

## Immunosuppressive Activity of Cepacidine A, a Novel Antifungal Antibiotic Produced by *Pseudomonas cepacia*

LEE, CHUL-HOON<sup>1\*</sup>, JUNG-WOO SUH<sup>2</sup>, AND YOUL-HEE CHO<sup>1</sup>

<sup>1</sup>Department of Medical Genetics, College of Medicine, Hanyang University, Seoul 133-791, Korea

<sup>2</sup>R&D Center of Bioscience Institute of Science and Technology, Cheiljedang Corp., Ichon, Kyunggi-Do 467-810, Korea

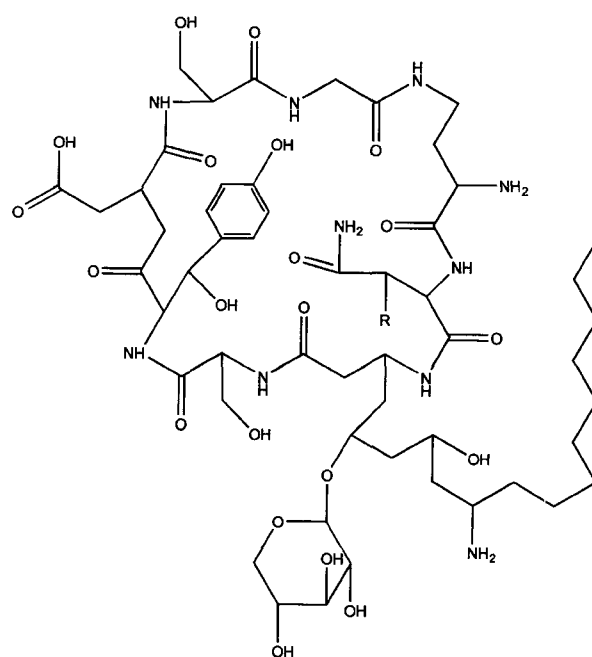
Received: May 29, 1999

**Abstract** Cepacidine A was first identified as a novel antifungal antibiotic which was isolated from the culture broth of *Pseudomonas cepacia* AF2001. It showed a potent *in vitro* antifungal activity against various pathogenic fungi, but did not show any activity against bacteria. Recently, the immunosuppressive action of cepacidine A was discovered using an *in vitro* screening system involving inhibition of the proliferation of murine lymphocytes stimulated by 2 mitogens, and also by *in vivo* mouse models involving inhibition of delayed type hypersensitivity and SRBC hemagglutination. Cepacidine A showed a significant activity of cellular immunosuppression (ED<sub>50</sub>) at concentration levels of 1–3 mg/kg, i.p.. Unfortunately, the delayed toxicity at a dose of above 3 mg/kg i.p. was apparent.

**Key words:** Antifungal antibiotic, cepacidine A, immunosuppressive activity

In the course of screening for new antifungal substances of microbial origin, cepacidine A, a novel glycopeptide, was found in the fermentation broth of a strain of *Pseudomonas cepacia* AF2001 [4, 6]. This strain was deposited in the Korean Federation of Culture Collections, Seoul, Korea, with a registration number of KFCC 10773. Cepacidine A is a mixture of two closely related compounds of cepacidine A<sub>1</sub> and A<sub>2</sub> (Fig. 1).

Some immunosuppressive substances such as FK-506 (tacrolimus), cyclosporin A, and rapamycin were first screened as antifungal antibiotics, and then they were found to have potent immunosuppressive activities after extensive immunopharmacological studies [2, 7, 10]. Therefore, we also tried to test the possible immunosuppressive activity of cepacidine A by using immunopharmacological studies, such as the oxazolone-induced delayed type hypersensitivity, sheep red blood cell hemagglutination, and proliferation of



Cepacidine A<sub>1</sub> R=OH  
Cepacidine A<sub>2</sub> R=H

**Fig. 1.** The structure of cepacidine A<sub>1</sub> and A<sub>2</sub>.

murine lymphocytes stimulated by concanavalin A for the T-cell and lipopolysaccharide for the B-cell. The degree of each type of lymphocyte stimulation by mitogen may be assayed, by measuring the amount of [<sup>3</sup>H] thymidine which was incorporated into newly synthesized DNA. In the present paper, the results obtained from the above-mentioned studies are presented.

