

# The virulence inhibitor INP1855 impairs pathogenicity of *Pseudomonas aeruginosa* and inflammasome activation *in vitro* and *in vivo*.

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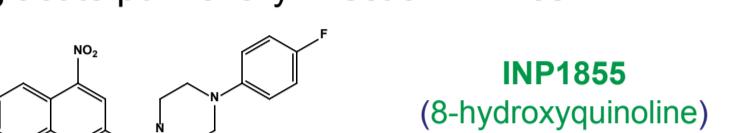
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## INTRODUCTION

*Pseudomonas aeruginosa* (*P.a.*) is a major cause of hospital-acquired and difficult-to-treat infections. With the rise of multidrug-resistant strains and the demise of currently recommended anti-pseudomonal antibiotics, alternative strategies are sorely needed. A key virulence factor associated with poor clinical outcome and high morbidity in acute infections is the type III secretion system (T3SS). T3SS allows bacteria to inject exotoxins (e.g. ExoU or ExoS) into the host cell cytoplasm, causing cytotoxicity and preventing *P.a.* internalization [1]. In phagocytic cells, T3SS can also deliver flagellin FliC or T3SS rod proteins into the mammalian cytosol, inducing caspase-1 proteolysis via NLRC4 inflammasome activation. Active caspase-1 causes not only cytotoxicity but also the secretion of the IL-1 $\beta$  and IL-18 inflammatory cytokines [2]. These two cytokines repress IL-17 response, thereby impairing *P.a.* clearance *in vivo* [3,4].

## OBJECTIVES

To evaluate the potential interest of the T3SS inhibitor INP1855, a small compound identified by high-throughput,  
(a) for decreasing *P. aeruginosa* virulence and its deleterious effects on the host cells  
(b) for controlling acute pulmonary infection in mice

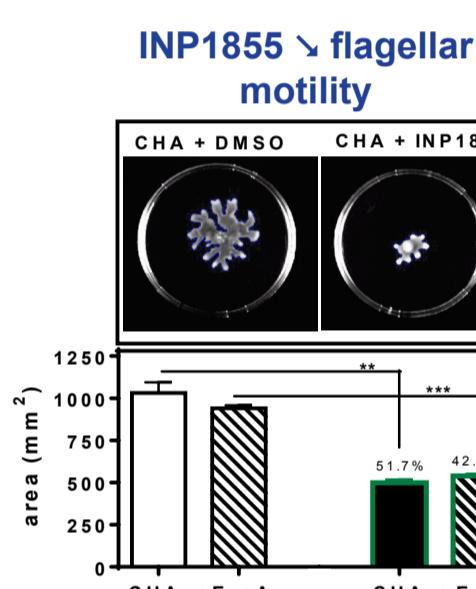
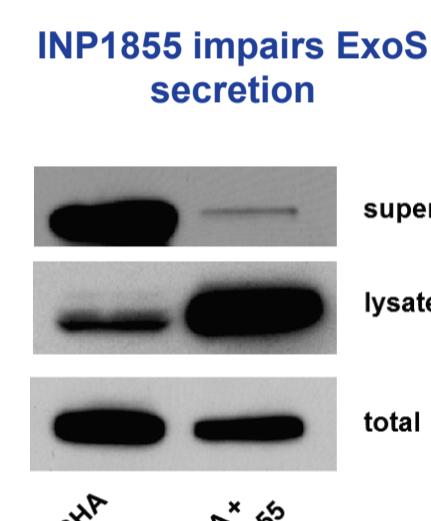
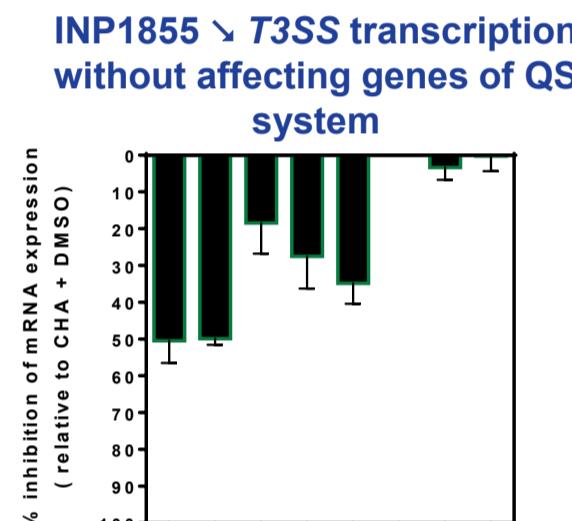
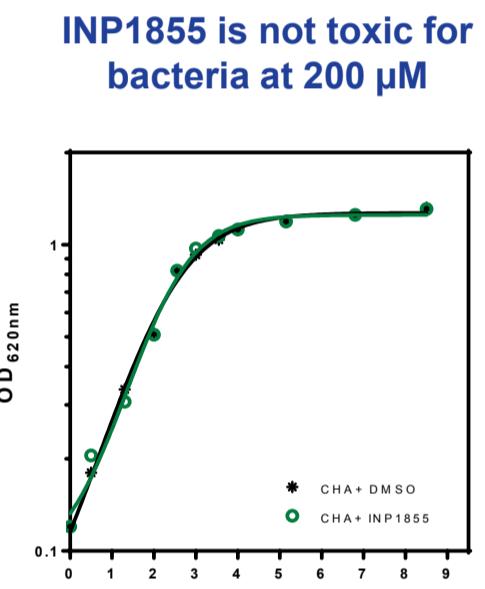


