Mechanisms of damage prevention, signalling, and repair impact disease tolerance

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Abstract

The insect gut is frequently exposed to pathogenic threats and must not only clear these
potential infections, but also tolerate relatively high microbe loads. In contrast to the
mechanisms that eliminate pathogens, we currently know less about the mechanisms of
disease tolerance. We investigated how well-described mechanisms that either prevent,
signal, control, or repair damage during infection contribute to the phenotype of disease
tolerance. We established enteric infections with the bacterial pathogen *Pseudomonas*
entomophila in transgenic lines of *Drosophila melanogaster* fruit flies affecting *dcy* (a major
component of the peritrophic matrix), *upd3* (a cytokine-like molecule), *irc* (a negative regulator
of reactive oxygen species) and *egfr*[1] (epithelial growth factor receptor). Flies lacking *dcy*
experienced the highest susceptibility, while loss of function of either *irc* or *upd3* reduced
tolerance in both sexes. The disruption of *egfr*[1] resulted in a severe loss in tolerance in male
flies but had no substantial effect on the ability of female flies to tolerate *P. entomophila*
infection, despite carrying greater microbe loads than males. Together, our findings provide
evidence for the role of damage limitation mechanisms in disease tolerance and highlight how
sex differences in these mechanisms could generate sexual dimorphism in disease tolerance.

Introduction

Many insects thrive on decomposing and decaying organic matter containing a diversity of commensal and pathogenic microorganisms. Like most animals, insects have evolved diverse responses to infection, including behavioural avoidance of infection, physical barriers to pathogen entry and a variety of humoral and cellular immune responses [1–3]. These responses have been particularly well described in the fruit fly *Drosophila*, where signalling pathways such as *IMD* and *Toll* are recognised as major contributors to pathogen clearance [1,2,4–7]. In addition to mechanisms that reduce pathogen burdens, it is increasingly recognised that mechanisms promoting disease tolerance are equally important during recovery to a healthy state [8–12]. Disease tolerance is defined as the ability of hosts to maintain health despite harbouring relatively high pathogen loads, a phenotype that has been observed in several species, including insects [13–17] rodents [18,8,19]; birds [20,21]; and humans [22,23,11].

The mechanisms of pathogen clearance are well-described in many animal species [24], but we currently know less about the mechanisms underlying disease tolerance. Given that tolerance reflects the ability to maintain health independently of pathogen clearance, we might expect tolerance mechanisms to be related to processes such as detoxification, reduction of inflammation, or tissue damage control and cellular renewal [9,11,25]. Genome-wide association or transcriptomic studies in *Drosophila* have highlighted potential candidate genes underlying phenotypic variation in disease tolerance [14], but it remains unclear how many of these genes interact with known mechanisms of immunity and recovery.

Furthermore, almost all candidate genes for disease tolerance in *Drosophila* arise from systemic infections [14,26,27], leaving a gap in our knowledge about disease tolerance during orally acquired infections, which are especially relevant in the context of the ecology of most insects, that thrive on decomposing and decaying organic matter containing a diversity of both commensal and pathogenic microorganisms [28–30]. The insect gut is therefore frequently exposed to pathogenic threats and must be able not only to detect and clear these potential infections, but also be able to repair the resulting damage to gut tissues in order to tolerate relatively high numbers of ingested pathogens.

Here, we aimed to specifically test how well-established mechanisms that either prevent, reduce, or repair tissue damage contribute to the phenotype of disease tolerance. The *Drosophila* gut is a compartmentalized tubular organ which is structurally and functionally similar to the vertebrate intestinal tract [2,31–33]. We can consider several stages comprising

gut defence in *Drosophila* (***Fig. SI-1***). The first involves the physical barrier of the gut epithelia

and the peritrophic matrix (*PM*), which is a layer of chitin and glycoproteins that lines the insect

midgut lumen. The *PM* is functionally analogous to mammalian mucus membrane in the

digestive tract and acts as the first line of defence against invading pathogens [2,34]. A major

component of the *PM* is *drosocrystallin* (*dcy*). Loss-of-function mutations in *dcy* increase the

permeability of the peritrophic matrix to larger molecules and allow leakage of microbial cells,

including pathogens, into the haemolymph. *Dcy* deficient flies therefore exhibit increased

susceptibility to oral bacterial infections [2].

