

Synergistic interactions of indole-2-carboxamides and β -lactam antibiotics against Mycobacterium abscessus

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1	Synergistic interactions of indole-2-carboxamides and eta -lactam antibiotics							
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30 ABSTRACT

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New drugs or therapeutic combinations are urgently needed against *Mycobacterium abscessus*. Previously, we demonstrated the potent activity of indole-2-carboxamides **6** and **12** against *M. abscessus*. We show here that these compounds act synergistically with imipenem and cefoxitin *in vitro* and increase the bactericidal activity of the β -lactams against *M. abscessus*. In addition, compound **12** also displays synergism with imipenem and cefoxitin within infected macrophages. The clinical potential of these new drug combinations requires further evaluation. 39 Mycobacterium abscessus, is a fast-growing mycobacterial species particularly frequent in 40 patients with cystic fibrosis (CF), bronchiectasis and chronic obstructive pulmonary diseases (COPD) (1, 2). In the context of CF and COPD, M. abscessus has emerged as an important 41 opportunistic pathogen responsible for significant mortality (3). However, treatment of M. 42 43 abscessus lung disease remains particularly challenging, largely due to intrinsic resistance of M. abscessus to most antibiotic classes (1, 2). The typical treatment regimen includes a 44 45 combination of macrolides, aminoglycosides and intravenous β -lactams (cefoxitin or imipenem) for at least 12 months (2). There is no reliable therapeutic strategy for the treatment of M. 46 47 abscessus pulmonary infections and the lengthy treatment duration and drug toxicity effects are often accompanied with severe undesirable outcomes. Thus, there is an unmet clinical need 48 for new drug regimens with improved efficacy to treat these infections. Along with the 49 development of repurposed drugs, the drug pipeline has recently been fueled with chemical 50 51 entities acting on new targets in *M. abscessus*, such as the mycolic acid transporter MmpL3 inhibited by a wide range of structurally-unrelated small molecules (4). Chemical inhibition of 52 MmpL3 abolishes the export of trehalose monomycolate to the outer membrane, leading to 53 54 significant bacterial growth inhibition. In *M. abscessus*, these chemotypes include a piperidinol-55 based compound (PIPD1) (5), benzimidazoles (6) as well as indole-2-carboxamide derivatives (7, 56 8). They exhibit high activity against clinical isolates in vitro, in macrophages, zebrafish or in an acute murine model of *M. abscessus* infection (5-7, 9). Due to their pronounced role in 57 58 modulating the cell wall architecture and composition, it may be speculated that chemical inhibition of MmpL3 would increase the efficacy of other drugs. Although this has been 59 reported in M. tuberculosis whereby the indolecarboxamides and adamantyl-ureas act 60 synergistically with rifampin, bedaquiline, clofazimine and β -lactams (10), to date this has not 61 62 been investigated in *M. abscessus*.

Indolecarboxamides 6 and 12 (Figure 1) present favorable absorption, distribution, 63 metabolism, and excretion (ADME) properties (7, 11) and the ease to obtain them in high yields 64 prompted us to investigate their interaction profiles with different classes of antibiotics active 65 against *M. abscessus* and/or used as part of clinical treatment regimens. These include 66 sutezolid; an oxazolidinone inhibiting bacterial translation (12), clofazimine; affecting the 67 energy metabolism (13), and particularly β -lactams (the cephalosporin cefoxitin (FOX) and the 68 carbapenem imipenem (IPM)); inhibiting peptidoglycan biosynthesis and reported to act in 69 70 synergy with different drugs against *M. abscessus* (14, 15) (Figure 1). The minimal inhibitory 71 concentrations (MIC) were determined according to the CLSI guidelines (16) in Cation-Adjusted 72 Mueller-Hinton Broth (CaMHB; Sigma-Aldrich). Pair combinations between Cpd6 and Cpd12 with other drugs were tested in CaMHB in a typical checkerboard assay (17) with resazurin 73 reduction as a metabolic readout. This allowed us to establish the fractional inhibitory 74 75 concentration index (FICI) of each drug combination, where FICI was determined using formula: MIC_A with B/MIC_A alone + MIC_B with A/MIC_B alone and values ≤ 0.5 were considered synergistic, 76 77 between 0.5 and 4 as indifferent and \geq 4 as antagonist (10). While Cpd12 showed a FICI value \leq 0.5 with IPM or FOX, indicative of synergistic interactions, no interaction (indifference) was 78 79 recorded with clofazimine or sutezolid. A similar interaction profile was also observed when combining these drugs with Cpd6 (Table 1). 80

