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Recent surveys conducted on Reunion Island coral reefs revealed an atypical manifestation of black band disease on the main framework building coral, *Porites lutea*. This BBD manifestation (PorBBD) presented a thick lighter-colored band, which preceded the typical BBD lesion. Whilst BBD aetiology has been intensively described worldwide, it remains unclear if corals with apparently similar lesions across coral reefs are affected by the same pathogens. Therefore, a multidisciplinary approach involving field surveys, gross lesion monitoring, histopathology and 454-pyrosequencing was employed to provide the first comprehensive characterization of this particular manifestation. Surveys conducted within two geomorphological zones over two consecutive summers and winters showed spatial and seasonal patterns consistent with those found for typical BBD. Genetic analyses suggested an uncharacteristically high level of *Vibrio* spp. bacterial infection within PorBBD. However, microscopic analysis revealed high densities of cyanobacteria, penetrating the compromised tissue as well as the presence of basophilic bodies resembling bacterial aggregates in the living tissue, adjacent to the bacterial mat. Additionally, classical BBD-associated cyanobacterial strains, genetically related to *Pseudoscillatoria corallii* and *Roseofilum reptotaenium* were identified and isolated and the presence of sulfate-reducers or sulfide-oxidizers such as *Desulfovibrio* and *Arcobacter*, previously shown to be associated with anoxic microenvironment within typical BBD was also observed, confirming that PorBBD is a manifestation of classical BBD.

Characterisation of an atypical manifestation of black band disease on *Porites lutea* in the Western Indian Ocean

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Abstract

Recent surveys conducted on Reunion Island coral reefs revealed an atypical manifestation of black band disease on the main framework building coral, *Porites lutea*. This BBD manifestation (PorBBD) presented a thick lighter-colored band, which preceded the typical BBD lesion. Whilst BBD aetiology has been intensively described worldwide, it remains unclear if corals with apparently similar lesions across coral reefs are affected by the same pathogens. Therefore, a multidisciplinary approach involving field surveys, gross lesion monitoring, histopathology and 454-pyrosequencing was employed to provide the first comprehensive characterization of this particular manifestation. Surveys conducted within two geomorphological zones over two consecutive summers and winters showed spatial and seasonal patterns consistent with those found for typical BBD. Genetic analyses suggested an uncharacteristically high level of *Vibrio* spp.

bacterial infection within PorBBD. However, microscopic analysis revealed high densities of cyanobacteria, penetrating the compromised tissue as well as the presence of basophilic bodies resembling bacterial aggregates in the living tissue, adjacent to the bacterial mat. Additionally, classical BBD-associated cyanobacterial strains, genetically related to *Pseudoscillatoria corallii* and *Roseofilum reptotaenium* were identified and isolated and the presence of sulfate-reducers or sulfide-oxidizers such as *Desulfovibrio* and *Arcobacter*, previously shown to be associated with anoxic microenvironment within typical BBD was also observed, confirming that PorBBD is a manifestation of classical BBD.

1. Introduction

Black band disease (BBD) is one of the most widespread (Richardson 2004; Richardson et al. 2009), destructive (Gantar et al. 2011; Richardson et al. 2009; Sato et al. 2009) and intensively studied diseases on coral reefs worldwide (Al-Moghrabi 2001; Boyett 2006; Boyett et al. 2007; Dinsdale 2002; Edmunds 1991; Kuta & Richardson 2002; Raymundo & Weil 2016; Rodriguez & Croquer 2008; Rützler et al. 1983; Sato et al. 2009; Voss & Richardson 2006; Zvuloni et al. 2009). Gross lesions of BBD are generally described (based on their presentation in the field) as a dark-coloured band (a few millimetres to centimetres wide, and up to 1 mm thick) separating living tissue from dead skeleton, and migrating across the coral colony (Antonius 1981; Cooney et al. 2002; Gantar et al. 2011; Myers & Richardson 2009; Raymundo & Weil 2016; Rützler et al. 1983). As many as 70 coral species have been reported to be affected by BBD (Sutherland et al. 2004), particularly massive and slow-growing reef building corals (Gantar et al. 2011; Richardson 2004). Factors affecting susceptibility of corals to BBD or enhancing its progression and spread in corals are still not fully understood (Aeby & Santavy 2006; Boyett et al. 2007; Rodriguez & Croquer 2008; Sato et al. 2009; Voss & Richardson 2006; Zvuloni et al. 2009). However, a few experimental studies have linked nutrient enrichment, elevated temperature and light intensity to the pathogenesis of BBD in corals (Aeby & Santavy 2006; Boyett et al. 2007; Voss & Richardson 2006).