## STRAINS

PA103 Wild-type, cytotoxic isolate	ExoU / ExoT
CHA Cystic Fibrosis cytotoxic isolate	ExoS / ExoT
CHA $\Delta$ STY	NO toxins
CHA $\Delta$ popBD	NO translocation apparatus
CHA $\Delta$ ExsA	NO T3SS

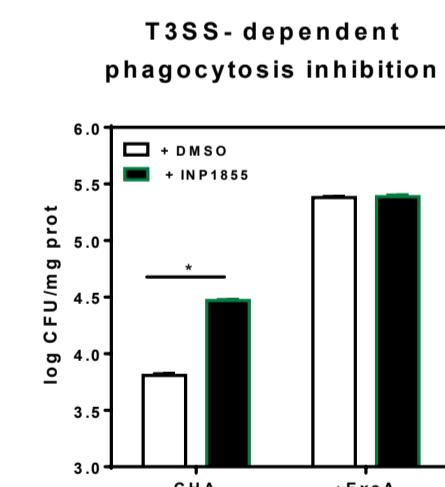
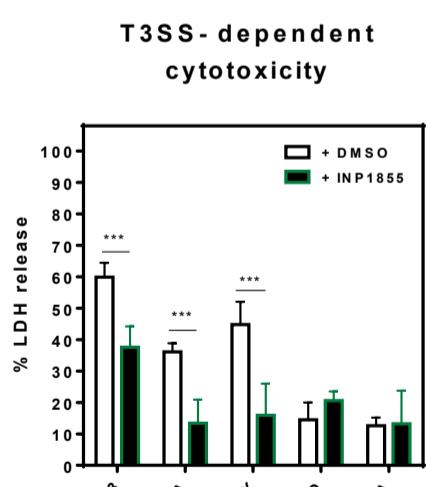
## IN VITRO

