# Systematic Design of Pulse Dosing to Eradicate Persister Bacteria

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**Abstract**

A small fraction of infectious bacteria use persistence as a strategy to survive exposure to
antibiotics. Periodic pulse dosing of antibiotics has long been considered a potentially effective
strategy towards eradication of persisters. Recent studies have demonstrated through *in vitro*
experiments that it is indeed feasible to achieve such effectiveness. However, systematic design
of periodic pulse dosing regimens to treat persisters is currently lacking. Here we rigorously
develop a methodology for the systematic design of optimal periodic pulse dosing strategies for
rapid eradication of persisters. A key outcome of the theoretical analysis, on which the proposed
methodology is based, is that bactericidal effectiveness of periodic pulse dosing depends mainly
on the ratio of durations of the corresponding on and off parts of the pulse. Simple formulas for
critical and optimal values of this ratio are derived. The proposed methodology is supported by
computer simulations and *in vitro* experiments.
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**Author Summary**

Administering antibiotics in periodic pulses that alternate between high and low concentration
has long been known as a possible dosing strategy to treat stubborn infections caused by bacteria
known as *persisters*.  Such bacteria use clever mechanisms to survive otherwise lethal temporary
exposure to antibiotics and to resume normal activity upon antibiotic removal.  Persisters pose a
serious health problem.  Recent studies have elucidated mechanisms of persistence and have
confirmed that pulse dosing, if designed appropriately, can indeed be effective.  However,
effective pulse dosing design has been mainly handled by trial and error, requiring relatively
extensive experimentation.  Here we develop a method for rapid systematic design of effective
pulse dosing.  The method relies on a simple mathematical model and a minimal amount of
standard experimental data.  We derive corresponding design formulas that explicitly
characterize the shape of generally effective or optimal periodic pulses.  We tested our method
through computer simulations and *in vitro* experiments, as well as on prior literature data.  In all
cases, the outcomes on persister bacteria eradication predicted by our method were confirmed.
These results pave the way for ultimately developing effective pulse dosing regimens in realistic
situations *in vivo*.

## 1    INTRODUCTION

Persister cells are a small fraction of a bacterial population in a physiological state that enables them to survive otherwise lethal doses of antibiotics.  While these cells remain in the state of persistence, they cannot be killed by conventional antibiotics, unless the cells phenotypically switch to the normal cell state and become susceptible to antibiotics again [1]. Persisters are enriched in biofilms [2] and implicated in many chronic infections such as tuberculosis and relapse of infections such as recurrent urinary tract infection or cystic fibrosis [3–8].  Unlike antibiotic-resistant mutant cells, persisters are phenotypic variants that survive treatments without acquiring heritable genetic changes [9].  However, prolonged persistence creates favorable conditions for the emergence of the mutant cells [10,11].

Although the term *persister* was coined in the 1940s [12], our fundamental knowledge of persisters has accelerated only in the last two decades with the advent of new technologies enabling us to study cell heterogeneity [1,13].  Persisters survive via a plethora of putative molecular mechanisms [14], and recent studies have started shedding light on how diverse and multifaceted phenomena can link effects of initial states and environmental factors to phenotypic changes during persister formation, survival, and return to normal state [14–20].  In view of that complexity, developing anti-persister therapeutics remains a challenge.  Such development can be broadly classified into two categories: (a) developing new anti-persister drugs, and the most common approach (b) manipulating the dosing regimen of approved antibiotics, used either individually or in combination.  The former relies on detailed knowledge about persister mechanisms (formation, survival, and resuscitation) and is certainly significantly more time-consuming and resource-intensive than the latter.  Within the latter category, strategies can be based on bacterial population dynamics without complete knowledge of molecular mechanisms, capitalizing instead on the back and forth switching of persisters from normal state to persistence and vice-versa.  The idea of periodic pulse dosing to kill persisters is as old as the term persister itself [12].  Yet, there are only sporadic studies on pulse dosing, examining *in vitro* efficacy [21,22] and model fitting of experimental data or characterization of effective pulse dosing strategies [23–27].  A remaining challenge is a simple systematic design of an effective periodic pulse dosing regimen, comprising periods of antibiotic administration at high and low concentrations successively.  Indeed, the alternating periods of antibiotic application (on) and removal (off) are critical to the success of pulse dosing strategies [22,28], as use of an inappropriate strategy fails to achieve eradication [29,30].  Attempts to connect experiments and modelling [28] have underscored the importance of characterizing optimal dosing regimens in a simple quantitative fashion.

The present study aims at addressing this issue.  The specific contributions of this study are (a) rigorous theoretical justification that the efficacy of pulse dosing with alternating on/off periods of antibiotic administration depends on the ratio of the corresponding on/off periods of a pulse rather than on their individual values; (b) explicit formulas for robustly optimal values of this ratio in terms of easily estimated parameters; and (c) experimental confirmation *in vitro* of both positive and negative model predictions (bacterial eradication or not, respectively).

79   In the rest of the paper, we describe our experimental and modeling studies, present our
80 main results, and close with suggestions for future studies.  Proofs and details, to the extent that
81 they provide insight, are included in appendices.

82 **2  MATERIALS AND METHODS**

83 **2.1 Experimental**

84 *2.1.1 Bacterial strain and plasmid*

85 *Escherichia coli* wild-type (WT) with a pQE-80L plasmid encoding a green fluorescent protein
86 (GFP) was used. These were obtained from Dr. Mark P. Brynildsen of Princeton University.