Historically, BBD pathology was first microscopically described as a microbial consortium dominated by filamentous cyanobacteria associated with sulphate reducing (Garrett & Ducklow 1975) and sulphide oxidizing bacteria (Rützler et al. 1983). Later, studies using culture-independent molecular techniques revealed a dense and diverse microbial community classified into four functional groups, comprising photoautotrophs (*Cyanobacteria*), sulphate reducers

(*Desulfovibrio*), sulphide oxidizers (*Beggiatoa*) and organo-heterotrophs (*Vibrio*) (Cooney et al. 2002; Frias-Lopez et al. 2004; Myers et al. 2007; Richardson 2004; Sekar et al. 2006; Viehman et al. 2006). Among these groups, a few bacteria have been suspected to be primary pathogens, including *Desulfovibrio* spp (Viehman et al. 2006) and *Vibrio coralliilyticus* (Arotsky et al. 2009); however, none of these species have been tested experimentally and/or satisfied Henle Koch's postulates. In addition, variations have been detected in bacterial communities associated with BBD across geographic regions and between sympatric coral species (Voss et al. 2007). For instance, the presence of 16S rDNA sequences similar to *Trichodesmium* and *Oscillatoria* were reported in BBD-infected samples from Papua New-Guinea (Frias-Lopez et al. 2002), whereas members of the genera *Geitlerinema*, *Leptolyngbya*, *Lyngbya*, *Oscillatoria*, *Phormidium*, *Pseudoscillatoria* and *Roseofilum* were detected in BBD from the Caribbean, Philippines and Red sea (Casamatta et al. 2012; Myers et al. 2007; Rasoulouniriana et al. 2009; Sekar et al. 2006). More recently, an early stage of BBD has been identified, named cyanobacterial patch (CP), where bacterial communities are initially rich in *Bennothrix* sp. before being progressively displaced by bacteria related to *Oscillatoria* sp. (Sato et al. 2009; Sato et al. 2010). The high variability in BBD bacterial communities found between localities and infected host species may indicate that BBD actually derives from an earlier infection, which favours the infection and subsequent proliferation of opportunistic microorganisms such as cyanobacteria. However, beyond this highly speculative assumption and despite being intensively studied worldwide, the mechanisms of BBD development remain unclear and no primary pathogens have yet been clearly identified.

Recent surveys, conducted on western Indian Ocean (WIO) coral reefs (Fig.1) over two consecutive summers and winters between 2010 and 2012 (Séré et al. 2015), revealed an atypical manifestation of black band disease on two of the main framework building corals, *Porites lobata*

82 and *Porites lutea*, and hereafter referred to as “*Porites* black band disease” (PorBBD). Following
 83 standardized terminology (Work & Aeby 2006), PorBBD is characterized by a diffuse, central or
 84 peripheral, undulating to smooth, gray to black band, leaving behind dead skeleton (Fig.2). The
 85 older exposed skeleton is progressively colonized by endophytic algae. In contrast with typical
 86 BBD, PorBBD exhibits a lighter black band and a thin to medium (0.5-2 cm in width), undulating
 87 to smooth white band of bleached tissue separating the healthy tissue from the black band itself.
 88 Our study aimed at providing a comprehensive characterization of PorBBD using a
 89 multidisciplinary approach involving field surveys, gross lesion monitoring, and description of
 90 histopathologic features together with a description of the associated bacterial diversity.

2. Material and methods

The sampling of *Porites lutea* colonies for this study was authorised by the French Department of Ecology, Sustainable Development, Transportation and Housing (DEAL), and CITES (Permit no. FR1197400391-FR1197400394-1)

Field surveys and progression rate

Surveys were undertaken in Reunion at four latitudinal sites on the outer reef slope and reef flat following protocols adapted to these geomorphological zones. The outer reef slope is characterized by a succession of spurs and grooves that represent different habitats. Spurs are covered mainly with hard corals, whereas grooves are often filled with sand and coral rubble. In order to stay within the coral community, five 10 m x 2 m belt-transects were laid along the different spurs at the same depth. Surveys on the inner reef flat were conducted along three 20 m x 2 m belt-transects positioned parallel to the coastline in order to avoid crossing different coral communities. Transects were randomly laid and all starting points were geo-referenced. Details of the sites are given in Table 1. Surveys were conducted over two consecutive summers (December 2010 - January 2012) and winters (September 2010 - October 2011) to gain a measure of seasonality in the prevalence of PorBBD. Averaged sea surface temperatures ranged from 23.5°C in winter to 31.6°C in summer in Reunion. All massive *P. lutea* and *P. lobata* displaying signs of PorBBD were counted along each transect. *P. lutea* is a common coral on Reunion Island coral reefs and is mostly found on the reef flat (0.5-1.5 m deep). Colonies are generally brown, yellow-brown or yellow green in colour with coralites filled with skeletal elements. In contrast, *P. lobata* is relatively rare on the reef flat and commonly forms helmet-shaped colonies with lobed upper surfaces. Colonies are mainly purple-blue and the coralites have relatively few skeletal elements

(Faure pers. comm.). The prevalence of PorBBD was estimated as = [(the number of PorBBD-infected colonies) / (the total number of massive *Porites* >2 cm) × 100], counted along each transect in 1 m × 1 m quadrats (20-40 quadrats per transect). Finally, disease fronts were monitored on a monthly basis from 30 November 2010 to 10 December 2011 in order to follow PorBBD progression. Nails were driven into the dead portions of five *Porites lutea* colonies behind disease front as reference markers for this purpose. The progression rate was recorded as the linear distance between the nails and the nearest live tissue using photographs.

