### 1 Antimicrobial activity of a repurposed harmine-derived compound on

### 2 extensively drug-resistant *Acinetobacter baumannii* clinical isolates

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### 25 Synopsis

26 **Objectives:** The spread of antibiotic resistant bacteria is an important threat for human 27 healthcare. Acinetobacter baumannii bacteria impose one of the major issues, as multidrug-28 to pandrug-resistant strains have been found, rendering some infections untreatable. In 29 addition, A. baumannii is a champion in surviving in harsh environments, being capable of 30 resisting to disinfectants and to persist prolonged periods of desiccation. Due to the high 31 degree of variability found in A. baumannii isolates, the search for new antibacterials is 32 challenging. Here, we screened a compound library to identify compounds active against 33 recent isolates of A. baumannii bacteria.

Methods: A repurposing drug screen was undertaken to identify *A. baumannii* growth inhibitors. One hit was further characterized by determining its IC<sub>50</sub> and testing its activity on 43 recent clinical *A. baumannii* isolates, amongst which 40 are extensively drug- and carbapenem-resistant strains.

**Results:** The repurposing screen led to the identification of a harmine-derived compound, called HDC1, which proved to have bactericidal activity on the multidrug-resistant AB5075-VUB reference strain with an IC<sub>50</sub> of 48.23  $\mu$ M. In addition, HDC1 impairs growth of all 43 recent clinical *A. baumannii* isolates.

42 Conclusions: We identified a compound with inhibitory activity on all tested, extensively drug43 resistant clinical *A. baumannii* isolates.

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### 48 Introduction

The rise of antibiotic resistant bacteria is a global threat for healthcare, making it possible to succumb to diseases that were previously treatable. <sup>1</sup> This has been acknowledged by both the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC), which generated a list of drug-resistant pathogens for which new antibiotics are urgently needed. <sup>2,3</sup> The top priorities of these lists are antibiotic-resistant *Acinetobacter baumannii* bacteria.

A. baumannii is a Gram-negative, opportunistic bacterium, belonging to the ESKAPE group 55 56 (Enterococcus faecium, Staphylococcus aureus, Klebsiella pneumoniae, Acinetobacter baumannii, Pseudomonas aeruginosa and Enterobacter spp.) of nosocomial pathogens.<sup>4,5</sup> 57 58 While the pathogen is ubiquist (*i.e.* it can be found in soil, on human skin and in water sources), its presence especially imposes a threat in clinical settings. <sup>6,7</sup> This is due to a remarkable 59 combination of resistance capabilities of A. baumannii, which is able to persist prolonged 60 periods of desiccation, to resist to disinfectants and to acquire drug resistance at a high rate. 61 62 <sup>8,9</sup> Infections caused by *A. baumannii* commonly occur in immunocompromised patients and 63 manifest as ventilator-assisted pneumonia, bacteremia and to a lesser extent skin or urinary tract infections. <sup>10</sup> Treatment of these infections becomes increasingly difficult, as multidrug-64 65 resistant, to extensively drug-resistant or even pandrug-resistant strains have been reported, with the latter being resistant to all available antibiotics, including carbapenems. <sup>11,12</sup> An 66 67 important hurdle in the development of new antimicrobials against A. baumannii is the high diversity found between isolates, leading to a still open pan-genome.<sup>13</sup> 68

In this paper, we aimed at the discovery of a compound active against most clinical isolates.
We performed a repurposing screen on a compound library, which led to the identification of

a <u>h</u>armine-<u>d</u>erived <u>c</u>ompound, called HDC1, with inhibitory activity on the growth of all the
 tested recent clinical isolates, amongst which 40 are extensively drug- and carbapenem resistant.

