Microinvasion and immunity elicited by disease-attenuated pneumococcal biosynthesis gene mutants

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ABSTRACT

Nasopharyngeal colonisation by *Streptococcus pneumoniae* is characterised epithelial cell adherence, microinvasion and an innate immune response. Here, we explore the hypothesis that pneumococcal virulence has primarily evolved to promote colonisation and transmission, rather than to cause disease. We used a *S. pneumoniae* serotype 6B strain alongside two biosynthesis gene mutants (Δ*proABC* and Δ*fhs*). These mutations did not attenuate pneumococcal microinvasion in either experimental human pneumococcal challenge or *in vitro* in primary and immortalised epithelial cells, but we did observe strain-dependent differences following infection. These included cellular reorganisation, pro-inflammatory epithelial innate responses and caspase 8 activity and, secretion of pneumococcal hydrogen peroxide secretion and pneumolysin activity. Bacterial transcriptomic analysis, under stress conditions, revealed that deletion of these biosynthesis genes had broad, differential effects on pneumococcal virulence and metabolic gene expression, suggestive of compensatory changes that preserve microinvasion. The findings that cellular reorganisation, the innate immune response, and the ability to cause invasive disease are not necessarily interconnected emphasise the outcome of colonisation cannot be fully explained by single or functionally grouped virulence or metabolic factors.

Keywords

Biosynthesis genes/host-pathogen interactions/Innate immunity/*Streptococcus pneumoniae*/respiratory epithelium

Graphical Abstract

S. pneumoniae colonisation is characterised by mucus association, epithelial adherence and microinvasion – where the pneumococcus invades the epithelial barrier without causing disease. Microcolonies form at the epithelial surface and pneumococcal transmigration can occur between epithelial cells. Although mutations in *S. pneumoniae* biosynthesis genes (Δ*proABC* and Δ*fhs*) attenuate disease in a murine model, they do not attenuate microinvasion in either experimental

human pneumococcal challenge (EHPC) or *in vitro* in primary and immortalised epithelial cells.

These mutations show strain-dependent effects on both the epithelial and bacterial responses to

infection. While not directly co-correlated, factors such as epithelial cellular reorganisation,

inflammation and caspase 8 activity alongside pneumococcal metabolic adaptation, virulence factor

expression and response to stress are key determinants of the outcome of colonisation in the

nasopharyngeal niche.

INTRODUCTION

Adaptation to the host environment is crucial for successful colonisation of the upper respiratory tract (URT) by a range of human pathogens, including bacteria, viruses and fungi. This includes the ability to withstand different ambient temperatures, overcome physical barriers such as mucus, evade epithelial soluble mediators such as antimicrobial peptides, compete with neighbouring polymicrobial communities and compensate for nutrient restriction (Weiser, Ferreira et al., 2018). *Streptococcus pneumoniae* (the pneumococcus) is a common commensal of this URT niche (Weiser et al., 2018). However, translocation of the pneumococcus from the nasopharynx to the lungs, blood or the brain results in life-threatening disease (Weiser et al., 2018). Indeed, among children under five years, *S. pneumoniae* is the leading cause of pneumonia deaths globally (O'Brien, Wolfson et al., 2009).

Using experimental human pneumococcal challenge (EHPC) of healthy volunteers and well-characterised epithelial cell models, we have previously shown that colonisation by *S. pneumoniae* is characterised by epithelial surface microcolony formation and invasion which we have called microinvasion (i.e. invasion of the epithelial barrier without disease) (Weight, Venturini et al., 2019). The pneumococcal capsule is a major virulence determinant, influencing carriage, transmission from person to person, and invasive disease potential (Zafar, Hamaguchi et al., 2017a). Indeed, we have shown that *S. pneumoniae* epithelial microinvasion also varies markedly between strains expressing different capsular serotypes, with a serotype 4 strain invading Detroit 562 nasopharyngeal cell monolayers more readily than serotype 6B and 23F strains, and inducing more marked pro-inflammatory epithelial transcriptomic and cytokine responses (Weight et al., 2019).

We and others have previously proposed that although the epithelial innate immune response that results from pneumococcal colonisation may facilitate clearance, this highly variable pathobiont (>100 serotypes; >600 global pneumococcal sequence clusters (Gladstone, Lo et al., 2019)) tunes the host response to enhance transmission(Weight et al., 2019, Zafar et al., 2017a). In addition to

capsule, these processes have been shown to be modulated by a broad array of subcapsular and

cytoplasmic virulence factors (Amin-Chowdhury, Collins et al., 2020), and more recently, by bacterial

carbohydrate, nucleotide, fatty acid and purine/ pyrimidine metabolism (Echlin, Frank et al., 2020,

Hartel, Eylert et al., 2012, Henriques-Normark & Tuomanen, 2013, Kohler, Voss et al., 2016, van

Opijnen & Camilli, 2012).

To explore the hypothesis that pneumococcal virulence has primarily evolved to promote

colonisation and subsequent transmission, but not necessarily disease, we have used a unique set

of *S. pneumoniae* serotype 6B Δ*proABC* and Δ*fhs* biosynthesis gene mutants developed to induce

protective immunity without causing disease (Ramos-Sevillano, Ercoli et al., 2020). *proABC* and *fhs*

were chosen as targets through the analysis of previously published transcriptome and transposon

mutational screens (Mahdi, Wang et al., 2012, Ogunniyi, Mahdi et al., 2012, van Opijnen & Camilli,

2012). The *proABC* operon, consisting of genes predicted to encode a γ-glutamyl phosphate

reductase (*proA*), a γ-glutamyl kinase (*proB*) and a pyrroline-5-carboxylate reductase (*proC*), and

fhs predicted to encode a folate tetrahydrofolate reductase involved in one carbon metabolism

pathways have been implicated in metabolic adaptation to growth (Brill, Hoffmann et al., 2011,

Crowley, Gutierrez et al., 1997, Ramos-Sevillano E., 2023), and are highly transcribed in mouse

models of pneumococcal infection (Crowley et al., 1997, Ramos-Sevillano E., 2023). To further avoid

reversion to a disease-causing phenotype during EHPC, these mutants also contain a deletion of

piaA which encodes the lipoprotein component of the dominant pneumococcal iron uptake ABC

transporter (Brown, Gilliland et al., 2001, Hill, Mitsi et al., 2023). We have previously shown that in a

murine model, when compared to the *S. pneumoniae* serotype 6B wild-type parent strain (WT,

BHN418), the Δ*proABC/piaA* and Δ*fhs/piaA* mutants colonise the nasopharynx as effectively.

However, despite expressing the same capsule as the wild type 6B strain, neither the Δ*proABC/piaA*

and Δ*fhs/piaA* 6B strains causes invasive disease (Ramos-Sevillano et al., 2020) (17). We have

subsequently shown that this attenuated phenotype is at least in part due to impaired growth in

serum and is associated with increased oxidative stress and altered lipid profiles (17). In EHPC, we

have also shown that both Δ*proABC/piaA* and Δ*fhs/piaA* retain the ability to colonise the human host,

and can induce IgG-mediated immunity (Hill H, 2023). Therefore, these otherwise isogenic strains

allow us to compare the pneumococcal-epithelial interactions of disease-causing and non-disease-

causing phenotypes, while avoiding the confounding of differences in capsular serotype.

