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1 **Costs and benefits of sub-lethal Drosophila C Virus infection**

2

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21

22 **ABSTRACT**

23

24 Viruses are major evolutionary drivers of insect immune systems. Much of our
25 knowledge of insect immune responses derives from experimental infections
26 using the fruit fly *Drosophila melanogaster*. Most experiments, however, employ
27 lethal pathogen doses through septic injury, frequently overwhelming host
28 physiology. While this approach has revealed several immune mechanisms, it is
29 less informative about the fitness costs hosts may experience during infection in
30 the wild. Using both systemic and oral infection routes we find that even
31 apparently benign, sub-lethal infections with the horizontally transmitted
32 *Drosophila C Virus* (DCV) can cause significant physiological and behavioral
33 morbidity that is relevant for host fitness. We describe DCV-induced effects on
34 fly reproductive output, digestive health, and locomotor activity, and we find that
35 viral morbidity varies according to the concentration of pathogen inoculum, host
36 genetic background and sex. Notably, sub-lethal DCV infection resulted in a
37 significant increase in fly reproduction, but this effect depended on host
38 genotype. We discuss the relevance of sub-lethal morbidity for *Drosophila*
39 ecology and evolution, and more broadly, we remark on the implications of
40 deleterious and beneficial infections for the evolution of insect immunity.

41

42

43

44 Key-words: Sub-lethal infection; systemic infection; oral infection; fecundity;
45 locomotor activity; fecal excretion; fitness.

46

47 **INTRODUCTION**

48 Viral infections are pervasive throughout the living world (Suttle, 2005; Rosario
49 & Breitbart, 2011). Viruses of insects have attracted considerable interest (Miller
50 & Ball, eds, 1998), in part due to their potential role in the bio-control of insect
51 pests (Lacey *et al.*, 2015), and also because insects are vectors of many viral
52 pathogens of plants (Whitfield *et al.*, 2015), animals and humans (Conway *et al.*,
53 2014). The abundance and diversity of insect viruses, combined with the
54 extensive morbidity and mortality they cause, make viral infections potentially
55 powerful determinants of insect population dynamics and evolution (Dwyer *et al.*
56 *et al.*, 2004; Obbard *et al.*, 2006; Wilfert *et al.*, 2016).

57

58 Much of our knowledge of insect immune responses to viral infections has come
59 from work using the fruit fly *Drosophila melanogaster*, where the focus has been
60 on elucidating the genetics underlying antiviral immunity (Dostert *et al.*, 2005;
61 Huszar & Imler, 2008; Kemp & Imler, 2009; Sabin *et al.*, 2010; Magwire *et al.*,
62 2012). Several RNA viruses have been described and investigated in this context,
63 including Nora virus (Habayeb *et al.*, 2009), Drosophila A virus (DAV)(Ambrose
64 *et al.*, 2009), Flock House Virus (FHV) (Scotti *et al.*, 1983) and Drosophila C Virus
65 (DCV) (Jousset *et al.*, 1977), a horizontally transmitted ssRNA virus in the
66 *Dicistroviridae* family (Huszar & Imler, 2008). Initial investigations of DCV
67 infection found that it replicates in the fly's reproductive and digestive tissues
68 (Lautié-Harivel & Thomas-Orillard, 1990) and that infection results in
69 accelerated larval development but also causes mortality (Thomas-Orillard,
70 1984; Gomariz-Zilber *et al.*, 1995). More recent work has shown that systemic
71 infection with elevated concentrations of DCV causes pathology within the fly's

72 food storage organ, the crop, leading to intestinal obstruction, lower metabolic
73 rate and reduced locomotor activity (Arnold *et al.*, 2013; Chtarbanova *et al.*,
74 2014). There is also considerable genetic variation in fly survival when
75 challenged systemically with DCV, which appears to be controlled by few genes
76 of large effect (Magwire *et al.*, 2012).

77

78 While this level of detail concerning the physiological consequences and the
79 underlying genetics of infection is remarkable, it is important to recognize that
80 our knowledge of viral infections comes almost entirely from experimental
81 infections that challenge model systems, such as *Drosophila*, with artificially high
82 viral concentrations during systemic infections. Even in cases where natural
83 routes of infection have been investigated (Gomariz-Zilber *et al.*, 1995; Ferreira
84 *et al.*, 2014; Stevanovic & Johnson, 2015; Vale & Jardine, 2015), these have often
85 been achieved by using much higher doses than flies are likely to encounter in
86 the wild in order to cause significant mortality. Highly lethal systemic or oral
87 infections have been useful in unravelling broad antiviral immune mechanisms
88 (Dostert *et al.*, 2005; Wang *et al.*, 2006; Kemp & Imler, 2009; Nayak *et al.*, 2013;
89 Karlikow *et al.*, 2014), but it is unlikely that the morbidity and mortality they
90 cause is an accurate reflection of the level of disease experienced by flies in the
91 wild, where viral infections appear to be widespread among many species of
92 *Drosophila* as low level persistent infections with apparently little pathology
93 (Kapun *et al.*, 2010; Webster *et al.*, 2015). Our understanding of the fitness costs
94 of viral infection in *Drosophila* is therefore severely limited, which is striking
95 given the evidence from population genetic data that viruses are major drivers of

96 adaptive evolution in *Drosophila* immune genes (Obbard *et al.*, 2006, 2009; Early
97 *et al.*, 2016).

98

99 To gain a better understanding of the potential fitness costs of DCV infection, we
100 measured the physiological and behavioural responses of flies challenged with
101 DCV. We carried out two separate experiments, either challenging flies with a
102 range of sub-lethal viral concentrations systemically through intra-thoracic
103 injury (experiment 1) or exposing flies through the oral route of infection to a
104 low, sub-lethal concentration of DCV (experiment 2). Our aim was not to
105 compare the two routes of infection, but to address sub-lethal infections using
106 both infection routes, as these are commonly employed in experimental
107 infections. We focused on traits that have been previously shown to be affected
108 by DCV infection such as survival, fecal excretion, and locomotor activity, as well
109 as female reproductive output, which is ultimately important for evolutionary
110 fitness. We find that even apparently benign, sub-lethal infections can cause
111 significant physiological and behavioural morbidity that is relevant to fly fitness,
112 and that these effects vary according to viral concentration, host genetic
113 background and sex.

114

115

116 **MATERIAL AND METHODS**

117 *Fly lines and rearing conditions*

118 In experiment 1 (systemic DCV infection) we used *Drosophila melanogaster* line
119 *G9a^{+/+}* described previously (Merkling *et al.*, 2015), kindly provided by R. van Rij
120 (Radboud University, Nijmegen, NL). This line was maintained on standard Lewis
121 Cornmeal medium (Lewis, 2014) under standard laboratory conditions at 25°C,
122 12h: 12h Light:Dark cycle. Experimental flies were generated by setting up 20
123 replicate Lewis vials with 15 males and 15 females to mate and lay eggs for 24
124 hours. Three-to-four-day-old adults that eclosed from the eggs laid during this
125 period were infected systemically (see below) and then followed individually for
126 health measures.

