High throughput quantitative tracking of *Plasmodium falciparum* clonal blood stage

parasite growth and applications for antimalarial drug discovery

Zhe Cheng[*1,2], Liyang Ru[5], Andrew Hoang[2], Mingyu Wang[4], Suryanarayana Ganjikunta[2], Steven

P. Maher[1], Dennis E. Kyle[*1,2,3]

[1] Center for Tropical and Emerging Global Diseases, University of Georgia, Athens, GA, USA

[2] Department of Cellular Biology, University of Georgia, Athens, GA, USA

[3] Department of Infectious Diseases, University of Georgia, Athens, GA, USA

[4] Institute of Bioinformatics, University of Georgia, Athens, GA, USA

[5] Department of Electrical and Computer Engineering, University of Florida, Gainesville, FL,

USA

*Corresponding authors: Dennis.Kyle@uga.edu and Zhe.Cheng@uga.edu

Abstract

New systematic profiling of drug effects is in demand due to limitations in existing approaches to

evaluate comprehensive drug effects and distinguish heterogeneity in mixed populations. One

challenge is the underdeveloped methods for investigation of causal association between

artemisinin induced dormancy and recrudescence in *Plasmodium falciparum*. We developed

Quantitative Tracking After Chemotherapy Exposure (qTRACE) and an artificial intelligence (AI)

mode to evaluate cytotoxic and cytostatic effects simultaneously at single parasite resolution in

a high throughput platform. qTRACE is based upon the observation that individual parasites

grow into colonies that can be quantified for numbers of viability and growth rate. Applying

qTRACE, we revealed parasite-drug killing dynamics after artemisinin exposure, finding up to

50% of viable parasites arise directly from recovery of artemisinin induced dormancy. We further

developed next generation qTRACE integrated with deep learning-based segmentation and

analysis, thereby directly linking continuous, time-lapse phenotypes of label-free live *P.*

falciparum. Our results confirmed the viability of dormant ring stages and that recovery rates

differ between artemisinin-susceptible and -resistant *P. falciparum*.

Main

Accurate evaluation of drug induced effects and parasite viability is essential for

discovering new anti-malarial drugs and monitoring the success of currently used regimens.

Previously, evaluation of susceptibility to anti-malarial drugs is measured by half-maximal

inhibitory concentration (IC50) or various ring stage survival assays[1-5]. These assays are carried

out in a bulk culture for short periods of time, after which susceptibility of drugs is measured by

comparing the number of replicated parasites between treated and untreated condition. Many of

these methods rely on taking aliquots from a large culture and only capture a single snapshot.

Drug perturbation assessments often lack insights into drug effects and are unable to

differentiate growth inhibition and temporary arrest with killing. More critical limitations include

the inability to evaluate long-term drug-parasite dynamics as the measurements are not derived

from the same individual cells and cannot resolve heterogeneity in a mixed population. Too

often the result is a misinterpretation of killing rate or that no viable parasites remain in the

short-term assay. Conversely, previously published data suggest persistent survivors exist and

that standard assays obscure true killing effects of drugs and hinder the development of next

generation anti-malarial drugs[6]. Consequently, these methods create inconsistent correlations

between drug susceptibility and genotypes, while ignoring valuable biological insights of

individual diversity of parasites and drug effects in a continuous system.

Artemisinin combination therapy is the frontline treatment for *P. falciparum* infection.

However, the emergence and spread of resistance to artemisinin poses a significant threat in

malaria control[7]. Delayed clearance and recrudescence are frequently associated with

artemisinin resistance clinically[8]. It has been widely reported that exposure to artemisinin drugs

induces a phenotype known as artemisinin-induced dormancy and these dormant parasites can

persist for many days before they either recover or die. Numerous studies suggest these

dormant parasites play a role in infection recrudescence and treatment failures both clinically

and in vitro[9-13]. Drug-induced cell cycle arrest has been widely observed in many human

diseases, including malaria, and have posed a significant challenge in searching for improved

therapies[6]. Thus, understanding the role of dormancy with artemisinin resistance and parasite

recrudescence is critical for formulating effective counterstrategies. However, the causal relation

of artemisinin induced dormancy to parasite survival and recrudescence remains poorly

understood due to limitations in existing approaches. Some of the various assays attempt to

compensate for delayed recovery and quantify dormancy recovery, but still face the same flaw

that early survivors can easily disguise the existence of parasites that recover later in a mixed

culture[2, 14]. An improved and more efficient evaluation of artemisinin effects and quantification of

artemisinin induced dormancy are needed to accurately quantify drug resistance at the clonal

level.

In this study, we developed Quantitative Tracking After Chemotherapy Exposure

(qTRACE) to quantify viability and growth at single parasite resolution based on the concept that

following an adequate dilution of parasitized erythrocytes, one parasite grows into a colony that

can be visualized microscopically. qTRACE is a versatile method that simultaneously tracks

survival, time-dependent recovery, and drug-induced growth effects. We demonstrated the

robustness of qTRACE by revealing true long-term drug effects of dihydroartemisinin (DHA) on

multiple *P. falciparum* isolates and cloned parasites with diverse backgrounds. We further clarify

the underappreciated contribution of artemisinin induced dormancy in parasite recrudescence

and reveal the undiscovered growth retardation effect of artemisinin drugs in selected parasite

strains. Further development of qTRACE AI with deep learning-based cellular analysis

effectively enhanced time-lapse biological connection, generalization, and accuracy through

unrestricted observation of label-free live cell phenotypes. Applying qTRACE to drug screening,

we found a diverse cytostatic and cytotoxic effect preference and time-dependent dynamics

between drugs and parasites. qTRACE is strongly positioned for holistic investigation into single

cell level drug-parasite dynamics while remaining amendable to high-throughput and logistically

complex time course experiments.

Results

Quantification of longitudinal viability and growth of single parasites

We found that, when sufficiently diluted in a 384 well microtiter plate, one single parasite

grows into a colony and can be continuously monitored over time. These initial observations led

us to develop a high throughput and high content imaging assay. A previously developed GFP

integrated parasite (NF54-GFP) was seeded into 384 well microtiter plates and imaged

continuously using a 4x objective on a high content imaging system (HCI)[15]. In these assays, we

observed continuous formation and growth of colonies over 22 days (Fig. 1A). Day 5 was the

earliest time we could detect a colony, likely due to insufficient fluorescence intensity at low

magnification at earlier time points. Due to the care taken to not disturb the plates during the

time course, these colonies continued to grow at the same position in the well throughout the

duration of the assay (22 days) (Fig. 1A). Meanwhile, we also observed parasite recovery and

colony growth in ring stage *P. falciparum* exposed to 700nM DHA for 6h (Fig. 1A). Notably, some

colonies appeared early, with others at later timepoints, which is consistent with the concept that

artemisinin drugs induce ring stage dormancy, followed by delayed recovery of the parasites

(Fig. 1A). Time-lapse imaging showed the differential onset of growth of individual parasites,

with late recovering parasite colonies from dormancy detected in the same well alongside early

recovering parasites (Supplementary Video 1). Comparison of GFP, Hoechst, and DIC imaging

showed complete overlap of the identified colonies which confirms these colonies consist of

parasites (Fig. 1B). We chose to use Hoechst-staining of DNA as the fluorescent marker as this

route enables assessment of clinical isolates without integrated fluorescent markers. At

increased magnification (60X and 100X), we show that a colony consists of hundreds-to-

thousands of parasites, evidenced by imaging of individual parasites and foci of hemozoin (Fig.

1C). The growth of parasites results in reduced hemoglobin that appears as an opaque clearing

in the red blood cell monolayer, consistent with previous study of plaque forming in *P.*

falciparum[16] (Fig. S1A). A z-stacked video of a colony imaged with a 100X objective shows that

parasites are distributed horizontally and vertically throughout the packed red blood cell layer

(Fig. S1B and Supplementary Video 2).

These phenotypes, therefore, can be used to quantify the growth of individual parasites

(Fig. 1D and S1C). Long-term measurements at multiple time points allow for longitudinal

measurements of parasite growth and identification of slow growing or late recovering parasites

(Fig. S2). To validate the single parasite-to-colony concept and quantification reliability, we

performed a serial dilution experiment to assess correlation between colony number and

parasite input (Fig. S3A). Measurements of total DNA content showed a successful serial

dilution of parasites (Fig. S3B). From the same experiment, quantification of colonies from wells

seeded with $\leq$2500 cells correlated with the total DNA content of parasites; however, the first

two dilution points resulted in overlapping colonies which lead to inaccurate quantification (Fig.

