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# Malassezia sympodialis Mala s 1 allergen is a potential KELCH protein that cross reacts with human skin

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#### Abstract

Malassezia are the dominant commensal yeast species of the human skin microbiota and are associated with inflammatory skin diseases, such as atopic eczema (AE). The Mala s 1 allergen of Malassezia sympodialis is a  $\beta$ -propeller protein, inducing both IgE and T-cell reactivity in AE patients. We demonstrate by immuno-electron microscopy that Mala s 1 is mainly located in the M. sympodialis yeast cell wall. An anti-Mala s 1 antibody did not inhibit M. sympodialis growth suggesting Mala s 1 may not be an antifungal target. In silico analysis of the predicted Mala s 1 protein sequence identified a motif indicative of a KELCH protein, a subgroup of  $\beta$ -propeller proteins. To test the hypothesis that antibodies against Mala s 1 cross-react with human skin (KELCH) proteins we examined the binding of the anti-Mala s 1 antibody to human skin explants and visualized binding in the epidermal skin layer. Putative human targets recognized by the anti-Mala s 1 antibody were identified by immunoblotting and proteomics. We propose that Mala s 1 is a KELCH-like  $\beta$ -propeller protein with similarity to human skin proteins. Mala s 1 recognition may trigger cross-reactive responses that contribute to skin diseases associated with M. sympodialis.

Keywords: allergen, KELCH, Malassezia sympodialis, Mala s 1, commensal yeast, inflammatory skin disease

## Introduction

Malassezia is an abundant genus of 18 yeast species (Vijaya Chandra et al. 2021) that includes the dominant commensal fungi of the human skin microbiota (Findley et al. 2013), with most prevalent distribution in skin areas of high sebum enrichment (Byrd et al. 2018). Besides being commensal skin colonizing yeasts, *Malassezia* is also linked to different skin diseases such as seborrheic dermatitis and atopic eczema (AE) (Saunders et al. 2012) and bloodstream infections in immunosuppressed individuals (Vijaya Chandra et al. 2021).

AE is a chronic inflammatory skin disease affecting up to 20% of children and 3% of adults (Nutten 2015, Brunner et al. 2017). Genetic and environmental factors leading to impaired skin barrier function have been associated with the pathogenesis of AE (Nutten 2015). Several human proteins have roles in maintaining skin barrier function, for example filaggrin and filaggrin-2 are important proteins in barrier formation and skin moisturization (Wu et al. 2009), while epiplakin and desmoplakin are essential in epidermal integrity and wound healing (Vasioukhin et al. 2001, Ishikawa et al. 2010). Skin barrier impairment results in increased contact with different microbes, such as the commensal yeast Malassezia, perpetuating skin damage, as well as inducing local and systemic inflammatory reactions (Nutten 2015). Ten IgE-binding proteins (Mala s 1 and Mala s 5-13) have been characterized in M. sympodialis (Gioti et al. 2013), one of the most frequent species colonizing the skin of both healthy individuals and AE patients in Europe (Falk et al. 2005, Jagielski et al. 2014). These proteins act as allergens, inducing both IgE and T-cell reactivity in more than 50% of patients with AE (Scheynius et al. 2002, Vilhelmsson et al. 2007a, Balaji et al. 2011).

One hypothesis linking M. sympodialis to the pathogenesis of AE is cross-reactivity generated by Malassezia allergens, which are highly homologous to human proteins. Cross-reactivity between M. sympodialis allergens and human proteins has been documented for Mala s 11 and Mala s 13 (Schmid-Grendelmeier et al. 2005, Vilhelmsson et al. 2007a, Balaji et al. 2011). Mala s 11 is predicted to be a manganese superoxide dismutase (MnSOD) (Vilhelmsson et al. 2007a, Gioti et al. 2013). Up to 36% of AE individuals have high levels of specific IgE against human MnSOD and positive skin tests against this allergen (Schmid-Grendelmeier et al. 2005). Human and fungal MnSOD induce proliferation of human peripheral blood mononuclear cells (PBMCs) from sensitised AE patients (Schmid-Grendelmeier et al. 2005). In addition, CD4<sup>+</sup> T-cells from AE individuals, specifically sensitised to the M. sympodialis Mala s 13 allergen, were reactive to human thioredoxin (Balaji et al. 2011). The high similarity with the corresponding mammalian homologs suggests that autoreactive T cells could contribute to tissue inflammation in AE.

Mala s 1 is a 37 kDa protein predicted to be secreted and, to date, has not been shown to have sequence homology to any specific human protein (Zargari et al. 1997, Gioti et al. 2013). The crystal structure of Mala s 1 revealed it to be a  $\beta$ -propeller protein that binds lipids such as phosphatidylinositols (Vilhelmsson et al. 2007b). Mala s 1 is similar to Tri14, a mycotoxin synthesis

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protein involved in virulence and plant invasion in *Gibberella zeae* (anamorph *Fusarium graminearum*) (Vilhelmsson et al. 2007b). Mala s 1 is mainly localized in the *M. sympodialis* cell wall and in the budding area, as visualized by confocal laser scanning microscopy (Zargari et al. 1997). Therefore, Mala s 1 may be important for the replication of *Malassezia* and, thus, a potential therapeutic target.

