

## Bacterial Swarming as a Protective Response to Intestinal Stress

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**Abstract:**

Bacterial swarming is a conserved and distinct form of bacterial motility that is often oppositely  
35 regulated and antagonistic to biofilm formation(1). To-date, while bacterial biofilms have been  
associated with pathogenesis and pathobiology of human diseases(2-4), there are very few  
examples of swarming behaviors that uniquely define or align with human pathophysiology(5-7).  
Here we report that swarming bacteria protects against intestinal inflammation in a murine model  
of colitis. Using feces in soft-agar plate assay we showed bacterial spreading harboring swimmers  
40 is highly predictive of the presence of intestinal stress in mice, pigs and humans. From murine  
feces, we isolated a novel *Enterobacter* swarming strain, SM3, which demonstrated significant  
protection from intestinal inflammation and promoted restitution in DSS-induced colitic mice.  
Known commensal swimmers also protected against intestinal inflammation when compared to  
swarming deficient isogenic mutants. Mechanistically, SM3 significantly reduced luminal oxygen  
45 concentration in colitic mice leading to a favorable anaerobic environment conducive to the growth  
of beneficial anaerobes. This work identifies a new paradigm in which intestinal stress, specifically  
inflammation, allows for emergence of swarming bacteria, which in turn has the ability to protect  
and heal from intestinal inflammation.

50 **One Sentence Summary:**

Bacterial swarming reduce intestinal inflammation.

## Main Text:

Swarming, driven by flagella, is a fundamental process in certain groups of bacteria characterized  
55 by collective and rapid movement across a surface(8, 9). This process offers bacteria a competitive  
advantage in occupying certain niches (e.g., seeding colonization)(10); however, the cost-benefits  
to bacteria(11, 12) and consequences to its host or the environment remain largely unknown(7).  
Here we show that bacterial swarming is a hallmark of a stressed intestine. When swarming  
bacteria are present in sufficient abundance, the act of swarming *per se* suppresses intestinal stress  
60 in mammals. We posit that this occurs via the creation of a conducive anaerobic environment that  
leads to induction of beneficial anaerobes, which are associated with mucosal healing.

To test whether bacterial swarming is associated with human and rodent gut health, we developed  
a modified swarming assay using feces based on an established soft-agar plate assay utilized for  
single species(13). Since prototypical swarming bacteria (e.g., *Proteus mirabilis*, *Pseudomonas*  
65 *aeruginosa*) are associated with virulence(7, 14), we surmised that bacterial swarming might be  
well represented in colonoscopy samples and feces from humans with bacterial virulence  
associated pathologies (e.g., intestinal inflammation)(15). Colonoscopy aspirates were obtained  
from individuals with an active illness (inflammatory bowel disease - Crohn's and ulcerative colitis  
and other common forms of intestinal stress like intestinal polyps(16, 17) as well as age and gender  
70 matched controls (those without a clinically active illness). Within our sampling pool, bacterial  
collective spreading on soft agar was over-represented in cases with overt or clinically active  
intestinal stress (Fig. S1a-b). As a preliminary assessment, the presence of bacterial swimmers in  
feces was judged by the bacterial spread with a surfactant layer on soft-agar followed by isolation,  
identification by MALDI-TOF and validation of its swarming motility (Table S1). Nevertheless,  
75 this approach might have precluded selection of swimmers that do not produce surfactant(8). In

this pilot evaluation, the specificity and positive predictive value of the test for disease as defined was approximately, 88 and 89 %, respectively, while the sensitivity and negative predictive value of the test was only approximately 56 and 52 %, respectively (Fig. S1c). Similarly, feces collected from pigs with active inflammatory bowel disease also showed an increased prevalence of collective spreading and swarming as compared to control pigs (Fig. S1d). Together, these pilot data indicate that collective spreading and swarming is a specific feature, and potentially a biomarker of an intestinal pathology as defined by harboring active intestinal inflammation or polyps.

To identify the relevance of swarmers on host health, we focused on isolating endogenous swarming bacteria residing in rodents and humans. An initial approach was to determine if a singular dominant swarming species could always be isolated from a polymicrobial culture (such as mammalian feces). In a competitive swarming assay a mix of different pure bacterial cultures gave rise to a single bacterial species populating the leading edge of the swarm colony on agar (Fig. S2a-b). Similarly, swarming assays using pooled mouse or individual human feces yielded single species of a dominant swarmer as identified by MALDI-TOF (Table S1; Fig. S1e). To test whether swarming bacteria are also present in preclinical models, we screened feces of mice exposed to DSS, a chemical colitogen causing acute colonic inflammation(18, 19). In a single experiment, we found three identical isolates from two different mouse fecal specimens- Strain 1 from mice exposed to water and, Strain 2 and 3 from mice exposed to dextran sulphate sodium (DSS), respectively (Fig. 1a). Swarming (in feces) was uniformly absent in vehicle exposed mice (Fig. S1e). The edge of the swarm colonies (as marked on Fig. 1a) were picked, serially passaged twice on 1% agar from a single colony and subsequently re-tested for swarm behavior on 0.5% agar plates (Fig. 1b). Strain 3 swarmed significantly faster compared to Strain 1 and 2.

