

Supporting information

Site-Selective Modification of Proteins Using Cucurbit[7]uril as Supramolecular Protection for N-terminal Aromatic Amino Acids

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Materials

All reagents were acquired through Millipore-Sigma.

Insulin modification and digestion

An insulin stock solution of 4 mg/mL was prepared by dispersing 8 mg of insulin in 0.5 mL milliQ water and acidifying with 1 μ L aq HCl (conc) until the dispersed powder dissolved. 0.5 mL 2x PBS pH 7.3 buffer was added, resulting in a temporarily cloudy precipitate that quickly dissipates.

Cucurbit[7]uril (10 μ L, 6.8 mM or 3.7 mM, solution in PBS) was added to insulin (20 μ L, 0.69 mM, 4 mg/mL). This resulted in an opaque suspension believed to be Insulin complexed with CB[7]. This effect was not due to a drop in pH beyond buffer capacity. m-dPEG₈-NHS ester was added from a freshly prepared stock solution (8 μ L, 3.9 mM or 84.4 mM). This solution was incubated for 37 °C for 2 hours. Glu-C digestion was performed by adding Glu-c (8 μ L, 1 mg/mL) and incubated at 37 °C for a minimum of 4 hours. DTT reduction of non-digested insulin was performed by adding 10 μ L 5 mM DTT, instead of Glu-c. Solutions for MS were prepared by 100x dilution into 1:1 ACN:water.

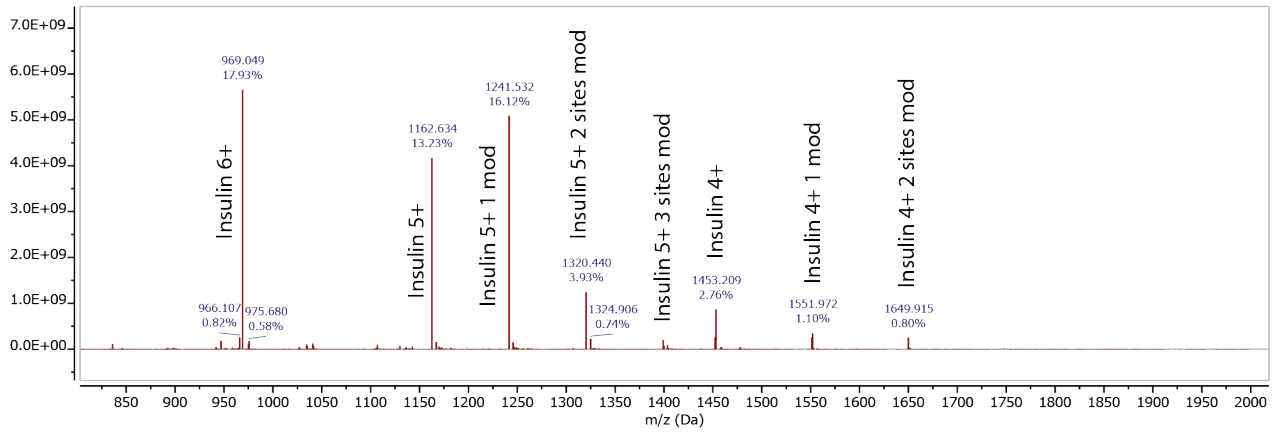
LC-MS Methods

Samples were analyzed by LC-ESI/MS on a Waters Acquity UPLC and SQD2 single quadrupole mass spectrometer. A Zorbax 300SB-C8 2.1x50mm 3.5 μ m HPLC column was used with the following gradient:

Time (mins)	Flow rate (mL/min)	Solvent A (0.1% formic acid in water)	Solvent B (0.1% formic acid in acetonitrile)
0	0.3	98	2
2	0.3	98	2
6	0.3	5	95
8	0.3	5	95
8.5	0.3	98	2
9.5	0.3	5	95
10.5	0.3	5	95
11	0.3	98	2
15	0.3	98	2

Data was collected in positive ion, full scan MS mode with a mass range of 50-2000 Da. High-resolution masses were determined on a Waters Acquity UPLC and Thermo Exactive Orbitrap Mass Spectrometer. An Agilent Poroshell C18 2.1x50mm 2.7 μ m HPLC column, with an identical gradient as above, was used for separation. Data was collected in positive ion, full scan MS mode with a mass range of 100-2000 Da, Maximum ion injection time 250 ms, Resolution=50K, AGC=1x10⁶.