127

128 In experiment 2 (oral DCV exposure) we used ten *D. melanogaster* lines from the
129 *Drosophila* Genetic Reference Panel (DGRP): RAL-83, RAL-91, RAL-158, RAL-
130 237, RAL-287, RAL-317, RAL-358, RAL-491, RAL-732, and RAL-821. Given we
131 had no prior knowledge of how the DGRP panel vary in response to oral DCV
132 infection, these lines were chosen randomly. All lines were previously cleared of
133 *Wolbachia* and have been maintained *Wolbachia*-free for at least 3 years. Fly
134 stocks were kept at a density of 30 individuals in bottles on standard Lewis
135 medium at 24.5± 0.5°C. Flies were allowed to mate and lay eggs for three days
136 and then removed. When eggs had developed into three-day old imagoes, we
137 picked 16 male and 16 female flies at random from each DGRP line (320 flies in
138 total). Half of these flies (n=8 replicates) were individually exposed to DCV
139 through the oral route of infection (see details below) and the other half were
140 exposed to a sterile Ringers solution (7.2 g/L NaCl; 0.17 g/L CaCl₂; 0.37 g/L KCl,

141 diluted in sterile water, pH 7.4) as a control (n=8 replicates). Following infection,
142 all flies were kept individually in vials kept in incubators at 24.5°C ± 0.5 with a
143 12h:12h light:dark cycle for the remainder of the experiment. Vials were
144 randomized within trays to reduce any positional effects within incubators.

145

146 *DCV stock and culturing*

147 The Drosophila C Virus (DCV) isolate used in both experiments was originally
148 isolated in Charolles, France (Jousset *et al.*, 1977), and was produced in
149 Drosophila line 2 (DL2) cells as described previously (Longdon *et al.*, 2013; Vale
150 & Jardine, 2015). Infectivity of the virus was calculated by measuring cytopathic
151 effects in DL2 cells using the Reed-Muench end-point method to calculate the
152 Tissue Culture Infective Dose 50 (TCID₅₀) (Reed & Muench, 1938). The DCV stock
153 used in this experiment had an infectivity of approximately 4x10⁹ DCV infectious
154 units (IU)/mL. This stock culture was serially diluted to achieve the desired
155 concentrations (approximately 10² 10³ and 10⁵ DCV IU/mL for systemic infection
156 and 10⁵ DCV IU/mL for oral infection) and kept at -80°C until needed.

157

158 *Systemic DCV infection and viral titers*

159 We exposed 20 individual male and female flies to each of 4 viral concentrations
160 (160 flies in total)– 0 (control), 10², 10³ and 10⁵ DCV IU/ml, obtained by serial
161 diluting the viral stock with 10mM Tris-HCl (pH 7.3). Flies were infected
162 systemically by intra-thoracic pricking with a needle immersed in DCV
163 suspension under light CO₂ anesthesia. Control flies were pricked with a needle
164 dipped in sterile 10mM Tris-HCl (pH 7.3). An additional five individuals for each
165 sex/dose combination were infected as described above to quantify DCV within

166 flies following infection, using the expression of DCV RNA. Flies were individually
167 placed in TRI reagent (Ambion) following five days of infection (5 DPI),
168 homogenized total RNA was extracted using Direct-zol RNA miniprep kit, which
169 includes a DNase step (Zymo Research), reverse-transcribed with M-MLV
170 reverse transcriptase (Promega) and random hexamer primers, and then diluted
171 1:2 with nuclease-free water. qRT-PCR was performed on an Applied Biosystems
172 StepOnePlus system using Fast SYBR Green Master Mix (Applied Biosystems)
173 and DCV primers, which include 5'-AT rich flaps to improve RT-PCR fluorescent
174 signal (Afonina *et al.*, 2007) (DCV_Forward: 5'
175 AATAAATCATAAGCCACTGTGATTGATACAACAGAC 3'; DCV_Reverse:
176 AATAAATCATAAGAAGCAGATACTTCTTCCAAACC). We measured the relative
177 fold change in DCV RNA relative to *rp49*, (Dmel_rp49 Forward: 5'
178 ATGCTAAGCTGTCGCACAAATG 3' ; Dmel_rp49 Reverse: 5'
179 GTTCGATCCGTAACCGATGT
180 3'). an internal *Drosophila* control gene, calculated as $2^{-\Delta\Delta Ct}$ (Livak & Schmittgen,
181 2001).

182

183 *Oral DCV exposure*

184 In separate pilot infections, we determined that a DCV culture diluted to contain
185 approximately 10^5 DCV RNA copies was enough to establish a viable infection
186 (Figure S1), but did not cause noticeable mortality, and we used this dilution of
187 DCV stock to inoculate all ten DGRP lines. Individual flies were exposed to DCV in
188 vials containing Agar (5% sugar) using 3mL plastic atomizer spray bottles
189 containing 2mL of the sub-lethal DCV dilution. One spray, releasing roughly 50 μ L
190 of DCV dilution (or sterile Ringer's solution), was deployed into each vial. Flies

191 were left in the these 'exposure vials' for three days to allow them to ingest the
192 viral solution during feeding and grooming, and then tipped into vials containing
193 clean, blue-dyed Lewis medium (see below).

194

195 *Survival following infection*

196 Both systemically and orally infected flies were housed individually following
197 infection in vials containing Lewis medium. In the systemic infection experiment,
198 flies were monitored daily for mortality for 38 days post-infection and were
199 transferred to fresh food vials once a week. In the oral infection experiment, flies
200 were transferred to fresh food vials every 3-4 days, and mortality was recorded
201 at this point for the first 32 days post infection and then daily until 40 DPI (oral
202 infection).

203

204 *Fecal excretion following oral DCV exposure*

205 Following the exposure period, flies were tipped into vials containing blue-dyed
206 Lewis medium. Blue medium was prepared by adding 0.5g/L FIORI COLORI
207 brilliant blue FCF E133 granules to standard Lewis medium. Flies remained on
208 blue Lewis food for the remainder of the experiment and were tipped to new
209 blue Lewis vials every three to four days. When flies were tipped to new vials,
210 the old vials were kept for fecal spot counts (measured immediately) and
211 fecundity measures (see below). Fecal spots were recorded by photographing
212 vials with a Leica S8APO microscope. A slip of white printer paper (2.5cm x
213 8.5cm) was inserted into each vial to ensure only spots on one side of the vial
214 were being photographed. These images were then analyzed with ICY image
215 software (Version 1.6.1.1 ICY - Bio Imaging Analysis) and fecal spots were

216 counted using 'spot detection' analysis on a 2cm x 4cm region of interest. Each
217 image was checked individually for miscounts, and miscounted spots were
218 removed. Fecal excretion was recorded for 30 days following infection.

