Cytotoxic CD4^{+} T cells driven by T-cell intrinsic IL-18R/MyD88 signaling predominantly infiltrate *Trypanosoma cruzi*-infected hearts

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Abstract:

Increasing attention has been directed to cytotoxic CD4$^+$ T cells (CD4CTLs) in different pathologies, both in humans and mice. The impact of CD4CTLs in immunity and the mechanisms controlling their generation, however, remain poorly understood. Here, we show that CD4CTLs abundantly differentiate during mouse infection with the intracellular parasite *Trypanosoma cruzi*. CD4CTLs display parallel kinetics to Th1 cells in the spleen, mediate specific cytotoxicity against cells presenting pathogen-derived antigens and express immunoregulatory and/or exhaustion markers. We demonstrate that CD4CTL absolute numbers and activity are severely reduced in both *Myd88$^{-/-}$* and *Il18ra$^{-/-}$* mice. Of note, the infection of mixed-bone marrow chimeras revealed that WT but not *Myd88$^{-/-}$* cells transcribe the CD4CTL gene signature and that *Il18ra$^{-/-}$* and *Myd88$^{-/-}$* CD4$^+$ T cells phenocopy each other. Moreover, adoptive transfer of WT CD4$^+$GzB$^+$ T cells to infected *Il18ra$^{-/-}$* mice extended their survival. Importantly, cells expressing the CD4CTL phenotype predominate among CD4$^+$ T cells infiltrating the infected mouse cardiac tissue and are increased in the blood of Chagas patients, in which the frequency of CD4CTLs correlates with the severity of cardiomyopathy. Our findings describe CD4CTLs as a major player in immunity to a relevant human pathogen and disclose T-cell intrinsic IL-18R/MyD88 signaling as a key pathway controlling the magnitude of the CD4CTL response.

Introduction:

CD4CTLs are present in viral infections, cancer and autoimmune diseases (Cheroutre & Husain, 2013; Juno et al., 2017; Takeuchi & Saito, 2017). Although more frequently found in chronic conditions, CD4CTLs have also been described during acute viral infection (Brien et al., 2008; Brown et al., 2012; Fang et al., 2012; Jellison, et al., 2005; Wilkinson et al., 2012). At present, however, there are few studies on the CD4CTL response to infection with non-viral intracellular pathogens (Burel et al., 2016; Canaday et al., 2001; Kotov et al., 2018; Krueger et al., 2021). The role of CD4CTLs in immunity against intracellular parasites and the mechanisms operating in the generation and maintenance of this cell subset are poorly understood.

Following the recognition of the cognate antigen-MHC complex and under the influence of cytokines secreted by antigen presenting cells (APCs), naïve $CD4^+$ T cells proliferate and differentiate into diverse subsets, including Tfh, Th1, Th2 or Th17, with varied effector functions. Different pathogen-derived molecular patterns (PAMPs) elicit distinct innate immune pathways, resulting in tailored Th responses against the infectious agent (Kara et al., 2014). Interestingly, single-cell heterogeneity in the transcriptional profile of effector $CD4^+$ T cells, dictated in a microbe-specific manner, has been recently found in the gut (Kiner et al., 2021). Additionally, tissue-derived factors can also be involved in defining $CD4^+$ T cell phenotypes (Poholek, 2021). In this context, the mechanism regulating the differentiation of CD4CTLs remains an open and relevant question. Although some authors consider CD4CTLs functional variants of Th1 cells, there is also evidence that CD4CTLs might constitute a Th1-independent subset, directly differentiating from naïve $CD4^+$ T cell precursors, or even a heterogeneous population congregating cytolytic lymphocytes that originate from

different T-cell subsets, such as Treg, Th1 and Th2 cells [reviewed in (Cheroutre &

Husain, 2013) and (Takeuchi & Saito, 2017)].

Receptors belonging to the TLR and IL-1R families are upstream of the MyD88

adaptor molecule and are expressed both in myeloid and lymphoid cell lineages.

MyD88-dependent signaling in innate cells can influence Th1 cell differentiation by

inducing the release of IL-12 or IFN-γ (Joffre et al., 2009; Takeda et al., 1998). The T-

cell intrinsic MyD88 adaptor function was also shown to be essential for the Th1

response in different contexts. The identity of the receptor acting upstream of MyD88

on T cells, however, was not always determined (Frazer et al., 2013; LaRosa et al.,

2008) and remains a matter of debate. Early *in vitro* studies have shown that IL-18

synergizes with IL-12 in the induction of IFN-γ production and T-bet expression by

CD4$^+$ T cells and, therefore, impacts Th1 development (Robinson et al., 1997).

Intriguingly, however, the IL-18 contribution for a robust Th1 response *in vivo* has not

always been confirmed (Haring & Harty, 2009; Monteforte et al., 2000). ST2 (IL-33

receptor) and IL-1R have also been implicated in the establishment of Th1 responses to

viral infection (Baumann et al., 2015) and immunization (Ben-Sasson et al., 2009;

Schenten et al., 2014), respectively. Previously, our group identified the crucial role of

T cell-intrinsic IL-18R/MyD88 signaling for the reinforcement and maintenance of the

Th1 program *in vivo,* in response to mouse infection with *Trypanosoma cruzi,* in which

Th1 cells have a key protective function (Oliveira et al., 2017; Rodrigues et al., 2012).

T. cruzi is an intracellular protozoan parasite and the etiologic agent of Chagas

disease (*American trypanosomiasis*), one of the most important parasitic diseases in the

Western Hemisphere. Chagas disease is an important cause of heart failure, stroke,

arrhythmia and sudden death, being the leading cause of cardiomyopathy among

younger individuals in Latin America (Bern, 2015; Nunes et al., 2018). Here we

showed that, CD4$^+$ T lymphocytes with a CTL phenotype are abundantly present in the

spleen of mice infected with *T. cruzi* and display *in vitro* and *in vivo* Ag-specific

cytotoxicity against APCs. Of note, we found that cells with a CTL phenotype

predominate among CD4$^+$ T lymphocytes infiltrating infected cardiac tissue. Using

mixed bone marrow (mix-BM) chimeras, we show that T cell-intrinsic IL-18R/MyD88

signaling plays a crucial role for the expansion/survival of CD4$^+$ T cells expressing the

CTL gene signature *in vivo*. In accordance with results obtained in mix-BM chimeras,

we found that absolute numbers of CD4 T cells displaying cytotoxic markers and

activity were severely reduced in *Myd88$^{-/-}$* and *Il18ra$^{-/-}$* mouse lineages. Moreover,

adoptive transfer of WT CD4$^+$GzB$^+$ T cells to *Il18ra$^{-/-}$* mice increase survival of this

susceptible mouse strain to infection. Interestingly, the majority of CD4$^+$GzB$^+$ T cells in

WT infected mice express high levels of immunoregulatory molecules such as, Tim-3,

Lag-3, CD39 and PD-1. Finally, and importantly, we detected the presence of CD4$^+$ T

cells expressing perforin in the blood of patients with the severe cardiac form of Chagas

disease and correlation analyses point to a possible pathogenic role of these cells in the

chronic phase of Chagas myocarditis. To our knowledge, the present study is the first to

extensively characterize CD4CTLs generated in response to a protozoan pathogen in a

murine model and to elucidate a central mechanism that accounts for their

expansion/survival.

Results:

CD4$^+$ T cells with cytolytic phenotype are abundantly present in the spleen of mice

infected with T. cruzi

CD4CTLs express granzyme B (GzB) and perforin (PRF), which are major

constituents of CD8CTL and NK cell-granules that promote target cell death in a

number of ways (Afonina et al., 2010). Here, we reveal the presence of a

TCRαβ$^+$CD8α$^-$NK1.1$^-$CD4$^+$GzB$^+$ T cell population, which represents around 30% of

the CD4$^+$ T cells in the spleen of C57BL/6 (B6) mice, in the acute phase of infection

with *T. cruzi* (**Figures 1A** and **1B**). Equivalent percentages of CD4$^+$PRF$^+$ T cells were

found (**Figure 1C**) and the majority of CD4$^+$GzB$^+$ T cells express PRF and the cytolytic

marker 2B4 (CD244) (**Figures 1D** and **1E** and Figure 1-figure supplement 1A). Of

note, most CD4$^+$GzB$^+$ T cells (> 80%) do not express IFN-γ at day 14 post-infection

(pi), the peak time-point of the T cell response, and although CD4GzB$^+$ and CD4IFN-γ$^+$

cells follow similar kinetics in the spleen, the absolute number of CD4$^+$GzB$^+$ T cells

was superior to that of CD4$^+$IFN-γ$^+$ cells, at every time point of the infection (**Figures**

1F and **1G**). It is known that intracellular parasitism by *T. cruzi* Y strain in the spleen is

at its highest point between day 12 and 15 pi, concomitant with the histologically

observed massive destruction of parasitized splenic macrophages (Cordeiro et al., 1997).

Therefore, there is a coincidence between parasite titers in the spleen and the frequency

and absolute numbers of CD4$^+$GzB$^+$ T cells. We also observed an increase in the

percentage of degranulating CD4$^+$ T cells at day 14 pi, comparable to the CD8$^+$ T cells,

as inferred by staining with anti-CD107a (LAMP-1) mAb, (**Figure 1H**), although

CD8CTLs are present at higher percentage (Figure 1-figure supplements 1B-E and 1G)

and absolute number (Figure 1-figure supplements 1F and 1H). In summary, these data

show the remarkable induction of CD4$^+$ T cells with cytolytic potential during infection

with *T. cruzi*, an effector subpopulation whose appearance in the spleen parallels and

largely outnumbers that of classic GzB-negative IFN-γ$^+$ Th1 cells.