1E). In wells with lower numbers of parasites, the average quantified colonies in each well were

within one dilution of the expected number of colonies (Fig. 1F). Taken together, these results

demonstrate that one colony comes from replication of one single parasite and quantification of

colonies can be used to track the original number of viable parasites in each well.

qTRACE tracks single parasite survival, time-dependent recovery and growth

Initially, we developed qTRACE to improve our understanding of survival and recovery

from artemisinin exposure and artemisinin-induced ring stage dormancy phenotypes (Fig. 2A).

To ensure sufficient identification of late recovery of dormant parasites, we designed the assay

to last 22 days in duration, with multiple plates prepared for multiple timepoints throughout (Fig.

2A). To minimize liquid movement in the blood layer and to preserve colony integrity, we

designed a robotic automation protocol to perform slow liquid manipulation with essentially no

disruption to the blood layer (Figure S4A). At every timepoint, one plate was fixed and stained

for HCI while the remaining plates underwent media change using the designed no-disruption

protocol (Fig. 2A).

We developed a single-parasite viability index (SVI) to compute the viability from drug

treatment based on quantification of colonies. We can determine the viability of single parasites

at time t for strain s:

$SVI\ (s, t) = \dfrac{\text{Treated colony counts (s,t)}}{\text{D(s) x Untreated colony counts (s,t)}} \text{x}100$

SVI is the ratio of the number of colonies between treated and untreated conditions

normalized to single parasite division. D(s) is the determined dilution factor between treated

sample and untreated sample for strain s. The introduction of factor D enables greater tolerance

of experimental variability caused by cell density (Fig. S4B). Additionally, the factor D can be

adjusted to compensate for different levels of drug sensitivity of different genotypes. SVI showed

minimal variation under different D factors because the overall percentage of viability remained

unchanged (Fig. S4C).

The length of qTRACE experiments is flexible and a single timepoint qTRACE SVI

assessment is sufficient for evaluating drug killing and parasite survival, which requires no

media change and can be applied with manual manipulation (e.g., multi-channel pipettes) (Fig.

2B). In this study, we used day 7 as the timepoint to assess initial survival from artemisinin

exposure. By adding time points to generate time-dependent SVI, we observed cumulative

recovery overtime at single parasite resolution (Fig. 2C). This made it possible to identify and

quantify parasites that recovered late. In addition to evaluation of multiple parasite strains

treated with a single inhibitor, qTRACE also is compatible with high-throughput drug screening

(Fig. 2A). In a dose response experiment, we assessed drug killing effects at different

concentrations (Fig. 2D).

Through quantification of the colony size over time, we captured the exponential growth

of viable parasites (Fig. 2E). These data are useful to evaluate effects of drug on parasite

growth, making cytostatic effects measurements a convenient secondary outcome from

qTRACE. Moreover, quantification of the area of colonies alongside viability enables

identification of late recovered dormant parasites and assessment of growth behavior of those

recovered parasites. To quantitatively determine growth difference between two samples, we

adapted the growth rate inhibition metrics (GR) from a previous study[17]:

$GR = 2^{k(T)/k(U)}\text{-}1$

In our application, k(T) is the growth rate of drug-treated parasites and k(U) is the growth

rate of untreated controls. Similarly, the GR value can also be used to quantitatively assess

fitness difference between strains, where k(T) was the growth rate of strain 1 and k(U) was the

growth rate of strain 2. The GR value ranges from -1 to 1, with 1 suggesting no impact on

growth, 0 meaning complete growth inhibition and negative value indicating cytotoxic effects.

Using GR and SVI together we differentiated between cytotoxic and cytostatic effects of a drug.

qTRACE reveals time-dependent viability of single parasites after DHA exposure and

diverse mechanisms of artemisinin induced dormancy

Mutations in the *P. falciparum* K13 propeller domain are known to facilitate resistance to

artemisinin drugs[18]. To study how K13 mutations affect the viability of parasites, we compared

Dd2 with its K13 mutants Dd2-K13-C580Y and Dd2-K13-R539T using qTRACE[19]. Rings at 0-

3hpi were exposed to 700nM DNA for 6 hours before plating (Fig. 2A). As expected, we

captured the number and the size of growing colonies from all three strains and observed

significantly fewer colonies from DHA treated Dd2 compared to its isogenic K13 mutants (Fig.

3A). Overall, both DHA treated and untreated colonies kept growing throughout the assay

duration (Fig. S5A). Interestingly, a wide distribution of colony sizes was observed even in

synchronized untreated controls, presumably due to genuine growth variability as previously

noted[20] (Fig. S5A). qTRACE single timepoint assessment of SVI on day 7 revealed differences

in susceptibility to DHA among three strains (Fig. 3B). All three strains continued to show

increased viable parasites over time until reaching a plateau, indicating that the initial survivors

only represent a fraction of the total parasites that eventually recover following exposure to DHA

(Fig. 3C). These results demonstrate that both Dd2 and its K13 mutants exhibit dormancy

phenotype for survival and that mutated K13 facilitated resistance is manifested on both initial

survivors and recovery from dormancy mechanisms. Dd2-K13-R539T exhibited over 100-fold

more viable parasites after exposure to DHA, whereas Dd2-K13-C580Y showed a

comparatively lower difference compared to the parental Dd2 (Fig. 3D). This is consistent with

previous reports showing that the R539T mutation confers a higher level of resistance than

C580Y[18, 21]. The fold change remained stable for all three strains, indicating that although higher

number of parasites recovered in K13 mutans, the proportion of late recovery remained similar

across three strains.

To investigate if the delayed recovery from DHA is a common strategy of survival, we

tested various other laboratory-adapted *P. falciparum* lines and clinical isolates. We tested two

parasite lines and their progenies that were previously selected for artemisinin resistance (D6,

D6R, W2 and W2R)[9]. Both W2/W2R and D6/D6R pairs showed different levels of resistance to

DHA exposure and continued to have parasites recover over time (Fig. S5B and S5C). The

decreased fold change of viability between W2 and W2R shows that W2 has more viable

parasites coming from delayed recovery than W2R, presumably because W2R adapted

stronger DHA tolerance during resistance selection (Fig. S5B). The viability difference between

D6 and D6R was greater than that between W2 and W2R, presumably because D6R went

through a longer selection period than W2R (Fig. S5C)[9]. Overall, the in vitro drug selected

parasites exhibited lower levels of resistance compared to parasites with mutated K13, yet

recovery from artemisinin-induced dormancy was observed in both genotypes (Fig. 3C, S5B

and S5C). We next tested NHP-4781 which has E252Q K13 mutation that is located outside β-

propeller domains[22]. NHP-4781 showed a comparative level of susceptibility to DHA exposure

compared to Dd2, indicating that mutation outside propeller domain on K13 does not incur

resistance to artemisinin, which is consistent with previous findings[21] (Fig. 3E and Fig. S5D).

TM91-C235 is a multi-drug-resistant parasite derived from patient with multiple drug treatment

failures[23]; it showed moderate resistance compared to D6 and Dd2, but not to W2 (Fig. 3E and

Fig. S5D). The ability to have more continuous dormancy recovery of W2 compared to other

parasite strains is consistent with previous study which showed higher and longer recovery of

W2 after DHA exposure (Fig. 3E)[14].

