Full Title: **Dabigatran prevents lipopolysaccharide mediated apoptosis in zebrafish through a**

thrombin independent mechanism

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Running Head: Dabigatran prevents lipopolysaccharide toxicity

Abstract: Endotoxemia is a feature of sepsis pathogenesis and has also been found to mediate the

pathophysiology of multiple inflammatory conditions. In this work, we use a lipopolysaccharide (LPS)

induced endotoxemia model in zebrafish to identify novel mediators of LPS toxicity. We performed

transcriptomic studies on LPS-treated larvae, followed by *in silico* analysis, which revealed associations

between the signatures of LPS-treated embryos and those of drugs involving diverse pathways. In

parallel, we performed an *in vivo* screen using >1,500 FDA-approved compounds and identified multiple

novel small molecules that reduced inflammation and prevented LPS toxicity. We focused on the direct

thrombin inhibitor dabigatran, which was identified through both the *in vivo* and *in silico* analyses. We

found that dabigatran co-administration significantly reduced the expression of inflammatory cytokines

and completely protected zebrafish from endotoxemic death due to LPS. Surprisingly, we found that this

protection occurs in prothrombin mutant fish, proving that protection from endotoxemia occurs

independently of the anticoagulant function of dabigatran. We additionally found that dabigatran

administration significantly decreased nitric oxide production and apoptosis compared to LPS treatment

alone, suggesting possible mechanisms by which protection from endotoxemia is achieved. In summary,

we identify several novel small molecules that prevent LPS-induced endotoxemia and show that one such

small molecule, dabigatran, exerts a thrombin-independent effect on nitric oxide production and

apoptosis. This and the other identified small molecules warrant further exploration in inflammatory

conditions including sepsis.

Key Words: sepsis, small molecule screen, anticoagulant, thrombin, nitric oxide, inflammation, apoptosis

Introduction:

Lipopolysaccharide (LPS), a cell wall component of gram-negative bacteria, induces an immune response upon recognition by Toll-Like Receptors (TLRs) [1,2]. LPS accounts for the relative impermeability of the outer membrane of gram-negative bacteria to hydrophobic molecules, making them resistant to many antimicrobials [3,4]. LPS-mediated endotoxemia mimics many features of sepsis pathogenesis and might also play a causative role in the pathophysiology of multiple chronic inflammatory disorders, including Parkinsons, Alzheimers, obesity, and atherosclerosis [5]. Previous work in mammals suggests that the translocation of gut-derived LPS into the circulation might mediate some of these disease states [6,7]. Additionally, LPS contributes to disease pathogenesis through its action as a prothrombotic molecule; LPS-induced inflammatory mediators activate procoagulant pathways, induce platelet activation, downregulate anticoagulant pathways and promote disseminated intravascular coagulation [8,9]. Moreover, macrophages undergoing pyroptosis release tissue factor, further activating the coagulation cascade [5,9].

Given its role in multiple diseases, efforts have been made to block LPS biogenesis, neutralize endotoxin, and hinder LPS-mediated immune activation [10-13], with many of these attempts made in the context of sepsis. However, there is the possibility that therapeutics targeting LPS signaling can also mitigate the development of chronic inflammatory conditions such as those listed above.

In this work, we undertook large-scale *in silico* and *in vivo* analyses to identify novel small molecule mediators of LPS toxicity. Murine and other mammalian models are cost-prohibitive for the same types of large-scale *in vivo* screening studies. Zebrafish, on the other hand, allow for a speed of discovery not possible with mammals as they combine the scalability of *in vitro* systems with the complexity of a whole vertebrate organism.

In zebrafish, LPS-induced inflammation has been provoked either by injection into the embryonic yolk sac or immersion of embryos and larvae into LPS-containing media [14-16]. Incubation with LPS-containing media allows uniform, rapid treatment of large numbers of fish. A response remarkably similar

to that in mammals is observed, including inflammation, platelet activation, vascular leakage, and organ

damage [16]. Thus, many of the cardinal features of sepsis pathogenesis are recapitulated by this model.

We performed novel high throughput studies in a zebrafish model of LPS-provoked endotoxemia

with the goal of identifying drugs that could be repurposed to combat acute and chronic inflammatory

conditions. We conducted an *in silico* analysis, where we compared RNA-seq data from LPS-treated fish

to publicly available RNA-seq datasets, revealing associations between LPS and drugs involving

disparate pathways. In parallel, an *in vivo* pathway analysis was performed using >1,500 FDA-approved

compounds to find those that mitigated LPS-induced endotoxemia, uncovering multiple novel small

molecules. We focused on the sole anticoagulant (dabigatran) identified in both the *in silico* and *in vivo*

analyses. Interestingly, the administration of dabigatran reduced the upregulation of inflammatory

cytokines, significantly reduced nitric oxide production and apoptosis and abolished larval mortality from

endotoxemia due to LPS. Surprisingly, this protection was found to occur independent of its inhibitory

effect on thrombin. These data implicate dabigatran and other novel small molecules as anti-inflammatory

agents that can be explored as potential therapeutics in acute and chronic conditions.

