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# Candida metapsilosis as the least virulent member of the 'C. parapsilosis' complex

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Results of recent molecular studies have provided evidence of three distinct species within the Candida parapsilosis complex, namely Candida parapsilosis, Candida orthopsilosis and Candida metapsilosis. While there are initial data pertaining to the virulence of these *Candida* species with respect to reconstituted epidermal and oral epithelial tissues, there have been no studies, as of yet, on their interaction with immune cells. Employing an in vitro infection model using microglial cells, we investigated the pathogenetic potential of different isolates of each of these three species. We show that C. metapsilosis isolates are more susceptible to microglia-mediated antifungal activity, as compared with those of C. parapsilosis and C. orthopsilosis. Interestingly, C. metapsilosis isolates are also phagocytosed to a lower extent, but the yeast-containing phagosomes exhibit the highest degree of acidification in comparison with the phagosomes containing C. parapsilosis or C. orthopsilosis. Furthermore, when assessing microglia secretory response to infection, comparable high levels of MIP-1 $\alpha$  and little or no TNF- $\alpha$  production are observed with all of these Candida species. Finally, unlike C. metapsilosis infected cells, microglial cells infected with C. parapsilosis and C. orthopsilosis release high and time-dependent levels of lactate dehydrogenase (LDH). Overall, these findings point to C. metapsilosis as the least virulent member of the 'C. parapsilosis' complex. 

**Keywords** Candida parapsilosis, Candida orthopsilosis, Candida metapsilosis, 83 microglia, phagosomal maturation 84

## <sup>5</sup> Introduction

Candida parapsilosis is the second most common yeast isolated from bloodstream infections around the world [1–4]. It is particularly associated with serious nosocomial infections and has long been considered a complex of three genetically distinct groups, namely I, II and III [5]. It was only in 2005 [6], that multigenic sequence analysis and internal transcribed spacer sequencing lead to the proposal to split the C. parapsilosis complex into three separate species, i.e., C. parapsilosis, C. orthopsilosis (formerly, C. parapsilosis group II), and C. metapsilosis (formerly, 

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C. parapsilosis group III). Despite the clinical relevance of isolates of the C. parapsilosis complex as agents of opportunistic mycoses, little is known as to the virulence traits of each member of the complex and especially of the two rarely isolated species, C. orthopsilosis and C. metap-silosis. Recently, Gacser et al. [7] provided initial in vitro evidence on the differential ability of the species of the 'C. parapsilosis' complex to invade reconstituted human epidermal and oral epithelial tissues. In particular, microscopic studies revealed that C. parapsilosis and C. orthopsilosis isolates caused major morphological changes, whereas C. metapsilosis exerted little or no effects on the human cells. Accordingly, cell cultures inoculated with C. parapsilosis and C. orthopsilosis, but not those exposed to C. metapsilosis, released lactate dehydrogenase (LDH). In further studies investigating C. parapsilosis spe-cific virulence factors [8], lipase production has been asso-ciated with the capacity of the three species to produce 

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biofilm and survive within macrophages. Moreover, Melo
 *et al.* [9] provide data on the ability of *C. orthopsilosis* and
 *C. metapsilosis* to produce biofilm.

4 It is well-established that the processes driving onset 5 and outcome of microbial infections are regarded as a bal-6 ance between the virulence of the microorganism and the 7 ability of the host to prevent microbial colonization/inva-8 sion [10-12]. On the one hand, macrophages play an 9 important indirect defence role by polarizing the specific 10 immune response via antigen presentation to lymphocytes and directly by phagocytosis and killing of the ingested 11 microorganisms [13]. On the other hand, there is increasing 12 13 evidence of the ability of certain pathogens to develop 14 strategies for intracellular survival, despite the potent anti-15 microbial environment generated by macrophages [14-18]. 16 These mechanisms include pathogen escape from the pha-17 gosome or inhibition of phagosomal acidification and 18 maturation [19]. In a recent study, we described the impor-19 tance of the AFR1 encoding-gene on the virulence of 20 another important fungal opportunistic pathogen, C. neo-21 formans [18]. Known to code for fluconazole-resistance 22 [20,21], AFR1 is also associated with the ability of the 23 fungus to elude macrophage-mediated defences [18]. 24 Unlike the knock-out counterpart, the AFR1 overexpress-25 ing yeast is capable of surviving inside brain macrophages. 26 This is the result of significant delays in phagolysosome 27 biogenesis and maturation which occurs when the mac-28 rophages are infected with the AFR1 +/+ yeast cells as 29