The nine *P. falciparum* lines tested showed different levels of delayed recovery from DHA

(Fig. S5E). Notably, the initial survival measured on day 7 from DHA strongly correlates with late

recovery, indicating that, despite the differences of susceptibility to DHA among these parasites,

the survival is equally exhibited by the initially survived parasites and parasites recovered from

dormancy (Fig. 3F). For many of the artemisinin sensitive parasite lines, delayed recovery

parasites accounted for about half of the total parasites that eventually survived DHA exposure

(Fig. 3G). A decreased proportion of late recovered parasites in both K13 mutants and in vitro

selected lines suggests that an increased level of resistance reduces the reliance on dormancy

as a mechanism to survive (Fig. 3G). The large portion of delayed recovered parasites is often

overlooked in many studies that use standard 72-hour assays to estimate parasite killing but

now can be more accessibly evaluated using qTRACE.

qTRACE assesses growth inhibition and fitness

Through measurements of the growing colonies, qTRACE allowed us to quantify growth

inhibition imposed by drugs and fitness differences between parasite lines. From the same DHA

exposure experiments described above, we analyzed the growth and distribution of colonies of

DHA treated Dd2 and its K13 mutants. We found the growth of the two K13 mutants mimics

their untreated control, while the growth of Dd2 was severely affected by DHA, as evidenced by

the dispersed distribution (Fig. 4A). Comparison of growth curve and GR value showed Dd2

suffered a reduced growth rate after DHA exposure, whereas K13 mutants showed overlapped

growth with their control (Fig. 4B and 4C). These results suggest that Dd2 K13 mutant parasites

can quickly adapt to normal growth once recovered from DHA, but the growth of many parental

Dd2 parasites become impaired by DHA. Many previous studies showed that adaptation to drug

resistance sometimes induces fitness costs in the parasites[10, 24]. Through qTRACE, we can

detect fitness disadvantage in the Dd2-K13-C580Y, but not in the Dd2-K13-R539T, compared to

parental Dd2; which is consistent with previous reports[21] (Fig. 4D). In the case of in vitro

selected lines, W2R showed a fitness disadvantage compared to W2, while D6R showed a

more minor disadvantage compared to D6 (Fig. S6A), as noted previously[10]. DHA exposure

resulted in reduced growth and lowered GR for W2 and D6, yet W2R and D6R phenocopied the

growth of untreated conditions (Fig. S6B and S6C). C235 showed a slight impact on growth rate

from DHA exposure (Fig. S6D). NHP-4781 also exhibited retarded growth following DHA

exposure, as well as poor adaptation to culture as seen by the slow growth in the untreated

control (Fig. S6E). This is supported by the observed gametocyte formation even during routine

culture. Total viability from artemisinin exposure showed a moderate correlation with GR,

indicating that increased resistance to artemisinin led to decreasing growth impact on the viable

parasites, but was also parasite background dependent (Fig. 4E). Together, these results

demonstrate that resistance to artemisinin is also reflected in the ability to quickly resume

growth upon recovery.

Application of qTRACE in drug testing

The ability to assess phenotypes of single parasites is a valuable tool to improve

accuracy of drug susceptibility testing (Fig. 2A). We applied qTRACE to drug screening and

tested 15 common anti-malarial drugs on Dd2 parasites (Fig. S7A and Supplementary Table 3).

Consistent with previous reports of Dd2 background, qTRACE also demonstrated elevated

resistance to sulfadoxine and pyrimethamine in Dd2[25]. The SVI50 of most compounds tested

showed comparable results to the standard IC50 measurements in a bulk culture, indicating

strong reproducibility of qTRACE to serve as a quantitative alternative to conventional bulk

methods (Fig. S7B and Supplementary Table 3). qTRACE also demonstrated extraordinary

efficiency and improvements of throughput due to very low parasite input requirements (less

than 50 parasites per well).

qTRACE AI powered by deep learning enables continuous label-free live cell analysis

From the development of qTRACE with DNA dyes, we noted one of the major limitations

is the lack of continuity between every timepoint in a continuous experiment when not using

self-reporting parasite isolates (e.g., GFP) (Fig. 2A). To enable continuous observation of the

same samples and preserve clone identities, we incorporated a deep learning-based semantic

segmentation method into qTRACE. The next generation qTRACE AI directly quantified objects

on images acquired through transmitted light microscopy without the need to fix, stain, or

genetically modify the parasites. A total of 5760 distribution-calibrated images spanning diverse

experimental applications were used to train convolutional neural networks (CNN) (Fig. 5A).

These images covered different time points and sizes of colonies, but with a stronger focus on

early times to compensate for increased difficulty of learning to differentiate small colonies (Fig.

5B and S8A). Parasite colonies of every transmitted light image were annotated to polygons by

trained human professionals using ground truth GFP images as reference (Fig. 5C).

We trained on CNN model U-Net architecture because of its established capability of

biomedical level semantic segmentation (Fig. 5D and S8B). Overall, qTRACE AI achieved

comparable human level accuracy, demonstrated by the strong correlation between annotated

results and model predicted results (Fig. 5E). Mean absolute error (MAE) of count quantification

showed an average of 2.63 and is relatively stable over time, while area pixel error increased

slightly in later timepoints (Fig. 5F and Supplementary Table 4). Most of the test images showed

identical quantification between annotated results and predicted results across various

conditions (Fig. S9A). However, the true accuracy of qTRACE AI is underestimated here

because we noticed most of the disparities between annotated results and predicted results

were due to human errors in annotations. In almost all instances, our trained CNN model was

able to correct human errors, including filtering debris and false positives, and to identify true

positive colonies that were originally omitted by human observations (Fig. S9B and S9C).

Additionally, the label-free image analysis of qTRACE AI removed the most common challenge

of dealing with fluorescent noise during imaging as we routinely saw images that would have

been unsuitable for analysis due to high fluorescent background (Fig. S9D). Since qTRACE AI

does not have any benchmarking available, we decided to train a second model using Vision

Transformers (ViT) to allow for a performance comparison (Supplementary Table 4). Overall, U-

Net architecture showed superior performance compared to ViT for both count and area

quantification tasks (Supplementary Table 4). The performance differences between

architectures may be attributed to the data-efficiency characteristics of each model. Thus far, the

capability of qTRACE AI to track live single parasites greatly enhances accuracy and flexibility

over DNA stain qTRACE protocol, making it more suitable for diverse applications, including

demanding long-term studies that may yield new insights into drug effects (Fig. 5G).

qTRACE reveals new insights into drug activities and effects

We screened a Medicines for Malaria Venture (MMV) antimalarial reference library to

derive both SVI50 and GR50 using qTRACE AI label-free imaging analysis (Fig. 6A). A

correlation study of qTRACE AI and qTRACE side by side showed excellent reproducibility

between the two methods for viability and growth assessments (Fig. 6B). Most of the tested

drugs showed similar dose response curves between qTRACE AI and qTRACE (Fig. S10A).

These results confirmed the feasibility of qTRACE AI to obtain validated results from more

typical experimental applications. Through the evaluation of SVI50 and GR50, we identified

diverse drug induced cytotoxic and cytostatic effects from tested compounds. (Fig. 6C and

Supplementary Data 1). Azithromycin showed strong growth inhibition evidenced by the much

lower GR50 and the inhibition of growth at lower concentration as seen in the GR curve, while

pantothenamide showed clear cytotoxic effect (Fig. 6C and S10B). Understanding time-

dependent drug effects is crucial for dosing and pharmacokinetic studies. To take advantage of

the unlimited continuous live cell imaging of qTRACE AI, we performed a time-lapse experiment

to assess the time-dependent potency of compounds from the same cells over time. We

observed all three types of time-dependent activities, either increasing, decreasing or stable

over time (Fig. 6D). We detected 23 drugs that gradually lost potency, while only 3 drugs gained

extra potency with at least 2-fold change over time (Fig. 6D and Supplementary Data 1).

Azithromycin showed the greatest potency increase in the library, as well as mirincamycin,

another known slow acting drug[26, 27] (Fig. 6E). KAE609, KAF156 and some other drugs showed

strong stability over time, while many of the drugs lose their effect over time (Fig. 6E and

Supplementary Data 1). From these results, we conclude that qTRACE is capable of being used

as a significant enhancement over conventional drug testing to reveal more insightful drug

effects at single parasite resolution.

