

# Antibiotic and efflux: Combined spectrofluorimetry and mass spectrometry

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1	Antibiotic and efflux: Combined spectrofluorimetry and mass spectrometry
2	to evaluate the involvement of concentration and efflux activity in antibiotic
3	intracellular accumulation
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23	Running title: Combined methods for studying antibiotic transport
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# 25 Synopsis

Background: In Gram-negative bacteria, passing through the double membrane barrier to reach the inhibitory concentration inside the bacterium is a pivotal step for the antibiotic activity. Spectrofluorimetry has been developed to follow the fluoroquinolone accumulation inside bacteria using intrinsic bacterial fluorescence as an internal standard. However, adaptation for non-fluorescent antibiotics is needed; quantitative methods based on mass spectrometry offer the possibility of expanding the detection range obtained by spectrofluorimetry.

33 Objectives: We wanted to validate with fluorimetry the use of mass spectrometry to measure 34 antibiotic accumulation in cells and to determine the relationship between antibiotic 35 concentrations and the amount of intra-bacterial accumulation in different efflux backgrounds 36 on the same batch of molecules.

37 Methods: Spectrofluorimetry was performed in parallel with mass spectrometry on the same
38 samples to measure the ciprofloxacin and fleroxacin accumulation in cells expressing various
39 efflux pump levels. A microplate protocol was set up to determine the antibiotic accumulation
40 as a function of external antibiotic concentrations.

41 **Results**: A consistency existed between the data obtained with spectrofluorimetry and mass 42 spectrometry, whatever the activity of efflux pump or the tested antibiotic. The results 43 highlighted a different dynamic of uptake between ciprofloxacin and fleroxacin as well as the 44 relationship between the level of efflux activity and antibiotic accumulation.

45 **Conclusions**: We have developed a microplate protocol and cross-validated two 46 complementary methods, spectrofluorimetry that contains a solid internal standard and mass 47 spectrometry that allows detection of low antibiotic amounts. These assays allow studying the 48 dose-effect and the efflux impact on the intra-bacterial accumulation of antibiotics.

#### 50 Introduction

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52 A main challenge in bacterial chemotherapy is to determine and carefully use the *in situ* parameters that modulate the activity of drugs in order to improve antibacterial efficacy.<sup>1,2</sup> 53 54 This is particularly important with the continuing emergence and the spread of MDR bacteria that contribute to therapeutic failure.<sup>3–6</sup> Several papers illustrate the intensity and relevance of 55 56 the concern and it is absolutely required to understand membrane permeation and intracellular 57 concentration of antibiotics in clinical isolates: crossing the double membrane barrier to reach a threshold concentration is a pivotal step of antibacterial action.<sup>7–15</sup> This key point has not 58 59 been strongly addressed until now or only in few specific cases with characterized bacterial strains.<sup>10,13,16,17</sup> 60

As recently reported  $^{10,18,19}$ , there is a large collection of methods available to measure efflux 61 62 activity, but their sensitivity and validity must be clearly demonstrated under different 63 conditions. Thus, the lack of appropriate assays containing well-defined internal controls that 64 allow standardization of signals obtained with various strains under various conditions is a 65 serious bottleneck for medicinal chemistry efforts aiming for the optimization of an antibiotic 66 intracellular accumulation. Mass spectrometry appears as a promising technique to determine the intracellular accumulation of label-free compounds. <sup>20–24</sup> Ultimately, this approach might 67 68 help to characterize the membrane permeation of any potential drugs, quantify antibiotic 69 accumulation kinetics with appropriate internal controls and meet the throughput requirements 70 of optimization programs based on structure-activity relationship. In the case of fluorescent 71 drugs, intracellular accumulation can be monitored using a synchrotron light source and use 72 the intrinsic fluorescence of bacterial amino acids as a powerful internal standard to correct for biological variations associated with bacterial samples.<sup>25</sup> For example, the fluoroquinolone 73 antibiotic, fleroxacin, exhibits sufficient changes in fluorescence intensity to monitor its 74

accumulation in single bacterial cells.<sup>25,26</sup> Recent results allowed us to validate this method with a multidrug resistant clinical strain of *Enterobacter aerogenes* and an efflux pump deficient ( $\Delta tolC$ ) derivative of this strain, demonstrating the importance to use a robust internal control.<sup>27</sup>

