#### 1 Omicron-induced interferon signalling prevents influenza A virus

#### 2 infection

#### 3 Running title: Omicron inhibits influenza A virus infection

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#### 35 Abstract

36 Recent findings in permanent cell lines suggested that SARS-CoV-2 Omicron 37 BA.1 induces a stronger interferon response than Delta. Here, we show that BA.1 and 38 BA.5 but not Delta induce an antiviral state in air-liquid interface (ALI) cultures of 39 primary human bronchial epithelial (HBE) cells and primary human monocytes. Both 40 Omicron subvariants caused the production of biologically active type I ( $\alpha/\beta$ ) and III 41  $(\lambda)$  interferons and protected cells from super-infection with influenza A viruses. 42 Notably, abortive Omicron infection of monocytes was sufficient to protect monocytes 43 from influenza A virus infection. Interestingly, while influenza-like illnesses surged 44 during the Delta wave in England, their spread rapidly declined upon the emergence 45 of Omicron. Mechanistically, Omicron-induced interferon signalling was mediated via 46 double-stranded RNA recognition by MDA5, as MDA5 knock-out prevented it. The 47 JAK/ STAT inhibitor baricitinib inhibited the Omicron-mediated antiviral response, 48 suggesting it is caused by MDA5-mediated interferon production, which activates 49 interferon receptors that then trigger JAK/ STAT signalling. In conclusion, our study 1) 50 demonstrates that only Omicron but not Delta induces a substantial interferon 51 response in physiologically relevant models, 2) shows that Omicron infection protects 52 cells from influenza A virus super-infection, and 3) indicates that BA.1 and BA.5 induce 53 comparable antiviral states.

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55 Keywords: SARS-CoV-2; COVID-19; interferon; monocytes; influenza; super56 infection; antiviral state; BA.1; BA.5; Delta

57

#### 58 Introduction

59 SARS-CoV-2, the coronavirus that causes COVID-19, has caused the worst pandemic since the Spanish Flu in 1918-1920 [Bastard et al., 2022]. Virus-induced 60 61 interferon signalling has been shown to be critically involved in determining COVID-19 severity [Bastard et al., 2022; Chiale et al., 2022]. Individuals with defects in their 62 63 interferon response are predisposed to life-threatening COVID-19 [Bastard et al., 64 2022; Chiale et al., 2022], and a particularly pronounced interferon-related innate 65 immune response is anticipated to contribute to the lower COVID-19 severity observed 66 in children [Borrelli et al., 2021].

67 Recent findings suggested that SARS-CoV-2 Omicron BA.1 displays a lower 68 interferon antagonism than Delta [Bojkova et al., 2022; Bojkova et al., 2022a]. BA.1 69 and Delta viruses showed a similar replication pattern in interferon-deficient Vero cells, 70 but BA.1 replication was attenuated relative to Delta in interferon competent Calu-3, 71 Caco-2, and Caco-2-F03 (a highly SARS-CoV-2-susceptible Caco-2 subline [Bojkova 72 et al., 2022b]) cells [Bojkova et al., 2022; Hu et al., 2022; Shuai et al., 2022]. Moreover, 73 BA.1 induced a more pronounced interferon response than Delta [Bojkova et al., 2022; 74 Bojkova et al., 2022a].

Here, we investigated Delta, BA.1, and BA.5 replication in air-liquid interface (ALI) cultures of primary human bronchial epithelial (HBE) cells and primary human monocytes. To examine whether SARS-CoV-2-induced interferon induction results in a biologically relevant antiviral state, we further determined the impact of Delta, BA.1, and BA.5 infection on influenza A virus replication in ALI HBE cultures (H1N1) and monocytes (H1N1, H5N1), as interferon signalling is considered to be a major influenza A virus restriction factor [McKellar et al., 2021].

#### 82 Results

# Infection kinetics and interferon response induction by Omicron BA.1 and Delta in air-liquid-interface (ALI) cultures of primary human bronchial epithelial (HBE) cells

86 BA.1 displayed faster replication kinetics than Delta in ALI HBE cultures (Figure 87 1), as indicated by high SARS-CoV-2 nucleoprotein (NP), genomic RNA levels, and 88 caspase 3/7 activity (which reflects SARS-CoV-2 replication independently of whether 89 the virus causes cytotoxicity resulting in a cytopathogenic effect in a cell culture model 90 [Bojkova et al., 2022b]) (Figure 1B-D). However, the replication of both SARS-CoV-2 91 variants resulted in comparable peak NP and genomic RNA levels (Figure 1B-D). 92 While the BA.1 levels declined after a peak (at 24h post infection for NP and 72h for 93 genomic RNA), Delta levels continued to increase until 120h post infection (Figure 1B-D). These findings are in accordance with previous findings showing that BA.1 94 95 replicates faster than other variants in bronchial cells [Hui et al., 2022]. Independently 96 of the replication kinetics BA.1 and Delta caused similar reductions of the ALI HBE 97 barrier integrity (Figure 1E).

Also in agreement with previous findings [Alfi et al., 2022; Bojkova et al., 2022; Bojkova et al., 2022a], BA.1 induced a stronger interferon response than Delta, as indicated by the abundance and phosphorylation levels of a range of proteins involved in interferon signalling (Figure 1F). Moreover, only BA.1 but not Delta induced the secretion of biologically active interferon- $\alpha/\beta$  (Figure 1G) and - $\lambda$  (Figure 1H) by ALI HBE cultures, as demonstrated using HEK-reporter cell lines.

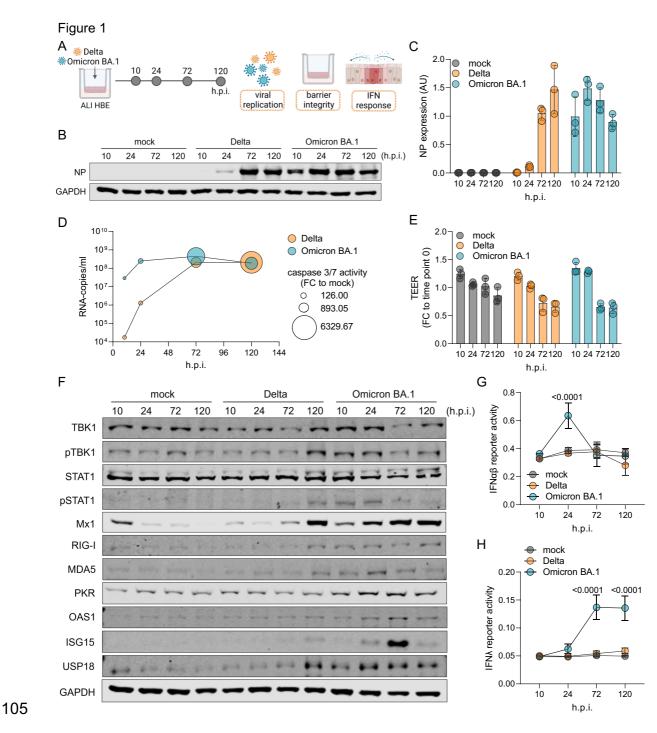


Figure 1. Infection kinetics and interferon response induction by Omicron BA.1
and Delta in air-liquid-interface (ALI) cultures of primary human bronchial
epithelial (HBE) cells. (A) Schematic depiction of the experimental set-up. (B)
Immunoblot of cellular SARS-CoV-2 nucleoprotein (NP) levels in BA.1- and Delta (MOI
1)-infected ALI HBE cultures at different time points post infection. (C) Quantification
of NP levels (mean ± SD) by ImageJ. (D) SARS-CoV-2 genomic RNA copy numbers

112 (Y axis) and caspase 3/7 activity (bubble size) determined in the apical medium of 113 BA.1- and Delta (MOI 1)-infected at different time points post infection. (E) Evaluation 114 of barrier integrity by measurement of TEER in BA.1- and Delta (MOI 1)-infected ALI 115 HBE cultures at different time points post infection. Bars represents mean ± SD of 116 three biological replicates. (F) Immunoblot indicating cellular levels of proteins 117 involved in interferon signalling in BA.1- and Delta (MOI 1)-infected ALI HBE cultures 118 at different time points post infection. (G,H) Interferon (IFN)- $\alpha/\beta$  (G) and IFN $\lambda$  (H) 119 responses induced in HEK reporter cell lines by apical washes from BA.1- and Delta 120 (MOI 1)-infected ALI HBE cultures collected at different time points post infection. P 121 values were determined by one-way ANOVA with subsequent Tukey's test.

