NLRP11 is required for canonical NLRP3 and non-canonical inflammasome

activation during human macrophage infection with mycobacteria

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Running Head: Mycobacteria NLRP3 and NLRP11 inflammasome activation.

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ABSTRACT

The NLRP11 protein is only expressed in primates and participates in the

activation of the canonical NLRP3 and non-canonical NLRP3 inflammasome

activation after infection with gram-negative bacteria. Here, we generated a

series of defined NLRP11 deletion mutants to further analyze the role of NLRP11

in NLRP3 inflammasome activation. Like the complete NLRP11 deletion mutant

($NLRP11^{-/-}$), the NLRP11 mutant lacking the NACHT and LRR domains

($NLRP11^{\Delta N\_LRR}$) showed reduced activation of the canonical NLRP3

inflammasome, whereas a pyrin domain mutant ($NLRP11^{\Delta PYD}$) had no effect on

NLRP3 activation. The $NLRP11^{-/-}$ and $NLRP11^{\Delta N\_LRR}$ mutants but not the

$NLRP11^{\Delta PYD}$ mutant also displayed reduced activation of caspase-4 during

infection with the intracytosolic, gram-negative pathogen *Shigella flexneri*. We

found that the human adapted, gram-positive pathogen *Mycobacterium*

tuberculosis and the opportunistic pathogen *M. kansasii* both activate the non-

canonical NLRP11 inflammasome in a caspase-4/5-dependent pathway. In

conclusion, we show that NLRP11 functions in the non-canonical caspase-4/5

inflammasome activation pathway and the canonical NRLP3 inflammasome

pathway, and that NLRP11 is required for full recognition of mycobacteria by

each of these pathways. Our work extends the spectrum of bacterial pathogen

recognition by the non-canonical NLRP11-caspase4/5 pathway beyond gram-

negative bacteria.

IMPORTANCE

The activation of inflammasome complexes plays a crucial role in intracellular pathogen detection. NLRP11 and caspase-4 are essential for recognizing lipopolysaccharide (LPS), a molecule found in gram-negative bacteria such as the human pathogens *Shigella* spp., which activate both canonical NLRP3 and non-canonical inflammasome pathways. Through a series of deletion mutants, we demonstrate that the NACHT and LRR domains of NLPR11, but not its pyrin domain, are critical for detection of *S. flexneri*. Notably, our research reveals that the gram-positive bacterium *M. tuberculosis* is also detected by NLPR11 and caspase-4, despite not producing LPS. These findings significantly expand the range of pathogens recognized by NLRP11 and caspase-4 to now include gram-positive bacteria and underscore the versatility of these innate immune components in pathogen detection.

INTRODUCTION

Intracellular pathogens are detected by host cell cytosolic Nucleotide-binding

Oligomerization Domain and Leucine-rich Repeat-containing receptors (NLRs) or

Absent in Melanoma 2-like receptors (ALRs), which trigger the activation of an

inflammasome complex (1-5). In addition to the respective NLR or ALR, this

complex typically comprises an adaptor component (ASC) and pro-caspase-1.

Upon full activation, the inflammasome complex contains active caspase-1,

which cleaves pro-IL-1β to generate mature IL-1β. Caspase-1 also cleaves

gasdermin D (GSDMD), releasing an N-terminal (NT-GSDMD) fragment that

forms pores in the cell membrane through which IL-1β exits the cell (6-10). The

process culminates with the activation of NINJ1, a membrane disrupting protein

that leads to plasma membrane rupture (11-13). This final stage marks the

completion of pyroptosis, a specific and inflammatory form of cell death.

Activation of the canonical NLRP3 inflammasome is triggered by various

intracellular stressors, including potassium efflux, which occurs with GSDMD

pore formation or when cells are exposed to certain bacterial toxins that damage

the cell membrane, or increased reactive oxygen species (ROS), a common

cellular response to intracellular bacteria. The non-canonical inflammasome

pathway relies on the recognition of lipopolysaccharide (LPS) by inflammatory

pro-caspase-4/5 (humans) or their murine homologue pro-caspase-11 (14-17).

LPS binding leads to caspase activation and subsequent cleavage of GSDMD.

The resulting NT-GSDMD pores facilitate K^+ efflux, which in turn triggers NLRP3

inflammasome activation. Humans but not mice express NLRP11, which is

required for efficient activation of the non-canonical inflammasome in response to

intracellular LPS (18), as well as canonical NLRP3 inflammasome activation (19).

In the current study, we determined the importance of the NLRP11 pyrin,

NACHT, and/or LRR domains for their function in LPS recognition, IL-1β

production and pyroptosis induction.

Mycobacterium tuberculosis is a human adapted, facultative intracellular

pathogen that activates the NLRP3 inflammasome of infected macrophages (20).