CD4$^+$ T cells from infected spleen exert Ag-specific cytotoxicity

To ascertain the presence of CD4$^+$ T lymphocytes with cytolytic function, we

performed a redirected cytotoxicity assay, with anti-CD3 mAb–coated B cell blasts as

target cells that were co-incubated with either highly purified effector (CD44^{hi}) CD4 T

cells sorted from the spleen of infected mice, or naive (CD44^{lo}) CD4 T cells from non-

infected controls. The CTL activity was observed only when effector CD4$^+$ T cells were

employed (**Figure 2A**). In order to determine if the CD4CTL killing capability is

dependent on GzB- and PRF-mediated killing, we performed the cytotoxic assays in the

presence of the GzB and PRF inhibitors, Z-AAD-CMK and Concamycin A,

respectively. As shown in **Figure 2-figure supplement 1A,** the killing of target cells

was abolished in this condition, demonstrating that the cytolysis mediated by CD4CTLs

in *T. cruzi*-infected mice depends on GzB and PRF, as previously shown for tumor-

specific CD4CTLs (Quezada et al. 2010). Antigen-specific cytotoxicity, using highly

purified CD4$^+$ T cells, was also assayed *in vitro* against an I-A^{b+} macrophage cell line

(IC-21), loaded or not with *T. cruzi* amastigote total protein extract. Results shown in

Figure 2B and **Figure 2-figure supplement 1B** demonstrate that CD4CTLs with

cognate cytotoxic activity are present in the spleen of infected mice. FasL is expressed

on CD8$^+$ and CD4$^+$ T cells at the immunological synapse following Ag-triggered

degranulation and participates in CD4CTL-mediated lysis of target cells (Bossi &

Griffiths, 1999; Brown et al., 2009; Kotov et al., 2018). As shown in **Figure 2B,**

addition of anti-FasL mAb significantly inhibited the specific lysis of the target cells,

demonstrating the involvement of the FasL/Fas pathway in the killing process.

We tested the *in vivo* killing of target splenocytes loaded with class II-restricted

peptides (SA85-1.1c and d), derived from a protein of the *T. cruzi* transialidase

superfamily (Millar & Kahn, 2000) (**Figure 2C** and **Figure 2-figure supplement 1C).**

The detailed Ag-specific repertoire of CD4CTLs could not be further assessed because

of the scarce definition of parasite-derived CD4 epitopes in the literature. To

circumvent this, we infected mice with ovalbumin (OVA)-expressing Y strain

trypomastigotes (Y-OVA) (Gomes-Neto et al., 2018) and compared the *in vivo*

cytotoxic response against known OVA-derived CD4 and CD8 epitopes: $OVA_{323-339}$ and

$OVA_{257-264}$, respectively. As shown in **Figure 2D**, the same level of specific killing was

attained against targets loaded with class I- or class II-restricted OVA peptides.

Together, these experiments confirmed the presence of a $CD4^+$ T cell population with

Ag-specific cytolytic function against MHC class II-restricted epitopes in the spleen of

mice infected with *T. cruzi.*

$CD4^+GzB^+$ T cells express transcription factors typical of CTLs

We then investigated the expression of transcription factors (TFs) typical of

cytotoxic CD8 T cells. T-bet and Eomesodermin (Eomes) are known to bind to the

promoters of *Gzmb* and *Prf1* (Glimcher et al., 2004; Intlekofer et al., 2005; Pearce et al.,

2003) and were shown to be expressed in CD4CTLs (Curran et al., 2013; Eshima et al.,

2012; Qui et al., 2011). **Figures 2E** and **2F** show that the vast majority of $CD4^+GzB^+$ T

cells express T-bet, but not FoxP3, the master gene of Treg cells. In accordance with the

cytolytic potential of $CD4^+GzB^+$ T cells in our model, 60% of the $CD4^+GzB^+$ T cells

express Eomes, while only a small percentage of GzB-negative $CD4^+$ T cells are

$Eomes^+$ (**Figure 2G**). Of note, at day 14 pi, the vast majority of both GzB^+ and GzB-

negative $CD4^+$ T lymphocytes are $CD44^{hi}CD62L^{lo}$ effector/memory cells (Figure 2-

figure supplement 2).

CD4CTLs that migrate to the gut, gradually stop expressing ThPOK, while

upregulating the expression of RUNX3 (Mucida et al., 2013; Reis et al., 2013), which is

known to drive the CTL gene program in $CD8^+$ T cells (Cruz-Guilloty et al., 2009;

Egawa et al., 2007). The long-form transcript encoding RUNX3 (*Runx3d*) is also

expressed in Th1 cells, but not in Th2 or naïve cells (Djuretic et al., 2007). As shown in

Figure 2H, besides *Runx3d* mRNA, we found that CD4$^+$GzB$^+$ T cells, sorted from the

spleen of tamoxifen-treated and infected GzmbCreER^{T2}/ROSA26EYFP reporter mice

(Bannard et al., 2009) (Figure 2-figure supplement 3A), express ThPOK *(Zbtb7b gene)*-

coding RNA comparable to naive CD4$^+$ T cells, at day 14 pi, when their number and

frequency are at the highest levels in this organ (**Figure 1G**). The absence of CD8α-

coding transcripts confirms the purity of sorted CD4$^+$GzB$^+$ T cells (Figure 2-figure

supplement 3B). These data show that CD4$^+$GzB$^+$ T cells generated in response to

infection with *T. cruzi,* besides expressing cytolytic markers, also express T-bet, Eomes

and RUNX3, typical TFs found in cytotoxic T cells.

CD4$^+$GzB$^+$ T cells express cytotoxic markers and immunoregulatory molecules

Tr1 cells are a subset of IL-10-producing CD4$^+$FoxP3$^-$ T cells that express GzB and

PRF and exert a potent suppressive function both in humans and mice (Roncarolo et al.,

2018). Since a high percentage of CD4$^+$GzB$^+$ T cells in our system express Eomes,

which drives the development of Tr1 cells (Zhang et al., 2017), we investigated whether

T. cruzi-induced CD4$^+$GzB$^+$ T cells would share other phenotypic characteristics with

Tr1 cells. We detected a very low frequency of IL-10-producing TCRαβ$^+$CD4$^+$ T cells

in the spleens of mice infected with *T. cruzi*, in agreement with previous data (Jankovic

et al., 2007), although IL-10$^+$ cells were found to be more frequent among CD4$^+$GzB$^+$ T

cells (**Figures 3A** and Figure 3-figure supplement 1A-B). The co-expression of LAG-3

and CD49b defines both human and mouse Tr1 cells (Gagliani et al., 2013). Although

most splenic CD4$^+$GzB$^+$ T cells express LAG3, only a minor percentage of these cells

co-express CD49b (**Figures 3B** and **3C** and Figure 3-figure supplement 1C). On the

other hand, a substantial fraction of splenic CD4$^+$GzB$^+$ T cells express the

immunoregulatory molecule TIM-3 and downregulate CD27 (**Figures 3D** and **3E**),

indicating that these might be terminally differentiated cells, as suggested in other

models (Anderson et al., 2016; Takeuchi & Saito, 2017).

Natural killer group 2 (NKG2) members A, C, D and E are C-type lectin-like

receptors and cytotoxic markers expressed by NK, NKT, $\gamma\delta$ and activated CD8$^+$ T cells

(Gunturi et al., 2004; Stojanovic et al., 2018). NKG2C/E and NKG2D molecules

identify a CD4CTL population, present in mouse lungs during influenza A virus (IAV)

infection (Marshall et al., 2017). As shown in **Figures 3F** and **3G**, the fraction of cells

expressing NKG2A/C/E and NKG2D was increased among splenic CD4$^+$GzB$^+$ T cells,

when compared to either GzB-negative CD4$^+$ T cells of infected mice, or to naive CD4$^+$

T cells of non-infected controls (Figure 3-figure supplement 2A and 2B). The class I-

restricted T cell associated molecule (CRTAM) was described as being critical for the

differentiation of CD4CTLs (Takeuchi et al., 2016; Takeuchi & Saito, 2017). **Figure**

3H shows that the frequency of CRTAM-expressing cells was also increased among

splenic CD4$^+$GzB$^+$ T cells of *T. cruzi*-infected mice, when compared with GzB-negative

CD4$^+$ T cells. We then analyzed whether CRTAM and NKG2X cytotoxic markers were

co-expressed on GzB$^+$CD4$^+$ T cells. As shown in Figure 3-figure supplement 3, while

most NKG2D$^+$ cells also express the CRTAM cytotoxic marker, only a minority of

CD4$^+$GzB$^+$ T cells co-express CRTAM and NKG2A/C/E molecules. The frequencies of

CRTAM$^+$, NKG2A/C/E$^+$ and NKG2D$^+$ CD8$^+$GzB$^+$ T cells in infected mice are shown

in Figure 3-figure supplement 4. Since, as shown in Figure 2-figure supplement 2, both

GzB$^-$ and GzB$^+$ CD4$^+$ T cells are in their majority effector/effector memory cells at day

14 pi, equivalent results were obtained gating on CD44^{hi} cells or not (Figure 3-figure

supplement 5). Together, these results show that a significant fraction of the CD4$^+$GzB$^+$

T cell subpopulation found in this unicellular parasite infection model complies with

the general phenotype of CD4CTLs and CD4CTL-precursors reported in response to

viral infection.

CD4CTLs are present in lower numbers in Myd88^{-/-} infected mice

To extend our understanding on the requirements for the differentiation of

CD4CTLs and their relationship to Th1 cells, we next investigated the role of IL-12,

IFN-γ and MyD88 in their generation. IL-12 and IFN-γ are the major cytokines driving

Th1 differentiation and T-bet expression, but their requirement for CD4CTL generation

is controversial (Brown et al., 2009; Cooper et al., 2004; Curran et al., 2013; Hua et al.,

2013; Kotov et al., 2018; Krueger et al., 2021; Tagawa et al., 2016; Xie et al., 2010).

Here, we observed that *Il12p40^{-/-}* mice infected with *T. cruzi* displayed lower

percentages of T-bet$^+$CD4$^+$ and IFN-γ$^+$CD4$^+$ T cells and exhibited very low levels of

CD4$^+$GzB$^+$ T cells (**Figure 4A**). Interestingly, in infected *Ifng^{-/-}* mice, despite the lower

frequency of T-bet$^+$CD4$^+$ T cells, CD4$^+$GzB$^+$ T cells attained the same frequencies as

observed in the spleens of WT animals (**Figure 4B**). However, absolute numbers of

both total CD4$^+$ and CD4$^+$GzB$^+$ T cells were lower in *Ifng^{-/-}* mice when compared to

WT controls. Thus, both IL-12p40 and IFN-γ play important but distinct roles in the

differentiation and expansion/survival of CD4$^+$GzB$^+$ T cells.

