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TITLE:

Synthesis, Characterization, and Application of Superparamagnetic Iron Oxide Nanoprobes for Extrapulmonary Tuberculosis Detection

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SHORT ABSTRACT:

To improve serological diagnostic tests for *Mycobacterium tuberculosis* antigens, we developed superparamagnetic iron oxide nanoprobes to detect extrapulmonary tuberculosis.

LONG ABSTRACT:

A molecular imaging probe comprising superparamagnetic iron oxide (SPIO) nanoparticles and *Mycobacterium tuberculosis* surface antibody (MtbsAb) was synthesized to enhance imaging sensitivity for extrapulmonary tuberculosis (ETB). An SPIO nanoprobe was synthesized and conjugated with MtbsAb. The purified SPIO-MtbsAb nanoprobe was characterized using TEM and NMR. To determine the targeting ability of the probe, SPIO-MtbsAb nanoprobe was incubated with Mtb for in vitro imaging assays and injected into Mtb-inoculated mice for in vivo investigation with magnetic resonance (MR). The contrast enhancement reduction on magnetic resonance imaging (MRI) of Mtb and THP1 cells showed proportional to the SPIO-MtbsAb nanoprobe concentration. After 30 min of intravenous SPIO-MtbsAb nanoprobe injection into Mtb-infected mice, the signal intensity of the granulomatous site was enhanced by 14-fold in the T2-weighted MR images compared with that in mice receiving PBS injection. The MtbsAb nanoprobe can be used as a novel modality for ETB detection.

INTRODUCTION:

Globally, extrapulmonary tuberculosis (ETB) represents a significant proportion of tuberculosis (TB) cases. Nevertheless, ETB diagnosis is often missed or delayed because of its insidious clinical presentation and poor performance on diagnostic tests; false results include sputum smears negative for acid-fast bacilli, lack of granulomatous tissue on histopathology, or failure to culture *Mycobacterium tuberculosis* (Mtb). Relative to typical cases, ETB occurs less frequently and involves little liberation of the Mtb bacilli. In addition, it is usually localized at difficult-to-access sites, such as lymph nodes, pleura, and osteoarticular areas¹. Thus, invasive procedures for obtaining adequate clinical specimens, which makes bacteriological confirmation risky and difficult, are essential²⁻⁴.

Commercially available antibody detection tests for ETB are unreliable for clinical detection because of their wide range of sensitivity (0.00–1.00) and specificity (0.59–1.00) for all extrapulmonary sites combined⁵. Enzyme-linked immunospot (ELISPOT) assays for interferon- γ , culture filtrate protein (CFP), and early secretory antigenic target (ESAT) have been used for diagnosing latent and active TB. However, the results vary between different disease sites for diagnosing ETB⁶⁻⁸. In addition, skin PPD (purified protein derivative) and QuantiFERON-TB frequently provided false negative results⁹. QuantiFERON-TB-2G is a whole blood immune reactivity assay, which does not require a specimen from the affected organ and this may be an alternative diagnostic tool^{6,10,11}. Other diagnostic methods typically used for TB meningitis, such as polymerase chain reaction, are still too insensitive to confidently exclude clinical diagnosis^{12,13}. These conventional tests demonstrate insufficient diagnostic information to discover the extrapulmonary infection site. Thus, novel diagnostic modalities are clinically required.

Molecular imaging aims at designing novel tools that can directly screen specific molecular targets of disease processes in vivo^{14,15}. Superparamagnetic iron oxide (SPIO), a T2-weighted NMR contrast agent, can significantly enhance the specificity and sensitivity of magnetic resonance (MR) imaging (MRI)^{16,17}. This new functional imaging modality can precisely sketch tissue changes at the molecular level through ligand–receptor interactions. In this study, a new molecular imaging probe, comprising SPIO nanoparticles, was synthesized to conjugate with Mtb

surface antibody (MtbsAb) for ETB diagnosis. SPIO nanoprobe are minimally invasive to tissues and bodies under examination^{18,19}. Furthermore, these nanoprobe can demonstrate precise MR images at low concentrations due to their paramagnetic properties. In addition, SPIO nanoprobe appear elicit least allergic reactions because the presence of iron ions is part of normal physiology. Here, the sensitivity and specificity of the SPIO-MtbsAb nanoprobe targeting ETB were evaluated in both cell and animal models. The outcomes demonstrated that the nanoprobe were applicable as ultrasensitive imaging agents for ETB diagnosis.

PROTOCOL:

All protocol regarding animal experiment follows the standard operating procedures for laboratory animal breeding in accordance with the National Institutes of Health Guidelines for the Care and Use of Laboratory Animals (8th Edition, 2011).

1. SPIO nanoparticle synthesis

1.1. Prepare dextran-coated iron oxide magnetic nanoparticles by vigorously stirring a mixture of dextran T-40 (5 mL; 50% w/w) and aqueous $\text{FeCl}_3 \cdot 6\text{H}_2\text{O}$ (0.45 g; 2.77 mmol) and $\text{FeCl}_2 \cdot 4\text{H}_2\text{O}$ (0.32 g; 2.52 mmol) solutions at room temperature.

1.2. Add NH_4OH (10 mL; 7.5% v/v) rapidly.

1.3. Further stir the black suspension for 1 h; subsequently, centrifuge at $17,300 \times g$ for 10 min and then remove the aggregates.

1.4. Separate the final SPIO products from unbound dextran T-40 by gel filtration chromatography²⁰.

1.5. Load the reaction mixture (total volume = 5 mL) into a 2.5 cm \times 33 cm column and elute with a buffer solution containing 0.1 M Na acetate and 0.15 M NaCl at pH 7.0.