Malassezia sympodialis cells can communicate with host cells, such as PBMCs and keratinocytes, through the release of extracellular nanosized vesicles, designated MalaEx (Gehrmann et al. 2011, Johansson et al. 2018, Vallhov et al. 2020). MalaEx are enriched in Mala s 1 compared with the allergens produced by whole *M. sympodialis* cells (Johansson et al. 2018). MalaEx induce a different inflammatory cytokine response in PBMCs from patients with AE sensitized to *M. sympodialis* compared to healthy controls (Gehrmann et al. 2011), supporting the link between AE and *M. sympodialis*. Recently, the presence of small RNAs in MalaEx was identified, suggesting that they have the potential to deliver functional mRNAs and microRNA-like RNAs to recipient host cells, thereby interfering with the host RNAi machinery to silence host immune genes and cause infection (Rayner et al. 2017).

Another potential mechanism of communication with host cells is related to the  $\beta$ -propeller protein structure of Mala s 1 (Vilhelmsson 2007b).  $\beta$ -propeller proteins contain different motifs allowing their classification into groups or families (Kopec and Lupas 2013). One of these  $\beta$ -propeller families contains a KELCH motif (Kopec and Lupas 2013). The KELCH motif is commonly found in bacterial and eukaryotic proteins with diverse enzymatic functions, and is composed of 50 amino acids, which fold into four stranded beta sheets (Interpro: IPR015915). The interest in KELCH proteins has increased in recent years as these  $\beta$ -propeller protein are involved in multiple cellular functions and protein-protein interactions with a wide cellular distribution in intracellular compartments, cell surface, and extracellular milieu (Adams et al. 2000).

In this study, the aims were to characterize Mala s 1 to (a) examine its precise cellular localization in *M. sympodialis* using high pressure freezing (HPF) transmission electron microscopy (TEM), (b) investigate its potential as a drug target by examining if an anti-Mala s 1 antibody interferes with *M. sympodialis* growth, and (c) evaluate potential cross-reactivity between Mala s 1 and human skin proteins, including KELCH proteins, using an anti-Mala s 1 antibody in a human skin explant model.

## **Materials and methods**

# Malassezia sympodialis and Candida albicans culture conditions

Malassezia sympodialis (ATCC 42132) was used for all experiments. Malassezia sympodialis was grown fresh from  $-70^{\circ}$ C glycerol stocks for each experiment by plating on Dixon agar containing 3.6% w/v malt extract, 2% w/v desiccated ox-bile, 0.6% w/v bacto tryptone, 0.2% v/v oleic acid, 1% v/v Tween 40, 0.2% v/v glycerol, 2% w/v bacto agar (mDixon) at 35°C for 4–5 days. For culture in mDixon broth (bacto agar omitted), one colony was selected from an agar plate, inoculated into 10 ml of the mDixon culture medium and incubated at 37°C for 3 days in a shaking incubator at 200 rpm. The culture was centrifuged at 200 x g, supernatant discarded, cell pellet washed twice with phosphate buffered saline solution (PBS) and resuspended in 1 ml PBS.

Candida albicans (ATCC 90028) was grown fresh from  $-70^{\circ}$ C glycerol stocks and cultured in YPD (1% w/v yeast extract, 2% w/v my-

cological peptone, 2% w/v glucose) broth overnight at 30°C, shaken at 200 rpm.

### Sample processing and HPF TEM imaging

Malassezia sympodialis yeasts were cultured as described above on mDixon agar plates, scraped off using a loop, and suspended in a minimal amount of distilled water to form a paste. Approximately  $2 \mu$ l of each sample was processed by HPF using a Leica EM PACT 2 (Leica, Milton Keynes, UK). After HPF, samples were transferred to a Leica AFS 2 embedding system for freeze substitution in a solution with 2% OsO4 in 100% acetone for 40 min. Samples were then placed in 10% Spurr resin:acetone (TAAB Laboratories, Berks, UK) for 72 h followed by 30% Spurr resin overnight, 8 h of 50% Spurr resin, 12 h of 70% Spurr resin, 90% Spurr resin for 8 h, and finally embedded in 100% Spurr resin at 60°C for at least 24 h. Sections (90 µm) were cut with a diamond knife onto nickel grids using a Leica UC6 ultramicrotome. Sections were contrast stained with UranyLess EM stain (TABB Group, New York, US) and lead citrate in a Leica AC20 automatic contrasting instrument. Samples were imaged using a JEM 1400 plus transmission electron microscope with AMT ultraVUE camera (JEOL, Welwyn Garden City, UK). These experiments were performed on three biological replicates.

#### Gold immunolabelling

Gold immunolabelling was carried out before the contrast staining step described above. Samples on nickel grids were incubated in blocking buffer (1% w/v bovine serum albumin (BSA) and 0.5% w/v Tween 80 in PBS) for 20 min. Samples were then incubated three times for 5 min in an incubation buffer (0.1% w/v BSA in PBS), then incubated in 5 µg/ml primary antibody in incubation buffer (anti-Mala s 1 mouse monoclonal IgG1 antibody (9G9) from Karolinska Institute (Zagari et al. 1994, Schmidt et al. 1997) or mouse monoclonal IgG1 antibody (Agilent Dako X093101-2; Santa Clara, USA) as an isotype control for 90 min. Samples were washed in incubation buffer six times for five min. The secondary donkeyanti-mouse IgG (H&L), Aurion 10 nm gold antibody (810.322; Aurion CliniSciences, Nanterre, France) was added to samples for 60 min (1:40 dilution). Samples were washed six times for 5 min in incubation buffer. Samples were then washed three times in PBS for 5 min. Finally, samples were washed in double deionized, filtered water: three times for 5 min. After these steps, contrast staining was performed as described above.

