side scatter basis, and 10,000 viable cells were assayed.

A549 and HeLa cells (0.6×10^5) were seeded into 12 well tissue culture plates and grown to 90% confluency under tissue culture conditions. The cells were equilibrated at 4 or 37°C for 15 min, prior to incubation for 1 h with 0 - 5 µM R_L8-Alexa488 at either 4 or 37°C. Cells were washed once with ice cold PBS, incubated with 0.25 mg/mL trypsin- 0.1 mg/ml EDTA solution at 37°C for 5 min and then placed as a suspension to 1.5 mL centrifuge tubes. The cells were washed twice in ice cold PBS and finally resuspended in 200 µL ice cold PBS for flow cytometry as described above.

Uptake of R_L8-Alexa488 in M_BCD-treated cells

KG1a and K562 cells (5 x 10⁵) were washed once in 37°C SFM and incubated for 30 min at 37°C in 200 μL SFM containing 5 mM MβCD from a 100 mM stock in PBS; for control cells M β CD was replaced by PBS. Cells were washed in SFM, and incubated for 1 h with 2 μ M R_L8-Alexa488 at 37°C. The cells were then washed three times in SFM, twice in imaging media and analysed by confocal microscopy or flow cytometry. To assess peptide uptake at 4°C following MBCD treatment, suspension KG1a cells were treated with MBCD as above, equilibrated at 4°C for 15 min prior to incubation with 2 µM R_L8-Alexa488 at 4°C, and analysed as above.

A549 and HeLa cells (1.8 x 10⁵) seeded into 35 mm imaging dishes were washed once in SFM (37°C), and incubated for 30 min at 37°C in 750 µL SFM containing 5 mM MBCD. The cells were then incubated with the peptide, washed, trypsinised and processed for flow cytometry as described above.

Preparation of 5 mM MBCD complexed with cholesterol (MBCD:Chol)

A 5 mM solution of MBCD saturated with cholesterol (MBCD:Chol) was prepared using an adaptation of a previously described method [36]. Briefly, 16 µL of cholesterol from a stock solution (50 mg/mL in chloroform:methanol (1:1)) was added to a 50 mL glass flask. The solvent was evaporated under nitrogen, and 20 mL of SFM containing 132 mg of MBCD was added. The flask was sealed, sonicated in a bath sonicator for 3 min and finally incubated overnight at 37°C with rotation. The MBCD: Chol solution was finally filtered through a 0.45 µm syringe filter into a 50 mL conical flask and stored for up to 7 days 4°C.

Replenishment of cellular cholesterol with MBCD:Chol

KG1a cells (0.5 x 10^6) were washed in 37°C equilibrated SFM, centrifuged and media was replaced with either media containing 5 mM MBCD or MBCD:Chol (Table 1-INSERT TABLE 1 HERE). After 30 min at 37°C the cells were washed with SFM and incubated for 30 min at 37°C in either SFM or M β CD:Chol (Table 1). Cells were finally washed in SFM and equilibrated on ice for 15 min prior to a 1 h incubation in ice cold complete medium containing 2 μ M R_L8-Alexa488. Cells were washed three times in ice-cold PBS and immediately analysed for R_L8-Alexa488 uptake by flow cytometry as previously described.

Filipin staining

KG1a cells (0.5×10^6) were treated as described in Table 1 but rather than adding peptide they were stained with Filipin III using a previously described method [37]. Briefly, cells were washed three times in PBS and then fixed with 3% w/v paraformaldehyde in PBS for 30 min at room temperature. The cells were washed three times in PBS, resuspended in 120 µL PBS and 30µl aliquots were placed on multiwell microscope slides (Hendley, Essex, UK). The cells were allowed to settle for approximately 30 s before removing 25 µl of the surface liquid. The remaining cells were then dried for 3 min and the paraformaldehyde was quenched for 15 min with 50 mM glycine/PBS. The microscope slides were immersed three times in PBS prior to addition of 50 µg/ml Filipin III in PBS. The cells were incubated with this agent for 2 h at room temperature prior to another round of washing in PBS. The wells were covered with a coverslip, sealed with nail varnish and imaged through the UV (350nm) channel of a Leica DMIRB inverted fluorescence microscope equipped with a 40 x oilimmersion objective. Images were captured on a Oimaging Retiga 1300 camera and Filipin fluorescence of individual cells was quantified using Image J software. Each experiment was performed three times and a total of 300 cells were analysed for each experiment thus the data represents analysis from 900 cells.

