A Novel Rapid Host Cell Entry Pathway Determines Intracellular Fate of *Staphylococcus aureus*

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Abstract:

Staphylococcus aureus is an opportunistic pathogen causing severe diseases. Recently, *S. aureus* was recognized as intracellular pathogen with the intracellular niche promoting immune evasion and antibiotic resistance. We identified an alternative mechanism governing cellular uptake of *S. aureus* which relies on lysosomal Ca^{2+}, lysosomal exocytosis and occurs concurrently to other well-known entry pathways within the same host cell population. This internalization pathway is rapid and active within only few minutes after bacterial contact with host cells. Compared to slow bacterial internalization, the rapid pathway demonstrates altered phagosomal maturation as well as translocation of the pathogen to the host cytosol and ultimately results in different rates of intracellular bacterial replication and host cell death. We show that these alternative infection outcomes are caused by the mode of bacterial uptake.

Introduction

The most abundant sphingolipid, sphingomyelin (SM), resides in the extracellular leaflet of the plasma membrane and hence is exposed to the environment (1, 2). SM is a substrate for sphingomyelinases (SMases) that cleave off the phosphocholine head group to produce the non-polar ceramide. Acid sphingomyelinase (ASM) is a lysosomal enzyme involved in recycling of SM (3, 4) and is linked to infectious diseases, where it was shown to be involved in cellular uptake of several human pathogens (5-11).

Staphylococcus aureus is a Gram-positive human commensal that asymptomatically colonizes about one third of the human population (12). It is an opportunistic pathogen causing diseases ranging from soft tissue and skin infections (13) to lethal diseases (14, 15). *S. aureus* is notorious for acquiring antibiotic resistances thereby causing >100,000 annual deaths (16). *S. aureus* possesses intracellular virulence strategies (17, 18) that contribute to antibiotic resistance (19, 20) and immune evasion (21).

Internalization of *S. aureus* by host cells is mediated by several adhesins on the staphylococcal surface that bind a plethora of receptors on the host cell plasma membrane (5, 22-32). For instance, staphylococcal fibronectin-binding proteins that form fibronectin bridges to $\alpha_5\beta_1$ integrins on host cells to initiate internalization (22) or clumping factor B which can interact with the host receptor annexin A2 (25).

After internalization, *S. aureus* resides within a phagosome-like compartment that matures by acquiring proteins associated with early and then late endosomes as well as lysosomes (33-35). In epithelial and endothelial cells, the bacteria translocate to the host cytosol ("phagosomal escape") where they replicate and cause host cell death (33, 36-38).

The mechanism by which pathogens enter their host cells has been suggested to dictate the outcome of infections (39-42). For instance, phagosomes formed during natural internalization of *Brucella arbortus* by macrophages possessed different characteristics compared to phagosomes that were artificially generated by phorbol myristate acetate (42). The protozoic parasite *Toxoplasma gondii* invades its host cells by a proactive mechanism. Phagosomes generated during active invasion differed from those that were generated during Fc receptor-mediated uptake of antibody-coated parasites (41). Since previous observation connecting host cell entry and intracellular fate of pathogens were based on artificial induction of internalization, it is unclear whether pathogens can enter host cells within the same population via different naturally occurring mechanisms and if the entry route has a direct influence on the outcome of an intracellular infection.

Here, we describe the internalization of *S. aureus* by tissue cells via a rapid pathway taking place within minutes after contact between bacteria and host cell surface. This pathway requires nicotinic acid adenosine dinucleotide phosphate (NAADP)-dependent mobilization of lysosomal Ca^{2+}, followed by lysosomal exocytosis and thereby release of ASM. Since the rapid uptake is concurrent to previously known internalization pathways, it probably has been missed due to long infection times used in traditional infection protocols (e.g., (22, 25, 29, 30)).

S. aureus bacteria, which enter host cells of the same cell population via the rapid pathway, cause a distinct infection outcome with altered phagosome maturation, bacterial translocation to host cytosol and eventually host cell death when compared to bacteria that enter host cells at later time points during infection. Thus, the outcome of an infection is decided at the single cell level during bacterial uptake at the host plasma membrane. Bacteria-containing phagosomes that were formed by the ASM-dependent rapid uptake pathway are delayed in their maturation and the bacteria do not escape these organelles efficiently, hence demonstrating a direct link between concurrently active modes of bacterial uptake and the resulting outcomes of intracellular *S. aureus* infection.

Results

S. aureus triggers lysosomal Ca^{2+} mobilization for host cell invasion

We previously identified that internalization of *S. aureus* by host cells is associated with cellular Ca^{2+} signaling (43). To delineate the role of Ca^{2+} in this process mechanistically, we pretreated human microvascular endothelial cells (HuLEC) with the calcium ionophore ionomycin, which reduced bacterial invasion efficiency dose-dependently (**Figure 1**, A), at concentrations neither affecting bacterial (**Supp. Figure 1**, A, B) nor host cell viability (**Supp. Figure 1**, C).

Since focal adhesions constitute major cellular entry sites for *S. aureus* and the Ca^{2+}-activated transient receptor potential ion channel 4 (TRPM4) is located therein, we inhibited TRPM4 with 9-Phenantrol. 9-Phenantrol reduced invasion efficiency (**Figure 1**, B), but was not bactericidal (**Supp. Figure 1**, D). Further, treatment of HuLEC (**Figure 1**, C) or HeLa (**Supp. Figure 1**, E) with the Ca^{2+} chelator BAPTA-AM (44) led to reduction of *S. aureus* invasion in a concentration-dependent manner.

The pore-forming staphylococcal α-toxin has been shown to mediate Ca^{2+} influx into host cells (45). However, *S. aureus* invasion was independent of toxin production in HeLa and only slightly reduced in endothelial cells (**Supp. Figure 1**, F). Consequently, omission of Ca^{2+} from the cell culture medium did not affect internalization of bacteria, indicating that invasion is not dependent on Ca^{2+} influx (**Figure 1**, C).

Figure 1 *S. aureus* **invasion is dependent on Ca^{2+} liberation from lysosomal stores and lysosomal exocytosis.** Treatment with Ionomycin (A, n≥3), 9-Phenantrol (B, n≥3), BAPTA-AM (C, n≥4), *trans*-Ned19 (D, n≥4), but not 2-APB and 8-Bromo-cADPR (D, n≥4) reduce *S. aureus* internalization by host cells in a TPC1 dependent fashion (E, n≥5). HuLEC (A, C, D, F), HeLa WT (B), HeLa TPC1 K.O. (E) or HeLa SARM1 K.O. (F) cells were treated with the respective substance and were subsequently infected with *S. aureus* JE2 for 30 min if not indicated otherwise. Extracellular bacteria were removed by lysostaphin, and the number of intracellular bacteria was determined by CFU counting. Results were normalized to untreated controls to obtain invasion efficiency (in

98   percent of control). (F) scheme of host cell Ca^{2+} signaling and interfering agents. Statistics: one sample t-test (A-
99   D, F), unpaired Student's t-test (E). Bars represent means ± SD. *$p \leq 0.05$, **$p \leq 0.01$, ***$p \leq 0.001$, ****$p \leq 0.0001$.
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Since intracellular Ca^{2+} stores can serve as alternative source of Ca^{2+}, we next blocked Ca^{2+} liberation
from the ER using 2-APB (46) or 8-Bromo-cyclic ADP ribose (8-Bromo-cADPR; (47)) and from
lysosomes using *trans*-Ned19 (48) in HuLEC (**Figure 1**, D) or HeLa (**Supp. Figure 1**, G, H) at
concentrations not affecting bacterial viability (**Supp. Figure 1**, I and J). Interference with lysosomal,
but not ER Ca^{2+} release reduced internalization of *S. aureus*.
Ned19 antagonizes NAADP, a second messenger that mediates opening of two pore channels (TPCs)
which transport Ca^{2+} from the endo-lysosomal compartment into the cytosol (48). Hence, a HeLa cell
pool depleted of TPC1 (**Supp. Figure 1**, K) substantially reduced invasion when compared to
unmodified HeLa cells. This was particularly pronounced after a 10 min infection pulse, suggesting that
Ca^{2+}-dependent invasion is important early in infection (**Figure 1**, E).
CD38 is a well-known producer of NAADP in immune cells (49-51). Thus, we tested *S. aureus* invasion
in HeLa cells treated with the specific CD38 inhibitor 78c, even though expression of CD38 in these
cells is predicted to be very low (proteinatlas.org). We observed no effect on *S. aureus* invasion by CD38
inhibition (**Supp. Figure 1**, L). An alternative NAADP producer, with higher expression in our
infection model, is *Sterile Alpha and TIR Motif Containing 1* [SARM1, (52)]. We measured a slightly
decreased invasion efficiency 10 min p.i. in a cell pool lacking SARM1 when compared to WT cells
(**Figure 1**, F; **Supp. Figure 1**, M), suggesting that SARM1 might be enrolled in NAADP production
during internalization of *S. aureus* by host cells.
Altogether, our findings support the important role of lysosomal Ca^{2+} mobilization in *S. aureus* invasion
as particularly required early in infection.
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Rapid S. aureus invasion requires lysosomal exocytosis, ASM and its substrate sphingomyelin on the host cell surface