Discussion

The development of qTRACE was originally driven by the ambition to elucidate the

confounders in artemisinin induced dormancy and to quantify viable parasites that result in

recrudescence. Numerous studies have suggested the association between artemisinin

resistance and artemisinin induced dormancy, yet there have been limitations in quantifying

viable parasites that recover later than the first recrudescent brood[9, 10, 12, 14, 28]. qTRACE

overcomes those limitations by tracking the viability and growth of individual parasites, thereby

effectively distinguishing initial survivors and late recovered parasites in an automated high

throughput manner. Our results confirmed that recovery from artemisinin-induced dormancy

plays a significant role in overall parasite survival at the population level, with nearly half of the

viable parasites arising from dormancy recovery. Given that day 7 was the first point of

measurement, the proportion of delayed recovery is likely underestimated. In this study, we

show that the ability to survive artemisinin drugs in K13 mutants are not only exhibited by the

large number of initial survivals, but also in the delayed recovery from dormancy (Fig. 3C, 3F

and 3G). In fact, the number of parasites recovered from dormancy could be underestimated

due to limited space in the well for higher resistant lines (both Dd2 K13 mutants) in later

timepoints (Fig. 3C). The ability to utilize dormancy as a survival mechanism in both sensitive

and resistant parasites suggest dormancy is an innate survival mechanism and likely

independent of genomic resistance mechanisms. Resistance mechanisms improve initial

adaptation and stress response to artemisinin drugs through each of their pathways, allowing

more parasites to survive as well as more parasites to utilize dormancy. On the other hand,

more sensitive parasites have overall lower initial survival and lower dormancy recovery rates

due to poor initial response to artemisinin. Previous study suggests that dormant parasites are

resilient to a wide spectrum of anti-malarial drugs, indicating the reduced efficacy of ACT partner

drugs to remove dormant parasites[12]. Given the large portion of late recovery after DHA

exposure, it would be reasonable to attribute the clinically observed recrudescence to the

recovery of dormant parasites. In fact, parasites going into dormancy may be a favored survival

path during ACT treatment because of the reduced susceptibility to drugs and the half-lives of

the partner drug.

Investigation of cytostatic drug effects and fitness costs associated with increased

resistance constitute a large study domain in drug discovery and drug resistance. The cytostatic

effects of many anti-malarial drugs remain poorly studied due to lack of approaches to properly

evaluate them in a large scale. Our ability to track individual parasites with qTRACE made it

possible to evaluate cytostatic effects in a high throughput and technically straightforward

manner. Across nine parasite lines, we observed varying cytostatic effects induced by

artemisinin, influenced by genetic backgrounds and a moderate correlation of decreased growth

inhibition to increased resistance.

Altogether, our results demonstrate that resistance to artemisinin is a multifaceted

phenotype. When resistance increases, the proportion of initial survival and recovery from

dormancy equally increases, meanwhile the impact on growth gradually decreases until there is

no more growth impact, but in a parasite background dependent manner. The dormancy effects

of artemisinin drugs cannot be underestimated and is likely the ultimate culprit behind frequently

reported recrudescence. It is imperative that future ACT development and artemisinin resistance

studies incorporate dormancy recovery as a standard evaluation.

Previous studies on fitness typically include laborious processes and error prone

techniques, such as large amount of microscopy counting or combining two different parasites

into one culture[10, 24, 29]. In this study, we showed that fitness assessment is a convenient

secondary outcome when conducting qTRACE for other purposes, such as testing inhibitor

effects. With the emergence of qTRACE, fitness studies will no longer need to be a complicated

independent experiment. The growth assessment capability of qTRACE will be useful to a wide

range of research, including but not limited to evaluating growth competition and growth

inhibition, such as one imposed by RNAi or nutrition starvation.

Integration of deep learning-based analysis into qTRACE AI effectively overcame the

limitation of having disconnected results at every timepoint. The U-Net architecture CNN model

is well suited for qTRACE, evidenced by strong learning of the pattern with limited datasets. We

found that qTRACE AI is superior to DNA stain qTRACE for its excellent generalization,

accuracy, and cellular information linkage. qTRACE AI uses a single pipeline for all the

experimental conditions, while in many cases different sets of rules are needed for DNA stain

qTRACE depending on the timepoints or applications. Debris and background signals are

among the most difficult noises to remove in rule-based image analysis because most of the

time they fall into similar characteristic regions to the true objects. qTRACE AI demonstrated

strong ability to handle those difficult situations (Fig. S9B, S9C and S9D). Lastly, label-free

continuous live cell observation ensured the most authentic connection of cell behavior over

time, and significantly improved our ability to identify unique signatures for each individual

parasite. qTRACE AI and original DNA stain qTRACE will serve as great complement for each

other to improve versatility and accessibility.

When applied to drug screening, qTRACE demonstrated its ability to serve as a direct

replacement to currently used dose response assays. SVI50 and GR50 derived from qTRACE

are robust alternatives to IC50 as the measurements were derived on a per parasite basis. For

routine drug testing, a single endpoint at 120h is sufficient to identify different effects and does

not require any robotic automation. Taking advantage of deep learning-based continuous label-

free imaging, we screened an anti-malarial drug reference library and revealed new insights into

both cytotoxic and cytostatic effects imposed by drugs, which will improve understanding of the

mode of action of a drug and its future development. Through continuous measurements,

qTRACE outputs time-dependent drug potency shifts, which can serve as foundation for drug

pharmacodynamics and drug combination studies. Equally important to accurate drug effect

evaluation is improved efficiency; qTRACE increases drug screening throughput by up to 667-

fold. Typical dose response assay uses >1% parasitemia culture (~2000 parasites/µl in 2%

hematocrit), while qTRACE only needs less than 3 parasites/µl.

qTRACE is based on the biological phenomenon that a single parasite grows into a

colony. The concept of colonies and plaque assays have been widely used in various biological

research. In malaria research, similar concepts have been previously proposed, yet there has

been little application and requires visual inspection of plaques[16]. Integrated with HCI,

automation and deep learning, we developed a versatile application of this biological

phenomenon and removed many of the previously suggested limitations, such as long waiting

time and hematocrit limits. The flexibility to change media and supplement fresh blood is crucial

for any long duration experiments. Here we have demonstrated that currently available compact

automation stations are sufficient to achieve media change without disrupting colony integration,

though it is not required for many of the applications shown in the report. Potential applications

of this concept are far beyond what has been demonstrated in this study. Because of the ability

to identify the number of colonies in each well, it becomes possible to map genomic and

transcriptomic signatures associated with differential conditions at monoclonal levels. More

advanced utilization could improve the selection of drug resistance by picking parasites that

recover early or recover late, depending on if the purpose was to select for initial survivors or

study latency mechanism(s).

In summary, qTRACE will serve as an all-around method that can be used for a wide

range of scenarios, effectively overcoming previous limitations to achieve single parasite level

insights. It would be appropriate to use qTRACE as a routine assessment of the recrudescence

risks of developing compounds and current treatment combinations.

Methods

Parasite culture

The parasites used in this study include Dd2, Dd2-K13-C580Y and Dd2-K13-R539T (genetically modified Dd2 strains containing mutation on K13 PF3D7_1343700); D6 and D6R (an in vitro selected artemisinin resistant progeny of D6); W2 and W2R (an in vitro selected artemisinin resistant progeny of W2); C235; NHP-4781; and a genetically modified NF54-GFP (inserted GFP in cg6 locus)[9, 15, 19, 23]. For routine culture, parasites were grown at 37°C at 2% hematocrit in RPMI 1640 media (Gibco) supplemented with 25mM HEPES and 24mM $NaHCO_3$, and with 10% heat-inactivated human A+ plasma and 10 µg/ml gentamycin. Cultures were maintained in a gas chamber with 5% O_2, 5% CO_2, and 90% N_2. Giemsa slides were routinely made to assess parasite growth and stages. The growth media was changed every two days, and fresh blood was added when needed. Cultures were tested and found negative for mycoplasma regularly during this study.

Ring Stage 0-3hpi Synchronization

The same 2-step synchronization protocol was performed to achieve 0-3h post invasion (hpi) for all strains used in this study. First, late stages were selected by laying on top of 65% percoll gradient and followed by centrifugation at 1500RCF[30]. Three hours later, freshly invaded rings were selected using 5% D-sorbitol [31]. After each synchronization step, parasites were washed with RPMI 1640 media. Synchronized 0-3hpi parasites were allowed to reinvade before being used for experiments.

Dihydroartemisinin (DHA) exposure

The same DHA treatment was used for all DHA exposure experiments in this study. Tightly synchronized 0-3hpi parasites were adjusted to 1% parasitemia and 2% hematocrit and treated

with 700nM DHA. Six hours later, DHA was removed by centrifugation and washing with RPMI

1640 media before being replaced with culture media.