compared with the AFR1 -/- infected counterpart [18]. 30 The availability of immortalized cell lines which retain 31 phenotypic and functional properties of the original tissue, 32 facilitates the establishment of in vitro and in vivo infection 33 models suitable for studies of the biomolecular mecha-34 nisms involved in host-pathogen interaction. As an exam-35 ple, the previously established in vitro microglial cell line 36 BV2 [22] allowed the demonstration that in vivo microglial 37 cells play a crucial role in preventing the outcome of exper-38 imental meningoencephalitis by Candida albicans [23]. 39 Accordingly, when assessed in vitro, such cells exert 40 phagocytic and anticandidal activity [24-26] and, once infected, they express a restricted pattern of secretory 41 42 response [22,27,28]. This behaviour is likely interpretable 43 as a tissue-specific reaction that tends to couple an effica-44 cious antimicrobial host response with a concomitant 45 maintenance of cerebral homeostasis.

In the present study, we conducted in vitro investiga-46 47 tions of how and to what extent C. parapsilosis, C. orthop-48 silosis and C. metapsilosis isolates interact with BV2 49 microglial cells. In particular, eight different Candida iso-50 lates, belonging to the three species have been assessed for 51 resistance/susceptibility to phagocytosis and anticandidal 52 activity by microglial cells. Yeast-containing phagosome 53 maturation, cytokine response and LDH release have also

been evaluated. We show that, when compared to C. parap-54 silosis and C. orthopsilosis, C. metapsilosis is less suscep-55 tible to phagocytosis and more prone to intracellular 56 acidification of the yeast-containing phagolysosomes. In 57 addition, C. metapsilosis causes little or no damage to 58 microglial cells, as opposed to what is observed with cells 59 infected by C. parapsilosis and C. orthopsilosis. Cytokine 60 response is comparable among the three species. The 61 implications of such findings are discussed. 62

#### Materials and methods

#### Microglial cell line

67 The previously established murine microglial cell line BV2 68 [22] was maintained in RPMI 1640 medium (Gibco, Grand 69 Island, NY, USA), supplemented with 10% heat inactivated 70 fetal bovine serum (Defined Hyclone, Logan, Utah, USA), 71 50 mg/ml gentamicin (EuroClone, Milan, Italy) and 2 mM 72 L-glutamine (EuroClone, Milan, Italy), hereafter referred 73 to as complete RPMI. Cells were detached by vigorous 74 shaking and fresh cultures were started biweekly. Experi-75 mental cultures were set to a concentration of  $5 \times 10^{5}$ /ml 76 in fresh medium the day before the experiment. 77

#### Candida strains

80 A selected panel of eight clinical isolates of members of 81 the 'C. parapsilosis' complex were kindly provided by 82 Prof. Senesi. By multilocus sequence typing [6], the iso-83 lates had been identified as belonging to C. parapsilosis 84 (CP37 and CP71 strain), C. orthopsilosis (CP47, CP331 85 and CP344 strain) and C. metapsilosis (CP86, CP87 and 86 CP187 strain). Long-term storage was carried out in 20% 87 glycerol at  $-80^{\circ}$ C. Before testing, single colonies, obtained 88 from Sabouraud dextrose agar (Oxoid, Hampshire, UK) 89 cultures from each strain, were transferred to Sabouraud 90 dextrose broth under shaking. When required, staining of 91 yeast cells was achieved by incubating them with Oregon 92 green 488 (Molecular Probes, Eugene, OR, USA) 93 [18,29,30,34], 2 mg/ml in the dark at 37°C for 1 h. After 94 labelling, yeast cells were washed twice with sterile 95 phosphate-buffered saline (PBS, EuroClone, Whethereby, 96 UK), counted and suspended in complete medium at the 97 desired concentration.