IL-1β is of great importance for a protective host response to *M. tuberculosis*

infections (20, 21). *M. tuberculosis* evolved to evade recognition by host cell

inflammasomes (20). The *M. tuberculosis* phospholipid phosphatase (PtpB)

cleaves cell membrane phosphatidylinositol-4 phosphate which reduces insertion

of NT-GSDMD into the plasma membrane and this limits pyroptosis and IL-1β

secretion (22). The *M. tuberculosis* protein kinase (PknF) limits activation of the

NLRP3 inflammasome via an unknown mechanism (23). The Rv3364c protein

suppresses host cathepsin G activation, leading to reduced inflammasome

activation (24). Despite all these inhibitory mechanisms, the host macrophage is

still able to sense intracellular *M. tuberculosis* via activation of the NLRP3

inflammasome. *M. tuberculosis* is a gram-positive bacterium that does not

express LPS but is atypical because it has an outer membrane composed of

mycobacterial lipids and lipoproteins (25). Since *M. tuberculosis* is a human

adapted pathogen and NLRP11 is only expressed in primates, we hypothesized

the NLRP11 might participate in the recognition of mycobacteria.

RESULTS

NLRP11 is required for activation of the canonical NLRP3 inflammasome in human macrophages. We previously found that cells lacking the coding sequence of the NACHT and LRR domains of NLRP11 display defects in activation of the non-canonical inflammasome in response to cytosolic LPS (18). To further evaluate the contributions of NLRP11 to innate immune signaling, we generated a series of defined domain deletions in NLRP11 in human THP-1 monocytes (Fig. 1A): using CRISPR-Cas9 technology, we deleted the *NLRP11* pyrin domain [PYD] (*NLRP11$^{\Delta PYD}$*), the NACHT and leucine-rich repeat [LRR] domains (*NLRP11$^{\Delta N\_LRR}$*), or the entire *NLRP11* coding sequence (*NLRP11$^{-/-}$*) (Fig. S1 in the supplemental material). We generated these mutations using Cas9 ribonucleoproteins, which are associated with long-term genome stability, isolated clonal derivatives by limiting dilution and carried forward only those clonal lineages that contained a homozygous out-of-frame deletion.

We assessed the impact of deletions of *NLRP11* on activation of the canonical NLRP3 inflammasome. In ribonucleoprotein-generated *NLRP11$^{-/-}$* macrophages, cell death upon treatment with the NLRP3 agonist nigericin was significantly decreased compared to nigericin-treated WT macrophages (Fig. 1B). Activation of caspase-1, which involves cleavage and release of its active domains, and activation of GSDMD, which involves its cleavage, were significantly reduced in *NLRP11$^{-/-}$* macrophages (Fig. S2). In parallel, release of IL-1β, a pro-inflammatory cytokine effector of inflammasome activation, was reduced in *NLRP11$^{-/-}$* macrophages (Fig 1C).

To test whether these phenotypes were specifically due to activation of NLRP3,

we treated cells with the NLRP3 inhibitor MCC950. Treatment with MCC950

rescued nigericin-induced cell death, processing of caspase-1 and GSDMD, and

release of IL-1β and IL-18 to the levels of mock-treated THP-1s (Fig. 1B-C, and

Fig. S2), indicating that the observed phenotypes were due to activation of

NLRP3.

Fig. 1. Efficient activation of the canonical NLRP3 inflammasome depends on the NLRP11 NACHT and/or LRR domains. *(A) Schematic of NLRP11 mutants generated in THP-1 macrophages. (B) Activation of cell death in*

NLRP11$^{+/+}$ and NLRP11$^{-/-}$ macrophages by the NLRP3 agonist nigericin. Cell

death, measured via LDH release assay at 90 min, is shown normalized to

nigericin-treated NLRP11$^{+/+}$ macrophages. Where indicated, cells were

pretreated with the NLRP3 inhibitor MCC950. (C) Levels of IL-1β released into

the cell culture media at 90 min of nigericin treatment with or without addition of

*MCC950. (D) Cell death, as in (B). ns, not significant; *, P < 0.05; **, P < 0.01;*

****, P < 0.001; ****, P < 0.0001; by two-way ANOVA. Shown are independent*

biological replicates. Error bars represent the standard error of the mean. PYD,

pyrin domain; NACHT, NAIP, C2TA, HET-E and TP1 domain; LRR, leucin-rich

repeat domain.

NACHT and/or LRR domains are required for NLRP11-dependent activation

of the NLRP3 inflammasome. To determine the impact of specific domains of

NLRP11 on NLRP3 signaling, we assessed activation of cell death and cytokine

release in ribonucleoprotein-generated *NLRP11^{ΔPYD}* and *NLRP11$^{ΔN\_LRR}$*

macrophages. Deletion of NACHT and LRR domains, but not the PYD domain

alone, was associated with reduced nigericin-induced cell death (Fig. 1D) and

reduced release of IL-1β (Fig. 1C). In addition, in *NLRP11$^{ΔN\_LRR}$* macrophages,

processing of caspase-1 and GSDMD was significantly reduced (Fig. S2). In

contrast, in *NLRP11^{ΔPYD}* macrophages, caspase-1 was activated at levels similar

to those observed in *NLRP11$^{+/+}$* macrophages, and activation of GSDMD was

only mildly decreased. These findings indicate that the NLRP11 NACHT and/or

LRR domains are required for efficient NLRP3 inflammasome activation,

consistent with previous data demonstrating a requirement for the NLRP11

NACHT and LRR domains for oligomerization of NLRP3 (19). The findings also

suggest that the involvement of NLRP11 in NLRP3 activation does not strictly

depend on the NLRP11 pyrin domain.