1.6. Collect the purified dextran-coated iron oxide magnetic nanoparticles in the void volume and assay the column eluates for iron and dextran at 330 and 490 nm by using hydrochloric acid and the phenol/sulfuric acid methods²⁰, respectively.

2. SPIO-MtbsAb synthesis

2.1. Synthesize SPIO-conjugated EDBE using previously reported methods^{21,22}.

2.2. Synthesize SPIO-EDBE-succinic anhydride (SA).

2.2.1. Stir an alkaline solution (5 M NaOH; 10 mL) of SPIO-EDBE and SA (1 g; 10 μmol) at room temperature for 24 h.

2.2.2. Dialyze the solution with 20 changes of 2 L of distilled water using molecular porous membrane tubing (12,000–14,000 MW cutoff). 6 h for each change.

2.3. Finally, add 100 μL of SPIO-EDBE-SA (4 mg/mL of Fe) to 400 μL of 4.5 mg/mL MtbsAb to synthesize SPIO-MtbsAb by using 1-hydroxybenzotriazole and (benzotriazol-1-yloxy) tripyrrolidinophosphonium hexafluorophosphate as catalysts and stir the solution at room temperature for 24 h.

2.4. Finally, separate the solutions from the unbound antibody through gel filtration chromatography.

2.5. Load the reaction mixture (5 mL) on 2.5 cm \times 33 cm column and elute using a PBS buffer. Confirm Ab–nanoparticle complex (i.e., nanoprobe) using a bicinchoninic acid protein assay kit²³.

3. Particle morphology observation and relaxation time measurement

3.1. Examine average particle size, morphology, and size distribution using transmission electron microscope at a voltage of 100 kV.

3.1.1. Drop-cast the composite dispersion onto a 200-mesh copper grid and air dry at room temperature before loading it onto the microscope.

3.2. Measure the relaxation time values (T_1 and T_2) of the nanoprobe using the NMR relaxometer at 20 MHz and $37.0\text{ }^\circ\text{C} \pm 0.1\text{ }^\circ\text{C}$.

3.2.1. Calibrate the relaxometer before each measurement.

3.2.2. Record the r_1 and r_2 values from the eight data points generated through inversion-recovery and the Carr–Purcell–Meiboom–Gill pulse sequence, respectively, to determine r_1 and r_2 relaxivities²⁰.

4. Cell imaging

4.1. Cultivate human monocytes THP-1 in RPMI 1640 with 10% fetal bovine serum, 50 $\mu\text{g}/\text{mL}$ gentamycin sulfate, 100 units/mL penicillin G sodium, 100 μg of streptomycin sulfate, and 0.25 $\mu\text{g}/\text{mL}$ fungizone in a 5% CO_2 incubator at $37\text{ }^\circ\text{C}$.

4.2. Incubate SPIO-MtbsAb nanoprobe (2 mM) with 10^6 colony forming units (CFU) of *Mycobacterium bovis* BCG preincubated with 1×10^7 activated monocytes in microcentrifuge tubes (1 mL) in a 5% CO_2 incubator at $37\text{ }^\circ\text{C}$ for 1 h.

4.3. Centrifuge tubes at $200 \times g$ and discard the supernatant. Redissolve pellets in the medium (200 μL).

4.4. Scan the samples using a fast gradient echo pulse sequence (Repetition time (TR) = 500; Echo time (TE) = 20; Flip angle = 10°) through 3.0-T MRI to determine the nanoprobe's specificity and sensitivity^{21,22}.

5. BCG (Bacillus Calmette–Guérin) inoculation

5.1. Reconstitute the lyophilized vaccine or bacterial stock in Sauton's medium and then dilute the stock with saline until properly dispersed as previously described²⁴.

5.2. Inoculate a live attenuated strain of *M. bovis* BCG, obtained from ADIMMUNE (Taipei, Taiwan) (Connaught strain; ImmuCyst Aventis, Pasteur Mérieux) at a volume of 0.1 mL/mouse (i.e., 10⁷ CFU) intradermally into the left or right dorsal scapular skin of mice, as described previously²³. Inject saline into mice as negative control.

5.3. Sacrifice animals 1 month after bacteria inoculation using carbon dioxide euthanasia. Harvest the tissue from the intradermal inoculation site. Fix the tissue in 10% formalin and embed in paraffin for serial sections at 5–10 µm. Stain tissue sections with the hematoxylin/eosin and Ziehl–Neelsen stains for acid-fast bacteria²⁴ and with Berlin blue for ferric iron²⁵.

6. In vivo MRI

6.1. Inject ketamine (80 mg/kg of body weight) and xylazine (12 mg/kg body weight) subcutaneously into mice for animal anesthesia.

6.2. Inject SPIO-TbsAb probes (2 nmol/200 µL) into tail veins of mice. MR image mice before and immediately after probe injection and then every 5 min for 30 min to acquire T2-weighted fast spin-echo images (TR = 3000; TE = 90; field of view = 8).

6.3. Quantitatively analyze all MR images using signal intensity (SI), a measurement of defined regions of interest in comparable locations of an *Mtb* granuloma center and the back muscle adjacent to a granulomatous area.

6.4. Calculate relative signal enhancements using the SI measurement before (SI_{pre}; control) and 0–3 h after (SI_{post}) injection of the contrast agents using the formula $[(SI_{post} - SI_{pre})/SI_{pre}] \times 100$

where SI_{pre} is the SI of the lesion on the pre-enhanced scan and SI_{post} is the SI of the lesion on the post-enhanced scan^{21,22}.

