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# Influenza a virus subtype H9N2 infection induces respiratory microbiota dysbiosis in chickens via type-I interferon-mediated mechanisms

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#### Abstract

Avian influenza virus (AIV) poses significant threats to poultry and human health. This study investigates the impact of H9N2 AIV infection on the respiratory microbiota of chickens using 16S rRNA gene sequencing. Total 48 one-day-old specific pathogen-free chickens were assigned to six groups: a control and five post-infection groups (days 1, 3, 5, 7, and 9). After a 15-day microbiota stabilization period, the infected chickens received a viral inoculum ( $10^7$  TCID50/ml) via ocular, intra-nasal, and intra-tracheal routes. Tracheal and broncho-alveolar lavage samples were analyzed. Significant reductions in microbiota diversity were observed on days 5, 7, and 9 post-infection, compared to d0 controls. Permutational Multivariate Analysis of Variance confirmed significant beta diversity differences (P = 0.001) between infected and uninfected groups. The microbial shifts from d5 to d9 were marked by increased Proteobacteria, decreased Actinobacteria and Firmicutes, and a rise in Dickeya. Elevated type-I interferon (IFN- $\beta$ ) and viperin gene expression at d5 coincided with reduced microbiota diversity, highlighting the respiratory microbiota's role in modulating host responses to AIV H9N2 infection and suggesting potential biomarkers for respiratory dysbiosis.

Keywords: avian influenza; respiratory tract; microbiota; dysbiosis; type-I interferon; biomarkers

## Introduction

Avian influenza viruses (AIVs) are zoonotic pathogens that pose significant threats to both poultry and potentially human health (Cardona et al. 2009). These viruses are responsible for respiratory infections in poultry, which frequently lead to high morbidity and mortality rates, as well as decreased egg production. Based on pathogenicity, there are two major AIV pathotypes: highly pathogenic avian influenza viruses (HPAIs) such as H5N1, and low pathogenic avian influenza viruses (LPAIs), such as H9N2 (Pantin-Jackwood and Swayne 2009). HPAIs exhibit a mortality rate of 75% or greater in experimentally infected chickens and can cause 100% mortality in infected poultry within 48 h (WHO 2007, Suarez 2010). The clinical signs of AIV infection vary based on pathotypes, ranging from mild clinical signs such as lethargy, diarrhea, coughing, sneezing, and mild respiratory distress in LPAI-infected hosts, to severe clinical outcomes such as bleeding from the nares, incoordination, and even death in HPAI-infected hosts (Pantin-Jackwood and Swayne 2009, Chrzastek et al. 2021). AIV H9N2 infections have been documented in various poultry species, including domestic ducks, turkeys, and chickens in multiple countries since the mid-1990s, and are recently believed to have reached panzootic proportions (Nagy et al. 2017). Although the H9N2 AIV virus is classified as low pathogenicity, it still poses significant risks to both poultry and human health. This risk is amplified by its role in the genetic evolution of more virulent strains. For instance, the H5N2 AIV (A/chicken/Hebei/1102/2010), known for its high pathogenicity in chickens, acquired its internal gene cassette from H9N2 (Zhao et al. 2012). Additionally, the H9N2 virus has contributed to the evolution of other dangerous strains, such as H7N9, which has caused severe human disease. H7N9 acquired internal genes, including PB2 and PA, from H9N2, leading to mutations that enhance its transmissibility and pathogenicity (Huang and Wang 2020, Pu et al. 2021). This highlights H9N2's role in increasing the pathogenic potential of AIVs.

AIV primarily replicates in the epithelial cells of the gastrointestinal and respiratory tracts, which host a complex microbial community known as the microbiota, and often serve as an informative index for overall health status (Taylor et al. 2020). For example, the composition of the respiratory microbiota influence host immunocompetence through various mechanisms, including inflammatory responses, and colonization resistance via production of antimicrobial substances, competition for nutrients and attachment sites (Abt et al. 2012, Poroyko et al. 2015, Man et al. 2017). Virus infections can also induce broad or site-specific in host commensal microbiota (Yitbarek et al. 2018a, Zhao et al. 2018). The host's inflammatory response and gene expression, particularly type-I interferons (IFNs), are crucial in driving shifts in microbial community structure (Deriu et al. 2016). Type-I IFNs, including multiple IFN- $\alpha$  proteins and a single IFN- $\beta$  protein, play a central role in antiviral defenses in chickens (Santhakumar et

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al. 2017). Any quantitative or qualitative disruption to the host's microbial homeostasis, also known as microbial dysbiosis, can potentially compromise the host's immunocompetence. Various environmental and pathogenic stressors can trigger microbial dysbiosis (Yitbarek et al. 2018a, Rostagno 2020). Epidemiological studies in humans have associated microbial dysbiosis with respiratory disorders such as airway inflammation, asthma, and chronic obstructive pulmonary disease (Russel et al. 2012, Rutten et al. 2014). Although research on the avian respiratory microbiota is limited, there has been extensive study of gut microbiota in poultry species. Several studies (Yitbarek et al. 2018a, Li et al. 2018, 2018b,c) have demonstrated the role of gut microbiota in viral pathogenesis. In particular, Yitbarek et al. (2018a) established an association between H9N2 AIV infection and gut microbiota dysbiosis by investigating the relationship between the gut microbiota and AIV in the chicken model.

