Aspartate aminotransferase is required for *Salmonella* expansion in the inflamed gut via TCA anaplerosis

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ABSTRACT

Aspartate represents an important proteogenic amino acid in all living organisms. Many microorganisms can produce aspartate through various biosynthetic processes, utilizing it for energy production and as a precursor for synthesizing other biomolecules, such as amino acids and nucleotides. The enteric pathogen *Salmonella* Typhimurium (*S.* Tm) has developed mechanisms to access aspartate as a nutrient source during expansion in the inflamed gut. However, how *S.* Tm deals with aspartate starvation during infection remains unknown. To address this knowledge gap, we interrogated *Salmonella*'s reliance on the bi-directional aspartate aminotransferase encoded by *aspC* for growth *in vitro* and during host colonization using murine models of *Salmonella* infection. AspC can interconvert aspartate and the TCA intermediate oxaloacetate and is hypothesized to support *S.* Tm cellular demands for aspartate during starvation or support refueling of the TCA cycle via oxaloacetate synthesis. Herein, we find that loss of *aspC* results in a gut-specific *S.* Tm colonization defect that increases with the course of infection. Importantly, *aspC* is dispensable for *S*. Tm systemic colonization. Additionally, we report that loss of *aspC* results in a significant growth defect during respiration of inflammation-derived electron acceptors *in vitro*. Interruption of oxidative TCA cycle progression via TCA enzyme deletion or supplementation with TCA intermediates (i.e., oxaloacetate) abrogates the defect demonstrated by Δ*aspC S.* Tm *in vitro.* Thus, suggesting the requirement for AspC to catabolize aspartate and support the TCA cycle during respiration. Altogether, we report that AspC plays a critical role in *S.* Tm pathogenesis in a gut-specific manner during inflammation through supporting energy generation.

Keywords

Salmonella, Gastroenteritis, Aspartate, Pathogenesis

INTRODUCTION

Despite being the primary site of digestion, the mammalian gut represents a region of nutrient scarcity for potential invading enteric pathogens such as *Salmonella enterica* serovar Typhimurium (*S*. Tm)[1–5]. The reason for this scarcity is the occupation of the major nutrient niches by the resident collection of commensal microbes inhabiting the intestines known as the gut microbiota [6–10]. The gut microbiota has been shown to actively reduce the availability of potential nutrients that potential invaders must compete for through direct catabolism and indirect support of host epithelial cell metabolism and nutrient absorption[11–13]. However, how bacterial pathogens adapt to overcome microbiota-protective mechanisms, such as nutrient sequestration, remains to be fully understood.

Recent work demonstrates that, in the context of complex microbiota, enteric bacterial pathogens such as *Citrobacter rodentium* and other pathogenic *Enterobacteriaceae* require the expression of amino acid biosynthesis pathways to colonize and expand[3]. Specifically, through a Tn-seq approach comparing germ-free and conventional mice, it has been demonstrated that mutants with insertions in amino acid biosynthesis pathways exhibit a significant fitness defect in conventional mice compared to germ-free mice. Thus, amino acids represent a critical nutrient for which microbial competition exists. Additionally, it is well-documented that bacteria are sensitive to amino acid starvation, which results in the activation of the stringent response. This response is commonly mediated by the SpoT/RelA system, which senses a reduction in amino acid-charged tRNAs, leading to reduced DNA replication, overall metabolism, and the upregulation of biosynthesis pathways. This body of work highlights the importance of the stringent response during gut colonization, as deleting these pathways in *S*. Tm results in a significant fitness defect and reduced virulence[14]. However, which amino acids are required for enteric pathogens in competition with complex microbiota is largely unknown.

Our group and others have previously reported that *S.* Tm requires aspartate for expansion in the inflamed gut through aspartate-dependent fumarate respiration via the aspartate ammonia-lyase, AspA [15,16]. Specifically, deletion of *aspA* and the C4-dicarboxylic acid transporter encoded by *dcuA*, specific for aspartate import in *S*. Tm, results in a significant expansion defect during murine infection[15,16]. Thus suggesting that aspartate plays a key role in the ability of *S.* Tm to colonize the intestinal lumen during gut inflammation. However, work by Popp *et al*. and Liu *et al*. demonstrates that aspartate biosynthesis also plays a significant role in *Salmonella* replication within macrophages and the maintenance of bacterial replication and cell size via the

aspartate aminotransferase encoded by *aspC*[17,18]. Additionally, recent work by Vayena *et al.* through

computational metabolic network mapping of *S*. Tm identified the potential for AspC to participate in the synthesis

and breakdown of aspartate[19]. However, there is a knowledge gap in how aspartate prototrophy by *S*. Tm, more

specifically the necessity of AspC, impacts the pathogen's fitness during intestinal colonization, including during

intestinal inflammation when the pathogen relies on anaerobic respiration to outcompete the resident microbiota.

Herein, we observe that deletion of the main aspartate aminotransferase AspC in *S*. Tm results in a

significant gut-specific defect in pathogen expansion when comparing intragastric and intraperitoneal routes of

infection in CBA/J mice. Based on our previous findings that *S*. Tm gastrointestinal infection results in an

increased abundance of luminal aspartate[16], we reasoned that the defect of Δ*aspC S.* Tm may not be the result

of aspartate starvation but rather of aspartate catabolism. AspC is known to be a bidirectional enzyme capable

of degrading aspartate into the TCA intermediate oxaloacetate. Thus, we hypothesized that one possible reason

for the expansion defect *in vivo* was the inability of Δ*aspC S.* Tm to fuel anaplerosis of the TCA cycle via

oxaloacetate during anaerobic respiration. Specifically, during gut inflammation, the pathogen has increased

access to both aspartate and inflammation-derived electron acceptors such as nitrate or tetrathionate, enabling

S. Tm's oxidative TCA cycle, using oxaloacetate for citrate synthesis. In line with this hypothesis, we find that

aspC-deficiency results in significant growth and fitness defects only when *S.* Tm is respiring in an aspartate

dose-dependent manner[20–22]. Using gene deletions in key TCA enzymes and supplementation of TCA

intermediates, we confirm the role of AspC in supporting the central oxidative metabolism of *S.* Tm during

anaerobic respiration. Altogether, this study deepens our understanding of the amino acid utilization by *S.* Tm,

in vivo.

