

Determinants of bacterial survival and proliferation in blood

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1	Review article
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3	Determinants of bacterial survival and proliferation in blood
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19	
20	One sentence summary
21	This review provides an overview of the key factors evolved by bacteria to subvert immune
22	defenses triggered by bloodstream infection, highlighting a combination of specific and
23	universal molecular mechanisms that could be targeted by future therapies.

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24 Abstract

25 Bloodstream infection is a major public health concern associated with high mortality and high 26 healthcare costs worldwide. Bacteremia can trigger fatal sepsis whose prevention, diagnosis 27 and management have been recognized as a global health priority by the World Health 28 Organization. Additionally, infection control is increasingly threatened by antimicrobial 29 resistance, which is the focus of global action plans in the framework of a One Health response. 30 In-depth knowledge of the infection process is needed to develop efficient preventive and 31 therapeutic measures. The pathogenesis of bloodstream infection is a dynamic process 32 resulting from the invasion of the vascular system by bacteria, which finely regulate their metabolic pathways and virulence factors to overcome the blood immune defenses and 33 34 proliferate. In this review, we highlight our current understanding of determinants of bacterial 35 survival and proliferation in the bloodstream and discuss their interactions with the molecular 36 and cellular components of blood.

37

38 Keywords

39 Bloodstream infection; bacteremia; bacterial pathogenesis; virulence factors; immune

40 subversion

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41 Introduction

42 Bacteremia is the presence of viable bacteria in the bloodstream. It sometimes results 43 from activities such as toothbrushing, dental extraction or other minor medical procedures. 44 which generally lead to transient and asymptomatic colonization of the blood before bacterial 45 elimination by the immune system (Lockhart et al. 2008). On the other hand, it can constitute 46 a bona fide step of bacterial pathogenesis. Bacteria can enter the bloodstream directly from 47 a breach in the vascular system upon catheterization, surgery, intravenous drug injection, 48 arthropod bite, animal bite and scratches, or injuries such as accidents, falls and cuts. Blood 49 can also be colonized as a complication of a primary infection site, e.g., following pneumonia, 50 meningitis, peritonitis, or skin, soft tissue, bone, joints, biliary or urinary tract infections. 51 Bacteria can then colonize other organs by hematogenous spread, triggering secondary infections such as infectious endocarditis or osteomvelitis. Uncontrolled bloodstream 52 infections can ultimately lead to sepsis, septic shock and death (Hotchkiss et al. 2016). 53

Bloodstream infection is a major public health issue worldwide. Sepsis is estimated to 54 affect 31.5 million individuals leading to 5.3 million deaths annually, and its control has been 55 declared a health priority by the WHO (Fleischmann et al. 2016; Hotchkiss et al. 2016; 56 Reinhart et al. 2017). The incidence rate of bloodstream infections has been estimated to 57 58 range from 113 to 204 per 100,000 person-years in North America and Europe (Goto and Al-Hasan 2013). In the same population, short-term fatality rates and mortality rates were 13-59 20% and 20-37% per 100,000 person-years, respectively (Goto and Al-Hasan 2013). The 60 bacteria the most frequently isolated from blood are Staphylococcus aureus and Escherichia 61 coli. A worldwide sentinel study from 1997 to 2016 highlights inverse frequency trends with 62 S. aureus decreasing from 22 to 18%, while E. coli rising from 18 to 24% (Diekema et al. 63 64 2019) Urinary tract infection is the leading source of E. coli bloodstream infection. A recent systematic review of the literature indicates an estimated incidence rate of E. coli bacteremia 65 66 reaching 48 per 100,000 person-years in high-income countries (Bonten et al. 2021). This 67 rate increases over 100 in 55- to 75-year-olds and over 300 in 75- to 85-year-olds. The

68 average estimated fatality rate of *E. coli* bacteremia is 12% (Bonten *et al.* 2021). Skin infection 69 is the most common cause of *S. aureus* bloodstream infection, which is associated with high 70 morbidity and mortality (Barnett et al. 2013; Stewardson et al. 2016). Far less frequent 71 bacteria responsible for bloodstream infections are Klebsiella pneumoniae, Pseudomonas 72 aeruginosa, Enterococcus faecalis, Staphylococcus epidermidis, Enterobacter cloacae, 73 Streptococcus pneumoniae, Enterococcus faecium and Acinetobacter baumannii, 74 representing 2 to 7% (Diekema et al. 2019). In low-resource regions, Salmonella enterica is a major cause of bloodstream infections (Reddy, Shaw and Crump 2010; Deen et al. 2012), 75

76 Bloodstream infections are associated with high mortality, long hospital stays and high 77 healthcare costs, especially those acquired by critically ill patients in intensive care units 78 (Naber 2009; Brunelli et al. 2016; Wang et al. 2020). The emergence and spread of multidrug-79 resistant clones are additional concerns that limit therapeutic options and increase the economic burden of bacteremia management. The prevalence of antibiotic-resistant 80 enterobacteria isolated from bloodstream infections has more than doubled in 20 years, 81 82 reaching 15,8% in 2016 (Diekema et al. 2019). In contrast, global prevalence of oxacillineresistant S. aureus slightly decreased among both hospital- and community-acquired isolates 83 (Diekema et al. 2019). Although bloodstream infections due to antibiotic-resistant bacteria 84 85 currently represent a minority of cases, they can cause a higher fatality and mortality risks and a heavier economic burden per infection than susceptible isolates (Stewardson et al. 86 2016; Hattori et al. 2018; Kern and Rieg 2020; MacKinnon et al. 2021). Beyond the high 87 hospital costs associated with bloodstream infection care, long-term disabilities following 88 severe sepsis have major socioeconomic impacts (Iwashyna et al. 2010). 89

The pathogenesis of bloodstream infection is a complex and dynamic process. In broad outline, it can be divided into several steps, starting with the invasion of the vascular system by bacteria, possibly after tissue colonization and dissemination from a primary site of infection, followed by interactions with blood immune components, potentially triggering sepsis. In some cases, it can be followed by metastatic spread to secondary sites of infection. Successful bloodstream infection relies on the capacity of bacteria to overcome host immune

96 defenses based on tissular barriers, liver and spleen clearance, immune cells, soluble 97 messengers and antibacterial factors. Invading bacteria face phagocytosis by neutrophils, 98 monocytes and macrophages. Killing occurs by the generation of toxic levels of reactive 99 oxygen and nitrogen species, fine-tuning of the homeostasis of metal nutrients, and the 100 production of antimicrobial peptides and proteases (Nathan 2006; Sheldon and Skaar 2019). 101 In blood, complement kills bacteria directly by forming the lytic membrane attack complex and 102 indirectly by mediating macrophage osponophagocytosis (Ricklin et al. 2010). Other 103 antibacterial defense components of the blood include platelet microbicidal proteins (PMPs) 104 and kinocidins released by alpha granules, interleukin 26, defensins and nutritional immunity 105 proteins such as transferrin, hemopexin and haptoglobin (Hood and Skaar 2012, Yeaman 106 2014; Larochette et al. 2019).

107 Several reviews have explored various stages of bloodstream infections, including 108 bacterial adhesion, invasion, crossing of host barriers, vascular invasion, bacterial survival in 109 blood or serum and dissemination (Lemichez et al. 2010; Miajlovic and Smith 2014; Abreu 110 and Barbosa 2017; Coureuil et al., 2017; Le Guennec et al. 2020; Holmes et al. 2021). However, these reviews focused on specific bacteria or specific barriers. Here, we propose a 111 broader perspective by examining the molecular mechanisms evolved by a wide range of 112 113 clinically relevant bacteria to resist host defenses and thrive in the bloodstream. This review 114 will encompass established survival mechanisms like complement and antimicrobial peptide 115 resistance, blood immune cell manipulation and subversion of nutritional immunity as well as 116 how bacteria regulate these regulatory processes. It will not consider how bacteria enter the 117 bloodstream and how they reach secondary sites of infection, due to the multiplicity of mechanisms and diversity of contexts. We will focus on bacterial determinants of viability that 118 have been functionally validated in blood ex vivo and in animal models. Additionally, we 119 120 provide an in-depth analysis of over 40 genome-wide studies to shed light on metabolic 121 adaptations that enable bacterial survival and proliferation in blood. All in all, our review will explore the critical factors that empower some bacteria to flourish in blood and distinguish 122 123 them from those that do not.

124 **Complement inhibitors**

125 The complement system (see Box 1) is one of the most important components of innate 126 immune response. It mediates host defense and homeostasis in plasma, at infection sites 127 and in intracellular space of some cell types. Complement deficiencies increase the risk for 128 invasive bacterial infection. Complement resistance is a critical property shared by bacteria 129 responsible for bloodstream infection, which developed mechanisms targeting virtually all 130 complement components to interfere with the complement cascade. The following section 131 highlights the key complement resistance factors expressed by bacteria that successfully 132 survive in the bloodstream. Bacterial factors targeting components common to the classical 133 pathway (CP), the lectin pathway (LP) and the alternative pathway (AP), such as C3 and C5. 134 are illustrated in the Figure 2. Bacterial factors targeting components of the CP/LP, AP or TP 135 are illustrated Figures 3, 4 and 5, respectively. Additionally, an extensive view of established bacterial factors evolved to resist complement is presented in Supplementary Tables 1-4. For 136 137 a comprehensive panorama, the reader is referred to reviews considering general evasion 138 mechanisms (Zipfel et al. 2007; Lambris et al. 2008; Hovingh et al. 2016; Ermert et al. 2019; 139 Holmes et al. 2021) or focusing on factors expressed by specific bacteria, such as E. coli (Miajlovic and Smith 2014; Abreu and Barbosa 2017), S. aureus (Pietrocola et al. 2017), K. 140 141 pneumoniae (Doorduijn et al. 2016), P. aeruginosa (González-Alsina et al. 2023), Borrelia 142 burgdorferi (Dulipati et al. 2020), Haemophilus influenzae and Moraxella catarrhalis (Riesbeck 2020), Leptospira spp. (Barbosa and Isaac 2018), Neisseria spp. (Schneider et al. 143 2007; Lewis and Ram 2020), Salmonella and Yersinia spp. (Krukonis and Thomson 2020), 144 or Streptococcus spp. (Laabei and Ermert 2019; Syed et al. 2020). 145

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147 Inhibition of complement activation

148 *S. aureus*, the most prominent bloodstream infection-associated Gram-positive 149 bacterium, is exceptionally well equipped with surface components and secreted effectors 150 that disrupt complement pathways at virtually every step of the cascade. Like other Gram151 positive bacteria, S. aureus is intrinsically resistant to the TP, owing to its thick peptidoglycan 152 layer preventing membrane-attack complex (MAC) formation and subsequent bacterial lysis. 153 The complement efficacy then only relies on its opsonization effect. However, S. aureus can 154 also prevent CP activation by producing the staphylococcal protein A (SpA) (Kronvall and 155 Gewurz 1970) and the second binding protein for immunoglobulins (Sbi) (Zhang et al. 1998), 156 which inhibit Ig interaction with C1q, as described for the staphylococcal superantigen-like 157 protein 10 (SSL10) (Itoh et al. 2010). Interestingly, SSL10 was also shown to bind 158 prothrombin and factor Xa in vitro via their y-carboxyglutamic acid (Gla) domain, interfering 159 with the activation of the coagulation cascade (Itoh et al. 2013) (Supplementary Table 8). 160 Aside from complement subversion, SpA also suppresses B cell response during 161 bloodstream infection (Kim et al. 2015). Remarkably, S. aureus has been shown to target all C3 and C5 convertases from CP/LP and AP by expressing factors such as the extracellular 162 163 adherence protein Eap that binds to C4b and prevents the formation of the C3 proconvertase C4b2 (Woehl et al. 2014), the staphylococcal complement inhibitor protein SCIN that blocks 164 C4b2b and C3bBb(P) formation and function (Rooijakkers et al. 2005b; Jongerius et al. 2007), 165 the extracellular complement-binding protein Ecb and the extracellular fibrinogen-binding 166 167 protein Efb which also inhibit the C3 convertase C3bBb(P) as well as C5 convertases C4b2bC3b and C3bBbC3b activity (Jongerius et al. 2007), thereby promoting bloodstream 168 169 infection in a murine infection model (Jongerius et al. 2012). S. aureus produces another 170 factor preventing opsonization, the staphylokinase, which binds and activates plasminogen 171 into plasmin, leading to C3b and IgG degradation (Rooijakkers et al. 2005a). Sbi and Efb also 172 bind plasmin, triggering C3a, C3 and C3b degradation and resulting in reduced chemotaxis (Koch et al. 2012). By interacting with human fibrinogen, Efb promotes formation of a capsule-173 174 like structure which hampers C3b deposition and opsonophagocytosis (see next section) (Ko et al. 2013). Additionally, S. aureus expresses two small proteins, the superantigen like 175 176 protein 7 (SSL7) and CHIPS (chemotaxis inhibitory protein of Staphylococcus), which bind C5 and C5aR, respectively, thereby interfering with C5a signaling and abrogating C5adependent chemotaxis (De Haas et al. 2004; Bestebroer et al. 2010). 178

179 Gram-negative bacteria evolved specific strategies to prevent MAC insertion in their outer 180 membrane (OM) and overcome complement activation. E. coli, the bacterium the most 181 frequently isolated from blood worldwide, produces the TraT protein, which inhibits C5b-C6 182 interaction, thereby preventing MAC assembly and promoting bacterial survival in serum 183 (Pramoonjago et al. 1992). Lipopolysaccharide (LPS), in particular O-antigen, also 184 contributes to complement resistance, possibly through reduction of membrane fluidity 185 affecting MAC insertion (Taylor 1983) or deposition of complement components and MAC 186 away from the OM, as it has been shown in several S. enterica serotypes (Joiner et al. 1982, 187 1986) and K. pneumoniae (Merino et al. 1992). This relates to the observation that rough 188 strains of *E. coli* that lack O-antigen are more sensitive to serum than smooth strains, in which 189 LPS contains O-antigen (Johnson 1991). LPS can also interfere with the CP and LP. The 190 LPS structure is believed to determine the level of binding of MBL, which is reduced by O-191 antigen and sialic acid in *Neisseria gonorrhoeae* and *S. enterica* serovar Typhimurium 192 (Devyatyarova-Johnson et al. 2000). H. influenzae prevents IgM binding by altering the 193 structure of its lipooligosaccharide (LOS - a particular type of LPS that lacks O-antigen) 194 through incorporation of galactose, thereby reducing complement activation and neutrophilmediated killing (Langereis and Weiser 2014). Furthermore, the phase-variable LOS 195 196 biosynthesis gene IgtC is necessary to minimize C4b deposition on H. influenzae surface (Ho 197 et al. 2007). Bacterial surface structures, such as capsule, exopolysaccharide (EPS) or LPS can prevent C3/C3b deposition and opsonization, thereby reducing phagocytosis and 198 199 promoting survival in blood. The bacterial components involved in these mechanisms are 200 detailed in the section 'Phagocytosis escape'.