Considering that the respiratory tract serves as the primary portal point for AIV entry and replication sites, we hypothesized that influenza A virus infection could alter the resident microbiota in the chicken respiratory tract. Such alterations could significantly impact the host innate immune defense and susceptibility to other infections. Thus, insights gained from such an investigation could inform future disease prevention and treatment strategies. Despite the advancements in sequencing technologies, there remains a dearth of information regarding how acute viral infections affect the composition, kinetics, and quantity of commensal microbiota in the chicken respiratory tract. The present study utilized 16S ribosomal RNA (16S rRNA) gene sequencing to examine the microbiota in the trachea and broncho-alveolar lavage (BAL), representing the upper respiratory tract (URT) and lower respiratory tract (LRT) of chickens, respectively, following infection with H9N2 influenza A virus.

## Materials and methods

## **Experimental design**

All experimental procedures received approval from the University of Guelph Animal Care Committee (AUP 5073) and were conducted in strict compliance with the Canadian Council on Animal Care (CCAC) guidelines. The study involved 48 one-day-old specific pathogen-free chickens (Canadian Food Inspection Agency-CFIA, Ottawa Laboratory, Nepean, ON, Canada). These chickens were randomly assigned to six treatment groups, each consisting of 8 birds. The groups included one control group (uninfected chickens) and five experimental groups, corresponding to days 1, 3, 5, 7, and 9 post-H9N2 infection. Each treatment group was housed in separate cages within Horsfall units in a Biosafety Level II isolation facility at the University of Guelph, Ontario, Canada. Although, all treatment groups were kept separately in different cages, they were maintained under uniform environmental conditions and provided unrestricted access to an antibiotic-free diet and water. The experimental unit was defined as an individual cage. All chickens were given a 15-day period for microbiota stabilization before the H9N2 AIV infection and sampling was carried out.

#### Virus propagation and infection of chickens

Specific-pathogen-free eggs (CFIA, Ottawa Laboratory, Nepean, ON, Canada) underwent a 10-day incubation period at 37°C. Each egg was then inoculated with 4 hemagglutination units (4HA) of the H9N2 LPAIV strain, specifically A/TK/IT/13VIR1864-45/2013 [Istituto Zooprofilattico Spermentale delle Venezie (IZSVe), Leg-

naro, Padua, Italy], followed by an additional 72-h incubation at 37°C. Embryos were subjected to regular monitoring every 24 h, and any dead embryo was promptly disposed of. After the 72-h incubation period, the eggs were stored at 4°C overnight. Subsequently, allantoic fluid was collected, pooled, and centrifuged at 400 × g for 15 min. This collected fluid was then stored at -80°C until further use. Virus quantification was carried out by titrating the virus on Madin–Darby canine kidney (MDCK) cells, with titers calculated based on endpoint dilutions. These results were expressed as 50% tissue culture infectious dose (TCID50/ml) (Reed and Muench 1938). Chickens in the H9N2 infection group were infected with a virus inoculum containing 10<sup>7</sup> TCID50/ml and administered through a combination of ocular (80  $\mu$ l/eye), intranasal (80  $\mu$ l/nostril), and intra-tracheal (80  $\mu$ l) routes.

#### Assessment of viral load and shedding

On days 1, 3, 5, 7, and 9 post-infection (pi), as well as on day 0 pre-infection, oral and cloacal swabs were collected from all chickens in each group. These swab samples were collected using 15 cm Puritan PurFlock Ultra sterile flocked collection devices (Gilford, Maine, USA). Collected Swabs were then placed in 1.5-ml microcentrifuge tubes containing transport medium composed of DMEM (Dulbecco's Modified Eagle's medium) supplemented with 0.5% BSA fraction V, 10 ml of penicillin (200 U/ml), 80  $\mu$ g/ml of streptomycin, and 50  $\mu$ g/ml of gentamycin. The samples were kept on ice throughout the collection process until further processing and storage at  $-80^{\circ}$ C.

For virus load quantification, the swab samples were serially diluted onto an 80%–95% confluent monolayer of MDCK cells and subsequently incubated at 37°C for 72 h. The titer was determined by identifying the highest dilution that displayed a cytopathic effect (CPE) under the microscope. This determination was confirmed by conducting a hemagglutination test using 0.5% chicken blood. The virus load, expressed as TCID50/ml, was subsequently calculated using the Reed and Muench (1938) method.

