A role for Fibroblast Growth Factor Receptor 1 in the pathogenesis of *Neisseria meningitidis*

Sheyda Azimi[a], Lee M. Wheldon, Neil J. Oldfield, Dlawer A. A. Ala'Aldeen[b], and Karl G. Wooldridge*

Molecular Bacteriology and Immunology Group, School of Life Sciences, Centre for Biomolecular Science, University of Nottingham.

[a]Present affiliation: Georgia Institute of Technology, Atlanta, Georgia, USA

[b]Present affiliation: Middle East Research Institute, Dream City, Erbil, Kurdistan Region of Iraq

*corresponding author

Mailing address:
Molecular Bacteriology and Immunology Group, Centre for Biomolecular Science, University of Nottingham, University Park, Nottingham, NG7 2RD, UK.

Email: karl.wooldridge@nottingham.ac.uk

Running title: FGFR1 and meningococcal pathogenesis

Keywords: Meningococci, Neisseria, meningitidis, FGFR1, epithelial, endothelial, host-pathogen

1 **Summary**

Neisseria meningitidis remains an important cause of human disease. It is highly

adapted to the human host – its only known reservoir. Adaptations to the host

environment include many specific interactions with human molecules including

iron-binding proteins, components of the innate and adaptive immune systems,

and cell surface receptors such as the Epidermal Growth Factor Receptor (EGFR).

Interaction of the meningococcus with EGFR has been elucidated in some detail

and leads to intracellular signalling and cytoskeletal changes contributing to the

pathogenesis of the organism. Here, we show that the meningococcus also recruits

Fibroblast Growth Factor Receptor 1 (FGFR1) onto the surface of human blood

microvascular epithelial cells (HBMECs). Furthermore, meningococci internalised

into these cells recruit the activated form of this receptor, and that expression and

activation of FGFR1 is necessary for efficient internalisation of meningococci into

HBMECs. We show that *Neisseria meningitidis* interacts specifically with the IIIc

isoform of FGFR1.

Introduction

Neisseria meningitidis, or the meningococcus, while normally a harmless commensal of the human oropharynx, can occasionally cause devastating disease including meningitis, sepsis, disseminated intravascular coagulation (DIC) and multiple organ failure (Takada *et al.*, 2016). Penetration of meningococci through the oropharyngeal epithelial mucosa and into the blood is a crucial step in the development of sepsis and other systemic diseases, while penetration of the blood-brain barrier (BBB) is a prerequisite for the development of meningitis (Nassif, 1999, Virji, 2009). Attachment to endothelial cells induces membrane protrusions at the bacterial binding site and leads to the formation of specific protein complexes known as cortical plaques underneath the bacterial colonies (Merz *et al.*, 1999, Eugene *et al.*, 2002). The process by which these steps occur is incompletely understood (Sokolova *et al.*, 2004, Yazdankhah *et al.*, 2004, Hill *et al.*, 2010), but identified meningococcal adhesins include components of the type IV pilus (PilC1, PilC2 and PilQ), the outer membrane proteins Opa, Opc, Factor H-binding protein, PorA, PorB, HrpA, NadA, App and MspA, as well as lipooligosaccharide (LOS) (Merz *et al.*, 2000, Hadi *et al.*, 2001, Turner *et al.*, 2006, Morand *et al.*, 2009). Host cell receptors that have been identified include alpha actinin, integrins, CEACAMS, CD46, Complement receptor 3, GP96 scavenger receptor, laminin, platelet-activating factor, mannose receptor, Transferrin receptor 1, Laminin receptor and Galectin-3 (Merz *et al.*, 2000, Morand *et al.*, 2009, Orihuela *et al.*, 2009, Quattroni *et al.*, 2012, Alqahtani *et al.*, 2014, Khairalla *et al.*, 2015).

Fibroblast Growth Factor Receptors (FGFRs) are transmembrane proteins that belong to the Receptor Tyrosine Kinase (RTK) family of signalling molecules. This family consists of four members that are responsible for recognising all 22

Fibroblast Growth Factor molecules (FGFs) found in humans (Ornitz *et al.*, 2001,

Turner *et al.*, 2010, Guillemot *et al.*, 2011). FGFs are involved in cell

differentiation, migration and proliferation during early embryogenesis and play

an important role in tissue repair, wound healing (Ortega *et al.*, 1998) and tumour

angiogenesis in adulthood (Gerwins *et al.*, 2000, Eswarakumar *et al.*, 2005, Presta

et al., 2005). Splicing of FGFR transcripts generates a variety of specific isoforms

in various types of cells and tissues recognising specific types of FGF molecules

(Miki *et al.*, 1992, Groth *et al.*, 2002, Eswarakumar *et al.*, 2005, Turner *et al.*,

2010).

FGFRs are single transmembrane receptors; the extracellular N-terminal

region consists of three IgG-like domains that form a ligand-binding domain with

an acidic box which interacts with heparin sulphate proteoglycans (HSPGs) and

Cell Adhesion Molecules (CAMs). This is followed by a transmembrane region and

a C-terminal cytoplasmic region containing 7 specific tyrosine residues (Ornitz *et*

al., 1992, Reiland *et al.*, 1993, Cavallaro *et al.*, 2004, Francavilla *et al.*, 2009).

Binding of FGFs to FGFR leads to dimerisation of the receptor and activation of

tyrosine autophosphorylation, which in turn activates the receptor, leading to

activation of downstream signalling pathways (Mohammadi *et al.*, 1992,

Mohammadi *et al.*, 1996, Lundin *et al.*, 2003, Zhang *et al.*, 2006). Previous studies

confirmed the importance of FGFR1 signalling and expression in maintaining the

integrity and differentiation of endothelial cells forming the microvasculature

(Kanda *et al.*, 1996, Gerwins *et al.*, 2000, Murakami *et al.*, 2008).

The possible role of FGFRs in infectious diseases has not been excessively

investigated, although FGF2 expression enhance *Chlamydia trachomatis* binding

and internalisation into epithelial cells (Kim *et al.*, 2011). *C. trachomatis* facilitates

entry by binding directly to FGF2, which results in binding of FGF2-bacteria-

heperan sulfate proteoglycan (HSPG) complexes to FGFR and internalisation of

the elementary bodies of these bacteria into the epithelial cells. The study also

showed higher levels of FGFR substrate 2 (FRS2) activation as a results of FGF2/*C.*

trachomatis treatment in Hela cells, and higher level of FGF2 expression via

activation of ERK1, 2. More recently, HSPG-associated FGFR1 has been implicated

in internalisation of *Rickettsia rickettsii* into cultured human microvascular

endothelial cells and inhibition of FGFR1 in a *R. conorii* murine model of

endothelial-target spotted fever rickettsiosis reduced the rickettsial burden in

infected mice (Sahni *et al.*, 2017).

