Navigating contradictions: *Salmonella* Typhimurium chemotactic responses to conflicting effector

stimuli

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Abstract

Chemotaxis controls motility and colonization in many enteric pathogens, yet most studies have examined bacterial responses to single effectors in isolation. Previously, we reported that *Salmonella* Typhimurium uses the chemoreceptor Tsr to detect L-serine (L-Ser) in human blood serum, promoting invasion of damaged vasculature (*Glenn et al., eLife* 2024 [1]). Tsr also mediates sensing of indole, a microbiota-derived chemorepellent and bactericide proposed to protect against enteric infection by deterring pathogen colonization. The major biological reservoir of indole in the gut is feces, where it accumulates to millimolar levels. Here, we tested whether indole-rich human fecal material is protective against infection and found that exposure to feces instead enhances intestinal invasion in an explant model. Surprisingly, diverse non-typhoidal *Salmonella* serovars were strongly attracted to feces despite its high indole content. We found that while pure indole is a strong repellent sensed through Tsr, its effects are overridden in the presence of nutrient attractants, including L-Ser. Moreover, indole only minimally impairs growth in the presence of sufficient nutrients. Using video microscopy, we observed that Tsr integrates L-Ser and indole signals in real time, biasing bacterial movement based on the relative concentrations of attractant and repellent. We propose that this chemotactic compromise optimizes pathogen fitness by guiding bacteria to niches with a favorable L-Ser-to-indole ratio, balancing nutrient acquisition and avoidance of high microbial competitor density. These findings highlight the limitations of single-effector studies in predicting bacterial navigation in complex environments, where chemotaxis is shaped by the integration of multiple, often opposing, chemical cues.

Introduction

Many bacteria that colonize the gastrointestinal tracts of humans and other animals employ chemotaxis to sense chemical effectors in the gut lumen and swim to environments conducive for growth and colonization [2–6]. This process is controlled by chemoreceptor proteins, which recognize chemical effectors and transduce signals through a phosphorylation cascade to regulate flagellar rotation and swimming direction, ultimately determining the spatial and temporal patterns of bacterial colonization (Fig. 1A) [2,3,7,8]. In turn, the colonization topography of bacteria within the gut influences the health of the host through nutrient absorption, developmental regulation, and resistance to pathogens [9–11]. While many effectors have been studied and characterized in isolation as attractants or repellents [5,8], natural environments contain mixtures of opposing signals. In the enteric lumen, bacteria encounter a complex milieu of conflicting effector stimuli, including nutrients, molecular cues, and toxins [2,5]. Only a handful of studies have investigated how bacteria navigate conflicting chemical gradients and there remains much to learn about how bacteria prioritize these signals to direct their movement and colonization (Fig. 1B) [2,5,12–19].

A chemical effector of major importance for enteric bacterial communities is indole, an interbacterial signaling molecule that regulates diverse aspects of physiology and lifestyle [20–22]. Indole is excreted by gut microbiota as a byproduct of tryptophan metabolism and accumulates to millimolar levels in human feces (Fig. 1A-B) [20,23,24]. Indole is amphipathic and can transit bacterial membranes to regulate biofilm formation and motility, suppress virulence programs, and exerts bacteriostatic and bactericidal effects at high concentrations [20–22,24–26]. Indole was one of the earliest identified chemorepellents, and subsequent work has extensively explored its role in *Escherichia coli* chemotaxis (Table S1) [12,13,15,18,22,27]. Recent studies have advanced our understanding of the molecular mechanisms underlying *E. coli* indole taxis and the involvement of the chemoreceptor taxis to serine and repellents (Tsr) (Fig. 1A-B) [12,13,18,22]. From this body of research, the hypothesis emerged that indole from the gut microbiota repels pathogens and restricts their growth as a mechanism of colonization resistance conferred by the microbiome [12,20–22,28,29]. If true, this could represent an interesting avenue for cultivating healthy microbiomes more robust against pathogen infiltration. However, indole taxis has only been studied in *E. coli* and no prior work has tested whether human fecal material, the major biological source of indole in the gut, induces frank pathogen chemorepulsion or inhibits pathogen growth at physiologically relevant levels (Table S1).

We were interested in further studying the role of Tsr in navigating contradictory effector
stimuli because this chemoreceptor possesses an interesting dual function: it senses
chemorepellents and also the amino acid and nutrient L-Ser as a chemoattractant (Fig. 1A-B)
[1,2,12,13,18,22,27,30–32]. Tsr plays important roles during enteric invasion [33–35], but questions remain
about how the chemoreceptor regulates pathogen colonization in the presence of conflicting
signals. We recently mapped the biological distribution of Tsr and reported that many enteric
pathogens and pathobionts possess Tsr orthologues, including the genera *Salmonella*, *Citrobacter*,
and *Enterobacter* [1]. Whether these and other bacteria respond to indole as a chemorepellent has
remained unclear because all prior studies of indole taxis focused on *E. coli* (Table S1). Prior *in*
vitro work with purified effectors showed when both attractants and repellents are present, Tsr
facilitates so-called "intermediate" responses between chemoattraction and chemorepulsion,
suggesting that, in some cases, navigating conflicting stimuli is regulated at the single
chemoreceptor level [13]. These types of chemotactic compromises, such as those that have been
referred to as bet-hedging, trade-off, and simultaneous sensing, remain insufficiently studied, but
could be relevant to enteric infections because the gut lumen contains conflicting effectors [13,18,19].
Earlier work posited that bacteria sum conflicting signals and ultimately perform attraction or
repulsion responses based on the relative concentrations and sensitivity to the individual effectors,
which, if true, would enable straight-forward predictions for behaviors to effector mixtures [15,18].
But, this binary model of chemotaxis seems too coarse to explain recent observations of population
structures that emerge in response to conflicting signals that are clearly distinct from either
attraction or repulsion [13,19].

In this study, we aimed to gain a deeper understanding into how chemotaxis directs
bacterial localization to naturally-occurring stimuli that contain conflicting effectors, the types of
population structures that arise and their dynamics of formation, and their potential relevance in
enteric infections. *Salmonella enterica* serovar Typhimurium is a frank pathogen that relies on
chemotaxis for enteric infection and employs an array of strategies to compete with the native
microbiota for nutrients and colonization niches, ultimately invading the intestinal tissue and
becoming intracellular [9,33–38]. *S.* Typhimurium also differs fundamentally from *E. coli* because it
lacks tryptophanase genes and cannot itself produce indole, and thereby could provide a novel
perspective on indole taxis [39,40]. In this study, we used the pathogen *S.* Typhimurium as a model
system to: (1) test the hypothesis that the microbiota secretion product indole is protective against

enteric invasion, (2) investigate if pathogens are repelled by indole-containing fecal material, and

(3) learn how the chemoreceptor Tsr regulates pathogen spatial localization in response to

conflicting chemotactic stimuli of the intestinal environ. Using live imaging, we directly visualized

how enteric pathogen populations dynamically restructure in response to physiological mixtures

of attractants and repellents. We demonstrate that chemotaxis responses to natural biological

combinations of effectors, and their impacts on infection outcomes, are not easily predicted based

on responses to individual effectors alone.

Results

Impact of opposing chemoeffector stimuli on pathogen invasion in swine colonic explants

We sought to test whether indole in human fecal matter protects against *S.* Typhimurium infection

and whether this involves chemorepulsion mediated by the chemoreceptor Tsr. *S.* Typhimurium

preferentially invades tissue of the distal ileum, but also infects the cecum and colon [41–44]. We

presume the amount of indole is greatest in the lower gastrointestinal tract where tryptophan has

been maximally digested by microbiota tryptophanases, and so we developed a swine colonic

explant model that mimics the architecture and size of adult human colonic tissue [40,45–49]. We based

this model on a prior study of explant tissue used to characterize invasion through gentamicin

washes that kill extracellular and attached bacteria [50]; gentamicin washing is also a commonly-

used method to quantify *S.* Typhimurium intracellular populations in cell culture experiments [51,52].

A section of colonic tissue was prepared for each experiment with gentle cleaning and treated with

various effector solutions: solubilized human feces, purified indole and/or L-Ser at fecal-relevant

concentrations, or buffer as a control (see Materials & Methods for tissue dimensions and other

experiment details). This experimental setup simulates a biological gradient in which the effector

concentration is initially highest near the tissue and diffuses outward into the buffer solution.