#### Malassezia Sympodialis growth curves and determination of minimal inhibitory concentrations (MICs) in broth microdilution testing

The growth curve and determination of MICs for voriconazole (Pfizer, Surrey, UK), amphotericin B deoxycholate (AmBD, Merck UK Ltd, Dorset UK), anti-Mala s 1 mouse monoclonal  $IgG_1$  antibody or mouse monoclonal  $IgG_1$  antibody isotype control was done by broth microdilution in a 96-well flat-bottomed plate (Fisher Scientific, Leicestershire, UK). The protocol published by the European Committee on Antimicrobial Susceptibility Testing (EUCAST), definite document E.DEF 7.3.1 (Arendrup et al. 2017) was followed with some modifications. Modifications consisted of using mDixon broth instead of RPMI 1640 and incubation times appropriate for *M. sympodialis* (3 days). Yeasts were grown on agar and in broth as described above. Inoculum was prepared to obtain an absorbance between 0.05 and 0.1 at 600 nm. Working inocula were obtained by diluting the inoculum 1:10 in mDixon broth and 100  $\mu$ l of inoculum was added to all wells except for negative con-

trols. Dilutions of each treatment (AmBD, voriconazole, anti-Mala s 1, and IgG<sub>1</sub> control) in mDixon broth was added to corresponding wells to give a final volume of 200 µl and concentration of 0.03 to 16 µg/ml. Samples were assayed in triplicate, with a positive control (no drug) and a negative control (medium only) added. Growth was monitored every 6 h over 36 h by measuring optical densities at 530 nm using a microplate reader (VersaMax<sup>TM</sup> with Softmax Pro 7 software. Molecular Devices LLC, UK) incubating at 37°C. MICs were also determined by optical density measurements using the same microplate reader at 36 and 96 h of incubation and defined as inhibition of 50% growth for voriconazole or anti-Mala s 1 antibody and 100% growth inhibition for AmBD. These experiments were performed on three biological replicates.

#### Skin samples and culture conditions

Human skin tissue without an adipose layer from abdominal or breast surgeries was purchased from Tissue Solutions® (Glasgow, UK). Ethical approval is the responsibility of the company who quote 'Human tissue provided by this company is obtained according to the legal and ethical requirements of the country of collection, with ethical approval and anonymous consent from the donor or nearest relative. Tissue Solutions® also comply with the United Kingdom Human Tissue Authority (HTA) on the importation of tissues.'

Skin explants from six different healthy donors, obtained under surgical aseptic conditions, were used to set up a skin model as previously described (Corzo-Leon et al. 2021). In brief, the 1 cm<sup>2</sup> explants were inoculated by applying  $1 \times 10^6$  yeast cells in 10 µl directly onto the epidermis. Skin samples with medium only were included as controls in all experiments. Skin samples were recovered after 6 days (1 sample), 7 days (3 samples), 8 days (1 sample), and 14 days (1 sample). Tissue samples for histology were placed into moulds, embedded in OCT Embedding Matrix (Cellpath Ltd, Newtown, UK) and flash-frozen with dry ice and isopentane. These were stored at  $-70^{\circ}$ C until use. Tissue samples for RNA-protein extraction were cut into small pieces (<5 mm) and placed in a microcentrifuge tube containing RNAlater® solution (Merck Ltd, Dorset, UK) and stored at  $-70^{\circ}$ C until further use.

# Immunofluorescent staining of skin tissue samples

For histological examination of human explant skin samples (see above), 6  $\mu$ m skin tissue sections, cut from frozen OCT blocks using a cryostat, were placed on poly-L-lysine-coated slides and fixed with 4% methanol-free paraformaldehyde in PBS for 20 min before further staining. After fixation, skin sections slides were washed in ice cold PBS in a Coplin jar. Samples were then permeabilised using 0.2% Triton X-100 for 10 min and washed three times with PBS at room temperature. Slides were incubated in blocking buffer (1% BSA, 0.1% glycine, 0.1% Tween 20 in PBS) for 1 h at room temperature.

Primary antibodies were prepared as described for gold immunolabelling in 1% BSA in PBST (0.1% Tween 20 in PBS). Slides containing 4 sections per slide and 8 sections per sample were incubated with primary antibodies at 4 °C overnight and then washed three times with PBS before incubating them with goat anti-mouse IgG (H&L) secondary antibody (Alexa Fluor® 488 in 1% BSA PBST, 1:300; Abcam #ab150113) for 1 h at room temperature in the dark. Samples were then washed three times in PBS. Slides were incubated in 20  $\mu$ g/ml calcofluor white (Sigma, UK) and 1  $\mu$ g/ml propidium iodide (HPLC grade; Sigma, UK) for 30 min in a Coplin jar and washed three times with PBS. Slides were left in the dark to air dry. Mounting medium (Vectashield® without DAPI, Vector laboratories Ltd, UK) was added, then a coverslip was added and sealed. Slides were imaged using a Spinning Disk confocal microscope (Zeiss, UK).