Cell permeability studies

KG1a, KG1 and K562 cells (0.5×10^6) were equilibrated at 4°C for 15 min, washed in complete media and incubated for 1 h in complete media containing 2 or 5 μ M R_L8 and 5 μ g/mL PI. The cells were washed three times in ice cold PBS, resuspended in 200 μ L PBS and analysed by flow cytometry. For M β CD treated cells, KG1a and K562 cells were preincubated with 5 mM M β CD for 30 min, washed in SFM and incubated as above with 2 μ M R_L8 and PI prior to analysis by flow cytometry. For cholesterol depletion and addition experiments, KG1a cells were treated as described in Table 1, washed in complete media and co-incubated for 1 h in complete media containing 2 μ M R_L8 and PI at 4°C. The cells were washed three times in ice cold PBS and resuspended in 200 μ L PBS prior to analysis by flow cytometry.

A549 and HeLa cells were seeded into 12 well plates at a density of 0.6 x 10^5 cells per well and grown to confluency under tissue culture conditions. Cells were incubated in the absence or presence of 5 mM M β CD for 30 min, washed once in SFM and incubated with 2 μ M R_L8 and PI. Cells were washed once with ice cold PBS, incubated with trypsin/EDTA solution at 37°C for 5 min and then placed as a suspension into 1.5 mL centrifuge tubes. The cells were washed twice in ice cold PBS and finally resuspended in 200 μ L ice cold PBS for flow cytometry.

RESULTS

Our previous work showed that the cellular localisation of R_L 8-Alexa488 peptide in CD34⁺ KG1a leukaemia cells at $\leq 2 \mu$ M altered from being vesicular at 37°C to diffuse-cytoplasmic at 4°C [16]. However, a similar diffuse distribution of peptide was observed in these cells following 37°C incubations when the extracellular peptide concentration was increased or when plasma membrane cholesterol was sequestered. We therefore investigated whether these effects could be observed in other suspension cells and adherent cell lines. For suspension cells we used the previously reported KG1a and K562 lines [16, 21] and also utilised KG1 cells that are a more differentiated subpopulation of the original KG1a line [38]. Near identical experiments we also performed in adherent HeLa and A549 cells.

We initially incubated all the leukemic cell lines for 1 h with either 2 or 5 μ M peptide at 37 or 4°C and assessed peptide distribution using confocal microscopy. Alexa488-Tf was also utilised for these studies as this is a well characterised endocytic marker. As shown in Figure 1, a vesicular pattern of labelling was seen in all cell lines incubated at 37°C with 2 μ M R_L8-Alexa488. As previously shown, KG1a cells displayed fluorescent vesicles distributed throughout the cytoplasm, while the K562 cells showed labelling clustered within the perinuclear region of the cells [39]; KG1 cells showed a vesicular pattern of labelling similar to that of KG1a. When the peptide concentration was increased to 5 μ M there was evidence of diffuse cytosolic labelling in the three suspension cell lines and this was accompanied by punctate fluorescence (Figure 1). Decreasing the incubation temperature to 4°C resulted in diffuse cytoplasmic labelling in all three cell lines when the external concentration was 2 or 5 μ M. The localisation of Tf was similar to that of the peptide at 37°C but was confined, in all three cell lines, to the plasma membrane following 4°C incubations. Images in Figure 1 are maximum projection images from multiple sections and single images through the middle of the same cells are shown in Supplementary Figure 1.