#### Collection of tracheal swabs and BAL fluid

At each time point—day 0 (pre-infection), and days 1, 3, 5, 7, and 9 post-infection (pi)—samples were collected from 8 chickens per treatment group. Each treatment group was housed in separate cages, with each cage containing 8 birds. For tracheal swab samples, swabs (Puritan PurFlock, Maine, USA) were gently inserted into the trachea and moved back and forth at least five times before immersing them in 1 ml of  $1 \times$  PBS (Wisent Inc., Saint-Jean-Baptiste, QC, Canada). In the case of BAL samples, 1 ml of  $1 \times$  PBS was slowly flushed down a small tracheal slit, ~3 cm from the bronchia, using pipettes attached to 10 ml syringes (BD, Franklin Lakes, NJ, USA). Subsequently, the PBS solution was withdrawn and transferred to 1.5 ml microcentrifuge tubes (MCT-150-Y, Axygen, Union City, CA, USA). All samples were collected and immediately transferred to the laboratory on ice.

#### DNA extraction and 16S rRNA gene sequencing

Microbial genomic DNA was extracted from each tracheal and BAL sample using the PureLink Microbiome DNA Purification Kit (Catalog Number A29790, Thermo Fisher Scientific, Waltham, MA, USA) following the manufacturer's instructions. DNA quality and concentration were assessed using a NanoDrop spectrophotometer (NanoDrop Technologies, Wilmington, DE). Extracted DNA samples (volume: 50 µl, concentration: 10– 200 ng/µl) were subsequently sent to the Integrated Microbiome Resource (IMR) (http://imr.bio) for library preparation and se-



Figure 1. Oral and Cloacal H9N2 virus titer in chickens infected with 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml LPAI H9N2. Virus titer was determined at Days 0, 1, 3, 5, 7, and 9 post-infection using TCID<sub>50</sub> in MDCK cells.

quencing. Libraries targeting the V3–V4 hypervariable region of the 16S rRNA gene were PCR-amplified using dual-barcoded primers (341F = 5'-CCTACGGGNGGCWGCAG-3' and 805R = 3'-GACTACHVGGGTATCTAATCC-5').

# RNA extraction, cDNA synthesis and real-time PCR

On days 1, 3, 5, 7, and 9 pi, as well as on day 0 pre-infection, tracheal tissues were collected from euthanized chickens (n = 8) in all groups. RNA extraction and cDNA synthesis followed established protocols using TRIzol<sup>®</sup> (Invitrogen, Invitrogen, Carlsbad, CA, USA) and Superscript<sup>®</sup> II First-Strand Synthesis kit (Invitrogen) (Barjesteh et al. 2015). Real-time PCR was conducted using diluted cDNA on the LightCycler<sup>®</sup> 480 II instrument (Roche Diagnostics GmbH, Mannheim, DE, Germany) employing the SyBR Green Mix from the same manufacturer. Primers were procured from Sigma–Aldrich in Oakville, Canada, with specific sequences provided in Supplementary Table S1 (Barjesteh et al. 2015; Boodhoo et al. 2023, Raj et al. 2023). Relative expression levels of target genes were normalized to the housekeeping gene  $\beta$ -actin and calculated using LightCycler<sup>®</sup> 480 II system (Roche Diagnostics GmbH, Mannheim, DE) (Alizadeh et al. 2020).

#### Statistical and bioinformatics analysis

All datasets were analyzed using the Minitab statistical package (v.18.1). Generalized linear models were applied to analyze nonviral datasets, with mean differences assessed using Tukey's Honest Significant Difference test. Viral shedding data were analyzed using repeated measures analysis of variance (ANOVA). The normality of the data was tested with the Shapiro–Wilk test. For data that did not follow a normal distribution, the Kruskal–Wallis test was used. Statistical significance was determined at a threshold of  $P \leq 0.05$ .

Bioinformatic analysis of microbiome data, including processing and filtering, followed the Microbiome Helper pipeline (Oladokun et al. 2022) using QIIME 2 (version 2023.7) software package. Rare ASVs were filtered out based on the criteria of being present in at least 1 sample and frequency of <0.1% of the mean sample depth (26757 reads per sample). Additionally mitochondrial and chloroplast 16S sequences were filtered out as contaminants. PCR negative controls were included and sequenced on each plate in the run (4 per run) to identify potential contamination. These controls are generally not provided to clients by the sequencing core since they usually (as in the case of the runs in this paper) contain very little sequence content, primarily representing sequence bleedthrough on the MiSeqs (which is controlled for in Step 4.1 of the pipeline). Visualization was conducted using the MicrobiomeAnalyst 2.0 web-based platform (Lu et al. 2023). Individual alpha diversity was assessed via rarefaction curves, employing the default observed operational taxonomic unit (OTU) metric. Statistical significance of alpha diversity differences was determined using the Shannon index and assessed through Kruskal–Wallis test. Pearson correlation coefficient (r) was used to measure the strength and direction of the association between diversity metrics (Shannon diversity and beta diversity, assessed using PERMANOVA models) and viral metrics (viral load and shedding), as well as infection groups (days). Correlation analyses were performed in R (version 2024.04.2). Results were visualized using ggplot2, with bar plots representing Pearson's r values and color-coded P-values on a gradient from red (high P-value) to green (low P-value). Beta diversity was assessed using principal coordinates analysis (PCoA) plots based on weighted UniFrac distance matrices. Statistical significance of beta diversity differences was determined using Permutational Multivariate Analysis of Variance (PERMANOVA), considering only experimental factors (site- BAL or Tracheal swabs; days- d0, d1, d3, d5, d7, d9 pi) in the analysis. Relative abundances at various taxonomic levels were visualized using stacked bar charts. Significant microbiota proportions were identified using the Statistical Analysis of Metagenomic Profiles (STAMP v2.1.3) software (Parks et al. 2014).