### At the bacterial level

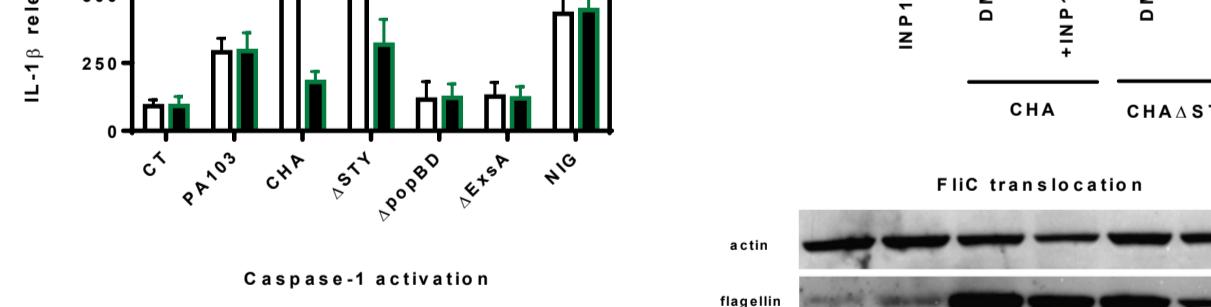
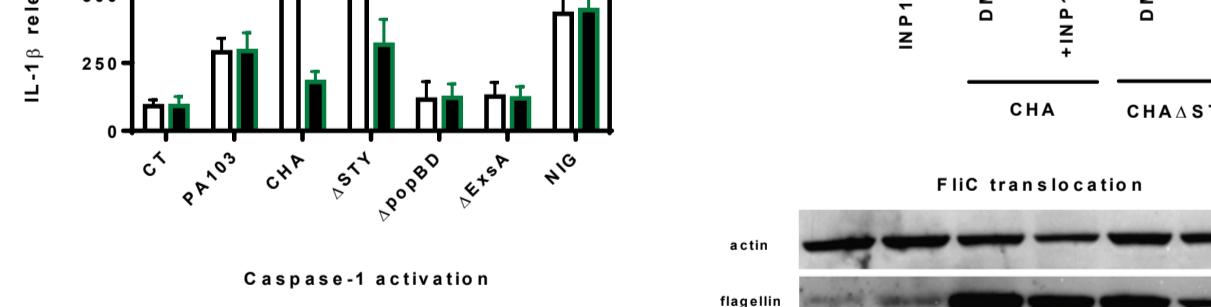
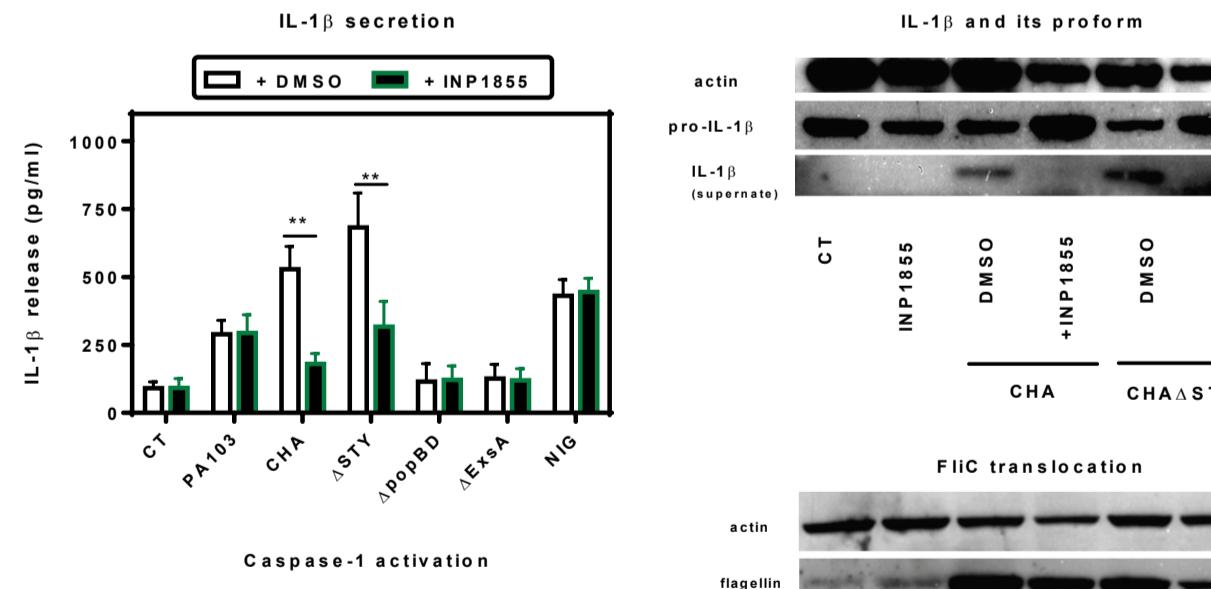


### At the host level

#### INP1855 $\searrow$ T3SS-mediated virulence



#### INP1855 $\searrow$ T3SS-mediated inflammasome activation



## REFERENCES

- [1] Hauser AR et al Nat Rev Microbiol 2009;7:654-665
- [2] Miao EA and Warren SE, Journal of Clinical Immunology 2010; 30(4): 502-506
- [3] Cohen TS and Prince AS, Journal of Clinical Investigation 2013; 23(4):1630-1637
- [4] Faure et al., Am J Respir Crit Care Med. 2014;189(7):799-811