Following treatment with effectors, the tissue was subsequently exposed to co-infection

with wild-type (WT) *S.* Typhimurium strain IR715 and either a *cheY* mutant (motile but non-

responsive to chemoeffector stimuli) or *tsr* deletion mutant (Fig. 1C-D, Table 1) [33]. The

functionality of these mutants have been confirmed through *in vivo* infection studies using

genetically complemented strains [33,34]. To assess the role of chemotaxis in infection, we quantified

total bacteria harvested from tissue homogenates and also enumerated bacteria following a

Fig. 1. Tsr and chemotaxis mediate efficient pathogen invasion of colonic tissue. A-B. Overview of the role of Tsr in chemotactic responses and premise of this study. C. Experimental design of colonic explant infections. See Materials & Methods for experiment details such as tissue dimensions. D. Serine (presumed to be nearly 100% L-Ser, see Materials & Methods) and indole content of liquid human fecal treatments, as measured by mass spectrometry. E-I. Competitive indices (CI) of colony-forming units (CFUs) recovered from co-infected swine explant tissue, either from the total homogenate (open box and whiskers plots), or from tissue washed with gentamicin to kill extracellular and attached cells, which we refer to as the "invaded" intracellular population (checkered box and whisker plots), as indicated. Each data point represents a single experiment of a section of tissue infected with bacteria, and the CI of CFUs recovered from that tissue (n=5). Boxes show median values (line) and upper and lower quartiles, and whiskers show max and min values. Effect size (Cohen's *d*) and statistical significance are noted for each experiment in relation to competitive advantage, i.e. deviation from a CI of 1 (not significant, ns; * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$). See also Figure S1 for disaggregated CFU enumerations for each experimental group prior to CI calculation. Data S1 contains all numerical CFU measurements.

gentamicin wash, which we presume to reflect bacteria that were intracellular and evaded killing
by the gentamicin wash, at 1, 3, and 6 h post-infection (Fig. 1C, Materials & Methods) [53,54]. For
buffer-treated explant experiments, WT *S.* Typhimurium showed a modest time-dependent
advantage in colonization and invasion compared to chemotactic mutants, indicating that
chemotaxis, and specifically Tsr, promotes tissue colonization under baseline conditions (Fig. 1E,
Fig. S1A-B, Data S1).

The hypothesis that indole protects against pathogen colonization predicts that feces, the
major biological repository of gut indole, will protect against invasion. Contrary to this, we found
that fecal treatment significantly enhances intracellular invasion of WT *S.* Typhimurium
(compared to buffer treatment), providing a >100-fold competitive advantage mediated by Tsr
(Fig. 1F, Fig. S1C-D). Analysis of the liquified human fecal matter used in this study revealed an
indole concentration of 862 µM, consistent with previously reported ranges (0.5–5 mM) (Fig. 1D,
Materials & Methods) [20,23–26]. However, when colonic tissue was treated with purified indole at
the same concentration, the competitive advantage of WT over the chemotactic mutants was
abolished compared to fecal-treated tissue (Fig. 1G, Fig. S1E-F, Data S1). Given that Tsr mediates
attraction to L-Ser for both *E. coli* and *S.* Typhimurium, we hypothesized that L-Ser present in
feces might be responsible for increased colonization of fecal-treated tissue [1,2,55,56]. However,
treatment with 338 µM L-Ser, the concentration present in our fecal sample (Fig. 1D, Materials &
Methods), actually shows a decrease in WT advantage compared to fecal treatment, similar to the
effect of indole alone (Fig. 1H, Data S1). While treatments with either indole or L-Ser decrease
the WT advantage, total bacterial loads are similar, suggesting that neither effector is "protective"
in terms of infection burden (Fig. S1, Data S1). Since both effectors individually alter invasion,
but do not on their own recapitulate the efficient invasion phenotype observed with fecal treatment,
we then wondered whether the combination of indole and L-Ser might be sufficient. Interestingly,
we found that treatment with a mixture of indole and L-Ser effectively neutralized their individual
effects, resulting in a response nearly identical to buffer-treated tissue, and the WT advantage
observed with fecal treatment was not recapitulated (Fig. 1I, Fig. S1I-J, Data S1).

These results provide insights into the relationship between chemotactic sensing of fecal
material and its role in invasion, while also revealing complex behaviors that raise further
questions. The key takeaway is that although pure indole reduces WT colonization advantage in a
chemotaxis- and Tsr-dependent manner, indole within feces does not elicit the same response, nor
does indole-rich fecal material provide protection against invasion in this model (Fig. 1, Fig. S1).
This may be explained by our observation that L-Ser can cancel out the effects of indole (Fig. 1G,
Fig. 1I, Data S1). These findings suggest that the presence of multiple chemical signals within
complex biological effector sources can make it challenging to predict chemotactic behavior based
on how the bacteria respond to singular effectors.

Curiously, when L-Ser and indole are present together, the magnitude of the WT advantage
over the *cheY* and *tsr* mutants resembles a null response (i. e. similar to buffer treatment), rather
than providing an additive fitness advantage like occurs with fecal treatment (Fig. 1, Data S1). One
possible explanation is that fecal material contains other metabolites that influence sensing and
growth [2,8,57–61]. Additionally, the WT advantage in the presence of fecal material could relate to
Tsr-mediated energy taxis [33,34], swimming regulation that encourages invasion [38], or experimental
treatment conditions that may impact bacterial growth. To further investigate these behaviors, the
following sections examine chemotactic responses to these treatments and their effects on growth.
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Non-typhoidal S. enterica are attracted to human feces despite high indole content
Having found that Tsr mediates efficient colonic invasion for *S.* Typhimurium in our explant
system when exposed to fecal material, we next sought to learn what chemotactic behaviors this
chemoreceptor orchestrates in response to feces; given that this represents the highest
concentration of indole *S.* Typhimurium might natively encounter, we expected to observe
chemorepulsion (Fig. 1D, Table S1) [12,13,18,27,32]. We employed the chemosensory injection rig assay
(CIRA) for live-imaging of bacterial chemotaxis responses to a source of effectors injected through
a glass microcapillary [1]. The flow and dynamic nature of the gut lumen make this a suitable
approach for modeling and studying enteric chemotaxis responses *in vitro* [1].
In this assay, chemoattraction is observed as an influx of cells toward the effector source
and chemorepulsion as decreasing cells (Figure S2). As described previously, effector injection
introduces a steep microgradient, and, using mathematical modeling of the diffusion of the fecal
sources of indole and L-Ser, we can approximate the local concentrations experienced by bacteria
at a given distance from the injection source, which for most of the field of view is in the picomolar
to low nanomolar range (Fig. 2A, Materials & Methods) [1]. Using experiments with fluorescent dye
we previously confirmed our calculated local effector concentrations to be in the range of 5-10%
within 300 μm of the injection source [1]. Further, we showed using a set of controls of buffers at
different pH, and chemotaxis mutants, that the low flow-rate of our apparatus (approximately 300
femtoliters per minute) does not itself meaningfully perturb the bacterial population relative to the
much larger shifts that occur due to chemotaxis responses [1].
Over five minutes, we found both WT and *tsr* exhibit strong chemoattraction to fecal

Fig. 2. *Salmonella* Typhimurium exhibits attraction toward liquid human fecal material. A. Diffusion modeling showing calculated local concentrations in CIRA experiments with liquid human fecal material based on distance from the central injection source. B. Max projections of representative *S.* Typhimurium IR715 responses to a central source of injected liquid human fecal material. C-E. Bacterial population density over time in response to fecal treatment. The initial uniform population density in these plots is indicated with the blue line (time 0), and the final mean distributions with the red line (time 280 s), with the mean distributions between these displayed as a blue-to-red spectrum at 10 s intervals. F-G. Temporal analyses of area under the curve (AUC) or relative number of bacteria within 150 µm of the source. Effect size (Cohen's *d*) comparing responses of WT and *tsr* attraction at 120 s post-treatment is indicated. Data are means and error bars are standard error of the mean (SEM, n=3-5). See also Movie 1, Table S1, and Figure S2.

material, whereas *cheY* remains randomly distributed (Fig. 2B, Movie 1). By examining the radial
distribution of the bacterial populations, we found WT more tightly centers around the treatment
source than *tsr* (Fig. 2C-E, Movie 1). In terms of the rate of bacterial accumulation, the
chemoattraction of *tsr* lags behind the WT for the first 120 s (Fig. 2F-G, Movie 1). We wondered
how these deficiencies in fecal attraction might translate to direct competition, where different
strains are experiencing the same treatment source simultaneously. To address this, we performed
CIRA with solubilized human feces and two strains present in the same pond, which we tracked
independently through fluorescent markers (Fig. 3) [1]. As expected, WT shows a strong
chemoattraction response versus *cheY* (Fig. 3A, Movie 2). Interestingly, we found that when
competed directly, WT vastly outperforms *tsr*, with the maximal bacterial distribution in proximity

to the treatment source higher by about 4-fold (Fig. 3B, Movie 2). These data confirm that despite

its high indole content, *S.* Typhimurium is attracted to human fecal material through chemotaxis,

and this response involves Tsr, although not as the sole mediator. We expect the attraction of the

tsr mutant is explained by the fact that *S.* Typhimurium possesses other chemoreceptors that detect

glucose, galactose, and L-Asp as chemoattractants, which are present in human feces [2,8,57–61].

Recent work highlights how genetic diversity among strains and differences in Tsr

expression, even within isogenic populations, modulate chemotaxis function [13,35]. To gain a

broader perspective on fecal taxis, we examined the responses among diverse *Salmonella* serovars

and strains responsible for human infections. Using dual-channel imaging, we compared *S.*

Typhimurium IR715 with a clinical isolate of *S.* Typhimurium, SARA1, and found both strains

exhibit attraction to feces, although SARA1 shows a slightly weaker response (Fig. 3C, Movie 3).

We then tested a clinical isolate of *S.* Newport, an emerging cause of salmonellosis in the United

States and Europe [62,63]. This strain is strongly attracted to fecal material, with a tighter

accumulation of cells at the treatment source than *S.* Typhimurium IR715 (Fig. 3D, Movie 3).

Lastly, we examined a clinical isolate of *S.* Enteritidis, a zoonotic pathogen commonly transmitted

from poultry, which displays weak attraction to fecal material (Fig. 3E, Movie 3) [63]. Overall, we

found that chemoattraction to fecal material is conserved among diverse non-typhoidal *Salmonella*

serovars responsible for human infections, although the degree of attraction varies. Notably,

despite the high indole content in feces, none of the strains tested exhibit chemorepulsion.

