

1                   **House Finches with High Coccidia Burdens Experience More Severe Experimental**  
2                   ***Mycoplasma gallisepticum* Infections**

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4   Chava L. Weitzman<sup>1\*</sup> ORCID 0000-0002-6103-1885  
5   Courtney Thomason<sup>1,2\*</sup> ORCID 0000-0003-2316-3518  
6   Edward J. A. Schuler<sup>1,3\*</sup> ORCID 0000-0002-1847-5712  
7   Ariel Leon<sup>1</sup> ORCID 0000-0001-9246-4619  
8   Sara R. Teemer<sup>1</sup>  
9   Dana M. Hawley<sup>1</sup> ORCID 0000-0001-9573-2914

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11   <sup>1</sup> Department of Biological Sciences, Virginia Tech, Blacksburg, VA

12   <sup>2</sup> Tennessee Department of Environment and Conservation, Division of Remediation, Oak Ridge,  
13   TN

14   <sup>3</sup> Department of Microbiology and Immunology, Virginia Commonwealth Medical Center,  
15   Richmond, VA

16   \* authors contributed equally

17   Correspondence to: Chava Weitzman, clweitzman@vt.edu

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19   **Abstract**

20   Parasites co-infecting hosts can interact directly and indirectly to affect parasite growth and  
21   disease manifestation. We examined potential interactions between two common parasites of  
22   house finches: the bacterium *Mycoplasma gallisepticum* that causes conjunctivitis and the  
23   intestinal coccidian parasite *Isospora* sp. We quantified coccidia burdens prior to and following  
24   experimental infection with *M. gallisepticum*, exploiting the birds' range of natural coccidia

25 burdens. Birds with greater baseline coccidia burdens developed higher *M. gallisepticum* loads  
26 and longer lasting conjunctivitis following inoculation. However, experimental inoculation with  
27 *M. gallisepticum* did not appear to alter coccidia shedding. Our study suggests that differences in  
28 immunocompetence or condition may predispose some finches to more severe infections with  
29 both pathogens.

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31 **Keywords:**

32 co-infection, coccidia, conjunctivitis, *Mycoplasma gallisepticum*

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34 Acknowledgements: Thank you to two anonymous reviewers for their comments on this  
35 manuscript.

36

37 **Declarations:**

38 Funding: This work was funded by NIH grant 5R01GM105245 as part of the joint NIH-NSF-  
39 USDA Ecology and Evolution of Infectious Diseases program. Funding for E. Schuler was  
40 provided by a Virginia Tech Summer Undergraduate Research Fellowship. C. Weitzman was  
41 supported by National Science Foundation grant IOS-1755051.

42 Conflicts of interest: On behalf of all authors, the corresponding author states that there is no  
43 conflict of interest.

44 Ethics Approval: Birds were captured under VDGIF (050352) and USFWS (MB158404-1)  
45 permits. Experimental procedures were approved by Virginia Tech's Institutional Animal Care  
46 and Use Committee.

47 Consent to participate: NA

48 Consent for publication: NA

49 Data availability: The dataset analyzed during this study are available from the corresponding  
50 author on reasonable request.

51 Code availability: NA

52 **Introduction**

53 Free-living hosts typically house a complex suite of parasites and pathogens that interact  
54 with each other, and their host, through bottom-up (resource-mediated) and top-down (immune-  
55 mediated) processes (Pedersen and Fenton 2007). Indirect interactions such as immune-mediated  
56 processes, whereby parasites interact with each other through modulation of their host, are  
57 particularly relevant for co-infecting parasites that do not occupy the same host tissues. For  
58 example, in humans, immune stimulation by the gastrointestinal pathogen *Helicobacter pylori*  
59 suppresses co-infection of the lung pathogen *Mycobacterium tuberculosis* (TB) as a consequence  
60 of both infections stimulating T-helper 1 (Th1) immunity (Perry et al. 2010). When two parasites  
61 stimulate different immune components, an immunological bias against one invader can facilitate  
62 a second parasite's invasion or severity. In buffalo, individuals that produced a strong T-helper  
63 type 2 (Th2) response to combat nematode infections had lower Th1 immunity and were more  
64 likely to be invaded by bovine TB (Ezenwa et al. 2010). Regardless of the specific mechanisms  
65 by which co-infecting parasites interact, these interactions often impact the outcome of disease  
66 and ultimately affect host fitness.