Ionomycin treatment results in lysosomal exocytosis, a Ca^{2+}-dependent process in which lysosomes
release their content to the extracellular space (45, 53). Hence, we treated host cells with Vacuolin-1, an
inhibitor blocking this process (54), which reduced invasion efficiency in HuLEC (**Figure 2**, A) and
HeLa cells (**Supp. Figure 2**, A), while not affecting survival of the bacteria (**Supp. Figure 2**, B).
Synaptotagmin 7 (Syt7) is known to support fusion of lysosomes with the plasma membrane in a Ca^{2+}-
dependent manner (55). Accordingly, Syt7-depleted HeLa cells demonstrated lower bacterial invasion
(**Figure 2**, B). As already observed for TPC1 (**Figure 1**, E), this was most pronounced early in infection
further supporting our hypothesis that lysosomal exocytosis is important for rapid invasion events.
Lysosomal exocytosis results in release of ASM (45, 56). Therefore, prior to infection, the cells were
exposed to amitriptyline, a functional inhibitor of ASM (FIASMA), or a competitive inhibitor [ARC39,
(57)] at concentrations not affecting bacterial survival (**Supp. Figure 2**, C, D). While invasion in
HuLEC, human umbilical vein endothelial cells (HuVEC) and HeLa was sensitive to both inhibitors,
invasion in 16HBE14o⁻ and EA.hy926 was not or only marginally affected (**Figure 2**, C). We excluded
that differences among cell lines arose from differential ASM activity or sensitivity to the inhibitors by
monitoring enzymatic activity [**Supp. Figure 2**, E; (58) and **Supp. Figure 2**, F; (59)].
Next, we treated HuLEC with 10 µM ARC39 or 0.5 µM PCK310, a fast-acting ASM inhibitor. Already
after 1h preincubation, PCK310 reduced invasion of *S. aureus*, whereas ARC39 required overnight
treatment for a similar reduction (**Figure 2**, D). Taken together, these results show that ASM is involved
in *S. aureus* invasion of host cells.
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Figure 2 *S. aureus* invasion requires lysosomal exocytosis, ASM and plasma membrane sphingomyelin.
(A, B) *S. aureus* invasion requires Syt7-dependent lysosomal exocytosis. HuLEC were treated with the lysosomal exocytosis inhibitor Vacuolin-1 and invasion efficiency of *S. aureus* was determined 30 min p.i. (A, n=3). Invasion efficiency of *S. aureus* JE2 was determined in HeLa Syt7 K.O. cells 10 min and 30 min p.i. (B, n=5; data normalized to HeLa WT). **(C, D) *S. aureus* internalization is dependent on ASM activity in endothelial and epithelial cells.** Indicated cell lines were treated with the ASM inhibitors amitriptyline or ARC39 (C) and invasion efficiency of *S. aureus* was determined (n≥3). (D) HuLEC were treated with PCK310 or ARC39 for the indicated periods. Subsequently, cells were infected with *S. aureus* for 30 min and invasion efficiency was determined by CFU counting (n≥4). **(E, F) *S. aureus* invasion requires SM and SMase activity on host cell plasma membranes.** HuLEC were treated with the bacterial SMase β-toxin for 75 min and were subsequently infected with *S. aureus* JE2 for 30 min (n≥3). **(F) Presence of extracellular SMase activity restores invasion defect in TPC1 and Syt7 K.O. cell lines.** HeLa wild type as well as TPC1 or Syt7 KO cell lines were infected with *S. aureus* JE2 in presence of 100 ng/ml of the bacterial SMase β-toxin and invasion efficiency 10 min p.i. was determined (n=4). In each experiment the numbers of intracellular *S. aureus* JE2 were determined by lysostaphin protection assay and CFU counting. Results obtained for the tested condition were normalized to the wildtype cell line or the mock-treated control. **(G) scheme of lysosomal exocytosis and ASM release as well as interfering agents.** Cer: ceramide, SM: sphingomyelin, ASM: acid sphingomyelinase. Statistics: one sample t-test (A-C, E), one-way ANOVA and Dunnett's multiple comparisons test (D). Two-way ANOVA and Tukey's multiple comparison (F). Bars represent means ± SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.

We removed SM, the substrate of ASM, from plasma membranes of HuLEC (**Figure 2**, E) and HeLa (**Supp. Figure 2**, G) by pretreatment with the bacterial SMase β-toxin. Most human pathogenic *S. aureus* strains including JE2, the strain we use in the present study, do not produce β-toxin, due to a genomic integration of a prophage (60). SMase pretreatment reduced invasion efficiency in a concentration-dependent manner in both cell lines. 10 ng/ml β-toxin were sufficient to decrease invasion to 34.37 ± 6.24% of that measured in untreated control cells. Interestingly, a 250-fold higher

concentration did not lead to further reduction. In line with our previous experiments, this suggests that
multiple *S. aureus* invasion pathways exist within the same host cell population, of which at least one
requires SM and its enzymatic breakdown on the plasma membrane.
Next, we infected wild-type as well as the TPC1 or Syt7 K.O. cells with *S. aureus* in presence (but
without pretreatment) of 100 ng/ml β-toxin and determined the number of intracellular bacteria after 10
min (**Figure 2**, F). Presence of β-toxin in the culture medium completely rescued the invasion defect of
the K.O. cells. This indicates that reduced bacterial internalization in absence of TPC1 and Syt7 results
from a lack in ASM delivery to the cell surface by Ca^{2+}-dependent lysosomal exocytosis.
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ASM- and Ca^{2+}-mediated invasion is rapid
To study the role of SM in *S. aureus* uptake kinetics, we incubated HuLEC with fluorescent sphingolipid
analogs and recorded *S. aureus* infection by time lapse imaging [**Figure 3**, A; **Supp. Video 1**; **Supp.**
Figure 3; **Supp. Video 2**; (59)]. We observed that the bacteria were rapidly engulfed by SM-containing
membrane compartments. While association of bacteria with BODIPY-FL-C12-SM increased over time
during the first 30 min of infection, this was not observed for BODIPY-FL-C12-Ceramide, suggesting
that *S. aureus* invasion specifically relies on interaction with SM in plasma membranes (**Figure 3**, B).
Next, we determined the invasion efficiency of *S. aureus* in a time-dependent manner and blocked
invasion by either ASM inhibitors, ionomycin, BAPTA-AM or β-toxin pretreatment. We found a time-
dependent increase in intracellular bacteria, whereby all treatment conditions reduced bacterial invasion
at every time point with the untreated control at 30 min set to 100% (**Figure 3**, C). By normalizing the
data to the untreated control at the corresponding time points, we found that -with exception of β-toxin-
the effect of the treatments was most pronounced early (5-10 min) after infection (**Figure 3**, D). Thus,
early during infection bacteria enter the host cell predominantly in an ASM- and Ca^{2+}-dependent manner.
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The mode of *S. aureus* invasion affects infection outcome

After invasion, *S. aureus* resides within Rab5-positive early and subsequently, in Rab7-positive late
phagosomes (33). We pretreated a HeLa cell line stably expressing mCherry-Rab5 as well as YFP-Rab7
with amitriptyline and infected with *S. aureus* for different time periods and determined the proportion
of bacteria that associated with Rab5 and/or Rab7 (**Figure 4**, A).
While ASM inhibition marginally affected *S. aureus* association with Rab5-positive phagosomes, that
with the Rab7-positive compartment was significantly reduced compared to the untreated control. This
was restricted to shorter infection pulses (5-45 min) and was not observed for long infection periods (60
min). We also observed a reduced proportion of bacteria associating with Rab7-positive membranes
after treatment with PCK310 or bacterial SMase. However, this was not caused by translocation of *S.*
aureus to the host cytosol (**Supp. Figure 4**, A, B). Hence, phagosomes generated ASM-dependently
possess different maturation dynamics when compared to phagosomes formed in an ASM-independent
fashion.
Next, we measured phagosomal escape while simultaneously detecting SM content of disrupted
phagosomal membranes. Therefore, we used a HeLa reporter cell line that cytosolically expresses the
phagosomal escape reporter RFP-CWT (36) as well as the SM reporter Lysenin[W20A]-YFP (61),
respectively (**Figure 4**, B). Reporter gene expression in the cell line did not alter *S. aureus* invasion
dynamics under different treatment conditions (**Supp. Figure 4**, C). The reporter cells were left
untreated or were pre-exposed to ASM inhibitors and were infected with *S. aureus* strain JE2. In
addition, *S. aureus* Cowan I, a strain known to have low escape rates, was used for infection. The
proportion of bacteria that escaped from the phagosome (**Figure 4**, C) as well as the proportion of escape
events that additionally were positive for cytosolic SM (**Supp. Figure 4**, D) were determined 1.5 h and
3 h p.i. (see also **Supp. Figure 5**, A-D).

Figure 3 ASM- and Ca²⁺-dependent uptake is rapid and predominantly mediates invasion early in infection.
(A, B) *S. aureus* **associates with SM early during invasion.** HuLEC were pretreated with BODIPY-FL-C12-SM
or BODIPY-FL-C12-ceramide and infected with red-fluorescent *S. aureus.* Scale bar: 5 μm. Infection was
monitored by live cell imaging and the proportion of bacteria that associated with the lipid analogs was quantified
in each individual frame (SM: n=5, Cer: n=3). **(C, D) ASM and Ca²⁺-dependent invasion is rapid.** HuLEC were
treated with ARC39, amitriptyline, BAPTA-AM, ionomycin, or the bacterial SMase β-toxin. Then, cells were
infected with *S. aureus* and the number of invaded bacteria was determined after different time periods. The results
were either normalized to 30 min time point of untreated controls (C) or to the corresponding time points of the
untreated controls (D). (n ≥5). Statistics: Mixed effect analysis and Tukey's multiple comparison. Graphs represent
means ± SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.

Whereas no differences for Lysenin-positive escape events were detected (**Supp. Figure 4**, D), a higher
proportion of bacteria escaped from phagosomes on abrogation of ASM activity regardless of the
inhibitor used (**Figure 4**, C; **Supp. Figure 4**, E). A similar increase was observed when we blocked
lysosomal exocytosis by Vacuolin-1 (**Supp. Figure 4**, F).

