



Full length article

Amplification of oxidative damage using near-infrared II-mediated photothermal/thermocatalytic effects for periodontitis treatment

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ABSTRACT

Periodontitis is a biofilm-related disease characterized by damage to the periodontal tissue and the development of systemic diseases. However, treatment of periodontitis remains unsatisfactory, especially with deep-tissue infections. This study describes rationally designed multifunctional photothermocatalytic agents for near-infrared-II light-mediated synergistic antibiofilm treatment, through modification of Lu-Bi₂Te₃ with Fe₃O₄ and poly(ethylene glycol)-b-poly(L-arginine) (PEG-*b*-PArg). Notably, 1064-nm laser irradiation led to photothermal/thermocatalytic effects, resulting in the synergistic generation of reactive oxygen species (ROS) and reactive nitrogen species (RNS) and consequent damage to the biofilm. This treatment was based on the thermoelectric and photothermal conversion properties of Lu-Bi₂Te₃, the peroxidase-like catalytic capacity of Fe₃O₄, and the guanidinium polymer, PEG-*b*-PArg. Oxidative damage to biofilm was further enhanced by H₂O₂, resulting in the effective elimination of biofilm both *in vitro* and *in vivo*. These findings suggest that this synergistic therapeutic strategy is effective for the clinical treatment of periodontitis.

Statement of significance

The current treatment for periodontitis involves time-consuming and labor-intensive clinical scaling of the teeth. The present study is the first to assess the efficacy of a photothermal catalyst for periodontitis treatment. This used near-infrared-II light at 1064 nm to induce oxidative damage in the biofilm, resulting in its degradation. The synergistic photothermal/thermoelectric effect produced deep tissue penetration and was well tolerated, and can kill the biofilm formed by periodontitis pathogens up to 5 orders of magnitude, effectively treating the biofilm-induced periodontitis.

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1. Introduction

Biofilms are structurally complex bacterial communities, where the bacteria are encased in a self-produced extracellular polymeric matrix (EPS) [1,2]. Biofilm-associated diseases represent a major public health hazard [2] with periodontitis being the sixth most common biofilm-associated disease worldwide [3]. Periodontitis is characterized by periodontal pockets, reduced tooth attachment,

and alveolar bone loss, eventually leading to tooth loss [4]. Clinical treatment of periodontitis involves removing the plaque biofilms by scaling, root planing, and the use of antibiotics [4]. However, these treatments remain unsatisfactory due to the limited access of non-surgical mechanical debridement to deep periodontal pockets and furcation areas [5], the low susceptibility of biofilm to traditional antibiotics [6], and the increasing antibiotic resistance of bacteria [7]. It is thus necessary to find an effective solution to this problem.

Photothermal therapy (PTT) uses photothermal agents (PTAs) to convert harvested light into localized heat energy. It is a popular choice for the eradication of free bacteria and biofilm through hyperthermia-induced cell membrane destruction and protein de-

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naturation [8,9]. However, there are few reports of the use of PTT for periodontitis treatment because of the difficulty of removing the deep-located lesions of periodontitis through traditional visible and first near-infrared (NIR-I) light-triggered PTT alone. [10]. Notably, NIR-II light-triggered PTT is a more appropriate alternative to NIR-I as it has the capability of deeper tissue penetration [11], and relatively high tolerance (i.e., tissue maximum permission exposure (MPE) of 1 W/cm² for NIR-II of 1064 nm and 0.33 W/cm² for NIR-I of 800 nm) [12,13]. It thus has the potential to solve the problems of PTT treatment of periodontitis. Thus, exploiting appropriate PTAs activated in the NIR-II window may have significant potential.

One nanomaterial, a bismuth-based chalcogenide Bi₂Te₃ nanosheet, was recently developed as a promising PTA for PTT due to its strong NIR-II absorption and high photothermal conversion efficiency (PCE) [14]. However, the thermoelectric effect of these nanosheets at near room temperature has rarely been explored in antibacterial applications. Thermoelectric materials can induce electron-hole separation, generate a voltage by utilizing temperature differences, and serve as thermocatalysts for the generation of the superoxide anion ($\cdot\text{O}_2^-$) and related catalytic activity [15]. It is worth noting that $\cdot\text{O}_2^-$ and its reduced form H₂O₂ are the two major reactive oxygen species (ROS) [16] that exert antibacterial action by inducing oxidative stress to damage biomolecules [17,18]. However, $\cdot\text{O}_2^-$ and H₂O₂ are not effective for removing biofilm. Notably, among various ROS, the hydroxyl radical ($\cdot\text{OH}$) is one of the most potent oxidizing agents [19] and can bind covalently to biomolecules causing damage to DNA, lipids, and proteins [20,21]. Peroxidase (POD)-like enzymes can catalyze hydrogen peroxide (H₂O₂) to produce $\cdot\text{OH}$. The resulting destruction of cell membranes could increase the sensitivity of bacterial cells to heat [22], and the heat generated from the PTT could subsequently enhance the quantity of $\cdot\text{OH}$ generated by the catalytic reaction [23].

In addition, $\cdot\text{O}_2^-$ and H₂O₂ can play additional bactericidal roles in cascade reactions that generate other chemicals, such as nitric oxide (NO) and peroxynitrite (ONOO⁻). The reaction between $\cdot\text{O}_2^-$ and NO generates the toxic byproduct, ONOO⁻, a reactive nitrogen species (RNS), that exerts nitrosative stress on biomacromolecules, thus killing bacteria. Thus, NO was introduced into the current treatments. Unlike conventional antibiotics, NO has been widely applied as a gas therapy as it has broad-spectrum bactericidal activities against biofilms [24]. It is reported to promote wound healing by accelerating collagen deposition during the recovery of wounds [25]. Recently, local NO release has been shown to protect against and partially reverse endothelial dysfunction in periodontitis, thereby protecting the cardiovascular system in patients with periodontitis [26]. Since NO is extremely reactive, a donor such as L-arginine (L-Arg), S-nitrosothiols (RSNOs), or N-diazoniumdiolates (NONOates) is used when designing a NO delivery system [27–30]. However, the rapid systemic clearance of RSNOs and the toxic NONOate byproducts limit their *in vivo* applications. Due to the presence of guanidine, biocompatible L-Arg can generate NO and L-citrulline catalyzed by NO synthase, H₂O₂, and singlet oxygen (¹O₂) [25,28,31–33]. In addition, these positively charged polar amino acids and their derivatives [25] could also bind to biofilm surfaces by electrostatic adsorption since the bacterial surfaces are negatively charged [34]. Therefore, synergy between the ideal NO donors and the PTT/ROS system can enhance the effectiveness of the anti-biofilm treatment. Considering the heat resistance of tissue and the MPE of NIR light, to fully demonstrate the potential, safety, and efficacy of this combined treatment strategy for periodontitis, the most direct and effective methods would be to further increase the thermoelectricity, improve the PCE, or synergize with other cascade methods to generate sufficient ROS/RNS.

In this study, a synergistic nanoplateform comprising PTT and heat-induced ROS/RNS was developed for eradicating biofilm and

promoting the recovery of infected sites (Fig. 1). The procedure involved the decoration of POD-like Fe₃O₄ and PEG-*b*-PArg on Lutetium-doped Bi₂Te₃ nanoplates to form BFA NPs (PEG-*b*-PArg-modified Lu-Bi₂Te₃@Fe₃O₄). As the photothermocatalyst, Bi₂Te₃ mediated NIR-II-triggered PTT for direct bacterial killing. The thermoelectric performance of the Bi₂Te₃ was further improved by using the Lu dopant, which can simultaneously reduce the κ_{ph} by alloy-scattering and optimizing the carrier concentration [35,36], resulting in more $\cdot\text{O}_2^-$ and H₂O₂ production during the PTT course. Notably, H₂O₂ could react with Fe₃O₄ to generate highly toxic $\cdot\text{OH}$ and catalyze PEG-*b*-PArg to produce NO. Further, ONOO⁻ was generated once NO reacted with $\cdot\text{O}_2^-$. Additionally, positively charged PEG-*b*-PArg facilitated the adhesion of BFA NPs to the negatively charged bacterial surface [37]. The generated RNS and ROS can act as broad-spectrum antibacterial agents [38,39], primarily through damaging the cell membrane and DNA [40,41], increasing the sensitivity of the bacteria to heat. This study demonstrated that the synergistic PTT/ROS/RNS treatment was effective for biofilm-induced periodontitis and could potentially be developed to treat other bacterial infections.