79 Translocation<sup>28</sup> The Innovative Medicine Initiative-funded consortium 80 (www.imi.europa.eu/content/translocation) has defined as its main objective the study of antibiotic translocation across bacterial membranes.<sup>17</sup> The consortium uses, new approaches, 81 82 and more traditional ones, to improve our understanding of drug transport and to support 83 future strategies in order to face the antibiotic resistance crisis. In this context, it is important 84 to define common standards and/or protocols to validate the new methods and for future correlation with the antibacterial activities.<sup>10,29</sup> This is the main objective of this study that 85 86 proposes a joint protocol for spectrofluorimetry and mass spectrometry analyses associated to 87 biological/biochemical characterizations of bacterial samples. From this work, a new 88 perspective emerges on how to measure kinetics of antibiotic uptake inside bacterial cells and 89 correlate them to the antibiotic mode of action in order to (i) understand and combat the 90 emergence and spread of resistant strains and (ii) extend the activity of antibiotics or (iii) 91 upgrade the design of new molecules. In addition, this study contributes to the recently 92 proposed concepts, "Resident Time Concentration Close to Target" (RTC2T) and "Structure 93 Intracellular Concentration Activity Relationship" (SICAR).<sup>10</sup>

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- 95

- 96 Materials and methods
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#### 98 Bacteria and Media

99 *Escherichia coli* strains used in this study are listed in Figure 1. These isogenic strains have
100 been previously described regarding their antibiotic susceptibility.<sup>30</sup>

101

# 102 Immunodetection

103 Exponential-phase bacteria in liquid Mueller Hinton II medium were centrifuged and the pellet was solubilized in loading buffer.<sup>31</sup> Total cell protein ( $OD_{600} = 0.02$  corresponding to 104 105 equal protein per well) was loaded onto a SDS-polyacrylamide gel (10% polyacrylamide 106 (w/v), 0.1% SDS (w/v)). Proteins were electro-transferred onto nitrocellulose membranes in 107 transfer buffer. An initial saturating step was performed overnight at 4°C with Tris-buffered 108 sodium (TBS: 50 mM Tris-HCl, pH 8.0, 150 mM NaCl) containing skimmed milk powder 109 (10%). The nitrocellulose sheets were then incubated in TBS + skimmed milk powder + 110 Triton X-100 (0.2%) for 2 h at room temperature in the presence of polyclonal antibodies 111 (1:5,000, 1:2,000 and 1:10,000 dilution for anti-AcrA, anti-AcrB, OmpC and OmpF 112 respectively) directed against denatured AcrA, AcrB, OmpC and OmpF respectively.<sup>31</sup> The 113 detection of antigen-antibody complexes was performed with horseradish peroxidase 114 secondary antibody conjugated Immune-Star goat anti-rabbit IgG antibodies (BioRad) and 115 revelation was performed using a ChemidocXRS+ (BioRad).

116

# 117 Drug susceptibility assays

118 Ciprofloxacin and fleroxacin were assayed to study the antibiotic susceptibility of *E. coli* 119 strains. MIC values of antibiotics were determined by the microdilution method (CLSI) in 120 liquid Mueller Hinton II medium by using the twofold standard microbroth dilution method 121 (microplates and automatic analyses Tecan®) (CLSI, http://clsi.org/). MIC values were read
122 after 18 h of incubation at 37°C. Experiments were carried out in triplicate and the resulting
123 medians were presented.

