Caspase-mediated cleavage of murine norovirus NS1/2 potentiates apoptosis and is

required for persistent infection of intestinal epithelial cells

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Short title: Cleavage of MNV NS1/2 potentiates death and is required for persistence

Abstract

Human norovirus (HNoV) is the leading cause of acute gastroenteritis and is spread by fecal shedding that can often persist for weeks to months after the resolution of symptoms. Elimination of persistent viral reservoirs has the potential to prevent outbreaks. Similar to HNoV, murine norovirus (MNV) is spread by persistent shedding in the feces and provides a tractable model to study molecular mechanisms of enteric persistence. Previous studies have identified non-structural protein 1 (NS1) from the persistent MNV strain CR6 as critical for persistent infection in intestinal epithelial cells (IECs), but its mechanism of action remains unclear. We now find that the function of CR6 NS1 is regulated by apoptotic caspase cleavage. Following induction of apoptosis in infected cells, caspases cleave the precursor NS1/2 protein, and this cleavage is prevented by mutation of caspase target motifs. These mutations profoundly compromise CR6 infection of IECs and persistence in the intestine. Conversely, NS1/2 cleavage is not required for acute replication in extra-intestinal tissues or in cultured myeloid cells, indicating an IEC-specific role. Intriguingly, we find that caspase cleavage of NS1/2 reciprocally promotes caspase activity, potentiates cell death, and amplifies spread among cultured IEC monolayers. Together, these data indicate that the function of CR6 NS1 is regulated by apoptotic caspases, and suggest that apoptotic cell death enables epithelial spread and persistent shedding.

Author Summary

Human Norovirus infection is highly contagious and the most common cause of acute

gastroenteritis. Norovirus can be persistently shed after resolution of symptoms, perpetuating or

initiating new outbreaks. Murine norovirus (MNV) is also persistently shed, enabling study of host

and viral determinants of norovirus pathogenesis. We previously identified a critical role for MNV

non-structural protein 1 (NS1), in persistence. Herein we find that regulation of NS1 by host

apoptotic caspases is required for infection of intestinal epithelial cells, but not for extra-intestinal

spread. Additionally, we demonstrate that NS1 reciprocally promotes cell death and spread

among epithelial cells. These data identify regulation of NS1 by host proteases and suggest that

apoptotic death is a determinant of epithelial spread and persistence.

Introduction

Human norovirus (HNoV) is the most common cause of epidemic gastroenteritis worldwide, and can be particularly dangerous for infants and the elderly [1,2]. Viral shedding often persists asymptomatically for weeks to months after acute infection [3,4], and is a potential source for initiation of outbreaks. Despite recent success in development of *in vitro* systems to study HNoV infection [5,6], there remains a need for robust small animal models for investigating NoV biology. Murine norovirus (MNV) shares genotypic (ssRNA, positive-sense, ~7.5kb genome) and phenotypic (fecal-oral transmission, infection of intestinal epithelial cells (IECs), persistent shedding) features with HNoV. Therefore, studies of MNV have enabled considerable advances in understanding of norovirus biology [7–9].

All noroviruses express a non-structural polyprotein encoded by ORF1 and two structural capsid proteins (VP1 and VP2) encoded by ORFs 2 and 3, respectively [10–12] (Fig. 1A). The non-structural polyprotein is cleaved by the internally-encoded viral protease into six 'mature' proteins (NS1/2, NS3, NS4, NS5, NS6, and NS7) [12–14]. Unlike related caliciviruses, NS1/2 of NoV remains intact for most of the virus life cycle and may be cleaved by host proteases rather than the viral protease [12,13]. NoV non-structural proteins associate with membranes and form the membranous viral replication complex [15–18]. Specific roles of NS5-7 have been defined as VpG cap, protease, and polymerase, respectively. However, the roles of NS1-4 are less well understood [19].

Our prior MNV studies compared acute strain CW3 and persistent strain CR6 to identify viral determinants of pathogenesis and persistence [20–22]. We found that the capsid gene of CW3 (VP1^{CW3}) promotes extra-intestinal spread, whereas the NS1 gene of CR6 (NS1^{CR6}) promotes intestinal replication and persistent fecal shedding. Persistent and non-persistent strains similarly infect macrophages, dendritic cells, T-cells, and B-cells *in vitro* and *in vivo* [6,23,24], and utilize the same cell-surface receptor, CD300lf [25,26]. However, recent studies

have shown that tropism for IECs *in vivo* requires NS1[CR6] in addition to CD300lf expression by

non-hematopoietic cells [27,28]. Furthermore, only a minor lineage of IECs called tuft cells

naturally express CD300lf and are susceptible to persistent infection by CR6 [27,29]. In contrast

to the strain-dependent infection of IECs *in vivo*, CW3 and CR6 can replicate to similar titer in a

cultured IEC cell line (M2C) that ectopically expresses CD300lf [28]. Thus, NS1[CR6] promotes IEC

persistence *in vivo* via mechanisms other than receptor usage or replicative capacity *per se*.

In addition to viral determinants of MNV infection, critical aspects of the host anti-viral

response have been identified. In particular, innate control of MNV replication is determined by

the compartmentalized roles of type I (α/β) and type III (λ) interferon (IFN) [30]. Both types of IFN

stimulate antiviral gene expression, but the IFN-α/β receptor (IFNAR) is expressed on most cell

types, whereas the IFN-λ receptor (IFNLR) is preferentially expressed on epithelial cells [30].

Correspondingly, IFN-α/β is critical for control of MNV in myeloid cells and prevents pathological

dissemination [23,31,32], whereas IFN-λ is critical for control of MNV in IECs and prevents

persistent shedding [33,34]. Deficiency of IFNLR promotes persistent infection, suggesting that

NS1[CR6] counteracts the IFN-λ response [28]. However, CW3 persistence is not rescued in IFNLR-

deficient mice [28,34] indicating that other host pathways are also important.

In addition to the IFN response, a general host response to many diverse viral genera is

initiation of apoptosis. Correspondingly, viruses have evolved ways to hijack apoptotic machinery

to their benefit. Apoptosis is a non-inflammatory, highly-regulated disassembly of the cell

mediated by a family of cysteine proteases (caspases). Apoptotic cellular contents are packaged

and released in membranous apoptotic bodies to be taken up by professional phagocytes and

other neighboring cells [35]. Because apoptosis is an innate response to infection, many viruses

have developed ways to delay induction of apoptosis such as expression of anti-apoptotic Bcl-2

family homologues [36,37]. In contrast, after virus production has reached its peak, many viruses

actively promote apoptotic death or utilize 'apoptotic mimicry' to facilitate viral dissemination

[37,38]. Additionally, some viruses rely on apoptotic caspases to cleave viral proteins as an

additional level of regulation [39–41]. Thus, depending on its timing in relation to viral replication,

apoptosis can be anti-viral or pro-viral and is therefore regulated by a diverse array of viral

mechanisms.

HNoV and MNV infection both induce apoptosis, as indicated by association with markers

of apoptosis in infected intestinal tissue [42–44]. Thus, these viruses have likely also developed

mechanisms to regulate apoptosis in a pro-viral manner. Apoptosis has been most extensively

studied in MNV-infected myeloid cells and is associated with down-regulation of anti-apoptotic

survivin protein and activation of caspases 3, 7, and 9 [45,46]. Expression of the MNV ORF1

polyprotein is sufficient to induce apoptosis [47], indicating that one or more non-structural

proteins are pro-apoptotic in the absence of viral replication. Additionally, NS1/2 encodes caspase

cleavage motifs that are targeted by recombinant caspase 3 in a cell-free assay and separate

NS1 from membrane-associated NS2 [12]. Thus, apoptosis during MNV infection may be

facilitated by non-structural proteins and host caspases may reciprocally regulate NS1/2 function

[20].

Herein, we identify a critical role for NS1/2 cleavage during MNV infection and intestinal

persistence. We demonstrate that at late times post-infection, concurrent with induction of

apoptosis, a minority of total NS1/2 protein is cleaved in a caspase-dependent manner. Despite

the relatively low proportion of total NS1/2 that is cleaved, NS1/2^{CR6} cleavage is absolutely

required for persistent infection in IECs, independent of IFN-λ. Moreover, the cleavage of

NS1/2^{CR6} promotes apoptotic death of infected myeloid cells and spread among cultured IECs.

These data suggest that controlled induction of apoptosis during viral egress promotes spread

among IECs and is required for maintenance of the persistent cellular reservoir.

Results

Host caspases cleave NS1/2 at late times post-infection. Previous cell-free studies identified two functional caspase motifs (DKAD[121] and DAMD[131]) within NS1/2 that are cleaved by host caspase 3 [12] (Fig. 1A), however, the targeting of these sites during infection and functional consequences of NS1/2 cleavage was unknown. To test their role in persistent infection, we mutated these sites (D121G and D131G) within MNV strain, CR6 (CR6$^{\Delta casp}$, Fig. 1B). In parallel, we generated a variant of CR6$^{\Delta casp}$ with the capsid of the systemic strain CW3 (CR6$^{\Delta casp}$-VP1^{CW3}) to enable determination of a role for NS1/2 cleavage in extra-intestinal tissues (Fig. 1B) [20,48]. Analysis of NS1/2 protein expression following infection of BV2 myeloid cells revealed a similar level of full length NS1/2 production for all strains. However, infection with CW3, CR6, or the CR6-VP1^{CW3} chimera but not NS1/2 cleavage mutant strains resulted in a ~28 kDa NS2 fragment detectable at 18-22 hours post-infection (Fig. 1C). The ~18kDa NS1 protein was inconsistently detected in cell lysate for any strain and may reflect the loss of dying cells or the small overall proportion of cleaved NS1/2. Several fragments larger than 28 kDa (marked by *) were also observed but did not consistently differ between strains, indicating they are independent of NS1/2 mutations (Fig. 1C). Overall, these data show that cleavage of NS1/2 occurs during infection, depends on caspase motifs, and is independent of other genetic variation between CW3 and CR6.