Another mode of defence during gut infections is the production of reactive oxygen species

(*ROS*) by the gut epithelia. For example, in response to ingested *Pseudomonas entomophila*,

ROS production is induced by two NADPH enzymes- *nox* (NADPH oxidase) and *duox* (dual

oxidase), while *irc* (immune-reactive catalase) negatively regulates *ROS* production once the

infection threat is controlled, which otherwise, would lead to cytotoxic effects [2,35,36]. *ROS*

production not only targets pathogens directly, but also plays additional roles in triggering

signalling pathways that lead to the production of *IMD-* or *Toll*-responsive antimicrobial

peptides [36–39].

The final stage in gut defence is to repair the damage caused during the infection. Damage-

signalling cytokine-like molecules *upd3* are released from damaged cells which trigger the

Jak/Stat-pathway, stimulating the proliferation of intestinal stem cells (*ISCs*) and their

differentiation into enterocytes (*ECs*) via *egfr*[1] (epidermal growth factor receptor) signalling

[40–42]. Flies lacking *Jak/Stat* or *Egfr* are therefore highly susceptible to bacterial infections

due to their inability to repair and renew damaged tissue [40,42,43].

To investigate how these mechanisms of damage prevention (*dcy*), signalling (*upd3*) control

(*irc*) and renewal (*egfr*) contribute to disease tolerance during gut infections we employed oral

infections in *Drosophila* transgenic lines with loss-of-function in each of these genes on a

common genetic background (*w^{1118}*). We orally challenged these flies with three infection

doses of *Pseudomonas entomophila* and then quantified their effects on survival, pathogen

loads and disease tolerance responses during period of peak infection burden.

Materials and methods

<u>*Fly strains:*</u> The following fly stocks were obtained from the Bloomington Stock Centre, Indiana:

dcy (*w^{1118}*; Mi{ET1}^{CrysMB08319}; FB#*26106*) [44], *irc* (*w^{1118}*; Mi{ET1}^{IrcMB11278}; *FB#29191*) [45],

(#2079), *upd3* ($w^{1118;}$ P{XP}^{upd3d11639}; *FB#19355*) [46]. These lines were subsequently

isogenised by backcrossing onto the same w^{1118} background (*VDRC stock# 60000*) for at least

10 generations. The egfr^{t1} mutant was a kind gift from Carla Saleh (Pasteur Institute, Paris)

and previously isogenised to w^{1118} first by replacing the chromosomes not containing the

mutation using balancer chromosomes and then by backcrossing at least ten times

to w^{1118} line [47]. All fly lines were maintained in plastic vials (12 ml) on a standard sugar-

cornmeal medium at a constant temperature of 25°C (±2°C).

Bacterial culture preparation: To test the impact of bacterial infection on fly survival we used

the gram-negative bacteria *Pseudomonas entomophila*, that commonly infects a broad range

of insects and other invertebrates. In flies, *P. entomophila* infection mainly occurs in the

intestinal epithelium and eventually causes death [35]. To obtain bacterial cultures for oral

exposure, we inoculated frozen isogenic bacterial stock cultures stored at -80℃ onto fresh

15ml LB broth (media composition) and incubated overnight at 37°C with shaking at 120rpm

(revolutions per minute). The overnight cultures were diluted 1:100 into 500 ml of fresh LB

broth and incubated again at 30°C with shaking at 120rpm. At the mid-log phase (OD_{600}=0.75),

we harvested the bacterial cells by centrifugation at 5000rpm for 15 min and re-suspended

the bacterial pellet in 5% sucrose [48]. The final inoculum was adjusted to three different

bacterial concentrations or infection dose OD_{600}=10 (low dose), OD_{600}=25 (medium dose) and

OD_{600}=45 (high dose).

Experimental design: Measuring tolerance as a linear reaction norm requires collecting

matching data on survival and pathogen loads, ideally from the same individual. However, this

is challenging in the fly model because quantifying microbe loads requires destructive

sampling. Instead, we considered the vial as the unit of replication, and employed a split vial

design (*Fig*. *SI-2*). In total, we set up 500 infection vials, split across 2 experimental blocks

(n=10 vials for OD_{600}=10 and OD_{600}=45; n=30 vials for OD_{600}=25, for each combination of sex

(2) /fly line (5) – with each vial containing 27-30 flies for all doses). Following oral bacterial

exposure (see below) each vial containing 25 flies of each infection treatment, sex and fly line

combination were split into two vials for measuring (1) survival following infection (15

flies/combination) and (2) internal bacterial load (10 flies/combination) (*Fig. SI-2)*. This split-

vial design allowed us to use replicate-matched data for both the proportion of flies surviving

and the average bacterial load for each replicate vial to estimate the linear relationship

between fly survival and internal bacterial load for each fly line.