219

220 *Fecundity*

221 All fecundity estimates are based upon mating that occurred before infection
222 during the first 3-4 days after eclosion. The fecundity of individual flies was
223 measured by counting viable offspring emerging in the vials they were reared in,
224 which happened weekly until day 30 post infection in the systemically infected
225 flies, and every 3-4 days in the orally infected flies, for 28 days following
226 exposure to DCV. Short-term fecundity estimates have been shown to be well
227 correlated with lifetime reproduction in *D. melanogaster* (Nguyen & Moehring,
228 2015). Vials that individuals were tipped from (and following the recording of
229 fecal shedding in the oral infection experiment), were placed in the incubators at
230 24.5°C ± 0.5 with a 12h:12h light:dark cycle to allow any offspring to develop.
231 After 14 days, the total number of living emerged adult offspring within each vial
232 was recorded as a measure of female fecundity.

233

234 *Activity*

235 Locomotor activity was measured using the Drosophila Activity Monitor (DAM2,
236 Trikinetics) as described previously (Pfeiffenberger *et al.*, 2010; Vale & Jardine,
237 2015). In the DAM, individual fly activity is recorded when individually housed
238 flies break an infrared beam passing through a transparent plastic tube placed
239 symmetrically inside a DAM unit. In systemically infected flies, as we used
240 females to measure fecundity (see above), activity was measured on 10 replicate

241 male flies for each DCV dose (40 flies in total), starting the day following septic
242 injury, and measured for 2 weeks following infection. In the oral infection
243 experiment, activity was recorded for 24 hours, fourteen days after the initial
244 oral exposure. These differences in the timing of activity measurements arise
245 from the faster and more severe effects of systemic infections on locomotor
246 behavior, while we have found that effects on activity following oral infection
247 take longer to manifest, and become apparent 10-15 days after DCV
248 ingestion(Vale & Jardine, 2015). Four replicate flies for each DGRP (10 lines) /
249 sex (M/F) / infection (DCV/Control) combination were tested (160 flies in total).
250 In both experiments, flies were placed individually in a single DAM tube
251 containing a small agar plug on one end, and allocated a slot in one of five DAM
252 unit (each unit can house a maximum of 32 tubes). At least one slot in each DAM
253 unit was filled with an empty tube and at least two slots were left empty as
254 negative controls. All DAM units were placed in the incubator (25 °C 12:12
255 light:dark cycle) and continuous activity data was collected every minute for 24
256 hours. Raw activity data was processed using the DAM System File Scan Software
257 (www.trikinetics.com) and the resulting data was manipulated using R v. 3.1.3
258 (The R Foundation for Statistical Computing, Vienna, Austria). Flies that died
259 during the DAM assay (6/40 flies in the systemic infection experiment; 25/160
260 in the oral infection experiment) were removed from the analysis because they
261 would wrongly bias the estimate of activity.

262

263 *Data analysis*

264 All analyses were carried out in JMP 12 (SAS). Survival data was analyzed on the
265 'day of death' using a Cox Proportional Hazards models in with 'fly sex' and 'DCV

266 exposure' and their interaction as fixed effects (systemic infection experiment)
267 or 'fly sex', fly 'line' and 'DCV dose' and their interactions as fixed effects (oral
268 infection experiment). In the systemic infection, DCV titers were Log₁₀-
269 transformed and analyzed in a linear model with 'DCV Dose' and 'Sex' and their
270 interaction as fixed effects. Fecundity following systemic infection was calculated
271 on the cumulative number of emerged offspring in a model containing 'DCV dose'
272 as a fixed effect. In the oral exposure experiment, the cumulative number of
273 offspring was analyzed in a model including 'Fly line' and 'DCV exposure' and
274 their interaction as fixed effects. Total excretion per fly was analyzed using a
275 linear model with 'Fly line', 'DCV exposure', and 'sex' as categorical fixed effects,
276 'Time' as a continuous covariate, and all pair-wise interactions. Activity was
277 analyzed as the total number of DAM beam breaks recorded per day. Activity
278 following systemic infection was analyzed in a linear model with 'DCV dose' and
279 'Time' as fixed effects. Activity following oral infection was measured for 24h and
280 analyzed in a linear model with 'Fly line', 'Sex' and 'DCV exposure' as fixed
281 effects. In all analyses, individual replicate was included as a random factor, and
282 in all cases accounted for only 2-5% of the total variance.
283

284 **RESULTS**

285 ***Experiment 1: Sub-lethal systemic infection***

286 In a first experiment, we tested how systemic infection with very low
287 concentrations of DCV (10^2 , 10^3 and 10^5 DCV IU/ ml) affected fly health. We have
288 previously observed that DCV is able to establish and grow when inoculated into
289 flies at these low doses (Figure S2). The survival of both female and male flies
290 exposed to doses of 10^2 and 10^3 DCV IU/ ml did not differ from control flies that
291 had been pricked with sterile buffer solution (Figure 1a). In females, 100% flies
292 exposed to these doses survived infection during the 38-day survival assay,
293 while roughly 20% of males died during this period (Figure 1a). However, this
294 difference in survival between sexes ('sex' effect, Table 1), was also observed in
295 control flies and therefore is likely to reflect sex-specific responses to injury
296 during intra-thoracic pricking than to infection. Flies infected with a slightly
297 higher concentration of 10^5 DCV IU/ ml died significantly faster than control
298 flies. This virus concentration-specific pattern of mortality was generally
299 consistent with the observed DCV titers measured 5 days following infection,
300 (Table 2, 'dose' effect) which were generally higher in male flies across all DCV
301 concentrations (Table 2, 'sex' effect, Figure 1b). Our experiment therefore
302 spanned the range of sub-lethal viral doses, with 10^5 DCV IU/ ml being the
303 lowest virus concentration with lethality in the experiment (Figure 1a).

304

305 ***Fecundity following systemic DCV infection***

306 We used mated females, which allowed us to quantify fly reproductive health
307 during systemic infection by following the number of adult offspring produced
308 by individual females for 30 days following infection. The total fecundity

309 measured during this period varied according to the dose females had received
310 ($F_{3,66} = 10.32, p < 0.0001$) and we observed that the total reproduction of infected
311 flies was higher than control flies, and increased in a dose-specific manner
312 (Figure 1c).