REPRESENTATIVE RESULTS:

SPIO-MtbsAb nanoprobe synthesis and characterization

SPIO nanoparticles were designed to conjugate with MtbsAb. The dextran stabilized on the surface of SPIO nanoparticles was crosslinked by epichlorohydrin. SPIO nanoparticles were

subsequently incorporated with EDBE to activate primary amine functional groups at the dextran ends. SA was then conjugated to form SPIO-EDBE-SA. SPIO-MtbsAb nanoprobe formed in the final step through the conjugation of MtbsAb with SPIO-EDBE-SA in the presence of the coupling agents. The TEM image of SPIO-MtbsAb nanoprobe (Figure 1) demonstrates that the SPIO-MtbsAb nanoprobe had a well-dispersed appearance. The average size of the SPIO-MtbsAb nanoprobe core was 3.8 ± 0.4 nm (200 particle calculation).

In aqueous solution, the relaxivity values, r_1 and r_2 , of the nanoprobe were 23 ± 3 and 151 ± 8 $\text{mM}^{-1}\text{s}^{-1}$, respectively, at 20 MHz and 37.0 ± 0.1 °C. The r_1/r_2 ratio of SPIO-MtbsAb nanoprobe was similar to that of Resovist; however, r_1 and r_2 of Resovist (26 and $164 \text{ mM}^{-1}\text{s}^{-1}$, respectively) were somewhat higher than those of SPIO-MtbsAb nanoprobe.

In vitro SPIO-MtbsAb nanoprobe characterization and imaging

First, we detected *M. bovis* BCG, an acid-fast bacteria, through Ziehl–Neelsen staining (Figure 2A). The bacteria were isolated and then cultured with probes containing ferric iron, identifiable through Berlin blue staining (Figure 2B). The Mtb-targeting degree of SPIO-MtbsAb nanoprobe was determined through T2-weighted MRI; negative enhancement was proportioned to the amount of probes attached to the bacterial cell. The decrease in the SI in the presence of the nanoprobe occurred in a concentration-dependent manner (Figure 2C). At 2, 1, and 0.5 mM, the nanoprobe conjugated with Mtb exhibited SIs of 97.67 ± 3.05 , 131.67 ± 4.51 , and 257.33 ± 5.03 , respectively, all higher the SI of 90.75 ± 2.47 for 1 mM nonconjugated nanoprobe. Compared with PBS (SI = 1073.43 ± 13.62), almost no signal reduction was noted in the TB only group (SI = 957.33 ± 12.53). Thus, SPIO probes specifically targeted Mtb bacilli; moreover, on the enhanced MR images, the SI decreased with increase in the amount of SPIO nanoparticles.

Similarly, the reductions in SI on enhanced MR images were noted 1 h after the culturing of THP-1 monocytes with the nanoprobe. A significant reduction in the SI of the TB group was noted when 1 mM (SI = 225.33 ± 8.58) and 2 mM (SI = 104 ± 2.16) concentrations of the nanoprobe were employed compared with the groups administered with PBS only (SI = 1005.33 ± 16.74) or not administered with the nanoprobe (SI = 991 ± 8.98). MRI SI reduction in the Mtb groups for 1 and 2 mM nanoprobe was comparable to that in the positive 1 mM nanoprobe alone group (SI = 112.33 ± 3.68). According to the above results, the SPIO-MtbsAb nanoprobe could aid in monitoring the nanoprobe-activated THP-1 monocyte trafficking.

In vivo SPIO-MtbsAb nanoprobe imaging

After cell imaging, we determined the efficacy of in vivo MRI for ETB. SPIO-MtbsAb nanoprobe were intravenously injected to Mtb-infected mice. A clearly detectable MR signal was noted in the Mtb granulomatous area 0.5 h after injection; however, the highest SI to background was observed after 1 h of injection. A significant reduction in MR signaling was noted in the Mtb granulomatous area (Figure 3). SI was measured before (SI_{pre}) and after (SI_{post}) contrast agent injection. One hour after probe injection, the T2-weighted enhancement of signal reduction at the Mtb granulomatous areas (Figure 3B) was approximately 14-fold higher than that at the control sites (Figure 3A; $-1.68\% \pm 1.32\%$ and $-23.43\% \pm 7.24\%$; $p < 0.001$).

Histological and immunohistochemical evaluation of SPIO-MtbsAb nanoprobe

A subcutaneous granuloma was developed 1 month after infection in C57BL/6 mice. New blood vascularization was noted within these lesions along with lymphocyte and epithelioid-macrophage aggregates. The organized granuloma had grown progressively (**Figure 4A**). The correlation of TB lesions with SPIO-MtbsAb MR signals was further determined through the immunohistochemical reaction of Mtb surface antigen with anti-MtbsAb. Positive MtbsAb expression was revealed in the granulomatous areas (**Figure 4B**), with acid-fast bacilli staining positive at the lesion site (**Figure 4C**). Berlin blue, a ferric iron-positive stain, was used to determine the sensitivity of the probes to Mtb. Berlin blue-positive SPIO probe was found in the same location as MtbsAb (**Figure 4D**). All colocalized pairs were shown in **Figure 4A–D**.

FIGURE LEGENDS:

Figure 1. Mean core size of SPIO-MtbsAb nanoprobe in TEM. The average size of the SPIO-MtbsAb nanoprobe core was 3.8 ± 0.4 nm, measured using TEM image analysis (200 particle calculation). Scale bar = 15 nm. This figure has been modified from our previous study²⁶.