Since blocking of ASM-dependent uptake reduced the number of intracellular bacteria but increased
their phagosomal escape rates, we hypothesized that the presence of SM on the plasma membrane affects
downstream events during *S. aureus* infection. To address this question, we pretreated host cells with
the bacterial SMase β-toxin to block SM-dependent invasion (**Figure 4**, D; 2a, 2b) and either infected

the cells in presence (3a) or after removal of the toxin (3b). β-toxin pretreatment, resulted in enhanced
phagosomal escape rates of *S. aureus* JE2, independent of the presence of β-toxin during infection
(**Figure 4**, E; 4a, 4b). This was not observed for infection with the non-cytotoxic Cowan I strain,
indicating that removal of SM by β-toxin did not affect general phagosomal membrane stability (**Supp.**
Figure 4, G). Moreover, β-toxin treatment strongly reduced recruitment of Lysenin[W20A], demonstrating
effective removal of SM from membranes by β-toxin (**Figure 4**, F and **Supp. Figure 5**, E-J).
To investigate if removal of SM was important at the cell surface or within the phagosome, we infected
the cells with an *S. aureus* JE2 strain recombinantly overexpressing β-toxin and Cerulean, or a strain
solely expressing Cerulean. We did not observe increased phagosomal escape upon overexpression of
β-toxin (Figure 5, E; 4c), although SM levels of phagosomal membranes were reduced (Figure 5, F)
comparably to samples pretreated with β-toxin (see above). Moreover, we did not detect substantial
differences in escape rates of *S. aureus* 6850, a strain naturally producing β-toxin (**Supp. Figure 4**, H),
and an isogenic β-toxin mutant. By contrast, escape of *S. aureus* 6850 again was enhanced upon
pretreatment with β-toxin (**Supp. Figure 4**, I) accompanied by absence of SM from phagosomal
membranes (**Supp. Figure 4**, J).
Phagosomal escape of *S. aureus* thus is independent of SM levels within the infected phagosomes, but
rather reflects the presence of SM and ASM at the plasma membrane during host cell entry.
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To demonstrate that phagosomal escape is dependent on the pathway of cell entry, we infected reporter
cells with *S. aureus* for either a 10 min ("early invaders") or a 30 min infection pulse ("early and late
invaders"). Subsequently, we determined phagosomal escape rates (**Figure 4**, H) as well as the number
of invaded bacteria (**Supp. Figure 4**, K). Independent of the multiplicity of infection (MOI) used,
bacteria taken up within the first 10 min demonstrated significantly lower escape rates when compared
to bacteria that were cocultured with host cells for 30 min.
This was corroborated by HeLa YFP-CWT infected with *S. aureus* expressing a fluorescent protein (e.g.
mRFP) for 30 min ("early and late invaders"). After 20 min, we initiated a second infection pulse for 10
min ("early invaders") with a *S. aureus* strain expressing another fluorescence protein (e.g. Cerulean)
and determined phagosomal escape rates of both bacterial recombinants (**Figure 4**, I). Again, early
invaders demonstrated lower escape rates when compared to the 30 min control. This was independent
of the fluorescence expressed by the strain that was used for each infection pulse.
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Figure 4 The intracellular fate of *S. aureus* is determined by the pathway of cell entry.
(A) Inhibition of ASM delays formation of Rab7-positive phagosomes. HeLa cells expressing mCherry-Rab5
and YFP-Rab7 were either treated with amitriptyline or left untreated. Then, cells were infected with *S. aureus* JE2
for indicated periods. Extracellular bacteria were removed and proportion of intracellular bacteria associating with
Rab5 or Rab7 was determined by CLSM. Results obtained for amitriptyline-treated samples were normalized to
untreated controls (n=5). **(B) Detection of phagosomal SM and phagosomal escape by a reporter cell line
expressing Lysenin^W20A -YFP and RFP-CWT.** After internalization, *S. aureus* resides in a phagosome preventing
the recruitment of RFP-CWT to *S. aureus* cell wall and Lysenin^W20A-YFP to luminal SM, respectively. When the
bacteria lyse the phagosomal membrane, luminal SM gets exposed to the cytosol and attracts Lysenin^W20A -YFP,
while RFP-CWT is recruited to the staphylococcal surface. **(C) Blocking ASM-dependent internalization affects**

phagosomal escape. RFP-CWT and Lysenin[W20A] -YFP expressing HeLa were treated with PCK310, or ARC39
and infected with *S. aureus* strains JE2 or Cowan I. Thereby, β-toxin was either removed prior to infection
(pretreatment only) or was present during the whole experiment (pretreatment + during infection). By CLSM,
proportions of bacteria that recruited RFP-CWT (phagosomal escape) were determined (n≥3). **(D-F) Phagosomal**
escape depends on presence of plasma membrane SM during invasion, but not presence of SM within
phagosomal membranes HeLa RFP-CWT Lysenin[W20A] -YFP were pretreated with β-toxin to remove surface SM
(2a, 2b) or left untreated (2c). Then, cells were infected with *S. aureus* JE2 in presence (3a) or absence (3b) of β-
toxin. Untreated samples (3c) were infected with *S. aureus* JE2 harboring a plasmid either encoding β-toxin and
the fluorescence protein Cerulean (pCer+*hlb*) or solely Cerulean (pCer). Proportion of bacteria that recruited RFP-
CWT (phagosomal escape, E) and the percentage of phagosomal escape events that additionally were positive for
Lysenin[W20A]-YFP (F) were determined at indicated time points p.i. (n=5). **(G, H) Early ASM-dependent invaders**
possess lower escape rates than late invaders. HeLa cells expressing RFP-CWT were infected with indicated
MOIs of *S. aureus* JE2 either for 10 min (early invaders) or 30 min (early+late invaders). Phagosomal escape rates
were determined 3h p.i. (G). HeLa reporter cells expressing YFP-CWT were infected with an MOI=5 of *S. aureus*
JE2 expressing a fluorescent protein (e.g. RFP) for 30 min (early+late invaders). After 20 min, the same samples
were infected with *S. aureus* JE2 expressing another fluorophore (e.g. Cerulean) for 10 min (early invaders) and
phagosomal escape was determined 3 h p.i. (H). **Statistics:** one sample t-test (A), Mixed effects analysis (REML)
and Tukey's multiple comparison (C,G, H), Two-way ANOVA and Šídák's multiple comparisons test (E, F).
Graphs represent means ± SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.
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We next monitored phagosomal escape over 10 h in cells pretreated with ASM inhibitors (**Figure 5**, A).
The compounds enhanced escape rates 3 h p.i. when compared to untreated controls. In contrast, 6 h p.i.
escape rates were found decreased upon ASM inhibition.
Taken together, the efficiency of phagosomal escape of *S. aureus* is directly affected by the mode of cell
entry, whereby the rapid SM/ASM-dependent pathway results in delayed phagosomal escape, while
bacteria that entered host cells ASM-independently escape earlier during infection.
Since translocation to the host cytosol is a prerequisite for *S. aureus* replication in non-professional
phagocytes, we recorded intracellular growth of *S. aureus*. In untreated controls replication started about
5 h p.i., and thus shortly after phagosomal escape (3-4 h p.i., **Figure 5**, B). By contrast, we did not
observe significant bacterial replication in cells treated with ASM inhibitors (**Figure 5**, B).
We next treated HuLEC with β-toxin, stained the cells with BODIPY-FL-C12-SM and infected the cells
with fluorescent *S. aureus*. Live cell imaging demonstrated that most untreated host cells died after 11
h p.i., whereas β-toxin-treated samples showed higher survival rates (**Figure 5**, C). This was also
observed by cell death assays measuring i) membrane integrity (7-AAD staining, **Figure 5**, D), ii)
apoptosis (Annexin V staining, **Figure 5**, E), iii) number of host cells that remained attached to the
substratum (**Supp. Figure 6**, A) and iv) host cell lysis by LDH release (**Supp. Figure 6**, B).
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Figure 5 Blocking ASM-dependent internalization affects intracellular replication and host cell survival.
(A, B) HeLa cells expressing RFP-CWT and Lysenin[W20A]-YFP were treated with amitriptyline or ARC39 or were left untreated (Ctrl). The cells were subsequently infected with *S. aureus* and infection was monitored for 10 h by CLSM. Proportion of escaped bacteria (A) or the intracellular replication (B) was determined (n= 5). **(C)** HuLEC were stained with BODIPY-FL-C12-SM (green), and either were pretreated with 100 ng/ml of β-toxin or were left untreated. Then, cells were infected with *S. aureus* (red) and infection was monitored by CLSM for 19 h. **(D, E)** HuLEC were treated with amitriptyline or β-toxin and subsequently infected with *S. aureus*. After 21 h, plasma membrane integrity was measured by 7-AAD staining (D), and proportion of apoptotic cells was determined by annexin V staining (E) (n=5). See also **Supp. Figure 6**. (F) Model: *S. aureus* interacts with an unknown primary receptor (1) that triggers production of NAADP, which in turn activates TPC1 to mediate lysosomal Ca^{2+} release and activation of Syt7 (2). Syt7-dependent lysosomal exocytosis (3) leads to release of

330 ASM (4) and production of Cer on the plasma membrane (5) thereby resulting in the recruitment of co-receptors
331 (6) and rapid internalization of *S. aureus* by host cells (7). Bacteria that enter the host cells via the rapid pathway
332 experience a different intracellular fate than bacteria that entered via other pathways. **Statistics:** Mixed effects
333 analysis (REML) and Tukey's multiple comparison test. Graphs represent mean ± SD. *p≤0.05.
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Discussion

ASM previously has been implicated in the invasion of several viral, bacterial, and eukaryotic pathogens
(5-11). However, the dynamics of ASM-mediated host cell entry, the underlying receptors as well as
effects on post-invasion events are only poorly understood.

We here show that ASM is involved within minutes after the pathogen contacts host cells and is
concurrent with ASM-independent uptake pathways. We demonstrate that the infection outcome of
bacteria that enter the host cells via this rapid pathway is distinct from other entry mechanisms.

We observed a reduction of bacterial invasiveness upon treatment with different ASM inhibitors (**Figure
2**, C, D) or removal of the enzyme substrate SM from the plasma membrane (**Figure 2**, E) confirming
that ASM activity on the host cell surface is crucial for pathogen internalization.