In HeLa cells, two independent studies have shown that strong cytoplasmic labelling of R9-12 emanates as a wave of peptide from a distinct region of the plasma membrane [17, 18]. We therefore incubated KG1a cells with either 2 or 10 µM of R_L8-Alexa488 and performed time-lapse confocal microscopy every 30 seconds for 10 min in the continued presence of the peptide. Shown in Figure 2 are individual frames showing bright field or 488 nm fluorescence profiles immediately following peptide addition (0) and then after 5 and 10 min; movies spanning the entire 10 min experiment are shown as Supplementary videos 1-4. At 2 µM peptide concentration there was little evidence of vesicular labelling throughout the experiment but at 10 µM peptide concentrations, there was very strong diffuse fluorescence in a number of cells within 3 min and after 10 minutes the majority of cells had quantities of intracellular fluorescence equivalent to the background and were then only visible through the bright-field view (Figure 2B and Supplementary videos 3-4). Some cells however were more resistant to this effect and a small fraction was almost devoid of fluorescence even after 10 min. We also performed the same peptide experiments in the presence of propidium iodide (PI) but the peptide showed no evidence of enhancing the uptake of this probe (data not shown). Similar results were obtained when identical experiments were performed in K562 cells (data not shown)

To also exclude the possibility that the distribution of R_L 8-Alexa488 seen at 4°C in Figure 1 was a consequence of a general increase in plasma membrane permeability, we co-incubated, on ice, all the suspension cells with 2 or 5 μ M R_L 8 and PI and then quantified PI uptake by flow cytometry. Less than 3% of untreated cells were PI positive and R_L 8 had no significant effect in any of the three cells lines on the uptake of this probe.

Several of these experiments were then performed in adherent cell lines. HeLa and A549 cells displayed vesicular labelling at both 2 and 5 μ M peptide concentration when experiments were performed at 37°C (Figure 3). When identical experiments were performed on ice, only plasma membrane labelling was observed in A549 cells but some evidence of cytoplasmic labelling was observed in HeLa cells at 5 μ M (Figure 3A). We therefore incubated both cell lines with 20 μ M peptide at 4 and 37°C (Figure 3B). At 37°C some HeLa cells displayed evidence of diffuse as well as vesicular labelling, however, no diffuse cytosolic labelling was observed in A549 cells. When cells were incubated at this increased peptide concentration on ice there was strong diffuse cytosolic labelling in HeLa cells but approximately 40% of the A549 cells had no evidence of cytosolic labelling and in these cells the peptide was localised, primarily to the plasma membrane (Figure 3B). Again the maximum projection images are shown and single section images shown in Supplementary Figure 2 show more distinct plasma membrane labelling.

Quantification of R_L8-Alexa488 uptake at 4 and 37°C

We then quantified the amount of peptide internalised at 4 and 37° C, initially in the suspension cell lines. At all studied concentrations, the K562 cell line internalised significantly higher (~ 2.5 fold) amounts of the peptide compared with KG1 and KG1a cells at 37° C, however, at 4°C fluorescence was significantly higher (~ 2.0 fold) in KG1 and KG1a cell lines (Figure 4A). Analysis of cellular fluorescence profiles of the leukaemia cells following 4°C incubations show that all the cell lines exhibit two distinct populations, one of high fluorescence and one of low fluorescence (Figure 5A-B); this was previously noted in KG1a cells [16].

These experiments were then performed in adherent cell lines and HeLa cells accumulated significantly higher amounts of R_L 8-Alexa488 compared with A549 cells, and suspension cells (Figure 4 A,C). However, at 4°C, peptide accumulation was much lower in both adherent cell lines compared with the suspension cells (Figure 4D). Cellular FACS profiles from representative experiments are shown in Figure 5 C–D. Under all conditions only one major peak of fluorescence was observed but increasing the peptide concentration increased the range of fluorescence intensities in both cell lines and thus a broadening of the peaks.

Effects of Cholesterol depletion on the uptake of R_L8-Alexa488 at 37°C

Our previous work showed that pre-incubating KG1a cells with M β CD resulted in an influx of 2 μ M R_L8-Alexa488 into the cytosol when peptide incubations were performed at 37°C [16]. We extended these studies to include K562, HeLa and A549 cells and for this the cells were pre-incubated with 5 mM M β CD before washing and adding R_L8-Alexa488 at 2 μ M for 1 h at 37°C. Figure 6A shows that M β CD treated KG1a cells exhibit a predominantly diffuse cytoplasmic labelling but peptide labelled vesicles were also observed. Similar though less pronounced effects were observed in K562 cells and the prominent perinuclear region labelling was also clearly in evidence. This enhanced diffuse labelling was not extended to the adherent A549 and HeLa cells, as M β CD treated cells display R_L8-Alexa488 localised to distinct intracellular vesicles. The likelihood that the cytosolic labelling of R_L8-Alexa488 observed in KG1a and K562 following M β CD mediated cholesterol sequestration was due to increased permeability was again ruled out using PI co-incubation experiments. M β CD treatment had no effect on the number of PI positive cells which remained at < 2% of the total.