100 Interestingly, 16S rRNA gene analysis and Multi Locus Sequence Typing (Fig. 1c) identified the isolated strains to be closest to *Enterobacter asburiae*. A whole genome sequence comparison of these *Enterobacter* strains (Fig. 1d) with related taxa *Enterobacter asburiae* and *Enterobacter cloacae*, revealed that all the three strains isolated here were “nearly identical” (>99% identical, Supplementary Discussion) and phylogenetically distinct from the reference strains. Taken together, using an agar-based assay to isolate dominant swarmers from a heterogenous culture, we  
105 were able to isolate nearly identical strains with striking difference in their swarming potential. Strain 1 (*Enterobacter* sp. SM1) originated from feces of vehicle (water) treated mice, while strain 2 (*Enterobacter* sp. SM2) and strain 3 (*Enterobacter* sp. SM3) originated from feces of DSS-induced colitic mice. Interestingly, a quantitative PCR sequencing-based approach to specifically identify SM1 or SM3 like bacteria in feces showed increase in its abundance during the evolution  
110 of DSS-induced colitis. The proportion of mice with high copy number values (>10,000 DNA copy/ $\mu$ L PCR reaction) was significantly higher in DSS group than water only group (Fig. S1f).

To determine the functional consequence of bacterial swarming in the host, DSS-induced colitic mice were administered the “near identical” swarming competent SM1 or SM3 strains. Both strains possess same growth rate and swim speed; however, unlike SM1, SM3 is a hyperswarmer  
115 (Fig. S3a-e; Supplementary Video 1). In contrast to that observed with SM1, SM3 significantly protected mice from intestinal inflammation (Fig. 2a-f). Specifically, SM3 significantly protected from body weight loss (Fig. 2a), increased colon length (Fig. 2b), reduced the colonic inflammation score (Fig. 2d), and had reduced expression of pro-inflammatory mediators compared to vehicle treated colitic mice (Fig. 2e-f). To test the mucosal healing capacity of  
120 swarming bacteria, we administered strains SM1 and SM3 to mice during the recovery phase of DSS exposure(20). When compared to vehicle, SM3 significantly improved weight gain and colon

length with reduced total inflammation and fibrosis at microscopic level (Fig. S4). To compare strict isogenic strains that only differed in swarming potential but not growth rate, surfactant production, or swimming speed (Fig. S3f-j), SM3 and isogenic mutants (SM3\_18 and SM3\_24) were administered to mice exposed to DSS. SM3, but not the swarming deficient mutants (SM3\_18 and SM3\_24), showed significant protection against weight loss, colon length and inflammation (Fig. 2g-i). Together, these data indicated that swarming *per se* is necessary for anti-inflammatory activity by SM3.

To determine if the anti-inflammatory role of SM3 is dependent on the conventional intestinal microbiome composition, germ-free mice transferred to specific pathogen free conditions (GF/SPF) and exposed to DSS-induced colitis, were treated with SM3. This strain was unable to protect against intestinal inflammation in GF/SPF mice (Fig. 3a). Fecal samples of colitic mice (conventional and GF/SPF) with SM3 administered were sent for microbiota analysis using 16S rRNA gene profiling. In contrast to GF/SPF mice, conventional mice feces showed specific enrichment of anaerobes belonging to the family S24-7 and Lactobacillaceae within SM3 treated mice when compared to vehicle mice (Fig. 3b). Specifically in conventional mice, we found significant increase in the abundance of S24-7 with SM3 gavage compared to vehicle in DSS exposed mice (Fig. 3c). SM3 does not affect the microbiota of non DSS treated mice, and the levels of S24-7 bacteria remains stable in SM3 treated group compared with untreated group (Fig. 3c). Within DSS exposed conventional mice, we observed that enriched S24-7 negatively co-occurred with pathogenic taxa such as the Peptostreptococcaceae and Enterobacteriaceae (Fig. 3d).