### Mitogen-Induced Proliferation of the Murine Lymphocytes

B-lymphocytes were isolated from the ICR mouse spleen and T-lymphocytes from the mouse thymus by standard conditions [1, 5, 8], and they were suspended in Dulbecco's

\*Corresponding author

Phone: 82-2-2290-8289; Fax: 82-2-2298-4857;  
E-mail: chhlee@email.hanyang.ac.kr

**Table 1.** The influence of cepacidine A on mitogen-induced blastogenesis.

Functional assay	Activity (ED <sub>50</sub> , μM)		
	Cepacidine A	Cyclosporin A	Cyclophosphamide
Suppression of the B-cell proliferation + LPS	0.3	0.3	>10
Suppression of the T-cell proliferation + Con-A	1	0.01	>10

modified Eagle's medium (DMEM). To assess suppression of the cell proliferation, 10<sup>6</sup> cells/ml were incubated overnight at 37°C in the presence of 10 μg/ml lipopolysaccharide for B-cells and 3 μg/ml concanavalin A for T-cells. Cepacidine A, dissolved at 10, 1, 0.3, 0.1, and 0.01 μM in 0.1% DMSO, was evaluated under these conditions. Cyclophosphamide and cyclosporin A in 0.1% DMSO were used in each case as positive reference substances. After an overnight incubation, 2 μCi [<sup>3</sup>H] thymidine was added to each well. Cells were then harvested after an additional 48-h incubation, and thymidine incorporation was assessed by a liquid scintillation counting. As shown in Table 1, an effective concentration of immunological suppression of LPS-induced B-cell proliferation (ED<sub>50</sub>) with cepacidine A is known to be 0.3 μM. This result revealed that cepacidine A has a potential for the potent immunosuppressant which is comparable to cyclosporin A. However, in the case of T-cell proliferation in response to Con-A, the ED<sub>50</sub> value of cepacidine A is about 3 times higher (1 μM) than that of B-cell proliferation. These results indicated that cepacidine A significantly suppressed the activation of B lymphocyte, but can suppress T-lymphocyte activation only moderately, although suppression of cepacidine A in T-cell activation was much lower than that of the cyclosporin A. Interestingly, cyclosporin A suppressed the response to Con-A much more than to LPS. According to these results, it is concluded that cyclosporin A strongly affects T-cell function [9]. In addition, cepacidine A seems to affect mainly the B-cell activation. Unfortunately, under the condition, we could not determine an applicable level of cepacidine A as a therapeutic agent. Therefore, the mouse *in vivo* assays described below were the only experiments that were carried out to detect any functional activity of cepacidine A for immunosuppression.

#### Cellular Immunosuppression: Oxazolone-Induced Delayed Type Hypersensitivity

One type of cell-mediated immunity is known as a delayed type hypersensitivity (DTH). It is caused by injecting antigen (5% oxazolone) into the skin of a mouse which was previously immunized by the same antigen. The reaction is characterized by a reddening of the skin and a localized inflammation.

The shaved abdominal surfaces of a group of 5 male ICR mice (23–27 g) were sensitized by applying 0.1 ml of 5% oxazolone. One hour later, cepacidine A dissolved in 0.1% DMSO at initial doses of 0.1, 1, 3, and 10 mg/kg was

**Table 2.** Cellular immunosuppressive activity of cepacidine A on oxazolone-induced DTH.

(n=5 mice/group)			
Compound	Route	Dose	Inhibition (%) <sup>d</sup>
Vehicle control (0.1% DMSO)	i.p.	20 ml/kg×5 days <sup>c</sup>	0
Cepacidine A	i.p.	10 mg/kg×5	- <sup>a</sup>
		3 mg/kg×5	50 <sup>b</sup>
		1 mg/kg×5	49
		0.1 mg/kg×5	36
Cyclosporin A	i.p.	50 mg/kg×5	60

<sup>a</sup>1/5 died on day 2, 4/5 died on day 4, totally 5/5 died in the study.

<sup>b</sup>2/5 died on day 3, 1/5 died on day 4, totally 3/5 died in the study.

<sup>c</sup>Administered once a day for 5 consecutive days.

<sup>d</sup>Percent inhibition of the swelling in oxazolone-treated ears versus control ears.

first administered *i.p.*, and then daily for 5 consecutive doses were given. After an additional 4 days, animals were challenged by applying 25 μl of 5% oxazolone to the right ear. Twenty-four hours later, ear thickness was measured with a Dyer Model micrometer gauge [3].

In general, 50% or greater decrease in oxazolone-treated ears versus control ears was considered to have a significant immunosuppressant activity. As a positive reference substance, a single dose (50 mg/kg) of cyclosporin A in 0.1% DMSO was used.

As shown in Table 2, the ED<sub>50</sub> value of *in vivo* cellular immunosuppressive activity of cepacidine A was shown at the concentration of 1–3 mg/kg *i.p.*. Before beginning the above described experiment, a comparison of the acute toxicity of cepacidine A with ICR mice was made and then evaluated. All of the mice survived the *p.o.* administration of 200 mg/kg cepacidine A, but half of the mice died when injected intravenously with 12.5 mg/kg (LD<sub>50</sub>, data not shown). Due to the potent toxicity of cepacidine A when *i.v.* injected, we decided to identify *in vivo* immunosuppressive activity by an *i.p.* route. But unfortunately, the immunosuppressive activity of cepacidine A induced the delayed toxicity of cepacidine A at a dose of above 3 mg/kg *i.p.*. On the other hand, only in the aspect of certain activity, cepacidine A showed a significant reaction of the cellular immunosuppression.