Materials and Methods:

Animal care and husbandry:

Zebrafish (*Danio rerio*) were raised in accordance with animal care guidelines as approved by the

University of Michigan Animal Care and Use Committee. Wild-type fish were a hybrid line generated by

crossing AB and TL strain zebrafish acquired from the Zebrafish International Resource Center. Genetic

knockouts of prothrombin (*f2*) have been previously described [17]. Tricaine (Western Chemical) was used

for anesthesia and rapid chilling in an ice water bath for euthanasia.

Small molecule treatments:

Small molecule screens (MedChemExpress FDA drug repurposing set) were started at 3 dpf, where 3

larvae were plated per well in 96-well plates containing embryo media. All drugs were initially tested at a

concentration of 25 µM for resistance to LPS toxicity, and confirmatory studies were performed with a

larger group of fish (9-45) representing at least three different clutches (3 separate experiments), where

the drugs were tested at various concentrations.

Heart rate measurements:

Heart rate was measured 3 hours after lethal LPS (40 µg/mL) administration and compared to untreated

controls. Larvae were mounted in 0.8% low melting point agarose and visualized using an Olympus IX73

microscope. Heart rate was manually counted over 60 seconds for each larva. Each experiment consisted

of at least 15 larvae. At least three different clutches (3 different experiments) were utilized.

Real-time quantitative polymerase chain reaction (RT-qPCR):

RT-qPCR was performed as described previously [18]. Total RNA was extracted from 3 dpf whole larvae 3

hours post treatment using the RNeasy Mini Plus kit (Qiagen) and transcribed into cDNA using

Superscript III cDNA synthesis kit (Invitrogen). Transcript levels of genes of interest were quantified by

qPCR (Mastercycler realplex^2, Eppendorf) using Fast SYBR Green Mix (Applied Biosystems,

Waltham, MA). Three equal pools of whole larvae (15-45 embryos per pool) were tested. Primer

sequences are provided in Table S3. All expression data were normalized to the *actb2* gene, and

significance was analyzed using the double delta C_t method as described [19].

RNA-seq preparation and analysis:

RNA-seq was performed as described previously [18]. Three biological replicate pools of 30-45 3 dpf whole

embryos were used per condition. Total RNA was extracted, and cDNA was prepared as above. Samples

were sent to Novogene (Sacramento, CA) for further processing. Paired-end 150 base pair (bp)

sequencing was obtained with the Illumina NovaSeq 6000 Sequencing System. Reads were mapped to

exonic regions based on the zebrafish reference genome (GRCz11) using STAR36 (v.2.7.9a) and

featureCounts37 (v.2.0.3). Differential expression analysis was conducted using the R package DESeq2

([20]. All significant differentially expressed genes (FDR adjusted p-values) were converted to human genes

using the R package babelgene. KEGG Pathway Analysis was then performed using the Enrichr platform,

a publicly available tool [21,22]. Overlap score is the number of significantly changed genes over the total

number of genes in the pathway. The combined score considers the z-score (a value's relationship to the

mean) in addition to the adjusted p-value; this score has been found to outperform other ranking metrics

[22]. The combined score is used to assess the significance of gene set enrichment findings, with higher

values being more significant; values > 30 have been considered significant in literature [23,24].

Laser-mediated vascular endothelial injury:

Larvae were treated with LPS and drug starting at 3 dpf and collected after 3 hours for assessment of time

to clot formation, performed as previously described [17,23,25,26]. Briefly, 3 dpf larvae were mounted in 0.8%

low melting point agarose and visualized using an Olympus IX73 microscope with an attached

Micropoint focusing system and pulsed-dye laser (Andor). For venous laser injury, 99 laser pulses were

administered to the ventral surface of the posterior cardinal vein, 5 somites caudal to the anal pore. For

arterial laser injury, 99 laser pulses were administered 5 somites caudal to the anal pore on the dorsal

surface of the dorsal aorta. Time to occlusion (formation of an occlusive thrombus) was measured, where

120 seconds was the maximum time each larva was observed. Three biological replicates were performed

for each experiment.

In silico analysis:

Differential gene expression data were retrieved from the RNAseq results as previously described [18]. The

human orthologues of the respective genes were obtained from the Zebrafish Information Network

database (https://zfin.org/downloads/archive/2023.04.26) and the CLUE software platform was utilized in

performing Connectivity Map-based analyses

(https://www.sciencedirect.com/science/article/pii/S0092867417313090 (access date April 26, 2023)).

Genes were ranked based on the adjusted p-values for the gene expression level changes, and the top 150

upregulated or down-regulated genes were tested for the gene connectivity evaluations across 64 human

cell lines and disparate perturbation profiles. The connectivity data were processed by using cmapR

library in R (v4.2.2) environment (Natoli T (2023). cmapR: Cmap Tools in R. R package version

1.12.0, https://github.com/cmap/cmapR). The data were further filtered down to 27 cell lines of which

most were hematopoietic/hepatic/pulmonary/non-tumorigenic origins, or endothelial phenotypes (A375,

A549, ASC, BJAB, CD34, HA1E, HCC515, HEK293, HELA, HEPG2, HPTEC, HUH7, HUVEC,

JURKAT, K562, MCF10A, NCIH508, NCIH596, NOMO1, OCILY19, OCILY3, PHH, THP1, TMD8,

U2OS, U937, YAPC).

