METAL ION TRANSPORT AND REGULATION IN MYCOBACTERIUM TUBERCULOSIS

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1. ABSTRACT

The regulation of metal ion concentrations is central to the physiology of the interaction between pathogenic bacteria and their hosts. Apart from the NRAMP orthologue, MntH, metal ion transporters in Mycobacterium tuberculosis have not been studied. Mn, the physiological substrate of MntH in other bacteria, may play an important role as a structural and redox-active cofactor in a wide range of metabolic processes. Fe, Cu and Zn play structural and catalytic roles in metalloenzymes involved in oxidative stress responses. Fe and Mg are required for growth in macrophages. Genomic analyses reveal 28 sequences encoding a broad repertoire of putative metal ion transporters (or transporter subunits), representing 24% of all transporters in this organism. These comprise 8 families of secondary active transporters and 3 families of primary active transporters, including 12 'P' type ATPases. Potential metal ion specificities include K[‡], Na⁺, Cu²⁺, Cd^{2+} , Zn^{2+} , Mn^{2+} , Mg^{2+} , Ca^{2+} , Co^{2+} , Ni^{2+} , $Fe^{2+}/^{3+}$, Hg^{2+} , AsO_2 and AsO_4 . 17 of these transporters are also encoded as complete open reading frames in Mycobacterium leprae, suggesting a role in intracellular survival. Iron transcriptionally regulates a diverse set of genes via the iron-dependent DNA-binding proteins, Fur and IdeR. Changes in Fe and Mg concentrations signal entry into the intracellular compartment and potentially trigger upregulation of virulence determinants. The plethora of putative transport systems encoded by the M. tuberculosis genome contrasts strikingly with the paucity of experimental data on these systems. The detailed analysis of the temporal pattern of M. tuberculosis transporter gene expression during infection will provide important insights into the basic biology of intracellular parasitism and may help to shape novel therapeutic strategies.

2. INTRODUCTION

Trans-membrane ion transport is a neglected subject in studies on mycobacterium species in general and M. tuberculosis in particular. To date, the only transmembrane metal ion transporter for which functional

data exist, is the Natural Resistance Associated Macrophage Protein (NRAMP) family orthologue, MntH, previously called Mramp (1). Most studies on metal ion uptake in *M. tuberculosis* have focussed on siderophore-mediated iron acquisition (recently reviewed (2)), but the mechanisms by which iron is translocated across the cytoplasmic membrane are unknown. Much less is understood about any aspect of the acquisition of other metal ions.

The capacity to survive within a specialised phagosomal compartment is central to the pathogenicity of M. tuberculosis. Evidence for the significance of metal ion transport in this micro-environment (and possibly for that of Manganese (Mn) in particular) comes from studies on the NRAMP family. Mammalian NRAMP1 and NRAMP2, which utilise proton gradients to energise divalent cation transport (3-5), are important determinants of intraphagosomal divalent cation composition. They are recruited to the phagosomal membrane following the phagocytosis of diverse intracellular pathogens including Mycobacteria, Salmonella and Leishmania (6-8). NRAMP1 mutations in mice are robustly associated with differential susceptibility to these pathogens during the early phase of infection (9, 10), while NRAMP1 polymorphisms have also been implicated in susceptibility to tuberculosis and leprosy (or leprosy type) in some human populations (11-16). While NRAMP2 is a major iron_{II} (Fe²⁺) transporter, the physiologically important divalent cation(s) transported by NRAMP1 and the direction of transport remain controversial. Recent studies have demonstrated that NRAMP1 can transport Mn, Fe, Cobalt (Co) and Zinc (Zn) (4, 5, 17, 18), but the absence of any direct measurements of the relative affinities of this transporter for these cations has so far precluded definitive conclusions as to which might be the most physiologically relevant in this context. In one study (18), NRAMP1 exhibited an apparently greater selectivity for Mn compared to NRAMP2, but was indistinguishable from NRAMP2 with respect to Fe transport, suggesting that NRAMP1 might have a predilection for Mn.

Bacterial NRAMP orthologues are represented in all major bacterial groups apart from the Archaea (19). It has been suggested that competition with the host for limiting concentrations of essential trace metals within the phagosomal compartment may be a common physiological imperative amongst diverse intraphagosomal pathogens (20). The possibility that Mn per se might play an important role in the interaction between intraphagosomal pathogens and host cells is reinforced by the discovery that the two bacterial NRAMP orthologues for which detailed kinetic characterisations are available (E. coli and S. enterica serovar Typhimurium), are highly selective Mn transporters. This conclusion is based on the observation that both exhibit K_Ts for Mn in the sub micromolar range (21, 22), commensurate with physiologically plausible ambient Mn concentrations. Their affinities for Fe²⁺, on the other hand, are greater than 30 microM, higher than any free Fe²⁺ concentrations likely to be encountered in vivo. This may not, however, be the case for all prokaryotic Nramp orthologues under all conditions. The M. tuberculosis NRAMP orthologue (Mramp) transports Fe, Zn and Mn (1, and Agranoff, Kehres et al, unpublished observations) but reliable predictions regarding its preferred substrate await detailed kinetic studies.