## RNA and protein extraction

Skin samples in RNAlater® solution were recovered from storage (see above). RNAlater® solution was discarded and the tissue was washed with sterile water. RNA and protein extractions were performed from the same samples in a single two-day process based on previous publications (Corzo-Leon *et al.* 2019). For *M. sympodialis* yeasts, mDixon broth cultures were harvested by centrifugation, the pellet recovered and resuspended in Trizol for RNA and protein extraction, similar to skin samples. Protein pellets were stored at  $-20^{\circ}$ C in 100 µl re-solubilisation buffer (1% w/v DTT, 2 M thiourea, 7 M urea, 4% w/v CHAPS detergent, 2% v/v carrier ampholytes, 10 mM Pefabloc® SC serine proteinase inhibitor (Thermo-Fisher Scientific, UK)), with protein concentration determined by Coomassie G-250 Bradford protein assay kit following manufacturer's instructions (Sigma, UK).

## Western immunoblotting and proteomics

#### SDS-PAGE gel electrophoresis

After protein quantification, 10  $\mu$ g protein was used for gel electrophoresis and Western Blot. Non-reducing denaturing conditions were used for SDS-PAGE gel electrophoresis. NuPAGE LDS Sample Buffer 4X (Thermo-Fisher Scientific, UK) was added at a 1:3 ratio to protein sample up to a final volume of 10  $\mu$ l and incubated at 70°C for 10 min. Samples were loaded onto a NuPage 4%–12% Bis-Tris gel along with a combination of SeeBlue:Magic Marker (Thermo-Fisher Scientific, UK) 4:1 ratio (final volume 5  $\mu$ l) and the combination loaded into the first gel lane. The gel was covered in 1X running buffer (Novex NuPAGE MES SDS buffer, Thermo-Fisher Scientific, UK) within an electrophoresis chamber, 500  $\mu$ l of antioxidant (Invitrogen NuPAGE<sup>TM</sup> Antioxidant; Thermo-Fisher Scientific, UK) was added to the running buffer covering the surface of the gel. Electrophoresis was carried out for 40–55 min at 150 V.

#### Protein membrane transfer

Proteins were transferred to a PVDF membrane (Thermo-Fisher Scientific, UK) using ice cold 1X transfer buffer (NuPAGE transfer buffer, 10% methanol in deionized water). The PVDF membrane was activated prior to transfer in 100% methanol for 1–2 min, distilled water and transfer buffer. Transfer was carried out at 25 V for 2 h 15 min. The chamber was kept on ice during the transfer process.

#### Western blots

PVDF membrane were retrieved after transfer and washed once with distilled water. The membrane was blocked at room temperature for 1 h in blocking buffer (5% skim milk in 0.1% PBS-Tween 20). The membrane was incubated overnight with the primary antibody (1:1000 in 5% BSA in 0.1% PBS-Tween 20) at 4°C in 50 ml plastic tubes on a tube roller. The membrane was washed five times for 5 min with 0.1% PBS-Tween 20 before being incubated for 1 h at room temperature with goat ant-imouse IgG H&L secondary antibody (1:2000 in 5% skim milk in 0.1% PBS-Tween 20). Finally, membranes were washed five times for 5 min with 0.1% PBS-Tween 20 before being treated with SuperSignal<sup>™</sup> West Femto (Thermo-Fisher Scientific, UK). The chemiluminescent signal was captured with the Peqlab camera (VWR, UK) and analysed using Fusion molecular imaging software v 15.5 (Fisher Scientific, UK).

#### Proteomics and bioinformatics analysis

Western blots (as described above) of *M. sympodialis* proteins and proteins from human skin were performed to determine crossreactivity of the Mala s 1 antibody. The gel was stained with Coomassie Brilliant Blue (CBB) G250 (Thermo-Fisher Scientific, UK) and bands cut out for automated in-gel digestion and identification by liquid chromatography with tandem mass spectrometry (LC-MS/MS) using a Q Exactive Plus (Thermo Fisher Scientific, UK) at the University of Aberdeen proteomics facility.

Gel-band proteins identified by mass-spectrometry were analysed by applying several filters. The first filter applied selected proteins by the expected protein size, based on the predicted kDa of the band detected by the anti-Mala s 1 antibody on the western blot. Then, only proteins with two or more identified peptides and two or more peptide-spectrum matches (PSM) were selected. Finally, proteins were selected by cellular localization using the Uniprot database (https://www.uniprot.org/).

# DNA extraction, ITS PCR and pGEM-T vector cloning

Genomic DNA was extracted (Hoffman & Winston, 1987) from control skin explants (Corzo-Leon *et al.* 2021) or *M. sympodialis*inoculated skin explants stored in OCT Embedding Matrix. As a positive control, DNA was extracted from *Candida albicans* (ATCC 90028) pure culture grown in YPD broth (1% w/v yeast extract, 2% w/v peptone, 2% w/v glucose). Distilled water was included as a negative control.