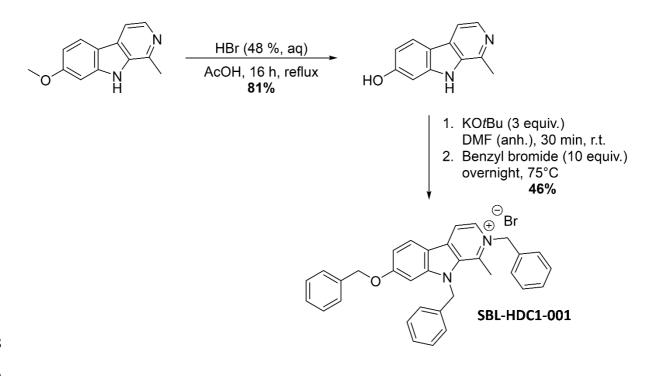
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# 75 Material and methods

#### 76 Compound library and synthesis of HDC1

A compound library of the Namur Medicine & Drug Innovation Center (NAMEDIC) was 77 78 provided for a growth inhibition screen against A. baumannii. All compounds were dissolved 79 in 100% DMSO and used for the initial screen at 100 µM. The active compound HDC1 (1methyl-2-benzyl-7-benzyloxy-9-benzyl-β-carbolin-2-ium bromide) was synthesized 80 as 81 previously described <sup>14</sup> with the following optimizations: 1-methyl-7-hydroxy- $\beta$ -carboline was synthesized by adding 1-methyl-7-methoxy-β-carboline (0.600 g, 2.83 mmol, 1 equiv.), 82 83 hydrobromic acid (12 ml, 48% in H<sub>2</sub>O) and acetic acid (12 ml) into a round-bottom flask, 84 equipped with reflux condenser. The mixture was refluxed overnight under argon atmosphere 85 and subsequently added to distilled water (100 ml). The precipitate was isolated via filtration, 86 washed with cold water and dried under vacuum yielding 1-methyl-7-hydroxy-β-carboline 87 with 81% (0.454 g) yield. <sup>1</sup>H-NMR (500 MHz, DMSO-d6) δ (ppm): 12.59 (s, 1H), 10.62 (s, 1H), 88 8.39-8.29 (m, 2H), 8.21 (d, J = 8.7 Hz, 1H), 7.03 (d, J = 1.7 Hz, 1H), 6.89 (dd, J = 8.7, 1.7 Hz, 1H), 89 2.94 (s, 3H). Next, 1-methyl-2-benzyl-7-benzyloxy-9-benzyl- $\beta$ -carbolin-2-ium bromide was 90 synthesized. First 1-methyl-7-hydroxy- $\beta$ -carboline (0.500 g, 2.52 mmol, 1 equiv.) was dissolved 91 in anhydrous N,N,-dimethylformamide (20 ml) into a flame-dried microwave vial under argon 92 atmosphere. Then KOtBu (0.849 g, 7.57 mmol, 3 equiv.) was added and the mixture was stirred 93 for 30 minutes at room temperature. Subsequently benzyl bromide (3.00 ml, 25.2 mmol, 10 equiv.) was added and the mixture was heated overnight at 75°C. Afterwards the crude 94

