Receptor guanylyl cyclase C confers protection during oral *Salmonella* Typhimurium

infection by attenuating ileal damage and enhancing cytokine and antimicrobial peptide

production

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Abstract

Non-typhoidal *Salmonella* disease contributes towards significant morbidity and mortality across the world. Host factors including IFN-γ, TNF-α and gut microbiota significantly influence the outcome of *Salmonella* pathogenesis. However, the entire repertoire of host protective mechanisms contributing to *Salmonella* pathogenicity is not completely appreciated. Here, we have investigated the roles of receptor guanylyl cyclase C (GC-C) that is predominantly expressed in the intestine, and regulates intestinal cell proliferation and fluid-ion homeostasis. Mice deficient in GC-C (*Gucy2c*$^{-/-}$) displayed accelerated mortality following infection via the oral route, in spite of possessing comparative systemic *Salmonella* infection burden. Survival following intra-peritoneal infection remained similar, indicating that GC-C offered protection via a gut-mediated response. Serum cortisol was higher in *Gucy2c*$^{-/-}$ mice, in comparison to wild type (*Gucy2c*$^{+/+}$) mice, and an increase in infection-induced thymic atrophy, with loss in immature CD4$^+$CD8$^+$ double positive thymocytes, was observed. Accelerated and enhanced damage in the ileum, including submucosal edema, epithelial cell damage, focal tufting and distortion of villus architecture, was seen in *Gucy2c*$^{-/-}$ mice, concomitant with a larger number of ileal tissue-associated bacteria. Transcription of key mediators in *Salmonella*-induced inflammation (IL-22/IL-23/Reg3β) were altered in *Gucy2c*$^{-/-}$ mice. Downregulation of expression of GC-C and its endogenous ligands, guanylin and uroguanylin following infection in *Gucy2c*$^{+/+}$ mice was observed. In conclusion, our study suggests that receptor GC-C confers a survival advantage during gut-mediated *S.* Typhimurium pathogenesis, presumably by regulating *Salmonella*-effector mechanisms in a cGMP-dependent manner.

Introduction

Salmonellosis, the disease caused by the Gram-negative intracellular bacterium, *Salmonella*

manifests in humans as typhoid, paratyphoid fever, non-typhoidal septicemia or

gastroenteritis. Infection with *Salmonella* Typhi and Paratyphi serotypes are limited to

humans, and cause the systemic disease, typhoid fever. Infections with other serotypes, called

non-typhoidal *Salmonella*, result in enteritis and diarrhoea. *Salmonella* infects hosts orally via

contaminated food or water (1). Mice infection models are useful not only to study factors in

the pathogen that regulate disease progression, but also host factors that can modulate the

severity of response to *Salmonella* infection (2). In susceptible mouse strains, such as those

with defects in the gene encoding Slc11α1 (Nramp1), the bacterium traverses the distal ileum,

and mice develop systemic infection after colonizing the Peyer's patches, liver and spleen

(3).

Colonization of the mouse intestine is dependent on a number of factors, that include

commensal microflora, the gut mucosa and the gut-associated immune system. A number of

host factors such as IFN-γ (4), TNF-α (5, 6) and IL-22 modulate *Salmonella* pathogenesis (1).

These factors regulate the production of chemokines that recruit inflammatory cells to the site

of tissue damage and infection (7). In addition, it is conceivable that modulators of intestinal

epithelial cell function may also provide mechanisms to modulate *Salmonella* pathogenesis,

since the first point of contact for the pathogen is the epithelial cells that line the

gastrointestinal tract (8).

Receptor guanylyl cyclase C (GC-C) is a transmembrane receptor predominantly expressed

on the apical membrane of the intestinal enterocytes. It serves as a receptor for the

endogenous hormones, uroguanylin and guanylin (9, 10). Activation of GC-C upon ligand-

binding results in production of cGMP, which leads to protein kinase G II-dependent

activation of cystic fibrosis transmembrane conductance regulator (CFTR) and inhibition of

NHE3, the sodium–hydrogen exchanger 3. Consequently, activation of GC-C causes efflux of

chloride and CFTR-dependent bicarbonate secretion into the lumen and inhibition of sodium

absorption thus resulting in an osmotic gradient, finally leading to fluid accumulation in the

lumen. Hence, the major role of GC-C is in maintenance of fluid-ion homeostasis in the gut

(11). GC-C also serves as the receptor for the heat-stable enterotoxin (ST), the causative

agent of enterotoxigenic *Escherichia coli* (ETEC)-mediated diarrhoea in children and

traveller's diarrhoea (12, 13). Mice lacking GC-C are resistant to heat-stable enterotoxin-

induced fluid accumulation (13), and are reported to display higher susceptibility to dextran

sodium sulphate-induced colitis (14). Previously, we have demonstrated that mice lacking

GC-C show higher number of N-Methyl-N-nitrosourea-induced aberrant crypt foci (15),

indicating a role for GC-C in maintaining intestinal cell proliferation.