313

314 *Activity following systemic DCV infection*

315 The locomotor activity of individual male flies infected systemically with all sub-
316 lethal concentrations of DCV was measured during 18 days after infection in a
317 Trikinetics® Drosophila Activity Monitor (DAM). All flies included in the analysis
318 remained alive for the whole period, so changes in activity were not confounded
319 with potential death of individual flies. We found that flies in all treatments,
320 including uninfected controls, showed a reduction in activity over the course of
321 the activity assay (Figure 1d, Table time effect). This general effect is not
322 especially surprising given the constrained environment experienced by flies in
323 the DAM tubes, and that the only source of nutrition and hydration is small agar
324 plug. However, our analysis showed that the temporal reduction in activity
325 depended on the dose that flies had received ('time x dose' interaction, Table 1).
326 In the early stages of infection flies receiving the higher of the 4 doses (10^3 and
327 10^5 DCV copies) showed a reduction in activity relative to control flies and those
328 receiving the lowest dose. Over time, a reduction in locomotor activity was most
329 apparent in flies infected with the highest dose of 10^5 DCV copies (Figure 1d).

330

331 ***Experiment 2: Sub-lethal gut infection***

332 In a separate experiment, we tested how exposure to a single sub-lethal dose of
333 DCV through the oral route of infection impacted upon fly health. We conducted

334 the experiment on ten fly lines from the DGRP panel (Mackay *et al.*, 2012) and we
335 included both male and female flies to test for the effects of host genetic
336 background and sex in response to sub-lethal oral infection. While DGRP lines
337 differ in their lifespan in the absence of infection (Durham *et al.*, 2014), we did
338 not detect any difference between DGRP lines or between sexes in their survival
339 during oral DCV infection compared to control flies (Table S1) which, as
340 expected, was generally non-lethal across all lines.

341

342 *Fecundity following oral exposure to DCV*

343 Despite not observing any effects on fly survival during infection, we detected
344 significant variation in reproductive health following exposure to DCV. The total
345 fecundity of females during the 28 days following oral exposure to DCV (or a
346 control inoculum) varied significantly between DGRP lines (Figure 2; Table 2),
347 reflecting well-known genetic differences in the lifetime reproductive output of
348 these lines (Durham *et al.*, 2014). In addition, we found line-specific fecundity
349 responses to DCV infection ('infection status x line', Table 2, see also Table S2 for
350 pairwise contrasts). In some lines (158, 491, 317) low-level oral infection
351 resulted in a decrease in fecundity; in other lines (821, 358) there was no
352 detectable effect of DCV exposure; while in 2 lines we detected significant
353 increases in fecundity in DCV infected flies compared to uninfected control flies
354 of the same genetic background (Figure 2; see Table S2 for least-square pairwise
355 contrasts).

356

357 *Locomotor activity following oral exposure to DCV*

358 Overall, DGRP lines differed in their activity in a sex specific way ('Fly line x Sex'
359 effect Table 2), but these differences were not altered by infection. While we
360 detected a reduction in locomotor activity following systemic infection (Figure
361 1d), we did not detect any effect of oral DCV exposure on the overall activity of
362 flies (Table 2, Figure 3).

363

364 *Fecal excretion following oral exposure to DCV*

365 We quantified fecal excretion for 30 days following DCV exposure as a proxy for
366 gut health, by counting fecal spots excreted into vials after ingestion of blue-dyed
367 food. Overall we found that males showed higher levels of fecal excretion
368 compared to females (Table 2, 'sex' effect; Figure 4) and that DCV infection was
369 associated with a general reduction in fecal excretion throughout the 30-day
370 observation period ('Infection status' effect, Figure 4). However, we found that
371 males and females differed in the overall severity of this reduction ('sex x
372 infection status' effect), with males showing a greater reduction in defecation
373 overall (Figure 4). Furthermore, we found significant variation among the DGRP
374 lines in the magnitude of the effect of DCV on fecal excretion ('fly line x infection
375 status' effect).

376 **DISCUSSION**

377

378 We find that sub-lethal infections with DCV can cause measurable morbidity that
379 is relevant for the fitness costs experienced by *D. melanogaster* during DCV
380 infection. In two independent experiments using sub-lethal concentrations of
381 either systemic or oral DCV infections, we observed effects on fly reproductive
382 output, digestive health, and locomotor activity.

383

384 *Systemically infected flies increase reproductive output*

385 We found that the fly line used in the systemic infection experiment showed an
386 increase in reproductive output when infected with sub-lethal doses of DCV.
387 There are numerous examples from both invertebrates and vertebrates of
388 fecundity increases following infection (Bonneaud *et al.*, 2004; Vale & Little,
389 2012; Leventhal *et al.*, 2014; Vézilier *et al.*, 2015). In addition, earlier work
390 reported that DCV infection could increase ovariole number and decrease
391 development time in *D. melanogaster* (Thomas-Orillard, 1984; Gomariz-Zilber &
392 Thomas-Orillard, 1993). However, a subsequent re-analysis of these data showed
393 very weak support for the beneficial effects of DCV infection (Longdon, 2015). It
394 is notable however that neither of the earlier studies measured the number of
395 viable offspring of infected flies compared to healthy ones. The fecundity data we
396 report therefore suggests that DCV may indeed result in increased reproductive
397 output.

398

399 A dose-dependent increase in fecundity could suggest a direct effect of DCV
400 infecting fly ovaries, but it is unclear why such a strategy would be adaptive for

401 the virus. An alternative hypothesis may instead involve more complex
402 interactions between the allocation of resources during DCV infection, and how
403 they relate to fly nutritional stress and reproductive investment. For example, *D.*
404 *melanogaster* females selected under conditions of nutritional stress were found
405 to produce a greater number of ovarioles, while the offspring of starved mothers
406 also exhibited greater investment in reproduction (Wayne *et al.*, 2006). Similar
407 to the studies described above (Thomas-Orillard, 1984; Gomariz-Zilber &
408 Thomas-Orillard, 1993), this work also focused on ovariole number and egg
409 production, and did not quantify female lifetime fecundity. Given that DCV
410 infection is known to lead to intestinal obstruction, one possibility for the
411 increase in the number of adult offspring we observed in infected flies is that
412 DCV-induced nutritional stress leads to a greater production of ovarioles, and
413 consequently, an increased number of offspring. Given we only tested a single fly
414 line however, it important to note that this response may not be universal. As we
415 discuss below fecundity responses to infection have generally been found to
416 differ between host genotypes (Vale & Little, 2012; Parker *et al.*, 2014)

417

418 *Fecundity costs and benefits of DCV infection are genotype-specific*

419 Similar to systemically infected flies (Figure 1c), we also find evidence for
420 fecundity benefits in orally exposed flies, but these benefits were only revealed
421 in two out of the ten genetic backgrounds we tested. Indeed, in three of the
422 tested lines, DCV infection resulted in lower reproductive output. Taking
423 fecundity as a proxy for evolutionary fitness, the existence of genotype specific
424 fitness costs and benefits means that DCV could be a potentially powerful driver
425 of *D. melanogaster* evolutionary dynamics. Previous analyses of *Drosophila* spp.

