



Antimicrobial Peptide Against Gram Positive With Role Of Amino Acids

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Abstract

The study enhance the biocidal activity of singlet oxygen material and the use of surfactants as transmembrane drug carriers for the protective role of skin bacteria and the importance of competition between bacteria on the skin. Study of culturable bacteria in human skin was performed to identify the ability of the skin microbiota about activity against skin pathogens. *Propionibacterium acnes*, inhibited many gram-positive bacteria, including opportunistic skin pathogens such as *Staphylococcus epidermidis*. Methicillin-resistant *Staphylococcus aureus* (MRSA).

The activity spectrum was generally narrow but highly variable with activity against *Actinobacteria*, *Proteobacteria*, *Firmicutes*, or specific nasal members of multiple groups of bacteria. Staphylococcal species and many other *Firmicutes* species were insensitive to most compounds.

The application of antimicrobial peptides (AMPs) is greatly hampered by their nonspecific toxicity to mammalian cells, usually associated with their helical structure, hydrophobicity, and charge density, with a random coil-to-helix transition mechanism has now been introduced into the design of AMPs maintaining high antibacterial activity. Incorporation of an anionic phosphorylated tyrosine into a cationic polypeptide distorted the helical conformation of His AMP due to side-chain charge interactions. In addition to reducing charge density, AMP showed reduced toxicity to mammalian cells. At sites of infection, AMPs are activated by bacterial phosphatases to restore helical conformation, contributing to their strong membrane-disrupting ability and potent antibacterial activity. This bacterial activation system is an effective strategy to improve the therapeutic selectivity of AMPs.

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Introduction

S. aureus is a leading cause of infection both in healthcare settings and in the community, and can result in high mortality and a significant economic distribution on society (1, 2). *S. aureus* can be present on the skin and nasal passages of 20-50% of people (3, 4), which poses a risk of subsequent infection (5). *S. aureus* is also a major cause of medical device infections and can cause fevers of 30-40°C, surgical wounds, and implant-associated infections (6). Methicillin-resistant *S. aureus* (MRSA) currently causes over 50% of skin and soft tissue infections (7). Mortality in *S. aureus* bacteremia can reach up to 40% (8). *S. aureus*-associated infections are difficult to treat with currently available antibiotics (9). This is partly due to the increase in MRSA. This is because MRSA is often highly resistant to many different classes of antibiotics (10). To overcome these problems, new antimicrobials with unique mechanisms of action and limited potential for resistance development are required.

Antimicrobial peptides (AMPs) exhibit broad antimicrobial activity at low concentrations against a variety of microorganisms, including bacteria, fungi, parasites and enveloped viruses (11,12,13). AMPs are usually cationic in nature and have varying numbers (from 5 to over 100) of amino acids. AMPs have multiple mechanisms of action, rapid killing rates, and low toxicity to human cells (14, 15). Bacteria develop resistance to AMPs relatively rarely because these molecules have different mechanisms of action and kill them quickly (16, 17). AMP's mechanism of action is believed to begin with its interaction with negatively charged lipoteichoic acid (LTA) or teichoic acid in gram-positive bacteria (18). Via the negatively charged phosphate groups of LTA (19,20). Interaction with LTA is then thought to facilitate AMP penetration across the thick peptidoglycan layer, possibly via LTA acting as a conductor, allowing AMP to reach the cytoplasmic membrane for action. AMPs form the phospholipid-lipid bilayer of bacterial membranes by forming pores through various mechanisms called 'barrel staves' or 'toroidal pores' or by degrading lipids through the 'carpet model'. (21). Disruption of the cytoplasmic membrane can

lead to leakage of cellular contents such as potassium ions, ATP and DNA/RNA, leading to cell death (22, 23). Some AMPs translocate across cell membranes and inhibit DNA/RNA or protein synthesis (24, 25). AMP can also kill gram-positive bacteria by activating cell wall-bound autolytic enzymes known as autolysins (26). LTA anchored to the cell envelope regulates autolysin activity (27). The interaction of AMP with LTA can lead to loss of regulation of autolysin, which subsequently triggers autolysis via hydrolysis of peptidoglycan chains. (28).. Tryptophan is a highly lipophilic amino acid (29) and its presence is often an important part of its activity towards AMPs (30,31,32). Leucine and isoleucine are hydrophobic residues that promote strong α -helix formation in AMP, which leads to higher levels of membrane disruption (33, 34).