In a study of role of RTKs, and specifically EGFRs, in meningococcal infection

higher levels of FGFR1 activation were observed in endothelial cells in response to

infection (Slanina *et al.*, 2014). Here we investigated the possible direct

interaction of FGFRs expressed in HBMECs with meningococci and the influence of

such an interaction on the ability of *N. meningitidis* to invade these cells.

Results

Meningococci recruit FGFR1 on the apical surface of Human Brain Microvascular Endothelial Cells (HBMECs). To study the possible interaction of FGFR1 by meningococal colonies, HBMECs were infected with *N. meningitidis* for 4 h, fixed, and prepared for immunofluoresce microscopy. FGFR1 was recruited by meningococcal colonies on the apical surface of HBMECs. FGFR1 coincided with recruitment of both 67LR and 37LRP isoforms of laminin receptor (Figure 1). To address whether FGFR1 recruited by meningococci is activated, HBMECs were labelled with primary antibodies specific for phosphorylated tyrosine 766 (p-Y766), 67LR and 37LRP. In all cases the phosphorylated FGFR1 co-localised with meningococcal cells (Figure 1).

Meningococcal colonies co-localised with activated FGFR1 and 37LRP, up to 60% of which was co-localised with FGFR1. This was significantly higher than co-localisation of the microcolonies with the 67LR isoform of the receptor (Figure 1-B, C).

Internalised N. meningitidis associated with activated FGFR1. To determine whether internalised bacteria are associated with activated FGFR1, HBMECs were infected for 4 h with *N. meningitidis* and non-internalised bacterial cells were killed by gentamicin. Immunofluorescent staining for actin and activated FGFR1 (p-Y766) confirmed that meningococci recruited activated FGFR1 in the cytoplasm of HBMECs, and that the receptor was trafficked inside the cells alongside with meningococcal cells (Figure 2). To confirm that the bacterial cells in gentamycin-treated monolayers were internalised, a Z-stack image was constructed. Bacterial cells could be observed beneath the membrane of the endothelial cells (Figure 2-

B). Furthermore, when cells were permeabilised prior to gentamycin treatment no

bacterial cells were observed (Figure 2-C).

FGFR1 expression and activation is required for meningococcal invasion into

HBMECs. To study the role of FGFR1 in interaction of meningococci with HBMECs,

FGFR1 expression was knocked down in HBMECs using siRNA treatment. Sixty

hours post-siRNA treatment, cells were infected with meningococci and cell

association and invasion assays were performed. The chemical inhibitor of FGFR1

(SU5402) (Mohammadi *et al.*, 1997) was also used to examine the effect of

inhibiting the activation of FGFR1 during meningococcal infection.

The numbers of meningococcal cells associated with HBMECs was significantly and

dramatically reduced in response to either FGFR1 knock-down or SU5402-

treatment (Figure 3-A). Treatment with scrambled siRNA under the same

conditions did not result in a significant reduction in association of meningococci

with HBMEC cells. There was also a significant decrease in the number of

internalised meningococcal cells recovered from FGFR1 siRNA-transfected

HBMECs, as well as SU5402-treated HBMECs (Figure 3-B). Again, treatment with

a scrambled siRNA did not significantly affect binding of meningococci to the

HBMEC cells. This demonstrates that FGFR1 expression and activation plays an

important and specific role in meningococcal adhesion to and invasion into

HBMECs (Supporting material, S3).

There is a direct and specific interaction between FGFR1 IIIc and N. meningitidis.

To determine which isoforms of FGFR1 are expressed in HBMEC cells we performed

RT-PCR using cDNA generated from total RNA extracted from HBMECs. FGFR1 IIIc

and FGFR3 IIIb isoforms were both expressed in these cells (Supporting

material, S1). To determine whether meningococci could interact directly with the

extracellular domain of FGFR1 IIIc this protein was cloned and expressed as an

Fc-tagged fusion protein (Supporting material). Two other proteins: Fc-FGFR2 IIIa

TM, comprising the trans-membrane region of FGFR2 IIIa fused to the

immunoglobulin Fc domain, and the Fc portion of immunoglobulin alone (Fc-stop)

were used as controls for possible interaction with *N. meningitidis* that was not

specific to the FGFR1 IIIc (extracellular) domain. Both control proteins were

derived from clones employing the same vector and purified by the same method

as Fc-FGFR1 IIIc. The purified proteins were employed as an immobilised ligand

in ELISA experiments.

ELISA plates were coated with Fc-tagged purified proteins then binding of DIG-

labelled *N. meningitidis* (MC58) was assessed (Figure 4, A and B). *N. meningitidis*

(MC58) bound Fc-FGFR1 to a significantly greater degree than either Fc-FGFR2

IIIa TM or Fc-stop (Figure 4 A). This indicates that the observed interaction of Fc-

FGFR1 was not due to meningococci binding to the Fc-tag of the expressed

extracellular domain of FGFR1 and thus indicates a direct interaction between the

receptor present on the apical surface of HBMECs and surface structures of *N.*

meningitidis.

Interaction between N. meningitidis and FGFR1 is also seen in the pathogen N.

gonorrhoea but not commensal Neisseria species, nor other bacterial pathogens

targeting the meninges. Having shown that Fc-FGFR1 IIIc interacts with

meningococci, we sought to establish whether other *Neisseria* species could

interact with this receptor. Representative strains belonging to several *Neisseria*

species including the normally commensal species *N. polysaccharea* and *N.*

lactamica, and the pathogenic *N. gonorrhoeae* were tested for interaction with Fc-

FGFR1 in ELISA assays. *N. gonorrhoeae* cells bound to wells containing Fc-FGFR1

at similar levels to *N. meningitidis* MC58, and in both cases to a significantly higher

degree than either of the two commensal species, which did not bind to a

significantly higher degree to Fc-FGFR1 than to control wells containing only Fc-

FGFR2 TM (Figure 4 B). We previously showed that, like the meningococcus, the

meningeal pathogens *S. pneumoniae* and *H. influenzae* each targeted the laminin

receptor on HBMEC cells as a prerequisite for internalisation (Orihuela *et al.*,

2009). We examined the possible interaction between these two other major

causes of bacterial meningitis and the extracellular domain of FGFR1. Neither

representative *S. pneumoniae* nor *H. influenzae* strains bound significantly to Fc-

FGFR1 (Figure 4 C), demonstrating that the observed interaction between the

pathogenic *Neisseria* species was specific.