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#### Measurement of anticandidal activity

The assay was performed as detailed elsewhere [28]. 101 Briefly, yeast cells ( $10^5$ /ml in complete RPMI, 100 µl per well) were plated in 96-well plates and BV2 cells were then added ( $10^6$ /ml in complete medium, 100 µl per well). 104 After an additional 2 and 4 h of incubation, the plates were vigorously shaken and Triton X-100 (0.1% final

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1 concentration, Sigma St. Louis, MO, USA) was added to 2 each well. Serial dilutions from each well were prepared 3 in saline and plated (triplicate samples) on Sabouraud 4 dextrose agar. The number of CFU was determined after 5 24-48 h of incubation. Control cultures consisted of yeast 6 cells incubated in complete RPMI without effector cells. 7 The results were expressed as percent of anticandidal activ-8 ity according to the formula described elsewhere [28].

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# Phagocytosis assay

12 The assay was performed as detailed elsewhere [18,34]. In 13 particular, Lab-Tek II chamber slides (Nalge Nunc Inter-14 national, Naperville, IL, USA) were treated with poly-L-15 lisine (Sigma, St. Louis, MO, USA), 10 µg per well, for 16 30 min. After two washes with PBS, BV2 cells (10<sup>6</sup>/ml in 17 complete medium, 100 µl per well) were transferred to 18 chamber slides and inoculated with Oregon green 488 19 pre-labelled yeast cells (5  $\times$  10<sup>6</sup>/ml in complete medium, 20 100 µl per well). After 1 or 2 h incubation, Uvitex 2B 21 (Polysciences Inc., Warrington, PA, USA) was added (20 22 µl/well) 15 min prior to each end point [18,29,30,34]. Then, 23 cells were washed with PBS to remove the non-adherent 24 yeast cells and fixed with 4% formaldehyde (freshly made 25 from paraformaldehyde, obtained from Sigma, St Louis, 26 MO, USA), for 30 min at 4°C, and immediately analyzed 27 by epifluorescence microscopy. A minimum of 200 micro-28 glial cells per group were scored and any cell containing 29 one or more particles was counted as phagocytic. The 30 phagocytosis index was calculated as the total number of 31 phagocytosed yeasts/total number of phagocytic cells. 32

#### 33 34 Phagolysosome acidification assay

35 The assay was performed as detailed elsewhere [18,34]. 36 Briefly, BV2 cells were dispensed in Lab-Tek II chamber 37 slides as in the 'Phagocytosis assay'. The acidotropic dye LysoTracker DND-99 (75 nM, obtained from Molecular 38 39 Probes, Eugene, OR, USA) [18,33,34] was added and the 40 BV2 cells were infected for 2 h, as described above. 41 Samples were then fixed with 4% formaldehyde and 42 immediately examined by fluorescence microscopy. 43 Control groups consisted of uninfected cells. A minimum 44 of 200 yeast-containing phagosomes were scored; the 45 percent of acidic phagolysosomes was evaluated as the ratio between the number of Lyso-Tracker-labelled 46 phagosomes and the total number of yeast-containing 47 48 phagosomes.

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#### 50 51 Cytokine measurement

52 The assay was performed as detailed elsewhere [26]. 53 Briefly, BV2 cells  $(10^{6}/\text{ml})$  were inoculated with yeast cells

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 $(10^7/\text{ml})$  or exposed to LPS (1 µg/ml, Sigma, St Louis, 54 MO, USA) for 6 h in 24-well plates. Then, the supernatants 55 were collected and frozen at  $-80^{\circ}$ C. MIP-1 $\alpha$  and TNF- $\alpha$ 56 levels were measured by sandwich ELISA according to the 57 manufacturer's protocol (R&D Systems, MN, USA). The 58 reaction was read as OD using a Microplate Reader (Sun-59 rise). Experiments were repeated three to five times and 60 each sample was run in triplicate. Results were expressed 61 62 as pg/ml.

