

1 **Quantitative proteomics of the 2016 WHO *Neisseria gonorrhoeae* reference strains**
2 **surveys vaccine candidates and antimicrobial resistance determinants**

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28 proteomics, TMT, vaccine, antimicrobial resistance.

29

30 **Abstract**

31 The sexually transmitted disease gonorrhea (causative agent: *Neisseria gonorrhoeae*)
32 remains an urgent public health threat globally due to the repercussions on reproductive
33 health, high incidence, widespread antimicrobial resistance (AMR), and absence of a
34 vaccine. To mine gonorrhea antigens and enhance our understanding of gonococcal AMR
35 at the proteome level, we performed the first large-scale proteomic profiling of a diverse
36 panel ($n=15$) of gonococcal strains, including the 2016 World Health Organization (WHO)
37 reference strains. These strains show all existing AMR profiles, previously described in
38 regard to phenotypic and reference genome characteristics, and are intended for quality
39 assurance in laboratory investigations. Herein, these isolates were subjected to subcellular
40 fractionation and labeling with tandem mass tags coupled to mass spectrometry and multi-
41 combinatorial bioinformatics. Our analyses detected 901 and 723 common proteins in cell
42 envelope and cytoplasmic subproteomes, respectively. We identified nine novel gonorrhea
43 vaccine candidates. Expression and conservation of new and previously selected antigens
44 were investigated. In addition, established gonococcal AMR determinants were evaluated
45 for the first time using quantitative proteomics. Six new proteins, WHO_F_00238,
46 WHO_F_00635, WHO_F_00745, WHO_F_01139, WHO_F_01144, and WHO_F_01226,
47 were differentially expressed in all strains, suggesting that they represent global proteomic
48 AMR markers, indicate a predisposition toward developing or compensating gonococcal
49 AMR, and/or act as new antimicrobial targets. Finally, phenotypic clustering based on the
50 isolates' defined antibiograms and common differentially expressed proteins yielded seven
51 matching clusters between established and proteome-derived AMR signatures. Together,
52 our investigations provide a reference proteomics databank for gonococcal vaccine and

- 53 AMR research endeavors, which enables microbiological, clinical, or epidemiological
54 projects and enhances the utility of the WHO reference strains.

55 **The abbreviations used are:**

56	ACN	Acetonitrile
57	AGC	Automatic gain control
58	AMR	Antimicrobial resistance
59	C	Cytoplasmic
60	CDC	Centers for Disease Control and Prevention
61	CE	Cell envelope
62	COG	Cluster of orthologous genes
63	cRAP	Common repository of adventitious proteins
64	FDR	False discovery rate
65	GCB	Gonococcal base agar
66	GCBL	Gonococcal base liquid medium
67	KEGG	Kyoto encyclopedia of genes and genomes
68	LPS	Lipopolysaccharide
69	OMV	Outer membrane vesicle
70	ORF	Open reading frame
71	WHO	World Health Organization

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74 INTRODUCTION

75 *Neisseria gonorrhoeae* is an obligate human pathogen and the causative agent of
76 the sexually transmitted disease gonorrhea. Gonorrhea is a global public health concern. In
77 2012 the World Health Organization (WHO) estimated over 78 million new urogenital cases
78 per year in adults (15–49 years of age) worldwide (1, 2). The spread of gonorrhea is
79 facilitated by the high prevalence of asymptomatic infections. Urogenital gonorrhea is
80 asymptomatic in up to 10-15% of infected men and up to 50% of infected women.
81 Pharyngeal and rectal infections, which have increased in prevalence in both sexes and are
82 predominant among men who have sex with men, are primarily asymptomatic (3, 4).
83 Untreated or inappropriately treated gonorrhea can result in serious consequences on
84 reproductive and neonatal health. Women, in particular, are disproportionately affected, as
85 gonococcal infection can ascend from the cervix to the uterus, Fallopian tubes, ovaries, and
86 surrounding tissue, causing pelvic inflammatory disease. Long-term sequelae include
87 ectopic pregnancy, chronic pelvic pain, and infertility. Furthermore, gonorrhea is strongly
88 associated with an increased risk of both the acquisition and transmission of HIV (5).

89 Antimicrobial therapy is the only mainstay in the effective management and control
90 of gonorrhea. However, *N. gonorrhoeae* exhibits an extraordinary capacity to develop
91 antimicrobial resistance (AMR) through mutations and acquisition of AMR genes. The
92 evolution of AMR in *N. gonorrhoeae* has overcome every therapeutic option since the
93 “miracle drug” penicillin was introduced for gonorrhea treatment. Currently, a dual
94 antimicrobial therapy (mainly ceftriaxone and azithromycin) is recommended for treatment
95 of uncomplicated infections (6). Of grave concern over the past decade is the proliferation
96 of resistance or decreased susceptibility to ceftriaxone worldwide. Azithromycin resistance
97 has also emerged in most settings (7). The first failure of one of the recommended dual

98 antimicrobial therapies against pharyngeal gonorrhoea was reported in 2016 (8), and the first
99 *N. gonorrhoeae* isolates with resistance to ceftriaxone combined with high-level resistance
100 to azithromycin were identified in the United Kingdom (9, 10) and Australia (11, 12) in early
101 2018. In consideration of dwindling treatment options, scarce therapeutic alternatives,
102 disease prevalence and morbidity, and lack of a vaccine(s), *N. gonorrhoeae* has been
103 categorized by the WHO as a high priority pathogen globally and by the Centers for Disease
104 Control and Prevention (CDC) as an urgent level threat in the USA (13).

105 Developing an effective gonococcal vaccine is essential because this is the only
106 sustainable solution to quell the spread of gonococcal AMR and gonorrhoea in general. The
107 battle against penicillin-nonsusceptible *Streptococcus pneumoniae* exemplifies a successful
108 vaccination strategy. Introduction of a pneumococcal conjugate vaccine in 2010 reduced the
109 number of infections over 45% (14). Unfortunately, despite its public health importance,
110 gonorrhoea vaccine development remains in its infancy. Since 1970, only three small-scale
111 vaccine trials using whole cell (15), pilin (16), and porin proteins (17) have been launched.
112 All were unsuccessful in developing immunity against reinfection with gonorrhoea. However,
113 recent breakthroughs, including the development of small animal models for evaluating
114 gonorrhoea vaccines (18, 19), increased knowledge about *N. gonorrhoeae* immune evasion
115 mechanisms (20-26), and the development of an effective vaccine for the closely related *N.*
116 *meningitidis* serogroup B, which provided a low level of cross-protection against gonococcal
117 infection (27), have reinvigorated the interest in gonococcal vaccine development (28).

118 Proteomic technology offers a powerful toolbox to enable vaccine antigen mining (28-
119 32) and AMR proteome analysis (33-35), and to provide insights into host-pathogen
120 interactions (36-39). Proteomic approaches have an advantage over genomics in drug and
121 vaccine discovery endeavors by delivering information pertaining to protein abundance,

122 post-translational modification(s), structure-function relationships, and protein-protein
123 interactions (40-42). In addition, subcellular fractionation steps preceding proteomic
124 applications reduce sample complexity, increase the likelihood of discovering low-
125 abundance proteins, and aid in defining protein localization, all of which provide further
126 insights into the proteins' functions and interactomes (43, 44). For *N. gonorrhoeae*,
127 proteomic approaches have begun to deliver proteinaceous vaccine candidates (29, 30, 39,
128 45) and to support elucidation of AMR patterns (46, 47). Current off-gel proteomics, such as
129 isobaric tag labeling (isobaric tagging for absolute quantification, iTRAQ; and tandem mass
130 tags, TMT) coupled with high-pressure liquid chromatography and mass spectrometry
131 techniques (LC-MS/MS), demonstrate superb protein separation and identification and
132 enable detection of proteins in the low femtomole to high attomole range with precision and
133 reliability (29, 48, 49).

134 To address the need for discovery of additional gonorrhea vaccine and drug
135 candidates and to enhance our understanding of AMR at the proteome level, herein we
136 examined the 2016 WHO *N. gonorrhoeae* reference strains (50) and the FA6140 strain (51)
137 using a global quantitative proteomic approach. The WHO panel consists of 14 *N.*
138 *gonorrhoeae* reference strains strictly selected and validated internationally to represent the
139 *N. gonorrhoeae* species. All known gonococcal phenotypic and genetic AMR determinants
140 are included for use as quality control strains during phenotypic and genetic laboratory
141 testing. Eight of the strains were initially included in the 2008 WHO reference strains [WHO
142 F, G, K, L, M, N, O, and P; (52)] to which 6 novel strains (U, V, W, X, Y, and Z) were added
143 to constitute the 2016 WHO reference strains (50). All WHO panel strains have been
144 subjected to extensive phenotypic, genomic, and genetic analyses to establish diagnostic
145 markers, molecular epidemiological characteristics, reference genomes, and AMR profiles

146 (phenotypic and genetic) for all antimicrobials currently and previously used for gonorrhea
147 treatment, in addition to novel antimicrobials considered for future interventions. This panel
148 includes WHO X, the first extensively drug-resistant gonococcal strain identified with high-
149 level resistance to ceftriaxone, as well as additional strains with different levels of resistance
150 to ceftriaxone, azithromycin and any additional therapeutic antimicrobials. Complete
151 genomes with detailed annotations are available for all panel strains, providing a
152 fundamental resource for future molecular studies. Accordingly, the well-characterized 2016
153 WHO reference strains (50) are ideally suited to provide detailed descriptions of the global
154 *N. gonorrhoeae* proteome, a greater understanding of gonococcal AMR at the proteome
155 level, and a source for the identification of broadly conserved novel vaccine candidates. In
156 addition to the WHO panel strains, we have included in our investigations *N. gonorrhoeae*
157 FA6140, which is a penicillin-resistant, β -lactamase-negative isolate that was originally
158 described after a local epidemic outbreak of 199 gonococcal cases in Durham, North
159 Carolina, USA in 1983 (51). It serves as a model for gonococcal AMR studies and has
160 facilitated the characterization of mutations in genes encoding the “multiple transferable
161 resistance” repressor MtrR (53), ribosomal protein S10 (54), and penicillin-binding protein 2
162 (55) and their impact on AMR.

163 Our study is the first to investigate the global proteomic profiles of 15 *N. gonorrhoeae*
164 reference strains using subcellular fractionation to separate cytoplasmic (C) and cell
165 envelope (CE) associated proteomes, which were measured with tandem mass tags
166 coupled to liquid chromatography and tandem mass spectrometry [TMT-LC-MS/MS; (56)],
167 a highly reproducible and sensitive technique. These proteomic studies achieved our three
168 major objectives. First, to enhance progress on gonorrhea vaccine development, novel
169 vaccine candidates were identified, and the expression profiles of currently proposed

170 antigens were established in diverse clinical isolates. Second, to broaden our understanding
171 of AMR, proteomic signatures associated with AMR were defined by conducting a pairwise
172 analysis of differentially expressed proteins to compare FA6140 and the 2016 WHO panel
173 to WHO F, which possesses the largest genome and is susceptible to all relevant
174 antimicrobials (50). Third, to facilitate the use of the 2016 WHO panel in various types of
175 basic research and quality assurance, the complete reference proteomes of all tested strains
176 were defined.

