Mitochondria-Lysosome Crosstalk Shapes Metabolic Transition in Neonatal Enterocytes

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SUMMARY

The neonatal gastrointestinal tract mediates nutrient absorption and the establishment of immune tolerance

to commensal microbiota. In early life, lysosome-rich enterocytes (LREs) in the ileum are necessary for the

intracellular digestion of maternal milk proteins. However, the molecular mechanisms sustaining their

function remain incompletely characterized. Here, we demonstrate that LRE mitochondrial homeostasis

and autophagic capacity are critical for efficient nutrient uptake and maintenance of their specialized

identity, as disruption of either process leads to premature differentiation into post-weaning enterocytes

(PECs) with diminished endolysosomal and metabolic activity. Transcriptomic profiling further revealed that

neonatal LREs exhibit a distinctive antioxidant signature, which preserves redox balance and safeguards

the expression of the transcriptional regulators MAFB and BLIMP1, both central repressors of the neonatal-

to-adult metabolic transition. These findings establish the mitochondria–lysosome axis as a key determinant

of LRE function and neonatal metabolic programming. They also provide a mechanistic framework for

understanding how organelle dysfunction and redox imbalance may contribute to early-life malnutrition

syndromes, such as Kwashiorkor, and suggest therapeutic strategies aimed at preserving mitochondrial

and lysosomal integrity.

KEYWORDS

42 Intestine, Enterocyte, Autophagy, Mitochondria, Lysosome, Neonatal, Metabolic Switch, ROS, Nutrient
43 Absorption, Mouse

INTRODUCTION

The small intestine is a specialized section of the gastrointestinal tract (GIT) engaged in nutrient digestion and absorption, while simultaneously acting as a barrier against harmful substances. It consists of a variety of cell types, with epithelial and immune cells playing key roles in maintaining intestinal function. Through their interactions with one another and the gut microbiota, these cells help create a finely balanced microenvironment that supports both nutritional and immunological functions[1,2]. The main absorptive epithelial cells in the intestine are called enterocytes. They are the most numerous cells in the intestinal epithelium and, along with secretory epithelial cells (including Paneth, goblet, and enteroendocrine cells), originate from stem cells of the intestinal crypts[1].

Dietary protein is a macronutrient essential for growth and overall organismal homeostasis. In weaned mammals, protein digestion takes place in the lumen of GIT, where gastric pepsin and intestinal proteases sequentially break down proteins into oligopeptides and free amino acids, which are then absorbed by enterocytes via specific transporters[3–5].

However, in the intestinal lumen of suckling mammals and stomachless fishes, protease activity remains low and protein digestion is incomplete[3–5]. For this reason, their posterior-mid small intestine contains a population of lysosome-rich enterocytes (LREs), formerly referred to as vacuolated enterocytes[6–8]. These cells possess a highly developed endolysosomal system, including a prominent lysosomal vacuole (LV), which is capable of internalising and metabolising intact proteins via non-specific fluid-phase processes (pinocytosis) and receptor-mediated endocytosis and membrane adsorption[5,7,9,10]. Moreover, LREs facilitate the transcytosis of antigens, maternal immunoglobulins, and antibodies across the epithelial barrier while preserving their biological activity, contributing to the immune system development[5,11]. Recent studies have highlighted the nutritional importance of LREs during the neonatal period. Key endolysosomal proteins, whose absence leads to developmental defects, have been identified, including Mucolipins 1 and 3[12], Pllp[8], Mamdc4 (also known as endotubin)[13] and Dab2[7]. Despite these findings, the molecular mechanisms that regulate endocytic and lysosomal pathways in LREs are still not fully understood.

Autophagy is a conserved lysosome-dependent catabolic pathway that recycles intracellular components and nutrients. This process involves the sequestration of cytoplasmic material into double-membraned autophagosomes, which subsequently fuse with lysosomes for degradation and breakdown. The lipidation of LC3, a key step in autophagosome formation, is mediated by the ATG12–ATG5–ATG16L1 complex[14,15]. Mutations in components of this complex have been linked to intestinal pathologies[16,17], and *Atg5*-deficient neonates exhibit increased neonatal mortality under fasting conditions, underscoring the essential role of autophagy during early postnatal life[18]. Despite this, the homeostatic role of autophagy throughout the entire neonatal period, particularly in LRE biology, remains unclear.

Autophagy plays a crucial role in cellular metabolism and differentiation, primarily through the selective elimination of mitochondria (mitophagy), thereby contributing to the control of reactive oxygen species (ROS) levels[19,20]. Beyond their role in energy production, mitochondria and ROS also function as key

regulators of cell signalling and differentiation[21–23]. In the intestinal epithelium, a gradient of increasing

mitochondrial mass, activity, and ROS levels has been described along the crypt–villus axis, correlating

with higher degrees of cellular differentiation[24]. However, how mitochondrial homeostasis and ROS

dynamics influence the developmental remodelling of enterocytes remains poorly understood. In particular,

their role in regulating the metabolic and functional transition of neonatal LREs into post-weaning

enterocytes (PECs) has not yet been explored.

This study reveals that the mitochondria–lysosome axis is essential for the function and maturation of LREs.

We show that LREs rely on high autophagic and mitophagic activity to sustain nutrient absorption and

lysosomal integrity, and that disruption of either autophagy (*Atg16*cKO) or mitochondrial homeostasis

(*Tfam*cKO) leads to impaired endolysosomal function, oxidative stress, and premature weaning transition

through the repression of the transcription factors BLIMP1 and MAFB. These findings establish organelle

homeostasis as a critical determinant of neonatal enterocyte identity and provide mechanistic insights into

how its disruption contributes to childhood malnutrition.

RESULTS

Lysosome-rich enterocytes (LREs) display heightened basal autophagy levels essential for
absorptive function

Unlike adult enterocytes, LREs rely on intracellular digestion within lysosomes to process macromolecular

nutrients. This process demands a highly active endolysosomal system that breaks down complex proteins

into absorbable units, which confers a particular architecture to LREs (**Figures S1A and S1B**)[9]. Autophagy,

the cellular mechanism responsible for degrading and recycling cellular components, plays a central role in

maintaining lysosomal function and turnover[25]. In LREs, elevated basal autophagy may support

endolysosomal activity. Exploring this hypothesis could clarify the role of autophagy in the absorption and

processing of nutrients in neonates, as well as its contribution to early development.

Utilising the GFP-LC3 transgenic mouse model (*GFP-Map1lc3a*[TG/+]) [26], we visualised autophagosomes as

GFP-LC3 positive puncta and monitored autophagy flux via western blot (WB) by assessing the levels of

free GFP, a byproduct of lysosomal degradation of GFP-LC3 II (**Figures 1A, 1B and S1C**)[27,28]. The presence

and activity of LREs was determined by probing with mCherry/ fluorescent dextrans that are internalised as

a macromolecule by LREs, but not by PECs (**Figures 1A, 1B, S1C, and S1D**)[7]. Following gavage,

fluorescent-dextran was rapidly internalised from the lumen into early and late endosomes (**Figure S1D**,

arrowheads), accumulating progressively in lysosomal vacuoles (LVs) (**Figure S1D**, arrows). WB analysis

was performed on lysates in epithelial cells from both proximal and distal sections of small intestines in

GFP-LC3 mice at neonatal stages (P1, P7 and P14), and post-weaning (P21–30). This analysis revealed

a proximal-distal gradient of protein absorption and autophagic degradation, mirroring the anterior-posterior

intestinal maturation (**Figure 1B**)[29].

In the distal intestine, protein absorption preceded the induction of autophagy, with a subtle onset already detectable at P1, although no free GFP signal was observed. By P7, both mCherry uptake and free GFP increased markedly, with a strong accumulation of free GFP (**Figure 1B**, pink rectangle), indicating peak autophagic activity in LREs—coinciding with the establishment of neonatal intestinal features[30]. At P14, mCherry absorption persisted in the distal region, while free GFP levels declined, and by weaning (P21) both signals were absent (**Figure 1B**). Quantification of mCherry and free GFP in ileal epithelial lysates at P7 and P21 confirmed these developmental differences (**Figures 1C and S1C**).

In contrast, the proximal intestine displayed a different temporal profile. At P1, both mCherry and free GFP were already present, but their levels progressively declined, and at P14 only low residual signals were detectable. Note that undegraded GFP-LC3 forms (I and II) and intermediate degradation products accumulated at P21, in both distal and proximal samples (**Figure 1B**).

Given these observations, we conclude that LREs maintain elevated autophagy levels relative to PECs, most probably as a result of their enhanced lysosomal function. To explore the consequences of autophagy disruption in these cells during early development, we utilised a genetic mouse model. ATG16L1 is crucial for both autophagosome formation and LC3 lipidation, two processes essential for autolysosomal degradation[31,32]. This gene has been extensively studied for its association with inflammatory bowel diseases[6,17]; nonetheless, its specific role in LRE functionality during the neonatal period remains largely unexplored. For this, we crossed with the *Atg16l1*^{fl/fl} mice[33], with mice expressing the *Villin-creER*[T2] transgene[34]. This breeding strategy generated an *Atg16l1* knockout offspring in which the *Atg16l1* gene is conditionally deleted in the intestinal epithelium upon administration of tamoxifen (*Atg16*cKO) (**Figure 1D**).

Initially, we validated our model via WB analysis by measuring the levels of ATG16L1 and LC3 isoforms (cytoplasmic LC3-I and lipidated LC3-II) in the ileum of both WT and *Atg16*cKO mice at P14. We observed a significant reduction in ATG16L1 protein levels across all *Atg16*cKO samples, which led to a corresponding decrease in LC3-II/LC3-I ratio (**Figures 1D and 1E**). Specifically, our data showed an 84.5% reduction in ATG16L1 protein levels and an approximately 8-fold decrease in LC3-II/LC3-I ratio (**Figure 1E**). Furthermore, we observed elevated levels of P62, indicating a reduction in its autophagy-dependent degradation (**Figures 1D and 1E**). These outcomes are consistent with previous results[35].

Subsequently, we examined the developmental trajectory of *Atg16*cKO mice, with a primary focus on their intestinal morphology and function. We observed that the mice reached the post-weaning stage (P30) without apparent issues, showing no weight defects throughout early postnatal development (**Figure S2A**). No significant changes were noted in the length or histological state of the small and large intestines (**Figures S2B–S2D**). However, a reduction in villus length and a decrease in the number of Goblet cells (GCs) were detected in the ileum at P14 (**Figures 1F and 1G**), along with mild oedema in the ileum at P30, an indicator of inflammation (**Figure S2D**). Inspired by these observations, we quantified specific intestinal epithelial (IEC) and immune cell subpopulations in the ileum of *Atg16*cKO mice at both neonatal and post-weaning stages using flow cytometry (**Figures S2E and S2F**). For this, we applied specific markers to

identify various IEC subtypes, including enterocytes and their progenitors (EC), Goblet cells (GC), Paneth
cells (PC), and enteroendocrine cells (EEC)[36] (**Figure S3**, middle row). We also focused on cells related to
innate immunity (IIC), such as CD11b+ cells (including NK cells, granulocytes, and
macrophages/monocytes), as well as adaptive immunity, encompassing B lymphocytes (B cells) and CD4+
T helper cells (Th cells). We observed an increase in IIC and IEC populations during the neonatal period,
accompanied by a concurrent decrease in GC and EEC in adult IECs (**Figure S2E**). In contrast, post-
weaning samples showed a rise in B cells, stabilization in IIC and IEC levels, an increase in GC, and a
decrease in PC and EEC (**Figure S2F**). These results corroborate our histological findings regarding GCs
and inflammation.

Next, we investigated the effect of autophagy inhibition on the absorption of macromolecules in the ileum.
We gaveged rhodamine B–dextran (Rd-dextran) as a probe in *Atg16*cKO and WT mice as controls (**Figure**
1H). Our analysis differentiated between the apical and basal regions of enterocytes to assess the
sequential entry of Rd-dextran, according to the internalization dynamics observed in these cells (**Figure**
S1D). Confocal microscopy demonstrated that at P7, *Atg16*cKO enterocytes internalized Rd-dextran
similarly to WT counterparts. Nevertheless, it is worth noting that in *Atg16*cKO enterocytes, Rd-dextran
levels were slightly elevated in the apical region but reduced in the basal region compared to WT (**Figure**
1H). This observation suggests a deceleration in the internalisation of macromolecules during this
developmental period. Subsequently, at P14, *Atg16*cKO enterocytes exhibited a complete abrogation of
macromolecule absorption, resembling PECs and indicating an advancement in intestinal maturation
(**Figure 1H**). To validate the observed decrease in absorption at P14, we probed neonates from both WT
and *Atg16*KO groups with mCherry and quantified the internalised mCherry in the ileum via WB. The results
confirmed consistently lower levels of nutrient absorption in *Atg16*KO mice (**Figures 1I and 1J**). Altogether,
we conclude that blocking autophagy severely disrupts macromolecule absorption in the neonatal ileum.

To further investigate this role autophagy in macromolecule absorption, we examined the expression of the
endocytic genes *Dab2*, *Amn*, and *Mamdc4*, as well as the lysosomal genes *Mcoln3*, *Lamp2*, and *Ctsl1*.
Previous studies have demostrated the specific role of these genes on the endolysosomal function of
LREs[7,12,13]. Indeed, we validated their expression during early postnatal intestinal development (**Figure 2A**).
As expected, an upregulation of these genes was observed in distal samples at P7, coinciding with the
presence of LREs (**Figure 2A**). Moreover, a proximodistal expression pattern was observed, consistent with
the antero-posterior maturation of the intestine[29] (**Figure 2A**).

Then, we studied the mRNA expression of *Dab2*, *Mcoln3*, and *Lamp2* genes in both the proximal and distal
regions of the small intestines of WT and *Atg16*cKO mice at P7 and P14 (**Figures 2B and S2G**). Since LREs
predominantly localise in the distal region, the proximal segment was also analysed to assess potential
compensatory mechanisms. In distal *Atg16*cKO samples at P7, mRNA levels of these LRE markers were
significantly reduced (**Figure 2B**), while the proximal region showed no significant changes compared to
WT mice (**Figure S2G**). By P14, a substantial reduction in gene expression was evident in both proximal

and distal *Atg16*cKO mice samples (**Figures 2B and S2G**). Additionally, we analysed *Amn*, *Mamdc4,* and

Ctsl1 mRNA expression in the ileum at P14, finding lower expression levels in the *Atg16*cKO samples

(**Figure S2H**).

To delve deeper into the protein levels of Dab2, we performed WB and immunofluorescence (IF) analysis

in the ileum of *Atg16*cKO mice at P7 and P14. While P7 samples exhibited reduced mRNA expression

(**Figure 2B**), Dab2 protein levels remained comparable to WT; however, by P14, a marked reduction in

Dab2 was observed in *Atg16*cKO samples (**Figures 2C–2F**).

Furthermore, we assess the lysosomal occupancy and content in the apical and basal regions of WT and

*Atg16*cKO ileal enterocytes using confocal microscopy with an anti-LAMP1 antibody as a lysosomal marker,

as the *Lamp1* and *Lamp2* genes exhibit similar expression patterns (data not shown). Post-weaning (P21–

30) WT mice were used as controls. At P7, both WT and *Atg16*cKO enterocytes exhibited comparable

lysosomal occupancy and content, with peak intensity observed in both conditions (**Figures 2G and 2H**).

However, by P14, while lysosomal occupancy remained similar, *Atg16*cKO enterocytes demonstrated

reduced intensity in both the apical and basal regions (**Figures 2G and 2H**). Magnified images also revealed

that lysosomes in *Atg16*cKO enterocytes were smaller in P14 neonates, resembling those of PECs (**Figure

2G**, arrowheads). This reduction in lysosomal content in *Atg16*cKO P14 ileum was further confirmed by WB

analysis (**Figures 2I and 2J**).

In summary, our results indicate that autophagy plays a crucial role in preserving endolysosomal

homeostasis of LREs. Disruption of autophagy in LREs using the *Atg16*cKO mice results in significant

defects in macromolecule uptake and lysosomal function, accompanied by the downregulation of key

endocytic and lysosomal genes, particularly in the distal ileum of late neonatal mice. These outcomes

highlight the importance of autophagy in maintaining LRE function and, consequently, ensuring proper

postnatal development. However, the precise mechanisms by which autophagy exerts its effects remain

unclear.

LREs show a significant induction of mitophagy to control mitochondrial homeostasis

To elucidate the primary type of autophagy in neonatal enterocytes, we defined the gene expression

signature of LREs through bulk RNA sequencing. Leveraging the high levels of macromolecular absorption

and autophagy in LREs, we probed neonatal GFP-LC3 mice (P7) with Rd-dextran and isolated LREs from

the cellular suspension of the ileum by fluorescence-activated cell sorting (FACS), selecting them as the

epithelial cells with high levels of autophagy and Rd-dextran (Rd-dext$^+$GFP^{high}). Moreover, to highlight their

genetic neonatal signature, LREs were compared to post-weaning enterocytes (PECs) from mice (P42).

Following RNA extraction, we conducted next-generation sequencing (NGS) analysis (**Figures 3A and

S4A**).

