

1 **Intestinal lamina propria supports acquired eTreg suppressor function**

2
3 **Yisu Gu*¹, Raquel Bartolomé-Casado*^{2,3}, Chuan Xu², Alina Janney¹, Cornelia**
4 **Heuberger¹, Claire Pearson¹, Sarah Teichmann^{2,4}, Emily E Thornton*^{5,6}, Fiona Powrie*¹**

5
6 ¹Kennedy Institute of Rheumatology, NDORMS, University of Oxford

7 ²Wellcome Sanger Institute, Wellcome Genome Campus, Hinxton, Cambridge

8 ³Department of Pathology, Oslo University Hospital – Rikshospitalet, Oslo, Norway

9 ⁴Theory of Condensed Matter, Cavendish Laboratory, Department of Physics, University of Cambridge,
10 Cambridge

11 ⁵MRC Human Immunology Unit, MRC Weatherall Institute of Molecular Medicine, University of Oxford

12 ⁶Nuffield Department of Medicine, University of Oxford

13 *these authors contributed equally

14 15 **Abstract**

16 The intestinal immune system must maintain tolerance to commensal microbiota and self
17 antigens whilst defending against invading pathogens. Recognising how homeostasis is
18 established and maintained in a complex immune environment such as the gut is critical to
19 understanding how to re-establish tolerance once broken in inflammatory disorders.
20 Peripherally induced regulatory T cells (Tregs) play a key role in homeostasis. In intestinal
21 tissue, Tregs work in concert with a diverse network of cells but which cellular interactions
22 occur to instruct Treg adaptation and acquisition of distinct Treg suppressor function is not
23 clear. We used two-photon *in vivo* live imaging and NICHE-seq [1] to deep phenotype
24 *Helicobacter hepaticus* (*Hh*)- specific Tregs with shared specificity but distinct spatially
25 compartmentalised functions in the tissue. We show transcriptionally distinct central Treg
26 (cTreg) and effector Treg (eTreg) populations in lymphoid versus gut tissue. The lamina
27 propria (LP), and not embedded lymphoid aggregates (LA), is the key location of acquired
28 immune suppressor eTreg function. Tregs recruited to the LP compartment are the dominant
29 interacting cell type and acquired a more effector Treg profile with upregulation of *Areg*, *Gzmb*,
30 *Icos*, *Tigit*, *Tnfrsf4* (OX40), and *Tnfrsf18* (GITR). We identify IL-1 β ⁺ macrophages, CD206⁺
31 macrophages, and ILC2 in the LP niche as the key players governing Treg survival and
32 function. In contrast, LA, dominated by interactions with ILC3s and populations of IL-6⁺ DCs,
33 are equipped to tip the balance towards a pro- inflammatory response. By functionally isolating
34 the gut tissue from secondary lymphoid organs, we show that eTregs maintain their phenotype
35 in the context of inflammatory insult. Blocking their key effector molecule, IL-10, results in
36 locally differentiated Th17 cell proliferation without overt inflammation due to local IL-10
37 independent mechanisms that constrain inflammation. Our results reveal a previously
38 unrecognised spatial mechanism of tolerance, and demonstrate how knowledge of local

39 interactions can guide cell function and potentially be manipulated for the next generation of
40 tolerance-inducing therapies.

41

42 **Results**

43

44 The pathobiont *Helicobacter hepaticus* (*Hh*) establishes life-long infection in the cecum of
45 normal mice. A key host adaptation ensuring immune homeostasis in the face of chronic
46 infection is the production of IL-10 by Tregs [2-4]. Maladaptation of this response results in
47 colitis in mice, and similar processes are thought to underlie very early onset inflammatory
48 bowel disease (VEO-IBD) with deficiencies in the IL-10 pathway a major cause [5]. The MLN
49 has been shown to be a key site of Treg induction [6], but the key anatomical location for
50 induction and maintenance of effector Treg suppressor function is yet to be elucidated. We
51 used HH7-2tg T cells [7] (TCR^{Hh}) in *Hh* colonised hosts to follow the natural history of
52 antigen-specific T cells experiencing key interactions and gaining and sustaining Treg effector
53 functions in the tissue microenvironment.

54

55 To map where adaptive responses to *Hh* occur, we characterised the intestinal lymphoid and
56 non-lymphoid tissue compartments of WT C57BL/6 mice. Lymphoid tissue comprised,
57 secondary lymphoid organs (SLO) including mesenteric lymph nodes (MLN), the caecal patch
58 (CP) and distal colon organised lymphoid structures (OLS) (Fig 1a). Small lymphoid
59 aggregates (LA) are present in the caecum and proximal colon. LA do not have organised T
60 and B-cell zones, and contain a spectrum of tissue organisation from cell aggregates to
61 cryptopatches and isolated lymphoid follicles (ILF) (Supp Fig 1a-c). Previous tracking of naïve
62 TCR^{Hh} *in vivo* showed differentiation to Rorγ⁺ Foxp3⁺ Tregs in colons, but that work did not
63 exclude OLS from the analysis [7]. We sought to understand the natural history of TCR^{Hh} to
64 *Hh* in the context of lymphoid and non-lymphoid compartments, referring to the ‘tissue’ as the
65 composite of the lamina propria (LP) and the lymphoid aggregates (LA), but exclusive of OLS.

66

67 Naive TCR^{Hh} transferred into *Hh*- colonised hosts (Fig 1b and Supp Fig 1d) home to the SLOs
68 within 24 hours and onwards to the tissue approximately 1 week later (Fig 1c-d). Co-transfer
69 of congenically marked TCR^{Hh} and TCR^{Hh} *Rag1*^{-/-} cells confirmed no effect of endogenous
70 TCR α rearrangement (Supp Fig 2a-d). Further, TCR^{Hh} were not detected in un-colonised hosts,
71 demonstrating their dependence on cognate antigen for survival (Supp Fig 2e). To pinpoint
72 where important cellular interactions and activation steps take place, we quantified

73 proliferation, Treg differentiation, TCR signalling and IL-10 production across the tissue
74 compartments. Despite early activation in lymphoid tissues (Supp Fig 2f), at 14 days after
75 transfer, tissue TCR^{Hh} cells are more proliferative than their lymphoid counterparts (Fig 1e),
76 and a larger proportion of TCR^{Hh} cells differentiated into Foxp3⁺ Tregs (Fig 1f) within tissue
77 than SLOs.

78

79 As Treg suppressor function has been shown to depend on the T cell receptor (TCR) [8], we
80 wondered whether ongoing TCR stimulation also occurs in TCR^{Hh} in any of the defined tissue
81 microenvironments. Transfer of naïve T cells from TCR^{Hh} crossed to Nur77^{GFP} mice [10]
82 (TCR^{Hh} Nur77^{GFP}) into *Hh*-colonised hosts showed the proportion expressing GFP and GFP
83 MFI as a measure of TCR signalling to be highest in the tissue at 11 days post transfer (Fig
84 1g). Transfer of TCR^{Hh} crossed to B6.Foxp3^{hCD2} IL-10^{GFP} reporter mice [9] (TCR^{Hh}IL-10^{GFP})
85 also revealed the tissue as the site of the highest proportion of IL-10⁺ TCR^{Hh} cells (Fig 1h). To
86 determine whether TCR engagement and IL-10 production were due to local stimulation, we
87 used the sphingosine 1-phosphate receptor agonist FTY720 to block lymph node egress
88 following TCR^{Hh} recruitment into the gut to ensure detection of local GFP induction (Supp Fig
89 3a-c). Again, the strongest TCR signalling and highest IL-10 production was detected in tissue
90 TCR^{Hh} cells, which were on par with controls (Supp Fig 3d-g). Absolute numbers of tissue
91 TCR^{Hh} were comparable between FTY720 treated and controls, suggesting local proliferation
92 of TCR^{Hh} (Supp Fig 3h). These data point to the gut tissue as the dominant site of ongoing Treg
93 activation and effector function in the maintenance of tolerance to the pathobiont *Hh*. In fact,
94 lymphotoxin- α deficient mice (LT α ^{-/-}) that are devoid of MLNs, CP, OLS and LA (Supp Fig
95 4a-b, and data not shown) [10] still supported TCR^{Hh} homing into the tissue (Supp Fig 4c-e).
96 However, in the absence of lymph nodes, TCR^{Hh} did not differentiate into Tregs (Fig 1i),
97 indicating a non-redundant role for SLOs in Treg differentiation. TCR^{Hh} cells in LT α ^{-/-} hosts
98 retained the ability to make IL-10 in similar absolute numbers, albeit at a lower frequency
99 compared to controls (Fig 1j-k, Supp Fig 4f). These data show SLOs are critical for Treg
100 induction, but interactions in the tissue can induce non-Treg TCR^{Hh}IL-10 production
101 independent of SLOs and prevent colitis (Supp Fig 4g).