Release of ASM is caused by lysosomal exocytosis (56). Consequently, the inhibitor Vacuolin-1 as well
as genetic ablation of Syt7, a key protein in lysosomal exocytosis (55), resulted in drastically reduced
internalization of bacteria (**Figure 2**, A, B).

Elevation of cytosolic Ca^{2+} levels lead to recruitment of lysosomes to the cell surface (53). Whereas
most studies implicated Ca^{2+} influx from the extracellular milieu (8, 10), we here demonstrate that *S.
aureus* mainly triggers lysosomal Ca^{2+} mobilization as was shown by treatment with the inhibitor *trans*-
Ned19 as well as a genetic K.O. of the endo-lysosomal Ca^{2+} channel TPC1 (**Figure 1**, D and E; **Supp.
Figure 1**, G). TPCs have previously been associated with regulation of phagocytic processes (62) and
host cell entry of several viruses such as Ebola virus (63), Middle East respiratory syndrome coronavirus
[MERS-CoV, (64)] or SARS-CoV-II (65).

TPC-dependent Ca^{2+} liberation was shown to induce exocytosis, for instance, during release of cytolytic
granules from T cells (66) or in interplay with TRPM4 during secretion of insulin (67). Consistently, the
TRPM4 channel blocker 9-Phenantrol reduced internalization of *S. aureus* by host cells (**Figure 1**, B).
Interestingly, exogenous addition of a bacterial SMase immediately before infection rescued the
invasion defect in TPC1 and Syt7 K.O. cells (**Figure 2**, F) indicating that reduced invasion results from
a decreased delivery of ASM to the host cell surface. Thus, NAADP-dependent Ca^{2+} liberation from
lysosomal stores mediates Syt7-dependent fusion of lysosomes with the plasma membrane resulting in
the release of ASM (**Figure 5**, F).

Inhibition of CD38, a known NAADP producer (49, 50), did not influence uptake of staphylococci
(**Supp. Figure 1**, L). By contrast, we detected a decreased invasion in cells deficient for the Toll-like
receptor adaptor protein SARM1, an alternative NAADP producer (52). However, the role of SARM1
in lysosomal exocytosis and ASM release requires further investigation. The impact of SARM1 on
internalization of *S. aureus* was rather moderate, suggesting the existence of other NAADP-generating
enzymes.

One important characteristic of the ASM-dependent internalization pathway is its velocity - taking place
within the initial ten minutes of an infection with *S. aureus*, during which treatment with small molecules
(**Figure 3**, D), as well as genetic ablation of TPC1 (**Figure 1**, E) and Syt7 (**Figure 2**, B) resulted in
reduction of intracellular bacteria. This was accompanied by the quick formation of *S. aureus*-containing
phagosomes decorated with fluorescent SM analogs (**Figure 3**, A; **Supp. Figure 3**, **Supp. Video 1**,
Supp. Video 2).

When we blocked the rapid internalization pathway by ASM inhibitors (**Figure 4**, A, C; **Supp. Figure
4**, B), Vacuolin-1 (**Supp. Figure 4**, F) or by removal of surface SM (**Figure 4**, A, E; **Supp. Figure 4**, B,
H), we observed changes in both, maturation of bacteria-containing vesicles and phagosomal escape. A
delayed maturation of phagosomes may affect acidification of the vesicles, a property that is sensed by

S. aureus leading to expression of a different subset of virulence factors (68) and hence may alter
intracellular pathogenicity. Phagosomal escape of *S. aureus* only was dependent on SM on the plasma
membrane during invasion but not on the presence of SM within the phago-endosome (**Figure 4**, D-G;
Supp. Figure 4, H, I). This not only corroborated that phagosomal escape of clinically relevant *S. aureus*
strains is independent of the bacterial SMase β-toxin (36), but also demonstrated that the outcome of
phagosomal escape is influenced by processes at the plasma membrane during cell entry.
To exclude that inhibitor or bSMase treatments caused changes in phagosomal escape by affecting
cellular processes other than bacterial uptake, we infected untreated WT cells with *S. aureus* for 10 or
30 min, respectively, and monitored phagosomal escape. Bacteria that invaded within the first 10
minutes after contacting host cells ("early invaders") are predominantly ASM-dependent (**Figure 3**) and
demonstrated significantly less phagosomal escape (**Figure 4**, G, H). Consistently, blocking the ASM-
dependent pathway led to increased proportions of ASM-independent invaders, which in turn resulted
in higher escape rates (**Figure 4**, C, E; **Supp. Figure 4**, F). Intracellular *S. aureus* infections thus are
directly influenced by the mode of internalization. This ultimately resulted in lower host cytotoxicity
(**Figure 5**, C-E; **Supp. Figure 6**) and bacterial replication (**Figure 5**, B) when we blocked the ASM-
dependent invasion.
An uptake-related intracellular fate has been suggested for *Mycobacterium bovis* (39), *Toxoplasma*
gondii (41) or *Brucella abortus* (42). However, in these studies the host cells were either depleted from
cholesterol, which causes a variety of side effects (40), or internalization was artificially induced by
chemicals or ectopic expression of receptors, respectively.
Taken together, we here describe a rapid internalization pathway for *S. aureus* into human epithelial and
endothelial cells. Bacteria that enter the host cells via this infection route face a distinct intracellular
fate. Here we show, to our knowledge, for the first time that host cells within the same population can
be invaded by a pathogen via distinct routes and that this results in a differential infection outcome.
Rapid internalization may prove beneficial for pathogens in an *in vivo* setting since internalization by
host cells shortens the exposure to the innate immune system within a host. Interestingly, the absence of
ASM in *Smpd1*$^{-/-}$ mice enhanced the potency of antibiotics to clear *S. aureus* sepsis (69). It is tempting
to speculate that reduced host cell invasion in absence of ASM caused a prolonged exposure of the
pathogen to antibiotics. Several FIASMAs are already approved drugs (70), and may have future use in
infection treatment.

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respectively). pLX304-Flag-APEX2-NES was a gift from Alice Ting (Addgene plasmid # 92158, (73))
and pSpCas9(BB)-p2A-GFP (PX458) (74) was a gift from Feng Zhang (Addgene plasmid # 48138;
http://n2t.net/addgene:48138). Figures were created in BioRender.

Author Contributions:

M.R., M.F. conceptualized the work, designed the methodology and wrote the original draft manuscript. M.F. acquired funding. M.R. F.S., K.U., M.P., A.M., N.K., J.W., A.I., C.K., K.P. performed the experiments; M.R., M.F. supervised the experiments. M.R., C.A., M.F. analyzed the data; all authors edited and revised the manuscript.

Declaration of interests.

Patentability of PCK310 is currently evaluated by C.K. and C.A.

434 **Materials and Methods**

435 **Table 1 Oligonucleotides used in this study**

Purpose	Name	sequence (5´→ 3´)
Gene deletion	Syt7-sgRNA2 rv	AAACATGACGTCATTGCGGCTGAG
	Syt7-sgRNA2 fw	CACCCTCAGCCGCAATGACGTCAT
	Syt7-sgRNA1 rv	AAACCACGATGAGTCCGACCGCCG
	Syt7-sgRNA1 fw	CACCCGGCGGTCGGACTCATCGTG
	TPCN1-sgRNA2 rv	AAACAGGACGGCGCTCCTCATCTT
	TPCN1-sgRNA2 fw	CACCAAGATGAGGAGCGCCGTCCT
	TPCN1-sgRNA1 rv	AAACTTCAGACCCCGTAAGTAATC
	TPCN1-sgRNA1 fw	CACCGATTACTTACGGGGTCTGAA
	SARM1-sgRNA1 rv	AAACTAGAGTCGAGCAACGGCACG
	SARM1-sgRNA1 fw	CACCCGTGCCGTTGCTCGACTCTA
	SARM1-sgRN2 rv	AAACGCACGTAGAATAGTTGGCGA
	SARM1-sgRNA2 fw	CACCTCGCCAACTATTCTACGTGC
Cloning	MP-mRFP-f	GAGACTAGCCTCGAGGTTTAAACCACCATGGCCTCCTCCGAGGACGTC
	euk_mRFP-r	GGAATGCCCGGGCGCGCCGGTGGAGTGGCGGC
	infus-CWT-f	ACCGGCGCGCCCGGGCATTCCACGCCCAATACAGGTTGG
	infus-CWT-r	GAGGTTGATTATCATATGACTAGTTCACTTTATAGTTCCCCAAAG
	eYFP-rev	CTTGTTGATGGGCTCGAGCCCTTGTACAGCTCGTCCATGCCGAG
	Pm-eYFP-inf	GACTAGCCTCGAGGTTTAAACCACCATGGTGAGCAAGGGCGAGGAG
	hLysenin-infus-r	GAGGTTGATTATCATATGACTAGTTCAGCCCACCACCTCCAG
	InfReamp-f	GGCTCGAGCCCATCAACAAG
	cYFP-f	ATGGTGAGCAAGGGCGAGGAGCTG
	his1-Flag-f	CATCATCATCATCACGGAGCGGACTACAAGGATGACGACGATAAGG
	his2-Inf-f	GACTAGCCTCGAGGTTTAAACCACCATGGCACATCATCATCATCATCA CGGAGCG
	Apex-YFP-infus-r	CGCCCTTGCTCACCATCTCGAGCCGTCCAGGGTCAGGCGCTCC

Cell culture

HeLa (ATCC CCL-2™), 16HBE14o- (kindly provided by Prof. Jan-Peter Hildebrandt, University of
Greifswald) and EA.hy 926 (75) were cultivated in RPMI+GlutaMAX™ medium (Gibco™, Cat. No.
72400054) supplemented with 10% (v/v) heat-inactivated (56°C at 30 min) fetal bovine serum (FBS,
Sigma Aldrich, Cat. No. F7524) and 1 mM sodium pyruvate (Gibco™, Cat.No. 11360088).
HuLEC-5a (ATCC CRL-3244™) and HuVEC (Gibco™, Cat. No.C01510C) were cultured in
MCDB131 medium (Gibco™, Cat. No. 10372019) complemented with microvascular growth
supplement (Gibco™, Cat. No. S00525), 2 mM GlutaMAX™ (Gibco™, 35050061), 5 % (v/v) heat-
inactivated (56°C at 30 min) FBS, 2.76 µM hydrocortisone (Sigma Aldrich, Cat. No. H0888), 0.01 ng/ml
human epidermal growth factor (Pep Rotech, AF-100-15) and 1x Penicillin-Streptomycin (Gibco™, Cat.
No. 15140122).
HeLa
HuLEC and HuVEC were detached by StemPro™ Accutase™ (Gibco™, Cat. No. A1110501) and
seeded at the indicated density two days prior to the experiment, whereas HeLa, 16HBE14o- and EA.hy
926 were detached with TrypLE™ (Gibco™, Cat. No. 12604013) and seeded one day prior to the
experiment.
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Generation of HeLa KO cell lines.

