<p align="center">Nutrient limitation mimics artemisinin tolerance in malaria</p>

Abstract

Mounting evidence demonstrates that nutritional environment can alter pathogen drug
sensitivity. While the nutrient-rich media used for standard *in vitro* culture contains supra-
physiological nutrient concentrations, pathogens encounter a relatively restrictive environment
in vivo. We assessed the effect of nutrient limitation on the protozoan parasite that causes
malaria and demonstrated that short-term growth under physiologically-relevant mild nutrient
stress (or "metabolic priming") triggers increased tolerance of the potent antimalarial drug
dihydroartemisinin (DHA). We observed beneficial effects using both short-term survival assays
and longer-term proliferation studies, where metabolic priming increases parasite survival to a
level previously defined as DHA resistant (>1% survival). We performed these assessments by
either decreasing single nutrients that have distinct roles in parasite metabolism or using a media
formulation with reductions in many nutrients that simulates the human plasma environment.
We determined that priming-induced DHA tolerance was restricted to parasites that had newly
invaded the host red blood cell but the effect was not dependent on genetic background. The
molecular mechanisms of this intrinsic effect mimic aspects of genetic artemisinin tolerance,
including translational repression, autophagy, and protein export. This finding suggests
regardless of the impact on survival rates, environmental stress could stimulate changes that
ultimately directly contribute to drug tolerance. Because metabolic stress is likely to occur more
frequently *in vivo* compared to the stable *in vitro* environment, priming-induced drug tolerance
has ramifications for how *in vitro* results translate to *in vivo* studies. Improving our understanding
of how pathogens adjust their metabolism to impact survival of current and future drugs is an
important avenue of research to prevent and slow the spread of resistance.

Introduction

In vitro culture provides microbes with a stable environment for growth with relatively little challenge to organismal homeostasis. For example, the supra-physiological concentrations of nutrients *in vitro* largely protect organisms from the stress of starvation. Yet, nutrient limitation occurs frequently *in vivo*[1-4]. Therefore, the consequences of dynamic adaptation to stressors, such as nutrient variation, are largely missed in standard *in vitro* experiments.

Across the tree of life, the relationship between stress and fitness consequences is not necessarily linear. The adaptive benefits of low doses of mild environmental stress overwhelm the adverse effects from the stressor in a biphasic dose response phenomenon termed hormesis[5,6] (**Fig. 1A**). Given this effect, adjustment of metabolism in response to mild nutrient stress has the potential to increase pathogen fitness and survival of subsequent stressors, such as drug pressure.

Indeed, metabolic adjustments under varied nutritional environments alter drug sensitivity across diverse pathogens[7,8]. In *Trypanasoma cruzi*, reduction of exogenous glutamine decreases flux through the sterol synthesis pathway rendering parasites sensitive to azole drugs[9]. *Pseudomonas aeruginosa* supplementation with specific carbon sources increases susceptibility to tobramycin[10]. Increasing proline concentration confers halofuginone resistance in *Plasmodium falciparum*[11]. The nutritional environment *in vitro* is highly divergent from conditions that pathogens are exposed to in the context of human infection, with nutrient levels frequently found at considerably higher levels in culture[12-14]. Discrepancies between *in vitro* and *in vivo* environments can lead to reduced translatability of findings from non-physiological culture-based experiments when metabolic flux through pathways is altered[15,16]. For example, glycerol metabolism sensitizes *Mycobacterium tuberculosis* to pyrimidine-imidazoles through accumulation of toxic metabolites; however, these drugs are ineffective *in vivo* where changes in nutrient availability lead to differences in carbon metabolism[15].

These previously characterized changes in pathogen drug sensitivity as a consequence of varied nutritional environment typically depend on either 1) changes in flux through a specific metabolic pathway relevant to a given drug target or 2) a general slowing of growth leading to decreased uptake and activation of drug. Here, we present a case where nutrient stress induces a change in drug sensitivity of the human malaria parasite, *P. falciparum*. We demonstrate that short-term growth under mild, physiologically relevant nutrient limitation leads to superior recovery from drug treatment. We observe this effect under distinct conditions that impact the parasites differently; therefore, it is not dependent on a change in flux within a specific metabolic pathway nor an overall decrease in growth rate (as in above examples). Importantly, the increased survival rates achieve a level that reaches the field's definition of "resistance," yet genetic mutations that confer resistance are not necessary. We determined that the induction of pro-survival pathways

63 within the parasite occurs during nutrient limitation, which prime the parasite to better
64 withstand drug treatment. This study emphasizes the link between nutrient limitation, pro-
65 survival pathways, and sensitivity to drugs and may hold important implications for the evolution
66 of drug resistant pathogens.
67
Results
Metabolic priming increases parasite recovery from DHA
We sought to determine the effect of mild nutrient stress on the survival of *P. falciparum*.
Asynchronous parasite cultures were subjected to short-term (36-72h) incubation in media
restricted of either hypoxanthine or thiamine (**Table 1**, termed "metabolic priming").
Plasmodium lack the ability to *de novo* synthesize purines, instead requiring scavenging from the
environment. In serum-free malaria cultures, the purine derivative, hypoxanthine, is a standard
additive to fulfill this requirement. In contrast, *Plasmodium* can both *de novo* synthesize or
scavenge thiamine[17]. In addition to different modes of acquisition for these nutrients,
hypoxanthine and thiamine represent distinct metabolite classes: a nucleoside important for
nucleic acid synthesis and a cofactor for apicoplast and mitochondrial metabolism, respectively.
The duration of incubation and level of nutrient limitation for these metabolites were optimized
to induce mild stress while keeping the majority of the parasite population viable (**Supplemental
Fig. 1**).
82
We treated parasites grown in either metabolic priming conditions or standard media
(formulations detailed in *Methods*) with a rapid-acting, highly potent antimalarial drug (200nM
dihydroartemisinin (DHA) for 6h, **Fig. 1B**). DHA is an artemisinin derivative that causes
widespread damage within parasites by promiscuously alkylating different classes of
biomolecules, including heme and numerous proteins, thereby disrupting multiple biological
pathways[18-20]. Following removal of drug and continued culture for 10 days in standard media,
primed parasites showed a significant increase in cumulative proliferation compared to non-
primed controls (low hypoxanthine mean day 10 difference: 130%, *N*= 5, *p* = 0.0126; thiamine-
free: 173%, *N=4*, *p* = 0.0074) (**Fig. 1C-D**). We detected this effect in both priming conditions
despite the restricted nutrients in each condition being of unrelated metabolite classes,
irrespective of the parasite line (**Supplemental Table 1**, *Dd2* originally from Southeast Asia and
NF54 from Africa). The increased cumulative proliferation is driven by altered response to DHA
treatment; we only observed this effect in primed parasites that were subjected to DHA
treatment but not in those treated with vehicle alone (**Supplemental Fig. 2**).
97
During metabolic priming experiments, the level of stress applied to the parasites impacted
whether we observed superior recovery. For example, a >10% growth reduction over the course
of low hypoxanthine metabolic priming was found to facilitate the phenotype (**Fig. 1C**), while