Here, we reveal that although the *S. pneumoniae* Δ*proABC/piaA* and Δ*fhs/piaA* metabolic function

mutations result in disease attenuation, the ability of the mutant strains to colonise and cause

microinvasion in both EHPC and *in vitro* epithelial infection models is preserved. Crucially, we also

show that despite similar patterns of epithelial cellular engagement, disruption of these key

pneumococcal metabolic pathways has differential effects on cellular reorganisation and innate

responses, which we propose influences niche adaptation during colonisation.

RESULTS

S. pneumoniae 6B with Δ_proABC_ or Δ_fhs_ mutants colonise in EHPC with evidence of epithelial

microinvasion

We have defined microinvasion as the process by which *S. pneumoniae* invades the mucosal

epithelium, inducing an innate immune response, without necessarily causing disease (Fig 1A).

Nasal curette samples from EHPC healthy volunteers inoculated with the *S. pneumoniae* serotype

6B WT or isogenic mutant strains *(Δproabc/piaA* or *Δfhs/piaA*) (Ferreira, Neill et al., 2013) were

collected to investigate the extent of epithelial association and microinvasion. A positive carrier was

defined as colonisation at any time point (day 2 or day 6 post-inoculation), as detected by

microbiology culture (Weight et al., 2019). Visualisation of the mucosal cells by confocal microscopy

showed colonisation by the WT and mutant pneumococcal strains (Fig 1B). At day 6 post challenge,

compared to WT, there was no attenuation of microinvasion with either the Δ*proABC/piaA* or

Δ*fhs/piaA* strains, with a trend for greater microinvasion (Fig 1C) with a higher microinvasive index

(percentage of internalised bacteria / associated bacteria; Supplemental Information Table 1).

S. pneumoniae colonisation and microinvasion of primary human airway epithelium leads to cellular reorganisation with retention of barrier function

To further explore the impact of microinvasion on epithelial biology in a complex environment, we

cultured _S. pneumoniae_ serotype 6B WT and the isogenic biosynthesis mutants with primary normal

human bronchial epithelial airway (NHBE-A) cells in air-liquid interface. We observed epithelial cell

association and microinvasion with all three strains (Fig2A, top). TEM demonstrated that intracellular

bacteria for all three strains were enclosed within vacuoles (Fig 2A, bottom). As seen previously with

several different pneumococcal strains (Weight et al., 2019), the 6B WT and the mutant strains co-

localised with Junctional Adhesion Molecule A (JAM-A, Supplemental Information Fig 1A, arrow),

with no change in overall JAM-A expression. However, using confocal microscopy and automated

image analysis, for cells infected with the 6B WT strain, we did observe an increase in the intensity

of Zonula Occludens 1 (ZO-1) staining at the junctional membrane (Supplementary Fig 1B), and a

significant increase in the intensity of β catenin staining for cells infected with either the

Δ_proABC/piaA or Δfhs/piaA_ strain (Fig 2B, 2C). These changes in junctional protein expression most

likely occurred as a result of cellular reorganisation, as de-novo protein production would have been

insufficient over the 6-hour experimental infection period. As measured by transepithelial electrical

resistance, barrier integrity was retained over the infection period, (Fig 2D).

When cultured at an air-liquid interface, NHBE cells differentiate into a typical pseudostratified

columnar ciliated epithelium, consisting of goblet, Clara, basal and ciliated cells (Fig 3A). Although

there was no predilection by _S. pneumoniae_ for particular epithelial cell-types, pneumococci were

observed amongst cilia (acetylated tubulin positive cells, Fig 3B and Supplemental Information Fig

2) and co-localised with mucus (mucin5ac positive, Fig 3C, arrows). Strikingly, while the cellular

composition of the epithelial cultures exposed to the Δ_fhs/piaA_ strain were comparable in

appearance to non-infected cells by SEM, exposure to the 6B WT and Δ_proABC/piaA_ strains resulted

in an increased abundance in secreted mucus globules compared to non-infected cells (Fig 3A).

This appeared to be due to differential cellular secretion of preformed mucus rather than de-novo

production as these differences were not reflected in an increase in the expression of the gel-forming

glycoprotein Mucin5AC (Fig 3C and 3E, right graph). Following infection by the Δ*proABC/piaA* strain

we found a significant increase in expression of acetylated tubulin (Fig 3B and 3E, left graph), which

has been shown to be associated with increased microtubule conformation and elasticity, and occurs

by post-translational modification (Eshun-Wilson, Zhang et al., 2019, Iliev, Djannatian et al., 2009).

In contrast, following exposure to Δ*fhs/piaA* strain, we saw an increased expression of the anti-

inflammatory protein, uteroglobin (UG), which is a multifunctional epithelial secreted protein with anti-

inflammatory and anti-chemotactic properties, and a marker for non-ciliated Clara cells (Fig 3D and

3F, left graph). These changes in UG expression again most likely occurred as a result of cellular

reorganisation, or secretion of pre-formed protein, as de-novo protein production would have been

insufficient to detect over the 6-hour experimental infection period.

Δ*proABC/piaA* and Δ*fhs/piaA* mutations of *S. pneumoniae* serotype 6B do not affect

microinvasion of Detroit 562 epithelial cells

Detroit 562 epithelial nasopharyngeal cells enable the analysis of these host-pathogen interactions

under multiple conditions, which are not feasible with the primary cell lines. We have previously

shown that the pattern of Detroit 562 epithelial nasopharyngeal cell microinvasion, and subsequent

innate immune response to *S. pneumoniae* 6B infection *in vitro* is similar to that seen in the EPHC

in vivo(Weight et al., 2019). We therefore then used Detroit 562 cells to further characterise

colonisation by the WT, Δ*proABC/piaA* and/or Δ*fhs/piaA* pneumococcal strains. We found that

although all the strains formed colonies on the epithelial surface (Fig 4A), the isogenic mutants

associated less compared to 6B WT (Fig 4B). Nonetheless, microinvasion was observed with all the

strains (Fig 4C), with a significantly elevated micro-invasive index for the Δ*proABC/piaA* and

Δ*fhs/piaA* strains compared to WT (Fig 4D). Differences in microinvasion were not due to differences

in intracellular viability (Fig 4E) or replication (Supplemental Information Fig 3A-F). All of the single

and double biosynthesis genes mutants (Δ*proABC*, Δ*fhs*, Δ*proABC/piaA*, Δ*fhs/piaA*) were impaired

in their ability to transmigrate across the epithelium (Fig 4F). Importantly, we show that a single Δp*iaA*

mutation in the *S. pneumoniae* serotype 6B did not affect epithelial association, microinvasion and

transmigration (Fig 4B, 4C, 4F).

Consistent with our previous findings for serotype 6B(Weight et al., 2019), Detroit 562 epithelial

barrier function was not compromised after three hours of infection; indeed, there was a tightening

of the barrier evidenced by reduced FITC dextran diffusion after pneumococcal exposure (Fig 4G).

Pneumococcal infection had no effect on Junctional Adhesion Molecule A (JAM-A), Zonula-

Occludens 1 (ZO-1), Claudin 1 or Claudin 4 expression (Supplemental Fig 4). However, we did

observe a significant increase in epithelial β catenin expression following incubation with the

Δ*proABC/piaA* and Δ*fhs/piaA* strains, compared to the WT (Fig 4H, 4I).

