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Mechanisms Involved in Alleviation of Intestinal Inflammation by Bifidobacterium Breve Soluble Factors

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Abstract

Objectives: Soluble factors released by Bifidobacterium breve C50 (Bb) alleviate the secretion of pro-inflammatory cytokines by immune cells, but their effect on intestinal epithelium remains elusive. To decipher the mechanisms accounting for the cross-talk between bacteria/soluble factors and intestinal epithelium, we measured the capacity of the bacteria, its conditioned medium (Bb-CM) and other Gram(+) commensal bacteria to dampen inflammatory chemokine secretion.

Methods: TNFα-induced chemokine (CXCL8) secretion and alteration of NF-κB and AP-1 signalling pathways by Bb were studied by EMSA, confocal microscopy and western blotting. Anti-inflammatory capacity was also tested in vivo in a model of TNBS-induced colitis in mice.

Results: Bb and Bb-CM, but not other commensal bacteria, induced a time and dose-dependent inhibition of CXCL8 secretion by epithelial cells driven by both AP-1 and NF-κB transcription pathways and implying decreased phosphorylation of p38-MAPK and IkB-α molecules. In TNBS-induced colitis in mice, Bb-CM decreased the colitis score and inflammatory cytokine expression, an effect reproduced by dendritic cell conditioning with Bb-CM.

Conclusions: Bb and secreted soluble factors contribute positively to intestinal homeostasis by attenuating chemokine production. The results indicate that Bb downregulate inflammation at the epithelial level by inhibiting phosphorylations involved in inflammatory processes and by protective conditioning of dendritic cells.

Introduction

Intestinal homeostasis depends in part on the equilibrium between absorption (nutrients, Na⁺ ions), secretion (chloride ions, IgA, mucus, cytokines) and barrier function of the digestive epithelium. Disturbance of intestinal homeostasis results in chronic inflammation and release of pro-inflammatory cytokines resulting in diarrhea and injury to the gut. The intestinal epithelium constitutes a major interface between intestinal contents, including bacteria, and the internal milieu, providing an important contribution to the regulation of intestinal homeostasis. Probiotics are specific bacterial strains capable of stimulating protective immune responses in physiological conditions[1] but which also dampen inflammation in some inflammatory bowel diseases [2].

One of the main functions of the intestinal epithelium is to regulate the ion transport controlling the balance between absorption and secretion of fluid. Intestinal epithelial cells (IECs) are considered an integral part of the innate immune system, constituting important targets for bacteria and cytokines. Their polarization contributes to the fine regulation of intestinal homeostasis [3–5]. In the physiological steady-state, minimal stimulation of IECs by luminal bacteria occurs at the apical pole. Indeed, pathogen recognition receptors (PRRs) are functionally silenced in the healthy intestine due to their redistribution to internal or basolateral compartments or to the delivery of inhibitory signals [6,7]. In contrast, in pathology, recognition of invading bacteria promotes signalling cascades of pro-inflammatory cytokines and chemokines[8] and the recruitment/activation of mucosal immune cells. In this context, selected strains of probiotic bacteria have been proposed as tools in the prevention or treatment of inflammatory bowel diseases, especially in ulcerative colitis [2]. Mechanisms sustaining such beneficial effects have been partially identified in vitro[9,10] and depend mainly upon alleviation of NF-κB-dependent transcriptional activity. We have already demonstrated that soluble factors released by the probiotic bacteria Bifidobacterium breve (Bb) C50 can down-regulate the production of inflammatory cytokines by immune cells [11], with these factors maintaining their inhibitory activity after crossing an epithelial barrier. Herein, we demonstrated the inhibitory effect of Bb soluble factors on epithelial signalling pathways leading to chemokine secretion in inflammation and confirmed their alleviating effect in a mouse model of colitis.
Methods