124

#### 125 Accumulation protocol

126 Bacteria grown at 37°C in Luria-Bertani broth in its exponential-phase (0.6 optical density 127 units at 600 nm) were concentrated 10-fold. The bacterial suspension was centrifuged at 6000 128  $\times$  g for 15 min at 20 °C and pellets were re-suspended in 1/10 of the initial volume in a 129 sodium phosphate buffer (50 mM) at pH 7 supplemented with MgCl<sub>2</sub> (5 mM) (NaPi-MgCl<sub>2</sub> buffer) to obtain a density of 6.10<sup>9</sup> cfu.mL<sup>-1</sup> (colony-forming-unit). In 96-well deep well 130 131 plates, 1.44 mL of the bacterial suspension was incubated 2 or 10 min at 37°C (final volume 132 1.8 mL per well) with different concentrations of fleroxacin and ciprofloxacin (0 to 5 mg/L), 133 in the absence or in the presence of the efflux blocker cyanide-m-chlorophenylhydrazone 134 (CCCP) at 10 µM for the efflux pump overproducer strain AG102. CCCP collapses the energy-driven force needed by the efflux pump to expel antibiotics in the resistant strain.<sup>32</sup> 135 136 Bacterial suspensions incubated without antibiotics, with or without CCCP, were used as 137 controls. Suspensions (800 µL) were then loaded on 1 M sucrose cushions (1.1 mL) in two 138 deep well plates (one for the spectrofluorimetry analysis and the other for the mass 139 spectrometry analysis) and centrifuged at 2 700  $\times$  g for 20 min at 4°C to eliminate extracellular-adsorbed compounds and collect washed bacteria.<sup>29</sup> The same incubation 140 141 mixtures were used to performed spectrofluorimetry and mass spectrometry analyses, in three 142 replicates each. This accumulation assay was repeated three times.

To control that the bacterial cells are alive during the experimental time, the number of cfu was determined by sampling the bacterial suspension at 2 and 10 min during antibiotic incubation. The cfu numbers were determined and no change in cell viability was observed during this period that corresponds to accumulation assay (data not shown). It must be noted that the ratio "bacterial cell/antibiotic concentration" was different in the MIC assay and in accumulation assay (about 10-20 times higher in accumulation conditions compared to MIC assays). Furthermore, the accumulation assay was carried out using starving conditions during a limited incubation time (2-10 min) as previously determined.<sup>27</sup>

151

# 152 Spectrofluorimetry assay

153 To follow the compound uptake by bacterial population, the fluorimetric assay previously described was used.<sup>25</sup> Pellets corresponding to 800  $\mu$  L of bacterial suspensions were lysed 154 155 with 500  $\mu$  L of 0.1 M Glycin-HCl pH 3 buffer overnight at room temperature. The lysis 156 efficacy has been checked by cfu determination as previously mentioned.<sup>29</sup> After a 157 centrifugation in deep wells for 20 min at 2 700  $\times$  g at 4°C, 100  $\mu$  L of lysates were analyzed 158 by spectrofluorimetry at  $\lambda_{ex}$  290 nm and  $\lambda_{em}$  around 450 nm for fleroxacin and  $\lambda_{ex}$  275 nm 159 and  $\lambda_{em}$  around 450 nm for ciprofloxacin. To quantify the fluoroquinolone fluorescence 160 intensity in bacteria lysate, spectra were normalized using the tryptophan peak at 356 nm and subtracted from control sample spectra.<sup>27</sup> Fluoroquinolone concentrations in bacterial lysate 161 162 were calculated according to a calibration curve (See paragraph 'Standard curves').<sup>29</sup>

163

# 164 Mass spectrometry determination

# 165 <u>Sample preparation for Mass spectrometry analysis</u>

Pelleted bacteria were thawed during 10 min at 37°C and resuspended in 200  $\mu$ L of 0,1 M Glycin-HCl pH 3 buffer. Samples were sonicated during 5 min (sonic batch) and incubated at 37°C during 2 hours under gentle agitation. The lysis efficacy has been checked by cfu determination (data not shown). After a first centrifugation at 6,100 g (10 min, room temperature) 150  $\mu$ L of the supernatant were recover and centrifuged a second time in the 171 same conditions. 40  $\mu$ L of these final supernatants were then put in a 96 well plate for MS 172 analysis.

173 Mass spectrometry analysis

174 Quantitative analysis was performed on a Waters ACQUITY UHPLC HSS T3 column (1.8  $\mu$ 

175 m 50 x 2.1 mm) at room temperature with the flow rate of mobile phase set at 0.5 mL/min.

176 The mobile phase consisted of (A) 0.1 % formic acid in water, and (B) 0.1 % formic acid in

177 95 % acetonitrile, 5 % water. A linear gradient elution program was applied as follows: 0-1

178 min: 0-100 % B; 1-1.3 min: 100 % B; 1.3-1.4 min: 100 %-0 % B; 1.4-2 min: 0% B. The

179 sample injection volume was 5  $\mu$  L.