The above results obtained in *Il12p40^{-/-}* and *Ifng^{-/-}* mice, together with the fact that

Myd88^{-/-} mice have lower levels of Th1 cells and are highly susceptible to infection with

T. cruzi (Campos et al., 2004; Oliveira et al., 2010), prompted us to address the role of

MyD88-dependent pathways in the generation of CD4CTLs. Although infected *Myd88^{-/-}*

mice displayed equivalent absolute numbers and percentages of total splenic CD4$^+$ T

cells when compared to WT mice (Figure 4-figure supplement 1A), the frequencies and

absolute numbers of CD4$^+$GzB$^+$ T cells were significantly lower in this mouse strain

(**Figures 4C-4E**). Furthermore, absolute numbers of CRTAM$^+$, NKG2D$^+$ and

NKG2A/C/E$^+$ CD4$^+$GzB$^+$ T cells were severely diminished in $Myd88^{-/-}$ mice (**Figures**

4C-4E). This picture does not result from lower numbers of total activated CD4$^+$ T cells

in infected $Myd88^{-/-}$ mice, as shown by the percentages and absolute numbers of CD44^{hi}

cells, which are equivalent to those observed in WT animals (Figure 4-figure

supplement 2). On the other hand, absolute numbers of CRTAM$^+$, NKG2D$^+$ and

NKG2A/C/E$^+$ CD8$^+$GzB$^+$ T cells were not affected in $Myd88^{-/-}$ mice (Figure 4-figure

supplement 1C-D). Concerning the expression of perforin, both the percentages and

absolute numbers of PRF$^+$CD4$^+$ T cells were also severely decreased in $Myd88^{-/-}$

compared to WT mice (**Figure 4F**). The same was observed when analyzing the

frequency and absolute numbers of PRF$^+$CD4$^+$ T cells among GzB-expressing cells

(**Figure 4G**). In order to establish to what extent the absence of MyD88 expression

would impact on cytotoxicity mediated by CD4$^+$ T splenocytes, we sorted activated

CD4$^+$CD44^{hi} T cells from both WT and $Myd88^{-/-}$ infected mice to a high purity level and

performed redirected cytotoxicity assay. Lower levels of cytotoxicity were observed

when sorted $Myd88^{-/-}$ CD4$^+$CD44^{hi} T cells were employed, as compared to assays using

equal numbers of sorted WT CD4$^+$CD44^{hi} T cells (**Figure 4H**). Together, these results

demonstrate the important role of MyD88 signaling for the establishment of a robust

cytotoxic response mediated by CD4CTLs.

T cell-intrinsic IL-18R/MyD88 signaling plays a crucial role in the establishment of a

CD4$^+$ T cell subpopulation bearing the CD4CTL gene signature

MyD88 deficiency results in lower IL-12 production by APCs (Campos et al., 2004)

and this could explain the diminished numbers of CD4CTLs found in infected $Myd88^{-/-}$

mice. However, we have recently shown that IL-18R/MyD88 signaling intrinsic to

CD4$^+$ T cells is critical for Th1 cell proliferation and resistance to apoptosis in response

to infection with *T. cruzi* (Oliveira et al., 2017). If CD4CTLs herein described share a

common early differentiation process with (or derive from) Th1 cells, it is reasonable to

expect that besides IL-12 and IFN-γ, T-cell-intrinsic MyD88-dependent signaling would

also be important for the generation of a robust CD4CTL response. In order to test this

hypothesis, we constructed mix-BM chimeras in which WT (B6 x B6.SJL) F1 mice

were irradiated and reconstituted with a 1:1 mix of WT and *Myd88*$^{-/-}$ BM cells. After

reconstitution, mix-BM chimeras were infected with *T. cruzi* and, at day 14 pi, we

sorted WT (CD45.1) and *Myd88*$^{-/-}$ (CD45.2) CD44$^+$CD4$^+$ T cells to a high purity level

for transcriptome analysis. We then investigated whether the transcriptional signature of

CD4CTLs (Donnarumma et al., 2016) was present in sorted CD4$^+$ T splenocytes and to

what extent the absence of T-cell intrinsic MyD88-dependent signaling would impact

the acquirement of this transcriptional program. This signature, previously described in

the experimental model of Friend virus infection, distinguishes CD4CTLs from other

CD4$^+$ T cell subsets, including Th1 and Tfh cells (Donnarumma et al., 2016).

Importantly, gene set enrichment analysis (GSEA), comparing the transcriptome of

sorted WT and *Myd88*$^{-/-}$ CD4$^+$ T cells, revealed that 51 genes of the CD4CTL signature

were upregulated in WT CD4$^+$ T cells, while 78 were downregulated in *Myd88*$^{-/-}$ CD4$^+$

T cells (**Figures 5A-5C**). We confirmed, by flow cytometry, the upregulation of Blimp-

1 (*Prdm1* gene) TF and of the ecto-nucleotidase CD39 (*Entpd1*) in WT CD4$^+$GzB$^+$ T

cells (**Figures 5D** and **5E**). Of note, Blimp-1 is required for the cytotoxic function of

CD4CTLs (Hua et al., 2013) and CD39 expression level was found to be higher in

CD4$^+$GzB$^+$ T cells than in Tregs (**Figure 5E**).

In order to identify the receptor signaling upstream MyD88 responsible for the

establishment of a robust CD4CTL response, we further constructed three groups of

mix-BM chimeras, by mixing 1:1 WT and (i) *Il1r1*$^{-/-}$, (ii) *Il18ra*$^{-/-}$ or (iii) *Myd88*$^{-/-}$ BM

cells. A fourth group of mix-BM chimeras, 1:1 WT(B6):WT (B6.SJL) control was also

generated. After infection with *T. cruzi*, the percentages and absolute numbers of GzB$^+$

cells among CD4$^+$ T lymphocytes were analyzed in each chimeric group (gate strategy

in Figure 5-figure supplement 1). **Figure 5F** shows that the lack of IL-18R signaling in

T cells, but not of IL-1R, phenocopied the absence of T cell-intrinsic MyD88 signaling,

revealing that IL-18R is a critical pathway upstream MyD88 necessary for the

establishment of the CD4$^+$GzB$^+$ T cell population.

In order to further consolidate the role of IL-18R signaling in the generation of a

strong CD4CTL response, we analyzed the expression of PRF as well as of CRTAM,

NKG2D and NKG2A/C/E cytotoxic markers on CD4$^+$GzB$^+$ T cells from the spleens of

Il18ra$^{-/-}$ mice. **Figure 6A** shows that both the frequency and absolute number of

PRF$^+$CD4$^+$ T cells were significantly diminished in the spleens of infected *Il18ra*$^{-/-}$

compared to WT mice. The same was true for PRF-expressing cells among GzB$^+$CD4$^+$

T lymphocytes (**Figure 6B**). As observed in infected *Myd88*$^{-/-}$ mice, the frequency of

GzB$^+$CD4$^+$ T cells and their absolute number were also decreased in infected *Il18ra*$^{-/-}$

compared to WT mice (**Figures 6C-6E**). Absolute numbers of CRTAM$^+$, NKG2D$^+$ and

NKG2A/C/E$^+$ GzB$^+$CD4$^+$ T cells were significantly diminished in *Il18ra*$^{-/-}$ mice as well,

again phenocopying results obtained in *Myd88*$^{-/-}$ mice (**Figures 6C-6E**). The cytotoxic

potential of CD4$^+$ T splenocytes from *Il18ra*$^{-/-}$ infected animals was also evaluated by

performing redirected cytotoxicity assays with equal numbers of CD4$^+$CD44^{hi} T cells

purified from infected *Il18ra*$^{-/-}$ or WT mice. Again, as shown for *Myd88*$^{-/-}$CD4$^+$ T cells,

lower levels of target killing were observed when employing purified *Il18ra*$^{-/-}$

CD4$^+$CD44^{hi} T cells as effectors (**Figure 6F**). Collectively, the present data demonstrate

that T-cell intrinsic IL-18R/MyD88 signaling support the generation and/or survival

of CD4$^+$ T cells with cytotoxic potential in response to parasite infection, revealing a

parallel between the requirements for the development of robust Th1 and CD4CTL

responses.

The Adoptive transfer of CD4$^+$GzB$^+$ T cells to Il18ra$^{-/-}$ mice extended survival to

infection

In vivo studies addressing the function of CD4$^+$GzB$^+$ T cells have been hampered by

the absence of a stable and abundantly expressed surface-marker of cytotoxicity, which

would allow purifying these cells alive. To circumvent this, we employed infected and

tamoxifen-treated GzmbCreER^{T2}/ROSA26EYFP reporter mice, from whose spleens

CD4$^+$EYFP$^+$ (GzB$^+$) cells were highly purified by flow cytometry and adoptively

transferred to infected *Il18ra$^{-/-}$* mice, following the scheme shown in Figure 6-figure

supplement 1. The *Il18ra$^{-/-}$* mouse lineage was previously shown to be very susceptible

to infection with *T. cruzi* (Oliveira et al., 2017), and display lower numbers of

CD4$^+$GzB$^+$ and CD4$^+$PRF$^+$ T cells with cytotoxic potential, as demonstrated above. The

transfer of highly purified CD4$^+$GzB$^+$(EYFP$^+$) T cells to *Il18ra$^{-/-}$* mice significantly

extended their survival rate without, however, decreasing the parasite load in the hearts

(Figure 6G). In a previous work, we have demonstrated that the transfer of total WT

CD4$^+$ T cells protects infected *Il18ra$^{-/-}$* mice, and this property was attributed to Th1

cells, which are also diminished in this mouse lineage (Oliveira et al., 2017). Since

infected *Ifng$^{-/-}$* mice have the same frequency of CD4$^+$GzB$^+$ T cells as WT mice in their

spleens (**Figure 4B**), we tested whether adoptive transfer of CD4$^+$ T cells sorted from

Ifng$^{-/-}$ mice would also be able to extend the survival of recipient *Il18ra$^{-/-}$* mice. As

shown in Figure 6-figure supplement 2, this was indeed the case. Although IFN-γ

expression by CD4$^+$ T cells is necessary for decreasing parasitemia (Oliveira et al.,

2017), the present result indicated that the secretion of IFN-γ by adoptively transferred

CD4$^+$ T cells is not absolutely required for extending the survival time of infected

Il18ra$^{-/-}$ recipients. Together, these data demonstrate the beneficial function of the

CD4$^+$GzB$^+$ T cell subset against mortality caused by an intracellular parasite, which is

independent of decreasing heart parasitism.