The evolution of mechanisms for Fe scavenging may be a key characteristic of successful bacterial pathogens. Sequestration of Fe and Zn by mammals is a common, non-specific response to bacterial infection (23). Conversely, availability of Fe in an accessible form has been associated in humans with increased susceptibility to a wide variety of infectious agents. Many important human pathogens possess high affinity siderophores. In at least some cases, inactivation of these mechanisms by genetic manipulation leads to attenuation of pathogenicity. Infection and inflammation-induced alterations in host-availability of other trace metals such as Zn, Copper (Cu), Selenium (Se), Magnesium (Mg) are also well described (23-25) and bacteria have evolved sensing mechanisms to register these alterations.

In this article, we review our current understanding of the physiological importance of divalent metal cations for *M. tuberculosis* and the significance of these processes in its interaction with the host. We draw attention, in particular, to the striking knowledge gap reflected by the contrast between the plethora of putative metal ion transport systems encoded in the genome and the dearth of experimental data on all but a couple of these.

3. THE PHYSIOLOGICAL ROLES OF METAL IONS IN *M. TUBERCULOSIS*

Divalent cations of the transition metal series participate in complex redox reactions by virtue of their variable oxidation states - a property exploited by a variety of enzyme systems with key physiological functions. These include the respiratory chain cytochromes which incorporate Fe and Cu, and enzymes involved in responses to oxidative stress. In *M. tuberculosis*, the capacity to withstand the defensive oxidative burst generated by host mononuclear cells may be an essential adaptation to intracellular survival.

M. tuberculosis possesses two superoxide dismutases, SodA and SodC containing respectively, Fe and a Cu/Zn pair (26). The former is one of the most abundant proteins found in virulent M. tuberculosis culture supernatants (27). By analogy with functionally characterised orthologues, SodA is probably involved in combating intra-cytoplasmic oxidative stresses arising from endogenous oxidative phosphorylation. SodC has been localised to a periplasmic compartment consistent with its proposed role in the detoxification of host-generated toxic free radicals (28), and contributes to resistance to oxidative stress in liquid culture and in activated macrophages (29). Other Fe-containing M. tuberculosis metalloenzymes involved in the oxidative stress response include the catalase-peroxidase, KatG, AhpC, an alkyl hydroperoxide reductase and the thioredoxin proteins TrxA and TrxB (30).

The physiological functions of Mn^{2+} in M. tuberculosis (and in bacteria in general) are still poorly understood, although a role for bacterial Mn-cofactored enzymes in a diverse range of metabolic functions including free radical detoxification, central carbon metabolism, signal transduction and growth regulation, is becoming apparent (31). These include Mn possesses a unique redox chemistry in biological systems, compared to other transition metals. In contrast to Fe²⁺, the relative stability conferred by the symmetry of its half-filled d-shell (3d⁵) makes it much less prone, in aqueous solution, to oxidation from the Mn²⁺ to the Mn³⁺ state. Consequently, its ability to generate toxic free radicals - for example, by the reduction of H₂O₂ in the Fenton reaction - is much lower than that of Fe^{2+} , and cells can therefore tolerate far higher concentrations of free Mn²⁺. However, its redox potential is profoundly influenced by its ligand environment. This phenomenon is exploited in radical detoxifying enzymes such as Mn cofactored SodA, where conformational alterations modify the effective redox potential allowing dismutation of superoxide radicals under appropriate circumstances. SodA orthologues in many bacteria utilise Mn. but SodA in M. tuberculosis appears to be Fe-cofactored (26). In some cases, free Mn²⁺ present at very high concentrations (milimolar range) may exert a direct protective effect via non-enzymatic superoxide scavenging and peroxide dismutating activity. Lactobacilli, for example, utilise high cytoplasmic Mn²⁺ concentrations to withstand oxidative stresses without the requirement for SODs or Fe co-factored catalase/peroxidases (32), while Borrelia burgdorferi (33) and Streptococcus suis (34) also maintain very high levels of cytoplasmic Mn²⁺, possibly serving the same physiological functions. The very few known bacterial metalloproteins containing Mn (apart from some SodA proteins) are the serine/threonine phosphatases, PrpA, PrpB present in some enterobacteria but without obvious orthologues in M. tuberculosis, enolase, a key glycolytic enzyme which is represented in M. tuberculosis (Rv1023) and GpmM, a Mn-dependent phosphoglyceromutase not present in M. tuberculosis. On the other hand, because of its liganding geometry, Mn²⁺ may substitute for Mg²⁺ as a non-structural cofactor for several enzymes including the M. tuberculosis adenylyl cyclase, Cya, (35) and serine/threonine kinase PknA (involved in morphological regulation during cell division) (36). It can also substitute