2. Methods

2.1. Materials

Reagents, including α -pinene, triphosgene, diethyl ether, N, N-dimethylformamide (DMF), 1-Amidinopyrazole hydrochloride, triethylene glycol, polyvinylpyrrolidone (PVP), bismuth oxide (Bi₂O₃), tellurium dioxide (TeO₂), sodium hydroxide (NaOH), glycerol, iron acetylacetonate, Lu₂O₃, Tm₂O₃, Yb₂O₃, Er₂O₃, and 3,3',5,5'-tetramethylbenzidine (TMB), were purchased from Aladdin (Shanghai, China). N- ϵ -benzyloxycarbonyl-L-lysine and HBr (5 mL, 33 wt.% in acetic acid) were obtained from Macklin (Shanghai, China). Hexane was bought from TIAN TAI (Guangzhou, China). Tetrahydrofuran (THF) was provided by Innochem (Beijing, China). MPEG2000-NH₂ was purchased from Ponsure Biological (Shanghai, China).

2.2. Biofilm growth and harvesting

Five hundred microliters of bacterial solution (10⁵ CFU/mL) were incubated in 48-well plates to form biofilms. *Escherichia coli* (*E. coli*, ATCC 25922) was cultured in lysogeny broth (LB), *Staphylococcus aureus* (*S. aureus*, ATCC 29213) was cultured in tryptic soy broth (TSB), and *Porphyromonas gingivalis* (*P. gingivalis*, ATCC 33277) and *Fusobacterium nucleatum* (*F. nucleatum*, ATCC 10953) were cultured in brain heart infusion (BHI) broth with 5 $\mu\text{g/mL}$ hemin and 1 $\mu\text{g/mL}$ menadione. *P. gingivalis* and *F. nucleatum* were cultured anaerobically. After the formation of the bacterial film, the medium was removed, the planktonic bacteria were carefully washed away with phosphate-buffered saline (PBS), and the biofilms on the 48-well plates were harvested.

2.3. Thermocatalytic antibacterial properties of Bi₂Te₃

To investigate the thermocatalytic antibacterial effects of Bi₂Te₃ NPs, planktonic bacteria and biofilms were both selected as models. After the addition of 100 $\mu\text{g/mL}$ of material to the bacterial solutions (2 \times 10⁵ CFU/mL) or established biofilms, the test groups were subjected to three thermal cycles in a water bath. In each cycle, the wells were first exposed to a temperature of 45 °C in the water bath for 5 min, followed by incubation at 25 °C for 5 min. The plate counting method was used to measure the antibacterial properties.

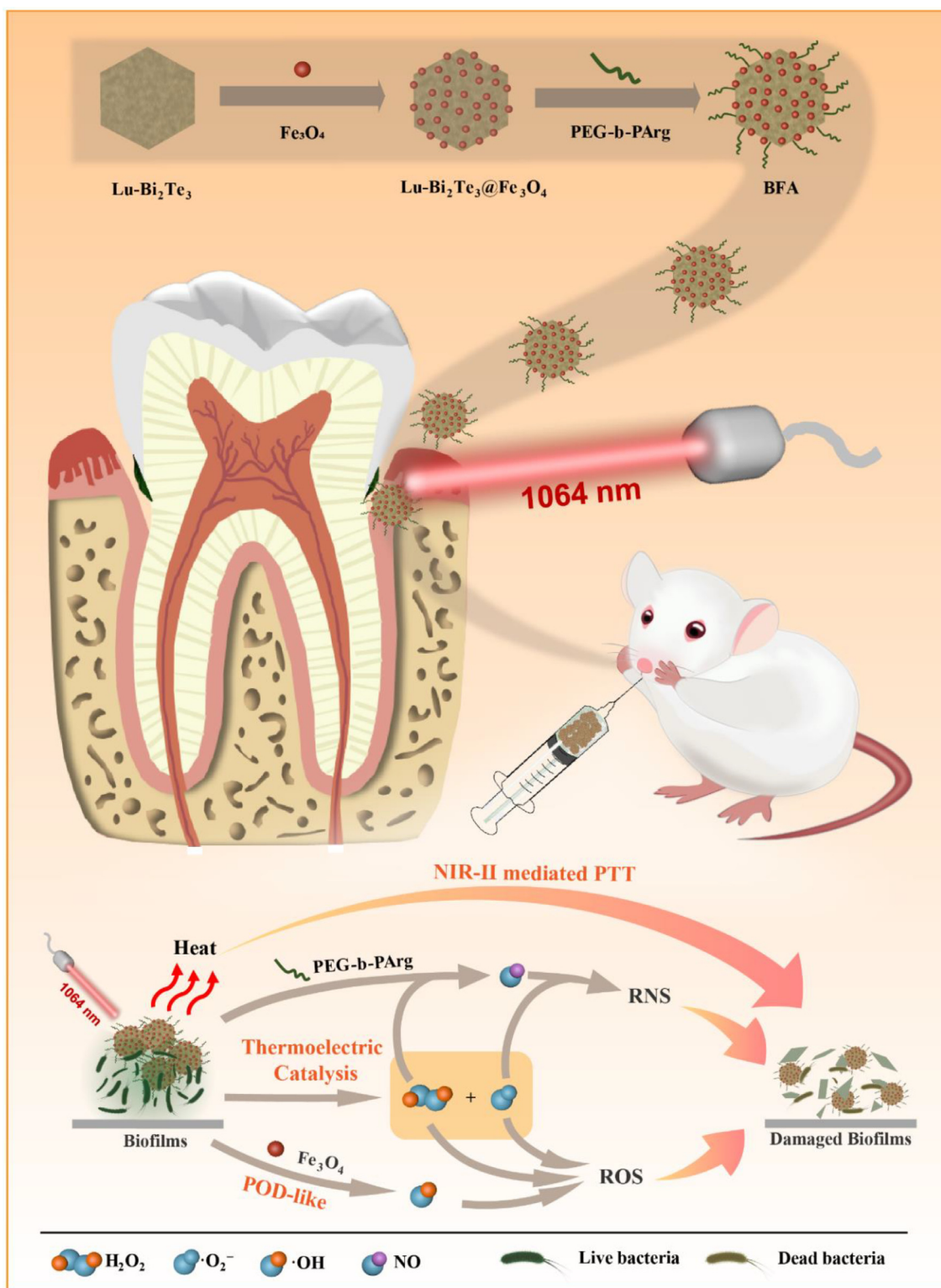


Fig. 1. Preparation and biomedical application of BFA. Lu-Bi₂Te₃@Fe₃O₄ was fabricated by a two-step solvothermal method. BFA was obtained by electrostatic attraction between Lu-Bi₂Te₃@Fe₃O₄ and PEG-*b*-PArg. A rat periodontitis model was used to evaluate the anti-biofilm activity of BFA, showing eradication of biofilms after treatment.

2.4. In vitro antibiofilm activity evaluation

The antibiofilm experiments were divided into twelve groups: (I) biofilms+PBS; (II) biofilms+H₂O₂; (III) biofilms+BFA; (IV) biofilms+BFA+H₂O₂; (V) biofilms+PBS+NIR-II; (VI) biofilms+H₂O₂+NIR-II; (VII) biofilms+BFA+NIR-

II; (VIII) biofilms+BFA+H₂O₂+NIR-II; (IX) biofilms+BFL; (X) biofilms+BFL+H₂O₂; (XI) biofilms+BFL+NIR-II; (XII) biofilms+BFL+H₂O₂+NIR-II. The final concentrations of nanoplates and H₂O₂ in the wells of the plates were 100 μg/mL and 200 μM, respectively. After incubation for 1 h, groups V- VIII and XI-XII were subjected to three therapeutic cycles. In each cycle,

the wells were first exposed to NIR (1 W/cm²) for 5 min, followed by incubation at 25 °C in a water bath for 5 min. After that, all groups were incubated at 37 °C for another 3 h.

A standard plate counting assay was employed to assess the antibiofilm activity of BFA. The bacteria embedded in biofilms were dispersed in sterile PBS. After serial dilutions in PBS, 100 µL of *E. coli* and *S. aureus* suspensions were spread onto agar plates and incubated at 37 °C. After 24 h, the bacterial colonies were analyzed as follows:

$$\text{Antibiofilm ratio (\%)} = \frac{N_{\text{control}} - N_{\text{experiment}}}{N_{\text{control}}} \times 100\%$$

P. gingivalis and *F. nucleatum* were diluted according to the gradient point plate, and the difference in the dilution power was counted to calculate the bactericidal ability.

Scanning electron microscopy (SEM) was used to observe the morphology of biofilms. The treated biofilms were fixed with 2.5% (w/v) glutaraldehyde at 4 °C for 4 h after being washed with PBS and dehydrated in gradient ethanol (30–100%). Finally, the samples were sprayed with gold for SEM observation.