87 *2.1.2 Media and chemicals*

88 Luria-Bertani (LB) broth was used for all liquid cultures. LB broth was prepared by dissolving
89 its components (10g Tryptone, 10 g Sodium Chloride, 5 g Yeast Extract) in 1 L distilled water
90 and sterilized with an autoclave.  Ampicillin (Sigma Aldrich) was used to treat cells at a constant
91 dose of 100 $\mu$g/mL. Phosphate Buffered Saline (PBS) was used to wash the cells to remove
92 Ampicillin.  LB agar medium was prepared by dissolving 40 g LB agar premix in 1 L DI water
93 and sterilized with an autoclave.  LB agar medium was used to enumerate colony forming units
94 (CFUs) of *E. coli* [13,31,32].

95 *2.1.3 Constant (control) and pulse dosing experiments*

96 Bacteria were exposed to Ampicillin in two ways: at constant Ampicillin concentration (control)
97 and at pulsed antibiotic concentration of the same amplitude (pulse on/off dosing, Fig 1).

99 Fig 1.  A schematic of the outcome of a pulse dosing regimen showing
100 declining peaks and dips of a bacterial cell population over time.

101 Each pulse experiment was started by inoculating (1:100-fold) an overnight (24 h) culture of *E.*
102 *coli* into 25 ml of LB. For selection and retention of plasmids in bacterial cells, 50 μg/mL

kanamycin was added in culture media [32].  To induce fluorescent protein expression, 1 mM
IPTG was used [32].  The overnight culture was prepared from frozen glycerol stock (-80 ℃).
All cells were cultured in a shaker at 37°C and 250 rpm.  The pulse dosing schedule was: (a)
expose bacteria to Ampicillin (100 $\mu$g/mL) for $t_{on}$ h, and (b) wash treated cells and grow in fresh
media for $t_{off}$ h.  Treated cells were washed with PBS buffer solution to remove the antibiotics.
Cells were serially diluted in PBS using 96-well plates, spotted on LB agar, and incubated at
37 °C for 16 h to enumerate CFUs.  Bacteria population size was assessed by colony counting on
LB-Agar plates.

**2.2    Modelling and Simulation**

A two-state model [1], comprising two cell-balance differential equations for normal and
persister cells, was used in all analysis:
114

$$\frac{dn}{dt} = K_n n(t) + bp(t) \tag{1}$$

$$\frac{dp}{dt} = an(t) + K_p p(t) \tag{2}$$

117    or, equivalently,

$$\underbrace{\begin{bmatrix} dn/dt \\ dp/dt \end{bmatrix}}_{d\mathbf{x}/dt} = \underbrace{\begin{bmatrix} K_n & b \\ a & K_p \end{bmatrix}}_{\mathbf{A}} \underbrace{\begin{bmatrix} n(t) \\ p(t) \end{bmatrix}}_{\mathbf{x}(t)} \tag{3}$$

where

$n(t)$ = Number of normal cells at time $t$

$p(t)$ = Number of persister cells at time $t$

$\mathbf{x}(t) \overset{\text{def}}{=} \begin{bmatrix} n(t) \\ p(t) \end{bmatrix}$

$\mathbf{A} \overset{\text{def}}{=} \begin{bmatrix} K_n & b \\ a & K_p \end{bmatrix}$

$a$ = switch rate from normal to persister state

$b$ = switch rate from persister to normal state

$K_n \overset{\text{def}}{=} \mu_n - k_n - a$ = net decline / growth rate of normal cells

$K_p \overset{\text{def}}{=} \mu_p - k_p - b$ = net decline / growth rate of persister cells

$\mu_n, \mu_p$ = growth rate of normal or persister cells, respectively

$k_n, k_p$ = kill rate of normal or persister cells, respectively

The parameters $a, b, K_n, K_p$ in eqns. (1) and (2) are generally distinct when the antibiotic is
administered or not (on/off), resulting in corresponding matrices $\mathbf{A}_{on}, \mathbf{A}_{off}$ in eqn. (3).  In the
constant dosing (control) experiment the antibiotic remained always on, whereas for pulse dosing
experiments the antibiotic alternated between on (administered) and off (not administered) with
corresponding durations $t_{on}, t_{off}$.  Therefore, to fit the full data set (at constant and pulse dosing)
by eqns. (1) and (2), parameter estimation generally entailed eight values for estimates of

$\{a, b, K_n, K_p\}_{\text{off}}$ and $\{a, b, K_n, K_p\}_{\text{on}}$ during on and off periods, respectively. In addition, because

data fit relied on measurements of the total number of cells,

$$c(t) \stackrel{\text{def}}{=} n(t) + p(t) \tag{4}$$

a ninth parameter, namely the initial fraction of persister cells, $f_0$, was estimated.

Mathematica and MATLAB were used for all modelling, parameter estimation, and

analysis computations.

**3    RESULTS**

We present first a theoretical analysis for characterization of optimal pulse dosing regimens

based on the model of eqns. (1) and (2), and subsequently present a series of experiments for

validation of analysis results *in vitro*.