102
103

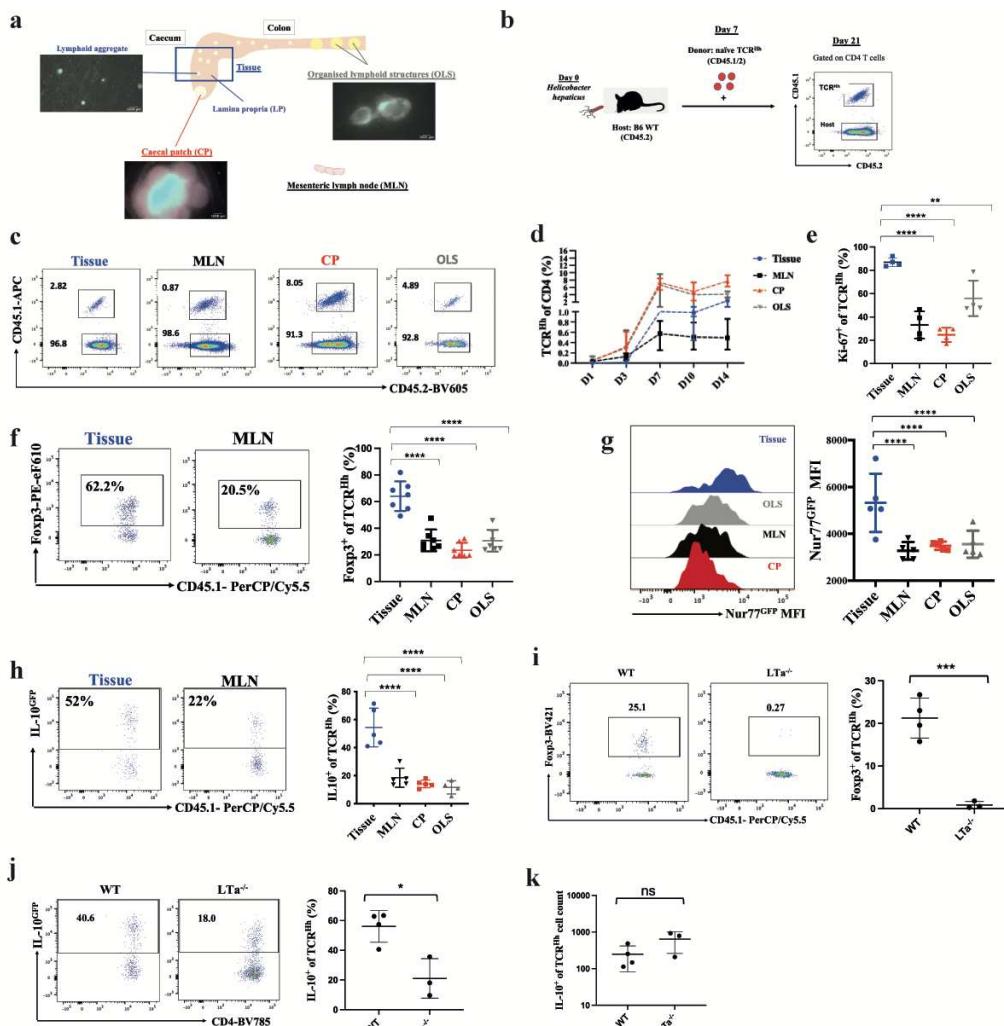


Figure 1. Colon tissue supports the highest IL10 production and strongest TCR signalling in response to *Helicobacter hepaticus*.

a. Diagram of tissue and lymphoid structures in the murine gut, with representative images of caecal patch (CP), organised lymphoid structures (OLS) and lymphoid aggregates (LA) in hCD2-DsRed mouse (scale bar 1000 μ m).

b. Transfer of naïve CD45.1⁺ TCR^{Hh} T cells into *Hh*-colonised hosts.

c. Representative FACS of T TCR^{Hh} 14 days post transfer at the indicated sites.

d. Frequency of TCR^{Hh} among total CD4 T cells at indicated time points post transfer.

e. Frequency of Ki-67⁺ of TCR^{Hh} at 14 days post transfer at the indicated sites.

f. Representative FACS and frequency of Tregs of TCR^{Hh} at 14 days post transfer.

g. Representative histogram overlay and GFP MFI of TCR^{Hh}Nur77^{GFP} 11 days post transfer.

h. Representative FACS and frequency of IL-10⁺ among TCR^{Hh}IL-10^{GFP} 11 days post transfer.

i. Representative FACS and frequency of Tregs among TCR^{Hh} in tissue of WT and LT $\alpha^{-/-}$ hosts at 10 days post transfer.

j. Representative FACS and frequency of IL-10⁺ among TCR^{Hh} in tissue of WT and LT $\alpha^{-/-}$ hosts at 10 days post transfer.

k. Absolute cell count of IL-10⁺ among TCR^{Hh} in tissue of WT and LT $\alpha^{-/-}$ hosts at 10 days post transfer.

Our results demonstrate tissue interactions play a dominant and previously unrecognised role in TCR stimulation and IL-10 production of microbe-reactive T cells, including Tregs. We next wished to determine if the LP and LA niches played individual roles in shaping the TCR^{Hh} response to *Hh*. We bred TCR^{Hh}Nur77^{GFP} and TCR^{Hh}IL-10^{GFP} to hCD2-DsRed mice