426 population genetic data have shown that the fastest evolving *D. melanogaster*
427 genes are those involved in RNAi-based antiviral defense (Obbard *et al.*, 2006,
428 2009; Early *et al.*, 2016), but the DCV-induced fitness costs that drive this rapid
429 evolution in wild-infected flies (where infections are persistent and often non-
430 lethal), has remained obscure. These data suggest that genotype-specific
431 fecundity costs and benefits of DCV infection could potentially mediate the arms-
432 race between flies and viruses.

433

434 *Systemically infected flies show a dose-dependent decline in activity over time*

435 Reduced activity, or lethargy, following infection is a common response to
436 infection across a range of taxa (Hart, 1988; Adelman & Martin, 2009; Sullivan *et*
437 *al.*, 2016). The most obvious explanation for reduced activity is simply that
438 infected individuals are sick, and lethargy reflects the underlying pathology of
439 infection (Moore, 2013). A popular alternative explanation is that infection-
440 induced lethargy evolved as an adaptive host strategy that conserves energy,
441 which may then be allocated to other physiological tasks such as mounting an
442 immune response (Hart, 1988; Adelman & Martin, 2009).

443

444 Support for the adaptive nature of these ‘sickness behaviours’ has come mainly
445 from vertebrate species challenged with deactivated pathogens or their derived
446 components, which are sufficient to stimulate an immune response without
447 causing pathology (Adelman & Martin, 2009; Lopes *et al.*, 2016). In addition to
448 vertebrates, sickness behaviors including lethargy and anorexia have also been
449 described in insect hosts (Ayres & Schneider, 2009; Kazlauskas *et al.*, 2016;
450 Sullivan *et al.*, 2016). However, in the current experiment it is not possible to

451 disentangle the effect of an adaptive sickness behavior from the direct effect of
452 pathology caused by replicating DCV. Regardless of the underlying cause of
453 reduced activity, it is likely to come at an additional cost of lower involvement in
454 fitness-enhancing activities such as foraging, competing for resources with
455 conspecifics, or courtship and mating (Adelman & Martin, 2009; Adamo *et al.*,
456 2015; Vale & Jardine, 2016). Further, reduced activity following infection can
457 also reduce the potential for disease spread (Lopes *et al.*, 2016). In the context of
458 understanding sub-lethal DCV infection in an ecological setting, reduced activity
459 may therefore be a potentially important source of DCV-induced fitness costs
460 and benefits.

461

462 We did not find an effect of oral DCV exposure on fly activity. Previous work has
463 shown that *Drosophila*, especially females, show a reduction in activity following
464 oral infection with DCV (Vale & Jardine, 2015). However, the viral concentration
465 that flies were exposed to in that experiment was at least 1000x higher, so it is
466 likely that in the current experiment flies did not ingest virus in quantities large
467 enough to affect locomotor activity.

468

469 *The severity of DCV-induced digestive dysfunction is sex-specific*

470 Previous work has shown that DCV infection results in digestive dysfunction,
471 leading to increased body mass due to the inability to excrete digested food
472 (Arnold *et al.*, 2013; Chtarbanova *et al.*, 2014). We found that this measure of gut
473 health varied between genotypes and also between sexes. Extensive genetic
474 variation for gut immune-competence has previously been reported in the DGRP
475 panel (Bou Sleiman *et al.*, 2015), which could underlie some of the variation we

476 observe in DCV-associated digestive dysfunction in some lines. Although that
477 study focused on enteric infection with entomopathogenic bacteria, the
478 mechanisms that mediate variation in gut health during infection include general
479 processes of gut damage and repair, such as the production of reactive oxygen
480 species (ROS) and the production of intestinal stem cells during epithelial repair
481 (Buchon *et al.*, 2013). It is plausible that these mechanisms also mediate disease
482 severity during enteric virus infection, but we are unaware of any systematic
483 study of genetic variation in gut immune-competence during viral infection.

484

485 The mechanistic basis of the observed sex differences in fecal excretion is less
486 clear. The Malpighian tubules are the main organ involved in osmoregulation and
487 excretion of waste matter in insects (Dow & Davies, 2001). *D. melanogaster* male
488 and female Malpighian tubules have been shown to differ at the transcriptional
489 level with over 18% of genes (2308 genes) showing sex-specific expression
490 (Huylmans & Parsch, 2014). We measured fecal excretion by quantifying fecal
491 spots on the sides of the vials. Given that females are known to also spend more
492 time feeding (Wong *et al.*, 2009), it is possible that females also defecate more
493 on the surface of the food compared to males, and therefore spend less time on
494 the sides of the vials. Only a few studies have investigated sex differences in fecal
495 excretion in *D. melanogaster*, finding inconsistent patterns of excretion between
496 sexes (Zeng *et al.*, 2011; Urquhart-Cronish & Sokolowski, 2014). The link
497 between fecal excretion and fitness is not as clear as with fecundity or locomotor
498 activity, but it is relevant in the context of disease transmission of fecal-orally
499 transmitted pathogens such as DCV. The study of temporal trends in fecal
500 excretion and how they vary with host sex and genetic background may

501 therefore be used as a useful model to understand the sources of heterogeneity
502 in pathogen shedding (Vale *et al.*, 2013).

503

504 *Concluding remarks*

505 Altogether, these measures of sub-lethal morbidity give insight into the potential
506 fitness costs of low-level, persistent DCV infection in *Drosophila*. More generally,
507 the combination of both positive and negative effects on fly fitness effects
508 according to the specific host genetic background presents a non-trivial
509 evolutionary scenario for host immune defense (Gandon & Vale, 2014). For
510 instance, frequent encounters between beneficial symbionts and detrimental
511 pathogens are hypothesized to have played a role in the evolution of aphid
512 immune systems, which lack several components of the IMD immune pathway
513 critical for the recognition and elimination of Gram-negative bacteria (Gerardo *et al.*,
514 2010). The combination of fitness costs and benefits of infection, such as
515 those incurred during DCV infection, may therefore have driven the evolution of
516 immune defense across a wide range of host taxa, from insects to mammals
517 (Elsik, 2010; Gerardo *et al.*, 2010; Lee & Mazmanian, 2010; Gandon & Vale,
518 2014).