95	mixture was filtered, and the precipitate was washed with CH <sub>2</sub> Cl <sub>2</sub> . The volatiles in the filtrate
96	were removed under reduced pressure and the crude product was subjected to column
97	chromatography (cyclohexane/ethyl acetate) yielding the desired product with 46% (0.638 g)
98	yield. <sup>1</sup> H-NMR (500 MHz, DMSO-d6) δ (ppm): 8.86 (d, J = 6.6 Hz, 1H), 8.72 (d, J = 6.6 Hz, 1H),
99	8.49 (d, J = 8.8 Hz, 1H), 7.57 (d, J = 2.1 Hz, 1H), 7.50-7.46 (m, 2H), 7.40-7.25 (m, 9H), 7.23 (dd,
100	J = 8.8, 2.1 Hz, 1H), 7.12 (d, J = 7.2 Hz, 2H), 6.99 (d, J = 7.2 Hz, 2H), 6.02 (s, 2H), 5.99 (s, 2H),
101	5.27 (s, 2H), 2.85 (s, 3H). <sup>13</sup> C-NMR (126 MHz, DMSO-d6) δ (ppm): 162.8 (Cq), 148.0 (Cq), 139.6
102	(Cq), 137.5 (Cq), 136.2 (Cq), 135.4 (Cq), 134.7 (Cq), 133.5 (Cq), 129.1 (CH), 129.0 (CH), 128.5
103	(CH), 128.3 (CH), 127.5 (CH), 126.6 (CH), 125.4 (CH), 124.9 (CH), 114.7 (CH), 113.7 (CH), 112.8
104	(Cq), 95.0 (CH), 70.1 (CH2), 59.8 (CH2), 48.3 (CH2), 16.0 (CH3). The spectroscopic data were in
105	accordance with those reported by Frédérick <i>et al</i> . (2012). <sup>14</sup>



#### 111 **OD measurements**

112 All A. baumannii reference strains and clinical isolates were cultured at 37°C in LB broth media 113 for 16h before subsequent experiments. For IC<sub>50</sub> determination, bacterial cells corresponding 114 to OD<sub>600nm</sub>=0.1 were transferred to a 96 well flat bottom plate (Greiner, Austria) containing 115 varying concentrations of HDC1 (0.1; 1; 10; 25; 50; 75; 100 and 1000  $\mu$ M) in LB broth media 116 with 1% DMSO. For determination of the activity of HDC1 on the 43 clinical A. baumannii 117 isolates, bacterial cells corresponding to OD<sub>600nm</sub>=0.1 were transferred to a 96 well flat bottom 118 plate (Greiner, Austria) containing 100 µM of HDC1 in LB broth media with 1% DMSO. For both 119 experiments, the positive control included bacterial cells corresponding to OD<sub>600nm</sub>=0.1 of the 120 used strains in LB broth media with 1% DMSO. The negative control included both LB broth 121 media and LB broth media supplemented with 1% DMSO. Collection of data was done using 122 the Cytation 1 (BioTek, United States). The OD<sub>600</sub> absorbance of all bacterial cultures was 123 measured every 30 min for 24h at a temperature of 37°C and agitation of 355 cpm (cycles per 124 minute). In all analysis, growth inhibition is defined as decreasing absorbance values over time 125 compared to the positive control. The data were measured in biological triplicate.

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#### 127 **CFU determination**

After absorbance measurements for IC<sub>50</sub> determination, the positive control (AB5075-VUB grown in LB with 1% DMSO) and AB5075-VUB grown in presence of 100  $\mu$ M HDC1, were resuspended in PBS, brought to the same OD<sub>600nm</sub> and plated on LB agar plates in appropriate dilutions. After 16 h incubation of the LB agar plates at 37°C, CFUs were counted to assess any bacteriostatic or bactericidal effect. All data was measured in biological triplicate. To estimate the initial bacterial load, the relationship between the absorbance at OD<sub>600nm</sub> and CFUs was

134	determined for the strain AB5075-VUB. This was done by plating serial dilutions of bacterial
135	cultures with a known $OD_{600nm}$ on LB agar and counting the corresponding CFUs (see Table S1).
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#### 137 IC<sub>50</sub> calculation

138 For the determination of the IC<sub>50</sub>, GraphPad Prism 9 (GraphPad Software, LLC) was used. After

139 20 hours, the  $OD_{600nm}$  absorbance kinetic data were obtained and normalized using the

140 positive control absorbance value as 100% viability and the absorbance value of 1 mM HDC1

141 as 0% viability. The analysis was then done on the normalized data by nonlinear regression

142 curve fitting. The IC<sub>50</sub> value is shown with a 95% confidence interval (CI).