### Results

# AIV H9N2 peak viral load and shedding confirmed at d3 pi

The virus load were assessed using TCID<sub>50</sub> method by titrating the oral and cloacal swab samples on MDCK cell monolayers. The AIV challenge model proved effective, with the peak AIV viral shedding occurring at d3 pi (Fig. 1). In oral swabs, viral load exhibited a gradual increase until d3 pi, thereafter, no cytopathic effects in the MDCK cells were observed in oral swabs. As for cloacal swabs, viral shedding was only detected beginning at d3 pi, followed by a 61% reduction in shedding at d5 pi. No cytopathic effects in the MDCK cells were observed in cloacal swabs after d5 pi. Control chickens (day 0 pre-infection group) were confirmed to be negative for the virus in both samples.



**Figure 2.** (A) Alpha diversity (Shannon index) box plots indicate significant difference (P < 0.001) between H9N2-infected chickens at days 0, 1, 3, 5, 7, and 9 post-infection and (B) PCoA plots based on weighted UniFrac metric illustrating the respiratory microbiota beta diversity. The comparisons conducted include H9N2-infected chickens at days 0, 1, 3, 5, 7, and 9 post-infection (PERMANOVA F-value: 7.1365; R-squared: 0.35092; P-value: 0.001). Samples were collected before challenge (day 0) and days 1, 3, 5, 7, and 9 post infection in chickens that were infected with 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml of H9N2 influenza virus.

 Table 1. Post-hoc comparisons of alpha diversity (Shannon index)

 between control (D0) and Avian influenza H9N2-infected groups.

Comparisons	P-value	FDR-adjusted P-value
D0 vs D5	7.209E <sup>-4</sup>	0.0015
D0 vs D1	0.5159	0.7455
D0 vs D3	0.8267	0.8267
D0 vs D7 D0 vs D9	1.5878E <sup>-4</sup> 1.6786E <sup>-5</sup>	5.9544E <sup>-4</sup> 1.5968E <sup>-4</sup>

This table presents results from pairwise comparisons of Shannon diversity indices, with multiple comparisons adjusted using the Benjamini–Hochberg procedure (FDR). Samples were collected from chickens before challenge (day 0) and at days 1, 3, 5, 7, and 9 post-infection. Chickens were inoculated with 400  $\mu$ l of 10<sup>7</sup> TCID50/ml H9N2 influenza virus. Samples included broncho-alveolar lavage (BAL) and tracheal swabs. Significance was defined as P  $\leq$  0.05.

# AIV H9N2 infection induces spatial and temporal reduction in microbiota diversity.

Alpha diversity, as measured by the Shannon index, showed a significant reduction in microbiota diversity on Days 5, 7, and 9 postinfection with AIV compared to uninfected controls (d0). The lowest reduction (P < 0.001) was observed on d5 pi (Fig. 2A, Table 1, Supplementary Table S2 and S3). Similarly, BAL samples recorded a lower (P = 0.02) Shannon index compared to tracheal swab samples and distinct clustering patterns in beta diversity analysis, based on weighted UniFrac distances (Supplementary Fig. S1). Additionally, permutation multivariate analysis of variance (PER-MANOVA) confirmed significant differences (P = 0.001) in beta diversity between infected and uninfected groups, with infected samples forming unique clusters separate from uninfected controls (Fig. 2B, Table 2).

In order to assess the relationship between degree of viral load, shedding, and microbiota diversity, correlation analysis was carried out. Results revealed that higher oral viral loads and cloaca viral shedding are strongly associated (P < 0.001) with lower Shan-

**Table 2.** Permutational Multivariate Analysis of Variance (PER-MANOVA) comparisons between control (D0) and Avian Influenza H9N2-infected groups.

Comparisons	P-value	FDR-adjusted P-value
D0 vs D5	0.3200	0.0017
D0 vs D1	0.0750	0.0900
D0 vs D3	0.0987	0.0330
D0 vs D7	0.3203	0.0017
D0 vs D9	0.4130	0.0017

This table presents results from pairwise Permutational Multivariate Analysis of Variance (PERMANOVA) analyses, with multiple testing adjustments applied using the Benjamini-Hochberg procedure (FDR). Samples were collected from chickens before challenge (Day 0) and at Days 1, 3, 5, 7, and 9 post-infection. Chickens were inoculated with 400  $\mu$ l of 10<sup>7</sup> TCID50/ml H9N2 influenza virus. Samples included BAL and tracheal swabs. Significance was defined as P  $\leq$  0.05.

non diversity at d3 pi (Fig. 3). The correlation between beta diversity (PERMANOVA models), viral load, and viral shedding was not statistically significant (Supplementary Fig. S2). However, d3 pi showed the highest positive correlation with viral shedding, suggesting a potential association at this time point. Internal sample alpha diversity was estimated using the number of observed features (richness). Rarefaction curves of observed features reached a plateau in all samples, demonstrating that sequencing depth was adequate to cover bacterial diversity in all samples (Supplementary Fig. S3).