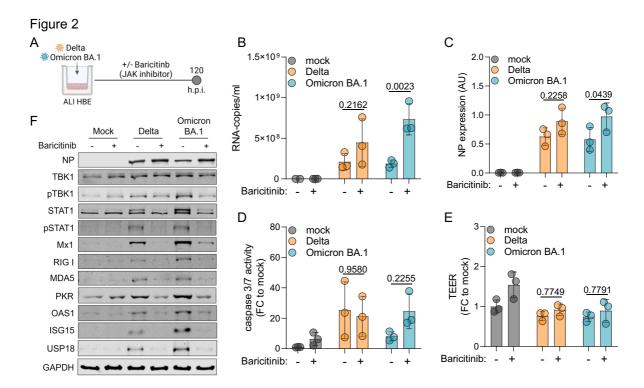
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123 Interferon- $\alpha/\beta$  peaked at 24h post infection (Figure 1G), which was followed by 124 a return to basal levels, whereas interferon- $\lambda$  remained elevated until 120h post 125 infection (Figure 1H). Short-term interferon type I ( $\alpha/\beta$ ) responses cause a protective 126 antiviral response, while long-term interferon activity is associated with potentially deleterious inflammation [Forero et al., 2019; King & Sprent, 2021]. In contrast, 127 128 sustained interferon type III ( $\lambda$ ) responses inhibit respiratory virus replication at 129 epithelial barriers in the respiratory tract and prevent excessive inflammation [Forero 130 et al., 2019; Prokunina-Olsson et al., 2020; King & Sprent, 2021]. Hence, the interferon 131 type I and III responses observed in BA.1-infected ALI HBE cultures add further 132 evidence explaining why Omicron is less pathogenic than other SARS-CoV-2 variants 133 like Delta [Wang et al., 2022].

# JAK/ STAT inhibition suppresses BA.1-induced interferon signalling and increases BA.1 replication in air-liquid-interface (ALI) human bronchial epithelial (HBE) cell cultures

138 Interferon signalling can be induced in a STAT1-dependent and -independent manner [Rani et al., 2010; Bastard et al., 2022; Chiale et al., 2022]. In hibition of JAK/ 139 140 STAT signalling using the JAK inhibitor baricitinib significantly increased BA.1 141 replication in ALI HBE cultures (Figure 2), as indicated by genomic RNA copy numbers 142 (Figure 2B) and cellular NP levels (Figure 2C). In contrast, Delta only displayed a non-143 significant trend towards higher genomic RNA copy numbers (Figure 2B) and cellular 144 NP levels (Figure 2C) in the presence of baricitinib. Baricitinib did not exert significant 145 effects on BA.1- and Delta-mediated caspase 3/7 activation (Figure 2D) and the ALI 146 HBE barrier function (Figure 2E), although there was a non-significant trend towards 147 enhanced caspase 3/7 activity in BA.1-infected ALI HBE cultures (Figure 2D).

148



#### 150 **Figure 2. Inhibition of JAK/STAT signalling promotes Omicron BA.1 replication.**

151 (A) Schematic depiction of the experimental set-up. (B) SARS-CoV-2 genomic RNA 152 copies in apical wash of air-liquid-interface (ALI) human bronchial epithelial (HBE) 153 cultures 120 h post SARS-CoV-2 (MOI 1) infection in the absence or presence of the 154 JAK inhibitor baricitinib  $(1\mu M)$ . Bars represent mean ± SD of three biological replicates. 155 (C) NP levels in SARS-CoV-2 (MOI 1)-infected ALI HBE cultures in the absence or 156 presence of baricitinib (1µM) as determined by immunoblotting. Bars represent mean 157 ± SD of three biological replicates. (D) Caspase 3/7 activation in apical washes of 158 SARS-CoV-2 (MOI 1)-infected ALI HBE cultures in the absence or presence of 159 baricitinib (1µM) 120h post infection. Bars display mean ± SD of three biological 160 replicates. (E) Barrier integrity in SARS-CoV-2 (MOI 1)-infected ALI HBE cultures in 161 the absence or presence of baricitinib (1µM) measured by TEER at 120h post 162 infection. Mean ± SD of three biological replicates is presented. (F) Immunoblot 163 indicating cellular levels of proteins involved in interferon signalling in SARS-CoV-2 164 (MOI 1)-infected ALI HBE cultures at 120h post infection in the presence or absence 165 of baricitinib (1µM). All P values were calculated by Student's t-test.

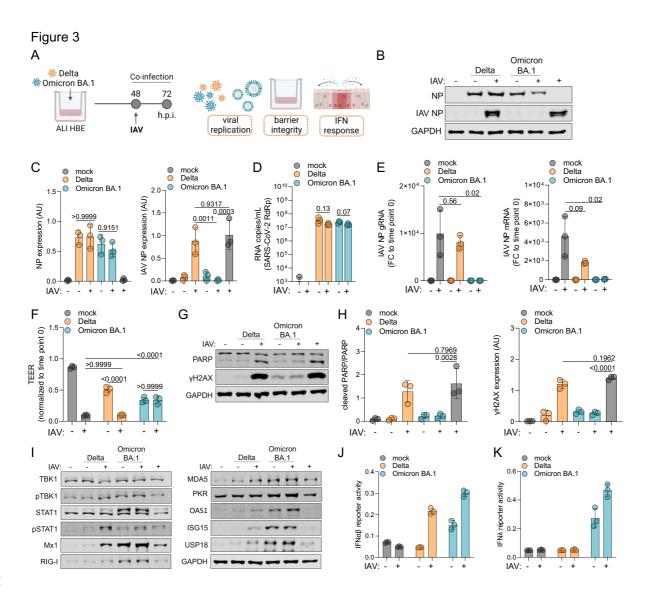
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Western blot analysis confirmed that baricitinib not only increased BA.1 replication but also suppressed BA.1-induced interferon signalling (Figure 2F). Taken together, these findings indicate that the pronounced interferon response induced by BA.1 is mediated via STAT1 and that it attenuates BA.1 replication.