All the mass spectrometry experiments were performed using a TSQ Quantiva mass
spectrometer (Thermo Scientific, San Jose, CA, USA) interfaced with an UltiMate 3000 XRS
UHPLC system (Thermo Scientific San Jose, CA, USA). Data was processed using Trace
Finder version 3.3 (Thermo Scientific, San Jose, CA, USA).

Mass spectrometry detection was performed in positive ion mode and each drug was quantified using one selected reaction monitoring transition (dwell time  $\sim$  50ms): m/z 332.141 -> 287.986 for the ciprofloxacin and 370.181 -> 326.111 for the fleroxacin. Details regarding collision energy and RF-lens values are presented in **Table 1**.

188

189 Standard curves

#### 190 Mass spectrometry

Solutions of each compound for calibration were freshly prepared in bacteria lysate. From a first concentration of 5 mg/L, 4-time serial dilutions were done in bacteria lysate to a final concentration of 0.076 ng/mL, leading to 9 solutions used for mass spectrometry calibration curves (**Figure S1**).

195 Spectrofluorimetry

196 Various known concentrations of fleroxacin and ciprofloxacin were mixed with bacteria 197 lysates at OD=4.8 and samples were measured with spectrofluorimeter (n=3) at  $\lambda_{ex}$  290 or 275 198 nm respectively and  $\lambda_{em}$  around 450 nm. The trend lines and the slopes of the fleroxacin and 199 ciprofloxacin standard curves were determined in the various studied bacteria lysates (**Figure** 200 **S2**). The corrected fluorescence value of each spectrofluorimetry sample (corrected with the 191 fluorescence signal from bacteria as previously described)<sup>27</sup> was divided by the slope of the 202 trend line to obtain the fleroxacin and ciprofloxacin concentrations.

203

205 **Results and Discussion** 

206

#### 207 Fluoroquinolone susceptibility and AcrAB expression

The activity of fleroxacin and ciprofloxacin were assayed on *E. coli* AG100, AG100A, a derivative strain devoid of the AcrAB efflux pump, and AG102, a strain that overproduces AcrAB (**Figure 1**a). The same strains were used for both detection methods. In general, AG100A was more susceptible to the drugs than the wild type, while AG102 was more resistant. Immunoblots confirmed the absence of AcrAB in AG100A and a more intense signal in AG102 (**Figure 1**b). The porins, OmpC and OmpF, are present at an equivalent level of expression in the 3 strains (**Figure 1**b).

215

#### 216 Mass Spectrometry versus spectrofluorimetry to evaluate the fluoroquinolone accumulation

In order to compare the two approaches for determining the antibiotic accumulation in various efflux backgrounds, an experimental protocol was designed (see **Figure S3**). In this protocol, we generated duplicate samples for each experimental point (*e.g.* strain, time, drug concentration). Each sample was analyzed in triplicate (corresponding to 3 independent wells) using spectrofluorimetry or mass spectrometry method (blind assay).

# 222 <u>Ciprofloxacin accumulation</u>

The analysis was performed on measurements of ciprofloxacin concentrations accumulated in all studied strains (AG100, AG100A, AG102, AG102 incubated with CCCP) at 2 min and 10 min incubations (**Figure 2**). The consistency between spectrofluorimetry and mass spectrometry was quantified by Bland-Altman calculations (**Figure 2**). The difference is centered around zero with neither absolute systematic error nor strong dependency on the magnitude of measurements. The observed bias is relatively low (297  $\pm$  5477 molecule/cell) and not significant, and biases are similar between incubations at 2 min and 10 min (data notshown). Under the conditions used, the two methods give equivalent results.

#### 231 Fleroxacin accumulation

The results are presented in **Figure S4**. As observed with ciprofloxacin, the Bland-Altman plot demonstrated the consistency of the measurements obtained with spectrofluorimetry and mass spectrometry (Bias of  $263 \pm 4008$  molecule/cell). The difference is centered around zero and no proportional error is present in the comparison between the two methods.