SYTO 9 and propidium iodide (PI) stains (L13152 live/dead BacLight, Thermo Fisher Scientific) were employed to examine the live/dead state of bacteria in the biofilms. First, samples were stained with SYTO 9 (6 µM) and propidium iodide (30 µM) for 15 min in the dark at room temperature. Then, the stained biofilms were observed by a fluorescence microscope (Nikon, Japan).

2.5. Biocompatibility of BFA in vitro

Human gingival fibroblasts (HGFs) were incubated in Dulbecco's modified Eagle medium (DMEM) supplemented with 10% fetal bovine serum, 100 µg/mL streptomycin, and 100 U/mL penicillin. The cultures were maintained at 37 °C under 5% CO₂. MTT assays were used to measure the *in vitro* cytotoxicity of the BFA in HGFs. HGFs were seeded into 96-well plates (1 × 10⁴ cells per well) overnight and then co-incubated with various concentrations of BFA ranging from 0 to 400 µg/mL for another 24 h. After that, the medium was removed, MTT solution (0.5 mg/mL, 100 µL) was added to each well, and then the mixture was cultured for 4 h. Finally, the solution was replaced with 200 µL of dimethyl sulfoxide. After the plates were shaken at room temperature for 15 min, the absorption value at 490 nm of each well was determined with a spectrophotometric microplate reader (Bio Tek ELX808, USA).

For morphological observation, HGFs (2 × 10⁵ per well) were seeded in culture dishes overnight, and different concentrations of BFA were added and incubated for a further 24 h. After fixation with 4% paraformaldehyde, cells were stained with FITC-phalloidin (Solarbio, China) followed by DAPI (Beyotime, China) for 15 min each. The cells were then examined and imaged under confocal microscopy (Nikon, Japan). For analysis of the effects of BFA on cells, the cells were seeded and cultured as above, after which they were digested and washed twice with PBS. After staining with live-dead cell dye (Calcein/PI Cell Viability/Cytotoxicity Assay Kit, Beyotime, China) for 30 min, the cells were washed with PBS and analyzed by flow cytometry (FACSCalibur, Becton Dickinson, USA).

2.6. Rat experimental periodontitis model

All animal experiments complied with the protocols of the Jilin University Committee for Animal Use and Care. Twenty-five Wistar rats (male, 8 weeks old) were randomly assigned to five groups, namely, the (I) PBS, (II) H₂O₂, (III) BFA+H₂O₂, (IV) BFA+NIR-II, and (V) BFA+H₂O₂+NIR-II groups.

A model of experimental periodontitis was then established in all rats. Briefly, the bilateral maxillary first molars were ligatured

by a 4-0 silk placed around the cervical region in the subgingival region for 7 days. These rats received sugar water (100 g/L) to accelerate microbial biofilm formation. Before treatment, the ligatures were all removed. Treatment for periodontitis was performed in the presence of BFA, H₂O₂, and NIR once daily for 7 days. In detail, BFA (100 µg/mL) and/or H₂O₂ (200 µM) were first injected locally into the gingival sulcus of the inflamed areas, after which the groups requiring irradiation were then exposed to 1064 nm laser (1 W/cm², 3 cycles of 5 min each). After treatment, all the animals were sacrificed, and the maxillae and major organs were harvested for further analysis.

Swabs of the plaque biofilms were collected from the molars for bacterial colony counting. First, the bacterial suspensions were serially diluted and then plated on the LB agar. After incubation for 24 h at 37 °C, the growing colonies were counted. Next, the hard tissues, including maxillae and teeth, were scanned by micro-CT (Bruker SkyScan, Antwerp, Belgium). For histological analysis, the maxillae were fixed and immersed in paraffin wax and then cut into tissue slices (5 µm thick). The sections were then stained with hematoxylin and eosin (H&E) or Masson's trichrome stain.

2.7. Characterization

Transmission electron microscopy (TEM, Tecnai F20, FEI, USA) was employed to obtain TEM, HRTEM, HAADF-STEM, and EDS element mapping images. The zeta potentials of different nanoplates were measured by a Malvern Zetasizer (NanoZS, Malvern, UK). XPS spectra were collected by X-ray photoelectron spectroscopy (Thermo ESCALAB 250Xi, Thermo Fisher Scientific, USA) for element analysis. X-ray diffraction (XRD, D8 FOCUS, Bruker, Germany) was employed to determine the crystalline structure.

2.8. Statistical analysis

All the experiments were performed at least three times. The data are presented as the means ± standard deviation, and different letters above the bars in the graphs indicate significant differences at *p* < 0.05. Differences were assessed by one-way ANOVA followed by Tukey's test for multiple comparisons.

3. Results and discussion

3.1. Synthesis and characterization of BFA

Fig. 1 illustrates the preparation of BFA NPs. First, the thermoelectric performance of rare-earth-doped Bi₂Te₃ was investigated, including Lu, Tm, Yb, and Er. A maximal amount of thermocatalytic generation of ·O₂⁻ was obtained for Lu-Bi₂Te₃ consisting of 1% Lu (Fig. S1a, b). Notably, at a temperature difference of 20K, Lu-Bi₂Te₃ (100 µg/mL) could generate 13.68 µM ·O₂⁻ and 1.2 µM H₂O₂ (Figs. S1a and 3f). Therefore, Lu-Bi₂Te₃ was selected and functionalized with Fe₃O₄ via a two-step solvothermal method. The proportions of the individual elements were measured by inductively coupled plasma mass spectrometry (ICP-MS), with the result Bi 24.7459%, Te 22.6642%, Fe 18.5817%, and Lu 0.2340%, respectively. The crystalline structure of Lu-Bi₂Te₃@Fe₃O₄ was then determined by X-ray diffraction (XRD). The XRD patterns (Fig. S2) showed the co-existence of the diffraction peaks of Bi₂Te₃ at 27.7, 37.8, 41.1, 50.3, 57.1, and 62.3 and Fe₃O₄ at 30.1 (220), 35.4 (311), 43.1 (400), and 53.4 (422) as compared to the standard card of Bi₂Te₃ (JCPDS 15-0863) and Fe₃O₄ (JCPDS19-0629), confirming the successful preparation of Lu-Bi₂Te₃@Fe₃O₄ NPs. The as-obtained Lu-Bi₂Te₃@Fe₃O₄ was further functionalized with PEG-*b*-PArg polymer via electrostatic attraction. Specifically, the PEG-*b*-PArg block copolymer (Mn = ~9000 g/mol) was synthesized in three reaction steps: ring-forming, deprotection, and guanidation (Fig. S3). The