177 **EXPERIMENTAL PROCEDURES**

178 ***Bacterial strains and growth conditions.*** The 2016 WHO *N. gonorrhoeae* reference
179 strains [n=14; (50, 52)] and the *N. gonorrhoeae* FA6140 strain (51) were used in this study.
180 The AMR profiles of all isolates were described previously (50). Gonococcal strains were
181 cultured from frozen stocks (−80°C) onto gonococcal base agar (GCB) medium (Difco) with
182 Kellogg's supplements I and II, diluted 1:100 and 1:1,000, respectively (57). After incubation
183 at 37°C in a 5% CO₂–enriched atmosphere for 18-20 h, nonpiliated and transparent colonies
184 were subcultured onto GCB and incubated as described above. To initiate growth in liquid
185 medium, nonpiliated colonies were collected from GCB and suspended to an OD₆₀₀ of 0.1
186 in pre-warmed GCB liquid (GCBL) medium supplemented as described above with the
187 addition of 0.042% sodium bicarbonate. Suspensions were incubated at 37°C with shaking
188 at 220 rpm.

189 ***Subcellular fractionation and TMT labeling.*** All 15 *N. gonorrhoeae* strains were
190 simultaneously cultured in GCBL as described above. Cells were collected by centrifugation
191 (20 min, 6,000 × g) when the Optical Density (OD₆₀₀) of each culture reached 0.6 – 0.8, re-
192 suspended in PBS and lysed by passage through a French Press. The cell debris was
193 removed by centrifugation and the crude CE fraction was separated from the C proteins
194 using a sodium carbonate extraction procedure and subsequent ultracentrifugation steps.
195 The fraction enriched with CE proteins was reconstituted in PBS supplemented with 0.1%
196 SDS (29, 30). Experiments were conducted in two biological replicates. Sample quality and
197 the overall sub-proteome profiles were examined by SDS-PAGE coupled with Colloidal
198 Coomassie staining (58, 59). The total protein amount in each fraction was assessed using
199 a Protein Assay Kit (Bio Rad). Each CE and C fraction containing 100 µg of protein in 25 µL
200 volume of triethylammonium bicarbonate buffer was reduced with tris(2-

201 carboxyethyl)phosphine hydrochloride and the cysteines were alkylated using
202 iodoacetamide. Proteins were digested using trypsin (Promega) at a 1:40 ratio. TMT
203 reagents (ThermoFisher Scientific) were dissolved in acetonitrile (ACN) and used to label
204 proteins in CE and C fractions as follows for the 10-plex experiment (ref 90111, Thermo
205 Fisher Scientific): WHO F strain: TMT¹⁰-126, WHO K strain: TMT¹⁰-127C, WHO G strain:
206 TMT¹⁰-127N, WHO M strain: TMT¹⁰-128C, WHO L strain: TMT¹⁰-128N, WHO O strain:
207 TMT¹⁰-129C, WHO N strain: TMT¹⁰-129N, WHO U strain: TMT¹⁰-130C, WHO P strain:
208 TMT¹⁰-130N, WHO V strain: TMT¹⁰-131; for the 6-plex experiment (ref 90402, Thermo
209 Fisher Scientific): WHO F strain: TMT⁶-126, WHO W strain: TMT⁶-127, WHO X strain:
210 TMT⁶-128, WHO Y strain: TMT⁶-129, WHO Z strain: TMT⁶-130, FA6140 strain: TMT⁶-131.
211 Mixtures were incubated for 1 h at room temperature. The reaction was quenched by
212 addition of 8 μ L of 5% hydroxylamine. Samples were pooled, dried in a vacuum concentrator
213 and stored at -80°C before separation by high pressure liquid chromatography (HPLC) and
214 MS analysis.

215 **Sample fractionation and MS analysis.** Samples were fractionated by strong cation
216 exchange (SCX) with a Paradigm (Michrom Biosciences) HPLC with mobile phases of 5 mM
217 potassium phosphate monobasic in 30% ACN/70% water (v/v) pH 2.7 (buffer A) and 5 mM
218 potassium phosphate monobasic in 30% ACN/70% water (v/v) pH 2.7 with 500 mM
219 potassium chloride (buffer B). The sample was brought up in buffer A (200 μ L). The peptides
220 were separated using a 2.1 mm x 100 mm Polysulfoethyl A column (PolyLC) over 60 min at
221 a flow rate of 200 μ L/min. The separation profile was as follows: hold 2% B for 5 min, 2% to
222 8% B in 0.1 min, 8% to 18% B in 14.9 min, 18% to 34% B in 12 min, 34% to 60% B in 18
223 min, 60% to 98% B in 0.1 min and hold for 10 min. Fractions were collected in 96-well
224 microtiter plates at 1 min/fraction. Sixty fractions were pooled into 12 and dried using a

225 speed vac. The samples were desalted using Oasis HLB 1cc cartridges. The cartridges were
226 washed with 70% ACN/0.1% trifluoroacetic acid (TFA) and equilibrated with 0.1% TFA.
227 Samples were loaded onto the cartridge in 0.1% TFA, washed with 0.1% TFA, and eluted
228 in 1 mL 70% ACN/0.1% TFA. The samples were dried by vacuum centrifugation.

229 Desalted SCX fractions were analyzed by liquid chromatography electrospray
230 ionization mass spectrometry (LC/ESI MS/MS) with a Thermo Scientific Easy-nLC II
231 (Thermo Scientific) nano HPLC system coupled to a hybrid Orbitrap Elite ETD (Thermo
232 Scientific) mass spectrometer. In-line de-salting was accomplished using a reversed-phase
233 trap column (100 μm \times 20 mm) packed with Magic C₁₈AQ (5- μm 200Å resin; Michrom
234 Bioresources) followed by peptide separations on a reversed-phase column (75 μm \times 250
235 mm) packed with Magic C₁₈AQ (5- μm 100Å resin; Michrom Bioresources) directly mounted
236 on the electrospray ion source. A 90-minute gradient from 7% to 35% ACN in 0.1% formic
237 acid at a flow rate of 400 nL/min was used for chromatographic separations. The heated
238 capillary temperature was set to 300°C and a spray voltage of 2750 V was applied to the
239 electrospray tip. The Orbitrap Elite instrument was operated in the data-dependent mode,
240 switching automatically between MS survey scans in the Orbitrap [automatic gain control
241 (AGC) target value 1,000,000; resolution 120,000; and injection time 250 msec] with MS/MS
242 spectra acquisition in the Orbitrap (AGC target value of 50,000; 15,000 resolution; and
243 injection time 250 msec). The 15 most intense ions from the Fourier-transform full scan were
244 selected for fragmentation in the higher-energy C-trap dissociation (HCD) cell by higher-
245 energy collisional dissociation with a normalized collision energy of 40%. Selected ions were
246 dynamically excluded for 30 sec with a list size of 500 and exclusion mass by mass width
247 +/- 10ppm. HPLC and MS/MS analyses were performed in the Proteomic Facility at the Fred
248 Hutchinson Cancer Center, Seattle.

249 **Proteomic data analysis.** Data analysis was performed using Proteome Discoverer 1.4
250 (Thermo Scientific). The data were searched against WHO_F_CDS with the common
251 Repository of Adventitious Proteins (cRAP, <http://www.thegpm.org/crap/>) fasta file. Trypsin
252 was set as the enzyme with maximum missed cleavages set to 2. The precursor ion
253 tolerance was set to 10 ppm and the fragment ion tolerance was set to 0.8 Da. Variable
254 modifications included TMT 6Plex (+229.163 Da) on any N-Terminus, oxidation on
255 methionine (+15.995 Da), carbamidomethyl on cysteine (+57.021 Da), and TMT 6Plex on
256 lysine (+229.163 Da). Data were searched using Sequest HT. All search results were run
257 through Percolator for scoring. Quantification was performed using the canned TMT 6plex
258 or TMT 10plex methods through Proteome Discoverer with stringent criteria for protein
259 identification including 1% False Discovery Rate (FDR), at least one unique peptide per
260 protein, each identified peptide restricted to a single protein, and the score for every detected
261 peptide of ≥ 1 . Differential protein expression between CE and C fractions was determined
262 by comparing the normalized total reporter ion intensities of groups using the WHO F protein
263 expression profile as a reference.

264 **Bioinformatic Analysis.** To detect potential homologous proteins, amino acid sequences
265 of each identified *N. gonorrhoeae* vaccine candidate were downloaded and compared
266 against the GenBank proteome database (<https://www.ncbi.nlm.nih.gov/genbank/>) using
267 our in-house designed program based on the Reciprocal Best Blast Hit approach (60) using
268 BLASTP with the following parameters: percentage identity $\geq 50\%$, and E-value $\leq 1.0 \times 10^{-5}$.

269 Differential protein expression in four proteomics data sets (CE and C fractions in two
270 biological replicates) was designated by fold changes ≥ 1.5 or ≤ 0.667 in reference to strain
271 WHO F. Due to the variable nature of protein expression in *N. gonorrhoeae*, we took a
272 conservative approach to designate protein expression and a protein was categorized as

273 “up-regulated” or “down-regulated” solely when the fold change abundance was higher than
274 1.5 or lower than 0.667, respectively, to that of WHO F consistently in two biological
275 experiments. A protein was designated as “ubiquitous” when its abundance was between
276 0.667-1.5-fold compared to WHO F in both experiments, or “variable” when its protein levels
277 were not consistent between experiments.

278 A comprehensive assessment of predicted subcellular protein localization was
279 accomplished by using the CELLO (61), PsortB 3.0.2 (62), SOSUI-GramN (63), SignalP 4.1
280 (64), LipoP 1.0 (65), and TMHMM 2.0 (<http://www.cbs.dtu.dk/services/TMHMM/>) prediction
281 algorithms and a majority voting strategy. Furthermore, for proteins whose subcellular
282 localization was not predicted using the aforementioned algorithms, we relied on the
283 difference between their unique peptide counts in the CE and C fractions as follows:

$$284 \quad \text{Unique Peptide Count Difference (UPCD)} = \sum_{i=1}^2 x_{CE} - \sum_{i=1}^2 x_C$$

285 where “*i*” is the sequential number assigned for samples and “*x*” is the total number of
286 peptides detected in each fraction. Cytoplasmic proteins had more of their unique peptides
287 detected in the C fraction (UPCD < 0), while membrane proteins had unique peptides
288 enriched in the CE fraction (UPCD > 0). Proteins with UPCD=0 were excluded from analysis
289 using this UPCD formula. Proteins were categorized as follows: outer membrane,
290 periplasmic, inner membrane, C proteins, and proteins with unknown localization.

291 The phenotypic and proteotypic clusters of all strains were constructed using as
292 variables both their AMR (50) and proteomic profiles obtained in this study. These clusters
293 were designed based on the Hamming distance between tested strains, which counts how
294 many elements differ between two vectors, and is equivalent to Manhattan distance on
295 binary data. Average linkage was used to determine distances between clusters.

296 Graphs were generated with GraphPad Prism version 7 for Mac (GraphPad
297 Software). The proteotypes of strains that belong to the same phenotypic cluster were
298 compared, highlighting proteins that are significantly up- or down-regulated with respect to
299 those proteins of WHO F.

300 **Data Availability.** The raw mass spectrometry data have been deposited to the
301 ProteomeXchange Consortium via the PRIDE (66) partner repository with the data set
302 identifier PXD008412.