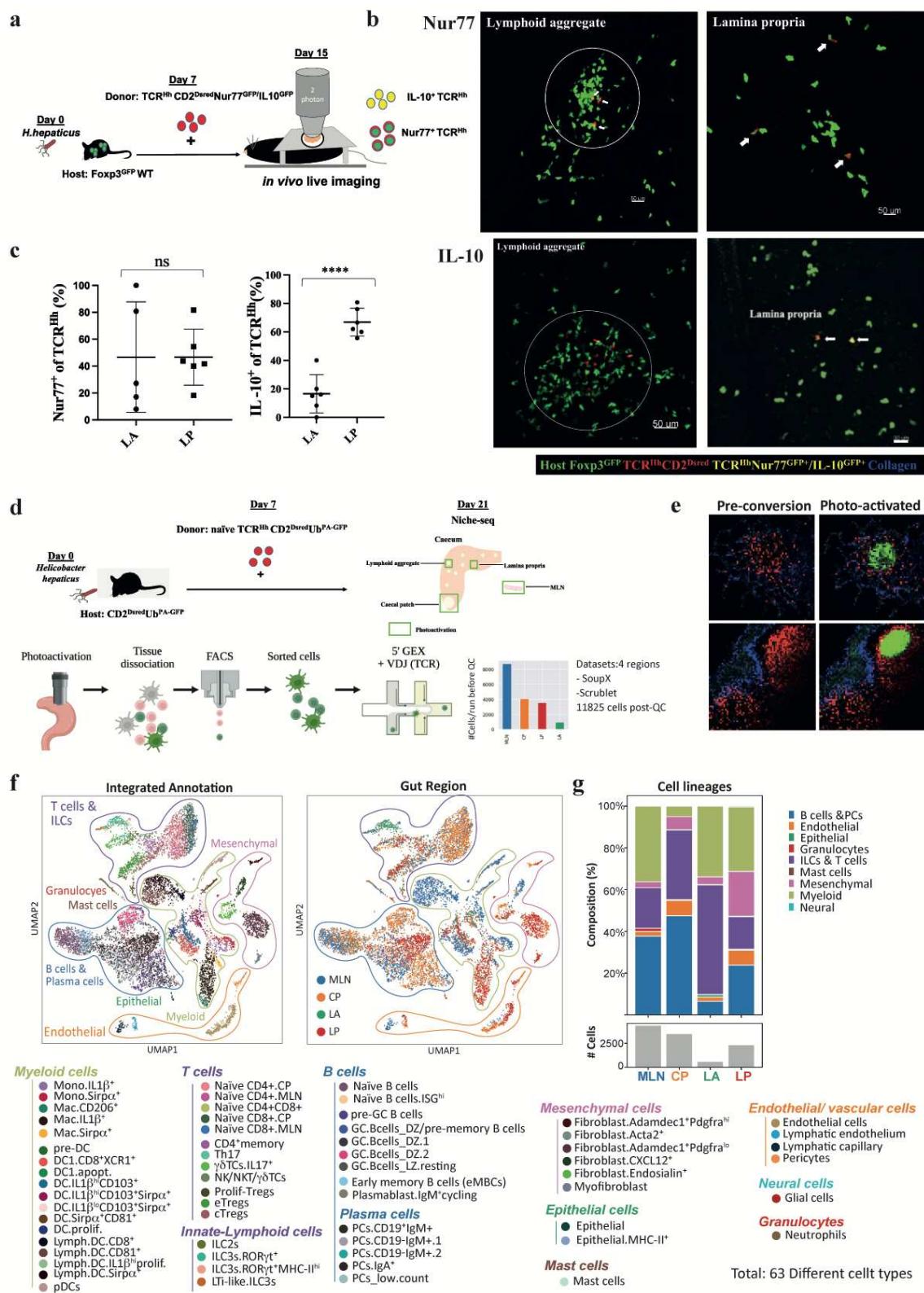
127 [11] ($\text{TCR}^{\text{Hh}} \text{CD2}^{\text{Dsred}} \text{Nur77}^{\text{GFP}}$ or $\text{TCR}^{\text{Hh}} \text{CD2}^{\text{Dsred}} \text{IL10}^{\text{GFP}}$) and separately transferred naïve T
128 cells from these reporter lines into *Hh*-colonised $\text{Foxp3}^{\text{GFP}}$ hosts for *in vivo* two-photon live
129 imaging (Fig 2a). Host LA containing Tregs appear as green clusters. Transferred TCR^{Hh} are
130 red, but co-express GFP upon TCR stimulation or IL-10 production. Acquisition in 3-
131 dimensions allows for distinction of green/red co-expression versus two overlapping cells
132 (Supp video 1).

133
134 Within tissue, $\text{TCR}^{\text{Hh}} \text{Nur77}^{\text{GFP}+}$ T cells were present within LA (Fig 2b). Surprisingly,
135 $\text{TCR}^{\text{Hh}} \text{Nur77}^{\text{GFP}+}$ cells were also located within the LP, spatially distant from LA (Fig 2b).
136 This even distribution of recently activated T cells (Fig 2c) suggest TCR-MHCII interactions
137 occur between TCR^{Hh} and LP- resident APCs, and/or rapid migration of TCR-stimulated
138 TCR $^{\text{Hh}}$ out of LA into LP after TCR engagement. Indeed, time-lapse videos reveal
139 TCR $^{\text{Hh}} \text{Nur77}^{\text{GFP}+}$ cells to be highly motile (Supp video 2). We next wondered which tissue
140 niche supported the highest production of IL-10 [12]. *In vivo* live imaging of donor TCR^{Hh}
141 $\text{CD2}^{\text{Dsred}} \text{IL10}^{\text{GFP}}$ in *Hh*-colonised $\text{Foxp3}^{\text{GFP}}$ hosts demonstrated that IL-10 production by
142 TCR $^{\text{Hh}}$ cells was largely restricted to the LP (Fig 2b-c). IL-10 $^+$ TCR $^{\text{Hh}}$ cells were actively
143 motile throughout the tissue (Supp video 3), suggesting far-reaching suppressor function in
144 response to *Hh*.

145
146 Because TCR $^{\text{Hh}}$ cells that have recently experienced TCR stimulation are distributed
147 throughout the LP and LA niches, whereas production of the Treg effector molecule IL-10 is
148 highest in the LP niche, we wondered which cellular interactions and/or molecular cues in the
149 LP niche drive TCR $^{\text{Hh}}$ activation and Treg effector functions. We used two-photon
150 photoactivation labelling of cells within T cell niches followed by scRNA-seq (NICHE-seq)
151 to uncover transcriptional states and cellular composition of tissue microniches [1, 13]. Naïve
152 T cells from $\text{TCR}^{\text{Hh}} \text{CD2}^{\text{Dsred}}$ crossed to ubiquitously expressing photoactivatable GFP mice
153 ($\text{TCR}^{\text{Hh}} \text{CD2}^{\text{Dsred}} \text{Ub}^{\text{PA-GFP}}$) [13] were transferred into *Hh*-colonised $\text{CD2}^{\text{Dsred}} \text{Ub}^{\text{PA-GFP}}$ hosts so
154 both host and donor cells were photoactivatable. DsRed was used to visualise donor cells,
155 and to mark T cell zones in host lymphoid tissue. We used two-photon microscopy to label
156 donor and host cells with photoactivated GFP from four regions: the T cell zones of MLNs
157 and CP, the LA and LP (Fig 2d-e and Supp Fig 5a). scRNAseq of GFP $^+$ cells was performed
158 using 10X and 5' GEX and VDJ TCR sequencing.

159

160 A model built on previously published work [14-21] supported annotation of a spectrum of
161 myeloid cells, T cells, ILCs, B cells, plasma cells, epithelial cells, mesenchymal cells,
162 endothelial cells, and granulocytes across all 4 sites (Fig 2f-g, Supp Fig 5b, Supp Fig 6-7, and
163 Supp Table 1). The relative distributions of these major intestinal cell types differ according
164 to region, with a sizeable T cell population present in all micro-niches (Fig 2g). To
165 understand how location affects suppressor function, we focussed on the lymphoid and
166 myeloid populations in each niche that have the potential to form meaningful interactions
167 with TCR^{Hh} .



