

D. I. Cook · J. A. Young

Towards a physiology of epithelial pathogens

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It has long been known that pathogens such as *Vibrio cholerae*, *Bordetella pertussis*, *Clostridium difficile* and *Escherichia coli* secrete toxins that produce specific changes in cell signalling in epithelial and other cells [7, 38]. These toxins have tended to be viewed as anomalies, useful as examples to stir the interest of medical students, and helpful for studies on signalling systems, but without great significance for our overall understanding of the interactions of pathogens with epithelia or the development of the signs and symptoms of the induced disease. Recent advances in the understanding of intracellular signalling systems, the sequencing of an increasing number of bacterial and viral genomes, and the availability of genetically modified mice, however, have resulted in an explosive growth in the knowledge of the molecular mechanisms by which pathogens affect epithelial function. Studies on the responses of epithelia to a wide variety of pathogens, including influenza viruses, rotaviruses, *Pseudomonas aeruginosa* and *Bordetella pertussis*, among others, have revealed a plethora of unsuspected acute and long-term effects of pathogens on epithelial function. Not only have they provided important new information on the mechanisms by which pathogens lead to disease, but they have also offered unexpected insights and tantalizing glimpses into the mechanisms controlling normal epithelial function.

In this overview, we will focus on the acute effects that pathogens have on epithelia, i.e. the effects occurring within minutes of the epithelium being exposed to a pathogen or its toxin. In particular, we will focus on recent progress in the elucidation of the roles of toxins and of the attachment of pathogens to the cell surface, as

triggers for the pathological effects of bacteria and viruses on epithelia. The examples chosen are only illustrative and are intended merely to give some feeling about current progress in the field.

The effects of toxins

As mentioned above, the concept that bacteria produce diarrhoea by secreting enterotoxins is well established. For example, *Vibrio cholerae* [38], enterotoxic *Escherichia coli* [4, 38] and *Clostridium difficile* [35] produce their effects by secreting protein toxins into the extracellular medium: cholera toxin irreversibly activates the G_s protein [38], *E. coli* heat-stable enterotoxin activates guanylate cyclase [4], and clostridial toxins A and B irreversibly inactivate the small G proteins rhoA, rac and cdc42 [35]. The role of the toxins secreted by *Bordetella pertussis* [2] in producing whooping cough is also becoming increasingly well defined.

Enteropathogenic *E. coli* [45], *Salmonella* spp. [9, 11], *Shigella* spp. [36], and *Pseudomonas aeruginosa* [47], however, like many other Gram-negative bacteria, have the capacity to adhere to the surface of the epithelium and to inject effector proteins directly into the cytosol [47]. Although the molecular targets for these injected proteins have been studied extensively, the mechanisms by which the proteins lead to altered epithelial transport are obscure in most cases [45]. *Salmonella* spp., for example, inject a variety of enterotoxins (Fig. 1), among which SopE2 and SopB stimulate the small G protein cdc42 [10, 49], and SopE stimulates cdc42 as well as the closely related rac1 [10]. In polarized epithelial cells, rac1 acts synergistically with the bacterial proteins SipA and SipC to produce the cytoskeletal rearrangements [11], evident as membrane ruffling, which mediate bacterial entry into the cell across the apical membrane [5]. In contrast, active cdc42 is the major mediator of bacterial entry across the basolateral membrane, as it is across the plasma membranes of nonpolarized cells, with rac1 playing a lesser role [5, 11]. Following bacterial entry, a third

D.I. Cook (✉) · J.A. Young
Department of Physiology, University of Sydney,
NSW 2006, Australia
e-mail: davidc@physiol.usyd.edu.au
Tel.: +61-2-93513477, Fax: +61-2-93519926 or +61-2-93512058