Acridine Orange Staining:

Larvae were incubated in 10 μg/ml Acridine Orange stain (Sigma) for 15 minutes in embryo media

with LPS treatment and then rinsed three times before mounting in 0.8% agarose and imaged with an

Olympus IX73 microscope. Quantification of intensity was performed in ImageJ.

TUNEL Staining:

The TUNEL assay was performed according to the instructions provided in the In Situ Cell Death

Detection Kit, TMR red (Roche) for cryopreserved samples, with embryos cryopreserved in Optimal

Cutting Temperature Compound (OCT) and cryosectioned prior to labeling.   Images were quantified by

an observer blinded to condition using a visual scoring system. The visual scoring system consisted of

grades 0 through 3 (0 = 0-9% fluorescence in visual field, 1 = 10-20% fluorescence, 2 = 30-70%

fluorescence, 3 = 80-100% fluorescence).

NO Staining:

Larvae were split into four treatment groups: control, LPS, dabigatran, and LPS with dabigatran. Each

treatment group was simultaneously incubated with 5 uM of DAF-FM-DA solution in the dark at 25°C as

previously described (Lepiller et al., 2007). After 2 hours larvae were washed with embryo media and

mounted in 0.8% agarose. Imaging was done using an Olympus IX73 microscope. Fluorescence

quantification was obtained utilizing ImageJ.

Tail transection:

Tg(lyzC:GFP)[nz117] and TgBAC(mpeg1.1:EGFP)[vcc7] transgenic larvae were anesthetized at 5 days post

fertilization and tail transection was performed with a sterile scalpel blade. Wounded larvae were

transferred into fresh embryo   media with 25 μM dabigatran   and incubated at 28.5 °C for 5 hours

prior to imaging using a Nikon SMZ25 stereoscope. Leukocyte recruitment was quantified by measuring

the fluorescent pixel area within 100 μm of the wound site in FIJI/ImageJ.

Statistics:

Statistics were performed using the GraphPad PRISM package. $P<0.05$ was considered significant. For

qPCR and RNA-seq data, Student's t-test on $\Delta\Delta C_t$ values was used to determine significance. For time to

occlusion (TTO) data, Mann-Whitney U testing was used to determine significance.

Study Approval:

Approval for zebrafish studies was granted by the University of Michigan Institutional Animal Care and

Use Committee, identification number PRO00010679 and the A*STAR Institutional Animal Care and

Use Committee, identification numbers 211667 and 221694.

Results:

LPS incubation results in inflammatory and coagulopathic changes in zebrafish embryos

S. typhi LPS was administered to zebrafish by incubation starting at 3 days post fertilization (dpf) in accordance with published data [16]. A dose-dependent effect on lethality was noted over 24 hours. Hereafter, the lethal dose of LPS refers to the smallest amount that caused uniform lethality by 4 dpf, which was slightly different (ranging from 40-50 µg/mL) depending on the batch. A new dose-response curve was made for each batch of LPS tested, and an example is shown in Fig. 1A. In addition to increased mortality, heart rate was significantly decreased (Fig. 1B), and *grk5,* a gene involved in heart contractility, was significantly downregulated 3 hours after LPS administration (Fig. 1C).

To determine the significant biological pathways altered upon LPS administration, RNA-seq was performed on treated fish compared to controls as previously described (Guirgis et al., 2023). Kyoto Encyclopedia of Genes and Genomes (KEGG) pathway analysis was performed and revealed that "Pathogenic *E. coli* Infection" was the most significantly altered pathway in LPS-treated fish (Fig. 2A, complete analysis is shown in Table S1), confirming that administration induces a response akin to that provoked by bacteria. As expected, immune and interferon pathways such as TNF signaling were significantly changed (Fig. 2A). A subset of genes from these pathways were confirmed by qPCR and trended toward upregulation, with the genes *il1b*, *il6* and *irg1l* significantly upregulated (Fig. 2B). In addition to provoking a proinflammatory response, LPS is also known to be a prothrombotic molecule [7,9]. RNA-seq data also showed that the complement, coagulation, and platelet activation pathways were significantly altered in LPS-treated zebrafish compared to controls (Fig. 2A). A subset of procoagulant genes from these pathways was upregulated, which was confirmed by qPCR (Fig. 2B). Interestingly, tissue factor b (gene *f3b*), but not tissue factor a (gene *f3a*) was significantly upregulated in LPS-treated fish compared to controls, suggesting possible arterial injury as *f3b* is thought to play a primary role in arterial, rather than venous, circulation [26]. Time to occlusion (TTO) after venous and arterial laser-mediated endothelial injury was measured as previously described [23,26] and is illustrated in Fig. 2D. The

TTO was found to be significantly increased in fish administered LPS for both systems (Fig. 2E, F). This

change suggests a consumptive coagulopathy phenotype similar to what we have observed with the loss

of natural anticoagulants [23,27].