Insulin + 2.2 NHS-PEG



Insulin + 5 eq CB[7] + 2.2 NHS-PEG

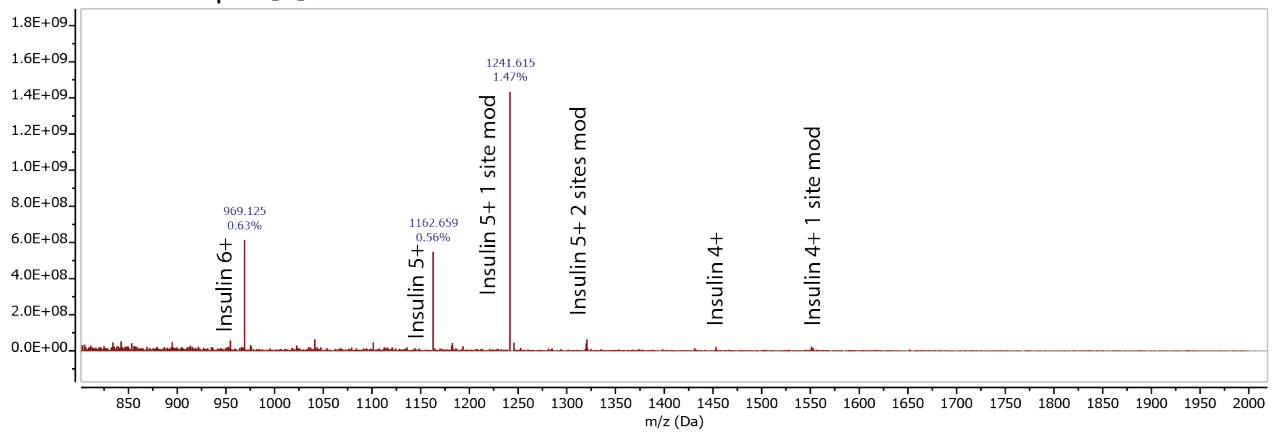


Figure S1: Low resolution mass spectrometry of whole insulin modified with 2.2 eq NHS-PEG ester in the absence (top) or presence (bottom) of CB[7].