The great majority of CD4$^+$ T cells in the infected myocardium express the CD4CTL

phenotype and increased levels of immunoregulatory markers

Previous studies in viral infection models suggested that CD4CTLs are present

in tissues where pathogen replication occurs (Marshall et al., 2017; Takeuchi et al.,

2016). Since *T. cruzi* heavily infects the heart, we performed intravascular staining with

anti-CD4 mAb and demonstrated that tissue-infiltrating CD4$^+$ T cells are abundant in

the myocardium of infected mice (Figure 7-figure supplement 1A-B). As shown in

Figures 7A and **7B** and Figure 7-figure supplement 2, CD4$^+$GzB$^+$ T cells infiltrating the

cardiac tissue constitute the vast majority of CD4$^+$CD44^{hi} T cells, indicating the

enrichment of this subset among activated CD4$^+$ T cells in the heart compared to the

spleen. At the peak time-point of parasite load in the heart, CD4$^+$GzB$^+$ T cells in the

myocardium express the LAMP-1 degranulation marker at levels comparable to those

of CD8$^+$ T cells (**Figures 7C** and **7D** and Figure 7-figure supplement 1C). Importantly,

the great majority of heart-infiltrating CD4$^+$GzB$^+$ T cells expresses PRF, as well as the

CRTAM and NKG2D cytotoxic markers (**Figure 7E** and **7F**). On the other hand, only

few CD4$^+$GzB$^+$ T cells express NKG2A/C/E in the myocardium (Figure 7-figure

supplement 1D, left). These data indicate a selective migration to, or retention in, the

infected heart of double positive CRTAM$^+$NKG2D$^+$ CD4$^+$GzB$^+$ T cells, although both

NKG2A/C/E$^+$ and NKG2D$^+$ cells are present at a similar ratio among CD4$^+$GzB$^+$ T

cells in the spleen. (Figure 3-figure supplement 3). On the other hand, high percentages

of NKG2A/C/E$^+$CD8$^+$GzB$^+$ T cells were found both in the heart (Figure 7-figure

supplement 1D, right) and in the spleen (**Figure 3-figure supplement 4A**) of infected

mice.

We next investigated the ratio of cells expressing the immunoregulatory markers

Lag-3, Tim-3, CD39 and PD-1 among different CD4$^+$ T cell subsets of infected mice:

naïve cells (CD44^{lo}GzB$^-$PRF$^-$), activated non-cytotoxic (CD44^{hi}GzB$^-$PRF$^-$) or activated

cytotoxic (CD44^{hi}GzB$^+$PRF$^+$) cells. The intensity of expression of these markers in each

cell subpopulation was also analyzed. Results in **Figure 7-figure supplement 3,** show

that CD44^{hi}GzB$^+$PRF$^+$ CD4$^+$ T cells compose the subset of activated cells among which

the higher frequencies of cells expressing these markers are found, both in the spleen

and in the heart, at day 14 pi. The only exception was the equal ratio of cells expressing

PD-1, at equivalent levels, when comparing splenic CD44^{hi}GzB$^-$PRF$^-$ and

CD44^{hi}GzB$^+$PRF$^+$ CD4$^+$ T cells. Similarly, equivalent percentages of cells expressing

PD-1 among CD44^{hi}GzB$^-$PRF$^-$ and CD44^{hi}GzB$^+$PRF$^+$ CD4$^+$ T cells were found in the

heart. However, the intensity of expression of the PD-1 marker was significantly higher

among CD44^{hi}GzB$^+$PRF$^+$ (CD4CTLs) compared to CD44^{hi}GzB$^-$PRF$^-$ CD4$^+$ T cells

infiltrating the cardiac tissue. Furthermore, we analyzed whether these parameters differ

between CD4CTLs in the spleen and in the heart (**Figure 7-figure supplement 4**). Of

note, while MFI values of Tim-3, CD39 and PD-1 expression were increased on

CD4CTLs in the heart compared to CD4CTLs in the spleen, Lag-3 expression levels

were decreased on CD4CTLs infiltrating the myocardium. Furthermore, only the

expression of PD-1, but not of Lag-3, Tim-3 or CD39, is upregulated on CD8CTLs in

the heart compared to the spleen (**Figure 7-figure supplement 4)**, an indication that the

T. cruzi-infected cardiac tissue is a less so-called exhaustion-inducing environment

compared to certain tumors.

The frequency of CD4$^+$PRF$^+$ T cells correlates with cardiomyopathy in Chagas

patients

Finally, we investigated the presence of PRF$^+$CD4$^+$ T cells in the circulation of

patients infected with *T. cruzi* and suffering from chronic Chagas cardiomyopathy (CC).

In order to ascertain the specificity of CD4$^+$ T cells against *T. cruzi*, PBMC from CC

patients or from healthy donors (HD) were incubated (or not) with trypomastigote-

derived antigens (trypo) and analyzed for the expression of perforin by flow cytometry

(**Figure 7-figure supplement 5**). As shown in **Figures 7G** and **7H,** after incubation

with trypo, both the expression level of PRF (MFI) and the percentage of PRF$^+$CD4$^+$ T

cells increased among CD4$^+$ T cells from CC patients, but not from HD controls. Of

note, CD4$^+$ T cells expressing PRF were found at higher frequency in CC patients than

in HD (**Figure 7I**). We next performed correlative analyses between the frequency of

PRF-expressing CD4$^+$ T cells in PBMC from CC patients and two echocardiographic

parameters, usually employed to evaluate cardiac function in CC patients: left

ventricular ejection fraction (LVEF) and left atrium diameter. As shown in **Figure 7J,** a

clear inverse correlation between the frequency of CD4$^+$PRF$^+$ T cells and LVEF, as

well as a direct correlation between the frequency of these cells and the left atrium

diameter was found. These correlations suggest that CD4CTLs might play a pathogenic

role in the chronic phase of Chagas disease, although the alternative possibility remains

that the higher levels of CD4CTLs reflect elevated parasite burden and/or inflammation

in the heart, without a direct involvement of this cell subset in the pathology. Together,

data obtained here in CC patients and in the mouse experimental model point to the

heart as an important target-organ for CD4$^+$ T cells with cytolytic potential generated in

response to infection with *T. cruzi.*

Discussion:

Here we show for the first time that CD4CTLs are abundantly present in the

spleen of mice infected with *T. cruzi* and that such phenotype predominates among

CD4$^+$ T cells infiltrating the infected cardiac tissue. The expression of LAMP-1

degranulation marker by CD4$^+$GzB$^+$ T cells in the heart and in the spleen indicates that

these cells may play important effector functions in both organs. GzB$^+$PRF$^+$CD4$^+$ T

cells present in the *T. cruzi*-infected hearts express CRTAM and NKG2D cytotoxicity

markers, but differently from CD4CTLs found in the lungs of mice infected with IAV

(Marshall et al., 2017), do not express NKG2A/C/E molecules. This interesting

dissimilarity requires further investigation and could be due to differential regulation

exerted by tissue-specific factors or, alternatively, by different innate responses

influencing CD4CTL differentiation, which would be distinctly triggered by viral and

parasite pathogens.

CD4$^+$ T cells purified from the spleen of infected mice killed APCs presenting

parasite-derived antigens *in vitro,* in a GzB- and PRF-dependent process. *In vivo* Ag-

specific cytotoxicity against parasite-derived I-A^b-restricted epitopes was also observed.

It is expected that killing of infected APCs in the spleen should lead to a decrease in the

activation of effector T cells, dampening the exuberant immune response against the

parasite. Therefore, the cytotoxic action of CD4CTLs may contribute to

immunoregulation*,* avoiding the development of exacerbated immunopathology that can

cause mortality in the acute phase of the infection with *T. cruzi.* Favoring this

hypothesis, we showed that adoptive transfer of CD4$^+$GzB$^+$ T cells to susceptible

Il18ra^{-/-} mice, which have lower levels of these cells, significantly increased their

survival to infection without, however, affecting parasite loads. The incapacity of

transferred CD4CTLs in decreasing parasite loads in the heart might be due to two

facts: (i) cytotoxicity mediated by CD4CTLs is MHC class II-restricted, but only heart

endothelial cells express MHC class II molecules, while the infected cardiac muscle

cells remain MHC II-negative (Reis et al, 1993);   (ii) as shown here, only a small

fraction of CD4$^+$ T cells with cytolytic phenotype produce IFN-γ, the main cytokine

inducing trypanosomicidal function in macrophages and cardiomyocytes (Machado et

al., 2000). Accordingly, adoptive transfer of highly purified *Ifng*^{-/-} CD4$^+$ T cells (among

which the same frequency of GzB$^+$ cells were found) also resulted in the significantly

increase of the survival time of infected *Il18ra*^{-/-} mice, but did not decrease parasite

levels (Oliveira et al., 2017). The data discussed above, along with the fact that the

parasite load is not decreased in the recipient mice indicate that IFN-γ is not involved in

the extended survival granted by adoptive transfer of CD4$^+$GzB$^+$ T cells and exclude a

role for Th1 cells, which are known to exert an important microbicidal function through

the production of IFN-γ (Oliveira et al., 2017). Together with our previous work, the

current results point to complementary roles exerted by CD4CTL and Th1 cells. Both

cell types might be required for survival against infection with *T. cruzi*, working

together to establish a balance between the Th1-dependent control of parasite load on

one side, and CD4CTL-mediated dampening of the immunopathology resulting from

this process, on the other. In fact, it is known that IFN-γ plays a central but dual role in

Chagas disease, having both important microbicidal and pathogenic functions (Ferreira

et al, 2014). The equilibrium between anti-parasitic and anti-inflammatory responses

underlies the establishment of the asymptomatic form of chronic infection (Nunes et al.,

2018), in which increased levels of CD4$^+$GzB$^+$ T cells have been found in humans

(Keesen et al., 2012). Therefore, our results are in accordance with an

immunoregulatory role played by CD4CTLs, likely through the GzB/PRF/FasL-

mediated killing of infected APCs in an IFN-γ-independent manner, although it is not

possible to formally attribute the beneficial role of adoptively transferred CD4CTLs

exclusively to their cytolytic action.