As we found previously (18), nigericin activation of NLRP3 was not impacted in

Cas9-integrated *NLRP11*$^{\Delta N\_LRR}$ macrophages (*NLRP11*$^{\Delta N\_LRR}$ (*Cas9*), Fig. 1C-D).

This result suggests that, as relates specifically to NLRP3 signaling, the lack of

impact of NLRP11 NACHT and LRR disruption on NLRP3 in this *Cas9*-integrated

cell lineage is not due to the maintenance of the NLRP11 pyrin domain; rather, it

likely results from non-NLRP11 genetics of the lineage and suggests that

genome-level changes resulting from the chronic presence of *Cas9* contributed

to this phenotype.

Activation of the NLRP3 inflammasome by infection with the gram-positive

bacterium *M. tuberculosis* depends on NLRP11. Whether NLRP11 is involved

in recognition of gram-positive bacteria and mounting of a cellular inflammatory

response to them has not been studied. IL-1β produced by THP-1 macrophages

infected with *M. tuberculosis* is dependent on NLRP3 (26, 27). NLRP11 is also

recruited by NLRP3 in the process of its activation (19). Therefore, we

hypothesized that in *NLRP11*$^{-/-}$ THP-1 macrophages infected by *M. tuberculosis*,

IL-1β production might be lower than in WT macrophages. To test this

hypothesis, we determined levels of IL-1β release during infection with *M.*

tuberculosis of macrophages containing or lacking NLRP11. As a readout for

inflammasome activation during *M. tuberculosis* infection, cell death is less useful

than IL-1β release because few *M. tuberculosis*-infected macrophages die. At 8

and 24 hours of infection, significantly less IL-1β was released from *NLRP11*^{-/-}

macrophages than from WT macrophages (Fig. 2A-B). To test whether the

observed IL-1β release is dependent on activation of NLRP3, infected cells were

treated with MCC950. *M. tuberculosis*-infected *NLRP11*^{-/-} macrophages treated

with MCC950 display a decrease of IL-1β compared with those not treated with

MCC950 (Fig. 2A-B), indicating a requirement for NLRP3, which could be direct

or indirect.

As for *M. tuberculosis*, IL-1β produced by THP-1 macrophages infected with *M.*

kansasii, an opportunistic pathogen that is a close relative of *M. tuberculosis*, is

dependent on NLRP3 (28). Release of IL-1β during infection with *M. kansasii*

was dependent on NLRP11 (Fig. 2C, left graph), similar to the phenotype

observed for *M. tuberculosis*-infected cells. At late times of *M. kansasii* infection,

cell death was also partially dependent on NLRP11 (Fig. 2C, right graph).

Whereas IL-1β release from *NLRP11*^{-/-} macrophages was significantly reduced at

1, 2, 4 and 6 h of infection, cell death was significantly lower only at 6 h of

infection (Fig. 2C).

Fig. 2. NLRP3 activation by M. tuberculosis and M. kansasi in THP-1

macrophages is dependent on NLRP11. (A and B) IL-1β release and cell death

of NLRP11⁻ᐟ⁻ and WT THP-1 macrophages at 8 h (A) or 24 h (B) of infection with

M. tuberculosis (MOI 10) with or without addition of MCC950. (C) IL-1β release

and cell death of NLRP11⁻ᐟ⁻ and WT THP-1 macrophages over 1-6 h of infection

with M. kansasii. Cell death was normalized to cell lineage-specific uninfected

*group. ns, not significant; *, P < 0.05; **, P < 0.01; ***, P < 0.001; ****, P <*

0.0001; by two-way ANOVA (A-B) or paired parametric t-tests (C). Shown are

independent biological replicates. Error bars represent the standard error of

mean.

NLRP11 NACHT and/or LRR domains are required for activation of the non-

canonical inflammasome by the gram-negative bacterium *Shigella flexneri*.

We previously found that NLRP11 is required for activation of the non-canonical

inflammasome during infection with a variety of gram-negative bacteria, including

S. flexneri (18). Cell death during infection with *S. flexneri* was unaffected by

deletion of the pyrin domain (PYD), whereas deletion of the NACHT and LRR

domains or deletion of the entire *NLRP11* locus resulted in 40-50% decreases in

macrophage cell death (Fig. 3A). Furthermore, release of pro-inflammatory

cytokines IL-1β and IL-18 was reduced up to 10-fold in macrophages lacking the

NACHT and LRR domains ($NLRP11^{\Delta N\_LRR}$) or lacking all of NLRP11 ($NLRP11^{-/-}$),

but not in macrophages lacking only the PYD ($NLRP11^{\Delta PYD}$) (Fig. 3B).