# AIV H9N2 infection induces differential microbial composition.

Sequencing of the 16S rRNA V4–V5 region generated 1917894 quality reads, averaging 26637 reads per sample after quality filtering and demultiplexing. A total of 573 operational taxonomic units (OTUs) were identified at a 97% sequence similarity level across all samples.



**Figure 3.** Correlation results between Alpha diversity index: Shannon diversity and viral metrics. (A) Shannon diversity and viral shedding (Log<sub>10</sub> TCID<sub>50</sub> ml cloaca). (B) Shannon diversity and viral load (Log<sub>10</sub> TCID<sub>50</sub> ml oral). The bar plots display Pearson correlation coefficients for each metric. Colors indicate P-values, with red representing higher P-values and green representing lower p-values.

The top three predominant phyla identified were Actinobacteria, Firmicutes, and Proteobacteria, with their relative abundances depicted in Figs. 4 and 5. Actinobacteria dominated at d0-d3 pi, constituting 70%–75% of the microbiota, decreasing to 6%–10% at d5-d9. Conversely, Proteobacteria exhibited an increasing trend from 10%–12% at d0–d3 to 80%–85% at d5–d9. Firmicutes ranged from 3% to 15% across the sampling period. Analysis of genuslevel taxa revealed distinct shifts in microbial composition across days of AIV infection. The top five predominant genera based on high relative abundances included Allorhizobium-Pararhizobium, *Camamonas*, *Dickeya*, *Nocardia*, and *Pandoraea*. Notably, the relative abundance of *Dickeya* increased from 5% to 85% with increasing exposure to AIV d 0 to 9. In addition to these predominant genera, other genera such as *Zymomonas*, *Tepidibacter*, and *Staphylococcus* were also prevalent across both tracheal swabs and BAL samples.

Statistical analysis of microbiota composition using the Statistical Analysis of Metagenomic Profiles (STAMP) software revealed significant alterations in microbiota proportions influenced by AIV H9N2 exposure across both sampled sites (Figs 6 and 7). In the trachea, AIV infection led to a reduction in the proportions of Actinobacteria and Firmicutes on d5, d7, and d9, with a significant reduction in Firmicutes alone on d7, and an accompanying increase in Proteobacteria on all these days (P > 0.001). In BAL samples, a significant reduction in Actinobacteria and Firmicutes, accompanied by an increase in Proteobacteria, was observed only on d7 (P > 0.001). At the genus level, AIV exposure decreased the proportions of Nocardia and Tepidibacter on d5, d7, and d9, and Tepidibacter alone on d7, while the genus Dickeya showed increased abundance on all these days in BAL samples (P > 0.001). In tracheal swab samples, the abundance of Dickeya increased, and Nocardia decreased on d7 and d9, with a similar pattern on d5, alongside a reduction in Te*pidibacter* (P > 0.001). At the species level, Dickeya phage abundance increased consistently following AIV exposure on d5, d7, and d9 in tracheal swab samples (P > 0.001). This was accompanied by a reduction in Streptomyces sp. on d5 and d9 (P > 0.001). In BAL samples, the increased abundance of Dickeya phage and reduction in Streptomyces sp. were also consistently observed on d5, d7, and d9 following AIV exposure (P > 0.001).

# AIV H9N2 infection induces peak expression of Type-I interferon (IFN- $\beta$ ) at d5 pi

Elevated transcriptional upregulation of immunoregulatory genes associated with antiviral host defense was observed in the tracheal tissues of AIV H9N2 infected birds (Fig. 8). Specifically, the viral infection triggered high-level expression ( $P \le 0.05$ ) expression of type-I interferon (IFN- $\beta$ ) at d5 pi compared to the pre-infection level (Fig. 8C). Similarly, expression of the other antiviral gene, viperin, reached the peak d5 pi (P = 0.01) compared to the preinfection level (Fig. 8A).

#### Discussion

AIVs primarily replicate in epithelial cells of the respiratory and intestinal mucosae, which interact closely with commensal microbiota (Ngunjiri et al. 2019, Taylor et al. 2020). These microbial communities can influence viral infections by either enhancing or inhibiting them (Wilks and Golovkina 2012). While the role of intestinal microbiota in AIV pathogenesis is well-studied (Yitbarek et al. 2018a, b, 2018c), the impact of respiratory microbiota remains less understood. Evidence from mouse and human studies indicates that commensal microbiota may protect against influenza virus infections (Ichinohe et al. 2011, Budden et al. 2017), though the mechanisms are not fully clear. In a bid to address this knowledge gap, this study investigates changes in the URT and LRT microbiota and host immune response following AIV H9N2 infection.