Histopathology

Samples of *Porites lutea* exhibiting signs of PorBBD were collected using SCUBA and snorkelling. Core samples (10 mm core tubes) were taken from three healthy (HT) and five diseased (DT) tissues, and fixed in 4% formalin for histological examination of their tissue structure. Diseased tissue (DT) was sampled at the lesion boundary interface separating dead tissue from healthy tissue (HT), while control tissue (CT) was cored from an apparently uninfected colony. All DT, HT and CT samples were then coated in 1.5% (w/v) agarose to retain the spatial integrity of the tissues. They were then decalcified using 1% HCl and EDTA renewed every 12 h until process completion. Decalcified tissues were finally dehydrated in a gradient of ethanol baths, cleared with xylene and embedded in paraffin wax. Cross sections of 6-8 µm thick were cut using a microtome, mounted on glass slides and stained with Harris haematoxylin and eosin containing phloxine B as previously described for the diagnosis of tissue fragmentation, necrosis and the identification of invasive organisms (Sudek et al. 2012; Work & Aeby 2011). Serial sections were examined under a light microscope and photographed using NIS Element software (Nikon©).

Cyanobacterial culturing, isolation, and identification

Fresh PorBBD mat was collected from four infected *Porites lutea* colonies using needles and sterile syringes to identify the dominant cyanobacterial strains. Samples were placed in 10 ml centrifuge tubes with seawater and held in darkness at 20°C until the return to the laboratory. Cyanobacterial filaments (one when possible) were isolated from the raw samples under a light microscope and transferred to agar plate containing Z8 medium (Kotai 1972) enriched with NaHCO₃, (NH₄)₂SO₄ and Vitamin B12. Inoculated plates were incubated at 27°C with a 12h light:dark photoperiod and constant irradiance of 20 µmol photons m⁻² s⁻¹. Bacterial strains were routinely passaged between petri dishes in order to obtain clonal isolates for use in molecular analysis. Genomic DNA was then extracted from each cyanobacterial isolate by boil lysing in 100 µL of 5mM Tris/HCl at 100°C for 5 minutes. PCR amplification was carried out in a volume of 25 µl GoTaq®Hot Start Green Master Mix (Promega, Madison, WI) containing 0.5mM of 16S rRNA gene cyanobacterial primers CYA781R/CYA106F (Nübel et al. 1997; Rasoulouniriana et al. 2009; Sussman et al. 2006) and 10 ng of template DNA. Amplification conditions for the PCR included an initial denaturing step of 5 min at 94°C, followed by 35 cycles at 94°C for 60 sec, 60°C for 60 sec, 72°C for 60 sec, and a final extension step of 5 min at 72°C. Sequences obtained for each cyanobacterial strain were examined for error and edited using GENEIOUS™ Pro (V.5.6.6) sequencing software (Kearse et al. 2012). All consensus sequences were submitted to BLAST at the National Centre for Biotechnology Information (NCBI, www.ncbi.nlm.nih.gov) and compared with published sequences. The 16S rRNA sequences were aligned with reference sequences from closely related to known cyanobacterial strains available in genbank. A phylogenetic tree was built by neighbour-joining in GENEIOUS™ Pro (V.5.6.6) with bootstrap values based on 1000 replicates.

Metagenomic profile of bacterial 16S rRNA genes

Sample collection and DNA extraction

Samples of *Porites lutea* were collected from healthy (HT) and diseased (DT) sections of two infected *P. lutea* colonies as well as a single control sample (CT). DT were sampled from the lesion boundary interface with visually healthy tissue (HT), and the sample of CT was taken from completely asymptomatic coral colonies. Cores of DT, HT and CT (2.2 cm diameter to a depth of 0.5-1 cm) were collected using a sterile stainless steel core tube and placed individually in sterile disposable 50 ml polypropylene centrifuge tubes and kept under low light conditions at 2°C in a cool box. Immediately upon return to the laboratory, the seawater within each tube was decanted and the coral samples were immersed in absolute ethanol and stored at -80°C for molecular analysis. To ensure that we had collected *P. lutea*, all samples were examined under the microscope prior their preservation in absolute ethanol.

Bacterial genomic DNA was extracted from CT, HT and DT using the NucleoSpin® Soil Kit (NucleoSpin Extract II, Macherey-Nagel, Düren, Germany). Approximately 150 mg of both tissue and skeleton were scratched from the core surface using a sterile scalpel blade, placed in a 1.5 ml centrifuge tube with 700 µl of lysis buffer and crushed using a fresh disposable plastic rod. Samples were then placed in lysing matrix tubes for DNA extraction. The DNA was eluted with 50 µl sterile elution buffer and its quality was verified by electrophoresis in agarose gels (1.5% wt/vol) stained with GelRed™ (Biotium Inc., Hayward, California, USA).

PCR and 454 pyrosequencing

The composition of bacterial communities associated with CT, HT and DT samples was analysed using 454-pyrosequencing technology (Roche, Nutley, NJ, USA) at GENOSCREEN (Campus de l'Institut Pasteur de Lille, France). In our design, 16S rRNA variant regions V3 and V4 were

amplified using forward (TACGGRAGGCAGCAG) and reverse (GGACTACCAGGGTATCTAAT) primers. These primers were linked to 5' with MID tags, a GsFLX key and GsFLX adapters. Each sample was amplified independently twice with distinct MID tags, allowing the identification of each gene pool. Quality control was performed using the Agilent DNA 100 (Agilent Technologies). The quantity of each PCR product was measured with Picogreen and all products were mixed in equimolar concentrations prior to 454 GsFLX sequencing.