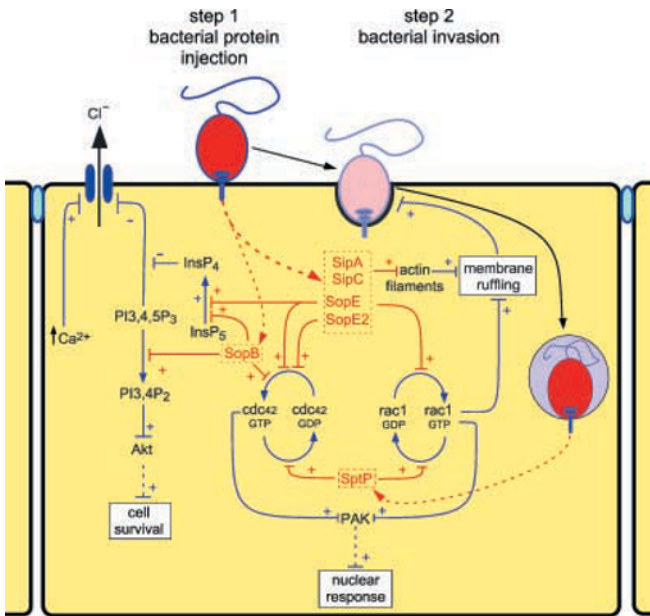


Fig. 1 Effects of the effector proteins injected by *Salmonella* species on signalling pathways in epithelial cells [9, 11]. The role of rac1 in regulating invasion of the bacterium across the apical membrane, in contrast to the more widely recognized role of both cdc42 and rac1 in regulating invasion across the basolateral membrane, is reported in Criss et al. [5]. The role of cdc42, rac and PAK kinases in triggering the responses of the nucleus to *Salmonella* infection is described in Galán and Zhou [11]. The roles of SopB, PI3,4P₂ and the Akt kinase in mediating the effects of *Salmonella* on cell survival are described in Marcus et al. [26] and in Steele-Mortimer et al. [39]. In step 1, a bacterium has engaged the apical membrane of the cell and is injecting proteins SipA, SipC, SopE, SopE2 and SopB (red lettering and broken red arrows) which then catalyse the transformations indicated. One outcome of the activation process is the initiation of membrane ruffling which, in turn, facilitates bacterial invasion. Once within the cell, the bacterium releases another protein (SptP) which acts on cdc42 and rac1 and reverses membrane ruffling. [InsP₅ Inositol 1,3,4,5,6 pentakisphosphate, InsP₄ inositol 1,4,5,6 tetrakisphosphate, PI3,4,5P₃ phosphatidylinositol 3,4,5 trisphosphate, PI3,4P₂ phosphatidylinositol 3,4 biphosphate]

enterotoxin, SptP, is injected which reverses both the activation of the G proteins and the cytoskeletal changes [11]. Tantalizingly, SopB also acts as an inositol phosphatase that increases the cytosolic concentration of the activator of Ca²⁺-activated Cl⁻ channels, inositol 1,4,5,6-tetrakisphosphate (IP₄) [9], while decreasing the concentration of the inhibitor of these channels, phosphatidylinositol 3,4,5-trisphosphate (PI 3,4,5P₃) [26]. In keeping with the functional redundancy among the toxins injected by *Salmonella*, SopE also appears to be able indirectly to stimulate the breakdown of IP₄ [49]. These changes in phosphoinositide levels may act synergistically with the increase in intracellular Ca²⁺ that accompanies cellular invasion by *Salmonella* [11, 31] to activate Ca²⁺-activated Cl⁻ channels. This attractive model for the stimulation of fluid and electrolyte secretion by *Salmonella*, however, has not been tested extensively and the precise links between the injected bacterial toxins and the derangements in epithelial transport they produce remain unclear. In particu-

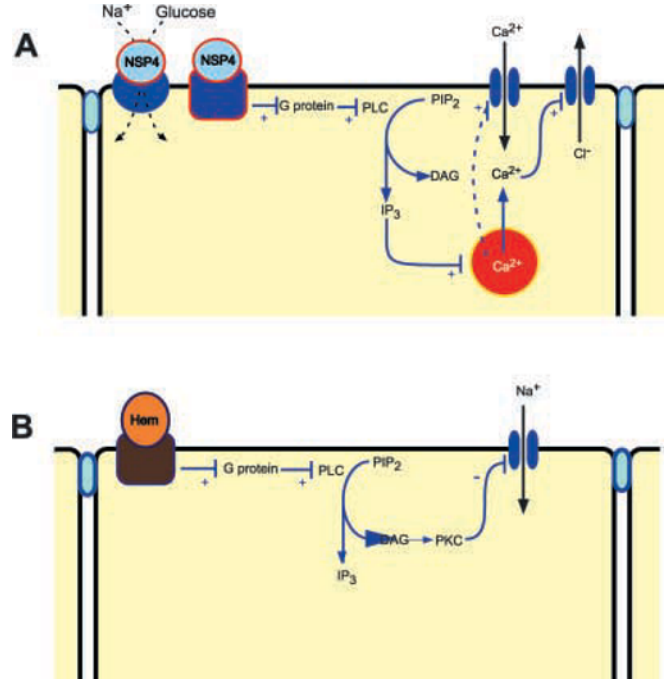


Fig. 2 **A** The mechanism by which the NSP4 enterotoxin of rotaviruses activates Cl⁻ channels [29] and inhibits SGLT1 [16] in intestinal epithelial cells. Although Ca²⁺ release from intracellular stores is shown as triggering Ca²⁺ influx across the apical membrane, in fact it is not yet known whether this influx takes place across the apical or the basolateral membrane, or both. **B** Mechanism by which influenza hemagglutinin inhibits epithelial Na⁺ channels in respiratory and other epithelia [21]. [DAG Diacylglycerol, IP₃ inositol 1,4,5 trisphosphate, PIP₂ phosphatidylinositol 4,5-bisphosphate, PKC protein kinase C, PLC phospholipase C, SGLT1 Na⁺-glucose cotransporter 1]

lar, none of these toxins has yet been linked to the increase in expression of epithelial Galanin-1 receptors which, on the basis of studies in mutant mice, has been postulated as an essential precursor to the onset of diarrhoea [27].