Degradation of complement components is another mechanism evolved by major bacteria responsible for bloodstream infection. For instance, *Streptococcus pyogenes* peptidase ScpA can cleave C3,C3a and C5a (Lynskey *et al.* 2017) and *E. coli* Pic autotransporter cleaves C2, C3, C3b, C4 and C4b (Abreu *et al.* 2015). However, a recent study underlined the importance of *in vivo* validation of effector activity demonstrated *in vitro*. Indeed, while *P. aeruginosa* alkaline protease AprA (or PaAP) degrades C1q, C3 (Hong and Ghebrehiwet 1992), C1s and C2 (Laarman *et al.* 2012), and the elastase LasB (or PaE) degrades C1q and C3 (Hong and Ghebrehiwet 1992) *in vitro*; AprA- and LasB-deficient mutants are as virulent as a their parental strain in several animal models (Mateu-Borrás *et al.* 2022).

211 Interestingly, a recent study reported that Gram-negative bacteria such as *P. aeruginosa*, 212 A. baumannii, B. multivorans, enteroaggregative E. coli, K. pneumoniae and Y. enterocolitica, 213 can form sub-populations of complement evaders, which present a biphasic survival curve 214 when exposed to serum and increased resistance to MAC (Pont et al. 2020). Mutants in genes 215 of purine and biotin biosynthesis were further identified as persistance enhancers, while 216 mutants in polyphosphate kinase genes had a decreased number of evaders upon incubation 217 in plasma, establishing a link between metabolism and complement evasion (Janet-Maitre et 218 al. 2023).

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220 Recruitment of complement inhibitors

A common strategy used by bacteria to evade complement is the recruitment of complement inhibitors that regulate autologous complement activation to prevent inflammation and pathologies. For example, *E. coli* secretes the metalloprotease StcE that recruits and potentiates C1-INH, a serine protease inhibitor that negatively regulates C1r, C1s (CP), MASP-1 and MASP-2 (LP) on host cells, protecting adherent bacteria from complement (Lathem et al. 2004).

227 A majority of bacteria involved in bloodstream infections produces factors that interact with C4BP, the main negative regulator of CP and LP, to prevent complement activation, such 228 229 as E. coli OmpA and NlpI (Wooster et al. 2006; Tseng et al. 2012). C4BP binding to N. 230 gonorrhoeae porins Por1A and PorB1 and Neisseria meningitidis PorA has also been 231 demonstrated to confer serum resistance (Ram et al. 2001; Jarva et al. 2005). In addition, 232 gonococcal LOS structure plays a role in C4BP binding efficiency, as shown by a heptose glycan substitution enhancing serum resistance (Ram et al. 2007) or phosphoethanolamine 233 234 residues from the lipid A promoting C4BP binding to PorB (Lewis et al. 2013).

235 The main negative regulators of the AP, i.e., factor H (fH), factor H-like (FHL-1) and factor 236 H-related protein (FHR-1) (Ferreira et al. 2010), are also subverted by bacterial determinants 237 of bloodstream infection, such as A. baumannii OmpA (Kim et al. 2009b), E. coli OmpW (Li 238 et al. 2016) or N. meningitidis factor H binding protein fHBP (Madico et al. 2006). N. 239 meningitidis NspA protein whose expression was initially shown to be induced in human blood 240 (Echenique-Rivera et al. 2011), was later demonstrated to interact with factor H, like sialylated 241 LOS, promoting serum resistance in *N. meningitidis* and *N. gonorrhoeae* (Lewis et al. 2012; 242 Giuntini et al. 2015; Lewis et al. 2019). S. aureus has been shown to subvert both C4BP- and 243 fH-mediated inhibition of complement. Indeed, staphylococcal clumping factor ClfA recruits 244 factor I, the protease responsible for degradation of C4b via C4BP (CP and LP) and 245 degradation of C3b via factor H (AP) (Hair et al. 2008), decreasing complement activation 246 and opsonization. Interestingly, ClfA also allows staphylococci to associate with the fibrin 247 cables resulting from the activation of prothrombin by the coagulases Coa and von Willebrand factor binding protein vWbp, ultimately promoting agglutination and infection severity in a 248 249 mouse model of sepsis (McAdow et al. 2011) (Supplementary Table 8).

Inhibitors of MAC assembly such as heparin-regulated vitronectin, clusterin, COMP or
CD59, can also be recruited or mimicked by bacteria. For instance, the Ldp moonlighting
protein of *P. aeruginosa* binds both clusterin and vitronectin to inhibit the TP and promote
bacteria survival in serum (Hallström *et al.* 2015).

254 Strikingly, some bacterial factors can inhibit CP, LP and AP by simultaneously binding to 255 C4BP and fH such as S. aureus SrdE/Bbp (Sharp et al. 2012). Pathogenic Yersinia species 256 and several S. enterica serotypes encode Ail and Rck proteins, respectively, which are 257 homologous proteases shown to bind fH, C4BP, heparin, and to recruit vitronectin, inhibiting 258 MAC formation by blocking its insertion and C9 polymerization. This mechanism enhances 259 serum resistance in S. enterica (Heffernan et al. 1992; Ho et al. 2010; Ho et al. 2011), Y. 260 pestis (Bartra et al. 2008, 2015; Ho et al. 2014; Shin et al. 2019; Thomson et al, 2019), Yersinia enterocolitica (Bliska and Falkow 1992; Biedzka-Sarek et al. 2008; Kirjavainen et al. 261 262 2008) and Yersinia pseudotuberculosis (Ho et al. 2012). However, these interactions have

recently been shown to play a minor role in *Y. pestis* resistance to complement, while
maintenance of membrane integrity by Ail contributes to serum resistance (Kolodziejek et al.
2022).

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267 **Combined subversion of complement activation and inhibition**

268 Some bacterial factors are Swiss army knives able to interact with multiple components 269 and regulators of the different complement pathways, allowing protection at different levels of 270 the activation cascades. For example, the S. enterica protease PgtE cleaves C3b, C4b, C5 271 (Ramu et al. 2007), C3, factor B and factor H (Riva, Korhonen and Meri 2015), promoting 272 serum survival. Intriguingly, PgtE is a homolog of Yersinia pestis virulence factor Pla that has 273 been shown to activate plasminogen but does not affect bacterial survival in serum nor during 274 bloodstream infection (Sebbane et al. 2006; Sebbane, Uversky and Anisimov 2020). S. 275 pyogenes protease SpeB cleaves C1-INH, C2, C3, C3b, C4, C5a, C6, C7, C8, C9 and degrades properdin, assuring inactivation of complement at all stages of the cascade (Tsao 276 277 et al. 2006; Kuo et al. 2008; Terao et al. 2008).

Other mechanisms such as complement exhaustion by outer membrane vesicles (OMV) have been described in bacteria (Supplementary Table 5), but their significance during bloodstream infection remains to be determined. Additionally, new bacterial determinants of complement resistance, including envelop components, are currently under investigation (Supplementary Table 6).

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284 Bacterial factors subverting blood cell defenses

285 In addition to the complement system, bacteria are confronted with innate immune cells 286 when entering the bloodstream. Many of these cells are patrolling neutrophils and monocytes 287 involved in phagocytic killing of microbes, and platelets which carry out haemostasis and 288 antimicrobial functions (Jenne et al. 2013; Yeaman 2014). Bacteria engaged in bloodstream 289 infection display factors allowing phagocyte or platelet subversion. In this section, we highlight 290 the main subversion mechanisms discovered to date and illustrated in Figure 6. Extensive 291 inventories of factors subverting phagocytes and platelets can be found in Supplementary 292 Tables 7 and 8, respectively.

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294 Phagocytosis escape

295 Complement and antibodies play an important role in phagocytosis through opsonization 296 of bacteria via C3b or IgG for example, facilitating their uptake by monocytes/macrophages and neutrophils. This phenomenon called opsonophagocytosis is widely counteracted by 297 298 bacterial factors inhibiting complement action described in the previous section and by the 299 capsule expressed by some bacteria. The effect of S. enterica capsule on opsonophagocytosis was described almost 90 years ago (Bhatnagar 1935; Felix and 300 301 Bhatnagar 1935). Capsule production decreases opsonin deposition, lowering uptake by 302 neutrophils upon interaction with Bacillus anthracis (Sharma et al. 2020), E. coli (Horwitz and 303 Silverstein 1980; Sarkar et al. 2014), K. pneumoniae (Álvarez et al. 2000), B. pseudomallei (Reckseidler-Zenteno et al. 2005), and some Streptococcus species (Locke et al. 2007; 304 Hvams et al. 2010), as well as uptake by macrophages or monocytes in contact with E. coli 305 306 (Horwitz and Silverstein 1980; Sarkar et al. 2014), H. influenzae (Noel et al. 1996), S. enterica (Wilson et al. 2011; Hart et al. 2016) and S. aureus (Thakker et al. 1998). Interestingly, a 307 308 recent report highlighted cell-type dependent effects of S. enterica Vi capsule, which was 309/ shown to inhibit phagocytosis by human neutrophils and to promote human macrophage 310 phagocytosis by binding DC-SIGN lectin (Zhang et al. 2022). It has also been suggested that

2005; Thurlow *et al.* 2009), as well as hide pathogen-associated molecular patterns (PAMPs) such as lipoteichoic acid (LTA) or peptidoglycan (PG) from pattern recognition receptors (PRRs), dampening immune responses (Thurlow et al. 2009). Furthermore, a recent report showed that inactivation of the glycosyltransferase Gtr6 of a hypervirulent A. baumannii clinical isolate modifies capsule acetylation and protects bacteria from C3b deposition, phagocytosis in vitro and clearance from blood in vivo, resulting in lethal infection in mice (Talyansky et al. 2021). This study highlights the importance and possible evolution of bacterial surface structure for immune escape. Other surface factors reducing opsonophagocytosis include enterococcal polysaccharide (EPA) (Xu et al. 2000; Smith et al. 2019), and exopolysaccharide (EPS) (Mishra et al. 2012) or proteins such as S. pneumoniae neuraminidase NanA acting on human glycoconjugates at the surface of bacteria to reduce Apart from the opsonization decrease, pathogens evolved other mechanisms to prevent

323 C3 deposition (Dalia et al. 2010).

324 phagocytosis such as binding to fibronectin and/or to fibrinogen (Palmqvist et al. 2004; 325 Higgins et al. 2006; Jung et al. 2009), or to erythrocyte CR1, protecting bacteria from uptake 326 (Brekke et al. 2011). For example, the enterococcal surface protein ElrA reduces bacterial 327 adherence to macrophages and internalization (Cortes-Perez et al. 2015). In contrast, 328 Streptococcus suis protein HP0487 was recently shown to promote neutrophil adhesion while 329 reducing phagocytosis (Hui et al. 2021). Interestingly, S. aureus and B. anthracis lacking the 330 331 adenosine synthase A AdsA have a reduced capacity to prevent phagocytic clearance in 332 blood. Abscess formation by S. aureus was dependent on AdsA and could be rescued in an 333 adsA mutant by exogenous supply of adenosine, a known immune regulator. This suggests 334 that these pathogens can subvert phagocytic clearance by controlling adenosine levels 335 (Thammavongsa et al. 2009).

the capsule can mask C3 deposited on the cell wall from phagocyte receptors (Watts et al.

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338 **Phagocyte and platelet impairment**

339 Bacteria involved in bloodstream infection can directly target phagocytes and platelets to 340 prevent phagocytosis and immune response. For example, S. aureus can lyze neutrophils by 341 producing small cytotoxic alpha-helical peptides called phenol-soluble modulins (PSMs) 342 (Wang et al. 2007). It has been further shown that the leucocidin LukED directly kills 343 phagocytes, thereby promoting bloodstream infection in mice (Alonzo et al. 2012). Expression 344 of gamma hemolysin HIgABC is highly upregulated in human blood and contributes to lysis 345 of human neutrophils upon secretion by extracellular S. aureus. However, HIgABC has a 346 modest contribution to virulence in a mouse bacteremia model of infection, presumably due 347 to functional redundancy with other leukotoxins (Malachowa and DeLeo 2011; Malachowa et 348 al. 2011). An indirect phagocyte targeting mechanism was recently discovered, involving the 349 staphylococcal superantigens (Sags) which promote bloodstream infection through 350 modulation of IFN-y production by CD4-positive T cells, impairing macrophage function in the 351 liver and bacterial clearance (Tuffs et al. 2022).

352 Some Gram-negative bacteria involved in bloodstream infection directly inject cytotoxic effectors into the cytoplasm of phagocytes. For example, Y. pestis intoxicates macrophages 353 and neutrophils via injection of the Yersinia outer proteins (Yops) by its type 3 secretion 354 355 system (T3SS) during bloodstream infection (Marketon et al. 2005). These Yops display 356 antiphagocytic properties and can trigger apoptosis and pyroptosis of immune cells, 357 promoting infection (Pinaud et al. 2018; Demeure et al. 2019; Chen and Brodsky 2023). Among Yops, YopM has been shown to inhibit thrombin and ristocetin-induced platelet 358 359 aggregation (Leung et al. 1990; Palace et al. 2020). This latter study also highlighted the role 360 of the plasminogen activator Pla in this mechanism. However, Pla has previously been shown 361 to be dispensable in a septicemic plague model (Sebbane et al. 2006). Similar to Y. pestis, 362 P. aeruginosa T3SS-injected Tox effectors are required for survival in blood (Vance et al. 363 2005). S. enterica SPI-2 T3SS and non-typhoid strain Spv effectors enable systemic infection 364 by promoting the intracellular lifestyle of bacteria and impairing phagocyte survival (Guiney and Fierer 2011; Jennings et al. 2017; Pinaud et al. 2018). Yet, their exact roles in
bloodstream dissemination and survival in blood remain to be clarified.