Oral infection assay: Before infecting flies we prepared infection vials by pipetting 350µl of

standard agar (1L triple distilled H_2O, 20g agar, 84g brown sugar, 7ml Tegosept anti-fungal

agent) onto the lids of 7ml tubes (bijou vials) and allowed it to dry. Simultaneously, we starved

the experimental flies in 12ml agar vials for 4-5 hours. Once the agar in the bijou lids dried,

we placed a filter disc (Whattmann-10) in the lid and pipetted 80µl of bacterial culture directly

onto the filter disc. For control (mock) infections, we replaced bacterial culture with a 5%

sucrose solution. We then orally exposed flies inside the bijou vials for 18-hours and then

transferred the flies onto fresh vials containing standard sugar-cornmeal medium [48].

Bacterial load measurement: To test whether variation in mortality of experimental flies after

P. entomophila infection is explained by the ability to clear infection, we measured bacterial

load using 3–5-day old flies (w^{1118} and transgenic flies) following three different doses of _P._

entomophila enteric infection. We used either OD_{600}=10 (low dose), OD_{600}=25 (medium dose)

or OD_{600}=45 (high dose). For OD_{600}=25 (medium dose), we measured bacterial load at three

timepoints (immediately after oral exposure 0-15 minutes, 24-hours, and 96-hours) following

P. entomophila infection. To confirm oral bacterial infection, we thoroughly surface-sterilised

flies (group of 3) with 70% ethanol for 30-60 seconds and then rinsed twice with sterile distilled

water. We plated the second wash on LB agar plates and incubated overnight at 30°C to

confirm that surface bacteria were successfully removed after alcohol sterilization. We

transferred flies onto 1.5ml micro centrifuge tubes and homogenized using a motorized pestle

for approximately 30-60 seconds in 100µl LB broth (n=30 homogenates/sex/infection

treatment/fly line). We performed serial dilution of each homogenate up to 10^{-6}-fold and added

4µl aliquot on a LB agar plate. After this, we incubated the plate overnight for 18-hours at 30°C

and counted the resultant bacterial colonies manually. We note that mock-infected control fly

homogenates did not produce any colonies on LB agar plates [48].

Statistics

Survival following oral infection: We analysed survival data using a mixed effects Cox model

using the R package 'coxme' [49]. We specified the model as: survival ~ fly line * treatment *

sex * (1|vials/block)_,_ with 'fly line', 'treatment' and 'sex' and their interactions as fixed effects,

and 'vials' nested in 'block' as a random effect for w^{1118} and flies deficient of damage prevention

and repair mechanisms in gut-epithelia.

Internal bacterial load: We found that residuals of bacterial load data were non-normally

distributed when tested using Shapiro–Wilks's test. Hence, we first log-transformed the data

and then confirmed that the log-transformed residuals were still non-normally distributed.

Subsequently, we used a non-parametric Kruskal-Wallis test to test the effects of each fly line,

that is, control w^{1118} and transgenic flies for males and females separately following oral _P._

entomophila infection.

Measuring disease tolerance: Finally, to understand how damage signalling and repair
mechanisms affect disease tolerance in males and females during oral *P. entomophila*
infection, we analysed the linear relationship between fly survival against bacterial load by
fitting linear models [8,50,10,16,51,15]. We assessed differences in disease tolerance (fly
survival with increasing bacterial load) by fitting 'fly line' and 'sex' as categorical fixed effects,
'average bacterial load ($\log_{10}$)' as a continuous covariate, and their interactions as fixed
effects. Significant interaction effects between fly line and bacterial load would indicate that
the slope of the relationship between fly survival and load varies between fly lines, that is, the
tolerance response differs between lines. Because our interest was to quantify the effect of
damage prevention and repair mechanisms on disease tolerance, we compared the slope
estimates of each of the transgenic lines with the slope of w^{1118} line using a pairwise
comparison (f-test).

Results

1. <u>Flies lacking *dcy* are more susceptible to oral *P. entomophila* infections than those</u>
<u>lacking components that minimise, signal or repair damage</u>

Following oral infection with three different doses of *Pseudomonas entomophila*, flies with
disrupted components of damage prevention (*dcy*), signalling (*upd3*), renewal (*egfr^1*)and
regulation (*irc*), were all significantly more susceptible to oral *P. entomophila* infections
compared to w^{1118} flies (*Fig. 1, Table SI-1*; *Fig. 1A* for infection dose $OD_{600}=25$; *Fig. 1B* for
infection dose $OD_{600}=10$; *Fig. 1C* for infection dose $OD_{600}=45$). Among these lines, *dcy*
knockouts were particularly susceptible to infection *Fig.1* and *Fig. SI-3* for survival*, Fig. 1,*
Table SI-2 for hazard ratio. The effect of each gene disruption on the survival of flies following
infection was similar in males and females (fly line x sex x treatment interaction = non-
significant, *Table SI-1*), compared to control w^{1118} flies at both lower ($OD_{600}=10$) and higher
infection ($OD_{600}=45$) doses (*Fig. 1, Table SI-1*).

