



## 22 Abstract

23 Immune networks that control antimicrobial and inflammatory mechanisms have overlapping regulation  
24 and functions to ensure effective host responses. Genetic interaction studies of immune pathways that  
25 compare host responses in single and combined knockout backgrounds are a useful tool to identify new  
26 mechanisms of immune control during infection. For disease caused by pulmonary *Mycobacterium*  
27 *tuberculosis* infections, which currently lacks an effective vaccine, understanding genetic interactions  
28 between protective immune pathways may identify new therapeutic targets or disease-associated genes.  
29 Previous studies suggested a direct link between the activation of NLRP3-Caspase1 inflammasome and  
30 the NADPH-dependent phagocyte oxidase complex during Mtb infection. Loss of the phagocyte oxidase  
31 complex alone resulted in increased activation of Caspase1 and IL1 $\beta$  production during Mtb infection,  
32 resulting in failed disease tolerance during the chronic stages of disease. To better understand this  
33 interaction, we generated mice lacking both *Cybb*, a key subunit of the phagocyte oxidase, and  
34 *Caspase1/11*. We found that *ex vivo* Mtb infection of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages resulted in the  
35 expected loss of IL1 $\beta$  secretion but an unexpected change in other inflammatory cytokines and bacterial  
36 control. Mtb infected *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice rapidly progressed to severe TB, succumbing within four  
37 weeks to disease characterized by high bacterial burden, increased inflammatory cytokines, and the  
38 recruitment of granulocytes that associated with Mtb in the lungs. These results uncover a key genetic  
39 interaction between the phagocyte oxidase complex and Caspase1/11 that controls protection against TB  
40 and highlight the need for a better understanding of the regulation of fundamental immune networks  
41 during Mtb infection.

42

## 43 **Introduction**

44 Defense against infection requires the regulated activation of immune networks that determine the  
45 magnitude and duration of the host response (1, 2). Dysregulation of these immune networks contributes  
46 to increased susceptibility to infection and reduced disease tolerance (3-5). During lung infections with  
47 *Mycobacterium tuberculosis*, pro-inflammatory responses mediated by cytokines such as interleukin  
48 1-beta (IL1 $\beta$ ), tumor necrosis factor (TNF) and interferon-gamma (IFN $\gamma$ ) must be strong enough to  
49 restrict infection, while maintaining respiratory function and controlling tissue damage (5-9). This balance  
50 is controlled by the tight regulation of cytokine and chemokine secretion to effectively direct the  
51 inflammatory process and immune cell recruitment (10, 11). Disruption of this balance contributes to  
52 progressive inflammatory tuberculosis (TB) disease which results in over 1.5 million deaths each year  
53 (12). Understanding the factors contributing to protection or susceptibility during Mtb infection is  
54 essential to devise more effective therapies and immunization strategies.

55 TB susceptibility is controlled by a combination of bacterial, host and environmental factors (13,  
56 14). Many defined protective host genes comprise the mendelian susceptibility to mycobacterial diseases  
57 (MSMD) (15). Patients with these conditions have loss-of-function alleles in genes that are essential for  
58 protective host responses such as IFN $\gamma$  signaling. Additional genes related to autophagy, reactive oxygen  
59 and nitrogen species (ROS/RNS) production, and cytokine production are also protective in the mouse  
60 model of Mtb (16-19). However, while many genes are now identified as protective against Mtb, the  
61 precise mechanisms by which they control disease remains unclear.

62 One such protective mechanism is the ROS produced by the NADPH Phagocyte Oxidase (20). In  
63 humans, Chronic Granulomatous Disease (CGD) in patients with dysfunctional phagocyte oxidase  
64 complexes is associated with increased susceptibility to mycobacterial infections (21). Mice deficient in  
65 the phagocyte oxidase subunit *Cybb* control Mtb replication yet show defects in disease tolerance that  
66 result in a modest reduction in survival following high dose Mtb infection (18, 22-24). The loss of *Cybb*  
67 results in the hyperactivation of the NLRP3 inflammasome and exacerbated IL1 $\beta$  production by bone

68 marrow-derived macrophages (BMDMs) and *in vivo* during murine Mtb infection (18). This exacerbated  
69 IL1 $\beta$  can be reversed in BMDMs with chemical inhibitors of NLRP3 or Caspase1. Caspase1 is a critical  
70 component of the NLRP3 inflammasome and is responsible for the activation of mature IL1 $\beta$ , IL18, and  
71 Gasdermin D (25, 26). However, while Mtb infection of Caspase1-deficient macrophages results in loss  
72 of mature IL1 $\beta$  production, mice lacking Caspase1/11 have no defects in IL1 $\beta$  and minimal changes in  
73 susceptibility to TB *in vivo* (27, 28). Even though previous studies found clear links between phagocyte  
74 oxidase and the NLRP3 inflammasome that contribute to protection during Mtb infection, how these  
75 pathways interact and regulate each other's function remains unclear.

76 Here, we used a genetic approach to understand interactions between the phagocyte oxidase and  
77 the inflammasome by generating *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> animals. Mtb infection of macrophages and  
78 dendritic cells from these animals reversed the exacerbated IL1 $\beta$  production that was responsible for  
79 failed tolerance in *Cybb*<sup>-/-</sup> cells. However, we found dysregulation of other pro-inflammatory mediators  
80 and reduced bacterial control during infection of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> BMDMs. *In vivo*, we uncovered a  
81 synthetic susceptibility with *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> animals succumbing rapidly to TB disease within 4  
82 weeks. We observed the loss of bacterial control and the recruitment of permissive granulocytes in *Cybb*<sup>-/-</sup>  
83 *Caspase1/11*<sup>-/-</sup> that were not seen in wild type, *Cybb*<sup>-/-</sup> or *Caspase1/11*<sup>-/-</sup> animals. Thus, our results  
84 uncovered a previously unknown genetic interaction between the phagocyte oxidase and the Caspase1  
85 inflammasome that contributes to TB protection. Furthermore, our results highlight the complexity of the  
86 interactions between immune networks that control Mtb susceptibility and the importance of the  
87 regulation of inflammatory cytokines in the lung environment.

88

## 89 Results

### 90 **Loss of Caspase 1/11 results in decreased IL1 $\beta$ production in *Cybb*<sup>-/-</sup> phagocytes**

91 Macrophages deficient in the phagocyte oxidase subunit *Cybb* hyperactivate the NLRP3 inflammasome  
92 and produce damaging levels of IL1 $\beta$  during Mtb infection (18). We developed a genetic model to  
93 understand the interaction between these genes by generating mice deficient in both *Cybb* and  
94 *Caspase1/11* in the C57BL6/J background. We first examined the regulation of IL1 $\beta$  during Mtb  
95 infection in cells lacking *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup>. Bone marrow-derived macrophages (BMDMs) from wild  
96 type, *Cybb*<sup>-/-</sup>, *Caspase1/11*<sup>-/-</sup>, and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice were infected with Mtb H37Rv. 14 hours  
97 later, the supernatants were removed from infected and uninfected control cells and the levels of IL1 $\beta$   
98 were quantified by ELISA. As previously shown, Mtb infected *Cybb*<sup>-/-</sup> phagocytes secreted significantly  
99 more IL1 $\beta$  compared to wild type cells while *Caspase1/11*<sup>-/-</sup> cells released nearly undetectable levels of  
100 IL1 $\beta$  (Figure 1A) (18). Loss of Caspase1/11 in combination with *Cybb* resulted in no IL1 $\beta$  release,  
101 similar to what was observed in *Caspase1/11*<sup>-/-</sup> macrophages. The experiment was repeated using bone  
102 marrow-derived dendritic cells (BMDCs) and the results were consistent with BMDMs. *Cybb*<sup>-/-</sup> cells  
103 produce high levels of IL1 $\beta$  which is reversed in the absence of Caspase1/11 (Figure 1B). These data  
104 show that loss of Caspase1/11 reverses the elevated IL1 $\beta$  production observed in *Cybb*<sup>-/-</sup> deficient  
105 phagocytes infected with Mtb.