519

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528

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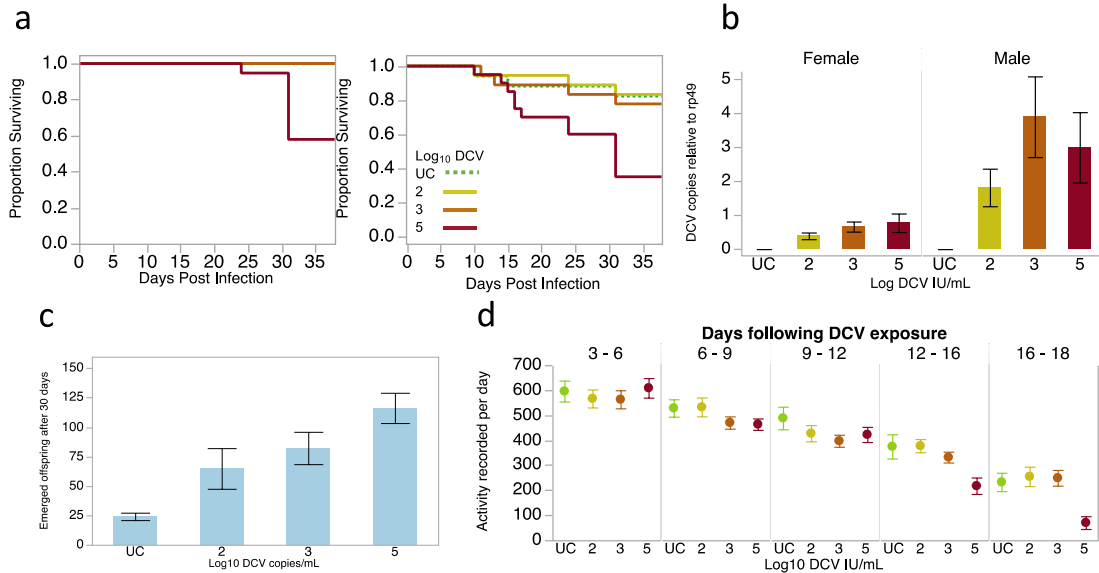
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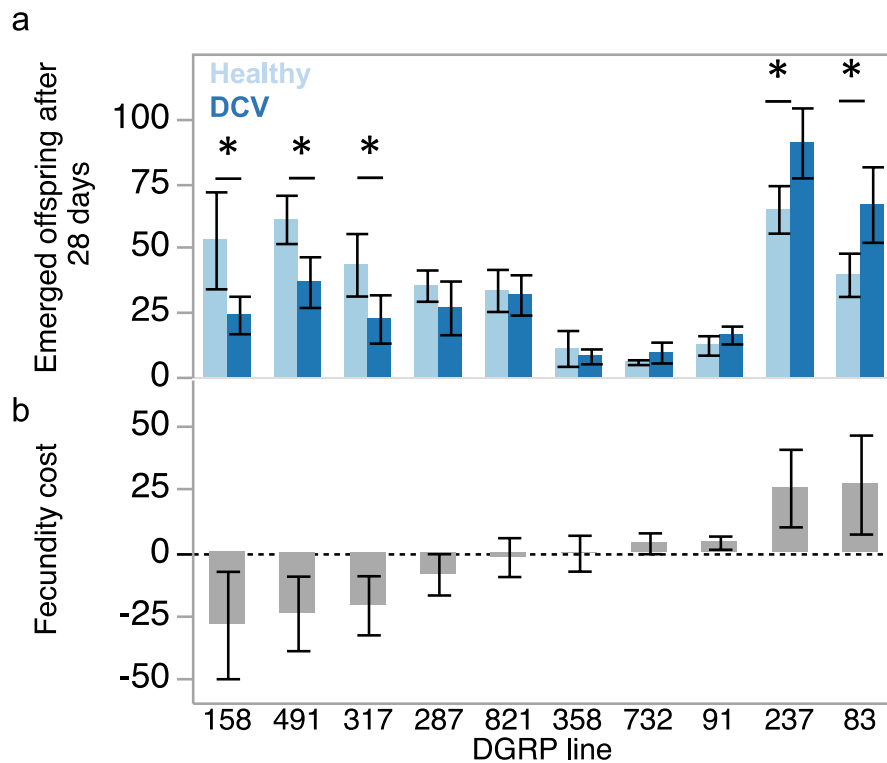
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719 **Figure legends**



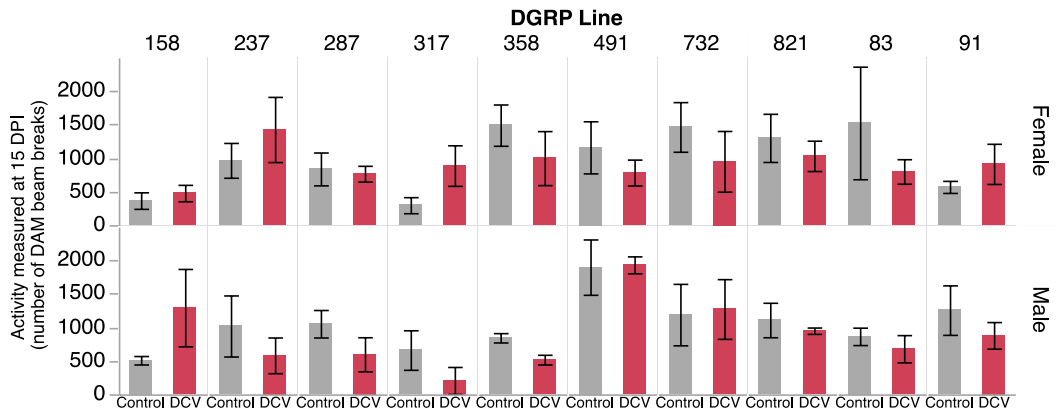
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721 **Figure 1.** Sub-lethal systemic infection. 1a. Kaplan-Meier curves showing the
722 survival of 20 replicate flies exposed systemically to sub-lethal concentrations of
723 DCV. 1b. DCV titers measured in male and female flies relative to an internal
724 control gene (*rp49*), following 3 days of systemic infection with sub-lethal
725 concentrations of DCV. For each DCV concentration, data are the average of
726 duplicate qPCR reactions for 5 individual flies. 1c. The total number of emerged
727 adult offspring recorded for 30 days following systemic infection based on
728 mating that occurred before infection during the first 3-4 days after eclosion.
729 Data are the means \pm SE of 18-19 replicate female flies. 1d. Daily locomotor
730 activity of male flies following systemic infection with DCV. Data are 3 day
731 averages of 7-10 replicate flies for each inoculation concentration. UC are
732 uninfected controls.



734

735 **Figure 2.** Fecundity following oral DCV exposure. 2a. The cumulative number of
 736 adult offspring from healthy (light bars) or DCV-exposed (dark bars) single
 737 female flies over the course of the 28-day experiment. 2b. Shows the fecundity
 738 difference between healthy and infected flies for the same 10 DRGP lines. In both
 739 plots, DGRP lines are ordered from the greatest decrease to the highest fecundity
 740 increase. Significant pairwise contrasts (reported in Table S2) are indicated by
 741 asterisks. Data are the mean \pm SE of eight individual replicate females.