RESULTS

Previous reports demonstrate that multi-organ site pathogens, such as *Staphylococcus aureus*, depend

on *de novo* aspartate synthesis for survival in murine osteomyelitis models and other organ sites[23]. Transposon

insertions in the aspartate aminotransferase of *S. aureus* result in decreased pathogen survival in the

osteomyelitis model of disease, as well as in the heart, kidneys, and liver of infected animals. Thus, suggesting

the requirement for aspartate production by the pathogen for survival under the nutrient landscape of systemic

organs. Another critical human pathogen is *S*. Tm, being one of the four leading causes of foodborne illnesses

worldwide[24]. *S.* Tm is an enteric pathogen with disease centering in the cecum of mice[25,26]. However, *S.* Tm can

also cause systemic disease by migrating to the liver, through biliary ducts, as well as the spleen through

hijacking of dendritic cells and spread through lymphatic vessels[27,28]. Additionally, the liver and spleen are known

reservoirs for *Salmonella* replication in murine models of *S.* Tm-induced Typhoid-like disease and humans

infected with *S.* Typhi and *S.* ParaTyphi serovars[17,23,29]. Work by Nuccio *et al.* suggests that *aspC* is highly

conserved amongst *Salmonella* serovars capable of causing systemic (Typhoid fever) or gastrointestinal disease

(gastroenteritis), suggesting that aspartate biosynthesis may be required for *Salmonella* survival in systemic host

sites during infection. However, there is a gap in knowledge regarding the dependence of aspartate

aminotransferases broadly by the pathogens in different infection-relevant organ sites.

To address whether aspartate biosynthesis is required for *S.* Tm survival during systemic infection, we

first constructed a *S.* Tm mutant lacking the major aspartate aminotransferase, encoded by *aspC,* and leveraged

this strain to perform a competitive infection between wild-type (WT) S. Tm and the isogenic *aspC*-deficient strain

($\Delta aspC$) in genetically resistant CBA/J mice. To do so, we infected CBA/J mice intraperitoneally with 10^4 colony-

forming units (CFU) of a 1:1 mixture of wild-type S. Tm and *S.* Tm $\Delta aspC$ (**Fig. 1A**), allowing the mice to carry

the infection for three, four, or five-days before euthanasia. We chose these time points to understand if there

were any temporal changes to the dependence of *aspC* by *S.* Tm before and after the onset of severe systemic

disease. In line with our choice of time points, mice were maintained for five d.p.i. lost significantly more weight

compared to those sacrificed at three d.p.i. (**Fig. 1B**). However, we observed no significant competitive

advantage for WT *S.* Tm over the *S.* Tm $\Delta aspC$ mutant (**Fig. 1C**). While we observed that the overall *S.* Tm

burden increased over time in all three organ sites (**Fig.1D-F**), no differences in CFU recovered of each genotype

were observed in any location following systemic infection (**Fig. 1E-G**). Together, these data suggest that, unlike

S. aureus, *S.* Tm does not require the activity of AspC to survive in systemic sites during infection.

S. Typhimurium requires AspC during murine models of gastroenteritis

Before spreading to systemic sites, *S.* Tm colonizes and expands in the gastrointestinal tract[27]. We

previously identified that *S.* Tm gains access to the amino acid aspartate during gut inflammation due to immune

cell-mediated killing of the resident microbiota[16]. Secondly, we described how *S.* Tm leverages this newly

available aspartate to generate fumarate via the aspartate ammonia-lyase AspA, supporting anaerobic

respiration during intestinal inflammation[16]. However, how *S.* Tm deals with aspartate limitation during initial

colonization before gaining access to excess aspartate during intestinal inflammation remained to be fully

elucidated. Given our observations of the dispensability of AspC during systemic infection, we explored the

necessity of AspC for *S.* Tm host colonization during its native route of infection, the fecal-oral route. To do so,

we orally gavaged CBA/J mice with 10^9 CFU of a 1:1 mixture of WT *S.* Tm and isogenic *S.* Tm Δ*aspC*, allowing

the animals to carry the infection for up to ten days (**Fig.2A**).

125   Following initial intestinal colonization, we observed no defects of *S.* Tm Δ*aspC* compared to WT, as we

recovered equal proportions of each genotype in feces one-day p.i. (**Fig. 2B**). However, as early as five days

p.i., we observed a ten-fold colonization defect for *S.* Tm Δ*aspC* compared to WT in feces, which increased to

~100-fold at nine days p.i. (**Fig.2B**). Following sacrifice, we observed that the *S.* Tm Δ*aspC* defect was restricted

to the intestinal lumen, with WT *S.* Tm outcompeting the isogenic Δ*aspC* mutant in the cecum and colon content

(**Fig.2C-D**). Additionally, AspC was not required for *S.* Tm survival in systemic sites such as the liver and spleen,

as we recovered equal proportions of each S. Tm genotype, corroborating our IP infection observations (**Fig.**

2C-D).

133   To further interrogate the requirement for *asp*C during *S.* Tm gastrointestinal infection, we repeated our

CBA/J mice infection model, now performing single infections. To do so, mice were orally infected with 10^9 CFU

of either WT *S.* Tm or isogenic Δ*aspC* mutant, and mice carried the infection for up to ten days (**Fig. 2E**). In line

with our competitive infection results, we observed no defects in the Δ*aspC* mutant at one-day p.i. as we

recovered similar CFU of WT and Δ*aspC* in feces. However, starting seven days p.i., we recovered significantly

less Δ*aspC S.* Tm compared to WT in the feces of infected mice by nine days p.i. (**Fig.2F**). Together, our findings

suggest that *aspC* is required during *S.* Tm-induced gastroenteritis, specifically during expansion in the gut

lumen.