While the immune role of platelets has long been overlooked, a recent study described a new factor playing a dual role in platelet resistance by *Streptococcus agalactiae*. Indeed, sialic acids (Sia) decorating its capsule polysaccharide (CPS) promote resistance to platelet killing and particularly to platelet antimicrobial peptides. Moreover, Sia bind platelet lectin Siglec-9, thereby inhibiting their activation and promoting *S. agalactiae* blood infection (Uchiyama *et al.* 2019).

Aggregation and exhaustion of neutrophils can be triggered to evade phagocytes, as 373 374 reported with S. suis muramidase-released protein MRP, which interacts with human 375 fibrinogen, and subsequently with neutrophils via an $\alpha_X\beta_2$ integrin-dependent mechanism (Pian et al. 2016). Similar strategies are used to deplete platelets from the bloodstream 376 377 leading to thrombocytopenia. Dysregulation of platelet activation is a mechanism shared by 378 various bacteria such as *B. anthracis*, whose peptidoglycan activates platelets in a FcyRII-379 and complement-dependent manner (Sun et al. 2013), contributing to the disseminated 380 intravascular coagulation (DIC) necessary for B. anthracis pathogenesis (Qiu et al. 2013). In vitro studies of staphylococcal SSL5 also showed activation of platelets through glycoproteins 381 Ibα and αIIbβ3 interaction (De Haas et al. 2009). The pneumococcal neuraminidase NanA, 382 383 mentioned in the previous section, also removes surface sialic acids from cells, increasing 384 platelets activation as well (Syed et al. 2019).

Interestingly, *S. pyogenes* was recently shown to induce thrombocytopenia by a new mechanism exploiting phagocytes. The streptococcal M1 protein is indeed able to form a complex with fibrinogen, Ig and complement components in plasma, and to bind to platelet surface, thus enhancing their phagocytosis by monocytes (Palm *et al.* 2019).

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391 **Resistance to phagocyte defenses**

392 Many bacteria that do not escape phagocytosis or cannot impede immune cells produce 393 factors preventing intracellular killing. Reactive oxygen species (ROS) are among the most 394 potent weapons of phagocytic cells. Bacteria evolved mechanisms to counteract ROS-395 mediated toxicity. For instance, S. aureus synthetizes the antioxidant staphyloxanthin (STX), 396 a membrane-embedded carotenoid pigment which enhances resistance to ROS produced by 397 phagosomal NADPH oxidase NOX2, promoting bacterial survival in phagocytes and virulence 398 (Hall et al. 2017). The antioxidant activity of superoxide dismutases (SOD) SodA, SodB 399 and/or SodC also plays a role in ROS resistance and virulence in S. enterica (De Groote et 400 al. 1997; Farrant et al. 1997; Fang et al. 1999; Ammendola et al. 2005), V. vulnificus (Kang 401 et al. 2007), B. pseudomallei (Vanaporn et al. 2011), S. agalactiae (Poyart et al. 2001; Zhu et 402 al. 2020), S. suis (Tang et al. 2012), N. meningitidis (Wilks et al. 1998), and Y. enterocolitica (Roggenkamp et al. 1997). While S. aureus superoxide dismutase activity was not correlated 403 404 with virulence in vivo, its catalase activity protected bacteria against neutrophil killing (Mandell 405 1975). Specific catalases were thereafter shown to promote infection such as leptospiral KatE (Eshghi et al. 2012), P. aeruginosa KatA (Kim et al. 2009a) or H. influenzae HktE (Bishai et 406 407 al. 1994). Singularly, S. aureus can exist as small-colony variants (SCVs), which often lack a functional electron transport chain and do not produce leucocidins, hemolysins and STX. 408 409 Despite absence of these virulence factors, SCVs can survive in blood due to their reduced 410 sensitivity to neutrophil oxidative burst linked to their defective electron transport system. This 411 observation was confirmed by electron transport restoration in a strain of *E. faecalis* whose 412 electron transport chain was naturally non-functional, leading to a decreased survival in blood (Painter et al. 2017). 413

Glutamate also plays an important role in ROS resistance. When converted to glutathione, it allows a balanced intracellular redox potential promoting *N. meningitidis* bacteremia and resistance to neutrophil ROS (Talà *et al.* 2011). This mechanism emphasizes the importance of glutamate importers such as GltT or NMB1966 in *N. meningitidis* virulence potential (Sun et al. 2000; Li et al. 2009; Talà et al. 2011; Capel et al. 2017). Along the same
line, the glutamate dehydrogenase GdhA, which is upregulated when *N. meningitidis* is grown
in whole blood (Echenique-Rivera *et al.* 2011), was shown to be required for systemic
infection (Sun *et al.* 2000; Liu *et al.* 2016; Capel *et al.* 2017). Interestingly, *S. enterica* ortholog
of GdhA has recently been shown to convert ammonia to glutamate which is in turn converted
to glutathione, promoting resistance to ROS and intracellular survival (Huang *et al.* 2022),
which could explain the contribution of GdhA in *N. meningitidis* pathogenicity.

425 In addition to ROS, phagolysosome acidic environment plays a role in pathogen killing 426 S. enterica withstands phagosomal acidity by producing the virulence protein MgtC. In 427 contrast to other effectors, MgtC does not target vacuolar ATPase but it binds bacterial F_1F_0 428 ATP synthase, inhibiting proton translocation and ATP synthesis allowing maintenance of a 429 physiological ATP level and intracellular pH by bacteria replicating inside acidic phagosomes 430 and thereby promoting systemic infection (Lee et al. 2013). The role of this mechanism in bacteremia remains to be fully deciphered. Neutrophils can also trigger NETosis, a specific 431 432 cell death program that promotes formation of neutrophil extracellular traps (NET) by releasing a net made of DNA, histones, granular proteins and antimicrobial peptides, trapping 433 and degrading microbes (Vorobjeva and Chernyak 2020). Some bacteria encode 434 435 endonucleases or DNAses to evade NETs, increasing their survival in blood, such as for S. 436 pyogenes Sda1 DNAse (Buchanan et al. 2006).

Antimicrobial metal sequestration or intoxication by phagocytes and their subversion by
bacteria will be developed in the section 'Bacterial factors subverting nutritional immunity'.

439 ORICILIA

440 Antimicrobial peptide resistance factors

Antimicrobial peptides (AMPs) are defense components of all living organisms that can kill not only bacteria, but also viruses, parasites and fungi by a variety of mechanisms including membrane destabilization (Bahar and Ren 2013). Resistance to AMPs contributes to the subversion of the immune system by bacteria during the blood phase of infection. Bacterial factors promoting resistance to AMPs and survival in blood or systemic infection are presented in Supplementary Table 9.

447

448 Factors modifying the charge of bacterial surface

An AMP resistance mechanism widely used by bacteria consists in reduction of the 449 negative charge of their surface, prevening the electrostatic attraction of cationic defense 450 molecules. This is in part mediated by expression the *dltABCD* operon and the *mprF* gene, 451 lysinvlation of membrane 452 responsible for D-alanylation of teichoic acids and phosphatidylglycerol, respectively, in Gram-positive bacteria such as S. agalactiae (Poyart et 453 454 al. 2003), S. pneumoniae (Kovács et al. 2006; Wartha et al. 2007), S. suis (Fittipaldi et al. 2008), B. anthracis (Fisher et al. 2006; Samant et al. 2009), S. aureus (Collins et al. 2002; 455 Weidenmaier et al. 2005) and L. monocytogenes (Abachin et al. 2002; Thedieck et al. 2006). 456 In S. aureus, this surface charge modification is associated with increased resistance to 457 endogenous cationic antimicrobial peptides, such as α -defensins, and to thrombin-induced 458 platelet microbicidal protein 1 (tPMP-1), promoting infection in a rabbit endocarditis model 459 460 (Weidenmaier et al. 2005).

Interestingly, a similar mechanism of amino acid addition to the lipid A, enhancing AMP resistance and intestinal colonization, has been more recently described in *V. cholerae* (Hankins *et al.* 2012; Herrera *et al.* 2014). However, its implication in bloodstream infection remains to be elucidated. Reduction of the negative charge of LPS or LOS lipid A, via aminoarabinose addition for example, is a common mechanism of AMP resistance among Gram-negative bacteria (Needham and Trent 2013). While this mechanism can play a role in virulence via peripheral route of infection (Gunn *et al.* 2000), few studies have highlighted its
importance in blood survival. For example, the loss of phosphoethanolamine (PEA)
substitution from *N. gonorrhoeae* lipid A mediated by the PEA transferase LptA, has been
shown to increase susceptibility to polymyxin B, but the observed increased sensitivity to
serum killing was mainly due to the classical complement pathway (Lewis *et al.* 2009).

N. meningitidis fHBP is also involved in resistance to the antimicrobial peptide LL-37,
which could be mediated by their electrostatic interactions (Seib *et al.* 2009), besides its
aforementioned key role in complement inhibition.

475

476 **Potassium transporters**

477 Interestingly, the potassium importer Trk/Sap is an AMP resistance factor shared by 478 several bacterial species, possibly by maintaining potassium homeostasis while AMPs target 479 the bacterial surface. The V. vulnificus trkA potassium transport gene has been shown to be involved in resistance to AMPs such as protamine or polymyxin B, and to contribute to serum 480 481 resistance and virulence in mouse models of infection (Chen et al. 2004). The SapG potassium transporter of S. enterica serovar Typhimurium also contributes to protamine 482 483 resistance (Parra-Lopez et al. 1994) and virulence in a mouse model of infection (Groisman 484 et al. 1992). While the exact mechanism of resistance remains unknown, it was suggested 485 that S. enterica secreted virulence factors were regulated by the Trk transporter (Su et al. 2009). Additionally, a genome-wide screen highlighted the importance of the sapABCDF 486 487 operon for E. coli systemic infection in mice (Subashchandrabose et al. 2013). AMP 488 resistance in vitro or in vivo mediated by a similar transporter has been reported in Y. 489 enterocolitica (Bengoechea and Skurnik 2000) and H. influenzae (Mason, Munson and Bakaletz 2005; Mason et al. 2006). However, its role in bloodstream infection was not 490 491 assessed.

492

493

494 Other mechanisms of resistance to AMPs 495 AMPs can act in several bodily fluids as well as intracellularly, in particular in phagosome 496 in which they contribute to kill bacteria. PilB, the major pilus protein of S. agalactiae has been 497 shown to mediate resistance to LL-37, presumably upon sequestering the AMP, promoting 498 resistance to neutrophil killing, survival in macrophages and bloodstream infection (Maisey et 499 al. 2008). 500 Several studies have identified new AMP resistance factors whose mechanisms of action 501 remain to be deciphered. They are listed in Supplementary Table 9. 502 Bacterial factors subverting nutritional immunity 503 Metals are essential structural and catalytic cofactors of proteins involved in cellular 504 homeostasis in all living organisms. Pathogenic bacteria evolved mechanisms to subvert 505 nutritional immunity by which host controls infection through metal limitation and intoxication 506 507 (Murdoch and Skaar 2022) (Figure 7, Supplementary Table 10). 508 509 Iron Iron (Fe) has been identified as one of the key metals regulating virulence in pathogenic 510 bacteria reaching the bloodstream, where iron is mainly bound to transferrin and to heme in 511 hemoproteins such as hemoglobin. Bacteria have developed diverse highly efficient systems 512 513 to capture iron from host iron-binding proteins (Murdoch and Skaar 2022). Secretion and uptake of siderophores, which are high affinity metal ion chelators, is an efficient mechanism 514 515 of iron acquisition that is widespread in bacteria. The Serratia marcescens siderophore 516 serratiochelin is required for growth in human serum and bacteremia (Weakland et al. 2020). 517 The ferric enterobactin receptor FepA was identified as essential for A. baumannii virulence 518 along with the iron transporter FeoB using a TRaDIS screen in a mouse model of bacteremia 519 (Subashchandrabose et al. 2016). The operon of the previously mentioned siderophore Ybt

520 is located on a mobile element, the high pathogenicity island (HPI) that was horizontally 521 acquired by or from other bacteria such as APEC or ExPEC, in which Ybt has recently been 522 shown to promote bloodstream infection (Huja et al. 2015; Johnson et al. 2018). In K. 523 pneumoniae Ybt is not essential for serum survival in contrast to enterobactin and 524 salmochelin (Bachman et al. 2011). In Gram-negative bacteria, import of siderophores and 525 other molecules widely relies on the TonB-ExbB-ExbD system allowing energy transduction 526 through the envelope. A. baumannii TonB3 was indeed shown to contribute to bacterial serum 527 survival and virulence (Runci et al. 2019). A similar role was uncovered in K. pneumoniae 528 (Hsieh et al. 2008), N. meningitidis (Sun et al. 2000; Capel et al. 2017) and Y. pestis (Palace 529 et al. 2014).

530 To acquire iron, some bacteria also possess ferrous and ferric iron transporters. Some of 531 them are required for full virulence and blood survival, such as the SitABCD ATP-binding 532 cassette (ABC) transporter mediating uptake of ferrous iron and manganese through the inner membrane (IM) in avian pathogenic E. coli (Sabri et al. 2008) and S. enterica (Boyer et al. 533 534 2002; Zaharik et al. 2004). In contrast, mutation of Y. pestis yfe iron IM transporter gene does not reduce virulence in a model of septicemic plague. However, inactivation of both Yfe and 535 versiniabactin leads to virulence attenuation in this model, suggesting a redundancy of these 536 537 iron import systems since Ybt is not required for septicemic plague (Perry et al. 2015).

538 Other bacteria produce factors that directly capture transferrin or heme to circumvent free 539 iron scarcity in the blood. For example, the *N. meningitidis* transferrin binding protein TbpA is 540 essential for virulence in a mouse model of bacteremia, and for bacterial growth in human 541 blood (Renauld-Mongénie *et al.* 2004; Bidmos *et al.* 2015).

