The cellular mammalian clock regulates *Staphylococcus aureus* invasion in

epithelial cells

Pooja Agarwal[1], Giridhar Chandrasekharan[1], Jaspreet Grewal[1], Robert Dallmann[1,2,*]

and Meera Unnikrishnan[1,*]

[1] Division of Biomedical Sciences, Warwick Medical School, University of Warwick,

Coventry, UK

[2] Zeeman Institute for Systems Biology & Infectious Disease Epidemiology Research

(SBIDER), University of Warwick, Coventry, UK

* Corresponding authors

Addresses for correspondence:

r.dallmann@warwick.ac.uk and m.unnikrishnan@warwick.ac.uk

18 **Abstract**

An endogenous biological clock, the circadian clock, coordinates life with the 24-hour

day/night cycle of the environment. The unit of this circadian clock is the cell but in

multicellular organisms, such as mammals, a circadian timing system (CTS) with a

central pacemaker orchestrates peripheral clocks and the overall finely tuned temporal

order. For example, the CTS changes immune responses to infections depending on

time-of-day, however, its role in controlling bacterial infections at a cellular level is not

understood.

In this study, we investigated the role of the host cellular clock during infection by

Staphylococcus aureus, a highly drug-resistant, facultatively intracellular human

pathogen. Our findings revealed that *S. aureus* invasion into epithelial cells is

dependent on the cellular circadian phase. Interestingly, in BMAL1*,* an essential clock

protein, deficient cells bacterial uptake was significantly higher compared to parental

A549 cells. RNA sequencing of *BMAL1* knockdown (KD) cells showed a significant

upregulation of *GP340*, coding for the receptor of SraP, an *S. aureus* adhesin. An

S. aureus mutant lacking SraP did not exhibit a circadian rhythm of uptake into A549

cells nor an increased uptake into *BMAL1* KD compared to the parental A549 cells. Of

note, bacterial mutants for other adhesins continued to show a rhythmic and higher

uptake in *BMAL1* KD cells.

Hence, we report that *S. aureus* invasion of epithelial cells is clock-modulated and

mediated through *S. aureus* SraP, suggesting potential for host clock-directed therapy

against this pathogen.

Introduction

Circadian rhythms are intrinsic, about 24-hour cycles that govern a wide array of
physiological processes in most living organisms, ranging from bacteria to humans [1,2].
These rhythms are regulated by a cell autonomous internal time-keeping system
known as the circadian clock, which allows organisms to anticipate and adapt to daily
environmental changes, synchronize metabolic functions, and maintain overall
homeostasis [3].

In mammals, a central clock in the hypothalamic suprachiasmatic nucleus (SCN)
coordinates rhythms in all other organ, tissue and cellular clocks relative to the
environmental light/dark cycles. The molecular basis of circadian rhythms involves
coupled transcriptional-translational feedback loops consisting of more than a dozen
core clock genes[1], including the central positive and negative arm transcription factors
BMAL1, CLOCK and PERIODs, CRYPOTCHROMEs, respectively. These genes
interact to produce proteins that oscillate in abundance over an approximate 24-hour
cycle, ultimately regulating downstream processes involved in metabolism, immunity,
inflammation and various physiological responses[4,5].

Recent research has underscored the significant influence of the circadian clock on
immune regulation and host-pathogen interactions[6]. The synchronization between the
circadian system and immune responses ensures that the body can efficiently combat
pathogens at optimal times of the day[7,8]. For example, studies have shown that
immune cells exhibit diurnal variations in activity, with certain populations peaking at
specific times, thereby enhancing the body's ability to respond to infections[9].
Disruptions to circadian regulation, whether due to genetic, environmental, or
behavioural factors, can impair these defences, leading to increased susceptibility to
infections and altered pathogen behaviour[10,11]. Additionally, dysregulation of the host
circadian clock has been linked with increase susceptibility to bacterial infection[12].

Staphylococcus aureus, a Gram-positive bacterium, is a highly drug resistant
opportunistic human pathogen responsible for a wide range of infections, from minor
skin conditions to life-threatening diseases such as pneumonia, endocarditis, and
sepsis[13,14]. *S aureus* is a facultative intracellular pathogen, which invades a range of
mammalian cells, which offer a niche for replication, persistence and resistance to
antimicrobials[15-18]. Recent findings suggest that disruption of circadian regulation can

impair immune responses towards *S. aureus* infection[19]. However, at a cellular level,

the molecular mechanisms underlying the ole of the host clock in *S. aureus* infection

remain unclear. Identifying host pathways involved may lead to the development of

chronotherapeutic approaches that optimize timing for interventions against *S. aureus*

infections.