Discussion

The requirement for Focal Adhesion Kinases and activation of Src in the internalization of meningococci via interaction with integrins has been reported previously (Slanina *et al.*, 2012). Considering the role of FGFR1 in maintaining the integrity of the BBB and angiogenesis (van Hinsbergh *et al.*, 2005), we examined the possible role of FGFR1 in interactions with meningococci. Confocal microscopy studies on cells infected with meningococci confirmed that these bacteria recruit FGFR1 to the apical surface of HBMECs. Recently, we showed that meningococci bind to both 37LRP and Galectin-3 on the surface of HBMECs (Alqahtani *et al.*, 2014). Here, we showed that FGFR1 recruitment coincided with recruitment of both isoforms (37LRP and 67LR) of the laminin receptor; molecules already implicated in Neisserial-HBMEC interactions (Orihuela *et al.*, 2009). Ligation of the extracellular domain of FGFRs by their ligands leads to auto-phosphorylation of tyrosine residues in the cytoplasmic domain of the receptor; these phosphorylated residues subsequently serve as docking sites for a number of adaptor proteins responsible for regulation of various downstream signalling cascades (Turner *et al.*, 2010). The FGFR1 molecules recruited by meningococci were shown to be activated and activated receptors and meningococcal cells also co-localised with α-actinin. This is in agreement with previous studies on the trafficking of FGFR1 into early endosomes inside the cytoplasm, and the regulation of its trafficking by Syndecan 4 in a clathrin-independent manner (Elfenbein *et al.*, 2012). We also showed that the whole receptor is internalised into the cytoplasm along with invading meningococci; this was also observed by confocal microscopy in HBMECs treated with gentamicin after 4 h of meningococcal infection. Interestingly, FGFR1 engagement by basic fibroblast growth factor receptor has recently been shown to protect the integrity of HBMEC monolayers preventing the downregulation of

the junction proteins zO-1, occludin and VE-cadherin in response to oxygen-
glucose deprivation and deoxygenation (Lin *et al.*, 2017). This might have
implications for the route of entry of meningococci via a trans-cellular pathway
through HBMECs rather than a para-cellular pathway in which the integrity of the
monolayer would have to be compromised.

To determine whether FGFR1 was required for meningococcal-HBMECs
interactions, FGFR1 expression was transiently inhibited by using FGFR1 siRNA
transfection and in other experiments its activity was inhibited by the specific
chemical inhibitor SU5402. Both FGFR1 knock-down and SU5402 treatment of
HBMECs resulted in a dramatic reduction in both association and internalisation of
meningococci into HBMECs. Our data confirm that direct interaction between the
extracellular domain of FGFR1 and meningococci is required for consequent
activation of the receptor and internalisation of bacteria into the HBMECs.
The mechanisms by which recruitment of FGFR1 by meningococcal colonies leads
to their internalisation is unknown. Interaction of meningococci with HBMECs has
previously been shown to lead to higher levels of activation of ERK 1, 2 due to
activation of ErbB2 in these cells (Hoffmann *et al.*, 2001). However, levels of ERK
1,2 activation in cells in which FGFR1 was knocked down by siRNA transfection
were unaffected, demonstrating that FGFR1 does not regulate the levels of ERK1,
2 activation (Estes *et al.*, 2006).Several studies on meningococcal infection of
endothelial cells showed that invasion of bacteria requires activation of Src,
phosphorylation of cortactin via the Src pathway and activation of focal adhesion
kinases (FAKs) (Hoffmann *et al.*, 2001, Miller *et al.*, 2012, Slanina *et al.*, 2012).
Also, it has been shown that meningococcal cells hijack the β-arrestin/β 2-
adrenoreceptor pathway to invade endothelial cells and cross the BBB: inhibition
of β-arrestin mediated activation of Src, prevents the invasion of meningococcal

cells (Coureuil *et al.*, 2010). Src is required for cortactin phosphorylation by FGF1

which can provide an alternate downstream pathway of FGFR1 from PLCγ and can

be involved in cytoskeletal rearrangement (Zhan *et al.*, 1994, Liu *et al.*, 1999).

However it was reported that mutation of Y766 in FGFR1 leads to higher level

activations of PLCγ which inhibits Src activation (Landgren *et al.*, 1995). These

observations suggest that FGFR1 siRNA transfection of HBMECs and chemical

inhibition of FGFR1 (SU5402 treatment) may have led to the same effect on

inhibition of Src activation which consequently inhibited meningococcal invasion

into HBMECs. It is likely that FGFR1 plays an important role in meningococcal

interaction with the BBB during infection. This effect appears to be specific to the

meningococcus as the bacterial pathogens *H. influenzae* and *S. pneumoniae*,

which also cross the BBB and can cause meningitis, do not interact with FGFR1

IIIc on the surface of endothelial cells. On the other hand, *N. gonorrhoea*, which

does not usually interact with the BBB is able to bind this receptor. The significance

of this is unknown. Further investigations are required to understand the role of

FGFR1 signalling in meningococcal invasion into HBMECs.

Experimental Procedures

Bacterial growth and culture

N. meningitidis serogroup B strain MC58 was obtained from the American Type Culture Collection (ATCC) (Tettelin *et al.*, 2000) and routinely cultured on chocolated horse blood agar (Chocolate agar; Oxoid). *H. influenzae* Rd KW20 (ATCC 51097) (Fleischmann *et al.*, 1995) and *S. pneumoniae* T4R (unencapsulated) (Fernebro *et al.*, 2004) were also cultured on chocolated horse blood agar (Oxoid). All three bacteria were grown at 37°C, in an atmosphere of air plus 5% CO_2.

Cell association assay and cell invasion (Gentamicin protection) assay

To quantify cell association and cell invasion of HBMECs with *N. meningitidis* HBMECs were seeded and grown overnight or for 48 h after siRNA transfection until 100% confluent in 24-well plates. Cells were infected with 1×10^7 CFU bacteria for 4 h in ECM-b media without any supplements. Cell association and invasion were then determined as described previously (Oldfield *et al.*, 2007).