To determine the temporal relationship between caspase activity and NS1/2 cleavage, we detected cleaved caspase 3 (active form) by western blot. Cleaved caspase 3 was observed at 18-22 hours post-infection for all strains tested, concurrent with NS1/2 cleavage (Fig. 1D). To test the requirement of caspase activity for NS1/2 cleavage, we treated infected cells with the pan-caspase inhibitor, ZVAD-fmk. Inhibitor treatment reduced the proportion of cleaved caspase 3 and NS2 in cells infected with CW3 or CR6 but did not reduce the abundance of NS1/2 fragments larger than 28 kDa (Fig. 1D). Together, these data demonstrate that NS1/2 is cleaved 18-22 hours

post infection with persistent or non-persistent MNV strains, concurrent with induction of

apoptosis, in a caspase-dependent manner.

NS1/2 cleavage promotes apoptosis in myeloid cells. In the course of characterizing caspase

cleavage, we observed that the timing and magnitude of caspase 3 cleavage differed between

viral strains (Fig. 1D). To further compare caspase activity triggered by MNV infection, we used

densitometry to quantify percentage of cleaved caspase 3 and poly ADP-ribose polymerase

(PARP), a known target of apoptotic caspases [49]. We observed three-fold more activated

caspase 3 and 10-20% more cleaved PARP in cells 18 hours post-infection with CR6 compared

to CR6$^{\Delta casp}$ or CW3 (Fig. 2A-C). There were no significant differences in MNV polymerase (NS7)

detected for any infection condition suggesting that the difference in caspase 3 and PARP

cleavage was not simply due to increased replication in CR6-infected cultures (Fig. 2B). Together,

these data suggest that cleavage of CR6 NS1/2 (but not CW3 NS1/2) potentiates caspase activity.

To test whether our panel of MNV strains differed in induction of apoptotic cell death, we

quantified surface presentation of phosphatidylserine (PS, Annexin V staining) and permeability

to the LIVE/DEAD viability dye by flow cytometry following infection of BV2 cells (Fig. 1B). We

found that CR6 infection resulted in two-fold more apoptotic cells (Annexin V positive, LIVE/DEAD

negative) than CW3 or CR6$^{\Delta casp}$ (Fig. 2A-B). In contrast to CR6, most CR6-VP1^{CW3} infected cells

lost membrane integrity and were stained with the LIVE/DEAD dye (Fig. 2A-C), which is consistent

with our recent findings that VP1^{CW3} drives lytic cell death and inflammatory cytokine production

[48]. Even so, cells infected with CR6-VP1^{CW3} had 30-50% more total Annexin V staining than

cells infected with the corresponding mutant strain CR6$^{\Delta casp}$-VP1^{CW3}, indicating that NS1/2

cleavage promotes cell death in conjunction with VP1^{CW3}-dependent lysis (Fig. 2C). Together,

these data suggest that CR6 NS1/2 cleavage by apoptotic caspases reciprocally promotes

cleavage of caspase substrates and consequential cell death.

Cleavage of NS1/2 is not required for *in vitro* MNV replication in myeloid cells. The

abundance of full-length NS1/2 and NS7 on western blots was similar between WT and mutant

strains, indicating that viral protein production was unaffected by NS1/2 cleavage mutations (Fig.

1C-D, 2A). However, many additional steps beyond protein production are required for assembly

of infectious virus. So, we compared production of plaque forming units (PFU) over time from

myeloid cells infected with our panel of MNV strains (Fig. 1B) to assess whether production of

infectious virus was dependent on CR6 NS1/2 cleavage. Mutation of NS1/2 cleavage sites did not

significantly alter MNV replication kinetics or peak titers in BV2 cells following infection at a high

multiplicity of infection (MOI, one PFU/cell) (Fig. 3A). Following infection of BV2 cells at a low MOI

(0.01 PFU/cell), there were modest differences in early 10-18 hour titer, but all strains reached

similar peak titers by 36 hours post-infection (Fig. 3A). The similar peak titers are consistent with

our ability to obtain high titer viral stocks of NS1/2 cleavage mutants (generated by low MOI

infection of BV2 cells) and indicate that NS1/2 cleavage is not required for MNV replication in

these cells.

To test the requirement of NS1/2 cleavage for replication in primary myeloid cells, we

generated bone-marrow dendritic cells (BMDCs) and infected them with our panel of MNV strains.

Similar to BV2 cells, BMDC replication was minimally impacted by mutation of NS1/2 cleavage

sites (Fig. 3B-C). However, CW3 and CR6-VP1^{CW3} reached higher peak titer in WT BMDCs

compared to other strains tested, suggesting a VP1-dependent role in BMDC replication. In

parallel, we tested the role of STAT1-dependent IFN responses by comparing growth of our MNV

strains in *Stat1$^{-/-}$* BMDCs. All MNV strains reached higher peak titers in *Stat1$^{-/-}$* BMDCs compared

to WT BMDCs (compare Fig. 3B and 3C), as expected from prior studies of STAT1-dependent

immunity to MNV [23]. However, there were no statistically significant differences in growth that

could be attributed to NS1/2 cleavage (Fig.3C). Overall, these data indicate that NS1/2 cleavage

is not required for replication of MNV in myeloid cells.

NS1/2 cleavage is not required for lethal systemic infection. $Stat1^{-/-}$ mice succumb to infection

in a VP1^{CW3}-dependent manner due to a profound inability to control systemic replication in

myeloid cells [20–22,31,32]. To test whether NS1/2 cleavage mutations impair this pathological

MNV replication, we orally inoculated $Stat1^{-/-}$ mice with CR6-VP1^{CW3} or CR6$^{\Delta casp}$-VP1^{CW3} and

monitored animals daily for signs of distress. Infection with CW3 or CR6-VP1^{CW3} resulted in 100%

lethality with similar kinetics (Fig. 4A). As expected, CR6-infected controls remained healthy due

to lack of VP1^{CW3}-facilitated systemic spread [20]. These *in vivo* pathogenesis data suggest that

NS1/2 cleavage is not required for lethal pathology resulting from uncontrolled, systemic infection

of myeloid cells, consistent with no NS1/2 cleavage requirement for *in vitro* replication in myeloid

cells.

NS1/2 cleavage is required for intestinal tropism and persistence. To directly quantify the

effect of NS1/2 cleavage on acute replication and tissue tropism, we inoculated WT mice with

CR6, CR6$^{\Delta casp}$, CR6-VP1^{CW3}, or CR6$^{\Delta casp}$-VP1^{CW3} and analyzed tissue and stool titers at three

days post-infection (Fig. 4B). As expected from our prior studies, CR6 and CR6-VP1^{CW3} were

detected on day three in the mesenteric lymph node (MLN), ileum, and colon. We also detected

infectious virus shed in the feces of mice infected with CR6 and CR6-VP1^{CW3}, consistent with

replication in intestinal tissue. In contrast, in mice infected with NS1/2 cleavage mutant strains

CR6$^{\Delta casp}$ or CR6$^{\Delta casp}$-VP1^{CW3}, infectious virus was rarely detected in intestinal tissues, or being

shed in the feces. However, despite severely compromised replication in ileum (10-fold) and colon

(1000-fold), splenic titers of CR6$^{\Delta casp}$-VP1^{CW3} were not significantly different from CR6-VP1^{CW3}

(Fig. 4B). This indicates that NS1/2 cleavage is not required for systemic spread, consistent with

Stat1⁻ᐟ⁻ lethality data (Fig. 4A). Overall, these acute titer data demonstrate that caspase cleavage

of NS1/2 is specifically required for promoting early infection of intestinal tissue, the eventual site

of persistence.

Due to limited early detection of NS1/2 cleavage mutants in the intestinal tissues, we

predicted that NS1/2 cleavage would be required for intestinal persistence. Indeed, most mice

infected with CR6$^{\Delta casp}$ or CR6$^{\Delta casp}$-VP1^{CW3} had undetectable viral genomes in tissues at 21 days

post-infection whereas CR6 and CR6-VP1^{CW3} were present in the ileum, colon, and stool (Fig.

4C). Altogether, these findings support a role for NS1/2 cleavage in establishing early infection of

the intestine and subsequent persistence.

NS1/2 cleavage is required for intestinal persistence independent of IFN-λ. IFN-λ plays a

critical role in protection against persistent MNV infection of the intestine [34], so we sought to

determine whether CR6$^{\Delta casp}$ persistence was restored in the absence of IFN-λ signaling. We

infected WT or *Ifnlr1⁻ᐟ⁻* mice with CR6 or CR6$^{\Delta casp}$ and monitored shedding in the stool over time

(Fig. 5A, B), and persistence in the colon at 21 days post-infection (Fig. 5C, D). Additionally, to

determine whether an early barrier to MNV infection could be overcome with increased infectious

dose, we included an experimental group inoculated with a 10-fold higher dose of CR6$^{\Delta casp}$ (1e7

PFU). MNV was shed in the stool of all WT mice infected with CR6 beginning on day three and

continuing until the experimental endpoint, day 21. Consistent with the known role of IFN-λ , *Ifnlr1⁻*

ᐟ⁻ mice infected with CR6 shed greater than 10-fold more virus relative to WT mice (Fig. 5A, B),

and CR6 was detected in colon tissue at levels commensurate with fecal shedding (Fig. 5C, D).

In contrast, we were unable to detect shedding or colonic persistence of CR6$^{\Delta casp}$ at any time from

WT or *Ifnlr1⁻ᐟ⁻* mice (Fig. 5A, B). These data indicate that CR6 NS1/2 cleavage promotes persistent

infection via a novel mechanism separate from IFN antagonism.