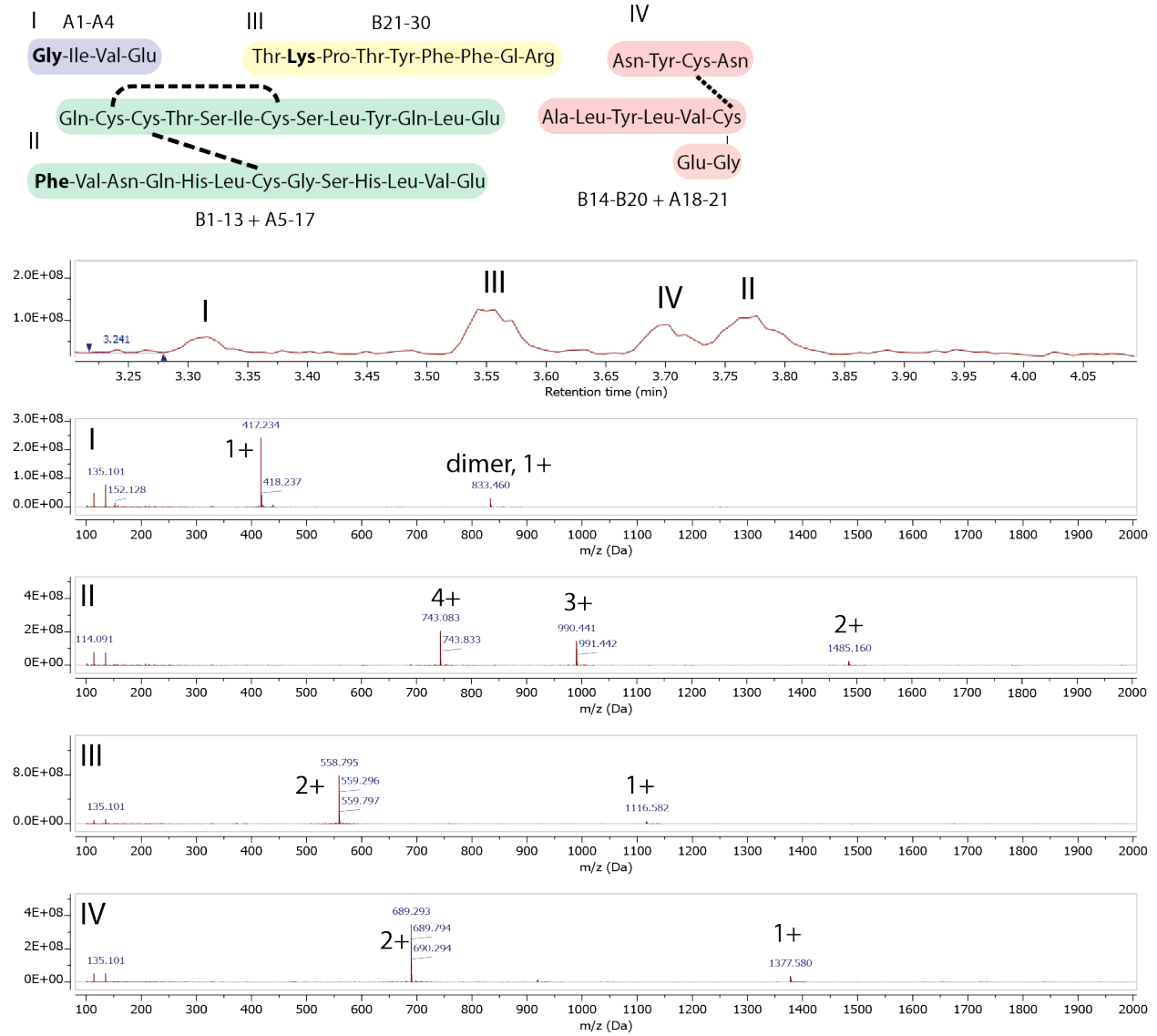


Figure S2: Glu-C digested insulin with identified fragments, high resolution. Top bar shows ion count intensity elugram, with masses corresponding to each of the fragments shown in the lower 4 panels.