Figure 1. Kaplan Meier curves for females and males of w^{1118} and transgenic flies with
loss-of-function in gut-epithelial response, exposed to oral *P. entomophila* of infection
dose *(A). OD_{600}=10* , n=10 vials per treatment/sex/fly line *(B). OD_{600}=25,* n=30 vials
per reatment/sex/fly line *(C). OD_{600}=45.* n=10 vials per treatment/sex/fly line. For all
doses, 15-17 flies per replicate vial).

2. <u>Both w^{1118} and flies with disrupted tissue damage prevention and repair mechanisms
    show sex differences in bacterial load during oral infections</u>

The higher susceptibility of all transgenic flies to oral bacterial exposure could either be caused
by their inability to supress the bacterial growth or due to their inability to tolerate the damage
inflicted during oral infection. To distinguish between these mechanisms, following the
overnight oral exposure to *P. entomophila*, we first quantified internal bacterial loads at 15
minutes, 24-hours and 96-hours. We observed a peak in microbe loads at 24h post infection
in all fly lines (see ***Fig.** SI-4, Table SI-3)*. All fly lines showed sex-differences at 24-hours peak
load, though by 96-hours following oral infection this sex difference was no longer present in
flies lacking *upd3* or *egfr* expression (***Fig***. *SI-4,* ***Table*** *SI-3*). Flies lacking *irc* expression always
exhibited levels of bacterial load similar to the w[1118] flies across all infection doses (***Fig***. *2,*
Table *SI-3*).

Figure 2. Bacterial load measured as CFUs- colony forming units using infection dose **(A).** *OD$_{600}$= 10 (low dose)* **(B).** *OD$_{600}$=25 (medium dose)* and **(C).** *OD$_{600}$=45 (high dose)* after 24-hours following oral bacterial exposure with *P. entomophila* for *w^{1118}* flies and transgenic lines [n=30 vials of which 12-15 flies/treatment/sex/fly line for bacterial load measurement]. Significantly different transgenic lines from control w^{1118} flies are denoted with '*' analysed using pairwise comparisons between w^{1118} and for males and females respectively.

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3. <u>Damage repair mechanisms mediate sex differences in disease tolerance during oral</u>

<u>bacterial *P. entomophila* infections</u>

While some of the variation in survival between fly lines (***Fig**. 1*) may be explained by variation
in resistance [that is, their ability to clear infection (***Fig**. 2*)], some of that variation may also
arise due to differences in tolerance. We were therefore interested in measuring disease
tolerance in these lines using the reaction norm of survival relative to bacterial loads, where
the slope of the linear relationship reflects the degree of tolerance: steep negative slopes
indicate a rapid mortality with increases in pathogen loads (low tolerance), while less steep or
flat slopes reflect relatively more tolerant host [8,50,16,52]. We focused on flies infected with
the intermediate dose (*OD_{600}=25*), as we had 30 replicate-paired measurements of survival
and microbe loads. We found that the disruption of damage prevention, signalling and repair
genes showed reduced tolerance, measured as the rate at which fly survival changed with
bacterial load relative to w^{1118} flies (***Fig**. 3, **Table** 2*). Both males and females lacking the major
component of the peritrophic matrix *dcy* showed significantly reduced survival (***Figs**. 1 and 3*),
indicating the general importance of damage preventing epithelial barrier in defence against
oral infections [2]. Flies lacking the damage renewal mechanisms *$egfr^1$* showed sex-
differences in disease tolerance (***Fig**. 3, **Table** 1 and 2*). We found that the disruption of *$egfr^1$*
resulted in males, but not females becoming less tolerant of *P.entomophila,* showing a much
steeper decline in survival with increasing microbe loads compared to females (**Fig**. 3).
Notably, egfr^1 males are less tolerant than w1118 despite harbouring comparable microbe
loads (Fig. 2).
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Figure 3. **(A).** The relationship between fly survival (measured as average lifespan) and bacterial load (as mean CFUs – colony forming units), analysed using linear models for female and male flies (w^{1118} and flies lacking damage prevention and repair mechanisms in gut-epithelia). Each point shows data for average lifespan and mean bacterial load (CFUs) of 30 vials (with each vial containing 25 individual flies/fly line/sex combination) after 24-hours post oral bacterial exposure. The data shown here are for the medium infection dose $OD_{600}=25$. **(B).** shows the slope of the linear reaction norm extracted from the linear models. [grey '*' indicates significant difference in tolerance between males and females in tolerance to bacterial infections (interaction between the bacterial load and the sex for each fly line measured using ANCOVA, Table 1), maroon '*' indicates that fly lines (flies lacking damage prevention and repair mechanisms in gut-epithelia) are significantly different from w^{1118}, analysed using pairwise f-test from linear norm estimates see Table 2].