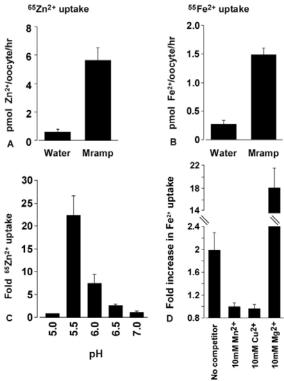


Figure 1. Metal ion transport in *Xenopus laevis* oocytes expressing *M. tuberculosis* MntH (Mramp). Oocytes were injected with 5ng capped cRNA encoding MntH, and $^{65}\text{Zn}^{2+}$ and $^{55}\text{Fe}^{2+}$ uptake assays were performed after 48-96hrs incubation. **A.** $^{65}\text{Zn}^{2+}$ uptake in water and MntH cRNA-injected oocytes. **B.** $^{55}\text{Fe}^{2+}$ uptake in water and MntH cRNA-injected oocytes. **C.** Effect of pH on $^{65}\text{Zn}^{2+}$ uptake. **D.** Effects of other divalent cations on $^{55}\text{Fe}^{2+}$ uptake (modified from (1)).

for Ca^{2+} in stimulating autophosphorylation of TrcS, the histidine kinase component of the TrcS/TrcR two-component regulatory system (37), a potentially important signal transduction mechanism. It is likely that several other enzyme systems in *M. tuberculosis* will prove to be Mn^{2+} dependent (31).

The siderophores of *M. tuberculosis* constitute a family of soluble and cell envelope associated, low molecular weight (744-800 Da) molecules known as mycobactins (38). Their water-solubilities vary by virtue of the length and polarisation of their acyl side chains (2). Mycobactins are synthesised by non-ribosomal peptide synthases encoded by the *mbt* gene cluster (39). They exhibit very high affinities for Fe³⁺ and soluble mycobactins (or 'exomycobactins') can acquire Fe³⁺ from 40% saturated transferrin, lactoferrin and ferritin (40). They appear to be important for survival within macrophages as inactivation of *mbtB*, encoding one of the critical enzymes in the biosynthetic pathway, significantly impairs growth in THP1 cells and in iron-limited liquid media (41) (although how far an immortalised murine cell line reflects the situation in human macrophages/monocytes, is debatable).

It is assumed that iron is transferred from soluble, to cell wall-bound, mycobactins but a major gap in our

understanding of Fe acquisition in *M. tuberculosis* is the mechanism by which it is subsequently translocated across the cytoplasmic membrane. In some bacteria, Fe is passed on to a periplasmic iron-binding protein e.g. FhuD in *E. coli*, and thence to a multi-subunit ATP-binding cassette (ABC)-type integral membrane transport ATPase. In others, the entire siderophore-iron complex is translocated, also via an ABC traffic ATPase (42). In *M. tuberculosis*, while putative ABC-type ATPases are present in abundance (at least 25), possible Fe-transporting ABC complexes are represented only by the binding protein subunits FecB and FecB2 in the apparent absence of corresponding ATP-binding domain and transmembrane subunits (43).

 ${\rm Mg^{2^+}}$ has many important physiological functions in bacteria. Growth of *M. tuberculosis* is greatly restricted by low ${\rm Mg^{2^+}}$ concentrations (<50 microM) under conditions of acidic pH (< 6.5) (29) but ${\rm Mg^{2^+}}$ transport has not yet been formally studied. Major candidates for important *M. tuberculosis* ${\rm Mg^{2^+}}$ transporters are CorA and MgtE (and possibly one or more of the 'P' type ATPases), discussed further below.

4. MNTH – A DIVALENT TRANSITION METAL TRANSPORTER IN THE NRAMP FAMILY

The mntH ORF in M. tuberculosis (Rv0924c) encodes a predicted 428 amino acid protein, exhibiting sequence identities of between 31% and 74% with orthologues in other bacteria. We have detected mntH mRNA both in M. tuberculosis grown in liquid media as well as from intracellular M. tuberculosis isolated from THP1 cells, a macrophage-like cell line, and have obtained preliminary functional data on this protein by expressing it in Xenopus oocytes (1) and sf21 insect cells (Agranoff, Kehres et al, unpublished observations). Like its hostencoded orthologues, MntH is a proton dependent divalent cation transporter which stimulates the specific uptake of ⁶⁵Zn²⁺ and ⁵⁵Fe²⁺ in oocytes, maximally between pH values of 5.5-6.5 (Figure 1A, B and C). This range accords well with estimates of the pH within the mycobacterial phagosome (44), suggesting that MntH might be important in the intracellular environment. Mn²⁺ and Cu²⁺ in excess (10mM) inhibit this specific uptake suggesting that they compete for transport or binding by MntH (Figure 1D). Mg^{2+} appears to stimulate Fe^{2+} uptake, but this may be a result of non-specific effects on oocytes. We have also demonstrated direct transport of Mn2+ by insect cells expressing MntH (not shown).

