Complex Human hear bearing Skin Organoids reveal Cell Type Specific Susceptibility and Innate Immune Responses to Herpes Simplex Virus 1

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Abstract

Epithelial surfaces are the initial site of Herpes Simplex Virus 1 (HSV-1) infection. After latency establishment in the peripheral nervous system, reactivation can lead to skin pathologies. To reflect the complexity of skin we used complex human hair bearing skin organoids as a new model system for HSV-1 infection. We analyzed spread of the infection through the three-dimensional tissue and the cell type specific host response in a spatial temporal manner. Single-cell-resolution spatial transcriptomics and imaging shows a restricted viral infection in keratinocytes of the epidermis and hair follicles. The host factor IER3 is upregulated in papillary fibroblasts of the dermis as the infection progresses through the tissue. In keratinocytes of the stratum basale, we find IRF3 upregulated in infected but also virus negative cells, suggesting a signaling mechanism to initiate antiviral responses. Furthermore, we find a cell type specific inflammatory response with an upregulation of TNFSF9 in dermal fibroblasts and TNF in keratinocytes. TNFα target genes are induced in neighboring uninfected cells suggesting the induction of a localized inflammatory reaction to suppress viral infection. In summary, our findings position human hair-bearing skin organoids as a highly physiological model system for studying HSV-1 pathogenesis and reveal spatially organized host responses.

Introduction

Herpes Simplex Virus 1 (HSV-1) is a highly prevalent human pathogen with a global prevalence of ~67% in under 50-year-old individuals[1]. Primary infection usually occurs via the mucosal surfaces or micro-lesions in the skin. Initially HSV-1 productively replicates in the epithelial cells of skin and mucosa causing inflammation and tissue damage and consequently blisters[2]. After replication in epithelial cells, HSV-1 enters the nerve endings of peripheral neurons and travels along their axons to the cell bodies in trigeminal ganglia where it establishes latency[3,4]. Upon spontaneous reactivation, HSV-1 enters the lytic life cycle and produces infectious viral particles that migrate in an anterograde manner to the epithelial cells

of skin and mucosa. The following lytic replication in the epithelium leads to the characteristic

herpes lesions that release virus to the environment[2].

In the past, many different model systems have been used to elucidate the mechanisms of

primary infection and reactivation by HSV-1 in the skin. Due to the complexity of skin and the

involvement of many different cell types, *in vitro* modelling by monolayer cell cultures can only

recapitulate certain aspects of the viral life cycle. More complex model systems used to study

virus susceptibility, spread and cytopathic effects are animal models[5-8], *ex vivo* murine[8-10] and

human skin explants[8,11,12], and epithelial raft cultures[13,14].

While the understanding of HSV-1 pathogenesis in the skin has exceptionally increased using

these model systems, many aspects remain elusive. Especially the susceptibility and

contributions of specific structures, like hair follicles, different fibroblasts subpopulations and

low abundancy cell types, to primary infection, latency establishment and reactivation are not

understood. The field of organoids is constantly evolving and creating potential new model

systems for virus research[15-17]. In this study we used a highly complex skin organoid (SkO)

model generated from human induced pluripotent stem cells (hiPSCs) for the analysis of HSV-

1 pathogenesis in the skin[18,19]. SkOs contain a stratified epidermis, fat-rich dermis, hair follicles

(HFs) producing pigmented hair, sebaceous glands, melanocytes and Merkel cells. The HFs

are innervated by sensory neurons that are covered in Schwann cells on their axons while their

somata assemble in trigeminal like clusters together with satellite glial cells. SkOs contain all

cell types expected in the fetal skin of the second trimester of development except for sweat

glands, vascularization and immune cells[18,19]. Similar to many other organoids, SkOs show an

inside out morphology with the dermis being exterior and exposed to the culture medium and

the epidermis being interior with hair from hair follicles growing to the inside of the organoid.

In this study, SkOs were infected with HSV-1 from the dermal side, leading to viral spread from

the dermis to the epidermis, thereby recapitulating primary infection associated with deep

dermal wounding or viral reactivation. We analyzed the susceptibility of different cell types to

HSV-1 infection and found a restricted HSV-1 infection in keratinocytes as well as in HF cells

of both dermal and epidermal origin. Furthermore, we found the host factors IER3 and IRF3

upregulated in a spatial temporal manner in response to the infection. We found a spatially

restricted inflammatory response by expression of TNF and TNFSF9 leading to downstream

activation of TNF target genes. Overall, our study shows how complex infection models

combined with high-resolution spatial omics methods allow the investigation of cellular

responses and the progression of infection through complex three-dimensional tissues.

Results

Infection of skin organoids (SkOs) with HSV-1

SkOs were produced after the protocol from Lee and collegues[19] and checked for correct

differentiation by brightfield microscopy, immunohistochemistry (IHC) and whole-mount

immunofluorescence (WMI) staining (Supplementary Figure 1A-D). We observed the expected

full complexity at ~120 days of differentiation with the dermis and epidermis in the head

structure and cartilage in the tail. The keratinocytes in the epidermis showed a basal layer and

differentiation into stratum spinosum and granulosum with terminally differentiated dying

keratinocytes accumulating in the head of the SkO (Supplementary Figure 1D). Hair follicles

(HFs) showed the expected structures i.e., dermal papilla, matrix, inner root sheath, and outer

root sheath. We detected Merkel cells and innervation of the HFs with assembly of neuronal

somata in the organoid tail (Supplementary Figure 1B-D).

SkOs at 120 days of differentiation were infected with HSV-1 strain 17 expressing GFP under

the control of a CMV IE-promoter. To observe spread of the infection within the tissue from

single spots, infection was performed with a low viral dose (800 PFU per SkO). At 2dpi GFP

expression was visible by fluorescence microscopy at spots on the surface of the organoid

(Figure 1A). In IHC staining the first layers of fibroblasts in the dermis showed expression of

GFP and HSV-1 glycoprotein D (gD) and indications of a cytopathic effect (CPE). Infection

spread solely among cells of the dermis with exclusion of the HFs (Figure 1B, Supplementary

Figure 2). At 4dpi GFP fluorescence increased and covered the entire organoid (Figure 1A).

IHC staining for GFP and gD showed that the infection reached the inner structures of the

organoid including the HFs and keratinocytes of the basal layer and the stratum spinosum.

Terminally differentiated keratinocytes showed no signs of infection. Similarly, the different cell

layers at the HFs were positive for GFP and gD except for the cornified hair structures (Figure

1B, Supplementary Figure 2). Until 8dpi, we observed no sign of infection in these structures,

as in the cartilage of the organoid tail. At 4dpi a CPE could be observed mainly in the dermis.

At 6dpi infected keratinocytes in the epidermis and the inner cell layers at the HFs started to

show a CPE that resulted in dissolvement of the basal membrane and HF integrity. Taken

together, these findings showed that HSV-1 infects almost all cell types of SkOs with

indications of differential spreading in different cell types.

Bulk transcriptomics of HSV-1 infected skin organoids

To analyze the dynamics of viral gene expression and the host response to the viral infection

we performed bulk RNA-seq of uninfected and HSV-1 infected SkOs at 2, 4, 6 and 8dpi. At

2dpi we observed only 20 differentially expressed genes (DEGs), which increased to ~1000 at

4dpi and ~5000 at 6 and 8dpi (Figure 2A, Supplementary Figure 2B, C). At 4dpi vs. uninfected

we found an enrichment of GO-terms of inflammation (e.g., NFκB signaling, response to tumor

necrosis factor) in the upregulated differentially expressed genes (Figure 2B). At 6 and 8dpi

we found terms of cellular differentiation (e.g., skin development, molting cycle) stand out

among the downregulated DEGs. This could reflect the typical HSV-1 induced host cell

shutoff[20] and the observed CPE. However, the percentage of viral reads reaches ~20% of all

reads already at 4dpi and increases only slightly up to ~25% at 6 and 8dpi (Figure 2C). Overall,

this data indicated that key transcriptional changes are to be expected during the first 4 to 6dpi,

setting the time frame for subsequent experiments.