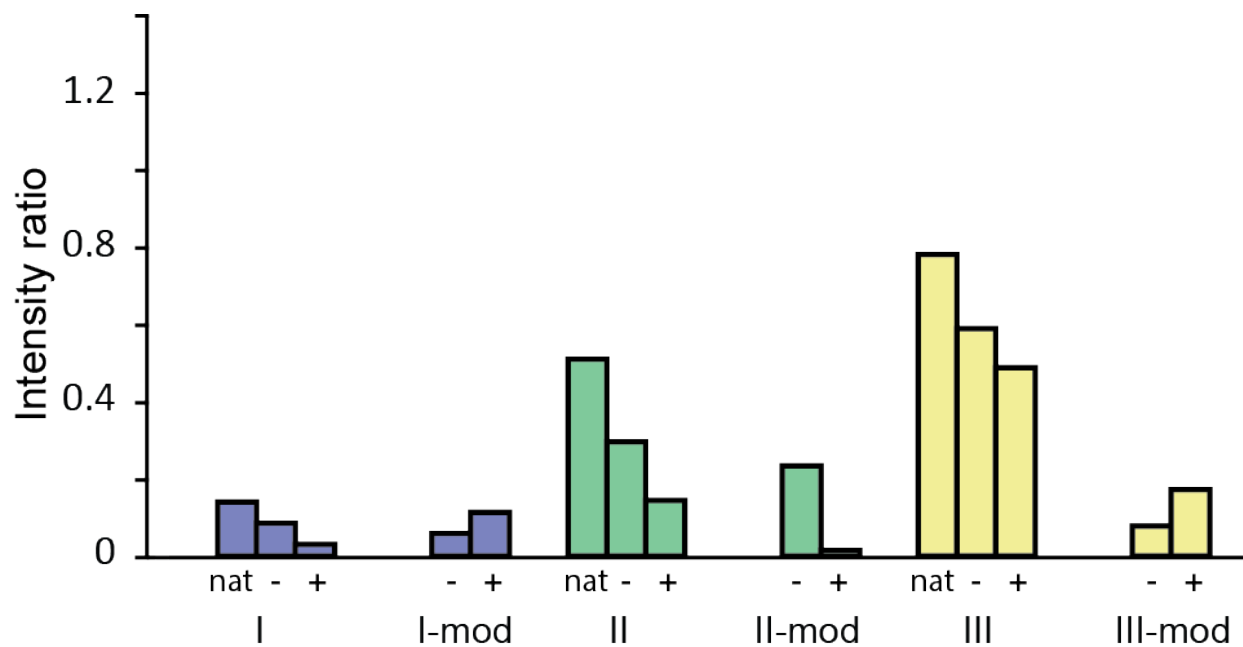


Figure S3: Intensity ratios of fragments, relative to fragment IV. Either native unmodified insulin, insulin modified with 2.2 equivalents m-dPEG₈-NHS ester, with or without 5 eq. of CB[7] added. In the presence of CB[7], I and III is modified to a greater extent. II appears to be almost completely non-modified, but shows an overall decreased intensity in the presence of CB[7], likely as a consequence of complexation with CB[7]. Each fragment intensity is from all isotopes and m/z from Figure S6 and Figure S7