#### Humoral Immunosuppression: Sheep Red Blood Cell (SRBC) Hemagglutination

Group of 6 female ICR mice (23–27 g) were sensitized by the *i.v.* injection of 0.2 ml of 2% SRBC suspension. After

**Table 3.** Humoral immunosuppressive activity of cepacidine A on SRBC hemagglutination.

(n=6 mice/group)			
Compound	Route	Dose	Inhibition (%) <sup>d</sup>
Vehicle control (0.1% DMSO)	i.p.	20 ml/kg×3 days <sup>c</sup>	32
Cepacidine A	i.p.	10 mg/kg×3	- <sup>a</sup>
		3 mg/kg×3	8 <sup>b</sup>
		1 mg/kg×3	32
		0.1 mg/kg×3	64
Cyclophosphamide	i.p.	20 mg/kg×3	2

<sup>a</sup>3/6 died on day 2, 3/6 died on day 3, totally 6/6 died in the study.

<sup>b</sup>3/6 died on day 3, totally 3/6 died in the study.

<sup>c</sup>Administered once a day for 3 consecutive days.

<sup>d</sup>Reciprocal serum dilution, exhibiting a complete hemolysis.

9 days of sensitization to SRBC, blood samples were taken from the orbital sinus, and equal parts of complement inactivated serum from the group of 6 mice were pooled to yield a single 0.25 ml sample. Serial 2-fold dilutions were then carried out 10 times in the presence of added complement. Serum titer was expressed as the reciprocal of that dilution which exhibited a complete hemolysis. Serum titers of less than 16 were, in general, considered to be significant, which indicated a possible immunosuppressant activity.

Cepacidine A dissolved in 0.1% DMSO at initial doses of 0.1, 1, 3, and 10 mg/kg was administered i.p. to mice for 3 consecutive days beginning 2 h after sensitization to SRBCs. As a positive reference substance, cyclophosphamide (30 mg/kg) in 0.1% DMSO was used.

As shown in Table 3, cepacidine A showed a significant humoral immunosuppressive activity at a concentration of 3 mg/kg i.p. It should be mentioned here that we could not achieve our goal mainly because of the delayed toxicity of the compound, which seems to have a positive immunosuppressive activity without any sign of toxicity. Further studies on the chemical modification of the cepacidine A structure should be delineated to separate its positive immunosuppressive activity from their toxicity.

## REFERENCES

- Dayton, J. S., L. A. Turka, C. B. Thompson, and B. S. Mitchell. 1992. Comparison of the effects of mizoribine with those of azathioprine, 6-mercaptopurine, and mycophenolic acid on T lymphocyte proliferation. *Mol. Pharmacol.* **41**: 671-676.
- Goto, T., T. Kino, H. Hatanaka, M. Nishiyama, M. Okuhara, M. Kohsaka, H. Aoki, and H. Imanaka. 1987. Discovery of FK-506, a novel immunosuppressant isolated from *Streptomyces tsukubaensis*. *Transplant Proc.* **19**(suppl. 6): 4-8.
- Grieswold, D. E., J. A. DiLorenzo, and P. Calabresi. 1974. Quantification and pharmacological dissection of oxazolone-induced contact sensitivity in the mouse. *Cell Immunol.* **11**: 198-204.
- Lee, C.-H., S. Kim, B. Hyun, J. Suh, C. Yon, C. Kim, Y. Lim, and C. Kim. 1994. Cepacidine A, a novel antifungal antibiotic produced by *Pseudomonas cepacia*. I. Taxonomy, isolation and biological activity. *J. Antibiot.* **47**: 1402-1405.
- Lee, S.-Y., S. B. Han, H. S. Kim, Y. H. Kim, H. M. Kim, C. J. Kim, S. D. Hong, and J.-J. Lee. 1997. Immunosuppressive characteristics of oligomycin derivatives produced by *Streptomyces lydicus* MCY-524. *J. Microbiol. Biotechnol.* **7**: 56-61.
- Lim, Y., J. Suh, S. Kim, B. Hyun, C. Kim, and C.-H. Lee. 1994. Cepacidine A, a novel antifungal antibiotic produced by *Pseudomonas cepacia*. II. Physico-chemical properties and structure elucidation. *J. Antibiot.* **47**: 1406-1416.
- Martel, R. R., J. Klicius, and S. Galet. 1977. Inhibition of the immune response by rapamycin, a new antifungal antibiotic. *Can. J. Physiol. Pharmacol.* **55**: 48-51.
- Mishell, B. B. and S. M. Shiigi. 1980. Cell proliferation, pp. 153-160. In B. B. Mishell and S. M. Shiigi (eds.), *Selected Methods in Cellular Immunology*, vol. 5. W.H. Freeman Co., San Francisco, U.S.A.
- Nakamura, A., K. Nagai, S. Suzuki, K. Ando, and G. Tamura. 1986. A novel method of screening for immunomodulating substances, establishment of an assay and its application to culture broths of microorganisms. *J. Antibiot.* **39**: 1148-1154.
- White, D. J. G. and R. Y. Calne. 1982. The use of cyclosporin A immunosuppression in organ grafting. *Immun. Rev.* **65**: 115-131.