

1 THERAPEUTICALLY EXPLORING PERSISTENT METABOLISM IN BACTERIA

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8 **ABSTRACT**

9 Bacterial persisters are rare phenotypic variants that are temporarily tolerant to high
10 concentrations of antibiotics. We have previously discovered that persisters are mostly
11 derived from stationary-phase cells with high redox activities that are maintained by
12 endogenous protein and RNA degradation. This intracellular degradation resulted in self-
13 inflicted damage that transiently repressed the cellular functions targeted by antibiotics.
14 Leveraging this knowledge, we developed an assay integrating a degradable fluorescent
15 protein system and a small library, containing FDA-approved drugs and antibiotics, to detect
16 chemicals that target persister metabolism. We identified several metabolic inhibitors,
17 including anti-psychotic drugs, that can reduce *Escherichia coli* persistence. These chemical
18 inhibitors also reduce *Pseudomonas aeruginosa* persistence, potentially verifying the
19 existence of similar mechanisms in a medically relevant organism.

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24 INTRODUCTION

25 Conventional therapies for infectious diseases target the mechanisms that enable the rapid
26 growth of bacterial cell populations. Although this can provide a clinical benefit, this benefit
27 is usually short-lived for persistent and recurrent infections, and a large body of evidence
28 suggests that small subpopulations of microbial cells invariably survive this initial selection
29 pressure. One of the proposed mechanisms for this tolerance is via the establishment of a
30 latent pool of persister cells (1). Persisters are an important health problem, because they
31 are thought to underlie the propensity of recurrent infections to relapse (2–4) and serve as a
32 reservoir from which drug-resistant mutants can emerge (5–8). Persisters exhibit a diverse
33 range of proliferative, metabolic, and transcriptional activities. Whereas there are some
34 variants that can grow in the presence of antibiotics, these are very rare and often survive
35 the drug treatments by activating drug efflux systems (9) or bypassing the pathways targeted
36 by the drugs (10). By contrast, the most abundant variant is the type I persisters, which do
37 not grow in the presence of antibiotics and are largely formed by passage through the
38 stationary phase before antibiotic treatments (11). Elucidating the formation mechanisms of
39 these preexisting, nonproliferating type I persisters is of special interest; because, these
40 variants are found among many bacterial species, are often multidrug tolerant, and their
41 eradication is a huge challenge (1, 3, 4).

42 We previously showed that type I persisters mostly derive from stationary-phase cells with
43 high redox activities that are maintained by endogenous protein and RNA degradation (12).
44 We speculated that this intracellular degradation (i.e., self-digestion or autophagy) not only
45 provides energy to bacterial cells in a non-nutritive environment, but also produces self-
46 inflicted damage that renders the cells less fit for rapid resumption of growth. Inhibiting
47 stationary-phase respiratory activities chemically (treatment with potassium cyanide or
48 nitric oxide to suppress cellular respiration), environmentally (culturing under anaerobic

49 conditions), or even genetically (genes encoding redox enzymes such as *ubiF*, *sucB*, *mdh*,
50 *aceE*, *sdhC*, and *acnB*) reduced persister levels by preventing digestion of endogenous
51 proteins and RNA, yielding cells that were more capable of translation and replication and
52 thus susceptible to cell death when exposed to antibiotics (12, 13). This reduction in
53 persister levels was not found to be associated with the inhibition of RNA and protein
54 synthesis or elimination of reactive oxygen species (ROS) (12). These results also suggest
55 persisters harbor ETC activities associated with bacterial cytochromes, oxidoreductases and
56 PMF, which was supported by previous studies, where “aminoglycoside (AG) potentiation
57 assays” were used (14–16). Our current study further provides strong support for the notion
58 that persister metabolism is a rich source of novel antipersister strategies. Using a high-
59 throughput screening approach and a small chemical library (Biolog Phenotype Arrays
60 containing FDA-approved drugs and antibiotics) in the current study, we identified a subset
61 of drugs that can reduce persistence in Gram-negative bacteria by targeting their
62 metabolism.

63 RESULTS

64 Chlorpromazine pretreatment can reduce *E. coli* persistence

65 As effective sterilization methods for treating chronic and recurrent infections remain
66 scarce, identifying novel targets, together with medicinally relevant inhibitors, is becoming
67 an urgent priority to improve the therapies for these infections. Inhibition of respiration
68 throughout stationary phase or deletion of genes encoding TCA and ETC enzymes was
69 shown to delay intracellular degradation and persistence by reducing cellular metabolic
70 activity (12). ETC reactions are powered by oxidizing/reducing equivalents and are essential
71 for ATP generation by the proton motive force (PMF). If this is the case, we should be able
72 to reduce persister formation in stationary phase by targeting a key component, i.e., ATP
73 synthase, in this metabolic mechanism. Chlorpromazine, which is an FDA approved

74 antidepressant drug that is effective, safe and listed as an essential medicine by the World
75 Health Organization (17), was demonstrated to inhibit the catalytic complex of rotary
76 nanomotor ATP synthase (F1-ATPase) in *E. coli* cells (18, 19). As expected, when we treat
77 stationary-phase cultures with chlorpromazine (Fig. 1A), at a concentration that does not
78 affect stationary-phase cell survival (Fig. S1), we were able to reduce the stationary-phase
79 persistence (Fig. 1BC). We note that cells were not treated with antibiotics directly in
80 stationary-phase cultures, as normal cells are intrinsically tolerant in these cultures (14, 16).
81 The stationary-phase cells were first washed to remove the metabolic inhibitors, transferred
82 to fresh medium, and then treated with antibiotics to stimulate non-persister cell killing.
83 Pretreatment with chlorpromazine also reduced stationary phase metabolic activities by
84 redox sensor green (RSG) dye (Figs. 1DE). RSG can readily penetrate bacteria and yield
85 green fluorescence when reduced by bacterial reductases; hence, fluorescent signals
86 produced by RSG correlate with cellular metabolic activities (Fig. S2). Overall, these results
87 verify that bacterial metabolism is a rich source of novel antipersister strategies.