As discussed earlier, there is convincing evidence that Mn²⁺ is the physiological substrate of MntH in *E. coli*, and *S. typhimurium*, and, by extension, this may well be so, too, for *M. tuberulosis*. In the former organisms, as well as *B. subtilis*, MntH orthologues are known to be up-regulated by low Mn²⁺ concentrations, acting via the Mn²⁺-dependent repressor, MntR (45, 46). This regulator is distantly related to the DtxR family of iron-dependent regulators, DNA-binding proteins which, when loaded with their metal cofactor, bind to specific palindromic recognition sequences in gene promoter regions (see below). However, *M. tuberculosis* does not encode an MntR homologue, nor

is there an obvious MntR box upstream of *mntH*. The *E. coli* and *S. typhimurium* orthologues are additionally regulated by Fe (via the iron-binding repressor, Fur) and, in the case of *S. typhimurium*, also by peroxide, via the regulator, OxyR, with corresponding Fur and OxyR boxes in the promoter region (21, 47). However, scrutiny of the *M. tuberculosis mntH* upstream region reveals no consensus binding sites corresponding to either of these regulators.

We are currently studying the regulation of MntH expression and its contribution to intraphagosomal survival and pathogenicity. *mntH* knockout mutants were recently reported as showing no discernible phenotype in liquid culture, macrophages or mice (48, 49). This may be a consequence of the deployment of compensatory transporters (the large number of 'P' type ATPases, for example, may provide an ample repertoire of substrate specificities). Alternatively, the physiological stimulus for MntH function may not have been identified.

5. THE POTENTIAL M. TUBERCULOSIS METAL ION TRANSPORTER REPERTOIRE

M. tuberculosis encodes 28 putative metal ion transporters (or transporter subunits) based on sequence comparisons with functionally characterised transporters in other bacteria (50). Table 1 presents a classification of these sequences and table 2 compares M. tuberculosis cation transporters as a proportion of all encoded transporters, with this proportion in a selection of completely sequenced prokaryotic genomes. Cation transporters in M. tuberculosis represent 24% of all encoded transporter sequences. This broad repertoire may confer the versatility required for adaptation to both intra-and extracellular niches during infection and may also reflect the proposed divergence of M. tuberculosis from a free living environmental ancestor in the relatively recent past (51).

Table 1 reveals a predominance of primary active transporters (belonging to 3 families) in which ATP hydrolysis provides the energetic driving force for cation transport. Eight families of secondarily active metal ion transporters are encoded by M. tuberculosis, each represented by only a single member. The disproportion between primary and secondary active transporters is due to the presence of 12 'P' type ATPases, a greater number than in any other sequenced prokaryotic genome. Although M. tuberculosis encodes at least 25 complete members of the multi-subunit ABC family (43), those involved in metal ion transport in other bacteria are represented only incompletely (and possibly non-functionally) in M. tuberculosis, by genes encoding the isolated substrate binding protein components, FecB and FecB2. In E. coli, FecB binds iron_{III} dicitrate before delivering it to the rest of the ABC complex. While Paulsen et al ((50)) list Rv3041 as a possible associated nucleotide binding subunit, we were unable to find a convincing basis in homology to group this ORF with nucleotide binding subunits of known Fe transporting ABC protein complexes. The third family of primary active transporters are the arsenical efflux proteins (Ars family), comprising ArsA, ArsB and ArsB2. ArsB and ArsB2 are integral membrane subunits whose homologues in other bacteria function either in conjunction with the ATPase subunit (ArsA) as heterodimeric primary active efflux pumps or independently as secondarily active transporters energetically coupled to the membrane potential (52).

A comparison of these transporters with those of Mycobacterium leprae affords an insight into the extent of functional redundancy (with respect to parasitism) in M. tuberculosis. The M. leprae genome contains counterparts of many M. tuberculosis genes. However, almost half of all M. leprae ORFs are pseudogenes, arguably the result of a dramatic 'proteomic streamlining' in which proteins unnecessary for an obligate parasitic lifestyle have been 'jettisoned' through a process of gene deletion and decay (53). 17 of the 28 M. tuberculosis metal ion transporters are either not present at all in M. leprae or are represented by pseudogenes (table 1). The remainder may be precisely those which have a critical function in some aspect of intracellular survival. This 'residual set' of metal transporter genes consists of mntH, corA, chaA, CPA-2, 4 of the 12 'P' type ATPases, arsB (the secondarily active arsenical exporter), fecB and the possibly associated ATPase subunit, Rv3041c. These considerations might justify making these proteins the focus of initial studies on metal ion transport during infection by M. tuberculosis.

5.1. 'P' type ATPases

The 'P' type ATPases are a superfamily of ubiquitous primary active transporters (54, 55). Table 3 illustrates a currently accepted subclassification (54). Most are metal cation transporters apart from a subfamily of eukaryotic amino-phospholipid translocases. Prokaryotic 'P' type ATPases transport a range of divalent metal cations encompassing Cu²⁺, Ag²⁺, Cd²⁺, Zn²⁺ and Mn²⁺. *M. tuberculosis* encodes more 'P' type ATPases than any other class of metal transporter (table 4).