In the present study, the effectiveness of our AIV challenge model was confirmed, our model demonstrated peak infection and viral shedding at day 3 pi, with viral clearance by day 5 pi. Oral and cloacal swabs from uninfected birds tested negative for the virus, aligning with similar studies (Yitbarek 2018b et al. 2018b, Iqbal et al. 2013, Ruiz-Hernandez et al. 2016, Singh et al. 2016). The pattern of infection and shedding indicates strain-specific replication dynamics. Viral infections can alter host microbiota, leading to changes in microbial diversity (Yitbarek et al. 2018a, Li et al. 2018, Wen et al. 2018, Zhao et al. 2018). AIV H9N2 infection reduced alpha diversity (species richness) at days 5, 7, and 9 pi, compared to uninfected controls (d0), with the most significant reduction observed on day 5 pi. Similarly, beta diversity (microbial turnover) also varied with AIV infection. These findings align with previous studies showing decreased microbial diversity in infected chickens (Chrzastek et al. 2021) and swans (Zhao et al. 2018). The decrease in diversity from nares to lungs suggests stronger disruption in upper respiratory sites (Ngunjiri et al. 2021).

The predominant phyla identified were Actinobacteria, Firmicutes, and Proteobacteria, consistent with prior research (Sohail et al. 2015, Ngunjiri et al. 2019, Wang et al. 2022). H9N2 infection led to shifts in microbial populations, including an increase in Proteobacteria and decreases in Actinobacteria and Firmicutes, particularly between days 5–7. This pattern is observed in other models following AIV infection (Yitbarek 2018a et al. 2018a, Deriu et al. 2016, Li et al. 2017, Groves et al. 2018, Khatib et al. 2021). The



**Figure 4.** Microbiota profiles of the predominant phyla in the chicken respiratory microbiota, showing (A) variations in H9N2-infected chickens across days 0, 1, 3, 5, 7, and 9 post-infection, and (B) differences between broncho-alveolar lavage (BAL) and tracheal swab samples. Samples were collected pre-challenge (day 0) and at days 1, 3, 5, 7, and 9 post-infection from chickens exposed to 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml of H9N2 influenza virus.



**Figure 5.** Microbiota profiles of the predominant genera in the chicken respiratory microbiota, showing (A) variations in H9N2-infected chickens across days 0, 1, 3, 5, 7, and 9 post-infection, and (B) differences between broncho-alveolar lavage (BAL) and tracheal swab samples. Samples were collected pre-challenge (day 0) and at days 1, 3, 5, 7, and 9 post-infection from chickens exposed to 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml of H9N2 influenza virus.

increased Proteobacteria, associated with inflammation, and decreased Firmicutes and Actinobacteria, important for metabolic and immune functions, suggest microbial dysbiosis. In terms of microbiota composition, the predominant phyla identified in this study were Actinobacteria, Firmicutes, and Proteobacteria, consistent with previous research (Sohail et al. 2015, Ngunjiri et al. 2019; Wang et al. 2022). Infection with H9N2 AIV in-



**Figure 6.** Significant differences (P < 0.05) in the cumulative proportions of bacteria at the (A) phylum, (B) genus, and (C) species levels in tracheal swab samples collected from chickens before infection (day 0) and at days 1, 3, 5, 7, and 9 post-infection with H9N2 avian influenza virus. Chickens were inoculated with 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml of H9N2 influenza virus.



**Figure 7.** Significant differences (P < 0.05) in cumulative bacterial proportions at the (A) phylum, (B) genus, and (C) species levels in BAL samples from chickens infected with H9N2 avian influenza virus (AIV). Samples were collected pre-infection (day 0) and at days 1, 3, 5, 7, and 9 post-infection from chickens inoculated with 400  $\mu$ l of 10<sup>7</sup> TCID<sub>50</sub>/ml H9N2 influenza virus.

duced shifts in microbial populations at both sampled sites, particularly on d5–d7, which coincided with the time-points recorded with reduced microbial diversity. Specifically blooms of Proteobacteria accompanied by declines in Actinobacteria and Firmicutes abundances were recorded. This pattern is observed in other models following AIV infection (Yitbarek 2018a et al. 2018a, Deriu et al. 2016, Li et al. 2017, Groves et al. 2018, Khatib et al. 2021). Actinobacteria and Firmicutes consist of beneficial Gram-positive species that have diverse metabolic capabilities. Increased Firmicutes populations have been associated with increased nutrient absorption and energy harvest from diets (Jumpertz et al. 2011), while Actinobacteria play a role in combating bacterial diseases and converting feed into microbial biomass (Anandan et al. 2016). The functional roles of these bacterial communities include lipid metabolism and cholesterol metabolism (Martínez et al. 2013), implying that decreases in the microbial population of these groups may impair their functional capacity and overall gut function. On the other hand, increased abundance of Proteobacteria, com-



