Mammalian intestinal intracellular Microsporidia subvert host cell autophagy to promote

replication

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Abstract

Intracellular pathogens such as Microsporidia can interact with host proteostasis pathways such as autophagy. Previous work done in *Caenorhabditis elegans* demonstrated involvement of autophagy in controlling Microsporidia proliferation through ubiquitin labelling of the parasite and subsequent degradation by autophagolysomes. However, it remains unknown if such mechanisms also play the role in mammalian models. Here we used immunochemistry assays, super-resolution confocal imaging, chemical and genetic modulation of the autophagy flux to elucidate the interplay between autophagy and Microsporidia in mammalian cells. We show that despite targeting by early autophagy markers (ubiquitin and p62); the host cell was not able to complete autophagy-mediated removal of *Encephalitozoon cuniculi*. Furthermore, instead of helping to control Microsporidia proliferation, the induction of autophagy dramatically increased proliferation of two microsporidia species in two different mammalian cell models. Finally, we showed that the reduction of the autophagy flux using siRNA treatment or microbiota-derived metabolites was able to reduce the parasite proliferation. Taken together our results indicate that Microsporidia infecting mammalian cells developed strategies to evade the host autophagy and, in contrast, can divert the autophagy flux to promote their own growth.

Introduction

Protein homeostasis is central to cellular physiology and ultimately to many aspects of health and disease in humans (Taylor et al., 2014). Proteostasis relies on complex cellular regulatory networks that include two major interconnected proteolytic degradation pathways: the ubiquitin-proteasome system and the autophagy lysosome (autophagy) system (Klaips et al., 2018). Genetic predispositions, ageing, infectious agents, and abiotic environmental factors can all lead to dysregulation of these two pathways, which, in turn, underpins the pathobiology of numerous conditions. This includes infectious (e.g. HIV), neurodegenerative (e.g. Alzheimer's disease), chronic inflammatory conditions (e.g. inflammatory bowel diseases [IBD] and rheumatoid arthritis), metabolic syndrome-associated diseases and cancers (Balch et al., 2008).

Because they are building their ecological niche inside the host cell, intracellular pathogens interact with host proteostasis, particularly with the autophagy pathway. Indeed, autophagy can play a dual role in the survival of intracellular pathogens by both maintaining nutrient balance of the host that can be diverted by the pathogen or by directly targeting intracellular pathogens for degradation in a pathway called xenophagy (Sharma et al., 2018). As a result, several of intracellular pathogens developed strategies to either escape this defence mechanism or subvert it. This is best documented for intracellular bacterial pathogens such as *Mycobacterium tuberculosis* or *Listeria spp.* that have developed specific mechanisms/virulent factors to interfere with the maturation of the autophagosome, or *Salmonella spp.* which secretes a deubiquitylation enzyme to remove its tagging by host ubiquitin and thus can evade xenophagy altogether (Bach et al., 2008; Mitchell et al., 2015). In contrast, far less is known about the intracellular eukaryotic parasites and their interaction with host cell autophagy. However, their importance has been increasingly recognized in the recent years, and studies had shown how some microbial parasites have developed strategies to escape and take advantage of autophagy. For example, during its liver stages *Plasmodium spp*. is targeted by host cell xenophagy as attested by rapid labelling of the meronts with host

LC3 and SQSTM1/p62 proteins (Schmuckli-Maurer et al., 2017). However, this targeting does

not lead to the engulfment of the parasite by canonical autophagosomes. Instead, it is located

in the structure that will eventually become the parasitophorous vacuole (PV), suggesting an

active recruitment of LC3 and a subversion of xenophagy by the parasite (Wacker et al., 2017).

This was confirmed by subsequent studies where induction of autophagy by either starvation

or rapamycin treatment in mice increased the parasite load of *Plasmodium berghei* (Prado et

al., 2015). Notably, in that same study, genetic suppression of autophagy through an *Atg5*

knock out, was both favouring an increase of pathogen load and reducing the size of the

parasites, illustrating the dual role of autophagy in both controlling the parasite and allowing it

to divert nutrients from the host cell for its own benefit (Prado et al., 2015).