Δ*fhs/piaA* but not the Δ*proABC/piaA* mutations attenuate the pro-inflammatory epithelial

innate response to pneumococcal colonisation and microinvasion

We have previously shown that the Detroit 562 cell innate immune response to *S. pneumoniae* is

strain dependent (Weight et al., 2019). Having found that serotype 6B biosynthesis gene mutants

that are attenuated for disease retain their capacity for microinvasion, we have further assessed the

link between colonisation, microinvasion and epithelial cell innate immunity by RNAseq. Compared

to non-infected cells (Fig 5A), all strains upregulated 78 core epithelial genes related to cytokine

signalling in immune system, NLR signalling and GPCR ligand binding. 193 genes were upregulated

by both the 6B WT and Δ*proABC/piaA* strains, characterised by Rhodopsin-like receptors, GPCR

ligand binding, cytokine signalling in Immune system, signalling by interleukins and Toll Receptor

cascades. Infection with the Δ*fhs/piaA* strain resulted in a markedly different transcriptomic profile

with modest upregulation of 254 genes, characterised by antigen processing, proteasomal

pathways, GTP hydrolysis, and intracellular stress responses (Fig 5A). Overall, the epithelial genes

that were most upregulated following infection with 6B WT or Δ*proABC/piaA* strain were similar and

contrasted to the reduced gene expression profile seen with the Δ*fhs/piaA* strain despite high levels

of cell invasion (Fig 5B). Since both mutant strains contained the *piaA* mutation, this could not

account for the differences seen in these responses. Together, these data demonstrate that

microinvasion, the innate epithelial response and disease are not necessarily linked.

Transcription factors, cellular kinases and cytokines (Fig 5C, 5D) predicted to regulate the

differentially expressed genes, showed the greatest difference in profile following infection with

Δ*fhs/piaA* strain compared to infection with 6B WT and Δ*proABC/piaA* strains. Δ*fhs/piaA* was

predicted to show diminished NFκB and MAPK activation and was associated with a more intrinsic

and epithelial repair response that included TBK1, Raf1, JAK1 kinases and IL-1 and IL-33 cytokine

signalling.

Enhanced epithelial caspase 8 activity following pneumococcal infection with the wild-type

and Δ*proABC/piaA* strains

The NLRP3 inflammasome drives programmed epithelial cell death via caspase 1, caspase 3/7 and

caspase 8 activity (Surabhi, Jachmann et al., 2022). Caspase activity, primarily regulated post-

translationally, enables a rapid response to cellular stress and pathogen-mediated activation

(Maekawa, Kashkar et al., 2023). In health, caspase regulation is thought to be important for mucosal

integrity (Gunther, Buchen et al., 2015). During bacterial pneumonia, caspase activation is thought

to have an important pro-inflammatory role, possibly triggered by pneumolysin (Gonzalez-Juarbe,

Bradley et al., 2018, Gonzalez-Juarbe, Bradley et al., 2017). We have therefore explored whether

the different patterns of microinvasion and epithelial reorganisation seen with the WT 6B, and mutant

strains are associated with differential caspase activation.

Compared to non-infected cells, infection with all strains led up to a 1.5-fold increase in epithelial

caspase activity 6-hour post infection (Fig 6A, dark grey bars). To test which caspases were

activated, we incubated infected cell cultures with either a caspase 1 inhibitor (YVAD-CHO), a

caspase 3/7 inhibitor (Z-VAD-FMK), or specifically measured caspase 8 activity. We found that the

increase was not due to caspase 1 activity (Fig 6B). Compared to non-infected cells, caspase 3/7

accounted for 3% and 15% of the caspase activity induced following infection with 6B WT and

Δ*fhs/piaA* strain respectively (Fig 6A). In contrast, Δ*proABC/piaA* strain did not induce caspase 3/7

activity. Significant caspase 8 activation was seen following infection with 6B WT and Δ*proABC/piaA*

strain, but not with the Δ*fhs/piaA* strain (Fig 6C).

Together, these data suggest differential caspase induction following infection with the different

strains, linking the proinflammatory profile of the 6B WT and the Δ*proABC/piaA* with caspase 8

activation, which we postulate may regulate pneumococcal survival and transmission during

colonisation in the nasopharynx.

Deletion of the *proABC* and *fhs* genes have broad-ranging differential effects on the *S.*

***pneumoniae* virulence gene expression and metabolic gene pathways when under stress**

We have previously found marked transcriptional differences between the WT and both mutants in

response to serum stress (used to represent the physiological stress found during human infection),

with an over three-fold increase in the number of genes upregulated by the mutant strains compared

to WT (Ramos-Sevillano E., 2023). Further analysis revealed that these genes include well-

characterised pneumococcal virulence factors such as *ply*, *nanA*, *psaA,* those regulating oxidative

stress such as *SpxB*, *lctO* and *adhE*, and genes involved in purine and carbohydrate metabolism

(Supplemental Information Table 2). Phosphotransferase systems, amino nucleotide sugar, fructose

and mannose and metabolic pathways were the most significantly enriched pathways in the

Δ*proABC* mutant under serum stress (Table 1). In contrast, competence, purine, pyruvate, metabolic

pathways, amino nucleotide sugar pathways and secondary metabolites were the most significantly

enriched pathways in the Δ*fhs* mutant under stress (Table 1). Together these data suggest that

deletion of the *proABC* and *fhs* genes have widespread but differential effects on *S. pneumoniae*

virulence and metabolism which may explain then complex phenotypes seen following epithelial

infection.

fhs gene mutation in *S. pneumoniae* 6B is associated with increased pneumococcal hydrogen

peroxide secretion and decreased pneumolysin activity

S. pneumoniae SpxB and LctO generate hydrogen peroxide (H_2O_2) which has been shown to

suppress ENaC-α transcription and inhibit the Na+–K+ pump, acting as an intracellular signal to

increase mitochondrial production of ROS (Alibayov, Scasny et al., 2022, Erttmann & Gekara, 2019).

We therefore postulated that differential expression of pneumococcal H_2O_2 may modulate epithelial

functional responses during nasopharyngeal colonisation by *S. pneumoniae* and explain the

differences in the epithelial innate immune response to the 6B WT, Δ*proABC/piaA* and Δ*fhs/piaA*

strains. To assess this, we measured H_2O_2 concentration using a luminescence-based bioassay,

normalising against bacterial CFU. After three and six hours, we detected significantly higher levels

of H_2O_2 in Δ*fhs/piaA* cultures compared to 6B WT and Δ*proABC/piaA* strains (Fig 7A). Furthermore,

this was not ameliorated by epithelial cell contact (Fig. 7B).

The pore forming pneumococcal toxin pneumolysin can both activate and suppress the host innate

immune response and mediates the haemolytic activity characteristic of the pneumococcus

(Periselneris, Turner et al., 2022, Terra, Plumptre et al., 2020, Zafar, Wang et al., 2017b). H_2O_2 can

increase the release of pneumolysin but paradoxically also negatively impairs its haemolytic activity

(Bazant, Ott et al., 2023). Compatible with the latter and the higher production of H_2O_2 by the Δ*fhs*

/piaA strain, despite having increased expression of *ply*, red blood cell lysis was reduced for Δ*fhs*

strains compared to 6B WT and Δ*proABC* (Fig. 7C).