To quantify the effects of M β CD on peptide uptake, the cells were treated with 5 mM M β CD as above prior to measuring cellular fluorescence using flow cytometry. M β CD treatment of KG1a and K562 resulted in a significant reduction in the average cell fluorescence; 36% (P = < 0.01) in KG1a and 58% (P < 0.01) in K562 cells. M β CD treated HeLa cells showed a 20% decrease of cell associated fluorescence whilst A549 cells showed a 5% increase in cell fluorescence (Figure 6B), however, neither of these were significantly different from control cells.

As HeLa and A549 cells still exhibited vesicular labelling of both R_L 8-Alexa488 and Tf following 5 mM M β CD treatment, the concentration of M β CD was increased to 10 mM and the cells were pre-incubated with this compound for 30 or 60 min prior to the addition of peptide. Some HeLa cells displayed weak diffuse fluorescence, however, R_L 8-Alexa488 containing vesicles were also clearly visible. Under the same experimental conditions the peptide in the A549 cells was still localised to distinct vesicles. These vesicles appeared to be larger in size and much fewer in number than those seen in untreated cells, and the degree of plasma membrane labelling was also more prominent (Supplementary Figure 3). Increasing the M β CD pre-incubation time to 60 min enhanced the degree of diffuse cytoplasmic labelling but transferrin in these cells was largely contained on the plasma membrane. Cellular morphology was also significantly altered, and cells tended to lift from the tissue culture plastic during the experiments. The A549 cells were much more resilient and under these harsh conditions and continued to display peptide and transferrin labelled vesicles (Supplementary Figure 3).

Effects of Cholesterol depletion on the uptake of R_L 8-Alexa488 at 4°C

This study and our previous work has highlighted the effects of M β CD on the uptake of R_L8-Alexa488 at 37°C in KG1a cells [16] and we investigated whether similar effects were observed when M β CD treated cells were treated with the peptide on ice. KG1a cells were pre-incubated in 5mM M β CD and incubated on ice with 2 μ M R_L8-Alexa488. Figure 7 shows that M β CD treatment results in a significant increase (P = <0.01) in the proportion of cells in the high fluorescence peak; 56 % in control cells versus 86 % in M β CD treated cells. The fluorescence of the high peak in M β CD treated cells was also significantly higher than control cells (P = <0.01). Thus, in KG1a cells, M β CD decreased and increased cellular accumulation of the peptide at 37 and 4°C respectively. Common to both conditions was the accompanying prominence of diffuse cytoplasmic labelling.

Addition and replenishment of cholesterol using M β CD cholesterol complexes (M β CD:Chol)

Complexes were prepared as described in the methods and added to either control cells or cells previously depleted of cholesterol (Table 1); they were then incubated with the peptide on ice. As previously shown in Figure 7, M β CD treatment of control cells led to the loss of the low peak as 87% of the cell population now accumulated a much higher quantity of the peptide. Addition of the M β CD:Chol complex to cholesterol depleted cells, however, restored the peak profiles to those of control cells (Figure 8C); similar profiles were also observed when untreated cells were incubated with the complexes prior to peptide addition (Figure 8D). Cholesterol addition to either untreated (Figure 8D) or cholesterol depleted cells (Figure 8C) consistently increased the number of cells falling within the low peak, however this effect was not statistically significant. Identical experiments with PI showed that none of these treatments increased cellular permeability and 98% of the cells were negative for PI.