BA.1-induced interferon signalling protects air-liquid-interface (ALI) human
bronchial epithelial (HBE) cell cultures from H1N1 influenza A virus superinfection

Next, we here infected ALI HBE cultures with BA.1 or Delta (both MOI 1) for 48h prior to infection with H1N1 influenza A virus (MOI 2) (Figure 3A) to examine whether the BA.1-induced interferon response may induce an antiviral state that interferes with H1N1 replication. Controls confirmed that both BA.1 and Delta replication as well as BA.1- and Delta-induced interferon induction were comparable to the data presented in Figure 1 (Suppl. Figure 1).

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#### 183 Figure 3 Omicron BA.1 but not Delta infection prevents H1N1 influenza A virus

184 (IAV) replication. (A) Schematic of the experimental set-up. (B) Immunoblot of the 185 SARS-CoV-2 nucleoprotein (NP) and H1N1 IAV NP levels 24 h post infection with 186 H1N1 strain A/NewCaledonia/20/99 (MOI 2). (C) Quantification of immunoblots from 187 (B). Bars represent mean ± SD of three biological replicates. P values were calculated 188 by two-way ANOVA. (D) Genomic RNA copies of the SARS-CoV-2 RNA-dependent 189 RNA polymerase (RdRp) in the apical wash of ALI HBE cultures 24 hours post 190 infection with H1N1 (MOI 2). Values represent means ± SD of three biological 191 replicates. P values were determined by Student's t-test. (E) IAV NP genomic RNA 192 (gRNA, left) or mRNA (right) levels 24h post infection with H1N1 (MOI 2). Bars display 193 means ± SD of three biological replicates. P values were determined by Student's t-194 test. (F) Barrier integrity measure by transepithelial electric resistance (TEER) in 195 single- or co-infected ALI cultures. Bars display means ± SD of three biological 196 replicates. P values were calculated by two-way ANOVA. (G) Immunoblot of PARP 197 cleavage and vH2AX after single- or co-infection. (H) Quantification of the immunoblots from (G). Values represent the mean ± SD of three biological replicates. 198 199 P values were calculated by two-way ANOVA. (I) Immunoblots displaying the levels of 200 proteins involved in interferon signalling in single- and co-infected ALI HBE cultures. 201 (J, K) Interferon (IFN) $\alpha/\beta$  (J) or IFN $\lambda$  (K) signalling in HEK-reporter cell lines incubated 202 with apical washes of single- and co-infected ALI HBE cultures 24 hours post infection 203 with H1N1 (MOI 2).

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205 Determination of H1N1 nucleoprotein (NP) levels indicated that only BA.1 but 206 not Delta suppressed H1N1 infection in ALI HBE cultures (Figure 3B, Figure 3C).

H1N1 super-infection did not significantly reduce SARS-CoV-2 levels in ALI HBEcultures (Figure 3D).

209 Genomic H1N1 NP RNA and H1N1 NP mRNA levels confirmed that only BA.1 210 caused a significant reduction of H1N1 replication (Figure 3E). Moreover, only BA.1 211 infection prevented H1N1-induced cytotoxicity as indicated by transepithelial electric 212 resistance (TEER) measurement (Figure 3F). Influenza A virus replication is 213 associated with the induction of apoptosis and DNA damage induction in host cells [Li 214 et al., 2015; Ampomah & Lim, 2020], and PARP cleavage and yH2AX levels also 215 confirmed that BA.1 infection suppressed H1N1-induced cytotoxicity (Figure 3G, 216 Figure 3H).

The analysis of proteins involved in interferon signalling showed that also in the presence of H1N1 only BA.1 induced a pronounced interferon response (Figure 3I). In agreement, only BA.1-infected (but not of Delta-infected) ALI HBE cultures produced biologically active type I ( $\alpha/\beta$ ) and III ( $\lambda$ ) interferons, as demonstrated using HEKreporter cell lines (Figure 3J, Figure 3K). Taken together, these findings indicate that only BA.1 but not Delta induces an interferon-mediated antiviral state in ALI-HBE cultures that protects them from H1N1 infection.

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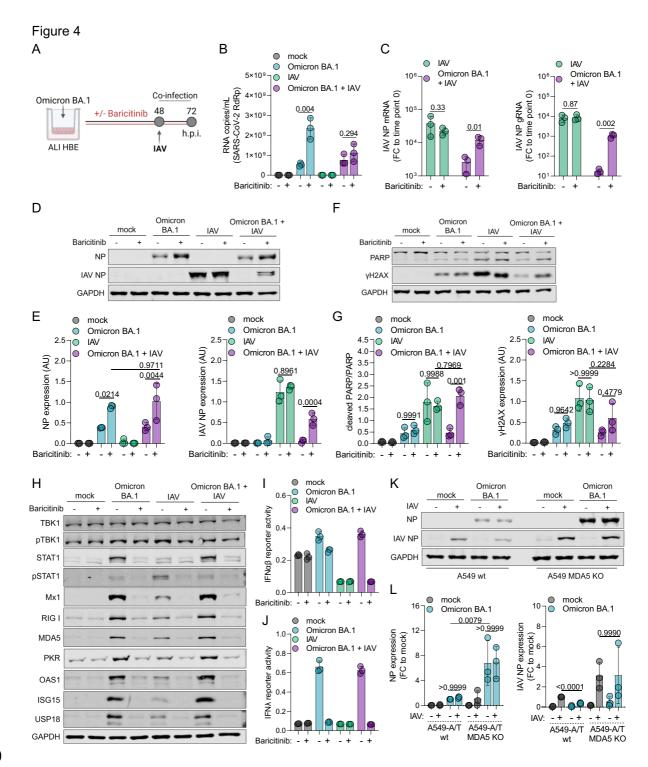
### Inhibition of JAK/ STAT signalling promotes H1N1 influenza A virus replication in BA.1-infected cells

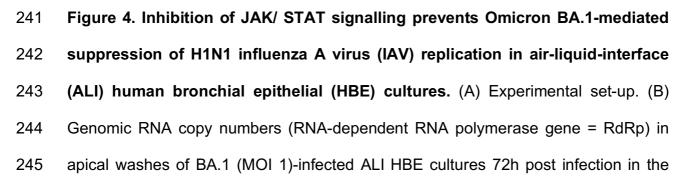
Next, we investigated the effect of the JAK inhibitor on the BA.1-mediated suppression of H1N1 replication (Figure 4A). In agreement with the data presented in Figure 2 and Figure 3, baricitinib increased BA.1 replication as indicated by genomic RNA copies of the viral RNA-dependent RNA polymerase gene (Figure 4B). Moreover, baricitinib prevented the BA.1-mediated inhibition of H1N1 replication as indicated by

- 232 H1N1 NP mRNA and genomic RNA levels (Figure 4C) and H1N1 NP protein levels
- 233 (Figure 4D, Figure 4E).

In line with our previous findings, baricitinib also antagonised BA.1-induced

- suppression of H1N1-induced apoptosis as indicated by PARP cleavage and H1N1-
- 236 induced DNA damage as indicated by cellular  $\gamma$ H2AX levels (Figure 4F, Figure 4G).
- 237 Furthermore, baricitinib abrogated the BA.1-mediated protection of the ALI HBE
- 238 barrier integrity from H1N1-induced cytotoxicity (Suppl. Figure 2).