Mice deficient in GC-C i.e., $Gucy2c^{-/-}$ mice have been reported to possess a compromised gut

epithelial barrier which was attributed to the lower expression of tight junction proteins such

as occludin, claudin2 and claudin4 (14). *Citrobacter rodentium* (*C. rodentium*), an enteric

Gram-negative bacterium causes self-limiting infection in mice, and $Gucy2c^{-/-}$ mice are

reported to be more susceptible to infection by them (16). Here, we have studied the role of

GC-C as a host factor during *Salmonella*-mediated pathogenesis in mice. We find that in

contrast to expectations that a compromised gut barrier would lead to enhanced systemic

infection, the increased susceptibility of $Gucy2c^{-/-}$ mice to oral infection with *Salmonella*

Typhimurium (*S*. Typhimurium) was a result of increased bacterial load in the ileum and

altered cytokine production associated with increased ileal tissue damage.

Results

Mice lacking GC-C display accelerated mortality during oral *S*. Typhimurium infection

We infected C57BL/6 wild type ($Gucy2c^{+/+}$) and $Gucy2c^{-/-}$ mice orally with *S*. Typhimurium

and monitored their survival. We chose not to treat the mice with streptomycin (17), since we

were interested in an acute model of *S*. Typhimurium infection, without altering the existing

microbiota in these mice (18). Surprisingly, survival experiments revealed an increased

susceptibility of *Gucy2c*$^{-/-}$ mice to oral, but not intra-peritoneal, infection with *S*.

Typhimurium (Fig. 1a), indicating a role for GC-C in offering protection to gut-associated

infection. Median survival for *Gucy2c*$^{+/+}$ mice following oral infection was 112 h while it

was 80 h for *Gucy2c*$^{-/-}$ mice, and the difference was statistically significant (*p* = 0.006).

Interestingly, fecal excretion of bacteria was similar in *Gucy2c*$^{+/+}$ and *Gucy2c*$^{-/-}$ mice at early

stages of infection, as was the bacterial burden in organs such as the spleen, Peyer's patches

and liver on day 3 post infection (Fig. 1b, c). In agreement with earlier observations (19),

poor survival was correlated with a significant reduction in body weight of *Gucy2c*$^{-/-}$ mice on

day 3 (Fig. 1d).

Next, we monitored pro-inflammatory cytokines in the sera 3 days post oral infection, to

determine whether enhanced immune cell activation and inflammation was responsible for

the poor survival of *Gucy2c*$^{-/-}$ mice. As shown in Fig. 1e, while there was a tendency for an

increase in serum TNF-α and IL-6 levels on infection, the increase was not statistically

significant. IFN-γ levels were elevated on infection in both strains of mice, but there was no

difference between *Gucy2c*$^{+/+}$ and *Gucy2c*$^{-/-}$ mice. Therefore, we conclude that an increase in

systemic infection or inflammation was not the cause for early death of *Gucy2c*$^{-/-}$ mice.

Enhanced infection-induced thymic atrophy is observed in *Gucy2c*$^{-/-}$ mice

We have previously reported that serum cortisol, a marker of general stress experienced by

the animal, is increased on *Salmonella* infection and contributes towards *S*. Typhimurium-

induced thymic atrophy in mice (20, 21). We monitored cortisol levels and observed an

increase in serum cortisol on infection. However, at 48 h, *Gucy2c*$^{-/-}$ mice showed higher

levels of circulating cortisol than that seen in *Gucy2c*$^{+/+}$ mice (Fig. 2a). Thymic atrophy was

observed in both $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice (Fig. 2b, c), but was more pronounced in

$Gucy2c^{-/-}$ mice, both at 48 and 96 h post infection (Fig. 2b). CD4 and CD8 cell surface

staining of isolated thymocytes revealed an increased depletion of $CD4^{+}CD8^{+}$ thymocytes in

$Gucy2c^{-/-}$ mice post 96 hrs of infection (Fig. 2c).

Increased epithelial damage in the small intestine is observed in $Gucy2c^{-/-}$ mice

Results so far suggest that the protective effects of GC-C are mediated predominantly at the

level of the gastrointestinal tract, and could be initiated early during infection, thereby

resulting in gross systemic effects and earlier death in $Gucy2c^{+/+}$ mice. We therefore

monitored bacterial load in various regions of the gut following infection in both $Gucy2c^{+/+}$

and $Gucy2c^{-/-}$ mice. Colony forming units (CFU) were enumerated on day 3 following

infection, at which time a few $Gucy2c^{-/-}$ mice had already succumbed. As shown in Fig. 3a,

while bacterial loads in the cecum and colon were similar in both the strains of mice, and an

almost 2-log order increase in bacteria was seen in the distal ileum.

We measured ileal damage and goblet cell number using Periodic Acid Schiff (PAS) staining

following paraformaldehyde fixation. Examination of small intestinal sections showed

marked histopathological differences between infected $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice.