failure to detect a growth phenotype (**Supplemental Fig. 3A**) or overly stressful conditions
(**Supplemental Fig. 3B**) were detrimental to post-DHA recovery. These data support a biphasic
dose response to metabolic priming characteristic of hormesis. However, this pattern is
dependent on the limiting nutrient; in other conditions, growth during priming did not serve as
a proxy for estimating dose response. For example, thiamine-free priming did not lead to growth
reduction but still led to increased cumulative proliferation following DHA treatment (**Fig. 1D**).
The differential effect of priming treatments on growth is likely due to parasite ability to scavenge
or *de novo* synthesize thiamine, whereas *P. falciparum* are strictly purine auxotrophs.
109
110 *Metabolic priming is stage-specific and facilitates increased DHA survival rates*
111 DHA survival patterns are dependent on the parasite life cycle stage (with highest survival at 0-
112 3hr post-invasion[21], **Fig. 2A**). Therefore, we evaluated 1) the stage effects of metabolic priming
113 and 2) the stage-specificity of the proliferation effect.
114
First, we compared parasite stage distribution in primed and non-primed populations to assess if
subtle changes in lifecycle stage occur during priming conditions (i.e. stage effects). We did not
detect any significant differences in the percentage of ring-stage parasites in non-primed
compared to primed samples (Non-primed mean ± S.E.M.: 61.6% ± 2.1%, Primed: 61.3% ± 2.3%;
p=0.67), (**Supplemental Table 1**). Therefore, an alteration of cell cycle progression is not
contributing to differences in sensitivity to DHA treatment.
121
Second, we performed shorter-term DHA survival assays on highly synchronous parasite
populations following priming to determine if changes in parasite recovery are stage-specific. To
assess the behavior of early stage parasites (**Fig. 2A**), we performed "ring stage survival assays"
(RSAs) on highly synchronous populations of 0-3h rings[21]. Metabolic priming prior to DHA
treatment increased ring stage survival (**Fig. 2B**); we observed a mean 2.1-fold increase for both
200nM and 700nM DHA, which is the concentration used for our study (**Fig. 1C-D**) and the
standard concentration for DHA RSAs, respectively. Notably, metabolic priming increased survival
percentages to a level that is considered resistant (>1% for 700nM DHA for 6h[21]). Additionally,
we tested later stage parasites (24-27h) in a modified RSA that assesses trophozoite survival
(TSA[21], **Fig. 2C**). We detected no significant increase in DHA survival following metabolic priming,
indicating the benefit of metabolic priming is ablated in trophozoites (**Fig. 2D**). In addition to
showing ring stage-specificity of the effect, these experiments also showed that higher
cumulative proliferation in primed samples post-DHA is a result of an increased percentage of
parasites surviving DHA treatment, as opposed to, increased proliferation per parasite.
136
Metabolic priming increases survival in parasites with genetic DHA resistance

We sought to assess if the survival benefits of metabolic priming also apply to DHA resistant
parasites (RSA >1%[21]). Using our long term growth assay, we found that metabolic-priming does
improve post-drug recovery of a moderately DHA resistant parasite strain (**Fig. 3A**; MRA-1238,
RSA: 6.2% survival, *kelch13* I543T mutant[22]). We confirmed this effect using RSAs; metabolic
priming increases survival of a high DHA concentration (700mM) by a mean of 2.1-fold (**Fig. 3B**).
This parasite line was not tested at the lower 200nM concentration due to their known resistance
status; other DHA resistant lines (i.e. MRA 1240, RDA: 88.2% survival, *kelch 13* R539T) could not
be assessed because of their high tolerance to 700nM DHA levels. These data in combination
with data generated using DHA sensitive lines (**Figs. 1** and **2, Supplemental Table 1;** *Dd2* and
NF54), indicate that increased DHA survival following metabolic priming triggers an intrinsic
response that is not dependent on genetic background.
149
Autophagy contributes to increased DHA survival
Phosphorylation of the translation initiation factor eIF2α occurs in *Plasmodium* in response to
nutritional stress[23,24]. Additionally, increased levels of eIF2α phosphorylation are protective for
DHA treatment[25]. In higher eukaryotes, phosphorylation of eIF2α can promote activation of the
PI3K complex and increase transcription of autophagy-related genes[26,27]. In *Plasmodium*,
increased PI3K activity mediates artemisinin resistance[28]. Further, polymorphisms in autophagy-
related genes, such as ATG18 and ATG7, are associated with decreased artemisinin sensitivity in
Southeast Asian parasite populations[29,30]. Recent evidence indicates the role of eIF2α
phosphorylation in promoting autophagy is conserved in *Plasmodium*[31]. Thus, autophagy may be
activated by metabolic priming in a manner associated with DHA survival.
160
To explore the role of autophagy in priming, we used a parasite strain with a conditional
regulation of ATG8 expression; removal of the small molecule, anhydrotetracycline (aTc), leads
to knockdown of ATG8, which is the essential for autophagosome formation and therefore
essential for successful macroautophagy[32]. When we compared post-DHA recovery between
parasites with low versus normal levels of ATG8 expression (**Supplemental Fig. 4 A-B**), we
detected a 3.6-fold lower recovery benefit in parasites with low ATG8 expression (ATG8 On day
10 difference between low hypoxanthine and non-primed: 304%, ATG8 Off: 85%; **Supplemental**
Fig. 4C-D, **Supplemental Table 1**). Along with translational repression, this result suggests that
autophagy contributes to priming-induced pro-survival phenotype. However, the effect is
difficult to fully ascertain using this approach, given that autophagy plays a role in the recovery
of DHA treatment[29,31]; we confirmed this role by measuring the difference in post-drug recovery
time between non-primed parasites with normal and low ATG8 expression. Parasites with normal
ATG8 surpass 5% parasitemia ~4 days earlier than parasites with low ATG8 expression following
a 200nM DHA pulse (ATG8 On: 7.3d ± 0.7d (S.E.M.), ATG8 Off: 11.5d ± 0.5d, **Supplemental Fig.**
4E)

Physiological growth conditions promote increased DHA survival

Nutrient limitation is a physiologically relevant stress that parasites adapt to in the context of human infection. Our low hypoxanthine and thiamine-free metabolic priming conditions mimic nutrient stress from a single nutrient deficiency. While sole micronutrient deficiencies occur *in vivo*[33,34], this is not the only relevant nutritional difference between *in vitro* cultures and *in vivo* infections. In general, levels of not just one, but many, nutrients are dramatically lower *in vivo* compared to the supra-physiological levels in standard RPMI-based media formulations[12-14].

We hypothesized that the nutritional differences between RPMI and human plasma is sufficient to induce a metabolic priming-like effect similar to that seen with our established conditions. To test this, we utilized Human Plasma-Like Media (HPLM) as a base for *P. falciparum* culture[35]. Under routine propagation conditions (see *Methods*), parasites maintained in HPLM-based media grew equivalent to those in RPMI-based media (HPLM (mean ± S.E.M): 18 ± 1.9-fold per replication cycle, RPMI: and 19 ± 2.5-fold, **Fig. 4A**).