Mediation of opposing chemotactic responses by Tsr

We wondered if our inability to observe repulsion from fecal material might be due to *S.*

Typhimurium not sensing indole as a chemorepellent, since this chemotactic response has only

been previously described for *E. coli* (Table S1). We again employed CIRA to address this

question, comparing chemotaxis responses to either 5 mM L-Ser or 5 mM indole, and found that

S. Typhimurium responds rapidly to these two effectors as chemoattractants and chemorepellents,

respectively (Fig. S2H-I). Treatment with 5 mM indole, a concentration at the upper end of what

occurs in the human gut [26], induces rapid chemorepulsion with the bacteria vacating the region

proximal to the source (Fig. S2B). Interestingly, the chemorepulsion response occurs faster than

Fig. 3. Fecal indole is insufficient for chemorepulsion but indole in isolation is a strong chemorepellent. A-E. Dual-channel imaging of chemotactic responses to solubilized human feces by WT *S.* Typhimurium IR715 (pink) and isogenic mutants or clinical isolate strains (green), as indicated. Shown are max projections at time 295-300 s post-treatment. Data are means and error bars are standard error of the mean (SEM, n=3-5). See also Movies 2-3. F. Representative max projections of responses at 295-300 s of indole treatment. G-H. Quantification of chemorepulsion as a function of indole concentration (n=3-5). I-K. Comparison of WT and *tsr* mutant responses to L-Ser or indole. See also Fig. S2. L-M. Isothermal titration calorimetry (ITC) experiments with 50 μM *S.* Typhimurium Tsr ligand-binding domain (LBD) and indole, or with L-Ser in the presence of 500 μM indole. Data are means and error bars are standard error of the mean (SEM, n=3-5). AUC indicates area under the curve. Scale bars are 100 μm. See also Movies 2-3.

chemoattraction, with a zone of avoidance clearly visible within the first 10 s of indole exposure (Fig. S2I, Movie 4).

We next wondered if perhaps our fecal treatments contained insufficient indole to elicit chemorepulsion from *S.* Typhimurium. To identify the effective source concentrations that drive indole chemorepulsion and understand the temporal dynamics of this response, we performed a

titration of indole across 0.05-10 mM (Fig. 3F). At all concentrations tested, indole induces
chemorepulsion, and the bacteria avoid the treatment source for the duration of the 5-minute
experiment (Fig. 3F-G). At source concentrations exceeding 3 mM, essentially all motile cells
vacate the field of view within 60 s (Fig. 3F-G). Integrating these chemorepulsion responses and
fitting them to a Monad curve suggests an indole source concentration of approximately 67 µM is
sufficient for half-maximal ($K_{1/2}$) chemorepulsion (Fig. 3H). These data show that even though we
observe strong attraction to fecal material, pure indole at the concentration present in fecal
material, and far lower, is indeed a strong chemorepellent for *S.* Typhimurium.

Based on its function in *E. coli*, we hypothesized that both indole chemorepulsion and L-
Ser chemoattraction for *S.* Typhimurium could be partly or fully mediated through Tsr [8,12,31]. We
compared the chemotactic responses of the WT and *tsr* strains when exposed to sources of these
effectors and found Tsr to be required for both chemorepulsion from indole and chemoattraction
to L-Ser (Fig. 3I-K). The canonical mode of chemoreceptor effector recognition involves binding
of the effector to the ligand-binding domain (LBD) [8,64], but the mechanism by which indole is
sensed through Tsr in *Salmonella* has not been elucidated. We recently reported the first crystal
structure of *S.* Typhimurium Tsr LBD, which clearly defines how the binding site recognizes the
L-Ser ligand (PDB code: 8fyv), and we thought it unlikely indole can be accommodated at the
same site [1]. To our knowledge, no prior study has tested whether the Tsr LBD binds indole directly,
so we expressed and purified the LBD, corresponding to the soluble periplasmic portion, and
performed isothermal titration calorimetry (ITC). These data show that no binding occurs between
the Tsr LBD and indole (Fig. 3L).

We next wondered if indole acts as an allosteric regulator of the LBD, possibly through
interacting with the L-Ser-bound form or interfering with L-Ser recognition. To address these
possibilities, we performed ITC of 50 µM Tsr LBD with L-Ser in the presence of 500 µM indole
and observed a robust exothermic binding curve and K_D of 5 µM, identical to the binding of L-Ser
alone (Fig. 3M) [1]. These data indicate that indole does not alter the Tsr LBD affinity for L-Ser. We
conclude that Tsr senses indole through an atypical mechanism, which might either involve
regulation through a solute-binding protein [12,65], responsiveness to perturbation in the proton motor
force [22], or binding to a different region other than the periplasmic LBD. Our findings reveal that
while indole acts as a chemorepellent for *S.* Typhimurium in isolation, sensed through Tsr, its
presence within fecal material mixed with other effectors is insufficient to elicit chemorepulsion.

Compromising between conflicting effector signals through chemohalation

Earlier work with *E. coli* revealed that exposure to mixtures of L-Ser and indole can elicit intermediate chemotactic responses between chemoattraction and chemorepulsion after prolonged exposure (1-6 h, Table S1) [13]. Having confirmed that Tsr in *S.* Typhimurium mediates opposing responses to the chemoattractant L-Ser and the chemorepellent indole in isolation, we next sought to learn how the bacterial population behaves on rapid timescales when confronted with physiological combinations of these effectors. To address this, we performed a series of CIRA experiments with 500 µM L-Ser and increasing concentrations of indole at L-Ser:indole molar ratios of 10:1, 1:1, or 1:10 (Fig. 4A-D, Movie 4).

These experiments reveal a fascinating transition in the distribution of the pathogen population as a function of increasing chemorepellent, which occurs within minutes of exposure

Fig. 4. *S.* Typhimurium mediates distinct chemotactic responses based on the ratio of L-Ser to indole. A-D. Representative max projections of responses to treatments of L-Ser and indole at 295-300 s, as indicated. Scale bars are 100 µm. E. Relative bacterial distribution in response to treatments of 500 µM L-Ser and varying amounts of indole, from panels A-D, with the mean value normalized to 100%. Data are means and error bars are standard error of the mean (SEM, n=3-5). F. Diffusion modeling of local effector concentrations based on sources of 5 mM indole (dark brown), 500 µM L-Ser (blue), 500 µM indole (light brown), and 50 µM indole (yellow) are shown as dashed lines. The approximate local concentration of indole that elicits a transition in chemotactic behavior is highlighted in light blue. G-H. Bacterial growth as a function of L-Ser or indole, at the time point where the untreated culture reaches A_{600} of 0.5. I-J. Bacterial growth +/- pretreatment with 500 µM indole or L-Ser, and increasing concentrations of indole or L-Ser, as indicated at the time point where the untreated culture reaches A_{600} of 0.5. Data are means and error bars are standard error of the mean (SEM, n=8-24).

(Fig. 4A-D, Movie 4). With only chemoattractant present, the bacterial population organizes

tightly around the effector source (Fig. 4A, Movie 4). When indole is introduced at a concentration

10-fold lower than L-Ser, the bacterial distribution still exhibits chemoattraction but becomes more

diffuse (Fig. 4B, Movie 4). At a 1:1 ratio of chemoattractant and chemorepellent, a novel

population structure emerges, in which the swimming bacteria are attracted toward the source but

form a halo around the treatment with an interior region of avoidance (Fig. 4C, Fig. 4E, Movie 4).

When the concentration of indole is 10-fold higher than L-Ser, the bacteria exhibit a wider zone of

avoidance (Fig. 4D-E, Movie 4). Interestingly, whereas 5 mM indole on its own induces strong

chemorepulsion (Fig. S2I, Movie 4), the addition of 10-fold lower L-Ser effectively converts the

behavior to a null response (Fig. 4D-E, Movie 4). This demonstrates that even at the highest

concentrations of indole *S.* Typhimurium might encounter in the gut, the presence of

chemoattractant can override indole chemorepulsion.

The intermediate responses to opposing effector mixtures bear similarities to CIRA

experiments with fecal material, some of which also exhibited a halo-like structure around the

treatment source (Fig. 2, Fig. 3A-E, Movies 2-3). As mentioned earlier, previous studies have also

observed responses that are neither attraction nor repulsion, and they have been referred to by a

variety of names. We do not claim here that the responses we observe to mixtures of L-Ser and

indole are wholly distinct or unrelated to earlier work [13,18,19], but to our knowledge, no other study

has so clearly captured the spectrum of behaviors that occur in the transition between attraction

and repulsion (Movie 4). There exists no consensus term for taxis of this nature, and so we suggest

"chemohalation," in reference to the halo formed by the cell population, and which is congruent

with the commonly-used terms chemoattraction and chemorepulsion. We expect chemohalation is

a compromise in positional location at the population level between the chemoattraction driven by

L-Ser and the chemorepulsion driven by indole. Across these experiments, the interior zone of

avoidance roughly corresponds to where the local concentration of indole exceeds 10 nM (Fig. 4E-

F). In a biological setting, we presume that the distribution bias orchestrated by chemohalation

regulates the probability that cells will colonize, adhere, and transition to sessility at a given site;

the greater the local indole content, the wider the zone of avoidance and the less likely tissue

invasion occurs.