106

### 107 ***Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> BMDMs dysregulate cytokines and Mtb control during infection.**

108 Both the ROS produced by the phagocyte oxidase and the immune pathways regulated by the  
109 inflammasome can modulate the inflammatory state of macrophages (29, 30). To better understand how  
110 the functions of *Cybb* and *Caspase1/11* interact to regulate inflammation, we infected BMDMs from each  
111 genotype with Mtb and we quantified cell death and cytokine release via multiplex cytokine analysis.  
112 Over the 14-hour infection, we observed no significant differences in cell death between any genotype

113 (Figure 2A). Similar to the ELISA above, we observed increased IL1 $\beta$  production by *Cybb*<sup>-/-</sup> macrophages  
114 which was reversed in macrophages from *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice (Figure 2B). While IL1 $\alpha$  production  
115 was also increased by *Cybb*<sup>-/-</sup> cells, this was not reversed and was, in contrast to IL1 $\beta$ , exacerbated in  
116 *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages. The increased IL1 $\alpha$  production was not due to loss of Caspase1/11  
117 alone, since *Caspase1/11*<sup>-/-</sup> BMDMs produced nearly undetectable levels of IL1 $\alpha$  following Mtb  
118 infection. Thus, IL1 $\alpha$  production by BMDMs is exacerbated in the absence of both *Cybb* and  
119 *Caspase1/11*.

120 The multiplex cytokine panel included a range of other inflammatory cytokines that were  
121 compared between each macrophage genotype (Figure 2C). Most cytokines, including TNF, RANTES  
122 and CXCL1 showed no significant difference between any of the genotypes. Most cytokines, including  
123 TNF, RANTES and CXCL1 showed no significant difference between any of the genotypes. However,  
124 IL6 and IL10 production were both significantly increased by *Cybb*<sup>-/-</sup> BMDMs which was further  
125 exacerbated by *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> cells. Finally, CXCL2 was significantly increased only in *Cybb*<sup>-/-</sup>  
126 *Caspase1/11*<sup>-/-</sup> macrophages. Taken together, *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages dysregulate a range of  
127 inflammatory cytokines in response to Mtb infection.

128 Since the inflammatory milieu was altered during infection of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> BMDMs, we  
129 next tested if intracellular control of Mtb growth was compromised. BMDMs from each genotype were  
130 infected with Mtb and growth was monitored using a CFU assay. We observed no significant difference  
131 between genotypes in bacterial uptake 4 hours following infection (Figure 2D). 5 days later we observed  
132 no change in bacterial control in *Cybb*<sup>-/-</sup> or *Caspase1/11*<sup>-/-</sup> BMDMs but found significantly more Mtb  
133 growth in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> BMDMs. These data suggest that the loss of *Cybb* and *Caspase1/11*  
134 together does not compromise cell survival but does result in less effective Mtb control and dysregulated  
135 cytokine production that does not occur in either knockout mouse genotype alone.

136

137 **Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup> mice are hyper-susceptible to Mtb infection**

138 Our experiments in BMDMs showed that the loss of *Cybb* and *Caspase1/11* together results in  
139 dysregulated host responses during Mtb infection. We hypothesized that this dysregulation would result  
140 in changes to *in vivo* TB disease progression. To test this hypothesis, wild type, *Cybb<sup>-/-</sup>*, *Caspase1/11<sup>-/-</sup>*,  
141 and *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice were infected with Mtb by low dose aerosol. As mice were monitored  
142 during the infection, we observed dramatic weight loss of *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* animals that required  
143 almost all animals to be euthanized prior to 30 days post-infection (Figure 3A). In contrast, all other  
144 genotypes had gained weight over the same time of infection. Survival analysis during these infections  
145 found that *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice are highly susceptible to Mtb infection, with all animals requiring  
146 euthanasia earlier than 5 weeks post infection (Figure 3B). In contrast, wild type, *Cybb<sup>-/-</sup>* and  
147 *Caspase1/11<sup>-/-</sup>* animals all survived beyond day 75 similar to previous studies (18, 27, 28). This  
148 observation suggests a strong genetic interaction between *Cybb* and *Caspase1/11* that results in the  
149 synthetic hyper-susceptibility of animals to *Mtb* infection.

150

151 **Mtb infection of *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice results in increased bacterial growth and inflammatory**  
152 **cytokine production.**

153 We next sought to determine the mechanisms driving the susceptibility of *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* animals.  
154 Wild type, *Cybb<sup>-/-</sup>*, *Caspase1/11<sup>-/-</sup>*, and *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice were infected with H37Rv YFP by low  
155 dose aerosol, and 25 days later, viable Mtb in the lungs and spleen were quantified by CFU plating (31).  
156 We observed similar numbers of Mtb in wild type, *Cybb<sup>-/-</sup>*, and *Caspase1/11<sup>-/-</sup>* animals in both organs and  
157 in line with previous reports (18, 27, 28). In contrast, over 10-fold more Mtb were present in the lungs  
158 and ~5-fold more Mtb were present in the spleens of infected *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice (Figure 4A and  
159 4B). We further characterized the cytokine profile from infected lung homogenates using a Luminex  
160 multiplex assay. We found that *Cybb<sup>-/-</sup>Caspase1/11<sup>-/-</sup>* mice express high levels of inflammatory cytokines

161 including IL1 $\alpha$ , IL1 $\beta$ , TNF, and IL6 but not IL10 (Figure 4C). We observed no significant differences  
162 between *Caspase1/11*<sup>-/-</sup> and wild type mice, while in *Cybb*<sup>-/-</sup> mice we found increased levels of IL1 $\beta$  but  
163 no other cytokines in line with previous studies (18, 27, 28). Thus, mice deficient in both *Cybb* and  
164 *Caspase 1/11* are unable to effectively control Mtb replication and display hyperinflammatory cytokine  
165 responses.

166

167 **Permissive granulocytes are recruited to the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice during Mtb**  
168 **infection.**

169 The extreme susceptibility and increased Mtb growth observed in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice is  
170 similar to mice lacking *IFN $\gamma$*  or *Nos2* (7, 31-33). Recent work showed that the susceptibility of *Nos2*<sup>-/-</sup>  
171 animals is driven by dysregulated inflammation that recruits permissive granulocytes to the lungs which  
172 then allow for amplified Mtb replication (33, 34). We hypothesized that similar responses may be  
173 associated with the susceptibility of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice during Mtb infection. To test this  
174 hypothesis, we first analyzed the myeloid-derived populations of cells in the lungs and spleen of wild  
175 type, *Caspase1/11*<sup>-/-</sup> *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> animals infected with Mtb H37Rv YFP by low dose  
176 aerosol for 25 days. While wild type and *Caspase1/11*<sup>-/-</sup> animals showed indistinguishable distributions of  
177 cells, *Cybb*<sup>-/-</sup> mice recruited more GR1<sup>hi</sup> CD11b<sup>+</sup> neutrophils in agreement with our previous findings  
178 (Figure 5A and 5B) (18). However, we observed a significant increase in the total number of GR1<sup>int</sup>  
179 CD11b<sup>+</sup> cells in the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice. This population is consistent with the permissive  
180 myeloid cells seen in mice that are highly susceptible to Mtb infection (33, 34).