236 It must be noted that only in the case of fluorimetry assay, as reported previously, the internal 237 signal corresponding to intrinsic bacterial fluorescence (tryptophan fluorescence) was 238 systematically used to correct the data about the variation of cellular masses presented in the 239 various samples.<sup>27,29</sup> The fact that spectrofluorimetry measurements are corrected with the 240 bacterial internal standard, unlike mass spectrometry data, can explain the ranges of 241 agreement obtained on the Bland-Altman plots. Another specific point concerns the detection 242 limit of spectrofluorimetry: it cannot be used to detect accumulations performed with 243 concentration lower than 500 ng/mL under the conditions used. In contrast, mass spectrometry 244 gives access to a wider range of low concentrations (down to 25 ng/mL) in our conditions.

245

#### 246 Concentration effect, influx and efflux activity

The measure of the accumulation of compounds inside the *E. coli* AG100A strain devoid of AcrAB pump can be used to determine the respective efficacy of ciprofloxacin and fleroxacin uptake. The results presented in **Figure 3** indicate that ciprofloxacin is about 2-fold more efficiently accumulated compared to fleroxacin in the absence of AcrAB efflux. A quite similar value has been calculated using spectrofluorimetry assay and previously proposed for the concept SICAR<sup>IN.32</sup> In this study, the mass spectrometry assay also shows a difference in uptake for ciprofloxacin and fleroxacin (Kruskal-Wallis test, p<0.01, n=27).

254 To evaluate the impacts of external concentration effect and/or of efflux level on the rate of 255 intracellular accumulation, a large range of ciprofloxacin concentrations was incubated with 256 the parental strain, the AcrAB- derivative and the AcrAB overproducer isogenic strains. The 257 data obtained with mass spectrometry analyses are presented in Figure 4. A strong difference 258 was observed between the accumulations in the different AcrAB strains: the maximal 259 accumulation, whatever the concentration used, was obtained with AG100A or with AG102 in 260 the presence of CCCP; in contrast the minima was obtained with AG102 (p<0.001). 261 Moreover, the overproduction of AcrAB in AG102 has a noticeable effect on ciprofloxacin 262 accumulation at high concentrations (3.75 and 5 µg/mL) compared to the pump basal 263 expression obtained in AG100 (p<0.05).

264 The fold-increase (FI) was defined as the ratio: F/AG102+CCCP] / F/AG102], where 265 F/AG102+CCCP corresponds to the ciprofloxacin accumulated in AG102 in the presence of 266 CCCP and F/AG102] corresponds to the ciprofloxacin accumulated in the same strain in the 267 absence of CCCP. The F/AG100A1 / F/AG1021 was also calculated and the different ratios 268 were plotted for the given external ciprofloxacin concentration in Figure 5. Interestingly, with 269 increasing ciprofloxacin concentration, a significant decrease (p<0.05) of FI [AG102+CCCP] 270 /AG102] and FI [AG100A/AG102] was observed (from about 4.4 to 2.7 and 3.6 to 2.4, 271 respectively)(Figure 5). These results suggest that a saturation of the efflux ability to expel 272 the internalized molecules can be reached in the *E. coli* strain that overproduced AcrAB when 273 high concentration of ciprofloxacin is used.

These data explain the key contribution of efflux pump in fluoroquinolone resistance in clinical strains where the uptake of antibiotic can be impaired by alteration of the membrane permeability as previously hypothesized.<sup>10</sup>

278 Conclusion

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A variety of methods has been previously reported to follow the intracellular accumulation of antibiotic in enterobacterial cells that feature membrane-associated mechanisms of resistance affecting many or all antibiotic classes, including reduction of outer membrane permeability or increase of levels of efflux pumps .<sup>10,18</sup> Until now and despite recent methodology efforts, no comparative assays have been carried out in order to have an independent validation of the proposed protocols or at least to check their consistency and robustness.

286

In this study, our aim was to determine the internal concentration of fluoroquinolones, ciprofloxacin and fleroxacin and to measure the effect of antibiotic concentrations on bacteria expressing various levels of AcrB pump, using fluorimetric and mass spectrometric (LC&MS/MS) methods.