Sex	Source	df	Sum of Sq.	F ratio	p
Female	Fly line	4	66.33	71.6	<0.01
	Bact. load	1	19.27	83.3	<0.01
	Fly line x Bact. load	4	10.02	10.8	<0.01
Male	Fly line	4	84.60	62.8	<0.01
	Bact. load	1	28.39	84.3	<0.01
	Fly line x Bact. load	4	14.88	11.0	<0.01

Table 1. Summary of ANCOVA. To assess differences in infection tolerance (fly survival with increasing bacterial burden) following oral *P. entomophila* infection with $OD_{600}=25$ infection dose, after 24-hours. We analysed ANCOVA and fitted 'sex' as categorical fixed effects, 'average bacterial load' as a continuous covariate and their interactions as fixed effects for each of the fly lines (w^{1118} and flies lacking damage prevention and repair mechanisms in gut-epithelia).

Sex	Fly line	SSE	F ratio	p
Female	*dcy* vs. w^{1118}	7.32	4.85	0.03
	egfr[1] vs. w^{1118}	18.32	1.88	0.17
	irc vs. w^{1118}	17.75	28.00	<0.01
	upd3 vs. w^{1118}	18.33	29.79	<0.01
Male	*dcy* vs. w^{1118}	10.66	2.17	0.14
	egfr[1] vs. w^{1118}	29.07	21.41	<0.01
	irc vs. w^{1118}	16.06	18.72	<0.01
	upd3 vs. w^{1118}	24.87	27.01	<0.01

Table 2. Summary of pairwise comparisons (f-test) of linear slope estimates from linear reaction norm for w^{1118} flies and flies lacking damage prevention and repair mechanisms in gut-epithelia.

Discussion

In the present work we tested how mechanisms of damage prevention (*dcy*), signalling (*upd3*) control (*irc*) and renewal (*egfr*) contribute to disease tolerance during enteric infection. We present evidence that all these mechanisms contribute to disease tolerance during bacterial gut infection, and that some of these effects are sexually dimorphic. Previous transcriptomic, genome-wide association (GWAS) or microarrays studies have identified several candidate genes associated with disease tolerance, including - *CrebA, grainyhead and debris buster, dFOXO* [14,26,27,53]. However, all this work has focused on flies infected systemically by directly injecting bacteria into the fly. Here, we investigated tolerance during the natural oral route of infection, and we took a more targeted approach to specifically investigate how some of the well-described tissue damage prevention and repair mechanisms affect disease tolerance during enteric bacterial infections.

Though repairing infection-damage is crucial to fly survival, we found that flies lacking damage-preventing (*dcy*) are particularly susceptible to oral infections compared to those lacking components that minimise, signal or repair damage. In other words, preventing damage is clearly preferable to repairing damage from the perspective of fly survival. This result is consistent with previous work showing that loss-of-function in *dcy* increases the peritrophic matrix width making the gut leaky and compromising gut barrier function during oral bacterial infections [54,44,55,56,2]. We also found increased bacterial loads relative to the w[1118] control line, measured after 24-hours following infection in both male and female *dcy* knockouts. This is likely because of the combination of leaky gut and pore-forming toxin produced by *P. entomophila* [2] resulting in higher bacterial growth in the fly haemolymph.

In the case of *upd3*-knockout flies, we found reduced survival and higher bacterial loads compared to w[1118] flies. Previous work has shown that in response to *P. entomophila* infections, excessive reactive oxygen species (*ROS*) produced by host cells destroy the gut epithelia and block the gut repair process [57,58,55]. The *JNK* and *Hippo* pathways are activated in damaged enterocytes (*ECs*), which produce *upd3*, in turn activating the *Jak/Stat* pathway in intestinal stem cells (*ISCs*). We found that both male and female *upd3* knockout flies showed reduced tolerance and this is likely because in the absence of *upd*3 released from damaged cells the *Jak/Stat*-pathway activation is reduced, which is further necessary for *ISCs* proliferation and differentiation into enterocytes (*ECs*), together renew the damaged tissues [55,2,31]. We also found that functional disruption of *irc* results in lower bacterial loads, and this is expected because loss of this negative regulator of ROS results in higher *ROS* levels [2], leading to improved bacterial clearance.