**3.1    Design of pulse dosing for rapid bacterial population reduction**

*3.1.1 Characterizing* $\{t_{\text{on}}, t_{\text{off}}\}$ *for decline of a bacterial population*

Analysis of eqns. (1) and (2) (SI APPENDIX A) suggests that successive local peaks of the

bacterial population size, $c(t)$, at times $t_{2\ell} \stackrel{\text{def}}{=} \ell(t_{\text{on}} + t_{\text{off}})$, as generally depicted in Fig 1, are

characterized as

$$c(t_{2\ell}) = p_1 \lambda_1^\ell + p_2 \lambda_2^\ell, \;\; \ell = 0, 1, 2, \dots \tag{5}$$

152  where $\lambda_1, \lambda_2$ are the eigenvalues of the matrix

$$\mathbf{M} \stackrel{\text{def}}{=} \exp(\mathbf{A}_{\text{off}} t_{\text{off}}) \exp(\mathbf{A}_{\text{on}} t_{\text{on}}) \tag{6}$$

154  and $p_1, p_2$ are coefficients depending on the model parameters and initial conditions.

155      It can be shown (SI APPENDIX A) that $\lambda_1, \lambda_2$ in eqn. (5) are inside the unit disk. As a

156  result, the pattern of $c(t_{2n})$ in eqn. (5) is downward if and only if the respective on/off periods of

157  pulse dosing, $t_{\text{on}}, t_{\text{off}}$, satisfy the inequality

$$\boxed{\frac{t_{\text{off}}}{t_{\text{on}}} < \left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_c \stackrel{\text{def}}{=} -\frac{K_{n,\text{on}}}{K_{n,\text{off}}}} \tag{7}$$

159  Note that the critical value $(t_{\text{off}}/t_{\text{on}})_c$ is positive, because $K_{n,\text{on}} < 0, K_{n,\text{off}} > 0$.

160      As an example, for the estimates $K_{n,\text{on}}, K_{n,\text{off}}$ shown in Table 1, eqn. (7) yields

$$\frac{t_{\text{off}}}{t_{\text{on}}} < 2.8 \tag{8}$$

for peak-to-peak decline, as shown in Fig 2.

Fig 2. Eigenvalues $\lambda_1, \lambda_2$ of the matrix $\mathbf{M} \overset{\text{def}}{=} \exp(\mathbf{A}_{\text{off}} t_{\text{off}}) \exp(\mathbf{A}_{\text{on}} t_{\text{on}})$ governing
successive peaks of the bacterial population size, $c(t_{2n})$, under pulse dosing
with successive on/off pulses of respective durations $t_{\text{on}}, t_{\text{off}}$, given parameter
values in Table 1. Values of $t_{\text{on}}, t_{\text{off}}$ that keep both $\lambda_1, \lambda_2$ below 1 (equivalently
$\ln(\lambda_1)$, $\ln(\lambda_2)$ below 0) are shown. The white line corresponding to $(t_{\text{off}}/t_{\text{on}})_c \approx 2.8$,
eqn. (8), on the gray plane at 0 indicates the threshold (critical) value of
$t_{\text{off}}/t_{\text{on}}$, above which $\lambda_1 > 1$.

*3.1.2 Characterizing $\{t_{\text{on}}, t_{\text{off}}\}$ for rapid peak-to-peak decline of the bacterial population*

For pulse dosing with fixed on/off periods $t_{\text{on}}, t_{\text{off}}$ that satisfy the inequality in eqn. (7), it can be
shown (SI APPENDIX B) that eqn. (3) implies that successive peaks of $c(t)$ at times $t_{2n}$ (Fig 1)
decline exponentially over time at a rate, $k$ characterized as

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$$k \overset{\text{def}}{=} \frac{\sqrt{\ln(\lambda_1)\ln(\lambda_2)}}{t_{\text{on}}+t_{\text{off}}} = \frac{\sqrt{(K_{n,\text{off}}x+K_{n,\text{on}})(K_{p,\text{off}}x+K_{p,\text{on}})}}{1+x} \tag{9}$$

176    where

177
$$x \overset{\text{def}}{=} \frac{t_{\text{off}}}{t_{\text{on}}} \tag{10}$$

178    or, equivalently, with a time constant, $\tau = 1/k$.
179        It follows immediately (SI APPENDIX A) that the maximum peak-to-peak decline rate
180    for $k$ (as shown in eqn. (9)) is attained at

181
$$\left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_{\text{opt}} = \frac{2R_n R_p - R_n - R_p}{2 - R_n - R_p} \approx \frac{R_n}{R_n - 2} \tag{11}$$

182    where

183
$$R_p \overset{\text{def}}{=} \frac{K_{p,\text{on}}}{K_{p,\text{off}}}, \quad R_n \overset{\text{def}}{=} \frac{K_{n,\text{on}}}{K_{n,\text{off}}} \tag{12}$$

184    and the approximation in eqn. (11) is based on

185
$$\frac{K_{p,\text{on}}}{K_{p,\text{off}}} \approx 0 \tag{13}$$

186 Note that $(t_{\text{off}}/t_{\text{on}})_{\text{opt}}$ in eqn. (11) depends on the ratios $R_p \stackrel{\text{def}}{=} K_{p,\text{on}}/K_{p,\text{off}}$, $R_n \stackrel{\text{def}}{=} K_{n,\text{on}}/K_{n,\text{off}}$,