To identify any fungi in the skin samples, the ITS1 primer pair (ITS1F (5'CTTGGTCATTTAGAGGAAGTAA 3'), ITS1R (5'GCTGCGTTCTTCATCGATGC 3' (Irinyi *et al.* 2015, )) were used. The ITS1 region was amplified using 2X KAPA HiFi Hotstart ReadyMix following manufacturer's recommendations (Roche, UK), with 0.4  $\mu$ M primers, and 50 ng template DNA. PCR settings were: one cycle of initial denaturation at 95°C for 3 min, 30 cycles of denaturation at 98°C for 20 s, annealing at 52°C for 15 s, extension at 72°C for 30 s and one cycle of final extension 72°C for 1 min. PCR products were analysed on a 1% agarose TAE gel.

PCR products were purified with PEG/NaCl purification buffer for 60 min at room temperature followed by centrifugation for 1 h at 2 200 x g at 4°C. The supernatant was removed and DNA precipitated in 70% ethanol, and the DNA pellets were recovered with centrifugation at 2 200 x g for 10 min at  $4^{\circ}$ C and resuspended in sterile water. A-tailing of purified PCR products was performed using GoTaq polymerase (Promega, UK) according to the manufacturer's instructions. The A-tailed PCR products were ligated into Promega pGEM-T vector following the manufacturer's instructions. Plasmid extraction was carried out with Qiagen QIApep® spin miniprep kit following the manufacturer's instructions (QI-AGEN Ltd, UK). Inserts were confirmed by EcoRI restriction digestion and gel electrophoresis. The recovered plasmids sequenced by DNA Sequencing & Services (MRC I PPU, School of Life Sciences, University of Dundee, Scotland). Sequences were analysed using SeqMan Pro (DNASTAR, Madison, W,I US), and species identified by BLAST (https://blast.ncbi.nlm.nih.gov/).

#### In silico sequence analysis of mala s 1

The Mala s 1 protein sequence (ID M5E589) was downloaded from Uniprot (www.uniprot.org/). Presence of a KELCH domain in the Mala s 1 protein sequence was investigated using a previously published consensus KELCH domain sequence (Adams et al. 2000, Prag and Adams 2003). The potential epitope bound by the anti-Mala s 1 antibody was manually identified in the Mala s 1 protein sequence based on previous publications (Schmidt et al. 1997, Gioti et al. 2013).

## Results

#### Mala s 1 is present in the cell wall of M. Sympodialis

Malassezia sympodialis yeast cells were processed by HPF and freeze substitution to localize Mala s 1 by TEM and immunohistochemistry. Gold immunolabelling of yeast cells incubated with the anti-Mala s 1 antibody showed that Mala s 1 was found mainly in the cell wall and in the budding area (Fig. 1). Gold particles bound to the Mala s 1 allergen were grouped in pairs, triplets, and quadruplets and binding was not specific to a particular region of the cell wall. Some gold labelling was also detected inside the yeast cells but mainly close to the cell wall rather than in the centre of the cell. No gold particles were observed either intracellularly or bound to the cell walls when yeast cells were incubated with the gold-conjugated secondary antibody only or the control  $IgG_1$  antibody (Supplementary Fig. 1).

## Mala s 1 is not an antifungal target

We then assessed whether co-culture of M. sympodialis cells with the anti-Mala s 1 antibody could interfere with yeast growth using a modified EUCAST broth microdilution antifungal susceptibility assay (Arendrup et al. 2017). Amphotericin B deoxycholate (AmBD) and voriconazole were used as positive antifungal controls and a nonspecific IgG1 antibody used as a negative control, with concentrations ranging from 0.03 to 16  $\mu$ g/ml. During the first 36 h of incubation, anti-Mala s 1 antibody-treated yeasts grew slower than untreated yeasts (Fig. 2a), however, this same pattern was observed for yeasts treated with the IgG<sub>1</sub> control, as well as voriconazole and AmBD (Fig. 2b-d). After 36 h, all concentrations of voriconazole and AmBD inhibited growth by at least 50% (Fig 2e). After 96 h, only voriconazole had more than 80% inhibitory activity at all concentrations tested (Fig. 2f). After 96 h, samples were cultured on mDixon agar without drug to identify the minimal effective, or minimum fungicidal concentration (See Supplementaryl Fig. 2). Only voriconazole was fungicidal for M. sympodialis at all concentrations tested (from 0.01 µg/ml up to 8 μg/ml) (Supplementary Fig. 2).

# Anti-mala s 1 antibody cross-reacts with proteins in human non-inoculated skin

Next, we investigated if the anti-Malas s 1 antibody recognized human skin proteins present in skin explants as indirect evidence of potential cross-reactivity between Mala s 1 and human skin proteins. Non-inoculated tissue from six different healthy skin donors was analysed by immunofluorescence microscopy using the anti-Mala s 1 antibody. For all donors, samples stained with the anti-Mala s 1 antibody showed detectable fluorescent signal when compared to controls (only secondary antibody or IgG<sub>1</sub> isotype control) (Fig. 3). The anti-Mala s 1 antibody stained the epidermis (as shown by co-localization with propidium iodide-stained epidermal cells) with stronger signals in the basal layers, intercellular junctions, as well as keratinocyte cytoplasm and nucleus (Supplementary Fig. 3). There was some variation in staining between different donors (Supplementary Fig. 3). Calcofluor white staining was used to indicate the presence of fungal structures



**Figure 1.** Localization of Mala s 1 on M. sympodialis yeast cells. TEM images of M. sympodialis yeast cells cultured on mDixon agar for 4–5 days stained by gold immunolabelling with the anti-Mala s 1 antibody and a secondary gold conjugated antibody. Red circles indicate colloidal gold particles often grouped in pairs, triplets and quadruplets. (**A**, **B**) The same yeast cell at different magnification showing Mala s 1 at the budding site. (**C**, **D**) Two yeast cells at different magnification showing Mala s 1 in the cell wall. (**E**, **F**) A yeast cell showing Mala s 1 close to the cell wall at three different magnifications. Scale bars in images: (A, C, and E) = 500 nm, (B, D, and F) = 100 nm, and insert in (f) = 50 nm. Images are representative of duplicate experiments.



