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Distinct metabolic programmes established in the thymus control effector functions of γδ T cell subsets in tumour microenvironments

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30 Abstract

31 Metabolic programming controls immune cell lineages and functions, but little 32 is known about $\gamma\delta$ T cell metabolism. Here, we found that $\gamma\delta$ T cell subsets 33 making either IFN- γ or IL-17 have intrinsically distinct metabolic requirements. Whereas IFN- $\gamma^+ \gamma \delta$ T cells were almost exclusively dependent on glycolysis, 34 IL-17⁺ $\gamma\delta$ T cells strongly engaged oxidative metabolism, with increased 35 36 mitochondrial mass and activity. These distinct metabolic signatures were 37 surprisingly imprinted early during thymic development, and were stably 38 maintained in the periphery and within tumours. Moreover, pro-tumoural IL-39 $17^{+} \gamma \delta$ T cells selectively showed high lipid uptake and intracellular lipid 40 storage, and were expanded in obesity, and in tumours of obese mice. 41 Conversely, glucose supplementation enhanced the anti-tumour functions of 42 IFN- $\gamma^+ \gamma \delta$ T cells and reduced tumour growth upon adoptive transfer. These 43 findings have important implications for the differentiation of effector $\gamma\delta$ T cells 44 and their manipulation in cancer immunotherapy.

46 Introduction

47 T cells engage specific metabolic pathways to support their differentiation, proliferation and function^{1,2}. Whereas naive $\alpha\beta$ T cells oxidize glucose-derived 48 49 pyruvate via oxidative phosphorylation (OXPHOS) or fatty acid oxidation 50 (FAO) to generate ATP, most effector $\alpha\beta$ T cells engage in aerobic glycolysis 51 ("Warburg effect"), i.e. the conversion of glucose to lactate, to strengthen cell 52 growth and proliferation³. On the other hand, while aerobic glycolysis is required for optimal $\alpha\beta$ T cell effector function^{4,5}, tumour cells heavily 53 54 consume glucose in the tumour microenvironment (TME), which has a 55 dramatic impact on cytokine production by T cells and hampers tumour immunity^{5,6}. There is therefore great interest in understanding how 56 57 metabolism-based interventions could inhibit tumour metabolism while 58 promoting effective anti-tumour immunity for improved immunotherapeutic 59 outcomes⁷.

60 $\gamma\delta$ T cells represent a promising immune population for next-generation cancer immunotherapies^{8,9}. Since they are not MHC-restricted nor dependent 61 on neoantigen recognition, $\gamma\delta$ T cells constitute a complementary layer of anti-62 tumour immunity to their $\alpha\beta$ T cell counterparts¹⁰. In fact, many properties of 63 64 $\gamma\delta$ T cells, including sensing of "stress-inducible" changes and very rapid 65 effector responses, align best with innate immunity, or "lymphoid stresssurveillance"¹¹, although in some instances they display adaptive-like 66 behaviour and profound shaping of T cell receptor (TCR) repertoires^{12,13}. 67

68 The effector functions of murine $\gamma\delta$ T cells are dominated by the production of 69 two key cytokines, interleukin 17A (IL-17) and interferon- γ (IFN- γ). Beyond 70 contributions to immune responses against pathogens, the provision of these 71 two cytokines by $\gamma\delta$ T cells is important in many (patho)physiological contexts, such as maintenance of tissue homeostasis^{14,15,} autoimmunity¹⁶ and cancer⁸. 72 73 IL-17 and IFN- γ are mostly produced by distinct $\gamma\delta$ T cell subsets that, unlike their CD4⁺ T cell counterparts, typically acquire their effector functions during 74 thymic development^{17,18}. Thus, we and others have shown that thymic $\gamma\delta$ T 75 76 cell progenitors, driven by signals including those stemming from the TCR,

split into a CD27⁺ (and CD45RB⁺) branch that makes IFN- γ but not IL-17; and a CD27⁻ (and CD44^{hi}) pathway that selectively expresses IL-17¹⁷⁻²¹.

79 The IFN- γ /IL-17 dichotomy between effector $\gamma\delta$ T cell subsets is particularly relevant in cancer, since IFN- γ -producing $\gamma\delta$ T cells ($\gamma\delta^{\text{IFN}}$) are associated with 80 tumour surveillance and regression, whereas IL-17-secreting $\gamma\delta$ T cells ($\gamma\delta^{17}$) 81 promote primary tumour growth and metastasis, both in mice and in 82 humans^{8,22}. However, the molecular cues that regulate the balance between 83 84 such antagonistic $\gamma\delta$ T cell subsets in the TME remain poorly characterized. 85 Given the strong impact of metabolic resources on anti-tumour $\alpha\beta$ T cell responses, here we have investigated the metabolic profiles of $\gamma\delta$ T cell 86 87 subsets and how they might impact on their activities in the TME. We found that $\gamma \delta^{\text{IFN}}$ T cells are almost exclusively glycolytic, whereas $\gamma \delta^{17}$ T cells are 88 89 strongly dependent on mitochondrial and lipid oxidative metabolism. This 90 metabolic dichotomy is established in the thymus during $\gamma\delta$ T cell 91 development, and maintained in peripheral lymphoid organs and within 92 tumours in various experimental models of cancer. We further show that the 93 provision of glucose or lipids has major impact on the relative expansion and 94 function of the two $\gamma\delta$ T cell subsets, and this can be used to enhance anti-95 tumour $\gamma\delta$ T cell responses.

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99 **Results**

100 Intra-tumoural $\gamma\delta$ T cell subsets display distinct metabolic profiles

101 The analysis of metabolic profiles of tumour-infiltrating $\gamma\delta$ T cells ($\gamma\delta$ TILs) 102 presented a major challenge: the low numbers that can be retrieved from 103 tumour lesions in mice are largely incompatible with techniques such as 104 Seahorse metabolic flux analysis. To overcome this difficulty, we used a newly developed protocol, SCENITHTM (Single Cell mEtabolism by profilling) 105 106 Translation inHibition), which is a flow cytometry-based method for profiling energy metabolism with single cell resolution²³. This method is based on 107 108 metabolism-dependent translation rates and puromycin's incorporation into 109 nascent proteins (Supplementary Fig. 1a). The use of specific inhibitors 110 allows the estimation of glucose dependence, mitochondrial dependence, 111 glycolytic capacity and fatty acid and amino acid oxidation (FaaO) capacity (Supplementary Fig. 1b). We employed SCENITH[™] to analyze the 112 113 metabolic profiles of $\gamma\delta$ TILs isolated from tumour lesions in well-established 114 mouse models of breast (E0771) and colon (MC38) cancer (Fig. 1a). In both 115 cancer models, and at both later (Fig. 1b,c) and earlier time points (Fig. **1d,e**), we observed that $\gamma \delta^{\text{IFN}}$ cells had substantially higher glycolytic capacity, 116 whereas $\gamma \delta^{17}$ cells were strongly dependent on mitochondrial activity (**Fig. 1b**-117 118 e). These data, obtained in cancer models, prompted us to investigate the 119 metabolic phenotypes of $\gamma\delta$ T cell subsets in multiple tissues at steady state.

120

Peripheral γδ T cell subsets show different mitochondrial and metabolic phenotypes

To explore the metabolic differences between $\gamma\delta$ T cell subsets in peripheral tissues, we analysed mitochondria, given their central role in cellular metabolism. To distinguish between $\gamma\delta^{\text{IFN}}$ and $\gamma\delta^{17}$ cells we used CD27 expression¹⁸⁻²¹. CD27⁻ $\gamma\delta$ ($\gamma\delta^{17}$) cells displayed increased mitotracker and tetramethylrhodamine methyl ester (TMRM) staining in peripheral lymph nodes (LNs) compared to CD27⁺ $\gamma\delta$ ($\gamma\delta^{\text{IFN}}$) cells, indicating higher mitochondrial mass (normalised to cell size) and mitochondrial membrane 130 potential ($\Delta \Psi m$), respectively (**Fig. 2a,b**). These differences were retained 131 upon activation and expansion in vitro over 9-days (Supplementary Fig. 2). 132 Importantly, the distinct mitochondrial phenotypes were also validated with 133 another mitochondrial membrane potential dye, tetramethylrhodamine ethyl ester (TMRE), and were features of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells *ex vivo* from multiple 134 locations (**Fig. 2c**). In agreement with mitochondrial enrichment in $\gamma \delta^{17}$ cells, 135 136 seahorse metabolic flux analysis of peripheral $\gamma\delta$ T cells showed higher levels 137 of basal OXPHOS in $\gamma \delta^{17}$ cells, and conversely, increased basal levels of glycolysis in $\gamma \delta^{\text{IFN}}$ cells (**Fig. 2d-f**). These data were validated in independent 138 experiments using SCENITHTM on splenic and LN $\gamma\delta$ T cell subsets (**Fig. 2g**). 139

140 To assess if this metabolic dichotomy had an underlying transcriptional basis. 141 we measured the mRNA levels of key mitochondrial and glycolysis-associated genes in purified peripheral $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cells. We found systematic biases in 142 143 gene expression that matched the differential metabolic programmes (Fig. 144 2h,i). Of particular note is the clear-cut segregation of two master 145 transcriptional regulators: Nrf1, which orchestrates mitochondrial DNA transcription^{24,25}, found to be enriched in $\gamma \delta^{17}$ cells (**Fig. 2h**); and *Myc*, which 146 controls glycolysis^{26,27}, that was highly overexpressed in $\gamma \delta^{\text{IFN}}$ cells (**Fig. 2i**). 147 148 Myc expression was further validated using a Myc-GFP reporter mouse (Fig. 149 **2j**). These data collectively demonstrated that $\gamma\delta$ T cell subsets possess 150 distinct mitochondrial and metabolic features in peripheral organs at steady 151 state.

152

153 $\gamma \delta$ T cell subsets are metabolically programmed in the thymus

We next aimed to understand when, during their differentiation, the metabolic differences between the two effector $\gamma\delta$ T cell subsets were established. Since most $\gamma\delta$ T cells are functionally pre-programmed in the thymus, we examined $\gamma\delta$ thymocyte sub-populations. Our recent studies have identified sequential stages of thymic $\gamma\delta$ T cell progenitor development marked by CD24, CD44 and CD45RB¹⁹. Early CD24⁺ ($\gamma\delta^{24+}$) precursors downregulate CD24 to become a CD24⁻CD44⁻CD45RB⁻ ($\gamma\delta^{TN}$) population that can generate cells 161 committed to either IL-17 or IFN- γ expression, which display respectively CD44^{hi}CD45RB⁻ $(\gamma \delta^{17})$ $(\gamma \delta^{\rm IFN})$ and CD44⁺CD45RB⁺ 162 phenotypes (Supplementary Fig 3). By using the SCENITHTM method, we found that, in 163 164 both the adult (Fig. 3a) and newborn (Fig. 3b) thymus, these subsets showed 165 the same metabolic dichotomy as in the periphery (**Fig. 2g**), although this was 166 less distinct in $\gamma\delta$ thymocytes, likely due to the dynamic subset segregation process¹⁹. 167

168 To investigate any potential switching of metabolic programming during $\gamma\delta$ 169 thymocyte development, we first compared early thymic $\gamma\delta$ progenitors with 170 more mature subpopulations already committed to IL-17 or IFN- γ production. We found that $\gamma \delta^{24+}$ and $\gamma \delta^{TN}$ progenitors stained highly for TMRE, that was 171 172 lost when $\Delta \Psi m$ was dissipated by the ionophore carbonyl cyanide-4-173 (trifluoromethoxy) phenylhydrazone (FCCP) (Fig. 3c,d). Interestingly, whereas $\gamma \delta^{17}$ cells retained a high level of TMRE staining, $\gamma \delta^{IFN}$ cells showed a 174 marked reduction in $\Delta \Psi m$ suggesting a metabolic switch away from OxPhos 175 (**Fig. 3d**). Moreover, imagestream analysis of $\gamma \delta^{17}$ cells stained with either 176 177 mitotracker or TMRE revealed large and active mitochondria, in contrast with 178 $\gamma \delta^{\text{IFN}}$ cells that displayed negligible staining for either dye (**Fig. 3e**), in line with our previous observations in peripheral subsets (Fig. 2a-c). Furthermore, 179 Seahorse extracellular flux analysis showed that $\gamma \delta^{17}$ thymocytes have both 180 higher maximal respiration potential and spare respiratory capacity than their 181 $\gamma \delta^{\text{IFN}}$ counterparts (**Fig. 3f,g**). Thus, $\gamma \delta$ T cell subsets acquire distinct 182 183 mitochondrial features during their acquisition of effector function in the 184 thymus.

185 The adoption of divergent metabolic programs by thymic $\gamma\delta$ T cell subsets 186 suggested they could thrive under distinct metabolic environments. To begin 187 to address this, we placed WT E15 thymic lobes in 7-day foetal thymic organ 188 cultures (E15 + 7d FTOC) with media containing either low or high amounts of glucose (**Fig. 3h**). $\gamma \delta^{17}$ cells were readily detected in lower glucose conditions 189 190 but failed to develop to normal numbers when glucose concentrations were raised. By contrast, $\gamma \delta^{\text{IFN}}$ cells were relatively enriched in high glucose 191 conditions as demonstrated by a significant decrease in the $\gamma \delta^{17}/\gamma \delta^{\text{IFN}}$ cell 192

193 ratio (Fig. 3h). We next established E15 + 7d FTOC in the presence of the 194 glycolysis inhibitor 2-deoxy-D-glucose (2-DG), and found increased numbers of $\gamma \delta^{17}$ cells and increased $\gamma \delta^{17} / \gamma \delta^{\text{IFN}}$ cell ratios (**Fig. 3i**). A similar result was 195 observed in E15 + 7d FTOC when cultured with Fasentin that blocks glucose 196 197 uptake (Supplementary Fig. 4). By contrast, running E15 + 7d FTOC in the 198 presence of metformin, which reduces the efficiency of OxPhos by inhibiting complex I of the electron transport chain, impaired $\gamma \delta^{17}$ cell generation and 199 decreased the $\gamma \delta^{17} / \gamma \delta^{\text{IFN}}$ cell ratio (**Fig. 3***j*). Collectively, these results suggest 200 that the mitochondrial characteristics adopted by $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells during 201 thymic development directly impact their ability to thrive in distinct metabolic 202 203 environments.

204

205 Distinct mitochondrial activities underlie effector fate of thymic $\gamma\delta$ T cell 206 precursors

207 We next aimed to investigate the association of distinct metabolic programmes with the developmental divergence of $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cells in the 208 thymus. Although the $\gamma \delta^{TN}$ population, i.e. the progenitor $\gamma \delta$ cell subset that 209 210 immediately precedes the surface upregulation of either CD44 or CD45RB (marking commitment to the IL-17 or IFN- γ pathways, respectively¹⁹) was 211 predominantly TMRE^{hi}, we observed a fraction of cells with reduced TMRE 212 staining that we reasoned might be transitioning to the TMRE^{lo} state shown by 213 $\gamma \delta^{\text{IFN}}$ cells (**Fig. 3c**). We further hypothesized that the metabolic status of $\gamma \delta^{\text{TN}}$ 214 progenitors may predict their developmental fate. To test this, we sorted 215 TMRE^{hi} and TMRE^{lo} cells from the $\gamma \delta^{TN}$ subset obtained from E15 + 7d FTOC. 216 and cultured them for 5-days on OP9-DL1 cells that are known to support 217 appropriate development of thymocytes²⁸. As predicted, virtually all cells from 218 the TMRE¹⁰ cultures upregulated CD45RB and entered the IFN γ -pathway 219 (Fig. 4a); however, we were surprised that almost all cells from the TMRE^{hi} 220 cultures entered the CD44^{hi} IL-17-pathway (Fig. 4a). This strongly suggests 221 that $\gamma \delta^{TN}$ cells have already committed to an effector fate, and that this 222 223 commitment associates with distinct mitochondrial activities.

To pursue this hypothesis further, we tested $\gamma \delta^{24+}$ progenitors that immediately 224 precede the $\gamma \delta^{TN}$ subset; again, we observed a remarkable segregation of 225 effector fate, with the majority of TMRE^{Io} $\gamma \delta^{24+}$ cells entering the IFN γ -226 pathway, and the majority of TMRE^{hi} $\gamma \delta^{24+}$ cells entering the IL-17-pathway 227 (Fig. 4b). The observation that so few TMRE^{hi} $\gamma \delta^{24+}$ cells adopt an IFN γ -228 secreting fate again suggests that most $\gamma \delta^{24+}$ progenitors have already 229 230 committed to subsequent effector function. Moreover, we found that differences in TMRE levels correlated with the known^{18,20,21} effector biases of 231 $V\gamma 1^+$ ($\gamma \delta^{\text{IFN}}$ -biased) and $V\gamma 4^+$ ($\gamma \delta^{17}$ -biased) progenitors (**Fig. 4c**); and validated 232 the early TMRE-based segregation of effector fates using only $V\gamma 4^+$ 233 progenitors (**Supplementary Fig 5**). Furthermore, among $\gamma \delta^{24-}$ thymocytes 234 along the $\gamma \delta^{\text{IFN}}$ pathway, we observed a progressive downregulation of TMRE 235 levels from $\gamma \delta^{TN}$ to CD44⁻CD45RB⁺ cells and finally $\gamma \delta^{IFN}$ cells (**Fig. 4d**). 236

Given that we and others^{20,21} have previously shown a key role for TCR 237 signalling in $\sqrt{\delta^{\text{IFN}}}$ thymocyte differentiation, we next asked if downregulation of 238 239 TMRE levels associated with hallmarks of TCR signalling. Indeed, we found 240 that low TMRE associated with high expression of CD73 (Fig. 4e), one of the best established markers of TCR signalling in $\gamma\delta$ T cell development^{20,28,29}. 241 242 Moreover, in E15 thymic lobes, TMRE staining was reduced along with CD25 243 downregulation, which is another hallmark of (developmentally early) TCR $\gamma\delta$ signalling^{18,20,21} (**Fig. 4f**). Furthermore, at this E15 stage, the cells with the 244 lowest TMRE staining were $V\gamma 5^+$ progenitors (Fig. 4f) that are known to 245 246 engage a Skint1-associated TCR-ligand in the thymus and to uniformly commit to the IFN γ -pathwa γ^{30} . 247

248 These lines of evidence suggested that $\gamma\delta$ progenitors receiving agonist 249 TCR $\gamma\delta$ signals shift away from OxPhos as indicated by their reduced $\Delta\Psi$ m. 250 To strengthen this point, we manipulated TCR signals using agonist GL3 mAb, which, as expected^{18,19}, promoted $\gamma \delta^{\text{IFN}}$ cell development while inhibiting 251 the $\gamma\delta^{17}$ pathway in E17 + 6d FTOC (**Fig. 4g**). Upon specifically sorting 252 TMRE^{hi} $\gamma \delta^{24+}$ cells from E17 thymi and stimulating them with GL3 for 5h, we 253 254 found a subpopulation that dowregulated CD24 together with TMRE levels, in 255 a mAb dose-dependent dose manner (Fig. 4h). These results strongly

256 suggest that TCR signalling leads to $\Delta \Psi m$ downregulation as $\gamma \delta$ thymocytes 257 differentiate into IFN- γ producers.

258 gain further molecular resolution, we То performed single-cell RNAs equencing on TMRE^{lo} and TMRE^{hi} $\gamma \delta^{24+}$ cells from E15 + 2d FTOC (Fig. 259 **4i-I**). Using UMAP, TMRE^{lo} cells clustered clearly away from TMRE^{hi} $\gamma \delta^{24+}$ 260 cells (Fig. 4j), and the former were enriched in genes involved in the 261 262 regulation of antigen receptor signalling (Fig. 4k). In support of the metabolic 263 phenotypes observed ex vivo, genes associated with OxPhos were enriched specifically in TMRE^{hi} $\gamma \delta^{24+}$ cells while genes involved in glucose metabolism 264 were unregulated in TMRE^{lo} $\gamma \delta^{24+}$ cells (**Fig. 4I**). 265

These data collectively demonstrate that metabolic status of thymic $\gamma\delta$ progenitors marks their developmental fate from a very early stage. Progenitors entering the IL-17 pathway display sustained high mitochondrial activity, whereas those in the IFN- γ pathway undergo a TCR-induced metabolic shift towards aerobic glycolysis. We next questioned how these intrinsic metabolic differences impacted the physiology of effector $\gamma\delta$ T cell subsets.

273

274 Enrichment of lipid storage and lipid metabolism in $\gamma \delta^{17}$ cells

Having shown that, in stark contrast with $\gamma \delta^{\text{IFN}}$ cells, $\gamma \delta^{17}$ cell generation was 275 276 reduced under high glucose concentrations (Fig. 3h), and enhanced upon 277 inhibition of glycolysis (Fig. 3i) or glucose uptake (Supplementary Fig. 4), we guestioned whether other metabolic resources may be important for $\gamma \delta^{17}$ cell 278 279 physiology. To address this question we took advantage of reporter mice (*Zbtb16*^{GFP}) for another marker that segregates $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells, the 280 transcription factor PLZF (encoded by Zbtb16)^{21,14,31}. We performed RNA-281 282 sequencing of lymphoid and tissue-resident $\gamma\delta$ T cells sorted into PLZF⁺ ($\gamma\delta^{17}$) and PLZF⁻ ($\gamma \delta^{\text{IFN}}$) cells (**Fig. 5a**). As expected, $\gamma \delta^{17}$ cells across tissues 283 expressed II17a, whereas II17f was also expressed in tissue-resident $\gamma \delta^{17}$ 284 cells (Fig. 5b). Different metabolic pathways were associated with lymphoid 285 versus tissue resident $\gamma\delta$ T cells however, the genes common to $\gamma\delta^{17}$ cells 286

287 across all tissues were related to lipid and mitochondrial metabolism, 288 including glutamate transporter (Slc1a1), glucose/fatty acid metabolism 289 (Pdk4), mitochondrial protein transport (Ablim3) and lipid metabolism (Fabp1, 290 Abdh5, Atp10a). These data highlight genes associated with lipid metabolism as a common feature of $\gamma \delta^{17}$ T cells across tissues. Consistent with this, LN 291 $\gamma\delta^{17}$ cells had a higher neutral lipid content (as assessed by LipidTOX 292 staining) than $\gamma \delta^{\text{IFN}}$ cells (**Fig. 5 c,d**). This differential lipid content was further 293 294 increased upon activation with IL-1 β +IL-23 (**Supplementary Fig. 6a**), 295 associated with expression of IL-17A, IL-17F and RORyt (Supplementary 296 **Fig. 6b**), and was observed across $\gamma\delta$ T cells from multiple tissues, with the notable exception of the skin (Fig. 5e), where $\gamma\delta$ T cells have been shown to 297 display specific mechanisms of tissue adaptation³². In particular, $V\gamma 6^+ \gamma \delta T$ 298 299 cells in the dermis are transcriptionally distinct from those in pLNs and display 300 a highly activated but less proliferative phenotype. This tissue adaptation may 301 alter the metabolic requirements of skin-resident $\gamma\delta$ T cells. In addition, $\gamma\delta$ T cells may adapt to utilize specific metabolites present within the skin³³. 302

303 Imaging analysis revealed that the increased LipidTOX staining was due to the accumulation of intracellular lipid droplets in $\gamma \delta^{17}$ cells (**Fig. 5f.g**). Lipid 304 droplets store neutral lipids including triglycerides (TAGs) and cholesterol 305 esters³⁴. We found that the two $\gamma\delta$ subsets had equivalent TAG content (Fig. 306 5h) but free cholesterol, as determined by Filipin III staining, was higher in 307 $\gamma \delta^{17}$ cells (**Fig. 5i**). We next questioned if $\gamma \delta^{17}$ engaged in lipid uptake which 308 309 could account for lipid storage. Using labelled palmitate (Bodipy-FL-C₁₆), we 310 found that $\gamma \delta^{17}$ cells selectively took up lipids (Fig. 5j), which was further 311 enhanced following activation (**Supplementary Fig. 6c**). Analysis of $\gamma\delta$ T cell 312 cytokine production confirmed that the ability to take up palmitate was specific to IL-17 producers (**Fig. 51,m**). Of note, $\nabla\gamma4^+$ and $\nabla\gamma6^+$ ($\nabla\gamma1^-\nabla\gamma4^-$) $\gamma\delta$ T cells 313 showed a higher palmitate uptake than V γ 1⁺ cells (**Fig. 5n**); While V γ 6⁺ $\gamma\delta$ T 314 cells primarily produce IL-17, $V\gamma 4^+$, can produce either IFN- γ or IL-17^{18,19}. 315 316 However, palmitate uptake was specific to $V\gamma 4^+$ cells that produced IL-17 (Fig. **50**). Furthermore, $\gamma \delta^{17}$ cells also displayed higher uptake of fluorescently 317 318 labelled cholesterol ester (Bodipy CholEsteryl FL-C₁₂) (Fig. 5k), indicating

their ability to take up multiple types of lipids including fatty acids andcholesterol.

321 These data demonstrate that $\gamma \delta^{17}$ cells have an exquisite capacity to take up 322 and accumulate intracellular lipids, and display transcriptional signatures of 323 enhanced lipid metabolism compared to $\gamma \delta^{\text{IFN}}$ cells.

324

High fat diet promotes $\gamma \delta^{17}$ cell expansion and their accumulation in tumours

327 We next tested the effect of a lipid-rich, high fat diet (HFD), on $\gamma\delta$ T cell 328 subsets in vivo. Unlike standard fat diet (SFD) fed mice, which alternate 329 between using lipids or carbohydrates for fuel during light/dark cycles 330 respectively, feeding mice a HFD reduced their respiratory exchange ratio 331 (RER), illustrating a systemic metabolic switch to constantly burning lipids as 332 the main fuel source. (Fig. 6a). We found that both the percentage and 333 absolute number of LN $\gamma\delta$ T cells were increased during HFD (**Fig. 6b**), which was due to a specific increase in $\gamma \delta^{17}$ (but not $\gamma \delta^{\text{IFN}}$) cells (**Fig. 6c,d**). 334

Tumours are another site reported to be lipid-rich. To explore the effect of the 335 lipid-rich tumour environment on $\gamma \delta^{17}$ cells, we employed the B16F10 336 melanoma model. In SFD mice, we found an enrichment of $\gamma \delta^{17}$ cells within 337 the tumour compared to draining LN (dLN) or spleen (Fig. 6e). These $\gamma \delta^{17}$ 338 cells were also enriched compared to $\gamma \delta^{IFN}$ (**Fig. 6f**). Given $\gamma \delta^{17}$ were enriched 339 340 in obese mice and in the tumour, we next asked if obesity combined with the tumour model would further enhance $\gamma \delta^{17}$ cells. Mice fed HFD exhibited 341 342 enhanced tumour growth (Fig. 6g), and further increased percentages and numbers of tumour-infiltrating $\gamma \delta^{17}$ cells compared to the SFD group (**Fig. 6 h**-343 344 j). These data demonstrate that a lipid-rich environment selectively accumulates $\gamma \delta^{17}$ but not $\gamma \delta^{\text{IFN}}$ cells in the tumour. 345

Given the preferential uptake of cholesterol by $\gamma \delta^{17}$ cells (**Fig. 5i**), we next investigated its effect on $\gamma \delta^{17}$ cell proliferation and function. We incubated purified $\gamma \delta^{27-}$ ($\gamma \delta^{17}$) cells for 5h with cholesterol-loaded cyclodextrin (CLC), which we found to promote $\gamma \delta^{27-}$ cell proliferation when compared to control

culture conditions (**Fig. 6k**). To determine its impact on tumor growth *in vivo*, we injected CLC pre-treated (or control) $\gamma \delta^{17}$ cells twice (within two days) into s.c. E0771 tumours (as established in **Fig. 1b**), which allow local T cell delivery. Strikingly, $\gamma \delta^{17}$ cells pre-treated with CLC substantially enhanced tumour growth (**Fig. 6l-n**).

355 Conversely, we also tested the effect of reducing lipids *in vivo*, by injected 356 orlistat, which inhibits lipases and thus prevents uptake of dietary fat, into 357 B16F10 tumour-bearing mice. Mice injected with orlistat exhibited reduced 358 body weight and tumour growth compared to vehicle-treated mice 359 (**Supplementary Fig. 7a,b**). Importantly, these mice showed decreased 360 numbers of tumour-infiltrating $\gamma \delta^{17}$ cells, which had lower neutral lipid content 361 (**Supplementary Fig. 7c,d**).

Together, these data show that lipid-rich environments promote the selective expansion of $\gamma \delta^{17}$ cells that support tumour growth.

364

365 Glucose supplementation enhances anti-tumour functions of $\gamma \delta^{\text{IFN}}$ cells

366 We next aimed to use the knowledge gathered in this study to boost antitumour $\gamma\delta$ T cell responses, which are known to rely on $\gamma\delta^{\text{IFN}}$ cells^{8,22}. Given 367 our data showing that glucose promotes the development of $\gamma \delta^{\text{IFN}}$ over $\gamma \delta^{17}$ 368 cells in the thymus (**Fig. 3h,i**), and the higher glycolytic capacity of $\gamma \delta^{\text{IFN}}$ cells 369 370 in peripheral organs (Fig. 2g) and also within tumours (Fig. 1b-e), we 371 hypothesized that glucose supplementation would enhance $\gamma \delta^{\text{IFN}}$ cell 372 functions. Further supporting this hypothesis, we found that intra-tumoural $\gamma \delta^{\text{IFN}}$ cells preferentially took up 2-NDBG when compared to $\gamma \delta^{17}$ TILs (Fig. 373 374 7a).

We first tested the impact of glucose on $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cell functions *in vitro*. We cultured purified $\gamma \delta^{27-}$ ($\gamma \delta^{17}$) or $\gamma \delta^{27+}$ ($\gamma \delta^{\text{IFN}}$) cells in standard culture conditions containing low dose glucose (5mM) or in high glucose (50mM). We found high glucose to be detrimental to $\gamma \delta^{17}$ cells (**Supplementary Fig. 8**), in stark contrast to $\gamma \delta^{\text{IFN}}$ cells. Indeed, supplementation with high glucose augmented (whereas provision of 2-DG reduced) the percentage and

numbers of $\gamma \delta^{\text{IFN}}$ cells (**Fig. 7b**), with parallel effects on their proliferation (**Fig. 7c**) and on the levels of expression of both IFN- γ (**Fig. 7d**) and its master transcriptional regulator²¹, T-bet (**Fig. 7e**).

To specifically address the importance of aerobic glycolysis for $\gamma \delta^{\text{IFN}}$ cells, we cultured $\gamma \delta^{\text{IFN}}$ cells with galactose (compared to glucose), since cells grown in galactose enter the pentose phosphate pathway instead of using aerobic glycolysis^{35,36}. We observed a reduction in the percentage and absolute numbers of $\gamma \delta^{\text{IFN}}$ cells (**Fig. 7f**), as well as in their IFN- γ (**Fig. 7g**) and T-bet (**Fig. 7h**) expression levels, thus establishing that aerobic glycolysis is required for optimal IFN- γ production by $\gamma \delta^{\text{IFN}}$ cells.

Next we asked if the cytotoxic function of $\gamma \delta^{\text{IFN}}$ cells was also enhanced by glucose supplementation. For this, we co-cultured $\gamma \delta^{\text{IFN}}$ cells that were previously supplemented (or not) with high dose of glucose with E0771 breast cancer cells at different effector:target (E:T) ratios. "Glucose-enhanced" $\gamma \delta^{\text{IFN}}$ cells displayed substantially higher cytotoxic potency against the cancer cells, compared to the respective controls at each E:T ratio (**Fig. 7i**).

397 As $\gamma\delta$ T cells are actively being pursued in the clinic as an adoptive cell therapy for cancer⁸, we tested whether we could use glucose supplementation 398 to enhance the anti-tumour functions of $\gamma \delta^{\text{IFN}}$ cells *in vivo*, in an adoptive cell 399 transfer setting. Purified $\gamma \delta^{IFN}$ cells were cultured in the presence or absence 400 401 of high dose glucose for 5h, washed, and injected twice (within two days) into the tumour site. While control $\gamma \delta^{\text{IFN}}$ cells produced a small yet significant 402 403 reduction in tumour size, glucose substantially augmented the anti-tumour 404 effects of $\gamma \delta^{\text{IFN}}$ cells, essentially inhibiting tumour growth (from the time of 405 injection) within the time window analysed (Fig. 7j,k). These data reveal a new, metabolism-based, means to enhance the anti-tumour functions of $\gamma\delta$ T 406 407 cells that could be explored for adoptive cell immunotherapy of cancer.

408 **Discussion**

409 Metabolism dysregulation is viewed as an immune evasion strategy in cancer. 410 To overcome it, and thus enable anti-tumour immune responses, it is critical 411 to understand immune cell metabolism and its interplay with tumour cells in 412 the TME. Although our knowledge on $\alpha\beta$ T cell metabolism has increased significantly^{1,3,37}, little is known about $\gamma\delta$ T cells. Here, we identified a 413 414 metabolic dichotomy between the main effector $\gamma\delta$ T cell subsets that play opposing roles in cancer immunity^{8,22}. Whereas anti-tumoural $\gamma \delta^{\text{IFN}}$ cells are 415 almost exclusively glycolytic, pro-tumoural $\gamma \delta^{17}$ cells require mitochondrial 416 417 metabolism; and their activities within tumours can be promoted by glucose or 418 lipid metabolism, respectively.

419 Unexpectedly, the metabolic dichotomy of $\gamma\delta$ T cell subsets is established 420 early during thymic development, which contrasts with the peripheral 421 metabolic (re)programming of effector $\alpha\beta$ T cells. Naïve $\alpha\beta$ T cells require 422 activation to undergo rewiring of cellular metabolism, namely transition from 423 OxPhos to aerobic glycolysis, through which glucose is fermented into lactate rather than oxidized in mitochondria³. Furthermore, depending on metabolic 424 425 cues in the tissue or during immune challenge, naïve T cells are pushed 426 toward Th1, Th2, Th17 or Treg fates, dependent on intrinsic metabolic 427 pathways engaged outside the thymus. By contrast, we show that an 428 equivalent metabolic shift occurs in early thymic $\gamma\delta$ progenitors as they 429 commit to the IFN- γ pathway, seemingly as a result of strong TCR $\gamma\delta$ 430 signalling. Indeed, analysis of various hallmarks of TCR signalling suggest 431 that $\gamma\delta$ progenitors receiving agonist TCR $\gamma\delta$ signals shifted away from OxPhos 432 as indicated by their reduced $\Delta \Psi m$. Moreover, upon TCR (GL3 mAb) 433 stimulation, a small population of $\gamma\delta$ progenitors downregulated CD24 434 together with $\Delta \Psi m$ (TMRE), thus associating strong TCR_y δ signalling in the 435 $\gamma \delta^{\text{IFN}}$ developmental pathway with metabolic reprogramming. This draws a parallel with $\alpha\beta$ T cell activation, during which early TCR signalling is required 436 437 for induction of aerobic glycolysis³⁸. This acts as a switch for *Myc* mRNA (and 438 protein) expression, such that strength of TCR stimulus determines the frequency of T cells that transcribe Myc mRNA³⁶. The common denominator 439

440 of the metabolic switches in effector $\gamma\delta$ and $\alpha\beta$ T cells may thus be 441 upregulation of Myc, which is required for transcription of genes encoding glycolytic enzymes^{26,27}. Indeed, our data show a striking enrichment of Myc 442 (mRNA and protein) in $\gamma \delta^{\text{IFN}}$ cells compared to $\gamma \delta^{17}$ cells. On the other hand, 443 444 the sustained dependence of $\gamma \delta^{17}$ cells on mitochondrial OxPhos is in line with 445 that recently reported for their functional equivalents in the $\alpha\beta$ T cell compartment, Th17 cells³⁹. Of note, IL-17-producing type 3 innate lymphoid 446 447 cells (ILC3) were recently shown to require both glycolysis and mitochondrialderived ROS for activation⁴⁰, but a direct comparison with type 1 ILCs is still 448 449 missing.

450 The concept of TCR signalling playing a key role in the metabolic 451 programming of $\gamma\delta$ T cell subsets builds upon, but provides a novel 452 perspective to, previous models of their thymic development. Thus, the $\gamma \delta^{\text{IFN}}$ 453 unequivocal dependence on strong TCR signals for cell differentiation^{20,30} may be linked to a required metabolic shift to aerobic 454 glycolysis. Moreover, the detrimental impact of agonist TCR signals on $\gamma \delta^{17}$ 455 456 cell development may be due to metabolic conflict with their OxPhos 457 requirements, documented by our FTOC experiments using specific inhibitors. 458 Importantly, these distinct metabolic phenotypes are maintained in peripheral 459 $\gamma\delta$ T cell subsets, which is consistent with and expands our previous epigenetic and transcriptional analyses^{41,42}. 460

461 We were particularly interested to investigate the metabolic properties of 462 peripheral $\gamma \delta$ T cell subsets once they infiltrated tumour lesions, for which we 463 employed three experimental models of cancer (melanoma, breast and colon). Critically, we found that the dichotomy between $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ subsets 464 465 was preserved in the TME, which enabled metabolic interventions that may 466 have the rapeutic potential. In fact, while $\gamma\delta$ T cell infiltration is largely 467 perceived to associate with favourable prognosis in cancer patients⁴³, recent 468 clinical data have suggested that, in agreement with mouse experimental systems²², human $\gamma \delta^{17}$ versus $\gamma \delta^{\text{IFN}}$ cell subsets have antagonistic prognostic 469 values⁸. Thus, improvement in the therapeutic performance of $\gamma\delta$ T cells in the 470

471 clinic⁴⁴ is likely to require a better understanding of the factors that control the 472 balance between $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cell subsets in the TME.

473

Here, we also identified lipids as key $\gamma \delta^{17}$ -promoting factors, which is 474 475 particularly relevant because tumours are known to be lipid-rich microenvironments^{4,5,45,46}. Palmitate and cholesterol ester uptake were higher 476 in $\gamma \delta^{17}$ than $\gamma \delta^{\text{IFN}}$ cells, therefore we propose that increase in intracellular lipids 477 is due to enhanced uptake, although endogenous lipid synthesis cannot be 478 479 ruled out. Our findings that $\gamma \delta^{17}$ cell proliferation is boosted by cholesterol 480 treatment, and that these cells expand substantially in obese mice, provide additional evidence that HFD causes a systemic increase in the $\gamma\delta^{17}$ subset, 481 consistent with previous findings in the skin⁴⁷ and lungs⁴⁸, and may provide a 482 483 mechanistic understanding for this expansion. Obesity is a known risk factor 484 for cancer and we previously demonstrated the link between obesity and suppression of NK cell anti-tumour function⁴⁹. Given that $\gamma\delta^{17}$ cells have 485 486 strong pro-tumoural effects and we find this population to be expanded in 487 tumours of obese mice, this may represent an additional mechanism linking cancer and obesity, whereby abundant lipids favor $\gamma \delta^{17}$ over $\gamma \delta^{IFN}$ cells to 488 489 support tumour growth.

Conversely, we found $\gamma \delta^{\text{IFN}}$ cells, from their thymic development to intra-490 491 tumoural functions, to be boosted by glucose metabolism. Naturally, the large 492 consumption of glucose by tumour cells⁷ creates a major metabolic constraint on $\gamma \delta^{\text{IFN}}$ TILs. Glucose restriction can impair T cell cytokine production^{5,6}, while 493 494 production of lactate by tumour cells performing aerobic glycolysis can inhibit T cell proliferation and cytotoxic functions⁵⁰. Therefore, we do not conceive 495 496 glucose supplementation as an appropriate strategy to enhance endogenous T cell (including $\gamma \delta^{\text{IFN}}$) responses *in vivo*. Instead, we suggest that it should be 497 498 considered in protocols used to expand/differentiate $\gamma\delta$ T cells ex vivo for 499 adoptive cell therapy. Such an "in vitro glucose boost" may enable stronger 500 anti-tumour activities (namely, IFN- γ production and cytotoxicity) upon T-cell transfer, as suggested by our data using CD27⁺ $\gamma \delta^{\text{IFN}}$ cells in the breast cancer 501

502 model, although evaluation of the duration and long-term impact of this 503 "boost" requires further investigation in slower-growing tumour models.

504 While we did not dissect the mechanistic link between aerobic glycolysis and IFN- γ production by CD27⁺ $\gamma \delta^{\text{IFN}}$ cells, previous studies on $\alpha\beta$ T cells have 505 506 shown that glycolysis controls (via the enzyme GAPDH) the translation of IFN- γ mRNA⁵. Moreover, glycolysis was shown to be essential for the cytotoxic 507 508 activity of NK cells, namely their degranulation and Fas ligand expression, upon engagement of NK cell receptors (NKRs)⁵¹. This is particularly 509 510 interesting when considering the potential of a human $\gamma\delta T$ cell product that we developed for adoptive cell therapy of cancer, Delta One T (DOT) cells^{9,52,53}. 511 512 These V δ 1⁺ T cells are induced *in vitro* to express high levels of NKRs that enhance their cytotoxicity and IFN- γ production⁵²⁻⁵⁴. We therefore propose 513 514 that high dose glucose should be added to the DOT protocol as to further 515 increase their anti-tumour potential.

516 In sum, this study demonstrates that thymic differentiation of effector $\gamma\delta$ T cell 517 subsets, besides well-established epigenetic and transcriptional regulation, 518 includes divergent metabolic programming that is sustained in the periphery 519 and, in particular, in the TME. It further identifies distinct metabolic resources 520 that control the intra-tumoural activities of $\gamma\delta$ T cell subsets, with lipids favoring $\gamma \delta^{17}$ cells and glucose boosting $\gamma \delta^{\text{IFN}}$ cells, which provides a new 521 522 metabolism-based angle for therapeutic intervention in cancer and possibly 523 other diseases.

524 Methods

525 **Ethics statement**

526 All mouse experiments performed in this study were evaluated and approved 527 by the institutional ethical committee (Instituto de Medicina Molecular Orbea). 528 the national competent authority (DGAV) under the license number 019069, 529 UK Home Office regulations and institutional guidelines under license number 530 70/8758 and by the Institutional Animal Care and Use Committee of Brigham 531 and Women's Hospital and Harvard Medical School, the Trinity College Dublin 532 ethics committee. Euthanasia was performed by CO₂ inhalation. Anesthesia 533 was performed by isoflurane inhalation.

534

535 Mice and tumour cell lines

C57BI/6J WT mice and Myc-GFP mice (B6;129-Myc^{tm1Slek/}J) were purchased
from Charles River and Jackson Laboratories. PLZF-GFP (*Zbtb16*^{GFP}) mice
were generated in the laboratory of D. Sant'Angelo as described previously¹.
Mice were maintained under specific pathogen-free conditions. Standard food
and water were given *ad libitum*. Where indicated, mice were fed high fat diet
(HFD) (research diets) for 8 weeks. Mice were used at the foetal (embryonic
day 14-18), neonatal (1-5 days old) or adult (6-12 weeks old) stages.

The E0771 murine breast adenocarcinoma cells, MC38 murine colon adenocarcinoma cells and B16.F10 melanoma cells were purchased from ATCC (Manassas, VA). Cells were maintained in Dulbecco's Modified Eagle Medium (DMEM) with 10% (vol/vol) FCS (Gibco; Thermo Fisher Scientific) and 1% (vol/vol) penicillin/streptomycin (Sigma-Aldrich).

548

549 **Tumour transplantation** *in vivo*

550 Mice were injected with 1 x 10^{6} E0771 tumour cells in fat pads, 1 x 10^{6} MC38 551 tumour cells or 2 x 10^{5} cells B16 tumour cells subcutaneously into the right 552 shaved flank. Tumour growth was measured every 2-3 days using calipers 553 and animals were sacrificed when tumours reached a diameter (D) of 15mm, 554 became ulcerous, or 1 or 2 weeks after tumour injection. Tumour size was calculated using the following formula: $(D1)^2 \times (D2/2)$, D1 being the smaller value of the tumour diameter. In some experiments, mice were fed with a HFD (60% calories from lard) for 10 weeks prior to tumour injection and the HFD was continued throughout the experiment.

559

560 **Comprehensive Lab Animal Monitoring System**

561 Indirect calorimetry data were recorded using a Promethion Metabolic Cage 562 System (Sable Systems) essentially as described previously². Mice were 563 housed individually in metabolic chambers under a 12h light/dark cycle at 564 room temperature (22°C) with free access to food and water. Mice were 565 acclimated for 24h in metabolic cages before recording calorimetric variables. 566 Mice were fed either a standard chow diet or a high fat (60%) diet ad libitum 567 for 12 weeks prior to being placed in the metabolic cages and were 568 maintained on either diet throughout the recording.

569

570 Tissue processing and cell isolation

571 Tumours were collected and digested with 1mg/mL collagenase Type I, 0.4 572 mg/mL collagenase Type IV (Worthington) and 10 µg/mL DNase I (Sigma-573 Aldrich) for 30 minutes at 37°C. Cell suspension was then filtered through a 574 100 μ m nylon cell strainer (Falcon/Corning). $\gamma\delta$ T cells were isolated by 575 scratching thymus, spleen and lymph node on a 70µm mesh. Lungs were 576 minced then homogenized in RPMI 1640 using a TissueLyser (Qiagen) and 577 filtered through 70µm mesh. Adipose tissue was processed as described previously³. Red blood cells were lysed using RBC Lysis Buffer (Biolegend) or 578 579 ammonium chloride lysis buffer (made in-house). Single-cell suspensions of 580 foetal and neonatal thymocytes were obtained by gently homogenizing thymic 581 lobes followed by straining through 40µm strainers (BD).

582 For cell-sorting, $\gamma\delta$ T cells were pre-enriched by depletion of CD4⁺ and CD8⁺ T 583 cells, dendritic cells and B cells using biotinylated anti-CD4 (RM4-5), anti-CD8 584 (53-6.7), anti-CD11c (N14) and anti-CD19 (6D5) antibodies with anti-biotin 585 microbeads (Miltenyi Biotech) by QuadroMACS or $\gamma\delta$ T cells were purified using TCR γ/δ T Cell Isolation Kit, mouse (Miltenyi Biotec). Cells were sorted on a FACS Aria (BD Biosciences).

588

589 Cell Culture

CD27⁻ $\gamma\delta$ T cells were expanded in vitro as previously described⁴. This 590 protocol was adapted to expand CD27⁺ $\gamma\delta$ T cells by using 10ng/ml IL-2, 591 592 10ng/ml IL-15 and 20ng/ml IL-7. For downstream assays, $\gamma\delta$ T cells were 593 purified using TCRy/8 T Cell Isolation Kit, mouse (Miltenyi Biotec). Ex vivo 594 cultures were performed using RPMI 1640 (Gibco) supplemented with 10% 595 heat-inactivated foetal bovine serum (Gibco), 1% penicillin/streptomycin, 1% 596 L-glutamine. For cytokine stimulation, cells were cultured with 10ng/ml IL-1ß 597 and IL-23 (Miltenyi Biotec) and/or IL-12 and IL-18 (BioLegend).

598 For short-term skin-draining-lymphocyte cultures, single-cell suspensions of 599 lymphocytes were isolated from skin-draining lymph nodes from adult B6 600 mice. Cells were resuspended in complete RPMI medium (RPMI-1640 with 10% FCS, 1% penicillin and streptomycin, and 2 mM L-glutamine). 1 x 10⁶ 601 602 lymphocytes in 500 µl of complete medium were incubated for 48h in 48-well 603 plates either under control conditions or with the addition of 5-aminoimidazole-604 4-carboxamide (AICAR; 1.6 mM; Sigma-Aldrich). Cells were subsequently 605 analysed by flow cytometry.

606

607 **Foetal Thymic Organ Cultures (FTOC)**

608 E15-E17 thymic lobes from B6 mice were cultured on nucleopore membrane 609 filter discs (Whatman) in FTOC medium (RPMI-1640 with 10% FCS, 1% 610 penicillin and streptomycin, 50 μ M β -mercaptoethanol (Invitrogen), and 2 mM 611 L-glutamine (Sigma-Aldrich)) for 6-12 days (unless otherwise indicated). In 612 some experiments 2-deoxyglucose (2-DG; 0.6 mM), fasentin (0.6 mM), 613 metformin (2 mM) or oligomycin (1 nM) were added to the cultures. All thymic 614 organ cultures were subsequently analysed by flow cytometry. In some 615 cultures, where concentration of glucose was manipulated, "basic" FTOC

616 medium (RPMI-1640 [-] glucose with 10% FCS, 1% penicillin and 617 streptomycin, 50 μ M β -mercaptoethanol (Invitrogen), and 2 mM L-glutamine 618 (Sigma-Aldrich)) was used, and glucose was added at 5mM for "low-glucose" 619 conditions or 25mM for "high-glucose" conditions.

In some experiments, anti-TCR δ antibody (GL3; 1µg/ml unless otherwise indicated) was added to the cultures. Cultures containing antibody were rested overnight in fresh FTOC medium before analysis. All thymic organ cultures were subsequently analysed by flow cytometry.

624

625 Manipulation of $\gamma\delta$ metabolic pathways *in vitro* and *in vivo*

626 Spleen and lymph nodes were harvested from C57Bl/6J mice. Cell 627 suspensions were stained with LIVE/DEAD Fixable Near-IR (Thermo Fisher 628 Scientific), anti-CD3 ϵ (145-2C11), anti-TCR δ (GL3), and anti-CD27 (LG.7F9) 629 for 15 minutes at 4°C. CD27⁺ and CD27⁻ $\gamma\delta$ T cells were FACS-sorted. CD27⁺ 630 and CD27⁻ $\gamma\delta$ T cells were incubated on plate-bound anti-CD3 ϵ (145.2C11) 631 (10 μ g/mL) in the presence of IL-7 (50 μ g/mL) or IL-7 (50 μ g/mL), IL-1 β (10 632 μ g/mL) and IL-23 (10 μ g/mL), respectively. All cytokines were purchased from 633 Peprotech. Then, cells were cultured with 2-Deoxy-D-Glucose (2-DG; 2mM; 634 Sigma-Aldrich), high D-glucose (50mM; Sigma-Aldrich), galactose (20mM; 635 Sigma-Aldrich), Carbonyl cyanide 4-(trifluoromethoxy) phenylhydrazone 636 (FCCP; 1µM; Sigma-Aldrich) and cholesterol-loaded cyclodextrin (CLC; 637 5 µg/mL) for 5h at 37°C for *in vitro* experiments.

For experiments *in vivo*, purified CD27⁻ and CD27⁺ γδ T cells were incubated (or not) for 5h with cholesterol-loaded cyclodextrin (5 µg/mL) or with high Dglucose (50mM; Sigma-Aldrich), respectively. 5 x 10^5 CD27⁻ or 1 x 10^6 CD27⁺ $\gamma\delta$ T cells were injected twice directly at the tumor site (1st injection 7 days after tumour inoculation and 2nd injection 2 days later). Mice were analyzed 11 days after tumour cell injection.

For lipid depletion *in vivo*, mice were injected daily with 50mg/kg Orlistat i.p.
on days 6-9 after tumour injection, then tumour cell infiltrate was analysed on
day 10.

647 Killing assays for CD27⁺ $\gamma\delta$ T cells *in vitro*

Purified CD27⁺ $\gamma\delta$ T cells were supplemented (or not) with high levels of glucose (50mM; Sigma-Aldrich) for 5h at 37°C, 5% CO₂. Then, variable numbers of CD27⁺ $\gamma\delta$ T cells were co-cultured with 5 x 10⁵ E0771 breast cancer cells in complete RPMI Medium (minus D-Glucose). The killing capacities of CD27⁺ $\gamma\delta$ T cells based on death of E0771 cells (Annexin V staining) was assessed by flow cytometry after 24h.

654

655 Flow cytometry

656 $\gamma\delta$ T cells were analysed by flow cytometry using standard procedures. For 657 surface staining, cells were Fc-blocked with anti-CD16/32 (clone 93; 658 eBioscience) and incubated for 15 minutes at 4°C with antibodies and 659 LIVE/DEAD Fixable Near-IR (Thermo Fisher Scientific) or viability dye Zombie 660 NIR stain (BioLegend) in FACs buffer (PBS 1X, 10% FCS, 0.5M EDTA). Anti-661 CD3ε (145-2C11), anti-CD27 (LG.7F9), anti-CD25 (PC61), anti-CD73 662 (TY/11.8) and anti-V γ 2 (UC3-10A6) were purchased from eBioscience. Anti-663 CD45 (30-F11), anti-TCRδ (GL3), anti-CD24 (M1/69), anti-Vγ1 (2.11), anti-Vγ4 664 (UC3-10A6), anti-Vγ5 (536) and anti-CD45RB (C363-16A) were purchased 665 from BioLegend and anti-CD44 (IM7) from BD Pharmingen. Cells were 666 washed with FACS buffer. For intracellular cytokine staining, cells were 667 stimulated with 50 µg/mL phorbol 12-myristate 13-acetate (PMA; Sigma-668 Aldrich) and 1 µg/mL ionomycin (Sigma-Aldrich) for 3-4 hours at 37°C, 5% 669 CO_2 in the presence of 10 µg/mL brefeldin-A (Sigma-Aldrich) and 2 µM 670 monensin (eBioscience). Cells were fixed and permeabilized with Foxp3 671 staining kit (eBioscience/Thermo Fisher Scientific), according to the 672 manufacturer's instructions. Cells were incubated for 30 minutes at 4°C, with 673 the following antibodies from eBioscience: anti-IFN- γ (XMG1.2), anti-IL-17 674 (TC11-18H10.1), Ki67 (16A8), T-bet (4B10) and RORyt (B2D). For Annexin V 675 staining, Annexin V Kit (eBioscience) was used following manufacturer's 676 instructions.

677 The following dyes were purchased from Invitrogen and stained according to manufacturer's instructions: Mitotracker[™] Green FM, Tetramethylrhodamine 678 Methyl Ester Perchlorate (TMRM), HCS LipidTOX[™] Red Neutral Lipid Stain. 679 Palmitate uptake was measured using 1µM Bodipy FL-C₁₆ (Invitrogen) 680 681 incubated for 10mins at 37°C. Cholesterol ester uptake was measured using 682 2μ M Bodipy CholEsteryl FL-C₁₂ incubated for 1h at 37°C. Cholesterol content 683 was measured using 50µg/ml Filipin III (Sigma-Aldrich) incubated for 1h at 684 room temperature.

Flow cytometry analysis was performed with a FACS Fortessa, LSRII or
Canto II (BD Biosciences) and data analysed using FlowJo software (BD
Biosciences).

688

689 Metabolism profile of cells

690 Seahorse Metabolic Flux Analysis: Real-time analysis of oxygen consumption rates (OCR) and extracellular-acidification rates (ECAR) of IFN-y- and IL-17-691 committed $\gamma\delta$ T cells sorted from 5-day-old B6 pups and CD27^{+/-} $\gamma\delta$ T cells 692 693 from spleen/lymph nodes expanded in vitro were assessed using the XFp 694 Extracellular Flux or Seahorse XFe-96 analyzers, respectively (Seahorse 695 Bioscience). Cells were added to a Seahorse XF96 Cell Culture Microplate 696 (Agilent), coated with Cell-Tak (Corning) to ensure adherence, and sequential 697 measurements of ECAR and OCR were performed in XF RPMI Seahorse 698 medium supplemented with glucose (10mM), glutamine (2mM), and sodium 699 pyruvate (1mM) following the addition of Oligomycin A (2μ M), FCCP (2μ M), 700 rotenone (1 μ M) plus antimycin A (1-4 μ M). Basal glycolysis, glycolytic 701 capacity, basal mitochondrial respiration and maximal mitochondrial 702 respiration were calculated. OCR and ECAR values were normalized to cell 703 number.

704

705 **SCENITH**[™]

706 Cells were plated at 20×10^6 cells/ml in 96-well plates. After activation of $\gamma \delta$ T 707 cells, cells were treated for 30 minutes at 37°C, 5% CO₂ with Control (Co), 2-

708 Deoxy-D-Glucose (DG; 100mM; Sigma-Aldrich), Oligomycin (O; 1µM; Sigma-709 Aldrich) or a combination of both drugs (DGO). Puromycin (Puro, 10µg/ml; Sigma-Aldrich) is added during 15 minutes at 37°C. SCENITH[™] kit 710 711 (http://www.scenith.com) containing all reagents and protocols were kindly 712 provided by Dr. Rafael Argüello, (CIML). Cells were washed in cold PBS and 713 stained with primary conjugated antibodies against different surface markers 714 (as described above) for 15 minutes at 4°C in FACS buffer (PBS 1X 5% FCS, 715 2mM EDTA). After washing with FACS buffer, cells were fixed and 716 permeabilized using Cytofix/Cytoperm[™] (BD) following manufacturer's 717 instructions. Intracellular staining of puromycin using the anti-Puro monoclonal 718 antibody (1:600, Clone R4743L-E8) was performed by incubating cells during 719 30min at 4°C diluted in Permwash. Experimental duplicates were performed in 720 all conditions.

721

722 In vivo glucose uptake

2-NBDG (300µg diluted in PBS 1X; Cayman chemical) was injected i.v. in
C57BI/6J mice; 15min later, cells from tumours were harvested.

725

726 Assessment of mitochondrial morphology

727 Mitochondrial membrane potential was measured using 728 tetramethylrhodamine, ethyl ester (TMRE; 100nM; Abcam) according to 729 manufacturer protocols. Following TMRE staining, carbonyl cyanide-4-730 (trifluoromethoxy) phenylhydrazone (FCCP; 25µM; Abcam) was used as a 731 for mitochondrial positive control membrane depolarization. Total 732 mitochondrial mass was assessed using MitoTracker Green (Invitrogen) 733 according to manufacturer's instructions. All cells were subsequently analysed 734 by flow cytometry.

735

736 Triglyceride Quantification

Triglycerides (TAGs) were quantified from expanded $\gamma\delta$ T cells *in vitro* using Picoprobe Triglyceride Quantification Assay Kit, Fluorometric (Abcam) and absorbance measured using FLUOstar OPTIMA (BMG Labtech).

740

741

742 RNA isolation and real-time PCR

743 mRNA was prepared from FACS-sorted CD27⁺ and CD27⁻ $\gamma\delta$ T cells from WT spleen and draining lymph nodes using High Pure RNA Isolation kit (Roche). 744 745 Reverse transcription was performed with random oligonucleotides 746 (Invitrogen). Results were normalized to actin mRNA. qPCR was performed 747 with SYBR Premix Ex Taq master mix (Takara) on an ABI ViiA7 cycler 748 (Applied Biosystems). The CT for the target gene was subtracted from the CT 749 for the endogenous reference, and the relative amount was calculated as 750 $2-\Delta CT.$

751

752 Imaging

Thymocytes from B6 E15 thymic lobes cultured for 12 days were isolated and
stained for surface markers and then Mitotracker Green or TMRE (as
described above). All cells were subsequently analysed on an ImageStream[™]
Mark II imaging flow cytometer (Amnis); 30k events were saved from samples
and 1k positive events from compensation single color controls. Analysis was
performed using IDEAS® version 6.2.

For lipid droplet quantification, expanded $\gamma\delta$ T cells *in vitro* were stained with LipidTOX red neutral lipid stain (Invitrogen) and Hoechst 33342 (Sigma-Aldrich). Mitotracker Green FM (Invitrogen) was used to identify mitochondria. Cells were mounted onto poly-L-lysine coated slides. Images were obtained with a Zeiss LSM 800 confocal microscope using Zen 2.3 software (Zeiss) and analyzed using ImageJ.

765

766 **RNA-sequencing and data processing**

Single-cell sequencing libraries were generated using the Chromium[™] Single
Cell 5' Library and Gel Bead Kit (10X Genomics) according to the
manufacturer's instructions. Data was analysed using the R package Seurat
v2.3^{5,6}.

771 UMI counts were normalized using regularized negative binomial regression 772 with the sctransform package⁷. For downstream analysis of normalized data 773 principal component analysis (PCA) was performed using n=50 dimensions 774 and PCA variability was determined using an Elbow plot. Differential gene 775 expression analysis and GSEA was performed using the MAST and fgsea 776 packages^{6,7}. Pathways and gene lists for gene set enrichment analysis were 777 obtained using the misgdbr package from Molecular Signatures database (MSigDB)^{8,9}. Adaptively-thresholded Low Rank Approximation (ALRA) from 778 779 the Seurat wrappers package was performed to correct for drop-out values for 780 visualization of leading-edge and differentially expressed genes identified by 781 MAST¹⁰. The accession codes for RNA single-cell sequencing 782 are GSE150585 and GSE156782.

All downstream analysis was performed using R v.3.6.3 and RStudio Desktop 1.2.5001 on an Ubuntu 19.10 linux (64 bit) system using the following R packages and libraries: dplyr v.0.8.5, fgsea v.1.12.0, ggplot2 v.3.3.0, MAST v.1.12.0, sctransform v.0.2.1, Seurat v.3.1.4, SeuratWrappers v.0.1.0, uwot v.0.1.8 and viridis v.0.5.1.

788

789 Statistical analysis

Statistical analysis was performed using GraphPad Prism software using nonparametric two-tailed Mann-Whitney test or, if both groups followed a normal distribution (tested by D'Agostino and Pearson normality test), using twotailed unpaired Student *t* test or one-way analysis of variance. All data are presented as means \pm standard error of mean (SEM) or standard deviation (SD). **p* < 0.05; ***p* < 0.01; ****p* < 0.001, ****<0.0001.

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842 Author contributions

N.L, C.M, S.M and M.R performed most of the experiments and analyzed the
data. G.F. designed and performed some experiments. N.S., A.K., L.D., H.K.,
A.D., S.C., H.P. R.L. and C.C. provided technical assistance in some
experiments. M.K. and L.A performed bioinformatic analysis and M.B provided
reagents, materials and support. R.A. provided key assistance with the
SCENITH[™] methodology. B.S.-S., D.P and L.L conceived and supervised the
study. N.L, C.M., B.S.-S., D.J.P. and L.L. wrote the manuscript.

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1033

1036 Figure Legends

1037Figure 1. Intra-tumoural γδ T cell subsets display distinct metabolic1038profiles.

1039 (a) Experimental design: E0771 breast or MC38 colon cancer cell lines were injected in WT mice; 6 and 15 days later, tumours were extracted for 1040 metabolic analysis of $\gamma\delta$ T cells using SCENITHTM. Inhibitors for different 1041 1042 metabolic pathways were added for 30min followed by an incubation of 15min 1043 with puromycin. Mean fluorescence intensity (MFI) of puromycin is analyzed by flow cytometry in $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ subpopulations for each condition. (b-e) 1044 Puromycin MFI of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ T cells from E0771 (b,d) and MC38 (c,e) 1045 1046 tumour-bearing mice in control conditions (Co) or after the addition of 2-1047 deoxy-D-glucose (DG), oligomycin (O) or both inhibitors (DGO). Graph shows 1048 the percentage of glucose dependence, mitochondrial dependence, glycolytic 1049 capacity and fatty acid and amino acid oxidation (FaaO) capacity of tumourinfiltrating $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cells isolated either 6 (d,e) or 15 (b,c) days after 1050 cancer cell line injection. Data are representative of two independent 1051 1052 experiments (n=5 mice per group in each experiment). pi: post-injection. $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ T cells represents IL-17 and IFN- γ -producing $\gamma \delta$ T cells, 1053 respectively. Error bars show mean \pm SEM, *p < 0.05; **p < 0.01; ****<0.0001 1054 1055 using unpaired Student's t-test.

1056

1057 Figure 2: Peripheral $\gamma\delta$ T cell subsets show different mitochondrial and 1058 metabolic phenotypes.

1059 (a) Representative plots (left) and summary graphs (right) of the MFI of mitotracker and tetramethylrhodamine methyl ester (TMRM) in $\gamma \delta^{27-} (\gamma \delta^{17})$ and 1060 $\gamma\delta^{27+}$ ($\gamma\delta^{\text{IFN}}$) T cells *ex vivo* from LNs of C57BL/6 mice (n=7; data pooled from 1061 2 experiments). (b) Representative confocal images (left) of $\gamma\delta^{17}$ and $\gamma\delta^{\text{IFN}}$ T 1062 1063 cells stained with mitotracker (green) and Hoechst 33342 (blue). Scale bar 1064 represents 5µM. Analysis of mitotracker staining relative to cell size (right) in $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells *ex vivo*. Relative mitotracker was calculated by dividing the 1065 MFI of mitotracker by the MFI of FSC-A and multiplying by 100 (n=7, data 1066

1067 pooled from 2 independent experiments). (c) Tetramethylrhodamine ethyl ester (TMRE) MFI of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ T cells from skin draining LNs. mesenteric 1068 1069 LNs, spleen and liver of WT mice. Data are representative of 3 independent 1070 experiments (n=3 mice per group and experiment). (d) Seahorse analysis of 1071 extracellular acidification rate (ECAR) and oxygen consumption rate (OCR) of $\gamma\delta^{17}$ and $\gamma\delta^{IFN}$ T cells (expanded *in vitro*) from LNs ($\gamma\delta^{17}$ n=2, $\gamma\delta^{IFN}$ n=5, data 1072 1073 representative of 3 independent experiments). (e) Energy map showing ECAR vs OCR of $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ T cells. Each symbol represents average basal 1074 metabolism. (f) Basal glycolytic rate, glycolytic capacity and basal OxPhos of 1075 $\gamma\delta^{17}$ (n=3) and $\gamma\delta^{\text{IFN}}$ (n=8) cell subsets (data pooled from 2 independent 1076 1077 experiments). (g) Percentage of glucose dependence, mitochondrial 1078 dependence, glycolytic capacity and fatty acid and amino acid oxidation (FaaO) capacity of $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cells from spleen and draining lymph nodes 1079 1080 (dLNs). Data are representative of three independent experiments (n=5 mice 1081 per group and per experiment). (h,i) OxPhos-related genes (Ndufa11, 1082 Ndufa13, Sdha, Cox6a1, Cox7a1, Cox15, Nrf1) and glycolysis-related genes (*Pqm1*, *Pqm2*, *Gpi1*, *Pqam1*, *Myc*) were measured by qPCR in purified $\gamma \delta^{17}$ 1083 (n=4) and $\gamma \delta^{\text{IFN}}$ (n=4) T cells from spleen and dLN from WT mice. (i) 1084 Representative plot (left) and percentages (right) of Myc-GFP+ $\gamma\delta^{17}$ and $\gamma\delta^{IFN}$ 1085 1086 T cells from LNs of Myc-GFP reporter mice (n=2). Error bars show mean ± SEM or SD, *p < 0.05; **p < 0.01; ***p < 0.001, ****<0.0001 using 1087 1088 unpaired Student's t-test.

1089

1090 Figure 3: $\gamma\delta$ T cell subsets are metabolically programmed in the thymus.

(a) Puromycin MFI of $\gamma \delta^{17}$ (CD44^{hi}CD45RB⁻) and $\gamma \delta^{IFN}$ (CD44⁺CD45RB⁺) T 1091 1092 cells from WT adult thymus in resting conditions (Co) and after the addition of 1093 2-deoxy-D-glucose (DG), oligomycin (O) or both (DGO). Histogram (right) 1094 shows the percentage of glucose dependency (white), mitochondrial 1095 dependency (blue), glycolytic capacity (red) and fatty acid and amino acid oxidation (FaaO) capacity (purple) of thymic $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells. Data are 1096 representative of two independent experiments (n=5 mice per group and per 1097 1098 experiment). (b) Histograms shows the percentage of glucose dependency

1099 (white), mitochondrial dependency (blue), glycolytic capacity (red) and fatty acid and amino acid oxidation (FaaO) capacity (purple) of $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ T 1100 1101 cells from WT newborn thymus (d3). Data are representative of three 1102 independent experiments (n=6 mice per group and per experiment). (c) Flow 1103 cytometry profile and Tetramethylrhodamine ethyl ester (TMRE) MFI of thymic $\gamma\delta^{24+}$ precursors treated or not with FCCP. Data are representative of 3 1104 independent experiments (data points represent at least 4 lobes pooled per 1105 1106 group and per experiment). (d) Flow cytometry profiles and TMRE MFI of $\gamma \delta^{TN}$ $\gamma \delta^{17}$ $\gamma \delta^{\text{IFN}}$ (CD44⁻CD45RB⁻), (CD44^{hi}CD45RB⁻) 1107 thymic and (CD44⁺CD45RB⁺) cells treated or not with FCCP. Data are representative of 3 1108 1109 independent experiments (data points represent at least 4 lobes pooled per aroup and per experiment). (e) Imagestream analysis of $\gamma\delta^{17}$ and $\gamma\delta^{IFN}$ cells 1110 stained with either mitotracker green or TMRE. Data are representative of 2 1111 independent experiments. (f) O_2 consumption rates (OCR) of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ 1112 cells were measured by Seahorse analysis in real-time under basal conditions 1113 1114 and in response to indicated mitochondrial inhibitors. (g) Histograms show 1115 maximal respiration potential and spare respiratory capacity by measuring oxygen consumption rates (OCR) of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells from thymuses of 5-1116 1117 day old B6 pups. Data are representative of 3 independent experiments 1118 (pooled thymic lobes from n>10 mice per group per experiment). (h-i) Flow cvtometry profiles of thymic $\gamma \delta^{TN}$, $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells from 7-day FTOC of E15 1119 1120 thymic lobes either with media containing low (5mM) or high (25mM) glucose 1121 (h), or with or without 2-deoxy-d-glucose (2-DG) (i) or metformin (j). Histograms show the number of $\gamma \delta^{17}$ cells and $\gamma \delta^{17}/\gamma \delta^{\text{IFN}}$ cell ratio. Data are 1122 1123 representative of 2 (h) or 3 (i-j) independent experiments (at least 4 lobes 1124 pooled per group per experiment). Error bars show mean ± SEM or SD, *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001 using unpaired Student's t-1125 1126 test.

1127

1128Figure 4: Distinct mitochondrial activities underlie effector fate of thymic1129γδ T cell progenitors.

(a,b) Flow cytometry profiles and percentage of thymic $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cell 1130 output from post-sorted TMRE^{lo} and TMRE^{hi} $\gamma\delta^{TN}$ cells (a) or $\gamma\delta^{24+}$ cells (b) 1131 after 5-day culture on OP9DL1 cells. Data are representative of 3 independent 1132 1133 experiments (n = 4 mice pooled per group per experiment). (c) Percentage of Vy1⁺ and Vy4⁺ cells in TMRE¹⁰ and TMRE^{hi} $\gamma\delta^{24+}$ and $\gamma\delta^{24-}$ subsets. Data are 1134 1135 representative of 3 independent experiments (cells sorted from n=4 mice pooled per group per experiment). (d) TMRE MFI of thymic $\gamma \delta^{TN}$ (CD44⁻ 1136 CD45RB⁻), CD24⁻CD44⁻CD45RB⁺ $\gamma\delta$ T cells and $\gamma\delta^{IFN}$ cells (CD44⁺CD45RB⁺) 1137 1138 from 6-day FTOC of E17 B6 thymic lobes. (e) TMRE staining in CD24 CD73⁺, CD24⁻CD73⁻, CD24⁺CD73⁺ and CD24⁺CD73⁻ $\gamma\delta$ T cells from 7-day FTOC of 1139 E15 B6 thymic lobes. (f) TMRE staining in CD25 CD24⁺ ($\gamma \delta^{24+}$ cells), CD25^{med}, 1140 CD25^{hi} and $V\gamma5^+ \gamma\delta$ progenitors from E15 thymus. (a) Flow cytometry profiles 1141 of thymic $\gamma \delta^{TN}$, $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells from 6-day FTOC of E17 B6 thymic lobes 1142 stimulated or not with anti-TCR δ mAb (GL3; 1µg/ml). Graph shows 1143 percentage of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells in each condition. (h) FACS-sorted 1144 $\gamma\delta^{24+}$ TMRE^{hi} cells from E17 thymi were cultured (or not) for 5h with different 1145 1146 concentrations (as indicated) of anti-TCR_δ mAb (GL3). TMRE levels were analysed by flow cytometry in $\gamma \delta^{24-}$ and $\gamma \delta^{24+}$ cells. Data are representative of 1147 3 independent experiments (n=4 mice pooled per group per experiment). (i) 1148 Experimental design for single-cell RNAseq (10x Genomics) on TMRE¹⁰ and 1149 TMRE^{hi} $\gamma \delta^{24+}$ cells from E15 + 2d FTOC. (j) Clustering of single TMRE^{lo} and 1150 TMRE^{hi} $\gamma \delta^{24+}$ cells using UMAP. (k) GO term analysis of genes upregulated in 1151 TMRE^{lo} versus TMRE^{hi} $\gamma \delta^{24+}$ cells. (I) Heatmap of differentially upregulated 1152 genes from comparison of TMRE^{lo} and TMRE^{hi} $\gamma \delta^{24+}$ cells. Genes are grouped 1153 in relation to their function in either OxPhos or glucose metabolism. Error bars 1154 show mean \pm SD, *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001 using 1155 1156 unpaired Student's t-test.

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1158 Figure 5. $\gamma \delta^{17}$ cells show higher lipid uptake and lipid droplet content 1159 than $\gamma \delta^{\text{IFN}}$ cells.

(a) Experimental set up for bulk RNA-sequencing of PLZF⁺ ($\gamma \delta^{17}$) and PLZF⁻ 1160 $(\gamma \delta^{\text{IFN}})$ cells isolated from PLZF-GFP (*Zbtb16*^{GFP}) mice. (b) Quadrant plot of 1161 genes upregulated in tissue resident PLZF⁺ $\gamma\delta$ T cells (lower right), lymphoid 1162 PLZF⁺ $\gamma\delta$ T cells (upper left), PLZF⁺ $\gamma\delta$ T cells from all tissues (upper right) or 1163 PLZF $\gamma\delta$ T cells from all tissues (lower left). (c) Representative histogram of 1164 neutral lipid staining (LipidTOX) in ex vivo $\gamma \delta^{17}$ (CD27⁻) and $\gamma \delta^{\text{IFN}}$ (CD27⁺) cells 1165 from LNs. (d) LipidTOX MFI in $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells *ex vivo* from LNs as shown 1166 1167 in (a) (n=11, data pooled from 3 independent experiments). (e) LipidTOX MFI in $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells from spleen, LNs, lungs, adipose, liver and skin (n=5-8, 1168 data pooled from 2 independent experiments). (f) Confocal imaging of $\gamma \delta^{17}$ 1169 and voliFN cells expanded in vitro and stained with LipidTOX (red) and Hoechst 1170 1171 33342 (blue). Scale bar represents 5µM (data representative of a minimum 10 1172 images from 2 independent experiments). (g) Quantification of confocal 1173 imaging as shown in (d) (each data point represents the average per cell per image). (h) Quantification of triglyceride (TAG) levels from $\gamma \delta^{17}$ and $\gamma \delta^{\text{IFN}}$ cells 1174 expanded in vitro (n=7, each symbol represents one biological replicate). (i) 1175 Filipin III staining of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells *ex vivo* from LNs. Representative 1176 histogram (left) and MFI (right) (n=6, data pooled from 2 independent 1177 experiments). (j) Representative histogram of Bodipy-FL-C₁₆ uptake in $\gamma \delta^{17}$ 1178 and $\gamma \delta^{\text{IFN}}$ cells from LNs ex vivo (n=8, data pooled from 2 independent 1179 experiment). (k) Representative plots of Bodipy-FL-C₁₆ uptake and IL-17 or 1180 IFN- γ production by $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells from LNs stimulated with 1181 PMA/ionomycin. (I) Bodipy-FL-C₁₆ MFI in IFN- γ^+ and IL-17⁺ $\gamma\delta$ T cells (n=4, 1182 1183 data representative of 3 independent experiments). (m) Representative plot of 1184 Vy1 and Vy4 expression in total y δ T cells and percentage Bodipy-FL-C₁₆ uptake by LN $\gamma\delta$ T cell subsets (V $\gamma1^+$, V $\gamma4^+$, V $\gamma1^-4^-$) (n=6, data pooled from 2 1185 independent experiment). (n) Representative IFN- γ and IL-17 production by 1186 1187 $V\gamma 4^+ \gamma \delta$ T cells from LNs and percentage Bodipy-FL-C₁₆ uptake by $V\gamma 4^+$ IFN- γ^+ and $V\gamma 4^+IL-17^+\gamma \delta$ cells (n=6, data pooled from 2 independent experiments). 1188 (o) Percentage Bodipy CholEsteryl FL-C₁₂ uptake by $\gamma\delta^{17}$ (CD27) and $\gamma\delta^{IFN}$ 1189 (CD27⁺) cells from LNs ex vivo (n=6, data pooled from 2 independent 1190

1191 experiments). Error bars show mean \pm SD, *p < 0.05, **p < 0.01, ***p < 0.001,

1192 ****p < 0.0001 using unpaired Student's t-test.

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1196 Figure 6. High fat diet promotes the expansion of $\gamma \delta^{17}$ cells in lymph 1197 nodes and within tumours.

1198 (a) Respiratory exchange ratio (RER) of mice fed SFD or HFD for 8 weeks 1199 (n=3, data from 1 experiment). (b) Bar graphs showing the percentage and 1200 absolute numbers of CD3⁺ $\gamma\delta$ T cells from LNs of standard fat diet (SFD) and 1201 high fat diet (HFD) mice (n=9, data pooled from 3 independent experiments). (c) Proportion of $\gamma \delta^{17}$ (CD27⁻) and $\gamma \delta^{\text{IFN}}$ (CD27⁺) T cells in LNs of SFD and 1202 HFD fed mice (n=9, data pooled from 3 independent experiments). (d) 1203 Percentage and absolute numbers of CD27⁺ IFN- γ^+ and CD27⁻ IL-17⁺ $\gamma\delta$ T 1204 cells from LNs of SFD and HFD mice (n=9, data pooled from 3 independent 1205 experiments). (e) Proportion of infiltrating $\gamma \delta^{17}$ cells in spleen, draining LN and 1206 1207 tumour in the B16 tumour model (dLN and tumour n=30, data pooled from 4 1208 independent experiments, spleen n=7, naïve LN n=5). (f) Bar graph showing the percentage of $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells infiltrating tumours (n=9, data pooled 1209 from 2 experiments). (g) Bar graph represents the size of tumours (mm³) in 1210 SFD and HFD fed mice. (h) Bar graph showing proportion of infiltrating $\gamma \delta^{17}$ 1211 (CD27⁻) and $\gamma \delta^{\text{IFN}}$ (CD27⁺) cells in tumours of SFD and HFD fed mice (SFD 1212 1213 n=10, HFD n=12, data pooled from 2 independent experiments). (i) 1214 Representative plots of IL-17 and IFN- γ expression in $\gamma\delta$ T cells infiltrating tumours of SFD and HFD fed mice. Bar graphs represent the percentage of 1215 $\gamma\delta^{17}$ and $\gamma\delta^{\text{IFN}}$ cells infiltrating tumours (SFD n=17, HFD n=20, data pooled 1216 from 3 independent experiments). (i) Bar graph showing the number/mm³ of 1217 $\gamma\delta^{17}$ and $\gamma\delta^{IFN}$ cells in tumours of mice on SFD or HFD (SFD n=7, HFD n=8, 1218 1219 data pooled from 2 independent experiments). (k) Plots of proliferating Ki67⁺ $\gamma\delta^{17}$ cells cultured for 5h with or without cholesterol-loaded cyclodextrin (CLC). 1220 Graph represents the percentage of Ki67⁺ $\gamma\delta^{17}$ cells (data are representative 1221

of two independent experiments; pool of 3-5 mice per experiment). (1) $\gamma \delta^{17}$ 1222 1223 cells cultured (or not) with cholesterol-loaded cyclodextrin (CLC) for 5h were 1224 injected s.c. into E0771 tumours at d7 and d9 after tumour cell injection. 1225 Representative picture of tumours observed at day 11 post-E0771 cell 1226 inoculation. (m) Graph showing tumour weight at day 11 post-E0771 1227 inoculation. (n) E0771 tumour growth was monitored every two days after 1228 inoculation ((I-n) data are representative of three independent experiments 1229 (pool of 2-5 mice per experiment). Error bars show mean \pm SD, *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001 using unpaired Student's t-test or 1230 1231 ANOVA test.

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1233 Figure 7: Glucose supplementation enhances the effector functions of 1234 $\gamma \delta^{\text{IFN}}$ cells.

1235 (a) Glucose uptake assessed upon i.v. injection of fluorescent 2-NBDG in 1236 tumour-bearing mice. Tumours were harvested 15 min later for analysis. Histogram represents 2-NBDG uptake in $\gamma \delta^{17}$ and $\gamma \delta^{IFN}$ cells. (**b-i**) Purified 1237 splenic and peripheral lymph nodes $\gamma \delta^{\text{IFN}}$ T cells (CD3⁺TCR $\gamma \delta^{+}$ CD27⁺) were 1238 1239 cultured in the presence of IL-7 with media containing low glucose (5mM), 2-1240 deoxyglycose (2-DG), high glucose (50mM) or galactose (20mM) for 78h. (b) Plots of peripheral $\gamma \delta^{\text{IFN}}$ T cells cultured with IL-7 and media containing low 1241 glucose, 2-DG or high glucose. Histogram represents the fold change in 1242 number of $\gamma \delta^{\text{IFN}}$ T cells cultured with 2-DG or high glucose versus low glucose. 1243 (c) Fold change in number of proliferating Ki-67⁺ $\gamma \delta^{\text{IFN}}$ cells cultured with 2-DG 1244 or high glucose versus low glucose. (d,e) IFN- γ (d) and T-bet (e) expression 1245 was analysed by flow cytometry in $\gamma \delta^{\text{IFN}}$ cells incubated with media containing 1246 low glucose, 2-DG or high glucose. Histograms show the MFI of IFN-y and T-1247 bet. (f) Flow cytometry profiles of peripheral $\gamma \delta^{\text{IFN}}$ T cells cultured with IL-7 and 1248 media containing glucose (50mM) or galactose (20mM). Histogram represents 1249 the numbers of $\gamma \delta^{\text{IFN}}$ T cells. (g,h) IFN- γ (g) and T-bet (h) expression was 1250 analysed by flow cytometry in $\gamma \delta^{\text{IFN}}$ cells incubated with media containing 1251 glucose or galactose. Histograms show the MFI of IFN- γ and T-bet. 1252 1253 (i) Representative histograms and summary of killing assay in vitro

of E0771 tumour cells by $\gamma \delta^{\text{IFN}}$ T cells previously supplemented (or not) with 1254 1255 glucose (5h pre-incubation). (j) Representative picture of tumours observed at day 11 post-E0771 inoculation. $\gamma \delta^{\text{IFN}}$ cells supplemented (or not) with glucose 1256 1257 for 5h were injected into the tumour at d7 and d9 after tumour cell injection. 1258 (k) The E0771 tumour growth was monitored every two days during 11 days 1259 after E0771 inoculation (data are representative of two (i-k) or four (b-h) 1260 independent experiments; n = 5-10 mice per group and per experiment). Error bars show mean ± SEM, *p < 0.05, **p < 0.01, ***p < 0.001, ****p < 0.0001 1261 1262 using unpaired Student's t-test or ANOVA test.

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Figure 1