Mechanism of action

To be developed as an effective antibacterial therapeutic, AMPs must be non-toxic. To investigate the relationship between antibacterial activity and peptide permeability, a zone of inhibition test was performed. It had higher inhibitory activity than other peptides, and the clear zone size increased as a function of peptide dose. These results closely resembled the pattern of antimicrobial activity in the growth medium. Antibacterial assays on agar plates can be used to understand the effect of viscosity on peptide activity and to compare the diffusion capacity of peptides. We believe that 14-mer peptides can rapidly inhibit the growth of surrounding bacteria due to their excellent diffusibility. We hypothesize that this ability could be used in the clinic as gel-like antimicrobial pads and wound-healing tapes to study the subcellular distribution of peptides in bacterial cells, and we hypothesized that the growth of synthetic peptides on bacterial cells might be possible. It suggests that the inhibitory effect may be due to: interactions between peptide analogues and bacterial membranes. (35,36) Also, it is not possible to selectively reveal whether a peptide acts only on the cell membrane of living bacterial cells to determine whether the peptide affects the permeability of bacterial membranes. Under

aqueous conditions without liposomes, the maximum emission intensity of all antimicrobial peptides was observed, indicating that all antimicrobial peptides interacted strongly with bacterial membranes. To further study the effects of peptides on cell membranes, the membrane permeabilization capacity of engineered peptides was measured. These results suggest that the peptide directly disrupts bacterial membranes, while the little peptide only weakly damages the membrane upon permeabilization of bacterial membranes. These results are consistent with the observed antibacterial and cytotoxic effects. Morphological changes on the surface of bacteria cells incubated with the indicated peptides were observed by scanning electron microscopy (SEM). Cells not treated with peptides exhibited a smooth surface with no cell debris or alterations. However, the peptide-treated cells were injured and shrunken with small vesicles, indicating peptide damage to the plasma membrane. (37) This study demonstrates an effective and inexpensive method for activating the biocidal activity of non-biocidal singlet oxygen-sensitizing compounds. This study provides a general method for enhancing the interaction of anionic molecules with bacterial cell membranes, also influencing membrane trafficking and vesicle loading. There is a need to identify new antimicrobial strains that may eliminate pathogens in the skin environment. The skin is a protective defense that protects us from the external environment. This study highlights that the skin microbiota harbors many bacteriocin-producing strains, which may indicate that the skin microbiota is an important tool in the fight against antimicrobial resistance. In fact, this screening can detect skin microbiota imbalances and MRSA and *C. Acne*. More importantly, these strains may prove useful as probiotics for topical skin applications to provide colonization resistance by displacing skin pathogens, especially MRSA. Further characterization studies are underway on these bacteriocin-producing skin isolates. It suggests that probiotics could be a valuable new drug. It can prevent opportunistic infections in patients at risk for immunodeficiency. (38,39)

Conclusion

Given the recent interest and technological advances in characterizing the human skin microbiota, it is important to know whether specific diversity patterns or species composition of the human microbiota can predict or diagnose disease. Understanding the interactions between the skin microbiota, the human host, and the antibiotic is presented here to illustrate which host, distribution, behavioral, and environmental factors, or combinations thereof, contribute to microbial community structure. Organize what might drive variability. Causes disease by altering the diversity of the skin microbiota. In summary, we introduced a random coil-to-helix transition mechanism into the AMP design. To our knowledge, this is the first example of modulating the antibacterial activity of a polypeptide material by controlling secondary structural transformations. Due to this design, AMPs exhibit high antibacterial activity with reduced toxicity to mammalian cells. It would be interesting to design sequence-controlled peptides by placing phosphorylated tyrosine residues at different positions and compare the differences in their biological activities. This will be part of our future research.

In summary, based on the amino acids Arg, Glu, Lys, Ile, and Trp, designed 10 peptide analogues with altered positions of Trp. Considering the balance between antibacterial activity and cytotoxicity, Lys-utilized 10-mer peptides have lower antibacterial activity and cytotoxicity than Arg-containing peptides, and 14-mer peptides have higher antibacterial activity and cytotoxicity than 10-mer peptides. When Trp was near the N-terminus, there was a simultaneous increase in antibacterial activity and toxicity at high concentrations (200 μ M). However, their therapeutic index is higher than peptides with other Trp configurations, suggesting that they may have better clinical applications. Peptides with reduced cation strength had lower antibacterial activity than other peptides in vitro, but increased antibacterial activity in vivo. In particular, the peptide inhibitory effect on cytokine secretion showed the strongest effect among the parameters tested. All peptides exerted their antibacterial activity

by destabilizing the cell membrane or by membrane degradation. Although further studies are needed, our results suggest that clinical applications of membrane-active AMPs require at least three helical turns.