In this study, we explore the role of the host circadian clock in modulating *S. aureus*

infection of epithelial cells in an *in vitro* infection model. We demonstrate that *S. aureus*

invasion is dependent on the mammalian circadian phases and that specific bacterial

adhesins may control rhythmic invasion through interactions with clock-regulated host

proteins. This study implicates potential molecular targets that could inform new

strategies against *S. aureus* infection.

Methods and Materials

Bacterial strains, plasmids, and bacterial culture conditions

Staphylococcus aureus strains, *S. aureus* JE2 wild-type (WT) (BEI Resources),

including *S. aureus* reporter strains (containing pMV158-mCherry or pMV158-GFP),

S. aureus::mCherry (pOS1), *S. aureus*::GFP (pMV158), were cultured in tryptic soy

broth (TSB) medium at 37°C with shaking, in the presence or absence of 5 µg/mL

tetracycline, as appropriate.

Transposon mutants of key adhesion factors, including FnbA (fibronectin-binding

protein A), FnbB (fibronectin-binding protein B), and SraP (serine-rich adhesin for

platelets), were obtained from BEI Resources. These mutants were handled and

maintained according to the manufacturer's instructions to preserve their genetic

integrity and viability for subsequent experiments.

For infection experiments, bacterial cultures were initiated a day before the assay by

inoculating were grown overnight cultures from frozen stocks. These overnight

cultures were prepared to ensure bacterial viability and consistency. On the day of the

experiment, log-phase cultures were initiated by diluting the overnight cultures into

fresh TSB medium. Bacteria were grown in a shaker at 37°C to an optical density at

600 nm (OD_{600}) of 1.0, indicating active growth in the exponential phase of bacterial

growth.

Mammalian cell culture and circadian synchronization

Human lung epithelial A549 cells wild type (ATCC CCL-185) with or without sh*BMAL1*

knockdown were cultured in DMEM supplemented with GlutaMAX™ (ThermoFisher

Scientific), 1% Penicillin/Streptomycin and 10% fetal bovine serum (FBS). Cells were

maintained in a humidified atmosphere at 37°C with 5% CO_2.

To evaluate *Staphylococcus aureus* invasion, mammalian cells were seeded in 24-

well plates or four-chambered slides at a density of 3×10^5 cells per well and incubated

for 24 hours prior to infection.

For circadian synchronization experiments, cells were seeded at a density of 2×10^5

cells per well and allowed to adhere for 24 hours. Synchronization was achieved using

forskolin (FSK, 10 µg/mL), a potent cyclic AMP (cAMP) activator known to reset the

circadian clock of all cells in the culture vessel to a common phase [20,21]. Cellular clocks

were reset 6, 12, 18, or 24 h before infection with *S. aureus* to assess circadian phase

difference of bacterial invasion (Figure 1A).

For microscopy-based assessments, cells were seeded either in imaging 24-well

plates (Greiner) or on four-chambered slides (Nunc, Lab-Tek II) to facilitate imaging of

S. aureus interactions with epithelial cells.

Generation of transgenic A549 cell lines

BMAL1 knockdown cells were generated by lentiviral transgenesis following a

published strategy[22]. In short, lentiviral particles were generated by transfection of

HEK293FT cells (Invitrogen) with a third generation lenti-viral backbone pGIPZ for

shBMAL1 packaging and capsid plasmids (pCMVR8.74 and pMD2.G) using Trans-it

lentivirus reagent (Mirrus Bio) as described[23]. Viral supernatant was sterile filtered and

frozen at -80ºC until use. For lentiviral transduction, viral supernatant with 8 µg/mL

polybrene was added onto 60% confluent A549 cells, and incubated at 37ºC for 6 h,

after which cells were washed and incubated for 3 days in standard media. Afterwards,

media was supplemented with 10 µg/ml puromycin to select infected cells. Co-

expressed eGFP was assessed as further confirmation that cells had integrated the

shBMAL1 construct.