To determine the optimal concentration of Cpd12 showing no or little activity against M. 81 *abscessus* CIP104536^T (S variant), cultures were exposed to concentrations ranging from 0.03 to 82 83 0.125 µg/ml Cpd12 prior to colony-forming units (CFU) determination at 5 days post-exposure. While at the MIC (0.125 μ g/ml) there was a ~6 to 7 Log drop in the CFU counts, no decrease 84 was observed at 0.03 µg/ml (Figure 2A). This concentration was thus chosen to investigate the 85 potential synergistic activity of Cpd12 with β -lactams. IPM was used at 4, 8 and 16 μ g/ml and 86 87 FOX was used at 16 and 32 μ g/ml, corresponding to concentrations 4- and 2-fold lower than their MIC, respectively (Table 1). At these sub-MIC, Cpd12 plus IPM decreased CFU counts by ~4 88 89 to 6 Log, as compared to Cpd12 or IPM alone. Similarly, FOX alone at 16 and 32 µg/ml was 90 accompanied by a reduction in the CFU counts, while the addition of 0.03 µg/ml Cpd12 further reduced the CFU by ~2 to 3 Log (Figure 2A). Comparable results were obtained when assessing 91 the synergistic activity of Cpd6 with IPM or FOX (Figure 2B). At 0.06 µg/ml and 0.125 µg/ml of 92 Cpd6, the CFU were reduced by ~1 and 5 Log, respectively, and no further decrease in the CFU 93 94 was observed at 0.25 µg/ml. The addition of 4 µg/ml or 8 µg/ml IPM to 0.06 µg/ml Cpd6 resulted in a ~3 Log decrease in the CFU as compared to IPM alone. Similarly, the simultaneous 95 96 addition of 0.06 μ g/ml Cpd**6** to FOX (at 16 or 32 μ g/ml) exacerbated the effect of FOX, leading to a ~4 Log decrease in the CFU as compared to FOX alone (Figure 2B). To assess whether these 97 interactions are due to the chemical inhibition of MmpL3, the CFU killing assay was repeated 98 using a strain highly resistant to both Cpd12 and Cpd6 due to the presence of an A309P 99 100 missense mutation in MmpL3 (MIC_{Cpd12/Cpd6} of 32 μ g/ml, (7)). Figure 2C shows the Cpd12 plus 101 IPM or Cpd12 plus FOX synergistic interactions were abolished, indicating that inhibition of 102 MmpL3 is necessary to establish drug synergism with the β -lactams. This confirms a previous

study demonstrating that synergistic interactions between the indolecarboxamides NITD-304
 and NITD-349 with other clinically-relevant drugs is diminished in an MmpL3 mutant of *M. tuberculosis* resistant to indolecarboxamides (10).

The *M. abscessus* complex comprises three subspecies, *M. abscessus* subsp. abscessus, *M.* 106 107 abscessus subsp. bolletii and M. abscessus subsp. massiliense (18), displaying different drug susceptible profiles. We therefore tested the activity of the Cpd12/ β -lactam combinations 108 against a panel of *M. abscessus* complex clinical isolates (19, 20) by determining the CFU counts 109 of two *M. abscessus* subsp. *abscessus* strains (1298 and 2587), two *M. abscessus* subsp. *bolletii* 110 strains (97 and 116) and two M. abscessus subsp. massiliense strains (120 and 122). In general, 111 112 the combination of Cpd12 plus IPM or Cpd12 plus FOX resulted in significantly reduced CFU 113 counts as compared to the cultures exposed to Cpd12, IPM or FOX alone. However, the 6 114 strains responded differently to each of these drug combinations (Figure 3). Overall, CFU determination in vitro was in direct agreement with the checkerboard results and indicate that 115 116 low concentrations of Cpd6 and Cpd12 improve the activity of IPM or FOX against the M. 117 abscessus complex in vitro.