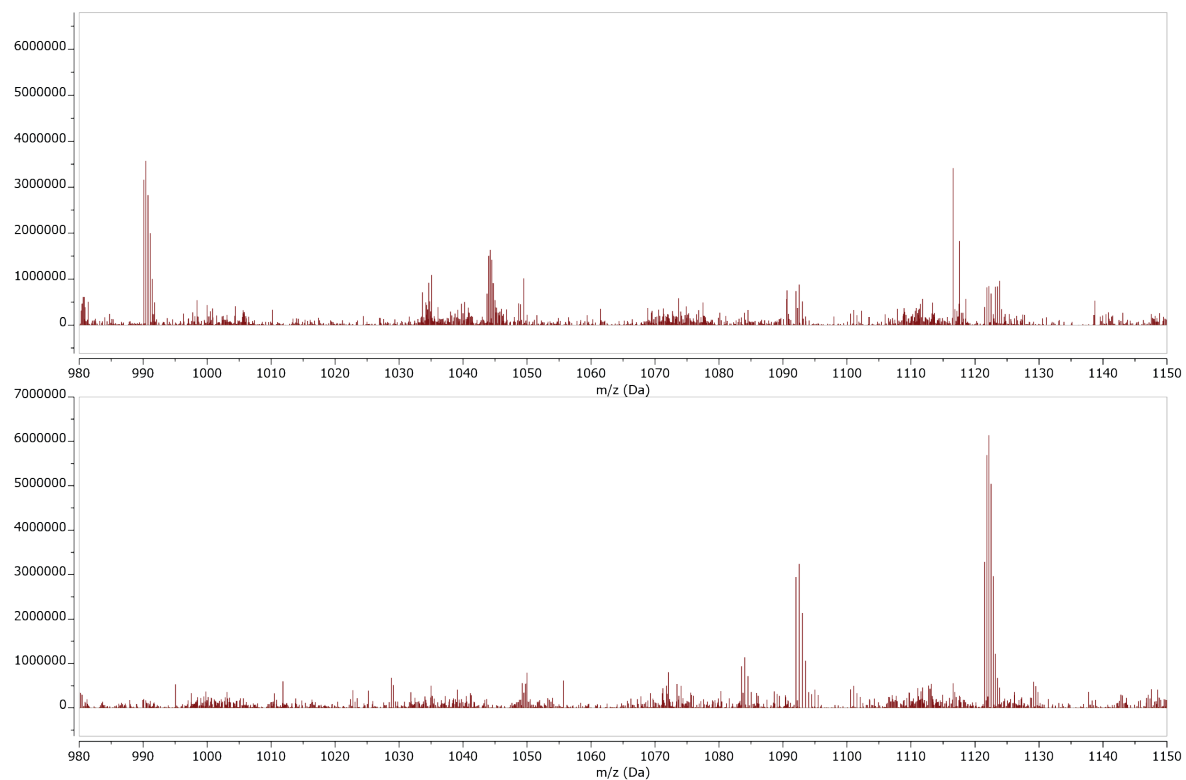


Figure S4: Insulin incubated with 50 eq. of m-dPEG-NHS ester, in the presence of 2.7 equivalents of CB[7] (top) or absence of CB[7] (bottom). In the absence of CB[7], the $+3\text{H}^+$ ion (m/z 990) from fragment II is greatly reduced, while CB[7] reduces the $+3\text{H}^+$ ion of the modified fragment II (m/z 1122) .

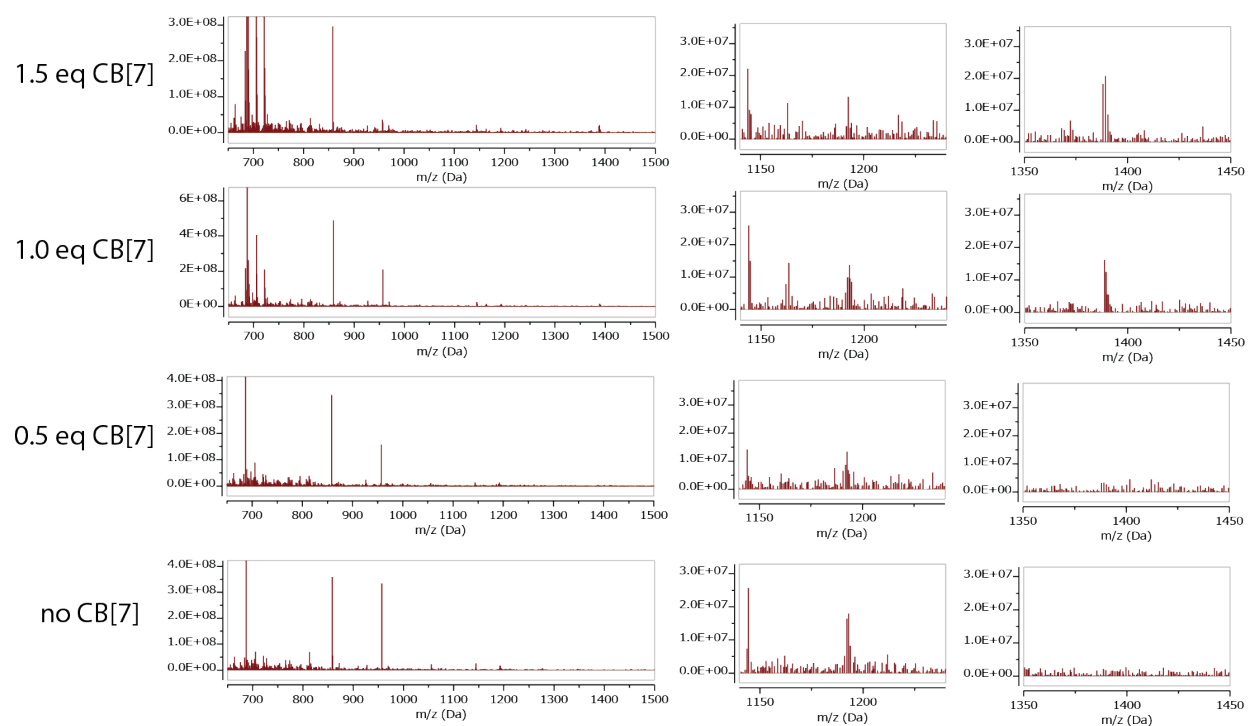


Figure S5: Various amounts of CB[7] with insulin and 1.5 eq m-dPEG₈-NHS, followed by a reduction with DTT. m/z 1192 is the native A chain +2H⁺ (monoisotopic mass = 2381.989u), with the modified fragment found at m/z 1387. m/z 858.42 is the +4H⁺ ion of the B chain (monoisotopic mass = 3427.67u), with the modified fragment found at m/z 955.9. Lower intensities are seen for the A chain, due to a lack of multiple positively charged amino acids. An increase in A chain functionalization is seen with increasing CB[7], with a corresponding decrease in B chain functionalization.