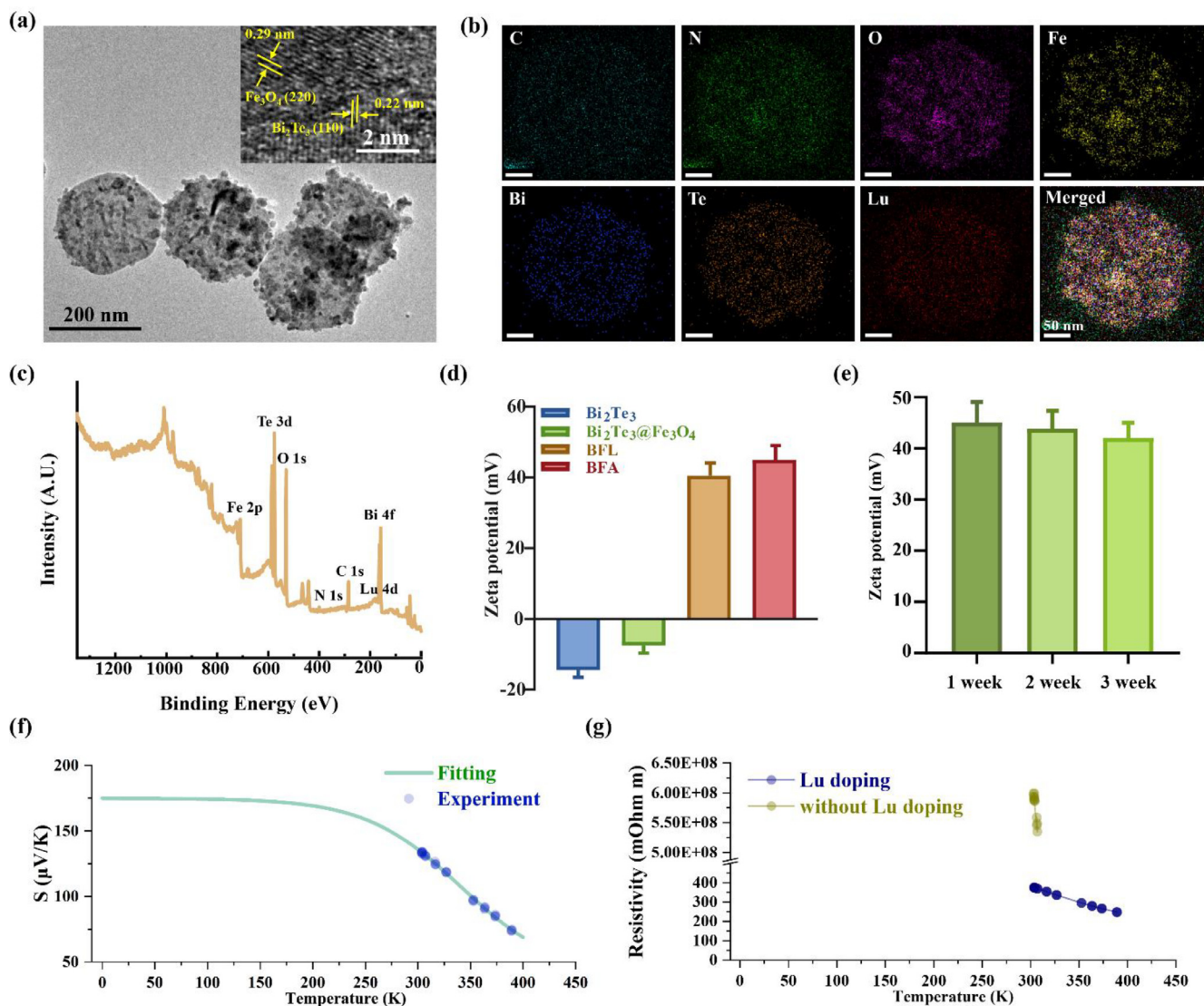


Fig. 2. Characterization of BFA. (a) TEM and HRTEM images of BFA. (b) Elemental mapping (C, N, O, Fe, Lu, Te, Bi) images of BFA. (c) XPS spectra of BFA. (d) ζ -Potentials of Lu-Bi₂Te₃, Lu-Bi₂Te₃@Fe₃O₄, BFL and BFA. (e) The zeta potential stability of the BFA nanoplates. (f) Measured and expanded Seebeck coefficient of Lu-Bi₂Te₃. (g) Temperature-dependent resistivity of Bi₂Te₃@Fe₃O₄ with or without Lu. Data represent mean \pm SD ($n = 3$) and were analyzed by one-way ANOVA ($p < 0.001$) followed by Tukey's post-hoc test. Different letters above the bars indicate significant differences at $p < 0.05$.

analysis of the chemical shifts and integral area from the ¹H NMR spectra confirmed the successful synthesis of PEG-*b*-PArg (Fig. S4). The peak at δ 8.02 ppm was attributed to the HNCO-protons and δ 7.81 ppm to the -NH₂ protons δ 1.18, 1.21, 1.3, 1.52, 2.74, and 3.47 ppm could be assigned to the protons of PArg. TEM images of the as-prepared BFA nanoplates (Fig. 2a, b) showed hexagonal nanoplates, 230 nm in diameter, with the deposition of granular materials on their surface, indicating that Fe₃O₄ NPs were successfully assembled with Lu-Bi₂Te₃. High-resolution TEM (HR-TEM) images further revealed periodically arranged lattice fringes with an interatomic spacing of 0.22 nm corresponding to the (110) planes of Lu-Bi₂Te₃ and 0.29 nm corresponding to the (220) planes of Fe₃O₄ (Fig. 2a). Further, the element mapping images revealed the homogeneous distribution of the C, N, O, Fe, Lu, Te, and Bi elements in the BFA (Fig. 2b). X-ray photoelectron spectroscopy (XPS) was used to analyze the BFA's elemental composition and surface valence states (Fig. 2c). The high-resolution Fe 2p spectrum (Fig. S5a) revealed characteristic peaks with binding energies of 710.4 eV and 714.8 eV that could be attributed to Fe (2p_{3/2}), and peaks at 723.8 eV and 731.7 eV to Fe (2p_{1/2}), consistent with the valent

values of Fe in Fe₃O₄ [42,43]. Meanwhile, the peaks at 159.1 eV and 164.4 eV were due to Bi (4f_{7/2}) and Bi (4f_{5/2}), respectively (Fig. S5b) and the two strongest peaks at 576 eV and 586.3 eV corresponded to Te (3d_{5/2}) and Te (3d_{3/2}), respectively (Fig. S5c). Furthermore, the PEGylation of Lu-Bi₂Te₃@Fe₃O₄ was confirmed by changes in the zeta (ζ) potential. At first, Lu-Bi₂Te₃@Fe₃O₄ NPs showed a negative ζ potential (-7.47 ± 2.2 mV), which increased to 45 ± 4 mV after the chelation with PEG-*b*-PArg. The formation of BFL (PEG-*b*-PLys-modified Lu-Bi₂Te₃@Fe₃O₄) NPs was also similarly confirmed (40.5 ± 3.6 mV), suggesting the positively charged guanidine or amine neutralized the negative charges of Lu-Bi₂Te₃@Fe₃O₄ (Fig. 2d). In addition, such large ζ potential values, long-term zeta potential stability (Fig. 2e), and long-term stability in physiological solution (Fig. S6) further reflected colloidal stability, which is critical for biological applications.

The thermoelectric properties of the samples were next investigated, as illustrated in Fig. 2f. Unsurprisingly, the Seebeck coefficient of the sample exhibited a typical negative temperature-dependent feature, indicating that the classic charge carrier dominant was not the same as that in the Ref. [44], where the