We detected a total of 1,537 differentially expressed genes (DEGs), of which 1,036 were upregulated and
501 were downregulated in LREs (**Figure 3B**). Differential expression analysis and principal component
analysis demonstrated that each population exhibited unique enrichment signatures (**Figures S4B and**
S4C). The computational method of over-representation analysis (ORA) identified which biological
processes were overrepresented in the differentially expressed genes (DEGs)[37]. The majority of
differentially regulated pathways were associated with lysosomal function, nutrient absorption, processing,
and transport (**Figures 3C, 3D, and S4D**). These findings are consistent with earlier RNA-Seq data from
LREs in zebrafish[7]. Nonetheless, the regulation of lipid metabolism pathways differed (**Figure 3C and S4D**),
suggesting that mammalian LREs significantly modulate these pathways to process lipids from maternal
milk.

Among the most upregulated genes were those associated with endocytosis, such as *Mamdc4*, *Dab2*, and
Amn, as well as lysosome-associated genes like *Mcoln3* and *Ctsl1* (**Figure 3B**). The upregulation of *Dab2*,
Amn, and *Lamp2* genes corresponded with previously published ileum transcriptome data from mice and
zebrafish[7]. Additionally, the overexpression of *Mamdc4* and *Mcoln3* genes also aligned with earlier results
in LREs from rodents[12,38]. We confirmed elevated levels of *Ctsl1* mRNA expression and lysotracker staining
in LREs compared to PECs in WT mice (**Figures S4E and S4F**), which validated the RNA-Seq data and
ensured that the lysosome-associated pathway was not positively regulated due to the selection of neonatal
enterocytes with high autophagy levels.

Interestingly, the 'positive regulation of autophagy of mitochondrion ' and 'mitochondrial outer membrane'
pathways appeared significantly enriched in LREs (**Figures 3C and 3D**). These outcomes, along with the
upregulation of several genes involved in mitophagy, such as *Bnip3*, *Atg10*, and *Map1lc3a* (**Figure 3B**)[39,40],
indicated that mitophagy is a significant component of the elevated autophagic activity observed in LREs.
To explore this hypothesis, we examined the mRNA expression of the canonical mitophagy genes *Prkn*
(Parkin) and *Pink1*[41], together with *Bnip3* as a control, in ileal samples from WT mice across developmental
stages (E18.5-P42). While *Bnip3* exhibited a progressive decrease in expression throughout development,
Prkn and *Pink1* showed upregulation in neonatal samples, especially *Prkn* (**Figure 3E**). Moreover, we
observed that LREs displayed increased Parkin protein levels compared to PECs through IF (**Figure 3F**).

Next, we assessed mitophagy in LREs and PECs using the fixable *mito*-QC reporter C57BL/6J mouse[42],
which ubiquitously expresses a chimeric protein consisting of pH-insensitive mCherry, a pH-sensitive GFP,
and the mitochondria-targeting sequence (MTS) from the outer mitochondrial membrane protein FIS1
(amino acids 101–152). This allowed us to differentiate between cytoplasmic mitochondria (mCherry⁺GFP⁺)
and mitochondria degraded by mitophagy in lysosomes (mCherry⁺GFP⁻) (**Figure 3G**). Confocal images of
LREs revealed a high concentration of red-fluorescent mitochondria inside their endolysosomal system
(**Figures 3H and 3I**). In fact, when we inhibited autophagic flux by treating the neonates with the protease
inhibitor Leupeptin (40 mg/kg for 16 hours)[43], we observed a significant expansion of LVs and a
considerable accumulation of red-only mitochondria within them (**Figure 3H**, arrows; **and 3I**). In contrast,

PECs exhibited fewer red mitochondria in lysosomes and a uniform distribution of yellow mitochondria
throughout the cytoplasm (**Figures 3H and 3I**).

Thus, we confirmed the high mitophagic activity of LREs, suggesting severe impairment of mitophagy and
mitochondrial integrity in *Atg16*cKO enterocytes. Indeed, we found that mRNA expression levels of both
Bnip3 and *Prkn* (**Figure 3J**), along with Parkin protein levels (**Figure 3K**), were significantly lowered in
neonatal *Atg16*cKO enterocytes. To further investigate the robust mitophagic activity of LREs, we generated
an autophagy-deficient *mito*-QC mouse line (*mQ-Atg16*cKO). We observed that in *Atg16*cKO LREs
exhibited reduced mitochondrial mass within the lysosomes (**Figures 3L and 3M**), consistent with the low
mitophagy observed in PECs (**Figures 3H**, lower panels). Therefore, the suppression of autophagy in LREs
results in the downregulation of mitophagy-related genes and a reduced uptake of mitochondria into
lysosomes.

Motivated by these results, we addressed the mitochondrial status of *Atg16*cKO mice. Using transmission
electron microscopy (TEM), we analysed mitochondrial damage, quantity, and morphology in ileal
enterocytes from neonatal *Atg16*cKO mice (**Figure 4A–4C**). Mitochondria were categorized into three
classes based on electron density, cristae appearance, matrix loss, and outer membrane integrity: class I
(normal), class II (partially affected), and class III (damaged) (**Figure 4B**)[44]. For each class, the number,
percentage, area, and dimensional ratio (aspect ratio, AR: major axis/minor axis) were quantified (**Figure
4C**). The data showed that number and percentage of mitochondria within each class were similar across
both WT and *Atg16*cKO enterocytes. However, while class I mitochondria in *Atg16*cKO enterocytes
exhibited a smaller area and a higher AR, class III mitochondria showed a larger area, suggesting an
accumulation of damaged mitochondrial mass due to impaired autophagy (**Figure 4C**).

To further validate the mitochondrial status, we performed flow cytometry on neonatal *Atg16*cKO
enterocytes using mitochondrial probes *ex vivo*: Mitotracker Green for mitochondrial mass, Mitotracker Red
CMXROS for membrane potential, and CM-H$_2$DCFDA for ROS[36,45]. This analysis confirmed an increase in
mitochondrial mass, membrane potential, and ROS in *Atg16*cKO enterocytes (**Figure 4D**). In conclusion,
the inhibition of mitophagy in LREs leads to an increased in the mass of dysfunctional mitochondrial.

Collectively, mitophagy represents a significant component of the heightened autophagic activity observed
in LREs. Its inhibition not only contributes to the mitochondrial defects seen in neonatal *Atg16*cKO
enterocytes but may also account for the impairment of their endolysosomal system. These findings
highlight a compelling link between the mitochondria-lysosomes crosstalk and neonatal development, as
well as the associated metabolic adaptations.

Dysfunction of the mitochondria-lysosome axis in the neonatal epithelium causes an early
metabolic switch dependent on BLIMP1 and MAFB

An interesting phenotype observed in neonatal *Atg16*cKO enterocytes was their resemblance to PECs,
particularly in terms of the abrogation of macromolecule absorption and the reduction in endolysosomal
system functionality. This phenotype could suggest an acceleration of their metabolic transition. At the end
of lactation, the mammalian intestine becomes capable of digesting nutrients extracellularly, replaces LREs
with PECs (without LVs), and regulates the expression of enzymes to adapt to the new solid diet[3,46].
Previous studies have demonstrated that the transcriptional factors BLIMP1, MAFB, and c-MAF (two
members of the Maf family of proteins) mediate the metabolic shift in enterocytes during neonatal
development[47–49]. At weaning, Blimp1 expression decreases, leading to a downregulation of neonatal
enzymes such as β-galactosidase (Glb1) and argininosuccinate synthase 1 (Ass1), and an increase in
expression of adult enzymes, including sucrase-isomaltase (Sis), trehalase (Treh), and arginase 2
(Arg2)[48,49]. Similarly, early inhibition of MAFB and c-MAF in neonatal intestine induces a comparable
metabolic switch [47].

Our RNA-Seq analysis comparing LREs and PECs confirmed these dynamics: LREs expressed higher
levels of *Mafb*, *Blimp1*, *Glb1*, and *Ass1*, along with a decrease of *Sis*, *Treh*, and *Arg2* (**Figure S5A**). *c-maf*
showed no significant differences (**Figure S5A**), though transient regulation at specific neonatal stages
cannot be excluded. Consistently, RT-qPCR analysis of proximal and distal small intestine samples from
WT mice across development (E18.5–P42) revealed neonatal enrichment of transcription factors and
neonatal enzymes, whereas post-weaning samples displayed the opposite profile, with strong induction of
adult enzymes (**Figures S5B and S5C**). *Arg2* expression levels closely paralleled those of Sis and Treh
(data not shown).

To investigate whether autophagy deficiency contributes to this transition, we studied the expression of
these metabolic genes in our *Atg16*cKO model. Gene expression analysis revealed a moderate
downregulation of the transcription factor genes *Blimp1* and *Mafb*, except for *c-maf*, as well as a more
pronounced downregulation of neonatal enzyme genes *Ass1* and *Glb1*. In contrast, there was an
upregulation of adult enzyme genes *Treh*, *Sis*, and *Arg2* (**Figure 5A**). Similarly, confocal microscopy
analysis revealed reduced levels of MAFB, BLIMP1 (**Figures 5B and 5C**), and ASS1, along with increased
levels of TREH in neonatal *Atg16*cKO enterocytes (**Figures 5D and 5E**). This later result was also confirmed
by WB analysis in neonates (**Figure 5F and 5G**). In summary, *Atg16*cKO mice advance their metabolic
transition in enzymes regulated by MAFB/BLIMP1 in their neonatal epithelium.

Next, we studied the metabolic profiles of neonatal enterocytes from *Atg16*cKO mice, in comparison with
neonatal and post-weaning WT mice. In order to evaluate deeply the metabolic transition during the
neonatal development and the impact of autophagy, we used a pioneer technique called Met-flow. The Met-
Flow technique is a flow cytometry-based method that examines the metabolic state of cells by evaluating
the levels of rate-limiting enzymes across key metabolic pathways. Specifically, we studied ASS1 and GLS
as markers of amino acid (AA) metabolism, HK1 as a marker of glycolysis, CPT1A and ACAC as markers
of fatty acid (FA) metabolism, CS and IDH2 for the tricarboxylic acid (TCA) cycle, and ATP5A for oxidative

phosphorylation (OXPHOS)[45,50] (**Figure S5D**). Met-Flow analysis revealed higher expression of most

metabolic pathways in LREs compared to PECs (**Figure S5E**), reflecting a their hyperconsumptive signature

aligned with the high energy demands of this developmental period[51]. Notably, neonatal *Atg16*cKO

enterocytes exhibited a moderate reduction in enzyme protein levels, positioning them between those of

WT neonates and post-weaning mice (**Figure 5H**). This intermediate profile is indicative of a globally

accelerated metabolic transition toward a more adult state.

In summary, our results reveal that autophagy is essential for coordinating mitochondrial and metabolic

remodeling during neonatal ileum development and the weaning transition. Suppression of autophagy

perturbs endolysosomal and mitochondrial integrity, thereby altering the transcriptional control of LREs.

Consequently, LREs undergo a premature metabolic switch, marked by MAFB and BLIMP1 dysregulation

and reduced activity of key metabolic pathways.

Mitochondrial homeostasis is critical for maintaining LREs function and their metabolic transition

After identifying mitochondrial homeostasis defects as a downstream consequence of impaired

endolysosomal function in the *Atg16*cKO model, we next investigated whether mitochondria themselves

play an intrinsic role in sustaining LRE integrity. For this purpose, we used the *Tfam*cKO mouse model

(*Tfam^fl/fl/Villin-creER^T2*), which enables inducible deletion of Tfam in the neonatal intestinal epithelium. This

approach allowed us to directly test whether mitochondrial dysfunction is sufficient to compromise

lysosomal homeostasis in LREs.

TFAM is a transcription factor that regulates the transcription and replication of mitochondrial DNA

(mtDNA)[52]. While the role of mitochondria in maintaining intestinal homeostasis has been extensively

explored[24], and the consequences of Tfam deletion have been reported in both embryonic and adult

intestinal epithelium[53], its specific contribution during the neonatal stage, and particularly in nutrient

absorption and processing by LREs, remains unexplored.

We first characterized the general phenotype of *Tfam*cKO pups during the neonatal period. These mice

exhibited developmental defects, a generally poor appearance, and significantly reduced body weight,

starting around P8, which ultimately compromised their survival and prevented successful weaning (**Figures**

6A–6C). Given the severity of the phenotype and in adherence with animal welfare guidelines, euthanasia

was performed after two consecutive days without weight gain or upon observing weight loss of around

10% (**Figure 6C**). Based on the timing of euthanasia, we defined two experimental groups: mice euthanised

between P9–P11 (hereafter referred to as P10), and those euthanised between P13–P15 (hereafter

referred to as P14). In the ileum of both groups, we confirmed a marked reduction in *Tfam* mRNA expression

(**Figure 6D**), accompanied by decreased levels of mtDNA, as assessed through the quantification of

electron transport chain-encoded genes including *mt-Nd1*, *mt-Co*1, *mt-Co2*, and *mt-Atp6* (**Figure S6A**). In

addition, *Tfam* deletion resulted in a selective loss of mitochondrial gene expression at P10 (*mt-Nd1*, *mt-*

Co2), while nuclear *Sdha* expression was unaffected (**Figure S6B**). We also observed a significant reduction

in MTCO1 (complex IV subunit) protein levels in ileal sections of *Tfam*cKO at P14 (**Figures S6C and S6D**).

These results validated our neonatal *Tfam*cKO model and were consistent with findings from other *Tfam*KO

models[45,54,55].

Further histological examination of the distal small intestine of *Tfam*cKO mice at P10 and P14 revealed

substantial structural alterations. The epithelium exhibited clear signs of disorganization and inflammation,

characterised by notably shorter, malformed villi, oedema, reduced GCs, and a thicker submucosa and

lower mucosa (**Figures S6E–S6H**). Enterocytes also exhibited aberrant vacuoles, suggesting dysfunctions

in nutrient processing (**Figure S6E**, arrows).

Moreover, flow cytometry analysis of the ileum at P10 and P14 revealed increased percentages of IIC (B

cells, and Th cells) in *Tfam*cKO samples (**Figures S6I–S6K**). Given the elevated OXPHOS activity

characteristic of intestinal stem cells (ISCs)[56], we assessed ISC populations in ileal sections from P10 and

P14 *Tfam*cKO mice via Olfm4 immunofluorescence (**Figure S6L**, arrows), which revealed a marked

reduction in Olfm4^{+} crypts (**Figures S6M**). Additionally, lysozyme staining showed a striking increase in

mislocalised PCs (**Figures S6N and S6O**). These PCs exhibited mislocalization, aberrant morphologies and

enlarged granules, indicative of disrupted crypt architecture and compromised ISC niche homeostasis

(**Figure S6N**, arrowheads).

With the systemic and intestinal phenotypes of *Tfam*cKO mice defined, we next investigated how loss of

TFAM affects mitochondrial homeostasis in LREs. Firstly, mitochondria from *Tfam*cKO enterocytes at P10

and P14 were analyzed by TEM, following the same approach previously used in *Atg16*cKO mice. At P10,

*Tfam*cKO enterocytes displayed more class I and II mitochondria, with reduced area and AR (**Figures 6E,**

6F, and S6P). By P14, damaged class III mitochondria increased while class I mitochondria decreased in

number, size, shape and AR (**Figures 6E, 6F, and S6P**). This progressive mitochondrial damage resembles

that observed in a previously described *Tfam*KO model in renal epithelial cells[55]. These data were

corroborated by subsequent flow cytometry analysis, which revealed increased mitochondrial mass,

membrane potential, and ROS levels in neonatal *Tfam*cKO enterocytes (**Figure 6G**), features reminiscent

of those observed in TFAM-deficient lymphocytes[45,54].

In summary, deletion of *Tfam* in the neonatal intestinal epithelium severely disrupted mucosal structure and

function, leading to developmental defects that culminated in early mortality. Specifically, in LREs, TFAM

loss caused the accumulation of damaged mitochondria and increased oxidative stress.

We next investigated whether mitochondrial dysfunction could similarly drive an accelerated metabolic

transition in neonatal enterocytes, as observed in the *Atg16*cKO model. The microscopy analysis indicated

a reduction in the expression levels of BLIMP1 and MAFB, with a more pronounced decrease in BLIMP1

(**Figures 6H and 6I**). As a result, we also observed lower levels of ASS1 and elevated expression of TREH

in the *Tfam*cKO enterocytes (**Figures 6J and 6K**). These results were further supported by gene expression

analyses of metabolic transition genes that are regulated by BLIMP1, MAFB, and c-MAF. We obtained a

progressive downregulation of *Mafb*, *c-maf*, *Blimp1*, *Ass1,* and *Glb1*, accompanied by an upregulation of

Treh, *Sis*, and *Arg2* at P14 (**Figure S7A**). Finally, the activity of key metabolic pathways was assessed in

neonatal *Tfam*cKO enterocytes using Met-Flow[45,50], revealing a marked reduction in nearly all metabolic

proteins, except for ATP5A (**Figure 6L**), which was increased, possibly due to mitochondrial accumulation

or as a compensatory response to mitochondrial dysfunction. Taken together, these findings indicate that

neonatal *Tfam*cKO enterocytes undergo a premature metabolic transition, resembling the metabolic profile

of PECs.