291 For the first time, a robust consistency was described between these two approaches, 292 spectrofluorimetry and mass spectrometry, whatever the efflux activity, the molecule or the 293 concentration of antibiotic used in the assays. Moreover, by combining the spectrofluorimetry 294 measurement, that contains a solid internal standard<sup>29</sup>, with LC&MS/MS determination, that 295 allows studying low concentrations of molecule, these two methods can be viewed as 296 complementary. Our study is especially important in view of recent papers reporting the 297 accumulation of antibacterial molecules using mass spectrometry assay when this assay lacks 298 robust internal control for normalization.<sup>23</sup>

The development of LC&MS/MS assays in microplates allows to determine the relationship between a large range of antibiotic concentrations and the amount of intra-bacterial accumulation in different efflux backgrounds without and with the presence of an efflux poison (CCCP). Importantly, the data demonstrate that ciprofloxacin penetrates and 303 accumulates more than fleroxacin in an AcrAB- strain The measurement of uptake in the 304 absence of efflux activity, defined by SICAR<sup>IN</sup> as previously proposed,<sup>32</sup> is thus confirmed. 305 With increasing external concentrations of compound, the effect of efflux on internal 306 accumulation was altered and the accumulation ratio obtained between efflux- and efflux ++ 307 strains was significantly decreased, showing that efflux can be saturated. This effect must be 308 taken into consideration when assessing the impact of efflux on new antibacterial agents.

309 In addition, the fact that efflux pumps can indeed be saturated supports the strategy previously 310 proposed by several authors to generate a substrate competition on the binding sites of efflux 311 pumps by using molecular lures or adjuvants to restore the intracellular antibiotic 312 concentration.<sup>31,33–36</sup>

313 Intrinsic bacterial fluorescence has been previously used to standardize/normalize the data in 314 the quantification assays for fluorescent drugs.<sup>25</sup> In this study, the good correlation between 315 mass spectrometric determination and fluorimetric analyses demonstrated the advantage of 316 this internal measure for monitoring the efficacy of lysis protocol and correcting the crude 317 signals for protocol validation.<sup>10,19</sup>

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In the future, it will be necessary to develop additional assays using similar methods as the one described here to measure in whole bacteria the apparent affinities of various antibiotics for the different bacterial transporters involved in the influx step (*e.g.* porins) or involved in the efflux (*e.g.* other AcrAB family members).

323

To conclude, with this method the concept of "structure intracellular concentration activity relationship" (SICAR) previously proposed<sup>10,19</sup> is now applied to a large concentration range. In SAR studies for biologically active molecules, SICAR will correlate the chemical structure to the efficacy of translocation through bacterial membrane and the resulting intracellular

- accumulation; while taking into account recently proposed key parameters, such as globularity
  and charge, as reported by Richter *et al.*<sup>23</sup> Thus, the role of chemical side chains involved in
  the membrane permeation (IN) or in the efflux transport (OUT) can be dissected and allow the
  design of drug that fit better the translocation constraints present in resistant clinical isolates.
- 333

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338

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# 349 Transparency declarations

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The authors (L.C., C.T., A.V. and M.M.) declare competing financial interests: L.C., C.T., A.V. and M.M. are former/current employees of Sanofi R&D. All other authors: none to declare.

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**Figures** 

- 451 Figure 1. Expression of AcrAB efflux components and porins, and fluoroquinolone452 susceptibilities of the studied bacterial strains.

**a** 

<i>E. coli</i> strains	Detected porins		Efflux pump	MIC <sup>a</sup>	
	OmpC	OmpF	(AcrAB)	Fleroxacin (mg/L)	Ciprofloxacin (mg/L)
AG100*	+	+	AcrAB+	0.125	0.016
AG100A*	+	+	AcrAB-	0.03-0.06	0.004-0.008
AG102*	+	+	AcrAB++	0.5	0.062

<sup>&</sup>lt;sup>a</sup> Strains and susceptibilities have been previously reported.<sup>30</sup>

**b** 



- 459 (a) Fluoroquinolone susceptibilities of AG100, AG100A and AG102. (b) Western blot
- showing AcrB, AcrA and porins OmpC and OmpF in AG100, AG100A and AG102 grown in
- 461 MH2.

462 Figure 2. Bland and Altman plot for mass spectrometry and spectrofluorimetry measurements463 of ciprofloxacin accumulation.