**Figure 8.** Results of the differential gene expression analysis for (A) Viperin, (B) IFITM5, (C) IFN- $\beta$ , (D) TGF- $\beta$ , (E) IL-6, and (F) IL-1- $\beta$  in H9N2-infected chickens at various time points post-infection (days 0, 1, 3, 5, 7, and 9). Tracheal tissue samples (n = 8) were collected before challenge (Day 0) and at Days 1, 3, 5, 7, and 9 post-infection from chickens inoculated with 400  $\mu$ l of 10<sup>7</sup> TCID50/ml of H9N2 influenza virus. Gene expression levels were measured using real-time PCR and normalized to  $\beta$ -actin. Statistical significance was determined using analysis of variance based on a generalized linear model and Tukey's honest significant difference test, with results presented as means  $\pm$  standard deviations. Significance was defined as  $P \le 0.05$ .

prised primarily of Gram-negative bacteria, are known to be associated with inflammation and metabolic dysfunction (Maharshak et al. 2013, Vaughn et al. 2017). A range of avian pathogens exist in this phylum, including *Escherichia coli*, *Salmonella* spp., and *Campylobacter* spp. An overgrowth of Proteobacteria, particularly *Escherichia coli*, has been reported in several AIV infection studies, suggesting that the increase in Proteobacteria abundance comes at the expense of restricted anaerobic commensals (Wang et al. 2014, Qin et al. 2015, Li et al. 2018). The overgrowth of Proteobacteria following viral infection has also been linked to increased susceptibility to secondary infections and inflammatory pathology (Qin et al. 2015, Li et al. 2018).

Furthermore, during the intermediate of AIV infection (d5–d9), when changes in signs, severity, immune response, and pathogen dynamics may occur, AIV H9N2 led to a decrease in the proportions of Nocardia and Tepidibacter, along with an increase in Dickeya across the sampled sites. Nocardia is a genus of aerobic, filamentous, Gram-positive bacteria. Nocardia species have been identified as part of dysbiotic intestinal microbiota and associated with prolonged fasting states in some fish species (Kohl et al. 2014, Medina-Felix et al. 2024). Similar to our findings with AIV infection, Wang et al. (2022) reported a significant reduction in Nocardia genera in adult zebrafish exposed to aquaculture effluents. While both studies investigate different pathogenic and environmental stressors, the observed changes in microbiome composition, essential for immune responses, indicate alterations in hostmicrobe interactions due to external stressors, such as viral infection or environmental contamination. The Tepidibacter genus consists of thermophilic, Gram-negative anaerobic Bacteroidetes bacteria reported as statistically predominant in the respiratory microbiota of healthy pigs, dogs, sheep, and chickens (Zeineldin and Barakat 2023). Lee et al. (2022) reported Tepidibacter enrichment in the fecal microbiota of diarrheic cats following Bacillus licheniformis fermented product supplementation. While this links Tepidibacter abundance to eubiotic microbiota states, further analysis is required to elucidate the metabolic capabilities of this genus. We also recorded increased Dickeya genus and Dickeya phage abundance post AIV-H9N2 infection at this same timepoint (d5-d9) across both sampled sites, suggesting potential use as a biomarker of AIV-induced poultry respiratory dysbiosis. Dickeya are mostly identified as plant pathogens (Samson et al. 2005), with little known regarding their animal metabolic roles. However, Joat et al. (2023) recently identified Dickeya as residents of the gut microbiota of commercially raised layer flocks. Increased abundance of this genus has been linked to bacterial microbiomes found in smokeless tobacco, which poses a risk to human oral health, potentially leading to oral tumorigenesis (Vishwakarma et al. 2023). Additionally, increased abundance of the Dickeya genus has been linked to obesity in children (Nirmalkar et al. 2018) and fish spoilage (Abdullah et al. 2023). These findings highlight the multifaceted nature of the Dickeya genus and their potential impact on host health. In the context of AIV, the elevated presence of Dickeya may signify disruptions in the host's microbiome composition, potentially influencing disease progression and host susceptibility. Further studies are needed to validate the association between the Dickeya genus and AIV H9N2 infection. At the species level, the present study showed a reduction in the abundance of another beneficial bacterium, Streptomyces sp., in both evaluated sites on d5-d9, following AIV H9N2 infection. While the limitation of 16S sequencing technology in terms of sequencing depth at the specie level is acknowledged, the V3V4 hypervariable region have been reported to offer modest taxonomic resolution at an increased cost (Garcia-Lopez et al. 2020, Oladokun et al.

2021). Members of the Streptomyces genera are known for producing bioactive secondary metabolites, particularly antibiotics used in medical, agricultural, and veterinary applications (Chater 2006). The probiotic and beneficial effects of Streptomyces-derived metabolites have been demonstrated in various models, including in vitro (García-Bernal et al. 2015), invertebrate (Kroiss et al. 2010, Swe et al. 2019, Mazón-Suástegui et al. 2020), and human models (Bolourian and Mojtahedi 2018).