The enrichment of certain specific anaerobes when treated with SM3 suggests a reduction in oxygen content in the intestine, however, during inflammation the median oxygen concentration increases (Fig. S5b). Swarming behavior of SM3 is dependent on oxygen concentration (Fig. S5a),

145 which in turn creates a reduced immediate environment at a significantly higher rate than the slow  
swarming variants (Fig. S5d). We hypothesized that swarming activity of SM3 may also reduce  
luminal oxygen concentrations *in vivo*. We determined the oxygen concentrations within the  
intestinal lumen of mice at various lengths along the colon. In control conventional C57BL/6 mice,  
the colonic lumen is uniformly “hypoxic and/or anoxic”; however, in colitic mice, we found a  
150 significant increase in the oxygen levels (ppm) in the colonic lumen (measured at different lengths  
from 0.5 to 2 cm proximal to the anal verge) (Fig. S5b). SM3 significantly reduced oxygen  
concentration compared to controls (vehicle); SM1 and the swarming deficient mutant strains did  
not significantly affect oxygen concentrations compared with controls (Fig. S5c). These results  
show that SM3, a hyperswarmer relative to SM1, but not swarming deficient strains or less  
155 dominant swimmers (i.e. SM1), consume oxygen rapidly. This may likely suggest that swarming  
activity *in vivo* reduces the oxygen content in the colonic lumen, which would aid in establishing  
an anaerobic (micro)environment.

To generalize this concept across multiple strains, mice with DSS induced colitis were  
administered *B. subtilis* 3610 (wildtype)(21) or its swarming deficient *swrA* isogenic mutant  
160 DS215(22) using the identical protocol as that used for SM3. In comparison with strain DS215,  
the wildtype significantly protected mice from intestinal inflammation (Fig.4a-e). Similarly,  
swarming *Serratia marcescens* Db10, in contrast to the swarming deficient JESM267 isogenic  
mutant, protected against inflammation in the identical mouse model (Fig. 4f-h). Incidentally, a  
clinical strain of *S. marcescens* (isolated from the surface washing of a human dysplastic polyp)  
165 also protected against DSS induced inflammation in mice (Supplementary Discussion). Similar to  
SM3, the swarming strains of *Bacillus* and *Serratia* deplete oxygen significantly faster than the  
isogenic non-swarming strains (Fig. S5e-f). These data suggest that a common mechanism might  
exist among swimmers, in that, via depletion of local oxygen concentrations they all induce a

favorable anaerobic environment. In addition, considering that the intestinal mucosa is relatively  
170 uneven during inflammation due to loss of mucin(23), we conjectured that swimmers may have an  
added advantage in niche dominance on inflamed tissue. Indeed, a mucosal race assay  
(Supplementary Discussion) showed that swarming bacteria finds advantage in motility on a colitic  
mucosa compared to normal mucosa (Fig. S6, Supplementary Video 2-4).

Together these studies demonstrate that intestinal inflammation promotes a niche conducive for  
175 bacterial swarming. The inflammatory milieu provides a permissive environment for stress  
adaptation and swarming behavior. Provided sufficient colonies form during inflammation,  
swarming strains deplete luminal oxygen content and allow for the intestine to re-establish  
conditions conducive to the growth of beneficial anaerobes. Consequently, swarming behavior  
could in turn suppress host inflammation by re-establishing homeostatic anaerobiosis in the gut  
180 (Fig. S7). Furthermore, our studies demonstrate the potential for a new personalized “probiotic”  
approach stemming from the ability to isolate and bank swarming microbes during colitis flares.  
These could be stored and provided back to the same individuals to prevent colitic episodes or as  
a therapeutic during acute colitis. In summary, our work demonstrates the unique and  
unprecedented role that bacterial swarming plays in intestinal homeostasis and in the potential  
185 clinical treatment of inflammatory bowel diseases.



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425 designed and executed the swarming assays. D.L. was the Principal Investigator of the Clinical  
Study and provided specimens. L.K. performed genome assembly and annotation. J.W., R.L., S.M.  
designed and executed all the 16S, metagenomic and strain-specific PCR assays. A.D. designed;  
A.D., W.C., S.M., S.G. characterized bacterial mutants. B.S.Y. and M.V-K. performed several  
swarming repeat assays and performed animal studies for reproducibility. A.D., H.L., W.C. and  
430 S.M. wrote and edited the paper. S.C. and W.C. performed statistical analyses. X.L. assisted H.L.  
in mouse model studies. A.B. analyzed the clinical data and revised the paper. K.S. did the  
histological preparations and examination. C.J. and Z.H. performed gnotobiotic mouse model  
studies. W.S. identified bacteria strains using MALDI-TOF.