Invasion and survival assays

To evaluate the invasion of A549 cells, *S. aureus* cultured to OD_{600} of 1.0 (logarithmic

growth phase) were harvested by centrifugation at 5000 xg for 10 minutes and washed

twice with phosphate-buffered saline (PBS). The bacterial pellet was resuspended in

PBS and the required volume of this culture was added to the cell culture medium to

prepare the inoculum; 3×10^6 or 6×10^6 CFU/ml. This inoculum was added to epithelial

cells for 1 h to achieve a multiplicity of infection (MOI) of 10:1. Following the infection

period, extracellular bacteria were removed by incubating cells in culture medium

containing gentamicin (50 µg/mL) and lysostaphin (20 µg/mL) for 30 minutes. The

cells were then washed three times with PBS and lysed with cold water to release

intracellular bacteria. To enumerate colony forming units (CFU), cell lysates were

serially diluted and plated onto tryptic soy agar (TSA; Sigma). To monitor the

intracellular growth kinetics of bacteria using microscopy, infected cells were

incubated with 2 µg/mL lysostaphin. Imaging was performed using either a BioTek

Cytation 5 Multimode Reader (Agilent) or a confocal microscope (Olympus FV3000).

Analysis of rhythmic patterns for synchronised cells infected with *S. aureus* was

conducted on bacterial CFU or the fold-changes of internalised bacterial CFU/ml

(bacterial invasion) relative to unsynchronised cells. A COSINOR model was used as

previously described [24], using the equation Y=(Mesor+Amplitude*cos(((2*pi)*(X-

Acrophase))/Period)) with constraining Period to over 20 h. The linear model was Y=

YIntercept + X*Slope with no further constraint. Data was fit to COSINOR and linear

models and an extra sum-of-squares F-test was run at $p<0.01$ with the linear model

as null hypothesis.

RNA-Seq and data analysis

To harvest RNA, parental and *shBMAL1* A549 cells were seeded and synchronised

by FSK as described above. RNA was extracted at the indicated times post

synchronisation using the RNeasy Plus kit (Qiagen, 74134). Briefly, the cells were

washed thrice in PBS and lysed in the RLT buffer from the kit. Genomic DNA was

removed from the lysate using a gDNA eliminator spin column from the kit. 1 volume

of 70% ethanol was added to the flowthrough and loaded on a RNeasy spin column.

The column was centrifuged at 8000 xg for 30 s. This was followed by subsequent

washes with RW1 and RPE buffer. Excess ethanol from the column was removed by

spinning the column at 13000 xg for 1 min. Twenty ml RNase free buffer was added

to the column and spun at 8000 xg for 1 min. RNA was quantified using the Qubit

assay. The RNA samples (30 ng/µl) were sent to Novogene for library preparation

after poly(A) enrichment and subsequently sequenced using a pair-ended 150 bp kit

on an Illumina NovaSeq. Sequencing depth was at least 15 million reads per sample.

Gene count tables were generated using Kallisto on the BioJupies platform[25]. All

further analysis was conducted using iDEP 2.0[26]. The DESeq2 algorithm was used for

differential gene expression analysis with FDR cutoff of 0.01. Variance stabilising

transformation was used for PCA, heatmap and single gene visualisations and gene

expression reporting. Parametric Gene Set Enrichment Analysis (PGSEA) of KEGG

pathways was used for pathway analysis with FDR cutoff of 0.0001[27]. RNA-Seq data

are available at the ELIXIR database ArrayExpress under accession number E-MTAB-

15036.

Western blotting

To prepare cell lysates, synchronized and non-synchronised cells were lysed using RIPA buffer. Samples were separated on a 4-12% Native-PAGE gel and then transferred onto a nitrocellulose membrane (Bio-Rad). The membrane was blocked for 1 hour with 5% non-fat milk and then incubated overnight at 4°C with 1 mg/ml anti-BMAL1 mAb (Abcam, 93806), diluted 1:2000. Membranes were washed three times with Tris buffered saline with 0,1% Tween-20 (TBS-T) and incubated with a 1:2000-diluted HRP-conjugated secondary goat anti-mouse antibody (Abcam, 205718)) for 1 hour at room temperature (RT). After washing three times with TBS-T, the signal was detected using ECL Western Blot Substrate according to the manufacturer's instructions.

The blot was then stripped using stripping buffer, washed with TBS-T, blocked again for 1 hour with TBS containing 5% non-fat milk, and incubated overnight at 4°C with 1 mg/ml anti-Actin mAb, diluted 1:2000. The next day, membranes were washed three times with TBS-T and incubated with a 1:2000-diluted HRP-conjugated secondary goat anti-mouse antibody (Abcam, ab8227) for 1 h at RT followed by detection with ECL substrate as above.

Microscopy and image analysis

Image analysis for data recorded on the Cytation 5 was conducted using the BioTek Gen5 software. For live cell microscopy, for each sample, a region of interest (ROI) was identified and tracked over a 24 h period.