Figure 2. *In vitro* characterization of SPIO-MtbsAb nanoprobe. The acid-fast bacilli are identified through (A) Ziehl–Neelsen staining and (B) the conjugation of the ferric iron of the nanoprobe to bacteria identified through Berlin blue staining. (C) T2-weighted MRI displaying negative enhancement after the SPIO-MtbsAb nanoprobe is incubated with Mtb. Elimination of SI occurring dose-dependently after the incorporation of the nanoprobe with Mtb: (1) 90.75 ± 2.47 (1.0 mM Probe); (2) 97.67 ± 3.05 (Mtb + 2.0 mM Probe); (3) 131.67 ± 4.51 (Mtb + 1.0 mM Probe); (4) 257.33 ± 5.03 (Mtb + 0.5 mM Probe); (5) 957.33 ± 12.53 (Mtb + 0 mM Probe); (6) 1073.43 ± 13.62 (PBS). No detectable signal reduction noted in the PBS control group. (D) Dose-dependent negative enhancement in THP-1 monocytes 1 h after incubation with the nanoprobe. Scale bars in (C) and (D) are 5 mm. This figure has been modified from our previous study²⁶.

Figure 3. *In vivo* SPIO-MtbsAb nanoprobe in subcutaneous ETB lesions of C57BL/6 mouse. (A) Control and (B) Mtb granulomatous areas. A significant 14-fold reduction in MR signaling is found in the Mtb granulomatous areas compared with the control areas 1 h after probe administration ($-1.68\% \pm 1.32\%$ vs. $-23.43\% \pm 7.24\%$, $p < 0.001$). Results are given as means \pm SDs. Statistical comparisons used two-tailed Student's t-tests. $p < 0.05$ was considered to be significant. This figure has been modified from our previous study²⁶.

Figure 4. Correlations of histology, immunohistochemistry, acid-fast, and Berlin blue staining. Histology of Mtb granulomatous areas predominantly demonstrating lymphocytes and epithelioid macrophages. Neovascularization and abundant aggregation of lymphocytes and epithelioid macrophages observed in these lesions. (A) Organized granulomas appearing to develop progressively. (B) Immunohistochemical staining demonstrating MtbsAb expression in the granulomatous lesions, whereas (C) acid-fast bacilli are scattered within the same areas. (D) Berlin blue staining SPIO probes are found in the colocalized MtbsAb areas. Berlin blue staining for ferric iron demonstrates probe conjugation to Mtb. Scale bars are 100 μ m. This figure has been modified from our previous study²⁶.

DISCUSSION:

Similar to relevant studies, our findings regarding SPIO-MtbsAb nanoprobe demonstrated a significant specificity for Mtb^{27,28}. The subcutaneous Mtb granuloma was found 1 month after TB injection in the mouse models. The typical TB granulomatous histology findings included lymphocyte infiltration, presence of epithelioid macrophages, and neovascularization. Acid-fast bacilli were scattered in the TB lesions, corroborating the MtbsAb immunohistochemistry findings. This indicated an immunological reaction between Mtb surface antigen and MtbsAb. Berlin blue highlighted the same areas with MtbsAb, corroborating the probes' specificity for conjugation with acid-fast Mtb.

Notably, the extent of negative contrast enhancement on MRI for Mtb and monocytic THP1 cells was proportional to the SPIO-MtbsAb nanoprobe concentration. When mice bearing Mtb granulomas were administered SPIO-MtbsAb nanoprobe, a 14-fold signal reduction at the granulomatous site was noted on T2-weighted MR images compared to an opposing site with PBS injection. This indicates a significant accumulation of the contrast agent. The results demonstrate a possibility for obtaining specific targeting of contrast agent, which could reduce the dose requirement for clinical diagnosis.

Our findings indicate that these nanoprobe accumulate a detectable volume in Mtb granulomatous lesions. These results can be confirmed by developing an SPIO nanoprobe using anti-hMtbsAb. As the SPIO's magnetic iron oxide core has been applied to induce T2 shortening in MRI contrast agents, the findings suggest a practical and noninvasive approach to detect similar cell behaviors for clinical diagnosis applications.

Here, we provide the protocol comprising of 2 parts: sections 4 to 6 are cell and animal imaging. The techniques cover the cell cultivation, animal experiments, and optical imaging. Sections 1 to 3 are probe syntheses. Some critical steps will help to replicate the experiment. The critical step of **SPIO nanoparticle synthesis** is to prepare a dextran-coated iron oxide magnetic nanoparticles; it is crucial to vigorously stir and completely mix the dextran T-40, aqueous FeCl₃·6H₂O, and FeCl₂·4H₂O solutions at a room temperature. The critical step for section 2, **SPIO-MtbsAb synthesis**, is conjugating MtbsAb to SPIO-EDBE-SA to synthesize SPIO-MtbsAb. To select the appropriate catalysts and adequately stir the solution at room temperature are critical as well. And the critical step for section 3, **Particle morphology observation and relaxation time measurement**, is to calibrate the relaxometer before each measurement. In order to precisely calculate the size of probes, a calibration of the relaxometer is crucial as well.

In this study, *M. bovis* BCG and rabbit anti-Mtb were used. The crossreactivity of bovine and rabbit sources was considered mild, although the data proved that MtbsAb-conjugated SPIO revealed strong interactions with *M. bovis* BCG. Our finding suggested that SPIO nanoprobe target TB specifically. The incubation of nanoprobe and Mtb bacteria showed a negative enhancement manner dose-dependently, while the decrease in the enhancement observed for SPIO nanoprobe on MRI was correlated with the existence of SPIO particles. Based on our data, further research to explore possible antibody-conjugation approaches to enhance the specificity

of the nanoprobe would be welcome.