GFP live cell time lapse imaging and fluorescent imaging

For GFP continuous imaging, 0-3hpi NF54-GFP parasites were seeded into 384 well plates

(Greiner Bio-one) with an estimated number of 10 parasites per well. The same plate was taken

for imaging on day 3, 5, 7, 10, 13, 16, 19, 22 using Lionheart (Agilent). Media was changed at

day 7, 10, 13, 16, 19 by removing and replacing 20µl of media using NXP workstation

(Beckman). Another experiment with 6h DHA exposure was performed in a similar way except

the initial plated parasites were 1000 parasites per well. To image parasite using both Hoechst

staining of DNA and GFP expression, 40ul of 5ug/ml Hoechst was added into the plate and

maintained for 30 minutes before imaging. High magnification images were obtained using the

100x objective on a DeltaVision II (GE Healthcare) with deconvolution of a 22-plane Z-stack

using Software (GE healthcare).

qTRACE

Metrics

Colony counts and colony areas in the presence of drug are normalized to untreated controls in

the same plate under the same growth conditions. Technical replicates were averaged to yield

an average colony counts or colony area. For single candidate testing, we typically collect from

48-176 technical replicates. For dose response, two technical replicates per plate were

collected.

Single-parasite viability index (SVI) was calculated to evaluate the viability of parasites and the

cytotoxic effects of the testing drugs. SVI of parasite strain (s) at timepoint (t) was calculated as:

$SVI\ (s,t) = \dfrac{\text{Treated colony counts (s,t)}}{D(s)x\ \text{Untreated colony counts (s,t)}} \times 100$

The average number of colonies for each parasite strain growing at each condition at every

timepoint was calculated and normalized to the average number of colonies from the control.

(D) represents the dilution factor between treated and untreated in a multi-strain testing design.

SVI is a percentage value and ranges from 0 to 100, 0 meaning no viable parasite exists and

100 means no effect on parasite viability from the treatment condition. In recovery experiments,

Survival SVI is defined as the SVI form the first point of measurement. The Max SVI

measurement after the first timepoint is defined as the maximum possible viability or max SVI.

Maximum delayed recovery is calculated as Max SVI – Survival SVI. When calculating SVI for a

range of concentrations, SVI50 is the concentration that confers half maximal drug effect on

parasite viability.

Growth rate inhibition (GR) was adapted from a previous study to evaluate the growth of every

viable parasite[17]. The average area of colonies for each parasite strain growing at each

condition at every timepoint was calculated and normalized to the average area of colonies from

control. GR value ranges from -1 to 1, with 1 meaning no impact on growth, 0 meaning

complete growth inhibition, and -1 meaning highest cytotoxicity. When calculating GR for a

range of concentrations, GR50 is the concentration when GR = 0.5, which refers to half maximal

growth inhibition.

For continuous measurements from multiple timepoints, an exponential growth curve was fitted

for each parasite strain and each condition. GR was then calculated:

$GR = 2^{k(T)/k(U)} - 1$

The growth rate (k) of each fitted curve was extracted, with k(T) representing the growth rate of

drug treated condition and k(U) representing the growth rate of untreated controls. Alternatively,

when testing fitness or growth competition between two strains, k(T) became the growth rate of

strain 1 and k(U) became the growth rate of strain 2 or reference strain.

When measuring qTRACE as a single timepoint experiment, GR was calculated as:

$GR = 2^{\frac{log_2(x(T)/x_0)}{log_2(x(U)/x_0)}} - 1$

In this equation, x(T) represents the average area in drug treated conditions and x(U) is the

average area in untreated control. X_0 is the starting area; this could be the measurement before

starting the experiment or be fitted as an estimated area of a single parasite because colonies

originate from single replicating parasites.

Single candidate qTRACE

This method was designed to test the response of multiple parasite lines to a single testing

candidate of interest. In this study, DHA was used as an example. Synchronized 0-3hpi

parasites were treated with DHA for 6h using the procedure described above. An estimated

number of 10-50 parasites per well were seeded for untreated control for each parasite line.

Depending on the designed D factor for each parasite line, D*number of parasites in untreated

controls for each treated samples were seeded into the same plates with the untreated controls

based on similar design shown in Fig. 2A. Based on different timeline design, at every timepoint,

one plate was taken for staining and thereafter imaging quantification; the rest of the plates

were taken for media change using designed no disruption protocol on NXP workstation to

minimize blood layer disruption.

Evaluating altering condition of qTRACE

Altering condition experiments were performed to characterize the tolerance of qTRACE to

variations. For changing seeding density, D = 100 was used and the estimated seeding parasite

in untreated wells ranged from 5-50. For changing D factor, an estimated 30 parasites per well

in untreated wells were used.

Dose response qTRACE

This method was designed to test the effect of compounds in a high throughput format using

qTRACE. Compounds were tested in a 12-point semi log dilution in duplicates. Synchronized 0-

3hpi parasites were seeded into 384 well plates with 50-100 parasites per well. The seeded

plates were then drugged with the source plate using pintool affixed to the NXP (V&P Scientific).

For single endpoint experiments, plates were fixed and stained at 120h. For time lapse

experiments, whole plates were imaged using transmitted light at 48h interval followed by

qTRACE AI analysis.

Curve fitting

For experiments containing multiple timepoint, an exponential growth curve was fitted using the

average colony area measured at each timepoint for each condition:

$Y = Y_0 * \exp(K * t)$

The fitted parameters are:

Y_0: the best fitted starting value when t = 0.

K: the growth constant of the fitted curve for the condition and parasite line used

t: time

In the case of a comparison between two fitted curves, Y_0 was restricted to untreated control or

the reference parasite strain. K was extracted for calculation of GR.

In dose response experiments, SVI and GR of each concentration at each timepoint for each

drug is calculated, then fitted into a sigmoidal curve:

$$\text{SVI}(c) = \text{SVI}_{min} + \frac{100 - SVI_{min}}{100 + (\frac{c}{SVI50})^{hSVI}} \qquad \text{GR}(c) = \text{GR}_{min} + \frac{1 - GR_{min}}{1 + (\frac{c}{GRE50})^{hGR}}$$

The fitted parameters are:

SVI_{min} or GR_{min}: the maximum possible effect of a drug on parasite viability or growth inhibition

in a fitted curve

hSVI or hGR: the hill slope coefficient of the fitted curve

SVI50 or GRE50: the concentration that confers half maximal effect on parasite viability or half

maximal effect in GR curve.

Imaging and quantification, and transmitted light imaging for deep learning

For fixed timepoints, plates were fixed and stained with 5µg/ml Hoechst and 1% glutaraldehyde.

Imaging was performed using Lionheart FX (Biotek) or ImageXpress (Molecular device). Whole

wells were captured for all 384 wells with 4X magnification. DAPI intensity and focus was

determined using untreated wells as reference High content analysis was performed using

image metrics including colony number, size, area, and signal intensity. We found a minimum

size of 20 µm of colonies to allows for most optimal removal of small backgrounds and small

artefacts. The number of colonies and the area of each colony were then exported for further

analysis. Identified outliers were verified on the corresponding images and then discarded.

NF54-GFP parasite was used for the generation of deep learning training datasets. Whole well

transmitted light images were acquired with 4X magnification using ImageXpress. The same

sample was first imaged through transmitted light microcopy then immediately followed by GFP

channel to acquire GFP reference image. In a continuous experiment, the plate was returned to

culture condition and imaged again at next timepoint.

Image processing and training data preparation

Original TIFF image with resolution of 2048×2048 and depth of 16-bit grayscale was first

normalized to 2048×2048 resolution and 8-bit RGB format. The edge of every image was

cropped by 150 pixels to remove areas with uneven illumination. All polygon annotations were

initially performed by human professionals. Quality checks of all images and masks were

performed with at least two rounds of random selections by two independent reviewers. To

optimize computational efficiency and maintain consistent input dimensions across the dataset,

all images and masks were downsampled to 512×512 pixels using the Lanczos resampling

algorithm[32]. To enable rapid data loading during the iterative training process, all standardized

images and their corresponding segmentation masks were subsequently converted to NumPy

array format. The dataset was randomly partitioned into training (70%), validation (15%), and

test (15%) sets.

Deep Learning U-Net CNN model training

For semantic segmentation, we implemented a U-Net architecture comprising an encoder–

decoder structure[33]. The encoder comprises four downsampling stages with 2×2 max pooling,

progressively increasing the number of feature channels from 64 to 128, 256, and finally 512.

Each stage uses two 3×3 convolutional layers with batch normalization and ReLU activation to

capture contextual and morphological features[34-36]. At the bottleneck, feature maps are

processed by a double convolution block with 1024 channels to capture high-level semantic

features. The decoder mirrors the encoder with four upsampling stages using 2×2 transposed

convolutions. Skip connections concatenate encoder features with decoder outputs to preserve

spatial details, followed by double convolution blocks for refinement. A final 1×1 convolution

produces the single-channel segmentation map for binary classification.