We questioned why non-typhoidal *Salmonella* are attracted to a biological solution with

high amounts of indole, a chemical reported to inhibit bacterial growth [21,66,67]. We examined how

bacterial growth is affected by 0-25 mM indole or L-Ser in a background of minimal media (MM,

Materials & Methods). As expected, increasing amounts of the nutrient L-Ser provide a growth

advantage for all *Salmonella* strains analyzed, with maximal benefit achieved by approximately

500 μM (Fig. 4G). Equivalent treatments with indole show tolerance up to approximately 1 mM,

with growth inhibition occurring in the 1-5 mM range and lethality occurring at indole

concentrations greater than 5 mM (Fig. 4H). However, adding L-Ser in a background of 500 μM

indole provides only a small growth enhancement (Fig. 4I), and addition of 500 μM L-Ser increases

tolerance for indole up to about 1 mM, above which indole toxicity is unavoidable (Fig. 4J). So,

we conclude that mixtures of these effectors also impact growth differently than the effectors in

isolation, and the relative attraction to combinations of these effectors relates to their propensity

to enhance or inhibit growth. Overall, the bacteria still obtain growth benefits from L-Ser so long

as the concentration of indole is under 1 mM, and we expect this growth advantage is even greater

in the presence of the many other nutrients accessible to the bacteria in fecal material.

Discussion

Bacteria in the human gastrointestinal tract encounter complex chemical landscapes that contain

both chemoattractants and chemorepellents. However, chemotaxis responses are often studied in

isolation, outside of their biological and ecological contexts, which can lead to an over- or

underestimation of the roles specific interactions play in natural settings. In the present work, we

contribute to an emerging understanding that bacteria exhibit rapid and well-orchestrated

responses to conflicting stimuli distinct from chemoattraction or chemorepulsion, and relate these

chemotactic compromises to enteric infection and pathogen growth (Fig. 5) [13,19,68]. In this study,

we provide evidence that despite the microbiota metabolite indole being a strong repellent in

isolation, fecal indole is insufficient to elicit pathogen repulsion or protect against invasion.

New insights into indole taxis from a non-E. coli system

Indole is an important and abundant regulator of enteric microbial communities known to modulate

motility and virulence and has been proposed to deter pathogen invasion through chemorepulsion

[12,20–22,25,26,28,29]. Previously, no study had addressed whether bacteria other than *E. coli* sense indole

as a chemorepellent. In the model system we investigated, we confirm that *S.* Typhimurium utilizes

the chemoreceptor Tsr to respond to indole as a chemorepellent (Fig. 3). Further, we add to the

understanding of indole taxis by having visualized and measured the rapid temporal dimension of indole repulsion, which is relevant in the highly turbulent intestinal environment where bacteria experience shifting and dynamic chemical gradients [1,2]. We found naïve *S.* Typhimurium are repelled from indole sources within 10 s of exposure. The rapidity of this response, which exceeds that of attraction to L-Ser, has not been previously reported (Fig. 3G). We also tested whether indole-sensing occurs through the canonical chemoreceptor mechanism of direct binding through the Tsr LBD, which does not seem to occur, nor does antagonism or inhibition of binding of L-Ser to the LBD (Fig. 3L-M). These data support that a non-canonical sensing mechanism is employed by Tsr to respond to indole, as suggested by others [12,22,65].

Having characterized and confirmed the role of Tsr in indole-sensing for *S.* Typhimurium, and shown it to be generally similar to its function in *E. coli* [12,13,18], we can speculate that the diverse bacterial species that possess Tsr orthologues, particularly common among *Enterobacteriaceae* [1], also sense, and are repelled, by indole, further supporting indole as a key regulator of polymicrobial communities of the gut [21,25]. However, *in vivo* Tsr-mediated indole-sensing is integrated with L-Ser-sensing and responses to other stimuli. As discussed further below, this integration may serve to bias colonization toward specific niches based on the local attractant-to-repellent ratio, rather than triggering the outright repulsion we observe *in vitro* with pure indole sources (Fig, 5). While Tsr appears to function similarly in coordinating indole taxis in both *S.* Typhimurium and *E. coli*, its impact on colonization is likely different. Unlike *Salmonella*, *E. coli* produces indole [39,40], which may allow it to use indole not only to regulate colonization based on microbiota activity but also as a self-sensing signal. This could enable *E. coli* to regulate its dispersal or expansion in response to self-generated indole.

Indole taxis amidst opposing stimuli and implications for pathogen invasion

We investigated the chemotaxis behaviors of *S.* Typhimurium to human fecal material as a test case for how pathogens make decisions when faced with biological sources of effectors that contain a mixture of conflicting stimuli (Fig. 1, Fig. 2). We predicted that feces, rich in indole, would elicit chemorepulsion, inhibit pathogen growth, and protect against infection [12,20–22,25,28,29]. Instead, we find that chemotactic sensing of human fecal material promotes colonic invasion in an explant model, and liquid feces predominantly elicits chemoattraction or chemohalation (Fig. 1, Fig. S1, Fig. 2, Movies 1-S). We also find that while both invasion and chemotaxis are regulated

by the presence of the fecal effectors indole or L-Ser alone, these effectors in combination cancel

out, leading to a null response (Fig. 1, Fig. 4). These findings help clarify why indole-rich fecal

material does not trigger repulsion or prevent invasion. While indole is abundant in feces, it is only

one component within a complex biological mixture, and other effectors ultimately mediate

chemoattraction or chemohalation to fecal material (Fig. 5).

To better understand how chemotaxis responses change when sensing mixtures of opposing

effectors, we examined bacterial behavior *in vitro* in the presence of physiological mixtures of the

fecal metabolites indole and L-Ser and captured a series of real-time videos (Fig. 4A-D, Movie 4).

These videos reveal how, upon sensing the conflicting stimuli, the pathogen population structure

rapidly evolves based on the ratio of attractant to repellent, ranging from chemoattraction, diffuse

chemoattraction, chemohalation, diffuse chemohalation, and chemorepulsion (Fig. 4A-D, Fig. 5,

Fig. S2, Movie 4). We found particularly interesting the response we refer to as chemohalation,

which occurs when the bacteria encounter near equimolar attractant and repellent. Under these

conditions, the cells accumulate at a distance from the treatment source and form a halo with an

interior zone of avoidance (Fig. 3, Movie 4). The zone of avoidance apparently increases as a

function of increasing indole, thereby biasing cells against colonizing and invading a specific niche

(Fig. 5A). Whereas we observe chemohalation *in vitro* with only two fecal metabolites, we expect

this mechanism is at play when the bacteria are selecting among niches in the intestinal lumen,

where the indole repulsion signal is integrated alongside information about nutrient attractant

signals to ultimately coordinate contact with, and invasion of, intestinal tissue (Fig. 5A).

Potential roles for chemohalation in gastrointestinal infections

The dynamic micron-scale chemohalation population structures, that in effect are a compromise

between attraction and repulsion, would be difficult or impossible to detect without directly

viewing them through live imaging, which may explain why they were unappreciated earlier in

binary models of chemotaxis [15]. To be clear, we suggest chemohalation as a useful term to

generally describe intermediate chemotaxis responses to conflicting stimuli that are neither

chemoattraction nor chemorepulsion, but others have also contributed to studying how chemotaxis

functions in confounding chemical landscapes [13,18,19]. The chemohalation responses we report here

are most similar to what was referred to as a "trade-off" response in a prior study with *E. coli* and

attractant-repellent mixtures; interestingly those authors also observed another response termed

"bet-hedging" where a portion of the population within an isogenic culture remained attracted

despite the presence of the chemorepellent, but we did not observe this behavior in our experiments

[13]. For *S.* Typhimurium, the source concentration required for half-maximal responses are similar

for the opposing effectors, 105 and 67 μM for L-Ser [1] and indole, respectively, but the presence of

other attractants in feces overall biases behavior toward attraction [57–59,61].

In the context of non-typhoidal *Salmonella* infections, it is clear there exists complex

relationships between chemotactic sensing of effectors, bacterial growth, and invasion. As it

pertains specifically to sensing the opposing effectors L-Ser and indole, we propose that Tsr

functions to measure the ratio of exogenous attractant to repellent, and, through chemohalation,

orchestrates an appropriate spatial bias in the population. Ultimately, this serves to improve

pathogen fitness through colonizing niches rich in nutrients, signaled by local L-Ser

concentrations, while avoiding niches with high microbial competition, indicated by local indole

concentrations (Fig. 5). Chemorepulsion from indole can be overridden by the presence of

chemoattractants, and *S.* Typhimurium growth is quite tolerant of indole within physiological

ranges, suggesting the bacteria generally prioritize nutrient acquisition over the inhibitory effects

of indole (Fig. 4). This agrees with the premise that nutrient-seeking, rather than avoidance of

toxins, may generally be the major function of chemotaxis [6,18]. We expect that the distinction

between chemoattraction and chemohalation, in terms of regulating colonization and infection

outcomes, also depends on the duration of stimuli exposure and adaptation [12]. Based on data from

colonic explant experiments, chemotaxis studies, and growth analyses, we propose a new model

describing how the opposing signals from L-Ser and indole are sensed and integrated by Tsr to

mediate pathogen invasion (Fig. 5). In addition to sensing of these two effectors, our data support

that Tsr and chemotaxis are involved in L-Ser and indole-independent functions in the presence of

fecal material that mediate colonization (Fig. 1). This could potentially relate to other characterized

functions of Tsr in redox and energy taxis and/or biasing swimming toward a running phenotype,

which is associated with increased invasion [33,34,38].