Following the analysis of mitochondrial defects in *Tfam*cKO neonatal enterocytes, we next investigated

whether impaired mitochondrial function also perturbs the endolysosomal system of LREs. Although

lysosome–mitochondria crosstalk has been predominantly characterized in the context of mitophagy, our

findings suggest a reciprocal layer of regulation, whereby mitochondria control lysosomal biogenesis and

function. This bidirectional communication implies that mitochondrial dysfunction not only disrupts energy

metabolism but also secondarily compromises lysosomal integrity, thereby exacerbating the metabolic and

endolysosomal defects observed in neonatal *Atg16*cKO enterocytes. Indeed, neonatal *Tfam*cKO

enterocytes exhibited a complete loss of Rd-dextran uptake (**Figures 6M and 6N**) and a progressive

downregulation of the endocytic genes *Dab2*, *Amn*, and *Mamdc4* (**Figures S7B–S7D**). Subsequently, we

characterised a gradual reduction in the expression of lysosomal genes *Lamp2*, *Mcoln3*, and *Ctsl1* (**Figure

S7E**), accompanied by a decrease in lysosomal content and size (**Figures 6M, 6O, S7F and S7G**). Thus,

neonatal *Tfam*cKO enterocytes recapitulated the phenotype observed in the *Atg16*cKO model, validating a

reciprocal interaction between mitochondria and lysosomes in LREs.

In conclusion, the *Tfam*cKO model enabled us to establish a bidirectional relationship between mitochondria

and lysosomes by recapitulating the endolysosomal defects observed in autophagy-deficient neonatal

enterocytes. Furthermore, we confirmed that mitochondrial and lysosomal dysfunction drive an early

metabolic switch in LREs. These alterations, alongside epithelial inflammation, developmental delay, and

premature death, position the *Tfam*cKO model as a valuable tool for investigating the pathophysiology of

childhood malnutrition.

Antioxidant activity in LREs modulates the onset of metabolic switch

After defining the metabolic switch underlying neonatal development, and the early metabolic switch in both

*Atg16*cKO and *Tfam*cKO models, we focused on uncovering the mechanisms responsible for this

phenotype. The observation that our gene-deficient mice presented heightened ROS levels in enterocytes

(**Figures 4D and 6G**) suggested that redox dysregulation may underlie their accelerated metabolic

transition. Indeed, the high mitophagic activity observed in LREs may contribute to the control of ROS[19,20].

Previous studies have shown that oxidative stress has been reported to repress *c-maf* expression[57] and

that antioxidant treatment can induce *Blimp1* expression[58]. Therefore, we hypothesise ROS regulation

could represent a critical mechanism for controlling the timing of the metabolic transition in LREs.

We found that LREs exhibited significantly higher levels of mitochondrial ROS (mROS) compared to PECs

(**Figure 7A**), possibly reflecting their elevated OXPHOS activity[59]. In contrast, total ROS levels were lower

in LREs than in PECs (**Figure 7A**), indicating the presence of mechanisms that tightly regulate oxidative

stress.

Then, we further explored our LREs vs PECs RNA-Seq dataset analysis to identify additional pathways

involved in ROS regulation. Numerous pathways related to ROS, ROS response, and antioxidant activity

stood out (**Figure 7B and 7C**). Further, there was an overexpression of genes for the antioxidant enzymes

Glutathione Peroxidase-3 (Gpx3) and Catalase (Cat) (not shown), suggesting that these antioxidants could

be reducing ROS levels in LREs. Indeed, we observed that neonatal ileal samples showed induction of

Gpx3 and *Cat* expression compared to the embryo and post-weaning ileal samples, with the most drastic

changes in *Gpx3* (**Figure 7D**). Moreover, in both *Atg16*cKO and *Tfamc*KO neonates, *Gpx3* and *Cat*

expression were significantly decreased in the ileum (**Figure 7E and 7F**), and GPX3 protein levels were

likewise reduced, as shown by IF (**Figure 7G-J**). Thus, oxidative stress may act as a trigger for the metabolic

transition in LREs. To validate this hypothesis, neonatal mice were treated with hydrogen peroxide (H_2O_2)

to induce oxidative stress[60]. mRNA expression analysis revealed a downregulation of the transcription

factors *Blimp1*, *Mafb*, and *c-maf*, alongside an upregulation of adult enzymes such as *Treh* and *Arg2*.

However, the expression of neonatal enzyme genes *Ass1* and *Glb1* remained unchanged (**Figure 7K**).

Subsequently, we characterised a reduction of BLIMP1 and ASS1 levels by both IF and flow cytometry

(**Figure 7L–7N**), while TREH expression was found to be increased (**Figure 7L and 7M**).

The data collectively suggest that elevated antioxidant activity is a key characteristic of LREs. When this

antioxidant function is compromised in neonatal *Atg16*cKO and *Tfamc*KO enterocytes, alongside

mitochondrial dysfunction, the oxyidative stress rise. This increase in ROS contributes to the repression of

genes such as *Blimp1*, *Mafb*, and *c-maf*, ultimately triggering an early metabolic transition (**Figure 7O**).

Therefore, this study emphasizses the critical role of mitochondrial-lysosomal coordination in mitigating

oxidative stress and regulating the transcriptional programs essential for neonatal intestinal development.

Additionally, it paves the way for future research into therapeutic strategies aimed at restoring mitochondria-

lysosome homeostasis and redox balance in early gut disorders.

DISCUSSION

In this work, we have elucidated new molecular mechanisms fundamental to the function and differentiation

of mammalian LREs, highlighting the role of the mitochondria-lysosome axis. Disruption of autophagy in

the neonatal gut, either through *Atg16*cKO or mitochondrial dysfunction via *Tfamc*KO, resulted in defective

nutrient absorption and a reduction in lysosomal content. Most importantly, *Tfamc*KO neonates exhibited

weight loss and premature death, resembling hallmarks of infant malnutrition. Notably, the early enzymatic

maturation of *Atg16*cKO and *Tfam*cKO enterocytes indicates a direct connection between autophagic and

mitochondrial processes in enterocytic maturation. Additionally, the associated increase in ROS observed

in both models may contribute to this metabolic switch by suppressing the expression of transcription factors

BLIMP1, MAFB, and c-MAF. These findings are consistent with our transcriptomic data, which reveal

upregulation of mitophagy- and antioxidant-related pathways in LREs compared to PECs, supporting the

concept that mitochondrial quality control and redox homeostasis are defining features of LRE identity and

function. Taken together, our outcomes offer interesting mechanistic insights into the mitochondria-

lysosome crosstalk and its role in postnatal intestinal physiology, with implications for understanding the

pathophysiology of neonatal malnutrition and related disorders.

Autophagy and endocytosis are vesicle-mediated pathways that converge at the lysosome to degrade and

recycle intra- and extracellular components. These processes intersect at multiple stages (vesicle

formation, trafficking, and fusion) and share several key regulators. Mounting evidence indicates reciprocal

dependence between these processes[25,61]. Using GFP-LC3 mice, we demonstrated that neonatal ileal

samples exhibit increased autophagosome degradation compared to post-weaning counterparts (**Figures

1A–1C and S1C**). Consistently, *Atg16*cKO neonates displayed impaired absorption (**Figures 1H–1J**) and

showed reduced expression of crucial endocytic genes characteristic of LREs (**Figures 2B–2F, S2G and

S2H**). Moreover, *Atg16*cKO neonatal enterocytes displayed reduced lysosomal size and content (**Figures

2G–2J**), along with downregulation of key lysosomal genes (**Figures S2G and S2H**). These outcomes reveal

a functional interplay between autophagy and the endolysosomal system in LREs.

Despite these endolysosomal defects, *Atg16*cKO mice reached the post-weaning stage without apparent

physiological abnormalities, aside from mild signs of intestinal inflammation (**Figures S2A–S2D**). This

observation aligns with findings in mice lacking the lysosomal cation channels Mucolipin-1 and -3 (Mcoln1

and Mcoln3), which also exhibit pronounced endolysosomal abnormalities in neonatal enterocytes but

develop into phenotypically normal adults[12]. Together, these results suggest that endolysosomal and

autophagic processes primarily affect LREs. Accordingly, once the neonatal period concludes and LREs

are replaced by PECs, the phenotype becomes attenuated or fully resolves. However, further investigations

will be needed to assess intestinal physiology and metabolism in adult *Atg16*cKO mice comprehensively.

We characterized a significant increase in autophagic activity in LREs as primarily due to the lysosomal

degradation of mitochondria, a process known as mitophagy. Indeed, mitophagy-related genes exhibit a

higher expression in neonatal ileum compared to post-weaning samples (**Figures 3B–3F**). Correspondingly,

neonatal *mito*-QC mice[42] demonstrated enhanced mitochondrial degradation within the LVs of LREs

compared to PECs (**Figures 3H and 3I**). Furthermore, this process was inhibited either by leupeptin

treatment[43] (**Figures 3H and 3I**) or through genetic ablation of autophagy (*Atg16*cKO) (**Figures 3L and 3M**),

confirming the dependence of mitochondrial clearance on lysosomal-autophagic activity. Consistent with

this, neonatal *Atg16*cKO enterocytes accumulated dysfunctional mitochondrial mass (**Figure 4**).

Specifically, these cells showed an increase in the area of damaged mitochondria (class III), whereas

healthy mitochondria (class I) exhibited a smaller area but an increased aspect ratio (**Figures 4A–4C**).

These differences possibly reflect not only mitophagy blockade but also alterations in mitochondrial

dynamics, such as enhanced fusion or reduced fission, which are aimed at preserving oxidative

phosphorylation (OXPHOS) capacity[62]. Future studies should investigate the expression of proteins

involved in mitochondrial fusion and fission in the *Atg16*cKO model to define better the molecular landscape

that integrates mitochondrial dynamics with mitophagy in LREs.

After identifying mitochondrial homeostasis defects secondary to impaired endolysosomal function in the

*Atg16*cKO model, we next investigated the reverse relationship by directly disrupting mitochondrial function

using the *Tfam*cKO model. *Tfam*cKO neonates exhibited severe growth impairment and premature death

(**Figures 6A–6C**), and their enterocytes accumulated markedly damaged mitochondria (**Figures 6E–6G and**

S6P). These mice also reproduced key features of the *Atg16*cKO phenotype, including loss of uptake

capacity, reduced lysosomal content, and downregulation of endolysosomal genes (**Figures 6M–6O and**

S7B–S7G). Interestingly, these lysosomal defects differ from what has been observed in *Tfam*-deficient T

and B lymphocytes, where dysfunctional acidic lysosomal compartments are expanded[45,54]. In neonatal

enterocytes, however, Tfam deletion results in diminished lysosomal size and content, highlighting that

mitochondria–lysosome interactions are highly cell-type specific. Beyond this bidirectional crosstalk, our

data raise the possibility of a retrograde signalling mechanism. Mitochondria are increasingly recognized

as signalling hubs that influence nuclear transcriptional programs, as shown in immune cells. In LREs, two

interconnected processes may be at play: first, endolysosomal-mediated nutrient internalization, which is

defective in both *Atg16*cKO and *Tfam*cKO models; and second, mitophagy-driven mitochondrial

degradation, which provides retrograde signals to the nucleus. This latter pathway could be essential for

controlling the transcriptional networks that govern the metabolic switch (via BLIMP1 and MAFB) and for

sustaining lysosomal functionality itself. In this view, lysosomes must degrade mitochondria not only to

preserve organelle quality control but also to control the transcriptional reprogramming required for the

neonatal-to-adult metabolic transition.

At weaning, the mammalian intestine undergoes a shift to extracellular nutrient digestion and adjusts its

enzymatic profile to meet the metabolic demands of a carbohydrate-rich solid diet[3]. At the same time, LREs

are replaced by PECs lacking large lysosomal vacuoles[46]. The transcription factors BLIMP1 (PRDM1),

along with MAFB and c-MAF (both members of the Maf protein family) have been positioned as central

repressors of this switch. Neonatal mice lacking these transcription factors in the intestinal epithelium

exhibited impaired nutrient absorption, early downregulation of neonatal enzymes, and upregulation of adult

counterparts, ultimately leading to developmental defects[47–49]. Furthermore, our research demonstrated

that dysfunctions in autophagic, lysosomal, and mitochondrial processes in LREs —induced by the deletion

of *Atg16l1* and *Tfam*— led to a repression of these transcription factors, resulting in similar phenotypes

(**Figures 1H, 5, 6H–6N and S7A**).

We further analysed the activity of core metabolic pathways in WT, *Atg16*cKO, and *Tfamc*KO neonatal

enterocytes, comparing them to PECs (**Figures 5H, 6L, and S5E**). This analysis revealed a moderate

reduction in metabolic activity in *Atg16*cKO cells and a more noticeable decline in *Tfamc*KO enterocytes,

suggesting a shift toward an adult-like metabolic state. These findings contrast with previous transcriptomic

data from neonatal mice lacking MAFB and c-MAF, which reported an upregulation of OXPHOS and fatty

acid degradation pathways[47]. However, that study did not include a direct comparison to PECs, leaving

open the possibility of compensatory mechanisms. In this context, our results may provide a more accurate

reflection of the metabolic trajectory during neonatal-to-adult transition and its dependence on the

mitochondria-lysosome axis.

We have defined the metabolic evolution of enterocytes during neonatal development beyond the genes

classically associated with the transcription factors BLIMP1, MAFB, and c-MAF, and established a

functional link between this transition and the maintenance of lysosomal and mitochondrial homeostasis.

At the same time, our data reinforce the idea that, in enterocytes, genetic programs prevail over the sensing

of external cues: despite the neonatal context (milk-based diet, reduced microbiota, and limited immune

activation)[63], the repression of these transcription factors leads to inevitable epithelial maturation. Yet, the

cellular mechanisms that regulate these genetic pathways still need to be clarified.

Reactive oxygen species (ROS) are oxygen-derived molecules that play a crucial role in various cellular

processes, including energy production, mitochondrial signalling, and cell differentiation[64,65]. Their

intracellular levels are tightly regulated through multiple mechanisms: the mitochondrial electron transport

chain constitutes a major source of ROS, while antioxidant enzymes serve as key systems for neutralizing

their excess[59,64,65]. In the intestine, ROS have been primarily associated with more differentiated epithelial

cells exhibiting higher OXPHOS activity[24]. However, their role in epithelial maturation during neonatal

intestinal development continues to be unexplored.

Our results indicate that LREs display a transcriptional signature consistent with elevated antioxidant

activity, possibly as a compensatory mechanism to counteract high levels of mitochondrial ROS resulting

from hyperactivated OXPHOS (**Figures 7A–7D**). Beyond this homeostatic role, recent studies suggest that

this antioxidant signature may also be linked to the repression of transcription factor genes *Blimp1*, *Mafb*,

and *c-maf*, and consequently, to the maintenance of LRE identity and function. The antioxidant vitamin

ascorbic acid has been shown to increase the expression of Blimp1 in B lymphocytes through the activity

of DNA demethylases TET2 and TET3[58]. Conversely, treatment with H_2O_2 decreases the expression of *c-*

maf, whereas the ROS scavenger N-acetyl cysteine (NAC) can restore its levels in human adipose tissue-

derived mesenchymal stem cells[57].

This hypothesis is further supported by the elevated ROS levels and the loss of the antioxidant signature

observed in our knockout models (**Figures 4D, 6G, 7E–7J**), as well as by our experiments in which H_2O_2

treatment of neonatal WT mice accelerated the metabolic transition of enterocytes (**Figures 7K–7N**).

Together, these outcomes suggest that both ROS levels and ROS-regulated genetic programs actively

shape epithelial differentiation and metabolic programming in the neonatal intestine (**Figure 7O**). This may
represent a physiological mechanism to prevent premature transitions until the tissue is developmentally
prepared. In this context, therapeutic strategies aimed at fine-tuning redox homeostasis could offer a
powerful approach to supporting neonatal intestinal health.

In addition to their role in nutrient absorption, LREs may act as immunometabolic sentinels during the
neonatal period, integrating microbial cues and intracellular metabolic status to modulate immune
responses. Due to their high endolysosomal activity, LREs could internalise and process luminal antigens,
including microbial components, thereby contributing to the development of the intestinal immune system[66].
In line with this, our RNA-Seq analysis revealed multiple differentially regulated immune-related pathways
(data not shown).

Disruption of lysosomal and mitochondrial homeostasis in *Atg16*cKO and *Tfam*cKO mice likely impairs
these immune functions, as suggested by the inflammatory status observed in both models (**Figures S2D–**
S2F, S6E, and S6H–S6K). In fact, mice with autophagy defects also exhibit gut microbiota alterations and
immune dysregulation[17]. Furthermore, cytosolic mtDNA resulting from mitochondrial damage due to TFAM
deficiency has been shown to activate the cGAS–STING inflammatory pathway[55], while mitophagy
induction, along with improved mitochondrial status, attenuates this response[43]. Additionally, *c-maf* KO
mice exhibit changes in intraepithelial lymphocytes and microbiota composition[67], suggesting that genetic
programs involved in epithelial maturation, affected in our KO models, may be tightly linked to intestinal
immune and microbial homeostasis.