N. meningitidis iron uptake also relies on the hemoglobin receptor HpuAB and HmbR, a second hemoglobin binding protein, required for virulence in a rat model in absence of HpuAB (Stojijkovic *et al.* 1995). However, this phenotype was not reproduced when assessing early bacterial survival in human blood, contrary to TbpA, suggesting a role of HmbR in later stages of the infection process when blood transferrin levels decrease and hemoglobin levels increase due to erythrocyte lysis (Bidmos *et al.* 2015). The streptococcal hemoprotein 548 receptor protein Shr has also been demonstrated to be important for iron uptake in human 549 blood and for S. pyogenes virulence in mouse models of skin and systemic infection (Dahesh 550 et al. 2012). Likewise, the surface hemoglobin receptor IsdB transfers iron bound heme to 551 other Isd components and eventually inside S. aureus. IsdB is required for full virulence in 552 various mouse models (Torres et al. 2006; Pishchany et al. 2010, 2014). In S. aureus 553 leucocidins LukED and HIgAB bicomponent toxins have been involved in iron acquisition as 554 they lyse erythrocytes by targeting the Duffy antigen receptor for chemokines (DARC). 555 Consequently, these toxins promote growth of S. aureus in a hemoglobin-acquisition-556 dependent manner and contribute to infection in mice (Spaan et al. 2015).

557

558 Manganese

559 Manganese (Mn) is another metal cofactor required for all forms of life. It can be 560 sequestered by immune cell effectors such as calprotectin, thereby reducing Mn-cofactored superoxide dismutase activity and oxidative stress resistance, as shown in Streptococcus 561 562 sanguinis (Crump et al. 2014; Zhu et al. 2021). Bacteria produce several broadly conserved classes of Mn importers. The Natural Resistance-Associated Macrophage Protein (NRAMP) 563 family is a major class of proton-powered Mn importers expressed in mammals, plants, 564 insects and bacteria in which they are generally named MntH. Both MntH and SitABC 565 566 transport systems have been shown to play an important role in S. enterica virulence in NRAMP1 expressing mice, while MntH was not required in a SitABC mutant background and 567 in NRAMP1 defective mice which cannot deplete Mn and Fe from intracellular compartments 568 (Bover et al. 2002; Zaharik et al. 2004). In a similar competition scenario, S. aureus MntH and 569 570 MntABC transporters have been shown to be induced in presence of calprotectin during the course of systemic infection (Kehl-Fie et al. 2013). 571

572 High amounts of Mn can also be toxic for bacteria, as highlighted by the importance of 573 the *N. meningitidis* Mn^{2+} exporter MntX in regulating the intracellular Mn/Fe ratio and 574 preventing manganese toxicity, which is exacerbated in low iron conditions. MntX was shown 575 to be important to resist killing by human serum and for bacterial survival in mouse blood in a model of septicemia following intraperitoneal inoculation (Veyrier *et al.* 2011). More recently,
MntE, a member of the cation diffusion facilitator protein family, was shown to prevent
excessive intracellular Mn accumulation. Deletion of the MntE gene led to a reduced tolerance
to oxidative stress and decreased virulence during systemic infection with *S. suis* (Xu *et al.*2017) and *S. aureus* (Grunenwald *et al.* 2019). The latter study linked Fe homeostasis to Mn
efflux.

582

583 **Zinc**

584 Similar to Fe and Mn, zinc (Zn) is an important cofactor for various enzymes, such as 585 superoxide dismutases, and is also sequestered by the host immunity protein calprotectin. 586 Bacteria subvert this restriction by expressing Zn importers. For example, the AdcABC 587 transporter is required for Zn import into the cytoplasm of Gram-positive bacteria and 588 promotes blood survival and systemic infection in several Streptococcus species (Bayle et al. 2011; Le Breton et al. 2013; Ong et al. 2018; Zhu et al. 2020). The high affinity IM zinc 589 590 transporter ZnuABC is required for systemic infection with the Gram-negative S. enterica 591 (Ammendola et al. 2007) in synergy with the low affinity Zn transporter ZupT (Cerasi et al. 2014). While outer membrane (OM) crossing has long been overlooked, it has been observed 592 593 that the conserved outer membrane protein (OMP) zinc-uptake component D ZnuD is induced when N. meningitidis is incubated in whole blood (Echenique-Rivera et al. 2011). ZnuD 594 functions as a gated pore in the OM, importing Zn ions (Calmettes et al. 2015). ZnuD is 595 required for efficient systemic infection with N. meningitidis (Calmettes et al. 2015) and A. 596 baumannii (Hesse et al. 2019). However, the latter study highlighted different contributions of 597 598 OMP ZnuD and IM ZnuABC depending on infected tissues.

599 Similar to *yfe*, a deletion of *znuABC* alone is not sufficient to reduce *Y. pestis* virulence in 600 a model of septicemic plague. However, the HMWP2 protein involved in Ybt siderophore 601 production is required for growth of a *znuABC* mutant in zinc-deficient conditions and for 602 septicemic plague. It has been suggested that the Zn-binding siderophore Ybt may serve as 603 a zincophore for Zn^{2+} acquisition which also relies on YbtX, a member of the major facilitator superfamily (Bobrov *et al.* 2014). Similarly, *S. aureus* uses two importers, the AdcABC
permease and the CntABCD transporter that can import the metallophore staphylopine (StP),
enabling bacteria to compete with the host for zinc and promote systemic infection (Grim *et al.* 2017).

608 Zn intoxication can take place as an immune response to infection, and Zn export 609 systems have been evolved by bacteria to survive this toxicity, as exemplified by 610 streptococcal CzcD export protein (Ong et al. 2018; Zhu et al. 2021). Interestingly, Zn 611 tolerance can differ between bacterial species. Indeed, S. pyogenes faces zinc toxicity upon phagocytosis by neutrophils and nutritional immunity extracellularly (Ong et al. 2018). In 612 contrast, a S. sanguinis czcD mutant showed impaired growth extracellularly in human serum, 613 614 which contains higher Zn concentration than saliva, the usual commensal niche of S. 615 sanguinis (Zhu et al. 2021).

616

617 Other metals

618 Copper is used by macrophages to kill phagocyted bacteria but is also required as a cofactor of important bacterial enzymes such as Cu/Zn SOD SodC. Many bacteria encode 619 the IM copper exporter CopA (formerly known as CueA), which is required for full virulence in 620 621 S. pneumoniae (Johnson et al. 2015) and P. aeruginosa (Schwan et al. 2005) but not in S. 622 enterica (Fenlon and Slauch 2017). Several copper resistance factor such as copper exporter or oxidase have been described in S. enterica but their involvement in virulence seems strain 623 624 specific and varies according to the route of infection (Hyre et al. 2021). In *L. monocytogenes* 625 the copper transporter CtpA is required to establish a systemic infection, but the exact 626 virulence mechanism remains unknown (Francis and Thomas 1997).

627 Calcium can also be toxic to bacteria that developed mechanisms to regulate its 628 concentration. A *S. pneumoniae caxP* mutant accumulated intracellular calcium and had a 629 defective growth in sheep blood, human plasma and human serum, as well as a reduced 630 virulence in mice (Rosch *et al.* 2008).

631

High level of sodium can be toxic as well, and it has been reported that inactivation of Y.

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632 *pestis* Na⁺/H⁺ antiporters NhaA and NhaB abolishes virulence, possibly by sensitizing
633 bacteria to Na⁺ toxicity in blood (Minato *et al.* 2013).

634 Magnesium (Mg) divalent cation has several biological functions, including as an 635 enzymatic cofactor and a neutralizer of negatively charged macromolecules. The magnesium 636 transporter MgtB has been shown to contribute to systemic infection in several Yersinia 637 species, as mgtB mutants have a low competitive index after intravenous injection (Stubben 638 et al. 2009; Ford et al. 2014). A similar function of MgtB was more recently described in S. 639 marcescens (Anderson et al. 2017) and S. enterica (Choi et al. 2017). A recent breakthrough 640 study identified SLC11A1 (NRAMP1) as the main Mg restrictor inside phagocytes leading to 641 resistance against S. enterica infection (Cunrath and Bumann 2019). Expectedly, MgtB is 642 required for S. enterica virulence in NRAMP1 positive but not in NRAMP1 negative mice.

Nickel plays a role in nutritional immunity, being sequestered by calprotectin. As a cofactor of several redox and non-redox enzymes produced by bacteria, it is required for diverse metabolic processes during infection (see next section). A recent transcriptomic study of porcine ExPEC in bloodstream of infected animals and in swine blood *ex vivo* revealed an upregulation of the expression ot the nickel transporter NikABCDER, which was also shown to contribute to bacterial growth in swine blood and in infected mice (Ma *et al.* 2020).

649 Cobalt also serves as a cofactor for several bacterial proteins, but its implication in 650 nutritional immunity is unclear. A screen of *S. sanguinis* mutants in human serum identified 651 transporter genes of the energy coupling factor (ECF) family, *ecfA2*, *ecfT*, and *stpA*, whose 652 single mutants and the triple mutant were shown to have decreased survival in human serum 653 (Zhu *et al.* 2021). These genes were annotated as cobalt transporters, but their exact function 654 and substrate remain to be characterized.

RIG

655 Bacterial metabolic factors

656 Nutrients and compounds vary greatly within hosts, defining multiple biogeochemical 657 microhabitats in which bacteria adapt their metabolism, in particular when they reach the 658 blood during the infection process (Olive and Sassetti 2016). Metabolism includes several components such as glycolysis, gluconeogenesis, citric acid cycle/tricarboxylic acid cycle 659 660 (TCA), and pentose phosphate pathway (PPP) for carbon metabolism, nitrogen and sulfur 661 metabolisms and oxidative phosphorylation for energy production and nucleotide and amino 662 acid metabolisms (Kanehisa and Goto 2000; Kanehisa et al. 2023). The link between 663 metabolism and virulence was recently reviewed using S. enterica as a model (Pokorzynski and Groisman 2023). In this section we propose to focus on some metabolic pathways 664 665 required for bacterial survival into host blood. While specific metabolic pathways have been only studied in a restricted set of bacteria, we will take advantage of the conservation of 666 667 bacterial metabolism and of the numerous genome-wide screens performed in conditions mimicking bacteremia (see Box 2) to draw conclusions on general metabolic requirements 668 669 during bloodstream infection, which are summarized in the Supplementary Tables 11, 12, 13 670 and 14.

671

672 Nucleotide metabolism

673 Systemic virulence has been linked to nucleotide and related metabolite auxotrophy since the 1950's in bacteria such as S. enterica (Bacon, Burrows and Yates 1950, 1951; Gowen et 674 al. 1953; Formal, Baron and Spilman 1954), K. pneumoniae (Garber, Hackett and Franklin 675 1952), B. pseudomallei (Levine and Maurer 1958), and later in B. anthracis (Ivánovics, Marjai 676 and Dobozy 1968) or Y. pestis (Brubaker 1970). S. enterica purine-auxotrophic mutants 677 678 revealed the crucial role in virulence of PurA and PurB, involved in adenosine 679 monophosphate (AMP) biosynthesis from inosine monophosphate (IMP), as well as guanine 680 monophosphate (GMP) biosynthesis proteins GuaA and GuaB, depending on the strain. The 681 role in *S. enterica* virulence of PurC, PurD, PurF, PurG (or PurL) and PurH, involved in IMP

682 biosynthesis, was less pronounced and strain-dependent, suggesting an alternate acquisition 683 or biosynthesis of IMP in vivo (McFarland and Stocker 1987), which was previously observed 684 in B. anthracis (Ivánovics et al. 1968). A subsequent study on E. coli and S. enterica 685 uncovered that almost all proteins involved in purine and pyrimidine biosynthesis were 686 required for serum survival (Samant et al. 2008). In the same study, the role of PurE, PurK, 687 CarA and PyrC was investigated in *B. anthracis* vaccine strain Sterne. Interestingly, PurE and 688 PurK were required for bacterial survival in serum but only PurE promoted systemic infection. 689 It was hypothesized that a non-enzymatic reaction at high concentration of bicarbonate could 690 rescue the absence of PurK. B. anthracis PurH was later shown to be required for full 691 virulence in guinea pigs but not in other animal infection models (Jenkins et al. 2011). 692 Using random transposon mutagenesis coupled with sequencing, de novo biosynthesis 693 genes previously reported in non-pathogenic E. coli (Samant et al. 2008) were identified in 694 ExPEC grown in swine serum, and loss of virulence of PurF and PyrF mutants was confirmed 695 in a mouse model of infection (Ma et al. 2021). New screens mostly based on transposon mutagenesis (see box 2 and Supplementary Table 11) further highlighted requirement of 696 nucleotide biosynthetic pathways for bacterial survival in blood or in vivo for other bacteria 697 such as in several Streptococcus species (Polissi et al. 1998; Le Breton et al. 2013; Hooven 698 et al. 2018; Charbonneau et al. 2020; Zhu et al. 2020, 2021), Y. pseudotuberculosis 699 (Crimmins et al. 2012), Y. pestis (Palace et al. 2014), N. meningitidis (Sun et al. 2000; 700 Mendum et al. 2011; Capel et al. 2017), P. multocida (Fuller et al. 2000), P. mirabilis 701 (Armbruster et al. 2019), S. aureus (Benton et al. 2004; Christiansen et al. 2014; Connolly et 702 703 al. 2017; Groma et al. 2020), K. pneumoniae (Weber et al. 2020) or E. faecium (Zhang et al. 704 2017). By combining Tn-Seq with RNA-Seq this latter study pointed out upregulation of expression of the purine biosynthesis operon during bacterial growth in serum. 705

Taken together, these studies highlight the importance of *de novo* biosynthesis of purine and pyrimidine for successful bloodstream infection by a large panel of bacteria, presumably due to low abundance of these molecules in blood. Yet, purin synthesis inactivation was recently shown to enhance complement tolerance in *P. aeruginosa* (see section 'Complement inhibitors'), emphasizing the need to investigate further the role of purin metabolism during
infection (Janet-Maitre *et al.* 2023).