Of note, we also show here that most $CD4^+GzB^+PRF^+$ T cells express surface

co-inhibitory receptors, such as Lag-3 and Tim-3, as well as the ecto-ATPase CD39, at

particularly high levels. These regulatory molecules, typically expressed by Treg, Tr1

cells and terminally differentiated or exhausted $CD8^+$ or $CD4^+$ T cells, have been

implicated in the immunoregulatory functions of these cell subsets (Anderson et al.,

2016; Mascanfroni et al., 2015; Park et al., 2019). Although almost the totality of

$CD4^+GzB^+$ T cells express T-bet, only a minority of these cells produce IFN-γ. Most

$CD4^+GzB^+$ T cells also express Eomes and/or Blimp-1, two transcription factors which

are known to be involved in T cell exhaustion. Whether the repression of IFN-γ in

$CD4^+GzB^+$ T cells is mediated by Eomes and/or Blimp-1, as evidentiated in $CD4^+$ T

cells during infection with *Toxoplasma gondii* (Hwang, et al., 2016), remains to be

determined.   Thus, the phenotype of a large fraction of $CD4^+GzB^+PRF^+$ T cells

developing in response to infection with *T. cruzi* is typical of terminal

differentiated/exhausted cells. Nevertheless, it is important to note that highly functional

effector T cells can also express inhibitory receptors and despite exhaustion being often

seen as a dysfunctional state, it has been shown that the expression of inhibitor

molecules allows T cells to persist and to contribute to the contention of chronic viral

infections without causing immunopathology (reviewed in Wherry, 2011).

Chronic Chagas cardiomyopathy usually develops in around 30% of infected

individuals after decades, probably reflecting an imbalance between parasite and host

immune response (Nunes et al., 2018). Although the exact mechanism remains to be

elucidated, the association of NK, CD8CTL and GzA-expressing CD4$^+$ T cells with the

development of chronic carditis has been indicated (Ferreira et al., 2017; Menezes et al.,

2012; Nunes et al., 2018). Since CD4CTLs recognize the cognate antigen in the context

of MHC class II molecules, the lysis of infected MHC II$^+$ endothelial cells in the heart

might trigger immunopathology in the chronic phase, in contrast to the possible

immunoregulatory role due to the killing of infected APCs in the spleen, during the

acute phase of infection, as discussed above. In the present study, we found that the

frequency of parasite-specific CD4$^+$PRF$^+$ T cells is increased in the blood of chronic

cardiac patients with Chagas disease (CC) when compared to healthy donors. A

correlation between the frequency of PRF$^+$CD4$^+$ T cells and two echocardiographic

parameters employed for evaluating myocarditis in CC patients was also encountered. It

is tempting to speculate that the loss of regulatory function exerted by different CD4$^+$ T

cell subsets, including CD4CTLs, might lead to the chronic pathology. Alternatively,

the increased levels of CD4CTLs in chronic patients might be reflecting parasite burden

and/or tissue inflammation without exerting a pathogenic function. Therefore, further

studies are necessary for fully defining the role of tissue-infiltrating CD4CTLs in

Chagas disease. Interestingly, NKG2D, expressed by most CD4CTLs in the heart, can

mediate both activating and inhibitory signals (Wensveen et al., 2018). Importantly, a

polymorphism in one of the NKG2D ligands, the major histocompatibility complex

class I–related chain A gene (MICA) molecule, was associated with left ventricular

systolic dysfunction in patients with chronic Chagas myocarditis (Ayo et al., 2015).

We have shown here that CD4$^+$GzB$^+$ T cells originating in response to *T. cruzi*

infection largely outnumber IFN-γ-producing CD4$^+$ T cells and that their appearance in

the spleen follows the same kinetics of classic Th1 cells, indicating thereby that

differentiation of CD4CTLs is not a late event during infection. Of note, more than 60%

of CD4^{+}GzB^{+} T cells have downregulated CD27 expression in the spleen at day 14 pi, a

characteristic of terminally differentiated T cells (Takeuchi & Saito, 2017). We have

also shown here that the majority of CD4^{+}GzB^{+} T cells express T-bet, Eomes and

Blimp-1. Although Eomes seems not to be essential for CD4CTLs in certain studies

(Donnarumma et al., 2016; Kotov et al., 2018), it was proposed to be the master

regulator for CD4CTLs and Tr1 cells by others (Curran et al., 2013; Eshima et al., 2012;

Qui et al., 2011; Zhang et al., 2017). The CD4^{+}GzB^{+} T cell population described herein

presents some characteristics in common with Tr1 cells. However, we only detected a

very low frequency of CD4^{+}GzB^{+} T cells co-expressing Lag-3 and CD49b (Gagliani et

al., 2013) or IL-10. In this regard, data from *T. cruzi* infection differs from those

observed during infection with other intracellular parasites such as *T. gondii* and certain

L. major strains, in which high frequencies of CD4^{+} T cells producing both IL-10 and

IFN-γ were described (Anderson et al., 2007; Jankovic et al., 2007). In contrast with

ThPOK-negative CD4CTLs that accumulate in the gut (Cheroutre & Husain, 2013;

Mucida et al., 2013; Reis et al., 2013), CD4^{+}GzB^{+} T cells in the *T. cruzi*-infected spleen

express ThPOK at the peak of infection. Interestingly, the absence of ThPOK

downregulation was also observed in mouse (Mittal et al., 2018) and human CD4CTLs

(Serroukh et al., 2018). Thus, different subsets of CD4CTL possibly exist, in which the

interplay between ThPOK and RUNX3 expression might be differentially regulated.

Although many authors consider CD4CTLs merely functional variants of Th1 cells,

in some models CD4CTLs fail to fit Th1-defining criteria, such as the dependence on

IL-12, STAT4 or T-bet for differentiation (Brown et al., 2009; Curran et al., 2013; Hua

et al., 2013; Kotov et al., 2018). Nonetheless, in agreement with other studies (Cooper et

al., 2004; Krueger et al., 2021; Tagawa et al., 2016; Xie et al., 2010), we showed here

that CD4$^+$GzB$^+$ T cells are scarcely generated in the absence of IL-12p40. Importantly,

we demonstrated that the expansion/survival of CD4CTLs also depends on T-cell

intrinsic IL-18R/MyD88 signaling, which we have previously shown to induce cell

cycling, anti-apoptotic and Th1-signature transcripts (Oliveira et al., 2017). Notably,

several genes of the CD4CTL signature, which distinguishes this subset from Th1 and

Tfh cells (Donnarumma et al., 2016), were expressed by WT, but not by $Myd88^{-/-}$ CD4$^+$

T cells from infected mix-BM chimeras. Therefore, analogous to its action on Th1 cells,

we showed here that T-cell intrinsic IL-18R/MyD88 signaling contributes for the

reinforcement and/or stabilization of CD4$^+$ T cell commitment into the CD4CTL

phenotype. IFN-γ is another key cytokine involved in Th1 differentiation and $Ifng^{-/-}$

mice are extremely susceptible to infection with $T.\ cruzi$ (Campos et al., 2004).

Interestingly, we found no difference in the frequency of CD4$^+$GzB$^+$ T cells between

WT and $Ifng^{-/-}$ infected mice, in accordance with a study showing that IFN-γ had no

impact on the ability of CD4 effectors to acquire cytolytic activity (Brown et al., 2012).

However, both GzB$^+$ and total CD4$^+$ T-cell numbers were significantly lower in the

infected $Ifng^{-/-}$ animals, indicating that IFN-γ might also play a role in the

expansion/survival of both Th1 and CD4CTLs in our system. It is known that IFN-γ and

IL-18R participate in a reciprocal positive feedback loop in Th1 differentiation process:

while IFN-γ is required for IL-12-driven upregulation of IL-18R expression (Nakahira

et al., 2001; Smeltz et al., 2001), IL-18 is a major IFN-γ-inducing factor. Therefore, the

absence of IL-18R upregulation in CD4$^+$ T cells of $Ifng^{-/-}$ mice would prevent the

expansion of both CD4$^+$ T cell subpopulations. Thus, in $T.\ cruzi$ infection model, IL-12,

IFN-γ and IL-18R/MyD88 signaling act as key pathways at early check-points in the

generation of CD4$^+$GzB$^+$ T cells with cytotoxic potential, suggesting that these cells

might share common early differentiating steps with the Th1 subset. It is not excluded,

however, that different precursors of CD4CTL and Th1 cells might exist (Takeuchi &

Saito, 2017). A cartoon summarizing our results and cited works published by others is

shown in Figure 7-figure supplement 6. Of note, in humans, the higher production of

IL-18 due to gene polymorphisms has been correlated to protection against chronic

Chagas cardiomyopathy (Leon Rodriguez et al., 2016; Nogueira et al., 2015).

It is possible that differentiation into CD4CTLs could also be influenced by

pathogen-derived factors. Very recently, Krueger *et al*. have shown that a subset of IL-

12-dependent Th1-derived cytotoxic cells was present in the spleen of *Il18*^{-/-} mice at

later stages of infection with *Salmonella enterica* (Krueger et al., 2021). Whether that

result was due to compensatory mechanisms, such as the known exacerbated IL-12

production by infected *Il18*^{-/-} mice (Monteforte et al., 2000), or to distinct innate

responses, differentially induced by phagosomal bacteria and cytosolic parasites,

remains to be determined. Of note, other discrepancies between results obtained with

Il18^{-/-} versus *Il18ra*^{-/-} mouse lineages have been described in different models in the past

(Gutcher et al., 2006; Lewis & Dinarello, 2006). It is known that different classes of

pathogens can trigger diverse APC responses and, therefore, elicit pathogen-tailored Th

programs (Kara et al., 2014; Kiner et al., 2021). Previous works have reported the

immunoregulatory action of *T. cruzi*-derived PAMPs on CD4^{+} T cell activation, either

by directly acting as co-stimulatory signals for T cells, or by modulating APC functions

(Bellio et al., 1999; DosReis et al., 2002; Medeiros et al., 2007). It would be interesting

to test *T. cruzi*-derived molecules on their capacity to favor the generation of CD4CTLs.

In summary, the present work is the first to describe a CD4CTL subset abundantly

present in the *T. cruzi*-infected cardiac tissue, bringing novel pieces to the scenario of

the immune response against a major human intracellular parasite. Importantly, our

data disclose a mechanistic framework involved in the generation of a robust CD4CTL

response, whose control and optimization may provide new therapeutic and vaccination

strategies to combat infection with intracellular pathogens and chronic diseases

resulting thereof.