Given the immunometabolic imbalance observed in *Atg16*cKO and *Tfam*cKO neonates, it is plausible that
these models experience alterations in their gut microbiota. These changes may not only reflect enterocytic
dysfunction but could also actively contribute to the phenotype by disrupting microbial-derived cues
essential for LRE maintenance and programming. Future studies involving microbiota profiling and
transplantation will help determine whether restoring a balanced microbial ecosystem can rescue LRE
function.

Finally, the potential microbiota alterations described above, together with the inflammation and oxidative
stress observed in our KO models, suggest parallels with known hallmarks of children's malnutrition
disorders. Particularly, *Tfam*cKO mice display a more pronounced phenotype and marked developmental
defects, resembling features of Kwashiorkor, a severe form of protein deficiency prevalent in low-income
settings [68,69]. This redox imbalance—marked by low antioxidant levels and increased ROS—in our KO
models closely mirrors that seen in malnourished children, and may contribute to the broader clinical
phenotype of undernutrition[68]. Accordingly, pilot studies have demonstrated that antioxidant
supplementation may provide therapeutic benefit in conditions such as Kwashiorkor[70]. Moreover, our H_2O_2
treatment experiments, which replicated the epithelial maturation phenotype characterized in our gene-
deficient mice, might similarly induce nutritional, microbial, and inflammatory disturbances. Indeed,
intestinal tissues from H_2O_2-treated neonates displayed signs of inflammation (data not shown).

Collectively, these considerations suggest that malnourished children may also experience premature
intestinal maturation and highlight the need for deeper investigation into antioxidant therapies as potential
interventions. Furthermore, our KO models may serve as valuable experimental platforms to investigate
the mechanisms underlying neonatal malnutrition and to explore interesting avenues for its treatment.
Altogether, future studies aimed at restoring LRE mitophagy and metabolism, as well as modulating the
redox balance, could yield promising strategies to counteract the devastating consequences of malnutrition-
related disorders in early life.

In conclusion, our study uncovers novel mechanisms underlying the function and metabolic transition of
neonatal enterocytes. We demonstrate that lysosomal and mitochondrial homeostasis is indispensable for
efficient nutrient absorption and for sustaining the high metabolic activity required during this energy-
demanding stage of life. Further investigation of the mitochondria-lysosome axis in LREs will not only
advance our understanding of neonatal intestinal physiology but also contribute significantly to the
development of targeted interventions against childhood malnutrition.

Limitations of the study

This work demonstrates that neonatal intestinal deficits in autophagy and mitochondrial homeostasis lead
to endolysosomal dysfunction in enterocytes, impairing development and ultimately triggering inflammation
and early lethality. However, since we used *Villin-cre*-based models, where gene deletion occurs in all
intestinal epithelial cells, we cannot exclude their contribution to the observed phenotypes. Indeed, we
detected altered abundance and morphology of these cells in both *Atg16*cKO (**Figures 1F, 1G, and S2E–**
S2F) and *Tfam*cKO mice (**Figures S6G, S6L–S6O**). Previous studies support this interpretation: defects in
GCs and PCs are linked to intestinal inflammatory diseases[71,72], and intestinal autophagy loss has been
associated with increased oxidative stress in ISCs[36], which could partially explain the elevated ROS levels
in *Atg16*cKO enterocytes (**Figure 4D**). Similarly, *Tfam* deletion in the adult intestinal epithelium causes ISC
loss and lethality[53], suggesting that depletion of ISCs may contribute to the early death of neonatal
*Tfam*cKO mice, limiting our ability to study mitochondrial function in enterocytes at later developmental
stages.

To address these limitations, we plan to develop an LRE-specific tamoxifen-induced conditional knockout
model to target critical genes specifically in neonatal enterocytes. Although selectively targeting neonatal
enterocytes would yield a more precise model, this is hindered by the lack of fully specific promoters and
the technical difficulty of isolating and culturing LREs, which are highly sensitive to dissociation-induced cell
death. To overcome these challenges, we are also studying *in vitro* systems that recapitulate the properties
of LREs and may serve as a platform for future functional validation.

RESOURCE AVAILABILITY

Lead contact

Further information and requests for resources and reagents should be directed to and will be fulfilled by the lead contact, Fernando Martin-Belmonte (fmartin@cbm.csic.es).

Materials availability

This study did not generate new unique reagents.

Data and code availability

RNA-seq Illumina paired-end reads (FASTQ) generated for this study are available at the European Nucleotide Archive (ENA; http://www.ebi.ac.uk/ena/) under the study accession number PRJEB46511.

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DECLARATION OF INTERESTS

The authors declare no competing interests.

FIGURE TITLES AND LEGENDS

Figure 1. High Autophagic Activity of LREs Is Required for Nutrient Absorption

(A and B) Assessment of autophagic flux and protein absorption along the small intestine of GFP-LC3 mice during postnatal development. GFP-LC3 mice at postnatal days (P) 1, 7, 14, and 21 were orally gavaged with mCherry and sacrificed 3 hours later (n = 3) (A). Proximal and distal intestinal segments were harvested (A), and epithelial cell lysates analysed by immunoblotting for mCherry and GFP-LC3 isoforms (B). The representative western blot in (B) distinguishes cytosolic LC3-I, membrane-bound LC3-II, and cleaved "free GFP," a marker of autolysosomal degradation. The pink rectangle highlights mCherry and free GFP in distal-P7, indicating maximal protein uptake and autophagic degradation. USP7, loading control. Figure 1A includes images adapted from Birchenough et al.[73] (CC BY 4.0) and Zhao et al.[74], and the GFP-LC3 isoforms scheme is based on Ni et al.[28].

(C) Quantification of mCherry and free GFP levels in lysates of ileal epithelial cells from P7 (n = 4) and P21 (n = 5) GFP-LC3 mice. Data derived from Figure S1C.

(D and E) Generation and validation of *Atg16l1* intestinal knockout (*Atg16*cKO) mice. Ileal epithelial cell lysates from WT and *Atg16*cKO P14 mice were immunoblotted for ATG16L1, LC3, and P62 (D). (E) Quantification of ATG16L1 (n = 5,6) and P62 (n = 6,7), and LC3-II/LC3-I ratio (n = 17). In ATG16L1 and P62 graphs, data relative to WT.

(F and G) Ileal architecture in *Atg16*cKO neonates. Periodic acid-Schiff (PAS)-haematoxylin staining of P14 ileal sections from WT and *Atg16*cKO mice (F) shows villus shortening (double red arrow) and a decrease in goblet cells (PAS+, arrowheads) in *Atg16*cKO sections (n = 3). L, lumen; scale bar, 100 µm. (G) Quantification of villus length and goblet cells per villus. Dots represent individual villi (n = 30 villi from 3 mice; 10 villi per mouse).

(H) Confocal analysis of Rd-dextran uptake in ileal *Atg16*cKO enterocytes. WT and *Atg16*cKO neonates at P7 (early) and P14 (late), and post-weaning (P21–30) WT mice were gavaged with rhodamine B–dextran (Rd-dext, red) 16 hours prior to sacrifice (n = 3). Ileal sections labelled with β-catenin (βcat, white) and DAPI for DNA (blue). Dashed-line squares indicate magnified areas. Arrows point to lysosomal vacuoles; arrowheads, apical endosomes. L, lumen. Scale bars: 10 µm (main); 5 µm (insets). Dot plot shows the quantification of Rd-dextran intensity (integrated density) in the apical and basal regions of enterocytes. Dots represent individual enterocytes (n = 25–40).

(I and J) *Atg16*cKO mice show impaired mCherry absorption. P14 mice were gavaged with mCherry and ileal epithelial cell lysates collected 16 hours later for immunoblotting (I). Actin, loading control. (J) Quantification of mCherry signal, normalised to WT (n = 9,11).

In (C, E, J), dots represent individual mice and charts depict mean + SEM. In (G, H), dot plots show mean ± SEM (black lines).

(C, E, G): Student's t-test (mCherry, ATG16L1, P62, villus length) and Mann–Whitney test (free GFP, LC3 ratio, goblet cells/villus). (J): Mann–Whitney test. (H): Kruskal–Wallis test; only statistically significant comparisons between WT and *Atg16*cKO are shown within each region (apical or basal). $^*p < 0.05$; $^{****}p < 0.0001$.

See also Figure S1.

Figure 2. Loss of Autophagy Compromises the Endolysosomal System in LREs

(A) Reverse transcription quantitative polymerase chain reaction (RT-qPCR) analysis of *Dab2*, *Mcoln3*, *Lamp2* and *Ctsl1* genes in epithelial cells from proximal and distal samples of small intestines from WT mice at the indicated time points (n = 3). Data relative to values of proximal region of small gut from embryonic day (E) 18.5 mice embryos, and presented as $\log_{10}$ fold changes ($\log_{10}$FC).

(B) RT-qPCR of *Dab2*, *Mcoln3*, and *Lamp2* in ileal epithelial cells from WT and *Atg16*cKO mice at P7 and P14. Sample sizes: *Dab2* and *Lamp2* (n = 10,6,6,6), *Mcoln3* (n = 9,8,6,6).

(C and D) Immunoblot analysis of Dab2 protein in ileal epithelial cell lysates from WT and *Atg16*cKO mice at P7 and P14 (C). Actin, loading control. (D) Quantification of Dab2 protein levels (n = 6,8,9,14).

(E and F) Confocal images of ileal sections from WT and *Atg16*cKO mice at P7 and P14 (n = 3) labelled with anti-Dab2 (green), β-catenin (magenta), and DAPI (blue) (E). Arrowheads mark apical Dab2 localization. (F) Violin plot quantifying apical Dab2 intensity (integrated density) of P14 sections, normalised to epithelial area (n = 10,8; 2–4 images per mouse).

(G and H) Lysosomal occupation and content in WT and *Atg16*cKO mice at P7 and P14, and in post-weaning (P21–30) WT mice. Confocal sections labelled with anti-LAMP1 (green), β-catenin (white), and DAPI (blue) (G). Arrows: endolysosomal system in WT LREs; arrowheads: reduced LAMP1$^+$ vesicles in *Atg16*cKO and post-weaning enterocytes. (H) Dot plots quantify the percentage of LAMP1$^+$ area and LAMP1 intensity (integrated density) within apical and basal regions of interest (ROIs) (n = 26–36).

(I and J) Immunoblot analysis of LAMP1 protein in ileal epithelial cell lysates from WT and *Atg16*cKO mice at P14 (I). Actin, loading control. (J) Quantification of LAMP1 protein levels (n = 10,13).

In (E, F), dashed-line squares indicate magnified areas; L, lumen. Scale bars: 10 μm (main); 5 μm (insets).

Dots represent individual mice (B, D, J) or images (F) or cells (H). In (B, D, F, J), data relative to WT values.

Graphs of (A) represent mean + SD; graphs of (B, D, J), mean + SEM; violin plot of (F), median (thick line)

and interquartile range (IQR, thin lines); dot plots of (H), mean ± SEM (black lines).

Statistical analyses: Kruskal–Wallis test (A [*Dab2*, *Mcoln3*], H), two-way ANOVA (A: *Lamp2*, *Ctsl1*),

Student's *t*-test (B, D, J), Mann–Whitney test (F). In (A), only the most relevant statistically significant

comparisons are shown. In (H), only statistically significant comparisons are displayed within each group

(apical or basal). $*p < 0.05$, $**p < 0.01$, $***p < 0.001$, $****p < 0.0001$.

See also Figure S2.

Figure 3. LREs Present High Levels of Mitophagy

(A) Workflow of RNA sequencing (RNA-seq) analysis comparing LREs from P7 GFP-LC3 mice gavaged

with rhodamine B–dextran (Rd-dext) (16 hours prior) to PECs from P42 GFP-LC3 mice. Enterocytes were

isolated from ileal samples by fluorescence-activated cell sorting (FACS) and used for RNA-seq. See Figure

S4A for gating strategy. Scheme includes images adapted from Treuting et al.[75] and Park et al.[7].

(B) Volcano plot of differentially expressed genes (DEGs) between LREs and PECs. Each point represents

a gene, plotted by $\log_2$ fold change (x-axis) and $-\log_{10}$ adjusted p-value (padj) (y-axis). DEGs (n = 1537;

shown in steel blue) were defined as genes with $padj < 0.05$ and $|\log_2 FC| > 1$. Upregulated genes associated

with endocytosis (amber), lysosome (purple), and mitophagy (red) are highlighted. Dashed lines indicate

significance (padj < 0.05) and fold-change thresholds (±1). Genes with $-\log_{10}(padj) > 60$ are not shown.

(C) Bubble plot of selected Gene Ontology (GO) terms from over-representation analysis (ORA) of the

differential gene expression data from the LREs vs PECs. Note the presence of regulation of autophagy,

positive regulation of autophagy of mitochondrion and mitochondrial outer membrane pathways. The x-axis

represents the z-score, bubble size reflects the number of associated genes, and bubble colour indicates

statistical significance (adjusted p-value), with a red-to-blue gradient from most to least significant. GO

terms are grouped into three categories: BP, biological process; CC, cellular component; MF, molecular

function.

(D) Enrichment plots of lysosome organization and mitochondrial outer membrane gene sets from gene set

enrichment analysis (GSEA) comparing LREs and PECs**.** The top panel shows the Enrichment Score (ES)

across ranked genes, with the peak indicating maximum enrichment. The middle panel marks gene

positions in the ranked list. The bottom colour bar reflects gene correlation with phenotype (red: positive,

blue: negative).

(E) RT-qPCR analysis of *Bnip3*, *Prkn*, and *Pink1* genes in ileal epithelial cells from WT mice at indicated

time points (n = 3). Values are expressed as $\log_{10}$ fold change relative to E18.5 embryonic levels.

(F) Confocal images of ileal sections from WT mice at P7 (LREs) and P21–30 (PECs), labelled with anti-Parkin (green) and DAPI (blue). Left: violin plot of Parkin intensity (integrated density) normalised to epithelial area.

(G) Schematic of the *mito*-QC reporter mouse model. Mitochondria are tagged with the chimeric protein mCherry-GFP-FIS1[101–152]. Upon mitophagy, mitochondria are delivered to the lysosome where acidic pH quenches GFP but not mCherry, allowing identification of mitolysosomes as mCherry-only puncta.

(H) Confocal images of ileal sections from *mito*-QC mice at P7 (LREs) (± leupeptin, LP) and P21–30 (PECs). Samples stained with anti-LAMP1 (white) and DAPI (blue). Arrows indicate enlarged, blocked lysosomes with red-only mitochondrial aggregates in LREs+LP; arrowheads point to LAMP1^{+}/mCherry[+] puncta lacking GFP, validating the *mito*-QC model.

(I) Violin plot of lysosomal mCherry intensity normalised to cellular mCherry intensity from (H), based on integrated density measurements.

(J) RT-qPCR of *Bnip3* and *Prkn* in ileal epithelial cells from WT and *Atg16*cKO mice at P14. Dots represent individual mice. Sample sizes: *Bnip3* (n = 6, 6), *Prkn* (n = 5, 6).

(K) Confocal images of ileal sections from WT and *Atg16*cKO mice at P14 stained with anti-Parkin (green) and DAPI. Left: violin plot of Parkin intensity (Integrated Density) normalised to epithelial area.

(L) Confocal images of ileal sections from *mQ-WT* and *mQ-Atg16*cKO mice at P14 (n = 3), labelled with anti-LAMP1 (white) and DAPI (blue).

(M) Violin plot of lysosomal mCherry intensity normalised to cellular mCherry intensity from (L), based on integrated density measurements (n = 12–11; 3–4 images per mouse).

In images of (F, H, K, L), L, lumen. Scale bars: 5 µm. Images of (H, L) deconvolved with Huygens software.

In (A–I) and (K–M), n = 3; in (F, I, K), n = 9 images from 3 mice (3 images per mouse). In graphs of (F, I), data relative to LREs values; in (J, K, M), relative to WT values. In (E), graph represents mean + SD; in (J), mean + SEM. In violin plots of (F, I, K, M), the median (thick line) and IQR (thin lines) are shown and dots represent individual images.

Statistical analyses: Kruskal–Wallis test (E: *Bnip3*), one-way ANOVA (E [*Prkn*, *Pink1*], I), Student's *t*-test (F, J, K, M). *$p < 0.05$, **$p < 0.01$, ***$p < 0.001$.

See also Figure S4.

Figure 4. *Atg16*cKO Neonatal Mice Exhibit Increased Mitochondrial Damage and Oxidative Stress in Enterocytes

(A) Representative transmission electron microscopy (TEM) micrographs of ileal sections from WT and *Atg16*cKO mice at P14 (n = 3). Note the reduction of the endolysosomal system and the absence of

lysosomal vacuole in the *Atg16*cKO enterocytes. Dashed boxes indicate magnified areas. N, nucleus; LV,

lysosomal vacuole; AEC, apical endosomal complex; L, lumen. Asterisks indicate damaged mitochondria.

Scale bars: 2 μm (main); 500 nm (insets).

(B) TEM-based classification of mitochondria into three categories based on electron density and cristae

integrity: Class I (normal), Class II (partially affected), and Class III (damaged). Classification based on

Moschandrea et al. [44]. See Electron Microscopy Section in Methods. Scale bar: 500 nm.