Microsporidia is a group of highly diverse strict obligate intracellular pathogens, infecting most

animal lineages including economically and ecologically important species (Bateman et al.,

2016; Stentiford et al., 2016). Several species can infect humans and represent a significant

threat to immunocompromised patients (Mathis et al., 2005). Recent studies have also shown

that asymptomatic Microsporidia infections are more common in healthy immune-competent

individuals than previously thought (Sak et al., 2011) and may be associated with chronic

conditions including Crohn's disease and cancer (Andreu-Ballester et al., 2013; Leonard et

al., 2013). So far, the only study investigating the interaction between Microsporidia and

autophagy are available in the *Caenorhabditis elegans* model (Bakowski et al., 2014; Balla et

al., 2019). It was suggested that the Microsporidian species *Nematocida parisii* is targeted by

C. elegans xenophagy machinery in a CUL-6-dependent manner, leading to the labelling of

the parasite by host ubiquitin and LC3 (Bakowski et al., 2014). Knockdown of key autophagy

genes was sufficient to produce a moderate but significant increase of the parasite load. All

these results suggested that in the worm autophagy plays a role in controlling the infection

through the xenophagy pathway (Bakowski et al., 2014). In contrast, there are currently not

such data in the mammalian systems. In mammals, including humans, intestinal epithelium is

the main site of microsporidia infection (Stentiford et al., 2016). Perturbation of intestinal

autophagy, which was shown to be a major cause of intestinal disorder such IBDs or Crohn's

disease, was also linked to Microsporidia infection (Bretin et al., 2016; Hubbard and Cadwell,

2011). Therefore, investigating the interplay between mammalian cell autophagy and the

microsporidian species is of major interest.

We investigated this interplay using *E. cuniculi*, one of the most common microsporidia

species infecting mammals (Katinka et al., 2001). This species was originally isolated from

rabbit but is also commonly found in other mammals including humans. The diminutive *E.*

cuniculi genome is the results of massive genomic and protein coding capacity reduction (2.2

Mb encoding only 2,000 proteins) leading to the loss of multiple metabolic capabilities (Katinka

et al., 2001; Nakjang et al., 2013; Wadi and Reinke, 2020). These include the loss of numerous

biosynthesis pathways, and, notably, multiple genes mediating proteostasis, including the

mechanistic Target of Rapamycin (mTOR) pathway as well as the majority of the autophagy

machinery (Yang et al., 2017). This makes *E. cuniculi* an ideal model system to study the host

autophagy response to an eukaryotic intracellular pathogen. Previous transcriptomics

analyses found that, similar to *C. elegans,* rabbit kidney cells (RK-13) infected with

microsporidia *T. hominis* (Watson et al., 2015), were characterised by an upregulation of

genes tagged as key autophagy components (Bordi et al., 2021). While only *ATG4C* was

found to be significantly upregulated in the original dataset (*log^2 fold change*:1.59, adjusted *p-*

value:0.0025), 10 other genes had increased expression upon infection, including several key

ATG genes as well as 4 different Cullin genes, suggesting that autophagy/xenophagy may be

stimulated upon infection in the mammalian system (Watson et al., 2015). Here we exploited

a combination of antibodies developed to investigate *E. cuniculi* infections cycle (Tsaousis et

al., 2008), pharmacological treatments and genetic manipulation on mammalian cells to

investigate the interplay between Microsporidia infection and mammalian autophagy.

Results

E. cuniculi co-localizes with p62 and ubiquitin suggesting its targeting by host cell xenophagy machinery

Xenophagy starts with the selective labelling of the pathogens by ubiquitin mediated by an E3 ubiquitin ligase. Ubiquitylation motifs are subsequently recognized by the UBA domain of the receptor protein p62 which, after oligomerization, recruits the autophagy machinery through its LC3-interacting region (LIR) leading to the engulfment of the parasite into an autophagosome (Itakura and Mizushima, 2011). If microsporidia are targeted by xenophagy in our model, co-localization of the parasite with ubiquitin, p62 and LC3 should be observed. Indeed, previous studies in the *C. elegans* models showed a CUL-6-dependent ubiquitylation of the early stages of the parasite as well as co-localization with the *C. elegans* LC3/ATG8 homolog (LGG-1) (Bakowski et al., 2014).

To verify if such mechanism was conserved in the mammalian model, we investigated co-localization of p62 and conjugated ubiquitin (FK-2) with *E. cuniculi* meronts. The parasite was labelled using an antibody made in a previous study (Tsaousis et al., 2008) which recognizes one of the 4 nucleotide membrane transporters identified in *E. cuniculi* genome (E.c.NTT2). This marker was selected because it is highly expressed during the whole *E. cuniculi* life cycle, from the early meronts to the spore formation stages and also strongly labels the outside of the PV (Fig S1).