187 rather than on the individual values of $K_{p,\text{on}}, K_{p,\text{off}}, K_{n,\text{on}}, K_{n,\text{off}}$. Note also that combination of

188 eqns. (11) and (7) immediately connects the optimal and critical values of the ratio $t_{\text{off}}/t_{\text{on}}$ as

189
$$\left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_{\text{opt}} \approx \frac{(t_{\text{off}}/t_{\text{on}})_c}{(t_{\text{off}}/t_{\text{on}})_c + 2} \tag{14}$$

Application of eqn. (11) yields a profile or the optimal ratio $(t_{\text{off}}/t_{\text{on}})_{\text{opt}}$ in terms of the

ratios $R_p, R_n$ in eqn. (12) as shown in Fig 3. In that figure, estimates from the experimental data

of Fig 2 fitted by parameter estimates in Table 1 are used to mark the indicated point.

Fig 3. Optimal values $(t_{\text{on}}/t_{\text{off}})_{\text{opt}}$ of the ratio $t_{\text{on}}/t_{\text{off}}$ that yield maximum decline

rate, $k$, of successive peaks of bacterial population counts, $c(t_{2\ell})$, as a

function of the quantities $R_p \stackrel{\text{def}}{=} \frac{K_{p,\text{on}}}{K_{p,\text{off}}}$, $R_n \stackrel{\text{def}}{=} \frac{K_{n,\text{on}}}{K_{n,\text{off}}}$, according to eqn. (11). Values

of $R_n, R_p$ are considered in the range $\pm 25\%$ of the experimentally estimated

values, which correspond to $(t_{\text{on}}/t_{\text{off}})_{\text{opt}} \approx 0.4$, marked by the black dot and gray

horizontal plane through it.

To visualize eqns. (7), (9), and (11), estimates of $\{K_n, K_p\}_{\text{off}}$ and $\{K_n, K_p\}_{\text{on}}$ in Table 1

were used to produce a characterization of the peak-to-peak decline rate as a function of $t_{\text{on}}, t_{\text{off}}$,

as shown in Fig 4.

Fig 4.  Peak-to-peak decline rate, $k$, for bacterial count peaks $c(t_{2\ell})$ (eqn. (9)) as a function of on/off pulse durations, $t_{on}, t_{off}$, respectively, for pulse dosing.  The decline rate, $k$, achieves a maximum for $(t_{off}/t_{on})_{opt} \approx 0.4$ according to eqn. (11) (white line) and remains relatively flat for small variations of $t_{on}, t_{off}$ near $(t_{off}/t_{on})_{opt} \approx 0.4$.  Note also that isolines (black) are straight, indicating dependence of $k$ on $(t_{off}/t_{on})$ rather than on individual values of $t_{on}, t_{off}$.

A remarkable implication of eqn. (11) is that an optimal  ratio $t_{off}/t_{on}$ (in the sense defined in this section) can be approximately assessed by mere knowledge of the ratio $K_{n,on}/K_{n,off}$, which, in turn, can be easily obtained from two simple short-term experiments, namely standard time-growth and time-kill.  The corresponding initial slopes in such experiments immediately yield $K_{n,off}$ (time-growth) and $K_{n,on}$ (time-kill), as discussed next.  This is a significant simplification of the parameter estimation task for the purpose of pulse dosing regimen design, because it reduces the number of parameters to be estimated from nine (cf. section 2.2) to two.  In addition, these two parameters are much easier to estimate than the remaining seven, whose accurate estimates are hard to obtain, as discussed in section 3.3.

## 3.2   Constant and pulse dosing experiments

Data from a simple time-growth experiment (no antibiotic) and a time-kill experiment (Ampicillin at constant concentration 100 μg/mL) are shown in Fig 5.  The slopes from respective curve fits of the data in Fig 5 yield

$$K_{n,\text{off}}/\ln(10) \approx 0.5, \ K_{n,\text{on}}/\ln(10) = -1.4 \tag{15}$$

Detailed statistics are provided in SI APPENDIX C.  Note that the pattern shown in Fig 5(b)
indicates exponential decline (corresponding to a straight line of the bacterial population
logarithm) as the almost horizontal part of the biphasic trend, which is typical of persisters [2],
has not yet been reached within 3 hours.  That trend is reached through continuation of the
experiment after 3 hours, as indicated by the red data points and corresponding bend of the line
fitted in Fig 6.

(a)

(b)

231 Fig 5.  Time-growth (a) and time-kill (Ampicillin at $100\,\mu\text{g/mL}$) (b) experiments
232 for generation of data to assess $t_{\text{on}}/t_{\text{off}}$ for design of pulse dosing.  95%-
233 confidence bands are shown.  The slope of the cyan straight line (a)
234 indicates the initial slope of the blue line and corresponds to $K_{n,\text{off}}/\ln(10)$,
235 whereas the blue line slope (b) is $K_{n,\text{on}}/\ln(10)$.