For bacterial visualization via confocal microscopy, cells were fixed with 4% paraformaldehyde (PFA) for 1 hour, followed by three washes with PBS. Actin was stained with Phalloidin 650 in the dark for 1 h. After staining, cells were washed three times with PBS, air-dried, and mounted using a mounting medium containing DAPI for nuclear staining. Stained samples were observed using an Olympus FV3000 Confocal Laser Scanning Microscope. Images were analysed with ImageJ using Fiji.

Results

S. aureus **invasion of human lung epithelial cells is dependent on circadian**
phase

To investigate the role of the circadian clock in the invasion of *S. aureus*, A549 cells
were synchronized using forskolin, a well-known natural compound commonly
employed for cellular clock synchronization[21]. Epithelial cells were synchronised by
forskolin at six-hourly intervals over a 24 h period and subsequently infected with
S. aureus for 1 h. In addition, unsynchronised A549 cells were infected (Figure 1A).
Notably, compared to unsynchronised cells, a higher number of intracellular bacteria
was observed in synchronised cells after 12 h hours before infection, as measured by
colony forming units (CFU), whereas a significantly lower uptake was detected in cells
synchronised 24 h before infection. These findings suggest that the phase of the
cellular circadian clock modulates the uptake of *S. aureus* (Figure 1B). Non-linear
curve fitting COSINOR analysis suggested a significant rhythmicity with and
approximately 3-fold change in colony-forming units (CFU) between the 12 h and 24 h
samples (Figure 1C).

To verify this result and visualize intracellular bacterial foci, confocal microscopy was
performed on fixed samples infected at different circadian phases as above. We found
a higher number of intracellular bacteria within cells synchronised 12 h before infection
compared to those 24 h before. Quantification of these samples showed on average
of ~3 bacterial foci per 100 mammalian cells in 12 h after FSK synchronisation, while
this decreases at 24 h post FSK to 1.5 bacterial loci foci per 100 mammalian cells
(Figure 1E), reinforcing the notion that the host's circadian clock may play a modulating
role in bacterial uptake with an amplitude of 2-3-fold.

We further monitored the intracellular growth kinetics of *S. aureus* in the presence of
5 µg/ml lysostaphin, which kills extracellular bacteria (Figure S1A) for 12 h after
infection of A549 cells using fluorescence live-cell imaging. As above, synchronised
A549 cells were infected at four distinct circadian phases. Consistent with results for
invasion, our data showed a steeper increase in bacterial foci in the earlier time (6 h
and 12 h) and a longer time to reach peak intra-cellular bacterial load (Figure S1B).

Together our findings highlight a potential role for the circadian clock in modulating

mammalian host cell factors for *S. aureus* cell invasion.

Figure 1. S. aureus invasion is modulated by epithelial cell circadian phase. (A)

Schematic diagram showing experimental design. A549 cells were synchronized with

forskolin (FSK) every 6 h for a 24 h period. FSK synchronised or unsynchronised cells

were infected with wildtype JE2 S. aureus for 1 h, and extracellular bacteria were

removed by gentamycin/lysostaphin treatment. (B) Intracellular bacterial numbers

determined by colony counts (CFU) from different times after synchronisation (green

dashed line shows value for mean unsynchronised cells), mean $\pm$ SD, significant

*ANOVA with post-hoc comparison to 12 h point indicated by * p>0.05 and ** p<0.01,*

N=6. (C) Data from B plotted as fold-change in CFU compared to an unsynchronized

control showing COSINOR best fit with 95% confidence interval. (D) Confocal images

of epithelial cells, synchronized by FSK for 24 h and 12 h, green - foci of intracellular

S. aureus-GFP, Red - actin stained by Phalloidin Alexa flour 647, Blue - nuclei stained

by DAPI.) Number of bacterial foci (green) and the number of cell nuclei (blue) in cells

synchronized for 12 and 24 h were counted manually- 5 fields were counted from 3

independent experiments, mean $\pm$ SD, p = 0.003, unpaired t-test.