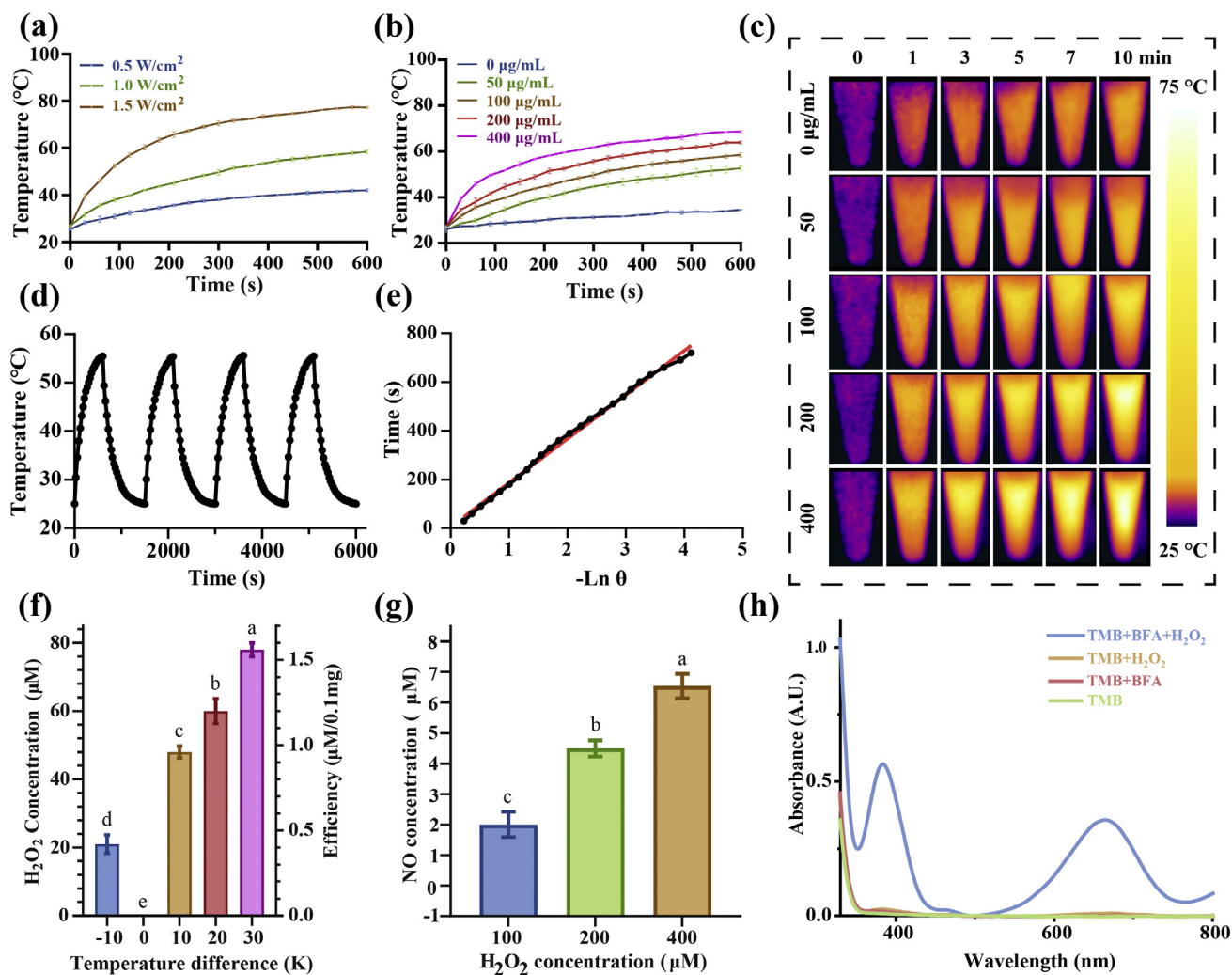


Fig. 3. Functional analysis of as-synthesized BFA. (a) Temperature changes of BFA (100 $\mu\text{g/mL}$) with different 1064 nm irradiation power (0.5, 1.0, 1.5 W/cm^2). (b) Temperature change curves of BFA at different concentrations (0, 50, 100, 200, 400 $\mu\text{g/mL}$) under NIR irradiation (1 W/cm^2). (c) Thermal images of BFA with different times and concentrations under 1064 nm irradiation (1 W/cm^2). (d) Photothermal stability test of BFA under irradiation with 4 on/off cycles. (e) Linear time data versus $-\ln \theta$ was obtained from the cooling period. (f) Lu-Bi₂Te₃-mediated (5mg/mL) H₂O₂ generation under different temperature differences. (g) NO release from BFA (100 $\mu\text{g/mL}$) under H₂O₂ incubation (0, 100, 200, 400 μM). (h) UV-vis absorption spectra of TMB solution with different treatments (BFA: 100 $\mu\text{g/mL}$). Data represent mean \pm SD (n = 3) and were analyzed by one-way ANOVA ($p < 0.001$) followed by Tukey's posthoc test. Different letters above the bars indicate significant differences at $p < 0.05$.

phonon scattering behaviors were more suited to describe the temperature-regulated Seebeck coefficient.

The Seebeck coefficient in metal systems can also be written as the Mott formula as follows:

$$S = \frac{\pi^2 k_B^2 T}{3e} \frac{\sigma'(\epsilon_F)}{\sigma(\epsilon_F)}$$

Where σ represents the energy-dependent electrical conductivity, the resistivity of the BFA sample at different temperatures was measured to verify the evolution pattern corresponding to the thermoelectric behaviors (Fig. 2g). On the one hand, it also showed obvious temperature-dependent characteristics. The measured sample resistivities indicated that the system used in this research was still semi-conductive. Thus, the intrinsic mechanism reflected from the Mott formula also revealed that the thermoelectric behavior of the sample was phonon-scattering controlled.

Interestingly, Lu doping significantly improved BFA's electrical conductivity. The reason may be that carrier tunneling appeared through heterogeneous interfaces among Fe₃O₄ NPs thus, their bulk electric conductivity increased. In addition, Lu-doped BFA showed thermoelectric performances as high as $\sim 100 \mu\text{V/K}$ level.

This phenomenon was also indicated in the subsequent *in vivo* applications.

3.2. Photothermal properties of BFA

The temperature of the BFA solutions (100 $\mu\text{g/mL}$) increased rapidly from 25 $^\circ\text{C}$ to 41.2 $^\circ\text{C}$ even at low power densities (0.5 W/cm^2), as shown in Fig. 3a–c. Additionally, the temperature of the BFA solutions at a low concentration (50 $\mu\text{g/mL}$) increased remarkably ($\Delta T = 16.8 \text{ }^\circ\text{C}$) compared with DI water ($\Delta T = 8 \text{ }^\circ\text{C}$) after a 10-min exposure to 1064 nm light at 1 W/cm^2 . The temperature of 400 $\mu\text{g/mL}$ BFA solutions was increased to 74 $^\circ\text{C}$ ($\Delta T = 49 \text{ }^\circ\text{C}$) at 1 W/cm^2 irradiation, indicating photothermal conversion. The corresponding absorption spectra in the near-infrared II region are shown in Fig. S7. Next, the photothermal stability of BFA was determined by irradiation with 1064 nm light at 1 W/cm^2 for 4 ON/OFF cycles. As shown in Fig. 3d, the temperature elevation curve of the BFA solution did not show any significant change during the repeated irradiation, revealing their photothermal stability. The PCE (η) of BFA was calculated to be 34.14 % in DI water (Fig. 3e). Thus, put together, these results confirm that BFA could be an ideal PTA for NIR-II PTT.

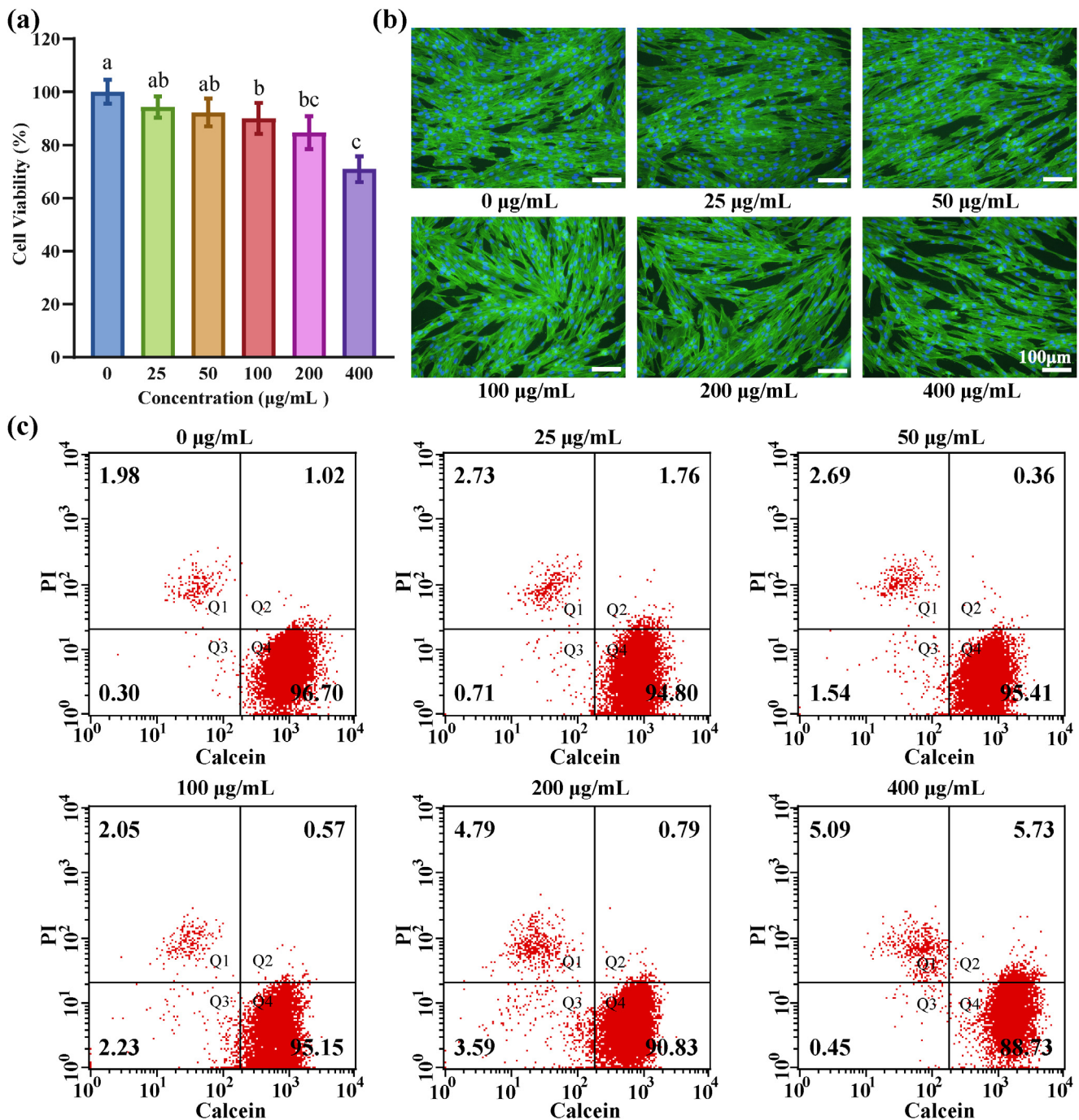


Fig. 4. Biosafety assay of BFA. (a) Proliferation of HGFs incubated with different concentrations of BFA (0, 25, 50, 100, 200, 400 µg/mL) for 24 h. (b) Fluorescent images of staining in HGFs after incubation with various concentrations of BFA for 24 h. (c) Flow cytometry was used to detect the proportion of live/dead cells with different concentrations of BFA in 24 h (Q4-live cell %). Data represent mean \pm SD (n = 3) and were analyzed by one-way ANOVA ($p < 0.001$) followed by Tukey's posthoc test. Different letters above the bars indicate significant differences at $p < 0.05$.