Three of the 5 classes of 'P' type ATPases are represented in *M. tuberculosis*; the complete set of 12 encompasses 7 probable type IB or heavy metal pumps (ctps A, B, C, D, G, J and V), 3 possible type IIA ATPases (ctps F, H and I), 1 type IA or kdpB-type transporter and 1 unclassifiable sequence (ctpE) (table 1). Figure 2 illustrates their striking variation in overall length and in the lengths of individual domains. Of the 7 type IB or 'heavy metal' ATPases, only ctpA and ctpB possess a recognisable N-terminal heavy metal binding motif containing paired cysteine residues (56). However, short ORFs encoded immediately upstream of ctps C, G and V contain possible histidine-rich heavy-metal binding regions at their C-termini, suggesting that these may function as metal-binding subunits (57).

The *M. tuberculosis* heavy metal 'P' type ATPases can be sub-classified into 3 groups, based on alignments of the first 100 amino acids in their N-termini (not shown). These comprise: i. ctpA and ctpB which share 47.2% identity and cluster with known Cu²⁺ transporters, ii. ctps C,G, and V sharing 40-50% identity and iii. ctpD and J

Table 1. Classification of *M. tuberculosis* metal ion transporters

Transporter class	Transporter family	Abbrev- iation	TC No.	Gene name	Rv No.	Substrate	Energetics	Comments	M. leprae orthologue	% amino- acid identity
Secondarily active:										
	Proton dependent Mn ²⁺ transporter	MntH/ Nramp	2.A55.3.1	mntH	Rv0924c	Mn ²⁺ , Fe ²⁺ , Zn ²⁺ /H ⁺ symporter ? Mg ²⁺ /Co ²⁺ /Fe ²⁺	PMF		ML2098	67
	Metal Ion transporter	MIT	2.45	corA	Rv1239c	uptake	?		ML1080	79
	Cation Diffusion Facillitator	CDF	2.4	-	Rv2025c	? Cd ²⁺ /Zn ²⁺ /Co ²⁺	?		Pseudogene ML1977	-
	Ni ²⁺ , Co ²⁺ transporter	NiCoT	2.A.52	nicT	Rv2856	Ni ²⁺ / Co ²⁺	PMF		Pseudogene ML1571	-
	Arsenical resistance-	ACR3		arsC	Rv2643	? AsO ³⁻	? PMF		-	-
	Ca ²⁺ : cation antiporter	CaCA	2.19	chaA	Rv1607	? Ca ²⁺	? PMF		ML1267	56
	Monovalent cation: proton antiporter-1	CPA-1	2.36	yjcE	Rv2287	? Na ⁺ /H ⁺ antiporter	? PMF		Pseudogene ML1792	-
	Monovalent cation: proton antiporter-2	CPA-2	2.37	kefB	Rv3236c	?K ⁺ or Na ⁺ /H ⁺ antiporter	? PMF		ML0782	71
Primary active:										
	P' type ATPase	P-ATPase	3.3	ctpA	Rv0092	? Heavy metal (?Cu ^{+/2+})	ATP hydrolysis	Type IB	ML1987	74.4
				ctpB	Rv0103c	? Heavy metal (?Cu ^{+/2+})	" "	Type IB	ML2000	76.5
				ctpC	Rv3270	? Heavy metal (?Cd ²⁺ /Fe ²⁺)	" "	Type IB	ML0747	74
				ctpD	Rv1469	? Heavy metal (?Cd ²⁺)	" "	Type IB	Pseudogene ML1819	-
				ctpE	Rv0908	?	" "	? Type II or novel subclass	Pseudogene ML2115	-
				ctpF	Rv1997	? Ca ²⁺ /Mg ²⁺	" "	Type IIA		-
				ctpG	Rv1992c	? Heavy metal (?Cd ²⁺)		Type IB		-
				ctpH	Rv0425c	?	" "	? Type IIA (V. extended N-terminal region)	Pseudogene ML1933	-
				ctpI	Rv0107c	?	" "	66 66	ML2671	81
				ctpJ	Rv3743c	? Heavy metal (?Cd ²⁺)	" "	Type IB	-	-
				ctpV	Rv0969	? Heavy metal (?Cu ^{+/2+})	" "	Type IB	-	-
				kdpB	Rv1030	? K ⁺ uptake	" "	Type IA	-	-
	ATP-binding cassette	ABC	3.1	fecB	Rv0265	?Fe ³⁺		Substrate binding protein subunit	ML1729	75.6
				fecB2	Rv3044	?Fe ³⁺		Substrate binding protein subunit	Pseudogene ML2548	-
				-	Rv3041c	?Fe ³⁺	ATP hydrolysis	ATPase subunit	ML1726	75
	Arsenical efflux	Ars	3.A.4	arsA	Rv2084	? AsO ³⁻ efflux	ATP hydrolysis		-	-
				arsB	Rv2685	? AsO ³ efflux	? PMF		ML1036	69
	2+			arsB2	Rv3578	? AsO ³⁻ efflux	? PMF		Pseudogene ML0331	-
Unclassified:	Mg ²⁺ transporter	MgT	99.19	mgtE	Rv0362	?Mg ²⁺ , Co ²⁺ uptake	?		-	-
	MerTP mercuric ion permease	MerTP	99.2	merT	Rv2877c	? Hg ²⁺ uptake	?		Pseudogene ML1585	-