Loss of T3SS does not significantly alter the dependence of aspC in *S*. Tm

143   Given our observation that the defect of Δ*aspC S.* Tm compared to the WT increased over time, in line

with the onset of gastroenteritis around days seven to ten, we hypothesized this phenotype to be inflammation-

dependent. To cause disease, *S.* Tm encodes two type III secretion systems, encoded by *Salmonella*

pathogenicity islands 1 and 2 (T3SSs; SPI-1 & SPI-2), to invade the host epithelium and spread systemically,

respectively[30,31]. Additionally, loss of both SPI-1 and SPI-2 renders *S.* Tm avirulent, unable to elicit gut

inflammation[16]. To further interrogate the relationship between intestinal inflammation onset and the necessity of

aspC for *S.* Tm intestinal colonization, we repeated our *in vivo* competitive infection in the CBA/J model of *S.*

Tm-induced gastroenteritis, now using a *S.* Tm strain unable to induce intestinal inflammation through the genetic

inactivation of T3SSs via deletions in *invA* and *spiB*[30,31]. Briefly, we orally gavaged CBA/J mice with 10^9 CFU of

a 1:1 mixture of Δ*invA*Δ*spiB S.* Tm and isogenic *S.* Tm Δ*aspC*, allowing the animals to carry the infection for up

to ten days (**Fig. 3A**). Interestingly, compared to our wild-type background, genetic inactivation of the two T3SSs,

increased the fitness defect of an *aspC*-deficient *S.* Tm, demonstrating a ten-fold defect significantly higher than

that observed in the WT background one-day p.i. in the feces of mice (**Fig. 3B, S1**). The competitive index

between Δ*invA*Δ*spiB S.* Tm and isogenic Δ*invA*Δ*spiB*Δ*aspC* strains in fecal context remained steady throughout

infection (between 10 to 100-fold) (**Fig. 3B**). Meanwhile, the competitive index between WT *S.* Tm and isogenic

Δ*aspC* strain increased as the infection progressed, reaching 100-1,000-fold at day nine post-infection (**Fig. 3B**).

While the competitive index between *S.* Tm WT and Δ*aspC* was significantly higher than the competitive index

between Δ*invA*Δ*spiB* and its isogenic Δ*aspC* mutant in fecal samples at nine days post-infection (**Fig. 3B**), no

significant differences are observed in the competitive index between the WT and Δ*invA*Δ*spiB* backgrounds in

cecal (**Fig. 3C, E**) and colon (**Fig. 3D, F**) contents at 10 days p.i. In cecum and colon contents, both *S.* Tm WT

and Δ*invA*Δ*spiB* strain significantly outcompeted their respective Δ*aspC*-deficient mutant to similar levels (**Fig.**

3C-F).

Given that the *S.* Tm Δ*aspC* colonization defect increases over time (**Fig. 3B**) which correlates with the

onset of intestinal inflammation, we hypothesized that AspC may be more critical during anaerobic respiration,

which *S.* Tm relies upon for expansion in the gut lumen during intestinal disease. To explore this hypothesis, we

cultured WT *S.* Tm and our *aspC*-deficient mutant anaerobically *in vitro* under conditions that model the healthy

and inflamed gut. Specifically, we grew WT S.Tm and Δ*aspC* in LB media or NCE minimal media supplemented

with glucose as a carbon source in NCE minimal media supplemented with glycerol as a carbon source in the

presence of aspartate and inflammation-derived electron acceptors such as nitrate, as we have previously

performed [16]. Neither strain demonstrated an overall growth defect in the presence of LB nor NCE supplemented

with glucose as a carbon source, which are conditions mimicking the healthy intestine (**Fig. 4B; S2A**). However,

we observed an aspartate-dependent growth defect in the *S.* Tm Δ*aspC* strain upon culture in NCE

supplemented with nitrate, using glycerol as a carbon source, which mimics the inflamed gut (**Fig. 4C, D**).

Specifically, *S.* Tm Δ*aspC* demonstrated growth defects when growing under aspartate-limiting conditions (0 or

0.1mM aspartate). However, the *S.* Tm Δ*aspC* growth defect was ameliorated through the addition of 10mM

aspartate (**Fig. 4D**). We have detected similar changes in magnitude in the abundance of aspartate in the gut

lumen during *S.* Tm infection, increasing from 1µM up to 10µM/g of feces [16]. Similar results were obtained under

conditions supplemented with either tetrathionate (**Fig. 4E**) or under hypoxia (**Fig. S2B**). To corroborate our

observations from growth assays, we performed an *in vitro* competitive infection comparing the fitness of *S.* Tm

WT versus the isogenic Δ*aspC* mutant under anaerobic respiration conditions*.* In line with our growth assay, we

observed that *S.* Tm Δ*aspC* is significantly outcompeted by the WT strain in aspartate-limited conditions in which

the bacterium was anaerobically respiring inflammation-derived electron acceptors (**Fig. 4F, G**). The fitness

defect of *S.* Tm Δ*aspC* during anaerobic respiration could be abrogated by adding 10 mM aspartate. Previous

work in our group and others demonstrated that exposure of *S.* Tm to aspartate significantly increases the

expression of aspartate catabolizing enzyme AspA, dependent on the two-component system DcuRS[15,16]. To

account for potential differences in the expression of *aspC* in the conditions we tested, we assayed *aspC*

expression in *S.* Tm grown anaerobically with and without nitrate or 10 mM aspartate (**Fig. 4H**). No significant

differences in *aspC* expression were detected between the conditions tested (**Fig.4H**). Together, these data

demonstrate that a loss of *aspC* significantly hinders the ability of *S.* Tm to anaerobically respire *in vitro.*

Loss of AspC results in altered biosynthetic processes in *S.* Tm during nitrate respiration

To further explore the requirement of AspC during nitrate respiration, we compared the gene expression

profile of *S.* Tm WT to Δ*aspC* cultured in minimal media. Given the critical role of aspartate in the central

metabolism of *S.* Tm, we aimed to interrogate how aspartate deficiency influenced biosynthesis processes that

rely upon aspartate as a precursor. Specifically, work done in *E. coli* and *S.* Tm demonstrates that these closely

related bacteria can use aspartate as a precursor for the synthesis of many biological molecules, such as amino

acids and nucleotides (**Fig. S3A**)*.* We were specifically interested in assessing differences in the biosynthetic

pathways in conditions that model the inflamed gut, as these are the conditions in which we identify an *aspC*-

dependent growth and fitness defect. To do so, we cultured either WT *S.* Tm or the isogenic Δ*aspC strain* in NCE

minimal media supplemented with 40 mM glycerol and 40 mM nitrate to evaluate differences in gene expression

between genotypes. First, we were able to confirm our genetic inactivation, as Δ*aspC* demonstrated a significant

reduction in the expression of *aspC* (**Fig. S3A-B)**. Additionally, we found that Δ*aspC* significantly upregulates

the aspartate importer encoded by *dcuA* but not the aspartate ammonia-lyase encoded by *aspA* (**Fig. S3C-D**).