References

- 1-Lowy, F.D. *Staphylococcus aureus* infections. N. Engl. J. Med. 1998, 339, 520–532.
- 2-Ellington, J.K.; Harris, M.; Webb, L.; Smith, B.; Smith, T.; Tan, K.; Hudson, M. Intracellular *Staphylococcus aureus*. J. Bone Jt. Surg. Ser. B 2003, 85, 918–921.
- 3-Tong, S.Y.C.; Davis, J.S.; Eichenberger, E.; Holland, T.L.; Fowler, V.G. *Staphylococcus aureus* infections: Epidemiology, pathophysiology, clinical manifestations, and management. Clin. Microbiol. Rev. 2015, 28, 603–661.
- 4-Fowler, V.G., Jr.; Miro, J.M.; Hoen, B.; Cabell, C.H.; Abrutyn, E.; Rubinstein, E.; Corey, G.R.; Spelman, D.; Bradley, S.F.; Barsic, B.; et al. *Staphylococcus aureus* endocarditis: A consequence of medical progress. JAMA 2005, 293, 3012–3021.
- 5-Saeed, K.; Bal, A.M.; Gould, I.M.; David, M.Z.; Dryden, M.; Giannitsioti, E.; Hijazi, K.; Meisner, J.A.; Esposito, S.; Scaglione, F.; et al. An update on *Staphylococcus aureus* infective endocarditis from the International Society of Antimicrobial Chemotherapy (ISAC). Int. J. Antimicrob. Agents 2019, 53, 9–15.
- 6-Pletz, M.W.; Burkhardt, O.; Welte, T. Nosocomial methicillin-resistant *Staphylococcus aureus* (MRSA) pneumonia: Linezolid or vancomycin?—Comparison of pharmacology and clinical efficacy. Eur. J. Med. Res. 2010, 15, 507–513.
- 7-Lesher, B.; Gao, X.; Chen, Y.; Liu, Z. Methicillin-resistant *Staphylococcus aureus* nosocomial pneumonia: Role of linezolid in the People’s Republic of China. Clin. Outcomes Res. 2016, 8, 63–72.
- 8-Kluytmans, J.; Van Belkum, A.; Verbrugh, H. Nasal carriage of *Staphylococcus aureus*: Epidemiology, underlying mechanisms, and associated risks. Clin. Microbiol. Rev. 1997, 10, 505–520.
- 9-Von Eiff, C.; Becker, K.; Machka, K.; Stammer, H.; Peters, G. Nasal carriage as a source of *Staphylococcus aureus* bacteremia. N. Engl. J. Med. 2001, 344, 11–16.
- 10-Weidenmaier, C.; Goerke, C.; Wolz, C. *Staphylococcus aureus* determinants for nasal colonization. Trends Microbiol. 2012, 20, 243–250.
- 11-Bahar AA, Ren D. Antimicrobial peptides. Pharmaceuticals. 2013;6(12):1543–75.
- 12-Ganz T. Defensins: antimicrobial peptides of innate immunity. Nat Rev Immunol. 2003;3(9):710.
- 13-Yasir M, Willcox M, Dutta D. Action of Antimicrobial Peptides against Bacterial Biofilms. Materials. 2018;11(12):2468.
- 14-Matsuzaki K. Control of cell selectivity of antimicrobial peptides. Biochim Biophys Acta-Biomembranes. 2009;1788(8):1687–92.
- 15-Lee J-K, Park S-C, Hahm K-S, Park Y. Antimicrobial HPA3NT3 peptide analogs: placement of aromatic rings and positive charges are key determinants for cell selectivity and mechanism of action. Biochim Biophys Acta-Biomembranes. 2013;1828(2):443–54.
- 16-Altman H, Steinberg D, Porat Y, Mor A, Fridman D, Friedman M, et al. In vitro assessment of antimicrobial peptides as potential agents against several oral bacteria. J Antimicrob Chemother. 2006;58(1):198–201.
- 17-Fjell CD, Hiss JA, Hancock RE, Schneider G. Designing antimicrobial peptides: form follows function. Nat Rev Drug Discov. 2011;11(1):37–51.
- 18-Malanovic N, Lohner K. Antimicrobial Peptides Targeting Gram-Positive Bacteria. Pharmaceuticals. 2016;9(3):59.
- 19-Bucki R, Janmey PA. Interaction of the Gelsolin-Derived Antibacterial PBP 10 Peptide with Lipid Bilayers and Cell Membranes. Antimicrob Agents Chemother. 2006;50(9):2932–40.
- 20-Li Z, Zhang S, Zhang J, Liu M, Liu Z. Vitellogenin is a cidal factor capable of killing bacteria via interaction with lipopolysaccharide and lipoteichoic acid. Mol Immunol. 2009;46(16):3232–9.