Similar to what was seen in the *C. elegans* model, using super resolution confocal imaging early meronts were found to be labelled by the conjugated ubiquitin antibody 6 hours post infection (hpi) (Figure 1A-B). Interestingly, only the smaller parasite stages were labelled with ubiquitin (Figure 1C) whereas labelling was never found on later stages suggesting that only early meronts are targeted by xenophagy and degraded, preventing them to develop to further stages. Another possibility could be that the parasite developed strategy to evade xenophagy pathway by actively removing the ubiquitin labelling. To confirm the targeting of *E. cuniculi* by

host autophagy we used the same setup to assay the co-localization of the parasite with p62

and LC3 6 hpi. As expected, parasites were labelled with p62 (Figure 1C-E) however no co-

localization with LC3 was found. Therefore, our results suggest that *E. cuniculi* is targeted by

host cell xenophagy but is able to avoid being isolated into a fully matured autophagic vesicle.

E. cuniculi is a natural pathogen of a large range of mammals, where in most cases its infection

site is the intestinal epithelium. To confirm our results in a more physiologically-relevant model,

we performed the same experiments in human colorectal adenocarcinoma cells (CACO-2

cells) a common model system used to study pathogen-intestinal cell interactions . The results

were similar in this cell line with early meronts labelled with ubiquitin, and p62 (Figure 1F-I)

while no parasite labelled with LC3.

Pharmacological induction of autophagy increases *E. cuniculi* proliferation

If xenophagy was not relevant to clear Microsporidia infection in mammalian cells, induction

of autophagy should not reduce their proliferation rate. To assay microsporidia proliferation,

we used two metrics. First, a direct measure of the spore numbers produced per host cell 7

days post infection, and second, the size of the PV 48 hpi. This time point was chosen because

the first 2 days represent a growth latency phase during which the parasite only mildly

increases in size and starts to divide after 24 hpi. At 48 hpi the spore starts to be produced

and released at the centre of the PV, while the newly formed meronts labelled by the E.c.NTT2

antibody form a ring localized on the edge of the PV, allowing for the accurate measurement

of its surface (Figure 2A). The more spores are produced, the larger the PV become, so we

reasoned that comparing the size of the PV between different treatments should be a good

proxy to assay the successful proliferation of the parasite. To induce autophagy, we used torin-

1, a second-generation mTOR inhibitor which is known to be a very potent autophagy inducer

through direct inhibition of both mTORC1 and mTORC2 complexes (Liu et al., 2010).

However, due to its high potency, torin-1 has other side-effect such as promoting cell cycle

arrest, cells death and protein synthesis arrest (Moschetta et al., 2014). Hence to confirm that

the observed effect was due to autophagy induction the other natural mTOR inhibitor

rapamycin which only inhibits mTORC1 was also used (Moschetta et al., 2014).

Surprisingly, our results showed that instead of decreasing parasite proliferation both torin-1

and rapamycin increased it. With torin-1 treatment, the spore production per cell 7 dpi is

significantly increased, with a maximum reached at the lower tested dose (31 nM) with twice

more spores produced than with the DMSO control (Figure 2B-C). The size of the PV is also

significantly increased after the treatment with all doses of torin-1 with a maximum reached at

125 nM (Figure 2D). Cells treated with rapamycin showed a similar but milder effect with an

increase in spore production (Figure 2B, E) and in size of the PV (Figure 2F) for all but the 62

nM dose. These results suggest that autophagy appears to be beneficial to the parasite

proliferation instead of controlling it, confirming our previous results indicating that the parasite

is not being degraded by xenophagy. The discrepancy between torin-1 and rapamycin

treatment effect on parasite growth may be due to the difference in the potency of the drugs

to inhibit the mTOR pathway. These results also confirmed that size of the PV is a good proxy

to evaluate the efficiency of proliferation of the parasite and we decided to focus on this

measure in later experiments.

Next, we tested whether the ability of the parasite to take advantage of the host autophagy

pathway was conserved among different cell lines. Using a similar setup, we tested the effect

of the maximum dose of torin-1 (250 nM) on proliferation of *E. cuniculi* in CACO-2 cells. Once

again, the results confirmed that torin-1 treatment significantly increases both the number of

spores produced per cell and the size of the PV 48 hpi to an even more dramatic extent than

in RK-13 cells, with an increase of 300% in spore production compared to control (Figure 2G-

I).

Finally, we wondered if other Microsporidia species infecting mammals were able to benefit

from the host cell autophagy. Therefore, we investigated the effect of torin-1 treatment on the

growth of *Trachiopleiostophora hominis,* another species of Microsporidia originally isolated

from HIV patients and that we routinely cultivate in RK-13 cells (Field et al., 1996)(Heinz et al.