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713 Amino acid metabolism

714 Similar to nucleotide auxotrophy, amino acid (AA) auxotrophy was linked to systemic 715 infection several decades ago in S. enterica (Bacon et al. 1950, 1951). More recent studies, 716 including genome-wide screens, identified bacterial factors involved in biosynthesis or import 717 of amino acid during bacteremia (Supplementary Table 12). The shikimate pathway, 718 responsible for aromatic compound biosynthesis, was targeted via aroA and aroB mutations 719 to reduce the virulence of S. enterica (Hoiseth and Stocker 1981; McFarland and Stocker 720 1987; Günel-Özcan et al. 1997; Chaudhuri et al. 2009). Virulence of shikimate deficient 721 mutants was so attenuated that they have been used as vaccine candidates against typhoid 722 fever. Further studies showed that this phenotype could be due to a membrane defect in addition to aromatic compound auxotrophy (Sebkova et al. 2008). The shikimate pathway has 723 724 been shown to be involved in bacteremia for multiple bacteria, such as K. pneumoniae 725 (Bachman et al. 2015; Weber et al. 2020), L. monocytogenes (Stritzker et al. 2004), S. aureus (Christiansen et al. 2014), several Streptoccus species (Hooven et al. 2018; Zhu et al. 2020), 726 727 P. mirabilis (Armbruster et al. 2019), and N. meningitidis (Sun et al. 2000; Mendum et al. 728 2011; Capel et al. 2017). The amino acid importer AroP was also shown to be required for optimal systemic infection with X pestis (Palace et al. 2014). Downstream of the shikimate 729 pathway, tryptophan biosynthesis enzymes have been demonstrated as essential for 730 731 bacterial survival during systemic infection by S. aureus (Mei et al. 1997; Coulter et al. 1998), 732 N. meningitidis (Mendum et al. 2011; Capel et al. 2017) and Y. pseudotuberculosis (Crimmins 733 et al. 2012). Thus, aromatic compounds seem to be restricted in the bloodstream, and their 734 biosynthesis and/or uptake represent conserved traits of bacteria causing bloodstream infection. Branched-chain amino acids (BCAA), consisting in leucine, isoleucine and valine, 735 were recently described as important for successful systemic infection of several pathogens 736 737 such as *B. anthracis* (Dutta et al. 2022) and *S. aureus* (Kaiser et al. 2015). The link between

reviewed (Kaiser and Heinrichs 2018). Various other amino acid metabolic pathways have been shown to be required for successful bloodstream infection. It is well illustrated by the study of S. aureus aspartate semialdehyde dehydrogenase Asd, an enzyme required for biosynthesis of lysine, methionine and threonine from aspartate. An Asd-defective mutant, as well as MetE-, ThrC- and LysA-defective mutants, auxothrophs for methionine, threonine and lysine respectively, showed reduced growth in calf serum (Oogai et al. 2016). Methionine requirement in blood was also shown by the decreased bacterial survival of methionine transporter deficient strains of S. agalactiae (Zhu et al. 2020) or Y. pestis (Palace et al. 2014), and methionine biosynthesis mutants of N. meningitidis (Sun et al. 2000; Capel et al. 2017). Other amino acid-related proteins identified in genome-wide mutational screens in conditions The arginine-derived polyamine (putrescine and spermidine) importer PotABCD was shown to be required for pneumococcal septicemia (Polissi et al. 1998; Ware et al. 2006). The Pot operon and the putrescine biosynthesis enzyme SpeA were found to be required for bloodstream survival in genome-wide mutational screens of S. aureus (Groma et al. 2020) and P. mirabilis (Armbruster et al. 2019), respectively. In a mouse model of typhoid fever, polyamines have been shown to be required for expression of S. enterica virulence factors

757 A particular mechanism used by *B. anthracis* to acquire essential amino acids from the 758 host is to proteolyze human hemoglobin, enhancing its growth. This property is mediated by 759 the secreted metalloprotease InhA1 and extends to other serum proteins, including albumin (Terwilliger et al. 2015). 760

mimicking bacteremia are listed in Supplementary Table 12.

and optimal infection (Jelsbak et al. 2012).

BCAA adaptive response to nutrient fluctuations and regulation of virulence has recently been

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762 Carbon metabolism

763 Carbon metabolism is one of the most fundamental functions in any living organism. Bacteria need to adapt to carbon sources available in the host during infection, in particular 764 765 in blood (Supplementary Table 13).

766

767 Bacteria acquire carbon from carbohydrate sources available in their environment. They 768 heavily rely on phosphoenolpyruvate-dependent phosphotransferase systems (PTS) which 769 import and phosphorylate carbohydrates. PTS-related proteins important in virulence have 770 been identified in E. faecium (Zhang et al. 2017), Y. pestis (Palace et al. 2014) and N. 771 meningitidis (Sun et al. 2000; Capel et al. 2017). Surprisingly, the N. meningitidis PTS system 772 is incomplete and should not be able to mediate import of carbohydrates. Its contribution to 773 infection could rely on the pleiotropic role of the phosphocarrier protein Hpr during interactions 774 with the host, in particular in blood (Antunes et al. 2016a). Mannose- and fructose-specific 775 PTS systems are also required for bloodstream infection with *E. faecium* (Zhang *et al.* 2017) 776 and S. pyogenes (Le Breton et al. 2013; Valdes et al. 2016), highlighting the importance of 777 these specific sugars in blood. Interestingly, growth defect of S. pyogenes fruR and fruB 778 deletion mutants was observed in human blood and not in mouse blood nor in infected mice. suggesting that fructose PTS are important for S. pyogenes survival in a human-specific 779 780 environment (Valdes et al. 2016).

Bacteria can also import carbohydrates via ABC transporters or permeases. The non-781 PTS importer GlcU is required for optimal growth of S. pyogenes in blood. While the Ptsl-782 783 dependent pathway plays a more important role in this phenotype, PTS-dependent and PTSindependent pathways are linked by an unknown mechanism (Sundar et al. 2018). 784 785 Additionally, ExPEC relies on ribose import for its metabolism during bacteremia, but only a double mutant affected in the ribose transporter RbsDACB and in the citrate fermentation 786 system CitCEFXG showed reduced fitness in blood and reduced virulence in infected mice, 787 788 suggesting a pathway redundancy to support metabolic requirement during infection (Ma et al. 2020). In N. meningitidis the lactate permease LctP is required for resistance to 789 790 complement (see section 'Complement inhibitors') and bloodstream infection. Interestingly, 791 virulence attenuation of LctP deficient bacteria is mediated through the sialic acid biosynthesis pathway, connecting central carbon metabolism and virulence (Exley et al. 792 793 2005).

Following import of carbon sources from their environment, bacteria use several pathways such as glycolysis, citrate cycle or the pentose-phosphate pathway to metabolize carbohydrates. These pathways produce energy and synthesize metabolites that directly impact pathogenesis.

799 For example, in addition to the lactate-dependent sialic acid biosynthesis by N. 800 meningitidis associated to virulence described above, production of the capsule associated 801 to S. marcescens virulence relies on phosphoglucomutase Pgm that converts glucose to 802 pyruvate. A Pgm-deficient mutant in S. enterica could not use galactose as a carbon source. 803 and showed a defect in LPS biosynthesis as well as virulence attenuation in mice (Chaudhuri 804 et al. 2009; Paterson et al. 2009). Interestingly, galactose metabolism proteins GalE and GalU 805 have been shown to be required for bacterial resistance to serum and systemic infection (Sun 806 et al. 2000; Geoffroy et al. 2003; Phan et al. 2013; Zou et al. 2013; Capel et al. 2017), which 807 could be due to their contribution to LPS biosynthesis (Robertson et al. 1993; Priebe et al. 808 2004). Similarly, the fermentative S. pneumoniae requires lactate dehydogenase Ldh to grow 809 on glucose, survive in blood and promote virulence in mice, possibly through regulation of capsule production (Gaspar et al. 2014). In addition, P. mirabilis utilizes D-serine as a carbon 810 source during bacteremia upon degradation, which involves DsdA, DsdC and DsdX proteins, 811 812 (Brauer et al. 2019).

813 Carbon metabolic pathways required for successful bloodstream infection are thus
814 diverse. Other examples are available in Supplementary Table 13.

815

816 Other metabolic pathways

817 Other metabolic pathways have been found to be required for bacterial survival in blood 818 and/or bloodstream infection using several screens in conditions mimicking bacteremia 819 (Supplementary Table 14).

820 **Electron transport chain.** Several electron transport chain genes have been shown to 821 be required for bacterial survival in blood and virulence. For example, simultaneous deletion of *hybABCD* and *hycEFG*, encoding the Ni-Fe hydrogenases 2 and 3 involved in anaerobic respiratory chains, impairs ExPEC growth in swine blood and in mice (Ma *et al.* 2020). Other electron transport chain components were identified in screens performed in *N. meningitidis* (Capel *et al.* 2017) and *S. enterica* (Chaudhuri *et al.* 2009). However, these studies lacked mechanistic aspects. Conversely, as reported in the section 'Resistance to phagocyte defenses', the electron transport chain sensitized *S. aureus* and *E. faecalis* to neutrophil oxidative burst, and its inactivation led to a greater survival in blood (Painter *et al.* 2017).

829 Nitrogen metabolism. Nitrogen is critical for production of amino acids and nucleic acids. Nitrogen assimilation proteins GInA/GItB, GdhA and NtrB have been shown to be 830 831 essential for nitrogen acquisition from blood during P. mirabilis infection (Armbruster et al. 832 2019). Interestingly, orthologous proteins were also identified in other screens of bacterial 833 factors required for survival in blood or in vivo, e.g. S. suis GlnA (Arenas et al. 2020), E. coli GltB (McCarthy, Stabler and Taylor 2018) or N. meningitidis GdhA (Capel et al. 2017). Further 834 studies will be required to better discriminate the relative contribution of these factors to ROS 835 836 resistance (see section 'Resistance to phagocyte defenses') and nitrogen uptake during 837 bacteremia.

Sulfur metabolism. As an essential element for life, sulfur needs to be acquired by 838 839 bacteria from environmental sources such as the abundant cysteine amino acid or its oxidized 840 derivative cystine. It was first observed that the L. monocytogenes cysteine importer CtaP 841 was required for systemic virulence, but the pleiotropic effects of its inactivation prevented from drawing any conclusion concerning cysteine requirement (Xayarath et al. 2009). 842 843 Interestingly, proteins involved in cysteine transport (CysA, CysW, CysT) and sulfur 844 metabolism were recently identified as necessary for N. meningitidis survival in the 845 bloodstream (Capel et al. 2017). Additionally, cysteine/glutathione importer genes cydCD 846 were shown to be required for efficient proliferation of Y. pestis during systemic infection 847 (Palace et al. 2014). In S. aureus, regulation of cysteine metabolism plays a central role in stress resistance, host adaptation and virulence (Soutourina et al. 2010) and a recent study 848 849 uncovered the importance of cystine importers TcyP and TcyABC during systemic infection (Lensmire *et al.* 2020). This study concluded that sulfur salvage from host cystine could
promote infection, which opens new perspectives on sulfur metabolism at the host-pathogen
interface during bacteremia.

853 Thiamine metabolism. Thiamine (vitamin B1) is an essential co-factor for aerobic 854 metabolism. Thiamine has been shown to be important for L. monocytogenes intracellular 855 lifestyle (Schauer et al. 2009), and more recently for P. aeruginosa pulmonary infection, as 856 well as being considered a promising target for antimicrobial development (Kim et al. 2020). 857 Interestingly, thiamine-related genes were identified in several screens to discover factors involved in bacteremia in various bacteria such as Y. pestis (Palace et al. 2014), S. sanquinis 858 859 (Zhu et al. 2021), E. faecium (Zhang et al. 2017), N. meningitidis (Capel et al. 2017), P. 860 mirabilis (Armbruster et al. 2019) and E. coli (McCarthy, Stabler and Taylor 2018). However, 861 their precise role during bloodstream infection remains to be addressed.

862 Biotin metabolism. Interestingly, while most in vivo screens had not identified any biotinrelated genes necessary for infection, a recent study highlighted the difference of biotin levels 863 864 between mice and human blood. In a mouse model mimicking human biotin levels, A. 865 baumannii, K. pneumoniae and P. aeruginosa required a biotin biosynthetic pathway for infection (Carfrae et al. 2019). The role of biotin metabolism was confirmed in a screen 866 867 investigating K. pneumoniae growth in human plasma (Weber et al. 2020). These studies 868 pave the way to new antimicrobial treatments targeting biotin biosynthesis. On the other hand, a recent study suggested that biotin synthesis inactivation in *P. aeruginosa* leads to an 869 870 enhanced complement resistance (see section 'Complement inhibitors'), highlighting the 871 necessity to investigate further the role of biotin metabolism during bloodstream infection 872 (Janet-Maitre et al. 2023).

RIG

Bacterial factors mediating adaptive response to blood 873

874 Bacteria developed multiple systems for environmental sensing and adaptation. To 875 survive and replicate in the bloodstream, bacteria rely on regulatory mechanisms such as 876 two-component systems, phase variation, small regulatory RNAs, thermosensors, and the 877 stringent response. These mechanisms can promote infection by regulating factors previously 878 described in this review (Figure 8).

- 879
- 880

Two-component systems and phosphorelays

881 Two-component systems (TCSs) play an important role in sensing the environment that 882 bacteria face during the infection process. TCSs are generally composed of a sensor histidine 883 kinase (SHK) anchored to bacterial surface and a SHK activated-response regulator that acts as a transcriptional activator or repressor of target genes (Jacob-Dubuisson et al. 2018). 884 Phosphorelays are a variation of TCSs (Hoch 2000) that differ by having a more complex 885 signal transduction pathway, using additional regulator and phosphotransferase domains. As 886 887 bacteria reach the bloodstream, they sense signals to adapt rapidly to this environment by deploying mechanisms to subvert the different components of the immune response and 888 adapt their metabolism. In particular, TCSs activate expression of virulence factors important 889 890 for immune evasion and modulation of biosynthetic pathways (Supplementary Table 15).