To test whether the observed defect in activation of pyroptosis in $NLRP11^{\Delta N\_LRR}$

and $NLRP11^{-/-}$ macrophages resulted from a defect in activation of the non-

221 canonical inflammasome, we examined processing of caspase-4 and GSDMD.

222 Activation of caspase-4 was significantly reduced in *NLRP11*^{ΔN_LRR} and *NLRP11*⁻

223 ^{/-} macrophages but not *NLRP11*^{ΔPYD} macrophages (Fig. 3C and Fig. S3). Levels

224 of full-length pro-caspase-4 in cell lysates were unaffected, indicating that the

225 decrease in caspase-4 released from *NLRP11*^{ΔN_LRR} and *NLRP11*^{-/-}

226 macrophages was not due to changes in its expression or stability. Similarly,

227 processing of GSDMD was significantly reduced in *NLRP11*^{ΔN_LRR} and *NLRP11*^{-/-}

228 macrophages but not in *NLRP11*^{ΔPYD} macrophages, yet levels of full-length

229 GSDMD were unaltered (Fig. 3C and Fig. S3). Thus, the NACHT and/or LRR

230 domains are required for efficient activation of the NLRP11-dependent non-

231 canonical inflammasome during infection with *S. flexneri*.

232 **Activation of the non-canonical inflammasome by *S. flexneri* is**

233 **independent of NLRP3.** To test whether the NLRP11-dependent defect in

234 activation of the non-canonical inflammasome is dependent on NLRP3, we

235 examined inflammasome activation in *S. flexneri*-infected *NLRP11*^{ΔN_LRR}

236 macrophages pre-treated with MCC950. Treatment with MCC950 did not impact

237 the levels of cell death, cytokine release, or processing of caspase-4 and

238 GSDMD (Fig. 3A-C, and Fig. S3). Therefore, NLRP3 is not required for activation

239 of the NLRP11-dependent non-canonical inflammasome during *S. flexneri*

240 infection.

Fig. 3. NACHT and/or LRR domains are required for NLRP11-dependent

non-canonical inflammasome activation during S. flexneri infection. *(A)*

Activation of cell death in indicated NLRP11 mutant cell lines at 3 h of infection

with S. flexneri (MOI 10). Cell death is shown normalized to S. flexneri-infected

NLRP11$^{+/+}$ macrophages. Where indicated, cells were pretreated with the NLRP3

inhibitor MCC950. (B) Levels of IL-1β and IL-18 released into the cell culture

media from (A). (C) Cleaved caspase-4 released into the cell culture media and

*intracellular cleaved GSDMD under same conditions. Ns, not significant; **, P <*

*0.01; ***, P < 0.001; by two-way ANOVA. Shown are independent biological*

replicates. Error bars represent the standard error of the mean.

Activation of the non-canonical inflammasome by *M. tuberculosis* is

dependent on NLRP11. The *NLRP11$^{ΔN\_LRR}$* (*Cas9*) cell line accurately reports

on the role of NLRP11 in non-canonical caspase-4 activity, while displaying

normal activation of NLRP3 in response to nigericin (18). Therefore, to determine

whether NLRP11 is required for non-canonical caspase-4 inflammasome activity

during mycobacterial infection, we compared IL-1β release from mycobacteria-

infected WT (*Cas9*) to that from mycobacteria-infected *NLRP11$^{ΔN\_LRR}$* (*Cas9*)

macrophages. *NLRP11$^{ΔN\_LRR}$* cells infected with *M. tuberculosis* or *M. kansasii*

showed significantly diminished IL-1β release at all time points (Fig. 4A-B),

whereas those infected with the non-pathogenic *M. smegmatis* showed increases

in IL-1β release over time that were similar to *M. kansasii* but which were not

reduced in the *NLRP11$^{ΔN\_LRR}$* cells at any time point (Fig. 4C). These data

indicate that IL-1β released during *M. tuberculosis* and *M. kansasii* infection is

dependent, at least partially, on the NACHT and/or LRR domains of NLRP11.

Cell death was not significantly different between cell lines during infection with

any of the three mycobacterial species.

To further examine the kinetics of NLRP11 dependent activation of the non-

canonical inflammasome, we assayed IL-1β release in *M. kansasii*-infected WT

and *NLRP11*$^{\Delta N\_LRR}$ (*Cas9*) macrophages at 1, 2, 4 and 6 hours of infection. At

every time point, significantly lower levels of IL-1β was released from

NLRP11$^{\Delta N\_LRR}$ macrophages than their WT counterparts (Fig. 4D), indicating that

NLRP11 is required for IL-1β release even early during infection. As above (Fig.

4B), at early times, NLRP11-dependent differences in cell death are minimal (Fig.

4D).