We adapted parasites to HPLM-based media for at least 7 days prior to treating with DHA and maintained parasites in the same media for 10 days of recovery. Propagation in HPLM-based media prior to DHA pulse led to superior post-drug recovery compared parasites in RPMI-based media (mean day 10 difference: 459%, *N*= 2, *p* = 0.0037, **Fig. 4B**, **Supplemental Table 1**). As with low hypoxanthine and thiamine-free priming conditions, growth in HPLM also increased DHA survival in RSAs (**Fig. 4C**, mean difference of 1.4-fold including both 200 and 700nM DHA samples). These data provide evidence that related pro-survival changes are occurring in response to both single nutrient deficiency and broader reductions of environmental nutrients.

Metabolic priming shifts transcriptome toward artemisinin tolerance

To more fully explore pathways that are altered in response to nutritional environment, we assessed gene expression in synchronous ring stage non-primed parasites and parasites primed with low hypoxanthine, thiamine-free, or HPLM conditions. Principal component analysis showed that each group had a distinct transcriptional profile, with low hypoxanthine primed parasites clustering separate from the other three groups on PC1 and the remaining groups separating on PC2 (**Fig. 5A**). This pattern parallels the number of significantly deferentially expressed (DE) genes detected in experimental groups compared to non-primed control samples with low hypoxanthine primed parasites yielding the largest number of differences (**Fig. 5B**).

To identify pro-survival pathways, we performed Gene Set Enrichment Analysis (GSEA) across priming conditions (**Fig. 5C**). Some metabolic pathways not previously implicated in stress responses, but important for parasite biology, were altered in a condition-dependent manner.

For example, pyrimidine biosynthesis and apicoplast metabolism were significantly down-
regulated in in thiamine-free and HPLM groups, respectively (**Fig. 5C**). Despite the impact of ATG8
knockdown on our phenotype (**Supplemental Fig. 4C-D**), GSEA indicated autophagy was
significantly upregulated in low hypoxanthine primed samples but not across all groups (**Fig. 5C**).
Thus, induction of autophagy may be condition-specific and is unlikely to be a primary driver of
the observed phenotype.
220
Overall, GSEA showed that 25 of 463 total pathways were significantly enriched across all groups
(**Supplemental Table 2**, including pathways heavy in exported proteins (*e.g.* protein-protein
interactions between *P. falciparum* and the red blood cell). Upregulation of exported proteins
has been previously observed in both the artemisinin resistance transcriptome and as a response
to nutrient limitation[36-38]. Translational regulation was also significantly upregulated in all three
conditions in concordance with previous knowledge of the eIF2α-mediated response under
nutrient stress (**Fig. 5C, Supplemental Table 2**). This pathway includes genes with roles in
processes known to impact DHA survival including the unfolded protein response (UPR) and
proteasomal degradation (**Supplemental Table 2**).
230
Due to the large number of DE genes following hypoxanthine priming, and relatively small
number in thiamine-free samples, it was necessary to limit the complexity of our results to
further assess individual transcripts contributing to our phenotype. We specifically focused on
the top 15 up- and down-regulated genes in each group as determined by lowest adjusted p-
values. This yielded 37 up- and 42 down-regulated unique genes across the three treatment
conditions as there was some overlap between groups. From this list of genes, we identified
those that had an adjusted p-value of ≤0.05 in all groups as a curated list of 26 up- and 20 down-
regulated genes of interest (**Table 2**). This curated list contained many genes implicated in
artemisinin genetic tolerance, such as *coronin* (PF3D7_1251200), a gene known to be sufficient
to induce artemisinin tolerance when mutated[39]. When compared to a list of 151 genes known
to be basally altered (without active DHA treatment; **Supplemental Table 3**) in genetically
artemisinin tolerant parasites[39-43], 8 of our curated genes were represented (**Table 2**). Further,
changes in this curated set of 151 genes (designated as "ART Tolerance" in **Fig. 5C**) were highly
enriched by GSEA in all groups (in the top 1% of 463 pathways by adjusted p-value). These data
indicate that nutrient limitation remodels metabolism in parasites to induce an artemisinin
tolerance-like state.
247
Discussion
In the current study, we have demonstrated that physiologically relevant nutrient limitation
stimulates intrinsic pro-survival pathways in *P. falciparum* (**Figs. 1-4**). Our analyses indicate genes
within these altered pathways directly contribute to genetic artemisinin tolerance (**Fig. 5C**), thus

we speculate that nutrient limitation offers a preamble for resistance evolution. Our findings
connect to other findings on cellular responses to both nutrient limitation and tolerance (**Fig. 6**)
and provide a framework for how the nutritional environment impacts pathogen homeostasis.
We explore these connections and their relevance below.
256
Limiting nutrient levels for malaria parasites in vitro
The supra-physiological concentrations of nutrients found in common media formulations, such
as RPMI-1640, can potentiate genetic, transcriptional, and metabolic changes in parasite biology
(reviewed in [12,14]). Here, we observed superior parasite recovery following limitation of single
nutrients in *in vitro* growth media; hypoxanthine and thiamine were chosen in part due to
contrasting metabolic attributes outlined in the *Results* section, but also due to potential
relevance to conditions *P. falciparum* may experience *in vivo* (see further discussion below). This
approach is similar to other studies that induced nutrient stress by reduction of a single amino
acid[23,44] or select metabolite classes[24,31,45]. We also observed superior recovery when parasites
were grown in HPLM, a physiological media formulation that has reduced concentrations of
multiple nutrients[13]. To our knowledge, this is the first use of HPLM as a media base for the
propagation of *P. falciparum*; to induce starvation in previous studies, nutrient-rich RPMI-based
media is diluted[45], producing a blanket reduction in nutrient levels. Regardless of the approach,
the *P. falciparum* response to artemisinin treatment, when not protected by this supra-
physiological glut of nutrients, had not been previously evaluated. This study begins to connect
disparate observations to improve our understanding of how the environment impacts cellular
responses.
274
Molecular connections between nutrient limitation and DHA survival
We demonstrate that metabolic priming triggers broad alterations of translational regulation
(**Fig. 5C** and **6B**), including genes associated with the UPR and proteasomal degradation. Previous
studies in *Plasmodium* connected nutrient limitation with translational regulation (via eIF2α
phosphorylation[23,24]) and separately, eIF2α phosphorylation with survival of DHA treatment [25]
(**Fig. 6A** and **C**). Our study establishes a direct link between nutrient limitation and DHA survival
(**Fig. 6B**). Additionally, our data support a role for autophagy in priming-induced DHA survival
(**Supplementary Fig. 4C-D** and **Fig. 5C**). Given that the activation of autophagy in *P. falciparum*
and higher eukaryotes is partially dependent on translational regulation by eIF2α
phosphorylation[31,46], the connection between nutrient limitation, eIF2a-autophagy, and DHA
survival is growing stronger. However, the extent to which eIF2α phosphorylation-dependent
latency is mediating this phenotype remains to be explored.
287
A surprising outcome of our study was the discovery that nutrient limitation triggered many
responses that mimic an artemisinin tolerance-like transcriptional state (**Fig. 6B** and **C**). This