Recently, we reported on *Enterobacteriaceae* chemotactic sensing of blood serum, another

complex biological effector source at the host-pathogen interface, and those responses appear to

involve chemohalation [1]. Evidence of chemohalation is also seen in the case of the gastric pathogen

Helicobacter pylori responding to mixtures of urea, a chemoattractant, and acid, a chemorepellent

[19,69]. Continuing to investigate chemohalation behaviors and understanding how they coordinate

bacterial colonization may provide important insights into how chemotaxis confers fitness

advantages in natural environments.

Limitations of this study

This study provides insights into the roles of chemotaxis in *Salmonella* responses to fecal material

and indole; however, several limitations should be considered. First, our experiments were

conducted *in vitro* and utilized swine tissue explants, which do not fully capture the complexities

of *in vivo* infection dynamics in the human gut. Additionally, while explant assays provided insight

into how chemotaxis relates to tissue colonization, these experiments exhibited variability. To

mitigate this, we used multiple sections of tissue from a single animal to exert greater experimental

control of the system, but this approach limits our ability to assess how host tissue diversity might

influence bacterial responses. It would be interesting to assess invasion using tissue of the distal

ileum, a major site of *S.* Typhimurium invasion, which is known to have distinct chemical cues

and foreseeably differences in indole and L-Ser [41]. Another experimental limitation is the

difference in timescales between our assays. Chemotaxis experiments were conducted over short

time frames, whereas tissue explant experiments required longer incubation periods for significant

differences in colonization and invasion to be observed. Lastly, while we confirmed that non-

typhoidal *Salmonella* are attracted to human fecal material, we only determined the dependency

on Tsr in our model strain (IR715). Although we expect that other WT clinical isolates also rely

on chemotaxis and Tsr for attraction, this remains uncertain without targeted genetic analyses in

each strain background.

Fig. 5. A. Working model for chemotactic compromise orchestrated by Tsr during enteric invasion. In the intestinal lumen, fecal material contains the nutrient L-Ser, derived from digested food, and bacteriostatic indole, secreted by the gut microbiota. Tsr detects these metabolites as chemoattractant (L-Ser, dark blue arrows) and chemorepellent (indole, brown arrows) signals, respectively. While L-Ser is directly sensed by Tsr via the ligand-binding domain (LBD, yellow), indole is detected through a different mechanism. Tsr integrates these conflicting signals to bias colonization through a behavior termed chemohalation, which promotes taxis toward regions with higher L-Ser-to-indole ratios (large blue and brown arrows, width of arrows denotes the degree of colonization bias). Increased indole levels result in a larger central zone of avoidance and greater bias against colonization. B. During early infection, the attractant-to-repellent ratio in the intestinal lumen is high. *S.* Typhimurium (gray cells) uses chemotaxis to seek L-Ser (dark blue circles) and other nutrients (light blue circles), promoting proliferation. In the presence of abundant nutrients, the bacteria tolerate exposure to indole (brown circles). C. As infection progresses, nutrient consumption by the proliferating bacteria reduces the attractant-to-repellent ratio in the lumen. D. Once nutrients are sufficiently depleted, the bacteria can no longer tolerate indole exposure, and chemorepulsion from indole increases. This repulsion drives bacteria out of the lumen and into contact with the intestinal mucosa, promoting colonic invasion. In the artificial scenario where only L-Ser is present, chemotaxis offers little advantage for invasion; the bacteria proliferate, but there is no incentive to leave the lumen. Conversely, with only indole present, chemotaxis similarly provides no advantage; although indole repels the bacteria from the lumen, it inhibits bacterial proliferation. In the presence of L-Ser, and likely other attractants, indole repulsion is nullified.

Materials & Methods

All methods were carried out in accordance with relevant guidelines, regulations, and state and federal law. Experimental protocols were approved by the Institutional Biosafety Committee (IBC) of Washington State University (#1372).

Bacterial strains and growth conditions

Bacterial strains and plasmids used in this study are listed in Table 1. As previously described [1], bacteria intended for chemotaxis assays were grown overnight in tryptone broth (TB) with antibiotic selection, as appropriate. Motile bacteria were prepared with a 1:1000 back-dilution and grown shaking for approximately 4 hours at 37° C to reach A_{600} of 0.5. Cells were centrifuged, washed, and resuspended in a chemotaxis buffer (CB) containing 10 mM potassium phosphate (pH 7), 10 mM sodium lactate, and 100 μM EDTA to A_{600} of 0.2 and rocked gently at room temperature until fully motile. For *in vitro* growth analyses, cultures were grown overnight in Lysogeny Broth (LB) at 37° C. Subsequently, 5 μl of A_{600} 2.0 cells were used to inoculate 200 μl of minimal media (MM), containing 47 mM Na_2HPO_4, 22 mM KH_2PO_4, 8 mM NaCl, 2 mM $MgSO_4$, 0.4% glucose (w/v) 11.35 mM $(NH_4)_2SO_4$, 100 μM $CaCl_2$ and L-Ser and/or indole at the described concentrations, and cultured in a 96-well microtiter plate. Cultures were grown at 37° C and monitored by A_{600} readings at 5-minute intervals.

Table 1: Bacterial Strains	
Strain	*Reference/Source*
S. enterica Typhimurium IR715 nalidixic acid derivative of ATCC 14028	Rivera-Chávez, F. et al.[33]
S. enterica Typhimurium IR715 Δ*cheY::Tn10* (Tet[R])	Rivera-Chávez, F. et al.[33]
S. enterica Typhimurium IR715 Δ*tsr::pFR3* (Cm[R])	Rivera-Chávez, F. et al.[33]
S. enterica SARA1	Beltran, P. et al.[71]
S. enterica Newport M11018046001A	Shariat, N. et al.[62]
S. enterica Enteriditis 05E01375	Shariat, N. et al.[62]
E. coli BL21-DE3 Cat# 70954-3	Millipore-Sigma

Chemosensory injection rig assay (CIRA)

CIRA was performed as described previously [1]. Briefly, an Eppendorf Femtotip 2 microcapillary

containing the treatment of interest was lowered into a pond of 50 µl of motile cells using a Sutter

micromanipulator. An injection flow of effector into the pond at approximately 300 fl per minute

was achieved using a Femtojet 4i set to P_c 35. Solubilized fecal treatments were prepared by

dissolving 1 g of commercially obtained human feces (Lee Biosolutions) in 10 ml of CB. The

solution was clarified by centrifugation at 10,000 g for 20 minutes, followed by sterile filtration

through a 0.2 µm filter. Treatment solutions of indole and L-Ser were also diluted into CB and

sterile-filtered before application. Videos were recorded using an inverted Nikon Ti2 microscope

with heated sample chamber at 37 ˚C.

CIRA microgradient modeling

Modeling the microgradient generated through CIRA was performed as described earlier [1], based

on the continual injection and diffusion of an effector from a fixed-point source. Briefly, diffusion

is modeled as a 3D process where the diffusing substance is gradually and continuously introduced

at a fixed point within a large surrounding fluid volume. The substance is prepared at a

concentration of M_s (typically between 0.5 µM and 5 mM) and injected at a volume rate of $Q =$

305.5 fl/min. The species then diffuses into the ambient fluid with a diffusion constant D:

500
$$C(r,t) = \frac{q}{4\pi Dr} erfc \frac{r}{2\sqrt{Dt}}$$

Here, r is the distance from the point source, t is the time from initial injections, q is the injection

rate of the species (equal to M_sQ), and C is the species concentration. In earlier work [1], we reported

using fluorescent dye that the concentrations predicted by this model appear to be accurate within

5% in the range of 70-270 µm from the source, whereas at distances less than 70 µm the measured

concentrations are about 10% lower than predicted. At the point where the effector treatment is

injected into the larger volume the local concentration drops precipitously, hence why the

concentration reported at distance 0 is not that of the concentration within the microcapillary.

Isothermal titration calorimetry ligand binding studies (ITC)

Purification of *S.* Typhimurium Tsr LBD was performed as described previously [1]. ITC

experiments were performed using a Microcal ITC200 instrument (GE Healthcare). Either 500 µM

indole or L-Ser was titrated in 2.5 µL injections into a 200 µL sample cell containing 50 µM Tsr

LBD. For the indole/L-Ser competition experiment, 500 μM indole was added to both the titrant

and sample cell, thus providing a constant excess background concentration of indole. For all

experimental conditions, blank titrations were also collected in which indole or L-Ser was titrated

into a cell containing buffer alone. All experiments were performed using thoroughly degassed

samples at 25 °C in 50 mM Tris, 150 mM NaCl, 1 mM EDTA, pH 7.5. The reference power was

set to 5 μcal/sec. The resulting power curves were integrated using the Origin analysis software

included with the instrument. The heat of dilution was subtracted from each point using the blank.

A single-site binding model was then fit to the data, floating parameters describing the binding

enthalpy (ΔH), equilibrium constant (K_D), and apparent binding stoichiometry (n). The instrument

software was used for this purpose.

Quantification of indole and serine in human fecal samples

Solubilized human feces was prepared as described above for CIRA and analyzed by mass

spectrometry to determine the molar serine content as a service through the University of

Washington Mass Spectrometry Center. This measurement reflects total serine, of which close to

100% is expected to be L-Ser [1]. As described in earlier work, the indole content of solubilized

human fecal samples was determined using a hydroxylamine-based calorimetric assay with

purified indole as a reference and standard [72].