181 If the recruited GR1<sup>int</sup> CD11b<sup>+</sup> granulocytes in the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice are  
182 permissive for Mtb growth, we predicted these cells would harbor a disproportionate fraction of  
183 intracellular Mtb in the lungs. To test this prediction, we quantified the total YFP<sup>+</sup> infected cells from  
184 each genotype. We found an increase in the total number YFP<sup>+</sup> cells only in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice



185 (Figure 5D). These data show that the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice harbor more infected cells than  
186 wild type or single knockout controls. We next examined the distinct cellular populations that were  
187 infected with Mtb in each genotype. We found that over 40% of infected cells in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup>  
188 mice were found to be CD11b<sup>+</sup>GR1<sup>int</sup> granulocytes a significant increase compared to wild type, *Cybb*<sup>-/-</sup>  
189 and *Caspase1/11*<sup>-/-</sup> animals (Figure 5E and 5F). This represents a shift in the *in vivo* intracellular  
190 distribution of Mtb in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice. Altogether these experiments show that the  
191 susceptibility of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice is associated with the recruitment of permissive granulocytes  
192 to the lungs that harbor high levels of Mtb.

193

194

195 **Discussion**

196 While the phagocyte oxidase is undoubtedly important for protection against Mtb, the precise  
197 mechanisms by which it protects remain unclear (18, 21, 35, 36). In animal models, the loss of *Cybb*  
198 alone results in a loss of disease tolerance through increased Caspase1 activation (18). Our results show  
199 that phagocyte oxidase also contributes to protection through a mechanism that is revealed only in the  
200 absence of Caspase1/11. While loss of either *Cybb* or *Caspase1/11* results in minor changes in survival,  
201 combining the mutations resulted in a dramatic increase in susceptibility, similar to mice lacking *IFN $\gamma$* ,  
202 *Nos2* or *Atg5* (7, 16, 17, 31). The synthetic susceptibility phenotype was characterized by increased  
203 granulocyte influx and Mtb replication in the lungs. Whether this susceptibility is a result of failed  
204 antimicrobial resistance, failed tolerance or both remains to be fully understood. However, based on the  
205 genetic interaction, it is likely that *Cybb* and *Caspase1/11* control parallel pathways that regulate cytokine  
206 and chemokine production and contribute to protection against TB.

207 While Mtb infection of both *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Casp1/11*<sup>-/-</sup> mice drives increased granulocyte  
208 trafficking to the lungs, the properties of these cells are distinct. In *Cybb*<sup>-/-</sup> mice the granulocytes express  
209 high levels of GR1 and the distribution of Mtb infected cells is unchanged compared to wild type mice. In  
210 contrast, granulocytes recruited to the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice express intermediate levels of  
211 GR1 and are associated with high levels of Mtb. A recent report characterizing the susceptibility of mice  
212 deficient in *Nos2* found that GR1<sup>int</sup> granulocytes were long-lived, unable to control bacterial growth, and  
213 were not suppressive even with increased IL10 production (33). In humans, low density granulocyte  
214 populations are associated with severe susceptibility to TB and may be analogous to these permissive  
215 GR1<sup>int</sup> cells seen in susceptible mice (37). It is possible that these granulocytes are not directly driving the  
216 susceptibility but rather are associated with uncontrolled TB disease caused by other defects in the host  
217 response. Future work using depletion and conditional knockouts will be required to understand how  
218 these changes in the cellular dynamics in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice contribute to susceptibility.

219 Our current model predicts that the phagocyte oxidase and Caspase1/11 control the inflammatory  
220 state of myeloid cells during Mtb infection. When this control is lost, the result is a failure of disease  
221 tolerance, which drives progressive disease and recruits permissive granulocytes that modulate a  
222 feedforward loop of inflammation, Mtb growth, and tissue damage. While the exact signals that recruit  
223 granulocytes to the lungs of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice remain unclear, we observed dysregulation of IL6,  
224 CXCL2 and IL1 $\alpha$  in Mtb infected *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages. While the importance of each  
225 cytokine to *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> susceptibility will need to be examined extensively, IL1 $\alpha$  was the most  
226 significantly changed cytokine in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages and *in vivo*. IL1 $\alpha$  is known to be  
227 required for protection against Mtb, as knockout mice are highly susceptible to disease (19, 38). Whether  
228 exacerbated IL1 $\alpha$  directly contributes to TB susceptibility remains to be fully understood. Several non-  
229 mutually exclusive mechanisms could explain the dysregulation of IL1 $\alpha$  and possibly other cytokines.  
230 For example, there is evidence that changes in calcium influx and mitochondrial stability directly control  
231 the expression and processing of IL1 $\alpha$  (39). Thus, *Cybb* or Caspase1/11 may modulate calcium flux and  
232 mitochondrial function during Mtb infection that activate excessive IL1 $\alpha$  production. Recent studies also  
233 suggest that metabolic pathways control ROS production that is directly required for processing of  
234 GSDMD which may link cellular metabolism to ROS signaling and inflammasome function (40). There is  
235 also evidence of a direct interaction between the phagocyte oxidase subunits and Caspase1 that modulates  
236 phagosome dynamics during *Staphylococcus aureus* infection, but if this mechanism plays a role during  
237 Mtb infection remains unknown (41). Ongoing work is focused on examining the contribution of each  
238 potential mechanism to the susceptibility of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> animals to better understand the  
239 regulatory networks that control inflammatory TB disease.

240 One outstanding line of questions from our findings is the specificity of the genetic interaction  
241 between *Cybb* and *Caspase1/11*. Both Caspase1- and Caspase11-dependent pathways are activated during  
242 Mtb infection, yet the direct contribution of either Caspase1 or Caspase11 to our observed susceptibility  
243 remains to be investigated by individually generating either *Cybb*<sup>-/-</sup>*Caspase1*<sup>-/-</sup> or *Cybb*<sup>-/-</sup>*Caspase11*<sup>-/-</sup>

244 animals (18, 42-44). Given the recent availability of clean *Caspase1* and *Caspase11* knockout mice, we  
245 are in the process of developing these models for the future (45-47). In addition, whether mutations in the  
246 inflammasome sensor NLRP3 or the adaptor ASC and other subunits of the phagocyte oxidase  
247 recapitulate the susceptibility of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> remain unknown. Further dissecting these specific  
248 genetic interactions between other phagocyte oxidase and inflammasome components will help to  
249 elucidate the underlying mechanisms controlling the susceptibility observed in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup>  
250 animals.

251 Our discovery of a synthetic susceptibility to Mtb in *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice was  
252 serendipitous. As the susceptibility observed in *Cybb*<sup>-/-</sup> mice was found to be due to dysregulated  
253 Caspase1 activation and IL1 $\beta$  production, we initially hypothesized that the combined loss of *Cybb* and  
254 *Caspase1* would reverse the tolerance defects found in mice lacking the phagocyte oxidase and were  
255 surprised to uncover a synthetic susceptibility. Since the phagocyte oxidase and inflammasomes are  
256 among the most studied pathways in immunology, our findings highlight a fundamental lack of  
257 understanding of interactions between immune signaling networks that control inflammation and  
258 immunity. To develop new host-directed therapeutics that could shorten treatment times and improve disease  
259 control, it is critical to understand how these interconnected networks function to protect against TB. A major  
260 obstacle in identifying protective networks against *Mtb* is the redundancy among host pathways, which mask  
261 important functions in single-knockout animals. A global understanding of genetic interactions that impact key  
262 inflammatory networks during TB would significantly inform the development of effective host-directed  
263 therapies or immunization strategies. Large-scale genetic interaction studies are common in cancer biology and  
264 should be applied to immune signaling networks during Mtb infection to better define these critical but  
265 currently unknown mechanisms that control protection against TB (48). Altogether, these findings suggest  
266 genetic interactions are key regulators of protection against Mtb with *Cybb* and *Caspase1/11* contributing  
267 together to protect against TB.