236   Using the above two estimates for $K_{n,\text{off}}, K_{n,\text{on}}$ in eqn. (12) to calculate $R_n$ and
237 substituting the resulting value of $R_n$ into eqn. (11) yields

238 $$\left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_{\text{opt}} \approx 0.6 \tag{16}$$

239 Therefore, to be close to the value of 0.6, pulse dosing with

240 $$t_{\text{on}} = 3\text{h}, t_{\text{off}} = 2\text{h} \tag{17}$$

241 was implemented in validation experiments *in vitro*.
242   The outcome of pulse dosing using the above $t_{\text{on}}, t_{\text{off}}$, along with additional data for
continuation of the constant dosing (control) experiment to 13h, are shown in Fig 6.  In the case
of constant dosing, colonies were seen in all replicates at the end of the 13h treatment
$(5-100\,\text{CFU/mL})$ whereas in the case of pulse dosing no colony was observed in any replicate
in the latter part of the last $t_{\text{on}}$ cycle.  Note that both Fig 5 and Fig 6 indicate a 5 log decrease of
viable cells over the first 3 hours.

**3.3  Model parameter estimation with full data set**

To confirm that the model used in the analysis for development of the formulas applied in the
approach proposed to pulse dosing design, the parameters in eqns. (1) and (2) were fit to the full

set of experimental data of Fig 6, with corresponding curves shown in Fig 6 and parameter
estimates shown in Table 1.

Table 1 Parameter estimates fitting the experimental data of Fig 6.
(standard errors reported)

| Parameter | Antibiotic on | Antibiotic off |
|---|---|---|
| $K_n$ | $-3.8 \pm 0.4$ | $1.35 \pm 0.09$ |
| $K_p$ | $-0.2 \pm 0.2$ | $-1.2 \pm 0.4$ |
| $a$ | $0$ | $0$ |
| $b$ | $0$ | $1.2 \pm 0.4$ |
| $f_0$ | $9E-07 \pm 1.6E-05$ | |
| $\log_{10} c_0$ | $7.8 \pm 0.4$ | |

256
257              (a)                                          (b)

Fig 6.  (a) Experimental data and model fit for bacterial population over
time, resulting from constant dosing (red) and uniform pulse dosing at ratio
$t_{off}/t_{on} = 2/3$ (blue).  The hollow blue circles at 12h and 13h are set to 0 by
convention, to indicate undetectable colony forming units (CFU).  (b) Fitted
model projection for the outcome of constant dosing to reach 0.  68%-
confidence bands (1 standard error) are shown.

**3.4    Pulse dosing design validation**

Eqns. (7) and (8) indicate that bacteria eradication would be achieved if the pulse dosing period
ratio $t_{off}/t_{on}$ remained below 2.8, based on the short-term data fit (Fig 5), or below 2.4, based on
full data fit (Fig 6).  This assessment is confirmed via both simulation and experiment.

*3.4.1 Simulation*

Integration of eqns. (1) and (2) for parameter estimates based on Fig 6 yields the results of Fig 7.
That figure shows profiles of the total bacterial population over time for various values of
$\{t_{on}, t_{off}\}$, anticipated by Fig 4 to correspond to either eradication or growth of the population.
272

    (a)               (b)              (c)              (d)             (e)

Fig 7.  Solution of eqns. (1) and (2) for constant dosing (red) and for
uniform pulse dosing (blue) with $t_{on} = 2$h and different values of $t_{off}/t_{on}$, given
estimates of $\{a, b, K_n, K_p\}_{off}$ and $\{a, b, K_n, K_p\}_{on}$ obtained from the experimental data of
Fig 6.  Outcomes are as anticipated by Fig 4, i.e. eradication at different
rates is observed in (a)-(c) and lack of eradication in (d), (e).

*3.4.2 Experiment*

In addition to the experimental data in Fig 6, which confirmed rapid bacterial eradication for
pulse dosing at ratio $t_{off}/t_{on} = 2/3$, example cases of pulse dosing at ratios $t_{off}/t_{on}$ anticipated
by the developed theory and by computer simulations not to result in bacterial eradication were
also tested through *in vitro* experiments, as shown in Fig 8.  This figure shows the outcome
(dots) of two pulse dosing experiments corresponding to the same $t_{off}/t_{on} = 6$, above the critical
value $(t_{off}/t_{on})_c = 2.8$ (eqn. (8)), for $t_{on} = 0.5$h and $t_{on} = 3$h.  Model predictions (eqns. (1) and
(2) with parameter estimates from Table 1 based on data of Fig 6) are also shown.
Note that for $\{t_{on}, t_{off}\} = \{3h, 18h\}$ the linear model of eqns. (1) and (2) correctly
predicts the observed peak-to-peak upward trend, but the model crosses the bacterial population
saturation limits (eqn. (SI-23)) which are at about 9 log(CFU/mL) (SI APPENDIX C) hence the
quantitative discrepancy.

(a)                                          (b)

Fig 8.  Experimental values (dots) and model predictions (lines) for constant
dosing (red) and pulse dosing with $t_{\mathrm{off}}/t_{\mathrm{on}} = 6 > (t_{\mathrm{off}}/t_{\mathrm{on}})_c$ (blue) for (a)
$\{t_{\mathrm{on}}, t_{\mathrm{off}}\} = \{0.5\mathrm{h}, 3\mathrm{h}\}$ and (b) $\{t_{\mathrm{on}}, t_{\mathrm{off}}\} = \{3\mathrm{h}, 18\mathrm{h}\}$.

Additional experiments were also conducted to test the robustness of pulse dosing in case
of non-uniform perturbations of $t_{\mathrm{on}}$ around 3h and $t_{\mathrm{off}}$ around 2h.  The results, shown in Fig 9,
suggest rapid bacterial eradication (within about 10h), on par with uniform pulse dosing (cf.
results shown in Fig 6 and Fig 7).