Lastly, we report that loss of *aspC* in the presence of nitrate results in a significant increase in the expression of

genes associated with pyrimidine synthesis, such as *pyrB* and the amino acid lysine, *lysC* (**Fig. S3E-F)**. No

differences were observed between WT and Δ*aspC* in the expression of genes associated with methionine

synthesis, specifically *metL* (**Fig. S3G**). Altogether, these data suggest that genetic inactivation of *aspC* alters

the cellular demands of the bacterium, specifically increasing expression of genes associated with aspartate

uptake and synthesis of aspartate-dependent biomolecules (e.g., pyrimidines and lysine). However, our gene

expression analysis indicates that aspartate-dependent biosynthetic pathways remain functional in the absence

of AspC.

AspC supports the central metabolism of *S*. Tm during anaerobic respiration

Based on the observation that deletions in *aspC* significantly reduce *S.* Tm fitness during anaerobic

respiration (**Fig. 4**) as well as the limited impact of *aspC* deletion on aspartate-dependent biosynthesis pathways

in *S.* Tm *in vitro* under anaerobic respiration conditions (**Fig. S3E-G**), we hypothesized that AspC's role may not

be related to aspartate production. Instead, AspC may be required for *S.* Tm conversion of aspartate into

oxaloacetate (**Fig. 5A**). To explore the role of AspC in supporting *S.* Tm anaerobic respiration through

oxaloacetate production, we used a combination of *in vitro* supplementation using TCA intermediates and genetic

inactivation studies. First, we repeated our *in vitro* competitions between WT *S.* Tm and isogenic Δ*aspC* strain

in NCE media supplemented with 0.5% porcine mucin. We chose to perform our competitions using NCE + 0.5%

porcine gastric mucin to enable us to adequately model the conditions of the inflamed gut, utilizing a

physiologically relevant nutrient source (e.g., mucin), which allows *S.* Tm to ferment or respire available carbon

sources in the media. Additionally, we supplemented the NCE + 0.5% porcine mucin media with either 10 mM

fumarate, 10 mM succinate, or 10 mM oxaloacetate in the presence or absence of nitrate. We specifically chose

these TCA intermediates as they are used during both the branched chain TCA and oxidative TCA cycles (**Fig.**

5A). Like our previous observations in NCE minimal media supplemented with glycerol, WT *S.* Tm significantly

outcompeted Δ*aspC* only in mucin media supplemented with inflammation-derived electron acceptors such as

nitrate (**Fig. 5B-D**). If the role of AspC is to support *S.* Tm's ability to run the TCA cycle via oxaloacetate

production, supplementation of the media with other TCA intermediates should abrogate the *S.* Tm Δ*aspC* growth

defect under anaerobic respiration conditions. To test this hypothesis, we performed an *in vitro* competition in

NCE + 0.5% porcine mucin media supplemented with 10 mM fumarate, succinate, or oxaloacetate in the

presence or absence of nitrate. Notably, the addition of either of these TCA cycle intermediates to mucin media

did not result in a fitness defect of the Δ*aspC* mutant compared to the WT strain in the absence of nitrate (**Fig.5B-**

D). However, under anaerobic respiration conditions (e.g., mucin media + nitrate), the addition of fumarate (**Fig.**

5B), succinate (**Fig.5C**), or oxaloacetate (**Fig. 5D**) resulted in a significant reduction in the competitive advantage

of the WT *S.* Tm over the Δ*asp* mutant when compared to mucin media supplemented with nitrate alone (**Fig.5B-**

D). Altogether, these data suggest that loss of *aspC* results in a deficiency in TCA intermediates, namely

oxaloacetate, which may lead to a reduction in energy production potential during anaerobic respiration.

Before the onset of inflammation, *S.* Tm has been shown to rely upon the branched-chain TCA, which is

supported by fumarate respiration via the fumarate reductase FrdABCD[15]. However, once intestinal inflammation

is established and electron acceptors become available, *S.* Tm relies on the canonical oxidative TCA cycle

through the coordinated expression of TCA enzymes such as *sdhABCD* and *gltA* [32]. To further interrogate the

relationship between the progression of either the reductive branched-chain or oxidative TCA cycle and the

defect of the Δ*aspC S.* Tm mutant during anaerobic respiration, we constructed mutants lacking the citrate

synthase, *gltA*, the first component of the succinate dehydrogenase, *sdhA*, and the fumarate reductase,

frdABCD. These genes represent significant steps of the branched chain reductive (FrdABCD) and oxidative

(GltA & SdhA) TCA cycles in *S.* Tm (**Fig. 5A**). To understand the role of AspC in the TCA enzyme-deficient strain

backgrounds, we constructed *S.* Tm isogenic mutants lacking *aspC,* Δ*gltA*Δ*aspC,* Δ*sdhA*Δ*aspC,* and

Δ*frdABCD*Δ*aspC,* respectively. We hypothesized, based on our supplementation studies, that interruption of the

TCA cycle progression via deletions in *gltA* and *sdhA* but not *frdABCD* would abrogate the defect of *S.* Tm Δ*aspC*

during nitrate respiration. To test this hypothesis, we performed an *in vitro* competition in 0.5% porcine mucin

media in the presence or absence of nitrate, specifically competing *S.* Tm WT, Δ*frdABCD,* Δ*sdhA,* Δ*gltA* with their

respective isogenic *aspC* mutants.

First, to assess the requirement for *aspC* during the reductive branched-chain TCA cycle in *S.* Tm, we

compared the competition index of our mutant Δ*frdABCD*: Δ*frdABCD*Δ*aspC* to WT:Δ*aspC* in minimal mucin media

without nitrate. Interestingly, we observed a significantly increased fitness defect of Δ*frdABCD* Δ*aspC* compared

to the Δ*frdABCD* isogenic control (CI~10) (**Fig. S4A**) over that of WT vs. Δ*aspC* (CI~1). In line with the literature

that *frdABCD* is significantly downregulated during exposure to nitrate, we observed no significant difference in

the fitness defect of an Δ*aspC* mutant during nitrate respiration in the *S.* Tm background lacking *frdABCD* (**Fig.**

5E). Together, these data suggest that AspC supports the branched chain TCA cycle during which fumarate

respiration occurs and that FrdABCD is not required for the AspC-mediated effect on the *S.* Tm oxidative TCA

cycle during nitrate respiration.