303

304 **RESULTS and DISCUSSION**

305 **Study rationale.** In our study design (Fig. 1), all 15 strains were cultured concurrently to
306 mid-logarithmic growth, harvested, and subjected to subcellular fractionation to separate CE
307 (outer membrane, periplasmic, inner membrane) and C proteins. We utilized TMT reagent
308 technology for protein identification and quantitation as it provides a highly sensitive method
309 for peptide labeling (56) and allows up to 10 biological samples to be analyzed in a single
310 experiment (67). TMT-labeling, two-dimensional liquid chromatography fractionation, and
311 subsequent MS/MS analyses were conducted on every 6-plex and 10-plex experiment
312 pertaining to the CE and C fractions derived from each strain (Fig. 1). We selected WHO F
313 as the reference strain for protein identification and quantitation because it has the largest
314 genome (2,292,467 bp) and proteome (2,450 ORFs) among the 2016 WHO reference
315 strains (50) and FA6140 (68), and it is susceptible to most antimicrobials currently or
316 historically used for gonorrhea treatment.

317 Sub-cellular fractionation experiments coupled with proteomics repeatedly show
318 cytoplasmic proteins associated with the membranes, which are commonly regarded as
319 “contaminating” or “moonlighting” proteins (29, 30, 69, 70). Therefore, to focus solely on the
320 enriched proteins in individual subproteomes, we first eliminated C and CE proteins that
321 were detected in the CE and C protein fractions, respectively, from further analyses.
322 Complete lists of all identified proteins are in Supplemental Tables S1-S2. Subsequently,
323 we performed two-armed proteomic data analyses: 1) for vaccine antigen mining, we
324 focused on common proteins identified in all strains in the CE fraction with the overarching
325 goal to discover omnipresent *N. gonorrhoeae* proteins; 2) to profile AMR signatures, we
326 performed a pairwise comparison of individual strains to WHO F to enhance the discovery
327 of strain-specific feature(s).

328 **Overview of cell envelope and cytoplasmic proteomes.** The 10-plex biological replicate
329 experiments identified a total of 1150 proteins in the CE fraction of all ten strains, of which
330 1010 were common in both sets (Fig. 2 A). In the two 6-plex experiments, 1194 proteins
331 were identified; 975 were shared in all six isolates (Fig. 2 A). Taken together, the 10-plex
332 and the 6-plex experiments resulted in identification of 1084 proteins in the CE fractions, of
333 which 901 were common among all examined *N. gonorrhoeae* strains (Fig. 2 A). The
334 proteome coverage per strain ranged from 41.22% (981 proteins) for WHO Y to 45.32%
335 (1042 proteins) for WHO G (Supplemental Table S3).

336 Proteomics of the C fraction in the 10-plex set conducted in biological replicates
337 yielded 904 proteins that were shared among all 10 strains, of which 747 were common in
338 both experiments (Fig. 2 B). The two 6-plex experiments identified 1023 shared proteins,
339 with 852 common among the two replicates (Fig. 2 B). Cumulatively, C fraction profiling
340 resulted in identification of 876 proteins with 723 common in all 15 *N. gonorrhoeae* strains
341 (Fig. 2 B). Proteome coverage ranged from 31.37% (746 proteins) in WHO U to 38.43%
342 (852 proteins) in FA6140 (Supplemental Table S3).

343 Subsequently, we allocated common proteins that were identified in all 15 *N.*
344 *gonorrhoeae* strains to outer membrane, inner membrane, periplasm, cytoplasm, or
345 unknown localization categories based on PSORTb 3.0.2 (62), SOSUIGramN (63), and
346 CELLO (61) predictions and the majority-voting strategy. We used these software packages
347 to take advantage of their different algorithms and statistical approaches for the prediction
348 of protein subcellular localization. As expected from our subcellular fractionation approach
349 (49, 69, 71), the CE fraction was enriched in membrane proteins in comparison to the C
350 sample, with outer membrane (26 vs. 8), periplasmic (51 vs. 38), and inner membrane
351 proteins (145 vs. 6) that were also identified with considerably higher peptide counts (Fig. 3

352 A-C, and Supplemental Tables S1-S2, and S4-S5). The C preparations yielded 592
353 cytoplasmic proteins that were identified with greater peptide counts in comparison to the
354 cytoplasmic proteins associated with the CE fraction (Fig. 3 D, Supplemental Tables S5-
355 S6). Furthermore, to increase the discovery of potential vaccine candidates, we searched
356 the 149 proteins of unknown localization identified in the CE fraction (Fig. 3 D) for the
357 presence of signal peptides and transmembrane motifs using SignalP 4.1 (64), LipoP 1.0
358 (65), and TMHMM 2.0 (<http://www.cbs.dtu.dk/services/TMHMM/>). The results of all software
359 programs and the majority votes strategy revealed six additional CE proteins, four of which
360 were found in the majority of examined strains (Supplemental Table S6). In addition,
361 literature searches for experimental evidence of protein surface exposure allowed
362 assignment of BamE [NGO1780; (72)], SliC [NGO1063; (73)], MetQ [NGO2139; (30, 74)],
363 Ng-MIP [NGO1225; (30, 75)], and BamG [NGO1985; (76)] to the cell surface.

364 ***Expression patterns of common identified proteins in comparison to WHO F.*** Proteins
365 were categorized as ubiquitous, up- or down-regulated, or variable based on their
366 abundance in relation to the corresponding protein in WHO F in biological duplicate
367 experiments. We investigated expression patterns of detected proteins in both sub-
368 proteome fractions that were shared among all strains (Figs. 4-5, Supplemental Tables S4-
369 5). Annotated cell envelope proteins were predominantly ubiquitous in the CE fraction. The
370 proportion of ubiquitous CE outer membrane proteins ($n=26$) ranged from 73% ($n=19$ in
371 WHO N) to 46.15% ($n=12$ in WHO L; Fig. 4 A). Ubiquitous periplasmic proteins ranged from
372 76.47% ($n=39$ in WHO N) to 35.2% ($n=18$ in WHO U) of the total number of proteins
373 annotated to localize to the periplasm ($n=51$; Fig. 4 B). Finally, between 83.4% ($n=121$ in
374 WHO M) and 44.1% ($n=64$ in WHO U) of inner membrane proteins ($n=145$) were
375 ubiquitously expressed (Fig. 4 C). Up-regulated outer membrane (0 – 19.23%), periplasmic

376 (0 – 8%) and inner membrane (0 – 4.8%) proteins made up the smallest proportion of
377 proteins in the CE fraction (Supplemental Table S4), whereas down-regulated outer
378 membrane (3.85 – 26.9%), periplasmic (0 – 23.53%) and inner membrane (1.38 – 24.8%)
379 proteins were moderately prevalent (Supplemental Figure S4). Further analysis of the CE
380 fraction detected 121 common proteins with unknown localization (Fig. 3 E, Supplemental
381 Table S4). Ubiquitous expression was the dominant pattern for these proteins in WHO G,
382 K, M, N, V, W, and X and ranged from 42.97% ($n=52$, WHO V) to 66.94% ($n=81$, WHO W).
383 Variable expression of proteins with unknown localization dominated in WHO L, O, P, Y, Z,
384 and FA6140. WHO U had the highest number of down-regulated proteins (39.67%, $n=48$)
385 with respect to those in WHO F (Fig. 4 D).

386 In contrast to the CE expression pattern, we observed a striking increase in the
387 number of variably expressed cytoplasmic proteins in the C fraction of analyzed strains in
388 comparison to WHO F (Fig. 5 A, Supplemental Table S5). The percentage of variable
389 proteins ranged from 32.9% to 82.6% for WHO G and WHO Y, respectively (Supplemental
390 Table S5). Ubiquitous proteins were the next most common category and oscillated from
391 15.5% in WHO Y to 56.4% in WHO G. The third group contained up-regulated proteins (0 –
392 21.28%), and down-regulated proteins ranged from 0.5 – 3.88% (Supplemental Table S5).
393 For proteins with no assigned localization, variable expression was the most prevalent
394 pattern in WHO K, L, O, P, U, W, X, Y, Z, and FA6140 (Fig. 5 B), ranging from 79.75% ($n=$
395 63, WHO Y) to 46.83% ($n= 37$, WHO L). Ubiquitous proteins were the dominating group in
396 WHO G, M, N, and V (Fig. 5 B). Finally, up- and down-regulated proteins constituted up to
397 11.39% and 7.59%, respectively, of the total proteins with unknown localization in the C
398 fraction.

399 Together, the first quantitative proteomic profiling of the 15 *N. gonorrhoeae* strains
400 demonstrated distinct differences in their proteomes and showed that a pattern of ubiquitous
401 protein expression was prevalent in the CE fraction, whereas variably expressed proteins
402 were the dominant group in the C subproteome.

403 **Antigen mining decision tree.** To identify novel gonorrhea antigens and to gain information
404 about expression of previously identified vaccine candidates (49, 71, 77, 78), we designed
405 an antigen mining decision tree (Fig. 6). We included in this process 25 outer membrane
406 proteins (all outer membrane proteins identified except RmpM) and 121 proteins of unknown
407 localization identified in CE proteomic profiling (Fig. 6 and Supplemental Table S1). The
408 latter group of proteins was subjected to signal sequence and transmembrane motif
409 analyses to increase the coverage of potential vaccine candidates. Together, these
410 investigations yielded nine novel antigens including NGO0282, NGO0425, NGO0439,
411 NGO0778, NGO1251, NGO1688, NGO1889, NGO1911a, and NGO2105 in addition to
412 previously discovered proteomics-derived antigens [(29, 30); Table 1] and vaccine
413 candidates identified by other means (Table 2).

414 Further bioinformatics and literature searches were performed to gain insights into
415 the new proteomics-derived vaccine candidates. The putative lipoprotein NGO0282 is a
416 homolog of the outer membrane localized LptE, which is a component of the trans-envelope
417 LptA-G machinery involved in the transport of lipopolysaccharide/lipooligosaccharide
418 (LPS/LOS) molecules to the *E. coli* and *N. meningitidis* outer membrane, respectively.
419 LptE's chaperone-like role in LptD biogenesis is conserved in both bacteria but LptE works
420 in concert with LptD to translocate LPS to the cell surface only in *E. coli* (79, 80). LptD is
421 essential for *E. coli* and *N. gonorrhoeae* viability but is dispensable for *N. meningitidis* (81-
422 83). Therefore, the function of *N. gonorrhoeae* LptE in both LOS transport and LptD

423 biogenesis needs to be elucidated. NGO0425 contains a tetratricopeptide repeat-like
424 domain and a transmembrane helix. Together with its *E. coli* homolog, YfgM, NGO0425
425 belongs to the UPF0070 family. In *E. coli*, YfgM was proposed to act within the β -barrel
426 trafficking chaperone network and its depletion in Δskp and $\Delta surA$ knockout backgrounds
427 contributed to further alterations in outer membrane integrity (84). The vaccine candidate
428 protein NGO0439 is homologous to the *E. coli* outer membrane protein LolB, which is
429 involved in lipoprotein trafficking to the outer membrane (85, 86). We consider *N.*
430 *gonorrhoeae* LolB to be a vaccine candidate antigen because its surface localization should
431 be experimentally verified. Differences in the localization of homologous proteins exist. For
432 instance, fHbp is a surface-displayed lipoprotein in *N. meningitidis* but not in *N. gonorrhoeae*
433 (87), while BamE is on the surface of gonococci but faces the periplasmic side of the outer
434 membrane in *E. coli* (72). Protein NGO1688, annotated as OmpU, is a putative iron uptake
435 outer membrane protein that is positively regulated by the oxygen-sensing transcription
436 factor, FNR (88). NGO1911a is a predicted pilus assembly protein that is associated with
437 the adhesin PilY (89). Finally, NGO0778, NGO1251 (a putative lipoprotein), and NGO1889
438 are hypothetical proteins. NGO1889 belongs to the LprI family (PFO7007) that comprises
439 bacterial proteins of ~120 amino acids in length that contain four conserved cysteine
440 residues. LprI from *Mycobacterium tuberculosis* acts as a lysozyme inhibitor (90), providing
441 the exciting possibility that *N. gonorrhoeae* LprI contributes to residual lysozyme resistance
442 observed in gonococci deprived of surface-exposed lysozyme inhibitors SliC and ACP (73,
443 91). Lastly, NGO2105 contains peptidase S6 (residues 43-310) and autotransporter
444 (residues 1215-1468) domains potentially involved in proteolytic activity and auto-
445 translocation, respectively, suggesting that this is a newly identified autotransporter protein
446 in *N. gonorrhoeae*. In support of this notion, the NGO2105 locus, also known as adhesion

447 and penetration protein or “NEIS1959 (iga2)” in the PubMLST database, encodes IgA2
448 protease (AidA) and has homologs in other *Neisseria* (Table 1) as well as *Haemophilus*
449 *influenzae* (92).