Spatial transcriptomics of HSV-1 infected skin organoids

To understand the temporal spatial dynamics of the viral infection and the host response in the

SkO model system we performed two spatial transcriptomics experiments with single cell

resolution on the Xenium platform. In the pilot experiment, we profiled sections of each 3 SkOs

uninfected, at 2dpi, and 6dpi. Due to a strong CPE and HSV-1 induced host cell shutoff, we

were not able to perform cell type annotation for most cells at the 6dpi time point (see

Supplementary Note for results of the pilot experiment). Therefor, we switched to 2dpi, 3dpi

and 4dpi timepoints in the main experiment (Figure 3, Supplementary Figure 3). We quantified

the expression of the 470 measured genes, including five viral transcripts (US1, UL27, UL29,

UL54 and LAT). Cell type identities were assigned based on cellular transcriptomes (Figure

3A-D, Supplementary Figure 3A,C,D, see Supplementary Note for cell type assignment

strategy). We identified the expected cell types based on single-cell RNA-sequencing data and

immunostainings performed by Lee and colleagues[18,21]. Additionally, we could distinguish

between subtypes that coincide with specific localization such as different fibroblast types (e.g.,

papillary 1, 2 and mesenchymal) that localize proximal or distal to the epidermis. Keratinocyte

subtypes at different stages of differentiation were distinguishable and clearly spatially

restricted. We annotated the stratum basale and the stratum corneum while the stratum

spinosum and granulosum were combined as one cluster, since the markers in our panel were

not sufficient for separation. Cell types of the HFs (dermal sheath, outer root sheath, inner root

sheath, matrix, bulge region, dermal papilla) were clearly identified and matched their expected

localization. Cell type assignments were also successful in infected SkOs (Figure 3A, D),

despite downregulation of host transcripts in infected cells. This can be visualized e.g., with

complete loss of PDGFRα mRNA, a pan-fibroblast marker, in highly infected cells due to host

cell shutoff[20] (Figure 3B, top panels). However, some highly infected cells, particularly

fibroblasts, lost their transcriptional identity and were thus assigned as "undefined" (Figure 3A,

gray colored cells, Supplementary Figure 3A). Accordingly, the proportion of "undefined" cells

increased in highly infected (4dpi) vs. uninfected organoids but did not exceed ~15% of all cells

(Figure 3D).

Analysis of the expression of the viral transcripts US1/ICP22, UL54/ICP27, UL29/ICP8,

UL27/gB and LAT matched the protein staining, showing infection starting in the outermost

fibroblast layers of the dermis at 2dpi and then spread through the organoid until the infection

reached the epidermis at 4dpi (Figure 3C and Supplementary Figure 3B).

Susceptibility to viral infection varies widely between cell types

To investigate susceptibility and viral gene expression between different cell types in SkOs,

we considered the special features of an infection spreading in a tissue compared to an

infection in a monolayer cell culture. HSV-1 infects the outer layers of the organoids first and

later the more inner parts leading to an asynchronous infection. First, we calculated the

proportion of infected cells and the viral load in the most abundant subtypes, papillary

fibroblasts type 1/2, keratinocytes of the stratum basale and stratum spinosum/granulosum,

and four cell types in HFs (dermal sheath, dermal papilla, outer root sheath, inner root sheath;

Figure 4A). At 3dpi papillary fibroblasts type 1, which is the outermost cell layer of SkOs, and

the dermal sheath fibroblasts had the highest number of HSV-1 infected cells (~25%). Also,

papillary fibroblasts type 1 had a significantly higher viral load than all other cell types including

the dermal sheath. At 4dpi, when the infection reaches the inner parts of the organoid, the

proportion of infected cells increased in all cell types. However, stratum basale and

spinosum/granulosum keratinocytes still showed significantly less infected cells than papillary

fibroblasts (Figure 4A, upper panel). Viral loads were significantly lower than in papillary

fibroblasts type 1 in all cell types except papillary fibroblasts type 2 (Figure 4A, lower panel).

To exclude that this effect was caused by the asynchronous infection spreading from the

outside to the inside we compared stratum basale keratinocytes with papillary fibroblasts at

equal distance ranges from the exterior surface (Supplementary Figure 4AB). Again, we found

significantly lower viral loads. Furthermore, we analyzed the influence of infectious cells in

proximity to basal keratinocytes (<50µm distance) (Supplementary Figure 5A). Infectious cells

were defined as cells with 20% or more viral transcripts. As expected, we found an increase

of the viral load with rising numbers of infectious cells in the neighborhood. Interestingly,

papillary fibroblasts reached their maximum viral load (up to 70% viral transcripts) with 1 to 2

infectious cells in proximity. Keratinocytes of the stratum basale showed a significantly lower

viral load compared to papillary fibroblasts despite the same number of infectious cells in their

neighborhood. Even with >6 infectious cells in proximity the mean viral load did not exceed

25% of all transcripts. To analyze the dynamics of the viral life cycle we ordered and binned

infected cells along increasing viral load. We found in papillary fibroblasts a strong increase of

UL54 RNA at the beginning followed by a plateau, with the LAT RNA constantly accumulating

(Figure 4B, top panel). In stratum basale keratinocytes, there was an indication of a longer lag

phase, and a slower increase of viral gene expression (Figure 4B, bottom panel). These results

suggest that keratinocytes of the stratum basale have a delayed or restricted viral life cycle.

In dermal sheath fibroblasts, the dermal papilla and the keratinocyte subtypes of HFs (e.g.,

matrix, root sheaths) we also observed significantly lower viral loads than in the surrounding

papillary fibroblasts (Figure 4A). Staining for the viral early protein ICP8 and the late protein

gC showed that viral infection spreads first into the dermis and excludes the HF layers (Figure

4C). HF cell layers are infected after the infection already spread to the inner parts of the

organoids at 4dpi with the dermal papilla being infected last (Figure 4C, right panel) but

eventually infection reaches all layers of HFs with a CPE being observable at 6 to 8dpi (Figure

1B). We hypothesized three potential explanations for this observation. First, there could be a

layer of non-permissive cells surrounding the HFs. Second, a barrier of extracellular matrix

might act protectively. And third, the infection cycle in the different cell types within the HFs

could be slower compared to e.g., the surrounding papillary fibroblasts. To investigate these

possibilities, we defined dermal sheath fibroblasts located next to highly infected papillary

fibroblasts (Supplementary Figure 5B). Indeed, the viral load in these dermal sheath fibroblasts

showed a strong drop from the cells outside in direct proximity (Figure 4E). As for keratinocytes

of the stratum basale, the lower viral load in cell types of HFs was not driven by spatial effects

like the localization relative to the organoid boundary or a lower number of infected cells in

proximity (Supplementary Figure 4AB, Supplementary Figure 5A). IF staining of the analyzed

cells showed close contact between dermal sheath and papillary fibroblasts with no indication

of any physical barriers between these cell layers (Supplementary Figure 5C). This is

supported by electron microscopy which showed close proximity of papillary fibroblasts and

dermal sheath fibroblasts (Figure 4F, Supplementary Figure 6). We observed that at 3dpi many

viral particles are present in the papillary fibroblasts layer inside cells (nucleus/cytoplasm) as

well as in the extracellular space (Figure 4F, zoom-ins). In the dermal sheath layer, the matrix,

the outer, and inner root sheath we found only a small number of viral particles in the cytoplasm

and the nucleus but not in the extracellular space. In the nuclei we found viral A and C capsids

indicating viral replication (A-capsids lack DNA, B capsids lack DNA but contain the scaffolding

protein and C-capsids contain the viral DNA[22]) (Figure 4F, 3dpi, zoom-in on matrix). In the

inner layers of the HF we did not find any viral particles. However, at 4dpi we find viral particles

in the extracellular space, the cytoplasm, and the nucleus in almost all HF layers present in

our sections (dermal sheath, outer root sheath, matrix, inner root sheath cuticle, companion

layer, Huxley's layer, dermal papilla) except for the Henle's layer (Figure 4F, Supplementary

Figure 6B). Again, we found A- and C- but also B-capsids in replication compartments of the

nucleus in these HF cell types. From these results we conclude that HSV-1 lytically replicates

in most cell types of HFs but similar to keratinocytes of the stratum basale viral replication is

delayed in these cells which slows down viral spread.