88 **Chlorpromazine pretreatment reduced non-growing cell levels in stationary phase cultures**

89 Although some persistent infections are associated with clinically apparent chronic
90 symptoms, some cases are asymptomatic for a long period of time (e.g., a decade) and can
91 develop clinically significant diseases at later times (20). The bacteria causing
92 asymptomatic infections can be present within the host system in a nonreplicating or slowly
93 replicating state (generally referred to as “viable but non-culturable” or VBNC state) and
94 cannot be easily cultured in vitro (21, 22). We and others have shown that antibiotic-treated
95 cultures have many more VBNC cells than persisters (~2-log-fold more) (14, 23–25). Both
96 persister and VBNC cells are stained as live, retain metabolic activity, and often appear as
97 nongrowing during the antibiotic treatment (14). The only means to distinguish these
98 subpopulations lies in the ability of persisters but not VBNC cells to recolonize in standard

99 culture media in the absence of antibiotics. To determine whether the chlorpromazine
100 pretreatment eliminate VBNC, we used our published method where we monitor cell
101 proliferation via an inducible fluorescent protein (mCherry) expression cassette (12, 14, 26),
102 in which mCherry-positive cells from late-stationary-phase cultures are inoculated in fresh
103 medium in the absence of inducer (Fig. 1F, t=0). Flow cytometry reveals ongoing cell
104 division as a dilution of mCherry, whereas the fluorescence levels are maintained in the
105 nonproliferating subpopulation (Fig. 1F, WT at t=2.5 h). Although persisters were shown
106 to be enriched in this subpopulation (26), most of these non-growing cells were identified
107 as VBNC cells (26) (Fig. S3AB), which were not detected in the chlorpromazine treated
108 cultures (Fig. 1F, Chlorpromazine at t=2.5h, and Fig. S3A). The reduction in both persister
109 and VBNC cell levels in the chlorpromazine treated cultures points out these two
110 phenotypes may be related. Consistent with the general notion in the field, it is possible that
111 persistence may be a transitory phase leading to the VBNC state (22). Whether persistence
112 contributes to the accumulation of VBNC cells due to the catabolism of intracellular
113 components warrants further investigation.

114 **High-throughput screening detected chemical compounds that target *E. coli* metabolism and** 115 **persistence**

116 To directly measure protein degradation rates in stationary-phase cultures, we previously
117 developed an assay using GFP that is linked to a short peptide degradation tag (11 amino
118 acid residues), *ssrA*, to mark it for degradation by cellular proteases, mainly ClpAP and
119 ClpXP (Lon, Tsp and FtsH are also known to target the *ssrA* sequence) (27–30). Although
120 we note that self-digestion is a complex network orchestrated by many degradative enzymes
121 (proteases, RNases and toxins), chlorpromazine treatment suppressed degradation of this
122 tag in stationary-phase cultures (Fig. 2A, and Fig. S4A), potentially by reducing stationary-
123 phase cell metabolic activities (Fig. 1DE). To test whether this straightforward system can

124 identify additional antipersister therapeutics, we used a small library (Biolog Phenotype
125 Arrays), containing antibiotics and other FDA approved drugs among ~360 known chemical
126 compounds in 96-well plate formats. Cells expressing *ssrA*-tagged GFP were transferred to
127 the phenotype arrays without inducer at early-stationary phase, and cultured under the
128 conditions studied here (Fig. 2B, see Materials and Methods). GFP levels were monitored
129 using a plate reader, with cells cultured in the presence of the solvent serving as the negative
130 controls, and those with chlorpromazine as a positive control. Our data verify that GFP in
131 negative-control wells is degraded within 4 h (Fig. S4AB). The Z-factor (predicted by
132 analysis of test plates with negative and positive controls, as described in Materials and
133 Methods) was calculated to be 0.836, which indicates the robustness of our methodology
134 (31). We employed a widely used Z-score method (calculated from the mean and the
135 standard deviation of all measurements within the plate) (32) to determine initial hits. An
136 absolute Z-score of ≥ 2 is the threshold for hit detection (32). Given that each plate contains
137 four different concentrations for each compound (information on these concentrations not
138 disclosed by the company), the initial hits were selected among the chemicals that
139 successfully inhibited GFP degradation ($Z\text{-score} \geq 2$) with at least two different
140 concentrations (Fig. 2C and Fig. S4C). As expected, chlorpromazine, which is one of the
141 360 chemical compounds tested, was identified as a positive hit, verifying that our method
142 can detect potential metabolic inhibitors (Fig. 2C). To determine chemical inhibitors that
143 specifically target persister metabolism, the identified hits were further analyzed in
144 additional rounds of screening to determine concentrations that lead to complete inhibition
145 of GFP degradation without affecting the stationary-phase-cell viability (Fig. 2D, and Fig.
146 S5 and S6). We identified that CCCP, polymyxin B, poly-L-lysine, thioridazine, and
147 trifluoperazine did not drastically affect the cell viability at the inhibitory concentrations for
148 GFP degradation (Fig. S6), and four drugs, except CCCP, were able to reduce persistence

(Fig. 2E and Fig. S7). Both thioridazine and trifluoperazine fall under the category of phenothiazine antipsychotic drugs, which are tricyclic compounds structurally similar to chlorpromazine. These drugs have been shown to reduce or inhibit NADH₂-menaquinone-oxidoreductase and succinate dehydrogenase activities as well as altering NADH/NAD ratios (33–35), consistent with our RSG staining results provided in Fig. 3AB. We observe similar reduction in stationary phase cellular redox activities after polymyxin B and poly-L-lysine treatments (Fig. 3AB). These cationic peptides were shown to electrostatically bind to bacterial cells that leads to possible disruption of the bacterial membranes and membrane potential (36, 37), which explains the observed reduction in bacterial redox activities (Fig. 3AB). Treating the stationary phase cells with these four chemicals further reduces VBNC formation (Fig. 3C and Fig. S8), consistent with the results obtained from chlorpromazine treatments. Overall, these results strongly support that the identified drugs eliminate bacterial persistence by inhibiting stationary phase metabolism.

The identified drugs can reduce *Pseudomonas aeruginosa* persistence

Our previous results indicate that persistence is facilitated by a self-digestion mediated metabolic futile cycle, wherein energy derived from catabolism is dissipated through continuous degradation of cellular components (12, 13). This process also introduces a self-inflicted damage in the cells that transiently repressed the cellular functions targeted by antibiotics (12). The identification and characterization of the main components of this metabolic cycle may provide a global treatment approach as it can be an evolutionarily conserved process that may occur in many prokaryotes and eukaryotes and enable survival under stressful conditions (such as nutrient depletion, aging and overpopulation) via the recycling of essential energy molecules. When we similarly tested the identified chemicals on *Pseudomonas aeruginosa* (PAO1), we were able to substantially reduce *P. aeruginosa* persistence, suggesting the existence of similar mechanisms in other bacteria (Fig. 3D and

174 Fig. S9). These results provide further clinical relevance for the identified drugs, since *P.*
175 *aeruginosa* is involved in many hospital-related biofilm infections and the predominant
176 cause of morbidity and mortality in cystic fibrosis patients with compromised immune
177 systems (38–40).