2014). The parasite was labelled with an antibody against T.h.NTT4, one of the 4 NTTs

identified in our previous study and which is expressed at high levels during the complete

lifecycle of the parasite (Heinz et al. 2014)(Dean et al., 2018). Our results showed a significant

increase in area of *the T. hominis* PV upon induction of autophagy by torin-1 treatment similar

to the data with *E. cuniculi* in RK-13 and CACO-2 cells (Figure 2J, K).

Taken together these results suggest that instead of controlling the proliferation, autophagy

activation in the host cell may benefit both *E. cuniculi* and *T. hominis* proliferation, as attested

by the increase in size of the PV and the number of spores produced per cell. This is consistent

with our previous results showing that xenophagy targeting of *E. cuniculi* was incomplete

(Figure 1). We hypothesized that *E. cuniculi* may have evolved a way to evade xenophagy

and, in contrast to be suppressed by it, exploit autophagy to derive nutrients from the host cell.

The fact that this phenomenon was observed in two different cell lines as well as with another

parasite species, suggested that this feature might be conserved across different

Microsporidia.

Suppression of autophagy drastically reduces *E. cuniculi* proliferation

Induction of autophagy with torin-1 and rapamycin is indeed a robust and well-characterized

approach but may also trigger other adverse effect such cell cycle arrest, protein synthesis

arrest and even cell death at higher dose. Hence, to validate our findings we investigated the

effect of autophagy inhibition using siRNA targeting a key autophagy gene *ATG5* on *E. cuniculi*

proliferation in the presence or absence of torin-1. To take advantage of reagents already

developed for human cells, we performed this experiment in CACO-2 cells.

To verify silencing efficiency, ATG5 abundancy, and LC3-II accumulation after Bafilomycin A1

treatment was assayed by immunoblotting in cells treated with either *ATG5* siRNA or non-

targeting siRNA (Figure 3A). The results revealed that despite a modest effect on ATG5 levels,

the silencing was sufficient to decrease LC3-II accumulation after Bafilomycin A1 treatment

by 58% suggesting a strong decrease in the autophagy flux (Figure 3B-C).

Confocal imaging of CACO-2 cells 48 hpi indicated that *ATG5* silencing significantly reduced

the size of *E. cuniculi* PV as well as the number of spores produced per cell in both torin-1 and

DMSO treated cells (Figure 3D-F). Interestingly, *ATG5* knockdown reverted the increase of

PV area in response to torin-1 treatment (Figure 3D-F). This observation supported the

hypothesis that increased PV size after torin-1 treatment is dependent on autophagy induction.

The increase in spore numbers in response to torin-1 treatment was also suppressed by *ATG5*

knockdown although only partially, which could be explained by these measurements done 7

dpi when the siRNA silencing effect may start to fade away.

Repression of autophagy with the gut microbiota secondary metabolites reduces *E.*

***cuniculi* proliferation**

Our results suggest that perturbation of the autophagy flux either due to genetic predisposition

such as in Crohn's Disease (CD), IBD or environmental factors such as microbiota, could have

an impact on the susceptibility to microsporidia infection. Interestingly, a previous study has

shown a higher prevalence of microsporidia infection in CD patients suggesting a potential

higher susceptibility to infection, especially to *E. cuniculi* (Andreu-Ballester et al., 2013).

Microbiota secondary metabolites can directly affect gut epithelium cell metabolism and

physiology. For example, exposure of CACO-2 cells to short chain fatty acids (SCFAs), which

are naturally produced by the intestinal microbiota in the presence of dietary fibres, has been

linked to a decrease in autophagy flux (Feng et al., 2018). Hence, we decided to investigate if

autophagy flux perturbation provoked by incubation with a mix of short chain fatty acids was

able to reduce *E. cuniculi* proliferation in CACO-2 cells.

For this experiment, we pre-treated CACO-2 cells with a mix of SCFA (acetate 0.5 mM,

butyrate 0.01 mM, and propionate 0.01 mM – as in (Feng et al., 2018)) for 48 h and then

infected them with *E. cuniculi,* maintaining the SCFA mix during the entire experiment. Our

results confirmed a significant decrease in the size of PV 48 hpi in SCFA treated cells vs

control treatment (Figure 4A-B). The number of spores produced per cell also had a trend for

reduction after SCFA treatment although did not reach significance (Figure 4C).