Sequences analyses

All 454 GSFLX sequences were sorted by MID identification using GENEIOUS™ Pro (V.5.6.3). All generated reads were analysed using the SILVA online NGS tool (available online at www.arb-silva.de/ngs). Raw sequence reads were aligned with a gap extension penalty of 2 and a gap penalty of 5. Reads were filtered based on the following quality criteria: Minimum length - 200 bp, minimum quality score - 30, maximum percent ambiguities - 1%, minimum base pair score - 30 and maximum percent repetitive - 2%. Remaining reads were clustered into operational taxonomic units (OTUs) at a threshold sequence identity of 99%. OTUs were classified by BLAST score comparison against the SILVA rRNA database version 115, with a classification similarity threshold of 93%. Data from the SILVA classification were exported for further processing in MEGAN software version 5.0.78 beta (Huson et al. 2007) using the lowest common ancestor (LCA) algorithm with all parameters kept at default values (min support, 5; min score, 35; top percent, 10.0; win score, 0.0). Cyanobacterial 16S rRNA gene sequences are accessible through the NCBI GeneBank database under accession numbers KF957835-38. Raw 454-pyrosequencing reads were submitted in Study (BioProject PRJNA231011) to the NCBI Sequence Read Archive (SRA).

204 *Statistical analysis*

205 Prevalence of PorBBD was calculated per transect and for each site. Data were tested prior to
 206 analysis for homoscedasticity (Levene's test) and normality of variance (Kolmogorov-Smirnov
 207 and Lilliefors tests) and were then log transformed [$\log_{10}(X)$] for analysis of variance (ANOVA).
 208 Variations in the prevalence of PorBBD over the two survey years in the consecutive summers and
 209 winters and across reef zones (reef slope vs. reef flat) were tested using Factorial ANOVA
 210 (STATISTICA 8). Fisher tests were performed for *post hoc* multiple comparison. Rarefaction
 211 curves were performed on bacterial populations associated with each tissue category. Principal
 212 coordinate analysis (PCoA) and cluster analysis were performed using the Bray–Curtis similarity
 213 coefficient to compare the bacterial community structures of the different tissue categories and the
 214 Simpson's and Shannon's diversity indices were calculated. Finally comparisons of average values
 215 of bacterial communities associated with different tissue categories were performed using the *t*-
 216 test in STATISTICA. Before analysis, all OTU counts were normalized to avoid bias due to
 217 differences in the number of sequences obtained from each sample (Mitra et al. 2009).

218 **3. Results**

219 *PorBBD prevalence and virulence*

220 A total of 3520 m² of reef and 5363 massive colonies of *Porites lutea* and *Porites lobata* were
 221 surveyed between September 2010 and January 2012. PorBBD varied seasonally and between the
 222 two geomorphologic reef zones. For instance, colonies of *Porites* exhibited significantly higher
 223 PorBBD prevalence on the reef flat (ANOVA: $F = 1.18$, $p < 0.01$), affecting an average of $4.1 \pm$
 224 2.0 % (mean \pm SE) colonies compared to those observed at the deeper sites (0.2 ± 0.4 ; mean \pm SE).
 225 The percentage of infected colonies recorded on both the reef flat and reef slope was significantly

226 higher during summers than winters (ANOVA_{winter 1 vs. summer 1}: $F = 3.89$, $p < 0.01$; ANOVA_{winter}
 227 _{2 vs. summer 2}: $F = 0.6$, $p < 0.05$). The rate of tissue mortality measured on five massive colonies of
 228 *P. lutea* between 2011 and 2012 was 4.4 ± 0.12 (mean \pm SE) mm day⁻¹. Among the monitored
 229 colonies, two died approximately 13 months after the beginning of the study.

230

231 *Microscopic characterisation of PorBBD*

232 Comparison of cross sections of PorBBD-infected *P. lutea* colonies (Fig. 3A) revealed the
 233 presence of three distinct tissue regions; the first one being the oldest area of infection comprising
 234 dead and degraded tissue associated with cell debris, endophytic algae and other organisms such
 235 as cyanobacteria and ciliates (Fig. 3C). The second region was characterised by a mat of
 236 microorganisms, where filamentous cyanobacteria were clearly visible (Fig. 3C) perforating the
 237 compromised and dead tissues (Fig. 3E and F). Finally, the discoloured portion of the tissue next
 238 to the black band contained granular pigmented cells in both the epidermis and gastrodermis (Fig.
 239 3B). Basophilic bodies resembling bacterial aggregates were also observed in this tissue region
 240 and were regularly surrounded by the same granular cells.

241 *Identification of the dominant cyanobacterial strain*

242 Cyanobacterial strains isolated from four individual PorBBD-infected *Porites lutea* formed dense
 243 clumps of brown filaments that were able to colonize an entire petri dish surface (75 cm² of Z8
 244 solid medium) in a single week (Fig. 4A). The four strains were motile and appeared
 245 morphologically similar with pointed, arrow-like calyptra (Fig. 4B). The isolates were genetically
 246 similar to each other (>98 % identity) and phylogenetically affiliated to the cyanobacteria
 247 *Pseudoscillatoria coralii* (FJ210722) and *Roseofilum reptotaenium* (HM048872) (Fig. 4C).