**Figure 2.** Antifungal activity of the anti-Mala s 1 antibody, AmBD, or voriconazole against *M. sympodial*is yeasts. **(A–D)** 36 h growth curves presenting average ODs measured every 6 h at 530 nm. *M. sympodial*is was co-cultured with **(A)** anti-Mala s 1 antibody, **(B)** voriconazole, **(C)** IgG control, and **(D)** AmBD. Growth curves represent the mean of three biological replicates, with each colour representing a different drug concentration, ranging from 16 to 0.03 µg/ml or untreated yeasts. Growth was plotted after 36 h **(E)** and 96 h **(F)** as percentage of growth when compared to no drug control. Plotted colour lines correspond to the mean of three biological replicates, error bars correspond to SD and different colours correspond to different drugs or no drug control.

on the skin. No chitin was detected, indicating that no fungi were present on the skin explants (Fig. 3).

These non-inoculated skin samples were checked for the presence of *Malassezia* DNA to rule out prior colonization of the skin samples by Malassezia species or contamination of the skin during experiments. The ITS1 region was amplified and sequenced from DNA extracted from the six non-inoculated skin samples and compared with control skin samples previously inoculated with



**Figure 3.** Anti-Mala s 1 antibody reacts with human proteins in non-inoculated skin. Sections were imaged with **(A)** Rh-TRITC channel (543 nm/569 nm, propidium iodide staining), **(B)** FITC channel (495 nm/519 nm, stained with secondary antibody labelled with Alexa 488), **(C)** DAPI channel (358 nm/461 nm, calcofluor staining), **(D)** images captured with differential interference contrast (DIC), **(E)** merge of all channels. A total of 6  $\mu$ m thin tissue sections were cut from frozen OCT skin sample blocks. Samples were stained with the Mala s 1 antibody and compared to controls using only the secondary antibody labelled with Alexa 488, and a mouse IgG<sub>1</sub> control. Images are representative of skin samples from six different donors. A white line separates the epidermis (top) from the dermis (bottom). The scale bar is 100  $\mu$ m.

*M.* sympodialis and *C.* albicans. Four out of the six non-inoculated skin samples amplified ITS1 PCR products, but no *M.* sympodialis sequences were identified in any of the six non-inoculated samples (Supplementary Fig. 4). One skin sample (4–17) contained a sequence of *Malassezia globosa* (Supplementary Fig. 4). Sequence analysis identified *C.* albicans and *M.* sympodialis from inoculated skin samples, as expected.

Proteins were then extracted from non-inoculated human skin from three randomly selected donors to detect potential anti-Mala s 1 antibody targets in skin. The donors selected for the proteomics analysis were those in lane 2, lane 5 ,and lane 6 (Supplementary Fig. 4b). Proteins were also extracted from M. sympodialis yeast cells grown on mDixon agar and in mDixon broth as Mala s 1 protein controls. Expression of the Mala s 1 protein was evaluated by immunoblotting. The anti-Mala s 1 antibody correctly identified a 37 kDa protein corresponding to the size of the Mala s 1 protein in M. sympodialis yeast cells grown on mDixon agar (Fig. 4a) and in mDixon broth (data not shown). The anti-Mala s 1 antibody also identified a protein  $\geq$ 200 kDa in protein extracts from non-inoculated skin samples (Fig. 4b). These gel bands were recovered and processed by automated ingel trypsin digestion and the peptides separated and identified by LC-MS/MS. To identify the potential protein(s) recognized by the Mala s 1 antibody, proteins identified by proteomics (n = 180) were filtered, initially by selecting proteins of expected size ( $\geq$ 200 kDa = 17 proteins found, then proteins where the number of peptides was  $\geq 2$  and peptide spectrum matches (PSM) was  $\geq 2$ (n = 12). Next, proteins were filtered according to their cellular localization and protein structure (n = 6). MalaEx can also contain Mala s 1 and can be taken up by human keratinocytes and monocytes where MalaEx are mainly found in close proximity to the nuclei (Johansson et al. 2018). Therefore, proteins localizing to the cell nucleus were also included. Considering the antibody binding

pattern observed in skin samples (Fig. 3), an extra filter was applied for proteins expressed in all epidermal layers and in nuclei, cytoskeleton, and cytoplasm. After applying all filters, two proteins remained as potential targets: epiplakin and desmoplakin (Fig. 4c).