With the exception of MntH, the substrate specificities, where stated, are speculative and based on those of functionally characterised orthologues in other organisms. *M. leprae* orthologues were identified by TBLASTN sequence comparisons with the *M. leprae* genome database (http://genolist.pasteur.fr/Leproma/) and % amino acid identities are stated for the largest regions of overlap for intact open reading frames. CorA (Rv1239) is the major high capacity constitutive Mg²⁺ importer in *E. coli* and *S. typhimurium* (70). Homologues of Rv2025c in the soil bacteria *Alcaligenes spp.* function as divalent cation/proton antiporters in the efflux of Cd²⁺, Zn²⁺ and Co²⁺ (71). Functionally characterised members of the NiCoT family catalyse proton motive force (PMF)-driven uptake of either Ni²⁺ or Co²⁺ in Gram +ve and Gram -ve bacteria (72). ArsC is homologous to a yeast exporter of arsenite (73). ChaA is a member of a large family, represented in all 3 domains of life, which mediate Ca²⁺ efflux in exchange for either H⁺ or Na⁺. YjcE is a member of another large group of metal cation/proton exchangers which play a role in cytoplasmic pH regulation and mammalian water fluxes (74). The CPA-2 family, represented by KefB, includes the *E. coli* KefB and KefC proteins which mediate glutathione-gated K⁺ efflux, affording protection against toxic electrophilic metabolites (75). In some bacteria, eg. *E. hirae*, homologous transporters may act as Na⁺/H⁺ antiporters (76). Single representatives of each of 2 transporter families, unclassified on the basis of energetics, are present: the bacterial Mg²⁺/Co²⁺ importer MgtE, functionally characterised in *Bacillus firmus* (77) and the bacterial Hg²⁺ importer, MerT (71). Based on (50). PMF – Proton Motive Force.

Table 2. Metal ion transporters as a proportion of total numbers of transporters in a representative selection of

genomes

Organism	Metal ion
	transporters as %
	of all transporters
	in genome
Escherichia coli	11
Chlamydia trachomatis	13
Bacillus subtilis	14
Pseudomonas aeruginosa	16
Thermotega maritima	16
Rickettsia prowazekii	18
Mycoplasma pneumoniae	18
Mycoplasma genitalium	20
Streptococcus pyogenes	20
Mycobacterium leprae	21
Haemophilus influenza	22
Campylobacter jejuni	23
Vibrio cholerae	23
Mycobacterium tuberculosis	24
Pyrococcus horikoshii	24
Helicobacter pylori	27
Archaeoglobus fulgidus	27
Borrelia burgdorferii	28
Treponema pallidum	29
Neisseria meningitidis AZ2491	31
Synechocystis PCC6803	33
Methanococcus jannaschii	38
Aquifex aeolicus	44
Methanobacterium	47
thermoautotrophicum	

Table 3. Sub-classification of 'P' type ATPases

Table 3. Sub-ci	assilication of P type A i Pases				
Subgroup	Substrate category				
Туре І					
• IA	Bacterial KdpB ATPases (K ⁺ uptake)				
• IB	Heavy metal ATPases				
Type II					
• IIA	SERCA pumps				
• IIB	PMCA pumps				
• IIC	Mammalian Na ⁺ /K ⁺ , H ⁺ /K ⁺				
• IID	Fungal pumps of uncertain function				
Type III					
• IIIA	HA pumps of fungi and plants				
• IIIB	Bacterial Mg ²⁺ pumps				
Type IV	Aminophospholipid transferases				
Type V	Eukaryotic pumps of undefined function				

This classification is based on that of Axelsen (54). SERCA - Sarco(Endo)plasmic Reticulum Calcium ATPase, PMCA - Plasma Membrane Calcium ATPase, HA - Proton ATPase. Cations transported by the heavy metal pumps (type IB) encompass Cd²⁺, Zn²⁺, Cu^{+/2+}, Ag⁺ and Mn²⁺.

(40.7%). The latter 2 groups cluster with known Cd^{2+}/Zn^{2+} transporters. *Between* groups there is only 3.7-16.7% identity within the first 100 amino acids and it is tempting

to speculate that such variation may reflect adaptations to different substrate specificities. One study has shown upregulation of ctpC, together with its upstream ORF, *irp10*, in Fe-depleted growth conditions (0.5 microM) (57), raising intriguing questions about the relationship between these transporters and Fe. No Fe transporting bacterial 'P' type ATPases have so far been described.