The use of the NLRP11$^{\Delta N\_LRR}$ (*Cas9*) mutant THP-1 cells is consistent with but

not proof of *M. tuberculosis* and *M. kansasii* infection being dependent on the

non-canonical inflammasome. In humans, the non-canonical inflammasome

involves either or both of caspase-4 and caspase-5. During NLRP11-dependent

activation of the non-canonical inflammasome, NLRP11 is required for

downstream activation of at least caspase-4 (18); in this study, caspase-5 was

not examined. To directly test whether mycobacteria activate the non-canonical

inflammasome, we tested whether macrophages that lack both caspase-4 and

caspase-5 support mycobacterium-induced IL-1β release and cell death. At 4

hours of infection with *M. kansasii* (Fig. 5A, left graph) and 24 hours of infection

with *M. tuberculosis* (Fig. 5B, left graph), the absence of caspases-4 and -5 was

associated with a complete absence of IL-1β release, indicating that caspase-4

and/or caspase-5 are required for mycobacteria activation of the non-canonical

inflammasome. Paralleling the impact of caspases-4 and -5 on IL-1β release,

during infection with *M. kansasii*, their absence was associated with a two-fold

reduction in cell death to baseline (Fig. 5A, right graph), whereas during infection

with *M. tuberculosis*, the impact of their absence on cell death was minimal (Fig.

5B, right graph). These data indicate that IL-1β released during *M. tuberculosis*

and *M. kansasii* infection is dependent on the non-canonical caspase-4/5

inflammasome.

***Fig. 4. Mycobacteria activate the non-canonical inflammasome pathway.** IL-*

1β release and cell death of NLRP11$^{+/+}$ (Cas9) and NLRP11$^{ΔN\_LRR}$ (Cas9) mutant

THP-1 macrophages infected with M. tuberculosis (A), M. kansasii (B, D), or M.

smegmatis (C) (MOI 10), at the indicated timepoints. Cell death was normalized

*to cell lineage-specific uninfected group. ns, not significant; **, P < 0.01; ***, P <*

*0.001; ****, P < 0.0001; by paired parametric t-tests. Shown are independent*

biological replicates. Error bars represent the standard error of mean.

Fig. 5. Caspase-4/5 are required for recognition of mycobacteria in human

macrophages. *IL-1β release and cell death of WT and two distinct clones of*

caspase-4/5$^{-/-}$ THP-1 macrophages infected with M. kansasii (A) or M.

tuberculosis (B) (MOI 10). For M. kansasii, assays were performed at 4 h of

infection (A), and for M. tuberculosis, at 24 h of infection (B). ns, not significant;

***, P < 0.001; ****, P < 0.0001; by two-way ANOVA. Shown are independent

biological replicates. Error bars represent the standard error of mean.

DISCUSSION

Two recent studies establish that NLRP11 is required for efficient activation of

the non-canonical caspase-4/5 inflammasome in macrophage-like THP-1 cells

and primary human macrophages (18, 19). These studies demonstrated that

NLRP11 is required for non-canonical inflammasome activation in response to

cytosolic LPS (18, 19) and infection with gram-negative bacteria (18). Our

findings herein extend our understanding of NLRP11 function by demonstrating

that NLRP11 is required for efficient activation of the non-canonical

inflammasome by the gram-positive bacteria *M. tuberculosis* and *M. kansasii*.

The present study offers clarification on previously conflicting findings regarding

the role of NLRP11 role in activation of the canonical NLRP3 inflammasome:

Gangopadhyay et al. reported that NLRP11 is required for NLRP3 activation (19),

while Rojas-Lopez et al. found no significant involvement of NLRP11 in this

process (18). Our results confirm a role for NLRP11 in activation of the non-

canonical inflammasome and demonstrate that the NACHT and/or LRR domains

are required for NLRP3 activation but that NLRP3 activation does not strictly

depend on the NLRP11 pyrin domain (Fig. 1C-D). With respect to a role for

NLRP11 in activation of the NLRP3 inflammasome specifically, we speculate that

the difference in the results reported herein compared with those reported in

Rojas-Lopez et al. is a result of some genomic instability of the cell lineage in

Rojas-Lopez et al. due to the integration of *Cas9*. The new constructs described

in the present study were generated by transfection of Cas9 protein together with

guide RNAs (Materials and Methods). The constitutive presence of *Cas9* may

have resulted in off-target effects that masked the role of NLRP11 specifically in

the canonical NLRP3 inflammasome pathway. Our new results thus unite the

findings in the field to support the consensus that NRLP11 is required for

activation of both the non-canonical and the canonical NLRP3 inflammasome.