Bacteria and conditioned media

*Bifidobacterium breve* (Bb) C50 was purchased from Bledina-SA (Steenvoorde, France). *Bifidobacterium breve* 15698 and *Lactobacillus rhamnosus* 10893 were purchased from ATCC, and *Eubacterium rectale* L15, isolated from a dominant human microflora, was provided by G. Corthier (INRA, Jouy en Josas, France). Bacteria cultured in BH medium were seeded for 24 hours in DMEM (Gibco) containing 10% fetal calf serum (FCS) and 2% inulin. *Bb*-conditioned media corresponding to 3.6 × 10^8 CFU/ml were prepared by ultracentrifugation (100,000 g, 1 h) and adjusted to pH 7.0. As demonstrated with immune cells, active soluble factors in *Bb*-conditioned media are less than 3 kD [11]. Conditioned media were thus ultrafiltrated on Centrifuor® YM-3 (Millipore) and sterilized. This fraction constituted the *Bb*-conditioned medium (*Bb*-CM), also noted as “soluble factors” in this study.

Effect of *Bb*, *Bb*-CM or commensal bacteria on chemokine secretion pathways in intestinal epithelial cells

HT29-19A cells were seeded on 24-well plates (Falcon®) at 2 × 10^5 cells/well for 3 days. After overnight starving of FCS, monolayers were stimulated either basolaterally with TNFα (10 ng/ml) and/or apically with *Bb*-CM or *Bb* at increasing multiplicity of infection (MOI: 10, 50 or 100), i.e. number of bacteria per epithelial cell. Conditioned media were collected after 4 hours for cytokine assays.

Human cytokine antibody array and CXCL8 assay

RayBio® Human Cytokine Antibody Array V membranes (Raybiotech Inc) were incubated with HT29-19A conditioned media and processed according to the manufacturer’s instructions (Scheme of the various cytokines/chemokines detected can be found at http://www.raybiotech.com). Positive spots were analyzed with a CCD camera (Fuji LAS-1000 plus) and semi-quantified with the Image Gauge software (Molecular Dynamics).

Figure 1. *Bb* and its soluble factors dampen TNFα-induced cytokine secretion in epithelial cells. A. After 4 hour-incubation of HT29-19A cells with TNFα (MOI 100) or *Bb*-CM, epithelial cell supernatants were tested by the Raybio® human cytokine array V (One representative array of two experiments). Secretion of chemokines (CXCL1, CXCL8, CCL4) and of other inflammatory molecules was inhibited in the presence of *Bb* and *Bb*-CM as judged by densitometric analysis. B. Long lasting inhibition (up to 7 hours) of CXCL8 secretion by *Bb*-CM (~50%) was observed using ELISA. n = 7, *p < 0.01 vs TNFα. C–D. HT29-19A cell monolayers were treated (4 hours) from the basolateral compartment with TNFα together with *Bb* or commensal bacteria (*B. breve* ATCC 15698, *L. rhamnosus* ATCC 10863, *E. rectale* L15) placed in the apical compartment at increasing MOI. As quantified by ELISA, *Bb* dose-dependently inhibited TNFα-induced CXCL8 secretion, in contrast to other bacteria. n = 11, †p < 0.0001; *p < 0.001 vs TNFα.

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Secretion of CXCL8 was assayed using the Duoset enzyme-linked immunosorbent assay (ELISA) (R&D Systems).

Epithelial cell viability
As indexes of epithelial viability, we measured transepithelial electrical resistance (R), early apoptosis and zonula occludens 1 (ZO-1) distribution.

Filter-grown HT29-19A cell monolayers were cut-out from the insert and mounted in Ussing chambers. Potential difference (PD) and short-circuit current (Isc) were recorded and R was calculated according the ohm’s law.