891 **Phagocyte subversion.** TCSs allow to sense intracellular environment when bacteria 892 are phagocyted and trigger a transcriptional program to adapt to the intracellular lifestyle. For 893 example, AgrAC promotes S. aureus dissemination in a model of systemic infection by manipulation of the autophagic flux, which could be mediated by the small cytotoxic alpha-894 helical peptides phenol-soluble modulins (PSMs) (O'Keeffe et al. 2015). Interestingly, human 895 896 serum components, such as apolipoprotein B, downregulate the agr operon by sequestering 897 the auto-inducing peptide, which is the trigger of the agr quorum sensing circuit. The 898 constitutive expression of the AgrC sensor could overcome this immune response, and 899 naturally occurring mutants in agrAC selected by immune pressure could lead to hypervirulent

900 strains (James, Edwards and Wigneshweraraj 2013). Furthermore, to resist to oxidative 901 stress that occurs intra- or extracellularly, the AirSR TCS regulates staphyloxanthin 902 production, which provides antioxidant properties to *S. aureus* and promotes bacterial survival 903 in human blood (Hall *et al.* 2017). Likewise, *P. aeruginosa* superoxide response regulator of 904 the SoxRS TCS is required for resistance to killing mediated by macrophages and systemic 905 infection in a burned mouse model, suggesting protection against oxidative stress (Ha and 906 Jin 1999).

907 Another regulatory mechanism based on phosphorylation is mediated by eukaryotic-like 908 serine/threonine kinases, such as Stk1 in S. agalactiae which positively regulates expression 909 of β -haemolysin β -H/C, enhancing resistance to neutrophils and oxidative stress, and 910 possibly expression of the response regulator of the virulence TCS CovRS (see below) 911 (Rajagopal et al. 2006). One of the best characterized intracellular virulence system is the S. 912 enterica pathogenicity island-2 (SPI-2), its second T3SS. SPI-2 is subjected to a complex 913 regulation. It is primarily activated by the SsrAB TCS (originally known as SpiR/SsrB) located 914 on SPI-2 (Fass and Groisman 2009). SsrAB itself is regulated by other TCSs involved in SPI-2 expression, such as OmpR/EnvZ (Dorman *et al.* 1989; Lee, Detweiler and Falkow 2000) 915 916 and PhoPQ (Miller et al. 1989; Groisman et al. 1992; Groisman, Duprey and Choi 2021), 917 promoting infection. Interestingly, inactivation of the TCS kinase PmrA induced a 918 hypervirulent phenotype and the PmrAB TCS repressed SsrAB and SPI-2, which could be a 919 mechanism to induce bacterial persistence (Choi and Groisman 2013). PhoPQ TCS is 920 required for S. enterica virulence. It is sensing surface disturbances triggered for example by low Mg²⁺ concentration, acidic pH or AMP encountered intracellularly. PhoPQ regulates SPI-921 2, Mg²⁺ transport and MgtC-mediated acid resistance, and surface modification promoting 922 923 resistance to AMP when entering phagolysosomes (Groisman, Duprey and Choi 2021). 924 Interestingly, it was recently reported that the horizontally transferred gene ssrB regulates the 925 ancestral PhoPQ, by helping to sense acidic pH through UgtL, thereby promoting infection 926 (Choi and Groisman 2017, 2020; Groisman, Duprey and Choi 2021). Similarly to S. enterica
PhoPQ, *N. meningitidis s*erogroup C PhoPQ promotes resistance to human defensin HNP-1
and polymyxin B, bacterial survival in mouse but not human serum, and virulence in mouse
model of meningococcal infection (Johnson *et al.* 2001; Newcombe *et al.* 2004). In *N. meningitidis* serogroup B, PhoPQ orthologous TCS MisRS, is up-regulated upon exposure to
human blood (Echenique-Rivera *et al.* 2011). MisRS promotes resistance to oxidative stress,
but decreases capsule production and resistance to bactericidal activity in human serum
(Tzeng *et al.* 2008).

Envelope modification and complement subversion. TCS are widely used to regulate
 surface modification at the host-pathogen interface, reinforcing the envelope and promoting
 evasion from complement killing.

937 Capsule or extracellular polysaccharide (EPS) production is often controlled by TCSs, 938 such as S. pneumoniae ZmpRS, linking carbon metabolism, capsule production and infection 939 (Hirschmann et al. 2021a, 2021b). Other examples are A. baumannii BfmRS involved in production of capsular EPS upon bacterial exposure to low concentrations of antibiotics 940 941 (Geisinger and Isberg 2015) and ExPEC TCS Rcs which controls EPS colanic acid production 942 (Miajlovic and Smith 2014). Similar to TCS, eukaryotic-like serine/threonine kinase and 943 phosphatase Stk and Stp1 of S. suis regulate capsule thickness and virulence factors 944 promoting virulence (Liu et al. 2021). In S. pyogenes, CovRS regulates virulence factors involved in complement resistance in a strain-dependent manner (Sugareva et al. 2010). 945

LOS modification can also be regulated by TCSs. *H. influenzae* oxygen-dependent ArcAB 946 947 TCS modulates expression of *lic2B*, a gene encoding a glycosyltransferase required for 948 addition of a galactose residue to the outer core of LOS, promoting resistance to the 949 complement classical pathway in serum and bacteremia in mice (De Souza-Hart et al. 2003; Wong et al. 2011). Interestingly, using genetic screens, ArcAB was also found to be required 950 951 for bloodstream infection with S. marcescens (Anderson et al. 2017) and C. freundii 952 (Anderson et al. 2018). These studies suggest a conserved role of this TCS in bacterial 953 survival in blood. While LPS restructuration regulated by TCS such as PhoPQ or PmrAB has 954 been described in S. enterica (Groisman et al. 2021), implication of these modifications in 955 bloodstream infection remains to be established.

956 TCSs also regulate proteins involved in complement subversion. For example, P. 957 aeruginosa PhoPQ has been shown to downregulate the expression of OprH, a protein that 958 binds complement factor C3, thus subverting opsonophagocytosis and promoting bacterial 959 survival in blood and thereby infection (Qadi et al. 2017). Similarly, S. mutans VicRK TCS has 960 been linked to the regulation of PepO, a peptidase also involved in reduction of C3b 961 deposition and serum killing (Alves et al. 2017). In S. aureus, AirSR is necessary for 962 expression of proteases SspA, SspB and SspC, cleaving C3 and allowing complement and 963 phagocytosis escape (Hall et al. 2015). Lastly, S. suis WalRK TCS is involved in resistance 964 to phagocytosis and virulence in mice, possibly by regulating expression of the gene encoding 965 HP1065, a homolog of *S. pneumoniae* PspA, which plays a role in complement resistance 966 (Pei et al. 2020). Surprisingly, while Y. enterocolitica OmpR/EnvZ regulates the complement 967 resistance proteins Ail and OmpX, a strain lacking OmpR exhibits extremely high resistance to the bactericidal activity of serum. It has been proposed that OmpR could sensitize bacteria 968 to complement killing by remodeling the outer membrane, altering the function of the major 969 970 serum resistance factor YadA and the levels of the flagellar activator FlhDC (Skorek et al. 971 2013).

Coagulation. Some bacteria use TCSs to regulate factors subverting the coagulation 972 973 process. SaeRS, whose expression is upregulated upon *S. aureus* exposure to human blood 974 (Malachowa et al. 2011), has been shown to contribute to bacterial survival in human blood and virulence in an *in vivo* model (Voyich *et al.* 2009). Conversely, a recent study reported 975 976 that SaeRS regulates the coagulase Coa, a protein able to convert host prothrombin to 977 staphylothrombin, leading to activation of the protease activity of thrombin and localized 978 clotting detrimental to S. aureus survival in the bloodstream. This discrepancy has been 979 hypothesized to be due to the variability in blood samples from different donors and/or 980 differences in growth phase of bacteria inoculated (Guo et al. 2017). Another S. aureus TCS, 981 ArIRS, has been shown to be involved in the regulation of agglutination during exposure to 982 human plasma or fibrinogen and to affect the bacteremic phase of infection. This agglutination phenotype is due to the negative regulation of the giant staphylococcal surface protein
(GSSP) preventing fibrinogen binding and bacterial clumping (Walker *et al.* 2013). It was later
shown that ArIRS promotes the expression of the redox-sensitive virulence regulator MgrA,
enhancing leucocidin or capsule expression and decreasing GSSP and other surface protein
expression (Crosby *et al.* 2016, 2020).

988

989 Transcriptional regulators

990 Transcriptional regulators (TRs) control gene expression, including that of virulence 991 determinants (Balleza *et al.* 2009). Several transcriptional regulators playing a role in the 992 bacteremic phase of infection have been identified (Supplementary Table 16). Major 993 regulatory mechanisms are described below.

994 Nutritional immunity. Iron metabolism, involving iron transport and storage, is 995 generally regulated by the repressor Fur or Fur homologues upon binding ferrous iron. The role of Fur in subversion of nutritional immunity in blood was identified in N. meningitidis 996 997 (Echenique-Rivera et al. 2011) and in ExPEC (Huja et al. 2014; Ma et al. 2021). In V. 998 *vulnificus* the global regulator Lrp positively regulates expression of genes involved in iron acquisition and secretion of the MARTX cytotoxin, promoting bacterial survival in serum and 999 1000 cytotoxicity (Ho et al. 2017). In S. pneumoniae the iron-dependent transcriptional regulator IDTR regulates transcription of several genes involved in virulence and iron metabolism, and 1001 is required for full virulence in a mouse model of sepsis (Gupta et al. 2013). 1002

Similar to Fur, the manganese-cofactored MntR has been shown to be required for systemic infection. In *S. aureus*, MntR regulates manganese homeostasis through the control of MntABC transporter and MntE exporter (Grunenwald *et al.* 2019). *S. aureus* virulence also relies on the LysR-type transcriptional regulator LTTR, which controls expression of the copper detoxification transporter CopA (Groma *et al.* 2020).

1008 Interestingly, a new regulatory mechanism based on sensing amino acid content of 1009 phagocytes was recently described. *S. enterica mgtCB* operon transcription, required for Mg²⁺ 1010 transport and resistance to acidic pH of the phagolysosome, relies on the upstream proline 1011 codon-rich *mgtP* sequence, which allows translation in absence of proline-charged tRNA^{Pro}
1012 in response to proline limitation (Lee et al. 2014).

1013 Metabolism. Regulation of amino acid and nucleotide metabolism is crucial for bacterial 1014 proliferation in the bloodstream. S. aureus LTTR previously mentioned was recently shown 1015 to be required for efficient colonization in a metastatic bloodstream infection model. LTTR 1016 positively regulates amino acid biosynthesis and transport genes and decreases transcription 1017 of genes involved in nucleotide biosynthesis and PTS transport (Groma et al. 2020). 1018 Additionally, the master regulator of cysteine metabolism CymR also promotes S. aureus 1019 survival in macrophages and in a mouse model of infection, presumably by regulating genes involved in response to oxidative stress and metal ion homeostasis (Soutourina et al. 2010). 1020 1021 Furthermore, S. agalactiae MrvR, a transcription factor of the GntR family, controls the 1022 expression of genes involved in nucleotide biosynthesis and salvage pathways and is required for full virulence in a sepsis model (Dammann et al. 2021). The LysR family 1023 transcriptional regulator CpsY is important for streptococcal fitness in blood, but its regulatory 1024 1025 effect on methionine metabolism depends on the species, preventing to draw a general 1026 conclusion on its exact mode of action (Allen and Neely 2011; Le Breton et al. 2013).

ExPEC FNR, involved in adaptation to anaerobic lifestyle and controlling central 1027 1028 metabolic processes, is required for survival in blood and infection (Ma et al. 2020, 2021), highlighting the need of metabolic adaptation to survive and proliferate in the bloodstream. 1029 1030 Likewise, *N. meningitidis* HexR was identified as a repressor that can affect expression of 1031 central carbon metabolism genes in presence of glucose and required to establish bacteremia 1032 in an infant rat model (Antunes et al. 2016b). S. pyogenes RofA-like protein regulator type 3, 1033 Ralp3, a central regulator of the ERES pathogenicity island, contributes to hyaluronic acid 1034 capsule production and bacterial survival in human blood and serum. Comparative 1035 transcriptomic analysis of wild type and *ralp3* mutant strains showed differential use of carbon 1036 sources which could contribute to capsule synthesis, effects that were specific to serotypes 1037 (Siemens et al. 2012). These examples highlight the importance of tight regulation of bacterial 1038 metabolism to adapt and proliferate in the bloodstream.

1039 Capsule, LPS and surface components regulation. Surface components involved in 1040 bloodstream infection, such as LPS or capsule, which allow resistance to complement, AMP 1041 and phagocytes, are tightly controlled. For example, HyxA and HyxR are modulators of O-1042 antigen in UPEC (Phan et al. 2013) and presumably promote resistance to complement also 1043 in ExPEC (Ma et al. 2021). Another regulatory mechanism is exemplified by RfaH 1044 antiterminator that controls bacterial surface structure by regulating expression of operons 1045 that direct biosynthesis, assembly, and export of LPS core components, pili, and capsule in 1046 addition to toxins. This regulation promotes bacterial survival in blood in E. coli (McCarthy, 1047 Stabler and Taylor 2018), K. pneumoniae (Bachman et al. 2015) and V. vulnificus (Garrett et 1048 al. 2016). The latter study also highlights the role of RfaH-mediated phase variation for 1049 capsule production. UPEC MrpA and LrhA also regulate capsule production, positively and 1050 negatively, respectively, a mechanism which is conserved among different strains and 1051 capsule types (Goh et al. 2017). A combination of gradient centrifugation and TRADIS (TRADIsort) in K. pneumoniae also identified MprA as a capsule regulator (Dorman et al. 1052 2018) necessary for serum survival (Bachman et al. 2015) KbyR is another capsule regulator 1053 which also influences OMPs production and participates in K. pneumoniae resistance to 1054 serum, AMPs and phagocytic killing, thus promoting systemic infection (Xu et al. 2021). 1055

1056 Interestingly, Y. *pestis* fimbriae PsaA required for septicemic plague, is only produced at 1057 37°C and at pH 6 (Lindler, Klempner and Straley 1990). The mechanism of its regulation by 1058 the transcriptional regulator PsaE, also required for systemic infection, was recently 1059 deciphered and consists in several layers of post-transcriptional and post-translational 1060 regulation. An RNA thermosensor (see below) controls translation of both PsaE and PsaF, a 1061 histidine-rich pH sensor stable at low pH. PsaF is required to prevent PsaE degradation, 1062 which can in turn transcribe PsaA (Quinn *et al.* 2019; Li *et al.* 2021; Quinn et al. 2021).