178 DISCUSSION

179 As antibiotics are most effective against growing bacteria, the resistance of persisters has
180 been attributed to transient growth inhibition. Experimental evidence supporting this
181 hypothesis was obtained in 2004 by Balaban and colleagues, who showed bacteria that
182 failed to replicate prior to an ampicillin challenge also failed to lyse or grow during
183 antibiotic treatment, but began replicating once the antibiotic was removed (11). This
184 seminal study led to the model that persistence is a dormant phenotype, characterized by a
185 depressed metabolism. However, recent evidence suggests persisters can harbor electron
186 transport chain (ETC) activities associated with bacterial cytochromes and oxidoreductases
187 (12). They can consume certain carbon sources to generate proton motive force (PMF) (14,
188 15), maintain high ATP levels (41), and drive the futile production and degradation of RNA,
189 leading to energy generation and dissipation (42). Interestingly, most persister-related genes
190 identified so far either directly or indirectly modulate cell metabolism.

191 Although metabolic processes and persistence in bacteria are known to be closely related,
192 the specific mechanisms that link these remain unknown. Our previous results indicate that
193 self-digestion may be this link (12). The role of metabolism is significant for bacteria,
194 because they must produce large amounts of energy and biosynthetic precursors to meet the
195 metabolic demands of their rapid growth. This results in a number of metabolic stresses,
196 including nutrient starvation, hypoxia, and oxidative stress, which promote intracellular
197 degradation/damage that may transiently repress the cellular functions targeted by
198 antibiotics. Using transmission electron microscopy (TEM) and classic starvation

199 conditions to create VBNC cells, Kim *et al.* showed that prolonged nutrient deprivation (7
200 weeks) results in cells that are spherical, have an empty cytosol (due intracellular
201 degradation), and fail to resuscitate (43). Although nutrient deprivation initially increased
202 persister levels in their experiments, continuous intracellular degradation eventually
203 converted most of the cells to VBNCs. Persistence may, in fact, represent a transitory phase
204 leading to the VBNC state and contribute to accumulation of VBNC cells due to intracellular
205 degradation. Many persistence mechanisms identified so far involve stress-related
206 responses, which generally induce, or are associated with, cellular self-digestion (44).

207 Although our previous results provided evidence that intracellular degradation transiently
208 induces persistence (12), knowledge regarding what unique metabolic mechanisms are
209 involved is lacking. Our current and previous results indicate that, despite their non-
210 proliferating state, persister cells still exist in a metabolic steady state, where energy is
211 continually produced and consumed (12–14). Our results further showed that targeting
212 persister metabolism holds great potential for eradicating these dangerous phenotypes, as
213 verified by the identified drugs (i.e., chlorpromazine, thioridazine, trifluoperazine,
214 polymyxin B and poly-L-lysine), which are already known to target bacterial redox
215 activities (45). Chlorpromazine (CPZ), thioridazine (TDZ), and trifluoperazine (TFP) are
216 commonly known as first generation antipsychotic/neuroleptic drugs (45–47). Since they
217 are the derivative of a heterocyclic phenothiazine, their mechanism of action is similar (45).
218 The effectiveness of these drugs depends upon the ability to block dopamine receptors as
219 the excessive dopamine is the main culprit of schizophrenia and other psychotic diseases
220 (48). These drugs were also shown to have antimicrobial activities. In *Mycobacterium*
221 *tuberculosis*, phenothiazines inhibit cellular respiration, leading to depletion of ATP as well
222 as the reduction of NADH/NAD⁺ and menaquinol/menaquinone ratios (33–35). Because of

223 their ability to inhibit bacterial efflux pumps, they were also shown to enhance the
224 sensitivity of *Staphylococcus aureus* to beta-lactam antibiotics (49, 50).

225 Studies have shown that poly-l-lysine, which is a cationic polymer, can result in change of
226 morphology in bacteria (37). In addition, treatment with poly-l-lysine raises the electric
227 conductivity of the bacterial cells which leads to possible disruption of the cytoplasmic
228 membrane (51). Similarly, polymyxins consist of a polypeptide cationic ring made up of 8
229 to 10 amino acids, which have a disruptive physiochemical effect resulting in alternation of
230 membrane permeability in bacteria (52). In addition, type II NADH-quinone
231 oxidoreductases, which are integral part of electron transport chain, has also been shown to
232 be a secondary target sites of cationic peptides (53). Polymyxins have been administered
233 for urinary tract infection, pneumonia, bacteremia, postoperative wound infections,
234 abscesses, osteomyelitis (when given as an irrigation), and endocarditis (52).

235 Overall, we presented here a methodology that has been designed to challenge paradigms
236 regarding metabolic dormancy in persisters, shed light on the often-overlooked metabolic
237 processes of persister cells, develop a screening approach to identify metabolic inhibitors
238 among a small library with FDA approved compounds, and integrate all proposed work to
239 accelerate development of antipersister adjuvant therapies. Given that the cytotoxicity, cell
240 permeability, solubility, and safety properties of FDA compounds have been well studied
241 and documented during their preclinical and clinical research phases, discovering
242 antipersister drugs among such libraries will have an enormous impact, because it will
243 identify potential therapeutics that do not require the long laborious FDA approval process.
244 Our preliminary studies have already identified a subset of drugs that can eliminate
245 persisters even in stationary phase cultures, which represent notoriously challenging
246 conditions for the elimination of persisters.