In silico and in vivo analysis reveals small molecule mediators of LPS-mediated endotoxemia

To identify possible mediators of LPS toxicity, we initially undertook an *in silico* analysis

comparing the RNA-seq signature of LPS-treated embryos to those of genes and compounds from

publicly available databases (Table S2). After obtaining the list of small molecules related to LPS based

on the gene expression profiles (Table S2), we further looked into mechanisms of action for each of these

unique molecules as provided by the Connectivity Map (CMap) database. Even though some compounds

did not have an annotated MoA, the data showed an intriguing pattern among the ones with detailed

annotations. Notably, neuroactive compounds such as dopamine and serotonin receptor antagonists, along

with ion channel and kinase inhibitors, emerged as the most commonly shared classes amongst the LPS-

associated compounds (Table 1).

In parallel, we performed an *in vivo* analysis in zebrafish embryos. A lethal dose of LPS was co-

administered at 3 dpf with an FDA-approved drug repurposing set consisting of >1500 compounds.

Embryos were examined for survival 24 hours post-treatment, and each drug that was a 'hit' (i.e., enabled

survival of at least one embryo) was validated in a larger cohort to confirm rescue. Approximately 20

small molecules were identified in this manner (Table 2). Most hits completely protected against LPS

toxicity during the embryonic/early larval period, and others provided partial protection (Table 2, Fig. S1

A-T). These small molecule mediators of LPS toxicity spanned multiple categories, most heavily

represented by serotonin and dopamine receptor modulators, chemotherapeutics, and anti-infectious

agents. Similar to the *in silico* analysis, small molecules modulating the dopamine and serotonin

pathways and those affecting tyrosine kinases were heavily represented *in vivo*. Four drugs were hits in

both the *in silico* and *in vivo* analyses; these were amsacrine, conivaptan, vilazodone and dabigatran

etexilate (the prodrug formulation of dabigatran, hereafter referred to simply as dabigatran) (Table S2,

Table 2). Approximately half of the drugs identified *in vivo* (berberine, ketanserin, sunitinib, ceritinib,

fedratinib, nelfinavir, saquinavir, indacaterol, dabigatran) have been shown to ameliorate LPS effects, and

to function as mammalian anti-sepsis agents [28-48], suggesting conservation between zebrafish and

mammals in terms of the effects of these small molecules. The remaining hits from the *in vivo* screen –

ziprasidone, pergolide, vilazodone, bedaquiline, rucaparib, pralsetinib, amsacrine, conivaptan,

deserpidine, and lomitapide – are, to our knowledge, novel mediators of LPS toxicity (Table 2). Despite

some variability, there was an overall trend toward decreased inflammatory cytokine production when a

subset of these drugs were co-administered with LPS and compared to LPS treatment alone (Fig. S2 A-

L). Thus, these novel mediators of LPS toxicity may function as anti-inflammatory agents.

Dabigatran reduces LPS mediated inflammation and mortality

Given the availability of tools to study coagulation in zebrafish [25,49] we decided to characterize further the

one anticoagulant, dabigatran, that was identified through both *in silico* and *in vivo* analyses. Although a

prior study has shown only a modest effect of dabigatran on lethality in sepsis models [39], we found that it

completely averted LPS-induced lethality (Fig. 3A). Expression of inflammatory cytokines and

procoagulant genes were downregulated in fish co-treated with LPS and dabigatran compared to LPS

alone (Fig. 3B). As previously shown [17], time to venous occlusion was increased in dabigatran treated

fish, indicating successful anticoagulation (Fig. 3C). There was no additive effect on occlusion with co-

treatment.

275   We next determined whether dabigatran administration could produce a more general anti-

inflammatory effect. Tail transection, an established method to induce inflammation, was performed on 3

dpf larvae. We found that dabigatran did not reduce neutrophil or macrophage recruitment to the tail

transection site, suggesting that its protection might be more specific to LPS rather than representing a

general anti-inflammatory response (Fig. S3).

Dabigatran protects zebrafish from LPS toxicity independent of its anticoagulant function

An anti-sepsis effect of dabigatran mediated through fibrinogen-like protein 2 (Fgl2) has been described

[39]. To determine whether the protection from LPS toxicity was dependent on the anticoagulant effect of

dabigatran, we evaluated three other commonly used anticoagulants – two affecting factor Xa,

rivaroxaban and apixaban, as well as another thrombin inhibitor, argatroban. Rivaroxaban and apixaban

were previously shown to be active in zebrafish and were used here at the same concentration [17].

However, we required shorter incubation times due to the rapid lethality induced by LPS. As expected, all

anticoagulants increased the TTO (Fig. 4A, Fig. S4 A, B). Interestingly, some of the anticoagulants

appeared to have a synergistic effect with LPS, significantly increasing the time to occlusion when

compared to the drug alone (Fig. 4A, Fig. S4 A, B). However, none of these conferred protection from

LPS toxicity (Fig. 4B, Fig. S4 C, D), suggesting that anticoagulation might not be the mechanism through

which dabigatran mitigates LPS-induced endotoxemia.