#### Mala s 1 is a potential KELCH protein

Mala s 1 is a  $\beta$ -propeller protein (Vilhelmsson et al. 2007b) containing 4-8 symmetrical beta sheets. We show here that the anti-Mala s 1 antibody-stained human skin sections and previous data indicated that MalaEx vesicles were taken up intracellularly in keratinocytes and monocytes (Johansson et al. 2018). This led us to test the hypothesis that Mala s 1 might be a  $\beta$ -propeller protein with a KELCH motif and hence act as an allergen due to molecular mimicry with human skin proteins. The 350 aa Mala s 1 protein sequence (Uniport ID M5E589) was analysed manually for KELCH motifs using the previously published motif consensus (Adams et al. 2000, Prag and Adams 2003). A 64 aa sequence was identified as having the consensus for a KELCH motif (Fig. 5). The anti-Mala s 1 antibody is known to recognize the peptide epitope (SFNFADQSS) (Schmidt et al. 1997) which lies out with the predicted KELCH motif of Mala s 1, but no sequences resembling the antibody target peptide were detected in the two potential human target proteins, epiplakin and desmoplakin. The antibody target epitope sequence was only found in the Mala s 1 protein sequence (Fig. 5).

## Discussion

Immunostaining with TEM confirmed that Mala s 1 is localized in the *M. sympodialis* cell wall. Binding of the anti-Mala s 1 specific antibody to its cell wall target did not inhibit growth of the fungus suggesting that Mala s 1 is not an antifungal therapeutic target. The anti-Mala s 1 antibody recognized and bound to unknown targets in full thickness human skin explants. This cross-reactivity



**Figure 4.** Mala s 1 expression in *M. sympodialis* yeast cells and in human skin. Image **(A)** Protein detected by the anti-Mala s 1 antibody in three different *M. sympodialis* cultures on mDixon agar for 4–5 days and **(B)** in human non-inoculated skin samples from three different donors). Immunoblotting was carried out under denaturing, non-reducing conditions using the anti-Mala s 1 primary antibody. In **(A)** black continuous-line squares surround the Mala s 1 expected size (37 kDa) and in part **(B)** black dotted-line squares surround high molecular protein bands recognized by the Mala s 1 antibody. **(C)** shows potential human proteins recognized by the anti-Mala s 1 antibody after protein sequencing and filtering.

IM5E589\_MALS4 Allergen OS=Malassezia sympodialis (strain ATCC 42132) OX=1230383 GN=Mala s 1 MRYSTVLAALALLGTSAVSVLAALPDQIDVKVKNLTPEDTIYDRTRQVFYQSNLYKGRIEVYNPKTQSH FNVVIDGASSNGDGEQQMSGLSLLTHDNSKRLFAVMKNAKSFNFADQSSHGASSFHSFNLPLSENS KPVWSVNFEKVQDEFEKKAGKRPFGVVQSAQDRDGNSYVAFALGMPAIARVSADGKTVSTFAWES GNGGQRPGYSGITFDPHSNKLIAFGGPRALTAFDVSKPYAWPEPVKINGDFGTLSGTEKIVTVPVGN ESVLVGARAPYAISFRSWDNWKSANIKKTKRSELQNSGFTAVADYYQGSEQGLYAVSAFFDNGAHG GRSDPPLYKLDNSILNF

**Figure 5.** Mala s 1 is a potential KELCH protein. Mala s 1 sequences obtained from Uniprot (M5E589). *In silico* analysis of Mala s 1 identified a KELCH motif (highlighted in bold). Mala s 1 has a  $\beta$ -propeller structure (Vilhelmsson et al. 2007b), and three hydrophobic amino acids (brown) are found before a double GG (red font), and six aa residues are located between Y (red font) and W (red font). The blue font indicates the peptide sequence reported as the epitope of anti-Mala s 1 antibody (Schmidt et al. 1997).

could be due to anti-Mala s 1 antibody recognising human proteins with similar tertiary structures or epitopes to Mala s 1 despite Mala s 1 not having a clear human homologue. Proteomic analysis of anti-Mala s 1 antibody-reactive proteins isolated from western blotting revealed a number of candidate human targets, but none contained the specific peptide epitope recognized by the antibody on Mala s 1. Bioinformatics analysis predicted that Mala s 1 contains a KELCH domain, a common motif for protein-protein interactions. This poses the question whether the Mala s 1 KELCH domain is responsible for cross-reactivity between anti-*Malassezia* antibodies and human skin proteins.

Taking advantage of an anti-Mala s 1 specific mouse monoclonal antibody (Zagari et al. 1994, Schmidt et al. 1997), we demonstrated by TEM immuno-gold labelling that Mala s 1 is mainly localized to the cell wall of *M. sympodialis* yeast cells, in agreement with Zargari et al. (1997). The immuno-gold labelling was found in a disperse pattern around the cell periphery of the mother cell wall, but also in the budding area and inside yeast cells (Fig. 1). As immuno-gold labelled Mala s 1 particles appeared to be enriched at the plasma membrane/cell wall interface, we cannot rule out that we are also visualizing the MalaEx vesicles (Gehrmann et al. 2011), which are enriched in Mala s 1 (Johansson et al. 2018).