Confocal Immunofluorescent Microscopy

HBMECs were seeded onto fibronectin-coated coverslips ($1\text{-}10 \times 10^5$ cells) and grown overnight to reach a confluency of 70-80%. Cells were infected for 2-4 h (MOI 200-300). Coverslips were washed with PBS and fixed with 4% paraformaldehyde (w/v) in PBS for 5 min. Coverslips were then washed with PBS and blocked in 4% (w/v) BSA/PBS at 4°C overnight. For intracellular staining, cells were permeabilised by treatment with 0.1% Saponin, 20 mM glycine in 4% BSA/TBS at 4°C. Subsequent staining procedures were carried out in r 4% (w/v)BSA/TBS. Briefly, coverslips incubated with primary antibody for 1 h were washed with PBS followed by one wash with dH_2O. Coverslips were then incubated

with secondary antibody for 1 h in the dark followed by washes with PBS-Tween

(0.05% v/v; PBS-T), PBS and then dH$_2$O. Coverslips were then mounted on glass

slides with ProLong® Gold and SlowFade® Gold Antifade Reagents with DAPI

(Invitrogen). Coverslips were analysed using a Zeiss LSM-700 confocal

microscope. Images were processed with ImageJ, Adobe Photoshop and LSM

Image Browser software.

Antibodies and reagents

Antibodies detecting FGFR1 (Flg S-16 and Flg C-15), phosphorylated FGFR1

(p-Y766) were purchased from Santa Cruz Biotechnology. Secondary antibodies

conjugated to various fluorochromes, and Phalloidin conjugated to fluorochrome

488 were obtained from Life Technologies-Invitrogen.

Antibody detecting 37LRP (A-7) was purchased from Santa Cruz Biotechnology

and antibody against 67LR (Mluc-5) was purchased from Thermo Scientific.

FGFR1-specific inhibitor SU5402 (Mohammadi *et al.*, 1997) was purchased from

Calbiochem.

Fc-tagged FGFR1 IIIc (*ca.* 80 kDa), Fc-tagged FGFR2 IIIa TM (*ca.* 61.9 kDa) and

Fc-tag (*ca.* 29.26 kDa) were expressed and purified using a protein A column (S1).

FGFR1 siRNA transfection in HBMECs

Human FGFR1 siRNA (siGENOME SMART pool) and control scrambled siRNA were

obtained from Dharmachon/Thermo Scientific and reconstituted following the

manufacturer guidance. FGFR1 siRNA was resuspended in 1 ml of 1 × siRNA buffer

to a final concentration of 5 µM (stock). HBMECs were seeded into 24-well plates

pre-coated with fibronectin, as previously described, and grown overnight to reach

a confluency of 70-80%. Transfection media was prepared by mixing serum- and

antibiotic-free media with siRNA from a 50µM stock to a final concentration of

5µM; in a separate tube Transfection reagent number 1 (Thermo Scientific-

Dharmacon) was added to serum and antibiotic-free media. Both tubes were

incubated for 5 min at room temperature and then mixed together by pipetting

and incubated at room temperature for 20-30 min. Cells were washed with serum

and antibiotic-free medium and 240 µl of complete media without antibiotics were

added to each well and then the transfection mixture was added drop-wise to each

well to a final concentration of 50 nM siRNA/ well. Cells were then incubated for 6

h and then the media was replaced with complete media (Endothelial cell medium

(ECM-b) (ScienCell) supplemented with ECGS (containing EGF, VEGF) (ScienCell)

(1% v/v) and FBS (5% v/v) and penicillin/streptomycin (ScienCell; 1% v/v). The

level of FGFR1 expression was examined at RNA and protein levels at 24, 48 and

72 h post transfection.

FGFR1 inhibition in HBMECs

HBMECs were serum-starved and treated with SU5402 (0.5 µM) 1 h prior to

infection. Approximately 10×10^{6} / well (MOI: 10) of bacteria were added to each

well and infected cells were incubated for 4 h at 37°C/5% CO_2 in medium

containing 0.5 µM SU5402. Cells were then washed twice with PBS and lysed in

1% saponin/PBS. Cell lysates were homogenised and appropriate dilutions plated

out to calculate the levels of association. For invasion assays, cells were treated

with gentamicin for 1 h to kill non-internalised bacteria.

ELISA

96-well plates (NUNC Immobilizer Amino) were coated with 100 µl of protein A

(Pierce; 1 µg ml^{-1}) in PBS for 1 h, washed once with PBS-T and then 86.5 $\times 10^{-15}$

M of Fc-tagged recombinant proteins added to each well in carbonate buffer (pH

9.6). Plates were incubated for 1 h and then washed three times with PBS-T.

Plates were blocked with 1% BSA/PBS (w/v) for 1 h, then washed once with PBS-

T. Bacterial cells harvested from overnight plates and resuspended in PBS-T,

washed with the same buffer three times and finally resuspended in sodium

carbonate buffer (44 mM NaHCO$_3$, 6.0 mM Na$_2$CO$_3$; pH: 9.6). The OD$_{600}$ was

measured and 20 ng (2 µl of 10 ng µl^{-1}) of digoxigenin (DIG; Roche) was added

to 1 ml of bacterial suspension with OD$_{600}$:1. The bacterial suspensions were

incubated for 2 h in the dark at room temperature on the shaker. Bacteria then

were washed three times with PBS-T by centrifugation (13000 × g for 1 minute)

and resuspended in 1% BSA/PBS (w/v). OD$_{600}$ in 1% BSA/PBS was adjusted to

0.02 for ELISA. For each experiment fresh labelled bacterial strains were used.

100 µl of DIG-labelled bacteria were added to each well and plates were incubated

at 4°C overnight then washed five times with PBS-T. 100 µl of anti-DIG-alkaline

phosphatase antibody (Roche; 0.0002 v/v) in 1% BSA/PBS was then added to

each well and incubated for 1 h then washed three times with PBS-T. 200 µl of

alkaline phosphatase substrate (SIGMA) was added and plates were incubated for

1 h. The OD$_{405}$ was measured for each sample and values obtained subtracted

from the binding of the same DIG-labelled strain to 1% BSA/PBS.

Acknowledgements

333 We thank Dr S. Morroll for constructing the plasmid encoding Fc-Stop-LRP.

Funding Statement

335 This work was funded by the Medical Research Council, UK (www.mrc.ac.uk);
336 award number G0801173. The funders had no role in study design, data
337 collection and analysis, decision to publish, or preparation of the manuscript.