To further test this hypothesis, we employed a prothrombin knockout background (null mutation

in the *f2* gene [17]. Larvae from *f2* heterozygous incrosses were divided into four groups: untreated controls,

LPS, dabigatran, and LPS + dabigatran. Each group was followed for survival over 3 days. LPS alone was

lethal in all genotypes (Fig. 4C), revealing that thrombin inhibition is not necessary for protection from

LPS. The presence of homozygous mutants was confirmed by genotyping all clutches, except for LPS

alone due to their rapid degradation (Fig. 4D). Thus, dabigatran administration protected *f2* homozygous

mutants from lethal LPS, proving that its mechanism of protection occurs independently of thrombin

inhibition.

Dabigatran administration reduces LPS mediated nitric oxide production and apoptosis

Nitric oxide (NO) production can contribute to the hypotension seen in septic shock [50], and LPS has

previously been showed to increase NO [50]. We confirmed that LPS administration increased NO

production in our system (Fig. 5A, B). Additionally, dabigatran has previously been found to suppress

nitric oxide synthase [51]. We therefore tested whether dabigatran treatment could reduce NO production

and found this to be the case (Fig. 5A, B).

RNA sequencing data suggested that apoptosis related pathways were increased in LPS-treated

fish (Fig. 6A). As NO production has been shown to lead to apoptosis after LPS exposure [52], we next

tested whether this represented a mechanism by which protection from LPS is conferred. We found that

cell death (Fig. 6B, C) and apoptosis (Fig. 6D, E) were significantly decreased in dabigatran and LPS co-

treated fish. These data suggest that decreased NO production and apoptosis might be mechanisms by

which dabigatran protects against LPS toxicity.

Discussion:

We have identified several small molecule mediators of LPS toxicity that can act as anti-

inflammatory agents. Approximately half had been previously explored in mammalian LPS models, and

all have been shown to reduce inflammation and ameliorate toxicity [28-31,33-37,40,42,43,47,48,53-55], suggesting

strong concordance between zebrafish and mammals. These mediators were found to act through multiple

mechanisms, including inhibition of TLR and NFκB activation [33,54] as well as inhibition of inflammation

through NFκB-independent mechanisms [34,35]. Other potential mechanisms include effects on apoptosis [30]

and NOS (nitric oxide synthase) activation [31]. A smaller number of the identified drugs have also been

investigated in mammalian sepsis models [32,39,41,43-45,47,56], all with beneficial effects, indicating further

concordance with our zebrafish data. The novel mediators of LPS toxicity that have not previously been

tested in other studies – amsacrine, bedaquiline, conivaptan, deserpidine, lomitapide, pergolide,

prasetinib, rucaparib, vilazodone, ziprasidone – have as yet undetermined mechanisms of action and

represent avenues for further research in both mammalian inflammation and sepsis.

Clinical trials using anticoagulants in the context of sepsis have proven equivocal at best [57-66],

although it is still possible that specific subtypes of sepsis patients may benefit from anticoagulant

therapy. Previous studies have shown that dabigatran reduces inflammation ([39,40] and can enhance survival

in mouse models of sepsis [39], congruent with a cohort study revealing that patients on dabigatran had a

lower incidence of *Staphylococcus aureus* bacteremia [41]. Dabigatran has also been found to mitigate

inflammation in multiple contexts, including diet [67], oxysterols [68], and acute myocardial infarction [51].

However, it is unclear whether these beneficial effects were due to the anticoagulant function of

dabigatran. Our data suggest that dabigatran reduces inflammation and promotes survival from LPS

toxicity through a novel mechanism independent of its direct anticoagulant effect on thrombin.

We found that dabigatran administration reduces LPS mediated NO production and apoptosis,

suggesting that this is one possible mechanism by which dabigatran confers protection from LPS.

Dabigatran has previously been shown to suppress nitric oxide synthase in acute myocardial infarction [51]

and future experiments will clarify the mechanism by which dabigatran reduces LPS mediated nitric

oxide production.

There are several limitations of this study. Due to the stringency of the screen (mortality), it is

likely that other small molecules conferring beneficial effects but not affecting mortality (e.g., those that

reduce inflammation) were not identified. This study also does not necessarily identify the mechanism by

which each drug acts to reduce LPS toxicity. It is possible that the effect is mediated through a non-

primary or previously unknown mechanism of action (as is the case with dabigatran).

Our data suggest that the novel small molecule mediators of LPS toxicity uncovered through our

screen can be explored as anti-inflammatory and anti-sepsis agents in mammals. Given that the hits

previously examined in mammalian systems were also found to have beneficial effects in this zebrafish

model, we expect that at least some of the novel drugs will translate to mammalian models.