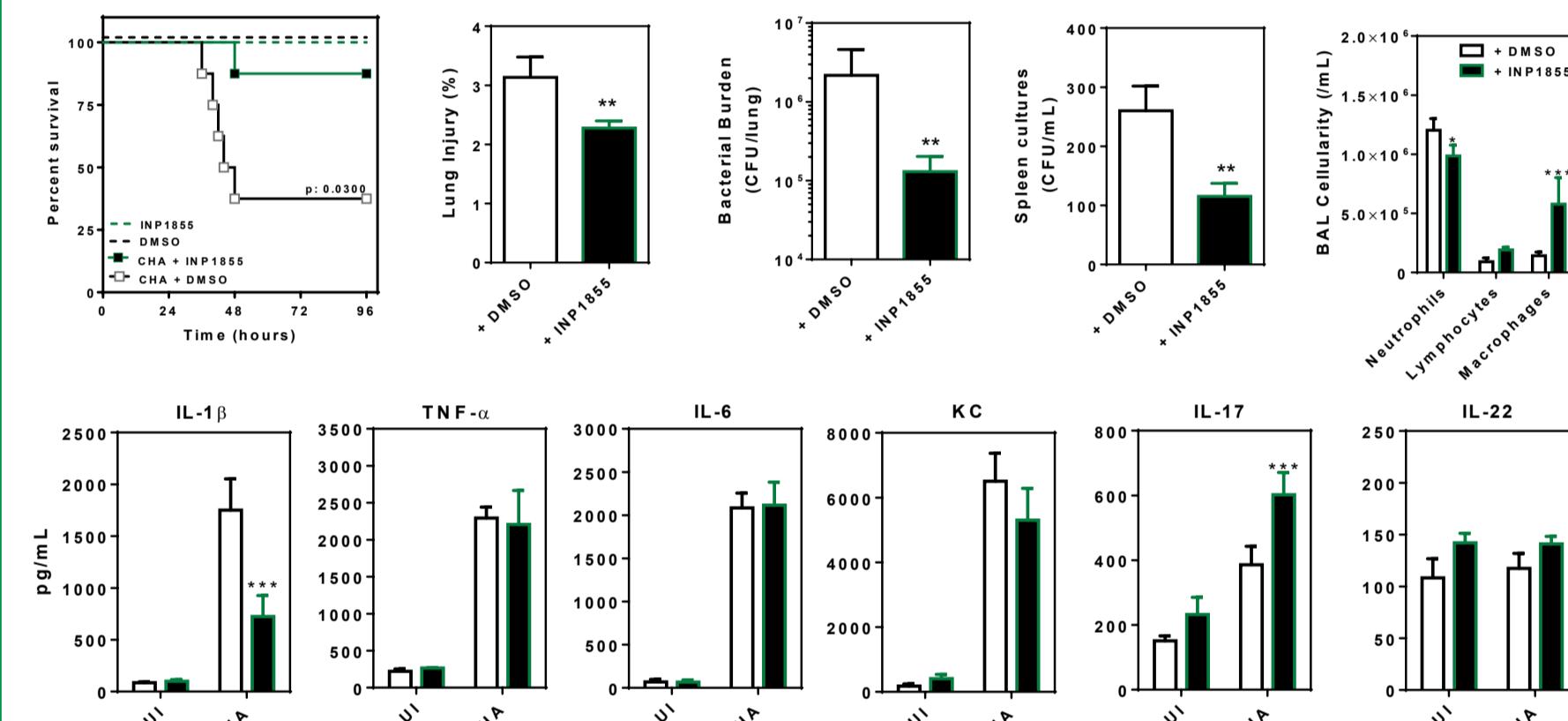
## ACKNOWLEDGMENTS

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## IN VIVO

### Acute pulmonary tract infection



INP1855  $\nearrow$  mice survival and bacterial clearance

INP1855  $\searrow$  IL-1 $\beta$  and  $\nearrow$  IL-17 secretion

## CONCLUSION