adaptive response, which was stimulated by all priming conditions (**Fig. 5**), triggered a change in
expression for genes that had previously been linked to genetic artemisinin tolerance (**Table 2**).
Future investigations should determine the longevity of priming-induced pro-survival signals and
whether this adaptation facilitates development of genetic tolerance. This phenomenon has
been observed in the development of antibiotic resistant bacteria[47] and recently proposed for
clinical *Plasmodium* artemisinin resistance[38]. Of note, more than half of the top transcriptional
markers for resistance identified by Zhu, *et al*. were significantly altered (by adjusted p-value) in
the same direction in at least one of our priming conditions (32/58 genes).
298
Translation from in vitro to in vivo results
Analyses of how the *in vitro* environment affects pathogens outside of their native environment
remains limited. Alterations of metabolism that influence pathogen drug sensitivity can lead to
discordance between *in vitro* results and *in vivo* responses. Our data emphasizes the importance
of the nutritional environment, whether standard *in vitro* culture conditions or more *in vivo*-like
environments, on malaria parasite survival (**Fig. 6B**). Moving forward, the use of physiological
HPLM-based media may be appropriate for select assessments where clinical translation is
paramount. Future studies should also investigate if the nutritional environment is relevant to
other antimalarial drugs and how pro-survival pathways can be targeted to enhance their killing
potential.
309
Relevance for the in vivo host environment
Increasing resistance to artemisinin and its partner drugs necessitates development of new
antimalarial drugs. Nucleotide metabolism is a potential future drug target in *P. falciparum*;
antimalarials are currently being developed to inhibit both purine scavenging (including
hypoxanthine) and pyrimidine biosynthesis[48-51]. As some of these candidates move closer to use
in the clinic, it is imperative to understand how parasites respond to the stress of nucleotide
deprivation. Similarly, thiamine limitation has physiological relevance to *P. falciparum* infection
as clinical thiamine deficiency is common in malaria endemic regions, such as Southeast Asia[33,34],
and evidence suggests malaria infection exacerbates this deficiency[52]. Additionally, metabolic
network reconstructions imply that drug resistance status can alter metabolism, making parasites
more reliant on thiamine import for survival[53]. This metabolic shift is corroborated by increased
expression in artemisinin tolerant isolates of thiamine pyrophosphokinase, a gene necessary for
conversion of imported thiamine to the active thiamine pyrophosphate form[54].
323
Combining artemisinin with partner drugs of distinct mechanisms of action has contributed to
the effectiveness of antimalarial drugs over recent decades. Such combination therapies
minimize the development of tolerance or resistance. Yet, the potential for partner drugs that
target metabolism (as described above) to induce an artemisinin tolerant-like transcriptional

state poses an unexpected challenge that should be considered in the development of new
antimalarial combinations.
330
Combating antimalarial drug resistance is especially critical as the spread of genetic artemisinin
tolerance threatens to undo progress in reducing malaria mortality[55]. However, the challenges of
fighting drug resistance are not unique to malaria. The interplay between nutrient limitation, pro-
survival pathways, and sensitivity to drug treatment (**Fig. 6**) has important implications for the
evolution of drug resistance across diverse pathogens. How microbes adjust their metabolism in
ways that impact survival of current and future drugs is an important avenue of research to
prevent and slow the spread of drug resistant pathogens.
338
Materials and Methods
Parasites and Growth
Plasmodium falciparum lines MRA 150 (Dd2), MRA 1000 (NF54), and MRA 1238 were obtained
from the Malaria Research and Reference Reagent Resource Center (MR4, BEI Resources). The
ATG8 conditional TetR-Dozi knockdown line was a generous gift from Ellen Yeh (Stanford
University, Stanford, CA). *Plasmodium* cultures were maintained in A+ human erythrocytes
(Valley Biomedical, Winchester, VA) at 3% hematocrit in RPMI 1640 HEPES (Sigma Aldrich, St
Louis, MO) supplemented with 0.5% Albumax II Lipid-Rich BSA (Sigma Aldrich, St Louis, MO) and
50 mg/L hypoxanthine (Thermo Fisher Scientific, Waltham, MA). This formulation is referred to
as "standard media" throughout the manuscript. ATG8 TetR-DOZI parasites were maintained
with 0.5μM anhydrotetracycline (Sigma Aldrich, St Louis, MO) or supplemented with isopentyl
pyrophosphate (Isoprenoids LC, Tampa, FL) as previously described[32]. Cultures were grown at
37°C and individually flushed with 5% oxygen, 5% carbon dioxide, 90% nitrogen gas. Dilution of
cultures with uninfected erythrocytes and changing of culture medium was performed every
other day. Parasitemia was determined by flow cytometry using SYBR Green I staining. Cultures
were confirmed negative for mycoplasma approximately monthly using a LookOut Mycoplasma
PCR detection kit (Sigma Aldrich, St Louis, MO).
356
Metabolic Priming
Low hypoxanthine media was made using RPMI 1640 HEPES base with reduced exogenous
hypoxanthine addition to a final concentration of 0.5μM. Thiamine-free media was custom
ordered to be identical to RPMI 1640 HEPES without the addition of thiamine hydrochloride.
Hypoxanthine was added to thiamine-free media to 50 mg/L. Human Plasma-Like Media (HPLM,
Thermo Fisher Scientific, Waltham, MA) was used without added HEPES or exogenous
hypoxanthine. All media formulations were supplemented with 0.5% Albumax II Lipid-Rich BSA.
364

Uninfected erythrocytes were pre-incubated prior to use in priming experiments in the
appropriate low nutrient medium for 48h at 37°C, 3-6% hematocrit, and 5% oxygen, 5% carbon
dioxide, 90% nitrogen gas. Pre-incubated uninfected erythrocytes were seeded with infected
erythrocyte culture to a starting parasitemia of <0.5% and resuspended in control medium for
non-primed samples or low nutrient medium for primed samples. Cultures were allowed to
incubate for the prescribed period of time dependent on the nutrient deprived (**Table 1**). For 72h
incubations, media was refreshed at 48h.

Aliquots were taken for flow cytometry measurement with SYBR Green I and MitoProbe DiIC1(5)
kit (both Thermo Fisher Scientific, Waltham, MA). Primed samples were compared to non-primed
counterparts for reduction in growth, mitochondrial membrane potential (MMP), and
percentage of ring stage parasites. Priming was considered successful when the following
conditions were met for low hypoxanthine primed samples compared to non-primed: 1) an
approx. >10% growth decrease, 2) little to no decrease in MMP (approx. <10% drop), and 3) ring
stage percentages within approx. 10% of non-primed. Priming in thiamine-free and HPLM
conditions was considered successful if both conditions "2" and "3" were met. Following
successful priming, both primed and non-primed samples were treated with either 200nM
dihydroartemisinin (DHA, Sigma Aldrich, St Louis, MO) or DMSO for 6h. To remove drug, cultures
were washed three times in media and all samples were resuspended in normal, full-nutrient
RPMI + Albumax media and returned to the incubator. Cultures were measured every other day
with SYBR Green I and MitoProbe for 10-14 days post drug treatment.

Biological replicates were performed in technical duplicate. For statistical analysis, growth data
10 days post-DHA was log transformed and tested for normality by Shapiro-Wilks test prior to
running a repeated measures two-way ANOVA followed by Sidak's multiple comparisons test.
RSA and TSA data was tested by ordinary two-way ANOVA followed by Dunnett's multiple
comparisons test. Analysis and visualizations were made using GraphPad Prism version 7.04.