References

Alqahtani, F., Mahdavi, J., Wheldon, L.M., Vassey, M., Pirinccioglu, N., Royer, P.J.*, et al.* (2014). Deciphering the complex three-way interaction between the non-integrin laminin receptor, galectin-3 and *Neisseria meningitidis*. *Open biology* **4**.

Cavallaro, U. and Christofori, G. (2004). Cell adhesion and signalling by cadherins and Ig-CAMs in cancer. *Nat Rev Cancer* **4,** 118-132.

Coureuil, M., Lecuyer, H., Scott, M.G., Boularan, C., Enslen, H., Soyer, M.*, et al.* (2010). Meningococcus Hijacks a beta2-adrenoceptor/beta-Arrestin pathway to cross brain microvasculature endothelium. *Cell* **143,** 1149-1160.

Elfenbein, A., Lanahan, A., Zhou, T.X., Yamasaki, A., Tkachenko, E., Matsuda, M. and Simons, M. (2012). Syndecan 4 regulates FGFR1 signaling in endothelial cells by directing macropinocytosis. *Sci Signal* **5,** ra36.

Estes, N.R., 2nd, Thottassery, J.V. and Kern, F.G. (2006). siRNA mediated knockdown of fibroblast growth factor receptors 1 or 3 inhibits FGF-induced anchorage-independent clonogenicity but does not affect MAPK activation. *Oncology reports* **15,** 1407-1416.

Eswarakumar, V.P., Lax, I. and Schlessinger, J. (2005). Cellular signaling by fibroblast growth factor receptors. *Cytokine Growth Factor Rev* **16,** 139-149.

Eugene, E., Hoffmann, I., Pujol, C., Couraud, P.O., Bourdoulous, S. and Nassif, X. (2002). Microvilli-like structures are associated with the internalization of virulent capsulated *Neisseria meningitidis* into vascular endothelial cells. *J Cell Sci* **115,** 1231-1241.

Fernebro, J., Andersson, I., Sublett, J., Morfeldt, E., Novak, R., Tuomanen, E.*, et al.* (2004). Capsular expression in *Streptococcus pneumoniae* negatively affects spontaneous and antibiotic-induced lysis and contributes to antibiotic tolerance. *The Journal of infectious diseases* **189,** 328-338.

Fleischmann, R.D., Adams, M.D., White, O., Clayton, R.A., Kirkness, E.F., Kerlavage, A.R.*, et al.* (1995). Whole-genome random sequencing and assembly of *Haemophilus influenzae* Rd. *Science* **269,** 496-512.

Francavilla, C., Cattaneo, P., Berezin, V., Bock, E., Ami, D., de Marco, A.*, et al.* (2009). The binding of NCAM to FGFR1 induces a specific cellular response mediated by receptor trafficking. *The Journal of cell biology* **187,** 1101-1116.

Gerwins, P., Skoldenberg, E. and Claesson-Welsh, L. (2000). Function of fibroblast growth factors and vascular endothelial growth factors and their receptors in angiogenesis. *Crit Rev Oncol Hematol* **34,** 185-194.

Groth, C. and Lardelli, M. (2002). The structure and function of vertebrate fibroblast growth factor receptor 1. *Int J Dev Biol* **46,** 393-400.

Guillemot, F. and Zimmer, C. (2011). From cradle to grave: the multiple roles of fibroblast growth factors in neural development. *Neuron* **71,** 574-588.

Hadi, H.A., Wooldridge, K.G., Robinson, K. and Ala'Aldeen, D.A. (2001). Identification and characterization of App: an immunogenic autotransporter protein of *Neisseria meningitidis*. *Molecular microbiology* **41,** 611-623.

Hill, D.J., Griffiths, N.J., Borodina, E. and Virji, M. (2010). Cellular and molecular biology of *Neisseria meningitidis* colonization and invasive disease. *Clin Sci (Lond)* **118,** 547-564.

Hoffmann, I., Eugene, E., Nassif, X., Couraud, P.O. and Bourdoulous, S. (2001). Activation of ErbB2 receptor tyrosine kinase supports invasion of endothelial cells by *Neisseria meningitidis*. *The Journal of cell biology* **155,** 133-143.

Kanda, S., Landgren, E., Ljungstrom, M. and Claesson-Welsh, L. (1996). Fibroblast growth factor receptor 1-induced differentiation of endothelial cell line established from tsA58 large T transgenic mice. *Cell growth & differentiation : the molecular biology journal of the American Association for Cancer Research* **7,** 383-395.

Khairalla, A.S., Omer, S.A., Mahdavi, J., Aslam, A., Dufailu, O.A., Self, T*., et al.* (2015). Nuclear trafficking, histone cleavage and induction of apoptosis by the meningococcal App and MspA autotransporters. *Cellular microbiology* **17,** 1008-1020.

Kim, J.H., Jiang, S., Elwell, C.A. and Engel, J.N. (2011). Chlamydia trachomatis co-opts the FGF2 signaling pathway to enhance infection. *PLoS Pathog* **7,** e1002285.

Landgren, E., Blume-Jensen, P., Courtneidge, S.A. and Claesson-Welsh, L. (1995). Fibroblast growth factor receptor-1 regulation of Src family kinases. *Oncogene* **10,** 2027-2035.

Lin, L., Wang, Q., Qian, K., Cao, Z., Xiao, J., Wang, X*., et al.* (2017). bFGF Protects Against Oxygen Glucose Deprivation/Reoxygenation-Induced Endothelial Monolayer Permeability via S1PR1-Dependent Mechanisms. *Mol Neurobiol*.

Liu, J., Huang, C. and Zhan, X. (1999). Src is required for cell migration and shape changes induced by fibroblast growth factor 1. *Oncogene* **18,** 6700-6706.

Lundin, L., Ronnstrand, L., Cross, M., Hellberg, C., Lindahl, U. and Claesson-Welsh, L. (2003). Differential tyrosine phosphorylation of fibroblast growth factor (FGF) receptor-1 and receptor proximal signal transduction in response to FGF-2 and heparin. *Exp Cell Res* **287,** 190-198.

Merz, A.J., Enns, C.A. and So, M. (1999). Type IV pili of pathogenic *Neisseriae* elicit cortical plaque formation in epithelial cells. *Mol Microbiol* **32,** 1316-1332.

Merz, A.J. and So, M. (2000). Interactions of pathogenic *neisseriae* with epithelial cell membranes. *Annual review of cell and developmental biology* **16,** 423-457.