174 **b.** Representative images of TCR^{Hh}Nur77^{GFP} cells (top panels) and TCR^{Hh}IL-10^{GFP} (bottom panels) in the
175 lymphoid aggregates (LA) and lamina propria (LP). TCR^{Hh} Nur77^{GFP}/IL-10^{GFP} positive cells indicated by white
176 arrowheads.
177 **c.** Frequency of Nur77^{GFP} (left) and IL-10^{GFP} (right) positive of TCR^{Hh} in the LA and LP.
178 **d.** NICHE-seq of gut tissue: Transfer of TCR^{Hh}CD2^{Dsred}Ub^{PA-GFP} into CD2^{Dsred}Ub^{PA-GFP} hosts with subsequent
179 photo-activation, cell sorting and scRNA-seq. Numbers of single cells acquired before and after QC as
180 indicated.
181 **e.** Representative images of pre- and post-photoactivation of the LA (top panels) and T cell zone of CP(bottom
182 panels) of CD2^{Dsred}Ub^{PA-GFP} hosts.
183 **f.** UMAP visualisation of total cell subsets and detailed cell type annotations in each cell lineage (left) and their
184 distribution in each gut location (right).
185 **g.** Bar chart showing cell subsets and total cell numbers at the indicated gut locations.
186

187 The T/ILC compartment comprises 16 transcriptionally distinct subsets (Fig 3a). As expected,
188 naïve CD4⁺ and CD8⁺ T cells were mainly located in the MLNs and CP. ILC3s were dominant
189 in the LA and ILC2s in the LP. The LP also contained a sizeable population of memory CD4
190 T cells. As suggested by the imaging data, Tregs were enriched in both LP and LA.
191

192 Subclustering of Tregs revealed 3 subpopulations that are differentially distributed between
193 SLOs and the tissue (Fig 2b). Lymphoid Tregs express *Tcf7* and *Ccr7* [22, 23], tissue Tregs
194 express effector-associated molecules *Ctla4*, *Maf* and *Tnfrsf4*, and proliferating Tregs express
195 histone genes (Fig 3b) [7, 24]. To highlight their distinct functional phenotype and spatial
196 segregation, we refer to lymphoid associated Tregs as central Tregs (cTregs) and tissue resident
197 Tregs as effector Tregs (eTregs).
198

199 To determine whether the host and transferred cells were comparable for downstream analysis,
200 we performed a T cell clonotype analysis. TCR repertoire sequencing revealed the TCR^{Hh} clone
201 (clonotype 554 and 249) as well as many host clonotypes to be present in all four regions and
202 predominantly differentiate into the eTreg phenotype (Fig 3c). Host and TCR^{Hh} Tregs had
203 similar mean expression of classical suppressor genes such as *Ctla4*, *Tigit*, and *Il10* (Supp Fig
204 8a), allowing combination of clonotypes for further analysis.
205

206 We next examined myeloid APC subset(s) across the tissue microniches, focusing especially
207 on cells that may affect eTreg function in the tissue [25]. Mapping of monocyte/macrophage
208 and dendritic cell subsets across the 4 regions did not reveal a unique APC population (Fig 3d);
209 however, we identified an enrichment of IL-1 β ^{hi}CD103⁺Sirp α ⁺ dendritic cells within LA,
210 whilst IL-1 β ⁺ and CD206⁺ macrophages and IL-1 β ⁺ monocytes were most abundant in the LP
211 (Fig 3e).
212

213 By comparing APC populations present at >30 cells per microniche, we could see MHCII score
214 for LP-resident IL-1 β^+ macrophages was comparable to IL-1 β^{hi} CD103 $^+$ and IL-
215 1 β^{hi} CD103 $^+$ Sirp α^+ dendritic cells (Fig 3f, gene list: Supp Table 2). Taking abundance and
216 MHCII expression into consideration, IL-1 β^+ macrophages dominate the T cell activation
217 landscape in the LP, whilst IL-1 β^{hi} CD103 $^+$ Sirp α^+ dominate in the LA. MHCII $^+$ ILC3s have
218 been shown to regulate CD4 $^+$ T cell responses to gut commensals and maintain homeostasis in
219 the MLN [26, 27]. LA are enriched for ILC3s, with a small subset expressing MHCII; however,
220 this is a smaller fraction than present in the MLN (Fig 3f and Supp Fig 8b).

221
222 After defining the cellular composition, we sought to understand the potential cellular
223 interactions at each location. We performed CellPhoneDB analysis [28] to understand the
224 interactions between eTregs and T/ILC/myeloid cells for each tissue micro-niche based on
225 populations with greater than 30 cells present. In the LP, eTregs are capable of interacting with
226 all cell populations within the niche with many potential interactions across APC subsets (Fig
227 3g). This fits with their dynamic nature as observed previously with intravital microscopy
228 (Supp video 3). LA interaction diagram demonstrates eTregs have more interactions with IL-
229 1 β^+ CD103 $^+$ Sirp1 α^+ DCs, in particular (Fig 3g).

230
231 CellPhoneDB analysis of LA and LP catalogue key interactions between cells in each tissue
232 microniche. Of particular interest are the chemokine/chemokine receptor pairs that bring APCs
233 and eTregs together, TGF β , and cell-cell contact molecules, which all differ between LP and
234 LA (Fig 3h). Within the LP microniche, eTregs have the strongest *Ccr2/Ccl8* (Supp Fig 8c),
235 *Ptprc/Mrc1*, and *Csf1/Csfr1* pathway interactions with CD206 macrophages suggesting these
236 cells may play a dominant role beyond TCR engagement. Within the LA microniche, the
237 *Ccr2/Ccl8*, *Ptprc/Mrc1*, and *CD72/Sema4d* instead connect eTregs with IL-1 β^+ macrophages,
238 and *Cxcr3/Cxcl9*, *Icam1/Itgal* interactions connect eTregs with LA DC populations. In addition
239 to differences in interactions with APCs, the eTregs in the LP had the strongest *Icam1/Itgal*
240 interactions with CD4 memory T cells and *Ltbr/Ltb* interactions with ILC2s whereas eTregs in
241 the LA could interact with ILC3s through *Icam1/Itgal* (Fig 3h).