(C) Distribution of mitochondrial integrity classes in *Atg16*cKO neonatal enterocytes. Quantification of the

number, percentage, area and aspect ratio (long axis / short axis) of each mitochondria class in (A), as

defined in (B). In count and percentage graphs, dots represent individual enterocytes; in area and aspect

ratio graphs, dots represent individual mitochondria. Sample sizes are indicated in Table S1.

(D) Flow cytometry analysis of mitochondrial status of *Atg16*cKO neonatal enterocytes. Graphs show

relative mean fluorescence intensity (MFI) for Mitotracker Green (mitochondrial mass, MM), Mitotracker

Red CMXROS (mitochondrial membrane potential, MMP) and CM-H_2DCFDA (ROS) in ileal EpCAM$^+$CD24$^-$

cKit$^-$ cells from WT and *Atg16*cKO mice at P14. See Figure S3 for gating strategy. Dots represent individual

mice (MM, n = 23,17; MMP, n = 10,9; ROS, n = 19,13).

In (C), dot plots represent mean ± SEM (black lines). In (D), bar chart show mean + SEM.

Statistics analyses: Mann–Whitney test (C, D [MM]), Student's *t*-test (D: MMP, ROS). *p < 0.05, **p < 0.01,

***p < 0.001, ****p < 0.0001.

See also Figure S3 and Table S1.

Figure 5. Autophagy Deficiency Causes Early Metabolic Transition in LREs

(A) RT-qPCR analysis of transcription factor (*Mafb*, *c-maf*, *Blimp1*), neonatal (*Ass1*, *Glb1*) and adult (*Treh*,

Sis, *Arg2*) enzyme genes in ileal epithelial cells from WT and *Atg16*cKO mice at late neonatal stage (P14)

and from WT mice at post-weaning stage (P21–30). Sample sizes: *Mafb* (n = 8, 9, 3), *c-maf* (n = 8, 11, 3),

Blimp1 (n = 11, 9, 4), neonatal enzymes (n = 6, 5, 4), *Treh* (n = 5, 3, 4), *Sis* (n = 5, 5, 4), *Arg2* (n = 5, 6, 4).

(B) Confocal images of ileal sections from WT and *Atg16*cKO mice at P14 (n = 5), and from post-weaning

(P21–30) WT mice (n = 2–3), labelled with anti-MAFB (green, top) or anti-BLIMP1 (green, bottom), and with

phalloidin for F-actin (magenta) and DAPI (blue). Arrowheads point to nuclear localization of MAFB and

BLIMP1 in WT LREs.

(C) Violin plot of nuclear MAFB (n = 20, 21, 11) and BLIMP1 (n = 21, 16, 9) intensity (integrated density) in

(B), normalised to epithelial nuclear area.

(D) Confocal images of ileal sections from WT and *Atg16*cKO mice at P14, labelled with anti-ASS1 (green,

top) (n = 3) or anti-TREH (green, bottom) (n = 5), anti-E-cadherin (Ecad, magenta), and DAPI (blue).

(E) Violin plots of ASS1 (top; n = 12, 10) and TREH (bottom; n = 15,16) intensity (integrated density) in (D),
normalised to epithelial area.

(F) Western blot of TREH protein from ileal epithelial cells of WT and *Atg16*cKO mice at P14. USP7, loading
control.

(G) Bar chart quantifying TREH protein levels from (F) (n = 5, 4).

(H) Met-Flow profiling of ileal EpCAM$^+$CD24$^-$ cells from WT (n = 10–13) and *Atg16*cKO (n = 7–9) mice at
P14, and from post-weaning (P21–30) WT mice (n = 8). Bubble colour and size reflect group means for
each marker. See Figure S3 for the gating strategy and Table S2 for statistical significance.

In (B, D), dashed boxes indicate magnified areas; L, lumen. Scale bars: 10 µm (main); 5 µm (insets).

In (A, C, E, G, H), data relative to WT P14 values. In (A, G), graphs show mean + SEM and dots represent
individual mice. In (C, E), violin plots depict the median (thick line) and IQR (thin lines) and dots are
individual images (2–5 images per mouse, 2–5 mice per group).

Statistical analyses: one-way ANOVA (A, C [MAFB], H), Kruskal–Wallis test (C: BLIMP1), Mann–Whitney
test (E), Student's t test (G). *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001.

See also Figures S3 and S5, and Table S2.

Figure 6. *Tfam*cKO Neonates Recapitulate Endolysosomal and Metabolic Defects Observed in
***Atg16*cKO Enterocytes, and Exhibit Weight Loss and Early Lethality**

(A) Representative images of WT and *Tfam*cKO mice at postnatal day 14 (P14).

(B) Kaplan–Meier survival curves of WT and *Tfam*cKO mice. Animals were euthanized if they failed to gain
weight for two consecutive days or exhibited marked weight loss beginning at P9.

(C) Relative body weight of WT and *Tfam*cKO mice at P8, P10, P12, and P14, expressed as percentage.
Sample sizes are indicated at the bottom of the graph.

(D) RT-qPCR analysis of *Tfam* mRNA in ileal epithelial cells from WT and *Tfam*cKO mice at P10 and P14
(n = 12,12,12,10).

(E) *Tfam*cKO neonatal enterocytes show damaged mitochondria. TEM micrographs of ileal sections from
WT (n = 3) and *Tfam*cKO (n = 4) mice at P10 and P14. Asterisks indicate damaged mitochondria. Scale
bar, 1 µm.

(F) Quantification of mitochondrial classes in (E), as defined in Figure 4B. Dots represent individual
enterocytes. Sample sizes are indicated in Table S1.

(G) Flow cytometry analysis of mitochondrial status of *Tfam*cKO neonatal enterocytes. Bar charts show
relative MFI for Mitotracker Green (mitochondrial mass, MM), Mitotracker Red CMXROS (mitochondrial

membrane potential, MMP) and CM-H$_2$DCFDA (ROS) in ileal EpCAM$^+$CD24$^-$cKit$^-$ cells from WT and
*Tfam*cKO mice at P10 and P14. Sample sizes: MM (n = 5, 5, 8, 14), MMP (n = 3, 4, 10, 13), ROS (n = 9, 6,
10, 9). See Figure S3 for gating strategy.

(H) Confocal images of ileal sections from WT and *Tfam*cKO mice at P14 (n = 3–4), stained with anti-MAFB
(green, top) or anti-BLIMP1 (green, bottom), phalloidin (magenta), and DAPI (blue). Arrowheads mark
nuclear localization of MAFB and BLIMP1 in WT LREs.

(I) Violin plots quantifying nuclear MAFB (top; n = 15, 10) and BLIMP1 (bottom; n = 16, 16) intensity in (H),
normalised to epithelial nuclear area.

(J) Confocal images of ileal sections from WT and *Tfam*cKO mice at P14 (n = 3–4). Top: labelled with anti-
ASS1 (green), anti-E-cadherin (Ecad, magenta), and DAPI (blue). Bottom: labelled with anti-TREH (green)
and anti-Ecad (magenta).

(K) Violin plots quantifying ASS1 (top; n = 14, 16) and TREH (bottom; n = 9, 10) intensity in (J), normalised
to epithelial area.

(L) Met-Flow profiling of ileal EpCAM$^+$CD24$^-$ cells from WT (n = 6) and *Tfam*cKO (n = 5) mice at P14. Bubble
colour and size reflect group means for each marker. See Figure S3 for the gating strategy and Table S2
for statistical significance.

(M) Confocal images of ileal sections from WT (n = 4) and *Tfam*cKO (n = 3) mice at P14 gavaged with
rhodamine B–dextran (Rd-dext, red) 3 hours before sacrifice. Sections were stained with anti-LAMP1
(green), anti-β-catenin (white), and DAPI (blue). Arrow: endolysosomal system in WT LREs; arrowhead:
reduced LAMP1$^+$ vesicles in *Tfam*cKO enterocytes. Images deconvolved with Huygens software.

(N) Violin plot quantifying Rd-dextran uptake (integrated density) in (M), normalised to epithelial area (n =
11, 7).

(O) Quantification of lysosomal occupation and content in (M). Dot plots show the LAMP1$^+$ area as a
percentage of cell area (n = 167, 145) and LAMP1 intensity (integrated density) per enterocyte (n = 148,
139).

In (D–O), mice aged P9–11 and P13–15 were grouped as "P10" and "P14," respectively.

In (H, J, M), dashed boxes indicate magnified areas; L, lumen. Scale bars: 10 μm (main); 5 μm (insets).

In (C, D, G, I, K, L, N), data relative to WT values. In (C, D, G), graphs depict mean + SEM and dots
represent individual mice. In (F, O), dot plots show mean ± SEM (red lines) and dots represent individual
enterocytes. In (I, K, N), violin plots show median (thick line) and IQR (thin lines) and dots represent
individual images (2–4 per mouse).

Statistical analyses: Gehan–Breslow–Wilcoxon test (B), Student's *t*-test (C, D, F [P14 Class III only], G, K,
L, N), Mann–Whitney test (F [except P14 Class III], I, O). *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001.

See also Figures S3, S6 and S7, and Tables S1 and S2.

Figure 7. High Antioxidant Activity in LREs Regulates the Timing of Metabolic Transition

A) Bar chart showing the relative mean fluorescence intensity (MFI) of MitoSOX (mitochondrial ROS) and
CM-H_2DCFDA (total ROS) in ileal EpCAM$^+$CD24$^-$ cells from WT mice at P7 (LREs) and P21–30 (PECs) (n
= 4). Data relative to LREs values. See Figure S3 for gating strategy.

(B) Bubble plot and list of ROS-related GO terms from over-representation analysis (ORA) of DEGs
between LREs and PECs. The x-axis represents the z-score, the y-axis shows the significance as –
$\log_{10}$(adjusted p-value), bubble size reflects the number of associated genes, and colours indicate GO
categories (BP, biological process; CC, cellular component; MF, molecular function).

(C) GSEA enrichment plot of antioxidant activity gene set (LREs vs PECs).

(D) RT-qPCR analysis of *Gpx3* and *Cat* genes in ileal epithelial cells from WT mice at the indicated time
points (n = 3). Values are expressed as $\log_{10}$ fold change relative to E18.5 embryonic levels.

(E) RT-qPCR analysis of *Gpx3* and *Cat* genes in ileal epithelial cells from WT and *Atg16*cKO mice at P14
(n = 6).

(F) RT-qPCR analysis of *Gpx3* (n = 7, 5) and *Cat* (n = 5, 7) in ileal epithelial cells from WT and *Tfam*cKO
mice at P14.

(G) Confocal images of ileal sections from WT and *Atg16*cKO mice at P14 (n = 3), stained with anti-GPX3
(green), anti-E-cadherin (Ecad, magenta), and DAPI (blue).

(H) Violin plot of GPX3 intensity from (G), normalised to epithelial area (n = 12, 9).

(I) Confocal images of ileal sections from WT and *Tfam*cKO mice at P14 (n = 4), labelled as in (F).

(J) Violin plot of GPX3 intensity from (H), normalised to epithelial area (n = 16).

(K) RT-qPCR analysis of transcription factor (*Mafb*, *c-maf*, *Blimp1*), neonatal (*Ass1*, *Glb1*) and adult (*Treh*,
Arg2) enzyme genes in ileal epithelial cells from control and H_2O_2 treated mice at P12. Sample sizes: *Mafb*
(n = 7, 6), *c-maf* (n = 7, 6), *Blimp1* (n = 7, 7), neonatal enzymes (n = 7, 7), *Treh* (n = 5, 6), *Arg2* (n = 6, 6).

(L) Confocal images of ileal sections from control (n = 4) and H_2O_2-treated (n = 4–5) mice at P12, stained
with anti-BLIMP1 (green, left) or anti-ASS1 (green, centre) or anti-TREH (green, right), and DAPI (blue). L,
lumen. Scale bars, 10 µm.

(M) Violin plots of BLIMP1, ASS1 and TREH intensity (integrated density) from (L). BLIMP1 data were
normalised to epithelial nuclear area; ASS1 and TREH data, to epithelial area. Sample sizes: BLIMP1 (n =
12, 15), ASS1 (n = 12, 16), TREH (n = 13, 12).

(N) Flow cytometry analysis of BLIMP1 (n = 7, 7) and ASS1 (n = 6, 7) in control and H_2O_2-treated mice at P12. Bar charts show relative median fluorescent intensity of BLIMP1 and ASS1 in ileal EpCAM$^+$CD24$^-$cKit$^-$ cells. See Figure S3 for gating strategy.

(O) Working model: In *Atg16*cKO and *Tfam*cKO neonatal enterocytes, mitochondrial dysfunction and reduced antioxidant activity elevate ROS levels, which repress *Blimp1* and *Mafb* expression and drive early metabolic transition. Enterocyte's design inspired by Fujita et al.[9]. Figure created with BioRender.com.

In (G, I), dashed boxes indicate magnified areas; L, lumen. Scale bars: 10 µm (main); 5 µm (insets).

In (E, F, H, J), data relative to WT values; in (K, M, N), relative to control values. In (A, E, F, K, N), graphs represent mean + SEM and dots represent individual mice; in (D), mean + SD. In (H, J, M), violin plots show median (thick line) and IQR (thin lines) and dots represent individual images (2–4 per mouse, 3–5 mice per group).

Statistical analyses: Student's t test (A, E, F, H, K, M [ASS1], N), one-way ANOVA (D), Mann–Whitney test (J, M [BLIMP1, TREH]). *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001.

See also Figure S3.

SUPPLEMENTAL INFORMATION

Figure S1. Characterization of LREs in the Neonatal Mouse Ileum
Related to Figures 1 and 2

(**A**) Representative TEM image of LREs from the distal small intestine of a P7 mice (n = 3). The profile of an LRE is outlined by a dashed line. Dashed boxes indicate magnified areas. N, nucleus; LV, lysosomal vacuole; AEC, apical endosomal complex; e, endosome; mvb, multivesicular body; L, lumen. Scale bars: 5 µm (main); 2 µm (insets).

(**B**) Confocal microscopy images of ileal sections from P7 mice (n = 3), stained with anti-LAMP1 (green), anti-Dab2 (magenta), anti-β-catenin (white), and DAPI (cyan). Dashed boxes highlight magnified areas. Arrows indicate the endolysosomal system; arrowheads point to apical Dab2 localization. Scale bars: 20 µm (main); 10 µm (first magnification); 5 µm (second magnification).

(**C**) Western blot of mCherry and GFP-LC3 isoforms in ileal epithelial cells from GFP-LC3 mice at P7 and P21, gavaged with mCherry 3 hours before sacrifice. USP7, loading control.

(**D**) Sequential fluorescent dextran uptake assay. P7 mice were gavaged with Alexa 647-dextran (FR-dext, green), followed by rhodamine B–dextran (Rd-dext, red) 3 hours later. Mice were sacrificed at 4 and 8 hours post-initial gavage to assess uptake via confocal microscopy (n = 3). Arrows point to lysosomal vacuoles containing both dextrans at 8 hours. Arrowheads indicate endosomes. Scale bars: 5 µm (main); 2 µm (insets).

Figure S2. Phenotype of *Atg16*cKO Mice

Related to Figures 1 and 2

(A) Relative body weight of WT and *Atg16*cKO mice at postnatal days P7, P14, and P30. Sample sizes are indicated in the graph.

(B) Representative images of intestines from WT and *Atg16*cKO mice at the post-weaning stage (P30).

(C) Quantification of intestinal lengths shown in (B). Bar graphs show the relative lengths of the small intestine (SI) and the colon–rectum (CR) segments (n = 7, 9).

(D) Representative histological images of ileum and colon sections from WT and *Atg16*cKO post-weaning (P30) mice (n = 3). Ileal sections are stained with periodic acid-Schiff (PAS) and haematoxylin; colon sections are stained with haematoxylin and eosin (H&E). Asterisks denote oedema in *Atg16*cKO ileum; arrowheads indicate goblet cells. Scale bars: 200 μm (ileum), 400 μm (colon).

(E and F) Flow cytometry analysis of immune and epithelial cell populations in the ileum of WT and *Atg16*cKO mice at P14 (E) and P30 (F). Left: B lymphocytes (LB) and T-helper lymphocytes (LTh) percentages. Centre: Innate immune cells (IIC) and intestinal epithelial cells (IEC) percentages. Right: Enterocyte and enterocytic progenitors (EC), goblet cell (GC), Paneth cell (PC), and enteroendocrine cell (EEC) percentages. See Figure S3 for gating strategy. (E): Left, n = 17,8–11; Centre, n = 22,16–17; Right, n = 15,12–13. (F): n = 6–7, 9–10.

(G) RT-qPCR analysis of *Dab2* (n = 10,6,6,5), *Mcoln3* (n = 9,8,6,5), and *Lamp2* (n = 10,6,6,6) in epithelial cells from the proximal small intestine of WT and *Atg16*cKO mice at P7 and P14.

(H) RT-qPCR analysis of *Amn* (n = 6,5), *Mamdc4* (n = 9,10), and *Ctsl1* (n = 9,11) in ileal epithelial cells from WT and *Atg16*cKO mice at P14.