Explant infection assays

Swine intestinal tissue was acquired from the descending colon of an 8-week-old animal, pursuant

to animal protocol ASAF #7128, approved through the Washington State University IACUC.

Before infection, the luminal side of an approximately 20 by 20 mm piece of swine intestinal

explant tissue was gently washed with PBS to remove fecal matter. Next, the tissue section was

bathed in 2 ml of chemoeffector solution (solubilized human fecal matter (Lee Biosolutions), a

mixture of 338 μM L-Ser and 862 μM indole, 338 μM L-Ser alone, 862 μM indole alone, or

chemotaxis buffer) in a 6-well tissue culture plate (Celltreat) and incubated at 4° C for 1 h. Then,

tissue was transferred to a 35 mm Mattek dish where the luminal side of the tissue was exposed to

a bacterial solution containing a 1:1 mixture (10^9 CFU each) of WT *S.* Typhimurium IR715 and

either the isogenic *tsr* or *cheY* mutant, suspended in CB at a volume of 300 μl. The tissue was then

incubated in the dish with the competing bacteria at 37 °C and 5% CO_2 for 1, 3, or 6 h. After, half

of the tissue was transferred into screwcap tubes containing 500 µl LB media and 5-10 2.3 mm

zirconia beads (BioSpec Products) on ice and homogenized using a Bead Mill 24 (Fisher

Scientific) at 6.5 m/s for 60 s, repeated four times. To enumerate the intracellular bacteria, the

other half of the tissue was washed in PBS and incubated in PBS containing 100 µg/ml gentamicin

for 1 h at 37 °C and 5% CO_2, then washed twice in PBS, as done previously [54,73,74]. The

homogenization process was then repeated for the gentamicin-treated tissue. CFUs were

enumerated by plating 10-fold dilutions on LB agar plates containing the appropriate antibiotic

[54,75]. Competitive index values were calculated by dividing the number of mutant CFUs by the

number of WT CFUs for each treatment and time point [76,77].

Quantification of CIRA data

Videos of chemotactic responses were quantified as described previously [1]. The number of cells

in each frame were calculated by determining a fluorescence intensity ratio per cell for frames pre-

treatment and extrapolated using the 'plot profile' function of ImageJ. The distribution of the

bacteria was calculated using the Radial Profile ImageJ plugin. Local background subtraction was

performed based on experiments with the non-chemotactic *cheY* strain to control for

autofluorescence in solubilized fecal samples.

Statistical Analyses

Competitive indices (CIs) for explant experiments were calculated for each treatment group at

each time point. Log-transformed CI values were obtained by taking the logarithm (log_{10}) of the

original CI measurements. These log-transformed values were then subjected to statistical analysis.

First, a one-sample t-test was performed to determine whether the mean of the log-transformed

CIs significantly differed from zero. In cases where the assumption of normality was violated, the

non-parametric Wilcoxon rank sum test was applied as an alternative. Effect size was assessed

using Cohen's *d* and calculated using the same log-transformed CIs.

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was performed in accordance with, and approval of, the Institutional Biosafety Committee and
Institutional Animal Care and Use Committee at Washington State University.
579

580 **Author Contributions**
581 K.F. performed the microgradient modeling and explant experiments. A.B. conducted the CIRA
582 experiments and purification of Tsr-LBD. Z.G. performed bacterial growth experiments. M.S. and
583 M.J.H. performed the ITC experiments. All authors contributed to data analyses and writing of the
584 manuscript.
585

586 **Declaration of Interests**
587 A.B. owns Amethyst Antimicrobials, LLC.
588

589 **Movie Figure legends**
590 **Movie 1.** Chemotactic response of *S.* Typhimurium IR715 to solubilized human feces, related to
591 Figure 2. Representative CIRA experiments showing *S.* Typhimurium IR715 WT and mutant
592 strains responding to a source over 300 s (shown at 10x speed) Viewable at:
593 https://www.youtube.com/watch?v=BqUcRN3YwjU
594

595 **Movie 2.** Chemotactic response of *S.* Typhimurium IR715 WT and chemotactic mutant strains to
596 solubilized human feces, related to Figure 3. Representative CIRA experiments showing
597 competition between *S.* Typhimurium IR715 (mPlum) and *cheY*, or *tsr*, as indicated (GFP), over
598 300 s. Viewable at: https://www.youtube.com/watch?v=D5JL46b4lsI
599

600 **Movie 3.** Chemotactic response of *S. enterica* clinical isolates to solubilized human feces, related
601 to Figure 3. Representative CIRA experiments showing competition between *S.* Typhimurium
602 IR715 (mPlum) and clinical isolates, as indicated (GFP), responding to a source of solubilized
603 human feces over 300 s. Viewable at: https://www.youtube.com/watch?v=dLsFDV0XgpY
604

605   **Movie 4.** Chemotactic response of *S.* Typhimurium IR715 to L-Ser and indole treatments, related
606   to Figure 4 and Figure S2. Representative CIRA experiments with treatment sources as indicated,
607   over 300 s. Viewable at: https://www.youtube.com/watch?v=bNQMqF2QMek
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References

1. Glenn, S. J. *et al.* Bacterial vampirism mediated through taxis to serum. *eLife* **12**, RP93178 (2024).

2. Zhou, B., Szymanski, C. M. & Baylink, A. Bacterial chemotaxis in human diseases. *Trends in Microbiology* **31**, 453–467 (2023).

3. Keegstra, J. M., Carrara, F. & Stocker, R. The ecological roles of bacterial chemotaxis. *Nature Reviews Microbiology* (2022) doi:10.1038/s41579-022-00709-w.

4. Bi, S. & Sourjik, V. Stimulus sensing and signal processing in bacterial chemotaxis. *Current Opinion in Microbiology* **45**, 22–29 (2018).

5. Matilla, M. A. & Krell, T. The effect of bacterial chemotaxis on host infection and pathogenicity. *FEMS Microbiology Reviews* **42**, (2018).

6. Matilla, M. A., Gavira, J. A. & Krell, T. Accessing nutrients as the primary benefit arising from chemotaxis. *Current Opinion in Microbiology* **75**, 102358 (2023).

7. Matilla, M. A. & Krell, T. Chemoreceptor-based signal sensing. *Current Opinion in Biotechnology* **45**, 8–14 (2017).

8. Ortega, Á., Zhulin, I. B. & Krell, T. Sensory Repertoire of Bacterial Chemoreceptors. *Microbiol Mol Biol Rev* **81**, e00033-17 (2017).

9. Rogers, A. W. L., Tsolis, R. M. & Bäumler, A. J. Salmonella versus the Microbiome. *Microbiology and Molecular Biology Reviews* **85**, e00027-19 (2020).

10. Vos, W. M. de, Tilg, H., Hul, M. V. & Cani, P. D. Gut microbiome and health: mechanistic insights. *Gut* **71**, 1020–1032 (2022).

11. Hill, J. H. *et al.* BefA, a microbiota-secreted membrane disrupter, disseminates to the pancreas and increases β cell mass. *Cell Metabolism* **34**, 1779-1791.e9 (2022).

12. Yang, J. *et al.* Biphasic chemotaxis of *Escherichia coli* to the microbiota metabolite indole.

Proc. Natl. Acad. Sci. U.S.A. **117**, 6114–6120 (2020).

13. Livne, N. & Vaknin, A. Collective responses of bacteria to a local source of conflicting

effectors. *Sci Rep* **12**, 4928 (2022).

14. Keller, E. F. & Segel, L. A. Traveling bands of chemotactic bacteria: A theoretical analysis.

Journal of Theoretical Biology **30**, 235–248 (1971).

15. Adler, J. & Tso, W.-W. 'Decision'-Making in Bacteria: Chemotactic Response of

Escherichia coli to Conflicting Stimuli. *Science* **184**, 1292–1294 (1974).

16. Zhang, X. *et al.* Escape band in Escherichia coli chemotaxis in opposing attractant and

nutrient gradients. *Proc Natl Acad Sci U S A* **116**, 2253–2258 (2019).

17. Kalinin, Y., Neumann, S., Sourjik, V. & Wu, M. Responses of Escherichia coli Bacteria to

Two Opposing Chemoattractant Gradients Depend on the Chemoreceptor Ratio. *Journal of*

Bacteriology **192**, 1796 (2010).

18. Englert, D. L., Manson, M. D. & Jayaraman, A. Flow-Based Microfluidic Device for

Quantifying Bacterial Chemotaxis in Stable, Competing Gradients. *Appl Environ Microbiol*

75, 4557–4564 (2009).

19. Huang, J. Y., Sweeney, E. G., Guillemin, K. & Amieva, M. R. Multiple Acid Sensors

Control Helicobacter pylori Colonization of the Stomach. *PLOS Pathogens* **13**, e1006118

(2017).

20. Li, X., Zhang, B., Hu, Y. & Zhao, Y. New Insights Into Gut-Bacteria-Derived Indole and Its

Derivatives in Intestinal and Liver Diseases. *Front. Pharmacol.* **12**, 769501 (2021).

21. Lee, J.-H. & Lee, J. Indole as an intercellular signal in microbial communities. *FEMS*

Microbiol Rev **34**, 426–444 (2010).

22. Gupta, R. *et al.* Indole modulates cooperative protein–protein interactions in the flagellar

motor. *PNAS Nexus* **1**, pgac035 (2022).