## Lactate dehydrogenase (LDH) measurement

66 BV2 cells ( $10^{6}$ /ml) were infected with yeast cells ( $10^{7}$ /ml) 67 for 24, 48 and 72 h in 24-well plates. In parallel groups 68 BV2 cells were either treated with LPS (1 µg/ml) or incu-69 bated in complete RPMI and then exposed to Tryton X-100 70 (0.01%), at the end of the incubation time as positive con-71 trols. Yeast cells alone, incubated under identical condi-72 tions, were included as negative control. At the different 73 time-points, the supernatants were harvested and the levels 74 of LDH activity was immediately measured and expressed 75 as U/L. 76

# Epifluorescence microscopy

79 Images were generated and captured with a Nikon Eclipse 80 90i system, equipped with Nomarski differential interfer-81 ence contrast (DIC) optics. The overlapping signals of 82 Oregon green-labelled yeasts (green fluorescence) with 83 either the Uvitex 2B (blue fluorescence) or the red fluo-84 rescence of the LysoTracker were interpreted as colocal-85 ization. At each time point, samples were photographed 86 with a DS-5Mc Nikon digital camera and the photo-87 graphs were then analysed by the NIKON software 88 program. 89

## Statistical analysis

Statistical analysis was performed by one-way Anova with a Bonferroni correction post-test. The results in the figures and in the table are the mean ± standard deviation (SD) of three to five independent experiments, if not specified otherwise.

# Results

	//
Comparison among C. parapsilosis, C. orthopsilosis and	100
C. metapsilosis isolates in terms of resistance/susceptibility	101 102
to microglia-mediated antifungal activity	102

In the present study, we compared different isolates 104 of *C. parapsilosis*, *C. orthopsilosis* and *C. metapsilosis*, 105 for their resistance/susceptibility to microglia-mediated 106

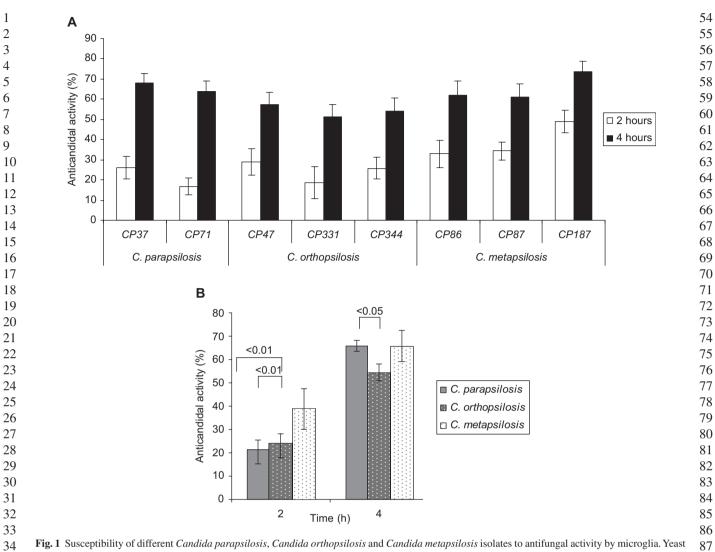


Fig. 1 Susceptibility of different *Candida parapsilosis*, *Candida orthopsilosis* and *Candida metapsilosis* isolates to antifungal activity by microglia. Yeast cells were exposed to BV2 cells at E:T = 10:1. After 2 and 4 h, the percent of anticandidal activity was determined as detailed in Materials and methods. Panel A shows the anticandidal activity against each isolate (mean value +/– SD of 3 independent experiments). Panel B shows the mean +/– SD of the values depicted in Panel A.