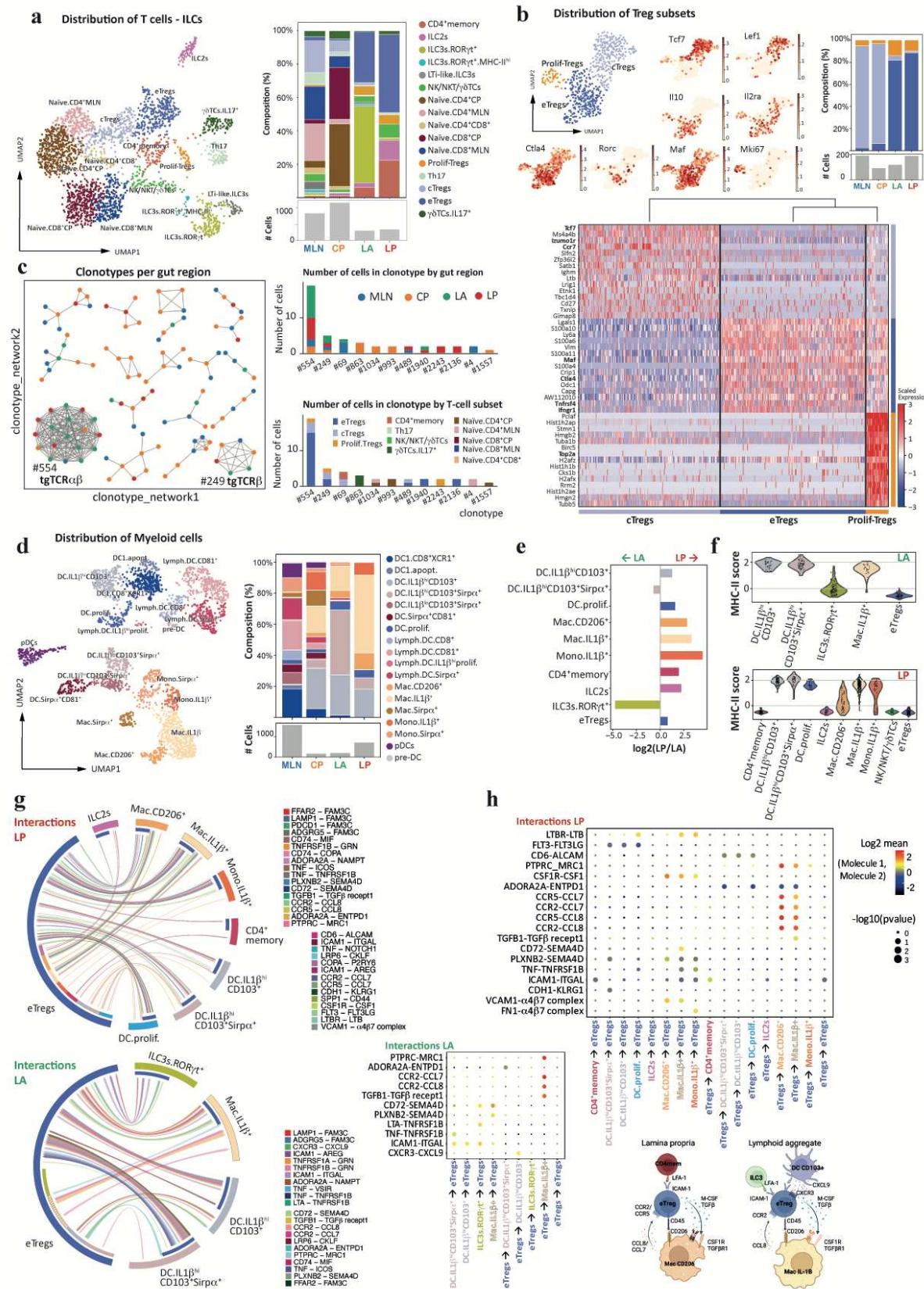


Figure 3. Lymphoid and myeloid cell subset data highlight distinct interactions in LP and LA microniches

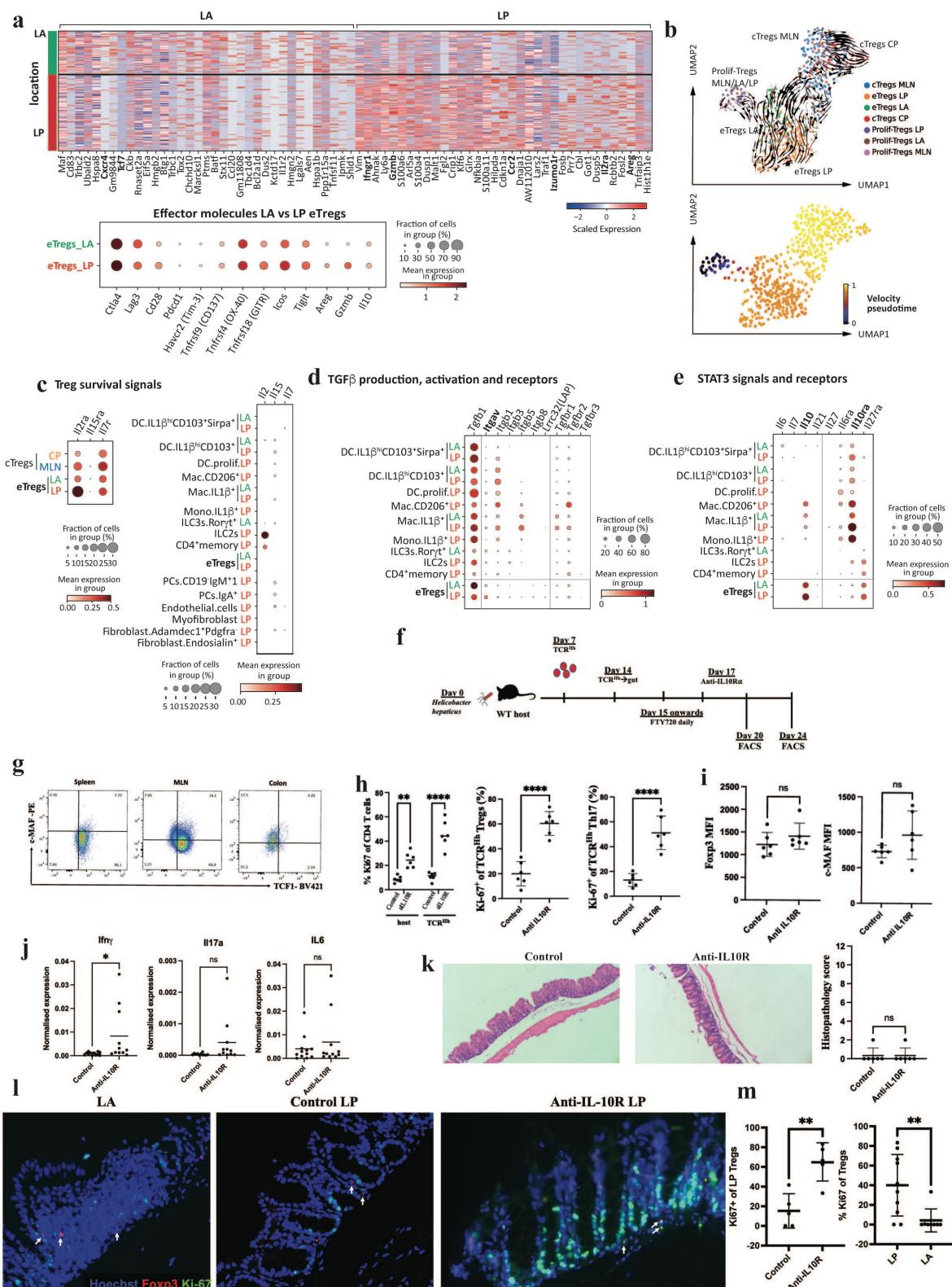
a. UMAP visualisation of lymphoid subsets across all locations (left). Bar chart showing distribution of lymphoid subsets and cell numbers for each gut location (right). Total cell numbers at the indicated locations (bottom right).