3.3. Detection of released $\cdot\text{OH}$ and NO gas release in vitro

NO release via ROS catalysis of guanidine was confirmed by the Griess assay. The detection principle is based on the fact that NO is readily oxidized to NO_2^- in aqueous solution, which reacts with the Griess reagent to generate colored compounds. The absorbance was recorded at 546 nm, and the content of NO could be calculated from the standard curve. As shown in Fig. 3g, the BFA-mediated NO production was H_2O_2 concentration-dependent within 100–400 µM. There was no NO production without H_2O_2 addition, and after being treated with 200 µM of H_2O_2 , 4.5 µM

NO was detected. Previous reports have shown that only 4 µM NO could effectively eradicate biofilms [25].

Moreover, TMB was employed to detect the generation of $\cdot\text{OH}$ through POD-like reactions, as it can be oxidized into blue-colored TMB (oxTMB) by $\cdot\text{OH}$ with an absorbance maximum at 652 nm. As shown in Fig. 3h, the solutions showed the strongest absorption peak at 652 nm in the presence of H_2O_2 (10 mM) and TMB (1 mM), indicating that the $\cdot\text{OH}$ generation was triggered as Fe^{2+} was oxidized by H_2O_2 . Furthermore, the catalytic activity was proportional to the BFA in the concentration range of 25–400 µg/mL (Fig. S8a). Since elevated temperatures can enhance POD-like cat-

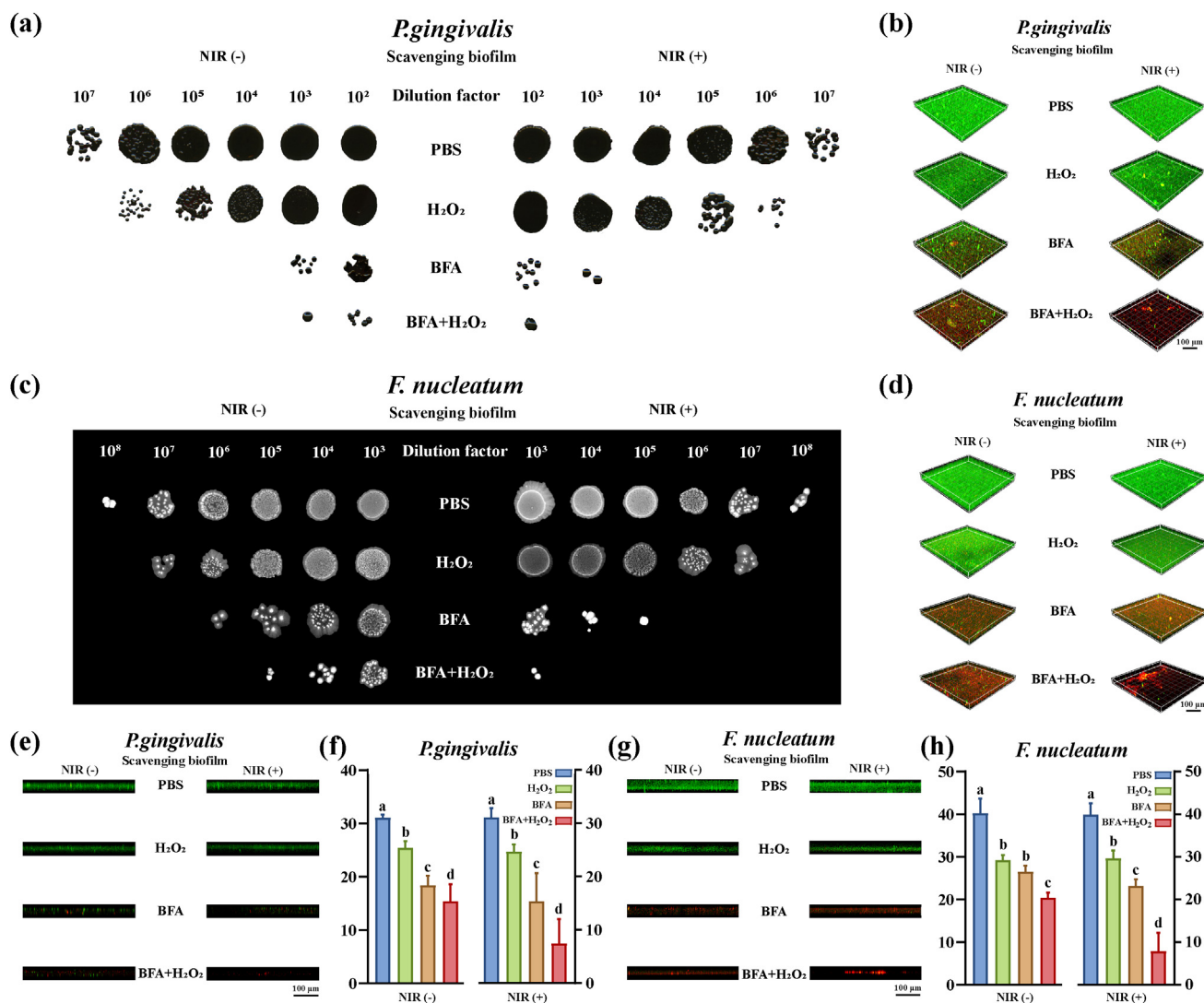


Fig. 5. Antibiofilm activity of BFA (100 μg/mL). (a,c) Images of bacterial colony formation after different treatments. (b,d) Live/dead 3D fluorescence staining images of biofilms after different treatments. (e,g) Fluorescence images of biofilm thickness. (f,h) The average thicknesses of biofilms in the different treatment groups were analyzed by one-way ANOVA ($p < 0.001$) followed by Tukey's post-hoc test. Different letters above the bars indicate significant differences at $p < 0.05$.

alytic capacity [22], the influence of temperature on the POD-like performance of BFA was investigated. As shown in Fig. S8b and c, the absorption intensity at 652 nm increased by 31.9% from 25–55 °C, indicating that the catalytic activity increased by 31.9%. Therefore, the enhanced reaction efficiency was attributed to the increased ionization with an increase in temperature [23]. Terephthalic acid (TA) was further employed to verify the generation of ·OH, based on TA could react with ·OH to produce fluorescent 2-hydroxyl terephthalic acid (TAOH) with an emission maximum at 435nm. As shown in Fig. S9, the obvious fluorescence peak confirmed the generation of ·OH.

3.4. In vitro biocompatibility

In addition to the physicochemical properties, biocompatibility is also essential for the bioapplications of BFA NPS. Thus, the *in vitro* cytotoxicity of different concentrations of BFA for human gingival fibroblasts (HGFs) was evaluated by MTT assays and Live/Dead cell staining, followed by flow cytometry. As shown in Fig. 4a, c, there was no obvious cytotoxicity after 24 h at BFA concentrations up to 100 μg/mL, while specific cytotoxicity was observed at 200 and 400 μg/mL, most likely due to ·OH gener-

ated by the POD-like catalysis. However, there were no noticeable changes in the cell morphology even at the high concentration of 400 μg/mL (Fig. 4b). In addition, the long-term toxicity of BFA, and the toxicities under various treatment conditions, are discussed in Supporting Information Fig. 10. These results indicate that BFA showed good biocompatibility *in vitro* and was consequently suitable for *in vivo* experiments.

3.5. In vitro antibiofilm activity

Encouraged by the positive effects of the BFA NPs, we investigated their synergistic anti-biofilm activity *in vitro* against the pathogenic periodontal bacteria, *P. gingivalis* and *F. nucleatum* (anaerobes), as well as the infection model bacteria *S. aureus* and *E. coli* (aerobic or facultative anaerobes, hereafter referred to as aerobes).