248 *Compararison of bacterial community structure of DT, HT and CT*

249 Following Roche 454-pyrosequencing, a total of 52 257, 38 778 and 21 309 sequence reads were
 250 obtained from PorBBD infected tissue (DT1a-DT1b and DT2a-DT2b), apparently healthy tissue
 251 (HT1a-HT1b and HT2a-HT2b) and healthy (control) tissue (CTa and CTb) respectively (Table 2).
 252 The number of OTUs obtained for each sample category are summerised in Table 2.

Bacterial community structures from different tissue samples were compared with Cluster analysis in MEGAN (V5.0.77) based on Bray-Curtis similarity matrices (Fig. 5A). Results revealed three clearly separated groups; Cluster 1 grouping all DTs, Clusters 2 and 3 grouping HT and CT samples (Fig. 5A). Rarefaction curves (Fig. 5 B) nearly paralleled the x axis for the majority of samples, indicating that the overall bacterial diversity had likely been exhaustively characterized within the bounds of amplicon bias. Bacterial diversity estimated with Simpson's and Shannon's diversity indices showed that DT had higher bacterial diversity than both HT and CT (Table 2).

Diversity of bacterial community associated with PorBBD

Bacterial communities associated with PorBBD tissues were comprised of 8-14 different bacterial classes, dominated by *γ-proteobacteria*, *α-proteobacteria*, *Bacteroidetes*, *δ-proteobacteria*, *ε-proteobacteria*, *Firmicutes* and *Cyanobacteria* (Fig. 6A). In DT1, the *α-proteobacteria* (34.5 %) and *γ-proteobacteria* (32.36 %) were most commonly represented, followed by *Bacteroidetes* (11.26 %), *δ-proteobacteria* (10.62 %), *Firmicutes* (4.1%), *ε-proteobacteria* (3.94 %), and *Cyanobacteria* (0.3 %) classes. DT2 was dominated by *γ-proteobacteria* (60.0 %), *ε-proteobacteria* (11.45 %), *Bacteroidetes* (9.04 %), *Firmicutes* (6.7 %), *δ-proteobacteria* (5.2 %), *α-proteobacteria* (3.0 %) and *Cyanobacteria* (0.4 %) classes. At a higher taxonomic level of MEGAN's cladogram, 48 to 118 genera were obtained from DT (Table 2) with the *α-proteobacteria* and *γ-proteobacteria* classes exhibiting the highest diversity (Fig. 6B). The most dominant genera observed in DT were *Vibrio* (13.5-33.9 %), *Desulfovibrio* (4.8-13.2 %), *Alteromonas* (3.2-15.5 %), *Arcobacter* (4.8-12.1 %), *Glaciecola* (4.1-10.2 %), *Salinimonas* (2.1-5.0 %), *Ruegeria* (0.3-5.5 %), *Algicola* (0.3-4.4 %) and *Oscillatoria* (0.3-0.6 %).

275 Diversity of bacterial community associated with HT and CT

276 Bacterial communities of HT and CT samples were almost exclusively dominated by the γ -
 277 *proteobacteria* class, comprising 98.2%, 96.9% and 95.9% of the total OTUs, respectively (Fig.
 278 6A). Additional OTUs attributed to α -*proteobacteria*, δ -*proteobacteria*, *Actinobacteria*, β -
 279 *proteobacteria* and ϵ -*proteobacteria* were also found in common but at very low percentages. A
 280 total of 19-29 genera were obtained from the HT samples including *Endozoicomonas* (76.7-96.5
 281 %), *Vibrio* (0.27-18.7 %), *Photobacterium* (0.41-1.07 %), *Acinetobacter* (0.14-0.38 %) and
 282 *Pseudomonas* (0.08-0.43 %). Finally, OTUs obtained from CT were mainly represented by
 283 *Endozoicomonas* (59.0-63.4 %), *Vibrio* (30.8-31.1 %), *Photobacterium* (1.8-2.6%) *Acinetobacter*
 284 (0.5%) and *Propionigenium* (0.2-0.3 %).

285 Comparative analysis of bacterial communities associated with DT, HT and CT

286 The average number of OTUs affiliated to bacterial genera in DT was significantly different from
 287 those in HT (*t-test*: $df=2$ $p<0.0001$) and CT (*t-test*: $df=2$ $p=0.0001$). No significant difference
 288 was obtained between HT and CT (*t-test*: $df=2$ $p=0.99$). In total, 29 different bacterial genera
 289 were found only in DT (Fig. 7), 28 genera were uniquely found in HT, and 19 genera could be
 290 found in both DT and HT. Among OTUs obtained only from DT, the most represented bacterial
 291 genera were *Glaciecola* (4.1-10.2 %), *Salinimonas* (2.1-5.0 %), *Amphritea* (1.0-1.6 %),
 292 *Rhodobacter* (0.2-2.3 %), *Shimia* (0.4-1.5%) and *Oscillatoria* (0.3-0.6 %). Of note, the genus
 293 *Ruegeria*, *Desulfovibrio*, *Arcobacter*, *Alteromonas*, *Aestuaribacter*, *Salinimonas* and *Algicola*
 294 were highly represented in DT but were also found in common with HT and/or CT at very low
 295 percentage. The full distribution of bacterial genera per tissue sample is depicted in Figure 7 and
 296 Table S1.