IER3 is induced at the infection front

HSV-1 infection leads to a general shutoff of host genome transcription [20] as well as read-

through [23] and antisense transcription [24], but also induction of several genes [25-28]. We used the

spatial transcriptomics data to investigate how host gene expression changes are related to

the spread of the virus through the tissue. First, we focused on papillary fibroblasts, the most

abundant infected cell type. We subclustered cells based on a set of 190 genes deregulated

upon infection in papillary fibroblasts (Figure 5AB). By projecting the clusters back onto the

section of a 3dpi organoid shown in Figure 3, we observed that the transcriptome-based

clustering is reflected in space (Figure 5C). On the one hand, this allowed us to estimate the

initial infection site from which the virus gradually spread through the tissue. On the other hand,

we could use the gene expression data to investigate what happens at, before and after the

"infection front" in a spatial-temporal manner. We calculated DEGs between sets of papillary

fibroblasts at different locations (Supplementary Figure 7A-C) which showed that the host gene

IER3 is strongly induced at the infection front, with subsequently decreasing in cells later in the

viral life cycle (Figure 5C). This is consistent with the transient changes observed in bulk RNA-

seq (Supplementary Figure 7D). IER3 is a target gene of the MAP kinase pathway[29] and HSV-

1 infection has been shown to stabilize IER3 through ICP27 via this pathway[30-32]. To

corroborate our finding, we performed IER3/ICP8 co-immunostaining in whole-mount

organoids (Figure 5D). Also, the IER3 protein appears immediately upon infection, but in

contrast to the mRNA, it was also upregulated in cells after the infection front that are later in

the viral life cycle. Overall, this example shows how genes can be transiently upregulated at

the infection front as infection progresses through the tissue, thus creating a specific virus-host

cell interaction microenvironment.

HSV-1 infection upregulates the transcription factor IRF3 in keratinocytes

Since defining an "infection front" requires a high number of infected cells from a specific cell

type, we could not perform this approach with the lower abundant cell types in our model

system. To identify here host genes responding to the infection, we calculated differential

expression values per cell type between infected and uninfected organoids. To take the viral

RNA content into account, we separated cells into (i) no viral RNA (less than 2 HSV-1 counts),

(ii) low virus RNA (viral load below the median calculated within the cell type and time point

but across all individual organoids) and (iii) high virus RNA (viral load above the median)

(Figure 6A). As positive controls, DUX4, antisense and read-through transcripts were all found

to be induced by HSV-1 infection, although to different extent in different cell types.

(Supplementary Figure 8A).

For further analysis, we focused on genes involved in interferon signaling and present in the

gene panel, namely the transcription factors interferon regulatory factor 3 and 9 (IRF3/IRF9),

as well as the antiviral, interferon-stimulated gene (ISG) MX Dynamin Like GTPase 1 (MX1)[33].

For MX1, we did not find a strong upregulation (Figure 6A). This is in line with the observation

that the interferons (IFNs) α, β and γ included in our panel showed no upregulation. Also in

bulk RNA-seq we did not find upregulation of interferons at any timepoint. For IRF9 and

particularly IRF3 however, we observed clear indications of upregulation in keratinocytes early

on, including cells not containing any viral RNA (Figure 6A). Interestingly, this effect was not

detectable in bulk RNA-seq (Supplementary Figure 8B). As a confirmation, we found an

upregulation of IRF3 also on the protein level, but only when keratinocytes were virus positive

(Figure 6B). This suggests a delay of the IRF3 response on protein level, similar to our

observation with IER3.

HSV-1 induces a spatially coordinated expression of TNF family cytokines

In our bulk RNA-seq experiment we found that genes involved in response to TNF were

overrepresented in the significantly upregulated genes at 4dpi (Figure 2B). The cytokines TNF

(coding for TNFα) and TNFSF9 (coding for 4-1BBL) were significantly upregulated by HSV-1

infection in bulk- RNA-seq (Supplementary Figure 8B). Notably, spatial transcriptomics

showed, that their expression is highly cell type-dependent and largely mutually exclusive, with

TNF induced in keratinocytes (mainly stratum basale) and TNFSF9 in papillary fibroblasts with

expression of both cytokines clearly depending on viral presence (Figure 7A). Their expression

increased with increasing viral load up to a plateau level (Figure 7B). Published data from HSV-

1 infected fibroblasts[23] and HaCat keratinocytes[34] support the findings of a cell type specific

upregulation of TNFSF9 in fibroblasts and TNF in keratinocytes. Importantly, both the bulk

RNA-seq data generated here in SkOs as well as the published bulk RNA-seq did not indicate

that upregulation of TNF and TNFSF9 are results of HSV-1 induced read-in transcription from

an upstream gene. To investigate, whether expression of TNF would lead to functional sensing

in surrounding cells, we defined papillary fibroblasts proximal to TNF expressing cells

(Supplementary Figure 8C) and analyzed them for induction of TNFα target genes (Figure 7D)

based on a published RNA-seq data set generated in fibroblasts[35]. By calculating the

differential expression in cells proximal vs. distal to the TNF-expressing cells we found that

four of the 8 genes included in our panel were significantly upregulated especially in cells

without viral gene expression (Figure 7D). By focusing on CXCL2, a TNFα-induced gene, we

found a high number of cells expressing CXCL2 in the dermis close to TNF expressing

keratinocytes (Figure 7C, upper row, last panel). To investigate whether this could also be

caused by 4-1BBL (TNFSF9), we analyzed a region with high TNFSF9 but low TNF expression

(Figure 7C, lower row). CXCL2 levels in these regions were lower, suggesting that the cell-

type specific induction of the TNF gene leads to secretion of the TNFα cytokine and

subsequently induction of target genes in the immediately surrounding cells.

Discussion

In this study, we showed an infection of complex human hair bearing skin organoids with HSV-1. Due to the inside-out morphology of the organoids and the infection therefore starting from the dermis our model is closest to the reactivation scenario of HSV-1, when infectious particles are released from neuronal cells into the fibroblast layer of the dermis[36]. This makes our model highly relevant for investigating HSV-1 induced pathologies, since most of them are a result of reactivation and not primary infection. For instance, recurrent herpes labialis has an average incidence of about 1.6 per 1000 patients each year[37].

When analyzing the susceptibility of the cells to HSV-1 in the SkO model we found that eventually at 8dpi all cell types in our model system were infected by HSV-1 except for the terminally differentiated keratinocytes, cornified structures in the HFs and chondrocytes in the tail. This is expected due to a lack of immune cells that could clear the infection. At the moment, we do not understand why chondrocytes are resistant to viral infection. A resistance of the stratum corneum against HSV-1 infection has been reported by many other studies using mouse models and *ex vivo* skin showing that the cornified keratinocyte layer prevents HSV-1 infection by the external surface[6,9]. The terminally differentiated keratinocytes of the epidermis in the skin organoid model express markers of the stratum corneum (LOR, KRT10), however, they do not eventually cornify since they are not exposed to air. Despite this difference their complete resistance to infection is well in line with findings from other models. Studies also showed that infection of all other layers of the epidermis by HSV-1 strongly depends on the infection route and the model system (dermal vs. epidermal, human vs. mouse, skin vs. mucosal skin)[38,39]. In human *ex vivo* skin wounding from the external side through different approaches leads to only limited infection of the epidermis[11,12]. Only infection from the dermal side by either removal of the dermis or deeper wounding through the epidermis into the dermis leads to efficient infection of the basal keratinocytes and spread to the higher differentiated keratinocyte layers[9,40]. In the SkO model the dermis was efficiently infected by HSV-1 and viral loads in papillary fibroblasts were much higher than in keratinocytes of the stratum basale and stratum spinosum/granulosum despite the presence of infectious cells in the neighborhood.