268



270 **Materials and methods**

271 *Mice and Ethics Statement*

272 Mouse studies were performed in accordance using the recommendations from the Guide for the Care and  
273 Use of Laboratory Animals of the National Institutes of Health and the Office of Laboratory Animal  
274 Welfare. Mouse studies were performed using protocols approved by the Institutional Animal Care and  
275 Use Committee (IACUC) in a manner designed to minimize pain and suffering in *Mtb*-infected animals.  
276 All mice were monitored and weighed regularly. Mice were euthanized following an evaluation of  
277 clinical signs with a score of 14 or higher. C57BL6/J mice (# 000664) and *Cybb*<sup>-/-</sup> mice (# 002365) were  
278 purchased from Jackson labs. *Caspase1/11*<sup>-/-</sup> were a kind gift from Katharine Fitzgerald and *Cybb*<sup>-/-</sup>  
279 *Caspase1/11*<sup>-/-</sup> were generated in-house. All mice were housed and bred under specific pathogen-free  
280 conditions and in accordance with the University of Massachusetts Medical School (Sasseti Lab A221-  
281 20-11) and Michigan State University (PROTO202200127) IACUC guidelines. All animals used for  
282 experiments were 6-12 weeks old.

283

284 *Macrophage and dendritic cell generation*

285 Bone marrow-derived macrophages and dendritic cells were obtained from the femurs and tibias of sex-  
286 and age-matched mice. For BMDMs, cells were cultured in 10cm<sup>2</sup> non-tissue culture treated petri dishes  
287 with 10 mls DMEM with 10% FBS and 20% L929 supernatant for 1 week. On day 3, the old media was  
288 decanted, and fresh differentiation media was added. After 7 days of differentiation, cells were lifted in  
289 PBS with 10mM EDTA and seeded in tissue-culture treated dishes in DMEM with 10% FBS with no  
290 antibiotics then used the following day for experiments.

291 For BMDCs, cells were cultured in 10cm<sup>2</sup> non-tissue culture treated petri dishes with 10 ml  
292 DMEM with 10% FBS, L-Glutamine, 2 μM 2-mercaptoethanol and 10% supernatant from B16-GM-CSF  
293 cells as described previously. After 7 days of differentiation, BMDCs were further enriched by isolating

294 loosely adherent cells removing F4/80<sup>+</sup> cells then isolating CD11c<sup>+</sup> cells by bead purification following  
295 manufacturer's instructions (Stem Cell Tech). Cells were then plated in tissue culture treated dishes in  
296 DMEM with 10% FBS then used the following day for experiments.

297

298 *Bone marrow-derived macrophage and dendritic cell infections and analysis.*

299 PDIM positive H37Rv was grown in 7H9 medium containing 10% oleic albumin dextrose catalase  
300 growth supplement and 0.05% Tween 80 as done previously (18). Prior to infection, cultures were washed  
301 in a PBS- 0.05% Tween solution and resuspended in DMEM with 10% FBS. To obtain a single cell  
302 suspension, samples were centrifuged at 200xg for 5 minutes to remove clumps. Culture density was  
303 determined by taking the supernatant from this centrifugation and determining the OD<sub>600</sub>, with the  
304 assumption that OD<sub>600</sub> = 1.0 is equivalent to 3x10<sup>8</sup> bacteria per ml. Bacteria were added to macrophages  
305 for 4 hours then cells were washed with PBS and fresh media was added. For cytokine analysis, at the  
306 indicated time points, supernatants were harvested and centrifuged through a 0.2-micron filter.  
307 Supernatants were then analyzed by a Luminex multiplex assay (Eve Technology) or by ELISA following  
308 manufacturer protocols (R&D). For CFU analysis, at the indicated timepoints, 1% saponin was added to  
309 each well without removing media to lyse cells while maintaining extracellular bacteria. Serial dilutions  
310 were then completed in phosphate-buffered saline containing tween 80 (PBS-T) and dilutions were plated  
311 on 7H10 agar. For cell death experiments, at the indicated time points media was removed and a  
312 CellTiter-Glo assay (Promega) was completed following manufacturer's instructions.

313

314 *Mouse infections and CFU quantification*

315 For animal infections, H37Rv or YFP<sup>+</sup> H37Rv were resuspended in PBS-T. Prior to infection, bacteria  
316 were sonicated for 30 seconds, then delivered into the respiratory tract using an aerosol generation device  
317 (Glas-Col). To verify low dose aerosol delivery, a subset of control mice was euthanized the following

318 day. Otherwise the endpoints are designated in the figure legends. To determine total CFU in either the  
319 lung or spleen, mice were anesthetized via Carbon Dioxide asphyxiation and cervical dislocation. the  
320 organs were removed aseptically and homogenized. 10-fold serial dilutions of each organ homogenate  
321 were made in PBS-T and plated on 7H10 agar plates and incubated at 37C for 21-28 days. Viable bacteria  
322 were then counted. Both male and female mice were used throughout the study and no significant  
323 differences in phenotypes were observed between sexes.

324

### 325 *Flow Cytometry*

326 Analysis of infected myeloid cells in the lungs was done as previously described (13, 33). In short, lung  
327 tissue was homogenized in DMEM containing FBS using C-tubes (Miltenyi). Collagenase type  
328 IV/DNaseI (Sigma) was added, and tissues were dissociated for 10 seconds on a GentleMACS system  
329 (Miltenyi). Lung tissue was then oscillated for 30 minutes at 37C. Following incubation, tissue was  
330 further dissociated for 30 seconds on a GentleMACS. Single cell suspensions were isolated following  
331 passage through a 40-micron filter. Cell suspensions were then washed in DMEM and aliquoted into 96  
332 well plates for flow cytometry staining. Non-specific antibody binding was first blocked using Fc-Block.  
333 Cells were then stained with anti-GR1 Pacific Blue, anti-CD11b PE, anti-CD11c APC, anti-CD45.2 PercP  
334 Cy5.5 (Biolegend). Live cells were identified using zombie aqua (Biolegend). No antibodies were used in  
335 the FITC channel to allow quantification of YFP<sup>+</sup> Mtb in the tissues. All experiments contained a non-  
336 fluorescent H37Rv infection control to identify infected cells. Cells were stained for 30 minutes at room  
337 temperature and fixed in 1% Paraformaldehyde for 60 minutes. All flow cytometry was run on a  
338 MACSQuant Analyzer 10 (Miltenyi) and was analyzed using FlowJo version 9 (Tree Star).

339

### 340 *Statistical Analysis*



341 Statistical analyses were performed using Prism 10 (Graph Pad) software as done previously (18, 49).

342 Statistical tests used for each experiment are described in each figure legend along with symbols

343 indicating significance or no significance.

344

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347 Fitzgerald lab for sharing *Caspase1/11*<sup>-/-</sup> mice. This work was funded by National Institutes of Health

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349

350

351 **Figure Legends**

352

353 **Figure 1. Exacerbated IL1 $\beta$  following Mtb infection of *Cybb*<sup>-/-</sup> myeloid-cells is dependent on**  
354 **Caspase1/11.** (A) BMDMs or (B) BMDCs from wild type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>  
355 *Caspase1/11*<sup>-/-</sup> mice were left uninfected or infected with Mtb H37Rv at an MOI of 5. The following day  
356 IL1 $\beta$  was quantified from the supernatants by ELISA. Each point represents data from a single well from  
357 one representative experiment of three. \*\*\* p<.001 by one-way ANOVA with a tukey test for multiple  
358 comparisons.