The murine homologue of human caspases-4 and -5, caspase-11, is required for

the detection of cytosolic LPS. *caspase-11*$^{-/-}$ mice are more resistant to death

from *Escherichia coli*-induced or LPS-induced septic shock (14, 16). As

described above, in humans, caspase-4 and/or caspase-5 (17, 29, 30) and

NLRP11 (18, 19), which is absent in mice, are required for recognition of

cytosolic LPS. Indirect evidence suggests that lipoteichoic acid (LTA) of gram-

positive bacteria can also be detected by caspase-4 (31, 32). Here, we

demonstrate for the first time that NLRP11 and the non-canonical caspase-4

inflammasome are required for detection of intracellular *M. tuberculosis* (Fig. 2,

Fig. 4, and Fig. 5). Our results indicate that, for infection with *M. tuberculosis* or

M. kansasii, sensing of the infection by the non-canonical pathway is essential for

host inflammasome responses, since caspase-4/5 are required for IL-1β release

(Fig. 5). Interestingly, a 2010 shRNA screen of NOD proteins required for IL-1β

release from *M. tuberculosis*-infected THP-1 cells identified *NLRP11* as a hit

(33).

M. tuberculosis contains neither LPS nor LTA, and so what could the ligand be

for caspase-4 and/or NLRP11? Lipoarabinomannans (LAM) are complex

glycolipids similar to LPS that, like lipid A of LPS, are anchored in the inner

membrane via a lipid anchor (25). The sugar composition of LAMs differs among

mycobacterial species (34), which could explain why *M. tuberculosis* and *M.*

kansasii but not *M. smegmatis* induce non-canonical inflammasome activation

(Fig. 4). The Pro-Glu motif-containing and Pro-Pro-Glu motif-containing (PE/PPE)

domain containing family of proteins are abundant in mycobacterial species such

as *M. tuberculosis* and *M. kansasii* but absent in *M. smegmatis* (35, 36). The

PPE13 protein interacts with the NACHT or LRR domains of NLRP3, leading to

its activation (37). Nevertheless, according to our data, such a mechanism of

action is unlikely, since we found an almost complete absence of IL-1β secretion

in caspase-4/5 deficient THP-1 cells (Fig. 5), and the non-canonical pathway

should not be required if PPE13 directly activates the canonical NLRP3

inflammasome. In conclusion, our results expand the range of pathogens

recognized by NLRP11 and caspase-4 to now include gram-positive bacteria and

underscore the versatility of these innate immune components in pathogen

detection.

MATERIALS AND METHODS

Bacterial strains and growth conditions. *M. tuberculosis* (H37Rv), *M. kansasii* (ATCC1278), and *M. smegmatis* (mc2155) strains were grown in liquid Middlebrook 7H9 medium supplemented with 10% oleic acid-albumin-dextrose-catalase (OADC) growth supplement (B12351), 0.2% glycerol, and 0.05% Tween 80. *S. flexneri* wild-type serotype 2a strain 2457T was used in this study (38). *S. flexneri* was grown in tryptic soy broth at 37ºC with aeration.

Generation of CRISPR deletions in NLRP11. We previously created a deletion of the coding sequences of the NACHT and LRR domains in the *NLRP11* gene of THP-1 monocytes using a lentivirus-based system to deliver guide RNAs into cells in which *Cas9* had previously been stably integrated, such that the generated *NLRP11* knockout carried an integrated copy of *Cas9* gene (18). In the current study, to generate knockout lineages that lack chronic *Cas9*, chemically modified sgRNAs (Synthego) were electroporated as ribonucleoprotein (RNP) complexes into freshly cultured THP-1 monocytes using the Neon Transfection System (Invitrogen, MPK5000) following the manufacturer's instructions. Specifically, to create the editing RNP complexes, 100 pmol of each sgRNA (Fig. S1E) were mixed with 25 pmol of SpCas9 2NLS nuclease (Synthego) (4:1 ratio) in Resuspension Buffer R (Invitrogen, MPK1069B) and incubated for 15 min at room temperature. THP-1 monocytes were washed in PBS and resuspended in Buffer R. The resulting RNP complexes were electroporated by pulsing twice 1×10^6 cells in the 10 µL Neon Tip at 1700 V and 2 ms pulse width. Electroporated cells were immediately

resuspended in 2.5 mL complete growth medium and placed into a 6-well plate.

Cells were incubated for 72 hours at 37ºC, after which 1.5 mL was transferred to

a 75 cm^2 culture flask, and 1 mL was used to purify genomic DNA using DNeasy

Blood and Tissue kit (Qiagen). Following PCR and sequencing, editing efficiency

was determined using ICE Analyzer (Synthego). The remaining cells were

limiting-diluted and expanded as single clones in a 96-well dish. Using

sequencing, isolated single clones were validated for homozygous out-of-frame

deletions (Fig. S1).

Mammalian cell culture. Human-derived THP-1 monocytes (American Type

Culture Collection, TIB-202) were maintained in RPMI 1640 medium (Gibco,

11875119) supplemented with 10% (v/v) fetal bovine serum (heat-inactivated,

sterile-filtered, R&D systems) and 10 mM HEPES (Gibco, 15630-080). Cells

were grown in 5% CO_2 in a humidified incubator at 37ºC. For use in experiments,

cells were seeded in 48-well plates at 2×10^5 cells per well or in 96-well plates at

5×10^4 cells per well. For all non-mycobacterial experiments, to induce

differentiation into macrophages, cells were incubated with 100 ng/mL phorbol

12-myristate 13-acetate (PMA) for 24 h, after which they were rested in media

without PMA overnight prior to use in experiments. For mycobacterial infections,

cells were differentiated into macrophages in 50 ng/mL PMA for 48 h, after which

they were rested in media without PMA for 48 h prior to use in experiments.