Regarding the effects of these damage limitation mechanisms on disease tolerance, overall,
we found that both male and female w^{1118} flies were quite tolerant of enteric bacterial infections
(reflected in their relatively flat tolerance slopes, **Fig** 3. **Table** 2), while disrupting most damage
prevention and repair mechanism lowered disease tolerance (decline in slopes relative to
w^{1118}). While we found reduced tolerance in all knockout lines, disrupting some components
of damage limitation had particularly severe effects on disease tolerance. Significant
reductions in disease tolerance were observed in flies with disrupted *irc* and *upd3*, and in these
fly lines the effect was comparable in both sexes. *Irc*-deficient flies are unable to regulate *ROS*
levels which would lead to increased cytotoxic effects [2,36] while *upd3* cytokine molecules
are important for the activation of the *Jak/Stat* pathway [43,40]. In case of *dcy*-knockout flies,
health did not deteriorate much further, possibly because it was already too poor to worsen
further (**Fig**. 3).

We observed the fastest decline in tolerance in male flies lacking *egfr^1*, but the disease
tolerance of female *egfr^1* knockouts appeared unaffected. This sex difference in tolerance may
arise as the result of sex differences in gut physiology and repair. Recent work has
demonstrated that during oral *Ecc15* infection, males showed significantly lower gut *ISCs* in
response to infection, while female had higher *ISCs* and were resistant to infection and other
stress [59]. The differentiation and proliferation of *ISCs* (intestinal stem cells) via *Jak/Stat*
signalling into *ECs* (enterocytes) via *egfr* is indispensable for tissue damage renewal. Loss of
egfr^1 signalling might therefore be felt more severely in males than in females, explaining why
male but not female *egfr^1* knockouts showed severe a decrease in disease tolerance. To date,
only a small proportion of studies have compared sex-differences in intestinal immunity, with
the majority of work focusing on one particular sex, usually females [60,41,59,61].

Another possibility for the observed sex-difference in damage repair process, might relate to
gut-plasticity such as gut-remodelling. For instance, females of mammals such as mice
extensively remodel their guts, increasing both digestive and absorptive capacity depending
on the nutritional demands of lactation [62]. The remodelling of the gut might be one of the
possible driving factors for dimorphism in gut immunity, since males and females differ in their
nutritional needs [61]. Studies using *Drosophila* have shown that males and females can make
different diet or nutritional choices in accordance with their reproduction role and demand [63]
and the *Drosophila* midgut plastically resizes in response to changes in dietary sugar and
yeast [64]. Whether gut remodelling and nutritional choice-demand causes sex-differences in
damage repair process during disease tolerance remains a question for future research.

Concluding remarks

Although host mechanisms of immune-mediated clearance are key for pathogen defence and
elimination, there is an increasing appreciation that additional defence mechanisms which
prevent, signal, repair or renew the extent of tissue damage are also key to infection outcomes
by promoting disease tolerance [25,65]. Tissue damage repair mechanisms that promote
disease tolerance are interesting from a therapeutic perspective [9,10,66]. For instance, in
mice, mechanisms that prevent or repair damage have been shown to confer disease
tolerance during malarial *Plasmodium* infection and also during co-infections by pneumonia
causing bacteria (*Legionella pneumophila*) and influenza virus [67,68]. Understanding how
tissue damage prevention and repair mechanisms contribute to disease tolerance may also
help explain how other arthropods are able to vector bacterial and viral infections without
substantial health loss [15,69,70]. In summary, our results show that the disruption of tissue
damage repair processes resulted in severe loss of disease tolerance and highlight how sex
differences in some damage repair mechanisms could generate sexual dimorphism in gut
immunity.

Data accessibility

All the raw data and analysis code can be accessed under a Creative Commons 4.0 License
at https://doi.org/10.5281/zenodo.6510215 [71]. An earlier preprint is available from the
biological preprint server *bioRxiv* at:
https://www.biorxiv.org/content/10.1101/2021.10.03.462916v1 [72].

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Authors' contribution

A.P and P.F.V conceived and designed the experiments; A.P carried out experiments with
assistance from K.M.M; A.P analysed the data; A.P and P.F.V wrote the manuscript.

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Competing interests

The authors declare no competing interests.