359

360 **Figure 2. *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> macrophages are hyperinflammatory and permissive to bacterial**  
361 **growth during Mtb infection.** (A) BMDMs from wild type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>  
362 *Caspase1/11*<sup>-/-</sup> mice were left uninfected or were infected with Mtb H37Rv at an MOI of 5. The following  
363 day, total viable cells were quantified in each infection condition and normalized to uninfected control  
364 cells. Shown is percent viability of infected cells compared to uninfected cells of the same genotype. (B)  
365 BMDMs from wild type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice were infected with Mtb  
366 H37Rv at an MOI of 5. The following day, cytokines from the supernatant were quantified by Luminex  
367 multiplex assay. Shown are results for IL1 $\beta$  and IL1 $\alpha$ , and (C) other indicated cytokines (TNF, CXCL1,  
368 RANTES, IL6, IL10, and CXCL2). (D) BMDMs from wild type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>  
369 *Caspase1/11*<sup>-/-</sup> mice were infected with Mtb H37Rv at an MOI of 1. At the indicated timepoints, cells  
370 were lysed and viable Mtb CFU were quantified. In all experiments, each point represents data from a  
371 single well and shown is mean  $\pm$  SD from one representative experiment of two or three similar  
372 experiments. \* p<.05 \*\* p<.01 NS no significance, by one-way ANOVA with a tukey test for multiple  
373 comparisons.

374

375 **Figure 3. *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice rapidly succumb to pulmonary Mtb infection.** Wild type,  
376 *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice were infected with Mtb H37Rv by the aerosol route  
377 in a single batch (Day 1 50-150 CFU). **(A)** Change in mouse weight from Day 0 to 24 days post-infection  
378 was quantified. Data are from one experiment and are representative of three similar experiments.  
379 Statistics were determined by a Mann Whitney test \*\*p<.01. **(B)** The relative survival of each genotype  
380 was quantified over 75 days of infection. Data are pooled from two independent experiments. Statistics  
381 were determined by a Mantel-Cox test \*\*\* p<.001.

382  
383 **Figure 4. *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice do not control Mtb growth and are hyperinflammatory.** Wild  
384 type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice were infected with Mtb H37Rv YFP by the  
385 aerosol route in a single batch (Day 1 50-100 CFU). Lungs and spleen were collected at 25 days post-  
386 infection and used to quantify bacterial CFU. **(A)** Bacterial burden in the lungs and **(B)** spleens of mice  
387 are shown. **(C)** Concentrations of cytokines in lung homogenates from infected mice were quantified  
388 (IL1 $\alpha$ , IL1 $\beta$ , IL6, TNF, IL10 and RANTES). Each point represents a single mouse, data are  
389 representative of one experiment from three similar experiments. \* p<.05 \*\* p<.01 NS no significance, by  
390 one-way ANOVA with a tukey test for multiple comparisons.

391  
392 **Figure 5. GR-1<sup>int</sup> granulocytes are recruited to the lungs and are associated with Mtb during**  
393 **infection of *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice.** Wild type, *Caspase1/11*<sup>-/-</sup>, *Cybb*<sup>-/-</sup> and *Cybb*<sup>-/-</sup>*Caspase1/11*<sup>-/-</sup> mice  
394 were infected with Mtb H37Rv YFP by the aerosol route in a single batch (Day 1 50-100 CFU). Lungs  
395 were collected at 25 days post-infection and single cell homogenates were made for flow cytometry  
396 analysis. **(A)** Shown is a representative flow cytometry plot of total lung granulocytes based on CD11b  
397 and GR1 staining (Gated on live CD45.2<sup>+</sup> single cells). Gates indicate CD11b<sup>+</sup> GR1<sup>hi</sup> or CD11b<sup>+</sup> GR1<sup>int</sup>  
398 granulocytes present in the lungs. **(B)** The percent of gated cells (live CD45.2<sup>+</sup> single cells) that were

399 CD11b<sup>+</sup> GR1<sup>hi</sup> and (C) CD11b<sup>+</sup> GR1<sup>int</sup> were quantified. (D) The total number of H37Rv YFP<sup>+</sup> cells were  
400 quantified from each mouse lung following gating on live, CD45.2<sup>+</sup> single cells. (E) The percent of gated  
401 H37Rv YFP<sup>+</sup> cells that were CD11b<sup>+</sup> GR1<sup>int</sup> were quantified. (F) Shown is a representative flow  
402 cytometry plot of H37Rv YFP<sup>+</sup> infected granulocytes (Gated on live CD45.2<sup>+</sup> YFP<sup>+</sup> single cells). Gates  
403 indicate CD11b<sup>+</sup> GR1<sup>hi</sup> or CD11b<sup>+</sup> GR1<sup>int</sup> granulocytes present in the lungs. Each point represents a single  
404 mouse and data are representative of one experiment from three similar experiments. \* p<.05 \*\* p<.01 by  
405 one-way ANOVA with a tukey test for multiple comparisons.

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416 **References**

- 417 1. Mogensen TH. 2009. Pathogen recognition and inflammatory signaling in innate immune  
418 defenses. *Clin Microbiol Rev* 22:240-73, Table of Contents.
- 419 2. Ernst JD. 2012. The immunological life cycle of tuberculosis. *Nat Rev Immunol* 12:581-91.
- 420 3. Olive AJ, Sasseti CM. 2018. Tolerating the Unwelcome Guest; How the Host Withstands  
421 Persistent *Mycobacterium tuberculosis*. *Front Immunol* 9:2094.
- 422 4. Martins R, Carlos AR, Braza F, Thompson JA, Bastos-Amador P, Ramos S, Soares MP. 2019.  
423 Disease Tolerance as an Inherent Component of Immunity. *Annu Rev Immunol* 37:405-437.
- 424 5. Divangahi M, Khan N, Kaufmann E. 2018. Beyond Killing *Mycobacterium tuberculosis*: Disease  
425 Tolerance. *Front Immunol* 9:2976.
- 426 6. Nunes-Alves C, Booty MG, Carpenter SM, Jayaraman P, Rothchild AC, Behar SM. 2014. In  
427 search of a new paradigm for protective immunity to TB. *Nat Rev Microbiol* 12:289-99.
- 428 7. Nandi B, Behar SM. 2011. Regulation of neutrophils by interferon-gamma limits lung  
429 inflammation during tuberculosis infection. *J Exp Med* 208:2251-62.
- 430 8. Bohrer AC, Tocheny C, Assmann M, Ganusov VV, Mayer-Barber KD. 2018. Cutting Edge: IL-  
431 1R1 Mediates Host Resistance to *Mycobacterium tuberculosis* by Trans-Protection of Infected  
432 Cells. *J Immunol* 201:1645-1650.
- 433 9. Flynn JL, Goldstein MM, Chan J, Triebold KJ, Pfeffer K, Lowenstein CJ, Schreiber R, Mak TW,  
434 Bloom BR. 1995. Tumor necrosis factor-alpha is required in the protective immune response  
435 against *Mycobacterium tuberculosis* in mice. *Immunity* 2:561-72.
- 436 10. Algood HM, Chan J, Flynn JL. 2003. Chemokines and tuberculosis. *Cytokine Growth Factor Rev*  
437 14:467-77.
- 438 11. Ravesloot-Chavez MM, Van Dis E, Stanley SA. 2021. The Innate Immune Response to  
439 *Mycobacterium tuberculosis* Infection. *Annu Rev Immunol* 39:611-637.
- 440 12. Chakaya J, Petersen E, Nantanda R, Mungai BN, Migliori GB, Amanullah F, Lungu P, Ntoumi F,  
441 Kumarasamy N, Maeurer M, Zumla A. 2022. The WHO Global Tuberculosis 2021 Report - not  
442 so good news and turning the tide back to End TB. *Int J Infect Dis* 124 Suppl 1:S26-S29.
- 443 13. Olive AJ, Sasseti CM. 2016. Metabolic crosstalk between host and pathogen: sensing, adapting  
444 and competing. *Nat Rev Microbiol* 14:221-34.
- 445 14. McHenry ML, Bartlett J, Igo RP, Jr., Wampande EM, Benchek P, Mayanja-Kizza H, Fluegge K,  
446 Hall NB, Gagneux S, Tishkoff SA, Wejse C, Sirugo G, Boom WH, Joloba M, Williams SM,