The 3 putative type IIA ATPases (ctps F, H and I) resemble one another from the TGE or 'phosphatase site' motif onwards. However, the N-terminal regions of ctpH and ctpI are at least twice as long as corresponding regions in any of the others. This unusual feature has not been described previously in any other 'P' type ATPase. ctpI has a close orthologue in M. leprae (81% amino acid identity in a 1287 amino acid overlap), while the counterpart of ctpH is represented by a pseudogene. Database searches reveal a ctpH orthologue in Streptomyces coelicolor. In contrast to the considerable N-terminal variability between ctps F, H and I, their C-terminal halves all contain conserved residues associated with Ca²⁺ binding. The conserved motifs, XNXGE and QXXWXNXXTD, located in transmembrane segments M5 and M6 respectively, have been linked with Ca2+ binding in eukaryotic type IIA (SERCA) pumps (58, 59). They are also partly conserved in the Mg²⁺ transporting ATPases, MgtA and MgtB, of S. typhimurium. Whether the physiological substrate of these \dot{M} . tuberculosis proteins is Mg^{2+} or Ca^{2+} , awaits experimental elucidation.

ctpE exhibits some features of both the type I and type II ATPases. However, it possesses neither heavy metal signature motifs nor the SERCA associated M5/M6 motifs discussed above. Its closest affiliations appear to be with the type II sequences as reflected by the PEGL motif in the M4 ion channel which is virtually characteristic of type II ATPases (54, 55, 59) and a hydropathy profile consistent with the proposed membrane topology of this subfamily.

6. REGULATION AND SIGNALLING BY Fe AND Mg

M. tuberculosis encodes representatives of 3 families of trans-acting DNA-binding proteins which mediate the effects of Fe on gene regulation; these are FurA/B, IdeR and SirR. Fur (Ferric Uptake Regulator) is the major mediator of gene regulation by Fe in low G+C content bacteria and, when iron-bound, functions as both a repressor and activator of gene expression (60). In M. tuberculosis, FurA is the major repressor of the downstream encoded, catalase-peroxidase, KatG (61). Its role in this context may be compensatory for the absence in M. tuberculosis of OxyR, an important regulator of the oxidative stress response, including KatG expression, in other bacteria (62). It may also regulate other virulence determinants (61). Fur is itself up-regulated by high iron concentrations (70 microM)(63).

IdeR (<u>i</u>ron <u>d</u>ependent <u>regulator</u>) is a member of the DtxR (<u>d</u>iphtheria <u>t</u>oxin <u>regulator</u>) family of iron repressors (64) and the major iron-dependent regulator in Table 4. Comparison of numbers of 'P' type ATPase sequences (total and subclasses) encoded by M. tuberculosis with those in

representative selection of completed prokaryotic genomes

Organism	No. of 'P' type	ATPases		Total	
	Type IA	Type IB	Type II (a,b)		
M. tuberculosis	1	7	4 ¹	12	
Synechococcus spp.	1	4	4	9	
M. thermoautotrophicum	1	3	2	6	
Streptomyces coelicolor	0	4	1	5	
Yersinia pestis	1	3	1	5	
Staphylococcus aureus MRSA 252	2	3	0	5	
M. leprae	0	3	1	4	
B. subtilis	0	3	1	4	
E. coli	1	4	1	4	
Salmonella typhi	1	1	2	4	
H. pylori	0	3	0	3	
Bordetella pertussis	1	2	0	3	
A. aeolicus	0	2	1	3	
A. fulgidus	0	2	0	2	
Neisseria meningitidis A	0	2	0	2	
Campylobacter jejuni	0	2	0	2	
M. genitalium	0	0	1	1	
M. pneumoniae	0	0	1	1	
H. influenza	0	1	0	1	
C. trachomatis	0	1	0	1	
T. pallidum	0	1	0	1	
T. maritima	0	1	0	1	
M. jannaschii	0	0	1	1	
R. prowazekii	0	0	0	0	
B. burgdorferii	0	0	0	0	
P. horikoshii	0	0	0	0	

¹ this includes ctpE (Rv0908) which, while most closely resembling the type II sequences, nevertheless differs sufficiently to merit a subclass of its own (54). The numbers quoted refer to the number of apparently intact open reading frames and do not include pseudogenes.

Gram positive organisms with high G+C content. There are putative IdeR binding sites in the upstream regions of more than 40 genes in M. tuberculosis, including those involved in biosynthesis of siderophores, aromatic amino acids, cell wall structural components and iron storage proteins (30, 65). There is evidence from quantitative reverse transcription PCR (RT-PCR) experiments for the role of IdeR as a repressor of $His\vec{E}$ (involved in histidine biosynthesis), mbtA, mbtB, mbtI (involved in the synthesis of siderophores), bfd (implicated in iron storage) and Rv3402c (an unknown protein with some similarities to enzymes involved in multiple synthetic pathways) (65). It also acts as both an activator and repressor of bfrA, which encodes a bacterioferritin subunit. MbtB. MbtI and Rv3402c were up-regulated on entry into THP1 cells, suggesting that the intracellular environment is iron-limited. Many of the other genes preceded by IdeR boxes do not have an obvious relationship to Fe metabolism. SirR is a representative of yet another family of iron-dependent regulators, first described in Staphylococcus epidermidis (66). To date, its function in M. tuberculosis is unknown.