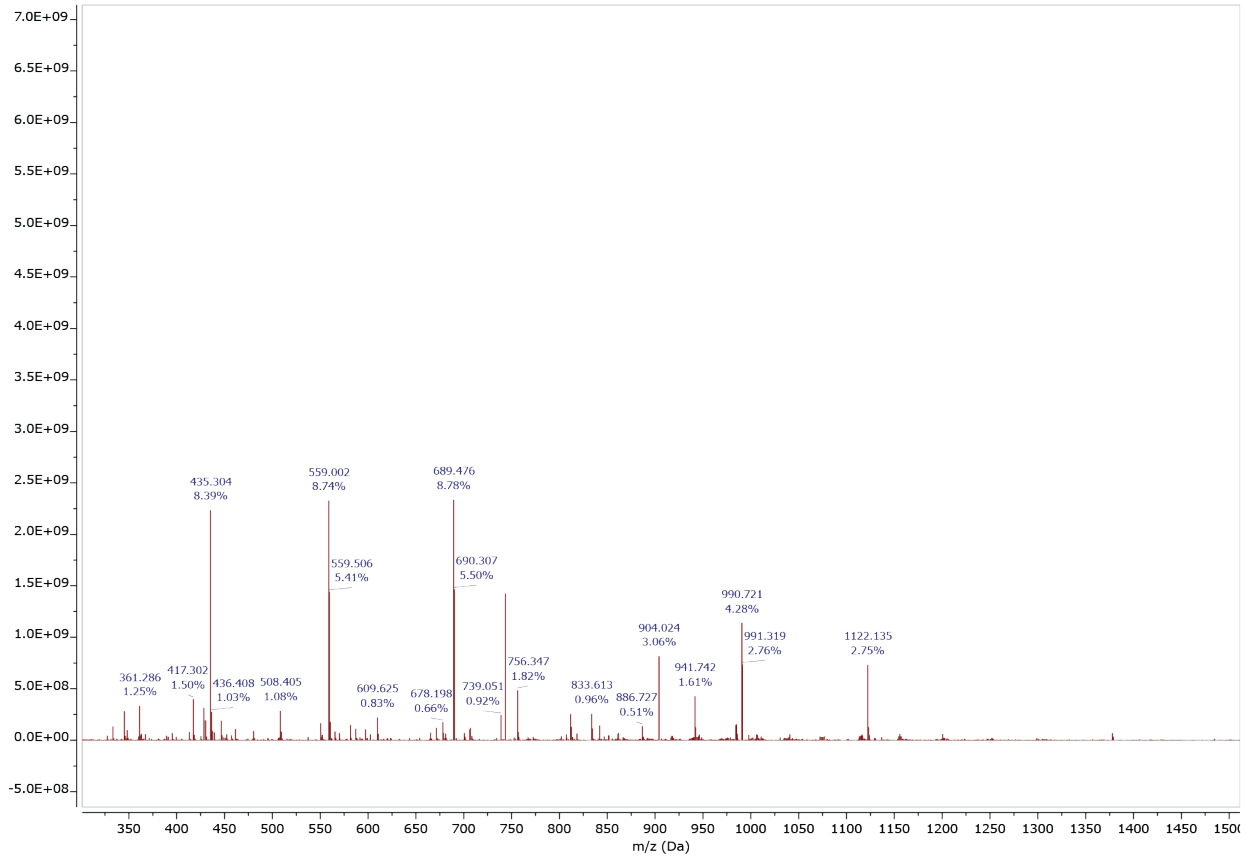


Figure S6: Insulin + 2.2 eq m-dPEG₈-NHS, digested. m/z 417.3 Fragment I +H⁺, m/z 435.3 m-dPEG₈-COOH, m/z 559.0 Fragment III +2H⁺, m/z 689.5 Fragment IV +2H⁺, m/z 743.1 Fragment II modified +4H⁺, m/z 756.4 Fragment III +2H⁺, m/z 811.6 Fragment I modified +H⁺, m/z 833.6 Fragment I dimer +H⁺, m/z 990.7 Fragment II +3H⁺, m/z 1122.1 Fragment II +3H⁺.