- 447 Stein CM. 2020. Interaction between host genes and Mycobacterium tuberculosis lineage can  
448 affect tuberculosis severity: Evidence for coevolution? PLoS Genet 16:e1008728.
- 449 15. Bustamante J, Boisson-Dupuis S, Abel L, Casanova JL. 2014. Mendelian susceptibility to  
450 mycobacterial disease: genetic, immunological, and clinical features of inborn errors of IFN-  
451 gamma immunity. Semin Immunol 26:454-70.
- 452 16. Nathan C, Shiloh MU. 2000. Reactive oxygen and nitrogen intermediates in the relationship  
453 between mammalian hosts and microbial pathogens. Proc Natl Acad Sci U S A 97:8841-8.
- 454 17. Kimmey JM, Huynh JP, Weiss LA, Park S, Kambal A, Debnath J, Virgin HW, Stallings CL.  
455 2015. Unique role for ATG5 in neutrophil-mediated immunopathology during M. tuberculosis  
456 infection. Nature 528:565-9.
- 457 18. Olive AJ, Smith CM, Kiritsy MC, Sasseti CM. 2018. The Phagocyte Oxidase Controls Tolerance  
458 to Mycobacterium tuberculosis Infection. J Immunol doi:10.4049/jimmunol.1800202.
- 459 19. Mayer-Barber KD, Andrade BB, Barber DL, Hieny S, Feng CG, Caspar P, Oland S, Gordon S,  
460 Sher A. 2011. Innate and adaptive interferons suppress IL-1alpha and IL-1beta production by  
461 distinct pulmonary myeloid subsets during Mycobacterium tuberculosis infection. Immunity  
462 35:1023-34.
- 463 20. Panday A, Sahoo MK, Osorio D, Batra S. 2015. NADPH oxidases: an overview from structure to  
464 innate immunity-associated pathologies. Cell Mol Immunol 12:5-23.
- 465 21. Bustamante J, Arias AA, Vogt G, Picard C, Galicia LB, Prando C, Grant AV, Marchal CC,  
466 Hubeau M, Chapgier A, de Beaucoudrey L, Puel A, Feinberg J, Valinetz E, Janniere L, Besse C,  
467 Boland A, Brisseau JM, Blanche S, Lortholary O, Fieschi C, Emile JF, Boisson-Dupuis S, Al-  
468 Muhsen S, Woda B, Newburger PE, Condino-Neto A, Dinauer MC, Abel L, Casanova JL. 2011.  
469 Germline CYBB mutations that selectively affect macrophages in kindreds with X-linked  
470 predisposition to tuberculous mycobacterial disease. Nat Immunol 12:213-21.
- 471 22. Jung YJ, LaCourse R, Ryan L, North RJ. 2002. Virulent but not avirulent Mycobacterium  
472 tuberculosis can evade the growth inhibitory action of a T helper 1-dependent, nitric oxide  
473 Synthase 2-independent defense in mice. J Exp Med 196:991-8.
- 474 23. Cooper AM, Segal BH, Frank AA, Holland SM, Orme IM. 2000. Transient loss of resistance to  
475 pulmonary tuberculosis in p47(phox<sup>-/-</sup>) mice. Infect Immun 68:1231-4.
- 476 24. Ng VH, Cox JS, Sousa AO, MacMicking JD, McKinney JD. 2004. Role of KatG catalase-  
477 peroxidase in mycobacterial pathogenesis: countering the phagocyte oxidative burst. Mol  
478 Microbiol 52:1291-302.
- 479 25. Kelley N, Jeltema D, Duan Y, He Y. 2019. The NLRP3 Inflammasome: An Overview of  
480 Mechanisms of Activation and Regulation. Int J Mol Sci 20.

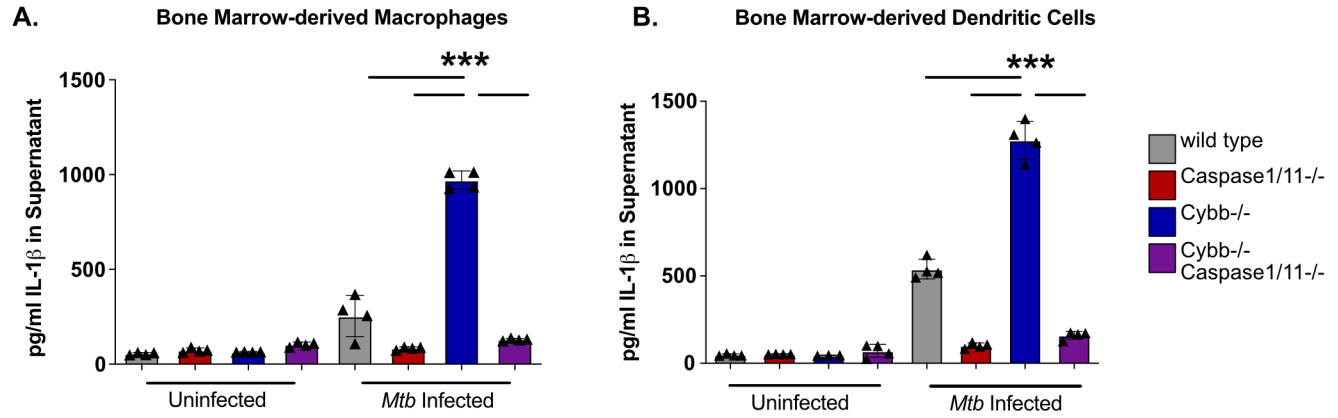
- 481 26. Chan AH, Schroder K. 2020. Inflammasome signaling and regulation of interleukin-1 family  
482 cytokines. *J Exp Med* 217.
- 483 27. Mayer-Barber KD, Barber DL, Shenderov K, White SD, Wilson MS, Cheever A, Kugler D,  
484 Hieny S, Caspar P, Nunez G, Schlueter D, Flavell RA, Sutterwala FS, Sher A. 2010. Caspase-1  
485 independent IL-1beta production is critical for host resistance to mycobacterium tuberculosis and  
486 does not require TLR signaling in vivo. *J Immunol* 184:3326-30.
- 487 28. McElvania Tekippe E, Allen IC, Hulseberg PD, Sullivan JT, McCann JR, Sandor M, Braunstein  
488 M, Ting JP. 2010. Granuloma formation and host defense in chronic Mycobacterium tuberculosis  
489 infection requires PYCARD/ASC but not NLRP3 or caspase-1. *PLoS One* 5:e12320.
- 490 29. von Moltke J, Ayres JS, Kofoed EM, Chavarria-Smith J, Vance RE. 2013. Recognition of  
491 bacteria by inflammasomes. *Annu Rev Immunol* 31:73-106.
- 492 30. Canton M, Sanchez-Rodriguez R, Spera I, Venegas FC, Favia M, Viola A, Castegna A. 2021.  
493 Reactive Oxygen Species in Macrophages: Sources and Targets. *Front Immunol* 12:734229.
- 494 31. Mishra BB, Lovewell RR, Olive AJ, Zhang G, Wang W, Eugenin E, Smith CM, Phuah JY, Long  
495 JE, Dubuke ML, Palace SG, Goguen JD, Baker RE, Nambi S, Mishra R, Booty MG, Baer CE,  
496 Shaffer SA, Dartois V, McCormick BA, Chen X, Sasseti CM. 2017. Nitric oxide prevents a  
497 pathogen-permissive granulocytic inflammation during tuberculosis. *Nat Microbiol* 2:17072.
- 498 32. Mishra BB, Rathinam VA, Martens GW, Martinot AJ, Kornfeld H, Fitzgerald KA, Sasseti CM.  
499 2013. Nitric oxide controls the immunopathology of tuberculosis by inhibiting NLRP3  
500 inflammasome-dependent processing of IL-1beta. *Nat Immunol* 14:52-60.
- 501 33. Lovewell RR, Baer CE, Mishra BB, Smith CM, Sasseti CM. 2020. Granulocytes act as a niche  
502 for Mycobacterium tuberculosis growth. *Mucosal Immunol* doi:10.1038/s41385-020-0300-z.
- 503 34. Obregon-Henao A, Henao-Tamayo M, Orme IM, Ordway DJ. 2013. Gr1(int)CD11b+ myeloid-  
504 derived suppressor cells in Mycobacterium tuberculosis infection. *PLoS One* 8:e80669.
- 505 35. Lee PP, Chan KW, Jiang L, Chen T, Li C, Lee TL, Mak PH, Fok SF, Yang X, Lau YL. 2008.  
506 Susceptibility to mycobacterial infections in children with X-linked chronic granulomatous  
507 disease: a review of 17 patients living in a region endemic for tuberculosis. *Pediatr Infect Dis J*  
508 27:224-30.
- 509 36. Khan TA, Kalsoom K, Iqbal A, Asif H, Rahman H, Farooq SO, Naveed H, Nasir U, Amin MU,  
510 Hussain M, Tipu HN, Florea A. 2016. A novel missense mutation in the NADPH binding domain  
511 of CYBB abolishes the NADPH oxidase activity in a male patient with increased susceptibility to  
512 infections. *Microb Pathog* 100:163-169.
- 513 37. Rankin AN, Hendrix SV, Naik SK, Stallings CL. 2022. Exploring the Role of Low-Density  
514 Neutrophils During Mycobacterium tuberculosis Infection. *Front Cell Infect Microbiol*  
515 12:901590.