While the basal membrane as an extracellular matrix barrier likely slows down viral infection,

we show evidence that the viral life cycle in keratinocytes is delayed compared to papillary

fibroblasts. When we analyzed the spread of HSV-1 into HFs we observed that dermal sheath

fibroblasts pose a barrier to HSV-1 infection of the more inner layers. The close physical

proximity of dermal sheath fibroblasts to heavily infected papillary fibroblasts, in the absence

of an intervening or expanded extracellular matrix, suggests that extracellular matrix structures

are unlikely to account for the observed barrier function. Furthermore, the finding that dermal

sheath cells are not infected less frequently but instead harbor a reduced viral load indicates

that this phenotype is unlikely due to limited accessibility of a viral entry receptor, but rather

reflects a delayed viral life cycle in this cell type. Our electron microscopy impressively shows

that eventually almost all cell types in the HFs produce mature viral particles that were found

intra- and extracellular. We hypothesize that the delayed HSV-1 infection in HFs could be

important during reactivation when viral particles are released by the nerve endings of sensory

neurons that innervate HFs. A restriction of the viral life cycle in dermal sheath fibroblasts could

give immune cells time to counteract the infection. In the future, we would like to test this

hypothesis by further analyzing the immune reaction in dermal fibroblasts and by including

immune cells into the SkO model.

Also, we could show that the host response to HSV-1 infection in the SkO model is very cell

type specific. We analyzed this on single cell level, but also in a spatial-temporal manner by

analyzing cells at the infection front in the dermis. We found IER3 transcripts specifically

upregulated in papillary fibroblasts at the leading edge of the infection. IER3 mRNA contains

an AU-rich instability element (ARE) in its 3'UTR, a feature that promotes rapid mRNA

degradation by deadenylation under normal conditions and stabilization by proinflammatory

signaling like the p38 MAPK pathway[41,42]. Many studies have shown before in cell culture that

the IER3 mRNA is stabilized by HSV-1[30,31], in particular by ICP27[32]. Interestingly, transcript

upregulation was transient, while the upregulated protein was very stable in the heavily

infected cells in SkOs. A study using HeLa cells showed a transient induction of IER3 protein

expression at 1 hour post infection (hpi) and a rapid decline already at 3hpi[31]. This could

indicate a different turnover of the IER3 protein in tissue in comparison to a cell line.

The fact that we found a well known target of HSV-1 infection by our spatial temporal analysis

shows the validity of the approach. It allows a comprehensive analysis of spatial

transcriptomics data from infected tissues that goes beyond the discrimination between cell

types and viral loads. However, IER3 was one of only three genes specifically upregulated at

the infection front. This is likely an effect of the limited number of host genes included in our

spatial transcriptomics experiment (470 genes) and we speculate that panels with more genes

included will be even more informative to understand how a tissue reacts to a locally spreading

infection. Another limitation of this approach is that for defining an infection front a certain

number of cells from a specific cell type is needed, so we could perform this only for papillary

fibroblasts of the dermis. Thus for lower abundant and spatially more distributed cells we

compared uninfected cells and cells with low viral load and high viral load assuming that cells

with a higher viral load have been infected for a longer time. We found that IRF3 is upregulated

at transcript and protein level in keratinocytes of the stratum basale. Similar to IER3 we find a

delayed effect of protein induction in comparison to the transcripts and no induction of IRF3 on

protein level in virus negative cells. Since we do not find induction of IFNα, β or γ, or the ISGs

included in our panel we can only speculate which downstream signaling might be induced by

IRF3. An indication for a potential antiviral effect is that IRF3 protein is mainly upregulated in

infected keratinocytes of the stratum basale where we also found lower viral loads in

comparison to fibroblasts of the dermis.

The host response to HSV-1 infection in SkO is further dominated by inflammation. Spatial

transcriptomics showed that TNF (coding for TNFα) was induced in keratinocytes of the

stratum basale, and TNFSF9 (coding for 4-1BBL) in papillary fibroblasts. We also observed

induction of TNF target genes in surrounding cells and a potential priming of adjacent

uninfected cells, indicating that gene activation is indeed functional. Induction of TNF and

subsequent tissue damage was previously associated with HSV-1 in cerebral infections[43]. In

ex vivo mouse whole corneal culture HSV-1 spread was reduced by TNF treatment but also

resulted in increased cell death[44]. In skin it is likely that the strong inflammatory reaction

induced by the different TNF cytokines helps to limit viral replication in the case of reactivation

in a cell type specific manner. The drawback is the induced tissue damage, but it also offers

opportunities to specifically reduce HSV-1 induced inflammation and tissue damage by

treatment with inhibitors for TNF or TNFSF9.

In summary, we show here that SkOs are a physiologically highly relevant model system for

HSV-1 infection in the skin. The combination with single-cell-resolution spatial transcriptomics

enabled an unprecedented detailed analysis of viral gene expression and host response.

Compared with *ex vivo* skin models, SkOs offer key advantages, including the feasibility of

genetic manipulation and prolonged maintenance in culture. These features make SkOs

particularly well suited for investigating HSV mutants with growth defects, for studies of viral

persistence and latency as well as drug testing. The limitations of the SkO model system lie in

the lack of immune cells and vascularization, but a recent study reported the successful

incorporation macrophages and improved angiogenesis in SkOs[21]. Building on these

advances, future work will aim to further refine this model for HSV-1 and deepen our

understanding of HSV-1 pathogenesis in the skin.

Material and Methods

Skin organoid generation

Skin organoids (SkOs) were generated from the human iPS cell line UKEi001-A

(RRID:CVCL_A8PR). All procedures involving hiPSC lines were approved by the local ethics

committee in Hamburg (Az PV4798, 28.10.2014). HiPSCs were cultivated in six-well plates

coated with Geltrex (Thermo Fisher Scientific, cat. no. A1413302) in StemFlex medium (Gibco,

cat. no. A3349401) under standard conditions (37°C, 5% CO_2). Generation of SkOs was

performed according to the protocol by Lee and colleagues[19] with hiPSCs between passages

31-39. Only SkOs showing correct differentiation as determined by the appearance of HFs

(HF) at 110 to 120 days post differentiation were used for further experiments.

Virus infection

HSV-1 17 CMV-IEproEGFP expressing EGFP under the control of the CMV IE promoter was described before[45]. The virus was propagated on Vero cells and the infection titer determined by plaque assay. Medium on SkOs was exchanged and infection was performed by adding 800 PFU per SkO to the medium. After 12hrs the medium was exchanged with standard SkO growth medium and afterwards complete medium exchange was performed every day.

Immunostaining and microscopy

For immunohistochemistry SkOs were fixed in 4% phosphate buffered formalin over night at 4°C and then transferred to PBS. Afterwards they were protected in 3% agarose, dehydrated using a Leica ASP300S tissue processor, and embedded in paraffin. Organoid paraffin sections were cut at 3 μm and stained with hematoxylin and eosin (H&E) according to standard procedures. For immunohistochemical staining the sections were processed as following: After dewaxing and inactivation of endogenous peroxidases (3% hydrogen peroxide), antibody specific antigen retrieval was performed using the Ventana BenchMark XT autostainer (Ventana, Tuscon, Arizona, USA). Sections were blocked and afterwards incubated with the primary antibodies, see Table S1. For detection of specific binding and DAB staining, the UltraView Universal DAB Detection Kit (Roche, #760-500) was used, which contains both, anti-mouse and anti-rabbit secondary antibody. Counter staining and bluing were performed with Hematoxylin (Ventana Roche, # 760-2021) and Bluing Reagent (Ventana Roche, # 760-2037) for 4 min. Subsequently, stained sections were mounted in mounting medium.