Infection resulted in more severe inflammation in the small intestine of $Gucy2c^{-/-}$ mice with

increased focal tufting and distortion of the crypt-villus architecture (Fig. 3b). A larger

number of dead cells were also observed in the lumen of the ileum at day 4 post infection.

PAS staining revealed a small but significant reduction in the number of goblet cells in

$Gucy2c^{-/-}$ mice even without infection. Also noteworthy is the intense staining of Paneth cells

in the crypts of both $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice following infection. Interestingly, the

number of goblet cells reduced in $Gucy2c^{+/+}$ mice, as has been reported earlier (17), while

there was a modest increase in $Gucy2c^{-/-}$ mice.

S. Typhimurium infection downregulates the expression of GC-C and its ligands, guanylin and uroguanylin

Results so far indicate that signaling via GC-C protects the host during *Salmonella* infection, by reducing the extent of tissue damage and colonization in the ileum. We therefore asked if infection alters the expression of genes in the GC-C signaling pathway, which could be a strategy used by *Salmonella* to increase its virulence in the host. We performed quantitative real-time PCR analysis of cDNA prepared from the distal ileum of $Gucy2c^{+/+}$ mice on day 3 following oral infection and observed that the transcript levels of GC-C were significantly reduced on infection (Fig. 4). The distal ileum is a region where both guanylin and uroguanylin are expressed to comparable levels (22), and interestingly, transcript levels of both the ligands were again reduced on infection in both $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice (Fig. 4). Therefore, turning off the GC-C signaling pathway may be beneficial to allow *Salmonella* to colonize and establish infection.

Other genes downstream of GC-C did not show a change in expression levels (*Cftr*, *PkgII* and *Pde5*). However, *Nhe3* transcripts were upregulated in both $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice. Activation of GC-C results in cGMP-dependent phosphorylation of NHE3 that inhibits this Na^+/H^+ exchanger (11, 23). Therefore, the downregulation of guanylin and uroguanylin transcripts, coupled with increased expression of *Nhe3* would enhance Na^+ uptake by the epithelial cells, possibly counteracting loss of this ion during *Salmonella*-induced diarrhoea.

GC-C regulates transcription of cytokines and effectors during *Salmonella* infection

Intestinal inflammation following *Salmonella* infection is a consequence of upregulation of pro-inflammatory genes including *TNF-α*, *Il-1β*, *Il-22*, *Il-6*, *Ifn-γ* (24) and genes expressing the C-type lectins *Reg3γ* and *Reg3β* (1). In agreement with enhanced bacterial loads in the distal ileum, we saw a significant increase in TNF-α transcripts in $Gucy2c^{-/-}$ mice and

reduced IL-6 transcript levels following infection, in comparison to $Gucy2c^{+/+}$ mice (Fig. 5).

Interestingly, levels of IL-22 transcripts were significantly lower in $Gucy2c^{-/-}$ mice on

infection. This was correlated with little increase in IL-23 transcripts and its downstream

effector, Reg3β, in $Gucy2c^{-/-}$ mice . However, in agreement with higher bacterial load and

damage in the ileum, levels of lipocalin 2 transcripts were higher. A number of other

cytokines were similarly regulated in $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice, indicating a specific role

for GC-C signaling in modulating specific arms of the *Salmonella*-induced immune response.

Reduced *Lactobacilli* in *Gucy2c*$^{-/-}$ mice could contribute to initial susceptibility of mice to

***Salmonella* infection**

The gut microbiota is known to influence infection progression by *Salmonella* (17, 18, 25,

26). We therefore monitored the major Phyla of bacteria present in the mouse gut, and also

Lactobacillus sp which has been reported to protect from *Salmonella* infection (25-28). We

prepared genomic DNA from stool samples from both $Gucy2c^{+/+}$ and $Gucy2c^{-/-}$ mice, and

performed real-time PCR using universal and Phyla specific primers for the 16S rRNA genes.

As shown in Fig. 6, while the major Phyla (*Bacteriodetes* and *Firmicutes*) were largely

unchanged in both strains of mice, *Lactobacillus sp* were significantly reduced. Since

Lactobacilli have been reported to attenuate the severity of salmonellosis in mice (25), we

propose that the initial environment of the gut of $Gucy2c^{-/-}$ mice could have also contributed

to initial infection and uptake of *S.* Typhimurium, culminating in the increased susceptibility

of $Gucy2c^{-/-}$ mice to infection.

Discussion

GC-C-mediated cGMP pathways are essential regulators of intestinal homeostasis, including

fluid-ion secretion and cell proliferation (23). The role of GC-C in diarrhea caused by

enterotoxigenic *E. coli* that produce heat-stable enterotoxins is well established, since GC-C

serves as the receptor for the toxin (11). However, the roles of GC-C, if any, during severe

enteric infections, have not been investigated. Here we have utilized the *S*. Typhimurium

infection model in mice which results in an acute, progressive and lethal infection, to study

the contribution of GC-C during *Salmonella* pathogenesis. Our results show that GC-C

provides a degree of protection to oral *S*. Typhimurium infection by reducing the extent of

ileal damage and modulating the levels of cytokines and antimicrobial peptides (AMPs) that

are known to combat *Salmonella (1, 24)* (Fig. 6b). Interestingly, the rapid mortality seen in

Gucy2c^{-/-} mice was not result of increased systemic infection, since bacteria colonized

extraintestinal tissue to equivalent extents in both *Gucy2c*^{+/+} and *Gucy2c*^{-/-} mice.