Although the anti-Mala s 1 antibody recognized and bound the M. sympodialis yeast cell wall, drug susceptibility testing did not show an antifungal effect against M. sympodialis (Fig. 2). This suggested that Mala s 1 is not essential for replication nor as a cell wall component; hence, Mala s 1 is not a potential target for antifungal therapy. AmBD was also ineffective in the drug susceptibility testing performed in this study, whereas voriconazole was fungicidal at low drug concentrations. Previous studies have documented higher susceptibility of Malassezia species to triazoles, specifically triazoles with anti-mould activity (Miranda et al. 2007, Carrillo-Muñoz et al. 2013, Rojas et al. 2014, Leong et al. 2017). Contrary to this study, AmBD has been reported to achieve 100% growth inhibition at high MICs (ranging from 0.5 to 4 µg/ml) for cutaneous clinical isolates (Rojas et al. 2014, 2017, Leong et al. 2017) and MICs  $\geq$  8 µg/ml to AmBD were documented for bloodrecovered Malassezia furfur (Iatta et al. 2014). These differences could be explained by the type of medium used for antifungal susceptibility testing, mDixon vs supplemented RMPI 1640 or the fungal isolates used in this study. In the future the anti-Mala s 1 antibody used in combination with antifungal drugs could be tested for synergy of the antibody with other antifungal therapies. Potential beneficial immunomodulatory effects and effector functions of the anti-Mala s 1 antibody could also be tested in assays with immune cells or in other ex vivo human-pathogen interaction models.

Since we found that the anti-Mala s 1 antibody did recognize human proteins present in non-inoculated human skin explants, we used a combination of bioinformatics and proteomics to investigate potential human skin orthologous proteins that may contribute to the host's inflammatory responses to this allergen. Although several candidate proteins were identified, such as epiplakin and desmoplakin (Fig. 4), we cannot definitively pinpoint that the anti-Mala s 1 antibody cross reacts with a single human skin protein. Bioinformatics analysis revealed for the first time that Mala s 1 allergen is a potential KELCH protein. Proteins with KELCH motifs have wide-ranging functions including cellular communication, with examples that contribute to microbial pathogenicity and skin function relevant to this study. Two important examples of these KELCH proteins are the human intracellular NS1-binding protein (NS1-BP) targeted by NS1 protein of Influenza A virus during infection (Wolff et al. 1998) and the KELCH K13-propeller protein in Plasmodium falciparum where SNPs are associated with artemisinin resistance, which limits the eradication of malaria in areas where these mutations are highly prevalent, for example, Southeast Asia and China (Ménard et al. 2016). Another example of a KELCH protein complex that functions specifically in the skin is the nuclear factor erythroid-2-related factor 2/KELCH-like ECH-associated protein 1 (Nfr2/KEAP1) complex (Helou et al. 2019). In this complex, Nfr2 initiates the transcription of antioxidant enzymes, limits both the levels of reactive oxygen species (ROS) and inflammatory responses, such as inflammasomes, while KEAP1 suppresses these functions (Helou et al. 2019). Dysregulation of the Nfr2/KEAP1 system has been associated with skin damage and psoriatic plaque formation in a psoriasis-mouse model (Ogawa et al. 2020). Considering the multiple functions of KELCH proteins in the skin and their roles in the pathogenesis of human infections, the study of Mala s 1 allergen and determining its role during interaction with skin is highly relevant.

In the current study, two potential human target proteins that cross-react with Mala s 1 antibody were identified: epiplakin and desmoplakin (Fig. 4). The distribution of these two proteins in the epidermis was compared to the observed binding pattern of anti-Mala s 1 antibody to human skin. Desmoplakin (260 kDa) is closer to the size of the immunoblot band than epiplakin (460 kDa). Desmoplakin has a Src homology 3 (SH3) domain containing 6  $\beta$ strands in 2 anti-parallel  $\beta$ -sheets that is key in substrate recognition, membrane localization and regulation of kinase activity (Kurochkina and Guha 2013). Desmoplakin contains the 8 highly conserved residues, predictive of a KELCH motif consensus sequence between residues 480 and 540. Four of these residues are localized within the SH3 domain. SH3 domains can interact with KELCH proteins. For example, SH3 domain in Tyrosine-protein kinase Fyn has been described as interacting with KLHL2 (KELCH Like Family Member 2), which has an important role in ubiquitination and actin cytoskeleton formation (Dhanoa et al. 2013). Desmoplakin is essential in forming desmosomes, which are cellcell adhesions necessary for skin integrity (Vasioukhin et al. 2001). Recessive mutations in DSP (the desmoplakin gene) have been associated with palmoplantar keratoderma, acantholytic epidermolysis bullosa, dermatitis, and extensive skin erosion (McAleer et al. 2015).

In conclusion, we propose that the IgE binding allergen Mala s 1 of *M. sympodialis* is a potential KELCH protein with a motif that is found in a diverse set of proteins, including over 100 human proteins, which can fold into a  $\beta$ -propeller. We suggest that the similarity of Mala s 1 to human proteins may lead to cross-reactivity and thereby contribute to the skin inflammation amongst AE patients sensitized to *M. sympodialis*.

### Author contributions statement

C.M., A.S., and D.M. conceived the idea and designed the study. D.E.C.L. contributed to the experimental design and performed the experiments. C.M. and D.M. contributed to project management, and supervision. All authors participated in data interpretation. D.E.C.L. drafted the first version of the manuscript. All authors contributed in writing, critically reviewed and edited the manuscript, and approved the final version.

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## Supplementary data

Supplementary data are available at FEMSYR online.

**Conflict of interest statement.** CM, DM and DECL do not have any conflict of interest to report for this manuscript.

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