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#### 144 Statistical analysis

All data shown are represented as mean ± standard deviation of three biological replicates, except otherwise stated. CFU were statistically analyzed by an unpaired t-test. All growth curves were statistically analyzed by a Mann Whitney test. The p values < 0.05 were considered significant.

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### 150 **Results**

#### 151 Repurposing screen reveals compound with inhibitory activity on AB5075-VUB

The initial screen from a chemical library of the Namur Medicine & Drug Innovation Center from the University of Namur (UNamur) aimed at the identification of growth inhibitors for problematic multidrug-resistant *A. baumannii* strains. The strain initially used for this screen is a multidrug-resistant *A. baumannii* reference strain, AB5075-VUB. This strain is a derivative from the parental strain AB5075 that was clonally isolated in our laboratory at the VUB (Vrije Universiteit Brussel). The screen showed complete growth inhibition by one compound called HDC1, for it is a <u>harmine-derived compound</u> (**Figure 1**). Harmine is a natural  $\beta$ -carboline known to have many pharmacological activities such as antimicrobial, antifungal and antitumor properties. <sup>14,15</sup> HDC1 was originally synthesized for an anticancer drug screen. Interestingly, compounds with anticancer activity have lately been explored as potential antimicrobials. <sup>16</sup> In line with this tendency, HDC1 was further characterized for other activities.

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#### 165 HDC1 has bactericidal activity on AB5075-VUB

166 To determine the potency of the compound, the minimum concentration required for 50% 167 growth inhibition, IC<sub>50</sub>, was determined for the AB5075-VUB strain. The analysis showed that 168 HDC1 has an IC<sub>50</sub> of 48.23  $\mu$ M (95% CI 44.76-51.83) (**Figure 1C**). To determine the potential 169 antimicrobial effect of HDC1 on AB5075-VUB viability, the strain was grown in presence of 100 170 µM of HDC1. After 24 h incubation, the bacteria were resuspended in fresh media without the 171 compound and plated on LB agar plates for CFUs enumeration. After 24h incubation, the 172 number of recovered bacteria is significantly different when bacteria are incubated with the 173 compound compared to the control group (Figure 1D). While an increase in CFUs is observed for the control group, a decrease of CFUs is observed in the presence of HDC1, compared to 174 175 the initial bacterial load. This shows a significant bactericidal activity of HDC1 on the 176 multidrug-resistant AB5075-VUB reference strain.

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#### 178 HDC1 has broad inhibitory activity on all the tested clinical isolates

A. baumannii has a highly dynamic genome. <sup>17</sup> The presence of mobile genetic elements and
the efficient acquisition of genes through horizontal gene transfer are not only responsible for
the pathogen's success in obtaining drug resistance and environmental persistence, but they

are also the reason isolates have become more and more diverse. <sup>13,17,18</sup> The core genome of the pathogen's strains is reported to be relatively small and the accessory genome of strains can be up to 25-46% unique. <sup>13,18</sup> This heterogeneity found in isolates renders the search for antimicrobial compounds increasingly difficult. It is therefore important for a new potential antimicrobial to exert its activity not only on a few *A. baumannii* strains, but on a multitude of diverse and clinically relevant isolates.

To determine the activity of HDC1 on recent isolates, we used 43 multidrug-resistant A. 188 189 baumannii strains. These strains were isolated between 2014 to 2017, in different Belgian hospitals, of varying patient infections sites and have varying antibiograms. <sup>19</sup> The resistance 190 191 profiles of 40 of these isolates show that they can even be classified as extensively drugresistant, as previously defined for Acinetobacter spp. <sup>12</sup> In addition to these recent clinical 192 193 isolates, three frequently used reference strains were also included. Two of these strains, 194 ATCC19606 and ATCC17978, are older type strains, compared to the more recent and multidrug-resistant AB5075 reference strain. <sup>11,20</sup> The third reference strain, DSM30011, is an 195 environmental isolate.<sup>21</sup> 196