248 **b.** UMAP visualisation of Treg subsets across all locations (top left) and overlay on the UMAP plot of the
249 expression of selected genes (centre). Bar chart showing the distribution of Treg subsets and total cell numbers
250 at the indicated locations (right). Heatmap of differentially expressed genes in the indicated Treg subsets across
251 all locations (bottom).
252 **c.** Visualisation of clonotype network analysis of TCR clones (left). Barchart showing the distribution of TCR
253 clones by gut location (right top) and T cell subset (right bottom).
254 **d.** UMAP visualisation of total myeloid subsets across all locations (left). Bar chart showing myeloid subsets
255 and total cell numbers at the indicated locations (right).
256 **e.** Bar plot showing the fold change (log2) of proportions for myeloid, T cells and ILCs between LP and LA.
257 **f.** Violin plots of MHC-II expression score across lymphoid and myeloid cells in the LA and LP (restricted to
258 cell types with >30 cells per region).
259 **g.** Chord diagrams showing significant interactions of Tregs with lymphoid and myeloid cells, separately for
260 each gut location, LP (left) and LA (right), restricted to cell types with >30 cells per region.
261 **h.** CellPhoneDB analysis of receptor/ligand interactions in the LP (top) and LA (centre), restricted to cell types
262 with >30 cells per region and excluding MHC-II interactions. Schematic summarising the most relevant cell-cell
263 interactions (bottom).
264
265 Based on our imaging data (Fig 2b-c) and the differences in cell interactions within the tissue
266 microniches, we suspected the LP and LA eTregs would have additional phenotypic
267 differences. By comparing the eTreg populations across the tissue micro-niches, we found
268 upregulation of *Gzmb*, *Areg*, *Ccr2*, and *Il2ra* in the LP microniche and *Cxcr4* in the LA (Fig
269 4a) [29, 30]. This highlights the LP as a key site that favours optimal eTreg function. This
270 was also supported by mean expression data of known Treg effector molecules showing
271 increases in *Areg*, *Gzmb*, *Icos*, *Tigit*, and *Tnfrsf18* (GITR) in the LP (Fig. 4a). Velocity
272 pseudotime analysis of eTreg, cTreg, and proliferating Tregs suggests a trajectory of eTregs
273 from MLN/CP to LA and on to LP with proliferating Tregs more closely related to eTregs
274 (Fig 4b and Supp Fig8d-e). This raises questions about whether LP eTregs are terminally
275 differentiated or whether these cells are plastic and capable of proliferating *in situ*.
276
277 With all the data pointing to unique interactions and enhanced eTreg functions in the LP niche,
278 we wanted to determine whether key known pathways such as survival cytokines and
279 upregulators of Maf, TGF β and STAT-3 cytokines, [14, 31, 32] are also spatially segregated
280 within the tissue microniches. To understand which survival cytokines are required in the LP
281 niche, we looked at receptors for gamma-chain cytokines on our Treg populations of interest.
282 eTregs in the LP and LA express *Il2r* with highest expression in the LP microniche (Fig 4c).
283 To determine which are the important cells that produce IL-2, we looked for expression in the
284 cells present in the tissue. ILC2 and CD4 memory cells are the dominant sources of IL-2, with
285 both populations present in the LP microniche and shown to have potential for interactions
286 with eTregs in the LP (Fig 4c and Fig 3g).
287

288 TGF β is widely expressed by most myeloid and lymphoid populations, including eTregs in the
289 LA and LP (Fig 4d). However, eTregs in the LP are one of the few tissue populations that also
290 express high levels of *Itgav* as well as *Itgb8* (Fig 4d), encoding the integrin subunits alpha V
291 and beta 8 that are required to activate latent TGF β [33]. This activated TGF β can act in an
292 autocrine and paracrine manner to control local immune responses, which is required for
293 immune homeostasis [34, 35]. We next performed a comprehensive search of STAT3-
294 dependent cytokine genes across the most abundant myeloid and lymphoid subsets in the tissue.
295 We found upregulated gene expression of the pro-inflammatory cytokine *Il6* in IL-
296 1 β^+ CD103 $^+$ Sirp α^+ DCs resident in the LA (Fig 4e). In contrast, the LP was dominated by *Il10*,
297 expressed primarily by eTregs with some expression in CD206 $^+$ and IL-1 β^+ macrophage
298 subsets (Fig 4e). A small amount of *Il27* could be detected in the IL-1 β^+ macrophage
299 population, specifically in the LP. Together these data establish myeloid cytokine microniches
300 capable of tuning STAT-3 signals, potentially establishing inflammatory (LA) and anti-
301 inflammatory (LP) niches within the intestinal tissue. We next examined expression levels of
302 cytokine receptors. Moderate levels of *Il6ra* can be detected across myeloid populations, and
303 *Il27ra* expression is largely restricted to eTreg, CD4 $^+$ memory T cells, and ILC2 populations.
304 *Il10ra* is highly expressed on CD206 $^+$ and IL-1 β^+ macrophages and IL-1 β^+ monocytes,
305 especially in the LP niche (Fig 4e). Macrophage sensing of IL-10 is critical for gut homeostasis
306 [36, 37], and this data supports a positive feedback loop in the LP. CD206 $^+$ and IL-1 β^+
307 macrophages respond to IL-10 and produce IL-10 and IL-27 [38, 39], activating STAT3 and
308 supporting the *Maf* program in eTregs in the LP. This raises the question of whether acute
309 perturbation of the IL-10 pathway could disrupt the LP eTreg phenotype and function.

310
311 After identifying spatially separated cTreg and eTreg responses to *Hh* and enhanced eTreg
312 suppressor function within the LP, we sought to determine whether an inflammatory challenge
313 that interferes with IL-10, a key eTreg effector molecule in the LP microniche, can affect eTreg
314 phenotype or proliferation. We transferred TCR^{Hh} into colonised hosts as before. TCR^{Hh}
315 migrate to the gut 7 days after transfer and adopt an IL10 $^+$ Treg fate (Fig 1d, f and h). To isolate
316 the interactions in the gut tissue niches from the SLOs, FTY720 was injected daily from day
317 8, resulting in a pool of TCR^{Hh} cells trapped in the tissue (Fig 4f). We subsequently disrupted
318 the IL10 positive feedback loop with an IL10R α blocking antibody 10 days after cell transfer.
319 Flow cytometry analysis validated NICHE-seq RNA expression of *Tcf7* in cTregs and *Maf*
320 expression in eTregs (Fig 4g). At 3 days after anti-IL10R α treatment (13 days after TCR^{Hh} cell

321 transfer), there was no significant difference between the two treatment groups in terms of
322 TCR^{Hh} Treg proportion or phenotype (Supp Fig 9a). However, by 7 days after anti-IL10R α
323 treatment (17 days after TCR^{Hh} cell transfer), there was an increase in local proliferation of
324 TCR^{Hh} and host T cells with approximately 60% of TCR^{Hh} Tregs and Th17s expressing Ki-67
325 (Fig 4h). It has been suggested that eTregs may be terminally differentiated and therefore less
326 able to proliferate; however, proliferating eTregs expressed similar levels of Foxp3 and C-maf
327 compared to controls (Fig 4i and Supp Fig 9b). 7 days after anti-IL10R α treatment, while we
328 observe some increased cytokine expression, we did not observe overt inflammation (Fig 4j-k
329 and Supp Fig 9c) suggesting that while IL-10 is critical to restrain Th17s, other eTreg
330 suppressor functions are able to constrain the local inflammatory response. To determine which
331 niche in the intestinal tissue supported Treg proliferation in this perturbed environment, we
332 stained tissues with Ki67, Foxp3, and Hoechst. This demonstrated Treg proliferation in the LP
333 niche (Fig 4l-m), again supporting the LP as the key location for eTreg function in the gut.
334 These findings taken together with our Niche-seq data suggest that eTreg suppressor functions
335 (e.g. Tigit, ICOS, and GITR Fig 4a and Supp Fig 10) in the LP can constrain the inflammatory
336 response when the local IL-10 circuit is disrupted.



337
338
339
340
341
342

Figure 4. The LP niche promotes eTreg survival, phenotype, and function

a. Heatmap showing differential gene expression of eTregs in the LA versus LP (top) and dot plot showing relative expression of selected effector molecule genes within eTregs located in the LA versus LP (bottom).
b. UMAP of Treg subsets per location, filtering out the subsets with less than 10 cells in a given location (i.e. excluding eTregs_MLN, eTregs_CP, cTregs_LA, cTregs_LP and Prolif-Tregs_CP). Arrows depict summarised