To investigate the mechanism behind AIV H9N2-induced respiratory microbiota dysbiosis in this study, selected cytokine gene expression were quantified. AIV H9N2 is known to replicate efficiently in the trachea compared to other respiratory sites (Ngunjiri et al. 2021). Results revealed a significant increase in IFN- $\beta$ and viperin gene expression at d5 pi, indicating a peak antiviral response at this time point. This coincided with the lowest microbiota diversity observed in the study. Type-I interferons, including IFN- $\alpha$  and IFN- $\beta$ , are essential for innate antiviral responses in chickens, inducing an elevated state of anti-viral responses at the cellular level and restricting viral replication processes (McNab et al. 2015). Consistent with previous reports, avian type-I IFNs have been associated with the proliferation of Proteobacteria (Xia et al. 2004, Deriu et al. 2016). Ngunjiri et al. (2021) have demonstrated upregulation of IFN- $\beta$  in the trachea during H5N2 AIV infection, supporting the current findings. In a mouse model of influenza and bacterial coinfection, Lee et al. (2015) confirmed the crucial role of IFN- $\beta$  in AIV-induced microbiota dysbiosis. Commensal microbiota normally regulates IFN- $\beta$  production through transcription factors like c-Jun and NF-k $\beta$ , vital for immune homeostasis (Abt et al. 2012). IFN- $\beta$  production contributes to microbiota dysbiosis by potentially exerting direct antimicrobial effects or indirectly influencing bacterial gene expression. Furthermore, dysregulated IFN- $\beta$  signaling, commonly observed in chronic infections, could disrupt metabolic pathways, impacting the acquisition of nutrients and metabolites necessary to maintain a balanced microbiota composition (Zhou et al. 2022). The interaction between the influenza A virus and host immune-regulatory factors influences viral growth, with IFN- $\beta$  and antiviral interferon-stimulated genes (ISGs) playing a key role in the early stage of infection (Ortigoza et al. 2012). As a key downstream anti-viral ISGs, Viperin is greatly expressed in the cells, inducible by both type-I and type-II interferons and is known to inhibit AIV replication (Wang et al. 2007). To this end, our observation of marked expression of the Viperin gene in the birds infected with AIV H9N2, is in line with a previous study where the peakexpression was observed at d5 pi following AIV (H1N1) infection in a murine model (Tan et al. 2012). The transcriptional signals observed, particularly the upregulation of IFN- $\beta$  and viperin, suggests they likely play a significant role in shaping the respiratory microbiome during H9N2 infection.

Despite the presented results, a few limitations could affect the generalization of the findings. Potential covariates, such as age at the time of sampling and technical variations could influence the observed results. Future studies should consider including these covariates in their analysis to enhance the robustness of similar investigations. While the longitudinal experimental design captures changes over time, is logistically easier to manage, ethically sound, and reduces stress from bird handling, it might have less power to detect individual-level changes over time. To increase the robustness of the investigation, future studies could consider increasing the sample size at each time point. Another potential limitation is the absence of negative extraction controls during the DNA extraction process. While the extraction kit has been validated with sterile PBS as a negative control in previous exper-

iments, the risk of contamination remains in this study. Future research should incorporate validated negative controls to mitigate this risk. Additionally, while this study did not directly analyze the relationship between viral replication and the respiratory microbiota, the observed results on cytokine expression and microbiota diversity suggest a possible interplay. Therefore, further targeted respiratory microbiota manipulation research is needed to directly link these findings and explore the precise mechanisms through which the respiratory microbiota may influence viral replication and immune responses.

### **Conclusions**

The study presented here demonstrated that AIV H9N2 replication in the respiratory tract elicited microbial dysbiosis, evidenced by reduced diversity and the lowest levels observed at 5 days post-infection. In addition to the taxonomic alterations associated with AIV H9N2-induced respiratory dysbiosis, further investigations are warranted to elucidate the functional dysbiotic characteristics of these shifts. Our findings also suggest that AIV H9N2induced respiratory dysbiosis is facilitated by type-I interferonmediated mechanisms, particularly through increased IFN- $\beta$  expression, potentially achieved via direct antimicrobial effects or indirectly through modulation of microbial gene expression or metabolite availability. These effects could subsequently result in elevated expression of interferon-stimulated genes such as viperin. Together, this study supports the hypothesis that chicken respiratory microbiota plays a role in limiting viral replication and initiating anti-influenza immune responses, likely through the modulation of type-I interferon signaling. Therefore, targeted manipulation of the respiratory microbiota might provide additional benefits in controlling avian influenza infections.

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## **Author contributions**

Conceptualization—S.S., S.O., M.A.; methodology—S.O., M.A., A.I.M., M.S.D., S.R.; investigation—S.O., M.A., A.I.M., S.R., F.F., J.S., K.B., M.S.D.; formal analysis—S.O., M.A., A.I.M., M.S.D., J.S., S.R.; writing—original draft preparation—S.O.; writing—review & editing—S.S., S.O., M.A., A.I.M., F.F., J.S., K.B., M.S.D., S.R.; funding— S.S. All authors have read and agreed to the published version of the manuscript.

## Supplementary data

Supplementary data is available at FEMSMC Journal online.

Conflict of interest: Authors declare no conflict of interest.

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### Data availability

The 16S rRNA gene sequencing data from this study are available at the NCBI repository under BioProject ID PRJNA1104572 and Sequence Read Archive (SRA) submission number SUB14400914, titled 'Avian Influenza and Poultry Microbiome'.

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