Materials and Methods

Mice. C57BL/6, B6.SJL and F1 (B6 x B6.SJL) mice were from the Universidade

Federal Fluminense. $Myd88^{-/-}$ mice were generated by Dr. S. Akira (Osaka University,

Japan); $Il12p40^{-/-}$ and $Ifng^{-/-}$ mice were purchased from USP; $Il18ra^{-/-}$ and $Il1r1^{-/-}$ mice

from JAX Mice, USA. GzB reporter mice, GzmbCreER^{T2}/ROSA26EYFP, previously

described (Bannard et al., 2009) were provided by Dr. Ricardo Gazinelli (UFMG, BH,

Brazil). Mice were on the C57BL/6 background, except GzmbCreER^{T2}/ROSA26EYFP,

which were on mixed Sv129/B6 background and backcrossed to B6 for 5 generations.

In each experiment, only male mice of the same age (6- to 8-week-old) were used. Mice

were housed at a maximum of 5 animals per cage, in forced-air-ventilated micro-

isolation rack system, in a room at 21−23°C under a 12/12 h light/dark cycle and

provided with sterilized water and chow ad libitum. All mouse experiments were

conducted in accordance with guidelines of the Animal Care and Use Committee of the

Federal University of Rio de Janeiro (Comitê de Ética do Centro de Ciências da Saúde

CEUA - CCS/UFRJ, license: IMPPG022).

Experimental infection. Bloodstream trypomastigotes of the Y strain of *T. cruzi* (2 x

10^3 cells/0.2 mL) were inoculated intraperitoneally (i.p.). Y-OVA strain trypomastigotes

(Gomes-Neto et al., 2018) were obtained from LLC-MK2 infected cultures and 2 x 10^6

trypomastigotes (in 0.2 mL PBS) were inoculated i.p. Rare outliers (mice in which the

infection was not properly established) were identified by the lower size of the spleen

(total cell number) and lower percentage of GzB^+CD8^+ T cells (inferior of 50%) in the

spleen. These outlier mice were excluded from all analyses. Mice found at the moribund

condition (presenting unambiguous signals that the experimental endpoint has been

reached), were euthanized.

Generation of BM chimeras. Acidic drinking water (pH 2.5-3.0) was given for 8 days

to recipient mice prior to irradiation with a lethal single dose of 800 rad (TH780C -

Theratronics, Canada). The day after irradiation, BM cells were transferred and mice

were treated with neomycin sulfate (2 mg/mL) in the drinking water for 15 days.

Marrow was harvested from the femur and tibia of B6.SJL ($CD45.1^+$) and B6, $Myd88^{-/-}$,

$Il1r1^{-/-}$ or $Il18ra^{-/-}$ ($CD45.2^+$) mice. For mixed BM chimeras, $CD45.1^+$ and $CD45.2^+$ BM

cells were transferred in a 1:1 ratio (2 x 10^6 cells each) to irradiated mice. In all

experiments, mice were infected 6 to 8 weeks after cell transfer, when reconstitution

was achieved.

Human population. A total of thirteen volunteers were enrolled in this study. Nine

volunteer patients had positive specific serology for *T. cruzi* and displayed the chronic

Chagas cardiomyopathy (CC) with right and/or left ventricular dilation, global left

ventricular dysfunction, alterations in the cardiac electric impulse generation and

conduction upon electrocardiogram, chest x-rays and echocardiography; four

individuals displayed negative specific serological tests for Chagas disease and were

included as control group (healthy donors, HD). Patients were from Chagas disease

endemic regions within Minas Gerais, Brazil, and were evaluated at the outpatient clinic

of the Universidade Federal de Minas Gerais. Healthy donors were from Belo

Horizonte, which is a non-endemic region for Chagas disease. We excluded from our

study individuals with any other chronic inflammatory diseases, diabetes,

heart/circulatory illnesses or bacterial infections. All individuals included in this work

were volunteers and treatment and clinical care were offered to all patients, as needed,

despite their enrollment in this research project. All participants provided written

informed consent for participation in the study. This cross-sectional study is part of an

extended project evaluating biomarkers of cardiomyopathy development in Chagas

disease, which has the approval of the National Committee of Ethics in Research

(CONEP#195/2007) and are in accordance with the Declaration for Helsinki.

PBMC flow cytometry. Peripheral blood samples were collected in heparin tubes.

PBMCs were obtained by separating whole blood over Ficoll (Sigma-Aldrich, St.

Louis, MO), as previously described (Menezes et al., 2012). Cells were washed and

resuspended in RPMI 1640 medium (Gibco, Rockville, MD) supplemented with 5%

heat-inactivated AB human serum, antibiotics (penicillin, 200 U/ml; and streptomycin,

0.1 mg/mL) and L-glutamine (1 mM) (Sigma-Aldrich) at a concentration of 1×10^7

cells/mL. Cells from each volunteer were cultured on 96-well plates (Costar, Corning

Incorporated, Corning, NY) in 200 μL of medium alone (ctr) or containing 20 μg/mL of

trypomastigote antigen (trypo) for 18h. Trypo was obtained from trypomastigotes

purified from VERO cell cultures: parasites were washed, freeze-thawed for 3 cycles,

followed by 5 cycles of 5 minutes each of sonication using 30 seconds between them.

Samples were ultracentrifugated at 5,000g for 60 min, at 4^oC. Supernatants were

collected, dialyzed for 24h and protein quantification performed by Bradford method.

Cells (2×10^5) were incubated with PerCP-anti-CD4 (clone A161A1) antibody

(Biolegend) for 15 min at 4°C, washed in phosphate-buffered saline (PBS) containing

1% bovine serum albumin (BSA), and fixed by a 20 min incubation with a 2%

formaldehyde. After washing with PBS, cells were permeabilized with 0.5% saponin

for 15 min and intracellularly stained with PE-anti-perforin (clone B-D48) antibody

(Biolegend) for 20 minutes, washed twice with 0.5% saponin solution, resuspended in

PBS and analyzed. A minimum of 100,000 gated events from each sample were

collected and analyzed using FlowJo software.

Flow cytometry of mouse cells. Reagents and antibodies: PB-anti-CD45.1, APC-Cy7-

anti-CD45.2, FITC- PE- or BV-605-anti-CD4, PE-anti-CD8, PE-Cy7-anti-NK1.1,

BV421-anti-TCRβ, PE-anti-2B4, FITC-anti-CD107a, PE-Cy7-anti-CD39, PE-anti-

FasL, PE-Cy7-anti-CRTAM, PE-anti-NKG2D, PE-anti-NKG2A/C/E, FITC- or

AlexaFluor647-anti-GzB, PE-anti-Eomes, PE- or A647-anti-T-bet, PE-anti-FoxP3,

AlexaFluor647-anti-Blimp1 and PE-anti-PRF were used. All mAbs were purchased

from Biolegend, BD Biosciences or eBioscience/Thermo Fisher Scientific. Spleen cells

were stained after red blood cell lysis with ACK buffer. Hearts were perfused with 20

mL of cold PBS, minced into small fragments and treated with collagenase D (1.0

mg/mL) and DNAse I (0.1 mg/mL), for 1 hour at 37ºC. Collagenase D, DNAse I,

monensin and saponin were purchased from Sigma-Aldrich. Single cell suspensions

were incubated with anti-CD16/CD32 (FcR block) for 5 min and then surface stained

for 30 min on ice. For IL-10 and IFN-γ intracellular staining, 2×10^6 spleen cells were

cultured in the presence of PMA (16 nM), ionomycin (0.5 μM), monensin (5 μM) and

brefeldin A (3.0 μg/mL) for 4 hours. After staining for surface markers, cells were fixed

with paraformaldehyde 1% for 1 h, permeabilized with saponin 0.2% for 20 min and

stained with PE-Cy7-anti-IFN-γ mAb and/or PE-anti-IL-10 mAbs (Biolegend). For TF

and GzB/PRF staining, the FoxP3 staining buffer kit (eBioscience, ThermoFisher

Scientific) was employed. At least 20,000 events gated on $CD4^+$ T cells were acquired.

Analytical flow cytometry was conducted with MoFlo (Beckman Coulter/Dako-

Cytomation), FacsCanto, FacsCalibur or BD LSRFortessa (BD Bioscience) and data

analyzed with Summit V4.3 software (Dako Colorado, Inc).

***In vitro* and *in vivo* cytotoxicity assays.** For redirected cytotoxic assay, sorted B cells

(B220$^+$), previously activated by LPS (InvivoGen), at 25 μg/ml for 48 h and then

incubated for 1 h with anti-CD3ε antibody (10 μg/mL), were employed as target cells.

FACS-sorted naïve (CD44^{low}CD4$^+$) and effector/memory (CD44^{hi}CD4$^+$) T cells were

purified from the spleen of non-infected and infected mice, respectively. In some

experiments, sorted T cells were treated for 1 h with GzB (Z-AAD-CMK, 10 μM) and

PRF (Concamycin A, 0.5 μM) inhibitors (Biovision Inc., Milpitas, CA), before

coincubation at different E:T ratios, with 10^4 target B cells (prepared as

aforementioned) in round-bottom microplates (Costar-Corning) for 14 h, at 37ºC in a

5% CO$_2$ incubator and in triplicates. After incubation, living target cells were quantified

by flow cytometry, after staining with propidium iodide at 0.5 μg/ml (Sigma-Aldrich).