248 MATERIALS AND METHODS

249 Bacterial Strains and Plasmids

250 *Escherichia coli* MG1655 wild-type (WT) and MO strains as well as pQE-80L plasmids
251 harboring genes encoding degradable (*ssrA*-tagged) green fluorescent protein (GFP) were
252 obtained from Dr. Mark P Brynildsen at Princeton University. *Pseudomonas aeruginosa*
253 PAO1 was a gift from Dr. Vincent Tam at the University of Houston. *E. coli* MO strain
254 harbors a chromosomally integrated isopropyl β -D-1-thiogalactopyranoside (IPTG)-
255 inducible *mCherry* expression cassette, which is used to monitor cell proliferation at single
256 cell level (12, 14, 26). pQE-80L expression system has an IPTG-inducible synthetic *T5*
257 promoter and a strong constitutive *LacI^q* promoter (with a point mutation) as a repressor,
258 enabling us to tightly regulate the expression of *gfp* or *ssrA-gfp* (12). To directly measure
259 protein degradation rates in stationary-phase cultures, we employed an assay using *ssrA*, a
260 short peptide degradation tag with 11 amino acid residues that is linked to GFP to mark it
261 for degradation by cellular proteases (27–30, 54). The overexpression of fluorescent
262 proteins on *E. coli* persistence was shown to be insignificant (12–14, 26).

263 Media, Chemicals and Culture Conditions

264 All chemicals were purchased from Fisher Scientific (Atlanta, GA), VWR International
265 (Pittsburg, PA) or Sigma Aldrich (St. Louis, MO). Luria-Bertani (LB) liquid media,
266 prepared from its components (5 g yeast extract, 10 g tryptone and 10 g sodium chloride in
267 1 L ultra-pure DI water), and Mueller-Hinton (MH) liquid media (21 g premixed MH in 1
268 L ultra-pure DI water) were used to grow *E. coli* and *P. aeruginosa*, respectively (12, 55,
269 56). LB agar media (40 g premixed LB agar in 1 L ultra-pure DI water) and MH agar media
270 (38 g premixed MH agar in 1 L ultra-pure DI water) were used to enumerate the colony
271 forming units (CFUs) of *E. coli* and *P. aeruginosa* strains, respectively. Phosphate Buffered
272 Saline (PBS) solution was used to wash the cells to remove the chemicals and antibiotics

273 before plating them on agar media. Concentrations of 5 µg/mL ofloxacin and 200 µg/ml
274 ampicillin were used for persister assays (12). MIC ranges for *E. coli* MG1655 were found
275 to be 3.125-6.25 µg/ml for ampicillin and 0.039-0.078 µg /ml for ofloxacin by using a
276 method based on serial 2-fold dilutions of antibiotics in 2 ml LB media in 14 ml test tubes
277 (13). MIC range for *P. aeruginosa* (PA01) were found to be 0.3125-0.625 µg/ml for
278 ofloxacin. For selection and retention of plasmids in bacteria, 50 µg/ml kanamycin was
279 added in culture media (12). To induce fluorescent protein expression, 1 mM IPTG was
280 used (12). Primary drug screening was performed using Phenotype MicroArrays (PM11-
281 20) in 96-well plate formats, containing various chemicals including FDA approved
282 compounds (Biolog Inc., Hayward, CA). Eleven chemicals, identified as initial hits, were
283 purchased separately for further investigation: amitriptyline hydrochloride (Fisher
284 catalog#50-144-4347), trifluoperazine hydrochloride (Fisher catalog#T28495G),
285 thioridazine hydrochloride (Fisher catalog#30-705-0), chlorpromazine hydrochloride
286 (Fisher catalog#C24815G), CCCP (Fisher catalog# 04-525-00), protamine sulfate (Fisher
287 catalog# AAJ6292609), promethazine hydrochloride (Fisher catalog#P2029100G),
288 dodecyltrimethyl ammonium bromide (Fisher catalog# D146825G), triclosan (Fisher
289 catalog# 64-795-01GM), polymyxin B Sulfate (Fisher catalog# 52-915-GM) and poly-L-
290 lysine hydrochloride (VWR catalog# IC15269080). All chemicals were dissolved in ultra-
291 pure DI water followed by filter-sterilization, except for CCCP and triclosan which were
292 dissolved in DMSO. All LB and MH media were sterilized by autoclaving. Overnight pre-
293 cultures were prepared in 14-ml falcon tube containing 2 ml LB broth inoculated from a
294 25% glycerol (-80 °C) cells stock and grown for 24 h at 37 °C with shaking (250 rpm).
295 Overnight pre-cultures were diluted in fresh 2 ml media in 14-ml test tubes or 25 ml media
296 in 250-ml baffled flasks for the subsequent assays as describe below. Cells cultured in the

297 presence of the solvent (DI water or DMSO) served as controls when the cultures were
298 treated with chemical inhibitors.

299 **Cell Growth and Persister Assays**

300 Overnight pre-cultures were diluted 1000-fold in 2 ml fresh LB media in test tubes and
301 grown at 37 °C with shaking. Cell growth was monitored up to 24 hours by measuring
302 optical density at 600 nm wavelength (OD₆₀₀) with a plate reader (Varioskan LUX
303 Multimode Microplate Reader, ThermoFisher, Waltham, MA) for selected time points.
304 Cells were treated with chemicals at early-stationary (t=5 h) when required. At late-
305 stationary phase (t=24 h), cells were diluted in 2 ml fresh media (yielding ~5x10⁷ cells/ml)
306 with antibiotics (5 µg/ml ofloxacin or 200 µg/ml ampicillin) in test tubes and incubated at
307 37 °C with shaking. At designated time points (t=0, 1, 2, 3, 4, 5 and 6 h), 100 µl samples
308 were collected and washed with PBS to dilute the antibiotics to sub-MIC levels, followed
309 by resuspension in 100 µl of PBS. Ten microliters of the cell suspension were serially
310 diluted and plated on LB agar media to enumerate CFUs. The remaining 90 µl cell
311 suspensions were also plated to increase the limit of detection. The agar plates were
312 incubated at 37 °C for 16 h, which was found to be sufficient for *E. coli* colony formation
313 (data not shown). The procedures described above were repeated using 250 ml-baffled
314 flasks with 25 ml media to determine the effects of culture volume, aeration and mixing on
315 cell growth and persistence. We did not see significant differences between the results of
316 flask and test tube experiments (data not shown).