4. Discussion

This study constitutes the first characterisation of an atypical form of BBD found on Reunion coral reefs, *Porites* black band disease (PorBBD). Surveys conducted on two geomorphological reef zones revealed spatial variability, with more infected colonies on the reef flat (0.5-1m) than the reef slope (10-20 m). Similar patterns were previously reported in Florida Keys (Kuta & Richardson 2002), the Republic of Maldives (Montano et al. 2012) and southern India (Thinesh et al. 2009; Thinesh et al. 2011) where typical BBD is more abundant at shallow than deep sites. This may be due to the proximity of the Reunion reef to the coastline (± 500 m wide), where it is constantly exposed to high and increasing anthropogenic stress from sewage discharges, land-based pollution and eutrophication with compounds such as nitrates, ammonium, and phosphate (Chazottes et al. 2002; Naim 1993). Several studies suggest that nutrient enrichment, sewage discharge and runoff may facilitate and increase disease outbreaks by enhancing the pathogen virulence and/or impairing host resistance (Haapkylä et al. 2011; Rodriguez & Croquer 2008; Voss & Richardson 2006).

Seasonal variations were also observed between 2010 and 2012: the average prevalence of PorBBD recorded on the reef flat peaked in summer 2010 ($8.7 \pm 2.8\%$; mean \pm SE), dropped in winter 2011 ($1.4 \pm 1.0\%$; mean \pm SE) and then increased again the following summer ($7.7 \pm 2.5\%$; mean \pm SE). These results are consistent with those previously found during BBD surveys on the Great Barrier Reef in Australia (Boyett et al. 2007; Sato et al. 2009) and in Venezuela (Rodriguez & Croquer 2008), the Red Sea (Zvuloni et al. 2009) and on Caribbean reefs (Edmunds 1991). Seasonal fluctuations in BBD prevalence have been generally assumed to be driven by high light intensities and summer sea temperatures, which may reduce host resistance or/and increase pathogen virulence (Boyett et al. 2007; Edmunds 1991; Kuta & Richardson 2002; Richardson &

Kuta 2003; Rodriguez & Croquer 2008; Rützler et al. 1983; Sato et al. 2009; Sato et al. 2010). Richardson and Kuta (2003) showed that the association of high light and elevated temperatures promote the growth and progression of the cyanobacterium *Phormidium corallyticum* forming a dense mat. This BBD bacterial mat favouring the growth of sulphate reducers (e.g. *Desulfovibrio* species) and sulphide oxidizers (e.g. *Beggiatoa* species), generates anoxic conditions harmful to adjacent coral tissues. However, the hot season (December to March) in Reunion is also associated with heavy rainfall, high levels of ground water infiltration and surface water runoff, leading to an increased level of pollutants such as pesticide, fertiliser, sewage from septic systems and waste water in lagoon waters (Chazottes et al. 2002; Naim 1993).

Field monitoring performed on tagged colonies confirmed the virulence of PorBBD with a mean tissue mortality rate reaching 4.4 ± 0.12 mm day⁻¹ (mean \pm SE). This progression rate is similar to values previously reported on typical BBD infected scleractinian corals in the Florida Keys (Kuta & Richardson 1997), Australia (Boyet et al. 2007; Sato et al. 2010), Indonesia (Haapkylä et al. 2009) and India (Borger & Steiner 2005; Thinesh et al. 2009). Importantly, PorBBD demonstrated a high destructive potential for Reunion reefs with full mortality observed for 2 out of 5 colonies monitored over a one-year period.

Cross sections performed on PorBBD-infected tissues showed cyanobacterial aggregates similar to those previously observed in several studies of typical BBDs (Ainsworth et al. 2007; Barneah et al. 2007; Bythell et al. 2002; Sato et al. 2009). The 16S sequences of cyanobacteria associated with PorBBD were closely related to cyanobacteria previously identified as *Pseudoscillatoria corallii* (Rasoulouniriana et al. 2009) and *Roseofilum reptotaenium* (Casamatta et al. 2012) isolated on different coral hosts from the northern Red Sea and the Caribbean, as well as with cyanobacteria isolated from BBD colonies in the central Great Barrier Reef (Sato et al. 2010). Interestingly, this

isolate, in contrast to cyanobacterial strains described in previous studies had unusually pointed terminal cells, or “calyptra”, suggesting the presence of a different cyanobacterial species associated with PorBBD.

Microscopic analysis also revealed the presence of filamentous cyanobacteria in both dead and compromised tissues. The ability of cyanobacteria to penetrate coral tissue has been demonstrated to play an important role in typical BBD investigations (Ainsworth et al. 2007; Barneah et al. 2007; Sato et al. 2010). For instance, recent studies have suggested that the calyptra may be involved in tissue invasion (Ainsworth et al. 2007; Kramarsky-Winter et al. 2014), possibly via the secretion of toxins or other compounds (Miller & Richardson 2012; Mydlarz et al. 2010; Whitton 2008). The precise mechanisms of coral invasion by cyanobacteria are however unknown and require further investigation.