Rhythmic *S. aureus* invasion is lost in clock-disrupted human epithelial cells

To investigate if the observed changes are driven by the canonical circadian clock, we
generated clock-disrupted A549 cells by targeting the transcription factor BMAL1, an
essential core circadian clock gene[1,28]. We generated *BMAL1* knockdown (sh*BMAL1*)
A549 cells using a lentiviral transduction system. Successfully transfected cells were
selected based on puromycin resistance and presence of the knockdown-construct in
the cells was confirmed by eGFP expression (Figure S2A). Downregulation of BMAL1
protein expression was confirmed via western blot analysis (Figure 2A). Quantitative
densitometric analysis of the blots revealed a 50% reduction in BMAL1 protein levels
in knockdown cells compared to parental A549 cells (Figure 2B). Gene expression
profiling with RNA-Seq also confirmed downregulation of *BMAL1* mRNA and pathway
analysis suggested a disruption of the KEGG pathway for "circadian rhythm" (Figure
S2B, C).

We then tested the clock disrupted *shBMAL1* A549 cells in the infection assay with
S. aureus as described above. Unlike parental cells, which again exhibited a circadian
phase-dependent rhythm of bacterial invasion, a temporal invasion pattern was
abolished in *shBMAL1* A549 cells. Non-linear COSINOR fit the data statistically worse
(Sum-of-squares F-test) than a linear model for *shBMAL1* cells (Figure 2D). This
observation strongly suggests the circadian clock, for which *BMAL1* is a critical
regulator, is necessary for *S. aureus* invasion rhythms in A549 cells.

Figure 2. The canonical circadian clock is necessary for rhythm of S. aureus invasion. *(A) Western blot of parental and shBMAL1 A549 cell lysates confirms BMAL1 knockdown. (B) Quantitation of band intensities relative to ACTIN showed an approximately 2-fold reduction, N = 3, *p = 0.0166, unpaired t-test. (C & D) Time-series of S. aureus invasion in parental (black: A549) and shBMAL1 (red: shBMAL1) A549 cells as described in Figure 1. Dotted lines on graph show the level of infection of unsynchronized control cells of each cell line. Best fit for COSINOR or linear model show depending on sum-of-squares F-Test as described in methods section.*

Interestingly, our data in *shBMAL1* A549 cells suggests an increase in *S. aureus*
invasion irrespective of time after synchronization. Quantitative CFU analysis showed
that the uptake in knockdown cells was approximately 1.7-fold higher than in parental
A549 cells (Figure 3A). Furthermore, intracellular bacterial survival after 4 hours was
also higher for *shBMAL1* cells (Figure 3B). To visualize intracellular bacteria, we
performed confocal microscopy on fixed mammalian cells. Consistent with the CFU
data, microscopy images confirmed a greater number of intracellular bacterial foci in
sh*BMAL1* cells compared to the parental line (Figure 3 C, D). The significantly higher
bacterial burden in *BMAL1* knockdown cells highlights its role as a regulator of host-
pathogen interactions, potentially through pathways that influence cellular processes
such as bacterial recognition, adhesion, or uptake.

Figure 3. Clock-disrupted cells are more permissive for S. aureus invasion. *(A) Parental and shBMAL1 A549 cells were infected with S. aureus JE2 as described in*

Figure 1, but after extracellular bacteria were removed cells were further incubated for

24 h in the presence of lysostaphin. Intracellular bacterial counts after (A) 1 h and (B)

24 h post infection. N=3, mean+/-SD, **p < 0.01, ***p < 0.001, unpaired t-test. (C)

Merged confocal images from infected and un-infected cells 24 h after infection, Red-

actin stained by Phalloidin Alexa flour 647, Blue- bacterial DNA and cell nuclei stained

by DAPI. (D) Quantification of intracellular bacterial number relative to number of

mammalian cells from confocal images with at least 5 fields of view per independent

experiment, N=3, p = 0.0022, unpaired t-test.

Effects of sh*BMAL1* knockdown on the lung epithelial cell transcriptome

To investigate the potential mechanisms underlying the increased bacterial uptake

after infection with *S. aureus* 12 h versus 24 h post synchronisation and the time-

invariant increase in sh*BMAL1* knockdown cells, we sequenced the transcriptome of

parental and sh*BMAL1* lines at 12 h and 24 h post synchronisation. The resulting

principal component analysis indicated good separation by cell line (significant

correlation with PC1, $p = 9.75e-07$, Figure 4A). Comparing both cell line samples from

12 h & 24 h together, using DESeq2 we found 1773 higher and 1920 genes

significantly lower expressed in knockdown vs. parental cells. Furthermore, 29 and

three genes were significantly down or up-regulated, respectively at 12 h compared to

24 h post FSK, and no DEGs were found for the interaction term of cell line and timing.