Cleavage of NS1/2 is critical for MNV infection of intestinal epithelial cells. Our preceding

data demonstrated that disrupting NS1/2 cleavage prevents intestinal infection and persistence in

either WT or *Ifnlr1*$^{-/-}$ mice (Fig. 4-5). Because intestinal persistence requires establishment of an

infected IEC reservoir, we hypothesized that NS1/2 cleavage promoted early IEC tropism. To test

this hypothesis, we infected WT or *Ifnlr1*$^{-/-}$ mice with our panel of MNV strains (Fig. 1B) and

quantified IEC infection at three days post-infection by flow cytometry. We pooled IECs isolated

from proximal colon, cecum, and distal small intestine (devoid of Peyer's patches), and stained

intracellularly for MNV NS1/2 (Fig. 6A-C). We rarely detected infected IECs in WT mice at this

early timepoint, indicating that acute infection of IECs in our WT mice is below the limit of detection

for this assay (Fig. 6B). However, IEC infection was increased in *Ifnlr1*$^{-/-}$ mice relative to WT mice,

indicating that IFN-λ limits early establishment of infection in the IEC reservoir (Fig. 6A, C). CR6

and CR6-VP1^{CW3} were detected in an average of 40 IECs per million in *Ifnlr1*$^{-/-}$ mice, but we did

not detect significant infection of IECs by NS1/2 cleavage mutants (Fig. 6C). To contextualize IEC

data, we quantified MNV infection of non-epithelial cells in Peyer's patches by qPCR. We detected

viral RNA in Peyer's patches for the majority of CR6-infected mice, ~50% of CR6$^{\Delta casp}$-infected

mice, and all mice infected with CR6-VP1^{CW3} or CR6$^{\Delta casp}$-VP1^{CW3} (Fig. 6D, E). These data suggest

that NS1/2 cleavage is not strictly required for initial infection of non-epithelial cells during acute

infection, particularly for the CR6-VP1^{CW3} strain that robustly infects Peyer's patches and spleen

(Figs 4B, 6C, D). Furthermore, the relationship between replication of MNV strains in Peyer's

patches of *Ifnlr1*$^{-/-}$ mice was similar to WT mice (Fig. 6C, D), consistent with a minimal role of IFN-

λ in non-epithelial cells. Together, these data indicate that NS1/2 cleavage promotes early

infection of IECs, independent of early replication in Peyer's patches.

In complementary experiments, we infected mice with our panel of MNV strains and

detected MNV genomes and EpCAM transcripts in small intestine sections via RNAscope at 48-

72 hours post-infection (Fig. 7). We included groups of WT and *Ifnar1 x Ifnlr1* double knockout

(DKO) mice to compare IFN-restricted and unrestricted tropism, respectively. We reproducibly

detected CR6 infection of IECs in WT mice at an average of 1 double positive (MNV and EpCAM)

cell per cm of tissue length, whereas CR6-VP1^{CW3} was not consistently detected in IECs of WT

mice and NS1/2 cleavage mutants were not detected at all (Fig. 7A-B). In DKO mice, CR6 and

CR6-VP1^{CW3} were detected with increased frequency relative to WT mice at seven and one DP

cells per cm tissue length, respectively (Fig. 7C-D). In contrast, infection of IECs by NS1/2

cleavage mutants remained below the limit of detection in DKO mice (Fig. 7E). Infection of non-

epithelial cells was observed inconsistently for all strains in WT mice and did not correlate with

IEC infection; in DKO mice, CR6-VP1^{CW3} and CR6$^{\Delta casp}$-VP1^{CW3} robustly infected non-epithelial

cells, whereas CR6 infection of non-epithelial cells remained inconsistent (Fig. 7F). Taken

together, these data demonstrate an IFN-independent role of NS1/2 cleavage in promoting early

infection of IECs, the cellular reservoir of MNV persistence.

NS1/2 cleavage promotes spread among IEC monolayers. The infected IECs we observed *in*

vivo on day three may be a result of viral amplification and spread rather than initial infection. To

directly test the role of NS1/2 cleavage on initial infection of IECs, we used a previously

characterized CD300lf-transduced IEC cell line (M2C-CD300lf, hereafter M2C), which can be

infected by CW3 and CR6 [28]. We infected M2C cells with our panel of persistent and non-

persistent strains (Fig. 1B) and quantified replication over time by plaque assay (Fig. 8A).

Following infection at an MOI of one, persistent strains (CR6 and CR6-VP1^{CW3}) produced

significantly more infectious progeny at 10 hours post-infection compared to non-persistent strains

(CW3, CR6$^{\Delta casp}$, or CR6$^{\Delta casp}$-VP1^{CW3}). However, between 18-48 hours post-infection all strains

reached similar peak titers with at most a two-fold difference between persistent and non-

persistent strains (Fig. 8A). Likewise, infection of M2C cells at a low MOI (0.01 PFU/cell) resulted

in higher titers for persistent strains at 10 hours post-infection, but all strains reached similar titers

by 18 hours post-infection (Fig. 8B). However, between 24-72 hours following low-MOI infection,

persistent strains proceeded to replicate robustly and reach similar peak titer as high MOI

infection, whereas non-persistent strains replicated more slowly with 10-fold lower titer between

24-72 hours (Fig. 8B). These findings differ from our earlier analysis in myeloid cells, where higher

peak titers did not correlate with persistence phenotype (Fig. 3), and suggest specific roles of CR6

NS1/2 cleavage in IEC infection.

To further characterize infection in IECs, we quantified infected cells by

immunofluorescence staining for MNV NS7 following infection at MOI of one. Unexpectedly, only

10% of M2C cells were NS7-positive at 14 and 24 hours post-infection, suggesting that MNV does

not efficiently initiate replication in these cells. However, strains CW3, CR6, or CR6$^{\Delta casp}$ all had a

similarly low percentage of initially infected cells (Fig. 8C, D). This equal infection suggests that

early differences in titer at 10 hours are due to different rates of virus production per cell. Although

the initial proportion of infected cells was similar between strains, the percentage of CR6-infected

cells increased from 10 to 30% by 32 hours whereas the percentage of CW3 or CR6$^{\Delta casp}$ infected

cells did not significantly increase (Fig. 8C, D). Furthermore, visual inspection of CR6-infected

M2C cell monolayers at 48-72 hours post-infection revealed patches of minimal cellularity

whereas CW3 or CR6$^{\Delta casp}$ infected monolayers remained intact (Fig. 8E). In sum, these data

indicate that non-persistent strains are similarly able to initially infect IECs, but spread among IEC

monolayers is facilitated by cleavage of CR6 NS1/2.

NS1/2 cleavage promotes death of IECs. We next sought to identify the cellular response

altered by NS1/2 cleavage that may account for differential spread among IEC monolayers and

establishment of IEC infection *in vivo*. Analyses in myeloid cells indicated that NS1/2 cleavage

promoted apoptotic cell death (Fig. 2). To test whether IEC apoptosis was also promoted by NS1/2

cleavage, we infected M2C monolayers with CW3, CR6, or CR6$^{\Delta casp}$ and characterized cleavage

of NS1/2, caspase 3, and PARP by western blot. In contrast to the robust caspase 3 cleavage

seen in infected BV2 cells, we detected less than 10% cleavage of caspase 3 in M2C lysates from

infection with any strain at any timepoint and were infrequently able to detect NS1/2 cleavage at

any time post-infection (Fig. 9A). This reduced cleavage is consistent with the relatively low

frequency of infected M2C cells and loss of cellularity in CR6-infected cultures (Fig. 8C-E).

Additionally, staurosporine treatment of M2C resulted in visible loss of cellularity, but less

cleavage of caspase 3 (25% vs. 60%) and PARP (10% vs. 95%) compared to BV2 cells (Fig. 9A-

E, 2A-E). Despite the relatively low amount of caspase cleavage, M2C monolayers infected with

CR6 had three-fold more caspase 3 and PARP cleavage than those infected with CW3 or CR6$^{\Delta casp}$

(Fig. 9A-C) with no significant difference in viral protein production (NS7, Fig. 9A, B). To determine

if differences in caspase activity of infected M2C cells correlated with a different proportion of

apoptotic cells, we quantified Annexin V staining and cell lysis by flow cytometry. No apoptotic

cells were detected in the first 24 hours post-infection (not shown), consistent with slower

replication kinetics and caspase activation (Fig. 8, 9A-C). However, by 36 hours post-infection

CR6 triggered a three-fold increase in apoptotic cells (Annexin V positive, LIVE/DEAD negative)

whereas CW3 or CR6$^{\Delta casp}$ triggered only a two-fold increase over background (Fig. 9D, E).

Altogether, these data demonstrate that CR6 NS1/2 cleavage promotes apoptotic caspase activity

and cell death of myeloid (BV2) and IEC (M2C) cell lines.

MNV-induced death occurred in a relatively low proportion of M2C cells over an extended

time course with strain-dependent loss of cellularity (Fig. 8E). To more comprehensively compare

strain-dependent differences in this context, we used the incucyte imaging system to quantify

confluency, Annexin V staining, and cytotox viability dye staining over time. Control M2C

monolayers treated with staurosporine died rapidly with loss of confluency and increasing Annexin

V and cytotox staining between 4-12 hours post-treatment (Fig. 10). CR6 infected monolayers

also lost confluency over the course of the experiment whereas CW3 or CR6$^{\Delta casp}$ infected

monolayers remained intact (Fig. 10A). Monolayers infected with all MNV strains became positive

for Annexin V and cytotox with similar kinetics, beginning at 24 hours post-infection and increased

to a maximum at 48 hours (Fig. 9A, B, S1-S5). However, CR6 infection resulted in more overall

Annexin V and cytotox staining over the course of the experiment than CW3 or CR6$^{\Delta casp}$ infection,

as quantified by area-under-curve (AUC) analyses (Fig. 9C). Although flow cytometry experiments

detected Annexin V positive M2C cells with intact membranes (Fig. 9D, E), these live imaging

data suggest that there is a rapid progression from apoptosis to lytic death in virally infected cells.