Granular and pigmented cells were found in high densities in PorBBD-infected tissue of *P. lutea*. They were found mainly in DT and have been proposed to result from an immune response (Mydlarz et al. 2010; Palmer et al. 2008). Additionally, basophilic bodies resembling bacterial aggregates similar to those observed in *Porites* white patch syndrome (Séré et al. 2013) were found in the discoloured tissue adjacent to the bacterial mat but were not observed in HT. Thus, it is possible that other bacteria may promote PorBBD by initiating a primary infection that impairs the immune processes in corals and promoting progression of cyanobacteria (Miller et al. 2011). However, no evidence of direct physical destruction resulting from these basophilic bodies could be detected in our histological sections.

Bacterial community analysis via V3-V4, 16S metabarcoding suggested that the number of bacterial taxa identified in this study was higher than in other metagenomic analyses of bacterial

communities associated with scleractinian corals (Littman et al. 2011; Wegley et al. 2007). While HT and CT mostly contained *γ-proteobacteria*, DT yielded bacterial sequences from *γ-proteobacteria* (47.9 ± 2.44 %; mean \pm SE), *α-proteobacteria* (19.3 ± 4.2 %; mean \pm SE), *Bacteroidetes* (10.5 ± 0.4 %; mean \pm SE), *δ-proteobacteria* (8.2 ± 1.1 %; mean \pm SE), *ε-proteobacteria* (8.0 ± 1.6 %; mean \pm SE), *Firmicutes* (5.6 ± 0.7 %; mean \pm SE) and *Cyanobacteria* (0.4 ± 0.2 %; mean \pm SE). This result is not similar to patterns generally observed in other studies that have characterised microbial communities from typical BBDs (Arotsker et al. 2009; Cooney et al. 2002; Frias-Lopez et al. 2002; Sato et al. 2013; Sekar et al. 2006). For instance, *α-proteobacteria* has been reported as the most represented and diverse class associated with BBD affecting scleractinian corals in several distant locations (Arotsker et al. 2009; Barneah et al. 2007; Miller & Richardson 2011; Sekar et al. 2006), whereas *γ-proteobacteria* was the dominant class in PorBBD. In addition, *Cyanobacteria* sequences represented 4 to 25% of characterized bacteria from typical BBD lesions (Arotsker et al. 2009; Barneah et al. 2007; Sato et al. 2013; Sekar et al. 2006) while only 0.4-0.6% of bacterial sequences from PorBBD had cyanobacteria origins. This is consistent with the PorBBD phenotype, which has a lighter band colour, compared to typical thick dark BBD. However, our further use of analytic tools such as ProbeMatch (Kim et al. 2009) suggests that these results should be interpreted with caution due to the inherent bias in taxon identification by PCR amplification due to the affinity of the primers targeting the V3-V4 region.

Among the major classes found in this study, the *γ-proteobacteria* *Vibrio* was the dominant genus in PorBBD-infected tissues representing 23.1 ± 2.1 % (mean \pm SE) of the overall OTUs. Several members of this genus have been identified as pathogens of corals, their virulence being attributed to enzyme secretions that initiate tissue penetration and degradation (Ben-Haim & Rosenberg 2002; Ben-Haim et al. 2003; Rosenberg & Falkovitz 2004). This study revealed the presence of

OTUs attributed to *Vibrio* that are known to be highly proteolytic. However, since vibronic OTUs were also abundant in non-infected tissues, their role in PorBBD in *P. lutea* needs to be individually assessed using multidisciplinary approaches combining bacterial culturing and inoculation/infection trials (Henle-Koch's postulates).

The next most represented bacteria in PorBBD samples were *Desulfovibrio* and *Arcobacter*, accounting for 8.6 ± 1.5 % (mean \pm SE) and 7.9 ± 1.3 % (mean \pm SE) of the overall OTUs, respectively. These *Proteobacteria* have previously been found in BBD-infected corals from different locations (Frias-Lopez et al. 2002; Sato et al. 2013) and seem to be important contributors to BBD aetiology, producing sulfated compounds suspected to exacerbate microbial virulence (Sato et al. 2009). Although a very low percentage of these sulfide-reducing bacteria was found in healthy tissues, their relatively high abundance in PorBBD tissues suggests a tropism towards anoxic micro-environments (Cooney et al. 2002; Glas et al. 2012; Sato et al. 2010; Sekar et al. 2008; Sekar et al. 2006; Viehman et al. 2006) rich in carbon compounds derived from cell debris and other organic nutrients produced during coral tissue lysis (Viehman et al. 2006). Other predominant genera affiliated to *Glaciecola*, *Salinimonas*, *Amphritea*, and *Shimia* were recorded only in PorBBD-infected corals but have not been reported in typical BBDs. Interestingly, *Shimia* was recently associated with a newly-reported *Porites* white patch syndrome on western Indian Ocean reefs (Séré et al. 2013), however no evidence of its pathogenicity has been established in this study. Importantly, no OTUs affiliated to potential pathogenic bacteria including *Cytophaga*, *Clostridium*, and *Campylobacter*, which generally occur in typical BBDs (Cooney et al. 2002; Frias-Lopez et al. 2004; Frias-Lopez et al. 2002; Sato et al. 2013; Sato et al. 2010) lesions were retrieved in PorBBD samples. Finally, no sulfide-oxidizing *Beggiatoa* related OTUs were retrieved from diseased samples while they have been commonly reported in typical BBDs (Sekar

et al. 2008), but this again may be explained by the bias introduced by amplifying primer sequences, primer mismatches or limiting DNA template concentrations that have previously been reported to impair PCR (Frias-Lopez et al. 2002; Sekar et al. 2006).