450 Together, our investigations yielded nine novel gonorrhea vaccine candidates,
451 including proteins with implications in pathogenesis such as IgA2 (AidA) and Lpnl, and
452 provided valuable information regarding the expression patterns of previously selected
453 vaccine candidates.

454 **Expression and homologs of gonorrhea vaccine candidates.** We first evaluated
455 expression profiles of extensively studied gonorrhea vaccine candidates including MtrE (93-
456 95), PorB (96, 97), PilQ (98), TbpA (99, 100), Opa (101, 102), and AniA (19, 103-105). MtrE
457 and PorB were up- and down-regulated, respectively, in 12 isolates (Table 2). Compared to
458 WHO F, PorB was present at similar levels only in WHO G and N. PilQ (98) was ubiquitously
459 expressed in 10 strains, whereas expression of Opa proteins was widely variable, as
460 expected (106, 107). The TbpA level was similar in 8 strains; however, we did not detect
461 TbpB (108). Nor did we detect ACP (109, 110) or OpcA (111, 112) under the standard
462 growth conditions used in our studies, which suggested that they might be specifically
463 regulated. AniA was present at different levels in 7 strains, ubiquitous in five, and up-
464 regulated in two isolates. Immunoblotting experiments with anti-AniA antisera corroborated
465 these findings (105). The cellular pool of NspA (113) varied in ten isolates, while lactoferrin
466 binding protein LbpA (114) was variable in five strains and was ubiquitous in WHO L and G
467 (Table 2).

468 Strikingly, most of the proteome-derived vaccine candidates showed ubiquitous
469 expression among numerous strains (Table 1). In particular, SliC, PldA, BamE, BamA, and
470 BamG were ubiquitous in all 15 isolates. Similar results for these proteins were obtained by

471 iTRAQ-MS/MS applied to the proteomic profiling of cell envelopes and outer membrane
472 vesicles (OMVs) isolated from four different strains of *N. gonorrhoeae* (29). Further, LolB,
473 Ng-MIP, NGO1559, and NGO2054 were unvaryingly expressed in at least 12 isolates.
474 Among the novel vaccine candidates identified in our study, LptE, LolB, IgA2, and NGO1251
475 were found ubiquitous in at least 13 strains. In addition, LprI and NGO0778 were similarly
476 expressed in 12 and 9 isolates, respectively. In support of our proteomics data,
477 immunoblotting analyses demonstrated similar cellular levels of BamA, MetQ, TamA, LptD,
478 NGO2054 (30), BamE-D (72), SliC (73), and BamG (76) in whole cell lysates of the 2016
479 WHO strains as well as geographically and temporally diverse clinical isolates of *N.*
480 *gonorrhoeae* from Baltimore ($n=5$) and Seattle ($n=13$). Our previous studies showed that
481 PorB, PilQ, BamA-D, SliC, MafA, PldA, MetQ, IgA1 protease, and LptD are cargo proteins
482 present at similar levels in naturally released gonococcal OMVs (29, 72, 73), which further
483 highlights their potential as vaccine antigens considering the success of *N. meningitidis*
484 OMV-based vaccines (26, 115).

485 Finally, we examined the presence of homologs of the gonorrhea vaccine candidates
486 among non-gonococcal *Neisseria* species, other commensal bacteria (116, 117), and co-
487 infecting microbes (118-121) that inhabit the same ecological niche as *N. gonorrhoeae*.
488 Antigens conserved between these pathogens and preferably not in commensals have the
489 potential to eradicate several sexually transmitted infections, if formulated into a protective
490 vaccine(s). Our comparative analyses showed that all of the proteomics-based antigens
491 have homologous proteins in the majority of investigated *N. meningitidis* strains, and none
492 are present in *M. hominis* (Table 1). In addition, Ng-MIP-like proteins exist in *C. trachomatis*,
493 *G. vaginalis*, and *P. ruminicola*; BamA and NGO1559 homologs were found in *C.*
494 *trachomatis* and *P. ruminicola*. MetQ, a methionine transporter (74), was the only

495 proteomics-derived vaccine candidate with homologs across all examined bacteria with the
496 exception of *C. trachomatis* and *P. ruminicola*. Further, we detected protein homologs of
497 PilQ in two *C. trachomatis* strains and MtrE and ZnuD in *P. ruminicola*; these three proteins
498 were absent in commensal species.

499 Together, our investigations provide pioneering information into newly identified and
500 existing gonorrhea vaccine candidates. We have established each candidate's expression
501 pattern in diverse *N. gonorrhoeae* isolates and identified homologs among other pathogenic
502 and/or commensal bacteria that share the same ecological niche. Stable expression in the
503 WHO gonococcal panel coupled to presence in *N. meningitidis* and co-infecting agents –
504 but rarely in urogenital commensals – further highlights the importance of including these
505 antigens in gonorrhea vaccine(s).

506 ***Proteomics profiling of N. gonorrhoeae antimicrobial resistance.*** Various genome-
507 based AMR determinants have been deciphered in the gonococcus over the past decades
508 (51, 122-127). However, many AMR determinants remain to be identified and characterized,
509 e.g. the chromosomally-encoded penicillin and cephalosporin resistance determinant “factor
510 X” (128-130) and the AMR mechanisms that contribute to a large proportion of azithromycin
511 resistance (131). The uncertainty behind these AMR determinants illustrates the need for
512 alternative approaches to enhance our understanding of gonococcal AMR complexity. At
513 the proteomic level, only two studies have attempted to address this challenge, both of which
514 used 2D-SDS PAGE exclusively (47, 132). Therefore, we focused on identifying proteomic
515 AMR signatures that exist in the absence of antimicrobial pressure during standard *in vitro*
516 growth conditions by performing a pairwise comparison of all identified proteins in each
517 individual strain to the WHO F reference strain (Supplemental Tables S1-S2). As expected,
518 we identified different numbers of proteins in the CE and C fractions in each comparison set

519 due to differences in the number of open reading frames (ORFs) between the gonococcal
520 strains (Supplemental Table S3). Similarly to our previous analysis, we excluded typical
521 cytoplasmic proteins from the CE subproteome and cell envelope proteins from the C
522 fraction. We solely focused on proteins with significantly different expression in the
523 examined strains compared to the fully antimicrobial-susceptible strain WHO F with the
524 rationale that these proteins may provide clues about the proteomic basis of AMR. For
525 instance, we identified MtrE as up-regulated in many strains with increased resistance to
526 numerous antimicrobials even in the absence of antimicrobial exposure, which represents
527 an up-regulation of the multidrug MtrCDE efflux pump and possibly additional efflux pumps
528 for which MtrE acts as the outer membrane channel (29, 94, 133-135). Overall, we identified
529 162 (including 21 known AMR determinants) and 95 proteins with known and unpredicted
530 subcellular locations, respectively (Figure 6). Peptide counting performed for the latter group
531 of proteins yielded 55 and 36 proteins that are likely localized to the CE and C, respectively,
532 and four proteins with ambiguous localization. Next, we separated proteins that have been
533 previously verified as *N. gonorrhoeae* AMR determinants (Table 3) from new potential
534 proteomic AMR signatures (Tables 4-5).

535 ***Proteomic signature of previously verified gonococcal antimicrobial resistance***
536 ***determinants.*** Our proteomic analysis detected subcomponents of all the five efflux pumps
537 described in *N. gonorrhoeae*, i.e., MtrCDE, MtrF, FarAB, MacAB, and NorM (Table 3). The
538 outer membrane-barrel protein MtrE serves as the channel for the tripartite MtrCDE pump
539 and likely fulfills this same function in the MacAB and FarAB efflux pumps (133, 135). The
540 MtrCDE complex is the most studied efflux pump system in *N. gonorrhoeae*. The multiple
541 transferable resistance (*mtr*) locus contains the *mtrCDE* operon (136) that is negatively
542 regulated by the repressor MtrR (137). Mutations that abrogate *mtrR* activity result in an

543 over-expression of the MtrCDE efflux pump and decreased susceptibility to numerous
544 antimicrobials, e.g. macrolides, penicillins, cephalosporins, and tetracycline (53, 135). AMR
545 mutations in the *mtrR* promoter were previously identified in WHO G, K, M, O, P, V, W, X,
546 Y, and Z and within the *mtrR* gene (G45D or a frame shift mutation resulting in a truncated
547 peptide) in WHO K, L, M, P, and W (50), suggesting an over-expression of the MtrCDE efflux
548 pump. Our proteomic profiling also verified that the levels of MtrE were significantly
549 increased in all isolates with the exception of two strains lacking any type of *mtrR* AMR
550 determinant (WHO U and N; Table 3). Accordingly, MtrE proved to be an effective indicator
551 of expression of the MtrCDE efflux pump. Our findings were further supported by the down-
552 regulation of MtrR in all examined strains except WHO L (Table 3). WHO L is also the only
553 examined strain that contains an *mtr*₁₂₀ mutation, which generates a novel promoter for
554 *mtrCDE* transcription and further enhances the expression of the MtrCDE efflux pump (50,
555 138). The second efflux system that showed differential expression was the MacAB efflux
556 pump, which can decrease macrolide susceptibility (139). MacA expression varied across
557 the isolates. Expression of the inner membrane component, MacB, was enhanced in the
558 azithromycin resistant strains WHO P and V, but also in the azithromycin susceptible strains
559 WHO N and K, as well as WHO L, which is intermediately susceptible to azithromycin.
560 Interestingly, MacB was the most highly expressed in WHO V, the only strain with high-level
561 azithromycin resistance [MIC>256 µg/mL; due to the 23S rRNA A2059G mutation in all four
562 alleles (50)], which indicates that over-expression of the MacAB efflux pump may contribute
563 to the high MICs of azithromycin and other macrolides in WHO V. The FarA component of
564 the FarAB efflux pump system, which exports long-chain fatty acids and other hydrophobic
565 agents (140), was not over-expressed in any of the examined strains and was instead
566 ubiquitously expressed in seven WHO strains (M, N, K, L, X, Z, and V) and down-regulated

567 in WHO U, O, FA6140. Our proteomic profiling also revealed that the NorM and MtrF efflux
568 pumps, which can decrease the susceptibility to fluoroquinolones and sulfonamides,
569 respectively (141, 142), were not over-expressed in any of the examined strains.