1063 **Other virulence determinants.** Using *in vivo* induced antigen technology (IVIAT) in 1064 convalescent-phase human serum, the transcriptional regulator HlyU was identified to be one 1065 of the master regulators of *V. vulnificus* virulence. HlyU controls production of the 1066 hemolysin/cytolysin VvhA and the elastolytic protease. The identification of *hlyU* by IVIAT suggests the importance of this gene in the bloodstream phase of infection (Kim *et al.* 2003).
Recently the virulence regulator Rsp has been shown to play a role in *S. aureus* transition
from the colonizing stage to the bacteremic stage. This regulator modulates activity of the
transcriptional regulator Agr, leading to opposite effects on bacterial survival in blood and
antibiotic susceptibility (Krishna *et al.* 2018).

In *S. enterica*, expression of SPI-2 associated genes is regulated by the transcription factor SlyA of the MarR family (Libby *et al.* 1994; Linehan *et al.* 2005; Yoon *et al.* 2009; Banda *et al.* 2019), as well as IHF (HimD) and RpoE (Fass and Groisman 2009; Osborne and Coombes 2009; Yoon *et al.* 2009). SlyA also induces expression of *ssrAB*, thereby promoting virulence. Strikingly, RovA, the homologue of SlyA in *Yersinia* spp. plays a limited role in systemic infection (Dube *et al.* 2003; Cathelyn *et al.* 2006), which could be explained by the diversification of their respective regulons (Will *et al.* 2019).

1079

1080 Phase variation

1081 An additional mechanism of regulation of gene expression in bacteria is phase variation. Phase variation refers to the mechanism by which bacteria regulate the expression of certain 1082 groups of genes rapidly and in a reversible manner, either by on-off switching or by 1083 1084 modulating the expression of multiple allelic variants (Van Der Woude and Bäumler 2004). 1085 The presence of phase-variable genes allows to generate phenotypically diverse populations of variants, some of which may be better suited to either colonize certain host niches, survive 1086 1087 in a particular environment and/or evade immune responses. Genes under phase-variable 1088 control typically encode bacterial surface structures important for host adaptation such as 1089 those playing a role in bloodstream infection, e.g. adhesins, pili, capsule and LOS (Supplementary Table 17). 1090

1091 **LPS/LOS.** An example of phase variation contributing to resistance to innate immune 1092 response in the bloodstream is regulation of LOS modification by phosphorylcholine (PCho) 1093 in *H. influenzae*. PCho is acquired from the host through the *lic* operon, which is controlled 1094 by phase variation. It has been suggested that this mechanism decreases the amount of C3 1095 deposition on bacterial surface, thereby increasing survival in serum (Langereis *et al.* 2019).

In *S. enterica* serovar Typhi, the O-antigen side chain of the LPS can be modified by the activity of the glucosyltransferase *gtr* operons. The glucosylated form of the O-antigen enhances bacterial survival in human serum by decreased complement binding. Expression of the *gtrC* gene is controlled by epigenetic phase variation. It has been described that a single nucleotide deviation from an epigenetic phase variation signature sequence leads to uniform expression of the *gtr* operon in the population. (Broadbent et al. 2010).

1102 In *N. gonorrhoeae* the regulation of *lptA*, involved in phosphoethanolamine (PEA) 1103 decoration of LOS lipid A, has been proposed to be under phase variation. High-frequency 1104 mutations in a polynucleotide repeat within *lptA* can translate into a stop codon and 1105 consequently an on/off switch, influencing gonococcal resistance to cationic antimicrobial 1106 peptides (Kandler *et al.* 2014).

1107 **Capsule.** In *N. meningitidis*, the most frequent change in serogroup B strains is phase variation of the gene siaD, which encodes the sialyl transferase involved in capsule synthesis. 1108 1109 Other genes in sialic acid biosynthesis or export of the capsule can be inactivated by transposition of the insertion sequence IS1301 (Hammerschmidt et al. 1996). It has been later 1110 shown in *N. meningitidis* serogroup C that the insertion of IS1301 into the *sia/ctr* intergenic 1111 1112 region leads to upregulation of capsule expression and enhanced resistance against 1113 complement-mediated lysis. Insertion and excision of IS1301 into siaA causes phasevariation of capsule biosynthesis that most likely occurs in vivo during bacteremia (Uria et al. 1114 1115 2008).

In *S. pneumoniae* phase variation regulates capsule polysaccharide and teichoic acid production. More capsular polysaccharide and less teichoic acid translate into increased virulence. In this context, survival in the bloodstream may be promoted (Kim and Weiser 1998). Furthermore, modulation of the capsule in *S. pneumoniae* can be regulated by tandem duplications within the *cap3A* gene of the type 3 capsule locus. The transition between the off (duplication) and on (no-duplication) states depends on reversion of the duplication (Waite, Struthers and Dowson 2001). Although this phase variation mechanism has not been 1124

1123

1125 Small RNAs

1126 Small RNAs are ubiquitous regulators in the three domains of life. Bacteria employ small 1127 RNAs ranging from 50 to 500 nucleotides for posttranscriptional regulation. These sRNAs 1128 fold into diverse structures and act on gene targets with different molecular mechanisms. One 1129 of the major mechanisms of sRNA-mediated regulation in bacteria is direct binding of the 1130 sRNA via base pairing to a target mRNA. A single sRNA can play a central regulatory role in 1131 controlling multiple gene targets leading to a global regulatory effect. Regulation mediated by 1132 sRNA provides a fast mechanism for bacterial adaptation to environmental stress (Gottesman 1133 and Storz 2011) (Supplementary Table 17).

demonstrated *in vivo*, it could play a role during the bacteremic phase of infection.

- 1134 Metabolism. ArcAB TCS has been shown to downregulate expression of sRNA-17 to promote *E. coli* K1survival in blood and crossing of the blood-brain barrier. Functional 1135 analysis using a bacteremia mouse model showed that sRNA-17 deletion promotes survival 1136 1137 in the blood, possibly by increasing the expression of genes involved in amino acid transport and metabolism (Sun et al. 2020). In N. meningitidis, a tiling microarray analysis of bacteria 1138 grown in human blood allowed identification of several differential expressed sRNAs. Four 1139 1140 sRNAs promoted bacteremia when tested in an infant rat model of bacteremia. One sRNA designated Bns1 is linked to a GntR-like regulator and belongs to a network that responds to 1141 carbon source availability and energy metabolism important for blood survival (Fagnocchi et 1142 1143 al. 2015). In S. pneumoniae, the F41 sRNA promotes survival in blood in a sepsis infection 1144 model, which could be due to the regulation of a putative ABC transporter involved in 1145 carbohydrate transport.
- 1146 **Capsule and surface components.** *S. pyogenes* Mga-activating regulatory sRNA 1147 (MarS) positively regulates capsule production and the multiple virulence gene regulator *mga*, 1148 controlling expression of the *emm* gene encoding the antiphagocytic protein M. Deletion of 1149 this small RNA has been shown to decrease bacterial survival in human blood that could be 1150 related to the lack of M protein and susceptibility to neutrophil clearance. Additionally, the

marS mutant had reduced virulence in a mouse infection model. This sRNA is conserved in
many streptococci and could be a mechanism of gene regulation shared by different *Streptococcus* species (Pappesch *et al.* 2017).

Coagulation. *S. pyogenes* FasX sRNA negatively regulates the expression of pili and positively regulates the thrombolytic agent streptokinase, in a serotype dependent manner. Inactivation of FasX increases expression of pili and decreases expression of streptokinase that catalyzes activation of human plasminogen into plasmin which can process several enzymes to degrade blood clots and activate metalloproteinases and collagenases. FasX promotes virulence in a bacteremia model of mice expressing human plasminogen (Danger *et al.* 2015).

1161

1162 Thermosensors

1163 Thermosensors include bacterial DNA, RNA and proteins that can control gene 1164 expression in response to changes in environmental temperature. Some RNA thermometers 1165 (RNATs), which consist of RNA loops blocking access to the ribosome at low temperature 1166 (Loh *et al.* 2018), have been shown to control gene expression of bacteria during the 1167 bacteremic phase of infection (Supplementary Table 17).

1168 *N. meningitidis* regulates expression of the capsule gene *cssA*, the LPS sialylation gene 1169 *Ist* and *fHbp* by RNATs. These three factors are important for evasion of immune killing and contribute to proliferation in the bloodstream (Loh et al. 2013). A recent report based on 1170 1171 comparative analysis of the promoter regions of *fHbp* suggests that only some *fHbp* alleles 1172 undergo thermoregulation and that the levels of expression of fHbp may be regulated by 1173 variation in the coding sequence of the open reading frame (Spinsanti et al. 2021). Other 1174 RNATs regulate expression of capsule and factor H binding proteins in S. pneumoniae and 1175 H. influenzae (Eichner et al. 2021), thereby modulating resistance to complement.

1176 Another well-known thermo-regulated virulence factor is the T3SS of pathogenic *Yersinia* 1177 species whose expression is induced at 37°C. It has been shown that the main T3SS 1178 regulator LcrF is under the combined regulation of an RNAT in the 5' untranslated region (UTR) and of the thermolabile regulator YmoA (Böhme *et al.* 2012). LcrF is upregulated upon *Y. pseudotuberculosis* incubation in human plasma (Rosso *et al.* 2008), but the effect of the
RNAT was only assessed in an intestinal infection model and would require further
investigation in a systemic infection model. The transcriptional regulator PsaE, regulating the
production of the *Y. pestis* PsaA fimbriae mentioned above, is also under control of an RNAT
(Quinn *et al.* 2019; Li *et al.* 2021).

- 1185 S. enterica TviA regulator is also under the control of an RNAT located in its 5' UTR. TviA
- 1186 regulates virulence factors such as the Vi capsule, and its RNAT is required for innate immune

1187 evasion (Brewer *et al.* 2021).

1188 While the first thermosensors were described 20 years ago and other reports identified 1189 important virulence factors under control of RNATs, further studies are needed to gain a better 1190 understanding of RNATs implication during bloodstream infection.

1191

1192 Stringent response

Blood is a harsh environment challenging bacterial survival and triggering the stringent response (SR) (Supplementary Table 17). Stringent response is defined by global changes in bacterial gene expression associated with nutritional deprivation. The SR is triggered by intracellular accumulation of two small, hyperphosphorylated GTP-/GDP-derived molecules, namely, pppGpp and ppGpp, collectively designated (p)ppGpp or alarmones (Irving et al. 2020).

SR-regulated surface structures. SR is generally mediated by (p)ppGpp synthetase RelA and (p)ppGpp synthetase/hydrolase SpoT. Deletion of *relA* and *spoT* in *S. enterica* serovar Typhi induces a (p)ppGpp₀ phenotype, and affects Vi capsule expression, resistance to complement and survival in macrophages (Dasgupta *et al.* 2019). More recently, SpoT and the nucleotide hydrolase PpnN target of SR were shown to change the structure of *S. enterica* **O-**antigen and contribute to resistance to complement and survival in human serum (Chau *et al.* 2021).

1206

In *E. coli* K1, expression of the (p)ppGpp activated sigma factor RpoE is significantly

increased in the bloodstream and inactivation of this stress sigma factor leads to lower level
of bacteremia in a mouse model of infection. RpoE directly regulates expression of some
virulence genes such as *ompA*, *cnf1*, *fimB*, *ibeA*, and the capsule genes *kpsM*, and *kpsF*.
Also, RpoE indirectly modulates some virulence genes such as *fimA*, *aslA*, and *traJ* (Fan *et al.* 2022). This example shows the broad impact of SR on regulation of virulence during
bacteremia.

1213 Metabolic requirements for the SR. The study of methicillin-resistant S. aureus 1214 (MRSA) strains causing persistent or resolving bacteremia revealed a connection between 1215 purine biosynthesis pathways and SR. MRSA strains causing persistent bacteremia had 1216 significantly higher (p)ppGpp production, showed increased survival and induced higher lysis of neutrophils, and expressed higher levels of phenol-soluble modulins Psma1-4. A purF 1217 deletion mutant produced less GDP, GTP and consequently less (p)ppGpp, linking the purine 1218 biosynthesis pathway to SR. Additionally, a mutant of *relP* encoding another alarmone 1219 1220 synthetase exhibits decreased Psm α 1–4 and Psm β 1,2 expression, reduced neutrophil lysis and decreased MRSA survival in neutrophils. Importantly, the relP gene has been 1221 1222 demonstrated to be necessary to overcome antibiotic treatment in persistent MRSA 1223 bacteremia isolates (Li et al. 2020).

1224 These examples highlight the connection between SR and bacterial survival in blood and 1225 the complexity of this adaptative mechanism. Recently, the importance of *A. baumannii* SpoT 1226 during infection was uncovered by a proteomic analysis comparing bacterial infection of 1227 macrophages in absence of presence of polymyxin B. This type of study emphasizes the 1228 importance of deciphering the complex tripartite interactions between bacteria, their host, and 1229 antibiotics to optimize the use of antimicrobials and develop innovative therapies against 1230 multidrug-resistant pathogenic microorganisms (Kho *et al.* 2022).

1231 Conclusion

1232 Bacterial infection of the bloodstream is a serious threat that has become an important 1233 global health issue in the context of antibiotic resistance. Characterization of mechanisms 1234 involved in bacterial survival and proliferation in blood could help to develop alternative 1235 therapeutic strategies. The genomic revolution has enabled us to explore these mechanisms 1236 on a large scale, first with sequencing of bacterial genomes and later with functional 1237 approaches based on transcriptomics, proteomics and transposon mutagenesis. Application 1238 of functional genomics resulted in identification of a wealth of bacterial factors important for 1239 survival in blood. In addition, combination of high-throughput approaches with relevant ex vivo and in vivo experimental models led to a more comprehensive understanding of the 1240 1241 bacteremic phase of infectious diseases.