Overall, these analyses of cell death suggest that CR6 NS1/2 cleavage promotes increased

apoptotic and lytic death in IECs. Taken together with our *in vivo* data, we propose that NS1/2 is

a viral sensor of caspase activity whose cleavage promotes execution of cell death programs

during viral egress, lateral spread among intestinal epithelial cells, and persistent shedding (Fig.

11).

Discussion

Herein, we demonstrate that caspase-mediated cleavage of the nonstructural protein, NS1/2, is critical for persistent MNV infection of the intestine. We engineered and characterized a strain of MNV in which NS1/2 is not cleaved (CR6$^{\Delta casp}$), and our *in vitro* and *in vivo* analyses demonstrate that NS1/2 cleavage is not required for viral replication in myeloid cells but is specifically required for promoting infection in IECs, the cellular reservoir of persistence. Furthermore, our data indicate that NS1/2 cleavage potentiates apoptosis and lytic death, suggesting that regulation of cell death is a critical aspect of establishing a persistent MNV infection in IECs.

NS1/2 was not previously known to play a role in cell death during MNV infection, but is required for viral replication beginning at the earliest stages of replication complex assembly. Norovirus replication occurs in the cytoplasm on cellular membranes with a variety of organelle markers [15], and occurs near membranous vesicles [15,23]. MNV NS1/2 localizes to the endoplasmic reticulum (ER) [16,17] and promotes replication via membrane re-organization and through an interaction with the vesicle-associated membrane protein, VAPA [18,50]. Similarly, HNoV NS1/2 interacts with VAPA, localizes to vesicles, and disrupts vesicle trafficking when ectopically expressed [18]. Our data indicate that this early and essential role of NS1/2 remains intact when the caspase cleavage sites are mutated, and viral replication occurs normally in myeloid cells (Fig. 2). NS1/2 cleavage only occurs after viral replication has peaked indicating that its role in promoting death, IEC infection, and persistence involves relatively late events in the viral life cycle.

The last step of the MNV replication cycle is egress, which occurs concurrently with induction of apoptosis. Therefore, NS1/2 cleavage and associated apoptotic death may be important for regulating release of viral progeny. How noroviruses are released from infected cells is not well understood, but infection of macrophages, DCs, or IECs does result in cell lysis ([23],

Figs. 2, 9, 10) and non-enveloped viruses generally rely on cell lysis to release newly assembled

virions.   Apoptotic processes may alter egress by reducing lytic virion release and favoring

retention of virions within cellular membranes. Indeed, a number of non-enveloped viruses utilize

vesicle-associated egress as a means of evasion from immune detection, and vesicles with

exposed phosphatidylserine allow for phagocytic uptake of novel target cells that may not express

the viral receptor [51,52]. In addition to facilitating phagocytic uptake, membranes with PS can

inhibit IFN responses via activation of Tyro3/Axl/Mer (TAM) receptor tyrosine kinases on target

cells [53], which would allow more efficient viral replication. Thus, vesicular egress has the

potential to dramatically change the outcome of infection via biophysical and immunological

mechanisms. Intriguingly, recent studies by the Altan-Bonet group indicate that MNV can be

released from intact cells in PS-positive membranes [54] but the proportion of total virions

released in this manner remains unknown. Therefore, it will be important in future work to consider

the role of NS1/2 cleavage on regulation of this newly-described membranous egress and the role

of viral association with membranes on spread among IECs.

The MNV receptor CD300lf is specifically expressed on MNV target cells, including myeloid

cells and a specialized IEC subtype, tuft cells [25]. Tuft cells are a rare cell type in the intestinal

epithelium and are dispersed among non-tuft, CD300lf-negative IECs [55]. Our analyses often

found intestinal villi with multiple, adjacent epithelial cells infected (Fig. 7C), raising the possibility

of direct MNV spread to neighboring IECs, which could be mediated by cell death or apoptotic

egress and regulated by NS1/2 cleavage. Our *in vitro* studies of infection in IEC monolayers

support this hypothesis, and the dispersed nature of CD300lf-expressing tuft cells poses a strong

selective pressure for efficient spread across receptor-negative stretches of the intestinal

epithelium (Fig. 11). Recent development of *in vitro* methods for differentiating tuft cells in primary

IEC cultures [56] will enable future experiments to characterize spread in an IEC monolayer more

representative of the *in vivo* scenario.

Regular turnover of the intestinal epithelium results in a short lifespan for differentiated epithelial cells, which undergo a specialized form of apoptotic cell death (anoikis) triggered as the cell detaches from the basal membrane and is shed into the lumen [57]. Specific Bcl-2 family proteins are critical players in anoikis [58,59], and display increased expression as IECs transit up the villus [59]. It is possible cleavage of NS1/2 (and perhaps NS1 directly) interferes with Bcl-2 family proteins as a means of altering the kinetics of the highly-regulated pathways that control apoptosis within differentiated IECs. Interestingly, similar to NS1/2 cleavage promoting apoptosis during infection, some Bcl-2 proteins (e.g. Bid) are also regulated via cleavage, in which the truncated version is the active, pro-apoptotic form of the protein [60]. An important future direction will be to examine whether NS1/2 interactions with the apoptotic machinery plays a role in maintaining IEC infection.

As mentioned above, PS receptor activation associated with apoptotic death could limit host responses. In contrast, virus production that results from cell lysis would promote inflammatory signals to alert the host of an infection. In addition to professional phagocytes, phagocytosis by non-professional phagocytes (e.g. epithelial cells) is critical for efficient clearance of apoptotic cells, and for limiting inflammation in tissues with high cellular turnover [61]. Specifically, in a mouse model of colonic injury, phagocytic uptake of apoptotic cells by IECs was sufficient for limiting inflammation in the colon [62], and phagocytosis mediated by epithelial cells is similarly critical for reducing inflammation in lung tissue [63] and mammary glands [64]. Thus, intestinal infection that promotes apoptotic death and the phagocytic uptake by IECs would limit host detection and provide a non-inflammatory environment that would allow more efficient infection of IECs and benefit MNV persistence. Future work will seek to identify the contribution of these immunoregulatory pathways and apoptotic viral egress on IEC infection. Our discovery of NS1/2 as an "apoptosis sensor" that reciprocally regulates apoptotic death and facilitates

425   epithelial spread (Fig. 11) has opened the door to such mechanistic studies and expanded our

426   understanding of the requirements for viral persistence in the intestine.

Materials and Methods

Cells, virus, and plaque assays

BV2 cells (gift from Herbert Virgin IV, Washington University, St. Louis, MO), a mouse microglial cell line [65], were maintained in DMEM (Life Technologies, ThermoFisher, Carslbad, CA) with 5% fetal bovine serum (FBS) (VWR Seradigm, Radnor, PA), 1X Penicillin/Streptomycin/Glutamine (P/S/G) solution, and 10mM HEPES. M2C-CD300lf cells, a murine colonic epithelial cell line transduced with the MNV receptor, CD300lf [28], were maintained in DMEM with 10% FBS, 1X P/S/G, and 10mM HEPES. For bone-marrow derived dendritic cells (BMDCs), bone marrow was isolated from the long bones of each hind leg of either a WT or $Stat1^{-/-}$ mouse and suspended in RPMI (Life Technologies). Red blood cells were lysed using red blood cell lysis solution (Sigma, St Louis, MO) and remaining bone marrow cells were cultured in RPMI with 10% FBS, 1X P/S/G solution, 10mM HEPES, 1X Sodium Pyruvate, 1X non-essential amino acids, and 20ng/mL GM-CSF obtained from supernatants of GM-CSF-secreting cells (J558L, [66]). After seven days of culture (37C, 5% CO_2), non-adherent cells were collected, infected in suspension with indicated MNV strains (MOI = 1), and plated without GM-CSF for the indicated time. For indicated experiments, ZVAD-fmk (Cell Signaling Technology) was re-suspended in DMSO and added to cells at 70 µM. As a positive control for apoptosis assays, cells were treated with 1uM staurosporine (SS) (CST) for 3.5h, at 37C.

CR6$^{\Delta casp}$ MNV was generated using site directed mutagenesis as previously described [20] with the following primers: CR6 $D_{121}G$, 5'-GCCTAAGGAAGATAAAGCCG**G**TGCGCCCTCCCATGCG and CR6 $D_{131}G$, 5'-TGCGGAGGACGCCATGG**G**TGCAAGGGAGCCCATAATTGG. The targeted residue is underlined with the mutation in bold. Correct mutations were verified via sanger sequence analysis.

MNV stocks were generated from plasmids, as described [22]. Briefly, plasmids encoding viral genomes of parental CW3 (GenBank accession no. EF014462.1), parental CR6 (GenBank accession no. JQ237823), CR6-VP1^{CW3} [20,22] and the two NS1/2$_{\Delta casp}$ viral genomes generated herein, were individually transfected into 293T cells (ATCC #CRL-3216). Forty-eight hours post-transfection, cells were frozen, thawed, vortexed, and spun at 3,000xg to remove large debris. Supernatants were expanded by two passages at MOI <0.05 in BV2 cells, and p2 virus supernatant was filtered (0.2 μm), concentrated by ultra-centrifugation through a 30% sucrose cushion, and titered via plaque assay.