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622 **Supplementary information for**

624 **Mechanisms of damage prevention, signalling, and repair impact the ability of**

625 ***Drosophila* to tolerate enteric bacterial infection**

626 Arun Prakash[1,2]*, Katy M. Monteith[1], Pedro F. Vale[1]*

630 **Supplementary figures**

640 **Supplementary tables**

<u>Figure S1</u>. Schematic representation of *Drosophila* gut-epithelial immune response following

enteric infection. Several stages of damage prevention and repair, epithelial response in the

Drosophila gut can be found. ***Stage-I***: involves the physical barrier the peritrophic ⊏ matrix

(*PM* - layer of chitin and glycoproteins) that lines the *Drosophila* midgut lumen. A major component

of the *PM* is ***dcy*** (*drosocrystallin*) and loss-of-function mutations in *dcy* increase the width of the

PM, increasing permeability to pathogens. ***II***: production of reactive oxygen species (*ROS*) by the

gut epithelia - enteric infections cause massive destruction of the gut epithelium and in response

to ingested pathogens, *ROS* production is induced by *nox* (NADPH oxidase) and *duox* (dual

oxidase), while ***irc*** (immune-reactive catalase) negatively regulates *ROS* production by

suppressing the cytotoxic effects of *ROS* once the infection threat is lessened, avoiding

immunopathology. In addition, *ROS* production is known to trigger signalling pathways the *IMD* or

Toll that leads to the production of antimicrobial peptides (*AMPs*) critical for pathogen clearance

in the gut. ***III***: damage renewal process after infection - The final stage in gut defence is to repair

the damage caused during enteric infections. Damage-signalling cytokine-like molecules ***upd3***,

released from damaged cells trigger the *Jak/Stat*-pathway, stimulating the proliferation of intestinal

stem cells (*ISCs*) and their differentiation into enterocytes (*ECs*) via ***egfr[1]*** (epidermal growth factor

receptor) signalling which are indispensable for maintaining homeostasis and renewing the

damaged cells/tissues. Figure created using Biorender.

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Figure S2. Split-vial experimental design to assay (1) survival (15-17 flies/combination in a
vial) and (2) internal bacterial load (12-15 flies/combination in a vial) following oral bacterial
infection with Pseudomonas entomophila to test how epithelial immune response including
damage prevention and tissue repair mechanisms in Drosophila gut contribute to (3). disease
tolerance. For the split-vial design, after oral exposure with each vial containing 25 flies (of
each infection treatment, sex, fly line combination) were divided into 2 vials, each for survival
(15-17 flies) and bacterial load (12-15 flies). Each point in disease tolerance panel (3)
represents replicate-matched data [n=30 vials/infection treatment/sex/fly line – with each vial
containing 27-30 flies] from survival (1) and bacterial load (2).

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Figure S3.

Estimated hazard ratios for males and female flies (w^{1118} control flies and flies with absence of fully functional gut-epithelial response) calculated from the survival curves. A greater hazard ratio (>1) indicates higher susceptibility to infection. ['*' indicates that the transgenic flies are significantly different from w^{1118} flies for males and females respectively].

703 **Figure S4.** Bacterial load measured at 24 hours after OD_{600}=25 of oral *Pseudomonas*

704 *entomophila* infection for male & female flies of w^{1118} and flies with deficient damage repair

705 mechanisms in *Drosophila* gut. "*" indicates significant differences in males and females of

706 each fly line (w^{1118} and transgenic flies) analysed using Kruskal-Wallis test.

Supplementary tables

Table SI-1. Summary of mixed effects Cox model, for male and female w^{1118} & flies with *loss-of-function* in in the gut-epithelial response orally infected with 3 different concentration/doses of *P.entomophila*. We used 3-5 day old adult males and females of each fly lines (w^{1118} & flies with deficient damage repair mechanisms in gut) and specified the model as: Survival ~ Treatment x Sex x Fly line (1|vial/block), with 'Treatment', 'Sex' & 'Fly line' as fixed effects, and 'vials' nested in 'block' as a random effects. The table shows model output (ANOVA) for survival post oral infection for w^{1118} flies & flies with *loss-of-function* in in the gut-epithelial response.