To determine the requirement for *sdhA* and *gltA* to the AspC-mediated support of *S.* Tm growth during

the branched chain TCA cycle, we compared the competition index of our mutants Δ*sdhA*: Δ*sdhA*Δ*aspC* or Δ*gltA*:

Δ*gltA*Δ*aspC* to WT: Δ*aspC* in 0.5% porcine mucin media without nitrate. Loss of *aspC* conferred no fitness defect

in S. Tm strains lacking *sdhA* and *gltA* (**Fig. S4B**)*.* Conversely, loss of *sdhA* or *gltA* significantly abrogated the

fitness defect of a *S.* Tm Δ*aspC* mutant when compared to the isogenic WT background when strains were grown

in 5% porcine mucin media supplemented with nitrate, a condition that enables S. Tm to run the oxidative TCA

cycle (**Fig. 5F-G**). Together, our results using a genetic approach relying on the deletion of genes in *S.* Tm

involved in the TCA cycle complement the results from the TCA cycle intermediate supplementation experiments

(**Fig. 5B-D**)   and pinpoint the requirement for *aspC* to support the progression of the oxidative but not reductive

branched-chain TCA cycle in *S.* Tm.

DISCUSSION

Herein, this study establishes a role for the aspartate aminotransferase, AspC, in the expansion of

Salmonella Typhimurium in the mammalian gut. Using intraperitoneal and intragastric infection routes, we report

that AspC is only required during expansion in the intestinal lumen and is dispensable in systemic sites such as

the liver and spleen. Additionally, we find that the necessity of AspC for *S.* Tm intestinal survival to be potentially

independent of the main virulence program of *S.* Tm, the two T3SSs. However, we observe the loss of the ability

to invade, and intracellular replication significantly increases the defect of an isogenic *aspC*-deficient strain one

d.p.i. Thus, our data suggest *S.* Tm may subvert initial aspartate starvation in the healthy gut by invading the gut

epithelium. This hypothesis is in line with work by Popp *et al.* that demonstrates that AspC is not required for

invasion or intracellular replication within HeLa cells[18]. Granted, there may be cell-type-specific differences in

nutrient availability between uterine epithelial and intestinal epithelial cells, and future work should aim to

understand the nutrient requirements between different infection-relevant organ sites.

Our study indicates that a loss of *aspC* results in altered metabolic demands for the pathogen, as

determined by qPCR, *in vitro* supplementation, and genetic inactivation of key TCA enzymes. We observe that

loss of AspC results in increased expression of genes encoding enzymes associated with the import and

utilization of aspartate for the synthesis of amino acids and nucleotides. However, these alterations have a limited

induction, resulting in less than a 2-fold change, suggesting tight control of these central metabolic processes.

Alternatively, we find that *S.* Tm Δ*aspC* demonstrates a significant growth defect under *in vitro* conditions that

promote the reductive branched chain and oxidative TCA cycle. Thus, suggesting one possible explanation for

the defect of *S.* Tm Δ*aspC* in gut expansion is the inability of this strain to take advantage of the disruption in the

metabolic landscape of the gut during gastroenteritis.

Lastly, while we do not observe major differences in the competitive fitness of *S.* Tm Δ*aspC* in a

background lacking *frdABCD* under *in vitro* conditions supporting anaerobic respiration*,* we cannot rule out the

possibility of the fumarate reductase FrdABCD aiding in driving the oxidative TCA forward, as its expression is

induced in *S.* Tm under *in vitro* anaerobic growth conditions characterized by the presence of excess aspartate

and nitrate which resemble the growth conditions encountered by the pathogen in the inflamed gut[16]. Future

work should aim to untangle the relationship between FrdABCD and SdhABCD in supporting the pathogenesis

and expansion of *S.* Tm in the mammalian gut.

Altogether, our findings expand our understanding of *S.* Tm aspartate metabolism and its influence on

survival in different organ sites. Studies on bacterial metabolism are poised to elucidate previously unknown

aspects of pathogenic bacterial survival and inform therapeutic strategies targeting these essential metabolic

pathways.

MATERIALS & METHODS

In vitro

Bacterial culture

S. Typhimurium IR715 strains were routinely grown aerobically at 37°C in LB broth (10 g/L tryptone, 5

g/L yeast extract, 10 g/L sodium chloride) or on LB agar plates (10 g/L tryptone, 5 g/L yeast extract, 10 g/L sodium

chloride, 15 g/L agar). When appropriate, agar plates and media were supplemented with 30 μg/mL

chloramphenicol (Cm), 100 μg/mL carbenicillin (Carb), 100 μg/mL kanamycin (Km), or 50 μg/mL nalidixic acid

(Nal). For growth under anaerobic conditions, No-carbon-E (NCE) minimal medium (28 mM KH_2PO_4, 28 mM

$K_2HPO_4 \cdot 3H_2O$ and 16 mM $NaNH_4HPO_4 \cdot 4H_2O$) supplemented with 1 mM $MgSO_4$, 0.1% Casamino acids and 1%

Vitamin and Trace mineral solutions (American Type Culture Collection) was used. As a sole carbon source,

glucose (5mM) or glycerol (40 mM) was added to the bacterial culture in addition to L-aspartate (0.1-

10 mM). When stated otherwise, bacteria were cultured in Mucin minimal media, NCE minimal media (28 mM

KH_2PO_4, 28 mM $K_2HPO_4 \cdot 3H_2O$ and 16 mM $NaNH_4HPO_4 \cdot 4H_2O$) supplemented with 0.5% Porcine Gastric Mucin

(Type II) (ThermoFischer) supplemented with 40mM sodium nitrate, 10mM sodium fumarate, succinic acid, or

oxaloacetic acid.

Mutant generation

Mutant construction was done via lambda red recombination as previously described[34]. In brief, primers

were designed to include 40bps homologous regions upstream and downstream of the gene of interest and used

to amplify the Kan^R cassette in pKD13. Kan cassette was amplified, and PCR product DpnI was treated and

purified before electroporation into *S*. Tm IR715 harboring the helper plasmid pKD46 grown in the presence of

0.1M L-arabinose. The transformation was plated on LB agar supplemented with Kanamycin and incubated

overnight at 37°C, and colonies were checked via PCR. Following insertion confirmation, insertion was pushed

into a clean background as described[35] before transforming with pCP20 to remove the Kan^R cassette. Mutants

were PCR verified.