In (A, C, G, H), graphs represent mean + SEM. In (E, F), violin plots depict median (thick line) and interquartile range (IQR, thin lines). In all graphs, data relative to WT values, dots represent individual mice and Student's t test was conducted. *$p < 0.05$, **$p < 0.01$, ***$p < 0.001$, ****$p < 0.0001$.

Figure S3. Gating Strategies Used for Cell Population Characterization by Flow Cytometry

Related to Figures 4–7, S2 and S4–S6

Biopool is the combination of immune cell markers anti-CD11c, anti-CD3e, anti-CD11b, anti-CD19, and anti-CD45.2. The strategy for selecting IEC subtypes is based on Asano et al. [36]. GD, ghost dye; LTh, T-helper lymphocytes; LB, B lymphocytes; IIC, innate immune cells; IEC, intestinal epithelial cells; EEC, enteroendocrine cells; PC, Paneth cells; EC, enterocytes and enterocytic progenitors; GC, goblet cells.

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Figure S4. RNA-seq Analysis Comparing Gene Expression of LREs and PECs

Related to Figure 3

(A) FACS gating strategy used to isolate LREs and PECs from GFP-LC3 mice at P7 (gavaged with Rd-dextran, 16 hours) and P42, respectively, for RNA-seq analysis. Single-living EpCAM+CD24-Biopool- cells were gated. For LREs, Rd-dext+GFP^{high} cells were selected.

(B) Heatmap with hierarchical clustering of differentially expressed genes (DEGs) with q-value < 0.05 reveals distinct expression patterns between LREs and PECs. Each row represents a single gene and each column represents a condition sample. Each sub-column represents an individual sample (3 samples per group). Gene expression intensities were log$_2$-transformed and visualized as a colour gradient from yellow to light blue, representing the shift from downregulation to upregulation, as indicated in the key.

(C) Principal component analysis (PCA) plotting for 2 groups based on normalised overall transcriptomic reads. The PCA figure represents a two-dimensional scatterplot of the first two principal components of the RNA-Seq data. Analyses in panels (B) and (C) show that replicates of the same cell population are more similar to each other than to replicates from a different population.

(D) Bubble plot of selected Kyoto Encyclopaedia of Genes and Genomes (KEGG) pathways from over-representation analysis (ORA) of the differential gene expression data from the LREs vs PECs. The x-axis represents the z-score, the y-axis shows the significance as –log10(adjusted p-value), bubble size reflects the number of associated genes, and colours indicate KEGG pathway categories.

(E) RT-qPCR validation of *Ctsl1* expression in LREs and PECs from WT mice at P7 (gavaged with Rd-dextran, 16 hours) and P42, respectively. FACS was used for cell sorting, selecting single-living EpCAM+CD24-Biopool- cells, with Rd-dext+ cells further gated for LREs. In LREs, each dot represents one of three pooled samples (n = 3), each composed of multiple mice; in PECs, each dot corresponds to an individual mouse (n = 3). Data relative to LREs values.

(F) Analysis of lysosomal content in LREs and PECs by measuring Lysotracker MFI by flow cytometry. Bar chart depicts Lysotracker MFI of LREs and PECs from WT mice at P7 (gavaged with mCherry, 16 hours) and P42 respectively. Single-living EpCAM+CD24-Biopool- cells were gated. For LREs, mCherry+ cells were selected. See Figure S3 for gating strategy. Dots represent individual mice (n = 3).

Graphs in (E, F) represent mean + SEM. In (E), Student's t test; in (F), Mann–Whitney test. *p < 0.05, **p < 0.01.

Figure S5. Metabolic Transition in the Small Gut During Postnatal Development

Related to Figure 5

(A) Expression and statistical data of selected genes encoding transcription factors (TFs: *Mafb, c-maf, Blimp1*), neonatal enzymes (*Ass1, Glb1*), and adult enzymes (*Treh, Sis, Arg2*) from the LREs vs PECs RNA-seq analysis.

(B and C) RT-qPCR analysis of *Mafb* and *Blimp1* (B), and of *Ass1, Glb1, Treh,* and *Sis* (C) genes in epithelial cells isolated from proximal and distal small intestinal segments of WT mice at the indicated postnatal time points (n = 3). Data are normalised to the expression levels in the proximal small intestine of E18.5 embryos and expressed as $\log_{10}$fold change ($\log_{10}$FC).

(D) Schematic representation of the cellular metabolic pathways. Enzymes used in the Met-flow panel are shown in red. Scheme adapted from Iborra et al. [45] (CC BY 4.0).

(E) Met-Flow analysis of ileal EpCAM$^+$CD24$^-$ cells from WT mice at P7 (LREs) and P42 (PECs) (n = 2–4). Data relative to LREs values. Bubble colour and size reflect group means for each marker. See Figure S3 for the gating strategy and Table S2 for statistical significance.

In (B, C), graphs represent mean + SD, two-way ANOVA was conducted and only the most relevant statistically significant comparisons are shown. In (E), Student's *t*-test. *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001.

Figure S6. Validation and Intestinal Phenotype of *Tfamc*KO Neonatal Mice
Related to Figure 6

(A) Relative mitochondrial DNA (mtDNA) levels of *Nd1*, *Co1*, *Co2*, and *Atp6* in ileal epithelial cells from WT and *Tfamc*KO mice at P10 (n = 2) and P14 (n = 4), measured by qPCR.

(B) RT-qPCR analysis of mitochondrial genes *mt-Nd1*, *mt-Co2*, and *Sdha* in ileal epithelial cells from WT and *Tfamc*KO mice at P10 (n = 5–6).

(C) Confocal images of ileal sections from WT (n = 3) and *Tfamc*KO (n = 2) mice at P14, labelled with anti-MTCO1 (green) and anti-β-catenin (magenta). Arrows point to mitochondria in WT LREs.

(D) Violin plot shows MTCO1 intensity (integrated density) from (C), normalised to epithelial area. Dots represent individual images (n = 9,7; 3–4 images per mouse).

(E) PAS and haematoxylin staining of ileal sections from WT and *Tfamc*KO mice at P10 and P14 (n = 4–6) shows inflamed and disorganized epithelium in *Tfamc*KO mice. Phenotypes include shortened villi (double red arrows), thickened submucosa and lower mucosa (double black arrows), oedema (asterisks), reduced PAS+ goblet cells (arrowheads), and abnormal vacuoles in enterocytes (arrows). Scale bars: 200 μm (main); 100 μm (insets).

(F–H) Quantification of villi length (F), percentage of villi with goblet cells (G), and the maximum thickness of submucosa and lower mucosa (H) from (E). In (F), each dot represents a villus (n = 50,60,50,50; 10 villi per mouse). For (G–H), n = 4–6 mice.

(I–K) Flow cytometry analysis of innate immune cells (IIC, I), B lymphocytes (LB, J), and T-helper cells (LT$_h$, K) percentages in the ileal of WT and *Tfam*cKO mice at P10 and P14 (n = 3–5). See Figure S3 for gating strategy.

(L–O) Confocal imaging and quantification of stem and Paneth cells in WT and *Tfam*cKO ileal at P10 and P14:

- **(L)** Olfm4 (green) labels crypt stem cells; arrows point to Olfm4$^+$ crypts.

- **(M)** Quantification of Olfm4$^+$ crypts (30-100 crypts/mouse).

- **(N)** Lysozyme (green) marks Paneth cells; arrows show normal crypt localization, arrowheads indicate mislocalised Paneth cells in villi.

- **(O)** Quantification Paneth cells/mm² of epithelial area.

For (L, N), sections are also stained with anti-Ecad (white) and DAPI (blue). Scale bars: 200 µm (main); 50 µm (insets). For all panels, n = 3 mice.

(P) Distribution of mitochondrial integrity classes in *Tfam*cKO neonatal enterocytes. Quantification of the percentage, area and aspect ratio (long axis / short axis) of each mitochondria class in Figure 6E, as defined in Figure 4B. In percentage graph, dots represent individual enterocytes; in area and aspect ratio graphs, dots are individual mitochondria. Sample sizes are indicated in Table S1.

In (C, E, L, N), dashed boxes indicate magnified areas; L, lumen.

In (A, B, D, I–K), data relative to WT values. In (A, G–K, M, O), graphs represent mean + SEM and dots represent individual mice. In (B, D), violin plots show the median (thick line) and IQR (thin lines). In (F, P), dot plots show mean ± SEM (red lines).

Statistical analyses: Student's t test (A, B, I–K, M, O), Mann–Whitney test (D, P), two-way ANOVA (F, H), Kruskal–Wallis test (G). In (F–H), only statistically significant comparisons between WT and *Tfam*cKO are indicated within each time group. *$p < 0.05$, **$p < 0.01$, ***$p < 0.001$, ****$p < 0.0001$.

Figure S7. *Tfam*cKO Neonatal Enterocytes Exhibit a Decreased Endolysosomal System and Undergo an Early Metabolic Switch

Related to Figure 6

(A) RT-qPCR analysis of transcription factor (*Mafb*, *c-maf*, *Blimp1*), neonatal (*Ass1*, *Glb1*) and adult (*Treh*, *Sis*, *Arg2*) enzyme genes in ileal epithelial cells from WT and *Tfam*cKO mice at P10 and P14.

(B) RT-qPCR analysis of *Dab2*, *Amn*, and *Mamdc4* genes in ileal epithelial cells from WT and *Tfam*cKO mice at P10 and P14.

(C) Confocal images of ileal sections from WT and *Tfam*cKO mice at P10 (n = 3) and P14 (n = 2–3), labelled
with anti-Dab2 (green), anti-β-catenin (white), and DAPI (blue). Arrowheads indicate apical Dab2
localisation.

(D) Violin plot shows apical Dab2 intensity (integrated density) from (C), normalised to epithelial area and
relative to WT values. Dots represent individual images (n = 6, 6, 6, 4; 2 images per mouse).

(E) RT-qPCR analysis of *Lamp2*, *Mcoln3*, and *Ctsl1* in ileal epithelial cells from WT and *Tfam*cKO mice at
P10 and P14.

(F) Confocal images of ileal sections from WT and *Tfam*cKO mice at P10 (n = 3), labelled with anti-LAMP1
(green), anti-β-catenin (white), and DAPI (blue). Arrows indicate endolysosomal system in WT cells;
arrowheads highlight the reduced lysosomal vesicles in *Tfam*cKO enterocytes.

(G) Quantification of lysosomal occupation and content in (E). Dot plots show the LAMP1$^+$ area as a
percentage of cell area (n = 157,99) and LAMP1 intensity (integrated density) per enterocyte (n = 117,74).
Dots represent individual enterocytes.

In (C, F), dashed boxes indicate magnified areas; L, lumen. Scale bars: 10 µm (main); 5 µm (insets).

In (A, B, E), data relative to WT-P10 values, dots represent individual mice (n = 4–7), and graphs represent
mean + SEM. In (D), violin plot shows the median (thick line) and IQR (thin lines). In (G), dot plots depict
mean ± SEM (red lines).

Statistical analyses: Kruskal–Wallis test (A [*Treh*], B [*Dab2*], E [*Lamp2*]), two-way ANOVA (A, B, E; except
Treh, *Dab2*, *Lamp2*), Student's t test (D), Mann–Whitney test (G). In (A, B, E), only statistically significant
comparisons between WT and *Tfam*cKO are indicated within each time group. *p < 0.05, **p < 0.01, ***p <
0.001, ****p < 0.0001.

1125

1126   **Table S1. Sample sizes in TEM graphs**
1127   ***Related to Figures 4, 6 and S6***
1128   Values in the number (No.) and percentage columns correspond to enterocytes; in the area and aspect
1129   ratio columns, values correspond to individual mitochondria. For more detailed information on sample size
1130   of the analyses, see the TEM section in the Methods.

1131

1132   **Table S2. Statistical Significance of Met-Flow Experiments**
1133   ***Related to Figures 5, 6 and S5***
1134   For Figure 5H, statistical results are shown only for comparisons between WT and the two other groups.
1135   No statistical test was applied for HK1 of Figure S5E (n = 2). *p < 0.05, **p < 0.01, ***p < 0.001, ****p <
1136   0.0001. NS, not significant.

1137

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1304

1305 **METHODS**

1306 **KEY RESOURCES TABLE**

REAGENT or RESOURCE	SOURCE	IDENTIFIER
Antibodies		
Mouse monoclonal anti-GFP, HRP-conjugated (clone GG4-2C2.12.10)	Miltenyi Biotec	130-091-833
Rat monoclonal anti-RFP (clone 5F8)	Chromotek	5F8
Rabbit polyclonal anti-USP7	Bethyl	A300-033A
Rabbit polyclonal anti-ATG16L1	MBL	PM040
Mouse monoclonal anti-LC3C (clone E5Q2K)	CST	83506
Rabbit polyclonal anti-Actin	Sigma	A2103
Mouse monoclonal anti-SQSTM1 (clone 2C11)	Abnova	H00008878-M01
Mouse monoclonal anti-Dab2 (clone 52/p96)	BD Biosciences	610464
Rat monoclonal anti-LAMP1 (clone 1D4B)	DSHB	1D4B
Rabbit polyclonal anti-Trehalase	GeneTex	GTX109979
Rabbit polyclonal anti-β-catenin	Santa Cruz Biotechnology	sc-7199
Rabbit polyclonal anti-Parkin	Abcam	ab15494
Rabbit polyclonal anti-MafB	Novus Biologicals	NBP1-81342
Rabbit polyclonal anti-Blimp1	Invitrogen	PA5-20310
Mouse monoclonal anti-E-Cadherin (clone 36/E)	BD Biosciences	610181
Goat polyclonal anti-GPX3	R&D Systems	AF4199
Mouse monoclonal anti-MTCO1 (clone 1D6E1A8)	Thermo Fisher Scientific	459600
Rabbit monoclonal anti-Olfm4 (clone D6Y5A)	CST	39141
Rabbit polyclonal anti-Lysozyme	Dako	A0099
Alexa Fluor 647 rabbit monoclonal anti-ASS1 (clone EPR12398)	Abcam	ab311083
Rat monoclonal anti-CD16/32 (clone 93)	Biolegend	101330
PerCP-eFluor710 rat monoclonal anti-EpCAM (clone G8.8)	Invitrogen	46-5791-82

APC rat monoclonal anti-EpCAM (clone G8.8)	Biolegend	118214
BV605 rat monoclonal anti-EpCAM (clone G8.8)	Biolegend	118227
Pacific Blue rat monoclonal anti-CD24 (Clone M1/69)	Biolegend	101820
PE rat monoclonal anti-c-Kit (clone 2B8)	Biolegend	105807
BV785 rat monoclonal anti-c-Kit (clone 2B8)	Biolegend	105841
Alexa Fluor 700 rat monoclonal anti-CD11b (clone M1/70)	Biolegend	101222
Biotin rat monoclonal anti-CD11c (clone N418)	Biolegend	105841
APC-Fire810 rat monoclonal anti-B220 (clone RA3-6B2)	Biolegend	103278
APC-Fire810 rat monoclonal anti-CD4 (clone GK1.5)	Biolegend	100480
RY586 rat monoclonal anti-CD4 (clone GK1.5)	BD Biosciences	568162
Biotin rat monoclonal anti-CD19 (clone 6D5)	Biolegend	115504
Biotin rat monoclonal anti-CD3e (clone 145-2C11)	Biolegend	79751
Biotin rat monoclonal anti-CD45.2 (clone 104)	Biolegend	109804
Rabbit polyclonal anti-GLS	Thermo Fisher Scientific	PA5-35365
Alexa Fluor 647 rabbit monoclonal anti-HK1 (clone EPR10134(B))	Abcam	ab197864
Alexa Fluor 488 mouse monoclonal anti-CPT1A (clone 8F6AE9)	Abcam	ab171449
Rabbit monoclonal anti-ACAC (clone EPR23235-147)	Abcam	ab269273
Alexa Fluor 488 rabbit monoclonal anti-CS (clone EPR8067)	Abcam	ab197488
PE rabbit monoclonal anti-IDH2 (clone EPR7577)	Abcam	ab212122
Alexa Fluor 594 rabbit monoclonal anti-ATP5A (clone EPR23235- 147)	Abcam	ab216385
BB700 rat monoclonal anti-BLIMP1 (clone 5E7)	BD Biosciences	567830
Alexa Fluor 488 donkey polyclonal anti-mouse IgGs	Thermo Fisher Scientific	A-21202
Alexa Fluor 488 donkey polyclonal anti-rabbit IgGs	Thermo Fisher Scientific	A-21206
Alexa Fluor 488 donkey polyclonal anti-rat IgGs	Thermo Fisher Scientific	A-21208
Alexa Fluor 555 donkey polyclonal anti-mouse IgGs	Thermo Fisher Scientific	A-31570
Alexa Fluor 647 donkey polyclonal anti-rabbit IgGs	Thermo Fisher Scientific	A-31573
Alexa Fluor 647 donkey polyclonal anti-mouse IgGs	Thermo Fisher Scientific	A-31571
Peroxidase AffiniPure donkey polyclonal Anti-Mouse IgG	Jackson Immunoresearch	715-035-151
HRP donkey anti-rabbit IgG	Cytiva	NA934
Peroxidase AffiniPure goat polyclonal Anti-Rat IgG	Jackson Immunoresearch	112-035-003
Chemicals, peptides, and recombinant proteins		
Tamoxifen	Merck	T5648
Leupeptin	Sigma	L2884
Hydrogen Peroxide 30%	Merck	108597
Dextran rhodamine B, 10000MW, neutral	Invitrogen	D1824
Dextran Alexa Fluor 647, 10000MW, anionic, fixable	Invitrogen	D22914
Paraformaldehyde, powder, TECHNICAL	VWR Chemicals	28794.295
Tissue-Tek O.C.T. Compound	Sakura	4583
Sucrose	Merck	1076511000
DAPI	Merck	268298
Phalloidin Alexa Fluor™ 488	ThermoFisher	A12379
Phalloidin Alexa Fluor™ 647	ThermoFisher	A22287