246 absence or presence of baricitinib 1µM. Values represent mean ± SD of three 247 biological replicates. P values were determined by Student's t-test. (C) IAV NP mRNA 248 (left) or genomic RNA (right) levels 24h post H1N1 (MOI 2) infection in the absence or 249 presence of baricitinib 1µM. Bars represent mean ± SD of three biological replicates. 250 P values were determined by Student's t-test. (D) Immunoblot indicating BA.1 NP and 251 IAV NP protein levels 72 h post BA.1 infection in the absence or presence of baricitinib 252 1µM. (E) Quantification of the immunoblot results from (D) by ImageJ. Values 253 represent mean ± SD of three biological replicates. P values were calculated by two-254 way ANOVA. (F) Immunoblot indicating PARP cleavage and vH2AX protein levels 72 255 h post BA.1 infection in the absence or presence of baricitinib 1µM. (G) Quantification 256 of the immunoblot results from (F) by ImageJ. Bars represent the quantification of the 257 ratio between cleaved and total PARP (left) and cellular vH2AX levels (right). Values 258 represent mean ± SD of three biological replicates. P values were calculated by two-259 way ANOVA. (H) Immunoblot displaying levels of proteins involved in interferon 260 signalling in single- and co-infected ALI HBE cultures in the absence or presence of 261 baricitinib 1µM. (I, J) Interferon (IFN) $\alpha/\beta$  (I) or - $\lambda$  (J) activity in HEK reporter cell lines 262 incubated with apical washes of ALI HBE cultures 72h post infection. (K) BA.1 NP and 263 IAV NP protein levels in ACE2/ TMPRSS2-transduced A549 (A549-A/T) cells (A549-264 A/T wt) or A549-A/T MDA5 knock-out (KO) cells infected with BA.1 at MOI 0.01 for 265 24h and followed by influenza A virus (IAV) H1N1 (MOI 2) infection for an additional 266 24h. (L) Quantification of immunoblot results from (K) by ImageJ. Values represent 267 the mean ± SD of three biological replicates. P values were calculated by two-way 268 ANOVA.

As indicated by the cellular levels of proteins involved in interferon signalling, the BA.1-induced interferon was not affected by of H1N1 (Figure 4H). Moreover, baricitinib inhibited interferon signalling in response to ALI HBE infection with either single virus and after co-infection with both viruses (Figure 4H) and suppressed interferon- $\alpha/\beta$  and - $\lambda$  production (Figure 4I, Figure 4J).

The pattern recognition receptor MDA5 was previously shown to be critically involved in the SARS-CoV-2-mediated, and in particular the BA.1-mediated, interferon response [Yin et al., 2021; Bojkova et al., 2022; Bojkova et al., 2022a]. In agreement, BA.1-mediated inhibition of H1N1 infection was abrogated in MDA5 knock-out cells (Figure 4K, Figure 4L).

Taken together, our data show that BA.1-mediated suppression of H1N1 replication depends on the presence of MDA5 and is anatagonised by inhibition of JAK/ STAT signalling by baricitinib.

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#### 284 Similar suppression of H1N1 influenza A virus replication by BA.1 and BA.5

285 Next, we compared the effects of BA.1 on interferon signalling and H1N1 286 replication to those of the Omicron subvariant BA.5 (Figure 5A), which is currently 287 dominant in many parts of the world [Shrestha et al., 2022].

BA.1 and BA.5 infection of ALI HBE cultures resulted in similar SARS-CoV-2 NP protein levels (Figure 5B, Figure 5C) and induced similar interferon responses as indicated by the cellular levels of the interferon-stimulated gene products MX1 and ISG15 (Figure 5B) as well as interferon- $\alpha/\beta$  (Figure 5D) and - $\lambda$  (Figure 5E) production in BA.1- and BA.5-infected ALI HBE cultures.

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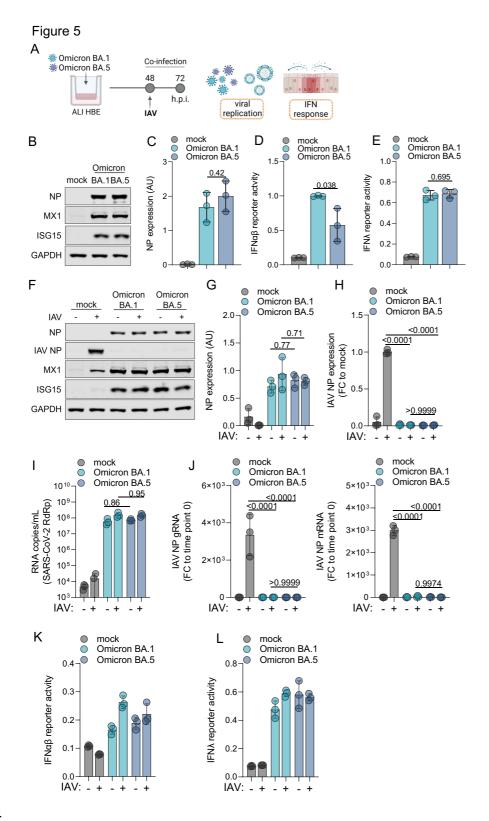


Figure 5. Effects of Omicron BA.1 and BA.5 on interferon signalling and H1N1 influenza A virus replication in air-liquid-interface (ALI) human bronchial epithelial (HBE) cell cultures. (A) Experimental design. (B) Cellular levels of the

298 SARS-CoV-2 nucleoprotein (NP) and proteins involved in interferon signalling (MX1, 299 ISG15) in BA.1- and BA.5 (MOI 1)-infected ALI HBE cultures 48h post infection. (C) 300 Quantification of the NP immunoblot results from (B). Values represent mean ± SD from three biological replicates. P values were determined by Student's t-test. (D,E) 301 302 Interferon- $\alpha/\beta$  (D) or - $\lambda$  (E) promotor activity in HEK reporter cell lines incubated with 303 apical washes of BA.1- or BA.5-infected ALI HBE cultures 48h post infection. (F) 304 SARS-CoV-2 NP (NP), influenza A virus NP (IAV NP), MX1, and ISG15 protein levels 305 in BA.1 (MOI 1)-infected, BA.5 (MOI 1)-infected, IAV H1N1 (MOI 2)-infected, BA.1/ 306 IAV co-infected, or BA.5/ IAV co-infected ALI HBE cultures. (G,H) Quantification of 307 SARS-CoV-2 NP (G) and IAV NP (H) levels from (F) by ImageJ. (I) Genomic SARS-308 CoV-2 RNA (RNA-depended RNA polymerase/ RdRp gene) levels in BA.1-infected, 309 BA.5-infected, BA.1/ IAV co-infected, and BA.5/ IAV co-infected cells 72h post 310 infection. Values represent mean ± SD from three biological replicates. (J) Genomic 311 IAV NP (gRNA) copy numbers and IAV NP mRNA levels in BA.1-infected, BA.5-312 infected, BA.1/ IAV co-infected, and BA.5/ IAV co-infected cells 72h post infection. (K, 313 L) Interferon- $\alpha/\beta$  (K) or - $\lambda$  (L) promotor activity in HEK reporter cell lines incubated with 314 apical washes of BA.1-infected, BA.5-infected, BA.1/ IAV co-infected, and BA.5/ IAV 315 co-infected ALI HBE cultures 72h post infection.

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H1N1 co-infection did not significantly affect cellular SARS-CoV-2 NP levels or
cellular MX1 and ISG15 levels (Figure 5F, Figure 5G). However, both Omicron
subvariants suppressed H1N1 replication as indicated by cellular NP levels (Figure
5F, Figure 5H). These findings (limited impact of influenza A virus infection on SARSCoV-2 replication, BA.1- and BA.5-mediated suppression of H1N1 replication) were
confirmed by the determination of genomic SARS-CoV-2 RNA copy numbers (Figure

51), genomic influenza A virus RNA copy numbers (Figure 5J), and H1N1 NP mRNA levels (Figure 5J). Both variants also induced similar interferon responses in the presence or absence of H1N1 as indicated by interferon- $\alpha/\beta$  (Figure 5K) and - $\lambda$  (Figure 5L) production.