Growth Kinetics

Bacteria were streaked out onto fresh selective agar plates and incubated overnight. Single colonies

were taken and cultured in LB broth supplemented with appropriate antibiotics in biological triplicate for three

independent experiments. Overnight cultures were then back diluted 1:100 for 1-2 hours in 5mL of fresh LB broth

supplemented with antibiotics until the bacteria reached the mid-log phase. Cultures were then washed and

normalized to an $OD_{600}=1$. Cultures were then inoculated into a final volume of 200uL per well of pre-reduced

media to a final $OD_{600}=0.01$, shaking continuously, incubated at 37, and OD_{600} measured every hour.

Gene expression analysis

Bacteria were streaked out fresh onto selective agar plates and incubated overnight. Single colonies were taken, and cultures for biological replicates of n=5 in three independent experiments were grown overnight. Overnight cultures were diluted 1:100 for 2-3 hours to reach the mid-log phase of growth, harvested, and washed. Cultures normalized and inoculated into NCE minimal media containing ± 10mM aspartate and ± 40mM nitrate, pH normalized to 7.2. Bacteria were then incubated for 4 hours anaerobically at 37°C before being harvested and RNA extracted using Max Bacterial-RNA Extraction Reagent and TRIzol combined with the Invitrogen PureLink RNA mini-kit following the manufacturer's instructions.

In vitro competitive infections

Bacterial strains were struck out onto selective agar plates and incubated overnight. Single colonies takenand cultures for biological replicates of n=5 in three independent experiments were grown overnight. Overnight cultures were then diluted 1:100 for 2-3 hours to reach the mid-log phase of growth, harvested, and washed. Cultures were then normalized and inoculated into pre-reduced NCE or NCE+0.5% Porcine Gastric Mucin (type II) at a final bacterial concentration of $1x10^4$CFU/mL. Samples collected before and after 18hrs anaerobic incubation at 37°C. Samples serially diluted and plated on LB + Kan and LB + Cm, CFU enumerated, and CI calculated for both time points and normalized to calculate competition index of inoculum.

Mouse models of *S.* Tm infection

All animal experiments in this study were approved by the Institutional Animal Care and Use Committee at Vanderbilt University Medical Center. Female CBA were obtained from the Jackson Laboratory. The age at the beginning of the experiment was 6-7 weeks for all CBA. Conventional mice were housed in individually ventilated cages with ad libitum access to water and chow (Envigo Global 16% Protein Rodent Diet). Unless stated otherwise, a minimum of 6 mice were used based on variability observed in previous experiments. All mice were monitored twice per day, and cage bedding was changed every two weeks. At the end of the experiments, mice were humanely euthanized using carbon dioxide inhalation and cervical dislocation. Animals

that had to be euthanized for humane reasons before reaching the predetermined time point were excluded from

the analysis.

Intraperitoneal infection

7-week-old CBA/J mice were purchased from Jackson Labs Inc., infected with 10^4 C.F.U. of each strain,

and carried for 96 hours post-infection before sacrifice. Mice were weighed every day post-infection. At sacrifice,

peritoneal lavage, liver, spleen, and intestinal content were collected and plated for bacterial burden via serial

dilution onto LB agar supplemented with either Chloramphenicol or Kanamycin, dependent on strain background.

Intragastric infection

7-week-old CBA/J mice were purchased from Jackson Labs Inc. and were infected intragastrically with

10^9 C.F.U. of each strain for a single-strain infection or a 1:1 ratio of WT and respective isogenic mutant strains

for competitive infections. Post-infection mice were maintained for ten days weighing daily and collecting feces

every other day for bacterial burden enumeration. At sacrifice, mice were euthanized, and liver, spleen, and

intestinal tissue and content were taken for bacterial enumeration via homogenization and serial dilution. Tissue

was taken for histopathology evaluation.

Quantification and Statistical analysis

Statistical data analysis was performed using GraphPad PRISM. Fold changes of ratios (bacterial

competitive index and mRNA levels), and bacterial numbers were transformed logarithmically prior to statistical

analysis. An unpaired or paired Student's t test was used on the transformed data to determine whether

differences between groups were statistically significant ($p < 0.05$). When more than two treatments were used,

statistically significant differences between groups were determined by one-way ANOVA followed by Tukey's

HSD test (between > 2 groups).

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Author contributions

Conceptualization, N.G.S., and M.X.B.; Methodology, N.G.S, and M.X.B.; Investigation, N.G.S., M.X.B., H.F.A.,

J.O., K.M.J.; Writing – Original Draft, N.G.S.; Writing – Review & Editing, N.G.S., M.X.B.; Funding Acquisition,

M.X.B.; Resources, M.X.B.; Supervision, M.X.B.

407
408 **FIGURE LEGENDS**
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Figure 1: *S. Tm does not require AspC for systemic survival following intraperitoneal injection*.

CBA/J mice were infected with a competitive 1:1 ratio of WT and *aspC*-deficient *S*. Tm IR715, via intraperitoneal

injection at a dose of 10^4 CFU. Mice were allowed to carry the pathogen for pre-determined time points, prior to

human euthanasia and sample collection. (A) Infection Schematic. (B) Weight-loss percentage compared to

inoculation weight, of mice sacrificed three-, four-, and five-days post-infection. (C) Competitive index of inoculum

at each time point based on the proportion of *S*. Tm in liver and spleen homogenate as well as intraperitoneal

lavage fluid. (D) *S.* Tm burden of each genotype in the Liver. (E) *S.* Tm burden of each genotype in the CFU/g

in spleen. (F) *S.* Tm burden of each genotype in the intraperitoneal fluid following lavage. N=6 per time point.

Geometric mean with geometric SD. Multiple t-test.

Figure 2: Deletion of *aspC* results in a significant expansion defect only in the cecum and colon, during

murine model of gastroenteritis. To interrogate the necessity the AspC through the canonical fecal-oral route

of infection, we then gavaged CBA/J mice with a competitive 1:1 ratio of our WT and Δ*aspC* mutant. (A)

Schematic for competitive *in vivo* infection. (B) Competition index of inoculum over time in feces. (C) Competition

index of inoculum ten d.p.i. from systemic and gut lumen samples of infected mice. To corroborate our

observations, we repeated our infection, with either of our strains in isolation. (D) Schematic for single infection.