ProLong™ Glass Antifade Mountant	Thermo Fisher	P36984
Ghost Dye Violet 540	TONBO Biosciences	13-0879-T100
Ghost Dye Red 780	TONBO Biosciences	13-0865-T100
Streptavidin-BV421	Biolegend	405225
CM-H2DCFDA	Invitrogen	C6827
MitoTracker Green FM	Invitrogen	M7514
MitoTracker Red CMXRos	Invitrogen	M7512
MitoSOX	Invitrogen	M36008
LysoTracker Green DND-26	Invitrogen	L7526
eBioscience FOXP3/Transcription Factor Staining Buffer Set	Invitrogen	00-5523-00
ECL Western Blotting Reagents	Cytiva	RPN2106
DTT	Thermo Scientific	R0861
Oligonucleotides		
Genotyping primers for $Atg16l1^{fl/fl}$: forward: 5' CTTTCTCAACAGAACCAGCAGTAC 3'	IDT	N/A
Genotyping primers for $Atg16l1^{fl/fl}$: reverse: 5' GTTCAGGTCAATCACCAACTGAGC 3'	IDT	N/A
Genotyping primers for $Tfam^{fl/fl}$: forward: 5' CTGCCTTCCTCTAGCCCGGG 3'	IDT	N/A
Genotyping primers for $Tfam^{fl/fl}$: reverse: 5' GTAACAGCAGACAACTTGTG 3'	IDT	N/A
Genotyping primers for $Tfam^{fl/fl}$: reverse-2: 5' CTCTGAAGCACATGGTCAAT- 3'	IDT	N/A
Genotyping primers for $Villin$-$creER^{T2}$: forward: 5'- CAAGCCTGGCTCGACGGCC -3'	Sigma	N/A
Genotyping primers for $Villin$-$creER^{T2}$: reverse: 5'-CGCGAACATCTTCAGGTTCT-3'	Sigma	N/A
Genotyping primers for mito-QC: forward: 5'- CAAAGACCCCAACGAGAAGC -3'	IDT	N/A
Genotyping primers for $mito$-QC: forward-2: 5'- CCCAAGGCACACAAAAAACC -3'	IDT	N/A
Genotyping primers for $mito$-QC: reverse: 5'-CTCTTCCCTCGTGACCTGCAACTCC-3'	IDT	N/A
Genotyping primers for $mito$-QC: reverse-2: 5'- CATGTCTTTAATCTACCTCGATGG -3'	IDT	N/A
Genotyping primers for GFP-$LC3$: forward: 5'-ATAACTTGCTGGCCTTTCCACT -3'	IDT	N/A
Genotyping primers for GFP-$LC3$: reverse: 5'- CGGGCCATTTACCGTAAGTTAT-3'	IDT	N/A
Genotyping primers for GFP-$LC3$: reverse-2: 5'-GCAGCTCATTGCTGTTCCTCAA-3'	IDT	N/A
RT-qPCR primers for $Atg16l1$: forward: 5' ACATGATGGTGCGTGGAATG 3'	Sigma	N/A
RT-qPCR primers for $Atg16l1$: reverse: 5' TCCTTGTCCTTCTGCTGCAT 3'	Sigma	N/A
RT-qPCR primers for $Tfam$: forward: 5' CAGGAGGCAAAGGATGATTC 3'	Sigma	N/A
RT-qPCR primers for $Tfam$: reverse: 5' CCAAGACTTCATTTCATTGTCG 3'	Sigma	N/A
RT-qPCR primers for $Dab2$: forward: 5' CGAAAGCGCCATCAAAGAAG 3'	IDT	N/A

RT-qPCR primers for *Dab2*: reverse: 5' CCTTTGAACCTGGCCAACAA 3'	IDT	N/A
RT-qPCR primers for *Mcoln3*: forward: 5' ATGGAGTTCATCAACGGGTG 3'	IDT	N/A
RT-qPCR primers for *Mcoln3*: reverse: 5' ATAGTTGACGTCCCGAGAAG 3'	IDT	N/A
RT-qPCR primers for *Lamp2*: forward: 5' TGCAGAATGGGAGATGAATTT 3'	IDT	N/A
RT-qPCR primers for *Lamp2*: reverse: 5' GGCACTATTCCGGTCATCC 3'	IDT	N/A
RT-qPCR primers for *Ctsl1*: forward: 5' CCAGCTACACAACGGGGAAT 3'	IDT	N/A
RT-qPCR primers for *Ctsl1*: reverse: 5' AGCATCAGCGGTTCCTGAAA 3'	IDT	N/A
RT-qPCR primers for *Bnip3*: forward: 5' TGTTGGATGCCCAGCATGAA 3'	IDT	N/A
RT-qPCR primers for *Bnip3*: reverse: 5' AATCTTCCTCAGACAGAGTGCT 3'	IDT	N/A
RT-qPCR primers for *Prkn*: forward: 5' AAACCGGATGAGTGGTGAGT 3'	IDT	N/A
RT-qPCR primers for *Prkn*: reverse: 5' AGCTACCGACGTGTCCTTGT 3'	IDT	N/A
RT-qPCR primers for *Pink1*: forward: 5' GCTGATCGAGGAGAAGCAG 3'	IDT	N/A
RT-qPCR primers for *Pink1*: reverse: 5' GATAATCCTCCAGACGGAAGC 3'	IDT	N/A
RT-qPCR primers for *Mafb*: forward: 5' AGAGGCGGACCCTGAAAAAC 3'	IDT	N/A
RT-qPCR primers for *Mafb*: reverse: 5' GTTTTCTCGGAAGCCGTTGC 3'	IDT	N/A
RT-qPCR primers for *c-maf*: forward: 5' GCATGCTGGACATGTATGGT 3'	IDT	N/A
RT-qPCR primers for *c-maf*: reverse: 5' ATGTACAACGGGAGGCTGAA 3'	IDT	N/A
RT-qPCR primers for *Blimp1*: forward: 5' TTCTTGTGTGGTATTGTCGGGACTT 3'	Sigma	N/A
RT-qPCR primers for *Blimp1*: reverse: 5' TTGGGGACACTCTTTGGGTAGAGTT 3'	Sigma	N/A
RT-qPCR primers for *Ass1*: forward: 5' CATTGGAATGAAGTCCCGAG 3'	IDT	N/A
RT-qPCR primers for *Ass1*: reverse: 5' GATTTTGCGTACTTCCCGAT 3'	IDT	N/A
RT-qPCR primers for *Glb1*: forward: 5' ACTGCTGCAACTGCTGGG 3'	Sigma	N/A
RT-qPCR primers for *Glb1*: reverse: 5' AATGGCTGTCCATCCTTGAG 3'	Sigma	N/A
RT-qPCR primers for *Treh*: forward: 5' GCACCTGCTGCTTCTGCT 3'	Sigma	N/A
RT-qPCR primers for *Treh*: reverse: 5' CATCTGAACTTGGTGCAGGA 3'	Sigma	N/A
RT-qPCR primers for *Sis*: forward: 5' GCCCACGCGTTTGGTGAGAC 3'	Sigma	N/A
RT-qPCR primers for *Sis*: reverse: 5' ATCAGCAGTGCAGGGCCCCA 3'	Sigma	N/A

RT-qPCR primers for *Arg2*: forward: 5' TGATTGGCAAAAGGCAGAGG 3'	Sigma	N/A
RT-qPCR primers for *Arg2*: reverse: 5' CTAGGAGTAGGAAGGTGGTC 3'	Sigma	N/A
RT-qPCR primers for *Gpx3*: forward: 5' AATTAGGCACAAAGCCCCCA 3'	IDT	N/A
RT-qPCR primers for *Gpx3*: reverse: 5' CATTCTGGGCTTCCCTTCCA 3'	IDT	N/A
RT-qPCR primers for *Cat*: forward: 5' GAACGGCAATAGGGGTCCTC 3'	IDT	N/A
RT-qPCR primers for *Cat*: reverse: 5' TGGTACACGCAAAAGGAGCA 3'	IDT	N/A
RT-qPCR primers for *Amn*: forward: 5' ATCTGTGAGAGCCTCGGCG 3'	IDT	N/A
RT-qPCR primers for *Amn*: reverse: 5' GTTGGAGGCAGTATCGAAGGA 3'	IDT	N/A
RT-qPCR primers for *Mamdc4*: forward: 5' TCACCACTGCCAGAACAAGG 3'	IDT	N/A
RT-qPCR primers for *Mamdc4*: reverse: 5' CTAACTGGTTCCACGGTCCC 3'	IDT	N/A
RT-qPCR primers for *mt-Nd1*: forward: 5' TCCCCTACCAATACCACACC 3'	Sigma	N/A
RT-qPCR primers for *mt-Nd1*: reverse: 5' TGAAATTGTTTGGGCTACGG 3'	Sigma	N/A
RT-qPCR primers for *mt-Co2*: forward: 5' ACGAAATCAACAACCCCGTA 3'	Sigma	N/A
RT-qPCR primers for *mt-Co2*: reverse: 5' GGCAGAACGACTCGGTTATC 3'	Sigma	N/A
RT-qPCR primers for *Sdha*: forward: 5' GCGGCTTTCACTTCTCTGTT 3'	IDT	N/A
RT-qPCR primers for *Sdha*: reverse: 5' CTCAGAAAGGCCAAATGCAG 3'	IDT	N/A
qPCR primers for *mt-Co1*: forward: 5' ATCCCTTGACATCGTGCTTC 3'	Sigma	N/A
qPCR primers for *mt-Co1*: reverse: 5' AAGTGGGCTTTTGCTCATGT 3'	Sigma	N/A
qPCR primers for *mt-Atp6*: forward: 5' ACAGGCTTCCGACACAAACT 3'	Sigma	N/A
qPCR primers for *mt-Atp6*: reverse: 5' GGTAGCTGTTGGTGGGCTAA 3'	Sigma	N/A
qPCR primers for *Hk2*: forward: 5' GCCAGCCTCTCCTGATTTTAGTGT 3'	Sigma	N/A
qPCR primers for *Hk2*: reverse: 5' GGGAACACAAAAGACCTCTTCTGG 3'	Sigma	N/A
RT-qPCR primers for *Ppib*: forward: 5' CACCAATGGCTCACAGTTCTT 3'	IDT	N/A
RT-qPCR primers for *Ppib*: reverse: 5' ATGACATCCTTCAGTGGCTTG 3'	IDT	N/A

1307

Mice

1308

Atg16l1[fl/fl33], *Tfam*[fl/fl 76], and GFP-LC3[26] mice were kindly provided by N. Martínez-Martín (Centro de Biología

Molecular "Severo Ochoa", CBM, CSIC-UAM, Madrid, Spain). The *mito*-QC mouse line[42] was obtained from

P. Boya (Centro de Investigaciones Biológicas Margarita Salas, CSIC, Madrid, Spain; University of

Fribourg, Switzerland). *Villin-creER^{T2}* mice[34] were provided by N. Djouder (Spanish National Cancer
Research Centre, CNIO, Madrid, Spain). *Atg16l1* ^{fl/fl}, *Tfam* ^{fl/fl} mice were crossed at the CBM animal facility
with *Villin-creER^{T2}* mice to generate intestinal epithelial-specific conditional knockout (cKO) mice:
*Atg16*cKO and *Tfam*cKO, respectively. In turn, *Atg16*cKO mice were crossed with *mito*-QC mice to establish
the *mQ-Atg16*cKO mouse line. Tamoxifen (0.12–0.5 mg in corn oil containing 10% ethanol) was
administered subcutaneously at postnatal days 1 and 2 to pups from *Atg16*cKO, *mQ-Atg16*cKO, and
*Tfam*cKO litters, following a protocol similar to that described by Gong et al.[77]. Cre-positive animals were
classified as KO, and Cre-negative mice as WT. To confirm the absence of spontaneous recombination in
WT mice, expression levels of Atg16l1 and Tfam were assessed by Western blot and RT-qPCR. Mice were
genotyped by PCR using DNA extracted from tail biopsies following standard protocols. Genotyping primers
are listed in the Key Resources Table. Neonatal mice were humanely sacrificed by decapitation; adult mice
were euthanized via CO_2 inhalation. *Tfam*cKO neonates were sacrificed after two consecutive days without
weight gain or upon observing approximately a 10% weight loss, in accordance with humane endpoint
criteria. No test was performed to determine the influence of sex, as no apparent differences were found.
Mouse colonies were maintained at CBM under specific pathogen-free conditions and on a C57BL/6 genetic
background. Mice were housed four/five per cage with food and water available ad libitum and maintained
in a temperature-controlled environment on a 12 h–12 h light–dark cycle with light onset at 08:00. Animal
experiments were performed under protocols approved by the CBM and Comunidad Autónoma de Madrid
ethical committees under the following protocol approval number (PROEX 307.2/21). All animal procedures
conformed to EU Directive 86/609/EEC and Recommendation 2007/526/EC regarding the protection of
animals used for experimental and other scientific purposes, enforced in Spanish law under Real Decreto
1201/2005.
1334

mCherry / fluorescent-dextran uptake assay
Mice from GFP-LC3, *Atg16*cKO, and *Tfam*cKO lines were fasted for 1 hour and orally gavaged with either
mCherry or 10 kDa fluorescent-dextran (0.3–1 mg/ml in PBS; 10 µl/g body weight). Following gavage, mice
were sacrificed either 3 or 16 hours later, adapted from the protocol reported by Remis et al.[12]. To test the
endocytic function in neonatal enterocytes, WT mice at postnatal day 7 (P7) were sequentially gavaged
with two distinct 10 kDa fluorescent-dextrans (0.7 mg/ml in PBS; 10 µl/g body weight), following a modified
version of the protocol established in mouse embryos by Kawamura et al.[78]. After a 1-hour fasting period,
pups were first gavaged with Alexa Fluor 647-dextran and then returned to their mother. Three hours later,
they were given rhodamine B–dextran again. Pups were subsequently sacrificed either 1 or 5 hours after
the second gavage, and ileal enterocytes were analysed by confocal microscopy to assess dextran uptake
and intracellular localization.
1346

1347 **Leupeptin and hydrogen peroxide treatment**

1348   To inhibit lysosomal proteases and block autophagy, mice were injected subcutaneously with 40 mg/Kg

1349   leupeptin (Sigma) dissolved in PBS and sacrificed after 16h[43]. To assess the effect of ROS on intestinal

1350   epithelial maturation, mice were injected intraperitoneally with hydrogen peroxide (5.1 µmol/g body weight;

1351   Merck) once daily from P5 to P12 (day of sacrifice), following a protocol adapted from Liang et al.[60].

1352

Histology and Immunofluorescence

Portions of the distal small intestine from mice were fixed in 4% PFA for 16 hours at 4 °C, embedded in

paraffin resin, and cut transversely into 5-µm sections. Some samples were stained with hematoxylin-eosin

(HE&E; Sigma and Merck, respectively), while others underwent Periodic Acid-Schiff (PAS) staining.

Additionally, some samples were used for immunofluorescence. For immunofluorescence, sections were

deparaffinized using xylene and then rehydrated through a series of decreasing ethanol concentrations

(100%, 96%, 70%, 50%). For antigen retrieval, tissue was boiled at 100 °C on a heat block in sodium citrate

buffer (10 mM Sodium citrate, 0.05% Tween 20, pH 6.0) for 20 min. Next, the slides were washed with

water and PBS containing calcium and magnesium, and then incubated for 1 hour at room temperature

with 3% bovine serum albumin (BSA) as a blocking solution. For O.C.T. embedded sections, portions of

the distal small intestine were previously fixed in 4% PFA for 16 hours at 4 °C, incubated in 30% sucrose

in PBS for 48-72 hours at 4 °C, and then embedded in O.C.T. compound and stored at -80 °C until use.

O.C.T. blocks were cut transversely into 15 µm sections using Superfrost Plus Adhesion Microscope Slides

(Epredia) and stored at -80 °C. For immunofluorescence, sections were dried at room temperature for 30

minutes, washed with 0.1% Tween 20, and blocked for 1 hour at room temperature with BGT buffer (0.3%

BSA, 0.75% Glycine, 0.3% Triton X-100 in PBS). For both paraffin-embedded and O.C.T.-embedded

samples, the primary antibody was added and incubated overnight at 4 °C in the respective blocking buffer.