Cell treatments. In experiments with nigericin treatment, PMA-differentiated

THP-1 macrophages were primed with 500 ng/mL ultrapure LPS from

Escherichia coli O111:B4 (InvivoGen, tlrl-3pelps) for 4 hours followed by

treatment with 10 µM nigericin (InvivoGen, tlrl-nig) for 90 min. In experiments

involving nigericin treatment or *S. flexneri* infection, 2 µM MCC950 (NLRP3

inhibitor, InvivoGen, inh-mcc) was added where appropriate one hour prior to

addition of nigericin or infection and maintained in the medium for the duration of

the experiment. In cells infected with *M. tuberculosis*, MCC950 was added at 4 h

of infection and maintained in the medium for the duration of the experiment.

Bacterial infections. For infections with mycobacterial strains, bacteria grown to

an exponential phase were centrifuged at 2000 g for 7 min. Bacterial pellets were

resuspended in 1X phosphate-buffered saline (PBS) containing 0.05% Tween 80

and centrifuged at 80 g for 3 min to pellet clumped bacteria. The supernatants

(single cell bacterial suspensions) were used to determine the multiplicity of

infection (MOI) by optical density. PMA differentiated THP-1 macrophages were

infected at the MOI of 10 and incubated for 2 h (*M. smegmatis*) or for 4 h (*M.*

tuberculosis and *M. kansasii*) in 5% CO_2 in a humidified incubator at 37°C. After

this period of phagocytosis, infected macrophages were gently washed twice with

prewarmed 1X PBS. Gentamicin, to kill extracellular bacteria, was added at 100

µg/mL in complete media containing RPMI1640 supplemented with 5% human

AB serum. Samples for LDH release assay and IL-1β ELISA were collected at

the indicated times.

For infections with *S. flexneri*, PMA-differentiated macrophages were infected at

an MOI of 10 with bacteria grown to exponential phase after back-dilution from

an overnight culture. Bacteria were centrifuged onto macrophages at 800 g for 10

min at room temperature, followed by incubation in 5% CO_2 in a humidified

incubator at 37ºC. After 30 min, cells were washed twice with Hanks' Balanced

Salt Solution (HBSS, Gibco, 14025-092), and gentamicin was added to 25 µg/mL

in RPMI 1640 medium supplemented with 10 mM HEPES without serum.

Samples for LDH release assay, cytokine ELISAs, and western immunoblot were

collected at 2 h 40 min. of infection.

LDH cytotoxicity assay. Macrophage cell death was assessed by release of

lactate dehydrogenase (LDH) due to loss of cellular membrane integrity. To

measure LDH activity, 50 µL of cell culture supernatants from a 96-well plate

were collected at indicated times and a CytoTox 96® Non-Radioactive

Cytotoxicity Assay (experiments with mycobacteria; Promega, G1780) or a

CyQUANT™ LDH Cytotoxicity Assay (experiments with *S. flexneri* and nigericin;

ThermoFisher Scientific, C20301) was used following the manufacturer's

instructions.

Cytokine ELISAs. Cell culture supernatants harvested from mycobacteria-

infected cells were assayed for levels of secreted IL-1β using Human Total IL-1β

DuoSet ELISA kit (biotechne, DY201) following the manufacturer's instructions.

Cell culture supernatants harvested from cells infected with *S. flexneri* or treated

with nigericin were assayed for levels of secreted cytokines using Human Total

IL-18 DuoSet ELISA kit (biotechne, DY318-05) and ELISA MAX™ Deluxe Set

Human IL-1β kit (BioLegend, 437004) following the manufacturers' instructions.

Protein extraction and western immunoblot analysis. For detection of

released caspases, 100 µL of cell culture supernatants from a 48-well plate were

collected at the indicated times and mixed with 35 µL of 4x Laemmli buffer [250

mM Tris (pH 6.8), 8% SDS, 50% glycerol, 0,04% bromophenol blue]

supplemented with cOmplete EDTA-free protease inhibitor (Roche,

11873580001). For detection of cell-associated caspases and full-length and

cleaved GSDMD, cells in the same plate were lysed directly in 100 µL of 4x

Laemmli buffer supplemented with the same protease inhibitor. Following SDS–

polyacrylamide gel electrophoresis (SDS-PAGE), proteins were transferred onto

a nitrocellulose membrane.

Antibodies used for immunoblotting were as follows: caspase-1 (Abcam,

ab207802) rabbit monoclonal antibody at 0.5 µg/mL (1:1000), caspase-4 (Santa

Cruz, sc-56056) and GSDMD (Santa Cruz, sc-81868) mouse monoclonal

antibodies at 0.5 µg/mL (1:200). Secondary antibodies were goat anti-rabbit

immunoglobulin G (IgG) or goat anti-mouse IgG, each conjugated to horseradish

peroxidase (HRP) (Jackson ImmunoResearch). Antibodies specific for β-actin

were HRP-conjugated (Sigma, A3854). Immunoreactive bands were visualized

by chemiluminescence with SuperSignal West Pico PLUS or SuperSignal West

Femto Maximum Sensitivity substrates (Thermo Fisher Scientific, 34580 and

34096).