This result highlights the importance of gut epithelium homeostasis on the susceptibility to

infection by pathogens such as Microsporidia. Together, these results might also help to

explain the correlation between CD and Microsporidia prevalence seen in previous studies,

as CD patients are known to have dysfunction in the autophagy pathway (Larabi et al., 2020).

Discussion

Autophagy is a central pathway to respond to cytoplasmic stress, nutrient starvation, and

protein aggregation that are all potential outcomes of intracellular pathogen infections.

However, to date little has been done to study its involvement in the response of mammalian

cells to Microsporidia infection.

Here we found that *E. cuniculi* is partially labelled by the host autophagy markers. However,

the labelling of *E. cuniculi* by early autophagy markers is not followed by its engulfment into

LC3-decorated host cell autophagosome, suggesting that *E. cuniculi* is able to escape

xenophagy and avoid degradation. Further supporting our results, pharmacological induction

of autophagy using torin-1 or rapamycin treatment heavily increased parasite proliferation, as

attested by both the increase in spore production and size of the PV. Interestingly our results

with the other Microsporidia species *T. hominis* suggest that this beneficial effect of autophagy

induction on Microsporidia proliferation might be conserved among other Microsporidia

species and possibly other hosts. These results were corroborated by our siRNA experiments,

where knockdown of *ATG5* suppressed the parasite ability to multiply in the human cells.

Finally, we showed that microbiota secondary metabolites, namely a mix of 3 SCFA, were

able to negatively impact *E. cuniculi* multiplication in CACO-2 cells through what we

hypothesized to be a modulation of host cell autophagy. All these results suggest that in

contrast to the *C. elegans* model, the activation of autophagy in the mammalian cells is at least

inefficient, if not detrimental, to host cells to control the infection as it allowed for a more

effective parasite proliferation.

We propose that, unlike in *C. elegans* where autophagy may control Microsporidia infection,

Microsporidia infecting mammalian cells evolved means to escape autophagy and take

advantage of it to support their growth. Indeed, our results clearly indicate that in mammalian

cells *E. cuniculi* is able to escape xenophagy despite being labelled by both host ubiquitin and

p62, suggesting an evasion mechanism which will need to be elucidated in the future. A similar

escape from host xenophagy as well as the beneficial effect of autophagy induction has

previously been described for *Plasmodium berghei* infecting mice (Prado et al., 2015).

However, in the case of *Plasmodium*, xenophagy suppression (using *Atg5*$^{-/-}$ cell line) was

increasing the amount of parasite per cell while reducing their average PV size, suggesting

that xenophagy was able to partially control parasite proliferation. In our case, suppression of

xenophagy by *ATG5* knockdown in human cells was strongly reducing the PV size and the

parasite proliferation, suggesting that xenophagy might be ineffective in controlling the *E.*

cuniculi infection.

Autophagy pathway deregulation has been implicated in numerous pathologies including

IBDs, which were shown to present association with Microsporidia prevalence. Our study

might help to explain this association in some contexts, as perturbation in the autophagy

pathway could provoke a higher susceptibility to Microsporidia infection. It is also possible that

microsporidia infection will worsen IBD condition by further disturbing the autophagy flux of

the host cells. In conclusion, our study provides a novel mechanistic link between, on one side

the gut microbiota and parasites and on the other gut epithelium physiology and ultimately

human health.

Methods

Cell and parasite culture

RK-13 rabbit kidney cell line obtained from the ATCC (ATCC CCL-37) was grown at 37°C with

5% CO_2 in Dulbecco's Modified Eagle Medium (DMEM) (Gibco), containing 10% FBS (Gibco),

penicillin (100 µg/ml), streptomycin (100 µg/ml), kanamycin (100 µg/ml), and Fungizone (1

µg/ml) purchased from Sigma. CACO-2 cells line obtained from ATCC (ATCC HTB-37) was

grown at 37℃ in complete Modified Eagle Medium (MEM) medium complemented with 20%

FBS, penicillin (100 µg/ml) streptomycin (100 µg/ml), kanamycin (100 µg/ml) and Fungizone

(1 µg/ml). The microsporidia *E. cuniculi* EC2 and *T. hominis* (ATCC PRA-404) were routinely

subcultured in RK-13 cells grown as previously described (Tsaousis et al., 2008). Spores used

in time course experiments were harvested from infected RK-13 cells grown in 175 cm^2 flasks.