Glucocorticoids (GCs) are steroid hormones which are secreted by the adrenal glands and

possess immunosuppressive properties. GCs are an indicator of stress (29) and are

upregulated during *S*. Typhimurium infection in mice (21). At 48 h post infection, serum

cortisol levels in *Gucy2c*^{-/-} mice were significantly higher than that seen in *Gucy2c*^{+/+} mice.

Thymic atrophy accompanies numerous infections and GCs contribute towards depletion of

the developing CD4^{+}CD8^{+} immature thymocytes during infections by pathogens such as

Listeria monocytogenes, type A *Francisella tularensis*, *Trypanosoma cruzi* and *S*.

Typhimurium (20, 21). Since *Gucy2c*^{-/-} mice displayed early elevated levels of serum cortisol

(Fig. 2a), infection-induced thymic atrophy in *Gucy2c*^{-/-} mice was indeed observed to be

significantly higher than in *Gucy2c*^{+/+} mice.

Higher circulating cortisol could be attributed to enhanced colonization and inflammation in

Gucy2c^{-/-} mice, as evidenced by histopathology of the ileum. *S*. Typhimurium infection

results in inflammation of the cecum and colon, with lower inflammation seen in the ileum of

mice (30). Germ-free mice display higher ileal load than specific-pathogen-free mice when

administered with similar doses of *S*. Typhimurium (31). The higher colonization in the ileum

of *Gucy2c*^{-/-} mice may be due to higher translocation or invasion of *Salmonella* in the gut of

these mice. Interestingly during Crohn's disease, selective inflammation in the terminal ileum

is observed. In addition, the standard therapy for inflammatory bowel disease (IBD) is

administration of corticosteroids, which facilitate immunosuppression (32). The elevated

levels of cortisol observed in $Gucy2c^{-/-}$ mice during infection (Fig. 2a) might be a

compensatory mechanism to reduce inflammation of the ileum.

Salmonella pathogenesis results in altered gene expression profile in the intestine (1). The

transcript levels of GC-C and its endogenous ligands, guanylin and uroguanylin were

downregulated upon infection in the ileum (Fig. 4). However, the transcript levels of other

downstream effectors of the GC-C pathway such as *PkgII, Cftr and Pde5* were not

differentially modulated post infection. NHE3 is an abundantly expressed Na^+/H^+ exchanger

in the intestine (11, 33). There was a significant increase in the expression of NHE3 upon

infection, which occurred independently of the presence of GC-C. The significant increase in

NHE3 transcript levels is counterintuitive, since there are reports of downregulation of NHE3

by pro-inflammatory cytokines such as IFN-γ and TNF-α and during conditions such as

EPEC infection and inflammatory bowel disease. However, NHE3 transcript levels are

increased by GCs (33). The increased cortisol amounts upon *Salmonella* infection may result

in the higher transcription of NHE3. Hitherto, mechanisms that lead to transcriptional

regulation of NHE3 upon *Salmonella* infection are unknown and warrant further

investigation.

There are only two reports so far of disruption of the GC-C signaling at both the receptor and

the ligand level, as we see here on *Salmonella* infection (Fig. 4, 6b). In ulcerative colitis

patients, a severity-dependent downregulation in expression of GC-C and its ligands,

guanylin and uroguanylin in the colonic mucosa is observed. GC-C and its ligands are also

downregulated in inflamed colonic IBD mucosa of patients, and in 2,4,6-Trinitrobenzene

sulphonic acid-induced colitis in rats (34). The significant downregulation of GC-C and its

ligands upon *Salmonella* infection could therefore occur as a consequence of inflammation

induced by infection.

Salmonella infection and invasion of the intestine induce inflammatory responses including

upregulation of pro-inflammatory cytokines (24). The induction of TNF-α in the

gastrointestinal tract during *Salmonella* infection is well known (5, 6). Low amounts of TNF-

α confer protection to mice towards *Salmonella* infection (35), while administration of higher

doses causes extensive histopathological damage, organ dysfunction and death within

minutes to hours due to respiratory arrest (36, 37). The upregulation of TNF-α has been

implicated to enhance inflammation and early pathological damage in the intestine during

Salmonella infection (5). *Gucy2c$^{+/+}$* mice displayed a modest but non-significant increase in

transcript levels of TNF-α in the ileum, whereas a significant induction was observed in

Gucy2c$^{-/-}$ mice (Fig. 5). TNF-α also mediates the depletion of goblet cells during *S.*

Typhimurium infection in mice, as pre-treatment with anti-TNFα antibody restores the goblet

cell numbers and mucin profiles (6). We however see an increase in goblet cell numbers on

infection in the small intestine in *Gucy2c$^{-/-}$* mice, suggesting a novel means of regulating

goblet cell number by GC-C not reported to date.