Generation of K.O. cell lines is based on a previous protocol (74). sgRNAs (**Table 1**) were designed with the CHOPCHOP online tool (chopchop.cbu.uib.no) and synthesized as primer pairs (Sigma Aldrich). After phosphorylation with T4 nucleotide kinase (ThermoFisher, Cat. No. ER0031), the sgRNAs were cloned into the BbsI sites of pSpCas9(BB)-p2A-GFP (AddGene #48138, (74)) via forced ligation by BbsI (ThermoFisher, Cat. No. ER1012) and T4 Nulceotide ligase (ThermoFisher, Cat. No. EL0011). The constructs were then transformed in *E. coli* DH5α (ThermoFisher, Cat. No EC0112) and subsequently sequence verified.

HeLa cells were transfected with 1 μg each of two distinct sgRNA constructs using JetPrime (Polyplus) following the manufacturer's instructions. After 36-48h, cells were sorted for strong GFP expression in a FACS Aria III (BD Bioscience). The resulting cell pools were cultivated and tested for loss of expression of the respective sgRNA target by Western Blotting.

Following antibodies were used: mouse anti-PTK7 monoclonal IgG1 (bio-techne, Cat. No. MAB4499) with a horse radish peroxidase (HRP)-conjugated anti-mouse antibody (SantaCruz, Cat. No. sc-516102) and rabbit anti-TPC1 polyclonal (Thermo Fisher, Cat. No. PA5-41048) with an HRP-conjugated anti-rabbit antibody (Biozol, Cat. No. 111-035-144).

Generation of reporter constructs.

pLV-mRFP-CWT. mRFP and the cell wall-targeting domain of lysostaphin CWT were amplified using primers MP-mRFP-f and euk_mRFP-r, as well as infus-CWT-f and infus-CWT-r, respectively. As PCR templates we used pmRFP-LC3 (PMID 17534139) and pLV-YFP-CWT (76). The resulting plasmid was termed pLV-mRFP-CWT. The PCR products were subsequently cloned into pLVTHM (72) restricted with PmeI and SpeI by InFusion cloning following the manufacturer's recommendations.

pLV-YFP-Lysenin. The sequence of the sphingomyelin-binding but not pore-forming earthworm toxin mutant Lysenin[W20A] (61) was synthesized by GeneArt (ThermoFisher) using a human codon usage and 5' flanking region encoding a glycine-rich linker sequence. The synthesized template served as template for subsequent PCRs.

Lysenin[W20] was amplified using oligonucleotides InfReamp-f and hLysenin-infus-r (**Table 1**).

YFP was amplified with Pm-eYFP-inf and eYFP-rev from template pLVTHM-YFP-CWT (76). Both PCR products were joined with pLVTHM vector restricted with PmeI and SpeI by InFusion cloning following the manuacturer's recommendations, thereby creating pLV-YFP-Lysenin.

Constructs were transformed into *E. coli* DH5α and sequences were validated. Plasmid preparations were performed using standard laboratory procedures. VSV-G-pseudotyped Lentiviral particles were generated by transfecting with each lentiviral vector as well as the plasmids pMD2.G (VSV G) and psPAX2 following the protocol of (72) and target cells were transduced as described previously (76).

S. aureus culture

S. aureus liquid cultures were either grown in 37 g/L brain heart infusion (BHI) medium (Thermo Fisher, Cat. No. 237300) or in 30 g/l TSB medium (Sigma Aldrich, Cat. No. T8907). *E. coli* liquid cultures were grown in LB medium [10 g/l tryptone/peptone (Roth, Cat. No. 8952.4,) 5g/l yeast extract (Roth, Cat. No 2363.2), 10 g/l NaCl (Sigma Aldrich, Cat. No. S5886)].

For agar plates, 15 g/L agar (Otto Norwald, Cat. No. 257353), was added to either TSB (*S. aureus*) or LB (E. coli).

Media and plates were supplemented with appropriate antibiotics [5 μg/ml erythromycin (Sigma Aldrich, Cat. No. E5389), 10 μg/ml chloramphenicol (Roth, Cat. No. 3886.2), 100 ng/ml Carbenicillin (Roth, Cat. No. 6344.2)].

503 Strains used in this study are listed in **Table 2**.
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505 **Table 2 Bacterial Strains used in this study**

Strain	Remarks	Source
S. aureus 6850		(77)
S. aureus 6850 Δ*hlb*	deficient in β-toxin production	(36)
S. aureus Cowan I	NCTC 8530, isolated from septic arthritis, agr dysfunction, low expression of toxins and proteases	ATCC 12598
S. aureus JE2	MRSA, USA300	(78)
S. aureus JE2 Δ*hla*	deficient in α-toxin production	(79)
S. aureus JE2 Δ*hlb*	deficient in β-toxin production	(45)
S. aureus JE2 SarAP1 Cerulean	Constitutive expression of the fluorescence protein Cerulean	This work
S. aureus JE2 SarAP1 mRFP	Constitutive expression of the fluorescence protein mRFP	(38)
S. aureus JE2 p*Cer*	Anhydrous tetracycline (AHT) inducible expression of Cerulean, construct published in (80) and was transduced into *S. aureus* JE2	This work
S. aureus JE2 p*Cer*+*hlb*	Anhydrous tetracycline (AHT) inducible expression of Cerulean and β-toxin, construct published in (80) and was transduced into *S. aureus* JE2	This work
S. aureus Cowan I *SarAP1 Cerulean*	Constitutive expression of the fluorescence protein Cerulean	This work
S. aureus 6850 SarAP1 Cerulean	Constitutive expression of the fluorescence protein Cerulean	(38)
S. aureus 6850 Δ*hlb* SarAP1 Cerulean	Constitutive expression of the fluorescence protein Cerulean	This work

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***S. aureus* growth curves**
S. aureus overnight cultures were grown in BHI medium, and 1 ml was centrifuged at 14,000 for 1 min.
Bacteria were washed thrice with DPBS and either resuspended in BHI (for amitriptyline and ARC39
treatment) or infection medium [MCDB131 medium (Gibco™, Cat. No. 10372019) complemented with
2 mM GlutaMAX™ (Gibco™, 35050061) and 10 % (v/v) heat-inactivated (56°C at 30 min) FBS, for
ionomycin treatment). Bacteria suspensions were diluted to $OD_{600}=0.1$ in the respective medium. Then,
400 µL per well of the suspension as well as respective blanks were transferred into a 48 well plate and
OD_{600} was determined every 16 min in Tecan mPlex200 microplate reader.
***S. aureus* infections**
Host cells were seeded in 6 well plates ($2x10^5$ cells per well), 12 well plates ($1x10^5$ cells per well) or 24
well plates ($0.5x10^5$ cell per well) either one day (HeLa, EA.hy 926, 16HBE14o⁻) or two days (HuLEC,
HuVEC) prior to the experiment. Host cells were washed thrice with DPBS and infection medium or
Ca^{2+}-free infection medium [DMEM w/o calcium (Gibco™, Cat. No. 21068028) complemented with
10 % (v/v) heat-inactivated (56°C at 30 min) FBS and 200 µM BAPTA (Merck Millipore, 196418)]
with or without 1.8 mM $CaCl_2$ (Roth, Cat. No. 5239.1) was added. If indicated, cells were pretreated
with compounds prior to infection (for details about treatments see **Table 1**). For experiments involving
blocking of receptors by antibodies, respective solvent controls were implemented (final concentrations
in infection medium: 0.002% (w/v) NaN_3 (Sigma Aldrich, Cat. No. S2002) 5% glycerol (Roth, Cat. No

3783.2) in 10% DPBS for 30 ng/ml anti-NRCAM antibody as well as well as 0.01 % (w/v) NaN$_3$ for
50 ng/ml anti-CD73 and 50 ng/ml anti-MELTF antibodies.

Table 3 Host cell treatment with various compounds

compound	Supplier/Cat.No.	preincubation time	removal prior to infection?
2-APB (2-Aminoethoxydiphenylborate)	Sigma Aldrich/ D9754	75 min	removed prior to infection
8-Bromo-cADPR (8-Bromo-cyclic ADP ribose)	Biolog/065-005	75 min	present during infection
9-Phenantrol	Biomol/ Cay15248-50	75 min	present during infection
amitriptyline	Sigma Aldrich/ A8404	75 min	present during infection
ARC39	(57)	18 h, add fresh inhibitor for another 4h or as indicated	present during infection
BAPTA-AM	Merck Millipore/ 196419; (44)	25 min	removed prior to infection
BODIPY-FL^{TM}-C12-Ceramide	Santa Cruz/ sc-503923	90 min	present during infection
BODIPY-FL^{TM}-C12-Sphingomyelin	ThermoFisher/D7711	90 min	present during infection
CD38i/78c	Sigma Aldrich/ 5387630001	75 min	present during infection
Ionomycin	Sigma Aldrich/ I0634	75 min	present during infection
PCK310	To be published elsewhere	4h or as indicated	present during infection
trans-Ned19	Sigma Aldrich/ SML2830; (48)	75 min	present during infection
Vacuolin-1	Biozol/ MCE-HY-118630	75 min	present during infection
β-toxin	Sigma Aldrich/ S8633	75 min	removed prior to infection if not indicated otherwise

An *S. aureus* overnight culture grown in BHI containing the appropriate antibiotics was diluted to an
OD$_{600}$=0.4 in the same medium. When inducible expression of genes was required for the strains *S.*
aureus JE2 p*Cer* and *S. aureus* JE2 p*Cer+hlb,* 200 ng/ml anhydrous tetracycline (AHT, AcrosOrganics,
233131000) was added. The culture was grown to an OD$_{600}$= 0.6-1.0 and 1 ml bacterial suspension was
harvested by centrifugation and washed twice with Dulbecco's Phosphate Buffered Saline (DPBS,
Gibco^{TM}, Cat. No 14190169). The bacteria were resuspended in infection medium (or Ca^{2+}-free infection
medium when infection was performed in absence of extracellular Ca^{2+}). The number of bacteria per ml
in the suspension was determined with a Thoma counting chamber and the MOI was determined. If not
indicated otherwise, an MOI=10 was used for infections.