Fig 9.  Outcome of non-uniform pulse dosing (and control) for non-uniform
perturbations of pulse durations around their nominal values $t_{\mathrm{on}} = 3\mathrm{h}, t_{\mathrm{off}} = 2\mathrm{h}$.

## 4    DISCUSSION

### 4.1    Summary of results

In summary, the presented method to pulse dosing regimen design relies on eqn. (11), which
expresses the optimal ratio $(t_{\mathrm{off}}/t_{\mathrm{on}})_{\mathrm{opt}}$ as approximately a function of $R_n \stackrel{\text{def}}{=} K_{n,\mathrm{on}}/K_{n,\mathrm{off}}$, where

the parameters $K_{n,\mathrm{off}}, K_{n,\mathrm{on}}$ are easy to obtain from the early parts of time-growth and time-kill

experiments, respectively, as demonstrated in Fig 5. Starting with this, the efficacy of a near

optimal proposed design is experimentally validated in Fig 6, the sub-optimality of designs with

$t_{\mathrm{off}}/t_{\mathrm{on}}$ other than $(t_{\mathrm{off}}/t_{\mathrm{on}})_{\mathrm{opt}}$ is illustrated in Fig 7, predictions for the complete failure of pulse

dosing regimens with $t_{\mathrm{off}}/t_{\mathrm{on}}$ above the critical value (eqn. (7)) are experimentally validated in

Fig 8, and the robustness of proposed dosing regimen designs is experimentally validated in Fig

9.

Additional details are discussed in sections 4.2 and 4.3. Finally, an elucidation of

literature results in view of the proposed theory is presented in section 4.4.

**4.2   Design of pulse dosing for rapid bacterial population reduction**

*4.2.1 Characterizing $\{t_{\mathrm{on}}, t_{\mathrm{off}}\}$ for decline of a bacterial population*

The analysis presented relies on the linear model of eqns. (1) and (2). That model is clearly not

valid when the bacterial population reaches its saturation limits after long growth periods (e.g.

Fig 5 (a) and eqn. (SI-23) in SI APPENDIX C). Therefore, eqn. (7), which places an upper

bound on the ratio $t_{\mathrm{on}}/t_{\mathrm{off}}$ of pulse dosing, is understood to hold for values of $t_{\mathrm{off}}$ that do not

drive the bacterial population beyond logarithmic growth to saturation.

*4.2.2 Characterizing $\{t_{\mathrm{on}}, t_{\mathrm{off}}\}$ for rapid peak-to-peak decline of the bacterial population*

Selection of the geometric average of two decline rate constants,

$$k_1 \stackrel{\text{def}}{=} -\frac{\ln(\lambda_1)}{(t_{\mathrm{on}}+t_{\mathrm{off}})}, \quad k_2 \stackrel{\text{def}}{=} -\frac{\ln(\lambda_2)}{(t_{\mathrm{on}}+t_{\mathrm{off}})} \tag{18}$$

in eqn. (9), captures well an overall decline rate (Fig 10) when early parts of the decline are

important.

`Fig 10.  Exponential peak-to-peak decline rate modes corresponding to each`

`individual rate` $k_1, k_2$ `(eqn. (18)) and the geometric average rate` $k \stackrel{\text{def}}{=} (k_1 k_2)^{1/2}$

`(eqn. (9)).`

An alternative, focusing more on the long-term decline rate, would be to choose the

dominant (smaller) of the two decline rates $k_1, k_2$ (Fig 10). The results would be somewhat

different quantitatively, but of similar nature. This is exemplified in Fig 11, which is the

counterpart of Fig 4. Simulations shown in Fig 7 clearly indicate that predictions of peak-to-

peak decline rates made by Fig 4 are quantitatively more reliable than those made by Fig 11.

Fig 11. Peak-to-peak actual-time decline rate corresponding to the larger
(slower) of the two eigenvalues $\lambda_1, \lambda_2$ of the matrix **M** as a function of $t_{on}, t_{off}$
for the values of $K_{n,on}$, $K_{p,on}$, $K_{n,off}$, $K_{p,off}$ in Table 1.  The crease line (white),
where the two surfaces intersect, corresponds to eqn. (SI-16) and
characterizes the highest peak-to-peak actual-time decline rate, for $t_{off}/t_{on} =$
1.5.

The quantitative analysis presented in section 3.1 focuses on the rate of peak-to-peak
decline, with the intent to design pulse dosing regimens for rapid bacterial eradication. A
somewhat more accurate characterization of time to eradication would be provided by focusing
on the rate of dip-to-dip decline (c.f. Fig 6 and Fig 7). It can be shown (eqns. (SI-1) and (SI-2) in
SI APPENDIX A), however, that both peaks and dips of the bacterial population follow the same
rate, governed by the eigenvalues $\lambda_1, \lambda_2$ of the matrix **M** (eqn. (6)). Because tracking peaks is
simpler to analyze than tracking dips, the choice was made to focus on the former, leaving the
latter for a future study.
In addition to the quantitative analysis that resulted in the selected values $t_{on} = 3h, t_{off} =$
2h (eqn. (17)) for the pulse dosing experiment, heuristic analysis was also used to corroborate
that choice, as follows:
In the early part of the constant dosing (control) experiment, it is evident (Fig 6) that
around 3h persisters start becoming an increasingly significant fraction of the bacterial
population (as manifest by the bend in the declining population logarithmic size) and
subsequently dominate the population. Therefore, keeping the antibiotic on beyond 3h would