Differential pneumococcal H_2O_2 release may therefore explain at least in part, the effects of the *S.*

pneumoniae serotype 6B WT and Δ*proABC /piaA* compared to the Δ*fhs /piaA* strain on the epithelial

response to colonisation and microinvasion. Importantly, in the 6-hour timeframe assessed, the

increased H$_2$O$_2$ release the Δ*fhs /piaA* strain was not associated with epithelial cellular toxicity or

loss of barrier function, but was associated with increased intracellular epithelial stress response, as

detected by RNAseq.

DISCUSSION

There is considerable variation in the propensity of different *S. pneumoniae* strains to colonise the

human host, cause invasive disease and transmit to others (Weiser et al., 2018). During colonisation

of the nasopharyngeal niche, the pneumococcus was previously thought to be confined to the mucus

layer and the epithelial surface (Weiser et al., 2018). However, using EHPC, we have previously

reported that pneumococcal microinvasion occurs in healthy volunteers (Weight et al., 2019), and

we now show that even when using isogenic serotype 6B pneumococcal biosynthesis pathway

mutant strains that are attenuated for systemic disease but not for carriage, this microinvasion is

preserved (Ramos-Sevillano et al., 2020). We found that pneumococcal colonisation and

microinvasion of primary human airway epithelium led to cellular reorganisation and mucus

production while retaining barrier function, although the pattern of this reorganisation varied by strain.

Furthermore, the pro-inflammatory innate response and caspase 8 activity associated with epithelial

infection by *S. pneumoniae* serotype 6B were attenuated by the Δ*fhs/piaA* but not by the

Δ*proABC/piaA* mutation. Under stress conditions, along with presumably compensatory changes in

the expression of multiple metabolic pathways, the Δ*proABC* and Δ*fhs* mutations resulted in the

upregulation of several pneumococcal virulence factor genes (Graphical Abstract Summary).

Notably, the *fhs* gene mutation in *S. pneumoniae* serotype 6B was associated with increased

pneumococcal hydrogen peroxide secretion and decreased pneumolysin activity. Together these

findings suggest that despite being attenuated for disease, the metabolic changes and the increased

expression of pneumococcal virulence genes in response to stress may explain the preservation of

epithelial microinvasion by these mutants. However, although epithelial microinvasion, cellular

reorganisation, innate immune response, and the propensity to cause invasive disease are strain

dependent, these properties do not appear to be directly co-correlated.

The complexity of the interaction between *S. pneumoniae* and the mucosal epithelium was

highlighted through infection of our well-characterised primary epithelial cell model(Travaglini,

Nabhan et al., 2020). The model consisting of Clara cells (involved in secretory, xenobiotic metabolic,

and progenitor cell functions), goblet cells (mucus production), ciliated cells (responsible for mucus

and small particle transport), exhibited considerable epithelial cellular re-organisation involving β

catenin, acetylated tubulin and uteroglobin in response to pneumococcal infection. In a rabbit

pneumococcal meningitis model, increased acetylated tubulin and microtubule stabilisation was

attributed to pneumolysin activity(Iliev et al., 2009). Previously, using a pneumolysin deficient mutant

of *S. pneumoniae* serotype 4 (TIGR4), we have shown that pneumolysin is a key driver of the

epithelial inflammatory response to pneumococcal infection (Weight et al., 2019). We therefore

speculate that the differential expression of pneumolysin and H_2O_2 by the WT and mutant strains

may contribute to the differing patterns of epithelial reorganisation, and goblet cell mucus release

that we observed, and may impact on both clearance and transmission (Weiser et al., 2018).

Epithelial infection with the 6B WT and Δ*proABC/piaA* strains induced innate inflammatory pathway

gene expression typical of pneumococcal infection (Weight et al., 2019), including

cytokine/chemokines, interleukins, Toll Like Receptor and NFκB signalling, alongside apoptotic

transcripts such as FOXO3 and TP53. We also identified epithelial genes upregulated only during

WT infection, potentially related to a greater disease-causing potential. These genes are involved in

RNA degradation, O-linked glycosylation, wnt signalling, DNA sensing, RIG-I pathways and signal

transduction. In contrast, the Δ*fhs/piaA* strain activated a pro-survival and adaptation profile,

upregulating genes such as JUN, SMARCA4, NFAT5, KLF6 and TCF4, which are involved in

homeostatic signalling and chromatin remodelling (Barutcu, Lajoie et al., 2016, Herta, Bhattacharyya

et al., 2018), suggestive of a more tolerant response. Ultimately, these capsule-independent

differences in pneumococcal-epithelial interactions may shape the adaptive immune response to pneumococcal colonisation (Ferreira et al., 2013, Wilson, Cohen et al., 2015), which could then further influence the outcomes of both colonisation and disease. How these findings translate to differences in the duration of nasopharyngeal carriage, invasiveness, transmission or clearance remains to be fully determined. However, during EHPC, Δ*fhs/piaA* infection was associated with increased density at day 6 post-inoculation compared the other strains (Hill H, 2023).

Importantly, while WT serotype 6B infection led to epithelial cell reorganisation (β catenin localisation to the junctional membrane and mucus secretion), pneumococcal transmigration, a more pro-inflammatory innate immune transcriptomic profile and increased caspase 8 activity, all indicative of a robust cellular response to *S. pneumoniae*, the Δ*fhs/piaA* but not Δ*proABC/piaA* strains was attenuated for many of these characteristics. This suggests that similar to the macrophage response to *S. pneumoniae*, intracellular signalling by pneumococci is not the sole determinant of the epithelial response to infection (Periselneris, Ercoli et al., 2019, Periselneris et al., 2022). The *proABC* operon consists of three genes involved in proline biosynthesis (ProABC)(Belitsky, Brill et al., 2001). *fhs* catalyses the synthesis of N10 formyl tetrahydrofolate, essential for carbon metabolism and purine nucleotide biosynthesis in various bacterial species (Crowley et al., 1997, Sah, Aluri et al., 2015), especially under hypoxic conditions (Aluri, Rex et al., 2015, Sah et al., 2015). It is increasingly recognised that bacterial virulence and metabolism are intimately linked (Obolski, Swarthout et al., 2023). Whether the distinct epithelial innate immune response to Δ*fhs/piaA* infection is due to diminished epithelial NFκB and MAPK activation (potentially linked to extracellular receptor engagement), reduced caspase 8 activity mediated by enhanced pneumococcal H_2O_2 release, decreased pneumolysin activity, or a compensatory metabolic response to the stress remains to be determined.

S. pneumoniae is highly adapted to colonise the human host and transmit from person to person. Invasive pneumococcal disease, particularly in its most severe forms, is a dead end for the bacteria.

Our observation that the induction of inflammation/ innate immunity is not necessarily linked to

disease potential supports our proposition that microinvasion during colonisation by the

pneumococcus may facilitate immune evasion. As is typical of 'professional' intracellular bacterial

species such as *Listeria* and *Salmonella*, the resulting host response might also promote

transmission (Galan, 2021, Li, Wang et al., 2020). Whether the less pro-inflammatory Δ*fhs/piaA* is

less transmissible than the more inflammatory WT remains to be determined but this could be further

explored using EHPC (Connor, German et al., 2018).

In conclusion, these data further support our proposed paradigm that epithelial microinvasion by *S.*

pneumoniae in healthy people is frequent and usually does not lead to disease. Our findings highlight

the broad-ranging effects of even single gene mutations in pneumococcal biosynthesis pathways,

which may partially explain the complexity of differences between seemingly closely related strains.