The activity of IPM and FOX alone or in combination with Cpd12 was next evaluated using 118 THP-1 macrophages infected with *M. abscessus* CIP104536^T (S variant) carrying pTEC27, as 119 previously described (6). Infected cells were either left untreated or exposed for 2 days to 120 121 Cpd12, IPM or FOX alone or in combination, lysed and plated for subsequent intracellular 122 bacterial load determination. While IPM and FOX displayed only minor effects at the concentrations tested, the addition of 0.06 µg/ml Cpd12 significantly reduced the bacterial 123 burden by ~0.5 Log (Figure 4A). This effect was further exacerbated (1 Log reduction) when 124 125 0.25 µg/ml of Cpd12 was used. A microscopy-based infectivity assay reported earlier (6, 21) was 126 subsequently used to quantify the impact of drug treatment on the percentage of infected THP-1 cells. The results confirm the pronounced reduction in the number of infected macrophages 127 treated with Cpd12 plus IPM or Cpd12 plus FOX (~50% decrease with 0.06 μg/ml Cpd12), as 128 compared to cells treated with the drugs alone at day 2 post-infection (Figure 4B and 4C). 129 Collectively, these findings suggest that the Cpd12/IPM and Cpd12/FOX combinations are 130 effective on intracellular M. abscessus. 131

132 IPM use is usually associated with improved outcome for the treatment of *M. abscessus* 133 pulmonary disease (22) and IPM combined with other antibiotics exerts a synergistic or 134 additive effect contributing to its success (14, 15). However, resistance to IPM is also 135 emerging, highlighting the limiting application of IPM in the treatment of *M. abscessus* infections (23, 24). The present results highlight the therapeutic potential of the Cpd12/IPM 136 combination against a panel of distinct clinical M. abscessus complex isolates. This 137 combination may help lowering the effective dose of IPM, contributing to reductions in the 138 emergence of IPM-resistance strains. Similarly, the use of indolecarboxamides as companion 139 drugs further reduces the effective concentrations of FOX, restricting the eventual emergence 140 of *M. abscessus*-resistant mutants. A plausible hypothesis explaining this synergistic activity 141 may rely on the fact that the indolecarboxamides, through inhibition of mycolic acid transport 142 143 at the bacterial surface, disorganise and disrupt the mycomembrane, which accelerates the 144 penetration of the β -lactam drugs to reach their targets (the L,D-transpeptidase for IPM and the D,D-transpeptidase for FOX), leading to inhibition of peptidoglycan synthesis. Conversely, 145 146 inhibition of the peptidoglycan transpeptide linkages by the β -lactams may also facilitate the 147 access of Cpd6/Cpd12 to their inner membrane target. However, other underlying 148 mechanisms may be responsible to the observed synergistic effects and further research is required. 149

In summary, indole-2-caboxamides represent a promising chemotype improving the activity of FOX and IPM; two recommended drugs for the treatment of *M. abscessus* pulmonary infections (2). Future studies should evaluate whether β -lactamase inhibitors (33,34) would further improve the observed synergistic interactions. Our results indicate that the Cpd**12**/ β lactam combinations are highly effective within macrophages by reducing the intracellular bacterial burden and the percentage of infected cells, emphasizing the need for further evaluation in pre-clinical animal models.

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- 161
- 162 The authors have no conflict of interest to declare.
- 163
- 164 All data will be made publicly available upon publication and upon request for peer review.

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250

Table 1. Interaction of Cpd6 and Cpd12 with other antibiotics against *M. abscessus* CIP104536^T (smooth strain) assessed by checkerboards REMA in CaMH. Results are the mean of the FICI \pm SD of 3 independent experiments. SUT, sutezolid; IPM, imipenem; FOX, cefoxitin; CFZ, clofazimine.