23. Darkoh, C., Chappell, C., Gonzales, C. & Okhuysen, P. A Rapid and Specific Method for the

Detection of Indole in Complex Biological Samples. *Appl Environ Microbiol* **81**, 8093–8097

(2015).

24. Chappell, C. L. *et al.* Fecal Indole as a Biomarker of Susceptibility to Cryptosporidium

Infection. *Infect Immun* **84**, 2299–2306 (2016).

25. Ye, X. *et al.* Dual Role of Indoles Derived From Intestinal Microbiota on Human Health.

Front. Immunol. **13**, 903526 (2022).

26. Kumar, A. & Sperandio, V. Indole Signaling at the Host-Microbiota-Pathogen Interface.

mBio **10**, e01031-19 (2019).

27. Bansal, T. *et al.* Differential Effects of Epinephrine, Norepinephrine, and Indole on

Escherichia coli O157:H7 Chemotaxis, Colonization, and Gene Expression. *Infect Immun*

75, 4597–4607 (2007).

28. Kohli, N. *et al.* The microbiota metabolite indole inhibits Salmonella virulence: Involvement

of the PhoPQ two-component system. *PLOS ONE* **13**, e0190613 (2018).

29. Nikaido, E. *et al.* Effects of indole on drug resistance and virulence of Salmonella enterica

serovar Typhimurium revealed by genome-wide analyses. *Gut Pathog* **4**, 5 (2012).

30. Piñas, G. E., DeSantis, M. D., Cassidy, C. K. & Parkinson, J. S. Hexameric rings of the

scaffolding protein CheW enhance response sensitivity and cooperativity in Escherichia coli

chemoreceptor arrays. *Science Signaling* **15**, eabj1737 (2022).

31. Burt, A. *et al.* Complete structure of the chemosensory array core signalling unit in an E. coli

minicell strain. *Nat Commun* **11**, 743 (2020).

32. Chen, X., Bi, S., Ma, X., Sourjik, V. & Lai, L. Discovery of a New Chemoeffector for

Escherichia coli Chemoreceptor Tsr and Identification of a Molecular Mechanism of

Repellent Sensing. *ACS Bio Med Chem Au* **2**, 386–394 (2022).

33. Rivera-Chávez, F. *et al.* Salmonella Uses Energy Taxis to Benefit from Intestinal

Inflammation. *PLoS Pathog* **9**, e1003267 (2013).

34. Rivera-Chávez, F. *et al.* Energy Taxis toward Host-Derived Nitrate Supports a Salmonella

Pathogenicity Island 1-Independent Mechanism of Invasion. *mBio* **7**, e00960-16 (2016).

35. Gül, E. *et al.* Salmonella T3SS-2 virulence enhances gut-luminal colonization by enabling

chemotaxis-dependent exploitation of intestinal inflammation. *Cell Rep* **43**, 113925 (2024).

36. Winter, S. E., Lopez, C. A. & Bäumler, A. J. The dynamics of gut-associated microbial

communities during inflammation. *EMBO Reports* **14**, 319–327 (2013).

37. Winter, S. E. *et al.* Gut inflammation provides a respiratory electron acceptor for Salmonella.

Nature **467**, 426–429 (2010).

38. Cooper, K. G. *et al.* Regulatory protein HilD stimulates Salmonella Typhimurium

invasiveness by promoting smooth swimming via the methyl-accepting chemotaxis protein

McpC. *Nat Commun* **12**, 348 (2021).

39. Vega, N. M., Allison, K. R., Samuels, A. N., Klempner, M. S. & Collins, J. J. *Salmonella*

typhimurium intercepts *Escherichia coli* signaling to enhance antibiotic tolerance. *Proc. Natl.*

Acad. Sci. U.S.A. **110**, 14420–14425 (2013).

40. Roager, H. M. & Licht, T. R. Microbial tryptophan catabolites in health and disease. *Nat*

Commun **9**, 3294 (2018).

41. Chowdhury, R., Pavinski Bitar, P. D., Chapman, H. M. & Altier, C. Salmonella Invasion Is

Controlled by Competition among Intestinal Chemical Signals. *mBio* **14**, e00012-23 (2023).

42. Ehrhardt, K. & Grassl, G. A. Mouse Model to Study Salmonella-Induced Colitis. *Methods*

Mol Biol **2427**, 201–213 (2022).

43. Grassl, G. A., Valdez, Y., Bergstrom, K. S. B., Vallance, B. A. & Finlay, B. B. Chronic

enteric salmonella infection in mice leads to severe and persistent intestinal fibrosis.

Gastroenterology **134**, 768–780 (2008).

44. Radlinski, L. C. *et al.* Salmonella virulence factors induce amino acid malabsorption in the

ileum to promote ecosystem invasion of the large intestine. *Proceedings of the National*

Academy of Sciences **121**, e2417232121 (2024).

45. Kronsteiner, B. *et al.* Helicobacter pylori Infection in a Pig Model Is Dominated by Th1 and

Cytotoxic CD8 $^{+}$ T Cell Responses. *Infect Immun* **81**, 3803–3813 (2013).

46. Smith, A. C. & Swindle, M. M. Preparation of Swine for the Laboratory. *ILAR Journal* **47**,

358–363 (2006).

47. Poutahidis, T. *et al. Helicobacter pylori* -induced Gastritis in Experimentally Infected

Conventional Piglets. *Vet Pathol* **38**, 667–678 (2001).

48. Boyen, F. *et al.* Porcine *in vitro* and *in vivo* models to assess the virulence of *Salmonella*

enterica serovar Typhimurium for pigs. *Lab Anim* **43**, 46–52 (2009).

49. Boyen, F. *et al.* Coated fatty acids alter virulence properties of Salmonella Typhimurium and

decrease intestinal colonization of pigs. *Veterinary Microbiology* **132**, 319–327 (2008).

50. Köppen, K. *et al.* Ex vivo infection model for Francisella using human lung tissue. *Front.*

Cell. Infect. Microbiol. **13**, (2023).

51. Bomjan, R., Zhang, M. & Zhou, D. YshB Promotes Intracellular Replication and Is Required

for Salmonella Virulence. *Journal of Bacteriology* **201**, 10.1128/jb.00314-19 (2019).

52. Birhanu, B. T., Park, N.-H., Lee, S.-J., Hossain, M. A. & Park, S.-C. Inhibition of
Salmonella Typhimurium adhesion, invasion, and intracellular survival via treatment with
methyl gallate alone and in combination with marbofloxacin. *Veterinary Research* **49**, 101
(2018).

53. MacBeth, K. J. & Lee, C. A. Prolonged inhibition of bacterial protein synthesis abolishes
Salmonella invasion. *Infect Immun* **61**, 1544–1546 (1993).

54. Sharma, A. & Puhar, A. Gentamicin Protection Assay to Determine the Number of
Intracellular Bacteria during Infection of Human TC7 Intestinal Epithelial Cells by Shigella
flexneri. *BIO-PROTOCOL* **9**, (2019).

55. Kitamoto, S. *et al.* Dietary l-serine confers a competitive fitness advantage to
Enterobacteriaceae in the inflamed gut. *Nature Microbiology* **5**, 116–125 (2020).

56. Sugihara, K. & Kamada, N. THE ROLE OF DIETARY L-SERINE IN THE REGULATION
OF INTESTINAL MUCUS BARRIER DURING INFLAMMATION. *Inflammatory Bowel*
Diseases **26**, S42–S42 (2020).

57. Ranque, C. L. *et al.* Examination of Carbohydrate Products in Feces Reveals Potential
Biomarkers Distinguishing Exclusive and Nonexclusive Breastfeeding Practices in Infants. *J*
Nutr **150**, 1051–1057 (2020).

58. Ke, Z., Lu, Z., Li, Q. & Tong, W. Intestinal glucose excretion: A potential mechanism for
glycemic control. *Metabolism* **152**, 155743 (2024).

59. Larke, J. A. *et al.* Dietary Intake of Monosaccharides from Foods is Associated with
Characteristics of the Gut Microbiota and Gastrointestinal Inflammation in Healthy US
Adults. *The Journal of Nutrition* **153**, 106–119 (2023).

60. Shen, X. *et al.* Asparagine, colorectal cancer, and the role of sex, genes, microbes, and diet:

A narrative review. *Front Mol Biosci* **9**, 958666 (2022).

61. Yoo, W. *et al. Salmonella* Typhimurium expansion in the inflamed murine gut is dependent

on aspartate derived from ROS-mediated microbiota lysis. *Cell Host & Microbe* **32**, 887-

899.e6 (2024).

62. Shariat, N. *et al.* Subtyping of Salmonella enterica Serovar Newport Outbreak Isolates by

CRISPR-MVLST and Determination of the Relationship between CRISPR-MVLST and

PFGE Results. *J Clin Microbiol* **51**, 2328–2336 (2013).

63. Ferrari, R. G. *et al.* Worldwide Epidemiology of *Salmonella* Serovars in Animal-Based

Foods: a Meta-analysis. *Appl Environ Microbiol* **85**, e00591-19 (2019).

64. Gavira, J. A. *et al.* How Bacterial Chemoreceptors Evolve Novel Ligand Specificities. *mBio*

11, e03066-19 (2020).

65. Matilla, M. A., Ortega, Á. & Krell, T. The role of solute binding proteins in signal

transduction. *Computational and Structural Biotechnology Journal* **19**, 1786–1805 (2021).