Pictures of IHC staining were acquired with the Sysmex Pannoramic MIDI II slide scanner. Image cropping was performed with QuPath0.4.3 and pictures assembled with Adobe Illustrator.

For whole mount staining of SkOs the qCe3D method was used according to Lee and colleagues[19] with the following adjustments: Clearing was performed for 48hrs and stained and cleared SkOs were mounted in iSpacer (SUNJinLab) 4 well imaging spacers. For antibodies

see Supplementary Table S1. Imaging was performed with a Leica TCS SP8 X confocal

microscope. Images were processed with Imaris and ImageJ 2.14 and pictures assembled

with Adobe Illustrator.

Electron microscopy

SkOs were fixed overnight in 2% paraformaldehyde and 2.5% glutaraldehyde, washed in PBS,

and post-fixed in 1% osmium tetroxide for 60 min. Following additional rinses in PBS and

double-distilled water, samples were stained with 1% aqueous uranyl acetate for 60 min,

dehydrated through a graded ethanol series, and embedded in Epon (Carl Roth). Ultrathin

sections (50 nm) were prepared using an Ultracut microtome (Leica Microsystems) and post-

stained with 1% uranyl acetate in ethanol. Transmission electron micrographs were acquired

on a FEI Tecnai G20 Twin operated at 80 kV and equipped with a 2K CCD Veleta camera

(Olympus SIS). For correlating TEM data across entire organoids, serial sections were

mounted on silicon wafers and imaged using a Tescan Clara SEM with backscattered-electron

detection at 2.8 kV.

Bulk RNA-seq

For bulk RNA-sequencing 4 SkOs per condition (uninfected, 2 days post infection (dpi), 4dpi,

6dpi, 8dpi) were used. Total RNA was isolated individually from each SkO by adding QIAzol

lysis reagent (Qiagen) and disrupting the organoid by grinding with a pestle. The lysate was

homogenized with a QIAshredder (Qiagen). After one round of chloroform extraction, RNA was

cleaned up with the RNeasy MinElute Cleanup Kit (Qiagen). DNA was two times digested with

the DNA-free DNA removal kit (Thermo Fisher Scientific). RNA concentration was determined

with the Qubit RNA broad range assay (Thermo Fisher Scientific) and equal amounts of RNA

from two SkOs of the same condition were pooled resulting in duplicates for each condition for

sequencing. RNA integrity was determined via a Bioanalyzer RNA 6000 Pico Assay (Agilent,

5067-1514). RIN values were in the range between 5.5 and 9.2. From each pooled sample

520 ng total RNA was subjected to rRNA depletion (following the Lexogen RiboCop rRNA

Depletion Kit for Human/Mouse/Rat V2 protocol, catalog number: 144.24) and further

processed via the RNA-Seq V2 Library Prep Kit with UDIs (Lexogen, catalog number: 175.96)

in the short insert size variant (RTM) according to manufacturer's instructions. Libraries were

quality controlled on a Bioanalyzer High Sensitivity DNA Assay (Agilent, 5067-4626) and were

sequenced on an Illumina NextSeq 500 instrument with NextSeq 500/550 High Output Kit v2.5

(75 Cycles, product number: 20024906) in a single-read mode (1 x 83 bp). After demultiplexing

via bcl2fastq, 20.7 – 28.6 million (M) read pairs assigned to each sample. All samples passed

quality control by fastqc and were subjected to downstream analysis. Processing was done

with the nf-core/RNA-seq pipeline (v3.12.0) within the nf-core framework[46]. The pipeline was

executed with Nextflow v23.04.1[47], utilizing STAR (v2.6.1d)[48] for alignment to the GRCh38

human genome and Human herpesvirus 1 genome (X14112.1), as well as Salmon (v1.10.1)[49]

for transcript-level quantification based on STAR's alignment output. To eliminate duplicate

reads, the --with_umi option was enabled. Gene-level quantification was derived from

transcript-level estimates using the R package tximport (v1.34.0)[50], which sums transcript

abundances for each gene. The generated raw gene-level counts were normalized and

variance-stabilized using the regularized log transformation (rlog) from DESeq2 (v1.34.0)[51],

addressing the variance-over-mean trend. Principal component analysis (PCA) confirmed high

reproducibility across biological replicates. Differential expression analysis was performed

using DESeq2, identifying genes as significantly differentially expressed (DEGs) if they

exhibited a fold change ≥ 2 and an adjusted P-value ≤ 0.05. The normalized rlog-transformed

counts were then used for clustering and visualization. An overrepresentation analysis of

differentially expressed host genes (padj. ≤0.05 and log2FC ≥1/≤-1) was performed with

WebGestalt[52]. GO terms associated with "Biological processes noRedundant" were selected

with an FDR ≤0.01.

Spatial transcriptomics experiments

SkOs were imbedded in paraffin as described for IHC staining. 3 SkOs for each condition were

assembled in one agarose mold before embedding all conditions (uninfected/2dpi/3dpi/4dpi

for the main experiment, uninfected/2dpi/6dpi for the pilot experiment). *In situ* RNA

measurements were performed using the Xenium system (10x Genomics). The pilot

experiment was done at the MDC/BIH genomics platform using nuclear expansion based on

DAPI staining for cell segmentation. The main experiment was performed at the 10xGenomics

facility in Stockholm using multimodal segmentation (nuclear stain, RNA and protein-based

cell staining, cell surface staining). For both experiments, the human multi tissue gene panel

was used, supplemented by the 100 genes custom panel CZBXK3 (Supplementary Table 1).

Sections of 5μm thickness were placed on a Xenium slide according to the manufacturer's

protocol, with drying at 42°C for 3 hours and overnight placement in a desiccator at room

temperature, followed by deparaffinization and permeabilization to make the mRNA

accessible. The Probe Hybridization Mix was prepared according to the user guide

(CG000582, Rev D, 10x Genomics). The staining for Xenium was performed using Xenium

Nuclei Staining Buffer (10x Genomics product number: 2000762) as a part of the Xenium

Slides & Sample Prep Reagents Kit (PN-1000460). Following the Xenium run, Hematoxylin

and Eosin (H&E) staining was performed on the same section according to the Post-Xenium

Analyzer H&E Staining user guide (CG000613, Rev B, 10x Genomics).

Spatial transcriptomics analysis

The spatial transcriptomics data was analyzed in R using the VoltRon package[53], as well as

packages from tidyverse[54]. Other packages used include DESeq2[51], apeglm[55], sf[56] and

concaveman[57]. Briefly, we first assessed cell type identity only on cellular transcriptomes, i.e.

without taking spatial information into account (Supplementary Table 2 and see Supplementary

Note for more information). Viral load was defined as percent viral counts (i.e., sum of the five

viral genes UL54, US1, UL27, UL29, LAT) of all counts per cells. Cells with 10 or less cellular

RNA counts were filtered out. Organoid boundaries and distances from these boundaries were

identified using the concaveman/st_boundary/st_distance function from the concaveman[57] and

sf[56] R packages. To classify cells based on the number of infectious cells in the neighborhood,

the absolute number of cells with more than 20% viral load and within 50μm (centroid to

centroid distance) was counted for every cell. Differential expression using DESeq2[51] was

calculated as pseudo-bulk per cell type, i.e., counts were summed up per group (uninfected

and 2dpi all cells, 3 and 4dpi either cells with 1 or less viral count "-" , viral load below "+" , or

above the median "++" within the group). The infection front analysis was initiated by clustering papillary fibroblasts with at least 2 viral counts using only genes that are differentially expressed upon infection. Cells of cluster 1, with the lowest viral load, which were in groups of at least 5 cells within 150 micrometers, were defined as the infection front. Cells with less than 2 viral counts and within 50μm of these cells were classified as "uninfected next to infection front". For the TNF proximity analysis, cells were defined as "TNF expressing", if at least 3 cells with at least 1 TNF gene count were not more than 30 μm apart from each other, and the proximal area defined at 280 μm around these cells. ChatGPT (OpenAI, https://chat.openai.com, model 5) assisted in writing R code.