The infection was synchronized by centrifugation 800xg/8 min/RT (end of the centrifugation: t=0). To
determine bacterial invasion, the infection was stopped after 30 min (unless indicated otherwise) by
removing extracellular bacteria with 20 µg/ml Lysostaphin (AMBI, Cat. No. AMBICINL) in infection
medium for 30 min. Then, host cells were washed thrice with DPBS, lysed by addition of 1 ml/well (12
well plate) or 0.5 ml/well (24 well plate) Millipore water and the number of bacteria in lysates was
determined by plating serial dilutions (10^{-1}, 10^{-2}, 10^{-3}) on TSB agar plates. Plates were incubated
overnight at 37 °C and CFU were enumerated. To determine invasion efficiency, the number of bacteria
determined in tested samples were normalized to untreated controls (set to 100%).
For measuring invasion dynamics, the number of bacteria was either normalized to the 30 min time point
of untreated controls or to the corresponding time points of untreated controls.
If later time points in infection were investigated, infection medium containing 2 µg/ml Lysostaphin
was added to the cells until the indicated time.
For testing bacterial susceptibility to inhibitors ("survival") or adherence, Lysostaphin treatment was
omitted, and host cells were immediately lysed by addition of Millipore water or washed five times with
DPBS and subsequently lysed with Millipore water, respectively. The number of bacteria in lysates was
determined by CFU counting (dilutions 10^{-2}, 10^{-3}, 10^{-4}) on TSB agar plates.
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Phagosomal escape assays

For phagosomal escape assays with amitriptyline, ARC39, PCK310 and β-toxin, HeLa cells expressing
RFP-CWT and Lysenin[W20A]-YFP were infected with the indicated *S. aureus* strain as described in the
previous paragraph. Infections with *S. aureus* JE2 p*Cer* and *S. aureus* JE2 p*Cer+hlb* were carried out in
presence of 200 ng/ml AHT.
For phagosomal escape assays, HeLa cells expressing RFP-CWT and Lysenin[W20A]-YFP were infected
for 10 min (early invaders) or 30 min (early and late invaders) at the indicated MOIs.
For the phagosomal escape assays with two *S. aureus* JE2 strains expressing different fluorescence
proteins, HeLa cells expressing YFP-CWT were infected with an MOI=5 of an initial *S. aureus* JE2
strain (*S. aureus* JE2 SarAP1 Cerulean or *S. aureus* JE2 SarAP1 mRFP). After 12 min of infection, a
second infection pulse was initiated by adding the second *S. aureus* JE2 strain (expressing the
complementary fluorescence protein, *S. aureus* JE2 SarAP1 mRFP or *S. aureus* JE2 SarAP1 Cerulean,
respectively) and centrifuging the bacteria on the host cells. To exclude that the type of fluorescence
protein expressed by the *S. aureus* strains contributes to the experimental outcome, either strain was
used for the first and second infection pulse (each combination: n=4).
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Phagosomal maturation assays

To monitor phagosomal maturation, HeLa cells expressing mCherry-Rab5 and YFP-Rab7 or YFP-Rab7
and RFP-CWT were infected with *S. aureus* JE2 SarAP1 Cerulean.
After 3 h p.i. (unless indicated otherwise), cells were washed thrice with DPBS and fixed with 0.2%
glutaraldehyde (Sigma Aldrich, Cat. No. 10333) / 4% paraformaldehyde in PBS (Morphisto, Cat. No
11762.01000) for 30 min at RT. Then, cells were washed thrice with DPBS, stained with 5µg/ml Hoechst
34580 (Thermo Fisher, Cat. No. H21486) and mounted in Mowiol [24g glycerol (Roth, Cat. No. 3783.2),
9.6 g Mowiol®4-88 (Roth, Cat. No 0713.2), 48 ml 0.2 M TRIS-HCl pH 8.5 (Sigma Aldrich, Cat. No
T1503), 24 ml Millipore water].
Samples were imaged with a Leica TCS SP5 confocal microscope (Wetzlar, Germany; Software Leica
LAS AF Version 2.7.3.9723) with a 40x immersion oil objective (NA1.3) and a resolution of 1024x1024
pixels [Cerulean (Ex. 458 nm/Em. 460-520), YFP (Ex. 514 nm/Em. 520-570nm), mRFP/mCherry (Ex.
561 nm/Em.571-635nm) and Hoechst 34580 (Ex. 405 nm/Em.410-460nm). At least 10 fields of view
per samples were recorded.
Image analysis was performed in Fiji (81) using a previously described macro (80) that identifies and
extracts individual bacteria from images as regions of interest (ROIs, see **Supp. Figure 5**).

Subsequently, fluorescent intensity in every channel is measured to determine recruitment of
fluorescence reporters to the bacteria. Results were exported as text files and proportion of bacteria that
recruited individual reporters was determined with the Flowing 2 software (Turku Bioscience Center).
Phagosomal escape rates were determined as the proportion of CWT-positive bacteria of the total
number of intracellular bacteria. Similarly, the proportion of Lysenin[W20A]-positive escape events, the
ratio of Lysenin[W20A]-/CWT-positive events and all CWT-positive events was calculated.
To measure the proportion of bacteria that were associated with Rab5 and/or Rab7, the proportion of
Rab5- and/or Rab7-positive membranes around bacteria of all intracellular bacteria was determined. For
experiments obtained with HeLa cells expressing YFP-Rab7 and RFP-CWT, bacteria that acquired RFP-
CWT were removed from the dataset. Subsequently, the proportion of Rab7-positive bacteria in relation
to all CWT-negative intracellular bacteria was determined.
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Live cell imaging
The indicated host cells were seeded one (HeLa) or two days (HuLEC) prior to the experiments in μ-
slide 8 well live cell chambers (ibidi, Cat. No 80826-90) with a density of 0.375×10^5 cells per well.
For monitoring host cell entry, cells were washed thrice with DPBS and were then, incubated for 90 min
in infection medium with 1 μM BODIPY-FL-C_{12}-sphingomyelin (Thermo Fisher Cat. No. D7711), 10
μM BODIPY-FL-C_{12}-ceramide (Santa Cruz, Cat.No. sc-503923) or 10 μM visible-range FRET probe
(59). Pretreatment with the FRET probe was performed in infection medium containing 1 % (v/v) FBS.
Then, cells were washed thrice with DPBS and imaging medium [RPMI 1640 w/o phenol red (Gibco™,
Cat. No. 11835030) containing 10% (v/v) heat-inactivated (56°C/30 min) FBS (Sigma Aldrich, Cat. No.
F7524) and 30 mM HEPES (Gibco™, Cat.No. 15630080)] applied. Samples stained with the FRET
probe were imaged in imaging medium containing 1% FBS and in presence of 10 μM FRET probe.
Samples were infected with *S. aureus* JE2 SarAP1 Cerulean (FRET probe samples) or *S. aureus* JE2
SarAP1 mRFP (BODIPY-FL-C12-sphingomylein/-ceramide) at an MOI=50 without synchronization
by centrifugation. Infection was monitored with a Leica TCS SP5 confocal microscope (Wetzlar,
Germany) in intervals of 1 min by recording BODIPY-FL (Ex. 496 nm/Em. 500-535 nm), mRFP (Ex.
561 nm/Em.571) FITC (Ex. 488 nm/Em. 500-560), Cerulean (Ex. 458 nm/Em. 460-520), BODIPY-TR
(Ex. 594 nm/Em. 610-680) and FRET (Ex.488 nm/ Em:610-680) channels. Cells were recorded with a
40x immersion oil objective and a resolution of 2048x2048 pixels. For samples stained with the FRET
probe, 20 μg/ml lysostaphin was added 40 min p.i. to remove extracellular bacteria.
For quantification of bacteria that associate with BODIPY-FL-C_{12}-sphingomyelin/-ceramide, individual
bacteria in single frames were identified, extracted as ROIs and BODIPY-FL fluorescence in ROIs was
measured in Fiji (81) as described before for phagosomal escape assays. Results were extracted as text
files and the proportion of bacteria associating with BODIPY-FL was determined with Flowing2 (Turku
Bioscience Center).
For monitoring intracellular *S. aureus* infection, host cells were pretreated and infected with
S. aureus JE2 SarAP1 Cerulean (HeLa RFP-CWT/Lysenin[W20A]-YFP) or *S. aureus* JE2 SarAP1 mRFP
(HuLEC) as described in "*S. aureus* infection". HuLEC additionally were treated with 1 μM BODIPY-
FL-C_{12}-sphingomyelin in infection medium for 90 min and washed thrice with DPBS before the
indicated treatment was applied. After extracellular bacteria were removed with 20 μg/ml lysostaphin
for 30 min, imaging medium containing 2 μg/ml lysostaphin was applied and infections were monitored
in intervals of 5 min (HeLa RFP-CWT) or 20 min (HuLEC). Phagosomal escape was evaluated in Fiji
as described above. To determine intracellular replication, the number of bacteria was determined for
each individual frame as described before (80). The number of bacteria at each time point was then
normalized to the number of bacteria detected in the first frame to calculate the relative replication.
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ASM and NSM activity assays