Previous work and our data suggest that dabigatran can act as an anti-inflammatory and potential

anti-sepsis agent [39-41]. We show here definitive proof that dabigatran acts independently of thrombin to

exert its rescue of lethal endotoxemia. Venous thromboembolism prophylaxis is the standard of care for

most adult hospitalized inpatients, especially those admitted for sepsis [69,70]. The most common agents

used are unfractionated and low molecular weight heparins, but the data from our study suggest the

possibility that dabigatran could be an alternative with a dual benefit –both anticoagulant and completely

distinct anti-LPS functions. Randomized controlled trials in human inflammatory conditions or inpatients

would be relatively easy to support given the successful use of direct oral anticoagulants and the

indication for anticoagulation in hospitalized patients [69,70].

Acknowledgments:

Competing Interests:

J.A.S. has been a consultant for Sanofi, Takeda, Genentech, CSL Behring, Pfizer, Medexus and

NovoNordisk. The other authors declare that they have no competing interests to disclose

Funding:

The authors were supported by the National Institutes of Health (https://www.nih.gov/) [R35HL150784

(J.A.S.), K12HL133304 and K08GM151392 (V.J.) and the Charles Woodson Collaborative Research

Award (J.A.S and V.J.)], the Singapore National Medical Research Council (https://www.nmrc.sg/

)[OFIRG22jul-0081 (S.H.O.)]. J.A.S. is the Henry and Mala Dorfman Family Professor of Pediatric

Hematology/Oncology. X.S. holds the A*STAR Singapore International Graduate Award (SINGA)

scholarship (https://www.a-star.edu.sg/Scholarships/for-graduate-studies/singapore-international-

graduate-award-singa).

The funders had no role in study design, data collection and analysis, decision to publish, or preparation

of the manuscript.

Data Availability:

RNAseq data have been submitted to NCBI Gene Expression Omnibus and are available under accession

number GSE245299. Any other original data can be obtained by contacting the corresponding author at

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Author Contributions:

V.J., J.A.S., S.O. and A.F. conceived and planned experiments. V.J., A.F., R.M., W.W. and X.S.

performed and analyzed all experiments and M.Y. performed *in silico* analysis. V.J. wrote the manuscript,

with input from all authors. J.A.S. revised the manuscript.

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Mechanism of Action (MoA)	How often MoA occurs among candidate drugs from Table S2
Dopamine receptor antagonist	10
EGFR inhibitor	9
Tubulin inhibitor	8
Adrenergic receptor antagonist	6
MEK inhibitor	6
PI3K inhibitor	6
Serotonin receptor antagonist	6
Calcium channel blocker	5
KIT inhibitor	5
Na/K-ATPase inhibitor	5
RAF inhibitor	5
JAK inhibitor	4
PDGFR inhibitor	4
PKC inhibitor	4
Topoisomerase inhibitor	4

637
638 **Table 1:** MoA of small molecules from Table S2 sorted by the number of times the MoA appears among
639 the list of candidate drugs (only occurrences >= 4 are shown)

Drug Category	Drug identified from current zebrafish LPS screen	Main Mechanism of Action	Drug previously tested with LPS in mammals?/ Novel	Drug previously tested in sepsis?/ Novel
Dopamine and Serotonin Modulators	Ziprasidone	Dopamine and serotonin antagonism	Novel	Novel
	Pergolide	Dopamine receptor agonist	Novel	Novel
	Vilazodone	Inhibits serotonin transporter, partial agonist at serotonin receptors	Novel	Novel
	Brexpiprazole	Dopamine and serotonin receptor modulation	Novel	Novel
	Ketanserin	Serotonin receptor antagonist	Mouse (Liu et al., 2013, Sugino et al., 2009)	Clinical trial for septic shock (Vellinga et al., 2015)
Chemotherapeutics	Rucaparib	Inhibits poly(ADP-ribose) polymerase	Novel	Novel
	Sunitinib	Inhibits receptor tyrosine kinases	Mouse (Zhao et al., 2019)	Novel
	Fedratinib	Inhibits janus receptor kinase 2	Human macrophages (Akcora et al., 2019)	Novel
	Pralsetinib	Rearranged during transfection kinase inhibitor	Novel	Novel
	Ceritinib	Inhibits autophosphorylation of anaplastic lymphoma kinase	Human endothelial cells (Dayang et al., 2021, Hu et al., 2019)	CLP induced sepsis in mice (Hu et al., 2019)
	Amsacrine	DNA intercalator	Novel	Novel
Antiviral/ Antibacterial Agents	Nelfinavir	Protease inhibitor	Human macrophages (Wallet et al., 2012)	CLP induced sepsis in mice (Weaver et al., 2004)
	Saquinavir	Protease inhibitor	Mouse (Yao et al., 2023, Tong et al., 2021), Human lung cells (Zhang et al., 2018)	CLP induced sepsis in mice (Tong et al., 2021)
	Ledipasivir	Inhibits viral phosphorylation	Novel	Novel
	Bedaquiline	Blocks proton pump for ATP synthase	Novel	Novel