Ring and Trophozoite Stage Survival Assays
Survival assays were performed as previously described with minor modifications[56]. Briefly, all
metabolically primed samples were suspended in the relevant media at 36h, 72h, or ≥7d prior to
drug treatment for thiamine-, hypoxanthine-, and HPLM-primed conditions, respectively.
Approximately 30h prior to 0-3h ring generation, 35mL cultures were synchronized with 5% D-
sorbitol and allowed to progress until the culture was predominantly schizonts. Schizonts were
isolated by layering 4 mL of culture over 4 mL of 75% Percoll, centrifugation, and collection of the
intermediate band. Isolated schizonts were washed then added to uninfected erythrocytes in the
appropriate media formulation. Exactly three hours later, a rapid D-sorbitol synchronization was
performed (10m at 37 °C followed by 5s vortex) to remove any uninvaded late-stage

parasites. Parasites for TSAs were returned to the incubator for exactly 24h before drug
treatment, whereas parasites for RSAs were immediately pulsed with either DMSO or DHA
(200nM or 700nM) for 6h. Following drug treatment, all cells were washed multiple times and
returned to RPMI + ALB media for 66h prior to assessment of survival by flow cytometry
measurement with SYBR Green I and MitoProbe DiIC1(5) kit.

Immunoblotting
Anti-ATG8 antibody was a gift from Ellen Yeh (Stanford University, Stanford, CA). Anti-ATG8 was
used in conjunction goat Anti-guinea pig IgG H&L (Alexa Fluor® 488) (Abcam, Waltham, MA).
Bound antibodies were detected on a Bio-Rad Imager and quantified using Image Lab Software
(Bio-Rad, Hercules, CA).

RNAseq
Ring stage samples were generated by synchronization with 5% sorbitol 88h and 44h prior to
harvest to accommodate the ~44h erythrocytic cycle duration of Dd2[57]. Primed sample groups
were grown as described above in their designated media for 72h, 36h, and 7d prior to extraction
for hypoxanthine, thiamine, and HPLM groups, respectively. Starting 24h prior to RNA extraction,
blood smears were assessed every 3 hours until reinvasion was observed to approximate the age
of rings in final samples. In all RNAseq samples, reinvasion was first observed 18h prior to harvest.
At sample collection, erythrocytes were lysed in 0.15% saponin before RNA was extracted from
parasite pellets using a Direct-zol RNA Miniprep Kit (Zymo Research) according to the
manufacturer's instructions. An aliquot of each sample was taken for assessment with a 2100
Bioanalyzer using the RNA 6000 Pico assay (Agilent Technologies, USA) before the remainder of
sample was snap frozen in liquid nitrogen and stored at -80C.

Samples were shipped to Genewiz, Inc. for standard RNAseq with polyA selection. Raw reads
obtained from Genewiz, Inc. were checked for overall quality and trimmed to remove adapters
and low-quality bases from 3' ends (with parameter -q 25) using TRIMGALORE (v. 0.6.7). STAR (v.
2.7.9a) was used to align trimmed reads with parameters – genomeSAindexNbases 11 and –
alignIntronMax 500. Featurecounts (v. 2.0.1) was used for gene counting with parameter -t
'exon'. Differential expression analysis was done using DESeq2 (v. 1.34.0). Genes were considered
significantly differentially expressed if the following criteria were met 1) Benjamini-Hochberg
adjusted p-value of ≤0.05 and 2) log2-fold change of ≥1.0 or ≤ -1.0. Gene set enrichment analysis
(GSEA) was performed using fgsea (v. 1.20.0). 3D7 genome sequence for alignment and
annotation, gene product descriptions, and metabolic pathway information were pulled from
PlasmoDB (Release 55). Visualizations and analyses were generated in R version 4.1.2 using
Tidyverse (v. 1.3.1) packages.

Tables and Figures

Table 1. **Length and concentration of nutrient limitation for metabolic priming.** *Priming was considered successful for this nutrient when an approximately 10-50% growth decrease occurred, there was little to no decrease in mitochondrial membrane potential (MMP) (approx. <10% drop), and ring stage percentages were within <10% ± non-primed. **Priming was considered successful for these nutrients when the latter two above conditions (MMP and staging) were met but no growth reduction criteria were required.

Nutrient Restricted	Class of Restricted Nutrient	Conc. of Restricted Nutrient	Length of Restriction
Hypoxanthine*	Purine	0.5uM	48-72h
Thiamine**	Cofactor	0.0uM	36h
Multiple (HPLM)**	Multiple	Variable	≥ 7d

Table 2. Genes of interest curated from differentially expressed gene lists. Asterisk indicates genes found to be basally altered in artemisinin mutants (from **Supplemental Table 3**).

Gene ID	Product Description
Upregulated	
PF3D7_0214600*	serine/threonine protein kinase STK2, putative
PF3D7_0402200	surface-associated interspersed protein 4.1 (SURFIN 4.1), pseudogene
PF3D7_0418600	regulator of chromosome condensation, putative
PF3D7_0613900	myosin E, putative
PF3D7_0618000	conserved Plasmodium membrane protein, unknown function
PF3D7_0707300	rhoptry-associated membrane antigen
PF3D7_0724900	kinesin-20, putative
PF3D7_0817600*	conserved protein, unknown function
PF3D7_0822900*	PhIL1-interacting candidate PIC2
PF3D7_0903600	conserved protein, unknown function
PF3D7_0911100	START domain-containing protein, putative
PF3D7_0919900	regulator of chromosome condensation-PP1-interacting protein
PF3D7_1026600	conserved Plasmodium protein, unknown function
PF3D7_1035300*	glutamate-rich protein GLURP
PF3D7_1126700	conserved Plasmodium protein, unknown function
PF3D7_1143100	AP2 domain transcription factor AP2-O
PF3D7_1145200*	serine/threonine protein kinase, putative
PF3D7_1206300*	conserved Plasmodium protein, unknown function
PF3D7_1223100*	cAMP-dependent protein kinase regulatory subunit
PF3D7_1251200*	coronin
PF3D7_1252400	reticulocyte binding protein homologue 3, pseudogene
PF3D7_1327300	conserved Plasmodium protein, unknown function
PF3D7_1335400	reticulocyte binding protein 2 homologue a
PF3D7_1356800	serine/threonine protein kinase ARK3, putative
PF3D7_1371600	erythrocyte binding like protein 1, pseudogene
PF3D7_1423300	serine/threonine protein phosphatase 7
Downregulated	
PF3D7_0308000	DNA polymerase delta small subunit, putative
PF3D7_0510100	KH domain-containing protein, putative
PF3D7_0512800	conserved Plasmodium protein, unknown function

PF3D7_0711000	AAA family ATPase, CDC48 subfamily
PF3D7_0715900	cation diffusion facilitator family protein, putative
PF3D7_0801100	28S ribosomal RNA
PF3D7_0802200	1-cys peroxiredoxin
PF3D7_0923800	thioredoxin reductase
PF3D7_1130900	conserved Plasmodium protein, unknown function
PF3D7_1239200	AP2 domain transcription factor, putative
PF3D7_1303800	conserved Plasmodium protein, unknown function
PF3D7_1322300	BRCT domain-containing protein, putative
PF3D7_1330600	elongation factor Tu, putative
PF3D7_1334500	MSP7-like protein
PF3D7_1359600	conserved Plasmodium protein, unknown function
PF3D7_1371800	Plasmodium exported protein, unknown function
PF3D7_1419200	thioredoxin-like protein, putative
PF3D7_1440200	stromal-processing peptidase, putative
PF3D7_1443900	heat shock protein 90, putative
PF3D7_MIT04100	large subunit ribosomal RNA fragment D