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### Supplementary Materials:

Supplementary Text

440 Materials and Methods

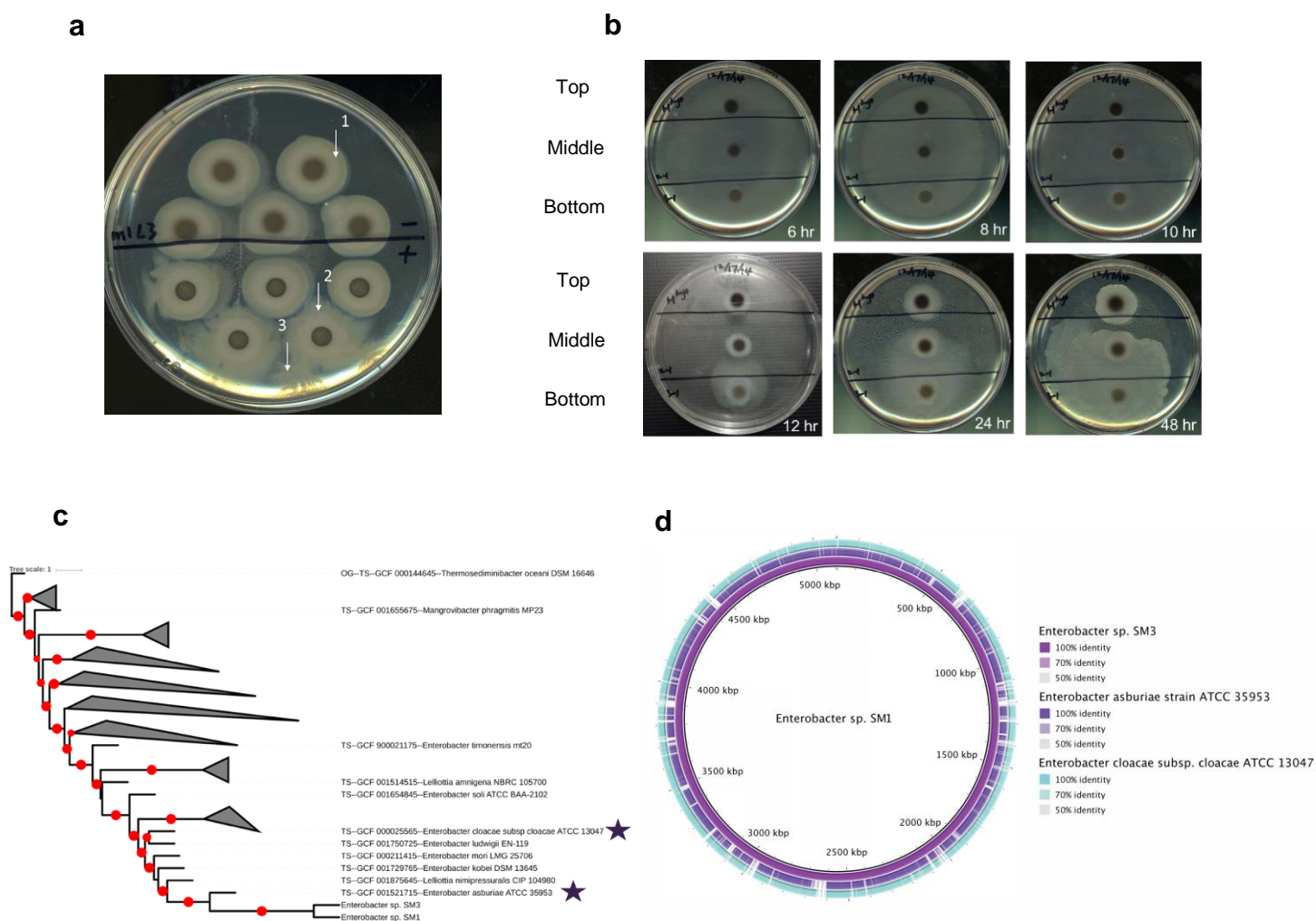
Figures S1-S17

Tables S1-S5

Supplementary video 1-6

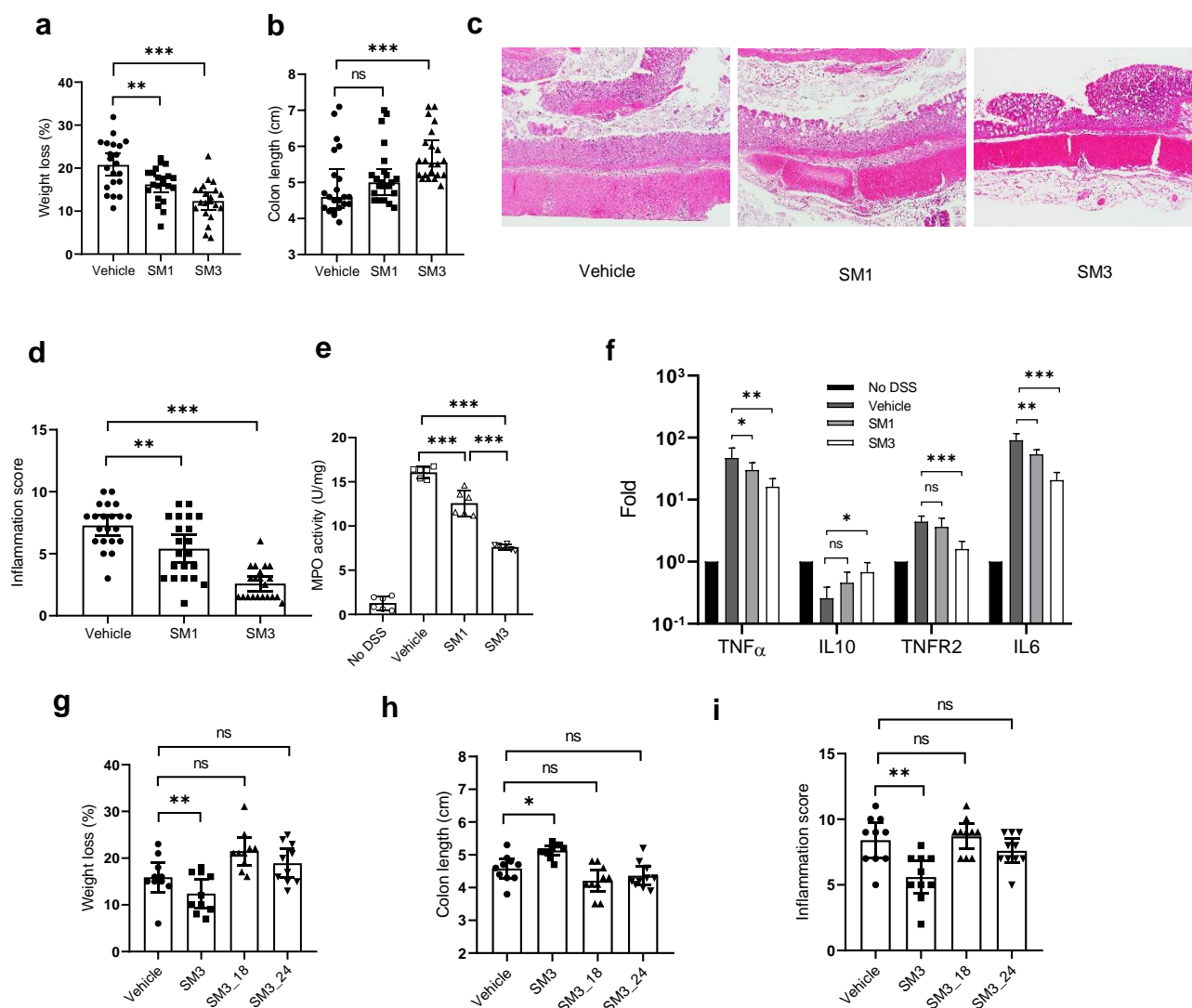
References (24-92)

**Figure 1**



**Figure 1 | Isolation and characterization of *Enterobacter* sp. a**, Five replicate fecal spots from pooled fecal pellets of mice administered water (above black line) or 3% DSS water (below black line) ( $n = 3$ , day 7). The white arrows indicate 1, swarm edge isolation from control feces (SM1); 2, swarm edge isolation from feces of mice exposed to DSS (SM2); 3, swarm colony isolation from spontaneous “burst” activity from feces at 24h from plating (SM3). The mouse experiments were repeated at least twice. **b**, The bacterial clones isolated from **a** were replated as pure strains on 0.5% LB agar and the swarming assay performed over time. Two solid black marker lines divide each plate into 3 regions, holding spots of the 3 strains – Top: Strain 1 (SM1), Middle: Strain 2 (SM2), Bottom: Strain 3 (SM3). These strains have been repeatedly ( $\geq 25$  times) plated in swarming assays from all aliquots stored from the original isolation (August 2014) and the results confirm that SM3 is a stable hyperswarmer. **c**, Phylogenetic tree showing multi-locus sequencing typing-based genetic relatedness between *Enterobacter* sp. SM1, SM3 and reference genomes. Tree was generated with autoMLST (CITE) and drawn using iTOL (CITE). Red dots indicate bootstrap support  $> 0.8$ . Stars represent related strains used for comparison with the genome sequences of SM1 and SM3 in panel **d**. **d**, Genome comparison of related *Enterobacter* strains. *Enterobacter* sp. SM1 was compared to *Enterobacter* sp. SM3 (purple) and the related strains *Enterobacter asburiae* ATCC 35953 (violet) and *Enterobacter cloacae* ATCC 13047 (cyan), and plotted in BLAST Ring Generator (BRIG) <http://brig.sourceforge.net/>; PMID: 21824423. DSS, Dextran Sulfate Sodium; LB, Luria-Bertani broth.