The plate counting method was first used to test the antibiofilm efficiency of the BFA NPs (Fig. S11). Lu-Bi₂Te₃ NPs alone were employed to exclude the effects of Fe₃O₄ and guanidium and reveal the thermoelectric catalytic abilities of BFA for antibacterial and biofilm removal. Notably, for planktonic bacteria, 75% *S. aureus* and 32.5% *E. coli* were killed under a temperature difference of 20 K

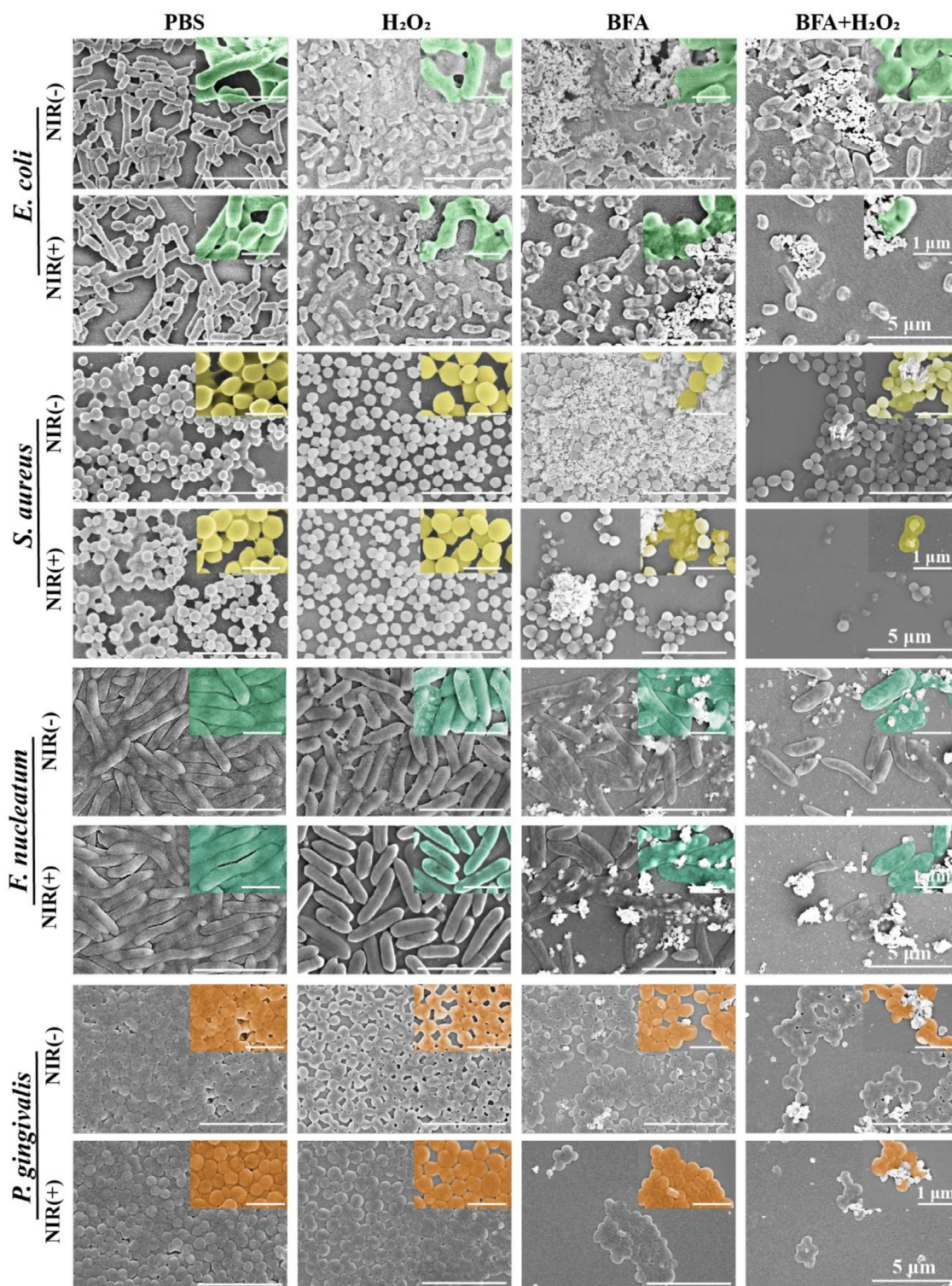


Fig. 6. Morphological analysis of biofilms (BFA: 100 μg/mL). SEM images of the morphological changes of biofilms after various treatments.

below 45°C in 3 thermal cycles (Fig. S12a), indicating that thermoelectric catalysis of Lu-Bi₂Te₃ could induce sufficient ROS to kill planktonic bacteria. However, only low antibiofilm efficiency could be observed under the same conditions (Fig. S12b), suggesting that a larger temperature difference or more prolonged treatment time was needed to generate sufficient ROS to eliminate biofilms. Incidentally, 3% H₂O₂ is commonly used in the clinical rinsing of periodontal pockets, and the residual H₂O₂ can be used for supple-

mentary treatment after rinsing. Thus, a low concentration of H₂O₂ can trigger the related reaction of BFA or BFL. When biofilms were incubated with BFL and H₂O₂, the antibiofilm efficacies were 15% and 12% for *S. aureus* and *E. coli*, respectively, suggesting that the toxic ·OH generated by the POD-like reaction exhibited a limited antibiofilm effect (Fig. S13a, b). In contrast, the inhibition rates of biofilms treated with BFA and H₂O₂ were 31.25% and 25% for *S. aureus* and *E. coli*, respectively, indicating that the generated NO

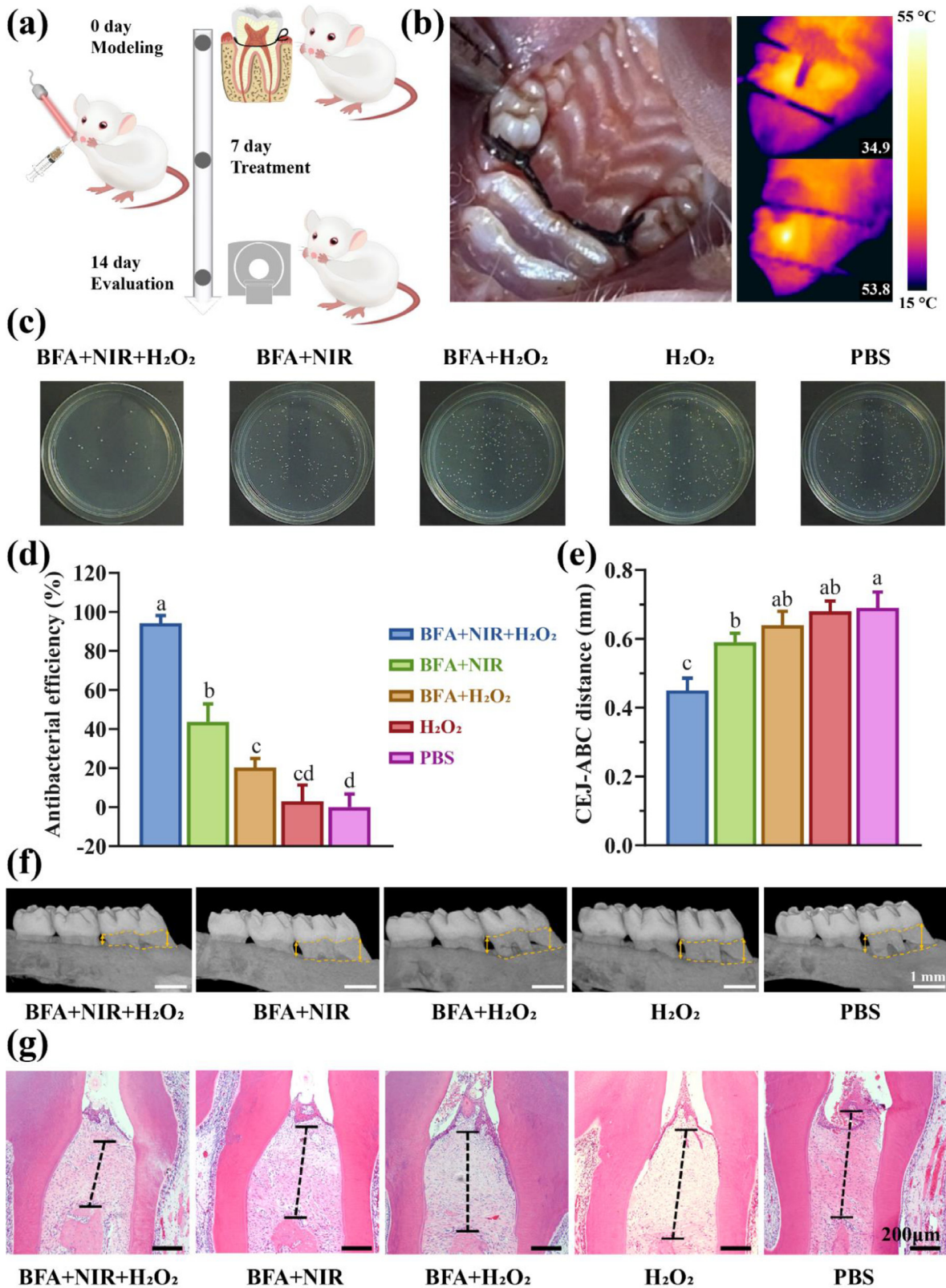


Fig. 7. *In vivo* anti-biofilm effects of BFA (100 µg/mL). (a) Schematic diagram of the process of periodontitis treatment. (b) *In vivo* real-time thermographic images under NIR irradiation (1064 nm, 1W/cm²). (c, d) Bacterial colonies separated from the infectious sites on agar plates and corresponding quantitative analysis of antibacterial efficiency. (e) Corresponding quantitative analysis of CEJ-ABC distance. (f) 3D reconstructions of the maxillary molar area by micro-CT. The yellow dotted lines mark the distance between CEJ and ABC, and the double arrows indicate the ABL in the mesiobuccal and distobuccal regions. (g) Images of H&E-stained periodontal tissues from different treatment groups. Data represent mean ± SD (n = 3) and were analyzed by one-way ANOVA (p < 0.001) followed by Tukey's post-hoc test. Different letters above the bars indicate significant differences at p < 0.05.