452
453

454
455
Figure 1. Mild nutrient stress prior to DHA treatment increases post-drug recovery. A) The
biphasic dose response to stress characteristic of hormesis. B) Paradigm used for metabolic
priming followed by DHA challenge and recovery. C-D) Post-DHA recovery in standard media of
P. falciparum primed in either low hypoxanthine or thiamine-free media. Bars represent S.E.M.
of technical replicates within one representative experiment. Results from all independent assays
are detailed in Supplemental Table 1 (low hypoxanthine; *N*=5, thiamine-free; *N*=4).
462
463

Figure 2. Increases in post-DHA survival are mediated by ring stage parasites. A) *P. falciparum* asexual blood stage replication cycle. DHA tolerance is highest in ring stage parasites 0-3h post-invasion[21]. B-C) Percent survival for early rings (B, 0-3h post-invasion, *N*=3-4) or trophozoites (C, 24-27h post-invasion, *N*=1-2) measured 66h after treatment with 200 or 700nM DHA for 6h. Bars represent S.E.M. Parasite line: *Dd2*. RSA p-values are as follows: Non-primed vs. low hypoxanthine: 200nM = 0.031, 700nM = 0.056. Non-primed vs. thiamine-free: 200nM = 0.038, 700nM = 0.073. TSA p-values are as follows. Non-primed vs. low hypoxanthine: 200nM = 0.407, 700nM = 0.930. Non-primed vs. thiamine free: 200nM = 0.796, 700nM = 0.999. P-values <0.1 are indicated with one asterisk (*). P-values <0.05 are indicated with two asterisks (**).

482
483
Figure 3. Metabolic priming effects are conserved in parasites carrying genetic DHA resistance.
A) Post-DHA recovery of DHA tolerant parasite line in standard media and primed in low
hypoxanthine or thiamine-free media. Bars represent S.E.M. of technical replicates within one
representative experiment. B) Percent survival for early rings (0-3h post-invasion) measured 66h
after treatment with 700nM DHA for 6h (*N*=1-3). Bars represent S.E.M. Parasite line: *MRA-1238*.
RSA p-values are as follows: Non-primed vs. low hypoxanthine: 700nM = 0.012. Non-primed vs.
thiamine free: 700nM = 0.026. P-values <0.1 are indicated with one asterisk (*). P-values <0.05
are indicated with two asterisks (**).
492
493

494
495

Figure 4. Physiologic media increases post-DHA recovery. A) Average growth rate of *Dd2* parasites propagated in RPMI- versus HPLM-based media. *N*=10 representing 5 replication cycles of two independent growth assays. B) Post-DHA recovery of *P. falciparum* propagated in RPMI- or HPLM-based media. Bars represent S.E.M. of technical replicates within one representative experiment. Results from independent assays are detailed in Supplemental Table 1 (*N*=2). C) Percent survival for early rings (0-3h post-invasion) measured 66h after treatment with 200 or 700nM DHA for 6h (*N*=1). Parasites were adapted to HPLM-based media at least 7 days prior to drug treatment and maintained in this media through the RSA reading. Bars represent S.E.M. Parasite line: *Dd2*. RPMI = Roswell Park Memorial Institute Media. HPLM = Human Plasma-Like Media.

506
507

Figure 5. Metabolic priming induces artemisinin tolerance-like transcriptional changes. A) PCA plot of gene expression from each condition. B) Volcano plots of differentially expressed genes for each condition. Log2 fold change thresholds set at -1 and +1. Adjusted p-value set to ≤0.05. C) GSEA results for selected pathways. TRUE and FALSE = adjusted p-value of <0.05 and >0.05, respectively. RPMI = Roswell Park Memorial Institute Media. HPLM = Human Plasma-Like Media. GSEA = Gene Set Enrichment Analysis. PCA = Principal Component Analysis.

Figure 6. Integration of information related to nutrient deprivation and artemisinin tolerance.
A) Previous studies identified that nutrient limitation has metabolic impacts on *Plasmodium*
parasites. Translational regulation: eif2α[24,31]; Exported proteins[37]; Latency-like state[23];
Transcriptional Repression[44]; Autophagy: ATG5/8[58]. **B**) The current studies have identified a
direct link between nutrient limitation and parasite survival following dihydroartemisinin (DHA)
treatment. These conditions are more relevant in the human host than in standard *in vitro*
conditions. Transcriptional changes induced by nutrient limitation mimic those that contribute
to artemisinin tolerance. Translational regulation: Fig. 5C, Supplemental Table 2, "Transl_Regul"
(285 genes); Exported proteins: Supplemental Table 2 "Meroz_RBClig" (19 genes) and
"DomSurfaceProt" (14 genes); Invasion: Table 2 (i.e. GLURP, Phil1), Supplemental Table 2
"Erythrocyteinvasionpath" (8 genes), "Merozoiteproteins" (89 genes); Kinome: Table 2 (i.e. STK2,
STK, CDPK, ARK3), Supplemental Table 2 "Phospho_mero" (482 genes); Vesicular trafficking:
Table 2 (i.e. coronin); Autophagy: Supplemental Fig. 4 (ATG8), Fig. 5C (only Hypoxanthine
priming), grey text- full contribution to phenotype remains unclear due to the contribution of
autophagy to DHA recovery[29,31], Supplemental Fig. 4. **C**) Previous studies identified pathways
associated with artemisinin tolerance. Vesicular trafficking: kelch13[28], coronon[39], Ap2μ[59];
Autophagy: ATG18[29,31]; Translational regulation: unfolded protein response[60], proteasomal
degradation (UBP1[59]); Exported proteins[36,38]; Invasion: GLURP and Phil1[40]; Kinome: STK2, STK,

CDPK[40], Latency: grey text- unclear if distinct from nutrient-dependent latency or directly
contributes to tolerance[25,61].
569

References

Berney, M. & Berney-Meyer, L. Mycobacterium tuberculosis in the Face of Host-Imposed Nutrient Limitation. *Microbiology spectrum* 5, doi:10.1128/microbiolspec.TBTB2-0030-2016 (2017).

Mancio-Silva, L. *et al.* Nutrient sensing modulates malaria parasite virulence. *Nature* 547, 213-216, doi:10.1038/nature23009 (2017).

Mansour, S. C. *et al.* Bacterial Abscess Formation Is Controlled by the Stringent Stress Response and Can Be Targeted Therapeutically. *EBioMedicine* 12, 219-226, doi:10.1016/j.ebiom.2016.09.015 (2016).

Tattoli, I. *et al.* Amino acid starvation induced by invasive bacterial pathogens triggers an innate host defense program. *Cell host & microbe* 11, 563-575, doi:10.1016/j.chom.2012.04.012 (2012).

Calabrese, E. J. Hormesis: Path and Progression to Significance. *Int J Mol Sci* 19, doi:10.3390/ijms19102871 (2018).

Rossnerova, A. *et al.* The Molecular Mechanisms of Adaptive Response Related to Environmental Stress. *Int J Mol Sci* 21, 7053, doi:10.3390/ijms21197053 (2020).