Plaque assays were performed in BV2 cells, similar to previously described methods [20]. Briefly, BV2 cells were grown in 6well plates, infected with serial dilutions of each sample (500ul per well, 1h, RT, on a rocking platform), after which the inoculum was removed and cells were overlaid with 1% methylcellulose in complete DMEM. At two to three days post-overlay, cells were fixed and stained with 20% EtOH / 0.1% crystal violet.

Incucyte live-cell imaging and analysis

Cells were seeded in a 96-well plate, allowed to form a confluent monolayer (~18-24h), and subsequently infected with MNV or UV-inactivated MNV (MOI=0.5). Mock-infected cells, and cells treated with 1μM staurosporine were used for negative and positive controls, respectively. Apoptosis and cell permeabilization were assessed via addition of Incucyte Annexin V Green and Cytox Red reagents (EssenBioscience, Ann Arbor, MI), respectively, following manufacturer protocols. Phase contrast and fluorescent images were collected with a 10x objective using the IncuCyte Dual Dolor ZOOM (EssenBioscience) imaging system at 30minute intervals over a 72h time course, maintained at 37°C and 5% CO_2. Images were analyzed using Incucyte 2016A software (EssenBioscience) after Top-Hat background subtraction, with a 20μm radius.

Mice, infections, and tissue collection

$Stat1^{-/-}$ ($Stat1^{tm1Dlv}$) mice were originally obtained from the Jackson Laboratories (stock #012606). $Ifnlr1^{-/-}$ (generated from $Ifnlr1^{tm1a(EUCOMM)Wtsi}$) and $Ifnar1^{-/-}$ ($Ifnar1^{tm1Agt}$) were originally obtained from Washington University in St. Louis. $Ifnlr1^{-/-}$ and $Ifnar1^{-/-}$ were bred to generate $Ifnlr1^{-/-}/Ifnar1^{-/-}$ mice (DKO) and $Ifnlr1^{+/-}/Ifnar1^{+/-}$ (Dhet). Dhet and DKO crossbreeding yielded littermate mice deficient in neither (Dhet), both (DKO), or a single ($Ifnlr1^{+/-}/Ifnar1^{-/-}$ or $Ifnlr1^{-/-}/Ifnar1^{+/-}$) IFN receptor gene(s); these littermates were used for experiments to control for variability between litters.

All mice (7-9weeks old) were perorally infected with 1e6 PFU in a 25µL volume administered by pipet, with the exception of experiments in Figure 5 where 1e6 or 1e7 PFU (as indicated in figure) was administered by oral gavage in a 100µL volume. An equal proportion of males and females were maintained among experimental groups to mitigate results due to any unidentified sex-dependent variables. Same-sex mice, infected with the same MNV strain, were often co-housed for acute infection analyses (less than three days), but singly-housed for extended experiments to prevent continued transmission between animals.

Tissue samples, or a single fecal pellet, were collected in 2ml cryovials with 1mm zirconia/silica beads (Biospec, Bartlesville, OK), frozen in a dry ice/EtOH bath and stored at -80C. For plaque assay or RT-qPCR analyses, either 1ml DMEM or 1ml RiboZol (VWR) was added, respectively, and tissues were homogenized via bead-beating (1min, RT) prior to continued analysis.

Ethics Statement

All mice were bred on C57BL/6 background and maintained in specific-pathogen-free barrier facilities at Oregon Health & Science University under animal protocols approved by the

institutional animal care and use committee at Oregon Health & Science University (protocol # IP00000228) according to standards set forth in the *Animal Welfare Act*.

RNA, cDNA, and RT-qPCR

RNA from tissues was extracted via RiboZol (VWR) protocols, and RNA from cells was extracted with the ZR Viral RNA kit (Zymoresearch, Irvine, CA). DNA contamination was removed with Turbo DNase (ThermoFisher), and 1ug of RNA was used to generate cDNA with the ImpromII reverse transcriptase (Promega, Madison, WI). Quantitative PCR was performed using PerfeCTa qPCR FastMix II (QuantaBio, Beverly, MA), and the following oligo/probes were used for detection: MNV genomic RNA - Forward primer CACGCCACCGATCTGTTCTG, Reverse primer GCGCTGCGCCATCACTC, and Probe TGCGCTTTGGAACAATGG; RPS29 - Forward primer GCAAATACGGGCTGAACATG, Reverse primer GTCCAACTTAATG AAGCCTATGTC, and Probe CCTTCGCGTACTGCCGGAAGC.

Cell Lysates and Western blot

BV2 cells were grown and infected in 12well plates (2 e5 cells/well). Cells were lifted with trypsin/0.25% EDTA (Gibco, ThermoFisher), washed with 1X cold PBS, resuspended in 100 µL NP40 lysis buffer (Alfo Aesar, Havervill, MA) with protease inhibitor cocktail (Sigma, St Louis, MO), incubated on ice (15min with intermittent mixing), cleared via centrifugation (1min, 4C, full-speed), and diluted 1:1 with 2x SDS loading buffer (0.125 M Tris [pH 6.8], 4% SDS, 20% glycerol, 0.004% bromophenol blue, 10% beta-mercaptoethanol). Lysates were run on Novex Tris-Glycine gels (ThermoFisher), transferred to 0.2 µm PVDF (BioRad, Hercules, CA), blocked with 5% nonfat dry milk, and probed with the following antibodies (Ab): caspase 3 (CST), PARP (CST), beta-Actin pAb (Invitrogen), MNV NS1/2 (a gift from Dr. Vernon Ward, U. of Otago, Australia), or MNV ProPol (a gift form Dr. Kim Green, NIH).   Signal was detected using goat, anti-rabbit IgG-HRP

(Jackson ImmunoResearch), developed with ECL substrate (Pierce, ThermoFisher), and imaged with an ImageQuant LAS4000 (GE Healthcare, Little Chalfont, UK).

Intestinal epithelial cell collection

Epithelial fractions were prepared by non-enzymatic striping as previously described [31]. Mice were euthanized and distal small intestine, cecum, and colon (regions of highest MNV replication) were isolated. Peyer's patches were removed from small intestine and intestinal tissues were incubated in stripping buffer (10% bovine calf serum, 15 mM HEPES, 5 mM EDTA, 5 mM dithiothreitol [DTT] in PBS) with shaking for 20 min at 37°C. The dissociated cells were collected as the epithelial fraction, consisting predominantly of IECs and directly used for flow cytometry.

Surface and intracellular staining and flow cytometry

BV2 cells were trypsinized and washed once with 1X PBS, stained with the amine-reactive viability dye, Zombie Aqua (Biolegend, San Diego, CA) (20min, on ice), washed once with cold 2% FBS/PBS, washed once with cold Annexin V binding buffer (CST), and stained with Annexin V-FITC (CST) (15min, RT). Cells were immediately analyzed via flow cytometry on an LSR Fortessa (Becton Dickinson [BD], Franklin Lakes, NJ) with FACSDiva software (BD), and data was analyzed using FlowJo software (FlowJo LLC, Ashland, OR).

IECs isolated as described above were stained with the Zombie Aqua viability dye (Biolegend), Fc receptors were blocked with purified CD16/CD32 pAb (clone93; Biolegend), and cells were probed for surface markers, EpCAM (clone G8.8; Biolegend) and CD45 (clone 30-F11; Biolegend). Cells were subsequently fixed with 2% paraformaldehyde/PBS (10min, RT), and blocked/permeablized in 0.2% Triton X/PBS with 2% normal goat serum (20min, RT). Fixed and

permeabilized cells were probed for intracellular viral antigen with 2 distinct antibodies: Rabbit

polyclonal anti-NS1/2 (a gift from Dr. Vernon Ward, U. of Otago, Australia) and mouse monoclonal

anti-NS1 (clone CM79, a gift from Dr. Ian Clark, U. of Southampton, UK). These unconjugated

antibodies were detected with anti-Rabbit Alexa Fluor 647 (Molecular Probes, Eugene, OR), and

anti-mouse Dylight 405 (Jackson ImmunoResearch), respectively. Cells were analyzed via flow

cytometry, and viable cells that were EpCAM+, CD45-, NS1/2 pAb+, and NS1 mAb+ were labeled

as infected epithelial cells.

RNA *in situ* hybridization via RNAscope®

Ileum was opened longitudinally, pinned apical side up in wax trays, and fixed in 10%

neutral-buffered formalin (Sigma) (18-24h, RT), then moved to 70% EtOH. Tissues were

embedded in 2% agar (ThermoFisher), the PP was vertically transected, flipped 90 degrees, and

re-embedded in 2% agar. Agar blocks were maintained in 70% EtOH prior to being paraffin-

embedded. Tissue sections (5um) were cut and maintained at RT with desiccant until processed.

RNA *in situ* hybridization was performed using the RNAscope Multiplex Fluorescent v2 kit

(Advanced Cell Diagnostics [ACDBio], Newark, CA) per protocol guidelines. Probes were

designed by ACDBio for detection of CW3 positive strand RNA (471891-C1), CR6 positive strand

RNA (502631-C1), and EpCAM mRNA (418151-C2), and signals were amplified and detected via

ACDBio protocols using TSA® plus technology (Perkin Elmer, Waltham, MA). Slides were

mounted with ProLong Gold antifade reagent (ThermoFisher), and imaged using a Zeiss

ApoTome2 on an Axio Imager, with a Zeiss AxioCam 506 (Zeiss, Jena, Germany).

Statistical Analyses

Data were analyzed with Prism 7 software (GraphPad Prism Software, La Jolla, CA), with

specified tests and significance noted in the figure legends.

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1. Ahmed SM, Hall AJ, Robinson AE, Verhoef L, Premkumar P, Parashar UD, et al. Global

prevalence of norovirus in cases of gastroenteritis: a systematic review and meta-

analysis. Lancet Infect Dis. World Health Organization. Published by Elsevier Ltd/Inc/BV.