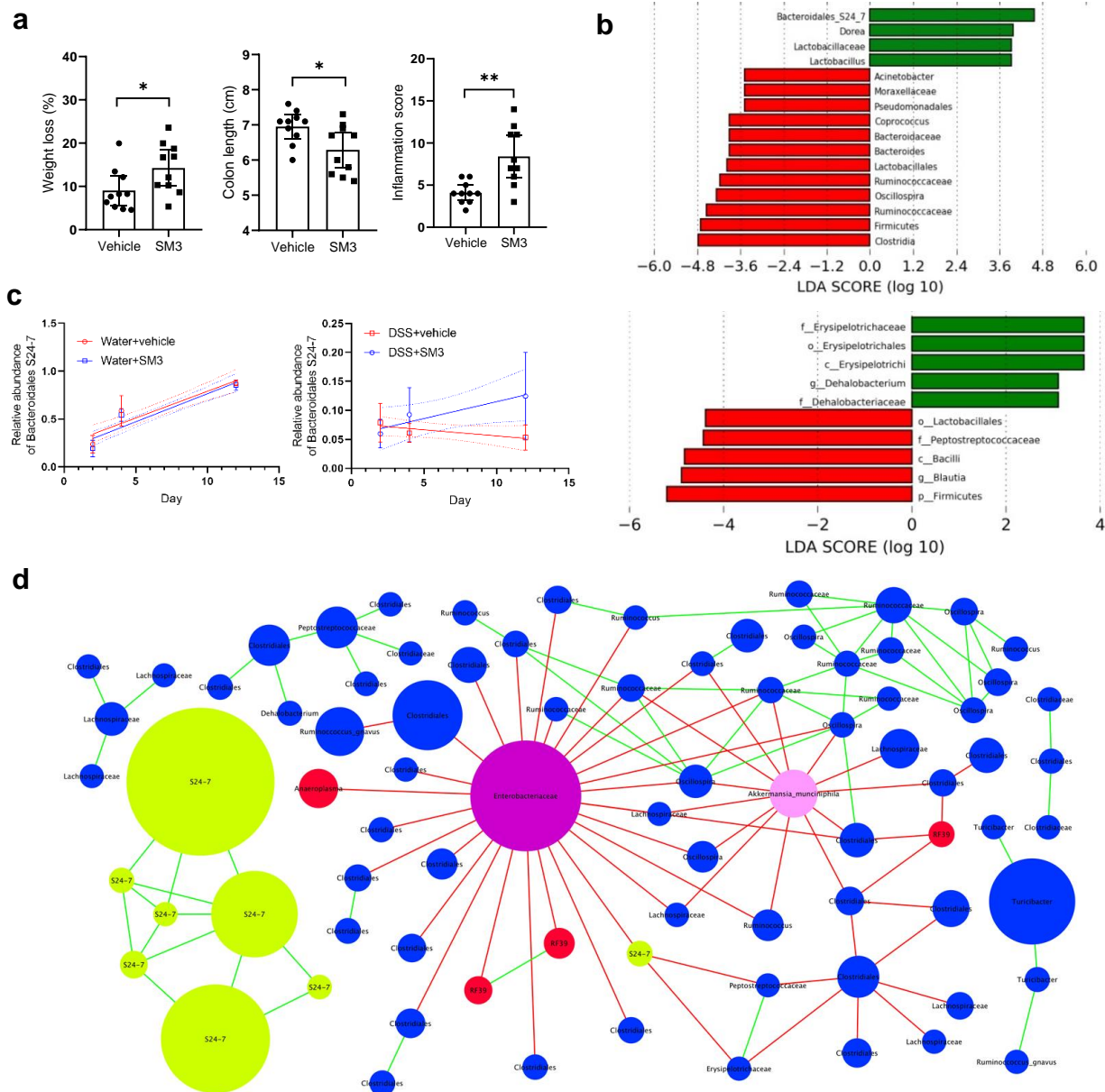
**Figure 2**



**Figure 2 | Effects of *Enterobacter* sp. SM strains on DSS induced colitis in C57BL/6 mice. a-f**, 8-week-old mice were exposed to DSS water and treated with vehicle (LB), SM1 or SM3 by oral gavage for 10 days. **a-b** indicates weight loss (**a**) and colon length (**b**) ( $n = 21$  per treatment group). **c**, Representative images (100x magnification) of H&E stained colonic section treated with vehicle (left), SM1 (middle) and SM3 (right). **d**, Inflammation score ( $n = 21$  per treatment group). **e-f**, In a separate experiment, myeloperoxidase (MPO) enzyme activity was determined ( $n = 3$ , each in duplicate) (**e**). Colon total RNA ( $n = 4$ ) was isolated and reverse transcribed to cDNA. RT-qPCR data show fold induction of mRNA (TNF $\alpha$ , IL10, TNFR2, IL6). PCR was repeated in quadruplicate. The expression was normalized to internal control, TBP. The entire experiment was repeated  $n = 2$  for reproducibility (**f**). **g-i**, In a separate experiment, C57BL/6 mice (8-week old) were exposed to DSS water and administered vehicle (LB), SM3, or its mutants (SM3\_18 or SM3\_24) for 10 days. **g-i** indicates weight loss (**g**), colon length (**h**) and inflammation score (**i**) ( $n = 10$  per treatment group). Unless otherwise noted, data are represented as mean and 95% CI, and significance tested using one-way ANOVA followed by Tukey's post hoc test. **c**, data represented as median and interquartile range, and significance tested using Kruskal-Wallis followed by Dunn's multiple comparisons test. \*  $P < 0.05$ ; \*\*  $P < 0.01$ ; \*\*\*  $P < 0.001$ ; ns, not significant. H&E, Hematoxylin and Eosin; TBP, TATA-Box Binding Protein; CI, Confidence Interval.