Given the low number of samples, this was not unsurprising. However, pathway

analysis using PGPSEA indicated that 17 KEGG pathways were significantly enriched

(Figure 4B). Reassuringly, "circadian rhythms" was significantly less active in the

knockdown cells (Figure 4B, Figure S2). Of the other 16 pathways, at least half have

some relevance with infection and inflammation processes. Interestingly, "*S. aureus*

infection" being one of them (Figure 4B).

Contrary to expectations, we did not observe consistent changes in the expression of

genes encoding integrins α5 and β1, the receptors to which S. *aureus* adhesins

fibronectin binding proteins, Fnbp A and Fnbp B, bind to for the invasion of epithelial

cells[29,30]. The gene encoding for *ITGA5* was not significantly changed, and *ITGB1* was

even significantly downregulated (Figure 4C). However, when we systematically

assessed all integrin isoforms and other extracellular proteins known to be involved in

S. aureus invasion, we found several other integrin isoforms like *ITGB2*, *ITGB5* were

upregulated in the *shBMAL1* A549 cells (Figure 4). Most interestingly, we observed a

substantial upregulation of the *GP340* coding gene (a.k.a. *DMBT1*). The bacterial

ligand to GP340 is the *S. aureus SraP* protein, which has been reported to facilitate

bacterial uptake [31,32]. Thus, regulation of *GP340* in the clock-deficient A549 cells may

be important in the circadian modulation of *S. aureus* uptake.

Figure 4. BMAL1 knockdown cells exhibit significant changes in gene

expression. *(A) PCA plot comparing the variance in gene expression by RNA-Seq*

between parental and shBMAL1 A549 cells collected at 12 h and 24 h after

synchronisation. (B) Significantly regulated KEGG pathways by PGPSEA analysis.

(C) Heatmap showing gene expression profiles for genes encoding integrin A (ITGA)

and B (ITGB) subunits and other receptors (DMBT1/GP340) involved in S. aureus

uptake profiles in parental and shBMAL1 A549 cells. Names of DEGs in red font. (D)

VST normalised expression of IGTA5, IGTB1 and GP340 at 12 h (open circles) and

24 h (closed circles) in parental (grey) and shBMAL1 (red) A549 cells.

The *S. aureus* adhesin *SraP* mediates higher bacterial uptake by sh*BMAL1* cells

To directly test the role of *GP340* in rhythmic *S. aureus* invasion, we compared the

internalisation of an *S. aureus sraP* mutant with the WT JE2 strain used above in

both, the parental and sh*BMAL1* A549 cells. Consistent with the data shown in

Figures 2 and 3, the uptake of *S. aureus* JE2 by sh*BMAL1* knockdown cells was

significantly increased compared to parental A549 cells, however, uptake of the s*raP*

mutants in *shBMAL1* was similar to that by the parental A549 cells (Figure 5A).

Importantly, in both cell lines, and consistent with Figures 1 and 2, JE2 but not s*raP*

mutants showed rhythmic invasion in A549 cells. As expected, both strains did not

show rhythmic invasion into *shBMAL1* A549 cells (Figure 5B), but a much higher

invasion in non-synchronised cells (Figure 5A).

Additionally, we infected both cell types with transposon mutants lacking FnbpA and

FnbpB), key *S. aureus* adhesins/invasins. We observed that while the uptake of

these mutants was also higher in *shBMAL1* when compared to parental A549 cells,

there was no difference when we compared fold changes relative to WT JE2 (Figure

S3B).

Thus, in contrast to other adhesins tested, our data suggest that *S. aureus SraP*

mediate rhythmic bacterial uptake through GP340 and the observed increase in

BMAL1 knockdown cells.

Figure 5. GP340 ligand SraP *mediates the rhythmic uptake of S. aureus in lung*
***epithelial cells.** (A) Parental and shBMAL1 A549 cells were infected with WT*
S. aureus (JE2) or S. aureus sraP transposon mutant for 1 h, and intracellular bacterial
numbers as measured by CFU were compared. (B) Infection of S. aureus JE2 and
sraP mutant at four phases of the circadian cycle. Fold changes of CFU for each strain
to that of respective control unsynchronised cells are plotted. Best fit for COSINOR or
linear model show depending on sum-of-squares F-Test as described in methods
section. N = 3.

Discussion

The ability of *S. aureus* to invade and survive within mammalian cells has been

attributed to bacterial persistence, antibiotic resistance and recurrent infections.