Cells were washed and scraped in phosphate buffer saline (PBS) and then lysed by 3

passages through a 25G needle and 3 rounds of 1 min sonication on ice. Released spores

were purified by layering onto a 25% Percoll gradient and centrifugation at 900 g for 30 min.

After 3 washes in PBS, the pelleted spores were resuspended in PBS and used within a week

to infect RK-13 or CACO-2 cells.

Time course experiments

RK-13 cells or CACO-2 cells were seeded into 24-well (for protein extraction) or 6-well plates

(for immunofluorescence and spore production assays). When confluent, purified spores were

added with a multiplicity of infection of 200. After 30 min the cells were washed 2 times with

medium and fresh medium with or without treatment was added (torin-1 31-250 nM *Selleck*

Chemicals, rapamycin 12.5-250 nM *Selleck Chemicals*, SCFA mix (acetate 0.5 mM, butyrate

0.01 mM, and propionate 0.01 mM) *Sigma-Aldrich*, DMSO, PBS). Medium was changed every

3 days and treatment was maintained for the full duration of the experiment.

Spore production assay

7 dpi, cells were washed 2 times with PBS, and detached with trypsin. Part of the cell

suspension was used to quantify the number of cells per well. The remaining suspension was

centrifuged for 5 min at 16,000 g, the pellet was resuspended in RIPA buffer with 1% SDS.

The lysate was sonicated for 1 min at 4℃ to reduce the viscosity and centrifuged for 5 min at

16,000g. The pelleted spores were then resuspended in PBS and counted on Neubauer

counting chamber. All assays were done in 3 independent biological triplicates. Spores

produced per cell were then calculated and plotted in GraphPad Prism.

Immunofluorescence assays

6-, 48- or 72-hours post infections, coverslips were washed 3 times with PBS, and fixed for 15

min with ice-cold 50% methanol, 50% acetone. The coverslips were later rehydrated in PBS

for 15 min, blocked in PBS 3% milk and labelled with primary antibodies diluted in blocking

buffer overnight at 4℃ in humid chamber (mouse α-conjugated ubiquitin - 1:100: *BML-*

PW8810-0100 - Enzo life science, mouse α-p62 - 1:100: *#88588 - Cell Signalling Technology*,

rat α-E.c.NTT2 1:200 – [Tsaousis et al., 2008], rabbit α-E.c.HSP70 1:500 – [Tsaousis et al.,

2008], rabbit α-T.h.NTT4 1:200 – [Dean et al., 2018], rat α-T.h.HSP70 1:500 – [Dean et al.,

2018]). After 3 washes in PBS, coverslips were labelled for 2 h at room temperature with

secondary antibodies (α-rat Alexa fluor 488, α-rabbit Alexa fluor 568, α-rabbit Alexa fluor 594

- Invitrogen) then washed again 3 times in PBS, counterstained with DAPI and mounted on

slides with Prolong glass antifade mounting solution. For co-localisation assays the slides

were imaged with a 63X magnification on a Zeiss LSM800 confocal microscope using airyscan

super-resolution mode. The red and green signals were then quantified over a transect using

ImageJ and intensity values were plotted using GraphPad Prism. For kinetic of infection

experiments, the slides were imaged using a Zeiss AxioImager with a 63X magnification. For

each condition images were taken randomly on 3 slides using the same acquisition

parameters across each set of experiments. The images were then blinded using a home-

made python script and the measurement of the parasitophorous vacuoles was done using a

home-made ImageJ macro. Briefly, the colour channels were split, the channel containing

NTT2 signal was then manually thresholded to separate NTT2 signal from background, the

resulting binary image was then used to automatically detect PV using ImageJ detect particles

tools. The resulting regions of interest were then measured and saved in a zip file. For each

condition and experiment at least 30 PV were measured.

Immunoblotting

4 h before sampling, Bafilomycin A1 was added in the medium at a final concentration of 400

nM. While on ice, cells were washed twice with ice cold PBS and scrapped on ice in ice-cold

RIPA buffer (*Sigma-Aldrich*) with complete Protease Inhibitor Cocktail (*Roche*). After 15 min

on ice, cells lysates were centrifuged for 15 min at 16,000g 4℃ and supernatant protein

concentration was determined using BCA Protein Assay (*Pierce*). Protein samples were mixed

with 4x Laemmli Sample Buffer at a final protein concentration of 5 µg/µl for each sample. 75

µg of proteins were separated on 15% SDS-PAGE gel and transferred on 0.2 µm pore size

PVDF membrane. After a blocking step in TBST, 5% milk, membranes were incubated in

primary antibodies diluted in TBST, 3% BSA overnight at 4℃ (rabbit α-LC3B 1:1000 – *Cell*