- 516 38. Di Paolo NC, Shafiani S, Day T, Papayannopoulou T, Russell DW, Iwakura Y, Sherman D,  
517 Urdahl K, Shayakhmetov DM. 2015. Interdependence between Interleukin-1 and Tumor Necrosis  
518 Factor Regulates TNF-Dependent Control of Mycobacterium tuberculosis Infection. *Immunity*  
519 43:1125-36.
- 520 39. Freigang S, Ampenberger F, Weiss A, Kanneganti TD, Iwakura Y, Hersberger M, Kopf M. 2013.  
521 Fatty acid-induced mitochondrial uncoupling elicits inflammasome-independent IL-1alpha and  
522 sterile vascular inflammation in atherosclerosis. *Nat Immunol* 14:1045-53.
- 523 40. Evavold CL, Hafner-Bratkovic I, Devant P, D'Andrea JM, Ngwa EM, Borsic E, Doench JG,  
524 LaFleur MW, Sharpe AH, Thiagarajah JR, Kagan JC. 2021. Control of gasdermin D  
525 oligomerization and pyroptosis by the Regulator-Rag-mTORC1 pathway. *Cell* 184:4495-4511  
526 e19.
- 527 41. Sokolovska A, Becker CE, Ip WK, Rathinam VA, Brudner M, Paquette N, Tanne A, Vanaja SK,  
528 Moore KJ, Fitzgerald KA, Lacy-Hulbert A, Stuart LM. 2013. Activation of caspase-1 by the  
529 NLRP3 inflammasome regulates the NADPH oxidase NOX2 to control phagosome function. *Nat*  
530 *Immunol* 14:543-53.
- 531 42. Dorhoi A, Nouailles G, Jorg S, Hagens K, Heinemann E, Pradl L, Oberbeck-Muller D, Duque-  
532 Correa MA, Reece ST, Ruland J, Brosch R, Tschopp J, Gross O, Kaufmann SH. 2012. Activation  
533 of the NLRP3 inflammasome by Mycobacterium tuberculosis is uncoupled from susceptibility to  
534 active tuberculosis. *Eur J Immunol* 42:374-84.
- 535 43. Beckwith KS, Beckwith MS, Ullmann S, Saetra RS, Kim H, Marstad A, Asberg SE, Strand TA,  
536 Haug M, Niederweis M, Stenmark HA, Flo TH. 2020. Plasma membrane damage causes NLRP3  
537 activation and pyroptosis during Mycobacterium tuberculosis infection. *Nat Commun* 11:2270.
- 538 44. Qian J, Hu Y, Zhang X, Chi M, Xu S, Wang H, Zhang X. 2022. Mycobacterium tuberculosis  
539 PE\_PGRS19 Induces Pyroptosis through a Non-Classical Caspase-11/GSDMD Pathway in  
540 Macrophages. *Microorganisms* 10.
- 541 45. Bourigault ML, Segueni N, Rose S, Court N, Vacher R, Vasseur V, Erard F, Le Bert M, Garcia I,  
542 Iwakura Y, Jacobs M, Ryffel B, Quesniaux VF. 2013. Relative contribution of IL-1alpha, IL-  
543 1beta and TNF to the host response to Mycobacterium tuberculosis and attenuated M. bovis BCG.  
544 *Immun Inflamm Dis* 1:47-62.
- 545 46. Rauch I, Deets KA, Ji DX, von Moltke J, Tenthorey JL, Lee AY, Philip NH, Ayres JS, Brodsky  
546 IE, Gronert K, Vance RE. 2017. NAIP-NLRC4 Inflammasomes Coordinate Intestinal Epithelial  
547 Cell Expulsion with Eicosanoid and IL-18 Release via Activation of Caspase-1 and -8. *Immunity*  
548 46:649-659.
- 549 47. Wang S, Miura M, Jung YK, Zhu H, Li E, Yuan J. 1998. Murine caspase-11, an ICE-interacting  
550 protease, is essential for the activation of ICE. *Cell* 92:501-9.



- 551 48. Mair B, Moffat J, Boone C, Andrews BJ. 2019. Genetic interaction networks in cancer cells. *Curr*  
552 *Opin Genet Dev* 54:64-72.
- 553 49. Wilburn KM, Meade RK, Heckenberg EM, Dockterman J, Coers J, Sasseti CM, Olive AJ, Smith  
554 CM. 2023. Differential Requirement for IRGM Proteins during Tuberculosis Infection in Mice.  
555 *Infect Immun* doi:10.1128/iai.00510-22:e0051022.
- 556