653 **Table 2: Small molecules protecting zebrafish embryos from LPS toxicity.**

Drug Category	Drug identified from current zebrafish LPS screen	Main Mechanism of Action	Drug previously tested with LPS in mammals?/ Novel	Drug previously tested in sepsis?/ Novel
Miscellaneous	Indacaterol	β-adrenoreceptor agonist	Guinea pigs (Aritake et al., 2021), Human lung macrophages (Maarsingh et al., 2021)	Novel
	Conivaptan	Vasopressin receptor antagonist	Novel	Novel
	Deserpidine	Vesicular monoamine transporter blocker	Novel	Novel
	Lomitapide	Microsomal triglyceride transfer protein inhibitor	Novel	Novel
	Dabigatran	Thrombin inhibitor	Mouse (Kimura et al., 2020)	Mouse sepsis models, including CLP (Lei et al., 2021), *S. aureus* bacteremia in humans (Butt et al., 2021)
	Berberine	Activates AMPK (increases glycolysis)	Mouse (Chen et al., 2022), rats (Chen et al., 2021, Zhao et al., 2023), mouse macrophage cells (Zhao et al., 2023), bovine endometrial epithelial cells (Fu et al., 2023)	CLP-induced sepsis in mice (Chen et al., 2023), cecal slurry-induced sepsis (Li et al., 2021), *S. aureus*-induced septic arthritis in mice (Asila et al., 2022)

Table 2 continued: Small molecules protecting zebrafish embryos from LPS toxicity

Figure 1: LPS incubation results in dose-dependent lethality and signs of end-organ damage in

zebrafish larvae. (A) Percent survival of 4 days post fertilization (dpf) zebrafish larvae incubated with *S.*

typhi LPS at 3 dpf. 3 clutches of 15 fish (total of 45) were used per concentration. (B) Heart rate (beats

per minute) was counted 3 hours after LPS (40 µg/mL) administration and compared to controls. Each

point represents a different fish, and the results include 3 separate experiments. (C) *grk5*, a gene involved

in heart rate contractility, was measured by qPCR in LPS-treated fish compared to controls. Larvae from

two or more clutches were pooled, where each point represents a separate clutch, and the average fold

change in LPS-treated fish vs. controls was graphed. 30-45 total fish were used per time point. Bars

indicate mean and standard deviation. Student's t-test (two-tailed) on $\Delta\Delta C_t$ values was used to determine

significance. *P<0.05.

Figure 2: The immune and interferon signaling pathways and procoagulant pathways are

significantly upregulated in LPS-treated fish compared to controls. (A) KEGG pathway analysis of

RNA-seq data from whole LPS treated fish compared to controls. Significantly changed genes (adjusted

p-value <0.05) from RNA-seq data on pooled 3 dpf LPS-treated vs. control fish (consisting of 30-45

embryos per category) performed in triplicate were used for further analyses. These genes were converted

to human versions and then submitted for KEGG Pathway Analysis using the Enrichr platform, a publicly

available tool developed by the Ma'ayan lab at Icahn School of Mount Sinai, NY (Chen et al., 2013,

Kuleshov et al., 2016). Overlap score is the number of significantly changed genes over the total number

of genes in the pathway. Combined score considers the z-score (a value's relationship to the mean) in

addition to the adjusted p-value. The combined score is used to assess the significance of gene set

enrichment findings, with higher values being more significant. Adjusted p-value <0.05 is considered

significant. Immune and interferon-related and complement and coagulation pathways are shown. For

complete analysis, see Table S1. (B) A subset of genes in the immune and interferon pathways were

tested by qPCR, using 3 dpf larvae treated with 40 µg/mL LPS vs. control conditions. Larvae from two or

more clutches were pooled, where each point represents a separate clutch, and the average fold change in

LPS-treated fish vs. controls is graphed. Bars represent mean and standard deviation. Student's t-test

(two-tailed) on $\Delta\Delta C_t$ values was used to determine significance. *P<0.05. (C) A subset of procoagulant

genes was tested by qPCR, using 3 dpf larvae treated with 40 µg/mL LPS vs. control conditions. Larvae

from two or more clutches were pooled, where each point represents a separate clutch, and the average

fold change in LPS-treated fish vs. controls is graphed. Bars indicate mean and standard deviation.

Student's t-test (two-tailed) on $\Delta\Delta C_t$ values was used to determine significance. *P<0.05. A schematic of

the laser injury assay used to measure time to occlusion is shown in (D), where the time to formation of

an occlusive thrombus after laser pulses were delivered to the posterior cardinal vein or dorsal aorta was

measured. 120 seconds was the maximum time each larva was observed. Time to occlusion (TTO) after

laser injury in the venous (E) and arterial (F) circulation was measured in 3 dpf zebrafish larvae 3 hours

after LPS administration and compared to controls. Each point represents a separate fish, and the observer

was blinded to the treatment condition. P<0.05 is considered significant by Mann-Whitney U testing.