The model was trained using the Adam optimizer with an initial learning rate of $1×10^{-4}$ and an

adaptive scheduler that reduced the rate after 5 stagnant validation epochs[37]. Training was

conducted over 50 epoch with a batch size of 32, and validation performance was monitored to

prevent overfitting. The final model was selected based on the best validation score, with all

metrics reported on a held-out test set. Visual explanations of the model is generated using

Grad-CAM to derive attention heatmaps across model layers[38].

Colony quantification

Following segmentation, automated quantification of colony number and area was performed on

the predicted binary masks, where white regions (pixel value = 1) represent identified colonies

and black regions (pixel value = 0) represent background. Colony enumeration was achieved

through connected component labeling. We employed 8-connectivity (Moore neighborhood) for

the connected component analysis, which considers pixels connected through both edges and

corners as belonging to the same colony. The algorithm iteratively groups adjacent positive

pixels until all connected regions are identified, with the total number of distinct labels

corresponding to the colony count. Colony areas were quantified by calculating the sum of

positive pixels within each segmented region. The total colonization density for each image was

computed as the aggregate sum of all positive pixels in the binary mask.

Performance evaluation and metrics

To evaluate colony enumeration, we used Mean Absolute Error (MAE), Root Mean Squared

Error (RMSE), Exact Match Rate, tolerance-based accuracy (±1 and ±2 colonies), and the

Pearson correlation coefficient to assess counting precision and consistency. For colony

segmentation, we evaluated performance using standard pixel-wise metrics, including

Intersection over Union (IoU), pixel accuracy, precision, recall, and F1 score, computed from

binary masks of predicted and ground truth annotations.

Vision transformer model for semantic segmentation

As an alternative approach to the U-Net architecture, we implemented a Vision Transformer

(ViT) model adapted for semantic segmentation[39]. All 512×512 input images were divided into

non-overlapping patches of 16×16 pixels, resulting in a sequence of 1024 patches (32×32 grid).

To preserve spatial information, learnable position embeddings are added to the patch

embeddings, which were then processed through a stack of transformer encoder layers, with

layer normalization and residual connections.

For adapting the transformer to dense prediction, the sequence of output embeddings from the

final transformer layer must be reshaped back to a 2D spatial representation and upsampled to

match the original image resolution. This is achieved through a decoder head that first reshapes

the patch tokens back to their spatial configuration, then applies successive upsampling layers

to recover the full 512×512 resolution, ultimately producing pixel-wise binary predictions for

colony segmentation. We followed the same training strategy and image processing settings for

ViT model as well.

Acknowledgements

We greatly appreciate Dr. David Fidock for the Dd2 K13 mutant lines and NF54 GFP line. We

Gratefully acknowledge NIH (R21 AI168803) and Georgia Research Alliance for funding

support. We thank Medicines for Malaria Venture for the reference anti-malarial compound

library.

1.   Witkowski B, Amaratunga C, Khim N, Sreng S, Chim P, Kim S, Lim P, Mao S, Sopha C,
Sam B, Anderson JM, Duong S, Chuor CM, Taylor WR, Suon S, Mercereau-Puijalon O,
Fairhurst RM, Menard D. Novel phenotypic assays for the detection of artemisinin-resistant
Plasmodium falciparum malaria in Cambodia: in-vitro and ex-vivo drug-response studies.
Lancet Infect Dis. 2013;13(12):1043-9. Epub 20130911. doi: 10.1016/s1473-
3099(13)70252-4. PubMed PMID: 24035558; PMCID: PMC5015432.
2.   Davis SZ, Singh PP, Vendrely KM, Shoue DA, Checkley LA, McDew-White M, Button-
Simons KA, Cassady Z, Sievert MAC, Foster GJ, Nosten FH, Anderson TJC, Ferdig MT. The
extended recovery ring-stage survival assay provides a superior association with patient
clearance half-life and increases throughput. Malaria Journal. 2020;19(1):54. doi:
10.1186/s12936-020-3139-6.
3.   Baniecki ML, Wirth DF, Clardy J. High-Throughput <i>Plasmodium falciparum</i>
Growth Assay for Malaria Drug Discovery. Antimicrobial Agents and Chemotherapy.
2007;51(2):716-23. doi: doi:10.1128/aac.01144-06.
4.   Quashie NB, Duah NO, Abuaku B, Quaye L, Ayanful-Torgby R, Akwoviah GA, Kweku
M, Johnson JD, Lucchi NW, Udhayakumar V, Duplessis C, Kronmann KC, Koram KA. A SYBR
Green 1-based in vitro test of susceptibility of Ghanaian Plasmodium falciparum clinical
isolates to a panel of anti-malarial drugs. Malaria Journal. 2013;12(1):450. doi:
10.1186/1475-2875-12-450.
5.   Amaratunga C, Neal AT, Fairhurst RM. Flow cytometry-based analysis of artemisinin-
resistant Plasmodium falciparum in the ring-stage survival assay. Antimicrob Agents
Chemother. 2014;58(8):4938-40. Epub 20140527. doi: 10.1128/aac.02902-14. PubMed
PMID: 24867976; PMCID: PMC4136004.
6.   Barrett MP, Kyle DE, Sibley LD, Radke JB, Tarleton RL. Protozoan persister-like cells
and drug treatment failure. Nature Reviews Microbiology. 2019;17(10):607-20. doi:
10.1038/s41579-019-0238-x.
7.   Pandit K, Surolia N, Bhattacharjee S, Karmodiya K. The many paths to artemisinin
resistance in Plasmodium falciparum. Trends Parasitol. 2023;39(12):1060-73. Epub
20231011. doi: 10.1016/j.pt.2023.09.011. PubMed PMID: 37833166.
8.   Codd A, Teuscher F, Kyle DE, Cheng Q, Gatton ML. Artemisinin-induced parasite
dormancy: a plausible mechanism for treatment failure. Malaria Journal. 2011;10(1):56.
doi: 10.1186/1475-2875-10-56.
9.   Tucker MS, Mutka T, Sparks K, Patel J, Kyle DE. Phenotypic and genotypic analysis of
in vitro-selected artemisinin-resistant progeny of Plasmodium falciparum. Antimicrob
Agents Chemother. 2012;56(1):302-14. Epub 20111114. doi: 10.1128/aac.05540-11.
PubMed PMID: 22083467; PMCID: PMC3256069.
10.   Hott A, Tucker MS, Casandra D, Sparks K, Kyle DE. Fitness of artemisinin-resistant
Plasmodium falciparum in vitro. J Antimicrob Chemother. 2015;70(10):2787-96. Epub
20150722. doi: 10.1093/jac/dkv199. PubMed PMID: 26203183; PMCID: PMC4668880.
11.   Witkowski B, Lelièvre J, Barragán MJ, Laurent V, Su XZ, Berry A, Benoit-Vical F.
Increased tolerance to artemisinin in Plasmodium falciparum is mediated by a quiescence
mechanism. Antimicrob Agents Chemother. 2010;54(5):1872-7. Epub 20100216. doi:
10.1128/aac.01636-09. PubMed PMID: 20160056; PMCID: PMC2863624.