2D protein electrophoresis has demonstrated the Fe-dependent expression of at least 27 distinct proteins from *M. tuberculosis* grown in high and low Fe conditions

(70 microM and 1 microM, respectively) (63). High Feinduced proteins included Fur, and proteins apparently homologous to an aconitase (another potential transcriptional regulator), EF-Tu (a helper protein involved in protein synthesis), LSR2 (a dominant T cell antigen), Hsp16.3 (an α-crystallin homologue), an NADPHdependent dehydrogenase and a peptidyl-prolyl cis-trans isomerase (PPI). Proteins up-regulated under low iron conditions included PEPCK (homologous to many GTPdependent phosphoenol pyruvate carboxykinases in other species). Fe therefore regulates more than the set of genes involved in its acquisition and storage, pointing to its role as an important signal for the co-ordinated deployment of diverse mechanisms associated with rapid adaptation to changes in environment, including entry into host compartments.

Mg may also have an important signalling function with respect to entry into an intra-phagosomal environment. *M. tuberculosis* encodes a protein, MgtC, which is essential for growth in liquid media under conditions of low Mg²⁺ (<50 microM) and acidic pH (<6.5). Mutants in which MgtC was inactivated, exhibited diminished survival in macrophages and decreased virulence in mice, compared to wild-type controls (67)

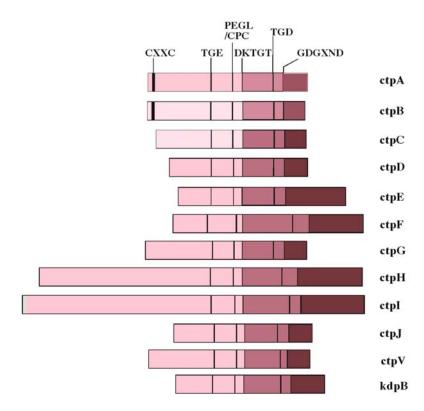


Figure 2. Schematic alignment of the 12 *M. tuberculosis* 'P' type ATPase sequences. The phosphorylation sites have been aligned to facilitate comparison of the sizes of the various domains, which are drawn approximately to scale. The large cytoplasmic loop is in mid-pink, and the domains N- and C-terminal to this are in light and dark pink respectively. The locations of conserved motifs are indicated by vertical lines. CXXC - N-terminal heavy metal binding motif, TGE - phosphatase site, PEGL/CPC - ion channel motif, DKTGT - phosphorylation site, TGD-GDGXND - ATP-binding domain.

suggesting that these are the conditions encountered in the phagosome. MgtC is closely related to an orthologue in S. typhimurium, which is similarly essential for growth at low Mg²⁺ concentrations, intra-phagosomal survival and virulence, and is encoded as part of the pathogenicity island, SPI 3 (68). It is regulated in S. typhimurium, by the 2-component system PhoP/PhoQ, in response to changes in Mg²⁺ concentration. Although a predicted integral membrane protein, MgtC does not appear to be directly involved in Mg²⁺ transport itself (69) and in any case, it seems probable that Mg²⁺ requirements can be adequately furnished by the activity of CorA, a transporter also present in M. tuberculosis. MgtC may be play a part in a more general co-ordinated response to phagocytosis signalled by a change in Mg²⁺ levels. No other Mg²⁺ regulated genes in M. tuberculosis are known at present. There are also no data on the influence of other metals on M. tuberculosis gene expression. We are currently undertaking studies to address these important questions.

7. PERSPECTIVE

The lack of functional studies on the vast majority of potential *M. tuberculosis* metal ion transporters raises more questions than answers but highlights a fertile area for future study. What is clear, is that metal ions are of unquestionable significance both as essential metabolic cofactors and as physiological signals. Studies on bacterial

NRAMP orthologues have raised the prominence of Mn transport as a potentially key process in the interplay between intracellular pathogens and their hosts, although the Mn selectivity of M. tuberculosis MntH has yet to be determined. Genomic analyses indicate that M. tuberculosis encodes a large and diverse repertoire of potential metal transporters. This apparent redundancy in metal transport capability might provide the versatility required for survival in varying host habitats at different stages in the infective process. The extra-cellular and intra-cellular environments of M. tuberculosis pose different physiological challenges. We know relatively little about the cationic composition of the mycobacterial phagosome other than its mildly acidic pH and, indirectly, that it is probably low in Mg²⁺ and Fe²⁺. We know even less about how its metal ion composition changes over time. However, given the highly dynamic character of the phagosomal compartment, it is a plausible supposition that M. tuberculosis may need to deploy different transporters even over the short time frame of phagosomal maturation. The detailed analysis of the temporal pattern of M. tuberculosis transporter gene expression during infection and the interaction between these processes and host encoded metal ion transport will provide important insights into the basic biology of intracellular parasitism and may help to shape novel therapeutic strategies. If the 'streamlined' genome of M. leprae does indeed encode the minimal gene set required for intracellular survival, then

the overlap in transporters encoded by the two organisms may provide a fruitful starting point. A thorough analysis of even this delimited set of 17 transporters is a major challenge. However, new technologies such as DNA microarrays, proteomic analyses and efficient techniques for homologous recombination in *M. tuberculosis* provide the necessary tools to address these questions.

8. ACKNOWLEDGEMENTS

D. Agranoff is a Wellcome Trust Advanced Fellow (Grant reference no: GR063634MA).

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Key Words: *Mycobacterium tuberculosis,* metal ion, transporter, siderophore, NRAMP, manganese, iron, Review

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