317 **Redox Sensor Green Dye Staining**

318 Stationary-phase reductase and electron transport chain activities were measured with
319 Redox Sensor Green (RSG) dye (ThermoFisher, catalog# B34954) according to
320 manufacturer's instructions. Cells at late-stationary phase (t=24 h) were diluted 100-fold in
321 1 ml PBS in flow cytometry tubes (5 ml round bottom falcon tubes, size: 12×75 mm) and

322 stained with RSG at 1 μ M concentration. For negative controls, CCCP (10 μ M) was added
323 in the cell suspensions 5 minutes before RSG staining to disrupt membrane electron
324 transport. Mid-exponential-phase cells were used as positive controls (26, 43). Samples
325 were incubated at 37 °C for 10 minutes before analyzing with a flow cytometer (NovoCyte
326 Flow Cytometer, NovoCyte 3000RYB, ACEA Biosciences Inc., San Diego, CA). Forward
327 and side scatter parameters of unstained controls were used to gate the cell populations on
328 flow diagrams. Cells were excited at 488 nm with solid-state laser, and green fluorescence
329 was collected with a 530/30 bandpass filter. To analyze the effect of chemical inhibitors
330 (e.g., chlorpromazine) on stationary-phase-cell metabolism, cells at early-stationary phase
331 ($t=5$ h) were treated with the chemicals at indicated concentrations, and RSG staining was
332 performed at $t=24$ h as described above.

333 **Monitoring Cell Division and Quantifying VBNC Cells**

334 To monitor cell division and quantify non-growing cell subpopulations, inducible
335 fluorescent protein (mCherry) expression systems were used. Overnight pre-cultures of *E.*
336 *coli* MO strain were diluted 1000-fold in 2 ml LB media with 1 mM IPTG (to induce
337 *mCherry*) in test tubes and grown as described. We previously showed that mCherry
338 expression cassette or overexpressing mCherry did not affect the *E. coli* persistence (12, 14,
339 26). If necessary, cells at early-stationary phase ($t=5$ h) were treated with chemical inhibitors
340 (e.g., chlorpromazine) at indicated concentrations. At $t=24$ h, mCherry-positive cells were
341 collected, washed twice with PBS to remove the IPTG, resuspended in 25 ml fresh LB media
342 without inducer in 250 ml baffled flasks and cultured at 37 °C with shaking. At designated
343 time points ($t= 0, 1, 2,$ and 2.5 h), cells were collected, washed and resuspended in PBS to
344 measure their fluorescent protein content with a flow cytometer. When necessary, cells were
345 further diluted in PBS to reach a desired cell density for the flow analysis (10^6 - 10^7 per ml).
346 Cell division was monitored by measuring the dilution rate of fluorescent protein at single

347 cell level. At $t=0$ h, all cells exhibited a high level of red fluorescence, which declined as
348 the cells divided, except in a small subpopulation whose fluorescence remained constant
349 due to the lack of division ($t=2.5$ h). Given that ampicillin only targets the proliferating cells,
350 the cultures were further challenged with ampicillin (200 $\mu\text{g/ml}$) to quantify VBNC and
351 persister cells in non-growing cell subpopulations. Using LIVE/DEAD staining, FACS and
352 clonogenic survival assays, we previously showed that antibiotic sensitive cells were rapidly
353 lysed by ampicillin while VBNC and persister cells remained intact (14). The intact cells
354 were quantified using the volumetric-based cell counting feature of the NovoCyte Flow
355 Cytometer. Persisters were quantified by enumerating the CFUs after plating the ampicillin
356 treated cultures as described above. Intact cells that did not form colonies on standard
357 medium were classified as VBNC cells (14, 21–25). All samples were assayed with lasers
358 emitting at 561 nm and red fluorescence was collected by 615/20 nm bandpass filter.

359 **Fluorescent Protein Degradation Assay**

360 Overnight pre-cultures of *E. coli* MG1655 harboring pQE-80L-*ssrA-gfp* were inoculated
361 (1:1000) in 2 ml LB in test tubes, grown in the presence of IPTG (to induce *ssrA* tagged
362 *gfp*) until the early stationary phase ($t=5$ h). Then, the cells were washed to remove the
363 inducer, resuspended in filter-sterilized 2 ml spent medium (obtained from cultures grown
364 under identical conditions without the inducer) and cultured in test tubes at 37 °C with
365 shaking. When necessary, cell suspensions were treated with chemical inhibitors. At
366 designated time points, 200 μl samples were collected to measure their GFP levels with a
367 plate reader. Excitation and emission wavelengths for GFP detection was 485 nm and 511
368 nm, respectively.

369 **Chemical Screening**

370 Early-stationary-phase cells expressing *ssrA*-tagged GFP (grown in 25 ml LB with IPTG in
371 250 ml baffled flasks) were washed, resuspended in spent medium (without inducer),

372 transferred to 96-well PM plates (100 μ l per well) containing the chemical library, covered
373 with sterile, oxygen-permeable sealing membranes, and cultured in a shaker at 37 °C and
374 250 rpm. GFP levels were monitored for 4 h (which was found to be sufficient) using a plate
375 reader, with cells cultured in the presence of the solvent serving as the negative controls,
376 and those with chlorpromazine as a positive control. GFP measurements taken at 4 h were
377 normalized to those taken at 0 h to eliminate any variations in initial cell concentrations. Z-
378 score method, calculated from the mean and the standard deviation of all measurements
379 within the plate (31) was used to determine initial hits:

$$380 \quad Z - score = \frac{X_i - \bar{X}}{S_X}$$

381 where X_i is the measurement (normalized) of the i^{th} compound, \bar{X} and S_X are the mean and
382 the standard deviation of all measurements. An absolute Z-score of ≥ 2 , which correlates to
383 a P-value of 0.045 (32), was assumed to be the threshold for hit detection. We note that each
384 plate contains four different concentrations for each compound (information on these
385 concentrations not disclosed by the company). Z-scores were calculated for each
386 concentration set. The initial hits were selected among the chemicals that successfully
387 inhibited GFP degradation (Z-score ≥ 2) with at least two different concentrations.

388 Assay validation was evaluated by Z-factor calculated from the mean and standard deviation
389 values of the positive (p) and the negative (n) control plates, as follows:

$$390 \quad Z - factor = 1 - 3 \times \frac{(S_p + S_n)}{|\bar{X}_p - \bar{X}_n|}$$

391 A Z-factor between 0.5 and 1.0 indicates that the proposed assay is robust and reliable (57).

394 **Validating the Selected Chemicals**

395 To fully assess their utility and effectiveness, the selected chemical hits were analyzed at
396 various concentrations with the aforementioned assays. Overnight pre-cultures of *E. coli*
397 strains (WT, MO or cells expressing *ssrA* tagged *gfp*) were inoculated (1:1000) in 2 ml LB
398 (IPTG added for the cells harboring inducible fluorescent proteins) in test tubes and cultured
399 as described. Cells at $t=5$ h were treated with chemicals at indicated concentrations.
400 Fluorescent protein degradation assays throughout the stationary phase after the treatments
401 were performed for the cultures of *E. coli* cells expressing SsrA tagged GFP; persister and
402 cell survival assays at late-stationary phase ($t=24$ h) were performed for WT cultures; and
403 finally, cell division assays at late-stationary phase were performed for the *E. coli* MO
404 cultures.