The growth of all tested strains was impaired by the presence of HDC1 (**Figure 2**), with low, intermediate, or complete inhibition levels. An overview of the different resistance profiles against HDC1 can be found in **Table 1**. Complete inhibition of growth is observed for all three reference strains and 17 recent isolates, while most of the clinical isolates show an intermediate inhibition profile. The AB193-VUB isolate showed the least sensitivity to HDC1. No correlation could be found between the sensitivity of the tested strains to HDC1 and the antibiogram profiles of the strains.<sup>19</sup>

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### 206 **Discussion**

207 In this study, a repurposing drug screen led to the discovery of a compound with inhibitory 208 activity on the growth of a multidrug-resistant Acinetobacter baumannii strain, AB5075-VUB. 209 This compound, named HDC1, is a harmine-derivative previously designed to have anticancer 210 properties. The anticancer screen showed that the compound acts as a protein synthesis inhibitor at a concentration of 0.7  $\mu$ M.<sup>14</sup> In our study, HDC1 was shown to have bactericidal 211 212 activity on AB5075-VUB with an IC<sub>50</sub> of 48.23  $\mu$ M. The cytotoxicity of the compound in human 213 cells can thus be expected to be significant. This limits the potential of HDC1 as a new antimicrobial without further modification of the molecule. However, as multidrug-, 214 215 extensively drug- and pandrug-resistant A. baumannii strains are emerging and spreading, 216 every option deems to be explored.

217 Due to the high diversity between A. baumannii isolates, one of the main hurdles in the 218 discovery of new compounds is to find compounds capable of targeting the majority of the 219 isolates. Here, we report a compound to have inhibitory activity on all the tested and recent 220 clinical A. baumannii isolates. The strains were chosen to be as diverse as possible: originating 221 from different Belgian hospitals, different patients, varying anatomical infection sites and varying antibiograms. <sup>19</sup> Our test shows various degrees of growth inhibition: from complete 222 223 to intermediate to only slight inhibition. In addition, the 4 reference strains used in our study 224 all show a high degree of sensitivity to HDC1. Taken together, this raises the following 225 questions (i) what contributes to this difference in growth inhibition levels, (ii) why do more 226 recent clinical isolates show a higher resistance to HDC1 while the less recent reference strains 227 are sensitive, (iii) what could be the target(s) of HDC1 and (iv) why is not the whole AB5075-228 VUB bacterial population killed by HDC1 in the tested conditions, since a significant bactericidal effect is observed? The phase variation observed in AB5075 might be the answer 229

230 to the last question, for which bacteria in different states might show different levels of resistance against HDC1. <sup>22</sup> Interestingly, a recent study showed that HDC1 inhibits the 231 phosphoserine phosphatase of *Mycobacterium tuberculosis*, MtSerB2. <sup>23</sup> MtSerB2 catalyzes 232 the last step in the L-serine biosynthetic pathway and is involved in immune evasion 233 mechanisms of *M. tuberculosis*. <sup>23</sup> In AB5075-VUB, a homolog of MtSerB2 is present: AbSerB. 234 235 This indicates a putative target of HDC1 in A. baumannii. A possible explanation for the 236 different growth inhibition profiles of the clinical isolates could be the presence of mutations 237 in the serb gene. However, in our study, no correlation could be found between mutations in 238 serb and the growth inhibition profiles of the A. baumannii isolates. Interestingly, it has been 239 shown for *M. tuberculosis* that certain compounds are more efficient at inhibiting growth of 240 the bacterium itself, than inhibiting the enzyme only, suggesting different mechanisms of 241 action or intracellular accumulation of the compounds. <sup>24</sup> Additional resistance mechanisms, 242 potentially countering such effects, could explain the higher resistance to HDC1 of some clinical isolates. Nevertheless, HDC1 has broad activity on all the tested recent clinical A. 243 244 baumannii isolates of our study, which prompts the further exploration of this compound 245 and/or cognate putative target in *A. baumannii*.