Epithelial cell apoptosis was assessed with the monoclonal antibody M30 CytoDEATH (Roche Diagnostics, Meylan, France) which recognizes cleaved cytokeratin 18, a marker of early apoptosis. A 10 min-treatment of epithelial cells with H2O2 (100 µM) was used as a positive control. Filter-grown HT29-19A cell monolayers (Costar® clear 3460) were incubated for 4 hours with Bb, and treated according to the manufacturer. Cells were incubated successively with mouse monoclonal IgG2a, anti-M30 (1:10) and rabbit polyclonal anti-ZO-1 (24 µg/ml; Sigma-Aldrich), rabbit polyclonal anti IκB-α (1 µg/ml; Santa Cruz) or mouse anti-β-actin (2 µg/ml; Santa Cruz). Appropriate HRP-conjugated secondary antibodies were used and membranes were revealed with a CCD camera (Fuji LAS-1000 plus).

Trinitrobenzene sulfonic acid (TNBS)-induced colitis in mice
Animal experiments were performed in an accredited establishment (n°A59107, animal facility of the Institut Pasteur de Lille, France) and carried out in accordance with the guidelines of laboratory animal care published by the French Ethical committee and the rules of the European Union Normatives (number 86/609/EEC). Colitis was induced by intra-rectal administration of 50 µl TNBS (110 mg/kg) in 0.9% (w/v) NaCl/ethanol (50:50 v/v) in anesthetized BALB/c mice (female, 7–8-weeks-old) as described [13]. The colitis control group received TNBS only. The Bb i.p. group received a daily intragastric administration of 10^6 CFU of Bb in 100 µl gavage buffer 5 days before colitis induction. The Bb-CM i.p. group received two intra-peritoneal (i.p. 200 µl) injections of a 5-fold concentrated Bb-CM at one day intervals before colitis induction. Other groups received a single i.p. administration of 2 x 10^6 murine dendritic cells in 100 µl PBS, either untreated (DC group) or pre-conditioned with Bb-CM (DC_Bb-CM group) simultaneously to TNBS administration. DCs were prepared from bone marrow dendritic cells (BMDCs) as previously described [14] and incubated with or without Bb-CM for 18 hours.

**Figure 2.** Bb preserves the integrity of HT29-19A epithelial cells. Filter-grown HT29-19A monolayers were treated with 10 ng/ml TNFα with or without live Bb placed in the apical compartment for 4 h. As index of epithelial viability, we measured markers of apoptosis (M30) and epithelial tight junction integrity (ZO-1). After 4 hour-treatment with Bb, HT29-19A monolayers (Costar® clear 3460) were labelled with the monoclonal antibody M30 CytoDEATH recognizing caspase-cleaved cytokeratin 18 (1:10, Roche Diagnostics) and rabbit polyclonal anti-ZO-1 (24 µg/ml, Zymed). Cells were observed with the laser scanning confocal microscope LSM 510 Carl Zeiss. Treatment with H2O2 (100 µM), used as a positive control, induced apoptosis (blue M30 labeling) and alteration of ZO-1 distribution (green). In contrast, in basal condition or after treatment with Bb at MOI 100, no M30 labeling was observed and ZO-1 distribution was preserved. Results are representative of three independent experiments. doi:10.1371/journal.pone.0005184.g002
Animals were sacrificed 48 h after TNBS administration and macroscopic colonic damage was analyzed using the Wallace scoring method [15]. Protection observed with the various treatments was calculated taking the Wallace score of TNBS mice (control) as the highest (100% colonic damage). Total RNA was isolated from colon tissue using the RNeasy kit (Qiagen). Reverse transcription was performed on 2 μg, followed by real-time PCR (7300 PCR system from Applied Biosystems) using the Taq-Man PCR Master Mix (Applied Biosystems) and primers and probes designed by Applied Biosystems for murine IL-1β, TNF-α, CXCL1 (KC), COX-2, IL-6, IL-23 and IL-17 and TATA-box binding protein (Tbp). Data were normalized to expression of Tbp.

Statistical analysis
Statistical analysis was performed using the SAS package. The results are expressed as scatter plots with medians, or as means±SEM. Differences between groups were compared by paired t-test or non-parametric tests (Wilcoxon) and were considered significant for values of p<0.05.