405 ***Pseudomonas aeruginosa* Persister Assay**

406 Overnight pre-cultures of *Pseudomonas aeruginosa* (PA01) were inoculated (1:1000) in 2
407 ml MH broth in test tubes and cultured as described before. At early stationary phase ($t=5$
408 h), cells were treated with chemicals at indicated concentrations. At $t=24$ h, cells were
409 washed to remove chemicals and inoculated (1:100) in 1 ml MH broth followed by ofloxacin
410 (5 $\mu\text{g/ml}$) treatment. At $t=0$ (before ofloxacin treatments), ten microliter cell suspensions
411 were serially diluted and spotted on MH agar media to enumerate initial CFUs, which
412 enables us to assess the impacts of chemical treatments on *P. aeruginosa* (PA01) cell
413 viability. To enumerate persister levels at $t=6$ h, ofloxacin treated cultures were washed,
414 serially diluted and plated on MH agar media to incubate 20 h at 37 °C. Twenty-hour
415 incubation was found to be sufficient for *P. aeruginosa* (PA01) colony formation (data not
416 shown).

417

418 **Statistical analysis**

419 Two tailed t-test with unequal variances was used to evaluate the statistical significance,
420 where $P < 0.05$ (55). At least three independent biological replicate was performed for all
421 experiments. All data points on linear-scale graphs indicate mean value \pm standard error;
422 however, for logarithmic-scale graphs, standard deviations were used to better represent the
423 error bars.

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574 M.A.O. analyzed the data and wrote the paper.

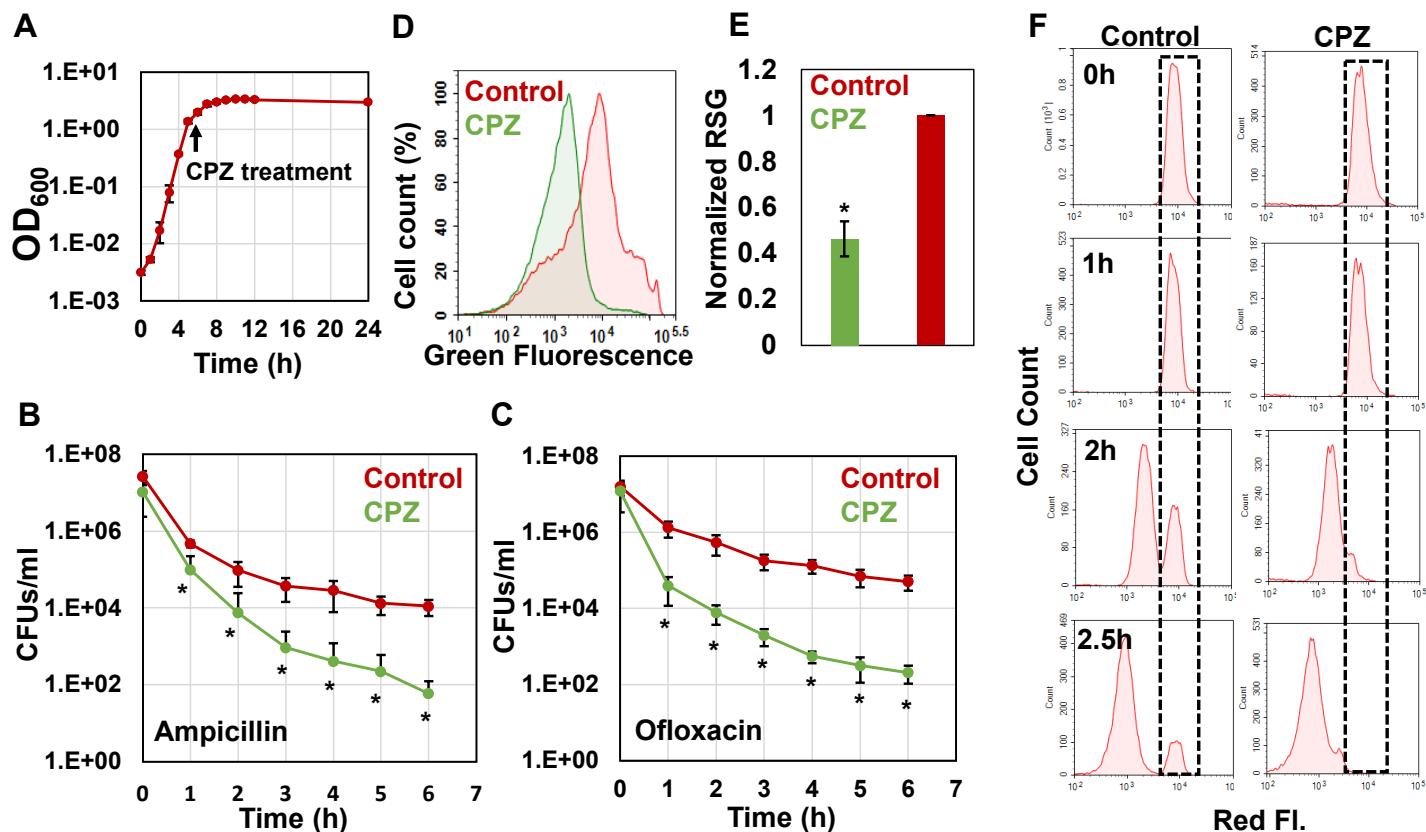
575 **Competing Interests.** The authors declare no competing interests.

576 **Data and materials availability.** Data provided in this paper including supplementary
577 materials are sufficient to assess the findings of this paper. Additional data of this paper can
578 be obtained upon request.