Signaling/ #4108, rabbit α-Atg5 1:1000 – *Cell Signaling/#2630*, mouse α-tubulin 1:1000 –

Sigma Aldrich/T5168). After 3 washes in TBST the membranes were incubated in secondary

antibodies for 2 h at room temperature (Goat α-rabbit HRP 1:1000 - *Sigma Aldrich/*

GERPN4301, Goat α-mouse HRP 1:1000– *Sigma Aldrich/GERPN4401*), revealed using ECL

reagent (BioRad) and signal was acquired on a BioRad Bioimager. Quantification was done

using gel quantification tool in ImageJ.

siRNA

ON-TARGETplus SMARTpool siRNA against human *ATG5* (L-004374-00-0005) and

nontargeting SMARTpool siRNA (D-001810-10-05) were purchased from *Horizon Discovery*.

Silencing was done in two steps, a first transfection with a final siRNA concentration of 100

nM was done for 24 h in a 6-well plate, followed by a passaging of the transfected cells into

24-well plate. 24 h after plating, the cells were transfected second time with a final

concentration of 20 nM siRNA. 24 h after the second treatment cells were infected and treated

with torin-1 (250 nM) or DMSO as a control.

Statistical analyses

GraphPad Prism version 9.00 was used for statistical analyses and statistical presentation of

quantitation. *P-values* are presented in the figures above the compared conditions: *** P <

0.001, ** P < 0.01, * P<0.05. Where two conditions were compared, a paired two-tailed

Student's t test was used (Figures 2H, 2I). If more than two conditions were compared, a one-

way ANOVA followed by a Sidak's multiple comparisons test was applied (Figures 2C, 2D,

2E, 2F, 2K, 4B, 4C). For grouped data, a 2-way ANOVA followed by a Tukey's multiple

comparisons was applied (Figures 3E, 3F).

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Figure Legends

Figure 1. (*A, C, D*) Confocal super resolution imaging of RK-13 cells 48 hpi by *E. cuniculi*. Parasite PV is labelled in green with α-E.c.NTT2 and in purple with α-HSP70, ubiquitin or p62 are in red. Yellow line indicates transect used for graph B and E. *(B, E)* Plot of the intensity value for green and red signal over a transect indicated in figures A, C and D. (F, H) Confocal super resolution imaging of CACO-2 cells 48 hpi by *E. cuniculi*. Parasite PV is labelled in green with α-E.c.NTT2, ubiquitin or p62 in red. Yellow line indicates transect used for graph G and I. *(G, I)* Plot of the grey value for green and red signal over a transect indicated in figures F and H.

Figure 2. Chemical induction of autophagy increases PV area in RK-13 cells and CAOC-2 cells. *(A)* Fluorescence imaging of RK-13 cell at different time points post infection by *E. cuniculi*, from 6 to 72 hpi. Parasite PV is labelled in green with α-E.c.NTT2 and in red with α-HSP70. PV is highlighted by dashed line and area in μm^2 measured with ImageJ is indicated on every picture. *(B)* Representative fluorescence imaging of RK-13 cells 48 hpi by *E. cuniculi* in the presence of increasing doses of torin-1 or rapamycin. Parasite PV is labelled in green with α-E.c.NTT2 and in red with α-HSP70. In each picture a representative PV is highlighted with dashed line and the average area of the PV for this condition is indicated. *(C and E)* Graph indicating the number of *E. cuniculi* spores produced per RK-13 cells 7 dpi with different concentrations of torin-1 or rapamycin. 3 independent biological replicates per point, error bars indicate SD. *(D and F)* Graph showing areas of the PV measured in different treatments. Mean area of the replicates is indicated by black bar with errors bars as SD. Each dot represents one measure. At least 30 measurements per condition were done. (G) Representative fluorescence imaging of CACO-2 cells 48 hpi by *E. cuniculi* in presence of 250 nM torin-1 or DMSO. Parasite PV is labelled in green with α-E.c.NTT2 and in red with α-HSP70. In each picture a representative PV is highlighted with dashed line and the average area of the PV for this condition is indicated. *(H)* Graph indicating the number of *E. cuniculi* spores produced per CACO-2 cells 7 dpi with 250 nM torin-1 or DMSO. 3 independent biological replicates per

point, error bars indicate SD. *(I)* Areas of the PV measured in the 2 different treatments. Mean

area of the replicates is indicated by black bar with error bars as SD. Each dot represents one

measure. At least 30 measurements per condition were done. *(J)* Representative fluorescence

imaging of RK-13 cells 72 hpi by *T. hominis* in the presence of increasing doses of torin-1.