Data and code availability

Bulk RNA-seq data were deposited at NCBI under BioProject accession number PRJNA1378132, and the raw sequencing reads are available in the NCBI Sequence Read Archive (SRA) under accession numbers SRR36379728–SRR36379737. Spatial transcriptomics data are available through NCBI GEO (accession number GSE313919).

Code for spatial transcriptomics and bulk RNA-seq data analysis is available at https://github.com/LandthalerLab/SkinOrganoids_HerpesSimplexVirus1.

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Competing interests

The authors declare no competing interests.

Figure legends

Figure 1: Infection of skin organoids with HSV-1 leads to cytopathic effects. A: Brightfield

(BF) and fluorescence (GFP) images of skin organoids (SkOs) infected with HSV-1

(expressing GFP from a CMV-IE promoter) at 120 days of differentiation. Shown are uninfected

and HSV-1 infected SkOs at 2, 4, 6, and 8 days post infection (dpi). Scale bars 500µm. **B:** IHC

staining of SkOs infected with HSV-1 as shown in A. Boxes in overview images indicate areas

of higher magnification shown below. Scale bars 500μm in overview images and 20μm in

zoom-ins. Upper picture of zoom-ins shows epidermis on the top and dermis below. Lower

picture in zoom-ins shows hair follicle. H&E: Hematoxylin and eosin stain. gD: Staining against

HSV-1 glycoprotein D.

Figure 2: Bulk RNA-seq of HSV-1 infected SkOs. A: Barplot showing numbers of

differentially expressed host genes at 2, 4, 6, and 8dpi versus uninfected SkOs. **B:** GO analysis

(WebGestalt) was performed using significantly (padj. ≤0.05) up- or downregulated genes

(log2FC ≥1/≤-1) from RNA-seq analysis of SkOs infected with HSV-1 at 4, 6 and 8dpi

compared to uninfected SkOs. Shown are the top 5 significantly enriched GO-Terms (FDR

≤0.01, sorted by enrichment ratio) in the up- and downregulated genes. At 2dpi no GO-terms

were significantly enriched. At 4dpi only 2 GO-terms were associated with the downregulated

genes. At 6dpi no GO-terms were significantly enriched in the upregulated genes. **C:**

Percentage of total reads mapping to HSV-1 in uninfected and 2, 4, 6, 8dpi. Each bar shows

one replicate.

Figure 3: Spatial transcriptomics analysis of HSV-1 infected SkOs. A: Representative

regions from an uninfected SkO (left) and a SkO at 3dpi (right), with cells colored by annotated

cell type. **B, C:** The same organoid regions as in A, colored by expression levels of the

indicated genes. **D:** Relative abundances of major cell types across the indicated timepoints.

Thin lines denote standard deviations calculated across three organoids per time point. Cell

type color coding is consistent with panel A.

Figure 4: Susceptibility to viral infection varies widely between cell types. A: Upper part:

percent of cells with at least 2 HSV-1 transcript counts for selected cell types. Indicated are

individual values from the three organoids per timepoint, and standard deviations. * p-value <

0.05 ** p-value < 0.01 (Student's t-test). Lower part: distribution of log10-transformed viral

loads (percent viral transcripts). The middle line in the boxplot displays the median, the box

indicates the first and third quartile, whiskers the 1.5 interquartile range (IQR). Outliers beyond

are marked by single dots. *** p-value < 0.001 (Wilcoxon rank sum test). **B:** Cells with at least

2 viral counts were ordered according to viral load and binned with 20 cells per bin. Shown are

the percentages of the two indicated viral transcripts within the bin for papillary fibroblasts type

1 (top) and stratum basale keratinocytes (bottom). **C:** Sections from WMI staining of HSV-1

infected SkOs harvested at the indicated dpi and stained for HSV-1 proteins ICP8 and gC.

Scale bars: 50μm. **D:** HSV-1 UL54 expression around HFs. Shown is a region from a SkO at

4dpi. Upper part: cells colored by cell type, with hair follicle cell types labeled. Lower part: cells

colored by normalized HSV-1 UL54 expression. Surrounded with orange are dermal sheaths

cells in proximity to highly infected papillary fibroblasts. **E:** Box plot of HSV-1 load (percent viral

transcripts) in HFs cells. Dermal sheath layer: Dermal sheath cells next to highly infected cells

(surrounded with orange in D). Outside/ inside: other cells within 50μm distance from dermal

sheath layer outside/ inside of HFs. **F:** Transmission electron microscopy (TEM) of HFs from

HSV-1 infected SkOs at 3dpi and 4dpi. Left images show overviews with colored layers of HFs.

pFib: papillary fibroblasts; DS: dermal sheath; GM: glassy membrane; Mtx: matrix; IRS: inner

root sheath; DP: dermal papilla; Ex: extracellular space; N: nucleus; C: cytoplasm. Boxes with

white and yellow lines, respectively indicate areas of zoom-ins. Red arrows indicate viral

particles. A and C capsids are indicated in a zoom-in on a nucleus of a matrix cell at 3dpi.

Figure 5: IER3 is induced at the HSV-1 infection front in SkOs. A: Papillary fibroblast types

1 and 2 with at least two viral RNA counts were clustered based on viral gene expression and

infection-induced host gene dysregulation, resulting in seven distinct clusters. Left: Two-

dimensional projection of cells colored by cluster membership. Right: Boxplot showing the

percentage viral transcripts in the cells of each cluster. **B:** Region of an infected organoid at

3dpi shown in Figure 3. Papillary fibroblasts are colored by cluster membership as in A, or in

light pink if containing less than two viral RNA counts (papillary fibroblasts without virus). Other

cell types, including "undefined" cells which includes highly infected papillary fibroblasts are in

light grey. **C:** Shown are transcript densities in papillary fibroblasts for genes as indicated in

spatial bins. Red colors indicate that both transcripts are present. VIM: Vimentin, general

marker for fibroblasts. **D:** Sections from WMI of uninfected and HSV-1 infected SkOs at 2dpi

and 3dpi stained for ICP8, IER3 and E-cadherin (marker for epidermis). Arrows indicate

potential site of viral infection that is shown in higher magnification below. Scale bars: 50μm.

Figure 6: The transcription factor IRF3 is induced in keratinocytes. A: Expression values

of the indicated genes in a subset of cell types. For uninfected and 2dpi SkOs, all cells were

combined for the analysis. For 3dpi and 4dpi, cells are split up in those with no or only 1 viral

count (-), and those with viral load below (+) and above (++) the median. The median viral load

was calculated only within cells with more than 1 count. Dot sizes represent the fraction of cells

having at least one count of the specified gene, the color the average expression. Black circles

around the dots indicate significant differential expression in a pseudobulk comparison vs. all

cells in uninfected cells (padj <0.05). **B:** Sections from WMI of uninfected and HSV-1 infected

SkOs at 3dpi and 4dpi stained for ICP8, IRF3 and E-cadherin (marker for epidermis). Scale

bars: 50μm.