67 Here, we examine potential immune-mediated interactions between a conjunctival  
68 pathogen (*Mycoplasma gallisepticum*, hereafter “MG”) and gut parasite (coccidian protozoa),  
69 which both naturally occur in house finches (*Haemorhous mexicanus*). MG first appeared in  
70 house finches in the mid-1990s and since spread to much of the species’ distribution (Ley et al.

71 2016). This infection causes severe inflammation in the conjunctivae and high host mortality in  
72 the wild (Faustino et al. 2004). Coccidia, an umbrella term for various species of intestinal  
73 protozoan parasites, naturally infect the finch gut. Coccidia infections of *Isospora* spp. (the  
74 culprit in house finches; Brawner III et al. 2000; Hartup et al. 2004) damage intestinal epithelial  
75 walls, decreasing absorption of nutrients and body mass (Hôrak et al. 2004). Both MG and  
76 coccidia commonly cause disease in wild house finches (Giraudeau et al. 2014; Ley et al. 2016)  
77 with severe fitness consequences, and they co-occur in nature (Brawner III et al. 2000; Hartup et  
78 al. 2004). Therefore, we examined whether MG and coccidia interact with each other in a way  
79 that may alter the outcome of either infection.

80 We tested for interactions between these parasites in house finches by quantifying oocyst  
81 shedding from natural coccidia infections prior to and following experimental inoculation with  
82 MG. Our goal was to evaluate the degree and nature (synergistic or antagonistic) of potential  
83 interactions between coccidia (*Isospora* sp.) and MG. We predicted an antagonistic interaction  
84 due to previous studies that have identified similar T-helper subset (i.e., Th1) responses to both  
85 pathogens (Yun et al. 2000; Vinkler et al. 2018). Co-infection would likely stimulate strong Th1  
86 responses and lead to the decline of one or both pathogens via immune-mediated interactions.

87

## 88 **Methods**

89 Hatch-year house finches were captured June–August 2015 in Blacksburg and Radford,  
90 Virginia. Only birds without conjunctival pathology throughout a quarantine period, seronegative  
91 for MG (Hawley et al. 2011), and negative for MG via quantitative PCR (Grodio et al. 2008)  
92 were included. Finches were single-housed two weeks before MG inoculation, with *ad libitum*  
93 food and water and a 12:12 light:dark photoperiod. To minimize mortality due to coccidiosis,

94 which can be high in captivity, finches were given sulfadimethoxine (5 days at 0.469 mg/ml  
95 followed by daily 0.26 mg/mL) in their water, but treatment ceased 14 days prior to experimental  
96 inoculation with MG. Treatment temporarily lowers coccidia loads, but does not clear infection  
97 (Brawner III et al. 2000); thus, many birds harbored high loads pre-inoculation (see *Results*).

98 To examine potential interactions between MG and coccidia, we sampled coccidia oocyst  
99 burdens from 42 total finches (20 MG-infected, 22 sham-inoculated controls) both prior to and  
100 following experimental MG inoculation. These 42 birds were a subset of a larger MG inoculation  
101 study (Leon et al. 2019), and treatment groups were assigned naïve to coccidia status.

102 On inoculation day (day 0), finches in the MG-infected treatment (10 female, 10 male)  
103 were inoculated in both eyes with 70 µL of the VA-1994 (7994-1 7 P 2/12/09) MG isolate in  
104 Frey's broth media ( $1 \times 10^6$  color changing units/mL concentration); control finches (12 female,  
105 10 male) were sham inoculated with sterile Frey's media. We scored pathology six times from  
106 day 3–34 post-inoculation (Fig. 1b) on a 0–3 scale per eye and summed values between the two  
107 eyes for a maximum value of 6 (Sydenstricker et al. 2006). Conjunctival swabs on post-  
108 inoculation days 6 and 20 were used to quantify MG load via quantitative PCR as per Leon et al.  
109 2019.