Miki, T., Bottaro, D.P., Fleming, T.P., Smith, C.L., Burgess, W.H., Chan, A.M. and Aaronson, S.A. (1992). Determination of ligand-binding specificity by alternative splicing: two distinct growth factor receptors encoded by a single gene. *Proceedings of the National Academy of Sciences of the United States of America* **89,** 246-250.

Miller, F., Lecuyer, H., Join-Lambert, O., Bourdoulous, S., Marullo, S., Nassif, X. and Coureuil, M. (2012). *Neisseria meningitidis* colonization of the brain endothelium and cerebrospinal fluid invasion. *Cell Microbiol*.

Mohammadi, M., Dikic, I., Sorokin, A., Burgess, W.H., Jaye, M. and Schlessinger, J. (1996). Identification of six novel autophosphorylation sites on fibroblast growth factor receptor 1 and elucidation of their importance in receptor activation and signal transduction. *Molecular and cellular biology* **16,** 977-989.

Mohammadi, M., Dionne, C.A., Li, W., Li, N., Spivak, T., Honegger, A.M.*, et al.* (1992). Point mutation in FGF receptor eliminates phosphatidylinositol hydrolysis without affecting mitogenesis. *Nature* **358,** 681-684.

Mohammadi, M., McMahon, G., Sun, L., Tang, C., Hirth, P., Yeh, B.K.*, et al.* (1997). Structures of the tyrosine kinase domain of fibroblast growth factor receptor in complex with inhibitors. *Science* **276,** 955-960.

Morand, P.C., Drab, M., Rajalingam, K., Nassif, X. and Meyer, T.F. (2009). *Neisseria meningitidis* differentially controls host cell motility through PilC1 and PilC2 components of type IV Pili. *PloS one* **4,** e6834.

Murakami, M., Nguyen, L.T., Zhuang, Z.W., Moodie, K.L., Carmeliet, P., Stan, R.V. and Simons, M. (2008). The FGF system has a key role in regulating vascular integrity. *J Clin Invest* **118,** 3355-3366.

Nassif, X. (1999). Interaction mechanisms of encapsulated meningococci with eucaryotic cells: what does this tell us about the crossing of the blood-brain barrier by *Neisseria meningitidis*? *Current opinion in microbiology* **2,** 71-77.

Oldfield, N.J., Bland, S.J., Taraktsoglou, M., Dos Ramos, F.J., Robinson, K., Wooldridge, K.G. and Ala'Aldeen, D.A. (2007). T-cell stimulating protein A (TspA) of *Neisseria meningitidis* is required for optimal adhesion to human cells. *Cell Microbiol* **9,** 463-478.

Orihuela, C.J., Mahdavi, J., Thornton, J., Mann, B., Wooldridge, K.G., Abouseada, N.*, et al.* (2009). Laminin receptor initiates bacterial contact with the blood brain barrier in experimental meningitis models. *J Clin Invest* **119,** 1638-1646.

Ornitz, D.M. and Itoh, N. (2001). Fibroblast growth factors. *Genome Biol* **2,** REVIEWS3005.

Ornitz, D.M., Yayon, A., Flanagan, J.G., Svahn, C.M., Levi, E. and Leder, P. (1992). Heparin is required for cell-free binding of basic fibroblast growth factor to a soluble receptor and for mitogenesis in whole cells. *Molecular and cellular biology* **12,** 240-247.

Ortega, S., Ittmann, M., Tsang, S.H., Ehrlich, M. and Basilico, C. (1998). Neuronal defects and delayed wound healing in mice lacking fibroblast growth factor 2. *Proceedings of the National Academy of Sciences of the United States of America* **95,** 5672-5677.

Presta, M., Dell'Era, P., Mitola, S., Moroni, E., Ronca, R. and Rusnati, M. (2005). Fibroblast growth factor/fibroblast growth factor receptor system in angiogenesis. *Cytokine Growth Factor Rev* **16,** 159-178.

Quattroni, P., Li, Y., Lucchesi, D., Lucas, S., Hood, D.W., Herrmann, M*., et al.* (2012). Galectin-3 binds *Neisseria meningitidis* and increases interaction with phagocytic cells. *Cellular microbiology* **14,** 1657-1675.

Reiland, J. and Rapraeger, A.C. (1993). Heparan sulfate proteoglycan and FGF receptor target basic FGF to different intracellular destinations. *J Cell Sci* **105 (Pt 4),** 1085-1093.

Sahni, A., Patel, J., Narra, H.P., Schroeder, C.L.C., Walker, D.H. and Sahni, S.K. (2017). Fibroblast growth factor receptor-1 mediates internalization of pathogenic spotted fever *rickettsiae* into host endothelium. *PloS one* **12,** e0183181.

Slanina, H., Hebling, S., Hauck, C.R. and Schubert-Unkmeir, A. (2012). Cell invasion by Neisseria meningitidis requires a functional interplay between the focal adhesion kinase, Src and cortactin. *PloS one* **7,** e39613.

Slanina, H., Mundlein, S., Hebling, S. and Schubert-Unkmeir, A. (2014). Role of epidermal growth factor receptor signaling in the interaction of *Neisseria meningitidis* with endothelial cells. *Infection and immunity* **82,** 1243-1255.

Sokolova, O., Heppel, N., Jagerhuber, R., Kim, K.S., Frosch, M., Eigenthaler, M. and Schubert-Unkmeir, A. (2004). Interaction of *Neisseria meningitidis* with human brain microvascular endothelial cells: role of MAP- and tyrosine kinases in invasion and inflammatory cytokine release. *Cell Microbiol* **6,** 1153-1166.

Takada, S., Fujiwara, S., Inoue, T., Kataoka, Y., Hadano, Y., Matsumoto, K*., et al.* (2016). Meningococcemia in Adults: A Review of the Literature. *Intern Med* **55,** 567-572.

Tettelin, H., Saunders, N.J., Heidelberg, J., Jeffries, A.C., Nelson, K.E., Eisen, J.A*., et al.* (2000). Complete genome sequence of *Neisseria meningitidis* serogroup B strain MC58. *Science* **287,** 1809-1815.

Turner, D.P., Marietou, A.G., Johnston, L., Ho, K.K., Rogers, A.J., Wooldridge, K.G. and Ala'Aldeen, D.A. (2006). Characterization of MspA, an immunogenic autotransporter protein that mediates adhesion to epithelial and endothelial cells in *Neisseria meningitidis*. *Infection and immunity* **74,** 2957-2964.