Figure 1



**Figure 2**

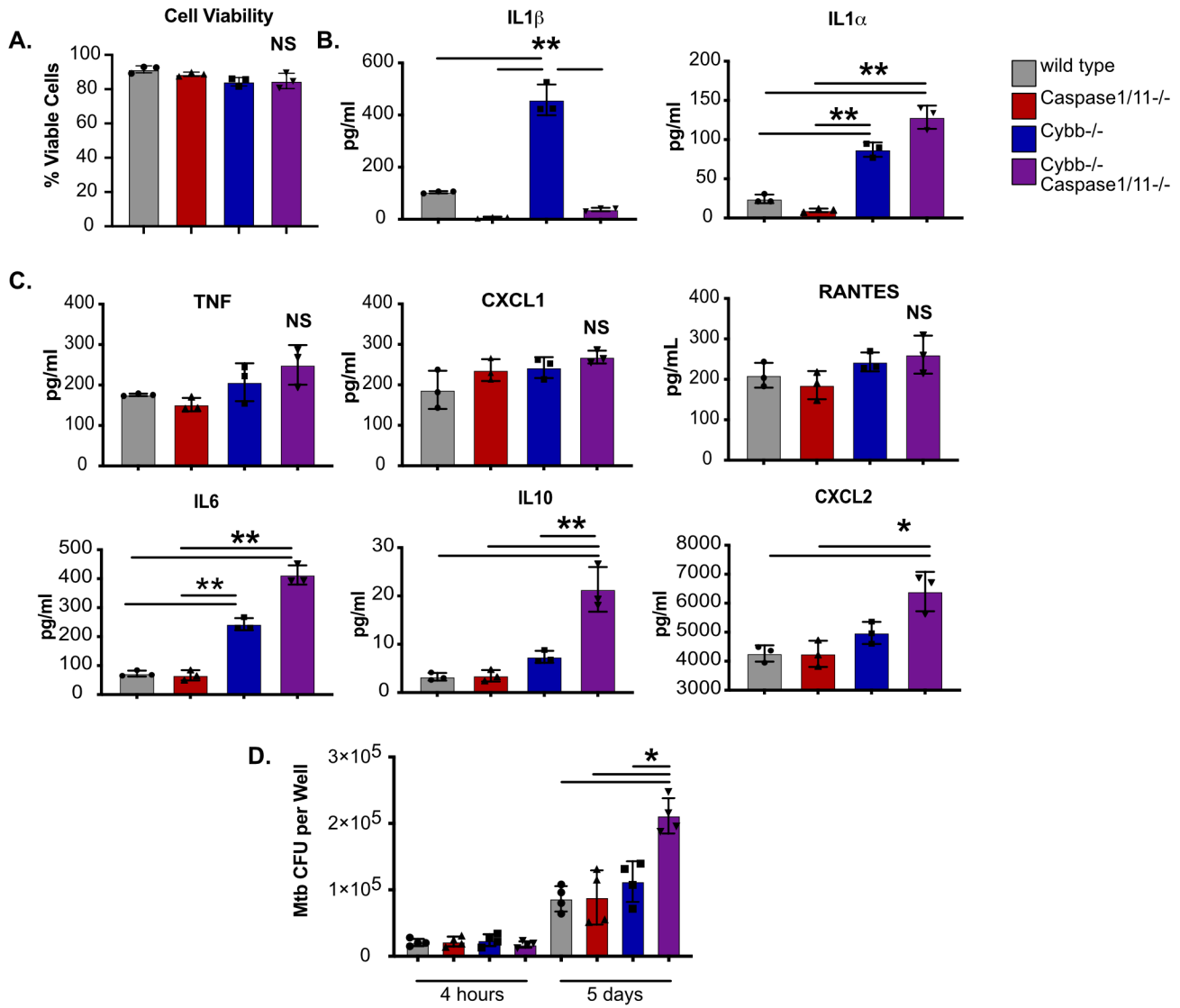


Figure 3

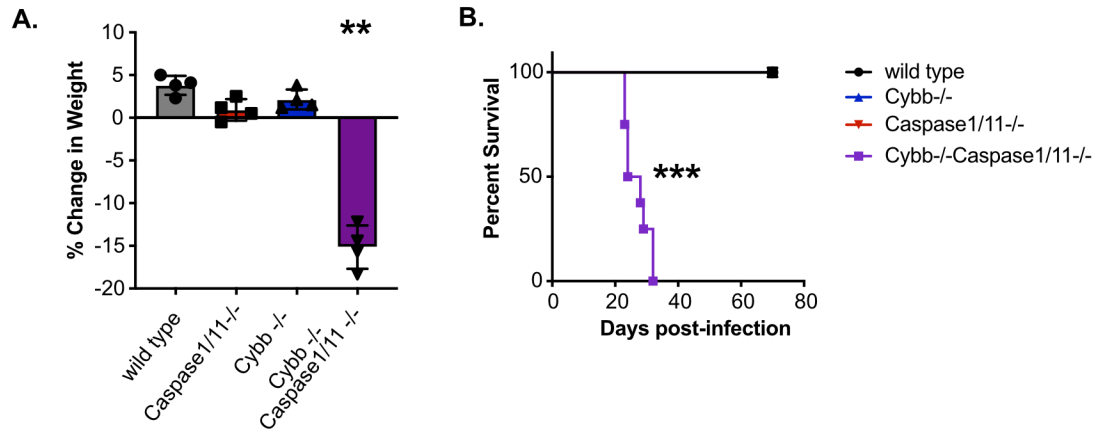


Figure 4

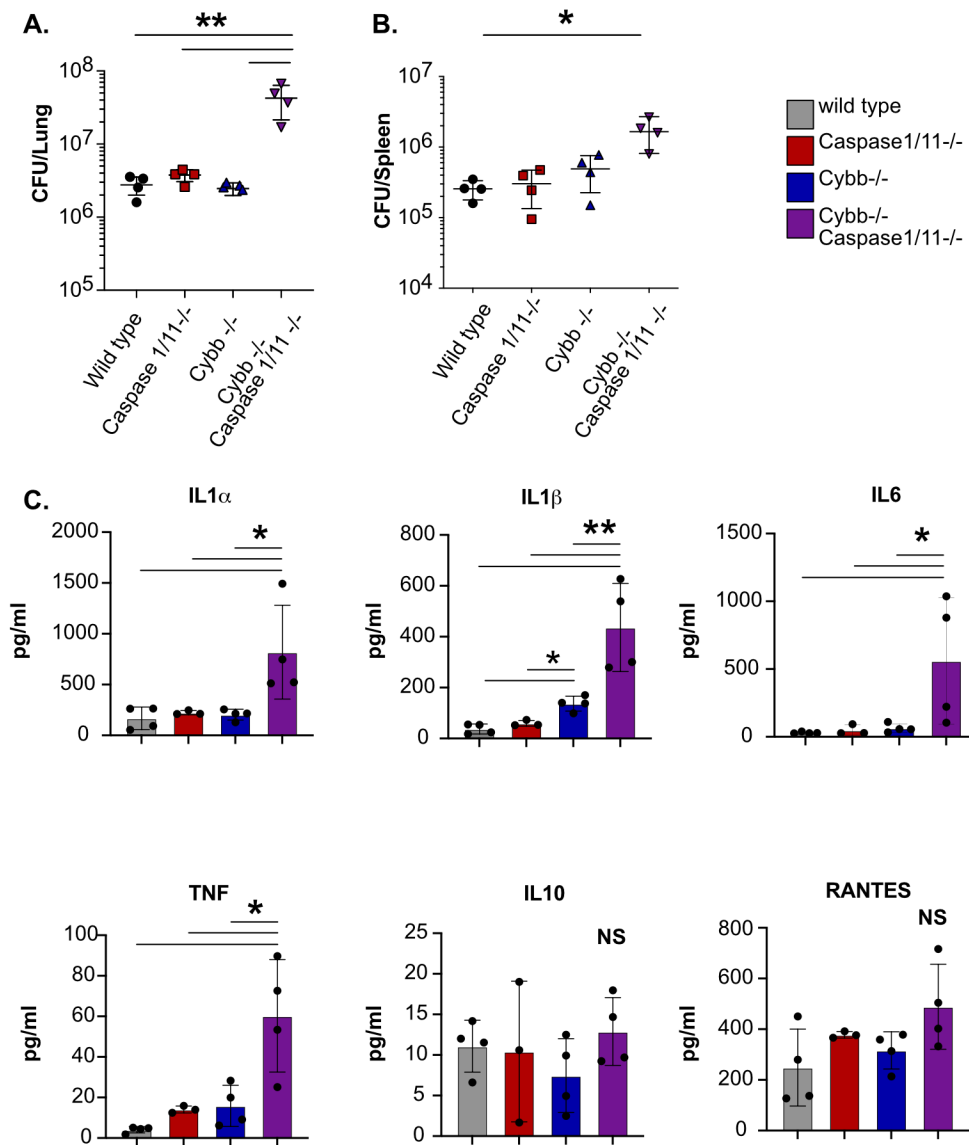


Figure 5