All rights reserved.; 2014;14: 725–730. doi:10.1016/S1473-3099(14)70767-4

2. Glass RI, Parashar UD, Estes MK. Norovirus gastroenteritis. N Engl J Med. 2009;361:

1776–85. doi:10.1056/NEJMra0804575

3. Saito M, Goel-Apaza S, Espetia S, Velasquez D, Cabrera L, Loli S, et al. Multiple

Norovirus Infections in a Birth Cohort in a Peruvian Periurban Community. Clin Infect Dis.

2014;58: 483–491. doi:10.1093/cid/cit763

4. Teunis PFM, Sukhrie FHA, Vennema H, Bogerman J, Beersma MFC, Koopmans MPG.

Shedding of norovirus in symptomatic and asymptomatic infections. Epidemiol Infect.

2015;143: 1710–7. doi:10.1017/S095026881400274X

5. Ettayebi K, Crawford SE, Murakami K, Broughman JR, Karandikar U, Tenge VR, et al.

Replication of human noroviruses in stem cell-derived human enteroids. Science.

2016;353: 1387–1393. doi:10.1126/science.aaf5211

6. Jones MK, Watanabe M, Zhu S, Graves CL, Keyes LR, Grau KR, et al. Enteric bacteria

promote human and mouse norovirus infection of B cells. Science. 2014;346: 755–9.

doi:10.1126/science.1257147

7. Karst SM, Wobus CE. A Working Model of How Noroviruses Infect the Intestine. Rall GF,

editor. PLOS Pathog. 2015;11: e1004626. doi:10.1371/journal.ppat.1004626

8. Nice TJ, Robinson BA, Van Winkle JA. The Role of Interferon in Persistent Viral Infection:

Insights from Murine Norovirus. Trends Microbiol. Elsevier Ltd; 2018;26: 510–524.

doi:10.1016/j.tim.2017.10.010

9. Baldridge MT, Turula H, Wobus CE. Norovirus Regulation by Host and Microbe. Trends

Mol Med. 2016;22: 1047–1059. doi:10.1016/j.molmed.2016.10.003

10.   Karst SM, Wobus CE, Lay M, Davidson J, Virgin HW. STAT1-dependent innate immunity

to a Norwalk-like virus. Science. 2003;299: 1575–8. doi:10.1126/science.1077905

11.   Lambden PR, Caul EO, Ashley CR, Clarke IN. Sequence and genome organization of a

human small round-structured (Norwalk-like) virus. Science. 1993;259: 516–9. Available:

http://www.ncbi.nlm.nih.gov/pubmed/8380940

12.   Sosnovtsev S V, Belliot G, Chang K-O, Prikhodko VG, Thackray LB, Wobus CE, et al.

Cleavage Map and Proteolytic Processing of the Murine Norovirus Nonstructural

Polyprotein in Infected Cells. J Virol. 2006;80: 7816–7831. doi:10.1128/JVI.00532-06

13.   Seah EL, Marshall JA, Wright PJ. trans activity of the norovirus Camberwell proteinase

and cleavage of the N-terminal protein encoded by ORF1. J Virol. 2003;77: 7150–7155.

doi:10.1128/JVI.77.12.7150

14.   Liu B, Clarke IN, Lambden PR. Polyprotein processing in Southampton virus: identification

of 3C-like protease cleavage sites by in vitro mutagenesis. J Virol. 1996;70: 2605–10.

Available: http://www.ncbi.nlm.nih.gov/pubmed/8642693

15.   Hyde JL, Sosnovtsev S V, Green KY, Wobus C, Virgin HW, Mackenzie JM. Mouse

Norovirus Replication Is Associated with Virus-Induced Vesicle Clusters Originating from

Membranes Derived from the Secretory Pathway. J Virol. 2009;83: 9709–9719.

doi:10.1128/JVI.00600-09

16.   Hyde JL, Mackenzie JM. Subcellular localization of the MNV-1 ORF1 proteins and their

potential roles in the formation of the MNV-1 replication complex. Virology. 2010;406:

138–148. doi:10.1016/j.virol.2010.06.047

17.   Doerflinger SY, Cortese M, Romero-Brey I, Menne Z, Tubiana T, Schenk C, et al.

Membrane alterations induced by nonstructural proteins of human norovirus. PLoS

Pathog. 2017;13: e1006705. doi:10.1371/journal.ppat.1006705

18.   Ettayebi K, Hardy ME. Norwalk Virus Nonstructural Protein p48 Forms a Complex with the

SNARE Regulator VAP-A and Prevents Cell Surface Expression of Vesicular Stomatitis

Virus G Protein. J Virol. 2003;77: 11790–11797. doi:10.1128/JVI.77.21.11790-11797.2003

19.   Thorne LG, Goodfellow IG. Norovirus gene expression and replication. J Gen Virol.

2014;95: 278–291. doi:10.1099/vir.0.059634-0

20.   Nice TJ, Strong DW, McCune BT, Pohl CS, Virgin HW. A single-amino-acid change in

murine norovirus NS1/2 is sufficient for colonic tropism and persistence. J Virol. 2013;87:

327–34. doi:10.1128/JVI.01864-12

21.   Bailey D, Thackray LB, Goodfellow IG. A Single Amino Acid Substitution in the Murine

Norovirus Capsid Protein Is Sufficient for Attenuation In Vivo. J Virol. 2008;82: 7725–

7728. doi:10.1128/JVI.00237-08

22.   Strong DW, Thackray LB, Smith TJ, Virgin HW. Protruding domain of capsid protein is

necessary and sufficient to determine murine norovirus replication and pathogenesis in

vivo. J Virol. 2012;86: 2950–8. doi:10.1128/JVI.07038-11

23.   Wobus CE, Karst SM, Thackray LB, Chang K-O, Sosnovtsev S V., Belliot G, et al.

Replication of Norovirus in Cell Culture Reveals a Tropism for Dendritic Cells and

Macrophages. Michael Emerman, editor. PLoS Biol. 2004;2: e432.

doi:10.1371/journal.pbio.0020432

24.   Grau KR, Roth AN, Zhu S, Hernandez A, Colliou N, DiVita BB, et al. The major targets of

acute norovirus infection are immune cells in the gut-associated lymphoid tissue. Nat

Microbiol. 2017;2: 1586–1591. doi:10.1038/s41564-017-0057-7

25.   Orchard RC, Wilen CB, Doench JG, Baldridge MT, McCune BT, Lee Y-CJ, et al.

Discovery of a proteinaceous cellular receptor for a norovirus. Science. 2016;353: 933–6.

doi:10.1126/science.aaf1220

26.   Haga K, Fujimoto A, Takai-Todaka R, Miki M, Doan YH, Murakami K, et al. Functional

receptor molecules CD300lf and CD300ld within the CD300 family enable murine

noroviruses to infect cells. Proc Natl Acad Sci U S A. 2016;113: E6248–E6255.

doi:10.1073/pnas.1605575113

27.   Wilen CB, Lee S, Hsieh LL, Orchard RC, Desai C, Hykes BL, et al. Tropism for tuft cells

determines immune promotion of norovirus pathogenesis. Science. 2018;360: 204–208.

doi:10.1126/science.aar3799

28.   Lee S, Wilen CB, Orvedahl A, McCune BT, Kim K-W, Orchard RC, et al. Norovirus Cell

Tropism Is Determined by Combinatorial Action of a Viral Non-structural Protein and Host

Cytokine. Cell Host Microbe. 2017;22: 449–459.e4. doi:10.1016/j.chom.2017.08.021

29.   Haber AL, Biton M, Rogel N, Herbst RH, Shekhar K, Smillie C, et al. A single-cell survey

of the small intestinal epithelium. Nature. Nature Publishing Group; 2017;551: 333–339.

doi:10.1038/nature24489

30.   Hoffmann H-H, Schneider WM, Rice CM. Interferons and viruses: an evolutionary arms

race of molecular interactions. Trends Immunol. 2015;36: 124–38.

doi:10.1016/j.it.2015.01.004

31.   Nice TJ, Osborne LC, Tomov VT, Artis D, Wherry EJJ, Virgin HW. Type I Interferon

Receptor Deficiency in Dendritic Cells Facilitates Systemic Murine Norovirus Persistence

Despite Enhanced Adaptive Immunity. Coyne CB, editor. PLoS Pathog. 2016;12:

e1005684. doi:10.1371/journal.ppat.1005684

32.   Thackray LB, Duan E, Lazear HM, Kambal A, Schreiber RD, Diamond MS, et al. Critical

Role for Interferon Regulatory Factor 3 (IRF-3) and IRF-7 in Type I Interferon-Mediated

Control of Murine Norovirus Replication. J Virol. 2012;86: 13515–13523.

doi:10.1128/JVI.01824-12

33.   Baldridge MT, Nice TJ, McCune BT, Yokoyama CC, Kambal A, Wheadon M, et al.

Commensal microbes and interferon-λ determine persistence of enteric murine norovirus

infection. Science. 2015;347: 266–9. doi:10.1126/science.1258025

34.   Nice TJ, Baldridge MT, McCune BT, Norman JM, Lazear HM, Artyomov M, et al.

680   Interferon-λ cures persistent murine norovirus infection in the absence of adaptive

681   immunity. Science. 2015;347: 269–73. doi:10.1126/science.1258100

682   35.   Taylor RC, Cullen SP, Martin SJ. Apoptosis: controlled demolition at the cellular level. Nat

683   Rev Mol Cell Biol. 2008;9: 231–41. doi:10.1038/nrm2312

684   36.   Polster BM, Pevsner J, Hardwick JM. Viral Bcl-2 homologs and their role in virus

685   replication and associated diseases. Biochim Biophys Acta. 2004;1644: 211–27.