enhanced the treatment effects (Fig. S11b, c) due to the generated NO and ROS. The antibiofilm efficacies were 58.3% and 53% for *S. aureus* and *E. coli*, respectively, in the PTT/ROS synergistic treatment group (Fig. S11b, c). After treatment of the biofilms with BFL+H₂O₂+NIR-II, the antibiofilm efficacies reached 80% and 72% for *S. aureus* and *E. coli*, respectively (Fig. S13a, b). These enhanced antibiofilm properties may be related to the POD-like reaction induced by the addition of exogenous H₂O₂. The synergetic effect can be attributed to the heat produced in the PTT process that accelerated ·OH generation [45] and, consequently, ROS-mediated oxidative damage, enhancing the sensitivity of bacterial cells to heat [46]. Notably, when the biofilms were incubated with BFA+H₂O₂ and exposed to the 1064 nm laser, the antibiofilm efficacies were 97.5% and 92.5% for *S. aureus* and *E. coli*, respectively (Fig. S11b, c), demonstrating the enhanced antibiofilm activity of the PTT/ROS system in the presence of NO, indicating greater diffusion of NO into the interior of the biofilm [47]. In contrast, local hyperthermia only kills the bacteria on the biofilm surface [25]. Further, NO could also combine with ·O₂⁻ to produce the highly toxic peroxynitrite (ONOO⁻). Notably, *S. aureus* was more sensitive to antibiofilm treatments than *E. coli*, mainly because the former contained more negatively charged surfaces that made interaction with the positively charged surfaces of BFA NPs more feasible. Moreover, although the cell walls of *E. coli* are thinner [48], *E. coli* grow much faster than *S. aureus* [49].

We then used the gradient dilution method to explore the killing of anaerobic bacteria. In contrast to the aerobic bacteria, the anti-membrane effects were greatly improved in the anaerobic bacteria. It can be seen from Fig. 5a,c that the presence of exogenous hydrogen peroxide (200 μM) reduced nearly 1 log CFU, and the reduction was rapidly compensated for by the logarithmic growth of the remaining bacteria. BFA killed almost 2–3 log CFU of bacteria by thermoelectrocatalysis only. Interestingly, the synergistic effect of BFA+H₂O₂ and BFA+NIR resulted in essentially the same reduction in the numbers of *F. nucleatum*, reaching 3 log CFU, and *P. gingivalis*, reaching 4 log CFU. Under the combined action of the three agents, the bacterial biofilm was reduced by five orders of magnitude, indicating their coordination and joint action to achieve the best anti-membrane effect.

Scanning electron microscopy (SEM) was used to examine microstructural alterations in the biofilms after the different treatments. As seen in Fig. 6, there were numerous bacteria embedded in the extracellular polymeric substance (EPS), maintaining interconnections between the cells in the control group. EPS is composed mainly of proteins, extracellular DNA (eDNA), lipids, and polysaccharides, providing a stable 3-D structure for the biofilm to protect bacterial cells from the external environment and provide nutrition [50]. The bacteria also showed typical rod-shaped or spherical morphologies with integrated cell membrane structures. Surprisingly, numerous nanoplates were observed adhering to the biofilms due to electrostatic interactions. After H₂O₂ treatment, some cell walls appeared deformed, although most bacteria still clumped together, indicating that H₂O₂ could only cause limited damage to the bacteria. Both BFA+NIR-II and BFA+H₂O₂ killed more bacteria than the H₂O₂ group. The bacteria appeared collapsed, swollen, shriveled, or even cracked due to cell lysis [51]. Notably, the most severe damage to the bacteria was caused by treatment with BFA+H₂O₂+NIR-II, implying that PTT assisted by ROS and RNS resulted in significant antibiofilm activity.

Live/dead (green/red) staining assays were done to evaluate the synergistic antibiofilm effects. Green fluorescence-labeled STYO-9 indicated live bacteria, and red fluorescence-labeled PI indicated dead bacteria. Samples treated with BFA+NIR-II and BFA+H₂O₂ displayed relatively strong red fluorescent signals and relatively weak green fluorescent signals compared with those

treated with PBS, H₂O₂, NIR-II, H₂O₂+NIR-II, and BFA, indicative of biofilm degradation resulting from hyperthermia or ROS. Further, almost all biofilms emitted red fluorescence after treatment with BFA+H₂O₂+NIR-II, indicating that the cell membranes were severely damaged (Fig. 5b,d). In addition, the vast majority of bacterial biofilms were completely removed. After combined treatment, the antibiofilm effect was evaluated by the biofilm thickness (Fig. 5e,g). The thickness of *P. gingivalis* biofilm was significantly reduced from 31.09 ± 1.58 μm to 7.40 ± 4.26 μm, while that of *F. nucleatum* was reduced from 39.89 ± 2.48 μm to 7.85 ± 4.02 μm (Fig. 5f,h). This result also reflected significant biofilm removal.

3.6. In vivo antibiofilm performance of BFA

A model of experimental periodontitis was established in rats to explore the antibiofilm activity of BFA *in vivo*. The details of the establishment and treatment of animal periodontitis models are shown in the schematic diagram in Fig. 7a. The ∞-ligature method (Fig. 7b) was used on the first maxillary molars of the rats. The infected rats were randomly divided into five groups with different treatments (PBS, H₂O₂, BFA+H₂O₂, BFA+NIR-II, and BFA+H₂O₂+NIR-II). First, the *in vivo* photothermal performance of BFA-treated samples was evaluated (Fig. 7b). After NIR-II irradiation (1 W/cm², 5 min), the temperature of the region affected by periodontitis increased from 34.9 °C to 53.8 °C, demonstrating the ability of BFA to produce photothermal effects *in vivo*. After 7 days of treatment, the bacteria around the infected site were cultured and counted after spreading on plates for a quantitative evaluation of the antibiofilm activity after seven days of treatment. The antibacterial efficacy of BFA+H₂O₂+NIR-II reached 94.3 %, indicating its ability to destroy biofilm (Fig. 7c, d). Further, micro-CT analysis was used to determine the alveolar bone loss (ABL) due to inflammation (Fig. 7f). The degree of ABL is defined as the distance between the cemento-enamel junction (CEJ) and the alveolar bone crest (ABC), taking the average of the mesiobuccal and distobuccal distances. Notably, BFA+H₂O₂+NIR-II treatment decreased the linear CEJ-ABC distance compared to PBS, H₂O₂, BFA+H₂O₂, and BFA+NIR-II (Fig. 7e). Thus, the results verified that BFA-mediated synergistic therapy efficiently eradicated biofilms, inhibited inflammatory bone resorption, and promoted soft tissue repair. In addition, the *in vivo* biosafety was further evaluated by histological images of the stomach after gavage and H&E staining of the major organs, including the heart, lung, liver, spleen, and kidney (Figs. S14,15). The results revealed no damage or histological abnormalities. Based on these results, it can be concluded that BFA NPs hold great potential in the clinical therapy of biofilm-induced periodontitis.

4. Conclusion

In summary, a PTT and heat-mediated ROS and RNS synergistic system was established for the treatment of biofilm-induced periodontitis based on the photothermocatalytic activity of BFA NPs. The positive charges on the BFA NPs facilitated binding to the negatively charged bacterial surfaces. Further, the thermoelectric and photothermal effects of the NPs led to the simultaneous generation of PTT and ROS under 1064 nm irradiation. The generated ROS then reacted with Fe₃O₄ and PEG-*b*-PArg to generate ·OH and NO, leading to the effective eradication of the biofilm by the generated heat, ROS, and RNS both *in vitro* and *in vivo*. Further, the results of the study demonstrated that the released NO could also promote tissue healing by stimulating angiogenesis and alleviating the damage caused by periodontitis. Thus, this nanoplateform provides an advanced strategy for the treatment of periodontitis in the clinic as well as other biofilm-induced deep-tissue infections.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Acknowledgments

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Supplementary materials

Supplementary material associated with this article can be found, in the online version, at [doi:10.1016/j.actbio.2023.09.014](https://doi.org/10.1016/j.actbio.2023.09.014).

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