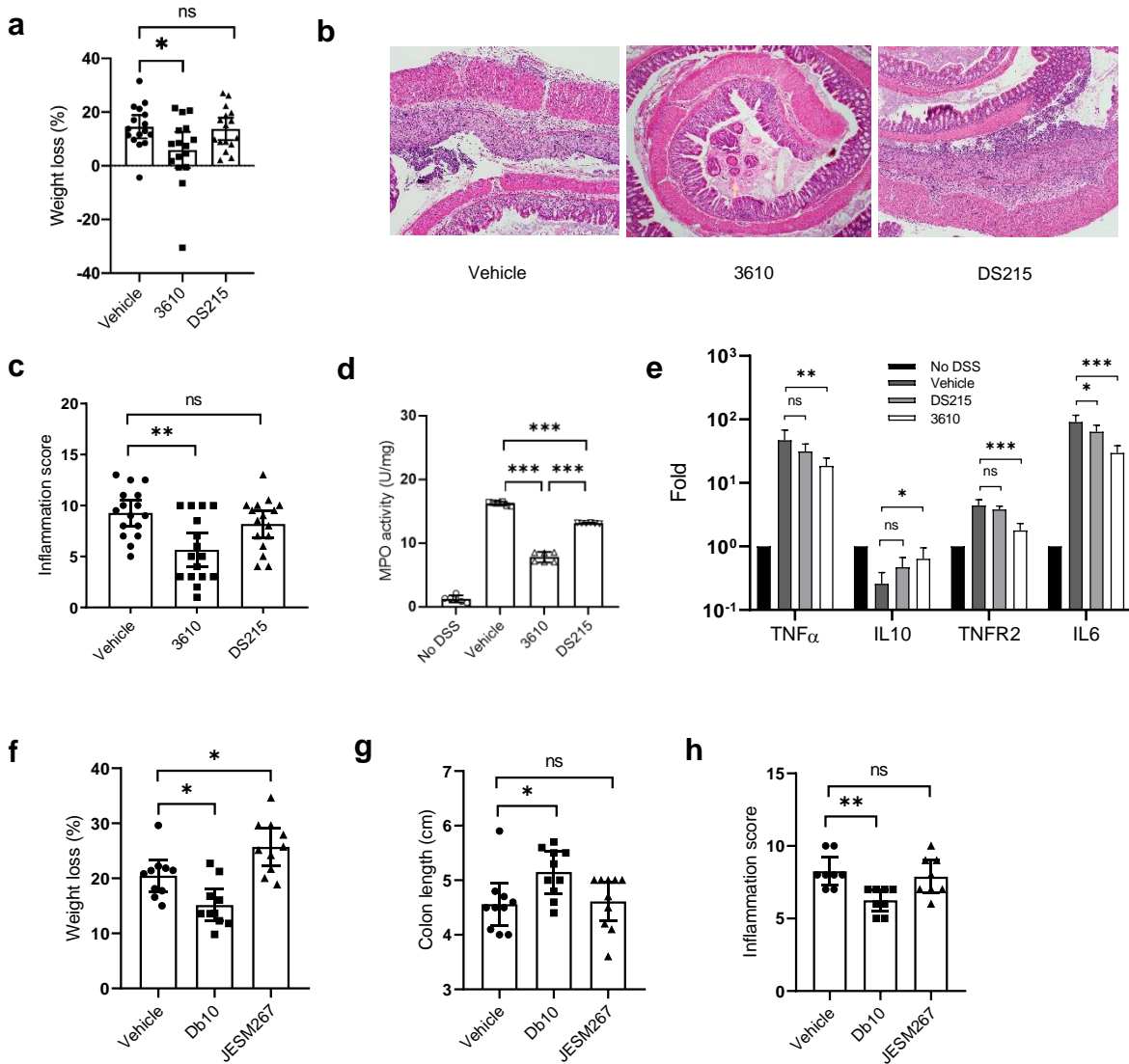


**Figure 3**



**Figure 3 | Effects of SM3 on the intestinal microbiota of GF/SPF and conventional mice.** **a**, C57BL/6 GF/SPF mice (5-week old) were exposed to DSS water and treated with vehicle (LB) or SM3 for 6 days. **a** indicates weight loss (left), colon length (middle), and inflammation score (right) ( $n = 10$  per treatment group). **b**, Linear discriminant analysis (LDA) Effect Size (LEfSe) plot of taxonomic biomarkers identified using feces of SM3 treated conventional ( $n = 10$ ) (upper) and GF/SPF ( $n = 10$ ) (lower) colitic mice on day 12 and day 6, respectively, as compared to vehicle ( $n = 10$ ). Green and red bars indicate bacterial enrichment within SM3 treated and vehicle group respectively. All taxa that yielded an LDA score  $>3.0$  are presented. **c**, Relative abundance of S24-7 in the feces from DSS (right) and control (left) mice treated with SM3 or vehicle ( $n = 8$  per treatment group). Linear regression line was fit to show the trend of the change (dotted lines show the 95% confidence bands). The slope of the SM3 treated group is similar to vehicle in water control group ( $P = 0.7827$ ), but significantly different in DSS group ( $P = 0.0182$ ). **d**, Co-occurrence network plot showing strong positive and negative correlations (Spearman's  $\rho > 0.7$ ) between OTU abundances. Each node represents a single OTU and the size of each node is proportional to the relative abundance of each OTU. Green lines connecting two nodes indicate a strong positive correlation (spearman's  $\rho > 0.7$ ) between the taxa, whereas red lines indicate a strong negative correlation (spearman's  $\rho < -0.7$ ) between the taxa. Unless otherwise noted, data are represented as mean and 95% CI, and significance tested using a two-tailed Student's  $t$ -test. OTU, Operational Taxonomic Unit; GF/SPF, Germ-Free mice transferred to specific pathogen free conditions.