Although *S. aureus* factors that enable cell invasion have been well studied, the host

cellular pathways that mediate this are less understood. Circadian rhythms have been

demonstrated to influence several host immune responses during infection with some

bacteria exhibiting time-of-day differences in infecting flies and mice[12]. However, at

the cellular level, the role of the circadian clock in controlling pathogen invasion or

intracellular survival is not known. Here we provide evidence for the role of the

mammalian circadian clock in modulating invasion of *Staphylococcus aureus* in human

lung epithelial A549 cells. We found significant temporal variations in bacterial uptake,

a peak in invasion 12 h after forskolin (FSK) synchronisation of the A549 cells and a

marked decrease 24 h post synchronisation. Disrupting the clock by a *shBMAL1*

knockdown not only abrogated the rhythm in invasion, but also increased the bacterial

load, highlighting the influence of the canonical circadian clock in host-pathogen

interactions at a cellular level. Notably, using transcriptomic analysis, we identified a

significant upregulation of *GP340* in the clock-disrupted *shBMAL1* A549 cells. GP340

is a key factor for the uptake of *S. aureus* by epithelial cells, which mediates rhythmic

uptake of bacteria through the *S. aureus* adhesin SraP[31-33]

Circadian regulation of immune responses is well documented, with evidence

suggesting that various immune processes, including cytokine production and

phagocytosis, exhibiting circadian variations[34]. Colonisation by bacterial pathogens

including *Salmonella typhimurium, Streptococcus pneumoniae and S. aureus* have

been shown to be impacted by the time of the day, primarily driven by clock-dependent

immune responses to infection[35]. As intracellular survival of many of these pathogens

have been reported to be an important feature of bacterial pathogenesis, our findings

could be relevant for multiple intracellular pathogens. Our findings extend this

knowledge by demonstrating that synchronization with FSK not only impacts the

invasion of *S. aureus* but also alters the intracellular responses to bacterial challenge.

BMAL1 has a key role in the regulation circadian rhythms[28]. This complex also

activates the transcription of negative regulators, which feedback to inhibit BMAL1-

CLOCK activity, ensuring tightly regulated 24-hour rhythms in gene expression[36]. It

has been shown that the circadian transcription factor BMAL1 modulates hepatitis C

virus (HCV) entry into hepatocytes by regulating the expression of the viral receptors

Cd81 and *Claudin-1*[37]. Pharmacological inhibition of *Bmal1* by REV-ERB agonists

reduced *Cd81* and *Claudin-1* expression and inhibited viral entry in cells[37]. Similarly,

this was found to down-regulated *angiotensin-converting enzyme 2* expression, which

is essential for the entry and replication of SARS-CoV-2 in lung epithelial cells[38]. This

highlights the importance of circadian processes for the treatment of viral infection. In

addition, various parasitic infections are also linked with regulation of circadian clock[12].

Importantly, it has been reported that the complete loss of circadian regulation in

Bmal1 knockdown cells alters the structure of actin cytoskeleton, which is coupled with

a significant increase in *S. pneumoniae* burden compared to WT cells, emphasizing a

role for *Bmal1* in limiting bacterial uptake and proliferation[39].

Our data demonstrated increased bacterial uptake in *BMAL1* knockdown cells

occurred independently of FSK synchronization, indicating that the temporal

modulation in bacterial uptake cannot be explained by the effect of FSK on cAMP

induction per se but establishes a role for *BMAL1* in host susceptibility to *S. aureus*

invasion. These observations align with the report that *Bmal1* influences immune cell

function and can modulate inflammatory responses[40].

Microbial surface components recognizing adhesive matrix molecules (MSCRAMMs)

are most prominent surface proteins expressed by staphylococci, which facilitate

adhesion to the extracellular matrix (ECM) components such as collagen, fibrinogen,

and fibronectin (Fn)[41]. Although, the fibronectin-binding protein (FnBP)–fibronectin

(Fn)–$\alpha 5\beta 1$ integrin pathway is the primary route for *S. aureus* internalization[30,42], we

did not find upregulation of the main integrins $\alpha 5\beta 1$ in parental vs. *shBMAL1* A549

cells. Although *fnbA* and *fnbB* mutants showed reduced uptake in parental cells, they

showed higher invasion in *shBMAL1* A549 cells, suggesting involvement of secondary

mechanisms in bacterial uptake. As we observed differential regulation of other

isoforms of integrins in the RNA-seq, it is possible that other integrin isoforms are

potentially involved in bacterial uptake. The specific roles of these isoforms in

S. aureus uptake, however, have not been extensively studied and their potential

involvement in bacterial uptake warrants further investigation.