The polyene antibiotic Filipin III binds cholesterol and may be used, in conjunction with fluorescence microscopy, to visualise cellular cholesterol. We therefore analysed Fillipin staining intensity and distribution in cells treated as above (Table 1). The cells were fixed and incubated with Filipin at the point in the experiment where the peptide would normally have been added. The right hand columns in Figure 8 show representative images of Filipin labelling in cells and comparison of control and M β CD treated cells in Figures 8 A and B highlight the ability of this agent to extract cholesterol. The intensity of staining in Fig 8C was appreciably higher than that in Figure 8B suggesting that some cholesterol replenishment had occurred in cells that were previously treated with M β CD and then incubated with M β CD:Cholesterol complexes (Figure 8C). Figure 8D confirms the effectiveness of M β CD as a cholesterol donor as control cells incubated with complexes had increased fillipin staining. We quantified the fluorescence of 900 individual cells for each condition and Figure 8E confirms the microscopy data and show that M β CD:cholesterol complexes increased the fluorescence of control cells by ~ 40% and addition of the complexes to cholesterol depleted cells restored cholesterol levels to control levels.

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DISCUSSION

Recent studies from independent laboratories show that increasing the concentrations of cationic CPPs above a certain threshold leads to a dramatic increase in the fraction that is diffusely localised in the cytoplasm [16, 17, 20]. Time lapse imaging experiments at high peptide concentration in HeLa cells shows that an aggregation of peptide in a distinct region of the plasma membrane acts as a nucleation zone for subsequent spreading to other cellular locations [17, 18]. This process was inhibited by the protein kinase C\delta inhibitor rotterlin, and the endocytic inhibitor chlorpromazine, suggesting it is an active process [17]. We did not observe these nucleated regions in leukaemia cells when similar time-lapse microscopy experiments were performed during addition of the peptide and thereafter in its continued presence. This suggests that the noted peptide aggregation at the plasma membrane, preceding translocation, is not a common entry mechanism. We also show extensive diffuse cytoplasmic labelling in suspension and adherent cell lines when peptide incubations were performed on ice. The concentration required to visualise this effect was much higher in adherent cells compared with the leukaemia cells but overall the data argues that in these experiments, peptide translocation across the plasma membrane is an energy independent process. In line with this, flow cytometry analysis showed that accumulation of the peptide following incubations on ice at 2 µM was 10 or 20 fold higher in K562 and KG1/KG1a cells respectively compared with adherent cells. Studies in Jurkat cells, another suspension cell line, using relatively high peptide concentrations of 12.5-25 µM showed pronounced cytosolic labelling of R7-R9 at room temperature and 3°C incubations [40, 41].

When KG1a cells were incubated at 37°C for 10 min with the peptide at 2 μ M we were unable to observe any significant vesicular labelling and longer incubations are required for these to be clearly seen. This is consistent with a requirement, under these conditions, for time and endocytosis for uptake to be visualised. However we cannot refute the possibility that even at these low concentrations, an undetected fraction of peptide gains access to the cells directly across the plasma membrane. Increasing the peptide concentration to 10 μ M in KG1a cells resulted in a very rapid cytosolic accumulation with no evidence of a requirement for endocytosis or indeed any energy dependent process. At intermediate concentrations (2 – 10 μ M) it is difficult to ascertain how much of the peptide actually enters KG1a cells via endocytosis or directly through the plasma membrane and, in view of these studies and other recent publications [17, 18, 20], the same could be said for other cell types.

Though all cell lines studied here have a capacity to allow peptide entry directly through the plasma membrane at 4°C the adherent cells are much more refractory to this. The reason for this is currently unknown but the peptide did not induce leakage of PI in any of the studied cell lines. As endocytosis is an energy-dependent process, lowering the temperature of peptide incubations to 4°C should effectively eliminate the involvement of endocytosis in internalisation, thus direct permeation of peptide through the plasma membrane is responsible for the observed results. All of these cell lines will have unique plasma membrane compositions in terms of lipids, proteins and carbohydrates and these may influence membrane porosity to R8 and other CPPs. A549 cells were the most resistant to peptide entry under all conditions and these are models for alveolar type II pneumocytes, the cells responsible for the production and secretion of pulmonary surfactant in vivo [42-44]. In culture they have been shown to secrete high levels of di-saturated phosphatidylcholine [43] and this could influence the effective peptide concentration, peptide interaction with the plasma membrane and thus translocation across this structure. Quantitative uptake experiments with suspension cells were performed without trypsinisation and heparin

washing but this treatment has very little effect on fluorescence values in these cells lines [16]. The fraction of peptide that is located on the plasma membrane is higher in the adherent cells that we have studied, and analysis of these requires these additional treatments.