Results
**Bb soluble factors inhibit secretion of inflammatory cytokines by intestinal epithelial cells**
Bb soluble factors inhibit LPS-induced TNFα secretion in immune cells [11]. Their effect on TNFα-induced cytokine secretion in HT29-19A epithelial cells was tested using Raybio® membranes that allow screening of a large panel of inflammatory factors. Bb and Bb-CM inhibited TNFα-induced secretion of CXCL8 (IL-8), CXCL1 (GRO) and CCL4 (MIP-1β) and to a lesser extent of tissue inhibitor of metalloproteinases (TIMP-1, TIMP-2), neutrophil activating factor-2 (NAP-2), neutrophin.
NT-3 and growth factors such as hepatocyte growth factor (HGF) (Fig. 1A). Importantly, Bb and Bb-CM alone did not modify the cytokine profile observed under basal conditions (data not shown). TNFα-induced secretion of CXCL8, tested by ELISA, increased with time but a constant fraction (50 to 58%) was inhibited by Bb-CM (1282.5 ± 211 vs 611.5 ± 282 pg/ml after 2 hours, 1295 ± 555 vs 1134 ± 342 pg/ml after 4 hours, 2695 ± 555 vs 1134 ± 342 pg/ml after 7 hours; p < 0.01). Notably, Bb-CM also inhibited IL-1β-induced CXCL8 secretion (data not shown).

We next evaluated the capacity of apically applied Bb to inhibit TNFα-induced CXCL8 production in the basolateral compartment of polarized HT29-19A epithelial cells. Basal secretion of CXCL8 was not modified by Bb (data not shown), but Bb induced a dose-dependent inhibition of TNFα-induced CXCL8 secretion that was maximal at MOI 100 (73% inhibition, p < 0.0001) (Fig. 1B). Notably, Bb-CM also inhibited IL-1β-induced CXCL8 secretion (data not shown).

The inhibitory effects of Bb on chemokine secretion were not due to the alteration of HT29-19A epithelial integrity as attested by stable electrical resistance of epithelial monolayers in the presence of bacteria at high concentration (MOI 100, R = 98 ± 11 ohms.cm²) as compared to control epithelial cells (R = 116 ± 9 Ω.cm²). In addition, integrity of tight junctions was also attested by a normal distribution of ZO-1 protein and by the lack of bacteria-induced apoptosis of epithelial cells (Fig. 2).

**Bb soluble factors inhibit the NF-κB pathway**

Bb-CM inhibited TNFα-induced nuclear translocation of the p65 NF-κB subunit. Nuclear translocation was observed in 83% of cells activated by TNFα alone, but in only 30% of cells preincubated with Bb-CM (Fig. 3A). Accordingly Bb soluble factors impaired the formation of p65- and p50-DNA complexes in response to a 4-hour stimulation with TNFα (Fig. 3B). In contrast to Bb (MOI 100), which inhibited by 40% the formation of the DNA complexes (Fig. 3C), other Gram (+) bacteria had no effect. Neither Bb nor other Gram (+) bacteria induced the binding of p65- and p50-NF-κB on epithelial DNA. As shown in Fig. 3D, Bb-CM also reduced the early phosphorylation of IκBα (5 min) induced by TNFα, a step that otherwise commits the molecule to subsequent ubiquitination and degradation and accordingly promotes stabilization of IκBα from 15 to 30 min.