Prior studies demonstrate that SPIO shows minimal cytotoxicity without altering cell activity at a concentration used in this study^{29,30}. In agreement with prior research, our results demonstrated minimal effect of SPIO nanoprobe to THP-1 cells. THP-1 cells were incubated with SPIO nanoprobe with bacteria conjugation for 1 hour. SI presented a significant decline in the Mtb groups with concentration of 1 mM or 2 mM nanoprobe, comparing to control group without nanoprobe treatment or PBS alone. The outcome supports the safety of the SPIO nanoprobe, and more studies applying other bacterial loads to validate the sensitivity of the nanoprobe is welcome.

One limitation of our study was that we did not quantify the biodistribution of the SPIO-MtbsAb nanoprobe in mice. Moreover, we did not investigate the intravascular half-life and liver deposition of the nanoprobe, which might alter the exposing time of the probes to THP-1 cells located at the Mtb lesions. Further research on biodegradation is warranted. Moreover, MRI could not differentiate whether SPIO nanoprobe could specifically bind to bacteria or monocytes or whether these probes were endocytosed.

In conclusion, we have developed a clear and feasible protocol to prepare and characterize biocompatible SPIO-MtbsAb nanoprobe. These nanoprobe are hydrophilic and disperse well under physiological conditions; they are minimally cytotoxic at low concentrations. Also, these SPIO-MtbsAb nanoprobe enable targeting and detection of Mtb infection, as demonstrated by our in vitro and in vivo studies. Thus, SPIO-MtbsAb nanoprobe can be applied as MRI contrast agents for ETB detection.

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DISCLOSURES:

None of the authors has any proprietary interest in the materials examined in this study.