However, strain differences in subsequent epithelial cell microinvasion, cellular reorganisation and

inflammatory responses are likely driven by differential expression of a range of bacterial virulence

and metabolic pathways that are not necessarily co-correlated with disease-causing potential. As

suggested by our bacterial transcriptomic data, no single pneumococcal virulence factor or group of

factors fully explains the differences seen between the strains under stress. The complexity of these

bacterial-host cell interactions is modulated by mediators such as hydrogen peroxide and

pneumolysin, which can have both enhancing and inhibitory effects on the epithelial cell response to

infection in different contexts. *S. pneumoniae* in constantly evolving, with new variants emerging

both due to stochastic events and under ecological pressure from numerous factors including

vaccines and antibiotic exposure (Lourenco, Daon et al., 2021, Watkins, Kalizang'Oma et al., 2022)

(Chaguza, Senghore et al., 2020). Extensive phenotyping of emerging, genotypically related

pneumococcal strains offers the opportunity to more effectively unravel *S. pneumoniae* pathogenesis

and its adaptation to the nasopharyngeal niche.

METHODS AND PROTOCOLS

Bacteria

The *Streptococcus pneumoniae* serotype 6B (strain BHN 418(Browall, Norman et al., 2014)) was a

kind gift from Prof. Birgitta Henriques Normark (Karolinska Institute). Δ*proABC/piaA* and Δ*fhs/piaA*

mutant strains were generated using overlap extension PCR as described by Ramos-Sevillano *et*

al(Ramos-Sevillano et al., 2020). Stocks of bacteria were stored at -80°C when bacterial growth in

Todd Hewitt Broth (THY) was 0.3 $O.D._{600nm}$. Aliquots were defrosted, centrifuged at 8000g for eight

minutes and resuspended in 1% Fetal Bovine Serum (FBS, Gibco) in MEM media (Gibco) for

infections. Approximately 10 bacteria were added for every epithelial cell. Colony forming units (CFU)

were counted by serial dilutions on horse blood agar plates (EO Labs). Starting inoculums were not

significantly different across strains for all assays.

Bacterial RNA-seq sample collection, sequencing and reads

Mutant pneumococcal strains (three biological replicates for each mutant) and 6B WT (three

biological replicates) were grown in THY to mid log phase and the pellets resuspended in THY and

undiluted human serum for 60mins. The culture was then pelleted, and RNA stored in RNA Protect

at -70°C before extracting total RNA (Ramos-Sevillano E., 2023). Total RNA from each library was

ribo-depleted and sent for Illumina Next Seq Sequencing Pathogen Genomics Unit (PGU), UCL. The

quality of raw FASTQ reads was checked by FastQC v0.11.5, Babraham Bioinformatics, UK (S.,

2010) and visualised using multiQC v1.9 (Ewels, Magnusson et al., 2016). Reads were trimmed

using Trimmomatic 0.39 (Bolger, Lohse et al., 2014). Trimmed reads were also checked by FastQC

and multiQC. Trimmed reads were then mapped to KEGG annotated 6B genome sequence (670-

6B, Accession: CP002176.1) using bowtie2 with default settings(Langmead & Salzberg, 2012).

Conversion into BAM files was performed using SAMtools (Li, Handsaker et al., 2009). Mapped

reads were visualized in the Integrated Genome Browser (IGB) (Nicol, Helt et al., 2009).

FeatureCounts v2.0.0 was used to summarize read counts for each annotated feature in the

respective reference genomes in multimapping mode (-M) (Liao, Smyth et al., 2014).

Differential gene expression analyses

The generated count matrix was imported into R-studio (R v3.4.2) and normalization of counts and differential gene expression analysis was performed by DESeq2 (Love, Huber et al., 2014). DESeq2 normalized libraries were regularized log transformed for visualizing heatmaps and clustering. Differential gene expression was performed on raw counts. Fold change shrinkage was implemented with the apeglm package within DESeq2. Genes with a log2 fold change > 1.5 and false discovery rate (FDR) of < 0.05 were categorized as differentially expressed. KEGG pathway enrichment and module analysis were performed on differentially regulated genes using over representation analysis (ORA) implemented by clusterProfiler (Yu, Wang et al., 2012).

Experimental Human Pneumococcal Carriage Model (EHPC)

A full explanation of experimental design and selection criteria has been previously described (Weight et al., 2019). Following written informed consent, healthy non-smoking adults between the ages of 18 – 59 were inoculated with 80,000 CFU/nostril live strains of *S. pneumoniae*. Mucosal cells from the inferior turbinate using a plastic Rhino-probe™ (curettage, Arlington Scientific) were collected prior to inoculation, and days 2 and 6 post-inoculation. Samples were processed for confocal microscopy analysis. Nasal wash samples were collected for CFU count analysis. There were no adverse events. Ethical approval was given by NHS Research and Ethics Committee (REC)/Liverpool School of Tropical Medicine (LSTM) REC, reference number: 18/NW/0481 and Human Tissue Authority licensing number 12548.

Primary Human Epithelial Cells

Normal Human Primary Bronchial/Tracheal Epithelial Cells (NHBE-A, ATCC® PCS-300-010™) were plated at $6x10^3$ cells/cm^2 on a layer of sub-lethally γ-irradiated (60 Gy) mouse embryonic fibroblasts 3T3-J2 cells (kind donation from Howard Green, Harvard Medical School, Boston(Rheinwald & Green, 1975)) with keratinocyte culture medium cFAD (3:1 DMEM (Gibco) to Ham F-12 Nut Mix

(Gibco), 10% FBS (HyClone, Sigma), 1% Penicillin-Streptomycin (100X, Sigma), 0.4 µg/mL

Hydrocortisone (Calbiochem, USA), 5 µg/ml Insulin (various), 10-10 Cholera Toxin (Sigma) and

$2x10^{-9}$ Triodothyronine (Sigma)). Epithelial cells were stimulated with 10 ng/mL human epidermal

growth factor (hEGF, PeproTech, USA) on days 3 and 5. Cultures were grown at 37°C 6% CO_2 and

sub-confluent cultures were trypsinised with 0.25% Trypsin-EDTA (Sigma). For NHBE-A

differentiation in Air Liquid Interface (ALI) culture, cells were plated at a density of $6x10^4/cm^2$ on 1µm

pore PET cell culture inserts (12 wells, Greiner). The insert was supplemented with cFAD medium

on the top and bottom. After 48 hours, medium was removed from the top of the culture (exposure)

and the culture was fed with fresh PneumaCult™ differentiation Medium (Stemcell Technologies)

from the bottom of the well every 2 days for 3 weeks, until cell ciliation was observed. Antibiotics

were removed from the medium and cells washed 24 hours before infection experiments.

Human Epithelial Cell Lines

Human pharyngeal carcinoma Detroit 562 epithelial cells (ATCC_CCL-138) were grown in 10% FCS

in alpha MEM media (Gibco). For each set of experiments, cells were used within 5 passages. Cells

consistently tested PCR negative for mycoplasma (Cambridge Biosciences).