Neutrophils play major roles during acute inflammation and are the first leukocytes to be

recruited at the site of infection. Neutrophils can eradicate the pathogen by various

mechanisms and their recruitment to the inflamed site is crucial for bacterial clearance.

Cytokine production upon infection results in stimulation of epithelial cells to secrete CXC

chemokines which attract neutrophils to the site of inflammation (7). The expression of

various CXC ligands were upregulated in the ileum upon infection (Fig. 5). However, a

significant upregulation of CXCL2 was observed in *Gucy2c$^{-/-}$* than in *Gucy2c$^{+/+}$* mice (Fig.

5). CXCL2 is a pro-inflammatory, high affinity chemokine for the CXCR2 receptor present

on neutrophils (7). Higher expression of CXCL2 due to enhanced inflammation may result in

increased recruitment of neutrophils to the ileum of *Gucy2c*$^{-/-}$ mice, which was evident in the

ileal pathology (Fig. 3b).

A critical arm of the antimicrobial innate immune response is the production of epithelial

cell-derived AMPs. This antimicrobial response is mediated via the IL-22 cytokine, which

induces the expression of AMPs in the intestinal epithelial cells (1). IL-22 is produced by

leukocytes such as T helper type 17 (T$_H$17) cells in response to IL-23 produced by infected

dendritic cells and macrophages (38) and/or IL-6 produced by intestinal epithelial cells (39).

AMPs induced by IL-22 include REG3β, REG3γ, lipocalin 2 and calprotectin. REG3β and

REG3γ are bactericidal C-type lectins and eliminate Gram-positive bacteria (1, 40). Lipocalin

2 and calprotectin do not kill bacteria directly but starve them of metals which are essential

for their growth (1). This AMP response has been demonstrated to impart a growth advantage

to Gram-negative pathogens such as *Salmonella* over commensal bacteria (41). *Reg3γ*$^{-/-}$ and

Reg3β$^{-/-}$ mice are more susceptible to *Salmonella enteritidis* infection, implying a protective

role of these AMPs against this pathogen (42, 43). The lower infection-induced expression of

IL-6 and IL-23 in the ileum of *Gucy2c*$^{-/-}$ mice led to a lower expression of IL-22. This

reduced expression of IL-22 may affect the induction of AMPs in the epithelial cells, and

indeed, the transcript levels of Reg3β in *Gucy2c*$^{-/-}$ mice were found to be significantly lower

than in *Gucy2c*$^{+/+}$ mice upon infection, and may also partly account for the susceptibility of

these mice to *Salmonella* infection.

The gut microbiota is a critical determinant for susceptibility to various infectious pathogens

(44) including *S.* Typhimurium (17, 18, 25, 26). The gut microbiota can either promote

resistance to colonization of pathogens or assist and enhance its virulence (44). In our study,

there were no significant differences in the abundance of the major phyla i.e., *Bacteriordetes*,

Firmicutes, *Actinobacteria* and *Proteobacteria* in *Gucy2c*$^{+/+}$ and *Gucy2c*$^{-/-}$ mice (Fig. 6a).

However, a significant decrease in the abundance of *Lactobacillus* was observed in *Gucy2c*$^{-/-}$

mice which is in accordance with a previous observation made in these mice (16). Different

species and isolates of *Lactobacillus* have been shown to exert antagonistic activity on

Salmonella invasion and colonization (25-28). For example, *Lactobacillus acidophilus*

inhibits adhesion, invasion and dissemination of attenuated *S.* Typhimurium in BALB/c mice

(25). In vitro studies in human intestinal Caco-2 cells reveal that *Lactobacillus* mediates

Salmonella-induced intestinal inflammation via transforming growth factor β/MIR21

signaling pathway (26). The lower abundance of *Lactobacillus* might inherently predispose

Gucy2c$^{-/-}$ mice susceptible to *Salmonella* infection and may contribute to the higher degree of

translocation and epithelial damage in the ileum.

Microbiota dysbiosis has been reported in mice null for genes involved in fluid-ion

homeostasis of the gut (45, 46). It is possible that GC-C enhances growth and colonization of

Lactobacillus in the gut by providing and maintaining the luminal pH and/or electrolyte

distribution and balance. Further studies are required to comprehensively understand the role

of GC-C in regulating the distribution of gut microbiota.