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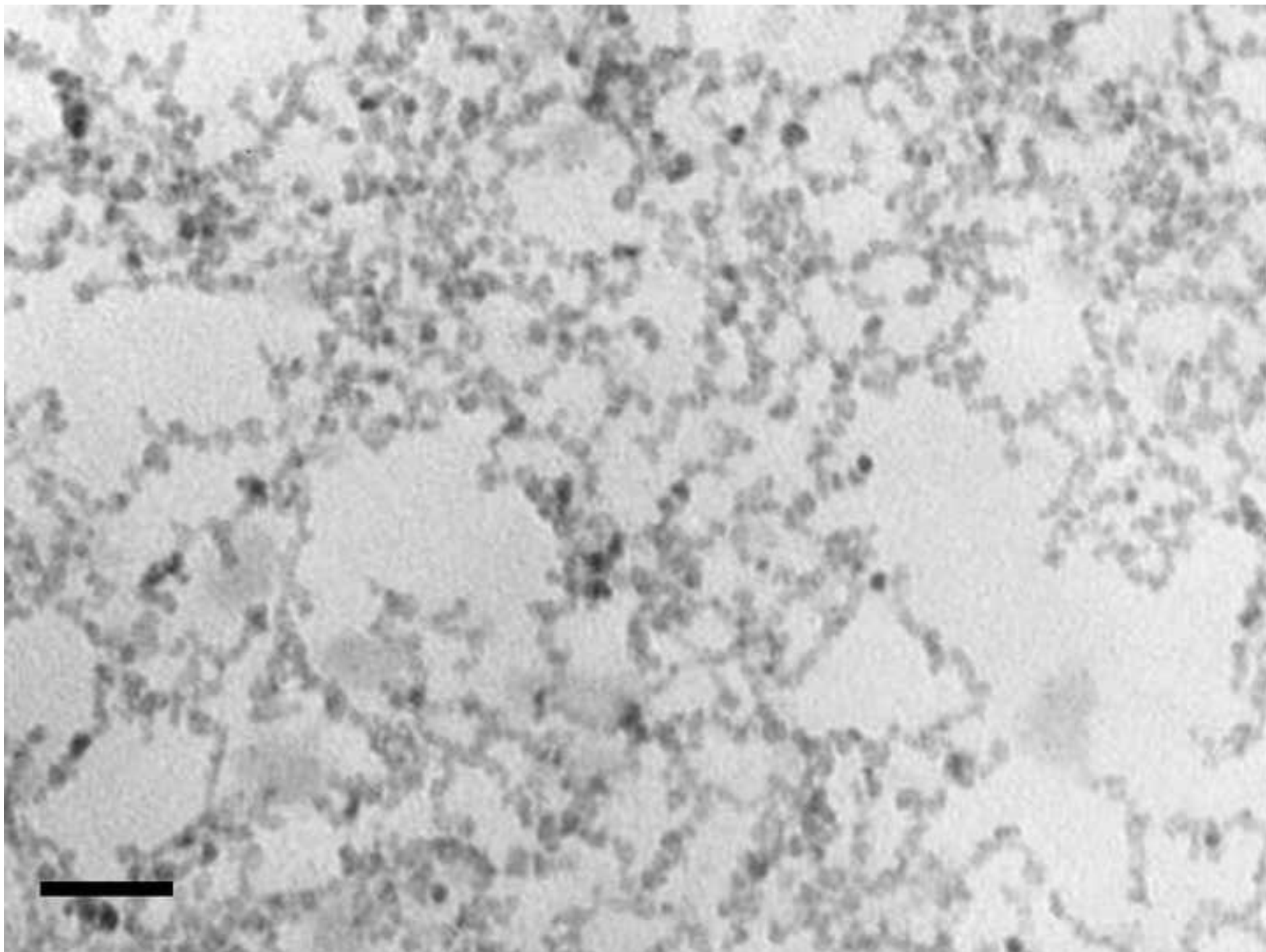
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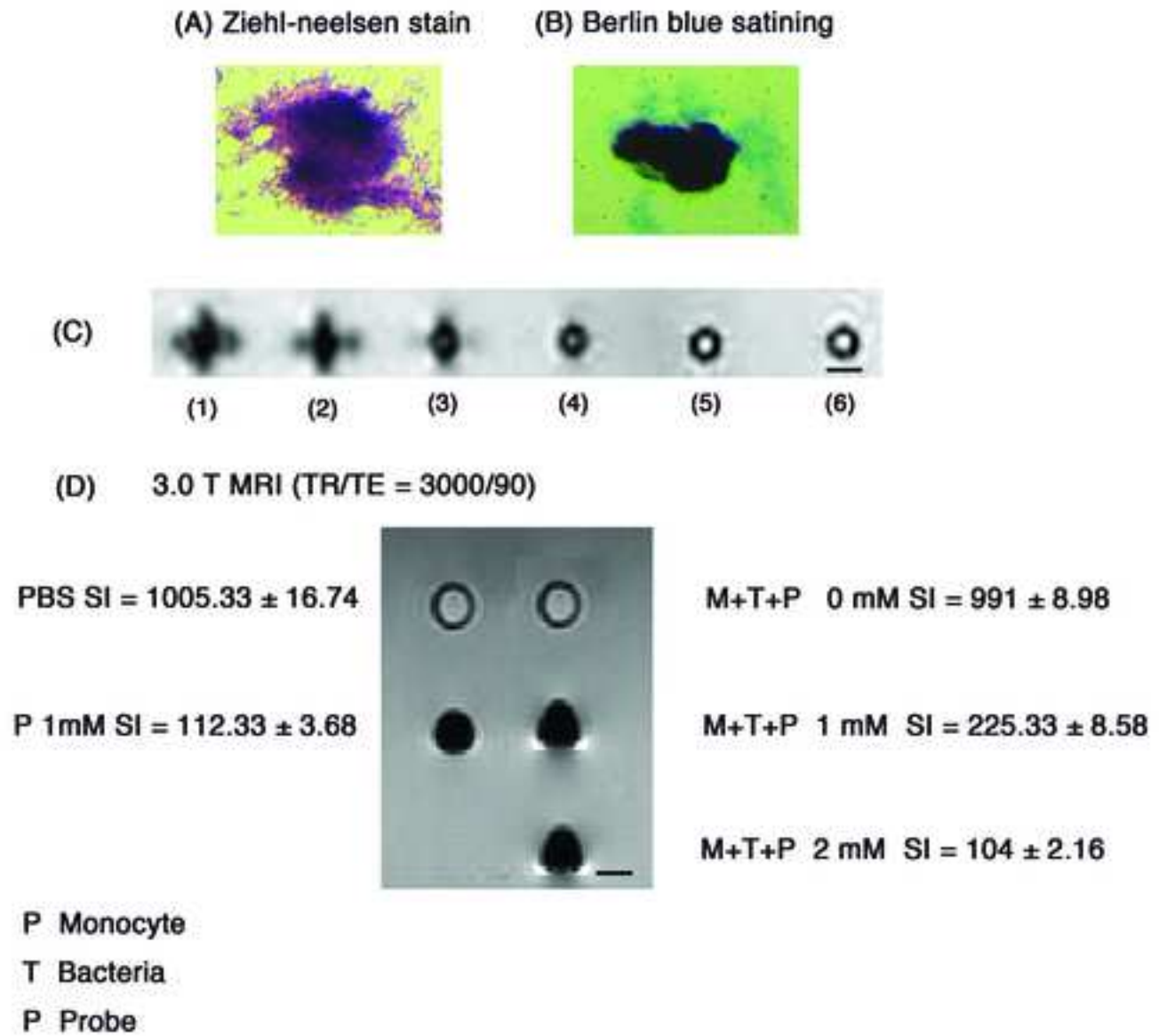
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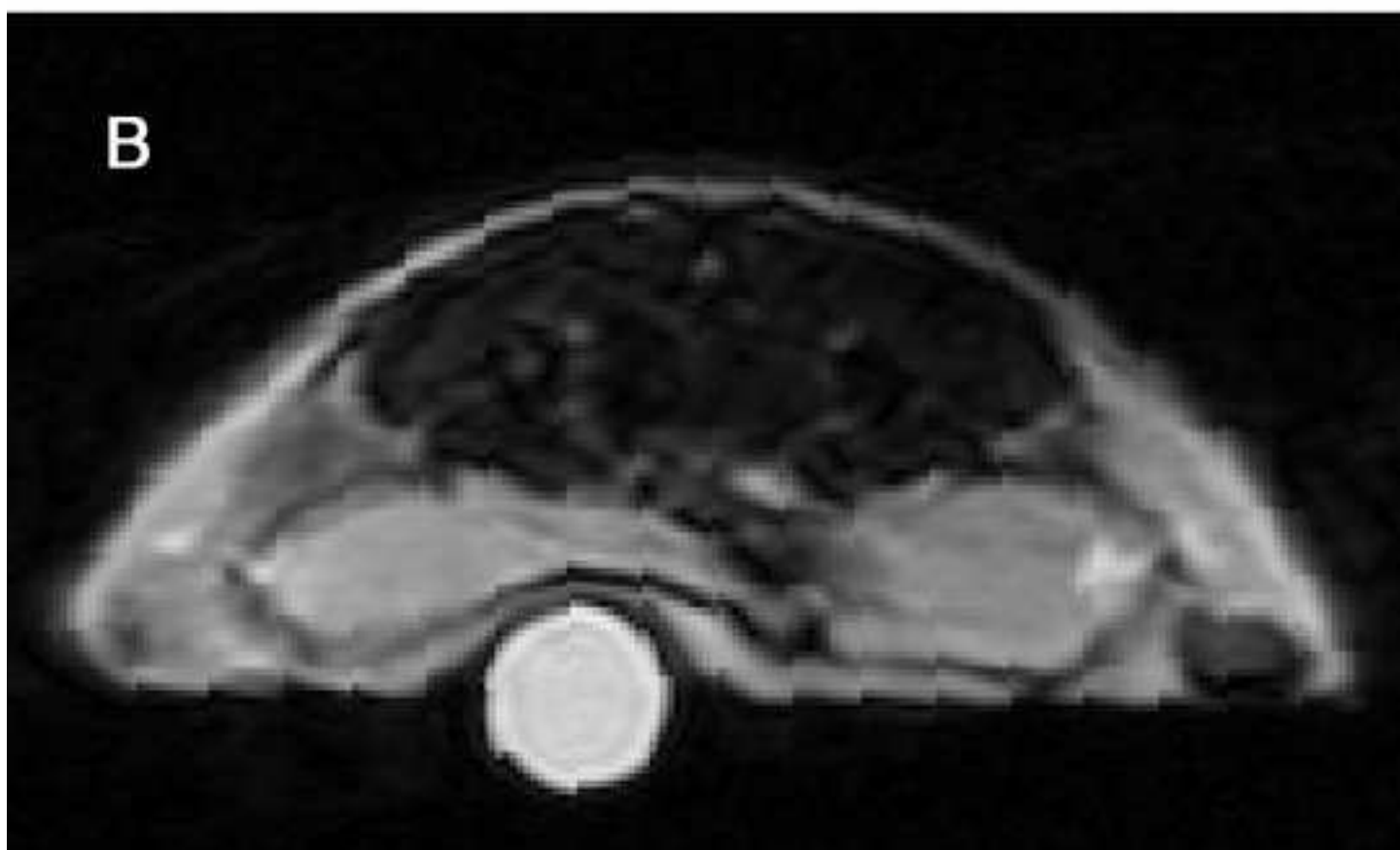
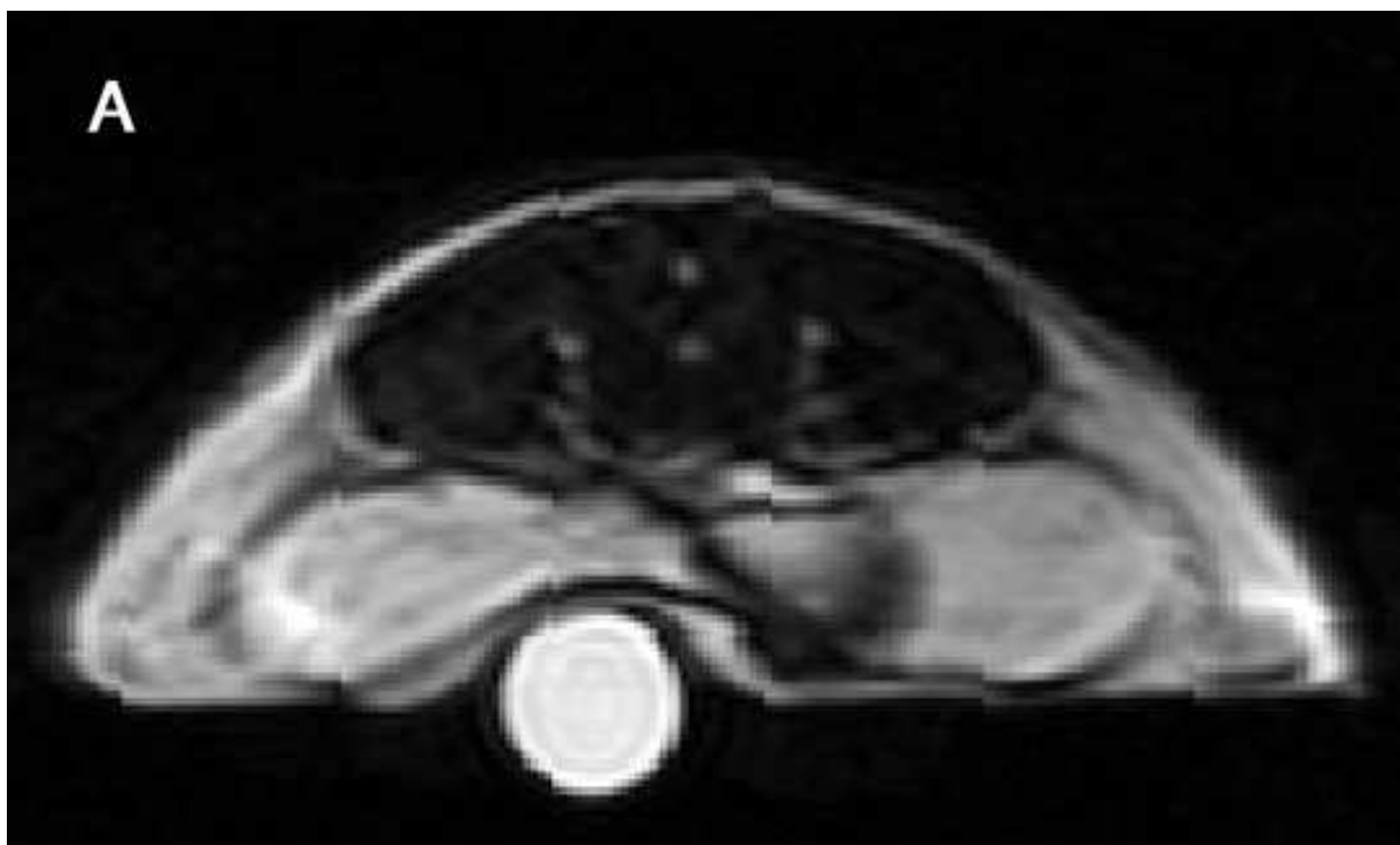
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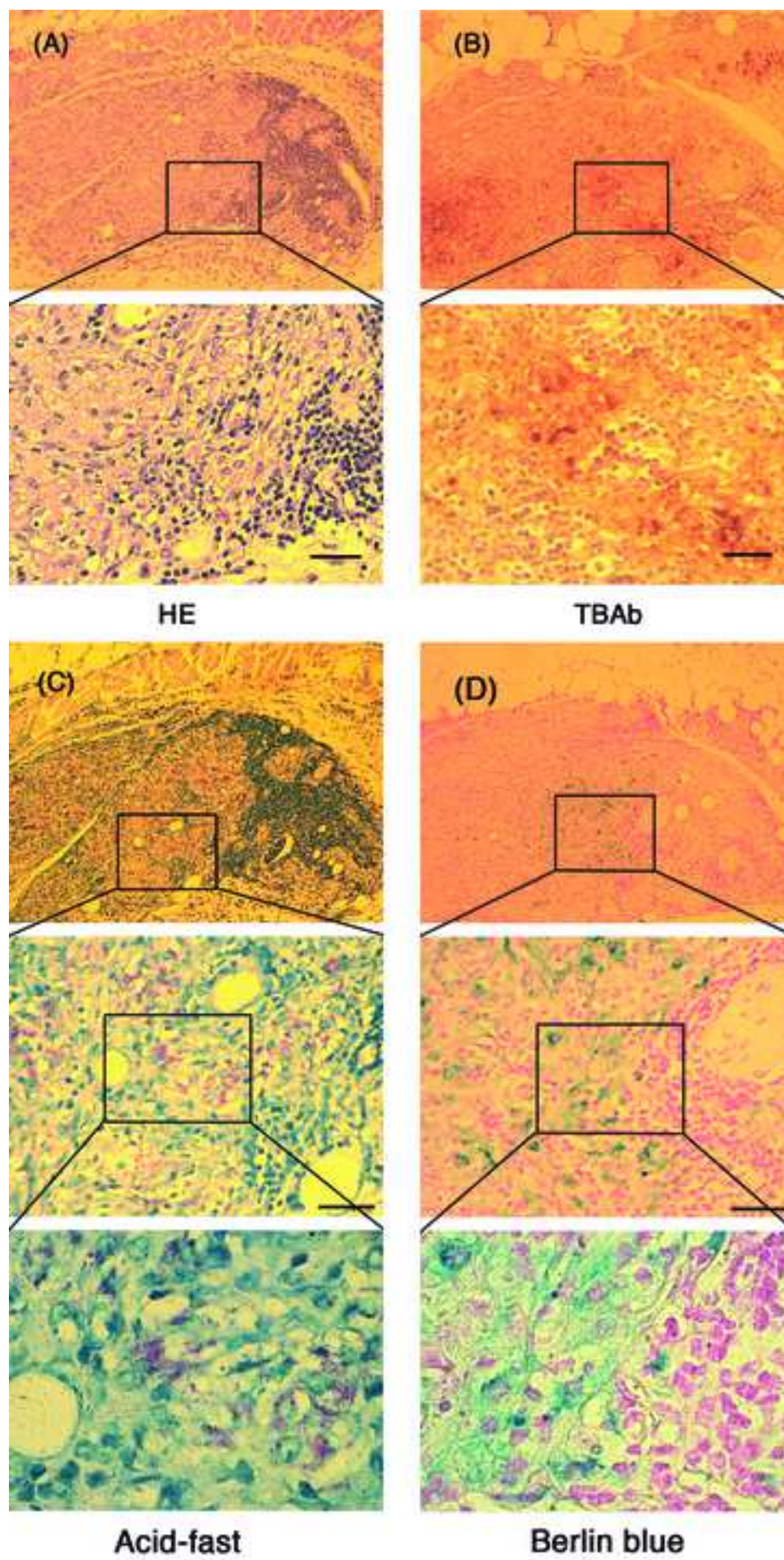
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1-hydroxybenzotriazole	Sigma-Aldrich	
dextran(T-40)	GE Healthcare Bio-sciences AB	
epichlorohydrin, 2,2' -(ethylenedioxy)bis(ethylamine)	Sigma-Aldrich	
ferric chloride hexahydrate	Fluka	
ferrous chloride tetrahydrate	Fluka	
Human monocytic THP-1		
<i>M. bovis</i> BCG	Pasteur Mérieux	Connaught strain; Im
MRI	GE medical Systems	3.0-T, Signa
NH ₄ OH	Fluka	
NMR relaxometer	Bruker	NMS-120 Minispec
Sephacryl S-300	GE Healthcare Bio-sciences AB	
Sephadex G-25	GE Healthcare Bio-sciences AB	
SPECTRUM molecular porous membrane tubing, 12,000 -14,000 MW cut off	Spectrum Laboratories Inc	
TB surface antibody- Polyclonal Antibody to Mtb	Acris Antibodies GmbH	BP2027
transmission electron microscope	JEOL	JEM-2000 EX II

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Sincerely,



Thomas Lai

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