327 Taken together, BA.1 and BA.5 induce comparable interferon-mediated 328 antiviral states in ALI HBE cultures that prevent H1N1 replication.

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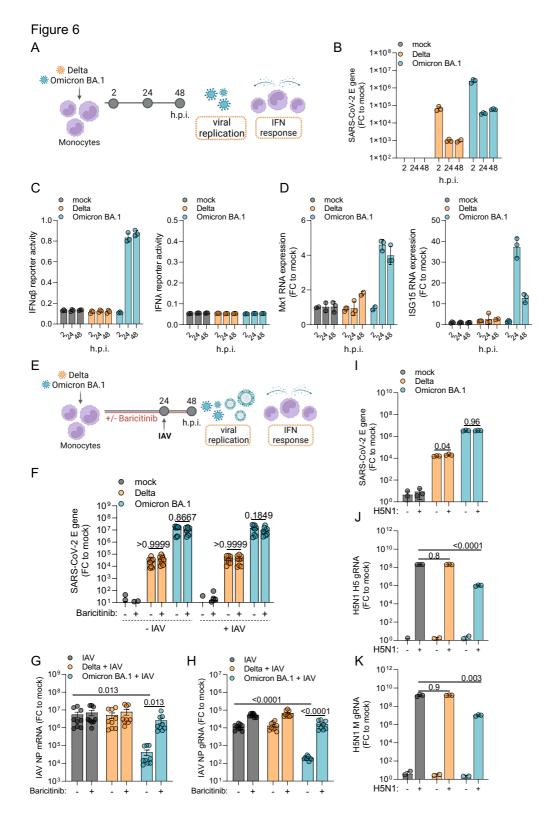
#### 330 BA.1-induced interferon signalling prevents H1N1 and H5N1 influenza A virus

#### 331 replication in primary human monocytes

332 Influenza A viruses can replicate in peripheral blood mononuclear cells, 333 including CD14+ monocytes [Lersritwimanmaen et al., 2015; Lee et al., 2017], and 334 interferon signalling in monocytes has been suggested to be a critical determinant of 335 influenza A virus pathogenesis [Hartshorn, 2020; Fourati et al., 2022]. Highly 336 pathogenic avian influenza A H5N1 virus has been described to replicate more readily 337 in monocytes and macrophages than H1N1 [Yu et al., 2011; Hoeve et al., 2012; Cline 338 et al., 2017; Lee et al., 2017; Lamichhane & Puthavathana, 2018; Lamichhane et al., 339 2018; Westenius et al., 2018]. Hence, we finally investigated the impact of BA.1 and 340 Delta on H1N1 and H5N1 virus infection in primary human monocytes (Figure 6A).

The determination of SARS-CoV-2 E mRNA levels by quantitative PCR showed that BA.1 and Delta did not replicate in primary human monocytes (Figure 6B), which confirmed previous findings showing that SARS-CoV-2 causes abortive infections in monocytes [McLaughlin et al., 2021; Junqueira et al., 2022]. Only BA.1 induced a pronounced interferon response as indicated by interferon  $\alpha/\beta$  signalling in a HEK reporter cell line incubated with supernatants from infected monocytes (Figure 6C), MX1 mRNA levels, and ISG15 mRNA levels (Figure 6D). In contrast to the findings in

- 348 ALI HBE cultures (Figure 1H, Figure 2K, Figure 4J, Figure 5L), supernatants from
- 349 BA.1-infected monocytes did not induce interferon-λ activity in a HEK reporter cell line
- 350 (Figure 6C).



#### 352 Figure 6. Impact of Omicron BA.1 and Delta on H1N1 and H5N1 influenza A virus 353 (IAV) infection of primary human monocytes. (A) Experimental design underlying 354 (B-D). (B) SARS-CoV-2 E gene expression levels as determined by quantitative PCR. 355 Values represent mean $\pm$ SD of three biological replicates. (C) interferon- $\alpha/\beta$ (IFN $\alpha/\beta$ ) 356 (left) or IFNλ (right) activity induced by supernatants of Delta and BA.1 (MOI 1)-357 infected primary human monocytes in HEK-reporter cell lines. (D) Mx1 (left) and ISG15 358 (right) mRNA levels in Delta and BA.1 (MOI 1)-infected primary human monocytes as 359 indicated by guantitative PCR. (E) Experimental design underlying (F-H). (F) SARS-360 CoV-2 E mRNA levels in monocytes infected with Delta (MOI 1), BA.1 (MOI 1), Delta 361 plus H1N1 IAV (MOI 2), or BA.1 plus H1N1 IAV (MOI 2) in the absence or presence 362 of baricitinib 1µM. P values were determined by Student's t-test. (G, H) H1N1 IAV NP 363 mRNA (G) or genomic mRNA (H) levels in monocytes infected with Delta (MOI 1), 364 BA.1 (MOI 1), Delta plus H1N1 IAV (MOI 2), or BA.1 plus H1N1 IAV (MOI 2) in the 365 absence or presence of baricitinib 1µM 24h post H1N1 IAV infection. P values were 366 calculated by two-way ANOVA. (I-K) Impact of BA.1 and Delta infection on highly 367 pathogenic avian H5N1 IAV virus infection in monocytes. SARS-CoV-2 genomic E 368 RNA levels (I), genomic H5N1 H5 RNA levels (J), and genomic H5N1 IAV M levels (K) 369 in monocytes infected with Delta (MOI 1), BA.1 (MOI 1), Delta plus H5N1 strain 370 A/Vietnam/1203/04 (MOI 1), or BA.1 plus H5N1 (MOI 1). P values were calculated by 371 two-way ANOVA. All values represent mean ± SD of monocyte preparations derived 372 from three different donors (A-H) or one donor (I-K), which were each tested in three 373 biological replicates.

374

375 Next, we tested the impact of BA.1 and Delta on H1N1 replication in primary 376 human monocytes in the absence or presence of the JAK inhibitor baricitinib (Figure

377 6E). Neither baricitinib nor H1N1 infection affect SARS-CoV-2 E mRNA levels (Figure378 6F).

379 Similarly as in ALI HBE cultures, however, BA.1 (but not Delta) infection 380 reduced H1N1 infection as indicated by H1N1 NP mRNA (Figure 6G) and H1N1 381 genomic NP RNA levels (Figure 6H), which was prevented by baricitinib (Figure 6G, 382 Figure 6H).

Highly pathogenic H5N1 avian influenza A virus also did not affect SARS-CoV2 levels in monocytes as indicated by SARS-CoV-2 genomic E RNA levels (Figure 6I).
However, the determination of H5N1 virus genomic H5 (Figure 6J) and M (Figure 6K)
levels showed that abortive BA.1 but not Delta infection inhibited H5N1 replication in
primary human monocytes.

Taken together, abortive BA.1 but not Delta infection induced an interferon response and reduced H1N1 and H5N1 replication in monocytes. The JAK/ STAT inhibitor prevented BA.1-mediated H1N1 and H5N1 inhibition in monocytes, indicating that BA.1-mediated influenza A virus inhibition is caused by BA.1-induced interferon signalling.