110 Fecal samples were collected 7, 4, and 3 days prior to inoculation to determine baseline  
111 coccidia loads, and on days 2 and 5 post-inoculation to detect changes early in MG infection. As  
112 shedding of coccidia oocysts varies temporally, peaking in late afternoon (Brawner III and Hill  
113 1999), fresh fecal samples were collected from 17:00–17:30. Fecal samples were stored in 1mL  
114 of 10% formalin at 4°C, and oocysts were counted using standard fecal float analysis with a  
115 FecalYZer (EVSCO Pharmaceuticals) and Sheather's sugar solution. To adhere floating oocysts,  
116 a glass coverslip was placed over the reverse meniscus for 15 minutes, and total oocysts were

117 counted via bright-field microscopy at 100x magnification. Results are presented in units of  
118 oocysts per gram of feces (OPG).

119 All statistical analyses were conducted using R ver 3.5.3 in R Studio ver 1.1.463 (R  
120 Development Core Team 2015; RStudio Team 2016). Significance was determined with Type II  
121 or III Wald tests, where appropriate, with the car package (Fox and Weisberg 2019). Models  
122 were simplified using sequential deletion of covariates (i.e., sex, post-inoculation day) with p-  
123 values > 0.1 either as main effects or in interaction with other fixed effects. Below, we note cases  
124 where variables were removed from our final models.

125 To determine how infection with MG affects coccidia, we asked how coccidia loads  
126 changed over time with experimental treatment (infected versus control). We excluded  
127 individuals that never shed oocysts on any sampling day from this analysis (n = 5) since we were  
128 specifically interested in how MG treatment altered existing coccidia infections. We used the  
129 glmmTMB package (Brooks et al. 2017) to run zero-inflated negative binomial generalized  
130 linear mixed effects models, asking whether coccidia loads differed before and after MG  
131 inoculation for experimentally-infected versus control birds (MG treatment\*pre/post  
132 inoculation). Sex was included as a covariate. Because birds were housed among four rooms  
133 (evenly representing the treatments), and room was a significant predictor of coccidia load, we  
134 included bird ID nested within room as a random variable.

135 To determine how infection with coccidia affects responses to MG, we analyzed whether  
136 naturally-occurring variation in coccidia shedding predicted MG load and pathology using birds  
137 from the MG-infected treatment alone. We calculated average pre-inoculation coccidia loads  
138 ( $\log_{10}(\text{load}+1)$ ) as a baseline and used that to predict resulting MG responses. To determine if  
139 baseline coccidia loads predicted the course of mycoplasmal infections, we modeled MG loads

140  $(\log_{10}(\text{load} + 1))$  as a function of baseline coccidia loads and time (pre-inoculation coccidia\*post-  
141 inoculation day) using linear mixed effects models in the lme4 package (Bates et al. 2015). We  
142 treated post-inoculation day as ordinal because MG loads were measured twice. Sex was  
143 included as a covariate and bird ID as a random variable. Room was not included here, because  
144 unlike coccidia, MG does not spread among separately housed birds within a room (this was  
145 verified using MG load residuals, which centered on zero across housing rooms). Pathology  
146 scores were similarly modeled using ordinal logistic regression with a cumulative link mixed  
147 model in the package ordinal (Christensen 2019). Here, post-inoculation day was a continuous  
148 variable.

149

## 150 **Results and Discussion**

151 Coccidia was common among our study birds, with 40–69% of the birds shedding  
152 oocysts on any sampling day (at burdens ranging from 18–60,400 OPG), and only five birds  
153 never shedding oocysts. Interestingly, the sexes differed in coccidia loads ( $X^2 = 6.26$ ,  $df = 1$ ,  $p =$   
154 0.01), with higher and more variable oocyst loads in male versus female finches (Male 95% CI =  
155 575–3143 OPG; Female 95% CI = 129–690 OPG). Thus, sex was retained in our model of  
156 coccidia burdens.