Martínez, J. L. & Rojo, F. Metabolic regulation of antibiotic resistance. *FEMS Microbiology Reviews* 35, 768-789, doi:10.1111/j.1574-6976.2011.00282.x (2011).

Yang, J. H., Bening, S. C. & Collins, J. J. Antibiotic efficacy-context matters. *Current opinion in microbiology* 39, 73-80, doi:10.1016/j.mib.2017.09.002 (2017).

Dumoulin, P. C., Vollrath, J., Tomko, S. S., Wang, J. X. & Burleigh, B. Glutamine metabolism modulates azole susceptibility in Trypanosoma cruzi amastigotes. *eLife* 9, doi:10.7554/eLife.60226 (2020).

Meylan, S. *et al.* Carbon Sources Tune Antibiotic Susceptibility in Pseudomonas aeruginosa via Tricarboxylic Acid Cycle Control. *Cell chemical biology* 24, 195-206, doi:10.1016/j.chembiol.2016.12.015 (2017).

Herman, J. D. *et al.* A genomic and evolutionary approach reveals non-genetic drug resistance in malaria. *Genome biology* 15, 511, doi:10.1186/preaccept-1067113631444973 (2014).

Brown, A. C. & Guler, J. L. From Circulation to Cultivation: Plasmodium In Vivo versus In Vitro. *Trends in parasitology* 36, 914-926, doi:https://doi.org/10.1016/j.pt.2020.08.008 (2020).

Cantor, J. R. The Rise of Physiologic Media. *Trends Cell Biol* 29, 854-861, doi:10.1016/j.tcb.2019.08.009 (2019).

LeRoux, M., Lakshmanan, V. & Daily, J. P. Plasmodium falciparum biology: analysis of in vitro versus in vivo growth conditions. *Trends in parasitology* 25, 474-481, doi:10.1016/j.pt.2009.07.005 (2009).

Pethe, K. *et al.* A chemical genetic screen in Mycobacterium tuberculosis identifies carbon-source-dependent growth inhibitors devoid of in vivo efficacy. *Nat Commun* 1, 57, doi:10.1038/ncomms1060 (2010).

Pillai, A. D. *et al.* Solute restriction reveals an essential role for clag3-associated channels in malaria parasite nutrient acquisition. *Molecular pharmacology* 82, 1104-1114, doi:10.1124/mol.112.081224 (2012).

17   Müller, S. & Kappes, B. Vitamin and cofactor biosynthesis pathways in Plasmodium and
other apicomplexan parasites. *Trends in parasitology* 23, 112-121,
doi:10.1016/j.pt.2007.01.009 (2007).

18   Ismail, H. M. *et al.* Artemisinin activity-based probes identify multiple molecular targets
within the asexual stage of the malaria parasites Plasmodium falciparum 3D7.
Proceedings of the National Academy of Sciences of the United States of America 113,
2080-2085, doi:10.1073/pnas.1600459113 (2016).

19   Meunier, B. & Robert, A. Heme as Trigger and Target for Trioxane-Containing Antimalarial
Drugs. *Accounts of Chemical Research* 43, 1444-1451, doi:10.1021/ar100070k (2010).

20   Wang, J. *et al.* Haem-activated promiscuous targeting of artemisinin in Plasmodium
falciparum. *Nature communications* 6, 10111-10111, doi:10.1038/ncomms10111 (2015).

21   Witkowski, B. *et al.* Novel phenotypic assays for the detection of artemisinin-resistant
Plasmodium falciparum malaria in Cambodia: in-vitro and ex-vivo drug-response studies.
The Lancet. Infectious diseases 13, 1043-1049, doi:10.1016/s1473-3099(13)70252-4
(2013).

22   Pholwat, S. *et al.* The Malaria TaqMan Array Card Includes 87 Assays for Plasmodium
falciparum Drug Resistance, Identification of Species, and Genotyping in a Single Reaction.
Antimicrobial agents and chemotherapy 61, doi:10.1128/aac.00110-17 (2017).

23   Babbitt, S. E. *et al.* Plasmodium falciparum responds to amino acid starvation by
entering into a hibernatory state. *Proceedings of the National Academy of Sciences* 109,
E3278, doi:10.1073/pnas.1209823109 (2012).

24   Fennell, C. *et al.* PfeIK1, a eukaryotic initiation factor 2α kinase of the human malaria
parasite Plasmodium falciparum, regulates stress-response to amino-acid starvation.
Malaria Journal 8, 99, doi:10.1186/1475-2875-8-99 (2009).

25   Zhang, M. *et al.* Inhibiting the Plasmodium eIF2α Kinase PK4 Prevents Artemisinin-
Induced Latency. *Cell host & microbe* 22, 766-776.e764, doi:10.1016/j.chom.2017.11.005
(2017).

26   Choi, H. J. *et al.* A novel PI3K/mTOR dual inhibitor, CMG002, overcomes the
chemoresistance in ovarian cancer. *Gynecologic Oncology* 153, 135-148,
doi:https://doi.org/10.1016/j.ygyno.2019.01.012 (2019).

27   Deegan, S., Saveljeva, S., Gorman, A. M. & Samali, A. Stress-induced self-cannibalism: on
the regulation of autophagy by endoplasmic reticulum stress. *Cellular and molecular life*
sciences : CMLS 70, 2425-2441, doi:10.1007/s00018-012-1173-4 (2013).

28   Mbengue, A. *et al.* A molecular mechanism of artemisinin resistance in Plasmodium
falciparum malaria. *Nature* 520, 683-687, doi:10.1038/nature14412 (2015).

29   Breglio, K. F. *et al.* A single nucleotide polymorphism in the Plasmodium falciparum atg18
gene associates with artemisinin resistance and confers enhanced parasite survival under
nutrient deprivation. *Malar J* 17, 391, doi:10.1186/s12936-018-2532-x (2018).

30   Dwivedi, A. *et al.* Functional analysis of Plasmodium falciparum subpopulations
associated with artemisinin resistance in Cambodia. *Malar J* 16, 493, doi:10.1186/s12936-
017-2140-1 (2017).

31   Ray, A. *et al.* Autophagy Underlies the Proteostasis Mechanisms of Artemisinin Resistance
in P. falciparum Malaria. *mBio* 0, e00630-00622, doi:10.1128/mbio.00630-22 (2022).