Figure 3: The anticoagulant dabigatran mitigates LPS-induced lethality and reduces the expression

of inflammatory genes. (A) Zebrafish were administered a lethal dose of LPS with 25 µM dabigatran

along with appropriate controls and survival was tracked daily from 3 through 6 dpf. (B) Expression of

inflammatory genes was evaluated by qPCR 3 hours after drug administration in 3 dpf larvae treated with

LPS and dabigatran. Pooled larvae (15-45) from a clutch were used, where each point represents a

separate clutch, and the average fold change in LPS-treated fish vs. controls is graphed. Bars indicate

mean and standard deviation. Student's t-test (two-tailed) on $\Delta\Delta C_t$ values was used to determine

significance. *P<0.05. (C) Time to occlusion (TTO) after laser injury in the venous circulation was

measured in 3 dpf zebrafish larvae 3 hours after LPS and dabigatran administration. Each point represents

a single larva, and the observer was blinded to the condition. P<0.05 was considered significant by Mann-

Whitney U testing.

Figure 4: Dabigatran protection from LPS toxicity occurs independently of prothrombin. (A) Time

to occlusion (TTO) after laser injury in the venous circulation was measured in 3 dpf zebrafish larvae 3

hours after LPS and argatroban administration. Each point represents a single larva, and the observer was

blinded to the condition. P<0.05 was considered significant by Mann-Whitney U testing. (B) Zebrafish

were treated with argatroban and/or LPS at 3 dpf and observed daily until 6 dpf for survival. (C) Three

dpf larvae from *f2* heterozygous incrosses were divided into four groups: untreated controls, 40 µg/mL

LPS, 25 µM dabigatran, and LPS/dabigatran. All groups were followed for 3 days for survival. (D)

Genotype distribution of surviving larvae.

Figure 5: Dabigatran reduces LPS mediated nitric oxide production.

(A) Representative images of 3 dpf fish stained with DAF-FM DA to visualize nitric oxide production

after the indicated treatment. (B) ImageJ analysis showing mean fluorescence intensity of images of 3 dpf

DAF-FM DA stained fish with the indicated treatment; observers were blinded to condition. Each point

represents a different fish, and the results include 3 separate experiments. Student's t-test (two-tailed) on

$\Delta\Delta C_t$ values was used to determine significance. *P<0.05.

Figure 6: Dabigatran reduces LPS mediated cell death and apoptosis.

(A) KEGG pathway analysis of RNA-seq data from whole LPS treated fish compared to controls.

Significantly changed genes (adjusted p-value <0.05) from RNA-seq data on pooled 3 dpf LPS-treated vs.

control fish (consisting of 30-45 embryos per category) performed in triplicate were used for further

analyses. These genes were converted to human versions and then submitted for KEGG Pathway Analysis

using the Enrichr platform, a publicly available tool developed by the Ma'ayan lab at Icahn School of

Mount Sinai, NY (Chen et al., 2013, Kuleshov et al., 2016). Overlap score is the number of significantly

changed genes over the total number of genes in the pathway. Combined score considers the z-score (a

value's relationship to the mean) in addition to the adjusted p-value. The combined score is used to assess

the significance of gene set enrichment findings, with higher values being more significant. Adjusted p-

value <0.05 is considered significant. Apoptosis related pathways are shown. For complete analysis, see

Table S1. (B) Representative images of 3 dpf fish stained with acridine orange after the indicated

treatment. (C) ImageJ analysis showing mean fluorescence intensity of images of 3 dpf acridine orange

stained fish with the indicated treatment; observers were blinded to condition. Each point represents a

different fish, and the results include 3 separate experiments. Student's t-test (two-tailed) on $\Delta\Delta C_t$ values

was used to determine significance. *P<0.05. (D) Representative images of 3 dpf fish stained with

TUNEL after the indicated treatment. (E) Apoptosis was scored in 3 dpf TUNEL stained fish with the

indicated treatement; observers were blinded to condition. Each point represents a different fish, and the

results include at least 2 separate experiments. Student's t-test (two-tailed) on $\Delta\Delta C_t$ values was used to

determine significance. *P<0.05.

Figure 1

A

B

C

Figure 2

A

Name of Pathway	Overall Ranking (out of 98 significantly changed pathways)	Overlap Score	Adjusted P-value	Combined Score
Pathogenic *E.coli* Infection	1	38/197	2.59E-10	127.749924
Leukocyte Transendothelial Migration	9	21/114	8.13E-06	65.1873171
Complement and Coagulation Cascades	8	18/85	7.42E-06	78.4936729
TNF Signaling	12	20/112	1.84E-05	57.8681584
Platelet Activation	70	14/124	0.017	13.16661224

B

C

D

E

F

Figure 3

A

[25 uM] Dabigatran

○⊖ Control
✱ LPS
⊟ Dabigatran
◇ Dabigatran + LPS

B

Dabigatran

○ LPS
△ LPS + Dabigatran

il11a   il1b   cxcl8b.1   f3a   f3b

C

Figure 4

Figure 5

DMSO

100 µm

LPS

100 µm

Dabigatran

100 µm

LPS + Dabigatran

100 µm

Figure 6

A

Name of Pathway	Overall Ranking (out of 98 significantly changed pathways)	Overlap Score	Adjusted P-value	Combined Score
Apoptosis	11	23/142	1.84 E-05	51.783249

B

DMSO

LPS Control

Dabigatran

Dabigatran + LPS

C

D

DMSO

LPS

Dabigatran

Dabigatran + LPS

E