Turner, N. and Grose, R. (2010). Fibroblast growth factor signalling: from development to cancer. *Nat Rev Cancer* **10,** 116-129.

van Hinsbergh, V.W. and Rabelink, T.J. (2005). FGFR1 and the bloodline of the vasculature. *Arteriosclerosis, thrombosis, and vascular biology* **25,** 883-886.

Virji, M. (2009). Pathogenic *neisseriae*: surface modulation, pathogenesis
and infection control. *Nature reviews. Microbiology* **7,** 274-286.
Yazdankhah, S.P. and Caugant, D.A. (2004). Neisseria meningitidis: an
overview of the carriage state. *J Med Microbiol* **53,** 821-832.
Zhan, X., Plourde, C., Hu, X., Friesel, R. and Maciag, T. (1994).
Association of fibroblast growth factor receptor-1 with c-Src
correlates with association between c-Src and cortactin. *J Biol Chem*
269, 20221-20224.
Zhang, X., Ibrahimi, O.A., Olsen, S.K., Umemori, H., Mohammadi, M. and
Ornitz, D.M. (2006). Receptor specificity of the fibroblast growth
factor family. The complete mammalian FGF family. *J Biol Chem*
281, 15694-15700.
536

Figure Legends

Figure 1. Activated FGFR1 is recruited by _N. meningitidis_ colonies. (A) HBMECs were infected with meningococcal cells (MOI: 200) for 2-4 h. _N. meningitidis_ colonies were visualized with DAPI (blue), FGFR1 was probed with anti-FGFR1 primary antibody and detected with anti-goat Alexa Fluor 680 antibody (red). 37LRP and 67LR were probed with primary antibodies and detected with anti-mouse Alexa Fluor 488 antibodies (green). FGFR1 was recruited by meningococcal colonies, which coincides with recruitment of 37LRP and, to a less extent, 67LR. Co-localisation area is shown by arrows (images are representative of 10 infected cells). (B) FGFR1 phosphorylated at Tyrosine 766 (p-Y766) was labelled with Alexa Fluor 680 (red) and both isoforms of Laminin receptor (67LR and 37LRP) with Alexa Fluor 488 (green). Recruitment of activated FGFR1 (p-Y766) coincided with recruitment of 37LRP and, to a less extent, 67LR. Levels of co-localization of MC58 with 37LRP, 67LR and p-Y766 (activated FGFR1) were quantified by measuring the percentage of co-localisation of each receptor with MC58 in 30 fields. There was a significant difference between recruitment of activated FGFR1 and 37LRP with recruitment of 67LR ($p= 0.0009$ and $p= 0.0028$ respectively; two tailed unpaired t-test).

Figure 2. Activated FGFR1 is recruited by internalised meningococci

within HBMECs. (A) In infected HBMECs ɑ-actinin and actin were labelled with

Alexa Fluor 680 (Red) and the activated form of FGFR1 (p-Y766) labelled with

Alexa Fluor 488 (Green). MC58 was labelled with DAPI (Blue). Internalised

bacteria co-localised with both ɑ-actinin and activated FGFR1 (p-Y766) (arrow

heads). (B and C) Z-stack image of meningococcal colonies showes that

internalised bacteria (co-localising with ɑ-actinin) recruit activated FGFR1 (p-

Y766) inside the cells.

Figure 3. Expression and activation of FGFR1 plays an important role in

the invasion of meningococci into HBMECs. (A) HBMECs were infected with

N. meningitidis MC58 for 4 h (MOI: 10). Cells were washed and lysed in 500 µl of

1% saponin in PBS and 100 µl of homogenized lysates used for serial dilution

preparation (up to 10 fold). 10 µl of each dilution was plated onto chocolate agar

and CFUs were calculated for each sample. There was a significant reduction in

the number of meningococci associated with HMBECs after FGFR1 knockdown

(FGFR1 siRNA; *p*=0.0031, two tailed unpaired t-test, n=8) or in SU5402-treated

cells in which activation of FGFR1 is chemically inhibited (*p*=0.0054, two tailed

unpaired t-test, n=8; experiments were performed in triplicate wells and means

shown represent 8 independent experiments). (B) For invasion assays, gentamicin

was added after 4 h of infection and plates were incubated for a further 1 h. Cells

were then washed, lysed, homogenised and dilutions plated onto chocolate blood

agar plates. There was a significant difference between the number of internalised

meningococci in FGFR1 siRNA-transfected cells compared to untreated cells, or

cells treated with scrambled siRNA (*p*=0.0003 two tailed unpaired t-test, n=7).

Chemical inhibition of FGFR1 activation also inhibited internalization of

meningococcal cells into HBMECs (*p*=0.0005 two-tailed unpaired t-test, n=7, the

error bars represent standard deviation of mean).

Figure 4. *N. meningitides* and *N. gonorrhoeae* interact directly with the extracellular domain of FGFR1. Fc-tagged purified proteins were used as the immobilised ligand in ELISA experiments. Levels of interaction with DIG-labelled MC58 were measured; the values shown are those following subtraction of binding to 1% BSA/PBS. (A) *N. meningitidis* MC58 interacts directly with the extracellular domain of Fc-FGFR1 (two tailed t-test; each experiment was performed in 6 technical replicates and the data shown is derived from 6 independent experiments). (B) Binding of commensal *Neisseria,* but not *N. gonorrhoeae,* to FGFR1 IIIc was significantly lower than that shown by *N. meningitidis* MC58. (C) The meningeal pathogens *H. influenzae* and *S. pneumoniae* bound FGFR1 IIIc to a negligible degree that was significantly lower than cells of *N. meningitidis* MC58 ($p < 0.002$).

613 **Figures**

615 Figure 1.

617   Figure 2.

A

B

619   Figure 3.

A

n=6   *p*=0.0002
            p=0.0010

B

n=3
p=0.0236
p=0.0198

C

n=4
p=0.0015
p=0.0020

621   Figure 4.

Supporting material

A role for Fibroblast Growth Factor Receptor 1 in the pathogenesis of *Neisseria meningitidis*

Sheyda Azimi[a], Lee M. Wheldon, Neil J. Oldfield, Dlawer A. A. Ala'Aldeen[b], and Karl G. Wooldridge*

Molecular Bacteriology and Immunology Group, School of Life Sciences, Centre for Biomolecular Science, University of Nottingham.