Diffuse cytoplasmic peptide distribution was observed in all cell lines following cholesterol depletion; but higher M β CD concentrations and incubation times were required to observe these effects in adherent lines, especially A549 cells. The amount of cholesterol sequestered by this agent is cell line, and incubation time dependant [35] and this may explain the differences in experimental conditions required to induce diffuse labelling. We did not observe a general increase in cell porosity with 5mM M β CD, but higher concentrations of and longer incubations had very obvious effects on cell morphology. Despite inducing a diffuse peptide labelling, M β CD caused an overall reduction in peptide uptake in suspension cells but was without effect in HeLa and A549 cells. This is in agreement with earlier studies showing M β CD to have no effect on R9 and Tat uptake in HeLa cells, provided the peptide concentration was < 5 μ M [17]. At higher peptide concentrations, cholesterol depletion promoted the rapid translocation of these two CPPs through the plasma membrane. Though experiments performed with M β CD give interesting data, the fact that it causes this peptide and other CPPs to change their entry mechanisms, cautions against its use as a sole method for assessing the role of lipid rafts and other membrane domains in CPP uptake.

Preparation of the MBCD: Chol complexes allowed us for the first time to investigate whether addition of cholesterol to either control or cholesterol depleted cells had any effects on peptide uptake. These kinds of experiments are often performed to confirm that the effects of MBCD are solely due to cholesterol depletion from the plasma membrane [35]. Flow cytometry and microscopy of KG1a and other suspension cells following peptide incubation on ice reveal a distinct and significant population of cells that have very low levels of internalised peptide. These, based on the flow cytometry profiles, were termed the low peak Adding additional cholesterol to these cells had little effect on the population [16]. fluorescence profiles but the overall increase in cholesterol values was small and may not have been sufficient to cause an effect. Cholesterol depletion however, resulted in the disappearance of this population and all the cells internalised higher amounts of peptide. Cells in this low peak population may therefore have higher plasma membrane cholesterol levels and the peptide is therefore less able to gain access to the cell interior. In support of this is the fact that we could reverse the effects of MBCD treatment by adding cholesterol thus demonstrating the critical role of this steroid in CPP translocation under these conditions.

These studies have shed further light on cellular and experimental parameters that influence the uptake, through the plasma membrane or endocytic pathways, and intracellular distribution of cationic CPPs in different cell lines. This could help in the design of new CPPstrategies for the cellular delivery of therapeutic macromolecules; a major goal for this field of research.

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FIGURE LEGENDS

Figure 1 Intracellular distribution of R_L8-Alexa488 and Alexa488-Tf in suspension cells. KG1a, KG1 and K562 cells were incubated at 37 or 4°C with 2 or 5 μ M R_L8-Alexa488 or 100 nM Alexa488-Tf for 1 h before washing and analysis by confocal microscopy. Images are of 20 individual sections through the z-axis that were overlayed to generate maximum projection profiles. Single sections through the cells are shown as Supplementary Figure 1. Arrows indicate cytoplasmic labelling and inlay in 2 μ M K562 cells at 37°C shows direct interference contrast images of cells overlayed with fluorescent images. Scale bars 10 μ m.

Figure 2 Time-lapse microscopy of R_L8-Alexa488 uptake in KG1a cells.

Cells were incubated with 2 or 10 μ M R_L8-Alexa488 and immediately analysed by timelapse confocal microscopy. Frames were recorded every 30 seconds for 10 min and images representing cellular fluorescence and bright field profiles immediately following peptide addition (0) and after 5 and 10 min. Time-lapse movies covering the 10 min imaging period for the entire field of view and depicted cropped region are shown as Supplementary Movies 1-4. Scale bars 10 μ m.

Figure 3 Cellular distribution of R_L8-Alexa488 and Alexa488-Tf in HeLa and A549 cells.

(A) HeLa and A549 cells were incubated at 37 or 4°C with 2 or 5 μ M R_L8-Alexa488 or 100 nM Alexa488-Tf for 1 h before washing and analysis by confocal microscopy. (B) HeLa and A549 cells were incubated at 37 or 4°C with 20 μ M R_L8-Alexa488 for 1 h before washing and analysis by confocal microscopy. Images shown are of 20 individual sections through the z-axis that were overlayed to generate maximum projection images. Arrows show plasma membrane labelling. Scale bars 10 μ m.