570 Among other established AMR determinants that were differentially expressed was
571 the major porin of *N. gonorrhoeae*, PorB (143, 144), which was down-regulated in all strains
572 with the exception of WHO G and N (Table 4). This down-regulation suggests reduced
573 import of antimicrobials such as penicillins, cephalosporins and tetracyclines, which can
574 contribute to a decreased antimicrobial susceptibility. Furthermore, the WHO F, G, and N
575 express PorB1a, which is associated with a lack of the AMR determinant *penB* and
576 consequently high-level chromosomally-mediated resistance to penicillins and
577 cephalosporins (127), while all other strains express PorB1b. All WHO strains with PorB1b
578 ($n=11$), except WHO U, contained the AMR determinant *penB*. Consequently, our proteomic
579 data suggest that *penB* may be associated with also a decreased expression of PorB1b in
580 addition to the previously documented decreased penetration through PorB1b, resulting in
581 a decreased susceptibility to several antimicrobials. The expression of penicillin-binding
582 protein 1 (PBP1) was significantly down-regulated in nine out of the twelve WHO strains that
583 possess the *ponA1* resistance determinant, which encodes a L421P amino acid substitution
584 in PBP1 that contributes to high-level chromosomally-mediated penicillin resistance (50).
585 Accordingly, our proteomic data indicate that the PBP1 L421P amino acid alteration, in
586 addition to decreased expression of PBP1, might contribute to high-level chromosomally
587 mediated penicillin resistance. In contrast, PBP2 (the main lethal target for penicillins and
588 cephalosporins) was ubiquitously expressed in 13 of the 14 WHO strains. Similarly, GyrA
589 expression was ubiquitous in 13 of the 14 WHO strains. No association between GyrA
590 expression and the main fluoroquinolone resistance mutations [amino acids S91 and D95

591 (50)] was identified. Both GyrB and the second fluoroquinolone target, ParC, were over-
592 expressed in the four ciprofloxacin-resistant WHO strains G, N, V and X, which may suggest
593 that these strains upregulate GyrB and ParC to compensate for the mutated main
594 fluoroquinolone target GyrA (Table 3).

595 ***New potential proteomic-derived antimicrobial resistance signatures.*** In the CE
596 fraction, two hypothetical proteins predicted to localize to the inner membrane,
597 WHO_F_00238c and WHO_F_01226, were down-regulated in all examined strains
598 compared to the antimicrobial-susceptible WHO F strain (Table 4). WHO_F_00238c, which
599 corresponds to NGO0222 in the FA1090 genome, is a small protein with a predicted
600 molecular weight of 8.32 kDa that contains two predicted transmembrane domains but no
601 signal peptide. WHO_F_01226 lacks a homologous protein in FA1090. This is also a small
602 protein (5.39 kDa) with no peptides predicted to be recognized by signal peptidase I or II. In
603 the C fraction, no protein was differentially expressed in all strains, but two cytoplasmic
604 proteins, NGO0597 and NGO0701, were up-regulated in all strains except WHO L.
605 NGO0597 is a nucleoside diphosphate kinase (Ndk; 15.4 KDa) involved in DNA and RNA
606 synthesis (145), regulation of gene transcription (146), and peptide chain elongation during
607 translation (147), all processes that are targets for different antimicrobials. Ndk is secreted
608 from *Pseudomonas aeruginosa* (146), *M. tuberculosis* (148), and *Leishmania* (149) to
609 modulate interaction with host cells, block phagosome maturation in macrophages (148,
610 150), and promote host cell apoptosis and necrosis (151). It remains to be investigated
611 whether the gonococcal Ndk is secreted during infection and whether it may serve as an
612 anti-virulence or antimicrobial target. Finally, we detected two proteins with undefined
613 subcellular localization displaying global differential expression. WHO_F_01139 and
614 WHO_F_01144, which have no homologs in the FA1090 genome, were down-regulated in

615 all strains. Our use of UPCD predicted WHO_F_01139 to localize to the cell envelope.
616 WHO_F_01139 is a putative lipoprotein (16.9 kDa) with a predicted signal peptide II domain.
617 Based on UPCD, in addition to the lack of a predicted signal peptide and the absence of
618 transmembrane domains, we predict the hypothetical protein WHO_F_01144 (7.4 kDa) is
619 cytoplasmic. The impact of these six proteins on AMR is yet to be elucidated; however, our
620 data suggest that they may represent general proteomic markers for gonococcal AMR, a
621 predisposition toward developing or compensating for gonococcal AMR, and/or new
622 antimicrobial targets.

623 ***Phenotypic clustering based on antibiograms and common differentially expressed***
624 ***proteins.*** To link AMR phenotypes with proteomic signatures, we performed phenotypic
625 clustering of gonococcal strains based on their defined antibiograms (50, 53-55, 152) and
626 common differentially expressed proteins (Tables 4-5). We additionally investigated each
627 protein's Cluster of Orthologous Genes (COG) annotations and inferred the functional
628 relevance to the observed phenotypes. These analyses generated seven phenotypic
629 clusters that matched between established and proteome-derived AMR signatures (I-VII;
630 Tables 4-6).

631 Cluster I strains, WHO P and U, exhibit resistance to azithromycin and the majority
632 of up-regulated proteins identified were involved in ribosomal biogenesis: 30S ribosomal
633 proteins S15 and S19; 50S ribosomal proteins L1, L2, and L22; the small GTPase EngA;
634 pseudouridine synthase; RNA helicase; and ribonuclease E. In contrast, proteins involved
635 in cell envelope biogenesis – PilE, LolA, and PglB – were down-regulated in both strains,
636 which may be associated with the strains' decreased susceptibility to penicillin G.

637 Cluster II strains, WHO M and N, exhibit resistance to penicillin G, tetracycline, and
638 ciprofloxacin. Up-regulated proteins included DNA repair factors (DnaE, a putative type I-

639 site specific deoxyribonuclease NGO0407, and exonuclease UvrB). Proteins involved in
640 amino acid metabolism (NGO0269, NGO0679); and translation (NGO0803, NGO1870)
641 were also up-regulated, which suggested strains in Cluster II possess compensatory
642 mechanisms for ciprofloxacin and tetracycline resistance, respectively. Hypothetical
643 proteins represented the majority of down-regulated proteins and included WHO_F_00875c,
644 NGO1299, NGO1945, NGO1967, NGO1969, NGO1970, and NGO2089.

645 Cluster III, IV, and V are comprised of WHO X and L, WHO W and K, and WHO Y
646 and Z, respectively, and exhibit resistance to at least four different antimicrobials, with
647 ciprofloxacin and tetracycline in common (Table 4-5). Three proteins in common between
648 strains in Cluster III and IV were identified. Of these, homoserine dehydrogenase and holo-
649 ACP synthase – involved in amino acid and lipid metabolism, respectively – were down-
650 regulated, while thioredoxin, which is involved in defense against oxidative stress and
651 protein turnover, was up-regulated (153, 154). The NADP quinone reductase (MdaB,
652 modulator of drug activity B) was up-regulated in Cluster IV and V strains. In *E. coli*, MdaB
653 protects against polyketide compound toxicity (155), while overproduction of this protein
654 defends *P. aeruginosa* from oxidative stress (156).

655 Strains in Cluster VI (WHO V and G) are resistant to penicillin G (WHO G intermediate
656 susceptible), tetracycline and ciprofloxacin. Differentially regulated proteins in this cluster
657 were strikingly similar to Cluster II, with 13 proteins in common (Table 4-6). Seven proteins
658 involved in DNA repair, amino acid metabolism and translation were up-regulated, further
659 strengthening a possible compensatory mechanism for the resistance to ciprofloxacin and
660 tetracycline. Six proteins functioning in coenzyme metabolism (NGO2056) and with
661 unknown functions (NGO1299, NGO1945, NGO1969, NGO1970, NGO2089) were down-
662 regulated (Table 6).

663 Finally, the cluster VII strains (WHO O and FA6140), displaying resistance to penicillin
664 G and tetracycline, had nine common differentially expressed proteins (Table 6). Among
665 these proteins, two metabolic coenzymes (NGO0360 and NGO2056) and a putative
666 cytochrome *b561* involved in energy production were down-regulated. This cluster
667 possessed a similar expression profile to strains in Cluster I that are intermediately
668 susceptible to penicillin G and tetracycline. Finally NGO2017, a putative integral inner
669 membrane protein; NGO0452, a potassium proton/antiporter; PilW; and PilE were also
670 down-regulated in the cluster VII strains (Table 6).

671 Our proteomic findings elucidate many differentially regulated proteins as potential
672 general proteomic markers for gonococcal AMR, a predisposition toward developing or
673 compensating for gonococcal AMR, and/or new antimicrobial targets, e.g. NGO0222,
674 WHO_F_01226, NGO0597, NGO0701, WHO_F_01139, WHO_F_011144. Deeper analysis
675 of gonococcal proteotypes that relied on AMR-based phenotypic clustering identified
676 additional proteomic markers potentially associated with (or compensating for) AMR in
677 clusters I, II, VI, and VII. Further studies should examine the proteomic profiles of wild type
678 and AMR gonococcal strains during exposure to varying levels of different antimicrobials. In
679 line with this, the expression of eight outer membrane proteins was enhanced in ampicillin
680 resistant *E. coli* strains upon exposure to the minimal inhibitory concentration of ampicillin
681 (33). Additionally, the functional role(s) of the differentially regulated hypothetical proteins
682 potentially involved in gonococcal AMR need to be elucidated, which would help decode the
683 intricate AMR network and promote the design of ways to curb the spread of AMR among
684 *N. gonorrhoeae* strains.

685

686 **CONCLUSIONS**

687 The present study provides the first global quantitative proteomic characterization of the
688 2016 WHO *N. gonorrhoeae* reference strains (50) and FA6140 (51) to identify new vaccine
689 candidates, gain information about expression of previously identified antigens, and
690 enhance our understanding of AMR in *N. gonorrhoeae*. To our knowledge, this is also the
691 largest quantitative proteomics study performed on bacterial sub-proteomes to date.
692 Importantly, nine novel vaccine candidates have been identified, significantly broadening
693 the gonorrhea antigen repertoire. Further, expression of 21 previously verified AMR
694 determinants at the proteome level was investigated and six new proteomic signatures that
695 may be associated with AMR or may indicate a strain's likelihood of developing or
696 compensating for the physiological consequences of gonococcal AMR. The proteomic
697 signatures we identified may also represent new antimicrobial targets. Expression patterns
698 of antimicrobial targets and AMR determinants provide proteomic signatures that can
699 complement, verify, and enhance our phenotypic- and genetic-derived understanding of
700 gonococcal AMR complexity. Cumulatively, our studies provide a wealth of information
701 regarding gonococcal proteomic profiles and will contribute to ongoing efforts in
702 vaccine/drug development as well as elucidation of AMR mechanisms in *N. gonorrhoeae*.