Figure 7: TNF induction leads to proximal expression of target genes. **A:** Expression values

of the indicated genes in a subset of cell types. For uninfected and 2dpi SkOs, all cells were

combined for the analysis. For 3dpi and 4dpi, cells are split up in those with no or only 1 viral

count (-), and those with viral load below (+) and above (++) the median. The median viral load

was calculated only within cells with more than 1 count. Dot sizes represent the fraction of cells

having at least one count of the specified gene, the color the average expression. Black circles

around the dots indicate significant differential expression in a pseudobulk comparison vs. all

cells in uninfected cells (padj <0.05). **B:** Cells with at least 2 viral counts were ordered along

viral load and binned with 20 cells per bin. Shown are the percentages of TNF, TNFSF9 and

HSV-1 UL54 within the bin for papillary fibroblasts type 2 (top) and stratum basale

keratinocytes (bottom). **C:** Shown are two regions of a 4dpi organoid, with cells colored by cell

type or expression levels of the indicated genes. The cells encircled in red in the CXCL2

expression panel at 3dpi are expressing TNF. **D:** Differential expression of TNF target genes

in papillary fibroblasts proximal vs. distal to TNF expressing cell groups.

Supplementary Figure 1: A: Brightfield images of SkOs from day -2 (d-2) of differentiation to

126 days (d126). White scale bars represent 200µm, black scale bars 500µm. **B:** Maximum

intensity projections from Z-stacks of overview images from WMI staining of SkOs at 120 days

of differentiation. Scale bars 500µm. **C:** Zoom-ins of WMI staining. Scale bars 50µm. **D:** IHC

staining of SkOs at 120 days of differentiation. Boxes in overview images indicate areas of

higher magnification shown at the right. Scale bars represent 500µm in overview images and

50µm in zoom-ins. H&E: hematoxylin and eosin stain. Hoechst: nuclear stain. Ki67:

proliferating cells. KRT15: basal layer of epidermis, outer root sheath, medulla. KRT17:

epidermis, outer root sheath of HFs. KRT20: Merkel cells. KRT71: inner root sheath of HFs.

LHX2: bulge region, hair germs, hair pegs, hair placodes. NEFH: sensory neurons, large soma

neurons. PDGFRα: dermal fibroblasts, dermal papilla. S100β: Schwann cells, satellite glial

cells, adipocytes, melanocytes. SCD1: adipocytes, sebaceous glands. SOX2: dermal

condensates, dermal papilla, melanocytes, Merkel cells. TUBB3: neuronal cells, Schwann

cells.

Supplementary Figure 2: A: IHC staining against GFP of 120 days old SkOs infected with

HSV-1 expressing GFP from CMV-IE promoter. Boxes in overview images indicate areas of

higher magnification shown below. Scale bars 500µm in overview images and 20µm in zoom-

ins. Upper picture of zoom-ins shows epidermis on the top and dermis below. Lower picture in

zoom-ins shows hair follicle. **B:** Heatmap of bulk RNA-seq of HSV-1 infected SkOs showing

deregulated genes of HSV-1 infected SkOs at 2, 4, 6, and 8dpi vs uninfected SkOs in the

individual replicates. **C:** Volcano plots of bulk RNA-seq showing all differentially expressed

host genes at 2, 4, 6, and 8dpi vs uninfected SkOs.

Supplementary Figure 3: Spatial transcriptomics of HSV-1 infected SkOs. Per timepoint

(uninfected, 2dpi, 3dpi, 4dpi) 3 SkOs were measured. **A:** Overview of all SkOs analyzed by

spatial transcriptomics with cells colored by cell types. **B:** Cells as in A, colored by normalized

expression of HSV-1 UL54 RNA. **C:** Number of cells per organoid replicate. **D:** Violin plot

depicting distribution of detected genes and RNA counts for the major cell types.

Supplementary Figure 4. **A:** Papillary fibroblasts type 1 cells were binned according to their

distance from the organoid boundary (µm) in 10 bins of equal size. Other cell types as indicated

were sorted into the bins with the same distance range as the respective papillary fibroblasts

type 1 bin. By that, the distance distribution per bin is the same for all cell types (top panel),

but the fraction of cells per bin is equal only for papillary fibroblasts type 1 in all bins (bottom

panel), since the other cell types in general reside further inside the organoid. **B:** Top panel,

fraction of cells with at least two viral counts per distance bin. Bottom panel, viral load (percent

viral transcripts) in the different cell types per distance bins.

Supplementary Figure 5: A: Cells from SkOs at 4dpi were binned by cell type and by the

number of infectious cells (defined as >20% viral transcripts) in their neighborhood (within

50µm). Shown is the viral load (percent viral transcripts) per group as boxplots. The middle

line in the boxplot displays the median, the box indicates the first and third quartile, whiskers

the 1.5 interquartile range (IQR). Outliers beyond are marked by single dots. **B:** Shown is one

replicate of a HSV-1 infected SkO at 4dpi (bottom right of the 4dpi organoids in Supplementary

Figure 3A). Dermal sheath cells within 50µm of infectious cells (defined as >20% viral

transcripts) are labelled in dark blue. Cells of hair follicle cell types (dermal papilla, bulge

region, IRS, ORS, matrix, melanocytes) within 50µm of these dermal sheath cells are labelled

in medium pink. Other cell types (i.e., non-hair follicle cell types, thus outside of HFs, such as

papillary fibroblasts) are labelled in petrol. **C:** DAPI, cell surface protein and interior protein

staining on the Xenium slide. Surrounded with orange blue are dermal sheath cells as in Figure

4D.

Supplementary Figure 6: Scanning electron microscopy (SEM) of HFs from HSV-1 infected SkOs at 3dpi and 4 dpi. **A:** Overviews showing the scanned areas. Black boxes indicate areas scanned with higher resolution. White boxes with numbers indicate areas of zoom-ins shown in B. pFib: papillary fibroblasts; DS: dermal sheath; GM: glassy membrane; ORS: outer root sheath; parts of inner root sheath (IRS): Cp: companion layer, He: Henle's layer, Hu: Huxley's layer, Ci: IRS cuticle; Mtx: matrix; DP: dermal papilla. Scale bar: 50µm. **B:** Zoom-ins on areas indicated in part A. Red arrows indicate viral particles. Yellow boxes indicate areas of zoom-ins showing extracellular viral particles and a nuclear replication compartment with A, B and C capsids. RC: viral replication compartment; Ex: extracellular space, N: nucleus, C: cytoplasm. Scale bar: 1µm; 200nm in zoom-ins.

Supplementary Figure 7: A: Two-dimensional projection of papillary fibroblasts as in Figure 5A, with cells colored by expression levels of the indicated host genome transcripts. **B:** Papillary fibroblasts were categorized in "infection front" (cluster 1 in Fig. 5AB), "uninfected next to infection front", "infected next to infection front", "later in infection" and "no virus" (i.e., without viral RNA and further away from the infection front). Top: two-dimensional projection as in A, bottom: the same region as in Figure 5B, both with cells colored by these categories. **C:** Differential gene expression in papillary fibroblasts in the cell categories shown in B at 3dpi vs uninfected. Shown are the genes with padj < 0.05 in at least one category. **D:** Fold changes in the bulk RNA-seq data at the indicated timepoints vs. uninfected organoids for IER3 and selected induced host genes. Significantly upregulated genes have padj <0.05.

Supplementary Figure 8: A: Expression values of the indicated genes in a subset of cell types. For uninfected and 2dpi SkOs, all cells were combined for the analysis. For 3dpi and 4dpi, cells are split up in those with no or only 1 viral count (-), and those with viral load below (+) and above (++) the median. The median viral load was calculated only within cells with

more than 1 count. Dot sizes represent the fraction of cells having at least one count of the

specified gene, the color the average expression. Black circles around the dots indicate

significant differential expression in a pseudobulk comparison vs. all cells in uninfected cells

(padj <0.05). **B:** Fold changes in the bulk RNA-seq data at the indicated timepoints vs.

uninfected organoids for IRF3, TNF and TNFSF9. Significantly upregulated genes have padj

<0.05. **C:** Shown is one replicate of a HSV-1 infected SkO at 4dpi (top left of the 4dpi organoids

in Supplementary Figure 3A and Figure 7C). Cells are colored by TNF expressing cells,

proximal and distal cells as indicated.