For *T. cruzi*-specific cytotoxicity assays, CD4$^+$ T cells were obtained from infected B6

mice, at day 14 pi, and purified by FACS sorting (MoFlo cell sorter, Beckman

Coulter/Dako-Cytomation). IC-21 macrophage cell lineage (ATCC) were used as

targets *in vitro*. For this, IC-21 cells were counted and split into two tubes: half of the

target cells were incubated for 45 min at 37º C in 5% CO$_2$, in RPMI containing *T. cruzi*

amastigote protein extract (30 μg/mL) obtained as previously described (Oliveira et al.,

2010). Ag-loaded cells were then stained with 2.5 μM CFSE (CFSE^{Hi}) (Invitrogen, Life

Technologies), and control cells with 0.5 μM CFSE (CFSE^{Low}) in 5 mL of warm PBS

for 10 min at 37º C. After two washes in RPMI 1640 (10% FCS), cells were

resuspended at a concentration of 2 x 10^5 cells/mL each and mixed at 1:1 ratio

(CFSE^{Hi}:CFSE^{Low}). Purified CD4$^+$ T cells were added at different E:T ratios. Cells were

seeded in duplicate to round-bottom 96-well plate in a final volume of 200 μL. After

ON incubation, cells were harvested, incubated with 0.5 μg/mL of propidium iodide and

PI$^+$ cells were excluded from FACS analysis. The percentage of specific lysis was

calculated using the formula: % of specific lysis = 100x [(CFSE^{Low} / CFSE^{Hi}) ctr −

(CFSE^{Low} / CFSE^{Hi}) effector] x (CFSE^{Low} / CFSE^{Hi}) ctr^{-1}. For *in vivo* cytotoxicity

assays, splenocytes from non-infected B6 mice were employed as target cells after

being divided in 3 subpopulations and stained with 10.0 (High), 2.5 (Int) and 0.625

(Low) µM of CFSE or of CTV (Invitrogen, Life Technologies). CFSE^{Int} and CFSE^{Low}

cells were loaded with one of the following peptides: SA85c (SHNFTLVASVIIEEA),

SA85d (LVASVIIEEAPSGNT), OVA$_{323-339}$, OVA$_{257-263}$ or PA8 (VNHRFTLV) at 2

µM, all from GenScript, EUA. CFSE^{Hi} cells were not loaded with any peptide and used

as internal control. For calculating the percentage of specific lysis, CFSE^{Hi} and CFSE^{Int}

(or CFSE^{Low}) were gated together in order to constitute 100% of cells. CFSE^{Hi} and

CFSE^{Int} (or CFSE^{Low}) populations were then individually gated and specific lysis was

calculated using the following formula: % of specific lysis = 100x [(CFSE$^{Low \ or \ Int}$ /

CFSE^{Hi}) ctr − (CFSE$^{Low \ or \ Int}$ / CFSE^{Hi}) effector] x (CFSE$^{Low \ or \ Int}$ / CFSE^{Hi}) ctr^{-1}.

Real time RT-PCR. RNA was extracted using the RNeasykit (QIAGEN). cDNA was

synthesized using the High Capacity cDNA Reverse Transcription Kit (Invitrogen, Life

Technologies), following the manufacturer's instructions. Gene expression was

analyzed using primers in combination with SYBR Green® on a StepOneReal Time

PCR System (Applied Biosystems, Life Technologies). The expression level of the

genes of interest was determined relative to the expression of 18S rRNA. Primers:

Runx3 Fwd.: 5'- ACA GCA TCT TTG ACT CCT TCC -3'; *Runx3* Rev.: 5- GTT GGT

GAA CAC GGT GAT TG- 3'; *Thpok* Fwd: 5'- ATG GGA TTC CAA TCA GGT CA-

3'; *Thpok* Rev.5'- TTCTTC CTA CAC CCT GTG CC -3'; *CD8a* Fwd: 5' - ACT GCA

AGG AAG CAA GTG GT – 3'; *CD8a* Rev: 5'-CAC CGC TAA AGG CAG TTC TC-

3'; 18S-Fwd.: 5'- GGG CGT GGG GCG GAG ATA TGC - 3' and 18S-Rev.: 5'- CG

CGG ACA CGA AGG CCC CAA A -3'. For parasite load quantification, hearts of

infected mice were perfused, minced and immediately homogenized in 1.0 ml of 4.0 M

Guanidine thiocyanate (SIGMA-Aldrich) containing 8.0 μl/mL of β-mercaptoethanol

and processed for DNA extraction. Generation of PCR standards and detection of

parasite tissue load by real-time PCR was carried out as described (Oliveira et al.,

2017); briefly, primers amplify a repeated satellite sequence of *T. cruzi* DNA of 195

base-pairs: TCZ-Fwd.: (5'-GCTCTTGCCCACAAGGGTGC-3') and TCZ-Rev.: (5'-

CCAAGCAGCGGATAGTTCAGG-3').   Reactions   with   TNF-a-Fwd: (5'-

CCTGGAGGAGAAGAGGAAAGAGA-3')   and   TNF-a-Rev.:   (5'-

TTGAGGACCTCTGTGTATTTGTCAA-3') primers for *Mus musculus* TNF-α gene

were used as loading controls.

Gene-expression analysis. Gene expression data were extracted with GeneSpring

software GX 11.0 software using default parameters. Data were then normalized by

subtracting the average from all genes from each gene intensity and dividing the result

by the standard deviation of all gene intensities (i.e. z-score normalization). Z ratios

were calculated as previously described (Cheadle et al., 2003) and used to compare the

difference in expression between WT samples and $Myd88^{-/-}$ samples. Gene Set

Enrichment Analysis (GSEA) (http://www.broadinstitute.org/gsea/index.jsp) was

performed on the genes pre-ranked by Z ratios (1,000 permutations and Weighted

Enrichment Statistic) using as data set 82 differentially expressed genes of sorted WT

and $Myd88^{-/-}$CD4^{+} T cells (GEO accession no. GSE57738) (Oliveira et al., 2017); and

using as gene set the CD4^{+}GzmB^{+} (CD4CTL) transcriptional signature (159 upregulated

genes) previously described (https://www.ebi.ac.uk/ena/data/view/PRJEB14043).

Adoptive   CD4^{+}   T   cell   transfer   assay.   Eight-week-old   male

GzmbCreER^{T2}/ROSA26EYFP mice were infected with 2 x 10^{3} trypomastigotes and

treated with 4 mg/animal/day of tamoxifen citrate (Sandoz-Novartis) from day 7 to 11

pi by gavage. Spleen cells were harvested and treated with ACK for red blood cells lysis

at day 13 pi. Alternatively, $CD4^+$ T cells were purified from the spleen of non-treated

and infected $Ifng^{-/-}$ mice. In both cases, spleen cells were labeled with biotinylated anti-

B220, anti-CD11b, anti-NK1.1, anti-γδTCR, anti-CD8 and PE-conjugated anti-CD4

antibodies for 30 minutes on ice, followed by staining with PE-Cy7-conjugated

Streptavidin for 20 min. Residual $PE-Cy7^+$ cells were excluded and $EYFP^+PE^+$

($CD4^+GzB^+$ T cells) or PE^+CD4^+ ($Ifng^{-/-}CD4^+$ T cells) were sorted using MoFlo cell

sorter (Beckman Coulter/Dako-Cytomation). $CD4^+GzB^+$ T cells (2.8 x 10^5 cells/animal)

or $Ifng^{-/-}$ $CD4^+$ T cells (1.3 x10^6 cells/animal), both presenting purity higher than 98%,

were adoptively transferred by *iv* injection into $Il18ra^{-/-}$ recipient mice, previously

infected with 1 x 10^3 trypomastigotes (day 7 pi). Control groups of $Il18ra^{-/-}$ and $Myd88^{-/-}$

infected mice received PBS. Survival was accompanied daily.

Statistics. Statistical analyses were performed using GraphPad Prism version 6 for Mac

OS (GraphPad Software, San Diego California USA, www.graphpad.com). Sample

sizes were chosen to allow the detection of statistical differences with $p < 0.5$ using

Student's *t* test, or the Log-rank (Mantel-Cox) test for mouse survival curves.

Correlation analysis employed Pearson correlation test. When comparing two groups,

the minimum number was n=3 per group. In some experiments, the number was

increased to n= 9 to permit $p < 0.05$ even considering the possibility of a single outlier

in a population. Data are expressed as mean $\pm$ SEM and considered statistically

significant if *p* values were < 0.05.

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purified effector CD4$^+$ T cells (E), at the indicated E:T ratios, in the presence of anti-

FasL mAb (red) or isotype control mAb (blue). Mean values of triplicates ± SEM are

shown in **(A)** and **(B)**; *p≤ 0.05 (two-tailed Student t-test). Data are representative of 3

independent experiments. Gating strategy on Figure 2-figure supplement 1A. (**C and D**)

Percentages of Ag-specific cytotoxicity *in vivo*; bars represent mean values + SEM

(error bars) of individually analyzed mice (n=3) infected with *T. cruzi* Y in **(C)** or Y-

OVA strain in **(D)**; class I-restricted (PA8 or OVA$_{257-264}$) and class II-restricted

(SA851.1c+d or OVA$_{323-339}$) peptides were employed. Data are representative of 2

independent experiments. Cell survival was measured by flow cytometry (Figure 2-

figure supplement 1B) and specific lysis calculated as described in Methods. (**E and F**)

Representative dot plots of CD4$^+$ T cells (gated as in Figure 1A) and corresponding

mean frequencies of gated subpopulations: **(E)** GzB and FoxP3 staining and **(F)** GzB

and T-bet staining. **(G)** Representative histogram of Eomes expression in CD4$^+$ T

splenocytes of non-infected mice (ctr, gray) and in GzB$^-$ (black) and GzB$^+$ (red) CD4$^+$ T

cells from infected mice, gated as in Figs. 1A and 1B (left) and mean frequencies of

Eomes$^+$ cells among these different subpopulations (right). All experiments were done

at day 14 pi. Bars represent mean values of non-infected ctr group n=3 or infected

group, n=3 to 5, individually analyzed mice. Error bars= SEM. **(H)** Runx3d and ThPOK

(*Zbtb7b*) mRNA expression estimated by qRT-PCR in CD4$^+$EYFP$^+$ T cells sorted from

infected and tamoxifen-treated GzmbCreER^{T2}/ROSA26EYFP mice, as described in

Methods and shown in Figure 2-figure supplement 3A; ND = not detected. Data are

representative of 3 independent experiments.