Parasite PV is labelled in red with α-T.h.NTT4 and in green with α-HSP70. In each picture a

representative PV is highlighted with dashed line and the average area of the PV for each

condition is indicated. *(K)* Graph showing areas of the PV measured in different treatments.

Mean area of the replicates is indicated by black bar with errors bars as SD. Each dot

represents one measure.

Figure 3. Silencing of ATG5 by siRNA treatment reduces *E. cuniculi* proliferation in CACO-2

cells. *(A)* Western blot of LC3-II, ATG5 and tubulin (loading control) after ATG5 siRNA

treatment of CACO-2 cells. *(B)* Quantification of ATG5 abundance from western blot shown in

A. *(C)* Quantification of LC3-II accumulation shown in western blot A. *(D)* Representative

fluorescence imaging of RK-13 cells 48 hpi by *E. cuniculi* in the presence in presence or

absence of torin-1 (250 nM) and with or without ATG5 siRNA treatment. In each image, a

representative PV is highlighted with dashed line and the average area of the PV for this

condition is indicated. *(E)* Graph showing areas of the PV measured in the different treatments.

Mean area of the replicates is indicated by black bar with errors bars as SD. Each dot

represents one measure. *(F)* Graph indicating the number of *E. cuniculi* spores produced per

RK-13 cell 7 dpi with different treatments. 3 independent biological replicates per point, error

bars indicate SD.

Figure 4. SCFA mix treatment reduces *E. cuniculi* proliferation in RK-13 cells.

(A) Representative fluorescence imaging of RK-13 cells 48 hpi by *E. cuniculi* in the presence

of 250 nM torin-1, SCFA mix or PBS. In each picture, a representative PV is highlighted with

dashed line and the average area of the PV for this condition is indicated. *(C)* Graph showing

areas of the PV measured in the different treatments. Mean area of the replicates is indicated

by black bar with errors bars as SD. Each dot represents one measure. *(D)* Graph indicating

the number of *E. cuniculi* spores produced per RK-13 cell 7 dpi with the different treatments.

3 independent biological replicates per point, error bars indicate SD.

Supplementary Figure 1. NTT2 transporter is expressed during the whole length of *E.*

cuniculi life cycle by meronts localised on the edge of the PV. *(A)* Expression level of NTTs

transcript during the *E. cuniculi* time course experiment (data from Grisdale et al., 2013) Km

for each of the nucleotide transporter are indicated on the graph (Tsaousis et al., 2008). *(B)*

Early meronts labelled with NTT1, NTT2 or NTT4 antibodies. NTT2 antibodies label the

periphery of the PV alongside the membrane (white arrowheads). Sporonts (white arrows)

labelled with NTT3 antibodies were localized closer to the centre of the vesicle. NTT4

antibodies label small sub-population of cells observed in large PVs corresponding to the late

stage of infection but not in any of the time points in the time course experiment. Spores

(orange arrowheads) were not labelled with any of the antibodies tested.

Figure 1

Figure 2

Figure 3

A

	Control siRNA	ATG5 siRNA	No bafilomycin
ATG5			
LC3-II			
tubulin			

B

ATG5 / tubulin

Control siRNA: 1
ATG5 siRNA: 0.71
No Bafilomycin: 0.9

C

LC3-II / tubulin

Control siRNA: 1
ATG5 siRNA: 0.42
No Bafilomycin: 0.29

D

		Merge	DAPI	E.c. NTT2	E.c. HSP70
control	siRNA	DMSO — average 169 µm²			
ATG5	siRNA	DMSO — average 60 µm²			
control	siRNA	torin-1 — average 268 µm²			
ATG5	siRNA	torin-1 — average 131 µm²			20 µm

E

PV size (µm²)

ATG5 siRNA
Control siRNA

DMSO   torin-1

*** n.s. *** *** ***

F

spores produced per cell

ATG5 siRNA
Control siRNA

DMSO   torin-1

* ***

Figure 4

A

	Merge	DAPI	E.c. NTT2	E.c. HSP70
Control	average 101 μm²			
torin-1 (250 nM)	average 195 μm²			
SCFA mix	average 44 μm²			20 μm

B

PV size (μm²)

***

*

PBS torin-1 SCFA mix

C

Spores produced per cells

n.s.

***

PBS torin-1 SCFA mix