686   doi:10.1016/j.bbamcr.2003.11.001

687   37.   Galluzzi L, Brenner C, Morselli E, Touat Z, Kroemer G. Viral control of mitochondrial

688   apoptosis. PLoS Pathog. 2008;4. doi:10.1371/journal.ppat.1000018

689   38.   Amara A, Mercer J. Viral apoptotic mimicry. Nat Rev Microbiol. Nature Publishing Group;

690   2015;13: 461–469. doi:10.1038/nrmicro3469

691   39.   Richard A, Tulasne D. Caspase cleavage of viral proteins, another way for viruses to

692   make the best of apoptosis. Cell Death Dis. 2012;3: e277. doi:10.1038/cddis.2012.18

693   40.   Mebratu YA, Tipper J, Chand HS, Walton S, Harrod KS, Tesfaigzi Y. Bik Mediates

694   Caspase-Dependent Cleavage of Viral Proteins to Promote Influenza A Virus Infection.

695   Am J Respir Cell Mol Biol. 2016;54: 664–73. doi:10.1165/rcmb.2015-0133OC

696   41.   Al-Molawi N, Beardmore VA, Carter MJ, Kass GEN, Roberts LO. Caspase-mediated

697   cleavage of the feline calicivirus capsid protein. J Gen Virol. 2003;84: 1237–44.

698   doi:10.1099/vir.0.18840-0

699   42.   Cheetham S, Souza M, Meulia T, Grimes S, Han MG, Saif LJ. Pathogenesis of a

700   genogroup II human norovirus in gnotobiotic pigs. J Virol. 2006;80: 10372–81.

701   doi:10.1128/JVI.00809-06

702   43.   Troeger H, Loddenkemper C, Schneider T, Schreier E, Epple H-J, Zeitz M, et al.

703   Structural and functional changes of the duodenum in human norovirus infection. Gut.

2009;58: 1070–7. doi:10.1136/gut.2008.160150

44. Mumphrey SM, Changotra H, Moore TN, Heimann-Nichols ER, Wobus CE, Reilly MJ, et

al. Murine norovirus 1 infection is associated with histopathological changes in

immunocompetent hosts, but clinical disease is prevented by STAT1-dependent interferon

responses. J Virol. 2007;81: 3251–3263. doi:10.1128/JVI.02096-06

45. Bok K, Prikhodko VG, Green KY, Sosnovtsev S V. Apoptosis in Murine Norovirus-Infected

RAW264.7 Cells Is Associated with Downregulation of Survivin. J Virol. 2009;83: 3647–

3656. doi:10.1128/JVI.02028-08

46. Furman LM, Maaty WS, Petersen LK, Ettayebi K, Hardy ME, Bothner B. Cysteine

protease activation and apoptosis in Murine norovirus infection. Virol J. 2009;6: 139.

doi:10.1186/1743-422X-6-139

47. Herod MR, Salim O, Skilton RJ, Prince CA, Ward VK, Lambden PR, et al. Expression of

the Murine Norovirus (MNV) ORF1 Polyprotein Is Sufficient to Induce Apoptosis in a

Virus-Free Cell Model. PLoS One. 2014;9: e90679. doi:10.1371/journal.pone.0090679

48. Van Winkle JA, Robinson BA, Peters AM, Li L, Nouboussi R V, Mack M, et al. Persistence

of Systemic Murine Norovirus Is Maintained by Inflammatory Recruitment of Susceptible

Myeloid Cells. Cell Host Microbe. 2018;24: 665–676.e4. doi:10.1016/j.chom.2018.10.003

49. Chang HY, Yang X. Proteases for cell suicide: functions and regulation of caspases.

Microbiol Mol Biol Rev. 2000;64: 821–46. Available:

http://www.ncbi.nlm.nih.gov/pubmed/11104820

50. McCune BT, Tang W, Lu J, Eaglesham JB, Thorne L, Mayer AE, et al. Noroviruses Co-opt

the Function of Host Proteins VAPA and VAPB for Replication via a Phenylalanine-

Phenylalanine-Acidic-Tract-Motif Mimic in Nonstructural Viral Protein NS1/2. Dermody TS,

editor. MBio. 2017;8: 1–17. doi:10.1128/mBio.00668-17

51. Feng Z, Hensley L, McKnight KL, Hu F, Madden V, Ping L, et al. A pathogenic

picornavirus acquires an envelope by hijacking cellular membranes. Nature. Nature

Publishing Group; 2013;496: 367–71. doi:10.1038/nature12029

52. Chen Y-H, Du W, Hagemeijer MC, Takvorian PM, Pau C, Cali A, et al. Phosphatidylserine

Vesicles Enable Efficient En Bloc Transmission of Enteroviruses. Cell. 2015;160: 619–

630. doi:10.1016/j.cell.2015.01.032

53. Bhattacharyya S, Zagórska A, Lew ED, Shrestha B, Rothlin C V, Naughton J, et al.

Enveloped viruses disable innate immune responses in dendritic cells by direct activation

of TAM receptors. Cell Host Microbe. 2013;14: 136–47. doi:10.1016/j.chom.2013.07.005

54. Santiana M, Ghosh S, Ho BA, Rajasekaran V, Du WL, Mutsafi Y, et al. Vesicle-Cloaked

Virus Clusters Are Optimal Units for Inter-organismal Viral Transmission. Cell Host

Microbe. 2018; 208–220. doi:10.1016/j.chom.2018.07.006

55. Gerbe F, Sidot E, Smyth DJ, Ohmoto M, Matsumoto I, Dardalhon V, et al. Intestinal

epithelial tuft cells initiate type 2 mucosal immunity to helminth parasites. Nature. Nature

Publishing Group, a division of Macmillan Publishers Limited. All Rights Reserved.;

2016;529: 226. Available: https://doi.org/10.1038/nature16527

56. Von Moltke J, Ji M, Liang HE, Locksley RM. Tuft-cell-derived IL-25 regulates an intestinal

ILC2-epithelial response circuit. Nature. Nature Publishing Group; 2016;529: 221–225.

doi:10.1038/nature16161

57. Delgado ME, Grabinger T, Brunner T. Cell death at the intestinal epithelial front line.

FEBS J. 2016;283: 2701–19. doi:10.1111/febs.13575

58. Reginato MJ, Mills KR, Paulus JK, Lynch DK, Sgroi DC, Debnath J, et al. Integrins and

EGFR coordinately regulate the pro-apoptotic protein Bim to prevent anoikis. Nat Cell Biol.

2003;5: 733–40. doi:10.1038/ncb1026

59. Hausmann M, Leucht K, Ploner C, Kiessling S, Villunger A, Becker H, et al. BCL-2

modifying factor (BMF) is a central regulator of anoikis in human intestinal epithelial cells.

J Biol Chem. 2011;286: 26533–40. doi:10.1074/jbc.M111.265322

60. Youle RJ, Strasser A. The BCL-2 protein family: opposing activities that mediate cell

death. Nat Rev Mol Cell Biol. 2008;9: 47–59. doi:10.1038/nrm2308

61. Poon IKH, Lucas CD, Rossi AG, Ravichandran KS. Apoptotic cell clearance: basic biology

and therapeutic potential. Nat Rev Immunol. Nature Publishing Group; 2014;14: 166–180.

doi:10.1038/nri3607

62. Lee CS, Penberthy KK, Wheeler KM, Juncadella IJ, Vandenabeele P, Lysiak JJ, et al.

Boosting Apoptotic Cell Clearance by Colonic Epithelial Cells Attenuates Inflammation In

Vivo. Immunity. Elsevier Inc.; 2016;44: 807–20. doi:10.1016/j.immuni.2016.02.005

63. Juncadella IJ, Kadl A, Sharma AK, Shim YM, Hochreiter-Hufford A, Borish L, et al.

Apoptotic cell clearance by bronchial epithelial cells critically influences airway

inflammation. Nature. 2013;493: 547–51. doi:10.1038/nature11714

64. Monks J, Rosner D, Geske FJ, Lehman L, Hanson L, Neville MC, et al. Epithelial cells as

phagocytes: apoptotic epithelial cells are engulfed by mammary alveolar epithelial cells

and repress inflammatory mediator release. Cell Death Differ. 2005;12: 107–14.

doi:10.1038/sj.cdd.4401517

65. Blasi E, Barluzzi R, Bocchini V, Mazzolla R, Bistoni F. Immortalization of murine microglial

cells by a v-raf/v-myc carrying retrovirus. J Neuroimmunol. Netherlands; 1990;27: 229–37.

Available: http://www.ncbi.nlm.nih.gov/pubmed/2110186

66. Qin Z, Noffz G, Mohaupt M, Blankenstein T. Interleukin-10 prevents dendritic cell

accumulation and vaccination with granulocyte-macrophage colony-stimulating factor

gene-modified tumor cells. J Immunol. 1997;159: 770–6. Available:

http://www.jimmunol.org/content/159/2/770.abstract

67. Gonzalez-Hernandez MB, Liu T, Payne HC, Stencel-Baerenwald JE, Ikizler M, Yagita H,

et al. Efficient Norovirus and Reovirus Replication in the Mouse Intestine Requires

Microfold (M) Cells. J Virol. 2014;88: 6934–6943. doi:10.1128/JVI.00204-14

Figure 1

Fig. 1. MNV NS1/2 is cleaved by host caspases at late times-post-infection. (A) Schematic

of MNV genomic organization, illustrating initial NS1/2 expression within the ORF1 polyprotein.