32   Walczak, M., Ganesan, S. M., Niles, J. C. & Yeh, E. ATG8 Is Essential Specifically for an
Autophagy-Independent Function in Apicoplast Biogenesis in Blood-Stage Malaria
Parasites. *mBio* 9, e02021-02017, doi:10.1128/mBio.02021-17 (2018).
33   Johnson, C. R. *et al.* Thiamin deficiency in low- and middle-income countries: Disorders,
prevalences, previous interventions and current recommendations. *Nutrition and health*
25, 127-151, doi:10.1177/0260106019830847 (2019).
34   Whitfield, K. C. *et al.* High prevalence of thiamine (vitamin B1) deficiency in early
childhood among a nationally representative sample of Cambodian women of
childbearing age and their children. *PLoS neglected tropical diseases* 11, e0005814,
doi:10.1371/journal.pntd.0005814 (2017).
35   Cantor, J. R. *et al.* Physiologic Medium Rewires Cellular Metabolism and Reveals Uric Acid
as an Endogenous Inhibitor of UMP Synthase. *Cell* 169, 258-272.e217,
doi:10.1016/j.cell.2017.03.023 (2017).
36   Rawat, M. *et al.* Identification of Co-Existing Mutations and Gene Expression Trends
Associated With K13-Mediated Artemisinin Resistance in Plasmodium falciparum.
Frontiers in Genetics 13 (2022).
37   Tewari, S. G. *et al.* Short-term metabolic adjustments in Plasmodium falciparum counter
hypoxanthine deprivation at the expense of long-term viability. *Malaria Journal* 18, 86,
doi:10.1186/s12936-019-2720-3 (2019).
38   Zhu, L. *et al.* Artemisinin resistance in the malaria parasite, Plasmodium falciparum,
originates from its initial transcriptional response. *Communications Biology* 5, 274,
doi:10.1038/s42003-022-03215-0 (2022).
39   Demas, A. R. *et al.* Mutations in Plasmodium falciparum actin-binding protein coronin
confer reduced artemisinin susceptibility. *Proceedings of the National Academy of*
Sciences of the United States of America 115, 12799-12804,
doi:10.1073/pnas.1812317115 (2018).
40   Mok, S. *et al.* Artemisinin-resistant K13 mutations rewire Plasmodium falciparum's intra-
erythrocytic metabolic program to enhance survival. *Nature Communications* 12, 530,
doi:10.1038/s41467-020-20805-w (2021).
41   Rocamora, F. *et al.* Oxidative stress and protein damage responses mediate artemisinin
resistance in malaria parasites. *PLoS pathogens* 14, e1006930,
doi:10.1371/journal.ppat.1006930 (2018).
42   Siddiqui, G., Srivastava, A., Russell, A. S. & Creek, D. J. Multi-omics Based Identification of
Specific Biochemical Changes Associated With PfKelch13-Mutant Artemisinin-Resistant
Plasmodium falciparum. *The Journal of infectious diseases* 215, 1435-1444,
doi:10.1093/infdis/jix156 (2017).
43   Witkowski, B. *et al.* Increased tolerance to artemisinin in Plasmodium falciparum is
mediated by a quiescence mechanism. *Antimicrobial agents and chemotherapy* 54, 1872-
1877, doi:10.1128/aac.01636-09 (2010).
44   McLean Kyle, J., Jacobs-Lorena, M. & Miller Louis, H. Plasmodium falciparum Maf1
Confers Survival upon Amino Acid Starvation. *mBio* 8, e02317-02316,
doi:10.1128/mBio.02317-16 (2017).

45   Nair, S. *et al.* Nutrient Limitation Magnifies Fitness Costs of Antimalarial Drug Resistance
Mutations. *Antimicrobial agents and chemotherapy* 66, e01529-01521,
doi:10.1128/aac.01529-21 (2022).
46   Humeau, J. *et al.* Phosphorylation of eukaryotic initiation factor-2α (eIF2α) in autophagy.
Cell Death Dis 11, 433-433, doi:10.1038/s41419-020-2642-6 (2020).
47   Fridman, O., Goldberg, A., Ronin, I., Shoresh, N. & Balaban, N. Q. Optimization of lag time
underlies antibiotic tolerance in evolved bacterial populations. *Nature* 513, 418-421,
doi:10.1038/nature13469 (2014).
48   Cassera, M. B., Zhang, Y., Hazleton, K. Z. & Schramm, V. L. Purine and pyrimidine pathways
as targets in Plasmodium falciparum. *Curr Top Med Chem* 11, 2103-2115,
doi:10.2174/156802611796575948 (2011).
49   Evans, G. B., Tyler, P. C. & Schramm, V. L. Immucillins in Infectious Diseases. *ACS infectious*
diseases 4, 107-117, doi:10.1021/acsinfecdis.7b00172 (2018).
50   Phillips, M. A. *et al.* A long-duration dihydroorotate dehydrogenase inhibitor (DSM265)
for prevention and treatment of malaria. *Science translational medicine* 7, 296ra111-
296ra111, doi:10.1126/scitranslmed.aaa6645 (2015).
51   Llanos-Cuentas, A. *et al.* Antimalarial activity of single-dose DSM265, a novel plasmodium
dihydroorotate dehydrogenase inhibitor, in patients with uncomplicated Plasmodium
falciparum or Plasmodium vivax malaria infection: a proof-of-concept, open-label, phase
2a study. *The Lancet Infectious Diseases* 18, 874-883, doi:https://doi.org/10.1016/S1473-
3099(18)30309-8 (2018).
52   Mayxay, M. *et al.* Thiamin deficiency and uncomplicated falciparum malaria in Laos.
Tropical medicine & international health : TM & IH 12, 363-369, doi:10.1111/j.1365-
3156.2006.01804.x (2007).
53   Carey, M. A., Papin, J. A. & Guler, J. L. Novel Plasmodium falciparum metabolic network
reconstruction identifies shifts associated with clinical antimalarial resistance. *BMC*
genomics 18, 543, doi:10.1186/s12864-017-3905-1 (2017).
54   Mok, S. *et al.* Artemisinin resistance in Plasmodium falciparum is associated with an
altered temporal pattern of transcription. *BMC genomics* 12, 391, doi:10.1186/1471-
2164-12-391 (2011).
55   WHO. World Malaria Report. (World Health Organization, Geneva, Switzerland, 2021).
56   Witkowski B, M. D., Amaratunga C, Fairhurst RM. Ring-stage Survival Assays (RSA) to
evaluate the in-vitro and ex-vivo susceptibility of Plasmodium
falciparum to artemisinins. (Institute Pasteur du Cambodge – National Institutes of Health
Procedure RSAv1, 2013).
57   Reilly, H. B., Wang, H., Steuter, J. A., Marx, A. M. & Ferdig, M. T. Quantitative dissection
of clone-specific growth rates in cultured malaria parasites. *International journal for*
parasitology 37, 1599-1607, doi:10.1016/j.ijpara.2007.05.003 (2007).
58   Joy, S., Ghosh, S. K., Achur, R. N., Gowda, D. C. & Surolia, N. Presence of novel triple
mutations in the pvdhfr from Plasmodium vivax in Mangaluru city area in the
southwestern coastal region of India. *Malar J* 17, 167, doi:10.1186/s12936-018-2316-3
(2018).

59   Birnbaum, J. *et al.* A Kelch13-defined endocytosis pathway mediates artemisinin
741   resistance in malaria parasites. *Science (New York, N.Y.)* 367, 51-59,
742   doi:10.1126/science.aax4735 (2020).
743   60   Mok, S. *et al.* Drug resistance. Population transcriptomics of human malaria parasites
744   reveals the mechanism of artemisinin resistance. *Science (New York, N.Y.)* 347, 431-435,
745   doi:10.1126/science.1260403 (2015).
746   61   Breglio, K. F. *et al.* Kelch Mutations in Plasmodium falciparum Protein K13 Do Not
747   Modulate Dormancy after Artemisinin Exposure and Sorbitol Selection In Vitro.
748   *Antimicrobial agents and chemotherapy* 62, doi:10.1128/aac.02256-17 (2018).
749