393

#### 394 Comparison of the circulation of influenza-like illnesses during the Delta and 395 BA.1 infection waves in England

An analysis comparing the spread of influenza-like illnesses (includes cases of clinically diagnosed influenza with or without a virus test confirmation) and COVID-19 in England showed that both Delta and influenza-like illnesses surged after all restrictions were removed on 19<sup>th</sup> July 2021. When BA.1 became the dominant variant, however, the number of influenza-like illnesses strongly declined and has not surged since (Suppl. Figure 3). These data fit with our findings showing that BA.1 but not Delta

- induces an interferon response that prevents influenza A virus infection. Similarly, an
  analysis of data from the John Hopkins Microbiology Laboratory found a notable
  decrease in influenza A virus infections during the Omicron BA.1 wave between
  November 2021 and February 2022 [Eldesouki et al., 2022]. However, future research
  will have to analyse a possible causative relationship in more detail.
- 409

#### 410 **Discussion**

411 Here, we investigated the impact of Delta and the Omicron subvariants BA.1 412 and BA.5 on interferon signalling in ALI HBE cultures and primary human monocytes. 413 Our results consistently showed that only Omicron causes pronounced production of 414 biologically active type I and type III interferons (Suppl. Figure 4). The kinetics of the 415 interferon type I ( $\alpha/\beta$ ) and type III ( $\lambda$ ) responses provided additional mechanistic 416 evidence explaining the reduced pathogenicity of Omicron relative to Delta [Wang et 417 al., 2022]. BA.1 infection caused an early, transient interferon- $\alpha/\beta$  peak, which is 418 anticipated to mediate a protective antiviral response but also to avoid deleterious 419 inflammatory processes associated with prolonged interferon type I activation [Forero 420 et al., 2019; King & Sprent, 2021]. Moreover, BA.1 infection caused a sustained 421 interferon  $\lambda$  response known to inhibit virus replication and prevent excessive 422 inflammation in the respiratory tract [Forero et al., 2019; Prokunina-Olsson et al., 2020; 423 King & Sprent, 2021].

The Omicron-induced interferon response generated an antiviral state that protected infected cells from super-infection with influenza A viruses, showing that the Omicron-induced interferon response is of functional relevance. Our analysis of the spread of influenza-like illnesses during the Delta and BA.1 infection waves (Suppl. Figure 3) and data from the John Hopkins Microbiology Laboratory [Eldesouki et al., 2022] found that the levels of influenza A virus transmission levels strongly declined with the emergence of BA.1, but a causative relationship remains to be established.

Despite consistent BA.1-mediated interferon induction across the different cell types, the relative replication kinetics of Omicron and Delta differed between the models. BA.1 replicated less effectively than Delta in Caco-2F03 and Calu-3 [Bojkova et al., 2022; Bojkova et al., 2022a], but (in agreement with other findings [Hui et al.,

435 2022) faster than Delta in ALI HBE cultures. This probably reflects the contribution of 436 many factors to SARS-CoV-2 replication. The spike (S) proteins of the BA.1 and Delta 437 isolates that we used differ in 13 amino acid positions in the S receptor binding domain 438 (Suppl. Figure 5). For example, BA.1 S is known to interact differently with its cellular 439 receptor ACE2, to utilise ACE2 from a broader range of species as receptor, and to 440 mediate increased virus uptake [Cameroni et al., 2022; Hong et al., 2022; Li et al., 441 2022; Meng et al., 2022; Rathnasinge et al., 2022; Willett et al., 2022; Zhang et al., 442 2022].

443 Increased BA.1 uptake may also contribute to the enhanced interferon 444 response. Mechanistically, the BA.1-induced interferon response is, in agreement with 445 previous studies in other cell types [Yin et al., 2021; Bojkova et al., 2022; Bojkova et 446 al., 2022a], primarily mediated by the recognition of double-stranded RNA by the 447 pattern recognition receptor MDA5, as suggested by the lack of a BA.1-induced 448 interferon in MDA5 knock-out cells. In this context, virus uptake via the endosomal 449 pathway was described to result in greater activation of pattern recognition receptors 450 [Peacock et al., 2022].

BA.1 infection also induced an interferon-mediated antiviral state preventing influenza A (H1N1, H5N1) infection in monocytes despite only establishing an abortive infection, demonstrating that the antiviral state does not depend on a complete virus replication cycle resulting in the production of infectious virus. In agreement, UVinactivated BA.1 had previously been shown to trigger a detectable interferon response in lung organ cultures, although this response was weaker than that induced by the replication-competent virus [Alfi et al., 2022].

458 The JAK/ STAT inhibitor baricitinib inhibited the Omicron-mediated antiviral 459 response. This suggests that the Omicron-induced antiviral state is caused by MDA5-

460 mediated production of interferon which activates interferon receptors that then trigger
461 JAK/ STAT signalling [Li et al., 2020].

462 In addition to these findings, we also showed that BA.5, which is currently the dominant variant in many parts of the world [Shrestha et al., 2022], induces a 463 464 comparable interferon response to BA.1 and that the BA.1- and BA.5-induced 465 interferon responses protect infected cells from super-infection with influenza A 466 viruses. The latter finding demonstrates that the BA.1- and BA.5-induced interferon 467 signalling is of functional relevance. Baricitinib prevented the BA.1- and BA.5-induced 468 suppression of influenza A virus replication, providing evidence that the BA.1- and 469 BA.5-induced interferon response is responsible for the BA.1 and BA.5-induced 470 influenza A virus inhibition.

471 In summary, we show that BA.1 and BA.5 (but not Delta) induce a functionally 472 relevant pronounced interferon response that suppresses influenza A virus replication. 473 Further research will have to show the relevance of our findings in the context of 474 SARS-CoV-2/ influenza virus co-infection. Data on the severity of SARS-CoV-2/ 475 influenza A virus co-infections are inconsistent in cell culture and animal models 476 [Andrés et al., 2022; Kim EH et al., 2022; Kim HK et al., 2022; Oishi et al., 2022] and 477 in humans [Cuadrado-Payán et al., 2020; Yue et al., 2020; Alosaimi et al., 2021; Stowe 478 et al., 2021; Xiang et al., 2021; Krumbein et al., 2022; Swets et al., 2022]. This may 479 not be a surprise, given the differences in interferon signalling between different 480 SARS-CoV-2 variants that we present here and that were described in previous 481 studies [Alfi et al., 2022; Bojkova et al., 2022; Bojkova et al., 2022a; Guo et al., 2022; 482 Thorne et al., 2022]. Future studies may have to include more different virus variants 483 and strains to establish a clearer picture.

484 In conclusion, our findings show that 1) BA.1 and BA.5 induce comparable interferon responses in ALI HBE cultures, 2) the Omicron-induced interferon-response 485 486 is of functional relevance as it protects infected cells from influenza A virus replication, 487 and 3) abortive BA.1 infection of monocytes is sufficient to produce a protective 488 interferon response. Moreover, the kinetics of the Omicron-induced interferon 489 response (early and transient type I response, sustained type III response) provide 490 additional mechanistic evidence explaining why Omicron infections are usually 491 associated with less severe disease than Delta infections.