Pneumococcal-epithelial cell co-culture

For association and internalisation assays, confluent monolayers of Detroit 562 cells (typically day 7

- 8 post plating) cultured on 12 well plates (Corning), were exposed to *S. pneumoniae* (1 cell : 10

pneumococci) for three hours in 1% FCS alpha MEM (six-hour infection for HNBE-A cells in 1%

Pneumocult media without supplements) (Weight et al., 2019). Cells washed three times in $HBSS^{+/+}$

before incubation in 1% saponin for 10 minutes at 37°C to lyse cells. Bacterial dilutions were plated

on horse blood agar for 16 hours and colony forming units counted. For internalisation quantification,

200µg/ml gentamicin was added to the cells for one hour before incubation with saponin.

For transmigration assays, Detroit 562 cells were plated onto 3µm pore, PET Transwell Inserts

(ThermoFisher) typically for 10 days (Weight et al., 2019). Media was changed to 1% FCS (250µl

apical chamber, 1ml basal chamber) one hour prior to infection experiments. 1mg/ml FITC-dextran

(Sigma Aldrich) was added to the apical chamber of selected inserts for permeability assays.

Transepithelial Electrical Resistance (TEER) was measured before and after infection using an

EVOM2 (World Precision Instruments). Bacteria were added to the cells for three hours during of

which 50µl of basal media was repeatedly removed to measure bacterial load by counting CFU/well.

Permeability was recorded using a FLUOstar Omega (BMG Labtech) at 488nm.

Confocal Microscopy

Sample processing was performed as previously described(Weight et al., 2019). Briefly, mucosal

cells from the EHPC model were placed directly into 4% PFA and cytospun onto microscope slides.

NHBE-A cells and Detroit 562 cells cultured on transwell membranes were fixed in 4% PFA (Pierce,

Methanol Free). Cells were permeabilised with 0.2% Triton X-100 for 10 minutes, blocked for one

hour in blocking buffer (3% goat serum and 3% BSA in PBS (Sigma)) and incubated with

pneumococcal antisera Pool Q (raised against the polysaccharide capsule, SSI Diagnostica) for one

hour. Wheat germ agglutinin conjugated to Rhodamine (Vector Labs) was added along with goat-

anti rabbit IgG conjugated to Alexa Fluor 488 for 45 minutes in blocking buffer. Primary (used at

1:100) antibodies used for epithelial cell proteins can be found in Supplemental Information Table 3.

Secondary (used at 1:500) antibodies were either goat anti-mouse or goat anti-rabbit – Alexa Fluor

555 or 546, ThermoFisher. Of note, for epithelial protein antibodies raised in rabbit (Uteroglobin), no

pneumococcal staining was possible and therefore pneumococci were not visible on the images.

DAPI was added for 5 minutes and cells were mounted with Aqua PolyMount (VWR International)

and a coverslip on the microslide. Pneumococci were recorded by manual scanning of the whole

cytospin for the EHPC samples. More than three fields of view were recorded for each bacterial

strain for Detroit 562 cell infections, using inverted Zeiss LSM (either 700 or 880) confocal

microscopes. Images were processed with Zeiss LSM Image Browser. Z stacks were recorded at

1µm intervals at either 40x oil or 63x oil objectives. Automated image analysis was carried out using

Cellprofiler (Carpenter, Jones et al., 2006).

Electron Microscopy

Preparation of Detroit 562 cells and NHBE-A cells was identical, and previously described(Weight et al., 2019). Briefly, cells cultured on transwells were fixed with 2% paraformaldehyde and 1.5% glutaraldehyde in 0.1 M cacodylate buffer and post-fixed in 1% OsO4 / 1.5% K4Fe(CN)6 in 0.1 M cacodylate buffer pH7.3. Samples were dehydrated in graded ethanol-water series and infiltrated with Agar 100 resin mix. Ultra-thin sections were cut at 70-80 nm using a diamond knife on a Reichert ultracut microtome. Sections were collected on 300 mesh copper grids and stained with lead citrate. For transmission electron microscopy the samples were hardened at 60°C for 48 hours. The coverslip was removed, and a representative area was selected. Ultra-thin sections were cut at 70-80 nm using a diamond knife on a Reichert ultra-cut S microtome. Sections were collected on copper grids and stained with lead citrate. Samples were viewed with a Joel 1010 transition electron microscope and the images recorded using a Gatan Orius CCD camera.

Pneumolysin activity

Adapted from Kirkham et al(Kirkham, Kerr et al., 2006). Briefly, final concentration of 2% horse blood (EO Labs) solution was prepared in phenol free alpha MEM (Life Technologies) and 100 µl added to wells of a 96 U-bottom plate (Corning). 100 µl of bacterial solutions (containing ~2.5×10^6 bacteria) were suspended in phenol free alpha MEM were added to each 96 well. Saponin was used as a positive control for lysis. Solutions were incubated for 30 minutes at 37°C before centrifugation at 1000g for one minute. 100 µl was transferred into a new 96 well plate and absorbance recorded at 540nm on a plate reader.

Hydrogen Peroxide Assay

Detroit 562 cells were cultured in white 96 well plates (Corning). NHBE-A cells were cultured in 12 well plates in Pneumocult media. Cells were incubated with H_2O_2 substrate and infected with strains of *S. pneumoniae* for up to six hours according to manufacturers' instructions (ROS-Glo™ H_2O_2 Assay, Promega). ROS-Glo™ Detection solution was added to the cells and incubated for 20 minutes. For primary cells, supernatant was then transferred to a white 96 well plate. Luminescence was read using a GloMax -Multi Detection System plate reader (Promega).

Caspase assay

Detroit 562 cells were cultured in white 96 well plates (Corning). NHBE-A cells were cultured in 12

well plates in Pneumocult media. Cells were infected with strains of *S. pneumoniae* for up to six

hours. Primary cell supernatant was transferred to a white 96 well plate. Samples were incubated

with Caspase-Glo® 1 Reagent, Caspase-Glo® 1 YVAD-CHO Reagent, Caspase-Glo® Z-VAD-FMK

Reagent or Caspase-Glo® 8 Reagent, for one hour and according to manufacturers' instructions

(Promega). Luminescence was read using a GloMax-Multi Detection System plate reader

(Promega).

RNA samples and sequencing (RNA-Seq)

RNA-Seq data was collected as previously described (3). Confluent monolayers of Detroit 562

epithelial cells were infected with S. pneumoniae strains for four hours before collection in RNALater.

RNA was extracted using a Qiagen RNAEasy micro kit and treated for DNA removal using a Qiagen

Turbo DNA-free kit. RNA quality was assessed and quantified using a BioAnalyser (Agilent 2100).

Samples were sequenced using Illumina Nextseq 500/550 High Output 75 cycle kit giving 15-20

million 41bp paired-end reads per sample (Pathogens Genomic Unit, UCL).

Statistics

Each condition within each experiment was performed in duplicate or triplicate, and each experiment

was performed independently more than three times, unless stated otherwise. Error bars represent

SEM, unless stated otherwise. GraphPad Prism Version 7 was used for parametric (t-tests or

ANOVA) or non-parametric (Mann-Whitney or Kruskal-Wallis tests) analysis, which was based on

the Shapiro-Wilk normality test. Ad hoc tests were performed using Tukey's (for parametric data) or

Dunn's (for non-parametric data) multiple comparisons test. P values less than 0.05 were considered

significant.

Data and code availability

Source data are provided as a Source Data file. RNAseq data from the Detroit 562 cell infections is publicly accessible through Zenodo with Accession (DOI:10.5281/zenodo.7997789).