12.   Tripathi J, Stoklasa M, Nayak S, En Low K, Qian Hui Lee E, Duong Tien QH, Rénia L,
Malleret B, Bozdech Z. The artemisinin-induced dormant stages of Plasmodium falciparum
exhibit hallmarks of cellular quiescence/senescence and drug resilience. Nature
Communications. 2024;15(1):7485. doi: 10.1038/s41467-024-51846-0.
13.   White NJ, Watson J, Ashley EA. Split dosing of artemisinins does not improve
antimalarial therapeutic efficacy. Sci Rep. 2017;7(1):12132. Epub 20170921. doi:
10.1038/s41598-017-12483-4. PubMed PMID: 28935919; PMCID: PMC5608907.
14.   Teuscher F, Gatton ML, Chen N, Peters J, Kyle DE, Cheng Q. Artemisinin-induced
dormancy in plasmodium falciparum: duration, recovery rates, and implications in
treatment failure. J Infect Dis. 2010;202(9):1362-8. doi: 10.1086/656476. PubMed PMID:
20863228; PMCID: PMC2949454.
15.   Gnädig NF, Stokes BH, Edwards RL, Kalantarov GF, Heimsch KC, Kuderjavy M, Crane
A, Lee MCS, Straimer J, Becker K, Trakht IN, Odom John AR, Mok S, Fidock DA. Insights into
the intracellular localization, protein associations and artemisinin resistance properties of
Plasmodium falciparum K13. PLOS Pathogens. 2020;16(4):e1008482. doi:
10.1371/journal.ppat.1008482.
16.   Thomas JA, Collins CR, Das S, Hackett F, Graindorge A, Bell D, Deu E, Blackman MJ.
Development and Application of a Simple Plaque Assay for the Human Malaria Parasite
Plasmodium falciparum. PLoS One. 2016;11(6):e0157873. Epub 20160622. doi:
10.1371/journal.pone.0157873. PubMed PMID: 27332706; PMCID: PMC4917082.
17.   Hafner M, Niepel M, Chung M, Sorger PK. Growth rate inhibition metrics correct for
confounders in measuring sensitivity to cancer drugs. Nature Methods. 2016;13(6):521-7.
doi: 10.1038/nmeth.3853.
18.   Ariey F, Witkowski B, Amaratunga C, Beghain J, Langlois AC, Khim N, Kim S, Duru V,
Bouchier C, Ma L, Lim P, Leang R, Duong S, Sreng S, Suon S, Chuor CM, Bout DM, Ménard S,
Rogers WO, Genton B, Fandeur T, Miotto O, Ringwald P, Le Bras J, Berry A, Barale JC,
Fairhurst RM, Benoit-Vical F, Mercereau-Puijalon O, Ménard D. A molecular marker of
artemisinin-resistant Plasmodium falciparum malaria. Nature. 2014;505(7481):50-5. Epub
20131218. doi: 10.1038/nature12876. PubMed PMID: 24352242; PMCID: PMC5007947.
19.   Straimer J, Gnädig NF, Witkowski B, Amaratunga C, Duru V, Ramadani AP, Dacheux
M, Khim N, Zhang L, Lam S, Gregory PD, Urnov FD, Mercereau-Puijalon O, Benoit-Vical F,
Fairhurst RM, Ménard D, Fidock DA. K13-propeller mutations confer artemisinin resistance
in <i>Plasmodium falciparum</i> clinical isolates. Science. 2015;347(6220):428-31. doi:
doi:10.1126/science.1260867.
20.   Stewart LB, Escolar EL, Philpott J, Cox-Singh J, Singh B, Conway DJ. Intrinsic
multiplication rate variation of Plasmodium falciparum in clinical isolates prior to
elimination in Malaysia. International Journal for Parasitology. 2025. doi:
https://doi.org/10.1016/j.ijpara.2025.02.003.
21.   Behrens Hannah M, Schmidt S, Henshall Isabelle G, López-Barona P, Peigney D,
Sabitzki R, May J, Maïga-Ascofaré O, Spielmann T. Impact of different mutations on Kelch13
protein levels, ART resistance, and fitness cost in Plasmodium falciparum parasites. mBio.
2024;15(6):e01981-23. doi: 10.1128/mbio.01981-23.
22.   Association of mutations in the Plasmodium falciparum Kelch13 gene
(Pf3D7_1343700) with parasite clearance rates after artemisinin-based treatments-a

WWARN individual patient data meta-analysis. BMC Med. 2019;17(1):1. Epub 20190117.
doi: 10.1186/s12916-018-1207-3. PubMed PMID: 30651111; PMCID: PMC6335805.
23.   Looareesuwan S, Kyle DE, Viravan C, Vanijanonta S, Wilairatana P, Charoenlarp P,
Canfield CJ, Webster HK. Treatment of patients with recrudescent falciparum malaria with
a sequential combination of artesunate and mefloquine. Am J Trop Med Hyg.
1992;47(6):794-9. doi: 10.4269/ajtmh.1992.47.794. PubMed PMID: 1471736.
24.   Hott A, Casandra D, Sparks KN, Morton LC, Castanares GG, Rutter A, Kyle DE.
Artemisinin-resistant Plasmodium falciparum parasites exhibit altered patterns of
development in infected erythrocytes. Antimicrob Agents Chemother. 2015;59(6):3156-67.
Epub 20150316. doi: 10.1128/aac.00197-15. PubMed PMID: 25779582; PMCID:
PMC4432152.
25.   Wang P, Read M, Sims PF, Hyde JE. Sulfadoxine resistance in the human malaria
parasite Plasmodium falciparum is determined by mutations in dihydropteroate synthetase
and an additional factor associated with folate utilization. Mol Microbiol. 1997;23(5):979-
86. doi: 10.1046/j.1365-2958.1997.2821646.x. PubMed PMID: 9076734.
26.   Starzengruber P, Fuehrer HP, Swoboda P, Ganesh D, Haque R, Khan WA, Graninger
W, Noedl H. Mirincamycin, an old candidate for malaria combination treatment and
prophylaxis in the 21st century: in vitro interaction profiles with potential partner drugs in
continuous culture and field isolates. Malar J. 2014;13:228. Epub 20140610. doi:
10.1186/1475-2875-13-228. PubMed PMID: 24916383; PMCID: PMC4059879.
27.   Yeo AE, Rieckmann KH. Increased antimalarial activity of azithromycin during
prolonged exposure of Plasmodium falciparum in vitro. Int J Parasitol. 1995;25(4):531-2.
doi: 10.1016/0020-7519(94)00119-9. PubMed PMID: 7635629.
28.   Teuscher F, Chen N, Kyle DE, Gatton ML, Cheng Q. Phenotypic changes in
artemisinin-resistant Plasmodium falciparum lines in vitro: evidence for decreased
sensitivity to dormancy and growth inhibition. Antimicrob Agents Chemother.
2012;56(1):428-31. Epub 20111010. doi: 10.1128/aac.05456-11. PubMed PMID: 21986828;
PMCID: PMC3256014.
29.   Kümpornsin K, Kochakarn T, Yeo T, Okombo J, Luth MR, Hoshizaki J, Rawat M,
Pearson RD, Schindler KA, Mok S, Park H, Uhlemann A-C, Jana GP, Maity BC, Laleu B,
Chenu E, Duffy J, Moliner Cubel S, Franco V, Gomez-Lorenzo MG, Gamo FJ, Winzeler EA,
Fidock DA, Chookajorn T, Lee MCS. Generation of a mutator parasite to drive resistome
discovery in Plasmodium falciparum. Nature Communications. 2023;14(1):3059. doi:
10.1038/s41467-023-38774-1.
30.   RIVADENEIRA EM, WASSERMAN M, ESPINAL CT. Separation and Concentration of
Schizonts of Plasmodium falciparum by Percoll Gradients. The Journal of Protozoology.
1983;30(2):367-70. doi: https://doi.org/10.1111/j.1550-7408.1983.tb02932.x.
31.   Lambros C, Vanderberg JP. Synchronization of Plasmodium falciparum erythrocytic
stages in culture. J Parasitol. 1979;65(3):418-20. PubMed PMID: 383936.
32.   Duchon CE. Lanczos Filtering in One and Two Dimensions. Journal of Applied
Meteorology and Climatology. 1979;18(8):1016-22. doi: https://doi.org/10.1175/1520-
0450(1979)018<1016:LFIOAT>2.0.CO;2.

33.   Ronneberger O, Fischer, P. & Brox, T. U-net: convolutional networks for biomedical
image segmentation. In Proc. 18th International Conference on Medical Image Computing
and Computer-Assisted Intervention (eds Navab, N. et al.) 234–241. Springer. 2015.
34.   Agarap AF. Deep Learning using Rectified Linear Units (ReLU). Preprint at
https://arxivorg/abs/180308375 (2018). 2018.
35.   Lecun Y, Bottou L, Bengio Y, Haffner P. Gradient-based learning applied to document
recognition. Proceedings of the IEEE. 1998;86(11):2278-324. doi: 10.1109/5.726791.
36.   Fukushima K. Visual Feature Extraction by a Multilayered Network of Analog
Threshold Elements. IEEE Transactions on Systems Science and Cybernetics.
1969;5(4):322-33. doi: 10.1109/TSSC.1969.300225.
37.   Diederik P. Kingma JB. Adam: A Method for Stochastic Optimization. Preprint at
https://arxivorg/abs/14126980 (2014). 2014.
38.   Ramprasaath R. Selvaraju MC, Abhishek Das, Ramakrishna Vedantam, Devi Parikh,
Dhruv Batra. Grad-CAM: Visual Explanations from Deep Networks via Gradient-based
Localization. Preprint at https://arxivorg/abs/161002391. 2016.
39.   Alexey Dosovitskiy LB, Alexander Kolesnikov, Dirk Weissenborn, Xiaohua Zhai,
Thomas Unterthiner, Mostafa Dehghani, Matthias Minderer, Georg Heigold, Sylvain Gelly,
Jakob Uszkoreit, Neil Houlsby. An Image is Worth 16x16 Words: Transformers for Image
Recognition at Scale. Preprint at https://arxivorg/abs/201011929. 2020.