157 We expected average coccidia burdens to decline after MG inoculation, resulting in a  
158 significant interaction between MG treatment and pre/post inoculation, but we found no such  
159 effect on coccidia oocyst count ( $X^2 = 0.31$ ,  $df = 1$ ,  $p > 0.5$ ). It is possible that our sampling,  
160 which only extended to day 5 post-MG inoculation, ended too early to detect a change in  
161 coccidia shedding due to MG. A recent study found that several pro-inflammatory cytokines  
162 peak in finch harderian glands at day 6 post-MG inoculation (Vinkler et al. 2018), though there

163 are no comparable data for intestinal tissue to assess the timing of cytokine expression. In  
164 another co-infection study on house finches, *Plasmodium* infection intensity increased after MG  
165 inoculation, with the strongest effects occurring in the second week of MG infection (Reinoso-  
166 Pérez et al. 2020). Thus, sampling coccidia burdens for longer after MG inoculation may allow  
167 time for birds to fully develop the immune responses to MG that we expected to potentially  
168 affect co-infecting coccidia.

169 Conversely, we predicted that birds with high coccidia burdens prior to inoculation would  
170 develop relatively lower MG loads and conjunctivitis pathology due to high baseline immune  
171 stimulation. Instead, we found greater MG loads and disease in birds shedding more coccidia  
172 oocysts prior to inoculation (Fig. 1). Finches with higher baseline coccidia burdens developed  
173 higher MG loads ( $X^2 = 4.47$ ,  $df = 1$ ,  $p = 0.03$ ; Fig. 1a), and MG loads significantly varied  
174 between post-inoculation days ( $X^2 = 196$ ,  $df = 1$ ,  $p < 0.0001$ ). Sex and the interaction between  
175 coccidia burden and post-inoculation day were not retained in the final MG load model ( $p > 0.1$ ).

176 For pathology, finches with higher baseline coccidia burdens showed lower and later  
177 average peaks in conjunctival pathology, but harbored clinical pathology for longer than birds  
178 with lower baseline coccidia burdens (coccidia\*post-inoculation day  $z = 2.67$ ,  $p = 0.008$ ; Fig.  
179 1b). Though the interaction between baseline coccidia burden and post-inoculation day was  
180 significant, baseline coccidia alone did not predict MG pathology ( $z = -0.70$ ,  $p = 0.5$ ). However,  
181 pathology score was significantly predicted by host sex ( $z = -2.74$ ,  $p = 0.006$ ) and post-  
182 inoculation day ( $z = -3.57$ ,  $p = 0.0004$ ), and thus both were retained in the final model.

183 In another co-infection study in house finches, Dhondt and colleagues (2017) found that  
184 finches with chronic baseline *Plasmodium* infections had greater MG load and disease severity  
185 when experimentally infected with MG. Because both Dhondt et al. (2017) and our study here

186 relied on naturally-occurring variation in a chronic infection (coccidia or avian malaria) prior to  
187 experimental infection with MG, it is impossible to determine whether the more severe infection  
188 and prolonged disease observed in birds with higher initial coccidia burdens reflects a true causal  
189 interaction. It is possible that birds with higher baseline coccidia loads did, in fact, harbor higher  
190 chronic immune stimulation prior to MG inoculation. However, rather than suppressing MG  
191 responses once inoculated, Th1-mediated responses could instead have lengthened the period of  
192 clinical conjunctivitis, as a previous study found associations between Th1 responses and  
193 conjunctivitis severity in this system (Vinkler et al. 2018). More likely, our correlational results  
194 reflect some underlying trait of immune competence influencing responses to both infections.  
195 For example, finches with lower coccidia burdens may have stronger immune systems capable of  
196 keeping diverse types of parasites, including MG, at bay. Importantly, co-infection between MG  
197 and coccidia could affect other variables not measured here, including susceptibility to other  
198 parasites or pathogens.

