

Public Abstract

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Department:Biochemistry

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Title:MONOSACCHARIDE-BINDING OF CYSTIC FIBROSIS PSEUDOMONAS AERUGINOSA:
GLYCOPOLYMER PREPARATION, METHODS DEVELOPMENT AND PHENOTYPE ASSESSMENT

The chronic and progressive *Pseudomonas aeruginosa* infection in cystic fibrosis (CF) patients' lungs starts with the specific binding by bacterial lectins (sugar-binding proteins) to certain sugars on the respiratory tract. Blocking this binding with competitive carbohydrates (anti-adhesion therapy) offers a promising therapeutic strategy. Due to the diverse living microenvironment of the bacteria in the lungs, *P. aeruginosa* isolated from CF patients often have different appearances, which is directly related to their unusually high antibiotic-resistance. Therefore, we asked whether *P. aeruginosa* with different appearances also have different carbohydrate-binding patterns, and what simple sugars can be bound by the bacteria on a cellular level. To answer these questions, a group of *P. aeruginosa* laboratory strains and clinical isolates with various appearances were tested against a panel of synthesized and commercial fluorescent glycopolymers possessing distinct pendant sugars. Using a controlled co-polymerization strategy, a group of linear fluorescent glycopolymers were successfully prepared and employed in bacterial binding tests. In the *P. aeruginosa* binding tests where commercial glycopolymers were mainly used, alpha-D-galactose, beta-D-N-acetylgalactosamine, or beta-D-galactose-3-sulfate demonstrated strong binding with all the strains and clinical isolates. But within any positively-binding population, only ~1% of the bacteria showed observable binding. These findings provide new perspective for both the pathogenesis of the *P. aeruginosa* infection in CF lungs and the sugar-inhalation anti-adhesion treatment. This protocol can also be applied to other pathogenic bacteria whose carbohydrate-binding behaviors are of interest for researchers.