							255
				Interaction with Cpd12		Interaction with Cpd6	
Compound	MIC	FICI (mean)	SD	Outcome	FICI (mean)	SD	Outcome
Cpd 12	0.125						250
Cpd 6	0.25						259
SUT	16	0.84	±0.27	Indifferent	0.62	±0	Indifferent
IPM	16	0.5	±0.18	Synergistic	0.5	±0	Synergistic
FOX	64	0.45	±0.14	Synergistic	0.44	±0.16	Synergistic
CFZ	0.5	0.88	±0.18	Indifferent	0.88	±0.18	Indifferent

260 **FIGURE LEGENDS**

261

Figure 1. Structures of imipenem, cefoxitin and the lead indolecarboxamides 6 and 12 used in this study.

264

Figure 2. Synergistic activity of indole-2-carboxamide derivatives with IPM and FOX in vitro. CFU 265 counts of Cpd12 (A) or Cpd6 (B) given alone or in combination with imipenem (IPM) or cefoxitin 266 (FOX). M. abscessus cultures were incubated at 30 °C in CaMH for 5 days in the presence of the 267 indicated compounds (µg/ml) and plated on LB agar prior to CFU enumeration. (C) CFU 268 determination of *M. abscessus* mutant A309P (spontaneous resistant strain to Cpd12 carrying 269 270 the A309P mutation in MmpL3) was exposed to the indicated antibiotics (μ g/ml) at 30 °C in 271 CaMH for 5 days. Graphs represent the mean of three independent experiments completed in 272 triplicate. Data are expressed as the mean \pm SD. The statistical test used is a non-parametric Mann Whitney t-test in which the combinations were compared to the drugs alone. ns, non-273 274 significant. ** $P \le 0.01$, *** $P \le 0.001$.

275

Figure 3. CFU determination of clinical isolates exposed to Cpd12 given alone or in combination with imipenem (IPM) or cefoxitin (FOX). *M. abscessus* cultures were incubated at 30 °C in CaMH for 5 days in the presence of the indicated compounds (μ g/ml) and plated on LB agar prior to CFU enumeration. Data are expressed as the mean ± SD from three independent experiments completed in triplicate. The statistical test used is a non-parametric Mann Whitney *t*-test in which the combinations were compared to the drugs alone. **P* ≤ 0.05, ***P* ≤ 0.01, ****P* ≤ 0.001.

282

Figure 4. Impact of Cpd12 alone or in combination on intracellular-residing *M. abscessus*. THP-1 283 284 macrophages were infected with *M. abscessus* S expressing TdTomato (MOI of 2:1) and treated 285 with the indicated compounds (μ g/ml). (A) CFUs were determined at day 0 and day 2 postinfection. Data represents the mean ± SD of three independent experiments completed in 286 triplicate. For statistical analysis, non-parametric Mann Whitney's *t*-test was performed. ** $p \leq \frac{1}{2}$ 287 288 0.01, $p \le 0.001$. (B) Percentage of infected THP-1 macrophages at day 0 and day 2 postinfection. Data shown are mean values ± SD for one representative experiment completed in 289 triplicate. One-way ANOVA kruskal-wallis was used as a statistical test. $\frac{m}{p} \leq 0.001$. (C) 290 Immunofluorescent fields were taken at day 2 post-infection at magnification x40 (using 291

- 292 confocal microscopy) showing the nuclei of macrophages (DAPI in blue), infected with red-
- fluorescent *M. abscessus* in absence or in presence of the drugs used alone or in combination.
- 294 Yellow arrows emphasize red-fluorescent *M. abscessus* (tdTomato) within macrophages. Only
- intracellular bacteria that were individually observed under the microscope were recorded.





Imipenem

Cefoxitin



Compound 6









M. massiliense 120 **D0** D5 12 11 10 Log₁₀ CFU/mL 9 8 7 6 5 4 3 CP012.0.3 * PM. 4. m. 2 T Untreated rungener 0.03 Untreated







С





Cpd12 0.06 + IPM 0.5 Day2