343 scVelo differentiation trajectories (above). Heat map overlay on the Treg UMAP indicating velocity
344 pseudotime, as calculated by scVelo (below).
345 **c.** Dot plot showing relative expression of survival cytokine genes expressed by all the cell types with >30 cells
346 in LA or LP regions (right) and their receptors in Treg populations (left).
347 **d.** Dot plot showing relative mean expression of TGF- β and its associated receptor and activating integrin genes
348 in the main myeloid and lymphoid subsets (>30 cells per region) in the LA and LP.
349 **e.** Relative mean expression of STAT3 signalling genes and receptors within main myeloid and lymphoid
350 subsets (>30 cells per region) in the LA and LP.
351 **f.** TCR^{Hh} were transferred into *Hh* colonised host mice, treated with daily FTY720 from day 15 and anti-IL-
352 10R α at day 17.
353 **g.** FACS validation of c-MAF and TCF1 protein expression in spleen, MLN and tissue sites of host Tregs at day
354 20 post *Hh* infection.
355 **h.** Ki-67 of total CD4 T cells of TCR^{Hh} and host cells (left), Ki-67 of TCR^{Hh} Tregs (centre) and Ki-67 of TCR^{Hh}
356 Th17 cells (right) in control and anti-IL-10R α treated mice at day 24.
357 **i.** MFI of Foxp3 (left) and c-MAF (right) of TCR^{Hh} Tregs from control and anti-IL10R α treated mice at day 24.
358 **j.** Expression of *Ifng*, *Il17a* and *Il6* in caecum tissue by qPCR in control and anti-IL10R α treated mice at day 24
359 **k.** Representative H and E staining (left) and histopathology score (right) of caecum tissue from control and
360 anti-IL10R α treated mice at day 24.
361 **l.** Representative immunofluorescent staining of Foxp3 and Ki-67 in LA (left panel, arrows mark Ki-67 negative
362 Tregs), control LP (centre, arrows mark Ki-67 negative Tregs), and anti-IL10R α treated LP (right panel, arrows
363 mark Ki-67 positive Tregs).
364 **m.** Frequency of Ki-67 positive Tregs in the LP of control and anti-IL10R α treated mice (left) and frequency of
365 Ki-67 positive Tregs in the LP and LA in both control and anti-IL10R α treated mice (right).
366

367 Discussion

368

369 In this study, we follow the natural history of microbe-reactive Tregs as they acquire and
370 maintain immune regulatory function in the intestine. By examining cells in anatomical
371 microniches, we have revealed spatial diversity of cTreg and eTreg subsets in lymphoid and
372 non-lymphoid tissues and the importance of the lamina propria niche, not the lymphoid
373 aggregates, as the site of enhanced eTreg function. The LA microniche may act as an entry
374 point for eTregs into the tissue with the potential to skew the response toward inflammation
375 through eTreg interactions with DCs and ILC3s. The LP niche is unique in its myeloid cell
376 makeup with interactions between macrophages and eTregs through antigen presentation,
377 CCR2/CCL8, CD45/CD206, and IL10/IL10R axes contributing to recruitment of highly motile
378 eTregs and fine tuning of the immune response to pathobiont colonization.
379

380 By perturbing the system with IL-10R α blocking antibodies, we demonstrate that eTregs are
381 able to maintain their c-Maf and Foxp3 levels while proliferating in LP niche in the context of
382 an inflammatory milieu. While IL-10R α blockade results in proliferation of Th17 cells, colitis
383 does not develop, likely due to additional eTreg effector molecules including GITR, Tigit,
384 CTLA-4, and granzymeB that remain intact.
385

386 Cell therapy and vaccination strategies to promote and establish tolerance in inflammatory
387 diseases will rely on Tregs that can function in inflammatory conditions, and we provide
388 support for eTregs as an ideal therapeutic population, capable of maintaining their phenotype
389 in an inflammatory milieu. Information gained from the study of microniches can be used for
390 targeted interventions to support eTreg recruitment, activation, differentiation, survival and
391 function in the inflammatory niche within the intestine and beyond.

392 1. Medaglia, C., et al., *Spatial reconstruction of immune niches by combining*
393 *photoactivatable reporters and scRNA-seq*. *Science*, 2017.

394 2. Kullberg, M.C., et al., *Bacteria-triggered CD4(+) T Regulatory Cells Suppress*
395 *Helicobacter hepaticus*-induced Colitis. *The Journal of Experimental Medicine*,
396 2002. **196**(4): p. 505-515.

397 3. Hue, S., et al., *Interleukin-23 drives innate and T cell-mediated intestinal*
398 *inflammation*. *J Exp Med*, 2006. **203**(11): p. 2473-83.

399 4. Kullberg, M.C., et al., *IL-23 plays a key role in Helicobacter hepaticus-*
400 *induced T cell-dependent colitis*. *The Journal of Experimental Medicine*, 2006.
401 **203**(11): p. 2485-2494.

402 5. Glocker, E.O., et al., *Inflammatory bowel disease and mutations affecting the*
403 *interleukin-10 receptor*. *N Engl J Med*, 2009. **361**(21): p. 2033-45.

404 6. Kedmi, R., et al., *Microbiota-instructed regulatory T cell differentiation is mediated*
405 *by a distinct RORγt⁺ antigen presenting cell subset*.
406 *bioRxiv*, 2022: p. 2021.11.19.469318.

407 7. Xu, M., et al., *c-Maf-dependent regulatory T cells mediate immunological tolerance*
408 *to intestinal microbiota*. *bioRxiv*, 2017.

409 8. Levine, A.G., et al., *Continuous requirement for the TCR in regulatory T cell*
410 *function*. *Nat Immunol*, 2014. **15**(11): p. 1070-8.

411 9. Kamanaka, M., et al., *Expression of interleukin-10 in intestinal lymphocytes detected*
412 *by an interleukin-10 reporter knockin tiger mouse*. *Immunity*, 2006. **25**(6): p. 941-52.

413 10. De Togni, P., et al., *Abnormal development of peripheral lymphoid organs in mice*
414 *deficient in lymphotoxin*. *Science*, 1994. **264**(5159): p. 703-707.

415 11. Veiga-Fernandes, H., et al., *Tyrosine kinase receptor RET is a key regulator of*
416 *Peyer's Patch organogenesis*. *Nature*, 2007. **446**(7135): p. 547-551.

417 12. Fenton, T.M., et al., *Immune Profiling of Human Gut-Associated Lymphoid Tissue*
418 *Identifies a Role for Isolated Lymphoid Follicles in Priming of Region-Specific*
419 *Immunity*. *Immunity*, 2020. **52**(3): p. 557-570.e6.

420 13. Victora, G.D., et al., *Germinal Center Dynamics Revealed by Multiphoton*
421 *Microscopy Using a Photoactivatable Fluorescent Reporter*. *Cell*, 2010. **143**(4): p.
422 592-605.

423 14. Xu, M., et al., *c-MAF-dependent regulatory T cells mediate immunological tolerance*
424 *to a gut pathobiont*. *Nature*, 2018. **554**(7692): p. 373-377.

425 15. Kalucka, J., et al., *Single-Cell Transcriptome Atlas of Murine Endothelial Cells*. *Cell*,
426 2020. **180**(4): p. 764-779.e20.

427 16. Haber, A.L., et al., *A single-cell survey of the small intestinal epithelium*. *Nature*,
428 2017. **551**(7680): p. 333-339.

429 17. Drokhlyansky, E., et al., *The Human and Mouse Enteric Nervous System at Single-*
430 *Cell Resolution*. *Cell*, 2020. **182**(6): p. 1606-1622.e23.

431 18. Almanzar, N., et al., *A single-cell transcriptomic atlas characterizes ageing tissues in*
432 *the mouse*. *Nature*, 2020. **583**(7817): p. 590-595.

433 19. Corbin, A.L., et al., *IRF5 guides monocytes toward an inflammatory*
434 *CD11c⁺ macrophage phenotype and promotes intestinal inflammation*.
435 *Science Immunology*, 2020. **5**(47): p. eaax6085.

436 20. Biton, M., et al., *T Helper Cell Cytokines Modulate Intestinal Stem Cell Renewal and*
437 *Differentiation*. *Cell*, 2018. **175**(5): p. 1307-1320.e22.