467 Ciprofloxacin was accumulated for 2 min and 10 min in AG100 (AcrAB+), AG100A 468 (AcrAB-), AG102 (AcrAB++) and AG102 cells incubated in the presence of CCCP (10 µM). 469 The ciprofloxacin intracellular concentrations (molecules/cell) obtained in the various 470 isogenic strains were determined with the spectrofluorimetry and mass spectrometry methods. 471 The figure shows the Bland-Altman plot of the differences between mass spectrometry and 472 spectrofluorimetry quantification against the averages of the two methods with bias of 297  $\pm$ 473 5477 units. The bias is represented by the gap between the X axis, corresponding to a zero 474 difference, and the parallel dotted line to the X axis. The 95% limits of agreement 475 corresponding to +/- 1.96 SD are represented in dashed lines.

476

478 Figure 3. Amount of intrabacterial concentrations of ciprofloxacin and fleroxacin measured479 by mass spectrometry in the AG100A strain (AcrAB-).



- 485 were measured by mass spectrometry. The symbols with bars (standard deviations) correspond
- 486 to measurements carried out in triplicate.

487 Figure 4. Accumulation and concentration effect of ciprofloxacin measured by mass488 spectrometry in the studied strains expressing various efflux levels.



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492 Increasing ciprofloxacin concentrations were accumulated for 10 min in AG100 (AcrAB+, 493 black diamonds), AG100A (AcrAB-, white squares), AG102 (AcrAB++, white circles) and 494 AG102 cells incubated in the presence of CCCP (10 µM) (crosses). The concentrations 495 accumulated in the various strains were measured by mass spectrometry. The columns with 496 bars (standard deviations) correspond to measurements of 3 independent experiments, each 497 experiment being carried out in triplicate. The insert presents an enlargement for small 498 concentrations. ANOVA and Tukey's post-Hoc tests were performed to determine differences 499 between the various strains (n=9). \*\*\*: p<0.001, \*\*: p<0.01, \*: p<0.05. Data normality was 500 checked by the Shapiro-Wilk test and homogeneity of variances was checked by the Fligner-501 Killeen test.

502 Figure 5. Determination of ciprofloxacin accumulation ratios in E. coli strains expressing 503 various efflux levels measured by mass spectrometry.





506

507 Increasing ciprofloxacin concentrations were accumulated for 10 min in AG100A (AcrAB-), 508 AG102 (AcrAB++) and AG102 cells incubated in the presence of CCCP (10 µM). Two ratios 509 of ciprofloxacin accumulation were calculated to characterize the efflux capability of the 510 AcrAB efflux pump according to the external ciprofloxacin concentration: [AG102+CCCP] / 511 [AG102] (black circles), where [AG102+CCCP] corresponds to the ciprofloxacin 512 accumulated in AG102 (AcrAB++) in the presence of CCCP and [AG102] corresponds to the 513 ciprofloxacin accumulated in the same strain in the absence of CCCP; similarly, [AG100A] / 514 [AG102] (white squares), where [AG100A] corresponds to the ciprofloxacin accumulated in 515 AG100A (AcrAB-) and [AG102] corresponds to the ciprofloxacin accumulated in AG102 516 (AcrAB++). The symbols with bars (standard deviations) correspond to measurements carried 517 out in triplicate. The [AG100A] / [AG102] ratio is significantly higher at external 518 concentrations of 0.05 or 0.1 µg/mL compared to external concentrations of 3.75 and 5 µg/mL

- 519 (ANOVA, p<0.05). Similarly, the [AG102+CCCP] / [AG102] ratio is significantly higher at
- 520 external concentrations of 0.05, 0.075, 0.1, 0.25 or 0.5 µg/mL compared to concentrations of
- 521 3.75 or 5 μg/mL (ANOVA, p<0.05). Data normality was checked by the Shapiro-Wilk test and
- 522 homogeneity of variances was checked by the Fligner-Killeen test.

- **Table 1:** Mass spectrometry parameters used during analyses.

Ion source	Ciprofloxacin	Fleroxacin
Spray Voltage Positive Ion (V)	3500	3400
Sheath Gas (Arb)	40	45
Auxiliary Gas (Arb)	15	5
Sweep Gas (Arb)	2	1
Ion transfert Tube Temperature (°C)	350	350
Vaporizer Temperature (°C)	400	400
SRM	Ciprofloxacin	Fleroxacin
Collision Energy (V)	18	18
Dwell Time (ms)	50	50
RF lens (V)	75	77
Q1 Resolution (FWHM)	0.7	0.7
Q3 Resolution (FWHM)	0.7	0.7
CID Gas (mTorr)	1.5	1.5