Figure 4 Quantification of R_L 8-Alexa488 uptake at different temperatures in suspension and adherent cells.

Suspension (A-B) or adherent (C-D) cells were incubated for 1 h with $1 - 5 \mu M R_L 8$ -Alexa488 at 37 (A, C) or 4°C (B, D) prior to washing and quantifying peptide uptake by flow cytometry. Graphs represent the geometric means \pm SD from 3 separate experiments performed in duplicate. Low and High in B represent fluorescence means of two cell populations that are observed in suspension cells under these conditions (See Figure 5B).

Figure 5 Cellular fluorescence profiles following R_L 8-Alexa488 uptake in suspension and adherent cells.

Suspension (A-B) or adherent (C-D) cells were incubated for 1 h with $1 - 5 \mu M R_L 8$ -Alexa488 at 37 (A, C) or 4°C (B, D) prior to washing and quantifying peptide uptake by flow cytometry. Suspension cells incubated at 37°C with the peptide display a single peak of fluorescence (A) whilst those incubated at 4°C display 2 peaks of fluorescence designated Low and High (Figure 4B).

Figure 6 Effects of cholesterol depletion on the intracellular distribution and uptake of R_L 8-Alexa488.

Cells were pre-incubated for 30 min in the absence (Control) or presence (M β CD) of 5 mM M β CD prior to washing and incubation for 1 h with 2 μ M R_L8-Alexa488. The cells were analysed by confocal microscopy (A), or flow cytometry (B). (A) Images shown are from 20 individual sections through the z-axis to generate maximum projection profiles. Scale bars 10 μ m. (B) fluorescence of control cells was set to 100%. Statistical analysis for comparing the

uptake of R_L 8-Alexa488 in untreated cells compared with uptake in M β CD treated cells was performed using Student's t test. **P <0.01; decreased relative to control.

Figure 7 Effects of cholesterol depletion on the uptake of R_L 8-Alexa488 in KG1a cells at 4°C.

Cells were pre-incubated for 30 min in the absence (Control) or presence (M β CD) of 5 mM M β CD at 37°C, prior to washing and incubation for 1 h with 2 μ M R_L8-Alexa488 at 4°C. Cells were washed and immediately analysed by flow cytometry. Values above the peaks indicate the percentage of the total cell population in each peak area obtained from 3 experiments performed in duplicate. Overlay - Untreated = Black line; Control = Black fill; M β CD = Grey line.

Figure 8 Effects of cholesterol replenishment on the uptake of R_L 8-Alexa488 in KG1a cells.

(A-D) KG1a cells were incubated under conditions described in Table 1 prior to analysis of R_L 8-Alexa488 uptake at 4°C by flow cytometry (left column) or Filipin staining (right column). Values above the peaks indicate the percentage of the total cell population in each peak area. Data are from one representative experiment, each experiment was performed three times in duplicate. Scale bars 10 μ m. E Quantification of Filipin fluorescence. Results are normalised to control cells (100%), Statistical analysis for comparing Filipin fluorescence was performed using one way ANOVA followed by a Dunnetts post hoc test. **P <0.01; statistically different to control cells.

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Condition	Sample	Step 1(37°C)	Step 2	Step 3 (37°C)	Step 4 (4°C)
(Figure 8)		0-30 min		31-60 min	61 – 120 min
А	Control	SFM	Wash	SFM	$2 \mu M R_L 8$ -
					Alexa488
В	MβCD	5 mM MβCD	Wash	SFM	2 μM R _L 8-
	-	-			Alexa488
С	MβCD,	5 mM MβCD	Wash	5 mM MβCD:Chol	2 μM R _L 8-
	M _β CD:Chol	-			Alexa488
D	MBCD:Chol	5 mM MBCD:Chol	Wash	SFM	2 μM R _L 8-
		,			Alexa488

Table 1 Incubation steps for cells treated with M β CD and/or M β CD:Cholesterol complexes to generate Figure 8.

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Watkins et al. Figure 3

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Watkins et al. Figure 5



Watkins et al. Figure 6



Watkins et al. Figure 7



Watkins et al. Figure 8