#### 493 Methods

#### 494 Cell lines

495 HEK293 (HEK-Blue<sup>™</sup> reporter cells, InvivoGen) -IFN-α/β and -IFN-λ cells were 496 cultivated in DMEM (Gibco, ThermoFisher Scientific) with 10% heat-inactivated foetal 497 bovine serum (Sigma), Pen-Strep (100 U/ml-100 µg/ml) (Sigma), 100 µg/ml 498 Normocin<sup>™</sup> (InvivoGen) and the required selective antibiotic for each cell line (IFN-499 α/β: Blasticidin and Zeocin; IFN-λ, Blasticidin, Puromycin, and Zeocin) at 37°C and 5% 500 CO<sub>2</sub>.

501 A549-ACE2/TMPRSS2 cells (Invivogen) were grown in DMEM supplemented with 2 502 mM L-glutamine, 4.5 g/l glucose, 10% (v/v) heat-inactivated fetal bovine serum (FBS; 503 30 min at 56 °C), PenStrep (100 U/ml-100 µg/ml), 100 µg/ml Normocin, 10 µg/ml of 504 Blasticidin, 10 µg/ml of Blasticidin, 100 µg/ml of Hygromycin, 0.5 µg/ml of Puromycin, 505 and 100 µg/ml of Zeocin. A549-ACE2/TMPRSS2 MDA5 KO cells (Invivogen) were 506 grown in DMEM supplemented with 2 mM L-glutamine, 4.5 g/l glucose, 10% (v/v) heat-507 inactivated fetal bovine serum (FBS; 30 min at 56 °C), PenStrep (100 U/ml-100 µg/ml), 508 100 µg/ml Normocin, 10 µg/ml of Blasticidin, 100 µg/ml of Hygromycin, 0.5 µg/ml of 509 Puromycin, and 100 µg/ml of Zeocin.

510 All cell lines were regularly tested for mycoplasma contamination.

511

#### 512 Air-liquid interface cultures

513 Lung tissue for the isolation of primary epithelial cells was provided by the Hannover 514 Medical School, Institute of Pathology (Hannover, Germany). The use of tissue was 515 approved by the ethics committee of the Hannover Medical School (MHH, Hannover, 516 Germany, number 2701–2015) and was in compliance with The Code of Ethics of the 517 World Medical Association. Primary bronchial epithelial cells were isolated from the

518 lung explant tissue of a patient with lung emphysema as described previously [van 519 Wetering et al., 2000]. All patients or their next of kin gave written informed consent 520 for the use of their lung tissue for research.

521 Basal cells were expanded in Keratinocyte-SFM medium supplemented with bovine 522 pituitary extract (25 µg/mL), human recombinant epidermal growth factor (0.2 ng/mL, 523 all from Gibco. Schwerte, Germany), isoproterenol (1 nM. Sigma). 524 Antibiotic/Antimycotic Solution (Sigma-Aldrich), and MycoZap Plus PR (Lonza, 525 Cologne, Germany) and cryopreserved until further use.

526 For differentiation, the cells were thawed and passaged once in PneumaCult-527 Ex Medium (StemCell Technologies, Cologne, Germany) and then seeded on transwell inserts (12-well plate, Sarstedt, Nümbrecht, Germany) at 4 × 10<sup>4</sup> cells/insert. 528 529 Once the cell layers reached confluency, the medium on the apical side of the 530 transwell was removed, and medium in the basal chamber was replaced with 531 Maintenance Medium (StemCell Technologies), PneumaCult ALI including 532 Antibiotic/Antimycotic Solution (Sigma-Aldrich) and MycoZap Plus PR (Lonza). During 533 a period of four weeks, the medium was changed and the cell layers were washed 534 with PBS every other day. Criteria for successful differentiation were the development 535 of ciliated cells and ciliary movement, an increase in transepithelial electric resistance 536 indicative of the formation of tight junctions, and mucus production.

537

#### 538 SARS-CoV-2 variants preparation

539 The SARS-CoV-2 isolates Omicron BA.1 (B.1.1.529: FFM-SIM0550/2021, 540 EPI\_ISL\_6959871, GenBank ID OL800702), Delta (B.1.167.2: FFM-IND8424/2021, 541 GenBank ID MZ315141), and Omicron BA.5 (GenBank ID OP062267) were isolated 542 in Caco-2-F03 cells as previously described [Cinatl et al., 2004; Bojkova et al., 2021]

and stored at –80°C. All variants underwent maximum two passages. Virus titres were
determined as TCID50/mL.

545

#### 546 Influenza A virus strains H1N1 and H5N1

547 The H1N1 influenza strain A/NewCaledonia/20/99 was received from the World

548 Health organisation (WHO) Influenza Centre (National Institute for Medical Research,

549 London, UK) and stocks were prepared by cultivation on MDCK cells (ATCC, CCL-34)

550 in medium containing 2µg/ml trypsine. Virus stocks were stored at −80 °C. Virus titres

551 were determined as TCID50/mL.

552 The H5N1 influenza strain A/Vietnam/1203/04 was received from the World

553 Health organisation (WHO) Influenza Centre (National Institute for Medical Research,

London, UK). Virus stocks were prepared by infecting Vero cells, and aliquots were

555 stored at -80 °C. Virus titres were determined as TCID50/mL.

556

#### 557 Barrier integrity measurement

558 For trans-epithelial electrical resistance (TEER) measurement, medium was 559 added to the apical side 30min prior to measurement with a chopstick electrode 560 connected to a Volt-Ohm-meter (Millicell® ERS-2, Merck, Darmstadt, Germany) 561 according to the manufacturer's instructions. Blank inserts served as baseline. The 562 apical medium was removed after the measurement.

563

#### 564 Activation of caspase 3/7

565 Caspase 3/7 activity was measured using the Caspase-Glo assay kit
566 (Promega, Madison, WI, USA), according to the manufacturer's instructions. Briefly,
567 100 μL of Caspase-Glo reagent were added to each well containing 100 μL of tested

sample, mixed, and incubated at room temperature for 30 min. Luminescence intensity
was measured using an Infinite M200 microplate reader (Tecan).

570

#### 571 Co-infection assay in ALI HBE

572 ALI HBE cultures were infected with SARS-CoV-2 variant at MOI 1 from the 573 apical site. The inoculum was incubated for 2 h, then removed and cells were washed 574 three times with PBS. H1N1 A/NewCaledonia/20/99 at MOI 2 was added 48 h post 575 SARS-CoV-2 infection. The inoculum was incubated for 2 h, then removed and cells 576 were washed three times with PBS.