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defences. In particular, BV2 cells were infected with the 40 eight different *Candida* isolates, for different times, at 41 an E:T ratio of 10:1 after which the anticandidal activity 42 of the cells was measured, as detailed in Materials and 43 methods. Significant levels of antifungal activity were 44 observed against all the Candida isolates within 2 h and 45 it appeared that this activity was time-dependent, since 46 a further increase in anticandidal action was noted after 47 4 h in all cases (Fig. 1A). When comparing the mean 48 anticandidal activity observed among isolates belonging 49 to each species, C. metapsilosis appeared significantly 50 more susceptible, especially in the 2 h assay, than 51 C. parapsilosis and C. orthopsilosis to BV2 cell activity, 52 (Fig. 1B). 53

### Comparison among C. parapsilosis, C. orthopsilosis and C. metapsilosis isolates in terms of resistance/susceptibility to phagocytosis by microglia

95 With the purpose of detailing the events involved in 96 Candida microglia interaction, fluorescence studies were 97 performed, as detailed elsewhere [18,34]. Using this meth-98 odology, we performed a time-dependent phagocytosis 99 assay comparing all the isolates. As shown in Fig. 2A, the 100 percent of phagocytic cells varied to some extent and no 101 time-dependency was observed with the exception of C. 102 metapsilosis. The trend was better defined when comparing 103 the mean phagocytosis observed among isolates belonging 104 to each species. As shown in Fig. 2B, C. metapsilosis was 105 significantly less phagocytosed than C. orthopsilosis or 106

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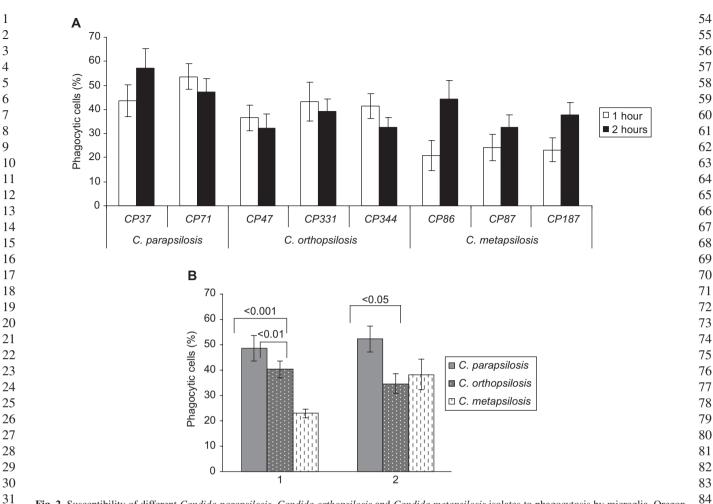


Fig. 2 Susceptibility of different *Candida parapsilosis*, *Candida orthopsilosis* and *Candida metapsilosis* isolates to phagocytosis by microglia. Oregon
 green 488 pre-labelled yeast cells were exposed to BV2 cells (E:T = 1:5) for 1 and 2 h. At each end point, Uvitex 2B was added for 15 min; the cultures
 were then washed, fixed and analysed by epifluorescence microscopy (panel A). Panel B shows the mean +/– SD of the values depicted in Panel A
 phagocytosis values.

36 *C. parapsilosis.* Furthermore, the difference was highly 37 significant after 1 h of infection (p < 0.001: *C. parapsilo-*38 *sis* vs *C. metapsilosis*; p < 0.01: *C. orthopsilosis* vs 39 *C. metapsilosis*). When the phagocytosis efficiency was 40 determined by evaluating the phagocytosis index, we observed 41 values ranging from 5–7 and no statistically significant dif-42 ferences occurred between groups (data not shown).

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- Comparison among C. parapsilosis, C. orthopsilosis and
   C. metapsilosis isolates in terms of phagolysosomal
- 47 maturation within infected microglia

To investigate the events following the yeast internalization by microglia, the fate of the yeast-containing phagosomes was evaluated in terms of acidification. In particular, the acidification of the vacuoles were assessed 2 h post infection, by adding the LysoTracker red DND-99 dye in the phagocytosis assay, as detailed elsewhere [18,34].