In summary, we have studied the role of GC-C during *S.* Typhimurium infection in mice and

have identified GC-C as a crucial host factor that provides protection against gut-mediated

infection by *S.* Typhimurium. Our results summarized in Fig. 6b, indicate that *Salmonella*

infection results in downregulation of GC-C ligands and a modest but significant

downregulation of GC-C. Absence of GC-C in the gut modulates the innate immune response

to *Salmonella* and cytokine production, possibly affecting neutrophil migration in the distal

ileum. We speculate, therefore, that administration of GC-C ligand analogs may alleviate

Salmonella-mediated symptoms and pathology. Linaclotide is a FDA approved oral GC-C

ligand and is used in treatment of constipation and chronic idiopathic constipation. This drug

is effective against visceral pain associated with constipation predominant inflammatory

bowel syndrome (C-IBS) (47). Therefore, paradoxically, a target for a bacterial toxin that

causes diarrhoea may act as a therapeutic target for treatment and alleviation of *Salmonella*-

mediated intestinal symptoms and pathology.

Materials and Methods

Bacterial cultures

The *S.* Typhimurium NCTC 12023 strain was used for mice infections. A single isolated

colony of *S.* Typhimurium grown on a *Salmonella-Shigella* (SS) agar plate was used to grow

culture the pre-inoculum. The overnight pre-inoculum was used at 0.2% in 50 mL of Luria

broth and cultured for 3 hours at 37°C and 160 rpm to obtain a log phase culture. The

bacterial culture was washed and resuspended in sterile phosphate-buffered saline (PBS) and

used for infection (21).

Mice

Gucy2c$^{-/-}$ obtained from the Jackson laboratory, were backcrossed with C57BL/6 mice for

more than 10 generations. *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$* mice were maintained as described

previously (15), and housed in a clean air facility. Temperature (22 ± 2°C) and humidity (55

± 10%) were maintained with a 12 h light/dark cycle. Mice had access to laboratory chow

and water *ad libitum*. Mice aged 6-8 weeks of either sex, weighing 18-30 grams were used

for experiments.

Ethics statement

The experiments were performed in agreement with the Control and Supervision rules, 1998

of Ministry of Environment and Forest Act (Government of India) and the Institutional

Animal Ethics Committee of the Indian Institute of Science (IISc). *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$*

mice were bred and maintained at the Central Animal Facility of IISc (Registration number:

48/1999/CPCSEA, dated 1/3/1999). The experimental protocols were approved by the

'Committee for Purpose and Control and Supervision of Experiments on Animals' (CPCSEA), permit number: CAF/Ethics/216/2011. The details of the national guidelines can be found on: http://envfor.nic.in/division/committee-purpose-control-and-supervision-experiments-animals-cpcsea (21).

Mice infection

The mice were infected with *S.* Typhimurium either orally or intra-peritoneally and survival was monitored. For infections via the intra-peritoneal route, ~750 bacteria/mouse were administered, while for oral infection, ~10^8 bacteria/mouse were used. The bacterial culture was resuspended in PBS and 0.5 mL was administered either intraperitoneally or by oral gavage.

Fresh fecal samples were collected following infection, weighed, homogenized in PBS and the appropriate dilutions were plated on SS agar plates. For quantification of CFU burden in organs, the mice were sacrificed at the indicated time points and the organs were harvested, weighed and homogenized in PBS. Appropriate dilutions were plated on SS agar plates (20).

Serum cytokines and cortisol estimation

Serum TNF-α, IL-6 and IFN-γ were quantified using ELISA kits (eBioscience, USA), while serum cortisol amounts were measured using the AccuBind ELISA kit (Monobind Inc., USA) according to the manufacturer's instructions (21).

Flow cytometric analysis of thymocytes

On indicated days, uninfected and infected mice were sacrificed, thymi dissected and washed in PBS. The organs were disrupted with a pair of forceps and the cell suspensions were passed through a fine wire mesh to obtain a single cell suspension, and viability of the cells was estimated by Trypan blue exclusion assay using a haemocytometer. Thymocytes were

stained for cell surface expression of CD4 and CD8 to estimate the major cell subpopulations.

Anti-mouse CD4-APC (17-0041-83) and anti-mouse CD8-PE (12-0081-85) were purchased

from eBioscience. Cells were incubated with fluorochrome-conjugated antibodies at 4°C for

45 mins. Subsequently, the cells were washed twice with PBS and fixed in 0.5%

paraformaldehyde. The cells were acquired on the FACSVerse™ flow cytometer (BD

Bioscience USA). Baseline instrument application and compensation settings were set using

unstained and single stained samples respectively. Single events were gated on the basis of

forward scatter-area versus forward scatter-height, while live events were gated on the basis

of forward scatter-area versus side scatter-area. These selections were considered to

exclusively analyse single live events. CD4 versus CD8 density plots were constructed for

thymocytes and the major cell populations were quantified. WinMDI and FlowJo (9.8.5)

software were used to plot and analyse the results (21).

Histological analysis

Histological analysis was performed on ileal sections, which were fixed in 4%

paraformaldehyde in PBS (pH 6.9) and Periodic Acid Schiff (PAS) staining was performed

(48). Briefly, following fixation, sections were dehydrated by serial immersion in increasing

concentrations of ethanol and finally in paraffin. The tissues were embedded in paraffin and 4

μm sections were obtained using a microtome (Leica Biosystems, Germany). The sections

were dewaxed and rehydrated by serial immersion in decreasing concentrations of ethanol.