438 21. Grenov, A., et al., *YTHDF2 suppresses the plasmablast genetic program and*
439 *promotes germinal center formation*. *Cell Rep*, 2022. **39**(5): p. 110778.

440 22. Xing, S., et al., *Tcf1 and Lef1 are required for the immunosuppressive function of*
441 *regulatory T cells*. *Journal of Experimental Medicine*, 2019. **216**(4): p. 847-866.

442 23. Yang, B.-H., et al., *TCF1 and LEF1 Control Treg Competitive Survival and Tfr*
443 *Development to Prevent Autoimmune Diseases*. *Cell reports*, 2019. **27**(12): p. 3629-
444 3645.e6.

445 24. Miragaia, R.J., et al., *Single-Cell Transcriptomics of Regulatory T Cells Reveals*
446 *Trajectories of Tissue Adaptation*. *Immunity*, 2019. **50**(2): p. 493-504.e7.

447 25. Russler-Germain, E.V., et al., *Gut Helicobacter presentation by multiple dendritic*
448 *cell subsets enables context-specific regulatory T cell generation*. *eLife*, 2021. **10**: p.
449 e54792.

450 26. Hepworth, M.R., et al., *Immune tolerance. Group 3 innate lymphoid cells mediate*
451 *intestinal selection of commensal bacteria-specific CD4⁺ T cells*. *Science (New York,*
452 *N.Y.)*, 2015. **348**(6238): p. 1031-1035.

453 27. Melo-Gonzalez, F., et al., *Antigen-presenting ILC3 regulate T cell-dependent IgA*
454 *responses to colonic mucosal bacteria*. *Journal of Experimental Medicine*, 2019.
455 **216**(4): p. 728-742.

456 28. Jin, S., et al., *Inference and analysis of cell-cell communication using CellChat*. *Nat*
457 *Commun*, 2021. **12**(1): p. 1088.

458 29. Arpaia, N., et al., *A Distinct Function of Regulatory T Cells in Tissue Protection*. *Cell*,
459 2015. **162**(5): p. 1078-89.

460 30. Burzyn, D., et al., *A special population of regulatory T cells potentiates muscle*
461 *repair*. *Cell*, 2013. **155**(6): p. 1282-95.

462 31. Ciofani, M., et al., *A validated regulatory network for Th17 cell specification*. *Cell*,
463 2012. **151**(2): p. 289-303.

464 32. Apetoh, L., et al., *The aryl hydrocarbon receptor interacts with c-Maf to promote the*
465 *differentiation of type 1 regulatory T cells induced by IL-27*. *Nat Immunol*, 2010.
466 **11**(9): p. 854-61.

467 33. Travis, M.A., et al., *Loss of integrin alpha(v)beta8 on dendritic cells causes*
468 *autoimmunity and colitis in mice*. *Nature*, 2007. **449**(7160): p. 361-5.

469 34. Li, M.O., S. Sanjabi, and R.A. Flavell, *Transforming growth factor-beta controls*
470 *development, homeostasis, and tolerance of T cells by regulatory T cell-dependent*
471 *and -independent mechanisms*. *Immunity*, 2006. **25**(3): p. 455-71.

472 35. Coombes, J.L., et al., *A functionally specialized population of mucosal CD103⁺ DCs*
473 *induces Foxp3⁺ regulatory T cells via a TGF-beta and retinoic acid-dependent*
474 *mechanism*. *J Exp Med*, 2007. **204**(8): p. 1757-64.

475 36. Zigmond, E., et al., *Macrophage-Restricted Interleukin-10 Receptor Deficiency, but*
476 *Not IL-10 Deficiency, Causes Severe Spontaneous Colitis*. *Immunity*, 2014. **40**(5): p.
477 720-733.

478 37. Shouval, D.S., et al., *Interleukin-10 receptor signaling in innate immune cells*
479 *regulates mucosal immune tolerance and anti-inflammatory macrophage function*.
480 *Immunity*, 2014. **40**(5): p. 706-719.

481 38. Do, J.s., et al., *An IL-27/Lag3 axis enhances Foxp3⁺ regulatory T cell-suppressive*
482 *function and therapeutic efficacy*. *Mucosal Immunology*, 2016. **9**(1): p. 137-145.

483 39. Do, J., et al., *Treg-specific IL-27R⁺ deletion uncovers a key role for IL-27 in*
484 *Treg function to control autoimmunity*. *Proceedings of the National Academy of*
485 *Sciences*, 2017. **114**(38): p. 10190-10195.

486

487 **Author contributions**

488 Yisu Gu designed, performed, and analysed the experiments and prepared the manuscript.
489 Raquel Bartolomé-Casado conceived of and performed the single-cell sequencing analysis and
490 prepared the manuscript. Chuan Xu created the analysis model and assisted with manuscript
491 preparation. Alina Janney performed experiments. Cornelia Heuberger performed experiments.
492 Claire Pearson facilitated and supervised experimentation and provided intellectual input.
493 Sarah Teichmann supervised analysis and manuscript preparation. Emily Thornton designed,
494 performed, and analysed experiments, supervised the project, and prepared the manuscript.
495 Fiona Powrie designed experiments, and supervised the project and manuscript preparation.

496

497

498 **Acknowledgements**

499 We would like to thank the Kennedy Institute of Rheumatology (KIR) Flow Cytometry Facility
500 and the manager, Jonathan Webber, for help with flow cytometry and FACS, the KIR
501 Biomedical Services Unit, especially Luke Barker for help with animal care and husbandry,
502 and the KIR microscopy facility and manager Christoffer Lagerholm. We acknowledge the
503 generous support of the Kennedy Trust for Rheumatology Research, IDRM and Carl Zeiss
504 GMBH for the microscopy facilities (Zeiss 980) used in this research. We acknowledge the
505 generous support of the Kennedy Trust for Rheumatology Research and a Wellcome Trust
506 Multi-User Equipment Grant 202911/Z/16/Z for the microscope purchase (Zeiss 880
507 multiphoton) and facilities used in this research. We want to thank Dr Ida Parisi, Dr
508 Bryony Stott and Miss Rhiannon Cook in the Kennedy Institute of Rheumatology Histology
509 Service for tissue processing and staining. We thank Angela Lee and Moustafa Attar in the
510 Oxford Genomics Centre at the Wellcome Centre for Human Genetics (funded by Wellcome
511 Trust grant reference 203141/Z/16/Z) for the generation and initial processing of sequencing
512 data. We also acknowledge the support received from Stijn van Dongen at the Wellcome
513 Sanger Cellular Genetics Informatics team and the Teichmann lab for discussion and support
514 with scripts.

515

516

517 YG was funded by a Wellcome Trust Clinical Research Fellowship (CRTF), grant reference
518 201224/Z/16/Z.

519 RB-C Grant 315307, Forskerprosjekt 2020, Researcher Project / International Mobility Grant
520 from the Research Council of Norway and travel grant from the Per Brandtzæg's Fund for
521 Research in Mucosal Immunology.

522 ET was supported by Wellcome Trust (095688/Z/11/Z and 212240/Z/18/Z, awarded to FP),
523 Nuffield Department of Medicine, and MRC core grant reference MC_UU_00008.
524 FP was supported by Wellcome Trust (095688/Z/11/Z and 212240/Z/18/Z).

525

526 **Competing interest statement**

527

528 FP receives consultancy fees or research support from Janssen, GSK, T-Cypher and Novartis
529

530 In the past three years, S.A.T. has consulted or been a member of scientific advisory boards
531 at Roche, Genentech, Biogen, GlaxoSmithKline, Qiagen and ForeSite Labs and is an equity
532 holder of Transition Bio.

533