Statistical analysis. GraphPad Prism software was used for graphing data and

statistical analyses. Statistical significance was determined using the ordinary

two-way ANOVA with Tukey's multiple comparisons test, with a single pooled

variance. For Figure 4. statistical significance was determined using a paired

parametric t-test. Data were graphed so that each data point represents the

mean of technical triplicate wells for one experiment, and all results are data from

at least three independent biological replicates, unless noted otherwise.

Differences were considered statistically significant if the *P* value was <0.05.

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FIGURE LEGENDS

Fig. 1. Efficient activation of the canonical NLRP3 inflammasome depends

on the NLRP11 NACHT and/or LRR domains. (A) Schematic of NLRP11

mutants generated in THP-1 macrophages. (B) Activation of cell death in

NLRP11$^{+/+}$ and *NLRP11$^{-/-}$* macrophages by the NLRP3 agonist nigericin. Cell

death, measured via LDH release assay at 90 min, is shown normalized to

nigericin-treated *NLRP11$^{+/+}$* macrophages. Where indicated, cells were

pretreated with the NLRP3 inhibitor MCC950. (C) Levels of IL-1β released into

the cell culture media at 90 min of nigericin treatment with or without addition of

MCC950. (D) Cell death, as in (B). ns, not significant; *, $P < 0.05$; **, $P < 0.01$;

***, $P < 0.001$; ****, $P < 0.0001$; by two-way ANOVA. Shown are independent

biological replicates. Error bars represent the standard error of the mean. PYD,

pyrin domain; NACHT, NAIP, C2TA, HET-E and TP1 domain; LRR, leucin-rich

repeat domain.

Fig. 2. NLRP3 activation by *M. tuberculosis* and *M. kansasi* in THP-1

macrophages is dependent on NLRP11. (A and B) IL-1β release and cell death

of *NLRP11$^{-/-}$* and WT THP-1 macrophages at 8 h (A) or 24 h (B) of infection with

M. tuberculosis (MOI 10) with or without addition of MCC950. (C) IL-1β release

and cell death of *NLRP11$^{-/-}$* and WT THP-1 macrophages over 1-6 h of infection

with *M. kansasii*. Cell death was normalized to cell lineage-specific uninfected

group. ns, not significant; *, $P < 0.05$; **, $P < 0.01$; ***, $P < 0.001$; ****, $P <$

0.0001; by two-way ANOVA (A-B) or paired parametric t-tests (C). Shown are

independent biological replicates. Error bars represent the standard error of

mean.

Fig. 3. NACHT and/or LRR domains are required for NLRP11-dependent

non-canonical inflammasome activation during *S. flexneri* infection. (A)

Activation of cell death in indicated NLRP11 mutant cell lines at 3 h of infection

with *S. flexneri* (MOI 10). Cell death is shown normalized to *S. flexneri*-infected

NLRP11$^{+/+}$ macrophages. Where indicated, cells were pretreated with the NLRP3

inhibitor MCC950. (B) Levels of IL-1β and IL-18 released into the cell culture

media from (A). (C) Cleaved caspase-4 released into the cell culture media and

intracellular cleaved GSDMD under same conditions. Ns, not significant; **, $P <$

0.01; ***, $P < 0.001$; by two-way ANOVA. Shown are independent biological

replicates. Error bars represent the standard error of the mean.

Fig. 4. Mycobacteria activate the non-canonical inflammasome pathway. IL-

1β release and cell death of *NLRP11*$^{+/+}$ (*Cas9*) and *NLRP11*$^{\Delta N\_LRR}$ (*Cas9*) mutant

THP-1 macrophages infected with *M. tuberculosis* (A), *M. kansasii* (B, D), or *M.*

smegmatis (C) (MOI 10), at the indicated timepoints. Cell death was normalized

to cell lineage-specific uninfected group. ns, not significant; **, $P < 0.01$; ***, $P <$

0.001; ****, $P < 0.0001$; by paired parametric t-tests. Shown are independent

biological replicates. Error bars represent the standard error of mean.

Fig. 5. Caspase-4/5 are required for recognition of mycobacteria in human

macrophages. IL-1β release and cell death of WT and two distinct clones of

caspase-4/5$^{-/-}$ THP-1 macrophages infected with *M. kansasii* (A) or *M.*

tuberculosis (B) (MOI 10). For *M. kansasii*, assays were performed at 4 h of

infection (A), and for *M. tuberculosis*, at 24 h of infection (B). ns, not significant;

***, $P < 0.001$; ****, $P < 0.0001$; by two-way ANOVA. Shown are independent

biological replicates. Error bars represent the standard error of mean.

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