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Figure 3A shows fields representative of the following con-89 ditions; (1) BV2 cells and the yeast cells were observed by 90 91 DIC (a, f and k), (2) the extracellularly localized yeast cells were evidenced by Uvitex 2B (b, g and l), (3) the total yeast 92 cells were detected by Oregon green staining (c, h and m), 93 94 (4) the LysoTracker staining identified acidic intracellular compartments (d, i and n), (5) by merge, the intracellular 95 yeasts within acidic vacuoles were depicted. As shown in 96 97 Fig. 3, LysoTacker staining was not evident in the C. parapsilosis-infected cells (d) and one or numerous acidic 98 99 vacuoles were observed when assaying phagosomes (n) containing C. orthopsilosis (i) or C. metapsilosis. These dif-100 ferences were confirmed by the merge images (e, j and o). 101 Fig. 3B shows the percent of acidic phagolysosomes in 102 each experimental group. The extent of the phenomenon 103 was related to the isolate employed, with the three isolates 104 of C. metapsilosis showing consistently the highest percent 105 of acidic phagolysosomes. As detailed in Fig. 3C, when 106

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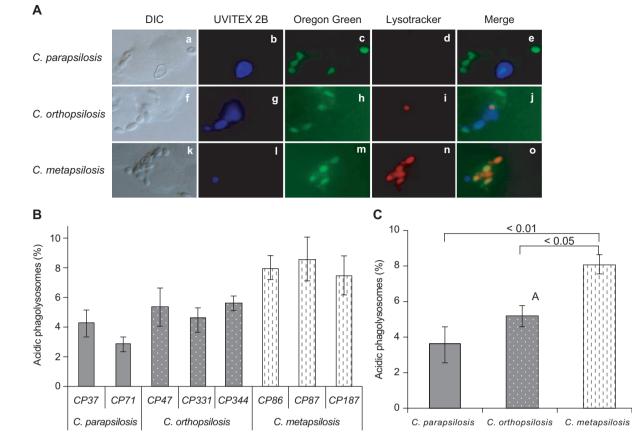


Fig. 3 Acidification of phagolysosomes containing yeast cells. Oregon green 488 pre-labelled yeast cells were exposed to BV2 cells (E:T = 1:5), for 2 h; then LysoTraker dye was added. After counterstaining with Uvitex 2B, samples were fixed and then visualized by epifluorescence microscopy (Panel A). (a), (f) and (k) DIC images, (b), (g) and (l) the Uvitex 2B image showing the blue-stained extracellularly localized yeast cells, (c), (h) and (m) the Oregon green image showing total yeast cells, (d), (i) and (n) LysoTracker staining, (e), (j) and (o) the merge image showing the LysoTrackerpositive compartment. Panel B shows the results +/– SD, expressed as percent of acid phagolysosomes. Panel C shows the mean values +/– SD of the values depicted in Panel B.

considering the mean values within each species, cells
infected with *C. metapsilosis* showed values significantly
higher than the other two groups.

 $\frac{39}{40}$  Microglia secretory response to infection by C. parapsilosis,

41 C. orthopsilosis and C. metapsilosis

In order to investigate the impact of different Candida spe-cies on microglial cell response to infection, BV2 cells were exposed or not to the eight yeast isolates and then assessed for cytokine response. In particular, BV2 cells were infected for 6 h with C. parapsilosis, C. orthopsilosis and C. metapsilosis yeast cells (E:T = 1:10) or exposed to LPS (1  $\mu$ g/ml), after which the production of MIP-1 $\alpha$  and TNF- $\alpha$  was measured. As depicted in Fig. 4A, LPS greatly enhanced MIP-1 $\alpha$  production, with high levels of MIP-1 $\alpha$ also found in BV2 infected cells in comparison to uninfected controls. However, no statistically significant 

differences were detected when comparing BV2 cells 88 exposed to each of the three species. Furthermore, little or 90 no response was observed in terms of TNF- $\alpha$  production 91

# LDH release by C. parapsilosis, C. orthopsilosis and C. metapsilosis-infected microglial cells

To assess the impact of infection with the three studied Candida species on the status of BV2 cells, we com-pared the release of LDH by microglial cells exposed to C. parapsilosis, C. orthopsilosis or C. metapsilosis yeast cells for 24, 48 and 72 h, at E:T = 1:1 (Table 1). In paral-lel groups, BV2 cells were incubated in medium alone, in the presence of LPS or the cells were simply treated with Tryton X-100. As predicted, the highest LDH activity was found in the Tryton X-100 lysed cells. Appreciable and time-dependent LDH activity was observed in BV2 cells 