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708

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1183 **TABLE 3. Proteomic signature of previously verified gonococcal antimicrobial resistance determinants#.**

						Phenotypic clusters of gonococcal antimicrobial susceptibility patterns										184					
Antimicrobial agent		Main antimicrobial target				I	II	III	IV	V	VI	VII									
Penicillin G		PBP2 (PBP1)																			
Cefixime																					
Ceftriaxone																					
Azithromycin		50S ribosome																			
Ciprofloxacin		DNA gyrase, topoisomerase IV																			
Spectinomycin		30S ribosome																			
Tetracycline																					
						WHO P	WHO U	WHO M	WHO N	WHO X	WHO L	WHO W	WHO K	WHO Y	WHO Z	WHO V	WHO G	FA G140	WHO O	185	
Accession	Protein homolog in <i>N. gonorrhoeae</i> FA1090	Protein name	Locali-zation	Antimicrobial specificity	Protein description															186	
WHO_F_00422c	NGO0395	NorM	IM	Fluoroquinolones	Multidrug efflux protein															187	
WHO_F_01562c	NGO1364	MtrD (MexB)	IM	Macrolides, tetracycline, penicillin, fluoroquinolones, cephalosporins	MtrD (MexB)															188	
WHO_F_01563c	NGO1365	MtrC (MexA)	P		MtrC (MexA)																189
WHO_F_01561c	NGO1363	MtrE	OM		Multiple transferable resistance pump, component E																190
WHO_F_01564	NGO1366	MtrR	C		Repressor of multiple transferable resistance pump																191
WHO_F_01566	NGO1368	MtrF	IM	Sulfonamides	AbgT transporter															192	
WHO_F_01653c	NGO1439	MacB	IM	Macrolide	MacB Macrolide export ATP-binding/permease protein															193	
WHO_F_01654c	NGO1440	MacA	P		MacA ABC transporter periplasmic protein																194
WHO_F_01953c	NGO1683	FarA	P	Fatty acids	Fatty acid resistance MFS efflux transporter adaptor subunit															195	
WHO_F_02142c	NGO1841	RpsJ	C	Tetracyclines	RpsJ 30S ribosomal protein S10															196	
WHO_F_00106	NGO0099	PBP1 (PonA1)	P	Penicillin (cephalosporins)	Penicillin-binding protein 1															197	
WHO_F_01799c	NGO1542	PBP2 (PenA)	IM		Penicillin-binding protein 2																198
WHO_F_02106	NGO1812	PorB	OM		Porin 1B (PorB)																199
WHO_F_01865	NGO1603	MtgA	P		MtgA Penicillin-binding protein 4																200
WHO_F_00668c	NGO0629	GyrA	C	Fluoroquinolone	DNA gyrase subcomponent GyrA															201	
WHO_F_02057	NGO1772	GyrB	C		DNA gyrase subcomponent GyrB																202
WHO_F_01444	NGO1259	ParC	C		Topoisomerase IV subcomponent C																203
WHO_F_01528c	NGO1333	ParE	C		Topoisomerase IV subcomponent E																204
WHO_F_01537c	NGO1342	FolP	C	Sulfonamide	7,8-dihydropteroate synthase															205	

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#Color legends for protein expression: Ubiquitous (green), up-regulated (red), down-regulated (blue), variable (grey), and undetected (white). Color legends for phenotype against antimicrobial agents are as follows: resistant (dark purple), intermediate susceptible/resistant (purple), susceptible (light purple). Abbreviations: OM: Outer membrane, IM: inner membrane, C: cytoplasmic, P: periplasmic.

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TABLE 4. New potential proteomic-derived antimicrobial resistance signatures with defined subcellular localizations#.

Accession	Protein homolog in GC FA1090	Localization	Protein description	COG	Function	WHO P	WHO U	WHO M	WHO N	WHO X	WHO L	WHO W	WHO K	WHO Y	WHO Z	WHO V	WHO G	FA6140	WHO O
WHO_F_02461c		E	Putative hemoglobin receptor component HpuA																
WHO_F_00057	NGO0057	IM	Thioredoxin	COG0526OC	Protein turnover														
WHO_F_00073	NGO0071	IM	Lipoprotein signal peptidase II	COG0597MU	Cell wall/membrane/envelope biogenesis														
WHO_F_00089c	NGO0083	IM	Pilin glycosylation protein	COG1086MG	Cell wall/membrane/envelope biogenesis														
WHO_F_00091c	NGO0085	IM	UDP-glucose lipid carrier transferase	COG2148M	Cell wall/membrane/envelope biogenesis														
WHO_F_00139c	NGO0127	IM	Ribonuclease BN-like family	COG1295S	Function unknown														
WHO_F_00155	NGO0143	IM	Sodium/proton antiporter	COG1757C	Energy production and conversion														
WHO_F_00191c	NGO0178	IM	Lipid A core - O-antigen ligase	COG3307M	Cell wall/membrane/envelope biogenesis														
WHO_F_00211	NGO0196	IM	Putative spermidine/putrescine transport system permease,	COG1177E	Amino acid transport and metabolism														
WHO_F_00213c	NGO0198	IM	Ammonia transporter	COG0004P	Inorganic ion transport and metabolism														
WHO_F_00238c	NGO0222	IM	Hypothetical protein																
WHO_F_00246c	NGO0230	IM	Potassium transporter	COG0168P	Inorganic ion transport and metabolism														
WHO_F_00303	NGO0284	IM	Membrane protein																
WHO_F_00311	NGO0291	IM	Potassium/proton antiporter	COG3263P	Inorganic ion transport and metabolism														
WHO_F_00328	NGO0307	IM	Phage T7 F exclusion suppressor FxsA	COG3030R	General function prediction only														
WHO_F_00385	NGO0360	IM	Putative uroporphyrinogen-III C-methyltransferase	COG2959H	Coenzyme transport and metabolism														
WHO_F_00386	NGO0361	IM	Uncharacterized enzyme of heme biosynthesis	COG3071H	Coenzyme transport and metabolism														
WHO_F_00425c	NGO0399	IM	Putative Zn-dependent protease	COG0501O	Protein turnover														
WHO_F_00585	NGO0551	IM	Predicted membrane protein	COG3671S	Function unknown														
WHO_F_00627c	NGO0589	IM	Uracil transporter	COG2233F	Nucleotide transport and metabolism														
WHO_F_00666c	NGO0627	IM	Site-specific recombinase	COG4389L	Replication, recombination and repair														
WHO_F_00696	NGO0656	IM	Oxalate/formate antiporter family transporter	COG2807P	Inorganic ion transport and metabolism														
WHO_F_00816c	NGO0753	IM	Nitrate/nitrite sensor protein	COG3850T	Signal transduction mechanisms														
WHO_F_00996	NGO0869	IM	Hypothetical protein	COG0586S	Function unknown														
WHO_F_01057c	NGO0923	IM	Putative succinate dehydrogenase cytochrome	COG2009C	Energy production and conversion														
WHO_F_01100c	NGO0968	IM	Glutamine transport system permease protein glnP	COG0765E	Amino acid transport and metabolism														
WHO_F_01106c	NGO0974	IM	Lysophospholipid transporter lpIT																
WHO_F_01110c	NGO0978	IM	Thio/disulfide interchange protein DsbD	COG4232OC	Protein turnover														
WHO_F_01126		IM	Hypothetical protein																
WHO_F_01200c	NGO1032	IM	Inner membrane transport protein yajR	COG2814G	Carbohydrate transport and metabolism														
WHO_F_01225c	NGO1059	IM	Membrane protein	COG0861P	Inorganic ion transport and metabolism														
WHO_F_01371	NGO1188	IM	Magnesium transporter	COG2239P	Inorganic ion transport and metabolism														
WHO_F_01381	NGO1198	IM	Phosphoethanolamine transferase eptB	COG2194R	General function prediction only														
WHO_F_01398c	NGO1216	IM	Diacylglycerol kinase	COG0818M	Cell wall/membrane/envelope biogenesis														
WHO_F_01428c	NGO1246	IM	Signal peptide peptidase SppA	COG0616OU	Protein turnover														
WHO_F_01445	NGO1260	IM	Transcriptional regulatory protein ZraR	COG3829KT	Transcription														
WHO_F_01460c	NGO1275	IM	Nitric oxide reductase subunit B	COG3256P	Inorganic ion transport and metabolism														
WHO_F_01535c	NGO1340	IM	DedA-family integral membrane protein	COG0586S	Function unknown														
WHO_F_01568c	NGO1370	IM	Uncharacterized iron-regulated membrane protein	COG3182S	Function unknown														
WHO_F_01572c	NGO1374	IM	Cbb3-type cytochrome oxidase, subunit 1	COG3278O	Protein turnover														
WHO_F_01579	NGO1380	IM	Zn-dependent proteases	COG1994R	General function prediction only														
WHO_F_01621	NGO1410	IM	Inner membrane protein ybaN	COG2832S	Function unknown														
WHO_F_01623	NGO1411	IM	Citrate transporter	COG1055P	Inorganic ion transport and metabolism														
WHO_F_01626	NGO1414	IM	Na(+)-translocating NADH-quinone reductase subunit B	COG1805C	Energy production and conversion														
WHO_F_01629	NGO1417	IM	Na(+)-translocating NADH-quinone reductase subunit E	COG2209C	Energy production and conversion														
WHO_F_01669c	NGO1455	IM	Manganese transport protein MntH	COG1914P	Inorganic ion transport and metabolism														
WHO_F_01739c	NGO1485	IM	Inner membrane protein ybhI	COG0471P	Inorganic ion transport and metabolism														
WHO_F_01797c	NGO1540	IM	Putative phosphoethanolamine transferase ybiP	COG2194R	General function prediction only														
WHO_F_01811	NGO1552	IM	Proline:sodium symporter PutP	COG0591ER	Amino acid transport and metabolism														
WHO_F_01835c	NGO1574	IM	Phosphatidyglycerophosphatase A	COG1267I	Lipid transport and metabolism														
WHO_F_01979c	NGO1699	IM	Inner membrane protein ypiD	COG4137R	General function prediction only														
WHO_F_01990c	NGO1710	IM	O-acetyltransferase OatA	COG1835I	Lipid transport and metabolism														
WHO_F_01998	NGO1718	IM	Virulence factor MviN	COG0728R	General function prediction only														
WHO_F_02013	NGO1732	IM	Putative multidrug export ATP-binding/permease protein	COG1132V	Defense mechanisms														

1258 # Color legends for protein expression: Up-regulated (red), down-regulated (blue). Color legends for phenotype against antimicrobial agents are as follows: resistant (dark purple),
1259 intermediate susceptible/resistant (purple), susceptible (light purple). Abbreviations: UPCD: unique peptide count difference; PBP: penicillin binding protein.
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1277 **TABLE 6. Common differentially expressed proteins in phenotypically clustered *Neisseria gonorrhoeae* strains.**

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	Class I		Class II		Class III		Class IV		Class V		Class VI		Class VII	
	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated
Amino acid metabolism	NGO0185		NGO0269 NGO0679		NGO1752	NGO0779		NGO0779			NGO0185 NGO0269 NGO0679	NGO0192		
Cell envelope biogenesis		NGO0085 NGO0456 LolA												NGO2071
Coenzyme metabolism	NGO2074	NGO2056 NGO0360		NGO2056			MdaB		MdaB	NGO0059	NGO2074	NGO2056		NGO2056 NGO0360
DNA repair		NGO1707	NGO0078 NGO0407 UvrB						WHO_F_0 2198c		NGO0078 NGO0407 UvrB			
Energy production		WHO_F_0 2308c								NGO0143				WHO_F_0 2308
Hypothetical protein	NGO1239 NGO1958	WHO_F_0 0875c, NGO1299 NGO1969 NGO1970 NGO2089	NGO1942 NGO2097	WHO_F_0 0875c, NGO1299 NGO1945 NGO1967 NGO1969 NGO1970 NGO2089		WHO_F_0 0875c		NGO1141	NGO1239	NGO1628 NGO1966 NGO7315		NGO1299 NGO1945 NGO1969 NGO1970 NGO2089		
Inorganic ion metabolism	NGO0952	NGO1059 NGO2137	NGO0952 NGO1188						NGO1411 WHO_F_0 0481c			NGO2137	WHO_F_0 0481	NGO0291