1242 An overview of research investigating pathogenesis of a broad-range of blood-borne pathogenic bacteria highlights a striking conservation of host defense subversion 1243 mechanisms, e.g. by targeting components of the complement pathways. Yet, other 1244 1245 mechanisms have been evolved specifically by specific species and even by specific strains elucidating unique pathogenic properties of some clinical isolates. Bloodstream being a highly 1246 complex and dynamic environment, the multiple regulatory mechanisms evolved by 1247 1248 pathogenic bacteria to evade host immunity and adapt to nutritional restrictions are 1249 expectedly extremely complex systems whose activation signals and crosstalks remain to be 1250 fully deciphered. Resistance to antibiotic treatment leading to development of subpopulations of bacteria, such as evaders and persisters, adds another layer of complexity in the study of 1251 host-pathogen interactions in bloodstream infections. 1252

Remarkable progress has been made in recent years toward an unprecedented meticulous characterization of infection biology due to convergence of technologies such as single-cell transcriptomics, dual proteomics, live cell imaging, tissue bioengineering, genome editing and machine learning. Application of these innovative technologies to the study of bloodstream infection will empower us to understand and predict highly complex hostpathogen interactions, and ultimately help design next-generation diagnostics, vaccines anddrugs in our post-antibiotic era.

1260

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2363 Figure 1. The complement pathways. The classical pathway (CP) and lectin pathway 2364 (LP) are activated by binding to immunoglobulins and carbohydrate patterns, respectively 2365 (Ia). The alternative pathway (AP) is activated by the soluble C3 convertase C3H₂OBb (Ib) or serves as amplification loop for the three pathways. The downstream cascades both 2366 2367 lead to the formation of C3 convertases, converting C3 in C3a and C3b: C4b2b for the CP and LP (IIa) and C3bBb for the AP (IIb). Enrichment in C3b leads to the formation of C5 2368 convertases, converting C5 in C5a and C5b. C4b2b3b for the CP and LP (IIIa) and 2369 C3bBb3b for the AP (IIIb). C5b deposition activates the terminal pathway (TP) consisting 2370 2371 in C6-C9 recruitment and membrane attack complex formation (IV). Abbreviations:C1-INH: C1-inhibitor. C3aR: C3a receptor. C4BP: C4-binding protein. C5aR: C5a receptor. 2372 COMP: cartilage oligomeric matrix protein. CR1: complement receptor 1. fB: factor B. fD: 2373 factor D. fH: factor H. fl: factor I. fP: factor P (properdin). IgG: immunoglobulin G. MAC: 2374 2375 membrane attack complex. MASP: mannose-binding lectin-associated protease. 2376 MBL:mannose-binding lectin.

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Figure 2.

2380 Figure 2. Examples of bacterial factors (green) targeting common components of the complement pathways (red). Factors involved in host subversion are displayed at the 2381 2382 foreground. Bacterial species: Ab: Acinetobacter baumannii. Ba: Bacillus anthracis. Nm: 2383 Neisseria meningitidis. Pa: Pseudomonas aeruginosa. Pg: Porphyromonas gingivalis. Sa: 2384 Staphylococcus aureus. Str. Streptococcus species. Abbreviations: C3aR: C3a receptor. C5aR: C5a receptor. CR1: complement receptor 1. EPS: exopolysaccharide. fH: factor H. 2385 fl: factor I. LPS: lipopolysaccharide. PLG: plasminogen. 2386

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2390 Figure 3. Examples of bacterial factors (green) targeting host components (red) of the 2391 classical and lectin pathways. Factors involved in host subversion are displayed at the 2392 foreground. Bacterial species: Bb: Borrelia burgdorferi. Bp: Bordetella pertussis. Ec: 2393 Escherichia coli. Nm: Neisseria meningitidis. Pa: Pseudomonas aeruginosa. Sa: 2394 Abbreviations: C4-binding protein. Staphylococcus aureus. C4BP: EPS: 2395 exopolysaccharide. immunoglobulin G. LOS: lipooligosaccharide. LPS: lgG: 2396 lipopolysaccharide. MASP: mannose-binding lectin-associated protease. MBL: 2397 mannose-binding lectin. OMV: outer membrane vesicle.

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Figure 4. Examples of bacterial factors (green) targeting host components (red) of the alternative pathway. Factors involved in host subversion are displayed at the foreground. Bacterial species: *Nm*: Neisseria *meningitidis*. *Sa*: *Staphylococcus aureus*. *Sal: Salmonella* species. *Str: Streptococcus* species. Abbreviations: fB: factor B. fD: factor D. fH: factor H. fP: factor P (properdin). MASP: mannose-binding lectin-associated protease. MBL: mannose-binding lectin. PLG: plasminogen.

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Figure 5. Examples of bacterial factors (green) targeting host components (red) of the terminal pathway. Factors involved in host subversion are displayed at the foreground. Bacterial species: *Bb*: Borrelia *burgdorferi*. *Bg*: *Borrelia garinii*. *Ec*: *Escherichia coli*. *Mc*: *Moraxella catarrhalis*. *Pa*: *Pseudomonas aeruginosa*. *Str*: *Streptococcus* species. Abbreviations: COMP: cartilage oligomeric matrix protein. LPS: lipopolysaccharide. MAC: membrane attack complex.



2419 Figure 6. Examples of bacterial factors (green) subverting host cell defenses in the 2420 blood. Bacterial species: Ba: Bacillus anthracis. Ec: Escherichia coli. Efcs: Enterococcus faecalis. Nm: Neisseria meningitidis. Pa: Pseudomonas aeruginosa. Sag: Streptococcus 2421 2422 agalactiae. Sau: Staphylococcus aureus. Se: Salmonella enterica. Sm: Streptococcus mutans. Spn: Streptococcus pneumoniae. Spyo: Streptococcus pyogenes. Ss: 2423 2424 Streptococcus suis. Yp: Yersinia pestis. Abbreviations: Ad: adenosine. AMP: antimicrobial peptide. Car: carotenoid. CC: complement components. CR1: complement receptor 1. 2425 2426 Fg: fibrinogen. Fn: fibronectin. Glu: glutamate. GSH: glutathione. IgG: immunoglobulin G. 2427 NET: neutrophil extracellular trap. RNS: reactive nitrogen species. ROS: reactive oxygen 2428 species. Sia: sialic acid. T3SS: type 3 secretion system.

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Figure 7. Examples of bacterial factors subverting nutritional immunity in the blood.
Bacterial species: Sau: Staphylococcus aureus. Yp: Yersinia pestis. Metals: Ca: calcium.
Cu: copper. Fe: iron. Mg: magnesium. Mn: manganese. Na: sodium. Ni: nickel. Zn: zinc.
Abbreviations: CM: cytoplasmic membrane. Hb: hemoglobin. IM: inner membrane. OM:
outer membrane. PG: peptidoglycan. Tf: transferrin.

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Figure 8. Examples of bacterial regulatory mechanisms involved in adaptation and 2440 2441 survival in blood. Regulators are in purple, secondary factors helping in regulation are in blue and bacterial effectors are in green. Bacterial species: Ec: Escherichia coli. Hi: 2442 Haemophilus influenzae. Nm: Neisseria meningitidis. Pa: Pseudomonas aeruginosa. 2443 2444 Sag: Streptococcus agalactiae. Sau: Staphylococcus aureus. Se: Salmonella enterica. Spyo: Streptococcus pyogenes. Yp: Yersinia pestis. Abbreviations: AIP: auto-inducing 2445 peptide, AMP: antimicrobial peptide. Fe: iron. Fg: fibrinogen. Glc: glucose. His: histidine. 2446 2447 LOS: lipooligosaccharide. Mn: manganese. P: phosphate. PLG: plasminogen. RNAT: 2448 RNA thermometer. STX: staphyloxantin.

2450 **Box 1. The complement system**

The complement cascade can be activated by three different pathways upon bloodstream infection: the classical pathway (CP), the lectin pathway (LP) and the alternative pathway (AP). The three pathways lead to cleavage of C3 and C5 components and activation of the terminal pathway (TP) (Figure <u>1</u>).

2455 The CP is activated by binding of the C1 complex, composed of the scaffold of C1q 2456 subunits and the C1s and C1r proteases, to immunoglobulins (Ig) bound to a bacterial antigen 2457 or alternatively by binding of C1 to the C-reactive protein (CRP), recognizing phosphocholine 2458 on bacterial surfaces. The LP is activated by mannose-binding lectin (MBL) and ficolins, 2459 complexed with mannose-binding lectin-associated proteases 1 and 2 (MASP-1 and MASP-2460 2), and bound to specific target carbohydrates on bacterial surfaces (Figure 1.Ia). Both 2461 complexes recruit and cleave C4 then C2 components into C4a, C4b, C2a and C2b components, forming the C3 convertase C4b2b (formerly known as C4b2a). C4b2b cleaves 2462 2463 C3 in C3a and C3b (Figure 1.IIa), when C4b is not degraded by the coordinated action of C4b-binding protein (C4BP) and the factor I protease (fl). The AP is first activated by 2464 deposition of C3b and factor B (fB) on bacterial surface. The deposited C3b is a product of 2465 the soluble C3 convertase, composed of C3 bound to H_2O and factor B (Figure <u>1</u>.lb), or of C3 2466 convertases from the other pathways, the AP also serving as an amplification loop. C3b 2467 bound to factor B and stabilized by properdin (factor P, fP) forms a C3 convertase, C3bBb (or 2468 2469 C3bBbP) (Figure 1 IIb). Factor I can cleave C3b in inactive C3b (iC3b), an opsonin binding to 2470 complement receptor 3 (CR3). It was recently shown that MASP-3 is the activator of factor D 2471 (fD), linking the LP to the AP (Hayashi et al. 2019). FD in turn activates the AP by cleaving 2472 factor B, generating C3(H₂O)Bb and C3bBb. Factor H (fH) and factor I prevent activation of the AP. 2473

2474 C3 convertases cleave C3 in C3a and C3b. C3a is a multifunctional peptide required for 2475 chemotaxis, which binds to C3a receptor (C3aR), and activates immune cells. C3b is an 2476 opsonin that binds to complement receptor 1 (CR1) and is essential for the propagation of 2477 the complement cascade. C3b binds to all C3 convertases, forming C5 convertases C4b2b3b 2478 (CP/LP) (Figure 1.IIIa) and C3bBb3b (AP) (Figure 1.IIIb), which cleave C5 in C5a and C5b. 2479 C5a is a chemoattractant for immune cells. Upon binding to the bacterial surface, C5b triggers 2480 the TP. C5b deposition recruits C6, C7, C8 and C9 that insert and polymerize in the bacterial 2481 membrane, forming the membrane-attack complex (MAC), a pore forming complex resulting 2482 in bacterial lysis (Figure 1.IV). MAC assembly can be negatively regulated by heparin-binding 2483 vitronectin, clusterin, CD59 or the cartilage oligomeric matrix protein (COMP). For 2484 comprehensive views of the structure, function and dynamics of the complement system, the 2485 reader is referred to previous reviews (Walport 2001; Ricklin et al. 2010; Schatz-Jakobsen et 2486 al. 2016; Mastellos et al., 2023). 2487 2488 2489 MA 2490 RICIT

2492 Box 2. Transposon-based mutational screens

Transposon-based mutational screen approaches rely on mutant libraries generated by random transposition in the genome. These pooled libraries can then be used to screen mutants for various phenotypes such as resistance to serum or survival in blood, by measuring the differences in mutant abundance between the input and the output. Several techniques have been developed over the years:

- STM: The first signature-tagged mutagenesis (STM) was developed in 1995. It consisted of unique nucleotidic tags inserted in the transposon. Depletion of specific mutants in a pool was revealed by hybridization arrays (Hensel *et al.* 1995).
- TraSH: To circumvent the small size of pools in STM, another technique called
 transposon site hybridization (TraSH) was developed. It is based on genomic DNA
 hybridization on microarray (Sassetti et al. 2001).
- TIS: Higher throughput is now achieved by next-generation sequencing (NGS), which
 opened new possibilities in transposon screening and led to the development of
 transposon insertion sequencing (TIS) falling into four different methods: transposon
 sequencing (Tn-seq), transposon-directed insertion sequencing (TraDIS), insertion
 sequencing (INSeq) and high-throughput insertion tracking by deep sequencing
 (HITS) (Cain *et al.* 2020).

2510 These screens have been widely used to discover new factors involved in bacteremia of 2511 the most clinically relevant bacteria such as S. aureus (Mei et al. 1997; Coulter et al. 1998; 2512 Benton et al. 2004; Christiansen et al. 2014; Valentino et al. 2014; Oogai et al. 2016; Groma et al. 2020) or E. coli (Phan et al. 2013; Subashchandrabose et al. 2013; McCarthy et al. 2513 2018; Ma et al. 2021) as well as other bacteria associated with bloodstream infection such as 2514 2515 A. baumannii (Subashchandrabose et al. 2016; Sanchez-Larrayoz et al. 2017), Citrobacter 2516 freundii (Anderson et al. 2018), E. faecium (Zhang et al. 2017), H. influenzae (Langereis and Weiser 2014), K. pneumoniae (Short et al. 2020; Holmes et al. 2022), Leptospira interrogans 2517 2518 (Lourdault et al. 2016), N. meningitidis (Sun et al. 2000; Geoffroy et al. 2003; Mendum et al.

2519 2011; Capel et al. 2017), Pasteurella multocida (Fuller et al. 2000), Proteus mirabilis 2520 (Armbruster et al. 2019), P. aeruginosa (Janet-Maitre et al. 2023), S. enterica (Hensel et al. 2521 1995; Chaudhuri et al. 2009), S. marcescens (Anderson et al. 2017), S. agalactiae (Hooven 2522 et al. 2018; Zhu et al. 2020; Dammann et al. 2021), Streptococcus equi (Charbonneau et al. 2523 2020), S. pneumoniae (Polissi et al. 1998; Mann et al. 2012), S. pyogenes (Le Breton et al. 2524 2013; van Hensbergen et al. 2018), S. suis (Arenas et al. 2020), Y. pestis (Palace et al. 2014) 2525 or Y. pseudotuberculosis (Crimmins et al. 2012). Additionally, a genetic screen using a library 2526 of K. pneumoniae transposon mutant recently identified factors required for bacterial survival 2527 in human serum (Weber et al. 2020). The mode of action of most of these factors remains to 2528 be deciphered.

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