**Figure 4**



**Figure 4** | Effects of *B. subtilis* and *S. marcescens* on DSS induced colitis in C57BL/6 mice. **a-e**, 8-week old mice were exposed to DSS water and treated with vehicle (LB), *B. subtilis* 3610 or *B. subtilis* DS215 by oral gavage for 10 days. **a**, Weight loss (n = 16 per treatment group). **b**, Representative images (100x magnification) of H&E stained colonic section treated with vehicle (left), 3610 (middle) and DS215 (right). **c**, Inflammation score (n = 16 per treatment group). **d-e**, In a separate experiment, myeloperoxidase (MPO) enzyme activity was determined (n = 3, each in duplicate) (**d**). Colon total RNA (n = 4) were isolated and reverse transcribed to cDNA. RT-qPCR data show fold induction of mRNA (TNF $\alpha$ , IL10, TNFR2, IL6). PCR was repeated in quadruplicate. The expression was normalized to internal control, TBP. The entire experiment was repeated n = 2 for reproducibility (**e**). **f-h**, In a separate experiment, C57BL/6 mice (8-week old) were exposed to DSS water and administered vehicle (LB), *S. marcescens* Db10 or *S. marcescens* JESM267 for 10 days. **f-h** indicates weight loss (**f**), colon length (**g**) and inflammation score (**h**) (n = 10 per treatment group except for **h**, for which n = 8; two colon specimens per group were used for other experiments). Unless otherwise noted, data represented as mean and 95% CI, and significance tested using one-way ANOVA followed by Tukey's post hoc test. **g**, data represented as median and interquartile range, and significance tested using Kruskal-Wallis followed by Dunn's multiple comparisons test.