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Figure 1

Figure 1: Infection of skin organoids with HSV-1 leads to cytopathic effects. A: Brightfield (BF) and fluorescence (GFP) images of skin organoids (SkOs) infected with HSV-1 (expressing GFP from a CMV-IE promoter) at 120 days of differentiation. Shown are uninfected and HSV-1 infected SkOs at 2, 4, 6, and 8 days post infection (dpi). Scale bars 500µm. **B:** IHC staining of SkOs infected with HSV-1 as shown in A. Boxes in overview images indicate areas of higher magnification shown below. Scale bars 500µm in overview images and 20µm in zoom-ins. Upper picture of zoom-ins shows epidermis on the top and dermis below. Lower picture in zoom-ins shows hair follicle. H&E: Hematoxylin and eosin stain. gD: Staining against HSV-1 glycoprotein D.

Figure 2

Figure 2: Bulk RNA-seq of HSV-1 infected SkOs. A: Barplot showing numbers of differentially expressed host genes at 2, 4, 6, and 8dpi versus uninfected SkOs. **B:** GO analysis (WebGestalt) was performed using significantly (padj. ≤0.05) up- or downregulated genes (log2FC ≥1/≤-1) from RNA-seq analysis of SkOs infected with HSV-1 at 4, 6 and 8dpi compared to uninfected SkOs. Shown are the top 5 significantly enriched GO-Terms (FDR ≤0.01, sorted by enrichment ratio) in the up- and downregulated genes. At 2dpi no GO-terms were significantly enriched. At 4dpi only 2 GO-terms were associated with the downregulated genes. At 6dpi no GO-terms were significantly enriched in the upregulated genes. **C:** Percentage of total reads mapping to HSV-1 in uninfected and 2, 4, 6, 8dpi. Each bar shows one replicate.

Figure 3

Figure 3: Spatial transcriptomics analysis of HSV-1 infected SkOs. A: Representative regions from an uninfected SkO (left) and a SkO at 3dpi (right), with cells colored by annotated cell type. **B, C:** The same organoid regions as in A, colored by expression levels of the indicated genes. **D:** Relative abundances of major cell types across the indicated timepoints. Thin lines denote standard deviations calculated across three organoids per time point. Cell type color coding is consistent with panel A.

Figure 4

Figure 4: Susceptibility to viral infection varies widely between cell types. A: Upper part: percent of cells with at least 2 HSV-1 transcript counts for selected cell types. Indicated are individual values from the three organoids per timepoint, and standard deviations. * p-value < 0.05 ** p-value < 0.01 (Student's t-test). Lower part: distribution of log10-transformed viral loads (percent viral transcripts). The middle line in the boxplot displays the median, the box indicates the first and third quartile, whiskers the 1.5 interquartile range (IQR). Outliers beyond are marked by single dots. *** p-value < 0.001 (Wilcoxon rank sum test). **B:** Cells with at least 2 viral counts were ordered according to viral load and binned with 20 cells per bin. Shown are the percentages of the two indicated viral transcripts within the bin for papillary fibroblasts type 1 (top) and stratum basale keratinocytes (bottom). **C:** Sections from WMI staining of HSV-1 infected SkOs harvested at the indicated dpi and stained for HSV-1 proteins ICP8 and gC. Scale bars: 50µm. **D:** HSV-1 UL54 expression around HFs. Shown is a region from a SkO at 4dpi. Upper part: cells colored by cell type, with hair follicle cell types labeled. Lower part: cells colored by normalized HSV-1 UL54 expression. Surrounded with orange are dermal sheaths cells in proximity to highly infected papillary fibroblasts. **E:** Box plot of HSV-1 load (percent viral transcripts) in HFs cells. Dermal sheath layer: Dermal sheath cells next to highly infected cells (surrounded with orange in D). Outside/ inside: other cells within 50µm distance from dermal sheath layer outside/ inside of HFs. **F:** Transmission electron microscopy (TEM) of HFs from HSV-1 infected SkOs at 3dpi and 4dpi. Left images show overviews with colored layers of HFs. pFib: papillary fibroblasts; DS: dermal sheath; GM: glassy membrane; Mtx: matrix; IRS: inner root sheath; DP: dermal papilla; Ex: extracellular space; N: nucleus; C: cytoplasm. Boxes with white and yellow lines, respectively indicate areas of zoom-ins. Red arrows indicate viral particles. A and C capsids are indicated in a zoom-in on a nucleus of a matrix cell at 3dpi.

Figure 5

Figure 5: IER3 is induced at the HSV-1 infection front in SkOs. A: Papillary fibroblast types 1 and 2 with at least two viral RNA counts were clustered based on viral gene expression and infection-induced host gene dysregulation, resulting in seven distinct clusters. Left: Two-dimensional projection of cells colored by cluster membership. Right: Boxplot showing the percentage viral transcripts in the cells of each cluster. **B:** Region of an infected organoid at 3dpi shown in Figure 3. Papillary fibroblasts are colored by cluster membership as in A, or in light pink if containing less than two viral RNA counts (papillary fibroblasts without virus). Other cell types, including "undefined" cells which includes highly infected papillary fibroblasts are in light grey. **C:** Shown are transcript densities in papillary fibroblasts for genes as indicated in spatial bins. Red colors indicate that both transcripts are present. VIM: Vimentin, general marker for fibroblasts. **D:** Sections from WMI of uninfected and HSV-1 infected SkOs at 2dpi and 3dpi stained for ICP8, IER3 and E-cadherin (marker for epidermis). Arrows indicate potential site of viral infection that is shown in higher magnification below. Scale bars: 50μm.

Figure 6

Figure 6: The transcription factor IRF3 is induced in keratinocytes. A: Expression values of the indicated genes in a subset of cell types. For uninfected and 2dpi SkOs, all cells were combined for the analysis. For 3dpi and 4dpi, cells are split up in those with no or only 1 viral count (-), and those with viral load below (+) and above (++) the median. The median viral load was calculated only within cells with more than 1 count. Dot sizes represent the fraction of cells having at least one count of the specified gene, the color the average expression. Black circles around the dots indicate significant differential expression in a pseudobulk comparison vs. all cells in uninfected cells (padj <0.05). **B:** Sections from WMI of uninfected and HSV-1 infected SkOs at 3dpi and 4dpi stained for ICP8, IRF3 and E-cadherin (marker for epidermis). Scale bars: 50µm.

Figure 7

Figure 7: TNF induction leads to proximal expression of target genes. A: Expression values of the indicated genes in a subset of cell types. For uninfected and 2dpi SkOs, all cells were combined for the analysis. For 3dpi and 4dpi, cells are split up in those with no or only 1 viral count (-), and those with viral load below (+) and above (++) the median. The median viral load was calculated only within cells with more than 1 count. Dot sizes represent the fraction of cells having at least one count of the specified gene, the color the average expression. Black circles around the dots indicate significant differential expression in a pseudobulk comparison vs. all cells in uninfected cells (padj <0.05). **B:** Cells with at least 2 viral counts were ordered along viral load and binned with 20 cells per bin. Shown are the percentages of TNF, TNFSF9 and HSV-1 UL54 within the bin for papillary fibroblasts type 2 (top) and stratum basale keratinocytes (bottom). **C:** Shown are two regions of a 4dpi organoid, with cells colored by cell type or expression levels of the indicated genes. The cells encircled in red in the CXCL2 expression panel at 3dpi are expressing TNF. D: Differential expression of TNF target genes in papillary fibroblasts proximal vs. distal to TNF expressing cell groups.