result in reduced killing rate. Furthermore, while turning the antibiotic off starts driving
persisters back to normal cells, keeping it off beyond 2h would reach the limits of that drive.
While the above analysis suggests that the selected of $t_{\text{on}}$, $t_{\text{off}}$ values are sensible, it cannot
provide a general characterization of optimal values or establish the importance of the ratio
$t_{\text{on}}/t_{\text{off}}$.
Related experiments [33] have found that persisters treated for 3h with Ampicillin were
able to resuscitate after growth in fresh media for as little as 1h. In our experiments also, a
manifold increase in kill rates when treated again with Ampicillin suggested that persisters
resuscitated to normal cells indeed within an hour of growth in fresh media.

### 4.3    Modeling and parameter estimation

368 Estimation of the four model parameters in eqns. (1) and (2) faces the challenge that
369 measurements of bacterial population size, eqn. (4), are linear combinations of the two solution
370 modes, $q_1 \exp(\rho_1 t) + q_2 \exp(\rho_2 t)$ (SI APPENDIX D) with

$$\rho_{1,2} = \frac{1}{2}\left(K_n + K_p \pm \sqrt{4ab + (K_n - K_p)^2}\right) \qquad (19)$$

which makes it difficult to estimate all four $\{K_n, K_p, a, b\}$ with good accuracy from data.
Nevertheless, assumptions based on fundamental knowledge can facilitate estimation. These
assumptions are in accordance with relevant literature [9] and similar observations in our own
experiments.
When the antibiotic is on, it follows that $b \approx 0$, because persisters remain dormant, and
$a \gtrsim 0$, as some normal cells switch to persisters due to antibiotic stress. Estimation of a nonzero
$a$ yielded a very small value, in agreement with the assumption $a \approx 0$, i.e. that persisters can be
sourced to the initial pool of cells.
When there is no antibiotic and cells are grown in fresh media, it follows that $a \approx 0$, as
the tendency of normal cells to become dormant is negligible during the early exponential phase
(e.g. in less than 3h of growth), whereas $b > 0$, as persisters will be resuscitated shortly (e.g.
within an hour) after inoculation in fresh media [13,33,34]. In addition, $K_{p,\text{on}} \approx -b$, because
$\mu_{p,\text{on}} \approx 0$ and $k_{p,\text{on}} \approx 0$.
The different bactericidal outcomes produced by constant and pulse dosing are evident in
Fig 6(a), where the (one-standard-error) confidence bands towards the end of the experimental
period of 13h are clearly separated, with pulse dosing yielding no detectable bacterial load and
constant dosing leaving a load of about $20 \log(\text{CFU/mL})$ at 13h. In addition, Fig 6(b) shows the
fitted model projection until the bacterial population outcome resulting from constant dosing
reaches 0 at about 30h, long after pulse dosing has reached the same outcome in less than 12h.

### 4.4    Application of the proposed theory to literature data

To further test the ability of the proposed theory to predict the bactericidal efficacy of pulse
dosing regimens, we analyzed experimental data from two studies in literature [28][29]. These
studies presented pulse dosing regimens on bacterial populations with persister bacteria.

To perform the test, estimates of $K_{n,\text{on}}$ (decline slope of the logarithmic population of
*normal* cells under antibiotic exposure) were obtained from data presented in corresponding
figures for both studies (Table 2 and Table 3);  and estimates of $K_{n,\text{off}}$ (growth slope of the
logarithmic population of *normal* cells in growth) for [29] were either obtained from a
corresponding figure in [28] (Table 2) or estimated based on past experience  (Table 3).  The
critical values of the ratio $t_{\text{off}}/t_{\text{on}}$ were subsequently calculated for both references from eqns.
(7) and (11), respectively (Table 2 and Table 3).  These values were then compared to the actual
values used in experiments presented in each reference cited.  Corresponding predictions from
this comparison ere consistent with data in all cases.  Specifically, Table 2 indicates that bacterial
populations declined when $t_{\text{off}}/t_{\text{on}} < (t_{\text{off}}/t_{\text{on}})_c$ (eqn. (7)) and grew when $t_{\text{off}}/t_{\text{on}} > (t_{\text{off}}/t_{\text{on}})_c$.
In fact, the peak-to-peak slopes shown in Figure 4 of [28] are in agreement with the discrepancy
between the values of $t_{\text{off}}/t_{\text{on}}$ used and the critical or optimal values.  Similarly, Table 3
indicates that $t_{\text{off}}/t_{\text{on}}$ in [29] is higher than the critical value $(t_{\text{off}}/t_{\text{on}})_c$ for all four strains
focused on, in agreement with observed increasing persister percentages in the bacterial
populations studied.
For completeness, the optimal ratios $(t_{\text{off}}/t_{\text{on}})_{\text{opt}}$ are also shown in Table 2 and Table 3.