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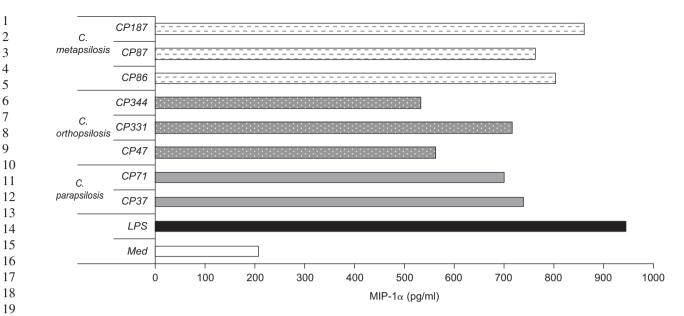


Fig. 4 Levels of MIP-1 $\alpha$  in BV2 cells infected with the different isolates of *Candida parapsilosis*, *Candida orthopsilosis* and *Candida metapsilosis*. BV2 cells were infected with *Candida* at E:T = 10:1 for 6 h. In parallel, lipopolysaccharide treatment (LPS, 1 µg/ml) was included as positive control. Then, the supernatants were harvested and MIP-1 $\alpha$  levels were evaluated, as detailed in Materials and methods. Values are expressed as pg/ml.

exposed to LPS, even though some toxic effects occurred 24 25 at the time, as confirmed by the fact that the LDH levels in LPS-treated cells was below those of the controls at the 26 latest time 72 h (470 vs 553). When microglial cells were 27 infected with the three studied Candida species, we found 28 29 no variations in LDH activity with respect to the control 30 baseline at 24 h. Later, a time-dependent increase in LDH was detected in all the infected cells; in particular, 31 C. orthopsilosis and C. parapsilosis induced the highest 32 and intermediate levels of LDH, respectively, while 33 C. metapsilosis infected cells released the lowest levels of 34 35 LDH, at all the time-points considered.

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# <sup>37</sup><sub>38</sub> **Discussion**

While three distinct serotypes have long been recognized within *C. parapsilosis*, it was only recently on the basis of molecular studies that a proposal was made to divide it into three distinct species [6]. In the present work, we compared *C. parapsilosis*, *C. orthopsilosis* and *C. metapsilosis* with respect to their pathogenic potentials by means of an *in vitro* infection model employing microglial cells.

As recently summarized in a review [35], the initial interaction between host immune cells and *C. albicans* leads to a set of standard, and possibly redundant, pathways that stimulate phagocytosis and the subsequent killing of the fungal cells. In this study, we showed that, upon interaction with brain macrophages, the growth of *C. parapsilosis, C. orthopsilosis* and *C. metapsilosis* 53

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were inhibited in a time-dependent manner. Interestingly, 77 C. metapsilosis isolates were more inhibited than 78 C. parapsilosis or C. orthopsilosis, especially in the 2 h 79 assay. Unexpectedly, epifluorescence microscopy analy-80 sis revealed that isolates belonging to C. metapsilosis are 81 phagocytosed to a lower extent than the other two species. 82 Furthermore, when evaluating the phagosome maturation 83 within microglia cells infected with the three species, the 84 vacuoles containing C. metapsilosis cells undergo the 85 highest degree of acidification. Taken together, the pres-86 ent findings indicate that C. metapsilosis is less suscep-87 tible to phagocytosis but, once internalized, it is also the 88 least effective in counteracting host intracellular antimi-89 crobial defences. From the pathogen point of view, the 90 fact that only about half of the phagocytic cells are 91 infected with C. metapsilosis may be interpreted as a bet-92 ter ability of those species to resist macrophage-mediated 93 ingestion. Moreover, the results concerning phago-94 lysosome acidification imply that, once internalized, 95 C. metapsilosis has a reduced chance of surviving within 96 the phagocyte. Since intracellular localization and subse-97 quent persistence have been established as virulence traits 98 for fungi [14,15], we may conclude that C. metapsilosis 99 is defective in both respects. Thus, it may be considered 100 as the least virulent species among the 'C. parapsilosis' 101 complex. In line with this conclusion, recent population-102 based epidemiological studies [7.36–38] showed that 103 C. metapsilosis is indeed rarely isolated from patients. 104 In particular, Lockhart et al. [37] demonstrated that 105 106