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	Class I		Class II		Class III		Class IV		Class V		Class VI		Class VII	
	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated	Up-regulated	Down-regulated
Intracellular trafficking and secretion				PilE	WHO_F_02394c	PilE						NGO0456		NGO0452 NGO0454 PilE
Lipid metabolism	NGO1243 NGO1906	NGO1763	NGO0624 NGO1055 NGO1243	NGO1507		NGO1507		NGO1507 NGO1710			NGO1243			
Protein turnover		NGO0399 NGO1655		NGO0926	NGO0057		NGO0057							
Translation and Ribosomal biogenesis	S15, S19, EngA, RNA helicase, Ribonuclease E, L1, L2, L22 , NGO0657		NGO0803 NGO1870								NGO1870			

Proteomic mining of gonorrhea antigens and AMR

1282 **FIGURE LEGENDS**

1283 **Figure 1. Experimental paradigm of quantitative proteomic profiling of the *N.***
1284 ***gonorrhoeae* 2016 WHO reference strains and the FA6140 strain.** All gonococci were
1285 cultured concurrently in liquid medium until reaching mid-logarithmic growth. Bacterial cells
1286 were harvested, lysed, and subjected to subcellular fractionation to separate the crude cell
1287 envelope (CE) and cytoplasmic (C) proteomes. CE proteins were enriched using a sodium
1288 carbonate wash and ultracentrifugation. The obtained CE and C protein samples (100 µg)
1289 were denatured, reduced, alkylated, trypsinized, and the peptides from each strain were
1290 labeled using 10-plex and 6-plex Tandem mass tag (TMT) reagents, as indicated. Finally,
1291 samples were pooled, fractionated by strong cation exchange, and analyzed by liquid
1292 chromatography electrospray ionization mass spectrometry. Experiments were performed
1293 in biological duplicates.

1294

1295 **Figure 2. Venn diagrams illustrating the distribution of proteins identified in cell**
1296 **envelope and cytoplasmic fractions in two independent proteomic experiments. (A)**
1297 Cell envelope proteomes derived from the 2016 WHO reference strains and FA6140 were
1298 analyzed in 10-plex and 6-plex experiments performed in biological duplicates. A total of
1299 1079 and 1081 proteins was identified in Experiments 1 and 2, respectively, and 1010
1300 common proteins were found in both 10-plex experiments. The 6-plex TMT labeling revealed
1301 975 common proteins as well as 197 and 22 unique proteins in Experiments 1 and 2,
1302 respectively. Further analyses were applied to 901 proteins mutually identified in both 10-
1303 plex and 6-plex experiments. **(B)** The proteomic profiling of cytoplasmic fractions yielded
1304 904 proteins shared among all 10 strains, of which 747 were common in both experiments.
1305 The 6-plex TMT identified 904 and 971 proteins in Experiments 1 and 2, respectively; of

Proteomic mining of gonorrhea antigens and AMR

1306 which 852 were common between replicates. In further analyses solely the 723 proteins
1307 shared between both experiments were included. Exp 1 – experiment 1; Exp 2 – experiment
1308 2.

1309
1310 **Figure 3. Subcellular localization of proteins identified in cell envelope and**
1311 **cytoplasmic subproteomes.** Proteins identified in the cell envelope (blue circle) and
1312 cytoplasmic (red circle) fractions were subjected to comprehensive assessments of
1313 subcellular localization using different prediction algorithms and were allocated into the outer
1314 membrane **(A)**, periplasm **(B)**, inner membrane **(C)**, cytoplasm **(D)**, or unknown localization
1315 **(E)**.

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1317 **Figure 4. Expression patterns of common proteins identified in the cell envelope**
1318 **fraction.** Outer membrane **(A)**, periplasmic **(B)**, inner membrane **(C)**, or proteins with
1319 unknown localization **(D)** are shown. Expression of each protein in each gonococcal strain
1320 was compared to the protein level in the reference WHO F isolate. Protein expression is
1321 categorized as ubiquitous (green bars); up-regulated (red bar); down-regulated (blue bar);
1322 and variable (grey bar).

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1324
1325 **Figure 5. Expression patterns of common proteins identified in the cytoplasmic**
1326 **proteome.** Cytoplasmic **(A)** and proteins with unknown localization **(B)** are shown. Protein
1327 levels in individual gonococcal strains were compared to the protein level in the reference

Proteomic mining of gonorrhea antigens and AMR

1328 WHO F isolate. Protein expression is categorized as ubiquitous (green bars); up-regulated
1329 (red bar); down-regulated (blue bar); and variable (grey bar).

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1331 **Figure 6. Decision tree designed for proteomic mining of *Neisseria gonorrhoeae***
1332 **vaccine candidates and antibiotic resistance markers.** Detailed description is provided
1333 in the text.