**Bb soluble factors inhibit the AP-1 pathway**

DNA binding of AP-1 induced by TNFα was inhibited by 35% in the presence of Bb-CM (Fig. 4A) and by 40% by Bb at MOI 100 (Fig. 4B). In contrast to Bb, none of the tested Gram (+) bacteria had any inhibitory effect (Fig. 4C). Furthermore, Bb-CM inhibited p38-MAPK phosphorylation, an important step in AP-1 activation (Fig. 4D). This inhibition, observed at 15 min (-44%), was still visible after 30 min (-63%).
**Bb soluble factors alleviate inflammation in a murine model of TNBS colitis**

We next investigated the capacity of Bb soluble factors to dampen the colonic inflammatory response in TNBS-induced colitis in mice. The high inflammatory score observed in control TNBS mice, (Wallace score WS = 4.5 ± 0.4) was decreased in Bb i.g. mice (WS to 3.2 ± 0.8), indicating a mild protection (30%) (Fig. 5A, 5B). Accordingly, high mRNA expression of pro-inflammatory cytokines/mediators observed in control TNBS mice slightly decreased in Bb i.g. mice (Fig. 5C). In contrast, pre-treatment with Bb-CM by i.p. route induced a significant protection against colitis (WS = 1.7 ± 0.8, 62% protection) and a statistically significant decrease in pro-inflammatory cytokine expression [IL-1β, CXCL1 (equivalent to human IL-8), COX2, IL-23, IL-6]. Since i.p. administration of Bb-CM was efficient in dampening inflammation, the effect of soluble factors on mucosal dendritic cells (DC) was tested. DC pre-conditioned with Bb-CM (DC-Bb-CM) were injected i.p. into mice at the same time as TNBS challenge. In contrast to non-treated DC (WS = 4.4 ± 0.4), DC-Bb-CM conferred a significant protection against colitis (WS = 2.3 ± 0.4, 49% protection, *p < 0.01*) and reduced the expression of all pro-inflammatory cytokines/mediators. These results indicate a protective effect of Bb soluble factors *in vivo* and suggest that this protective effect relies primarily on their capacity to condition regulatory dendritic cells.

**Discussion**

Selected strains of probiotic micro-organisms participate in the control of intestinal homeostasis and help preventing intestinal...
disorders. In the intestinal microflora, *Bifidobacterium* species are generally considered beneficial to the host and various strains of *Bifidobacterium* are used as probiotics. The mechanisms by which these bacteria can modulate the function of epithelial and immune cells remain incompletely elucidated. We have previously shown that soluble factors from *Bifidobacterium breve* C50 decrease pro-inflammatory cytokine secretion by immune cells [11]. We now show that these soluble factors effectively dampen intestinal inflammation by targeting both epithelial and local dendritic cells.

In inflammatory conditions, an important function of intestinal epithelial cells is to control the influx and activation of immune cells into the lamina propria through the production of chemokines and cytokines. Previous studies have supported the view that selected commensal or probiotic bacteria can alleviate inflammation [16]. Along this line, we have already demonstrated that the low molecular weight soluble factors (<3 kD) produced by *Bb* inhibit LPS-induced TNFα secretion by immune cells [11]. In this study, *Bb* and *Bb*-CM, unlike other tested Gram (+) bacteria, were able to inhibit the release of chemokines and various inflammatory molecules in epithelial cells. The most prominent effect of *Bb*-CM was observed on CXCL8 secretion. Inhibition of CXCL8 secretion by probiotics has been reported in epithelial cells but was observed on CXCL8 secretion. Inhibition of CXCL8 by probiotics is often more effective in the proximal intestine (rotavirus diarrhea) than in the colon (inflammatory bowel diseases). In this respect, it is interesting that *Fusobacterium prausnitzii*, a commensal strain poorly represented in the microbiota of patients with Crohn’s disease, can produce soluble anti-inflammatory factors which may thus be delivered directly to the adjacent mucosa [23].

Taken together, our results indicate that small factors released by *Bifidobacterium breve* C50 might help maintain intestinal homeostasis by targeting cells of the innate immune system such as epithelial and dendritic cells. Studies are needed to further characterize the *Bb* soluble factor(s) responsible for the inhibition of kinases involved in multiple steps of intestinal inflammation.

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**Author Contributions**

Conceived and designed the experiments: EH CL CG BP MH. Performed the experiments: EH CL CG. Analyzed the data: EH CL CG MH. Wrote the paper: EH NCB MH.

**References**