66. Chimerel, C., Field, C. M., Piñero-Fernandez, S., Keyser, U. F. & Summers, D. K. Indole

prevents Escherichia coli cell division by modulating membrane potential. *Biochim Biophys*

Acta **1818**, 1590–1594 (2012).

67. Melander, R. J., Minvielle, M. J. & Melander, C. Controlling bacterial behavior with indole-

containing natural products and derivatives. *Tetrahedron* **70**, 6363–6372 (2014).

68. Moore, J. P., Kamino, K., Kottou, R., Shimizu, T. S. & Emonet, T. Signal integration and

adaptive sensory diversity tuning in *Escherichia coli* chemotaxis. *Cell Systems* **15**, 628-

638.e8 (2024).

69. Huang, J. Y. *et al.* Chemodetection and Destruction of Host Urea Allows Helicobacter pylori
to Locate the Epithelium. *Cell Host & Microbe* **18**, 147–156 (2015).

70. Khan, S. & Trentham, D. R. Biphasic Excitation by Leucine in Escherichia coli Chemotaxis.
J Bacteriol **186**, 588–592 (2004).

71. Beltran, P. *et al.* Reference collection of strains of the Salmonella typhimurium complex
from natural populations. *Journal of General Microbiology* **137**, 601–606 (1991).

72. Sugihara, K. *et al.* Mucolytic bacteria license pathobionts to acquire host-derived nutrients
during dietary nutrient restriction. *Cell Reports* **40**, 111093 (2022).

73. Chandra, K. Gentamicin Protection assay (Intracellular Survival Assay) for Salmonella
Typhimurium/Typhi v1. Preprint at https://doi.org/10.17504/protocols.io.b4zmqx46 (2022).

74. Rivera Calo, J., Rubinelli, P. M. & Ricke, S. C. Gentamicin Susceptibility and Comparison
of Adhesion and Invasion of Caco-2 and HD11 Cell Lines by Salmonella enterica Serotypes.
Applied Sciences **14**, 3305 (2024).

75. Ben-David, A. & Davidson, C. E. Estimation method for serial dilution experiments. *Journal
of Microbiological Methods* **107**, 214–221 (2014).

76. Macho, A. P., Zumaquero, A., Ortiz-Martín, I. & Beuzón, C. R. Competitive index in mixed
infections: a sensitive and accurate assay for the genetic analysis of *Pseudomonas syringae –*
plant interactions. *Molecular Plant Pathology* **8**, 437–450 (2007).

77. Auerbuch, V., Lenz, L. L. & Portnoy, D. A. Development of a competitive index assay to
evaluate the virulence of Listeria monocytogenes actA mutants during primary and
secondary infection of mice. *Infect Immun* **69**, 5953–5957 (2001).

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792 **Supplemental Information**

793 **Table S1.** Summary of prior studies related to indole chemotaxis, related to Figure 1.

Species, Strain(s)	Indole Treatment [a]	Reported Response [b]	Experimental Method(s)	Chemotaxis & Motility Proteins Involved in Response	Ref.
E. coli, strain RP437	≤1 mM >1 mM	chemorepulsion chemoattraction	tethered cell assay [c]	Tsr, Tar	[12]
E. coli, strain MG1655	1 mM ± 0.5-0.1 mM L-Ser	"bet-hedging" [d]	diffusion-based assay into long channel with fluorescent imaging	Tar, Tsr	[13]
E. coli, strain RP437	500 μM	chemorepulsion, overridden in presence of 500 μM Autoinducer-2	flow-based microfluidic chemotaxis device coupled to a gradient generator	Tar, Tsr	[18]
E. coli, strain RP437	≤1 mM >1 mM	decreased motility slower flagellar rotation	tethered cell assay [c]	Non-CheY dependent	[22]
E. coli, strain O157:H7 CDC EDL933	500 μM	chemorepulsion	agarose plug chemotaxis assay imaged every 5 minutes for 30 minutes	MotB and FliD	[27]
S. Typhimurium, strain ATCC14028s	1 mM	decreased motility	swimming motility agar plates [c]	MotA	[28]
S. Typhimurium, strain ATCC14028s	1 mM	decreased motility	swimming motility agar plates [c]	FlhC	[29]

[a] Source concentration, or ranges, used in experiment.

[b] The motility or chemotactic response as reported by the study authors; note that some methods

employed may not be able to distinguish between responses as a consequence bacterial growth

versus chemotaxis.

[c] The assay may have limitations in its ability to report on either rapid temporal responses, or

localization to or from an effector source.

[d] In this work, we refer to behaviors of this type as "chemohalation" to be similar to the widely-

used terms chemoattraction and chemorepulsion.

Data S1. Enumeration of colony-forming units (CFUs) from explant studies.

Fig. S1. Colony-forming units (CFU) recovered from swine colonic explant infections, related to Figure 1. Shown are disaggregated CFU enumerations for each co-infection experiment with *S.* Typhimurium IR715 WT and mutant strains following tissue treatments, as indicated. CFUs extracted either using the entire tissue homogenate (total) or extracted from tissue treated with a gentamicin wash to kill exterior non-invaded cells (invaded) are noted separately (see Materials & Methods). Each data point represents CFUs recovered from a single explant experiment (n=5). Box and whisker plots represent the sample median (line), the edges are the upper and lower quartiles, and whiskers extend to the max and min values. The limit of detection was 1×10^5 CFUs. Samples with no CFUs detected are noted on the plot at this limit.

Fig. S2. Chemotactic responses to L-Ser or indole, related to Figure 2. A. CIRA experimental design. B. CIRA microgradient diffusion model, simulated with a source of 1.13 mM A488 dye after 30 s of injection. Image rendered on a pink (100% source concentration)-blue-black (0%) color intensity scale, based on previous work [1]. C. CIRA quantification overview, with blue lines corresponding to chemoattraction, null chemotactic response corresponding to gray dashed lines, and chemorepulsion corresponding to brown lines. D-G. Microgradient models of the local effector concentration for treatments with 5 mM L-Ser or indole, respectively, at Δ300 s. Color gradient corresponds to gradually decreasing effector concentrations from yellow to blue. H-I. Representative 10 s max projections of *S*. Typhimurium IR715 response to sources of L-Ser (strong chemoattraction) or indole (strong chemorepulsion) using CIRA. The glass microcapillary that injects the treatment solution is centered within the field of view. Note that cells contain a plasmid expressing mPlum (see Materials & Methods), and fluorescence data are collected in the far-red channel, so the glass microcapillary is poorly visible.

A +human feces | WT | *cheY* | merged
100 μm
bacterial distribution (fold-change) — WT, *cheY*
distance from source (μm)

B +human feces | WT | *tsr* | merged
100 μm
bacterial distribution (fold-change) — WT, *tsr*
distance from source (μm)

C +human feces | *S.* Typhimurium IR715 | *S.* Typhimurium SARA1 | merged
100 μm
bacterial distribution (fold-change) — *S.* Typhimurium IR715, *S.* Typhimurium SARA1
distance from source (μm)

D +human feces | *S.* Typhimurium IR715 | *S.* Newport | merged
100 μm
bacterial distribution (fold-change) — *S.* Typhimurium IR715, *S.* Newport
distance from source (μm)

E +human feces | *S.* Typhimurium IR715 | *S.* Enteriditis | merged
100 μm
bacterial distribution (fold-change) — *S.* Typhimurium IR715, *S.* Enteriditis
distance from source (μm)

F +50 μM indole | +500 μM indole | +3 mM indole | +5 mM indole | +10 mM indole

G bacteria within 150 μm (%)
50 μM, 500 μM, 3 mM, 5 mM, 10 mM
in
chemo-repulsion
time (s)

H chemorepulsion (% AUC 1-300 s)
data, fit
K₁/₂ = 67 μm
indole source (μM)

I +5 mM L-Ser
WT *tsr*
distribution (%)
WT vs *tsr*
distance from source (μm)

J bacteria (%)
in
tsr
WT
+5 mM indole
time (s)

K +5 mM indole
WT *tsr*
distribution (%)
WT vs *tsr*
distance from source (μm)

L Time (min)
μcal/sec
Tsr LBD +indole (no binding)
kcal mol⁻¹ of injectant
Molar Ratio

M Time (min)
μcal/sec
Tsr LBD +indole +L-Ser (K_D 5 μM)
kcal mol⁻¹ of injectant
Molar Ratio

A +500 µM L-Ser

strong chemoattraction

B +500 µM L-Ser, 50 µM indole

diffuse chemoattraction

C +500 µM L-Ser, 500 µM indole

chemohalation

D +500 µM L-Ser, 5 mM indole

diffuse chemohalation

E

no indole

+50 µM indole

+500 µM indole

+5 mM indole

distribution (%)

distance from source (µm)

F

+5 mM indole

+500 µM indole

+500 µM L-Ser

+50 µM indole

local concentration (nM)

distance from source (µm)

G

increased growth

A600

S. Typhimurium IR715
S. Typhimurium SARA1
S. Newport
S. Enteriditis

L-Ser (µM)

H

decreased growth

A600

indole (µM)

I

untreated

+500 µM indole

A600

L-Ser (µM)

J

+500 µM L-Ser

untreated

A600

indole (µM)

A lumen

diet

microbial competitors

L-Ser   Tsr   indole

?

colonization bias

B t = 0 h

nutrient-seeking

C t = 1-5 h

proliferation

D t = 6 h

invasion

● L-Ser   ● other nutrients   ● indole

nutrients↑ competitors↓

nutrients↓ competitors↑

growth, invasion

mucosa