(E) *S*. Tm burden in feces overtime in mice infected with either WT or Δ*aspC* mutant. (F) Pathohistological scoring

of liver, spleen, and cecal tip of WT or *aspC*-deficient infected CBA/J mice ten d.p.i. N=6 per condition. Geometric

mean and Geometric SD. Paired-end (D) or Unpaired T-test (E).

Figure 3: Genetic inactivation T3SSs results in a colonization defect of Δ*aspC* but does not alter overall

expansion defect. Based on our findings during single and competitive infections, we then wanted to understand

if the necessity of AspC was related to the ability of *S*. Tm to invade and systemically spread within the murine

host. To do so, we constructed isogenic mutants in an avirulent background and repeated our competitive

infection compared to that of a WT background, again in CBA mice. (A) Infection schematic of competitive

infection. (B) Competitive index of inoculum in feces over the course of the infection. Day 3 samples were not

collected. (C) Competitive index of inoculum in feces one d.p.i. (D) Competitive index of inoculum in cecal

content, and (E) colon content (F) *S*. Tm burden of each genotype in cecal content and colon content ten d.p.i.

N=6 per background, Paired- or Unpaired T-test. P=*, <0.05; **,<0.01; ***, <0.001; ****, <0.0001.

Figure 4: **AspC is required for *S*. Tm growth under aspartate limiting conditions, confers a significant**

fitness cost during anaerobic respiration, and is constitutively expressed by replicating cells. Given our

findings that the competitive defect we observed increased over the course of infection, and that S. Tm requires

the ability to respire during this time point, we aimed to interrogate the relationship of the function of AspC during

fermentation and anaerobic respiration. (A) Schematic of the enzymatic role of AspC in *S.* Tm. (B) Anaerobic

growth of WT and *aspC* deficient *S*. Tm in NCE minimal media supplemented with 5mM Glucose. (C) Anaerobic

growth of WT and *aspC* deficient *S*. Tm in NCE minimal media supplemented with 40mM Glycerol with or without

40mM Nitrate. (D) Anaerobic growth of WT and *aspC* deficient *S*. Tm in NCE minimal media supplemented with

(+) 0.1mM or (+++) 10mM Aspartate with Glycerol and Nitrate. (E) *In vitro* competition of WT vs *aspC* in NCE

supplemented with 40mM Tetrathionate, 10mM Aspartate, and 40mM Glycerol. (F) *In vitro* competition of WT vs

aspC in NCE supplemented with 40mM Nitrate, 10mM Aspartate, and 40mM Glycerol. (G) Relative expression

of *aspC* in WT *S*. Tm cultured anaerobically for 4hrs in media supplemented with 10mM Aspartate, 40mM

Glycerol, and 40mM Nitrate. N=3-10 per condition, at least 2 independent experiment for each, Geometric mean

with geometric SD. Multiple t-test or One-way ANOVA, P=*, <0.05; ****, <0.0001.

Figure 5: AspC is required for anaplerosis of the TCA by *S*. Tm during anaerobic respiration, *in vitro*.

Based on the findings that loss of *aspC* significantly reduces *S*. Tm growth and fitness during anaerobic

respiration of inflammation-derived electron acceptors, we aimed to understand if aspartate conversion into

oxaloacetate via AspC fueled pathogen growth. (A) Tricarboxylic acid cycle. (B-D) To confirm the role of AspC

during nitrate respiration, we performed competitive infections in the presence of absence of TCA intermediates.

Competitive index of inoculum between WT and Δ*aspC S.* Tm in the presence or absence of nitrate

supplemented with (B) Fumarate (C) Succinate, and (D) Oxaloacetate. (E-F) Additionally, we repeated our

competitive infections now in backgrounds lacking the enzymes responsible for the utilization of: (E) Fumarate

via fumarate reductase; (F) succinate via succinate dehydrogenase subunit A; (G) oxaloacetate via citrate

synthase. N= 10 per condition. One-way ANOVA or T-test. P=*, <0.05; **,<0.01; ***, <0.001; ****, <0.0001

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FIGURE 1

FIGURE 2

FIGURE 3

FIGURE 4

FIGURE 5

SUPPLEMENTARY MATERIALS
 Supplementary Table 1: Bacterial strains and plasmids used in this study.

Bacterial Strain	Source	Identification
S. Typhimurium, IR715 ATCC 14028S Nal[R]	Stojiljkovic et al.[47]	IR715
S. Typhimurium, IR715 Δ*phoN*::Tn*10d*-Cm[R]	Faber et al.[48]	FF176
S. Typhimurium, IR715 Δ*phoN*::Km[R]	Kingsley et al.[49]	AJB715
S. Typhimurium, IR715 Δ*aspC*::Km[R]	This study	NS42
S. Typhimurium, IR715 Δ*aspC*	This study	NS43
S. Typhimurium, IR715 Δ*frdABCD*	This study	WJ28
S. Typhimurium, IR715 Δ*frdABCD*Δ*phoN*::Tn*10d*-Cm[R]	This study	WJ30
S. Typhimurium, IR715 Δ*invA*Δ*spiB*	Rivera-Chávez et al.[50]	SPN487
S. Typhimurium, IR715 Δ*invA*Δ*spiB*Δ*aspC*::Km[R]	This study	NS301
S. Typhimurium, IR715 Δ*invA* Δ*spiB* Δ*phoN*::Tn*10d*-Cm[R]	This study	WJ52
S. Typhimurium, IR715 Δ*invA*Δ*spiB*Δ*aspC*	This study	NS311
S. Typhimurium, IR715 Δ*invA* Δ*spiB*Δ*aspC*Δ*phoN::*Km[R]	This study	NS313
S. Typhimurium, IR715 Δ*sdhA*::Km[R]	This study	NS314
S. Typhimurium, IR715 Δ*gltA*::Km[R]	This study	NS315
S. Typhimurium, IR715 Δ*sdhA*Δ*aspC*::Km[R]	This study	NS316
S. Typhimurium, IR715 Δ*gltA*Δ*aspC*::Km[R]	This study	NS317
S. Typhimurium, IR715 Δ*sdhA*ΔphoN::Tn10d-Cm[R]	This study	NS318
S. Typhimurium, IR715 Δ*gltA*Δ*phoN*::Tn10d-Cm[R]	This study	NS319
S. Typhimurium, IR715 Δ*sdhA*Δ*aspC*Δ*phoN*::Km[R]	This study	NS320
S. Typhimurium, IR715 Δ*gltA*Δ*aspC*Δ*phoN*::Km[R]	This study	NS321
Plasmid	**Source**	**Identification**
Plasmid: pKD46, Spec[R] P_{BAD}-*gam-beta-exo oriR101 repA101*[ts]	Datsenko and Wanner[54]	pKD46
Plasmid: pKD3, Carb[R] FRT Cm[R] FRT PS1 PS2 *oriR6Kγ*	Datsenko and Wanne[54]	pKD3
Plasmid: pKD13, Carb[R] FRT Km[R] FRT PS1 PS4 *oriR6Kγ*	Datsenko and Wanner[54]	pKD13
Plasmid: pCP20, CarbR FLP *oripSC101* CmR r*epA101*[ts] MbeC	Datsenko and Wanner[54]	pCP20