577

#### 578 Detection of extracellular and intracellular RNA

579 SARS-CoV-2 RNA from the apical washes of the ALI HBE culture was isolated 580 using QIAamp Viral RNA Kit (Qiagen, Hilden, Germany) according to the 581 manufacturer's instructions. RNA was subjected to OneStep qRT-PCR analysis using 582 the Luna Universal One-Step RT-gPCR Kit (New England Biolabs, Frankfurt am Main, 583 Germany) and a CFX96 Real-Time System, C1000 Touch Thermal Cycler (Bio-Rad, 584 Feldkirchen, Germany). Primers were adapted from the WHO protocol29 targeting the 585 open reading frame for RNA-dependent RNA polymerase (RdRp): RdRP SARSr-F2 (GTG ARA TGG TCA TGT GTG GCG G) and RdRP\_SARSr-R1 (CAR ATG TTA AAS 586 587 ACA CTA TTA GCA TA) using 0.4 µM per reaction. Standard curves were created 588 using plasmid DNA (pEX-A128-RdRP) as previously described [Bojkova et al., 2020]. 589 Intracellular RNA isolation was carried out according to manufacturer's protocol 590 (RNeasy 96 QIAcube HT Kit, Qiagen, Hilden, Germany). Detection of selected targets 591 was performed with Luna® Universal One-Step RT-gPCR (New England BioLabs Inc.) 592 to manufacturers protocol using specific primers: according TBP (fw:5'-

593 ATCAGAACAACAGCCTGCC-3'; rev: 5'- GGTCAGTCCAGTGCCATAAG-3'); SARS-594 CoV-2 (fw:5'-ACAGGTACGTTAATAGTTAATAGCGT-3': Ε aene rev:5'-595 ATATTGCAGCAGTACGCACACA-3'); ISG15 (fw:5'-GAGAGGCAGCGAACTCATCT-596 3': rev:5'-AGGGAC ACCTGGAATTCGTT-3'): MX1 (fw:5'-597 TTTTCAAGAAGGAGGCCAGCAA-3'; rev:5'-TCAGGAACTTCCGCTTGTCG-3'); 598 H5N1 H5 (fw:5'-GCCATTCCACAACATACACCC-3'; gene rev:5'-599 CTCCCCTGCTCATTGCTATG-3'); H5N1 Μ (fw:5'gene 600 TTCTAACCGAGGTCGAAACG-3'; rev:5'-ACAAAGCGTCTACGCTGCAG-3'); IAV 601 NP-mRNA (fw:5'-GACTCACATGATGATCTGGCA-3'; rev:5'-602 CTTGTTCTCCGTCCATTCTCA-3'): IAV NP-gRNA (fw:5'-603 AACGGCTGGTCTGACTCACATGAT-3'; rev:5'-604 AGTGAGCACATCCTGGGATCCATT-3').

605

#### 606 Immunoblot analysis

607 Whole-cell lysates were prepared using Triton-X sample buffer containing 608 protease inhibitor cocktail (Roche). The protein concentration was assessed by using 609 DC Protein assay reagent (Bio-Rad Laboratories). Equal protein loads were separated 610 by sodium dodecyl sulfate-polyacrylamide gel electrophoresis and proteins were 611 transferred to nitrocellulose membranes (Thermo Scientific). For protein detection the 612 following primary antibodies were used at the indicated dilutions: GAPDH (Cell 613 Signaling, #2118, 1:4000), yH2AX (Cell Signaling, #9718, 1:1000), H1N1 (Influenza A 614 Virus) Nucleoprotein (Bioss, #bs-4976R, 1:4000), ISG15 (Santa Cruz Biotechnology, 615 #sc-166755, 1:200), MDA5 (Cell Signaling, #5321, 1:1000), Mx1 (Cell Signaling, 616 #37849, 1:1000), OAS1 (Cell Signaling, #14498, 1:1000), PARP (Cell Signaling, 617 #9542, 1:1000), PKR (Cell Signaling, #12297, 1:1000), SARS-CoV-2 Nucleocapsid

618 (Sino Biological, #40143-R019, 1:10000), STAT1 (Cell Signaling, #9172, 1:1000), 619 phospho-STAT1 Y701 (Cell Signaling, #9171, 1:1000), TBK1 (Cell Signaling, #3013, 620 1:1000), phospho-TBK1 S172 (Cell Signaling, #5483, 1:1000), USP18 (Cell Signaling, 621 #4813, 1:2000) and RIG1 (Cell Signaling, #3743, 1:1000). Protein bands were 622 visualised using IRDye-labeled secondary antibodies at dilution 1:40000 (LI-COR 623 Biotechnology, IRDye®800CW Goat anti-Rabbit, #926-32211 and IRDye®800CW 624 Goat anti-Mouse IgG, #926-32210) and Odyssey Infrared Imaging System (LI-COR 625 Biosciences).

626

#### 627 Detection of type I and type III IFNs production

628 Detection of type I and type III IFNs in supernatants was carried out with HEK-629 Blue<sup>TM</sup> IFN- $\alpha/\beta$  (type I) and HEK-Blue<sup>TM</sup> IFN- $\lambda$  (type III) cells according to 630 manufacturer's protocol. HEK cells were washed twice with PBS and detached in 631 presence of PBS by tapping the flask. Cells were subsequently centrifuged at 200g for 632 5 min and resuspended in Test Medium (DMEM, 4.5 g/l glucose, 2 mM L-glutamine, 633 10% (v/v) heat-inactivated FBS, 50 U/ml penicillin, 50 µg/ml streptomycin,100 µg/ml 634 Normocin<sup>™</sup>) at 280.000 cells/ml. 20µl supernatant were added in 96 well plates and 635 180 µl cell suspension was added to the wells. Cells and supernatant were incubated 636 at 37°C and 5% CO<sub>2</sub> for 24h. After incubation, 20 µl supernatant was removed and 637 incubated with 180 µI QUANTI-Blue<sup>™</sup> Solution for 1-3 h. SEAP (secreted embryonic 638 alkaline phosphatase) levels were determined using a spectrophotometer at 620nm.

639

#### 640 **PBMCS isolation**

641 Human peripheral blood mononuclear cells were isolated from buffy coats of 642 healthy donors (RK-Blutspendedienst Baden-Württemberg-Hessen, Institut für

643 Transfusionsmedizin und Immunhämatologie Frankfurt am Main, Germany). After 644 centrifugation on a Ficoll (Pancoll, PAN-Biotech, Aidenbach, Germany) density 645 gradient, mononuclear cells were collected from the interface, washed with PBS, and 646 plated on cell culture dishes (Cell+, Saarstedt, Nümbrecht, Germany) in RPMI1640 647 (Gibco, ThermoFisher Scientific, Waltham, MA, USA) supplemented with 100 IU/mL 648 penicillin and 100 g/mL streptomycin. After incubation for 90 min(37°C, 5% CO2), non-649 adherent cells were removed, and the medium was changed to RPMI1640 650 supplemented with 100 IU/mL penicillin, 100 µg/mL of streptomycin, and 3% human 651 serum (RK-Blutspendedienst Baden-Württemberg-Hessen, Institut für 652 Transfusionsmedizin und Immunhämatologie Frankfurt am Main, Germany).

653

#### 654 **Co-infection assay in human PBMCs**

655 Human PBMCs were infected with SARS-CoV-2 variants at MOI of 1 for 2 h in 656 infection medium (RPMI1640 supplemented with 100 IU/mL penicillin and 100 g/mL 657 streptomycin, 1% heat-inactivated fetal bovine serum) at 37°C at 5% CO2. Afterwards 658 the cells were washed twice with PBS and incubated for 24 h in infection medium. For 659 co-infection, the cells were either infected with influenza A virus H1N1/New 660 Caledonia/20/99 (MOI 2), influenza A virus H5N1 A/Vietnam/1203/04 (MOI 1) or 661 treated with medium for 2 h, washed twice and incubated again for 24 h. After each 662 washing step and after 48 h supernatant samples were taken and cells were lysed for 663 RNA isolation.

664

#### 665 Statistics

666 Results are expressed as the mean ± standard deviation (SD) of the number of 667 biological replicates indicated in figure legends. Statistical significance is depicted

- 668 directly in graphs and the statistical tests used for the calculation of p values are
- 669 indicated in the figure legends. GraphPad Prism 9 was used for visualisation of the
- 670 data and for calculation of statistical significance.

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#### 678 Competing interests

- 679 The authors declare no competing interests.
- 680
- 681

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