[a]Present affiliation: Georgia Institute of Technology, Atlanta, Georgia, USA

[b]Present affiliation:
Middle East Research Institute, Dream City, Erbil, Kurdistan Region of Iraq

*corresponding author

Mailing address:
Molecular Bacteriology and Immunology Group, Centre for Biomolecular Science, University of Nottingham, University Park, Nottingham, NG7 2RD, UK.

Email: karl.wooldridge@nottingham.ac.uk

Running title: FGFR1 and meningococcal pathogenesis

Keywords: Meningococci, Neisseria, meningitidis, FGFR1, epithelial, endothelial, host-pathogen

HBMECs express FGFR1 IIIc and FGFR3 IIIb isoforms

HBMECs were grown overnight, RNA extracted and cDNA prepared. This was then

used as template to amplify the third IgG-like domain of FGFRs (exon 7, 8 IIIb)

and (exon 7, 9 IIIc) isoforms (Hajihosseini *et al.*, 1999). RT-PCR showed that

HBMECs express FGFR1 IIIc and FGFR3 IIIb isoforms.

S1. HBMECs express FGFR1 IIIc and FGFR3 IIIb isoforms. RT-PCR
performed using cDNA generated from total RNA extracted from HBMECs. 100ng
of cDNA was used in as template in each PCR reaction. Various combinations of
primers specific for exon 7, 8 and 9 were used to determine the type of FGFR
expressed by HBMECs.

Construction of FGFR1 IIIc into pEF-Bos-ss-Fc-ires-TPZ mammalian vector

HBMECs were routinely grown in fibronectin-coated T75 flasks (BD Bioscience).

For RNA extraction, cells were harvested by trypsin treatment. Cell suspensions

were then centrifuged for 5 min at $300 \times g$, the supernatant was discarded and

cells were lysed in lysis buffer (SIGMA GenElute™ Mammalian Total RNA Miniprep

Kits) supplemented with 1% (v/v) 2-β-Mercaptoethanol and RNA extracted

according to the manufacturer's protocol (Sigma GenElute™ Mammalian Total RNA

Miniprep Kit). The concentration of extracted RNA was measured using a Nanodrop

spectrophotometer and adjusted to 200 ng µl^{-1}. To remove traces of genomic DNA

from RNA samples, DNAse treatment was performed following the manufacturers

protocol (Turbo DNase, Life Technologies). 10 µl of RNA was then used for cDNA

preparation using the High Capacity cDNA Reverse Transcription kit (Applied

Biosystem). HBMEC cDNA was then used as template to amplify the extracellular

domain of FGFR1 IIIc isoform. Primers were designed to amplify the extracellular

domain of FGFR1 containing restriction sites for NdeI and NotI enzymes. The

amplified PCR product was gel purified, digested and then ligated into NotI and

NdeI-digested pEF-Bos-ss-Fc-FGFR2IIIaTM-ires-TPZ (Mizushima et al., 1990,

Burgar et al., 2002, Wheldon et al., 2011) using the LigaFast TMRapid DNA

Ligation System (Promega). The ligated plasmid was used for transformation of

competent *E. coli* JM109 cells (Promega). Plasmids extracted from ampicillin-

resistant transformants were screened by restriction digestion and DNA

sequencing. The plasmid from one correct clone was named pEF-Bos-ss-Fc-

extFGFR1IIIc-ires-TPZ.

Forward	gcgGCTTAAT**CATATG**caggacccggatccATGTGGAGCTGGAAGTGCC
Reverse (extracellular domain)	gcgcgATTAA**GCGGCCGC**ttaCAGGGGCGAGGTCA

704   A

     B   C

S2. Schematic view of the plasmid pEF-Bos-ss-Fc-extFGFR1IIIc-ires-TPZ. The

extracellular domain of FGFR1 IIIc (A) and LRP were replaced with FGFR2 IIIaTM

insert of the plasmid pEF-Bos-ss-Fc-FGFR2 IIIa TM-ires-TPZ (C) (Wheldon *et al.*,

2011). Stop codon (TAA in Red-B) was introduced in start of the LRP coding gene

to be able express the Fc-tag and not the LRP protein (B). The plasmid encoding Fc-

Stop-LRP was constructed in house by Dr. S. Morroll.

Purification of Fc-tagged recombinant proteins

Media was collected 72 h post-transfection of 293T cells and Fc-tagged

recombinant proteins purified on a Protein AIG-Sepharose (Source BioScience

LifeSciences) column. Briefly, the media was diluted 1:1 (v/v) with binding buffer

(0.05 M sodium borate, 0.15 M sodium chloride; pH: 8). 100 μl of beads were

added to 30ml of diluted media and incubated with shaking at 4°C overnight. The

column was prepared and washed 4-5 × with binding buffer. The column was then

washed with binding buffer containing 0.5 M sodium chloride. Proteins were eluted

in 1 ml of 0.1 M glycine (pH: 2.5) and neutralised with 100 μl of 1 M Tris-HCl (pH:

9) per 1 ml of eluted samples. A total number of 9-10 protein fractions were eluted

and stored at -80°C. Protein concentration in each fraction was quantified using

the BCA kit following manufacturer's protocol (Thermo Scientific).

S 3. Chemical inhibition of FGFR1 does not affect the number of _S._
pneumoniae associated with HBMECs but reduced the number of invaded
bacteria into HBMECs. HBMECs were infected with _S. pneumonia_ at MOI: 10.
Cell association and invasion assays were performed and the CFUs were
calculated.

References

Burgar, H.R., Burns, H.D., Elsden, J.L., Lalioti, M.D. and Heath, J.K. (2002). Association of the signaling adaptor FRS2 with fibroblast growth factor receptor 1 (Fgfr1) is mediated by alternative splicing of the juxtamembrane domain. *J Biol Chem* **277,** 4018-4023.

Hajihosseini, M.K. and Dickson, C. (1999). A subset of fibroblast growth factors (Fgfs) promote survival, but Fgf-8b specifically promotes astroglial differentiation of rat cortical precursor cells. *Mol Cell Neurosci* **14,** 468-485.

Mizushima, S. and Nagata, S. (1990). pEF-BOS, a powerful mammalian expression vector. *Nucleic Acids Res* **18,** 5322.

Wheldon, L.M., Khodabukus, N., Patey, S.J., Smith, T.G., Heath, J.K. and Hajihosseini, M.K. (2011). Identification and characterization of an inhibitory fibroblast growth factor receptor 2 (FGFR2) molecule, up-regulated in an Apert Syndrome mouse model. *Biochem J* **436,** 71-81.

753