Sections were stained with PAS (Avinash Chemicals, Bangalore, India) following the

manufacturer's instructions. The nuclei were subsequently stained with hematoxylin (Sigma-

Aldrich, USA). Sections were then dehydrated and mounted. The sections were observed

using an Olympus XI81 microscope (Olympus Corporation Tokyo, Japan).

RNA isolation and quantitative real time PCR analysis

A portion of the distal ileum was isolated and stored in TRI reagent (RNAiso Plus, TaKaRa).

The RNA was isolated using the QIAGEN RNeasy kit, according to manufacturer's protocol

and 4 μg of RNA was reverse transcribed to cDNA using Revert Aid reverse transcriptase

(Thermo-Scientific, USA). Real-time PCR was performed using SYBR® Premix Ex Taq™

(Tli RNaseH Plus) on a CFX96 Touch™ Real-Time PCR Detection System (BIO-RAD,

USA). Three housekeeping genes Glyceraldehyde 3-phosphate dehydrogenase (*Gapdh*),

TATA box binding protein (*Tbp*) and β-actin (*Actb*) were used for internal normalization

controls. Since all three genes showed equivalent results, *Gapdh* was used for subsequent

normalization of the real time PCR data. Data is expressed as $2^{-\Delta CT}$. The sequences of

primers used for quantitative real-time PCR were obtained from those validated at the

PrimerBank database and are available on request (49-51).

Quantitative real-time PCR amplification of 16S sequences of fecal microbiota

Bacterial DNA was isolated from fecal pellets using the QIAamp® DNA Stool Mini Kit

according to manufacturer's instructions. The abundance of total bacteria and specific

intestinal bacterial phylum, class and species was quantified by real-time PCR analysis by

SYBR® Premix Ex Taq™ (Tli RNaseH Plus) on a StepOnePlus real-time PCR machine

(Applied Biosystems, USA) using 16S primers published earlier (52, 53) . The efficiencies of

each primer were estimated (data not shown) and were found to be > 90%. Relative bacterial

abundance was determined using the ΔΔCT method by employing universal primers for 16s

rDNA for normalization (54).

Statistical analysis

All data was analysed using GraphPad Prism 7. The pooled results from independent

experiments are depicted as mean ± SD. Statistical significance among groups of mice were

determined using two-way ANOVA, with multiple comparisons, and FDR by the two-stage

linear step-up procedure of Benjamini, Krieger and Yekutieli. Students t-test with 95%

confidence interval was used for comparing abundance of microbiota in fecal samples.

Statistical significance between the mice survival curves were obtained by the Gehan-

Breslow-Wilcoxon test. The denoted p values are as follows: *$p<0.05$, **$p<0.01$,

***$p<0.001$.

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Legends to Figures

Figure 1: _Gucy2c$^{-/-}$_ mice display accelerated mortality during oral infection with _S._

Typhimurium. (a) _Gucy2c$^{+/+}$_ and _Gucy2c$^{-/-}$_ mice were infected with _S._ Typhimuirum either

orally or intra-peritoneally. The mice were monitored for survival at 8 h intervals. Survival

curves for oral and intra-peritoneal infection were obtained from independent experiments

containing a total of 10-11 mice. (b) Mice (_Gucy2c$^{+/+}$_, black circles; _Gucy2c$^{-/-}$_, grey circles)

were orally infected with _S._ Typhimurium and the bacterial load in the feces on day 1 and 2

following infection were estimated. Data show values for individual mice, with error bars

showing the mean ± SD. (c) Infected mice were sacrificed on day 3, tissues harvested and

bacterial burden in the spleen, Peyer's patches and liver was estimated. Data show values for

individual mice, with error bars showing the mean ± SD. (d) Mice were weighed prior to oral

infection and 3 days post infection. (e) Serum was collected from uninfected and infected

mice and levels of TNF-α, IFN-γ and IL-6 were measured by ELISA. In panels b-e, the data

are depicted as mean ± SD of 3-7 mice per group. Statistical significance among the

experimental groups in all panels was analysed using two-way ANOVA, *$p \leq 0.05$ and ns: not

significant.

Figure 2. Early rise in serum cortisol amounts and increased infection-induced thymic

atrophy is observed in _Gucy2c$^{-/-}$_ mice. (a) _Gucy2c$^{+/+}$_ and _Gucy2c$^{-/-}$_ mice were orally

infected with _S._ Typhimurium. At the indicated time points, uninfected (-St) and infected

(+St) mice were sacrificed and serum cortisol levels were measured by ELISA. Data show

values for individual mice, with error bars showing the mean ± SD. (b) Viable cells from

harvested thymi were quantified by Trypan blue exclusion assay using a haemocytometer. (c)

The thymocytes from uninfected (-St) and mice post 96 h of infection (+St) were stained for

cell surface expression of CD4 and CD8 and the density plots were constructed to quantify

the percentages of the major cell populations. Data are depicted as mean ± SEM of 5-8 mice

per group. In all panels, experimental groups were analysed for statistical significance using

two-way ANOVA, $*p \leq 0.05$, $***p \leq 0.001$ and $****p \leq 0.0001$. Green bars indicate

differences that were statistically significant between $Gucy2c^{+/+}$ (black circles) and $Gucy2c^{-/-}$

(grey circles) mice.