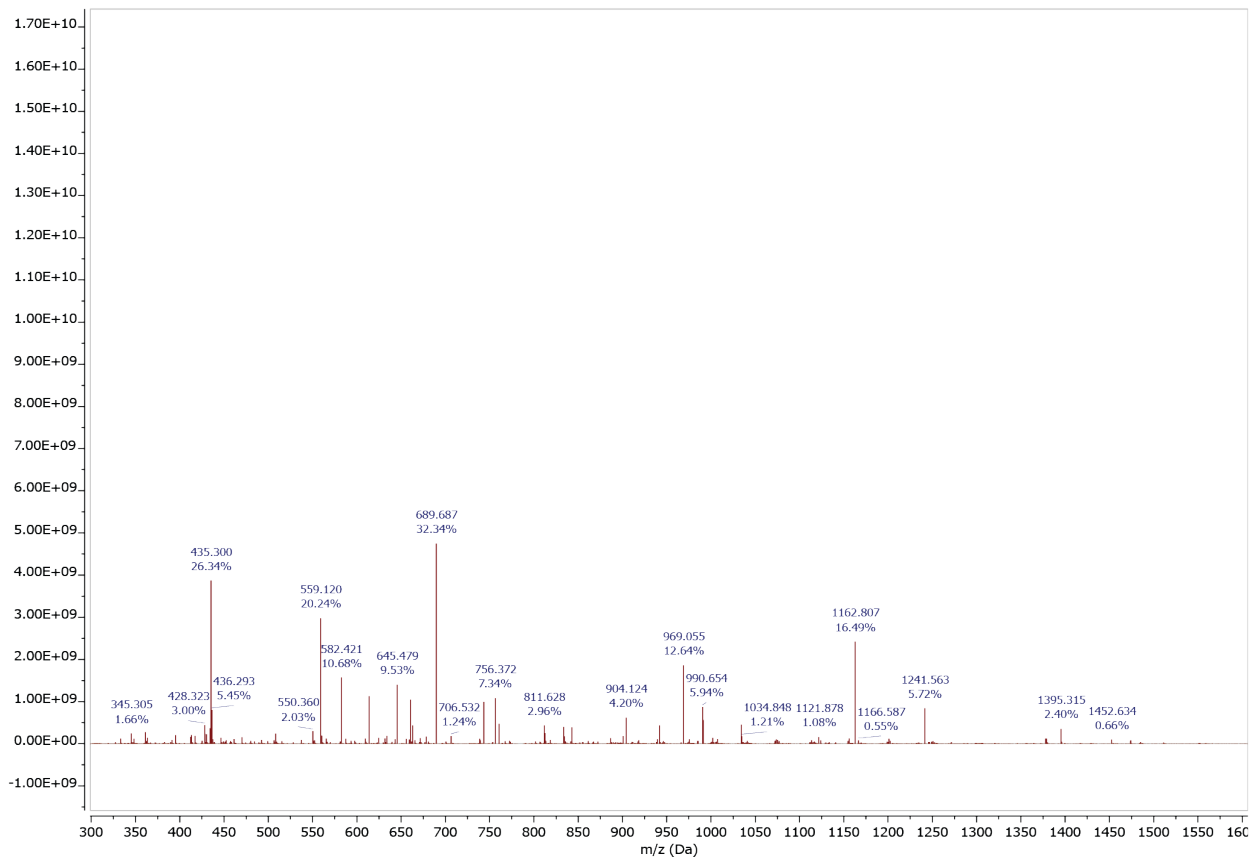


Figure S7: Insulin + 5 eq CB[7] + 2.2 eq m-dPEG₈-NHS. Insulin + 2.2 eq m-dPEG₈-NHS, digested. m/z 435.3 m-dPEG₈-COOH, m/z 559.0 Fragment III +2H⁺, m/z 689.5 Fragment IV +2H⁺, m/z 743.1 Fragment II modified +4H⁺, m/z 756.4 Fragment III +2H⁺, m/z 811.6 Fragment I modified +H⁺, m/z 969.1 Insulin +5H⁺, m/z 1162.8 Insulin +6H⁺, m/z 990.7 Fragment II +3H⁺, m/z 1122.1 Fragment II +3H⁺, m/z 1241.6 insulin 1 mod +5 H⁺, m/z 1395.3 insulin+CB[7] +5 H⁺.