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580

581 FIGURES



582

583 **Fig. 1. Chlorpromazine (CPZ) treatment reduced stationary-phase persistence, redox**
 584 **activities and non-growing cell formation.**

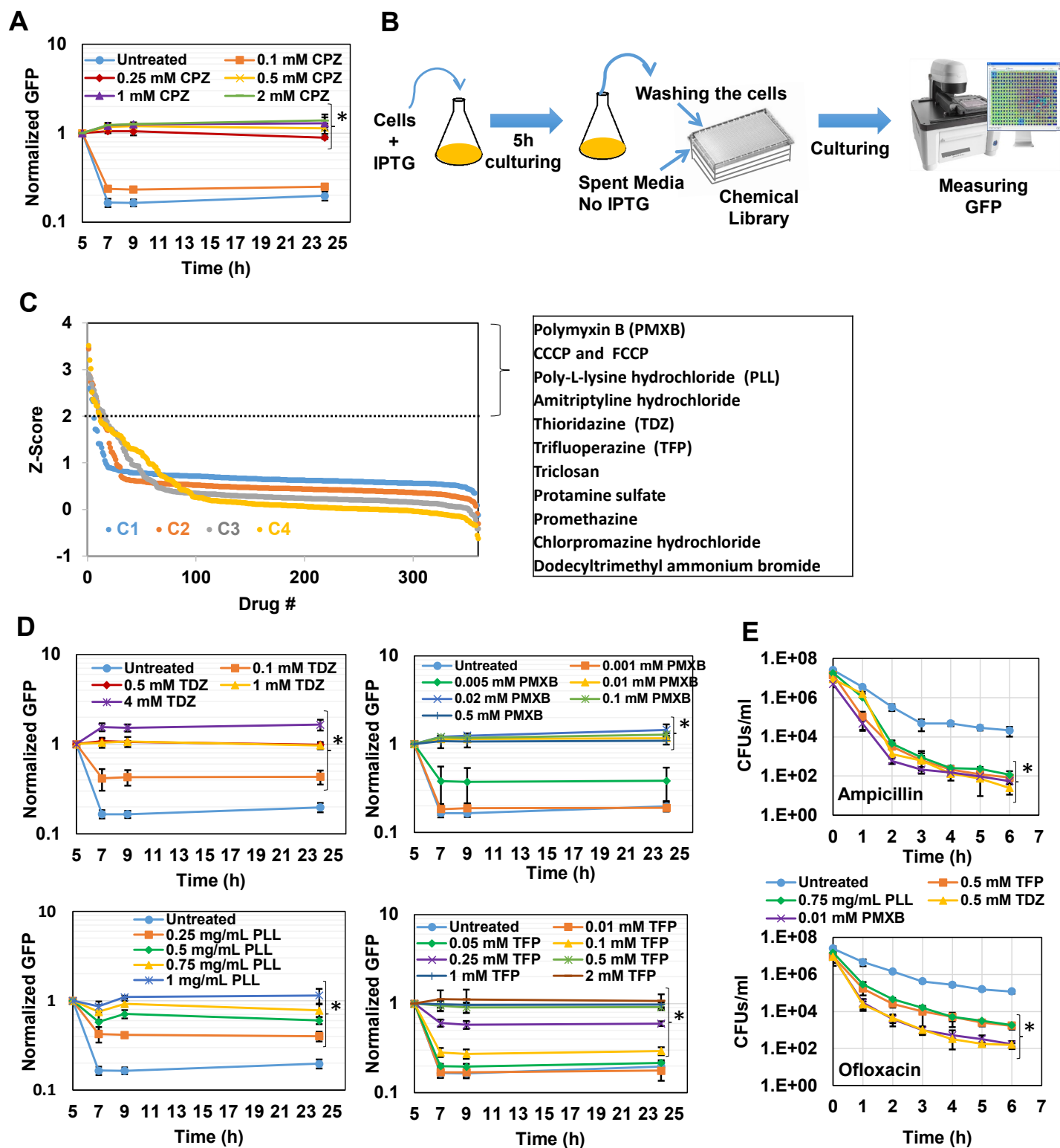
585 **(A)** CPZ treatment. Early-stationary-phase cells (t=5h) were treated with 0.25-mM CPZ or left
 586 untreated (control); cells in late-stationary phase (t=24h) were then washed to remove inhibitors to
 587 measure persister and non-growing cell levels as well as cellular redox activities. Cell growth was
 588 monitored with OD₆₀₀ measurements.

589 **(B-C)** Persister levels of CPZ-treated cultures. Untreated or CPZ-treated cells in late-stationary
 590 phase (t=24h) were washed to remove chemicals and resuspended in fresh media with antibiotics
 591 for persister quantitation (Number of biological replicates, N=6).

592 **(D-E)** RSG staining of CPZ-treated or untreated late-stationary-phase cells. Untreated or CPZ-
 593 treated cells in late-stationary phase (t=24h) were washed to remove the chemicals, and resuspended
 594 in PBS to stain with RSG (N=6).

595 **(F)** Non-growing cell levels in CPZ-treated cells. Early-stationary-phase cells (harboring an IPTG
596 inducible mCherry expression cassette) were treated with 0.25-mM CPZ or left untreated (control)
597 at t= 5h in the presence of IPTG; cells in late-stationary phase (t=24h) were washed to remove the
598 chemicals and diluted in fresh media without inducer. Division at the single-cell level was
599 monitored by flow cytometry during exponential-growth phase. A representative biological
600 replicate is shown here. All 3 biological replicates consistently resulted in similar trends.

601 *: Statistical significance between control (untreated) vs. CPZ treatment group at indicated time
602 points or conditions ($P < 0.05$, two-tailed t-tests with unequal variances).



603

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Fig. 2. High-throughput drug screening detected chemical compounds that inhibit

605

persistence.

606 **(A)** Inhibition of GFP degradation with CPZ treatment at indicated concentrations. Cells expressing
607 pQE-80L*gfp-ssrA* were grown to stationary phase (t=5h) in the presence of IPTG (inducer) and then
608 re-suspended in a filter-sterilized spent medium (without inducer and obtained from the cultures
609 grown under identical conditions) and immediately treated with CPZ to inhibit cell metabolism and
610 protein degradation. Green fluorescence levels were measured and normalized to their initial levels
611 (t=5h, before CPZ treatment) to determine GFP degradation. Background fluorescence was
612 determined using cells with empty vectors (N=3).