Fig. 1. A single parasite grows into a colony. (A) Growth of the same individual NF54-GFP

colonies imaged over time, with or without 6h DHA exposure (Scale bar = 150µm). **(B)** Hoechst

stained and GFP fluorescent images of day 7 parasite colonies imaged with a 4X objective;

white boxes show the same colonies imaged with a 20X objective (Scale bar = 100µm) **(C)**

Higher magnification images of a day 7 parasite colony. The observed black dots are hemozoin.

Top: imaged with a 60X objective (scale bar = 25µm), bottom: imaged with a 100X objective

(scale bar =15µm). The 4X objective image scale bar = 100µm. **(D)** High-content image analysis

was used to measure the number and the size of colonies of a fraction of a well (Full well is

shown in Fig. S1C) (Scale bar = 100µm). **(E)** Average number of colonies in each column of

each dilution point (left) and heatmap view of colony counts of the same serial dilution plate

(right). Dilution points 1 and 2 could not be accurately quantified due to wells having too many

colonies. **(F)** Comparison between experimental results and estimated numbers in low dilution

points (left) and comparison of the number of colonies between quantified and expected number

of positive wells (right). The estimated colony numbers are shown in Fig. S3A. All experiments

were performed at least twice.

A

Stage 1: Sample preparation and treatment

Multiple parasite strains → Parasite synchronization → Drug treatment

untreated → treated (*D)

Controlled cross comparison in one plate

- ■ Strain1-treated
- ■ Strain2-treated
- ■ Strain3-treated
- ■ Strain4-treated
- ■ Strain1-untreated
- ■ Strain2-untreated
- ■ Strain3-untreated
- ■ Strain4-untreated

Multiple parasite strains

Serial dilution of concentration

Compound1
Compound2
⋮

Compound library

Stage 2: Assay maintenance and results collection

Day7
Day10
Day13
Day16
Day19
Day22

→ No disruption liquid handling → Staining ×1 → High content imaging

Plates -1 / Media change

Stage 3: Data analysis

B

Survival

SVI (c,t) vs Strain type (A, B, C, D)

Single endpoint viability

C

Recovery

SVI (c,t) vs Time

High recovery (Strain A)
Low recovery (Strain B)

Time dependant cumulative recovery

D

Drug inhibition

SVI vs Concentration (10^{-4} 10^{-3} 10^{-2} 10^{-1} 10)

SVI50

Dose response SVI

E

Growth rate

Growth of colony vs Time

Untreated $\exp(k(U) \ast t)$
Treated $\exp(k(T) \ast t)$

Growth effect & fitness

Fig. 2. qTRACE simultaneously reports viability, time-dependent recovery, and growth

effects at single parasite resolution. (A) Schematics of the qTRACE process. In stage 1,

parasite strains are prepared and treated with drugs. Treated and untreated samples are

prepared based on the dilution factor D, then plated on the same plate. Left side showing

representative DHA exposure workflow and right side showing representative drug testing

workflow. In stage 2, plates undergo automated media change, and one plate is taken for HCI at

each designated timepoint. In Stage 3, data are analyzed as described in Fig. 2B-E. **(B)** Single

endpoint SVI assessments to evaluate percentage viability at concentration c and time t. **(C)**

Assessments of SVI at multiple time points to evaluate time-dependent recovery or drug effects.

(D) SVI assessments in a dose response. SVI50 is the concentration of a drug that estimates

50% of parasites were viable. **(E)** Assessments of exponential growth of colonies under different

conditions or between different strains to evaluate growth effects and fitness. Growth Rate (GR)

is then derived using variable K between two conditions.

Fig. 3. qTRACE reveals differential susceptibility and recovery from DHA exposure

across various parasite lines. (A) Individual colonies and the sizes of each colony under

untreated condition (left) and DHA condition (right) for every timepoint recorded from Dd2 and

Dd2 K13 mutants. Each black dot represents one colony. From two biological replicates. **(B)** SVI

assessment of Dd2 and Dd2 K13 mutants on day 7 quantifying initial survival from DHA

exposure, n=80 technical replicates and n=4 biological replicates. P-value calculated from one-

way Anova. **(C)** Time-dependent SVI of Dd2 and Dd2 K13 mutants at continuous timepoints,

day 19 and 22 for Dd2-K13-R539T were not accurately quantified due to colony overgrowth.

n=80 technical replicates and n=4 biological replicates. P-value calculated from two-way Anova.

(D) The fold change in SVI between Dd2 and Dd2-K13-C580Y, as well as between Dd2 and

Dd2-K13-R539T, for all timepoints. **(E)** Time dependent recovery SVI of five artemisinin

sensitive strains at continuous timepoints. n=80 technical replicates and n=3 biological

replicates. **(F)** Comparison of late recovery SVI (Max SVI-survival SVI) and survival SVI of all

nine parasite lines with linear regression. P-value and R^2 value calculated using Pearson's

correlation. **(G)** Proportion of late recovery in total viability over entire 22 days across nine

parasite lines (error bar=SEM). Additional data in Supplementary Table 1.

Fig. 4. Growth impacts induced by DHA and fitness costs to artemisinin resistance. (A)

Density distribution of colony sizes in Dd2 and Dd2 K13 mutants at continuous timepoints in

DHA and DMSO conditions. From two biological replicates. **(B)** Fitted growth curves of

averaged colony sizes at all timepoints for Dd2 (left), Dd2-K13-C580Y (middle), and Dd2-K13-

R539T (right) in DHA condition and DMSO condition. n=80 technical replicates and n=4

biological replicates. **(C)** GR values of Dd2 and Dd2 K13 mutants comparing DHA condition to

DMSO condition for each strain. P-value calculated from one-way Anova. **(D)** Fitted growth

curves of averaged colony sizes at all timepoints for Dd2 and Dd2 K13 mutants without any

treatment (left) and GR values between parasite lines (right). n=80 technical replicates and n=4

biological replicates. **(E)** Correlation comparison between Max SVI and GR for all nine parasite

lines tested with linear regression. P-value and R^2 value calculated using Pearson's correlation.

Additional data in Supplementary Table 2.

Fig. 5. Deep learning enables continuous label-free live cell analysis. (A) Distribution of training datasets by types of experiments. **(B)** Distribution of training datasets by time points and training, validation, and test. **(C)** Representative raw transmitted light images and human annotated mask images for a continuous experiment. GFP was used as annotation reference to confirm authenticity of colonies on transmitted light images. Scale bar 1000μm. **(D)** Schematics of model architecture and qTRACE AI application. The architecture consists of a contracting path (left side) and an expanding path (right side) with skip connections (red arrows) that concatenate feature maps between corresponding layers. Numbers indicate the spatial dimensions and number of feature channels at each layer. **(E)** Evaluation of model prediction accuracy compared to human annotated results for count (left) and area (right). P-value and R^2 value calculated using Pearson's correlation. **(F)** Count mean absolute error (MAE) and area pixel error percentage of the trained model by timepoint. **(G)** Schematics showing qTRACE AI workflow. Flexible continuous imaging and manipulation of the same sample over time.

Fig. 6. qTRACE reveals new insights into drug activities and effects. (A) SVI50 and GR50

for drugs tested from MMV antimalarial reference library. n=2 biological replicates. **(B)**

Comparison of screening results between qTRACE AI and qTRACE for SVI (left) and GR (right).

P-value and R^2 value calculated using Pearson's correlation. **(C)** Cytotoxic and cytostatic effect

evaluation of drugs from MMV antimalarial reference library. Shifting in directions represents

preference of either cytostatic effect (left) or cytotoxic effect (right). **(D)** Effect of altering time on

SVI50 shift for drugs from MMV antimalarial reference library at 48h interval. n=2 biological

replicates. **(E)** The five drugs showing the highest potency shift, for each direction, over entire

measured time course are shown. Error bar = SEM.

962