Figure 3: $Gucy2c^{-/-}$ mice show increased bacterial colonization and intestinal damage.

Infected $Gucy2c^{+/+}$ (black circles) and $Gucy2c^{-/-}$ (grey circles) mice were sacrificed 3 days

post oral *S.* Typhimurium infection. (a) Bacterial load in the ileum, cecum and colon was

estimated. Values represent individual mice, and lines show the mean ± SD. (b) Periodic

Acid Schiff (PAS) staining was performed on formalin fixed ileal tissue sections obtained

from uninfected (-St) and infected (+St) on day 3 and 4 following infection. One

representative ileal tissue section from each experimental group containing 3-4 mice is

depicted, and the scale bars measure 100 μm. Arrow shows a large number of apoptic cells in

the lumen of $Gucy2c^{-/-}$ mice. (c) The number of goblet cells was quantified in individual,

clearly identifiable, villi in each section from uninfected (–St; black circles) and infected

(+St; red circles) mice. Data shown is from individual villi across a section, and lines indicate

the mean ± SD. Statistical analysis was performed by two-way ANOVA and $*p \leq 0.05$.

Figure 4. *S.* Typhimurium infection regulates expression of genes in the GC-C signaling

pathway. RNA was prepared from ileal tissue of uninfected (-St) and infected (+St) mice on

day 3 following oral infection. Quantitative real-time PCR analysis was performed to

estimate the transcript levels of *Gucy2c*, *Guca2a, Guca2b, PkgII, Pde5, Nhe3 and Cftr*. The

data are depicted as values for individual mice, and lines represent the mean ± SD. Two-way

ANOVA was used to analyse for statistical significance among the experimental groups, $*p \leq$

0.05, $**p \leq 0.01$, $***p \leq 0.001$ and ns: not significant.

Figure 5. *Gucy2c$^{-/-}$* mice show reduced transcript levels of IL-23/IL-22 in the ileum

following infection. Orally infected *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$* mice were sacrificed 3 days

post infection (+St) along with the control uninfected mice (-St). RNA was isolated from the

harvested ileal tissues and quantitative real-time PCR analysis was performed to estimate the

transcript levels of *Tnf-α, Il-1b, Il-6, Il-8, Il-22, Il-23, Ifn-γ, Il-4, Cxcl-1, Cxcl-2, Cxcl-9, Cxcl-*

10, Lcn 2, Reg3β and *Reg3γ*. The data shown are from individual mice and lines depict the

mean ± SD. The experimental groups were analysed for statistical significance using two-

way ANOVA, $*p \leq 0.05$, $**p \leq 0.01$, $***p \leq 0.001$ and ns: not significant. Green bars

represent values which differed significantly between *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$* mice.

Figure 6. Abundance of major microbial phyla in *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$* mice. (a) Fecal

pellets from uninfected *Gucy2c$^{+/+}$* and *Gucy2c$^{-/-}$* mice were collected and the bacterial DNA

was isolated from the samples. Quantitative real-time PCR was performed to analyse levels

of gut microbiota using Phyla specific primers, normalized to universal 16S primers. Values

shown represent individual mice and lines show the mean ± SD. Statistical analysis was

performed using non-parametric Mann-Whitney *U* test, $**p \leq 0.01$. (b) The IL23/IL22 arm of

the innate immune response during *Salmonella* infection is regulated by GC-C. Post oral

infection in mice, *Salmonella* competes with the commensal *Lactobacillus* to invade the

epithelial and dendritic cells of the gut. *Salmonella* downregulates the expression of the GC-

C receptor and its endogenous ligands, guanylin and urouanylin. Probable interaction of GC-

C with dendritic cells and macrophages along with IL-6 upregulation leads to induction of IL-

23 expression, which activates the TH17 cells to express the cytokine IL-22, which in turn

induces the expression of the AMP, Reg3β, in epithelial cells.

a

c

Gucy2c^{+/+}   *Gucy2c*^{-/-}

-St

| 5.81±0.57 | 82.38±2.95 |
| 3.30±0.75 | 2.12±0.49 |

| 6.43±0.57 | 83.68±0.77 |
| 2.80±0.23 | 1.72±0.01 |

+St

| 19.18±7.11 | 68.90±10.33 |
| 7.38±3.6 | 5.37±2.74 |

| 27.52±7.88 | 50.43±12.68 |
| 8.67±1.12 | 7.75±2.63 |

CD4

CD8

a

b