613 **(B)** High-throughput drug screening approach to identify chemical compounds that inhibit GFP
614 degradation. Stationary-phase bacterial cells expressing *ssrA*-tagged GFP were re-suspended in
615 spent medium, without inducer, transferred to 96-well PM plates containing the chemical library,
616 covered with sterile, oxygen-permeable sealing membranes, and cultured in a shaker for 4h. GFP
617 measurements taken at 4 h were normalized to those taken at 0 h (after transferring the cells to
618 plates).

619 **(C)** The Z-scores calculated for the chemical compounds at four different concentrations ($C_4 > C_3 >$
620 $C_2 > C_1$). Note that these concentrations were not disclosed by Biolog, Inc. The initial hits tabulated
621 were selected among the chemicals that have Z-scores ≥ 2 with at least two different concentrations.

622 **(D-E)** Inhibition of GFP degradation and persistence by the identified drugs. The selected hits were
623 analyzed in depth at various concentrations to select the drugs that can reduce GFP degradation and
624 persistence without affecting the *E. coli* cell viability. Cells were treated with these drugs at early
625 stationary phase (t=5h) at indicated concentrations, and then, GFP measurements were performed
626 at indicated time points. Persister assays were performed at late stationary phase (t=24h) (N=3).

627 *: Statistical significance between drug-treated vs. untreated cultures at last three time points
628 ($P < 0.05$, two-tailed t-tests with unequal variances).

629 CPZ: Chlorpromazine; PMXB: Polymyxin B; PLL: Poly-L-lysine; TDZ: Thioridazine; TFP:
630 Trifluoperazine.

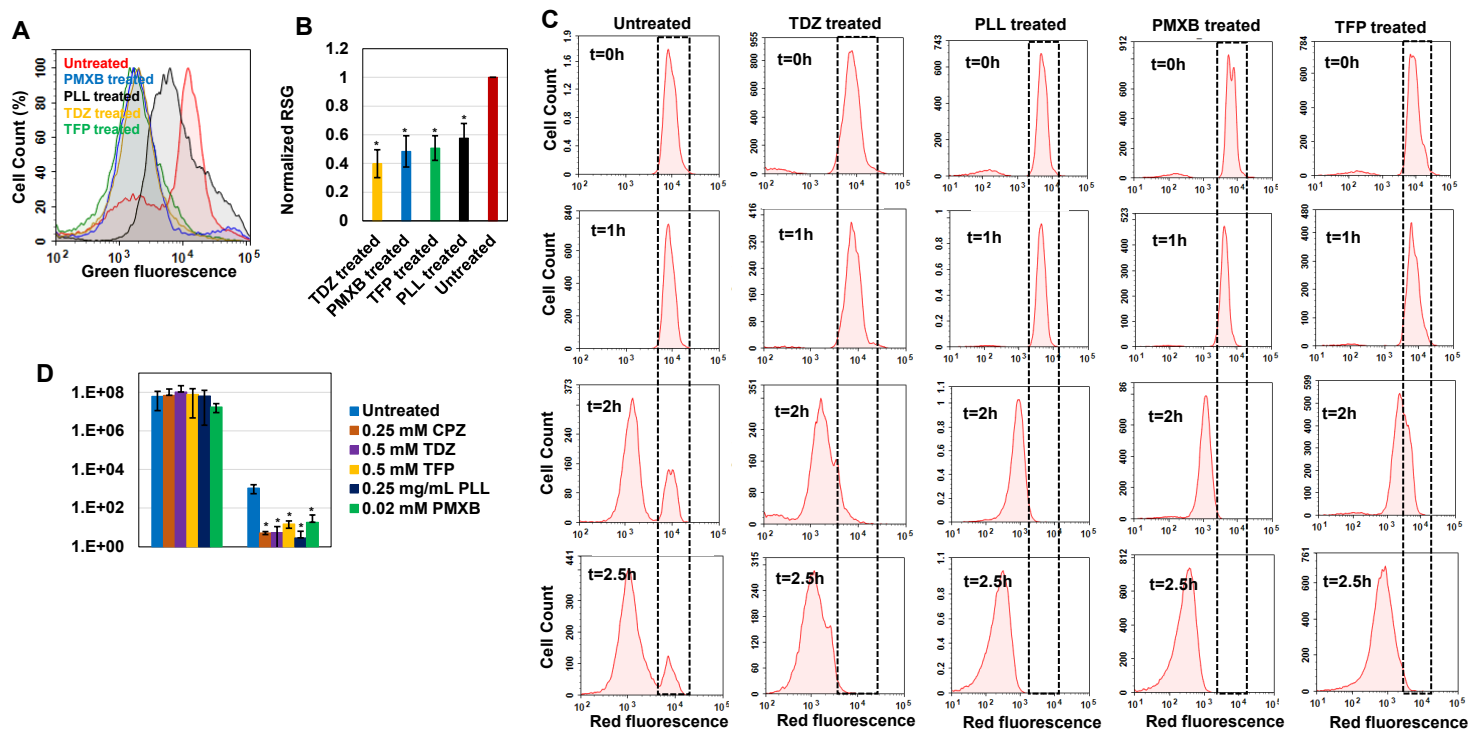


Fig. 3. Drug treatments reduced stationary-phase redox activities and non-growing cell formation.

(A-B) RSG staining of drug-treated CPZ or untreated late-stationary-phase *E. coli* cells. Cells were treated with the drugs at early stationary phase (t=5h), and RSG staining was performed at late-stationary phase (t=24h). Drug concentrations: 0.5 mM Thioridazine (TDZ); 0.75 mg/ml Poly-L-lysine (PLL); 0.01 mM Polymyxin B (PMXB); 0.5 mM Trifluoperazine (TFP) (N=6).

(C) Non-growing cell levels in drug-treated *E. coli* cultures. A representative biological replicate is shown here. All 3 biological replicates consistently resulted in similar trends. Drug concentrations are the same as those provided in panels A-B.

(D) Persister levels in *P. aeruginosa* cultures treated with the chemical hits. Early-stationary-phase cells (t=5h) were treated with the selected drugs or left untreated (control); cells in late stationary phase were then washed to remove inhibitors and re-suspended in fresh media with ofloxacin (effective for *P. aeruginosa*) (58) for persister assays. Cells were plated for CFU enumeration before and after the ofloxacin treatments to assess the effects of drugs on *P. aeruginosa* cell viability and persistence, respectively (N=6).

647 *: Statistical significance between drug-treated vs. untreated cultures ($P < 0.05$, two-tailed t-tests
648 with unequal variances).

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