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AUTHOR CONTRIBUTIONS: CMW conceived, funded, designed and conducted the study,

performed the experiments, acquired samples and processed data, and wrote the first draft of the

manuscript. GP analysed and interpreted the RNAseq data. MB analysed and interpreted the

bacterial transcriptomic data. RR cultured and differentiated primary epithelial cells. ERS generated

the 6B mutant strains and bacterial transcriptomic data. JR collected and processed EHPC samples.

JAGA processed the RNA-Seq data. MW ran the image analysis. MC provided technical advice. PB

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FIGURE LEGENDS

Table 1. Differentially expressed pathways from single isogenic mutants in human

serum compared to WT. 55 genes were selected within competence pathways, amino acid

metabolism, virulence factors, oxidative stress pathways and other known genes important

for colonisation, for assessment of changes in gene expression following serum stress. *q-*

value measures the proportion of false positives incurred (the false discovery rate) when

that particular test is significant.

Fig 1. Pneumococcal – epithelial interactions in the EHPC model. (A) Schematic showing that

during colonisation, pneumococci adhere to the epithelial cell surface (association), internalise inside

epithelial cells (microinvasion). Mucus – lime; pneumococci – purple; intracellular vacuole – dark

green; epithelial cells – yellow; nucleus – brown; cell junctions – pink. (B) Representative microscopy

images showing 6B association to the epithelium and microinvasion by the Δ*proABC/piaA* or

Δ*fhs/piaA* mutants. Surface carbohydrates (red), nuclei (DAPI, blue), pneumococci (green). (C)

Table summarising the percentage of bacteria that were found by microscopy, on the surface

(association) or inside (microinvasion) cells in the EHPC model. Mucosal curettage samples were

collected at day 6 post-pneumococcal challenge. Number of volunteers (n) in each group is indicated

in brackets, along with the total numbers of pneumococci (Spn) counted.

Fig 2. Impact of pneumococcal infection on NHBE-A cell junctional protein expression and

barrier integrity. NHBE-A Cells were cultured at ALI and infected with pneumococcal strains for

6hrs. (A) Top: Representative confocal microscopy images from 4 independent experiments with

replicates, showing pneumococcal (green) association with the epithelium (red, surface

carbohydrates; nuclei blue) at 6hr post infection. Bottom: Representative transmission electron

microscopy images from 2 independent experiments, showing pneumococcal microinvasion

examples of each strain (arrows), enclosed within a vacuole after 4hr infection. (B) Representative

confocal microscopy images from 4 independent experiments with replicates, showing

pneumococcal (green) interactions with junctional proteins (red) of β catenin. Colocalization of red

and green appears yellow. Nuclei (blue). (C) Integrated intensity of β catenin in pneumococcal

negative (not pneumococcal associated) or positive (pneumococcal associated) cells. Non infected

v pneumococcal negative cells **** p <0.0001 (NI v $\Delta proABC/piaA$), ** p = 0.0026 (NI v $\Delta fhs/piaA$);

non-infected v pneumococcal positive cells; **** p <0.0001 (NI v $\Delta proABC/piaA$ and NI v $\Delta fhs/piaA$);

Kruskal-Wallis, n = 4 independent experiments. (D) Transepithelial electrical resistance (TEER) was

recorded pre- and post- 6hr infection to assess barrier integrity. N = 3 independent experiments with

replicates. Average TEER pre-infection was 466Ω.cm^2 (430-484 Ω.cm^2, p = 0.1458 ANOVA) and

average TEER post-infection was 545Ω.cm^2 (527-567 Ω.cm^2. p = 0.04744 ANOVA). Change in

TEER comparing non-infected cells to infected cells p = 0.6592, Kruskal-Wallis. Error bars represent

SEM.

Fig 3. Pneumococcal – epithelial interactions with primary human epithelial cells. Cells were

cultured at ALI and infected with pneumococcal strains for 6hrs. (A) Representative scanning

electron microscopy images from 2 independent experiments, showing the surface of the epithelium.

Representative examples of differentiated epithelia (basal cells, Clara cells, goblet cells, ciliated

cells) are shown in yellow text. Colonising pneumococci are highlighted by arrows. Representative

confocal microscopy images from 4 independent experiments with replicates for (B) Ciliated cells

(acetylated tubulin, red), (C) Goblet cells (mucin5ac, red, (arrows indicate co-localisation of

mucin5ac with pneumococci)), (D) Clara cells (uteroglobin, red) after 6hr infection. Pneumococci

(green), nuclei (DAPI, blue), colocalization of red and green appears as yellow. (E) Integrated

intensity of acetylated tubulin and Muc5ac in pneumococcal negative or positive cells from two or

more images. Acetylated tubulin, neg p = 0.2677, pos p = 0.017; Mucin5ac, neg p = 0.6852, pos p =

0.8510, ANOVA. N = 3 or 4 independent experiments. (F) Integrated intensity of uteroglobin

normalised to non-infected cells (left, p = 0.0115 non-infected v infected, Kruskal-Wallis) and

percentage of Clara positive cells following infection (right, p = 0.0003 non-infected v strains, p =

0.0036 6B v mutant strains, Kruskal-Wallis). N = 3 independent experiments.

Fig 4. **Strain association, microinvasion and transmigration of Detroit 562 cells.** Cells were

infected with *S. pneumoniae* for three hours and CFU counts recorded. (A) Representative confocal

microscopy images from 6 independent experiments with replicates, showing pneumococcal (green)

interactions with surface carbohydrates (red). (B) Association of pneumococcal strains to epithelial

cells. p = 0.0009 (Kruskal-Wallis), n = 6 with replicates. (C) Internalisation of strains into cells,

following a gentamicin protection assay. p = 0.0219 (Kruskal-Wallis) N = 6 with replicates. (D)

Microinvasive index is defined as the percentage of internalised bacteria over all associated bacteria.

p = 0.071 (Kruskal-Wallis) N = 6 with replicates. (E) Pneumococcal viability inside epithelial cells

following a gentamicin protection assay. n = 3 or 4 independent experiments with replicates. Counts

were normalised to microinvasion counts for each strain after 3 hours infection and compared to 6B

WT; +1hr p = 0.6517, +2hr p = 0.1377, +3hr p = 0.1183 (ANOVA). (F) Transmigration of

pneumococcal strains across confluent monolayers on transwell inserts. CFUs were recorded from

the basal chamber. N = 6 independent experiments with replicates. p < 0.001 (Kruskal-Wallis). (G)

Epithelial cell permeability was assessed via leak to 4kDa FITC-Dextran into the basal chamber. N

= 4 with replicates. p <0.0001 compared to non-infected cells, and p = 0.0689 between 6B WT and

mutant strains (Kruskal-Wallis). (H) Representative confocal microscopy images from 6 independent

experiments with replicates, showing pneumococcal (green) interactions with β catenin (red).

Nuclear DAPI stain (blue). (I) Image quantification of integrated intensity of β catenin normalised to

non-infected cells, following infection with the different strains. N = 5 independent experiments. Non

infected v pneumococcal negative cells **** p <0.0001 (NI v Δ*fhs/piaA*); non-infected v

pneumococcal positive cells; **** p <0.0001 (NI v 6B), * p = 0.0183 (NI v Δ*proABC/piaA*), * p = 0.0149

(NI v Δ*fhs/piaA*); Kruskal-Wallis.