Table 2.  Literature data analysis to test proposed theory for pulse dosing
regimen design

| Data source | [28] | | |
|---|---|---|---|
| Bacteria Strain | *S. aureus* | | |
| Antibiotic | Ofloxacin | | |
| $K_{n,\text{on}}$ (h$^{-1}$) | −0.6 (Figure 4c) | | |
| $K_{n,\text{off}}$ (h$^{-1}$) | 2.5 (Figure 4a) | | |
| $\left(\dfrac{t_{\text{off}}}{t_{\text{on}}}\right)_c = -\dfrac{K_{n,\text{on}}}{K_{n,\text{off}}}$ (eqn. (7)) | 0.24 | | |
| $\dfrac{t_{\text{off}}}{t_{\text{on}}}$ used in [28] | 4h/20h = 0.2 | 9h/15h = 0.6 | 16h/8h = 2 |
| $\dfrac{t_{\text{off}}}{t_{\text{on}}}$ used in [28] $< \left(\dfrac{t_{\text{off}}}{t_{\text{on}}}\right)_c$ ? (eqn. (7)) | Yes | No | No |
| Bacterial population decline? | Yes ([28] Figure 4b) | No ([28] Figure 4c) | No ([28] Figure 4d) |
| $\left(\dfrac{t_{\text{off}}}{t_{\text{on}}}\right)_{\text{opt}} \approx \dfrac{\left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_c}{\left(\frac{t_{\text{off}}}{t_{\text{on}}}\right)_c + 2}$ (eqns. (11), (14)) | 0.1 | | |

414 Table 3. Literature data analysis to test proposed theory for pulse dosing
415 regimen design

| Data source | [29] | | | |
|---|---|---|---|---|
| Bacteria Strain | *P. aeruginosa* | *A. baumannii* | *K. pneumoniae* | *E. aerogenes* |
| Antibiotic | Amikacin | | | |
| $K_{n,\mathrm{on}}$ (h$^{-1}$) | −3 ([29] FIG 2A) | −3 ([29] FIG 2A) | −5 ([29] FIG 2A) | −5 ([29] FIG 2A) |
| $K_{n,\mathrm{off}}$ (h$^{-1}$) | 1 to 3 (Estimate) | 1 to 3 (Estimate) | 1 to 3 (Estimate) | 1 to 3 (Estimate) |
| $\left(\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}\right)_c = -\frac{K_{n,\mathrm{on}}}{K_{n,\mathrm{off}}}$ (eqn. (7)) | 1 to 3 | 1 to 3 | 1.7 to 5 | 1.7 to 5 |
| $\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}$ used in [29] | 43h/5h = 8.6 | 43h/5h = 8.6 | 43h/5h = 8.6 | 19h/5h = 3.8 |
| $\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}$ used in [29] $< \left(\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}\right)_c$ ? | No | No | No | No |
| Persister percentage decline? | No ([29] FIG 3a) | No ([29] FIG 3a) | No ([29] FIG 3a) | No ([29] FIG 3a) |
| $\left(\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}\right)_{\mathrm{opt}} \approx \frac{\left(\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}\right)_c}{\left(\frac{t_{\mathrm{off}}}{t_{\mathrm{on}}}\right)_c + 2}$ (eqn. (14)) | 0.3 to 0.6 | 0.3 to 0.6 | 0.5 to 0.7 | 0.5 to 0.7 |

## 1   CONCLUSIONS AND FUTURE WORK

We have developed a methodology for systematic design of pulse dosing regimens that can
eradicate persistent bacteria. The methodology relies on explicit formulas that make use of
easily obtainable data from time-growth and time-kill experiments with a bacterial population
exposed to antibiotics. Several extensions of this work can be pursued, including:

• Test the outlined strategy on various pairs of pathogenic bacterial strains and antibiotics,
including combinations of antibiotics for stubborn infections.
• Extend and test the developed methodology, both theoretically and experimentally, to
o Clinically relevant pharmacokinetic profiles of antibiotic administration, e.g.
periodic injection followed by exponential [35].
o Reduced antibiotics concentration in consecutive cycles [36].
o Ultimately in vivo studies
• The experiments presented used Ampicillin (a $\beta$-lactam antibiotic) which is a time-
dependent antibiotic, namely it exhibits best efficacy if administered in periodic
injections of as high concentration as possible. It is worth exploring the performance of
the proposed pulse dosing design methodology to concentration-dependent antibiotics
such as aminoglycosides and quinolones[37].

- Models developed using data from flow cytometry experiments [38] can better monitor the heterogeneity of a bacterial population, with potential improvements in modeling and, as a result, pulse dosing design.
- Extension to viable but not culturable cells: In addition to persisters, a well known bacterial phenotype that can survive exposure to antibiotics is viable but not culturable (VBNC) cells [39–41] . The pulse dosing methodology presented here can, in principle, be applied to such cells, as they can be restored to normal growth and susceptibility to antibiotics upon provision of appropriate stimuli [42,43]. However, experimentally studying this case poses different challenges, as standard cell cultures cannot be routinely used, and this is left for future exploration.

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**7     SUPPORTING INFORMATION**

SI-1 APPENDIX A.  Derivation of eqn. (7)
SI-2 APPENDIX B.  Optimal rate of decline for bacterial population peaks characterized by eqn.
(9)
SI-3 APPENDIX C.  Estimation of $K_{n,\text{off}}$, $K_{n,\text{on}}$ from data in Fig 5
SI-4 APPENDIX D. Analytical solution of eqns. (1) and (2)