		LDH (U/L)			
Strains	Treatment	24 h	48 h	72 h	
None	Medium	32	183	553	
None	Tryton X-100	1585	1655	1484	
None	LPS	80	348	470	
C. parapsilosis	CP37	36	774	1163	
	CP71	37	607	1160	
	Mean value $\pm$ SD	$36.5 \pm 0.7$	$690.5 \pm 118.1$	$1161.5 \pm 2.1$	
C. orthopsilosis	CP344	41	1130	1323	
*	CP331	38	911	1325	
	CP47	35	1097	1270	
	Mean value $\pm$ SD	$38.0 \pm 3.0$	$1046.0 \pm 118.1$	$1306.0 \pm 31.$	
C. metapsilosis	CP187	38	259	601	
-	CP86	37	255	686	
	CP87	35	381	702	
	Mean value $\pm$ SD	$36.7 \pm 1.5$	298.3 ± 71.6*	$663.0 \pm 54.3$	

 Table 1 Levels of LDH activity in BV2 cells infected with different isolates belonging to Candida parapsilosis, Candida orthopsilosis and Candida
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 metapsilosis species.
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\*P < 0.01 (C. parapsilosis vs C. orthopsilosis) or (C. parapsilosis vs C. metapsilosis).

*C. metapsilosis* is the least represented species of the *C. parapsilosis*' complex (1.8%) in the worldwide collection of clinical isolates.

25 It is known that C. albicans infection induces the 26 production of important cytokines, which play a crucial 27 regulatory role in initiating host immune response [39-28 41]. Similarly, BV2 cells infected with C. parapsilosis, 29 C. orthopsilosis and C. metapsilosis produce high levels 30 of MIP-1, but no significant differences are observed 31 with respect to these three Candida species. In contrast, 32 TNF- $\alpha$  production is totally unaffected by infection. Thus, 33 these data ascribe to the members of the 'C. parapsilosis' 34 complex an immunomodulating property, consisting of 35 selective induction of MIP-1 $\alpha$  but not TNF- $\alpha$  in micro-36 glia, irrespective of the fungal species. A similar trend of 37 secretory response to infection has been previously described in a study employing C. albicans as the micro-38 39 bial insult [26]. We may interpret such a subtle control of 40 secretory response by microglia as an effort to minimize any potential toxic effects, by a cytokine such as TNF- $\alpha$ , 41 42 within brain.

43 Finally, significant differences in term of microglial 44 cell injury after infection with isolates of the complex have been revealed by evaluating the release of LDH. 45 In particular, little LDH release was observed in 46 47 BV2 cells infected with C. metapsilosis strains with respect to uninfected controls. In contrast, infections 48 49 by C. parapsilosis and C. orthopsilosis induced high 50 levels of LDH release. This phenomenon further increased by time, implying gradual deleterious effects 51 52 due to both infectious agents. This finding is in line with 53

a recent study of Gacser *et al.* [7] that showed that upon 75 infection of reconstituted human tissue with clinical and 76 laboratory isolates belonging to the '*C. parapsilosis*' 77 complex, *C. metapsilosis* induces minimal damage 78 when compared with *C. parapsilosis* and *C. orthopsilosis* 79 isolates [7]. 80

Overall, the present report describes differences among 81 C. parapsilosis, C. orthopsilosis and C. metapsilosis in 82 terms of fungus-host cell interaction. Although the numbers 83 employed in this study was low, it does point to the impor-84 85 tance of achieving species identification among the 'C. parapsilosis' complex in clinical microbiology labora-86 tories to better tailor patient treatment. In addition, this 87 88 would provide precious epidemiological data and contribute to the elucidation of the etiological role of the three 89 distinct species, C. parapsilosis, C. orthopsilosis and 90 C. metapsilosis, in clinical settings. 91

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#### Declaration of interest: None.

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