Fibronectin-independent mechanisms are known to mediate *S. aureus* entry and

involve distinct surface proteins such as serine-aspartate repeat-containing protein D

(SdrD), clumping factor A (ClfA), autolysin (Atl), and serine-rich adhesin for platelets

(SraP) [41]. SdrD directly binds Desmoglein 1 (encoded by *DSG1*)[43], ClfA interacts with

host cells either directly or via fibrinogen bridges[44] and Atl associates with heat shock

cognate protein 70 (*HSPA8*)[45], while SraP binds to the salivary scavenger receptor

GP340[31,32]. Interestingly, we found notable upregulation of *GP340* in circadian-

disrupted *BMAL1* knockdown cells, and a reduced invasion of *sraP* mutant strains in

BMAL1 knockdown cells suggesting a role for the SraP-GP340 pathway in circadian

modulated bacterial invasion. SraP, a member of a family of serine rich glycoproteins

encoded by Gram positive bacteria including *Streptococcus spp*[33], was shown to

mediate adhesion to epithelial cells through its L-lectin binding module[31]. It was also

recently reported to modulate macrophage apoptosis and inflammation, indicating its

role in *S. aureus*-immune cell interactions[46].

Despite the robust findings of this study, we use of a single epithelial cell line (A549)

which may limit the generalizability of the results across different cell types and

physiological contexts. Future studies should examine the impact of circadian rhythms

on *S. aureus* invasion in other cell types, in particular immune cells may link these

findings better to previous studies on circadian effects in immune responses. A

broader range of epithelial and immune cell types to ascertain whether similar patterns

are observed. Additionally, while our study provides insights into the role of *BMAL1* in

regulating bacterial invasion, the specific downstream signalling pathways and

molecular mechanisms remain to be elucidated. Further investigation is warranted to

dissect these pathways and understand how circadian rhythms influence the

expression of key receptors involved in bacterial adhesion and invasion.

The implications of these findings extend to the potential for developing therapeutic

strategies that target circadian rhythms to improve the timing and efficacy of

antimicrobial treatments. For instance, studies have shown that administering

antibiotics in alignment with the host circadian cycle can enhance their effectiveness

and reduce side effects[47]. In conclusion, our study highlights the critical role of

circadian rhythms in modulating the dynamics of *S. aureus* invasion in epithelial cells.

Overall, our results highlight the critical interplay between circadian biology and

microbial pathogenesis, suggesting that manipulation of circadian pathways may

provide new avenues for innovative strategies aimed at preventing and treating

bacterial infections**.**

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Author contributions

Author contributions

P.A. designed and carried out the experimental work, analysed the resulting data
and co-wrote the manuscript.

G.C. and J.P. contributed to the experimental design, carried out experimental work
and contributed to the writing of the manuscript.

R.D. and M.U. jointly supervised the work, and contributed to formal analysis, writing
of the manuscript and acquisition of funding.

485   **Competing interests**

486   The authors declare no competing interests.

487   **Data availability**

488   Summary data are depicted in the figures. Raw data are available from the

489   corresponding authors upon reasonable request. RNA-Seq data are available at the

490   ELIXIR database ArrayExpress under accession number E-MTAB-15036.

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Supplementary figure legends

Figure S1. Bacterial growth kinetics is delayed at 24 h compared to 12 h after
synchronisation. (A) A549 epithelial cells were synchronized with FSK every 6 h over
a 24 h period and infected with *S. aureus* for 1 h, extracellular bacteria were removed
by gentamycin/lysostaphin treatment and cells imaged in presence of lysostaphin for
12 hours. (B) Average number of intracellular *S. aureus* foci in hourly intervals $\pm$ SD.

Figure S2. Validating the *BMAL1* knockdown in A549 lung epithelial cells. (A)
Generation of stable *shBMAL1* cell line expressing puromycin and eGFP. (B)
Quantification of knockdown efficiency from RNA-Seq experiment. (C) Heatmap of
Circadian Rhythm KEGG pathway from PGSEA was significantly deregulated (N=3,
condition and cell line).

Figure S3. Comparison of the invasion of *S. aureus* JE2 and transposon mutants
of *fnbA* and *fnbB* and genes. Parental and *shBMAL1* A549 cells were infected with
JE2 *S. aureus WT* and mutant strains of *S. aureus f*or 1 hour and intracellular bacteria
quantified by colony counts. (A) Bacterial counts (CFU) after 1 h infection (B) Fold
change in CFU calculated with respect to JE2 strain. Statistical significance of 2-way
ANOVA with Sidac post-hoc test as **** $p < 0.0001$.

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