Thin layer chromatography (TLC)-based ASM/NSM activity assays were adapted from previously published protocols (58). To determine cellular ASM activity, the indicated cell lines were seeded in 24 well plates with a density of 1×10^5 cell per well one day (HeLa, EA.hy 926, 16HBE14o⁻) or two days (HuLEC, HuVEC) prior to the experiment. Cells were either treated with 20 μM amitriptyline or with 10 μM ARC39 for 22 h (fresh inhibitor was applied after 18h) in infection medium. Then, cells were washed thrice and lysed by addition of 100 μL per well ASM lysis buffer [250 mM NaOAc pH 5 (Roth, Cat. No 6773.2), 0.1% Nonidet® P40 substitute (AppliChem. Cat. No. A1694,0250), 1.3 mM EDTA 1.3 mM (Roth, Cat. No. 8040.2), 1x protease inhibitor cocktail (Sigma Aldrich, 11873580001)] for 15 min/4°C. Cells were scraped from the substratum and protein concentration in the resulting lysates was measured with a Pierce™ bicinchoninic acid (BCA) assay kit (Thermo Fisher, Cat. No. 23227). 1 μg of protein was incubated with 100 μL ASM lysate assay buffer [200 mM NaOAc pH 5 (Roth, Cat. No 6773.2), 0.02 % Nonidet® P40 substitute (AppliChem. Cat. No. A1694,0250), 500 mM NaCl (VWR, Cat. No. 27810.364)] containing 0.58 μM BODIPY-FL-C$_{12}$-Sphingomyelin (Thermo Fisher, Cat. No. D7711) for 4h at 37°C and 300 rpm.

For measuring bacterial SMase/NSM activity in *S. aureus* cultures, an overnight culture of the indicated strain was grown in BHI medium, centrifuged 14.000xg and the supernatant was sterile filtered with 0.2 μm filter. 100 μL of sterile supernatant was incubated with 100 μL NSM assay buffer [200 mM HEPES, pH 7.0 (Roth, Cat. No. 6763.3), 200 mM MgCl$_2$ (Roth, Cat.No. 2189.2), 0.05% Nonidet P-40 (AppliChem. Cat. No. A1694,0250)] for 4h/37°C/300 rpm.

The reactions were stopped by addition of 2:1 CHCl$_3$:MeOH (Roth, Cat. No. 3313.2 and Cat. No. 8388.6). Samples were vortexed, centrifuged at 13,000 x g for 3 min and 50-100 μL of the lower organic phase were transferred to a fresh tube. Samples were completely evaporated using a SpeedVac 5301 concentrator (Eppendorf), resuspended in 10 μL 2:1 CHCl$_3$/MeOH and spotted in 2.5 μL aliquots on a TLC plate (Alugram, Xtra Sil G/UV254, 0.2 mm/silica gel 60; VWR, Cat. No. 552-1006).

Plates were developed using 80:20 CHCl$_3$ and subsequently scanned with a Typhoon 9200 Scanner (Amersham). For quantification, intensities of the lower (SM) and the upper bands (Cer) were measured in Fiji (81) and activity was determined based on the reaction time, protein amount and SM/Cer ratios. For the flow cytometry based read out, cells seeded in a density of 0.5×10^5 cells per well in a 24 well plate either one day (HeLa, EA.hy 926, 16HBE14o⁻) or two days (HuLEC, HuVEC) prior to the experiment. Cells were treated with ARC39 and amitriptyline as described above. Then, cells were washed thrice with DPBS and incubated with 10 μM FRET probe (59) for 2h in presence of the inhibitors. Subsequently, cells were washed thrice, detached with TrypLE™ (Gibco™, Cat. No. 12604013) and resuspended with 2% (v/v) FBS in DPBS. Samples were analyzed for FITC (Ex. 488 nm/Em. band pass 530/30 nm) and BODIPY-TR (Ex.: 561nm/ Em. band pass 695/40nm) fluorescence with Attune NxT flow cytometer (Thermo Fisher, Attune Cytometric Software v5.2.0). Cell populations were analyzed for FITC and BODIPY-TR mean fluorescence in Flowing 2 (Turku Bioscience Center) and FITC vs. BODIPY-TR ratios were calculated to determine arbitrary probe conversion.

Cytotoxicity Assays

For all cytotoxicity assays, HuLEC were seeded in 24 well plates with a density of 0.5×10^5 cells per well two days prior to the experiment. Then, cells were infected with *S. aureus* JE2 with the indicated MOI as described in "*S. aureus* infection" and cytotoxicity was determined 21 h p.i. For cytotoxicity measurements upon ionomycin treatment, cells were incubated with the indicated concentration of ionomycin in infection medium for 75 min and then, cytotoxicity assays were conducted.

Lactate dehydrogenase (LDH) assay was performed with the Cytotoxicity Detection KitPLUS (LDH, Sigma Aldrich, Cat. No. 4744934001) according to manufacturer's instructions.

For annexin V and 7-Aminoactinomycin D (7-AAD) assays, cells were washed thrice with DPBS, detached with 250 μL per well trypsin and resuspended in 250 μL per well staining buffer [1.7% (v/v)

APC Annexin V (BD Pharmingen™, Cat. No. 550475), 1.7% (v/v) 7-AAD (BD Pharmingen™, Cat No. 559925), 2% (v/v) heat-inactivated (56°C/30 min) FBS (Sigma Aldrich, Cat. No. F7524), 4 mM $CaCl_2$ (Roth, Cat. No. 5239.1) in DPBS]. After incubation for 10 min/RT, cells were analyzed with a Attune NxT flow cytometer for 7-AAD (Ex. 488 nm/Em. band pass 695/40 nm) and APC (Ex. 637 nm/Em. band pass 670/14 nm). Cell populations were analyzed with Flowing2 (Turku Biosciences Center) and gates were adjusted according to untreated control cells. To determine the proportion of cells that remained attached to the substratum during the infection, number of cells was determined based on the number of detected single cells, flow rate and sample volume.

Statistical analysis

Statistical analysis was performed in GraphPad prism (V10.1.2). One-sample t-test was used for analysis of normalized data sets. Otherwise, one- or two-way ANOVA, dependent on the number of variables, was used in combination with suitable multiple comparisons testing. Details about sample size and deployed statistical analysis can be found in respective figure legends. All data are shown as mean ± standard deviation.

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Supp. Figure 1 Supporting information for Ca²⁺-dependent internalization of *S. aureus*.
(A) **High ionomycin concentrations interfere with growth of *S. aureus* JE2.** *S. aureus* JE2 was grown in
in presence of varying concentrations of ionomycin. Growth (OD$_{600}$) was determined in a microplate reader.
(B) **Ionomycin does not affect survival of *S. aureus* JE2 during infection of host cells.** HeLa cells were
pretreated with varying concentrations of ionomycin and subsequently, infected with *S. aureus* JE2. After
30 min, cells were lysed and surviving extra- and intracellular bacteria were recovered by CFU count.

(C) Ionomycin does not affect host cell survival. HeLa cells were treated with the indicated concentrations of ionomycin, and cytotoxicity was determined by measuring in lactate dehydrogenase (LDH) release. **(D) 9-Phenantrol does not affect survival of *S. aureus* JE2.** HeLa cells were pretreated with varying concentrations of 9-Phenantrol and infected with *S. aureus* JE2. After 30 min, cells were lysed and surviving extra- and intracellular bacteria were recovered by CFU plating. **(E) Chelation of intracellular but not presence of extracellular Ca²⁺ affects *S. aureus* internalization by HeLa cells.** HeLa cells were preloaded with varying concentrations of the cell-permeable Ca²⁺ chelator BAPTA-AM and then infected with *S. aureus* JE2 in presence (+1.8 mM CaCl₂) or absence (Ca²⁺-free) of Ca²⁺ in the cell culture medium. Invasion efficiency was determined by CFU plating. **(F) α-toxin plays only a subordinate role during *S. aureus* uptake by host cells.** HeLa, HuLEC or HuVEC were infected with *S. aureus* JE2 wildtype or a strain deficient in α-toxin production (Δ*hla*). Invasion efficiency was determined by CFU plating. The number of intracellular bacteria was normalized to samples infected with the wildtype. **(G, H) *trans*-Ned19 but not 2-APB affects invasion of *S. aureus* JE2 in HeLa.** HeLa cells were pre-treated with *trans*-Ned19 (**G**) or 2-APB (**H**). 2-APB was removed from the cells shortly before infection to avoid direct contact of inhibitor and bacteria (due to a bactericidal effect of 2-APB; data not shown). Then, cells were infected with *S. aureus* JE2 and invasion efficiency was determined. **(I, J) *trans*-Ned19 and 2-APB have no effect on *S. aureus* JE2 in our infection protocol.** HeLa cells were pre-treated with or 2-APB (**I**) or *trans*-Ned19 (**J**). 2-APB was removed from the cells shortly before infection. Then, cells were infected with *S. aureus* JE2 and, after 30 min, total bacteria (extra- and intracellular) were recovered by CFU plating. **(K) Reduction of TPC1 expression in a Cas9-treated cell pool (HeLa TPC1 K.O.).** TPC1 as well as GAPDH (loading control) was detected in lysates of wildtype and TPC1 K.O. cells via Western blot. **(L) CD38 is not enrolled in *S. aureus* internalization.** HeLa cells were pretreated with the CD38 inhibitor 78c and invasion efficiency of *S. aureus* JE2 was determined. **(M) Reduction of SARM1 expression in a Cas9-treated cell pool (HeLa SARM1 K.O.).** TPC1 as well as GAPDH (loading control) was detected in lysates of wildtype and SARM1 K.O. cells via Western blot. Statistics: one sample t-test, Bars represent mean +/- SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.