Infection dose	Source	Loglik	Chisq	df	p
OD_{600}=10	Treatment	-12880	968.61	1	< 0.001
	Sex	-12872	17.367	1	< 0.001
	Fly line	-12669	404.70	4	< 0.001
	Treatment x sex	-12669	0.9114	1	0.33
	Treatment x fly line	-12652	33.944	4	< 0.001
	Sex x fly line	-12650	3.9894	4	0.40
	Treatment x sex x fly line	-12647	6.4149	4	0.17
	Random effect vial/block	Std dev 8.88E-04			
OD_{600}=25	Treatment	-37499	3058.87	1	< 0.001
	Sex	-37487	25.046	1	< 0.001
	Fly line	-37257	459.75	4	< 0.001
	Treatment x sex	-37250	14.685	1	< 0.001
	Treatment x fly line	-37240	18.773	4	< 0.001
	Sex x fly line	-37236	7.8494	4	0.09
	Treatment x sex x fly line	-37235	2.9252	4	0.57
	Random effect vial/block	Std dev 1.92E-03			
OD_{600}=45	Treatment	21144	3256.2	1	< 0.001
	Sex	21141	5.5753	1	< 0.001
	Fly line	21101	80.198	4	< 0.001
	Treatment x sex	21101	1.0625	1	0.30
	Treatment x fly line	21098	5.7909	4	0.21
	Sex x fly line	21094	6.6203	4	0.15
	Treatment x sex x fly line	21094	1.8525	4	0.76
	Random effect vial/block	Std dev 0.019			

722 **Table SI-2.** Summary of estimated hazard ratio relative to w^{1118} from the cox proportional
723 model. A hazard ratio (>1) indicates that flies lacking damage prevention and repair
724 mechanisms in gut-epithelia are more susceptible to oral *P. entomophila* infection than w^{1118}
725 flies.

	Fly line	Sex	Estimate	p	lower 95%	upper 95%
OD10	*dcy*	Female	3.99	<0.01	3.24	4.91
		Male	3.59	<0.01	2.87	4.49
	Egfr[1]	Female	2.09	<0.01	1.68	2.61
		Male	1.60	<0.01	1.26	2.04
	irc	Female	1.51	0.0005	1.20	1.90
		Male	1.26	0.065	0.99	1.60
	upd3	Female	2.15	<0.01	1.74	2.67
		Male	1.56	0.0002	1.24	1.98
OD25						
	dcy	Female	1.52	<0.01	1.32	1.74
		Male	1.52	<0.01	1.32	1.73
	Egfr[1]	Female	1.37	<0.01	1.20	1.55
		Male	1.37	<0.01	1.21	1.55
	irc	Female	1.28	<0.01	1.13	1.45
		Male	1.31	<0.01	1.16	1.48
	upd3	Female	1.31	<0.01	1.15	1.48
		Male	1.26	<0.01	1.11	1.42
OD45	dcy	Female	1.56	<0.01	1.32	1.84
		Male	1.47	<0.01	1.25	1.74
	Egfr1	Female	1.43	<0.01	1.21	1.68
		Male	1.69	<0.01	1.42	2.00
	irc	Female	1.39	<0.01	1.17	1.64
		Male	1.36	0.0003	1.15	1.61
	upd3	Female	1.36	0.0003	1.15	1.60
		Male	1.50	<0.01	1.27	1.78

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	Sex	Fly line		Mean diff	Z	p
15 min	Female	egfr1	w^{1118}	3.50	0.77	0.43
		irc	w^{1118}	-7.83	-1.73	0.08
		upd-3	w^{1118}	-11.03	-2.44	0.01
		dcy	w^{1118}	-11.16	-2.47	0.01
	Male	egfr1	w^{1118}	29.56	6.55	< 0.001
		dcy	w^{1118}	28.96	6.423	< 0.001
		upd-3	w^{1118}	28.96	6.42	< 0.001
		irc	w^{1118}	28.033	6.21	< 0.001

	Sex	Fly line		Mean diff	Z	p
24 hours load	Female	dcy	w^{1118}	24.30	5.388	<0.001
		upd-3	w^{1118}	22.23	4.930	<0.001
		egfr1	w^{1118}	-7.233	-1.604	0.108
		irc	w^{1118}	-18.96	-4.206	<0.001
	Male	upd-3	w^{1118}	28.70	6.364	<0.001
		dcy	w^{1118}	25.90	5.743	<0.001
		egfr1	w^{1118}	-7.233	-1.604	0.10
		irc	w^{1118}	-14.16	-3.141	0.001

	Sex	Fly line		Mean diff	Z	p
96 hours load	Female	dcy	w^{1118}	26.90	5.965	< 0.001
		upd-3	w^{1118}	6.100	1.352	0.17
		irc	w^{1118}	-5.166	-1.145	0.25
		egfr1	w^{1118}	-8.566	-1.899	0.057
	Male	dcy	w^{1118}	26.50	5.876	< 0.001
		egfr1	w^{1118}	22.73	5.041	< 0.001
		upd-3	w^{1118}	20.36	4.516	< 0.001
		irc	w^{1118}	17.56	3.895	< 0.001

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