After washing with PBS, the secondary antibody was incubated with DAPI for 1h at RT. Lastly, slides were

assembled with coverslips with Prolong Glass Antifade (Thermo Fisher). Antibodies used are specified in

the key resources table.

1373

Image Acquisition and Analysis

HE&E and PAS staining images were acquired using an Axio Imager M1 vertical wide-field microscope,

coupled with a Leica DMC6200 CMOS Colour camera. The objective used was 10X/0.3 Air EC Plan-Neo.

LASXv4.13 software was used to stitch the tiles into an image. The analysis of goblet cells, villi length, and

submucosa–lower mucosa thickness was performed using Fiji (ImageJ 1.54f; https://fiji.sc/) (Wayne

Rasband, NIH, USA)[79]. Lower mucosa was defined as the sum of the *muscularis mucosae*, *lamina propria*

and epithelial compartment of the crypts. For villi length analysis, the 10 longest villi per section were

chosen. One section per mouse was analysed from 3–6 mice per genotype. For immunofluorescence,

images were acquired using a Zeiss LSM 900 confocal microscope mounted on an Axio Imager Z2 upright

stand, with sequential acquisition and bidirectional scanning. For individual fields, a 63×/1.4 NA oil-

immersion Plan-Apochromat objective was used, with a voxel size of 50 × 50 × 520 nm. For tile scans,

images were acquired using a 20×/0.8 NA air Plan-Apochromat objective, with a voxel size of 0.624 × 0.624
× 1.9 μm, and stitched using ZEN Blue software version 3.4 (Zeiss; https://www.zeiss.com/zen). For the
analysis of Paneth cells and Olfm4$^+$ crypts in the ileum of *Tfam*cKO mice, all cells and all crypts were
quantified per section (one section per mouse; 3 mice per genotype). For intensity analysis, all images were
acquired with 16-bit resolution and under the same conditions. An average intensity projection was made,
and the endothelial cells (lacteal vessel) were cropped. The same threshold was applied to all images to
select positive areas. Images were analysed using CellProfiler 4.2.8 (https://cellprofiler.org/)[80] and Fiji
(ImageJ 1.54f)[79]. Intensity values correspond to the integrated density, normalized to the epithelial nuclear
area (defined by DAPI in epithelial cells) for BLIMP1 and MAFB, or to the epithelial area (delimited by β-
catenin, E-cadherin, or F-actin) for all other markers, except for LAMP1 (in both KO models) and Rd-dextran
(only in *Atg16*cKO mice), which were not normalized. For LAMP1 intensity and area analysis in *Tfam*cKO
mice, images were deconvolved using Huygens Professional software (version 24.10; Scientific Volume
Imaging, https://svi.nl/Huygens-Professional). For the analysis of Rd-dextran intensity and LAMP1 area and
intensity in *Atg16*cKO mice, 25–40 and 26–36 enterocytes per condition were analysed, respectively. For
LAMP1 area and intensity analysis in *Tfam*cKO mice, a minimum of 30 enterocytes per mouse were
quantified, across 3 mice per group (99–167 enterocytes per group). For all other intensity analyses, 2–5
random images per mouse were acquired from comparable villi, each containing approximately 50 cells,
with 2–5 mice per group.

Transmission Electron Microscopy
Samples were processed by the Electron Microscopy Unit at CBM. Distal small intestine portions were fixed
using 4% PFA (paraformaldehyde) and 2% glutaraldehyde in phosphate buffer 0.1M, pH 7.4, for 2 hours at
room temperature. Then they were washed 3 times for 10 minutes with phosphate buffer. After fixation, the
material was post-fixed in 1% osmium tetroxide and potassium ferricyanide for 1 hour at 4 °C, then
embedded in tannic acid for 1 minute and block-stained with 2% uranyl acetate for 1 hour in the dark. Next,
they were dehydrated in crescent concentrations of ethanol (30%, 50%, 70%, 95%, 3x100%; 10 minutes
each) and infiltrated in propylene oxide for 45 minutes and Epon 100% for 1 hour. Finally, the samples were
introduced into BEEM capsules (ESBE Scientific). Samples were observed using a JEM1400 Flash
Transmission Electron Microscope (JEOL) equipped with a CMOS OneView camera (Gatan). Fiji (ImageJ
1.54f)[79] was used for image analysis. Mitochondria were classified into three categories, as in Moschandrea
et al.[44]: class I (normal), characterized by mitochondria with narrow and well-defined cristae; class II (partly
affected), with mitochondria exhibiting undefined cristae; and class III (damaged), including mitochondria
with wide, short, and less electron-dense cristae, or those with ruptured membranes or internal inclusions.
For the analysis of mitochondrial status in *Atg16*cKO mice, 291–340 mitochondria were analysed from 10–
11 enterocytes (3 mice per genotype). For *Tfam*cKO mice, in the analysis of number and percentage of
mitochondrial classes, 444–1040 mitochondria from 13–24 enterocytes (3–4 mice per group) were used;

for area and aspect ratio analysis, 261–520 mitochondria from 11–17 enterocytes (2–4 mice per group)

were analysed. The graphs show data after outlier exclusion.

1423

Isolation of IEC

Mice were euthanized, and the abdominal cavity was opened to expose the intestine. The region of interest

(proximal or distal intestine) was dissected, removed, and rinsed in PBS. The tissue was cut transversely

into ~5 mm fragments, which were then opened longitudinally and incubated in epithelial dissociation buffer

(1 mM DTT, 1 mM EDTA, 2% FBS in PBS) at 37°C with agitation for 20 minutes. After incubation, the

samples were centrifuged at 1200 rpm for 5 minutes. The supernatant was discarded, and the pellet was

resuspended in 10 mL of DMEM supplemented with 10% FBS at 4 °C. The suspension was passed through

70 µm cell strainers (Falcon) and then centrifuged again at 1,200 rpm for 5 minutes. The resulting pellet

was resuspended in FACS buffer (1 mM EDTA, 2% FBS in PBS) at 4 °C and centrifuged again under the

same conditions. The final pellet containing epithelial cells was used for western blotting, flow cytometry,

and RT-qPCR analysis.

1435

Immunoblotting

IECs pellets were lysed with lysis buffer (50 mM Tris-HCl, 150 mM NaCl, 1% NP-40, 50 mM NaF, 0.1%

SDS, 1 mM Na_3VO_4, 30 mM β-glycerophosphate, 5 mM EDTA, protease inhibitors) and centrifuged for 10

minutes at 4 °C, 15,000 rpm. Supernatants were collected and quantified using the Bradford protein assay

(Biorad Protein Assay, Biorad). 25 µg of protein was loaded in 10 or 12% acrylamide gels for SDS-PAGE.

After electrophoresis, proteins were transferred to an Immobilon-P transfer membrane (Millipore), blocked

for 1 hour, and incubated overnight with primary antibodies at 4 °C. After washing with 0.05% Tween 20,

they were incubated with HRP-conjugated secondary antibodies for 1 hour at room temperature. ECL

western blotting reagents (Cytiva) were used for the chemiluminescence reaction. Bands were analysed

using Fiji (ImageJ 1.54f)[79]. Antibodies used are specified in the key resources table.

1446

Flow Cytometry

Disaggregated epithelial cells were plated into a 96-well plate and incubated with FACS buffer with anti-

CD16/CD32 Fc block and viability markers (Ghost Dye) for 10 min at room temperature. After centrifugation,

cells were incubated for 20 min at 4ºC with the appropriate combination of the antibodies in FACS buffer to

discern between the different epithelial and immune populations. Following protocols adapted from

immunometabolic [45,54] and intestinal studies[36], we assessed mitochondrial mass and membrane potential,

cellular and mitochondrial ROS levels, and lysosomal content labelling cells with MitoTracker Green FM

(50 nM), MitoTracker Red CMXRos (100 nM), CM-H2DCFDA (2.5 µM), MitoSOX (1 µM), and Lysotracker

Green DND-26 (100 nM), respectively. Probes were incubated for 15 min at room temperature and 15 min

at 37 °C in DMEM with 5% FBS (Lysotracker), without FBS (MitoTracker and CM-H2DCFDA), or in HBSS

(MitoSOX). Antibodies used are specified in the key resources table. Data were acquired using a Cytek

Aurora full-spectrum cytometer at the CBM, and analysed with FlowJo software (versions 10 and 10.8.1;

BD Biosciences). See Figure S3 for details on the gating strategies.

1460

Met-flow cytometry staining

Based on recent works on immune cell metabolism[45,50], we selected eight key metabolic enzymes to

analyse their expression by flow cytometry in our epithelial cells: ASS1, GLS, HK1, CPT1A, ACAC, CS,

IDH2, and ATP5A. After the disaggregated epithelial cells were incubated with surface antibodies according

to the flow cytometry protocol, they were fixed and permeabilized using the eBioscience

Foxp3/Transcription Factor Staining Buffer Set (Invitrogen). Next, they were washed in the provided wash

buffer and blocked with 20% FBS in wash buffer and incubated for 2h at room temperature with the

appropriate antibodies to detect the rate-limiting enzymes from different metabolic pathways. Lastly, they

were rewashed with wash buffer. Antibodies used are specified in the key resources table. Data were

acquired using a Cytek Aurora full-spectrum cytometer at the CBM, and analysed with FlowJo software

(versions 10 and 10.8.1; BD Biosciences).

1472

RNA Sequencing and Bioinformatic Analyses

The FACS gating strategy used to isolate LREs and PECs for RNA sequencing (RNA-seq) is shown in

Figure S4A. Cell sorting was performed using a FACSAria Fusion cytometer (BD Biosciences). Each

population was collected in biological triplicate samples of 300,000–500,000 cells. For LREs, each replicate

consisted of pooled cells from multiple neonatal litters; for PECs, each replicate corresponded to a single

mouse at postnatal day 42 (P42). Cells were collected in RLT buffer (Qiagen), and total RNA was extracted

using the RNeasy Plus Micro Kit (Qiagen). Samples with an RNA integrity number (RIN) >7.0 were selected

for RNA-seq. Ultra-low input poly(A)-selected libraries (single-end) were prepared in triplicate and

sequenced using the Illumina HiSeq 2500 platform (50 bp, single-end reads) at the Centro de Análisis

Genómico (CNAG-CRG, Barcelona, Spain). Reads were aligned to the Mus musculus reference genome

(mm39) using HISAT2 (v2.1.0), and gene counts were obtained using HTSeq-count (v0.11.2). Differential

gene expression analysis was performed with DESeq2. Gene Set Enrichment Analysis (GSEA)[81] was

conducted using the clusterProfiler [82] and enrichplot packages within the R environment. Predefined gene

sets from the Gene Ontology (GO) database were assessed for statistically significant enrichment based

on a ranked list of gene expression values. The full gene dataset, annotated with ENSEMBL identifiers and

their associated statistical metrics (stat), was utilized as input for the GSEA. Enrichment was quantified by

normalized enrichment scores (NES), with significance determined at an adjusted p-value threshold of <

0.05 following Benjamini-Hochberg correction. Over-Representation Analysis (ORA)[37] was performed in R

using the clusterProfiler package. Differentially expressed genes (DEGs) with an adjusted p-value < 0.05

and mapped using ENTREZID identifiers were used. Enriched GO terms and KEGG pathways were also

filtered at an adjusted p-value < 0.05 (Benjamini-Hochberg correction). Selected GO and KEGG terms were

visualized using bubble plots generated in R with the GOplot package (GOBubble function) [83]. The

biocomputational data analysis was carried out by the Biocomputational Analysis Service (SABio) at the
Centro de Biologia Molecular "Severo Ochoa" (CSIC-UAM).

1497

RNA Extraction, cDNA Synthesis, and RT-qPCR
Epithelial cells were lysed in 500 µL of TRIzol (Invitrogen) and stored at -80 °C until RNA extraction. RNA
was isolated using the RNeasy Micro Kit (Qiagen) according to the manufacturer's instructions. For cDNA
synthesis, 500 ng of RNA was reverse transcribed using the High-Capacity cDNA Reverse Transcription
Kit (Applied Biosystems). Gene expression was assessed by quantitative PCR (qPCR) using gene-specific
primer pairs (listed in Key Resources Table). Reactions were performed in 384-well plates using either the
CFX384 Real-Time System (Bio-Rad) or the ABI 7900HT Fast Real-Time PCR System (Applied
Biosystems), with SYBR Green Master Mix (Agilent, Santa Clara, CA). Each well contained 10 ng of cDNA
and 2.5 µM of each primer in a final volume of 10 µL. All reactions were run in technical triplicates.
Cyclophilin B (*Ppib*) was used as the reference gene for normalisation.

1508

mtDNA Quantification
Genomic DNA (gDNA) was extracted using the NZY Tissue gDNA Isolation Kit (NZYTech). Relative
mitochondrial DNA (mtDNA) content was determined by qPCR using primers for the following mitochondrial
genes: NADH dehydrogenase 1 (*mt-Nd1*), cytochrome c oxidase subunits 1 and 2 (*mt-Co1* and *mt-Co2*),
and ATP synthase subunit 6 (*mt-Atp6*). Reactions were performed in 384-well plates using the CFX384
Real-Time System (Bio-Rad) with SYBR Green Master Mix (Agilent, Santa Clara, CA). Each well contained
10 ng of gDNA and 2.5 µM of each primer in a final volume of 10 µL. All reactions were run in technical
triplicates. Hexokinase 2 (*HK2*) was used as the reference gene for normalization, with primers listed in the
Key Resources Table.

1518

QUANTIFICATION AND STATISTICAL ANALYSIS
GraphPad software (versions 8.0.1 and 9.5.1) and Microsoft Excel were used for data analysis and plotting.
Results shown are either representative or cumulative from at least two independent experiments. Except
for gene expression analyses during development, RT-qPCR and WB data were normalized to the average
of at least two WT or control mice of their corresponding litter. Sample size, statistical tests, and the meaning
of the dots in each graph are specified in figure legends, except for TEM graphs (Figures 4C, 6F and S6O;
samples sizes indicated in Table S1). In violin plots, median and interquartile range (IQR) are shown; in dot
plots, mean ± SEM; in bar plots with dots, the mean + SEM; and in standard bar plots, the mean + SD.
Outliers were identified using the ROUT method (Q = 5%) or Grubbs' test (α = 0.05) for datasets with n ≥
6. Normality was assessed using the Shapiro–Wilk test (n < 50) or the Kolmogorov–Smirnov test (n > 50).
Statistical significance between two groups was determined using Student's t-test for parametric data or
the Mann–Whitney test for nonparametric data. Welch's correction was applied when variances between
groups were unequal. For comparisons among more than two groups, one-way ANOVA or two-way ANOVA

with Tukey's post hoc test was used for parametric data, and the Kruskal–Wallis test, followed by Dunn's

multiple comparison test, was used for nonparametric data. Survival curves were compared using the

Gehan–Breslow–Wilcoxon test. A critical value for significance of $p < 0.05$ was used throughout the study

(*$p < 0.05$, **$p < 0.01$, ***$p < 0.001$, ****$p < 0.0001$). In Figures 1H, 2A, 2H, S5B–C, S6F–H, S7A, S7B, S7E,

and Table S2, only the most relevant statistically significant comparisons are shown; non-significant results

are not displayed. In all other figures, statistical significance is indicated only when differences are

significant.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7

Figure S1

A P7 Distal small gut — LREs — Magnification

N LV AEC L LV mvb mvb e e

B P7 ileum — Magnification

L L

LAMP1 Dab2 βcat DNA

LAMP1 Dab2

C GFP-LC3 mice

P7 mCherry P21

	P7	P21

KDa
32 — mCherry
45 — GFP-LC3 I / GFP-LC3 II
25 — Free GFP
130 — USP7

D

0hrs FR-dext 3hrs Rd-dext 4hrs analysis 8hrs analysis

4hrs — Magnification
FR-dext
Rd-dext
FR/Rd-dext DNA

8hrs — Magnification
FR-dext
Rd-dext
FR/Rd-dext DNA

Figure S2

Figure S3

Figure S4

Figure S5

Figure S6

Figure S7

Table S1

	Class	No. mitochondria / μm²	% of mitochondria	Mitochondrial area	Mitochondrial aspect ratio
Figure 4C	I	11, 10	11, 10	239, 271	239, 276
	II	11, 10	11, 10	13, 32	12, 28
	III	11, 9	11, 10	14, 12	18, 12
Figures 6F and S6P	I	23, 24, 13, 17	23, 24, 13, 17	184, 321, 259, 128	169, 329, 251, 130
	II	23, 24, 13, 17	23, 24, 12, 17	19, 73, 14, 45	21, 74, 15, 44
	III	23, 24, 13, 17	23, 24, 13, 17	45, 78, 17, 134	47, 78, 16, 149

Table S2

Protein	Figure 5H		Figure 6L	Figure S5E
	WT vs *Atg16*cKO	WT-P14 vs WT-Preadult		
ASS1	*	****	***	***
GLS	*	****	****	**
HK1	***	**	**	—
CPT1A	*	****	***	****
ACAC	NS	****	***	**
CS	****	****	***	****
IDH2	****	****	****	*
ATP5A	NS	****	*	NS