Sites indicated in ORF1 are cleaved by the viral protease (**v**) and host caspases (*), the latter at

aspartic acid residues 121 and 131 within two caspase motifs, DKAD[121] and DAMD[131]. (B)

Schematic representation of the five MNV clones used in these studies. D121G and D131G

mutations are indicated by the X within NS1/2. (C) BV2 cells were infected with indicated strains

of MNV (MOI=1), and whole cell extracts (WCE) were analyzed via western blot (WB) at indicated

times post-infection. Image is representative of 4 independent experiments. Arrows indicate full-

length NS1/2 (45kD) and NS2 (28kD). * Denotes caspase-independent bands >28kD. (D) BV2

cells were infected as in C, but subsequently treated with 50uM ZVAD-fmk at 10 hours post-

infection, and WCE were probed for NS1/2, NS7, caspase 3, and actin via WB. Image is

representative of 3 independent experiments. SS = staurosporine.

Figure 2

Fig. 2. Cleavage of NS1/2 promotes apoptosis of myeloid cells. BV2 cells were infected (MOI=1) with indicated MNV strains. (A-C) Whole cell extracts were collected at indicated times and analyzed via WB for caspase 3, PARP, actin, and MNV NS7. (A) Arrows denote cleaved fragments of caspase 3 and PARP. Images are representative of three independent experiments.

Figure 3

Fig. 3. Cleavage of NS1/2 is not required for *in vitro* MNV replication in myeloid cells. BV2

cells (A), WT BMDCs (B), or *Stat1^-/-* BMDCs (C) were infected with the indicated strain of MNV at

MOI 0.01 (A) or MOI 1 (A-C) and infectious virus was analyzed at indicated times post-infection

via plaque assay. Dotted lines indicate limit of detection. Error bars indicate SEM. Statistical

significance was determined via two-way ANOVA with Tukey's multiple comparisons test. *, p ≤

0.05; **, p ≤ 0.01. BMDCs = bone marrow-derived dendritic cells. Data are an average of at least

three independent experiments.

Figure 4

Fig. 4. NS1/2 cleavage is required for intestinal tropism and persistence. (A) *Stat1*^{-/-} mice

were infected with the indicated strain and monitored daily for lethality. (B-C) WT mice were

perorally infected with indicated viruses (1e6 PFU). At 3 (B) or 21 (C) days post-infection, tissues

and stool were harvested and analyzed via plaque assay (B) or qPCR (D). Data are from 8-9

individual mice combined from 3 separate experiments, and mean values are indicated. Statistical

significance was determined by Kruskal-Wallis test. *, $p \leq 0.05$; **, $p \leq 0.01$; ***, $p \leq 0.001$; ****,

$p \leq 0.0001$; MLN, mesenteric lymph node.

Figure 5

829   **Fig. 5. Caspase cleavage of NS1/2 is required independent of the IFN-λ response.** WT (A,

830   C) or *Ifnlr1*^{-/-} (B, D) mice were infected by oral gavage with either 1e6 PFU or 1e7 PFU, as

831   indicated. Fecal samples (A, B) were collected at 3, 7, 14, and 21 days post-infection, and colon

832   tissue (C, D) was harvested at 21 days post-infection. All samples were analyzed via RT-qPCR,

833   and the mean of each group (N=4) is indicated. Dotted lines indicate limit of detection.

Figure 6

Fig. 6. NS1/2 cleavage is necessary for infection of intestinal epithelial cells. Mice deficient for the IFN-λ receptor (A, C, E) or matched receptor-sufficient controls (B, D) were infected with indicated viruses and analyzed at three days post-infection. (A-C) Intestinal epithelial cells (CD45-, EpCAM+) were collected and doubly stained for NS1/2 as described in methods. (A) Flow plots representing concatenated data from five mice in C. Dotted line indicates limit of detection. (D-E) Peyer's patches were collected and analyzed via qPCR for MNV genomic RNA and normalized to RPS29. Data are combined from at least three separate experiments. Statistical significance determined by one-way ANOVA with Tukey's multiple comparisons test. *, $p \leq 0.05$; **, $p \leq 0.01$; ***, $p \leq 0.001$; ****, $p \leq 0.0001$.

Figure 7

A

WT mice	Epithelial Infection	NON-epithelial Infection
● CR6	7/7	3/7
■ CR6$^{\Delta CASP}$	0/6	1/6
○ CR6-VP1^{CW3}	2/6	3/6
□ CR6$^{\Delta CASP}$-VP1^{CW3}	0/5	2/5

B

WT IECs

MNV+ EpCAM+ cells/cm tissue

C

CR6   CR6   CR6-VP1^{CW3}

D

DKO mice	Epithelial Infection	NON-epithelial Infection
● CR6	4/4	2/4
■ CR6$^{\Delta CASP}$	0/3	0/3
○ CR6-VP1^{CW3}	7/7	7/7
□ CR6$^{\Delta CASP}$-VP1^{CW3}	0/2	2/2

E

DKO IECs

MNV+ EpCAM+ cells/cm tissue

F

CR6   CR6-VP1^{CW3} CR6$^{\Delta casp}$-VP1^{CW3}

Fig. 7. NS1/2 cleavage is necessary for infection of intestinal epithelial cells. Ileum tissue

from MNV-infected WT (A-C) or DKO (D-F) mice was analyzed via RNAscope at 2-3 days post-

infection. MNV RNA is in red, EpCAM is in green, and nuclei are stained with DAPI in blue. The

tables in A and D indicate the total number of mice analyzed and the number of mice with MNV

genome-positive cells in epithelial (EpCAM-positive) or non-epithelial (EpCAM-negative)

compartments. Yellow arrows in images indicate MNV+ EpCAM+ cells. Data points in B and E

represent individual mice and indicate the number of MNV+ EpCAM+ cells per cm of tissue. White

scale bar, 20μm. Statistical significance determined by one-way ANOVA with Tukey's multiple

comparisons test. **, $p \leq 0.01$; ****, $p \leq 0.0001$.

Figure 8

Fig. 8. NS1/2 cleavage promotes spread among IEC monolayers. (A-B) M2C-CD300lf cells were infected with the indicated strains at MOI of 1 (A) or 0.01 (B) and production of infectious MNV was monitored over time by plaque assay on BV2 cells. Curves show growth of strains grouped by persistence phenotype. (C-E) M2C-CD300lf cells were infected with the indicated strains at MOI of 1 (C-D) or 0.1 (E) and stained for MNV NS7 immunofluorescence microscopy at the indicated time post-infection (C-D) or stained with crystal violet dye to visualize the cell monolayer (E). Data in A-C is grouped from at least three independent experiments. D and E are representative images, and white scale bar is 100μm. Statistical significance determined by two-way ANOVA of grouped data with Tukey's multiple comparison test. *, $p \leq 0.05$; **, $p \leq 0.01$; ***, $p \leq 0.001$; ****, $p \leq 0.0001$.

Figure 9

Fig. 9. **NS1/2 cleavage promotes death of IECs.** M2C-CD300lf cells were infected (MOI=1) with indicated MNV strains. (A-C) Whole cell extracts were collected at indicated times and analyzed via WB for MNV NS1/2, caspase 3, PARP, actin, and MNV NS7. (A) Arrows denote cleaved fragments of NS1/2, caspase 3 and PARP. Images are representative of three

independent experiments. (B) NS7 normalized to actin analyzed via densitometry. (C) Cleaved

PARP and Caspase 3 were quantitated as a proportion of total protein by densitometry. (D-E)

Cells were harvested at 36 hours post-infection, stained with Annexin V and LIVE/DEAD viability

stain, and analyzed via flow cytometry. (D) Representative flow plots. (E) Live, Annexin V+, and

total Annexin V+ cells are graphed and mean values are indicated. Data is from three to five

independent experiments. Statistical significance was determined by one-way (E) or two-way (B-

C) ANOVA with Tukey's multiple comparison test. *, $p \leq 0.05$; **, $p \leq 0.01$; ***, $p \leq 0.001$; SS,

staurosporine.

Figure 10

Fig. 10. NS1/2 cleavage promotes death of IECs. M2C-CD300lf cells were infected (MOI=1) with indicated MNV strains. Cells were imaged for 48 hours on the incucyte platform in the presence of Annexin V and cytotox red. (A) Quantitation of confluency, Annexin V area normalized to confluency, and cytotox red area normalized to confluency over time. (B) Representative images from indicated times post-infection. See also videos S1-S5. (C) Area under the curve was quantitated for data in A. Data points indicate individual wells. Data in A and C is combined from three independent experiments. Statistical significance in C determined by one-way ANOVA with

889 Tukey's multiple comparison test. **, p ≤ 0.01; ****, p ≤ 0.0001; AUC, area under curve; SS,

890 staurosporine.

Figure 11

Fig. 11. Model. MNV can cross the epithelial barrier via M cells and replicate in myeloid cells

therein [24,67]. The capsid (VP1) of non-persistent strain CW3 (blue) promotes acute replication

in intestinal myeloid cells and is required for spread to myeloid cells of systemic tissues. A different

MNV gene, NS1 of persistent strain CR6 (red) is required for establishment of infection in rare

CD300lf-expressing IECs (tuft cells), the cellular reservoir of persistent intestinal infection and

fecal shedding. Cleavage of CR6 NS1 from precursor NS1/2 promotes robust tuft cell infection by

potentiating apoptotic caspase activity, death of infected tuft cells, and spread to dispersed target

cells within the intestinal epithelium. The role for NS1 and NS1/2 cleavage is specific to the

intestinal epithelium because NS1/2 cleavage is not required for systemic replication.

Supporting information

904 **S1 Video.** M2C-CD300lf cells infected with MNV strain CW3, related to figure 10.

905 **S2 Video.** M2C-CD300lf cells infected with MNV strain CR6, related to figure 10.

906 **S3 Video.** M2C-CD300lf cells infected with MNV strain CR6$^{\Delta casp}$, related to figure 10.

907 **S4 Video.** Mock-infected M2C-CD300lf cells, related to figure 10.

908 **S5 Video.** M2C-CD300lf cells treated with staurosporine, related to figure 10.