Figure 1

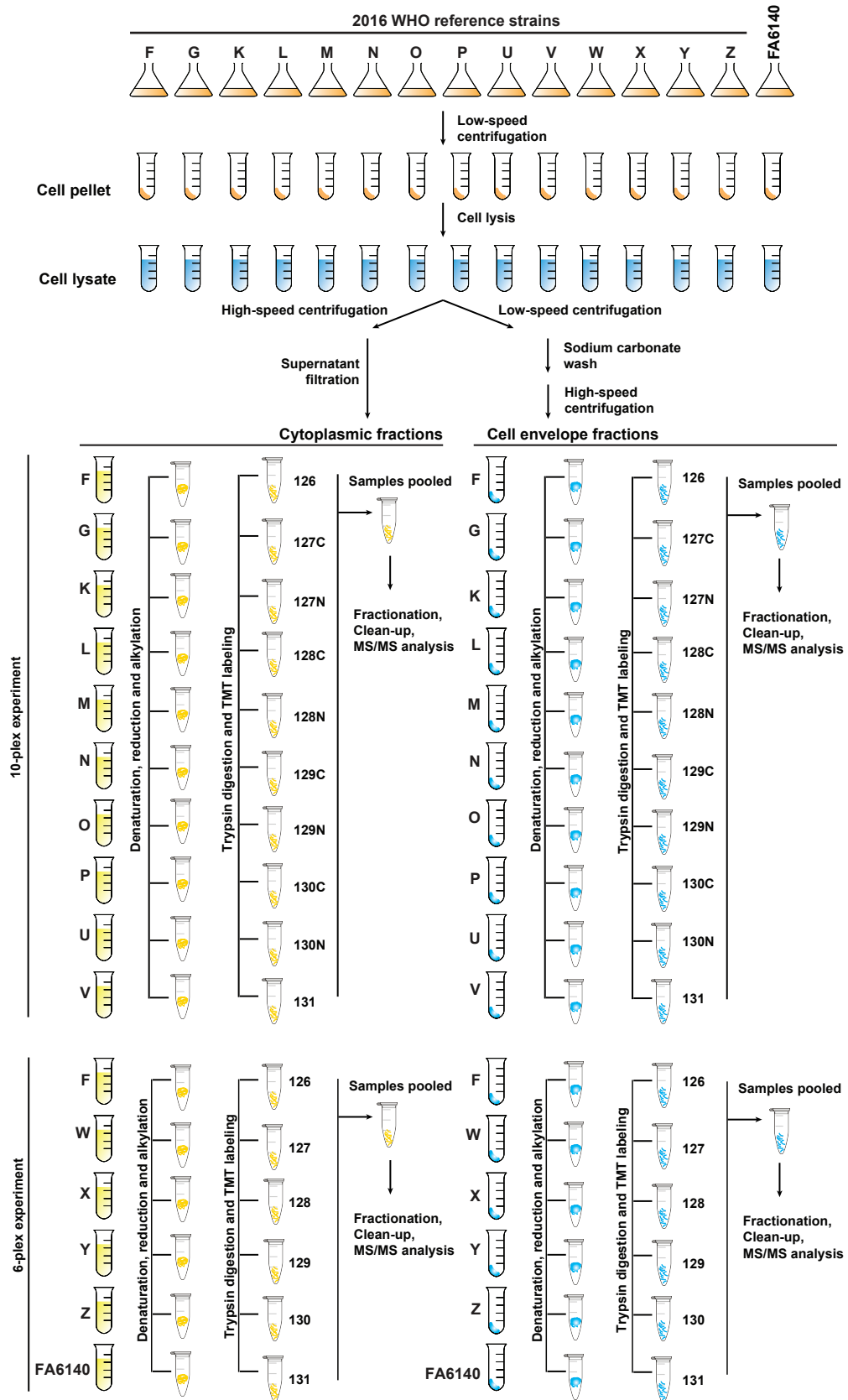


Figure 2

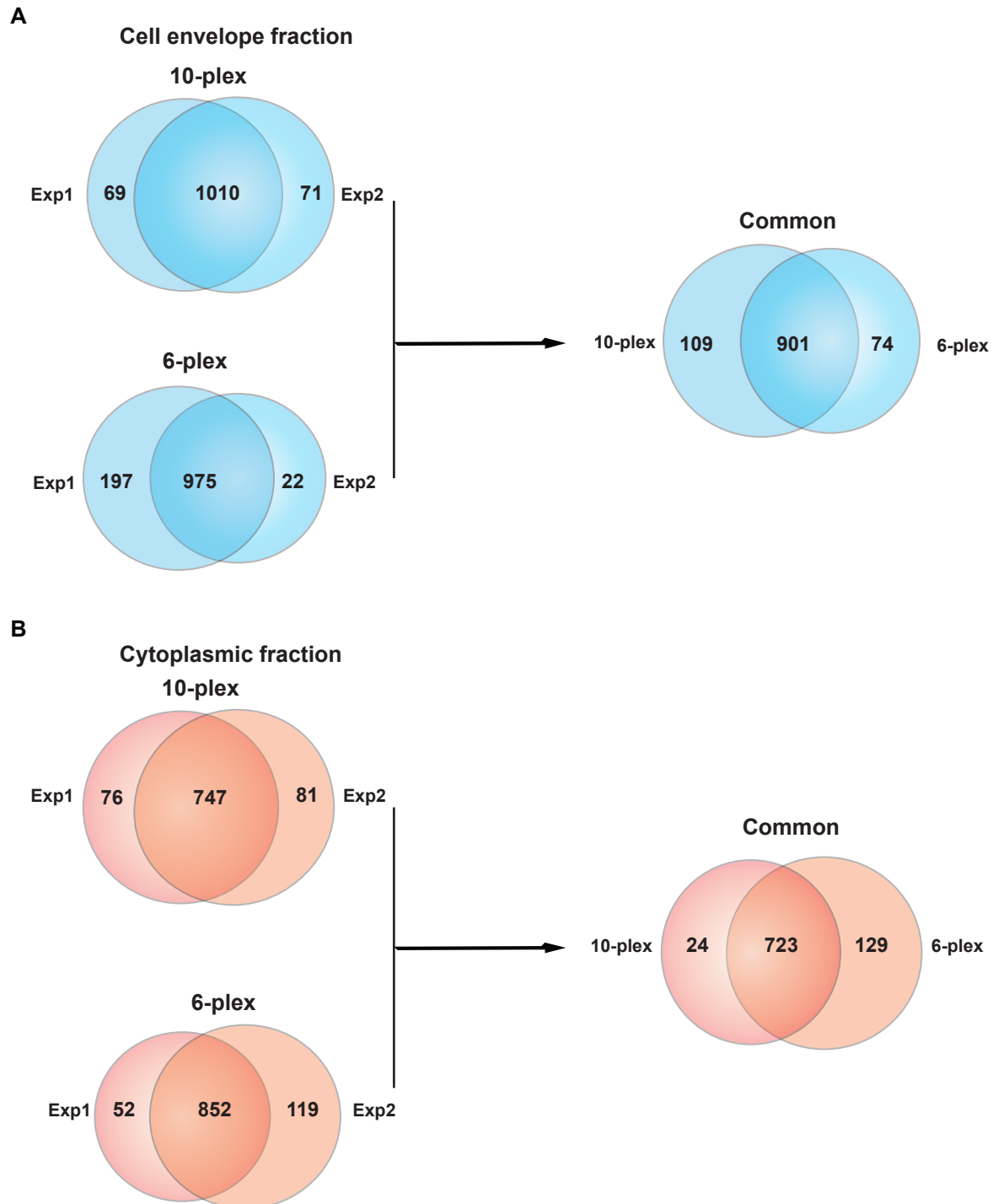


Figure 3

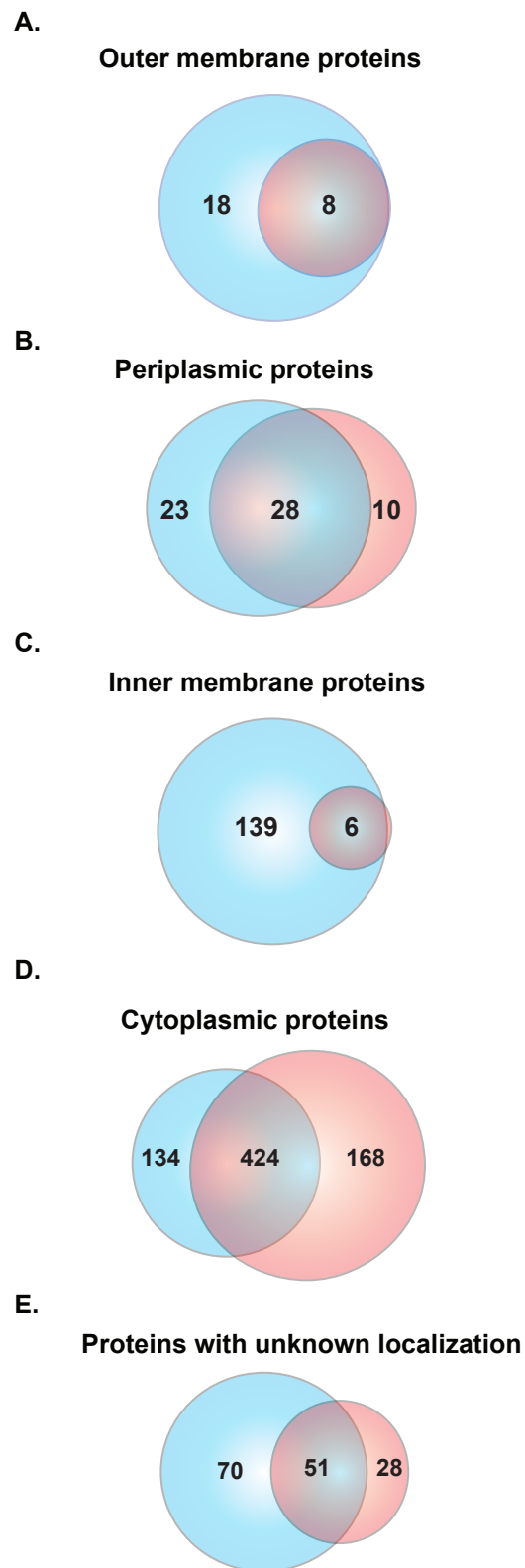
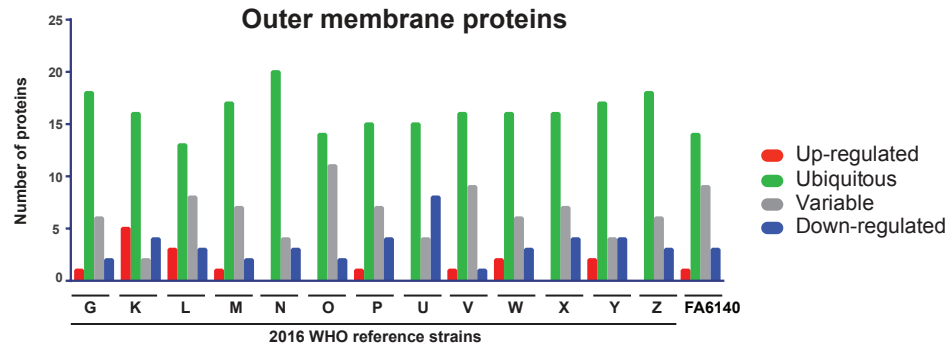
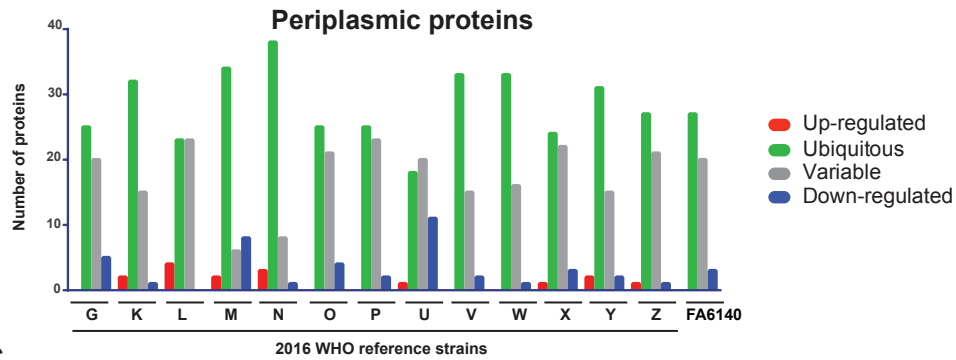


Figure 4

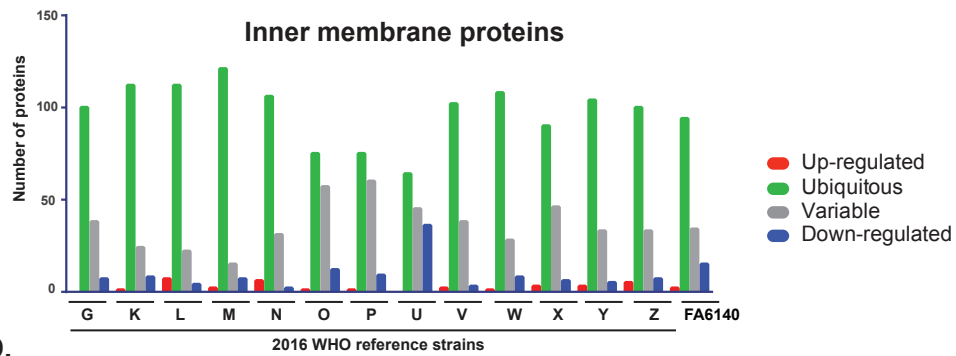
A.



B.



C.



D.

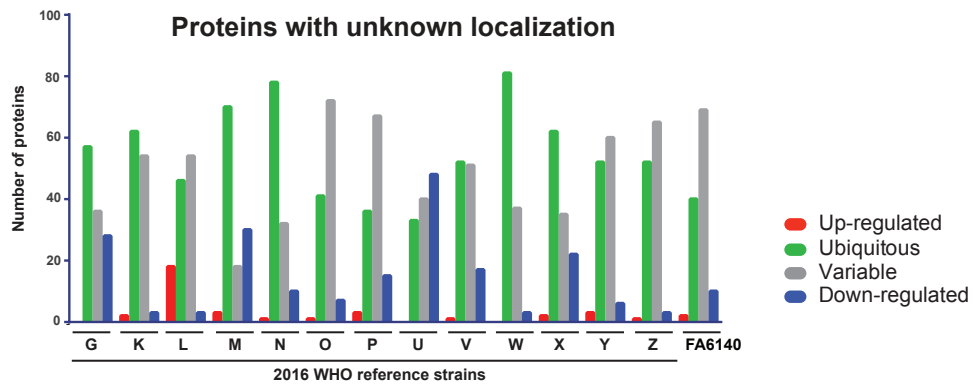


Figure 5

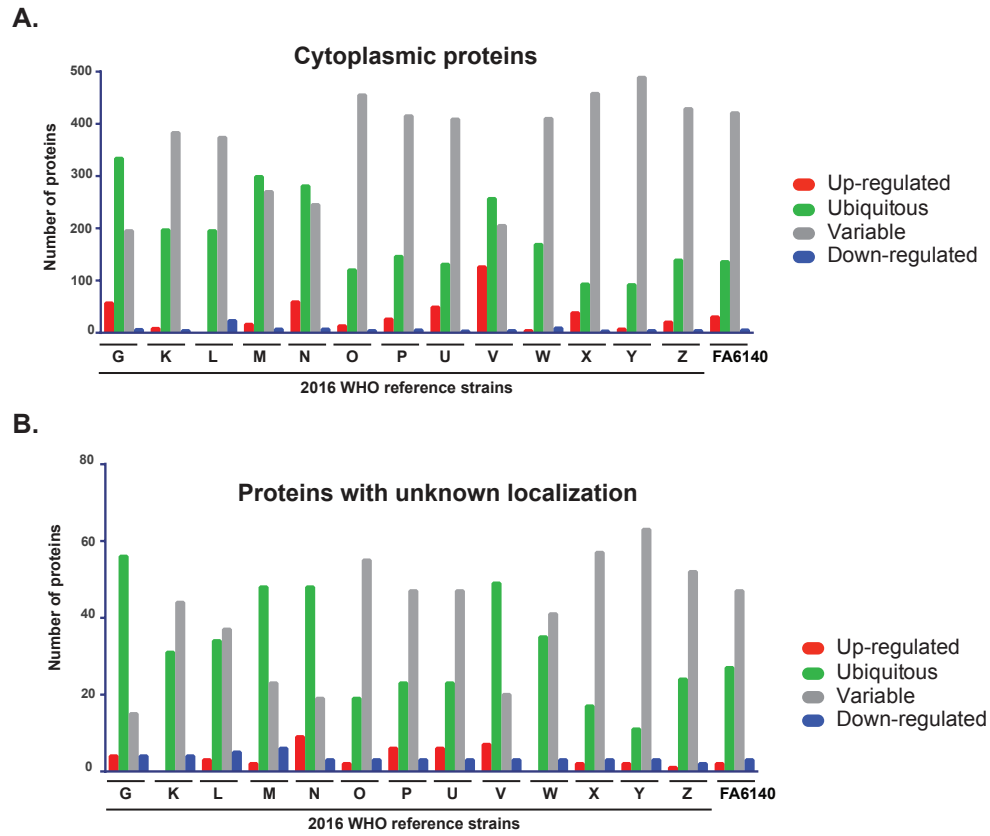


Figure 6

Proteomic Profiling of *Neisseria gonorrhoeae*:

