

Activation of Nod2 signalling upon Norovirus infection enhances antiviral immunity and susceptibility to colitis

Ghaffar Muharram, Marion Thépaut, Pierre-Emmanuel Lobert, Teddy Grandjean, Olivier Boulard, Myriam Delacre, Emmrich Wakeford, Richard Wheeler, Lionel Franz Poulin, Ivo Gomperts Boneca, et al.

▶ To cite this version:

Ghaffar Muharram, Marion Thépaut, Pierre-Emmanuel Lobert, Teddy Grandjean, Olivier Boulard, et al.. Activation of Nod2 signalling upon Norovirus infection enhances antiviral immunity and susceptibility to colitis. 2023. hal-04101382v2

HAL Id: hal-04101382 https://hal.science/hal-04101382v2

Preprint submitted on 13 Aug 2023 (v2), last revised 30 Oct 2023 (v3)

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Disclosure of interest:

- 31 K.C. has received research support from Pfizer, Takeda, Pacific Biosciences, Genentech, and Abbvie;
- 32 consulted for or received honoraria from Vedanta, Genentech, and Abbvie; and holds U.S. patent
- 33 10,722,600 and provisional patent 62/935,035 and 63/157,225.

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Mathias Chamaillard, PhD, Phone number: +33359317427, Fax number: +33359317480, Email: mathias.chamaillard@inserm.fr Ghaffar Muharram, PhD, phone number: +33320871033, E-mail: ghaffar.muharram@pasteurlille.fr Key words: Antiviral immunity, Colitis, Macrophages NOD2, Norovirus, Signaling. Data availability statement: the data that support the findings of this study are available from the corresponding author, GM or MC, upon request on HAL https://hal.science/hal-04101382

Abstract. Over 90% of epidemic nonbacterial gastroenteritis are caused by human Noroviruses (NoV) which are persisting in a substantial subset of people allowing their spread worldwide. It leads to a significant number of endemic cases and up to 70,000 children deaths in developing countries. NoVs are primarily transmitted through the fecal-oral route. To date studies have focused on the influence of the gut microbiota on enteric viral clearance by mucosal immunity. In this study, the use of mouse norovirus S99 (MNoV S99) and CR6 (MNoV CR6), two persistent strains, allowed us to provide evidence that the norovirus-induced exacerbation of colitis severity relied on bacterial sensing by nucleotide-binding oligomerization domain 2 (Nod2). Consequently, Nod2-deficient mice showed reduced levels of gravity of Dextran sodium sulphate (DSS)-induced colitis with both viral strains. And MNoV CR6 viremia was heightened in Nod2^{-/-} mice in comparison with animals hypomorphic for Atg16l1, that are prone to aggravated inflammation under DSS. Accordingly, the infection of macrophages derived from WT mice promoted the phosphorylation of Signal Transducer and Activator of Transcription1 (STAT1) and NOD2's expression levels. Higher secretion of Tumor Necrosis Factor alpha (TNFα) following NOD2 activation and better viral clearance were measured in these cells. By contrast, reduced levels of pSTAT1 and blunted downstream secretion of TNFa were found in Nod2-deficient macrophages infected by MNoV S99. Hence, our results uncover a previously unidentified virus-host-bacterial interplay that may represent a novel therapeutic target for treating noroviral origin gastroenteritis that may be linked with susceptibility to several common illnesses such as Crohn's disease.

Introduction. The development of high throughput sequencing techniques progressively helped us gain a better comprehension of the composition of the enteric virome¹. This is of particular importance for unravelling how some enteric viruses can establish persistent infections and subsequently influence our health^{2,3}. Amongst those, noroviruses (NoV) have been studied for several years. These single stranded RNA (+) viruses, belonging to the family of *Caliciviridae* are responsible for the majority of non-bacterial gastroenteritis worldwide. Until recent progress in cultivation methods of noroviruses from genogroups I, II, IV, VIII and IX⁴⁻⁶ that infect humans (HuNoVs), mechanistic details were mostly obtained from studies using the mouse norovirus (MNoV)⁷. Indeed, MNoVs can be easily produced in vitro in macrophages or dendritic cells⁸. Several MNoV strains have been described based on their shedding time in the stool and classified as either persistent or acute (non-persistent) strains⁹. Owing to the variety of circulating NoV strains, strain-dependent effects are expected to occur and should be studied more in details. Even a single amino acid change in the NS1/2 viral protein is sufficient to switch the acute MNoV CW3 strain to a persistent state¹⁰, showing the high degree of adaptability of NoV genomes and hence their versatility to counteract host defence mechanisms. Type III interferon (IFN-λ) response has been shown to control the *in* vivo propagation of the persistent MNoV CR6 strain¹¹, while type I and II interferons mediate innate immune responses against acute MNoV infections^{12,13}. Multiple intracellular pattern recognition receptors (PRR) have been associated with indirect noroviral detection, especially during NoV genome replication, when double stranded RNA intermediates are generated¹⁴. As such, the Toll like receptor 3 (TLR3) that recognizes any dsRNA in the endosomal compartment and the melanoma differentiation associated protein-5 (MDA-5), a member of the RIG-I like receptor (RLR) family that recognizes long dsRNA, have been shown to participate in the detection of the MNoV 1 strain and its plaque isolate the MNoV CW3¹⁵. Amongst the Nod like receptor (NLR) family, it was shown that the loss of

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Nlrp6 impairs antiviral immunity to MNoV 1¹⁶. Besides its ability to sense muropeptides from Gram positive and negative bacteria¹⁷ the nucleotide-binding oligomerization domain 2 (NOD2) was also shown to directly bind with the genome (ssRNA-) of the respiratory syncytial virus (RSV) to induce antiviral responses¹⁸. The recruitment of MAVS by NOD2 was needed to activate the interferon-regulatory factor 3 (IRF3) dependent signaling and promote IFN-β production. In the same line, NOD2-dependent signaling was shown to disrupt intestinal homeostasis and increase lethality in an E. Coli and MNoV 1 co-infection mouse model¹⁹. Another molecular player that is essential to activate antiviral signaling is the cytosolic protein signal transducer and activator of transcription 1 (STAT1). MNoV 1 infection was shown to be lethal in STAT1-deficient mice¹². Furthermore, STAT1 dependent interferon responses were shown to limit MNoV 1 replication and dissemination in vivo²⁰. Interestingly, Cadwell and colleagues have demonstrated how infection with the MNoV persistent strain CR6 rendered Atg16l1^{HM} mice more susceptible to DSS-induced colitis²¹. Interestingly, the interaction of NOD2 with ATG16L1 was shown to regulate the autophagy clearance of pathogenic bacteria²². Furthermore, it has been established that loss-of-function point mutations of either NOD2 or ATG16L1 predispose humans to Crohn's disease^{23,24}. Insights into the mechanisms of how NOD2 signaling is regulated upon noroviral infection and whether it may subsequently modulate colitis susceptibility remained to be assessed. In this study, we have investigated how NOD2 influences the pathogenesis of the two persistent murine norovirus strains MNoV S99 (Berlin)²⁵ and MNoV CR6 in vivo in DSS-induced colitis models. At the cellular level, the *Nod2*-dependent pro-inflammatory signaling pathways activation were further examined in response to MNoV S99 and MNoV CR6 infection in myeloid cells to determine how this in turn subsequently affect viral production.

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Results.

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MNoV_S99 exacerbates the severity of DSS-induced inflammation

Since MNoV S99 is a natural strain commonly found in animal facilities that is able to establish persistent infections²⁵, we assessed the implication of MNoV S99 in the exacerbation of colitis. Hence, we examined MNoV S99's impact in a widely used chemically-induced colitis model that is induced upon administration of Dextran Sodium Sulfate (DSS). Specifically, C57BL/6J mice were first infected with a single dose of 5x10⁷ TCID₅₀/mL of MNoV S99 or mock-treated with PBS (200µL). One week later, drinking water was replaced with either a 3% DSS or 5% DSS solution for a period of seven consecutive days (Fig. 1A). Body weight-loss was monitored on a daily basis together with signs of diarrhea and rectal bleeding. With both concentrations of DSS, the pre-treatment with MNoV S99 had induced a more significant body weight loss (purple and orange curves Fig. 1B and C). After 7 days of DSS treatment, mice were euthanized and the disease severity was evaluated. Histological analysis of colon sections revealed an increased infiltration of inflammatory cells and more pronounced epithelial damages in infected mice treated with DSS when compared to similarly challenged animals that were not infected (Fig. 1D). Accordingly, increased muscle thickness was measured in colon sections from mice treated with the virus in presence of both 3 and 5% DSS in comparison with Mock-treated control mice (Fig. 1E). Similarly, histological scoring of the hematoxylin and eosin (H&E) stained colonic sections expectedly showed significantly more severity in MNoV S99-infected mice treated with either 3% or 5% DSS than DSS alone (Fig. 1F). Upon mice sacrifice, resected colons were measured. A significantly reduced length was obtained in mice infected with MNoV S99 and treated with 5% DSS in comparison with non-infected control animals (PBS) (Fig. 1G). The increased level of colitis was also evidenced by a significantly augmented secretion of the pro-inflammatory cytokine interleukin-6 (IL-6) in the supernatants of overnight in vitro cultured colon explants from MNoV S99 infected + 5% DSS treated mice versus those from DSS only mice (Fig. 1H). Taken together, these data clearly show that MNoV_S99 infection is able to lower the resistance of mice to chemically induced colitis.

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MNoV_S99 associated inflammation is abrogated in Nod2-/- mice

In cells from the myeloid lineage, NOD2 was shown to participate in the sensing of Citrobacter rodentium and of commensal bacteria that are translocating in response to DSS-induced epithelial injury²⁶. To determine whether NOD2 is also implicated in the immunopathology of MNoV in our preclinical model of colitis, we compared the severity of DSS-induced colitis in the presence or absence of MNoV S99 between WT and Nod2-deficient mice. In contrast to what was observed in WT mice (Fig. 2A), the sensitizing effect of the virus on the daily weightloss was absent upon MNoV S99 infection of Nod2-/- mice (Fig. 2B). These data suggest that the pro-inflammatory effect of MNoV S99 observed in WT mice may depend on the degree of bacterial sensing though NOD2. Indeed, DSS induces an abrasion of the epithelial barrier allowing commensal bacteria to cross the mucosa and unleash a NOD2-dependent proinflammatory response. This was further confirmed after mice were autopsied. Colon tissue sections staining showed decreased levels of colonic inflammation from MNoV S99 infected Nod2-/- vs WT mice (Fig. 2C). In agreement, muscle thickness quantification from these colon sections showed significantly increased thickness in MNoV S99-infected WT mice under 3% DSS treatment vs 3% DSS alone (Fig. 2D). The variations of colon length measurements that were induced upon MNoV S99 infection in WT mice were absent by contrast in Nod2^{-/-} mice (Fig. S1A). Similarly, differences in histological scores and mucosal wall thickness measured from MNoV S99-infected WT mice vs DSS alone were also blunted in Nod2^{-/-} infected mice (Fig. S1B). And a clear trend was observed regarding the increased levels of secretion of Tumour necrosis factor α (TNF α) in the supernatants of *in vitro* cultured colon explants from WT mice infected with MNoV S99 and treated with 3% DSS vs those with DSS only. This effect was absent in the supernatants from Nod2-/- mice infected and treated similarly (Fig.

180 S1C).

Overall, these data demonstrate that the excessive inflammatory response measured in the

presence of MNoV S99 depends on NOD2-dependent bacterial sensing in our DSS-induced

colitis mouse model.

Mouse noroviruses infections triggers NOD2-dependent pro-inflammatory signaling

Mouse noroviruses are known to have a tropism for the myeloid cell lineages, namely macrophages and dendritic cells. Recently it was shown that Tuft cells belonging to the gut epithelial cellular lineages, that possess the CD300lf MNoV receptor can also be targeted by the MNoV CR6 strain²⁷.

Making use of the GFP-Nod2 reporter mice line, we first examined in which cellular lineages Nod2 is expressed within the intestinal mucosa. We failed to observe any GFP-Nod2 expression in epithelial cells. By contrast, GFP signal was detectable in the bulk of the cells below the lamina propria where intestinal mononuclear phagocytes are primarily located (Fig. 3A). Hence, the NOD2-dependent response to MNoV_S99 infection was further studied in macrophages, monocytes and dendritic cells in our *in vitro* cellular models.

Interferon production being one of the most common response to the intracellular presence of RNA genomes of foreign origin, we next examined if the STAT1 signaling pathway that lays upstream of ATG16l1-mediated interferon production was activated in response to murine norovirus infection. To this end, bone marrow derived macrophages (BMDM) from WT mice were infected with several persistent and non-persistent MNoV strains at a multiplicity of infection (Moi) of 1, for 1h and pSTAT1 levels of expression from cell lysates were measured by western blot (Fig. 3B). In contrast to the non-persistent strain MNoV_CW3 that caused a striking increase in pSTAT1 levels, infections with the persistent strains S99 and CR6 induced

a much milder STAT1 signaling pathway activation. The CW1 strain was associated with the lowest level of STAT1 activation. Since MNoV S99 is a natural strain commonly found in animal facilities that is able to establish persistent infections, we used it to further analyze whether the response to viral infections may rely on NOD2-associated signaling. Using the macrophage cell-line Raw264.7, we confirmed that MNoV S99 is able to induce phosphorylation of STAT1 (Tyrosine 701) at different times at Moi 1 (Fig. S2). pSTAT1 was detectable as early as 15 minutes post-infection and its expression further increased at 30 min and 1h, while only a slight increase of STAT1 level was detectable at later time-points. In addition to the STAT1 activation through the Janus kinases JAK1 and Tyk2, we also examined the status of NFκB activation. For this purpose, pIκBα levels were quantified from infected cell lysates. Despite basal low-level activation in mock-infected cells, pIkBa intensity increased slightly at 30 min and 1h post-infection even if it failed to reach significance. When checking AKT or the MAPK-ERK signaling axes in the same time frame, MNoV S99 failed to induce any activation of these signaling pathways (Fig. S2). Next, we analyzed the response of BMDM derived from WT or Nod2-/- mice that were infected with increasing doses of MNoV S99 for 30 or 60 minutes (Fig. 3C). STAT1 activation increased over the course of the acute infection in cells derived from WT mice. In contrast, the levels of pSTAT1 were barely detectable in Nod2-/- cells at Moi 1. Similarly, with prolonged times of infection (24h, Moi 0.1) we measured significantly lowered pStat1 levels in MNoV S99infected *Nod2*-/- cells in comparison with WT cells (Fig. 3D). However, with a higher dose (Moi 5) this lowered phosphorylation of STAT1 in response to MNoV S99 infection progressively vanished (Fig. 3C), suggesting NOD2-independent alternative mechanisms of action operate when the viral load is too important. To examine whether the Mitochondrial antiviral signaling (MAVS) adaptor protein is required for sensing MNoV S99, BMDM derived from Mays-deficient mice where generated.

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Interestingly, the higher pStat1 levels measured in WT cells (Moi 0.1, 1h) were significantly decreased in BMDM from *Mavs*-/- cells (Fig. 3E).

Altogether, these data show a mild but significant activation of STAT1 following MNoV_S99 infection in our *in vitro* cellular models. These signaling responses can be at least partially

abrogated in the absence of MAVS and NOD2.

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Lower levels of inflammation in Nod2-/- mice benefit noroviral propagation

MNoV CR6 infection in DSS-induced colitis was previously shown to promote inflammation in a functional Atg1611 dependent manner²¹. Using this viral strain that promote STAT1 phosphorylation in similar degree than MNoV S99 (Fig. 3B), we checked how loss of Nod2 influenced resolution of inflammation in response to 3% DSS treatment in mice. As shown with the MNoV S99 strain, loss of NOD2 improved the muscle thickening of the colon wall in mice infected with MNoV CR6 (Fig. 4A). However, a CR6 strain-specific effect can be observed with these experiments since significantly increased inflammation was only measured in Atg1611 hypomorph mice but not in WT mice as opposed to MNoV S99. Next, we examined the impact of the pro-inflammatory signaling activation on viral propagation in these mice. In the absence of DSS-induced inflammation no significant differences could be found when comparing the viral load in the stool of WT, Atg1611HM or Nod2^{-/-} mice (Fig. 4B). By contrast, the measured viral load was significantly increased in ileum and colon of DSS-treated *Nod2*-/- mice in comparison with tissues of *Atg16l1*^{HM} mice (*Fig. 4C*). We have also analyzed the viral replication in BMDM derived from WT or Nod2-/- mice infected *in vitro* with MNoV S99 (Moi 0.1 for 24h). In that case a slight but significant increase in the number of viral genomes was measured from *Nod2*^{-/-} derived cultures (Fig. 4D). Hence, the lower levels of inflammation found in Nod2-/- mice seems to favor a higher propagation of these two persistent strains.

MNoV_S99 infection promotes bacterial sensing by NOD2

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noroviral infections, we examined whether noroviral infection may enhance Nod2 expression levels by RT-qPCR. As what was previously observed with MNoV-1¹⁵, the transcription level of NOD2 was significantly enhanced in response to MNoV S99 infection in either Raw264.7 cells or BMDM derived from WT mice (Fig. 5A and 5B). This increased *Nod2* expression following norovirus infection could explain at least partially the viral-induced pathogenesis that we observed in our colitis models. Indeed, the greater expression of NOD2 should spike up when suddenly intestinal mononuclear phagocytes interact with intestinal commensal bacteria following DSS-induced epithelial abrasion. We next evaluated whether this heightened expression of NOD2 in response to MNoV S99 infection may enhance bacterial sensing. While MNoV S99 infection did induce Stat1 (but not IκBα) activation in monocytes isolated from WT mice (Fig. 5C and 5D, MNoV S99+, MDPcondition), MDP alone triggered potent IkBa activation without activating Stat1 (Fig. 5C, MNoV S99-, MDP+ condition). Interestingly, MNoV S99 infection followed by secondary MDP treatment was associated with significant phosphorylation of both Stat1 and IκBα (Fig. 5D, MNoV S99+, MDP+ vs mock treated cells). In the same line of investigation, we noticed a significantly augmented pro-inflammatory cytokine TNFα response to MDP in dendritic cells that were first primed with noroviral RNA (Fig. 5E). Next, the secretion of TNFa was measured in the supernatants from WT and Nod2-1- BMDM cultures infected with MNoV S99 followed by MDP treatment. TNF α levels were increased with increasing doses of virus in WT cells, while they remained undetectable (Moi 0.1) or much lower (Moi 1) in Nod2^{-/-} cells (Fig. 5F). Equally of importance, viral titers measured in supernatants showed significantly decreased yields when infected cells were treated with MDP (Fig. 5G).

To further explore the mechanisms behind the excessive inflammatory response associated with

Overall, these data show that the increased Nod2 transcription levels following noroviral infections may at least partially promote an inflammatory response to bacterial MDP, leading ultimately to a limitation in the viral propagation. Hence the lowered inflammation in Nod2^{-/-} mice is associated with increased dissemination of MNoV S99 and MNoV CR6 strains, suggesting that bacterial sensing through NOD2 may regulate their persistence.

Discussion

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Intestinal homeostasis is tightly regulated by the interplay between the microoganisms found in the gut microbiota, intestinal epithelial cells and mononuclear phagocytes. The breach in gut flora homeostasis termed dysbiosis is becoming central in the onset of chronic inflammatory bowel disease, such as Crohn's disease^{28,29}. With the development of molecular biology techniques, alterations in the virome relevant to disease pathogenesis are thoroughly under investigation². As such, the role played by noroviruses was studied in several gastrointestinal inflammatory models. An endemically circulating mouse norovirus strain was shown to promote intestinal barrier dysfunctions and inflammatory lesions caused by loss of tolerance to commensal bacteria in II10^{-/-} mice³⁰. The secondary challenge with a pathogenic E. coli strain following MNoV-1's infection can even cause lethal lesions due to the induction of an unresolved proinflammatory cytokine secretion in a Nod1/2 dependent manner¹⁹. The hypothesis of an environmental-driver in genetically susceptible hosts that could be at the origin of Crohn's like disease was also explored with the MNoV CR6 strain in the Atg1611^{HM} mice presenting defective autophagy in a DSS colitis model²¹. NOD2 is very well known for its pathogen associated molecular pattern recognition activity against bacteria¹⁷, and recently it appears it can also participate in detection of certain viruses¹⁸. Using pro-inflammatory signaling activation downstream of NOD2 as a read-out, we have analyzed if NOD2 can also participate in MNoV detection and elimination. All our in vitro experiments with monocytic lineage derived primary cells (e.g. BMDM, BMDC and BM) and cell line (e.g. Raw264.7) infected with different MNoV strains showed activation of the STAT1 signaling pathway implicated in the pro-inflammatory IFN and TNFα responses. By contrast, these responses were abrogated in *Nod2*-/- and *Mavs*-/- mice derived BMDM. Amongst enteric viruses commonly found in the microbiota, noroviruses have been proposed to be good candidates in the hypothesis of an environmental-driver in genetically susceptible

hosts at the origin of Crohn's disease onset. MNoV CR6 strain was shown to induce colitis in 328 Atg16l1^{HM} mice presenting defective autophagy in a DSS colitis model²¹. 329 330 Several PRR are implicated in viral sensing. MDA-5 and TLR3 have been shown to participate in detection of either MNoV 1 or CW3¹⁵. These are both strains which do not persist in vivo, 331 contrary to the S99 (Berlin)²⁵ and CR6 that were used in our study. 332 333 Our *in vivo* data show significantly exacerbated inflammation when applying either 3% or 5% 334 DSS colitis protocol to WT or Atg1611HM mice. The excessive MNoV S99 or MNoV CR6 335 associated inflammatory response was abrogated in Nod2-/- mice or in BMDM derived from 336 these mice. 337 Hence, NOD2 dependent signaling adds a layer of regulation in the viral sensing and propagation. While in our norovirus + DSS model knocking-down NOD2 prevents gut 338 inflammation, it has the opposite effect with influenza A virus (IAV) infection in the lung of 339 Nod2-/- or Ripk2-/- mice31. Indeed, the NOD2-RIPK2 signaling axe has been shown to 340 341 downmodulate the NLRP3 dependent mitophagy activation and the associated inflammatory 342 response in the lung tissue of infected mice. 343 Noroviruses propagation or prolonged persistence is tightly regulated by the interplay between 344 several signaling pathways. MNoV 1 replication was shown to be inhibited in macrophages 345 following LPS mediated NF-κB activation that in turn triggers IFN-β dependent JAK-STAT 346 antiviral activity³². Interestingly, in our cellular models, in addition to the phosphorylation of 347 STAT1 that we observed when cells were infected with MNoV S99, the heightened *Nod2* 348 expression levels preceded a greater ability of cells to respond to bacterial MDP. Consequently, 349 the subsequent treatment with MDP induced an increased NfkB signaling pathway via IkBa 350 activation. The sequential activation of these two pro-inflammatory signaling pathways resulted 351 in the inhibition of the MNoV S99 propagation on one hand and the augmented production of the pro-inflammatory cytokine $TNF\alpha$ in response to MDP on the other hand. Hence, the 352

aggravated inflammatory pathology we observed in our DSS colitis model can be explained by this NOD2-dependent signaling loop in MNoV S99 or MNoV CR6 infected mice. In conclusion, our study shows a NOD2-dependent bacterial sensing that prevents dissemination of the persistent MNoV S99 and MNoV CR6 strains.

<u>Methods</u>:

Unless otherwise indicated, all media and reagents were purchased from ThermoFischerScientific.

Colitis mouse model and viral infection

All animal experiments were approved by the local ethical committee n° CEEA-2016030717519903. Age and gender related *Nod2*-/- and wild type C57BL/6J mice (CDTA, Orléans, France) were housed 4-6 per cage, under strict pathogens-free environment. Mice were gavaged with 5x10⁷ TCID₅₀/mL of MNoV_S99 diluted in 200μl PBS or mock treated with PBS only. 7 days post-infection, drinking water was substituted with a 3-5% dextran sodium sulphate (DSS) (35,000-40,000 MW; TdB Consultancy) solution replaced every 2 days for a total duration of 7 days. 3% DSS colitis experiments with MNoV_CR6 were conducted as previously described in²¹.

Cells and virus

Mouse leukemic monocyte macrophage cell line RAW264.7 were purchased from ECCAC (Sigma-Aldrich) and maintained in Dulbecco's modified Eagle's medium (DMEM), supplemented with 10% (v/v) foetal bovine serum, 1% penicillin/streptomycin and 1% sodium pyruvate.

Bone marrow derived macrophages (BMDM) were isolated from femurs of wild-type, *Nod2*-or *Mavs*--- mice of C57BL/6J background³³. Using a 26G ½" needle, bone marrow cells were
flushed out of the bones with Iscove's modified Dulbecco's medium (IMDM), supplemented
with 10% foetal bovine serum, 1% penicillin/streptomycin, 1% non-essential amino acid, 1%
sodium pyruvate, 1% glutamine, and 20% (*v/v*) conditioned-media form L929 cells. Red blood
cells were lysed using a 160mM NH4CL and 170mM Tris solution for 5 minutes at RT. 3 to

402 6x10⁶ viable cells were plated in non-cell-culture-treated petri dishes and grown for 5-7 days 403 in the above mentioned fully supplemented IMDM medium. 404 Bone marrow derived dendritic cells were isolated similarly as BMDM cells. Then, 2x10⁶ 405 viable cells were plated in non-cell-culture-treated petri dishes and grown for 7 days in RPMI 406 1640, supplemented with 10% foetal bovine serum, 1% penicillin/streptomycin, 1% L-407 glutamine, 1% HEPES and 20% (v/v) conditioned-media from J558 cell line producing murine 408 granulocyte monocyte colony stimulating factor (GM-CSF). 409 Monocytes were isolated from bone marrow cells by using the mouse Monocyte Isolation Kit 410 (Miltenyi Biotec) and a QuadroMACS separator. 411 The MNoV-S99 strain (GenBank accession no. DQ911368) was provided by Prof. P. Maris 412 from ANSES Fougères Laboratory (France) and was propagated in RAW 264.7 cells. MNoV-CR6 concentrated stocks were prepared as described in³⁴. Briefly, supernatant from 293T cells 413 414 transfected with a plasmid containing the viral genome was applied to RAW264.7 cells to 415 amplify virus production, and virions were concentrated by ultracentrifugation and 416 resuspension in endotoxin-free PBS. Concentration of stocks was determined by plaque assay. 417 For in vitro infection experiments, 3-5x10⁵ viable cells were seeded in 6 wells plates. The next 418 day, just before viral infection, cells were counted from 1 well to determine precisely the 419 multiplicity of infection (Moi). In the remaining wells medium was removed and replaced with 420 variable quantities of MNoV S99 from a common viral stock in a final volume of 1 mL fresh 421 medium per well. Mock treated cells were incubated in parallel with matching quantities of 422 culture media from non-infected cells that was generated at the same time as viral stocks. 423 At various time-points after infection, supernatant was removed and cells were washed once 424 with PBS, before lysis in RIPA buffer for WB analysis or RLT buffer for total RNA extraction 425 (RNAeasy kit, Quiagen) for RT-qPCR experiments.

427 Immunohistochemistry, ELISA, Western Blot, RT-qPCR and Titration 428 For immunohistochemistry analysis, formalin-fixed colon samples were embedded in paraffin. 429 5µm sections were stained with H&E. Slides were imaged with an AxioPlan 2 (Zeiss) 430 microscope and blindly scored for inflammation severity by two investigators as previously described³⁵. Briefly, tissue lesions were scored from 0 to 3, so was the infiltration of 431 432 inflammatory cells in the lamina propria. A combined score was calculated, ranging from 0 (no 433 changes) to 6 (wide-spread cellular infiltrations and extensive tissue damage). 434 The muscularis propria thickness was measured from light microscopy images of H&E stained 435 colon sections using Image J (NCBI). 5 measurements from different locations were performed 436 for each animal and compared with colon sections from mock treated animals. 437 For ELISA analysis, briefly 1cm colon samples were recovered from mice, luminal content was 438 flushed with PBS, samples were cut opened and resuspended over-night in 250µl DMEM 439 supplemented with 1% penicillin/streptomycin in 24 wells plate at 37°C. The following day, 440 supernatants were collected and stored at -80°C before cytokine measurement. TNFα and 441 Interleukin-6 proteins levels were measured specifically using pre-coated 96 wells ELISA 442 plates (R&D System) following manufacturers indications. For TNFα ELISA from BMDC, 5x10⁵ cells were plated in 24 wells plate and treated with 443 MNoV S99's ssRNA (extracted with RNeasy Quiagen kit) with Lipofectamine $2000^{18} \pm \text{MDP}$ 444 or MDP-DD (Invivogen) over-night and supernatants were measured for TNFα levels. 445 For TNFα ELISA from BMDM, 2x10⁵ cells were plated in 96 wells plate infected with 446 447 MNoV S99 (Moi 0.1 or 1) for 6h prior to MDP treatment (10ug/mL) over-night and 448 supernatants were measured for TNF α levels. 449 For western blot analysis, total proteins from cell lysates were quantified by BCA protein assay 450 kit (Pierce), equalized amounts of proteins (10-20µg) were resolved by 4-15% gradient SDS-451 PAGE gels and transferred to nitrocellulose membranes. Membranes were blocked in 0.05%

PBS-Tween, 5% skimmed milk solution, before incubation subsequently with primary and secondary antibodies diluted (see Table 1) in blocking solution. Following secondary antibodies incubations, signals of interest were detected using a chemiluminescence reader (ImageQuantTM Las 4000, GE Healthcare Life Sciences), images were processed and band ROI were quantified with Image J software (NCBI). Mean band intensities \pm SD of protein of interest were normalized to β-ACTIN. Relative values to control mock-infected conditions were compared between different experiments. For Nod2 quantification from MNoV S99 infected BMDM or RAW264.7 cells, total RNA extraction was performed using the RNeasy Mini Kit (Qiagen). One µg of RNA was reversed transcribed in the presence of 2.5mM of oligo-dT using the Reverse Transcriptor kit (Roche) following the manufacturer's instructions. 75ng of cDNAs were used for the qPCR analyses using Q5 High-Fidelity 2X Master Mix (New England BioLabs). Nod2 and Actb were specifically amplified using the Fwd 5'GGAAACAACATTGGCAGCAT3' and Rev 5'TCTTGAGTCCTTCTGCGAGA3' Fwd 5'TTCTTTGCAGCTCCTTCGTT3' Rev 5'ATGGAGGGAATACAGCCC3' respectively. Actb was used as an internal reference gene in order to normalize the transcript levels. Relative mRNA levels $(2^{-\Delta\Delta Ct})$ were determined by comparing (a) the PCR cycle thresholds (Ct) for Nod2 and Actb (ΔCt) and (b) Δ Ct values for treated and control groups ($\Delta\Delta$ Ct). MNoV S99 load was determined by measuring MNoV genome copy numbers by RT-qPCR analysis as previously described³⁶. Briefly, total RNA was extracted from BMDM cell cultures using the RNeasy Mini Kit (Qiagen). 5µL of RNA were used per reaction of RT-qPCR. Viral genome levels were determined using the TakyonTMDry No Rox One-Step RT Probe Mastermix (Eurogentec). Viral genomes were specifically amplified using the Fwd 5'GTGCGCAACACAGAGAAAACG3' and Rev 5'CGGGCTGAGCTTCCTGC3' primers that target MNoV ORF1 region combined with the TaqMan probe 5'[6-FAM]-

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CTAGTGTCTCCTTTGGAGCACCTA-[BHQ1]3' using the Stratagene Mx3005P (Agilent Technologies) with 1 RT cycle and 40 cDNA amplification cycles. The quantification of viral genome copies was obtained using a standard curve (ranging from 2x10¹ to 2x10⁶ genome copies) with serial dilutions of the plasmid pMNoV1 corresponding to the full genome of MNoV_1 (Dr Christiane Wobus, University of Michigan, USA). Viral load for MNoV_CR6 strain was determined by measuring genome copy numbers by RT-qPCR analysis as previously described in²¹.

The net production of MNoV_S99 was determined using the TCID₅₀ method as described in³⁵. Briefly, Raw264.7 cells were infected at Moi 1 with MNoV_S99 for 2h, before adding MDP (100ng/mL) or not in the supernatant for 24h. Titers (n = 3) were obtained from each supernatant. The net production is calculated by normalizing the amount of viruses produced

with the amount of viruses used for the infection.

NOD2^{GFP} immunohistochemistry imaging

 $NOD2^{GFP}$ mice³⁷ in the C57BL/6 background were maintained at the Institut Pasteur Central Animal facility. We used heterozygous $NOD2^{GFP}$ mice since the presence of one functional copy of NOD2 ensures that physiological responses dependent on functional NOD2 are not impaired. Heterozygous $NOD2^{GFP}$ female mice (8-12 weeks of age) were sacrificed and several centimeters of the distal ileum were removed, opened longitudinally and washed in PBS. The tissue was spread flat over a 4% w/v LMP agarose (Merck) pad and fixed with 4% v/v paraformaldehyde (VWR). The ileal tissue was then embedded in a 4% LMP agarose block and cut into 200 μ m-thick sections using a Microm HM 650 V Vibration microtome.

Triton X-100 (Merck) and marked with an anti-GFP (rabbit polyclonal antibody A-11122, Invitrogen) primary antibody and secondary Alexa Fluor 488 goat anti-rabbit antibody

For staining, tissues were blocked and permeabilized overnight in solution containing 0.4%

(Invitrogen). Tissues sections were counter stained with DAPI (1µg/mL, BD Biosciences) and Phalloidin- iFluor 647 (1:200 dilution, Abcam) and mounted using ProLong Gold Antifade reagent. Confocal acquisitions were performed using a Leica HyD SP5 confocal microscope. Image analysis was performed using Icy version 2.4.2.0³⁸.

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For the NODGFP tissue imaging, we thank the UTechS PBI, a member of the France-620 621 BioImaging infrastructure network supported by the French National Research Agency (ANR-622 10-INSB-04, Investissement d'Avenir program) for microscope usage and assistance. We 623 thank the members of the Institut Pasteur Central Animal Facility for their assistance with 624 animal studies. I.G.B. laboratory was supported by Investissement d'Avenir program, 625 Laboratoire d'Excellence "Integrative Biology of Emerging Infectious Diseases" (ANR-10-626 LABX-62-IBEID), by the Investissement d'Avenir program (RHU Torino Lumière ANR-16-627 RHUS-0008), by the French National Research Agency (ANR-16-CE15-0021) and by R&D 628 grants from Danone and MEIJI. M.C. was supported by grants from the Fondation pour la Recherche Médicale 629 630 (DEQ20130326475) and the European Union's European Regional Development Fund. We 631 thank T. Durand and MP. Fourmaux for excellent technical assistance. 632 633 **Authors' contribution.** G.M. and M.T. performed the majority of the experimental procedures. 634 T.G. contributed to the preclinical studies in mice. M.D., T.G. and O.B. performed RT-qPCR 635 and ELISA analysis. M.D. contributed to histological analysis of colon sections. E.W. 636 performed viral genome quantification by RT-qPCR. R.W. and I.G.B. performed histological 637 analysis of tissue sections from NOD2-\(\beta\)-Gal reporter mice. All authors contributed to 638 interpretation of raw data and critically reviewed and/or modified the manuscript. G.M. and 639 M.C. conceived, designed and wrote the paper.

Figures legends:

Figure 1: MNoV S99 aggravates inflammation in DSS-induced colitis

A)- In vivo experimental design, C57BL/6J mice were orally gavaged with PBS (200μL) or MNoV_S99 (5x10⁷ TCID₅₀/mL), 7 days later, all the mice were given DSS in drinking water for a week. Mice were weighed daily for weight loss comparison. B)- 3% DSS-induced colitis ± MNoV_S99 (n = 6). C)- 5% DSS-induced colitis ± MNoV_S99 (n = 6). In B) and C), statistical differences were determined by 2 ways ANOVA test, * p < 0.05, ** p < 0.01, *** p < 0.001. D)- Representative images from H&E staining of colon sections from mock-treated (Control) or 3% DSS ± MNoV_S99 treated mice. Insets showing higher magnifications from each image are presented next to each image. E)- Muscle wall thickness was determined with Image J from colon section images. Percentages of increase are plotted after baseline subtraction relatively to the values obtained from Control mice (n = 6). F)- Histological intestinal epithelial inflammation scores comparison between Control, 3% or 5% DSS ± MNoV_S99 treated mice (n = 6). G)- Colon length comparison between Control and 5% DSS ± MNoV_S99 treated mice H- IL6 secretion levels from colon explants from mock or 5% DSS ± MNoV_S99 treated mice (n = 6). Statistical differences were determined with Student's t-Test in E, F, G and H.

Figure 2: MNoV S99 associated inflammation is NOD2 dependent

Weight loss comparison in **A)-** 3% DSS-induced colitis \pm MNoV_S99 in WT mice (n = 6) and **B)-** in $Nod2^{-/-}$ mice (n = 6), statistical differences were determined by 2 ways ANOVA test, * p < 0,05, ** p < 0,01, *** p < 0,001. **C)-** Representative images of H&E staining of colon sections from mice in A) and B). Insets showing higher magnifications are presented below each image. **D)-** Percentages of increase of muscle wall thickness from colon section images are plotted after baseline subtraction relatively to the values obtained from WT mice treated only with DSS (n = 6), statistical differences were determined with Student's t-Test.

Figure 3: MNoV_S99 associated pro-inflammatory signaling is NOD2 and MAVS-dependent in myeloid lineage cells

A)- Representative image showing an intestinal villus from a Nod2^{GFP} mouse. NOD2-GFP is shown in green, Actin is stained with Phalloidin in grey and nuclei were stained with DAPI in blue; scale bare represents 50µm. B)- Representative western blot showing STAT1 signaling pathway activation after 1h infection (Moi 1) with the mentioned MNoV strains in BMDM. Below are shown quantification of pSTAT1 bands intensities normalized to β -actin and relative to mock-infected cells (n = 3, mean \pm SEM), statistical differences were determined by 1 way ANOVA test * p < 0.05, ** p < 0.005. C)-STAT1 activation in response to MNoV S99 (Moi 1 or 5) in BMDM from WT vs Nod2^{-/-} infected for 30 or 60 minutes. The lower panel shows quantification of pSTAT1, bands intensities normalized to βactin and relative to mock-infected cells (n = 3, mean \pm SEM). Statistical differences were determined by 2 ways ANOVA test * p < 0.05. **D)**- STAT1 activation in response to MNoV S99 (Moi 0.1) in WT or $Nod2^{-/-}$ BMDM infected for 24h. Relative quantification of pSTAT1 (n = 3, mean ± SEM) is shown in the lower panel, statistical differences were determined by 2 ways ANOVA test *** p < 0,0005. E)-STAT1 activation in response to MNoV S99 (Moi 0.1) in BMDM from WT vs Mavs-- infected for 60 minutes. Relative quantification of pSTAT1 (n = 4, mean \pm SEM) are shown below. The lower panel shows the mock vs Moi 0.1 infected cells quantification of pSTAT1. Statistical differences were determined by 2 ways ANOVA test * p < 0.05.

Figure 4: NOD2-dependent noroviral load

A)- WT, $Nod2^{-/-}$ and $Atg1611^{HM}$ mice (n = 5 each) were treated with 3% DSS and infected with MNoV_CR6 (3x10⁷ PFU). Inflammation was measured as percentage of increase in muscle thickness at the anal-rectal junction in colonic section images plotted after baseline subtraction relatively to the values obtained from WT mice. B)- The viral load measured in stools from WT, $Nod2^{-/-}$ and $Atg1611^{HM}$ mice at day 3, 5 and 7 post-infection with MNoV_CR6 (3x10⁷ PFU) (n = 8). C)- The viral load measured from indicated tissue samples from MNoV_CR6 infected (3x10⁷ PFU) WT, $Nod2^{-/-}$ and $Atg1611^{HM}$ mice that were treated for 1 week with D55 3% (n = 5). D)- MNoV_S99 genome quantification from WT and $Nod2^{-/-}$ BMDM cells infected with MNoV_S99 (Moi 0.1 for 24h) (n = 3). All the statistical differences were measured with Student's t-Test.

Figure 5: NOD2-dependent pro-inflammatory signaling associated with MNoV_S99 infection and bacterial MDP

Quantification of *Nod2* mRNA levels measured by RT-qPCR in **A)**- in Raw264.7 cells infected with MNoV_S99 (Moi 0.1 or 1, for 24h) and in **B)**- in BMDM from WT mice (Moi 0.1, for 24h) normalized to *ActB* and relative to mock-infected cells (n = 3). **C)**- Representative western blot showing STAT1 and IkB α signaling pathways modulation in cell lysates from monocytes that were either infected with MNoV_S99 (Moi 5, 2h), treated with MDP (10ng/mL, 2h), or a combination of both. **D)**- Quantification and comparison of pSTAT1 and pIkB α signals between MNoV_S99 infected alone cells or in combination with MDP (10ng/mL, 2h), (n = 3), with the band intensity being normalized to β -ACTIN and relative to mock-treated cells. **E)** TNF α production by BMDC subjected to MNoV_S99's ssRNA (10µg/mL) alone, or supplemented with either MDP (1µg/mL) or MDP-DD (1µg/mL) overnight. **F)** TNF α production by BMDM cells infected with MNoV_S99 (Moi 0.1 or 1) for 6h, prior to being treated with MDP (10µg/mL) overnight. **G)** Net production of MNoV_S99 in Raw264.7 cells infected with MNoV_S99 (Moi 1 for 2h before MDP treatment (100ng/mL) for 24h). Statistical differences were analyzed with Student's t Test.

Supplementary Figures legends:

Supplementary Figure 1: Analysis of MNoV_S99 associated NOD2 dependent inflammation measurements from mice showed in Figure 2

A) Colon length comparison between WT and $Nod2^{-/-}$ from 3% DSS \pm MNoV_S99 treated mice, statistical differences were determined with Student's t-Test, * p <0,02. **B)**- Histological scores comparison between WT and $Nod2^{-/-} \pm \text{MNoV}_S99$ treated mice, statistical differences were determined with Student's t-Test, * p <0,05. **C)**- TNF α production of explants (ON) from WT and $Nod2^{-/-}$ 3% DSS \pm MNoV_S99 treated mice was measured by ELISA.

Supplementary Figure 2: MNoV_S99 associated pro-inflammatory signaling pathways activation Representative western blot showing STAT1, $I\kappa B\alpha$, AKT and ERK signaling pathways' modulation in cell lysates from Raw264.7 that were either infected with MNoV_S99 (Moi 1) for various times or mock treated for 60 min. β -ACTIN was used as loading control.

Tables:

Table1: Antibodies used for Western Blotting		
Primary antibodies	Dilution	Supplier
anti-phosphoSTAT1 (Tyr 701) (58D6) (85kDa)	1/1000	
anti-STAT1(D1K9Y)(85kDa)	1/1000	
anti-phospholκBα (Ser32/36) (5A5) (40kDa)	1/1000	
anti-ΙκΒα (44D4) (39kDa)	1/1000	Cell
anti-phosphoAKT (Ser473) (D9E) (60kDa)	1/1000	Signaling
anti-AKT (60kDa)	1/1000	Technology
anti-phospho44/42 MAPK (Erk1/2) (Trh202/Tyr204) (197G2) (42, 44 kDa)	1/1000	
anti-p44/42 (Erk1/2) (42, 44 kDa)	1/1000	
anti-β-ACTIN (45kDa)	1/500	
Secondary antibodies	Dilution	Supplier
anti-Rabbit_HRP (#711-035-152)	1/5000	Jackson
anti-Mouse_HRP (#115-005-003)	1/5000	Laboratories