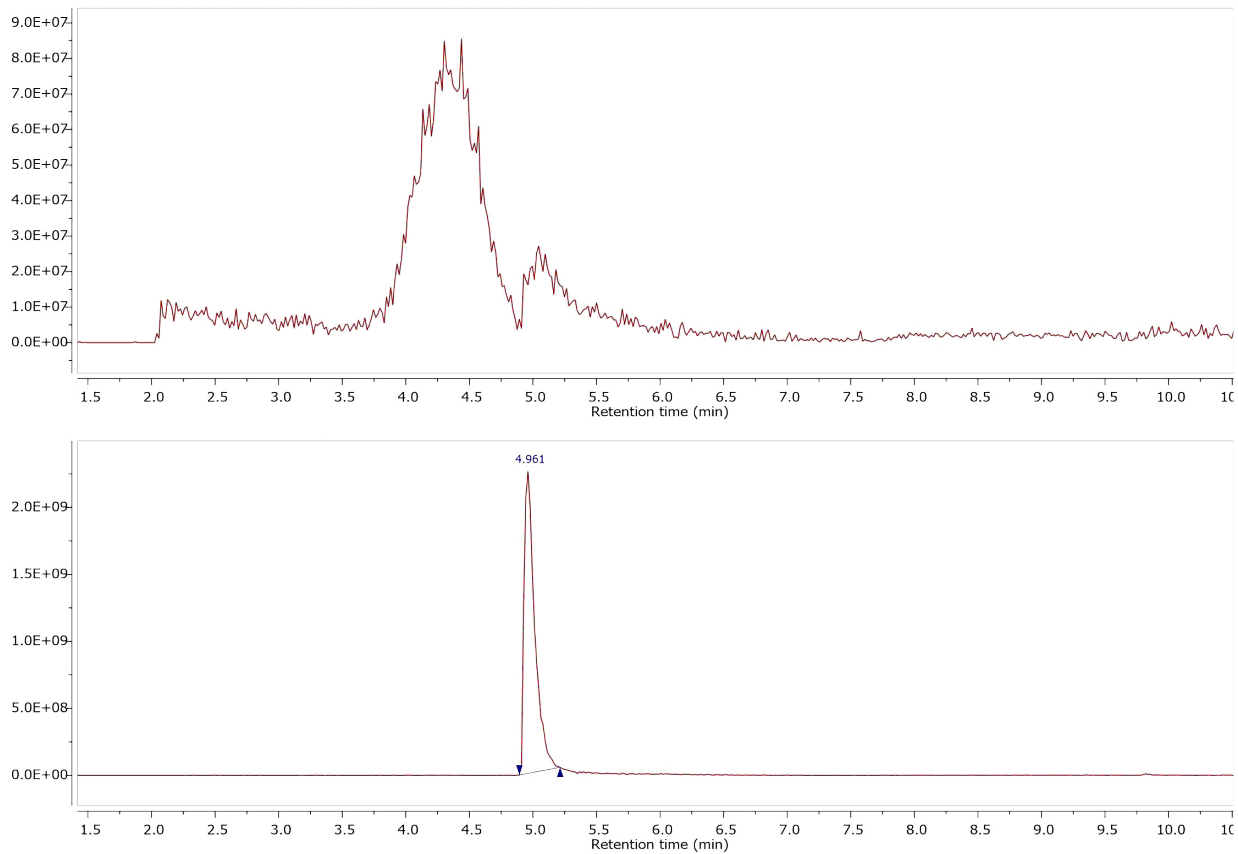


Figure S8: (top) TIC elugram for m/z associated with CB[7]. (bottom) m/z 582 TIC elugram for m/z associated with intact insulin, m/z 958. The different elution times show that HPLC can sufficiently separate the non-covalent complex between insulin and CB[7]