199 MG became an emerging infectious disease in house finches in the mid-1990s (Ley et al.  
200 1996), invading hosts already parasitized by many other species, including coccidia. Our results,  
201 alongside those of Dhondt and colleagues (2017), suggest that the presence of other parasites is  
202 an important predictive factor for understanding the severity of MG infection and clinical  
203 disease. These co-infections, including others not addressed here, are thus an important  
204 consideration in understanding effects of MG on house finch fitness and transmission potential.

205

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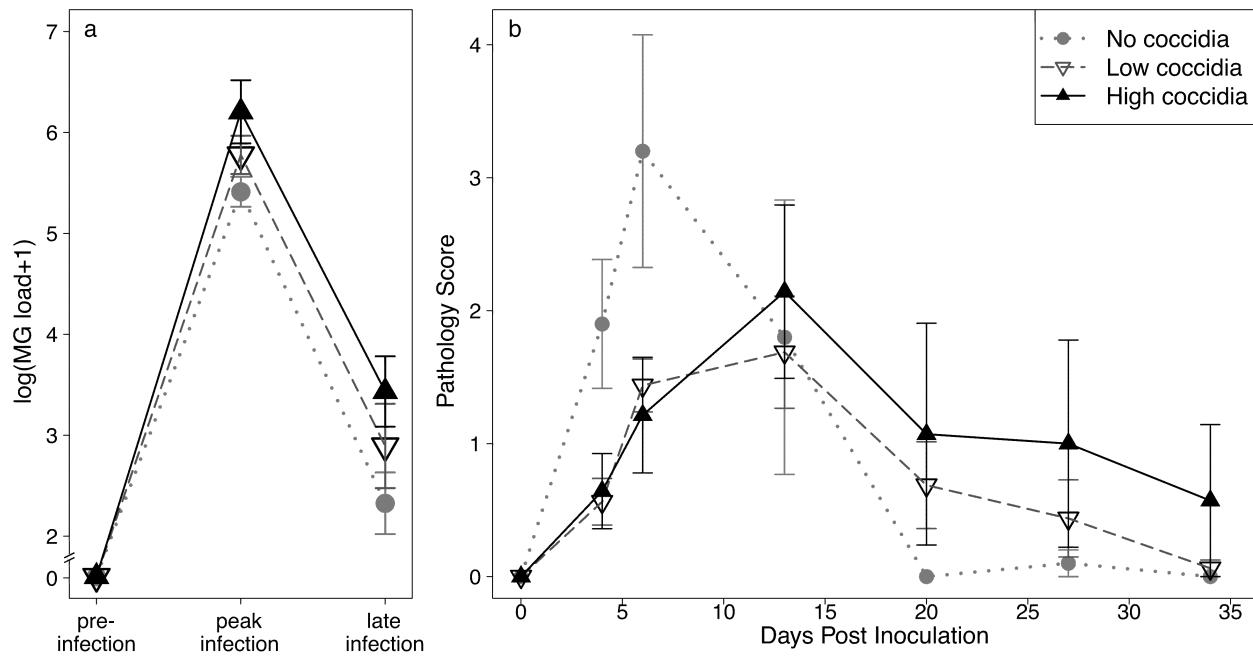
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278

279 **Figure Caption**

280 **Fig. 1** Coccidia shedding prior to *Mycoplasma gallisepticum* (MG) inoculation predicts (a) MG  
 281 load and (b) severity of pathology to MG over the course of disease. Although coccidia shedding  
 282 was analyzed as a continuous variable, data are grouped here for visualization purposes. Filled  
 283 circles = no coccidia prior to MG inoculation, open triangles = low coccidia shedding (average <  
 284 250 oocysts per gram), filled triangles = high coccidia shedding (average 1700–8500 oocysts per  
 285 gram)



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