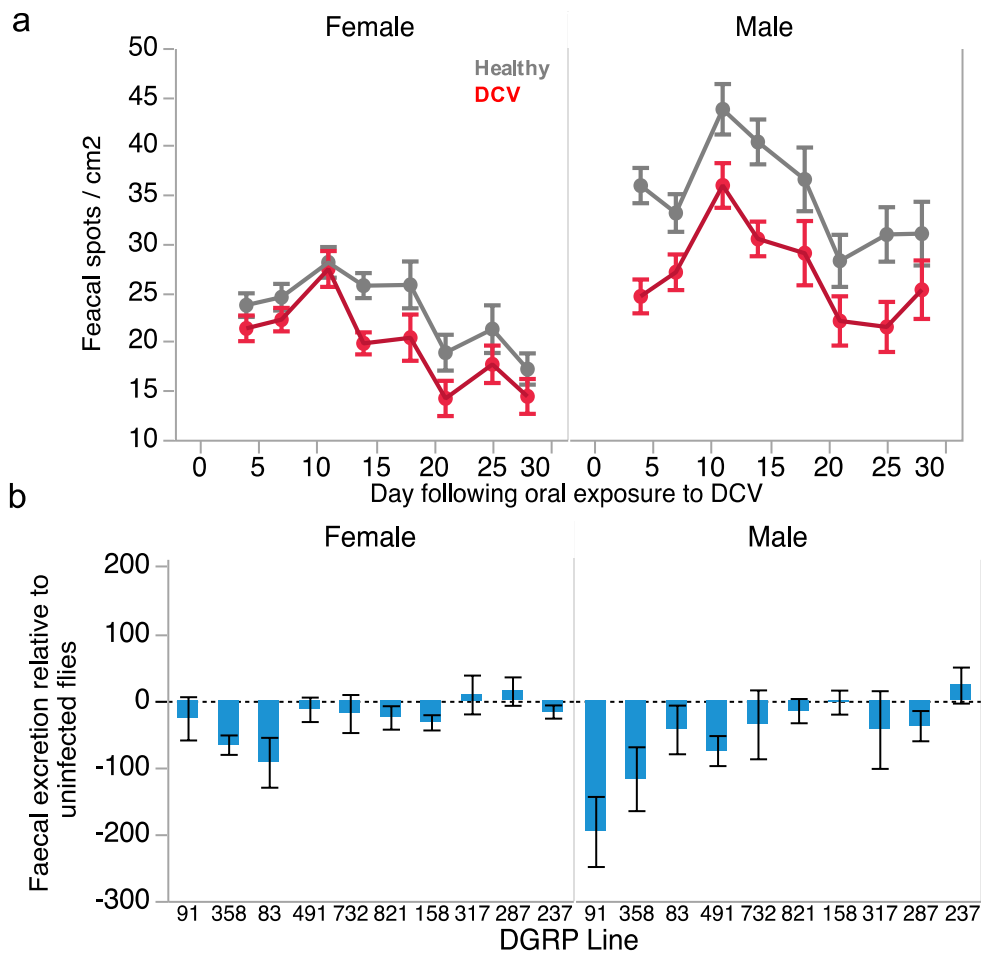
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744 **Figure 3.** Locomotor activity following oral DCV exposure. Data show mean \pm SE
 745 activity of four replicate flies per sex and DGRP line, measured for 24 hours 14
 746 days following exposure to DCV (red) or uninfected controls (grey).

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 750 **Figure 4.** Fecal excretion following oral DCV exposure. 4a. The general effect of
 751 DCV exposure (red) or a control inoculum (grey) on the number of fecal spots
 752 shed over time. Data are plotted separately for males and females. Each time
 753 point is the mean \pm SE of 8 replicate individual flies averaged across all 10 DGRP
 754 lines. 4b. Shows the difference between control and infected flies for each DRGP
 755 line. Data are the mean \pm SE of eight individual replicate flies for each sex and
 756 line combination.

Table 1 - Systemic infection

<i>Survival</i>	DF	χ^2	p-value
DCV concentration	4	45.24	0.0001
Sex	1	8.37	0.0038
DCV concentration \times Sex	2	8.26	0.0161
 <i>Viral titer</i>	 DF	 F Ratio	 p-value
DCV concentration	3	3.14	0.0399
Sex	1	7.34	0.0111
DCV concentration \times Sex	3	1.35	0.2776
 <i>Activity per day</i>			
Time (DPI)	1	290.68	0.0001
DCV concentration	3	5.17	0.0016
Time (DPI) \times DCV concentration	3	5.51	0.001

Table 2 - Oral infection

	DF	F Ratio	p-value
<i>Fecundity</i>			
DGRP Line	9	16.17	<.0001
DCV exposure	1	0.99	0.3186
DGRP Line × DCV exposure	9	2.59	0.0076
<i>Activity per day</i>			
DGRP Line	9	2.91	0.0037
Sex	1	0.02	0.8947
DCV exposure	1	1.45	0.2315
DGRP Line × Sex	9	2.18	0.0277
DGRP Line × DCV exposure	9	0.67	0.7352
Sex × DCV exposure	1	0.12	0.7244
<i>Fecal excretion</i>			
DGRP Line	9	32.17	0.0001
Sex	1	212.66	0.0001
Time (DPI)	1	29.95	0.0001
DCV exposure	1	72.83	0.0001
DGRP Line × DCV exposure	9	4.46	0.0001
Sex × DCV exposure	1	13.45	0.0003
Time (DPI) × DCV exposure	1	0.23	0.6295
DGRP Line × Sex	9	31.22	0.0001
DGRP Line × Time (DPI)	9	1.28	0.2405
Sex × Time (DPI)	1	0.06	0.806

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Supplementary File for

Costs and benefits of sub-lethal *Drosophila C* Virus infection

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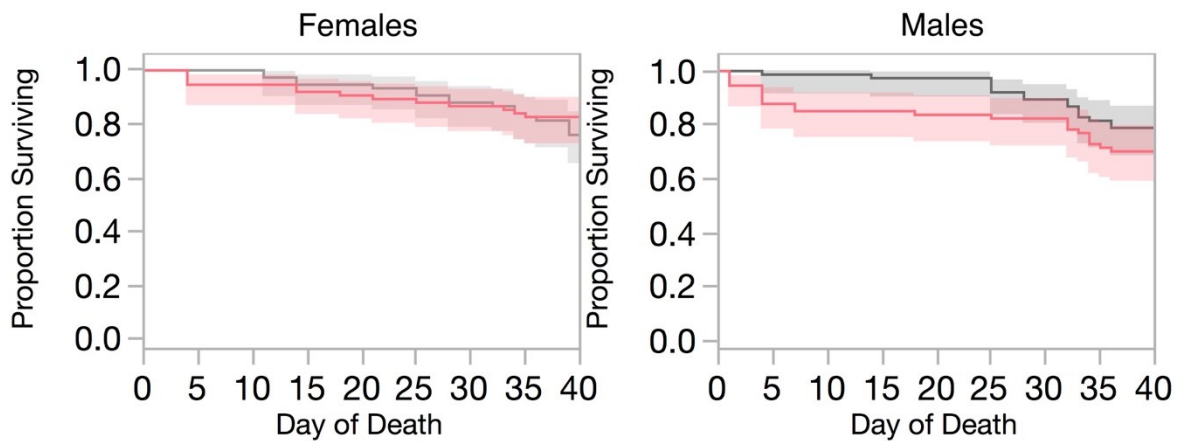
This file contains:

- Table S1. Cox proportional hazards analysis of survival following oral exposure to DCV.
- Table S2. Least Square Means Student's t pairwise contrasts between exposed and control fecundity following oral DCV exposure.
- Figure S1. DCV increases in titer following oral exposure to approximately 10^5 DCV copies.
- Figure S2. DCV increases in titer following systemic challenge with 10^2 , 10^3 and 10^5 DCV IU/ ml.

795 **Table S1. Output of Cox proportional hazard model testing variation in**
 796 **survival following oral infection.**
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Survival during oral infection	DF	χ^2	p-value
DGRP Line	9	3.87084122	0.9197
Sex	1	3.82E-07	0.9995
DGRP Line*Sex	9	2.85864198	0.9696
Infection status	1	4.73E-08	0.9998
DGRP Line* Infection status	9	0.74383375	0.9998
Sex* Infection status	1	1.07E-06	0.9992
DGRP Line*Sex* Infection status	9	0.25051421	1

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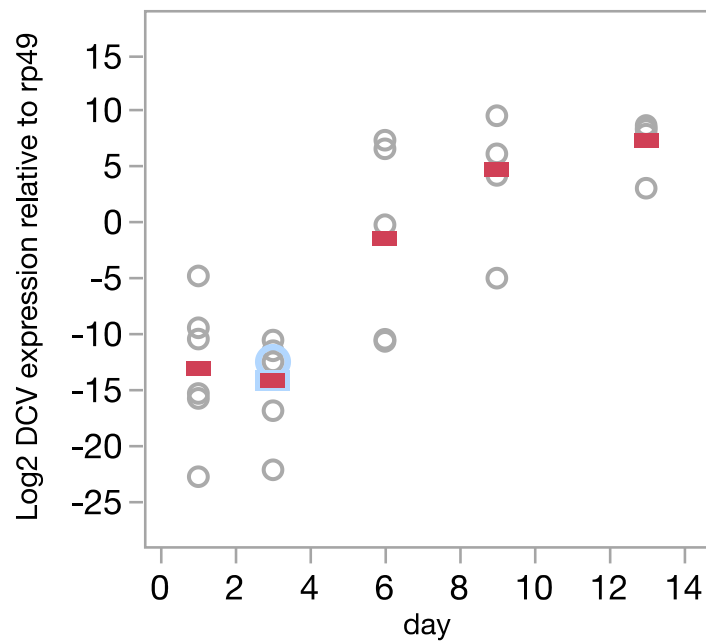


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Table S2. Least Square Means Student's t pairwise contrasts between exposed and control fecundity following oral DCV exposure

DGRP line	NumDF	F Ratio	p-value
83	1	5.0178	0.036
91	1	0.2916	0.590
158	1	7.4368	0.007
237	1	5.6287	0.019
287	1	1.0515	0.306
317	1	4.6993	0.042
358	1	0.0525	0.819
491	1	4.7059	0.031
732	1	0.3253	0.569
821	1	0.0813	0.776

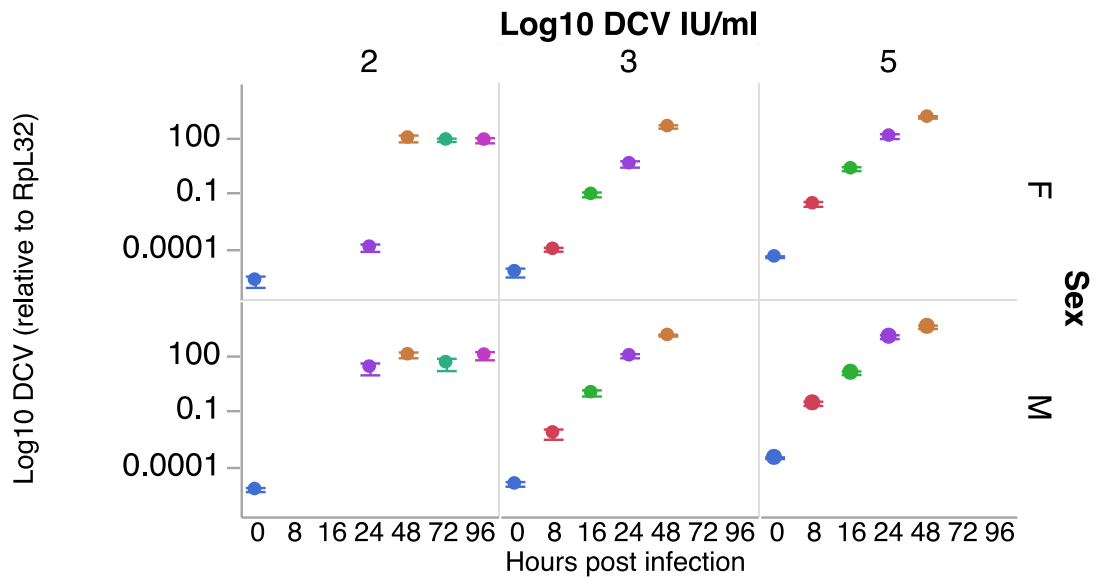
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Figure S1. DCV increases in titer following oral exposure to with approximately 10^5 DCV copies ($F_{1,27} = 57.97$, $p < 0.001$). This experiment was carried out in *D. melanogaster* OreR. Data show the Log2 DCV expression relative to an internal *Drosophila* control gene (rp49), measured in six individual female flies at each time point following exposure. Oral exposure to DCV was carried out as described in the main text.



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 820 **Figure S2.** These data show DCV expression relative to the internal control gene
 821 Rpl32 measured at roughly 8-hour intervals. Male (M) of female (F) *D.*
 822 *melanogaster* (Oregon R, Wolbachia-negative) were challenged with 2, 3 or 5
 823 Log10 DCV IU/ml. Data show means \pm SE of duplicate qPCRs on 3 replicate
 824 groups of 5 flies per sex/DCV concentration.

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