- 21-Shai Y. Mechanism of the binding, insertion and destabilization of phospholipid bilayer membranes by alpha-helical antimicrobial and cell non-selective membrane-lytic peptides. *Biochim Biophys Acta*. 1999;1462(1-2):55-70.
- 22-Abee T. Pore-forming bacteriocins of Gram-positive bacteria and self-protection mechanisms of producer organisms. *FEMS Microbiol Lett*. 1995;129(1):1-9.
- 23-Pag U, Oedenkoven M, Sass V, Shai Y, Shamova O, Antcheva N, et al. Analysis of in vitro activities and modes of action of synthetic antimicrobial peptides derived from an α -helical 'sequence template'. *J Antimicrob Chemother*. 2008;61(2):341-52.
- 24-Brogden KA. Antimicrobial peptides: pore formers or metabolic inhibitors in bacteria? *Nat Rev Microbiol*. 2005;3(3):238-50
- 25-Straus SK, Hancock RE. Mode of action of the new antibiotic for Gram-positive pathogens daptomycin: comparison with cationic antimicrobial peptides and lipopeptides. *Biochim Biophys Acta*. 2006;1758(9):1215-23.
- 26-Wilmes M, Stockem M, Bierbaum G, Schlag M, Götz F, Tran DQ, et al. Killing of staphylococci by θ -defensins involves membrane impairment and activation of autolytic enzymes. *Antibiotics*. 2014;3(4):617-31.
- 27-Bierbaum G, Sahl H-G. Induction of autolysis of staphylococci by the basic peptide antibiotics Pep 5 and nisin and their influence on the activity of autolytic enzymes. *Archives Microbiol*. 1985;141(3):249-54.
- 28-Willcox M, Hume E, Aliwarga Y, Kumar N, Cole N. A novel cationic-peptide coating for the prevention of microbial colonization on contact lenses. *J Appl Microbiol*. 2008;105(6):1817-25.
- 29-Mishra AK, Choi J, Moon E, Baek K-H. Tryptophan-Rich and Proline-Rich Antimicrobial Peptides. *Molecules*. 2018;23(4):815.
- 30-Chan DI, Prenner EJ, Vogel HJ. Tryptophan-and arginine-rich antimicrobial peptides: structures and mechanisms of action. *Biochim Biophys Acta-Biomembranes*. 2006;1758(9):1184-202.
- 31-Bi X, Wang C, Ma L, Sun Y, Shang D. Investigation of the role of tryptophan residues in cationic antimicrobial peptides to determine the mechanism of antimicrobial action. *J Appl Microbiol*. 2013;115(3):663-72.
- 32-Zhu X, Ma Z, Wang J, Chou S, Shan A. Importance of tryptophan in transforming an amphipathic peptide into a *Pseudomonas aeruginosa*-targeted antimicrobial peptide. *PLoS One*. 2014;9(12):e114605.
- 33-Saint Jean KD, Henderson KD, Chrom CL, Abiuso LE, Renn LM, Caputo GA. Effects of Hydrophobic Amino Acid Substitutions on Antimicrobial Peptide Behavior. *Probiotics and Antimicrobial Proteins*. 2018;10(3):408-19.
- 34-Chou PY, Fasman GD. Conformational parameters for amino acids in helical, β -sheet, and random coil regions calculated from proteins. *Biochemistry*. 1974;13(2):211-22.
- 35-Dutta D, Cole N, Kumar N, Willcox MDP. Broad Spectrum Antimicrobial Activity of Melimine Covalently Bound to Contact Lenses. *Invest Ophthalmol Visual Sci*. 2013;54(1):175-82.
- 36-Rasul R, Cole N, Balasubramanian D, Chen R, Kumar N, Willcox MDP. Interaction of the antimicrobial peptide melimine with bacterial membranes. *Int J Antimicrob Agents*. 2010;35(6):566-72.
- 37-Casciaro B, Dutta D, Loffredo MR, Marcheggiani S, McDermott AM, Willcox MD, et al. Esculentin-1a derived peptides kill *Pseudomonas aeruginosa* biofilm on soft contact lenses and retain antibacterial activity upon immobilization to the lens surface. *Biopolymers*. 2017. Epub 2017/11/01.
- 38-Dutta D, Kumar N, DP Willcox M. Antimicrobial activity of four cationic peptides immobilised to poly-hydroxyethylmethacrylate. *Biofouling*. 2016;32(4):429-38.
- 39- Dutta D, Zhao T, Cheah KB, Holmlund L, Willcox MDP. Activity of a melimine derived peptide Mel4 against *Stenotrophomonas*, *Delftia*, *Elizabethkingia*, *Burkholderia* and biocompatibility as a contact lens coating.

Contact Lens Anterior Eye.
2017;40(3):175-83.