Fig 5. Detroit 562 cell transcriptomic responses to pneumococcal strains. Epithelial cells were infected for four hours with pneumococcal strains and RNA extracted and processed for RNAseq. 6B n = 11, PP n = 17, FP n = 14, non-infected n = 12, from 6 independent experiments. (A) All significantly log2 fold change upregulated genes according to strain compared to non-infected cells. Significance was defined as DEGs with a log2 fold change (logFC) of > 1.5 and false discovery rate (FDR) of < 0.05. (B) Comparison of the top 20 most upregulated genes for each strain, compared to non-infected cells. Upstream regulator analysis for (C) transcription factors and (D) kinases.

Fig 6. Effects of pneumococcal infection on caspase activity in Detroit 562 cells. Caspase activity was assessed by luminescence, following infection with pneumococcal strains for 6 hours. (A) Caspase 3/7 activity was determined following incubation with the specific inhibitor Z-VAD-FMK. N = 4 with replicates. In comparison to non-infected cells, caspase 3/7 p = 0.0022; caspase 3/7 + Z-VAD-FMK inhibitor p = 0.0005. In comparison to 6B WT, caspase 3/7 p = 0.0215; caspase 3/7 + Z-VAD-FMK inhibitor p = 0.0012 (Kruskal-Wallis). (B) Caspase 1 activity was determined following incubation with the specific inhibitor YVAD-CHO. Negative signals indicate caspase activity other than caspase 1. N = 6 with replicates. In comparison to non-infected cells, p = 0.39; caspase+YVAD-CHO inhibitor p = 0.3604 and, in comparison to 6B WT, p = 0.6226; caspase+YVAD-CHO inhibitor p = 0.5386 (Kruskal-Wallis). (C) Caspase 8 activity was assessed following infection with pneumococcal strains. N = 3 with replicates. In comparison to non-infected cells, p = 0.0015 (ANOVA) and, in comparison to 6B WT, p = 0.0172 (ANOVA).

Fig 7. Hydrogen peroxide secretion and pneumolysin activity from pneumococcal strains in the absence and presence of Detroit 562 cells. A) Fold change of hydrogen peroxide production from the mutants compared to WT, normalised to the CFU counts. 3hr p = 0.0087 (ANOVA), 6hr p = 0.0209 (Kruskal-Wallis). B) Fold change of hydrogen peroxide production from the mutants compared to WT, normalised to the CFU counts, following infection of Detroit 562 cells. Media was

replaced after 1hr infection and cells incubated for a further 5hrs. N = 3 independent experiments

with replicates. Compared to 6B WT, p = 0.0034 (ANOVA). C) Pneumolysin activity was assessed

using a red blood cell lysis assay. Strains were incubated with red blood cells for 30 minutes and

absorbance measured. N = 4 experiments with replicates. Pneumococcal strain haemolytic activity

is calculated in comparison to 100% lysis by 0.0625% saponin. p <0.0001 compared to 6B WT

(ANOVA).

Table 1. Differentially expressed pathways from single isogenic mutants in human serum compared to WT.

Pathway	GeneRatio	P-adjust	qvalue
Δfhs vs. WT			
Fatty acid metabolism/biosynthesis	10/57	1.08E-09	6.49E-10
Biosynthesis of secondary metabolites	26/57	2.09E-04	1.26E-04
Purine metabolism	10/57	1.34E-03	8.06E-04
Quorum sensing	11/57	3.20E-03	1.92E-03
Pantothenate and CoA biosynthesis	5/57	3.59E-03	2.16E-03
beta-Lactam resistance	5/57	7.59E-03	4.57E-03
Propanoate metabolism	4/57	1.51E-02	9.09E-03
2-Oxocarboxylic acid metabolism	4/57	1.51E-02	9.09E-03
Metabolic pathways	40/57	1.94E-02	1.16E-02
Amino sugar and nucleotide sugar metabolism	7/57	4.22E-02	2.54E-02
Pyruvate metabolism	5/57	4.31E-02	2.59E-02
ΔproABC vs. WT			
Fatty acid metabolism/biosynthesis	10/71	1.17E-08	8.94E-09
Galactose metabolism	12/71	1.25E-04	2.47E-08
Phosphotransferase system (PTS)	13/71	2.54E-03	1.93E-03
Amino sugar and nucleotide sugar metabolism	9/71	2.89E-02	2.20E-02

Figure 1. Pneumococcal – epithelial interactions in the EHPC model

A

Pneumococci

Association

Micro-invasion

Transmigration

B

6B | ΔproABC/piaA | Δfhs/piaA

C

	Day 6 post-challenge	
	Association (%)	Micro-invasion (%)
6B	87.8 (n11, 43spn)	12.2 (n11, 6spn)
ΔproABC/piaA	59.3 (n11, 16spn)	40.7 (n11, 11spn)
Δfhs/piaA	48.7 (n5, 57spn)	51.3 (n5, 60spn)

Figure 2. Impact of pneumococcal infection on NHBE-A cell junctional protein expression and barrier integrity.

Figure 3. Pneumococcal – epithelial interactions with primary human epithelial cells.

Figure 4. Strain association, microinvasion and transmigration of Detroit 562 cells.

Figure 5. Detroit 562 cell transcriptomic responses to pneumococcal strains.

A

6B WT v not infected
ΔproABC/piaA v not infected

81 193 38

5 13

Δfhs/piaA v not infected

B

log2foldchange	6B	ΔproABC/piaA	Δfhs/piaA
Upregulated genes			
AC256236.1	32.9	25.5	0.0
AC022149.1	30.2	27.6	0.0
Z84488.2	29.1	21.6	0.0
MUC21	25.8	29.0	0.0
VASN	20.9	0.0	0.0
BRD2	18.4	24.7	0.0
AC012254.2	18.2	13.8	0.0
CTAGE4	18.1	0.0	0.0
MICE	17.1	20.3	0.0
AC107075.1	10.1	0.0	0.0
CSNK2B	0.0	20.2	0.0
MTRNR2L6	0.0	19.4	15.8
LSM2	0.0	17.1	0.0
ALOX5	0.0	0.0	6.9
AC006064.6	0.0	0.0	3.4
TAP2	0.0	0.0	3.2
CYP1A1	0.0	0.0	1.7
FOSB	0.0	0.0	1.4
IL1B	0.0	0.0	1.3
CXCL8	0.0	0.0	1.1
CXCL2	0.0	0.0	1.1
CYP1B1	0.0	0.0	1.0

C

Transcription factors

0.00 2.01 7.00

CREB1
TP53
HIF1A
NUPR1
RELA
STAT3
NFKBIA
FOXO3
FOXO1
TGIF1
EZH2
JUN
SMARCA4
NFKB1
NFAT5
KLF6
TCF4

D

Kinases

0.00 0.73 4.00

MAPK1
PRKCA
SRC
TBK1
IKBKB
MAP3K8
MAPK8
EIF2AK3
RIPK1
MAP3K14
ERBB2
PRKCD
FGFR1
RAF1
JAK1
CHUK
MAPK7
PRKCE
MAPK3

Figure 6. Effects of pneumococcal infection on caspase activity in Detroit 562 cells.

A

Caspase activity
Caspase 3/7 inhibitor

B

Caspase 1activity

C

Caspase 8 activity

Figure 7. Hydrogen peroxide secretion and pneumolysin activity from pneumococcal strains in the absence and presence of Detroit 562 cells.

Graphical abstract