Supp. Figure 2 Supporting information for the involvement of lysosomal exocytosis and ASM in
S. aureus **invasion**
(A) Blocking lysosomal exocytosis by Vacuolin-1 reduces *S. aureus* invasion in HeLa. HeLa cells were
treated with increasing concentrations of the lysosomal exocytosis inhibitor Vacuolin-1. The invasion
efficiency of *S. aureus* JE2 was determined 30 min p.i. **(B) Vacuolin-1 has no bactericidal effect.** HeLa
cells were treated with Vacuolin-1 and infected with *S. aureus* JE2. After 30 min, total bacteria (extra- and
intracellular) were recovered by CFU plating and normalized to untreated controls. **(C, D) The ASM
inhibitors amitriptyline and ARC39 have no effect on growth of *S. aureus*.** *S. aureus* JE2 was grown in
presence of varying concentrations of amitriptyline (**C**) or ARC39 (**D**) in BHI medium and growth was
determined by measuring OD_{600} in a microplate reader. **(E, F) ASM activity and ASM inhibition by
ARC39 and amitriptyline is similar among human cell lines.** Several cell lines were treated with
amitriptyline or ARC39 and ASM activity within cell lysates was assessed by either thin layer
chromatography-based TLC-based ASM activity assays, the conversion of BODIPY-C12-SM (**E**), or by a
flow cytometry-based ASM activity assay and conversion of visible-range FRET probe (**F**). **(G) Removal
of SM from the plasma membrane by β-toxin affects *S. aureus* host cell.** HeLa cells were pretreated with
the indicated concentrations of β-toxin and subsequently the invasion efficiency of *S. aureus* JE2 was
determined. Statistics: one sample t-test (A, G), mixed-effects model (REML) and Tukey`s multiple
comparison (E, F), Bars represent mean +/- SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.

Supp. Figure 3 *S. aureus* associates with a visible-range SM probe during host cell invasion.
(A) Live cell imaging of *S. aureus* infection reveals association of the bacteria with a SM analog during cell
entry. HuLEC were treated with 10 µM of a visible range FRET probe in presence of 1% FBS. Then, cells were
infected with *S. aureus* JE2 in presence of the probe and infection was monitored by live cell confocal imaging.
After 40 min, lysostaphin was added to remove extracellular bacteria. The BODIPY-TR signal demonstrates the
localization of the probe, the FRET signal indicates an intact, non-metabolized probe, whereas FITC fluorescence
indicates probe cleavage by ASM. Bacteria of interest (white arrows) adhere to host cell between 29 and 31 min
p.i. **(B) Hypothetical model of *S. aureus* invasion.** (1). The interaction of bacteria with the host cell surface
triggers lysosomal exocytosis, release of ASM (2) and the uptake of the bacteria (cmp. to A: at 37-39 min p.i.) by
ASM-dependent membrane remodeling (3). ASM is co-internalized together with bacteria (4) and subsequently,
cleaves the probe within the *S. aureus*-containing phagosome (5) (cmp: to A: increasing FITC signal starting at 47
min p.i.).

Supp. Figure 4 Supporting information for phagosomal maturation and phagosomal escape measurements.
(A) Phagosomal escape assay in early infection. A HeLa reporter cell line expressing YFP-Rab7 and RFP-CWT was treated with amitriptyline, β-toxin and PCK310 and subsequently infected with *S. aureus* JE2 for 30 min. Extracellular bacteria were removed by lysostaphin and the proportion of bacteria that acquired the phagosomal escape marker RFP-CWT was determined 45 and 60 min p.i. (n=8). **(B) Reduced association of *S. aureus* with Rab7 is not due to changes in phagosomal escape.** HeLa cells expressing YFP-Rab7 and the phagosomal escape marker RFP-CWT were treated with amitriptyline, PCK310 or β-toxin and subsequently, infected with *S. aureus* JE2 for 45 min and analyzed by CLSMs. Bacteria that escaped from phagosomes were subtracted from the data set and the proportion of residual bacteria associating with Rab7 was determined. Results of treated samples were normalized to untreated controls (n=7). **(C) β-toxin treatment and ASM inhibition reduced invasion efficiency of *S. aureus* JE2 in a dual reporter HeLa cell line.** A HeLa reporter cell line expressing RFP-CWT and Lysenin[W20A]-YFP was treated with the indicated concentrations of β-toxin and amitriptyline for 75 min, the indicated concentrations of ARC39 for 22 h, 0.5 µM PCK310 for 4h or 50/100 nM PCK310 for 22h (o.n.) and

invasion efficiency of *S. aureus* JE2 was determined. (n≥5) **(D) Inhibition of ASM has no influence on the**
proportion of Lysenin^{W20A}-positive escape events. The dual reporter cell line was infected with *S. aureus* JE2.
Extracellular bacteria were removed and the proportion of bacteria that acquired the phagosomal escape marker
RFP-CWT as well as the SM reporter Lysenin^{W20A}-YFP was determined by CLSM. The proportion of escaped
(RFP-CWT-positive) bacteria that additionally acquired Lysenin^{W20A}-YFP was calculated. (n=9). **(E) ASM**
inhibition by amitriptyline increases phagosomal escape of *S. aureus* JE2. The dual reporter cell line was
infected with *S. aureus* JE2 and phagosomal escape rates were determined 3h p.i. (n=8). **(F) Blocking lysosomal**
exocytosis by Vacuolin-1 enhanced phagosomal escape. HeLa RFP-CWT/Lysenin^{W20A}-YFP was pretreated with
1 µM Vacuolin-1 and infected with *S. aureus* JE2 for 10 min. Phagosomal escape rates were determined by CLSM
3 h p.i. (n=4). **(G) β-toxin pretreatment increases phagosomal escape of *S. aureus* JE2 but not *S. aureus***
Cowan I. RFP-CWT and Lysenin^{W20A} -YFP expressing HeLa were treated with 100 ng/ml β-toxin infected with
S. aureus strains JE2 or Cowan I. Thereby, β-toxin was either removed prior to infection (pretreatment only) or
was present during the whole experiment (pretreatment + during infection). By CLSM, proportions of bacteria that
recruited RFP-CWT (phagosomal escape) were determined (n≥3). **(H) *S. aureus* strains vary in β-toxin**
expression. The neutral SMase activity in culture supernatants of the indicated *S. aureus* strains or isogenic β-
toxin mutants (Δ*hlb*) were determined by a TLC-based approach (n=3). **(I, J) β-toxin pretreatment of host cells**
but not β-toxin expression of endocytosed *S. aureus* affects phagosomal escape. HeLa RFP-CWT/Lysenin^{W20A}
-YFP were infected with *S. aureus* 6850 or an isogenic strain deficient in β-toxin production (Δ*hlb*). The proportion
of bacteria that escaped from the phagosome as well as the percentage of phagosomal escape events that were
Lysenin^{W20A} -positive were determined 3h p.i. (n=6). **(K) Increasing the MOI compensates for shorter infection**
times. HeLa cells were either infected for 10 min or 30 min with varying MOIs. Then, the number of intracellular
bacteria per host cell was determined 3h p.i. by CLSM. (n=7). Statistics: Mixed effects analysis (REML) with
Šídák's multiple comparison (A, G), Mixed effects analysis (REML) and Tukey's multiple comparison (I, J),
One-way ANOVA with Tukey's multiple comparison (H), one samples t-test (B, C), unpaired Student's t-test
(E, F). Bars represent mean +/- SD. *p≤0.05, **p≤0.01, ***p≤0.001, ****p≤0.0001.

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Supp. Figure 5 Evaluation of phagosomal escape and Lysenin[W20A] recruitment during *S. aureus* infection. HeLa reporter cells expressing RFP-CWT and Lysenin[W20A]-YFP were infected with *S. aureus* JE2, fixed and imaged by CLSM (**A**). Individual bacteria within the images were identified as regions of interest (ROIs) and extracted in each color channel. All extracted ROIs are depicted in a montage (**B**). If bacteria signals are omitted, the montage of extracted ROIs shows the proportion of reporter recruitment. The average fluorescence intensity of both reporter fluorophores is measured within each individual ROIs is plotted as dot plots (**D**). From these results, the proportion of bacteria that recruited the markers (CWT-RFP = phagosomal escape and Lysenin[W20A] = SM-rich-phagosome) is calculated. **(E-J) Exemplary escape assay.** Montages of extracted ROIs (without bacterial fluorescence) as well as the resulting intensity measurement in individual ROIs 3 h p.i. are depicted for infections of *S. aureus* Cowan I (E, H) and JE2 (F, I) as well as an infection with *S. aureus* JE2 in which host cells were treated with 100 ng/ml β-toxin prior to infection (G, J). Data are quantified in **Figure 4**, C.

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Supp. Figure 6 Inhibition of ASM and β-toxin treatment increase number of host cells remaining attached
to the substratum and reduce host cell lysis during infection. HuLEC were treated with amitriptyline or β-toxin
(**A**) or PCK310 and β-toxin (**B**) and were then infected with *S. aureus* JE2. After 30 min, extracellular bacteria
were removed and the number of cells remaining attached to the substratum was determined (**A**) or the proportion
of host cells that were lysed during the infection was measured by lactate dehydrogenase (LDH) release (**B**).
Statistics: Mixed-effects analysis and Dunnett`s multiple comparison (A, B). Bars represent mean +/- SD. *p≤0.05,
**p≤0.01, ***p≤0.001, ****p≤0.0001.

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1032 **Supplementary Videos**

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1034 **Supp. Video 1 *S. aureus* associates with BODIPy-FL-C$_{12}$-sphingomyelin during invasion**
1035 (for further details, see Figure 3, a)

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1037 **Supp. Video 2 *S. aureus* associates with a visible-range FRET probe during invasion**
1038 (for further details, see Supp. Figure 3)

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1040 **Supp. Video 3 β-toxin pretreatment protects HuLEC from *S. aureus* infection**
1041 (for further details see Figure 5, c)