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### 247 **Conclusion**

In conclusion, HDC1 is a potent harmine-derived compound with antibacterial activity identified using a multidrug-resistant *A. baumannii* strain, that also significantly inhibits the growth of diverse, recent, and extensively drug-resistant clinical *A. baumannii* isolates.

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### 253 Author Contributions

254 Drafting of the manuscript: AB and CV. Corrections of the manuscript: AB, MVG, ME, CP, PB, TDH, OD, JW, SB and CV. HDC1 production: ME and SB. Preliminary drug screen: TQ, CP and 255 CV. Experiments: AB, CW and CV. Data analyses: AB, MVG, JW and CV. 256 257 258 **Acknowledgements** 259 260 We are grateful to Pr. Tom Coenye for providing us the strain AB5075 and Dr. Suzana Salcedo 261 for the strains ATCC19606, ATCC17978 and DSM30011, as well as for fruitful discussions. We 262 would like to thank Pr. Pierre Bogaerts, Pr. Te-din Huang and Pr. Olivier Denis for providing the recent clinical isolates of A. baumannii. We also thank the members of Namedic (NARILIS-263 264 UNamur), in particular Pr. B. Masereel and L. Pochet for their research that allowed setting up 265 the chemical library used in the present screening. 266 267 Funding 268 AB is recipient of a PhD fellowship Strategic Basic Research of the Research Foundation -269 270 Flanders (FWO, File number: 77258). ME and SB acknowledge financial support of the Research Council at the Vrije Universiteit Brussel (VUB) through the IRP funding scheme. CV 271 acknowledges the financial support from the Flanders Institute for Biotechnology (VIB). This 272

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## 276 Transparency declarations

277 None to declare.

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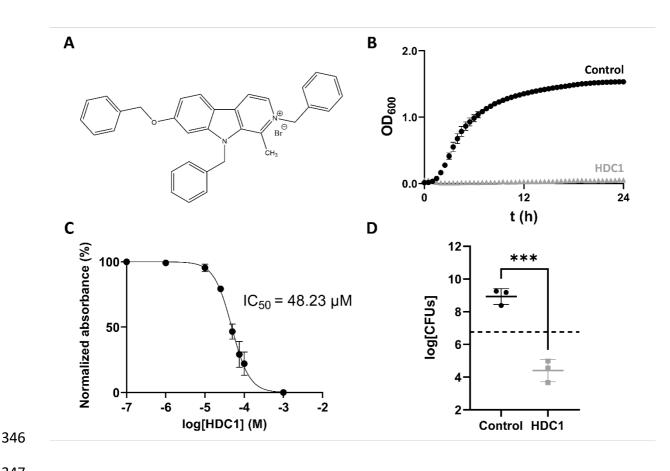
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### 344 Figures