1210

Figure 3: Expression of IL-10, immunoregulatory molecules and cytotoxic

markers by CD4$^+$GzB$^+$ T cells. (A) Representative dot plots of IL-10 staining and

mean frequencies of IL-10$^+$ cells among non-infected (ctr, gray) or GzB$^-$ (black) and

GzB$^+$ (red) CD4$^+$ T cells from infected mice. **(B)** Representative histogram of Lag-3

staining and mean frequency of Lag-3$^+$ cells. **(C)** Representative dot plots of Lag-3 and

CD49b staining and mean frequency of different cells subsets. **(D)** Representative

histogram of Tim-3 staining and mean frequency of Tim-3$^+$ cells among different cells

subsets. **(E)** Representative histogram of CD27 staining and mean frequency of CD27$^+$

cells. **(A-E)** CD4$^+$GzB$^+$ T cells gated as in Figures 1A-1B; staining controls in Figure 3-

figure supplement 1. **(F-H)** Representative dot plots and mean frequencies of **(F)**

NKG2A/C/E, **(G)** NKG2D and **(H)** CRTAM expression among gated CD4$^+$ T

splenocytes. All experiments were done at day 14 pi. Non-infected ctr group, n=3;

infected group, n=3 to 5 mice, individually analyzed. Error bars= SEM; *p≤ 0.05;

***p≤ 0.001; ****p≤ 0.0001 (two-tailed Student t-test). Data are representative of 3

independent experiments. Staining controls are shown on Figure 3-figure supplement 2.

1226

Figure 4: CD4CTLs are severely reduced in *Myd88$^{-/-}$* mice. (A-B) Representative dot

plots of GzB and T-bet staining on gated CD4$^+$ T splenocytes (left panels) and mean

frequencies of T-bet$^+$, IFN-γ$^+$ and GzB$^+$ CD4$^+$ T cells and absolute numbers of

GzB$^+$CD4$^+$ T cells (on the right) from **(A)** WT (B6) and *Il12p40$^{-/-}$* mice on day 14 pi

and **(B)** WT and *Ifng$^{-/-}$* mice on day 11 pi. **(C)** Representative dot plots and gating

strategy. **(D)** Mean frequencies and **(E)** absolute numbers of GzB$^+$ or NKG2A/C/E$^+$,

NKG2D$^+$ and CRTAM$^+$ cells among GzB$^+$CD4$^+$ T cells in the spleen of WT (blue) and

Myd88$^{-/-}$ (red) mice at day 13 pi. Bars represent mean values in each group; n= 5

individually analyzed mice. Error bars= SEM; ns= non-significant; *p≤ 0.05; **p≤

0.01; ****p≤ 0.0001 (Student t-test). Representative dot plots of GzB, NKG2A/C/E,

NKG2D and CRTAM staining on CD4$^+$ T cells from non-infected animals are shown

in Figure 4-figure supplement 1B. **(F-G)** Frequencies (left) and absolute numbers

(right) of PRF$^+$ cells among CD4$^+$ T cells **(F)** and of PRF$^+$ cells among GzB$^+$CD4$^+$ T

cells **(G)** in the spleen of WT (blue bars) and *Myd88$^{-/-}$* (red bars) mice. GzB$^+$CD4$^+$ T

cells were gated as shown in Figs. 1A, 1B and 1G. Data in **(F)** and **(G)** are compiled

from four independent experiments with n= 3 animals in each group, each symbol

represents an individual analyzed mice. **(H)** Frequency of dead target cells (LPS-

induced B cell blasts) in cytotoxic assay, after 14 h of co-culture with CD4$^+$CD44^{hi} T

cells sorted from WT (blue line) or *Myd88$^{-/-}$* (red line) infected mice at day 13 pi. B cells

were coated with anti-CD3 (left) or not (right). Mean of triplicates +/- SEM for each

E:T ratio point are shown. Data are representative of 3 independent experiments.

1248

Figure 5: The CD4CTL gene program is absent in MyD88-deficient CD4$^+$ T cells.

(A) GSEA performed using pre-ranked list of genes expressed in WT or *Myd88$^{-/-}$* CD4$^+$

T cells sorted from mix-BM chimeras using the CD4CTL gene signature previously

described as gene set (66). **(B)** Venn diagram of CD4CTL genes upregulated in WT and

downregulated in *Myd88$^{-/-}$* CD4$^+$ T cells sorted from chimeric mice. **(C)** Heat map of

normalized CD4CTL-signature gene expression in WT or *Myd88$^{-/-}$* CD4$^+$ T cells sorted

from chimeric mice: values indicate mean Z-score, upregulated genes in red and

downregulated genes in blue. **(D)** Representative histograms of Blimp-1 expression

(right) and mean frequency of Blimp-1$^+$ splenocytes (left) among total gated CD4$^+$ T

cells from non-infected mice (ctr, gray shaded area and bar) or among CD4$^+$GzB$^+$ (red

line and bar) or CD4$^+$GzB$^-$ (black line and bar) from WT infected mice at day 14 pi.

Individually analyzed mice, n=4. Error bars=SEM, data are representative of 2

independent experiments. **(E)** Representative histograms (left and central panel) and

mean MFI values of CD39 expression (right panel) on gated FoxP3$^-$ (gray shaded area

and bar) or FoxP3$^+$ (blue line and bar) CD4$^+$ T cells from non-infected (ctr) mice (left);

GzB$^-$FoxP3$^-$ (black line and bar), GzB$^-$FoxP3$^+$ (purple line and bar) or GzB$^+$FoxP3$^-$ (red

line and bar) CD4$^+$ T cells from infected WT mice (center), at day 14 pi; individually

analyzed mice (n=4), error bars =SEM; data are representative of 4 independent

experiments. **(F)** Mean frequency (left) and absolute numbers (right) of GzB-expressing

cells among CD45.1$^+$ (B6.SJL WT) or CD45.2$^+$ (B6 WT or KO) CD4$^+$ T splenocytes in

mix-BM chimeric mice, at day 14 pi; WT:WT control chimera group, n=3; other

chimera groups, n=6 or 7. Error bars= SEM, *ns*= non-significant, ***p$\leq$ 0.001,****p$\leq$

0.0001 (Student t-test). Gating strategy and representative dot plots are shown in Figure

5-figure supplement 1. Data are representative of 3 independent experiments.

1273

Figure 6: CD4CTLs are severely reduced in *Il18ra$^{-/-}$* mice. (A and B) Frequencies

and absolute numbers of PRF$^+$ cells among CD4$^+$ T cells **(A)** and of PRF$^+$ cells among

GzB$^+$CD4$^+$ T cells **(B)** in WT (blue bars) and *Il18ra$^{-/-}$* (red bars) spleens. Data are

compiled from two independent experiments with n= 4-5 animals in each group, each

symbol represents an individual mouse. **(C)** Representative dot plots of GzB, CRTAM,

NKG2D and NKG2A/C/E staining in WT and *Il18ra$^{-/-}$* mice. **(D)** Mean frequencies and

(E) absolute numbers of GzB$^+$ or CRTAM$^+$, NKG2D$^+$ and NKG2A/C/E$^+$ cells among

CD4$^+$ and CD4$^+$GzB$^+$ T cells, respectively. **(A-E)** CD4$^+$ T cells gated as in Figs. 1A-1D;

n=4 individually analyzed mice in each group; error bars= SEM, *p$\leq$ 0.05, **p$\leq$ 0.01,

***p$\leq$ 0.001, *ns*= non-significant (Student t-test). Data are representative of 2

independent experiments. **(F)** Frequency of dead target cells (LPS-induced B cell blasts)

in cytotoxic assay, after 14 h of co-culture with CD4$^+$CD44^{hi} T cells sorted from WT

(blue line) or *Il18ra$^{-/-}$* (red line) infected mice at day 13 pi. B cells were coated with

anti-CD3 (left) or not (right). Mean of triplicates +/- SEM for each E:T ratio point are

 shown. **(G)** Survival curve (left) and parasite load in the heart (right) of infected *Il18ra*

1289 *−/−* mice, adoptively transferred with CD4$^+$GzBYFP$^+$ cells at day 7 pi (red curve and bar),

1290 or not (black curve and bar); time-line in Figure 6-figure supplement 1; n=10 mice in

1291 each group; *p* = 0.0277; survival data are compiled from two independent experiments.

1292

Figure 7: Cells with CD4CTL phenotype predominate in the cardiac tissue of

infected mice and are at higher frequencies in patients with Chagas

cardiomyopathy. (A) Representative dot plots (gated as in Figure 7-figure supplement

1A), and mean frequency of CD8$^+$ and CD4$^+$ T cells infiltrating the heart of B6 infected

mice at day 14 pi. **(B and C)** Representative dot plot and mean frequency of **(B)** GzB$^+$

and **(C)** LAMP-1$^+$ (CD107a$^+$) cells, among gated CD4$^+$ T cells infiltrating the infected

heart; ctr= non-infected, ND= non-detected. **(D)** Mean parasite load in the cardiac tissue

at different time points pi, obtained by real-time PCR, of individually analyzed mice as

described in Methods; Data are representative of at least 8 **(A and B)** or 2 **(C and D)**

independent experiments. **(E)** Representative dot plots and mean frequency of

CRTAM$^+$ and NKG2D$^+$ cells among gated intracardiac CD4$^+$GzB$^+$ T cells. DP=

CRTAM$^+$NKG2D$^+$ double positive cells. Individually analyzed mice, n= 4; error bars=

SEM; data are representative of 4 independent experiments. **(F)** Representative dot plots

and mean frequency of PRF$^+$ and GzB$^+$PRF$^+$ cells among intracardiac CD4$^+$GzB$^+$ T

cells; data are compiled from two independent experiments with n= 4 or 5 animals in

each group, each symbol represents an individual analyzed mice. **(G)** Intensity of PRF

staining (MFI) and **(H)** Frequency of PRF$^+$ cells among CD4$^+$ T cells in PBMCs from

patients with chronic Chagas disease cardiomyopathy (CC; n=10) and healthy donors

(HD; n=4) cultured overnight in medium alone (ctr) or in the presence of

trypomastigote antigens (+trypo); *p≤ 0.05, **p≤ 0.01, *ns*= non-significant; data

analyzed by paired Student t test. **(I)** Frequency of PRF$^+$ cells among CD4$^+$ T cells in

the peripheral blood of patients with chronic Chagas disease cardiomyopathy (CC;

n=10) and healthy donors (HD; n=4) cultured ON in the presence of trypomastigote

antigens. Gating strategy and representative dot plots are shown in Figure 7-figure

supplement 5. **(J)** Correlation analysis between the percentage of CD4$^+$PRF$^+$ T cells

among CD4$^+$ T cells in PBMCs from CC patients and left ventricular ejection fraction

(LVEF) (left panel) or left atrium diameter (right panel); indicated *p* and *r* values were

calculated using Pearson correlation test.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7