Among the known targets of toxin action, rho, rac and cdc42 are notable for being targeted by many secreted [35] and injected toxins [9, 11, 36, 45]. These toxins are usually thought to be concerned principally with triggering cytoskeletal re-organization leading to alterations in paracellular permeability [11, 37], although recent reports that these small G proteins regulate transporters, including Na⁺-H⁺ exchangers (NHEs) [40, 43] and aquaporins [20], suggest that they may play an important role in producing the transport defects that accompany the early phase of epithelial infections.

Additional targets for bacterial toxins continue to be identified. The α -hemolysin of uropathic *E. coli*, for example, has recently been shown to induce Ca²⁺ oscillations in renal epithelial cells by a mechanism that appears to involve both L-type Ca²⁺ channels and IP₃-gated Ca²⁺ stores [44]. Similarly, recent studies have shown that *Pseudomonas aeruginosa* induces apoptosis in epithelial cells by stimulating Jun N-terminal kinases and up-regulating CD95 [19], which in turn inhibits Na⁺-H⁺ exchange in T-lymphocytes [24].

Bacteria are not the only pathogens that disturb epithelial function by means of toxins. Rotaviruses, an important cause of diarrhoeal disease in children, have been shown to produce an enterotoxin, NSP4. This viral glycoprotein activates phospholipase C in colonic crypt cells leading to the production of inositol 1,4,5-trisphosphate, increased intracellular Ca^{2+} [6, 30, 48] and Cl^- secretion from crypt cells (Fig. 2A; [30]): it also alters paracellular permeability [41] and noncompetitively inhibits the intestinal Na^+ -glucose cotransporter, SGLT1 [16].

The effects of attachment

A striking finding of recent studies with both bacteria and viruses is that attachment of the pathogen to the epithelium, the first stage in the process of infection, is itself sufficient to trigger pathological changes in epithelial function. Thus, binding of *Pseudomonas aeruginosa* to airway epithelium has been reported to inhibit transepithelial Na^+ transport [8] and to trigger mucin overproduction via the Ras-MAPK-pp90rsk pathway [25]. Which receptor is responsible for these effects is unclear. At least in the case of increased mucin production [25], the Toll-like receptor 4 (TLR4) [42] and CD14 [1], which are believed to mediate epithelial responses to lipopolysaccharide from *Pseudomonas aeruginosa* and other Gram-negative bacteria, appear not to be involved. Conversely, binding of lipopolysaccharide to the cystic fibrosis transmembrane conductance regulator (CFTR) has been proposed as a critical step in the endocytosis by epithelia of Gram-negative bacteria such as *Pseudomonas aeruginosa* and *Salmonella* spp. [33].

Viral attachment also influences epithelial transport. Thus, we have recently demonstrated that influenza virus induces a marked down-regulation of epithelial Na^+ channel activity in respiratory, gastrointestinal and renal epithelia [21]. This down-regulation is the result of the hemagglutinin in the viral coat binding to an apical membrane receptor which then activates phospholipase C and protein kinase C (Fig. 2B). This effect of influenza hemagglutinin can be reproduced by other hemagglutinins, including concanavalin A [21] and the B-oligomer of pertussis toxin (Kunzelmann and Cook, unpublished data) and, unlike the rotavirus NSP4 enterotoxin [16], does not affect SGLT1 activity [21]. Furthermore, epithelia have been reported to show increased activation of the Raf/MEK/ERK signalling cascade within 5 min of exposure to influenza virus [34]. It thus appears likely that other infectious agents with hemagglutinating activity, for example rhinoviruses and parainfluenza viruses, may similarly lead to decreased Na^+ transport and fluid accumulation in respiratory epithelia. Recent reports that respiratory syncytial virus activates protein kinase C and MAP kinase [28], that rhinoviruses activate p38 MAP kinase [15], and that the B-oligomer of pertussis toxin activates p42/p44 MAP kinase [12] further suggest that receptor binding by viruses and other pathogens may be an important trigger in epithelia for the changes in the

rate of transport of electrolytes as well as the secretion of proteins such as cytokines and mucins which accompany infection. Interestingly, the surface receptors for respiratory syncytial virus appear to include both TLR4 and CD14 [23], the same two proteins that mediate responses to lipopolysaccharide.

Summary

The study of the mechanisms by which viral and bacterial toxins and attachment factors alter epithelial function is progressing rapidly. The recent molecular identification of key epithelial transporters such as rSK4 [46], the increasing sophistication of our understanding of the mechanisms regulating epithelial transporters [3, 17, 18, 22], and the ongoing development of novel techniques for measuring the properties of epithelia [13, 14] all suggest that this process will accelerate. The substantial commonality of these mechanisms among viruses and bacteria suggests that the new knowledge gained in this area will be of general significance to the understanding of epithelial infection, rather than of just limited applicability to a single organism or strain. Furthermore, studies on the signalling systems used by these pathogens to modify epithelial behaviour will shed new light on the control of normal epithelial function.

Given recent discussion about the future of physiology [32], it is reassuring that physiologists can look forward not only to playing a key role in linking genes to function, but also in making a major contribution to the understanding of how infectious diseases produce their characteristic pathologies.

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