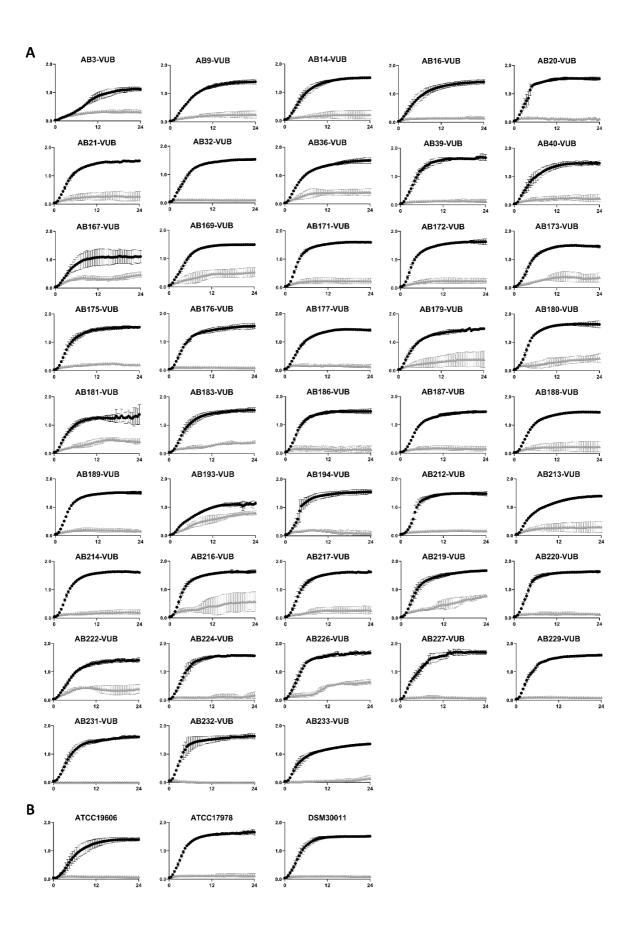
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**Figure 1. A** Structure of HDC1. **B** Growth curve of AB5075-VUB in presence (grey triangles) and absence (black spheres) of HDC1. **C.** Non-linear regression curve of normalized absorbance reads in function of compound concentration. **D.** Number of viable bacteria after 24 h incubation without and with HDC1. The initial bacterial load is represented by the dashed line on the plot. All data points in this figure are shown as mean±standard deviation of three independent biological replicates.

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Figure 2. A. Growth curves of 43 recent clinical *A. baumannii* isolates. B. Growth curves of 3 *A. baumannii* reference strains (ATCC19606, ATCC17978 and DSM30011). All strains were incubated with 100  $\mu$ M of HDC1 (grey triangles) or without HDC1 (black spheres) for 24 h. All data points are shown as mean±standard deviation of three independent biological replicates. X axis and y axis correspond to respectively time (h) and absorbance values measured at 600 nm.

366

#### 368 **Table 1.** Growth inhibition levels on three reference strains and 43 recent clinical isolates of

#### 369 A. baumannii

Level of growth inhibition								
Low	Intermediate	Complete						
AB193-VUB	AB3-VUB	ATCC19606						
	AB9-VUB	ATCC17978						
	AB14-VUB	DSM30011						
	AB21-VUB	AB16-VUB						
	AB36-VUB	AB20-VUB						
	AB40-VUB	AB32-VUB						
	AB167-VUB	AB39-VUB						
	AB169-VUB	AB176-VUB						
	AB171-VUB	AB177-VUB						
	AB172-VUB	AB186-VUB						
	AB173-VUB	AB187-VUB						
	AB175-VUB	AB189-VUB						
	AB179-VUB	AB194-VUB						
	AB180-VUB	AB212-VUB						
	AB181-VUB	AB214-VUB						
	AB183-VUB	AB220-VUB						
	AB188-VUB	AB227-VUB						
	AB193-VUB	AB229-VUB						
	AB213-VUB	AB231-VUB						
	AB216-VUB	AB232-VUB						
	AB217-VUB							
	AB219-VUB							
	AB222-VUB							
	AB224-VUB							
	AB226-VUB							
	AB233-VUB							

370

# 372 Supplementary data

373

- **Table S1**. Relationship between the absorbance (OD<sub>600nm</sub>) and the colony forming units
- 375 (CFUs) per ml for the strain AB5075-VUB. The values are shown for overnight cultures that
- 376 were diluted for accurate absorbance measurements. Rep = Biological replicate. At an
- 377  $OD_{600nm}$ =1, the CFU/ml corresponds to 3.2±0.3 10<sup>8</sup> CFU/ml.

	Rep 1	Rep 2	Rep 3	Average	SD	
OD <sub>600</sub>	6.4	6.5	6.3	6.4	0.1	
CFU/ml	1.92 10 <sup>9</sup>	2.06 10 <sup>9</sup>	2.23 10 <sup>9</sup>	2.07 10 <sup>9</sup>	1.55 10 <sup>8</sup>	