Supplementary Table 2: Primers used in this study.

Primer	Sequence
IR715_gltA_delF	GCT ATT GAA CTG GAT GTG CTA AAA GGT ACA CTC GGT CAA TG TAG GCT GGA GCT GCT TCG
IR715_gltA_delR	GAT TTT CAT GCC GTC AGT GTG CAT TTC ATT CCA GTG TGC AT TCC GGG GAT CCG TCG ACC
IR715_gltA_conF	GGT CAC TCT TTC ACC TGT TA
IR715_gltA_conR	GCC GGA AGG TGC AGA TAG AG
IR715-sdhA-del-F1	CAA ACC TGT GCG CTG CTC TCG AAA GTC TTC CCG ACC CGT T TG TAG GCT GGA GCT GCT TCG
IR715-sdhA-del-R1	CTG ATA CAG GGT ATG ACA CAA CCA GTT GGC ATC ATC ACG CAT TCC GGG GAT CCG TCG ACC
IR715-sdhA-con-F1	GCA ACG CCT CCG CAT TAG GA
IR715-sdhA-con-R1	CAC ACC TTC GCG GCA GGA AC
aspC-del-F1	ATA GCG GAT TTC CCT TCT GTA ACT ATA ATG GAA CCT CGT CTG TAG GCT GGA GCT GCT TCG
aspC-del-R1	ATT GCA GGC TTT TTT ATC GGT CAC GCC AGT CGG CAG CTT TAT TCC GGG GAT CCG TCG ACC
aspC-con-F1	TAC TTA CCA GTT CTG ATC AGC
aspC-con-R1	CGC TTG GCG ATG ATG TGA C
thrA_qFwd	GGCGTTCTACAGCCACTATTATC
thrA_qRev	CCGTAACAGATCGGCAAACA
metL_qFwd	GGGCGTTACTGGCTGTATAA
melL_qRev	CGCTGATCGAGAGAATCGTATC
lysC_qFwd	GGTACGCTGGTGTGCAATAA
lysC_qREv	CCTCGTGAGTGCAGCATATT
pyrI_qFwd	AACCAGTATCCTCCAGCTTTG
pyrI_qRev	TTGGCCAGCACCACATAAT
pyrB_qFwd	CAGCCGCGACGATCTTAAT
pyrB_qRev	GCTGGCGATCACTTTATGTTTC
asnA_qFwd	GAGGCTATATGGGCAGGAATTA
asnA_qRev	CAGTTCCTGACTGTGAACAAAC
IR715_qPCR_aspA_F	TCGTAACGGTGGTGTCGTTA
IR715_qPCR_aspA_R	CTGTGGCGCATATGTTATGG
IR715_qPCR_aspC_F	CAGACCGCTGAATGAGAACA
IR715_qPCR_aspC_R	GCCATTCGCGCTAACTACTC
IR715_qPCR_dcuA_F	GATGACCCTGGATGACGCTA
IR715_qPCR_dcuA_R	AAACCGCTGATGAACACCAC
K1	CAGTCATAGCCGAATAGCCT

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595 **Figure S1: Deletion of ∆*aspC* does not confer a growth defect compared to WT when cultured**
596 **anaerobically in LB broth but does under hypoxia in minimal media.** Related to Figure 4. Growth of WT and
597 *aspC* deficient *S*. Tm (A) anaerobically in LB or (B) under hypoxic (0.8% O_2) NCE minimal media supplemented
598 with Glycerol and (+) 0.1mM or (+++) 10mM Aspartate with Glycerol.N=3 per condition, Geometric mean and
599 Geometric SD Multiple t-test, P=*,<0.05.
600

Figure S2: AspC-deficiency alter central metabolism of *S.* Tm during anaerobic nitrate respiration. Related to Figure 5. Aspartate can fuel several other metabolic processes, we investigated the expression of genes involved in aspartate utilization in conditions supplemented with Nitrate, in which we observe a significant growth and fitness defect of the *aspC*-deficient *S.* Tm compared to the WT. (A) Schematic for the central role of aspartate in *S.* Tm metabolism. (B-G) Gene expression of WT and ΔaspC grown under nitrate respiration with glycerol as the sole-carbon source. (B) *aspC,* (C) *dcuA,* (D) *aspA,* (E) *pyrB*, (F) *lysC*, (G) *metL* N=5 per condition, Geometric mean and Geometric SD, Unpaired t-test; P=*, <0.05; **,<0.01; ***, <0.001; ****, <0.0001

611
612 **Figure S3: Deletion of *frdABCD* but not *sdhA* or *gltA*, significantly increases fitness defect of *aspC*-**
613 **deficient *S*. Tm during growth in mucin media alone.** Related to Figure 5. (A) Competitive index of inoculum
614 for loss of *aspC* in WT and *frdABCD*–deficient *S*. Tm backgrounds in the absence of Nitrate. (B) Competitive
615 index of inoculum for loss of *aspC* in WT and *gltA or sdhA*–deficient backgrounds in the absence of Nitrate. N=10
616 per condition, Geometric mean and Geometric SD. Unpaired t-test, P=****, <0.0001.
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