In summary, the importance of PorBBD for Indian Ocean coral reefs should not be underestimated due to its potential for rapid progression in slowly growing reef-building corals and the associated high mortality rate. This disease shows several similarities with classical BBD manifestations, for example, the spatial and temporal patterns and propagation of PorBBD seem to be in agreement with those influencing typical BBDs. Moreover, cyanobacterial filaments in PorBBD are genetically closely related to those identified elsewhere. However, PorBBD exhibits key features that differ from typical BBD manifestations: Firstly, an apparent low level of cyanobacterial infection produces a sparse black band, which is preceded by a discoloured tissue region. Basophilic bodies resembling bacterial aggregates were found in the discoloured tissue region, suggestive of an independent primary infection. Finally, an atypical composition of the associated bacterial communities suggests differing aetiology of PorBBD. However the presence of sulfate-reducers or sulfide-oxidizers, previously shown to be associated with an anoxic microenvironment within typical BBD, confirms that PorBBD is a manifestation of BBD. Further investigations, towards infection trials, would be required to elucidate the complex interactions between *Porites* associated microbial communities and identify potential pathogenic candidates by fulfilling Koch's postulates.

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611 **List of figures**

612 Fig. 1. Map showing the study sites in Reunion Island, Western Indian Ocean.

613 Fig. 2. Massive colonies of *Porites lutea* exhibiting signs of *Porites* black band disease (PorBBD)
 614 at A) Ravine des Poux, B) and C) La Corne, and D) Trou d'Eau in Reunion Island. Ds = dead
 615 skeleton; Bcy = black cyanobacteria; Wf = white front; Ht = healthy tissue.

616 Fig. 3. Histological sections of *Porites lutea*: A) Healthy tissue (Ht). Note the integrity of the
 617 epidermis. B) Living polyp from PorBBD-infected tissue (Dt) showing high concentration of
 618 granular pigmented cells (pc). Note the basophilic bodies (bb) surrounded by granular pigmented
 619 cells. C) Degraded tissue with cell debris (cd) and residual pigmented cells (pc). Note the presence
 620 of ciliate-like organisms (ci). D) Disease (Dt) band boundary characterised by a dense mat of
 621 filamentous cyanobacteria (cy) invading the fragmented tissue (ft). E) and F) penetration of
 622 filamentous cyanobacteria (white arrow) into the infected tissue (Dt).

623 Fig. 4. Cyanobacteria retrieved from *Porites* black band disease (PorBBD): A) Clumps of brown
 624 cyanobacterial filaments (cy) growing in a petri dish with Z8 medium. B) Photomicrograph of
 625 the cyanobacterial strain CYPBD1, closely related to the cyanobacterium *Pseudoscillatoria coralii*
 626 (FJ210722) and *Roseofilum reptotaenium* (HM048872), isolated from pure cultures. Note the
 627 pointed terminal cells called calyptra (cal). C) Neighbour-joining phylogenetic tree showing the
 628 relatedness of the strains CPPORBBD1, CPPORBBD2, CPPORBBD3, and CPPORBBD4 with
 629 reference *cyanobacterial* strains. Numbers at each node are bootstraps values (%) obtained after
 630 1000 iterations.

631 Fig. 5. Comparative analysis of bacterial communities associated with three tissue categories of
 632 *Porites lutea*. A) Cluster diagram and B) rarefaction curves of bacterial communities associated

633 with HT1-2 = healthy tissue, CT = control tissue and DT 1-2 = diseased tissue of *Porites lutea*,
 634 created using MEGAN software version 5.0.78 beta. Numerals a and b distinguish the duplicate
 635 samples.

636 Fig. 6. Bacterial community structures based on the classification of partial 16S RNA genes
 637 obtained from *Porites* black band disease lesions and healthy colonies of *Porites lutea* using
 638 MEGAN. A) Relative abundance (%) of bacterial classes and B) number of bacterial genera
 639 assigned to the diverse classes associated with PorBBD-infected tissues (DT1 and DT2), healthy
 640 tissues (HT1 and HT2) and control tissue (CT). Numerals a and b distinguish the duplicate
 641 samples.

642 Fig. 7. Venn diagram of bacterial genera showing their distributions in PorBBD-infected tissues
 643 (DT), healthy tissues (HT) and control tissue (CT). * indicates potentially pathogenic bacterial
 644 genera as identified in a literature survey of coral disease.

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Figure 1(on next page)

Study sites in Reunion Island

Map showing the study sites in Reunion Island, Western Indian Ocean.

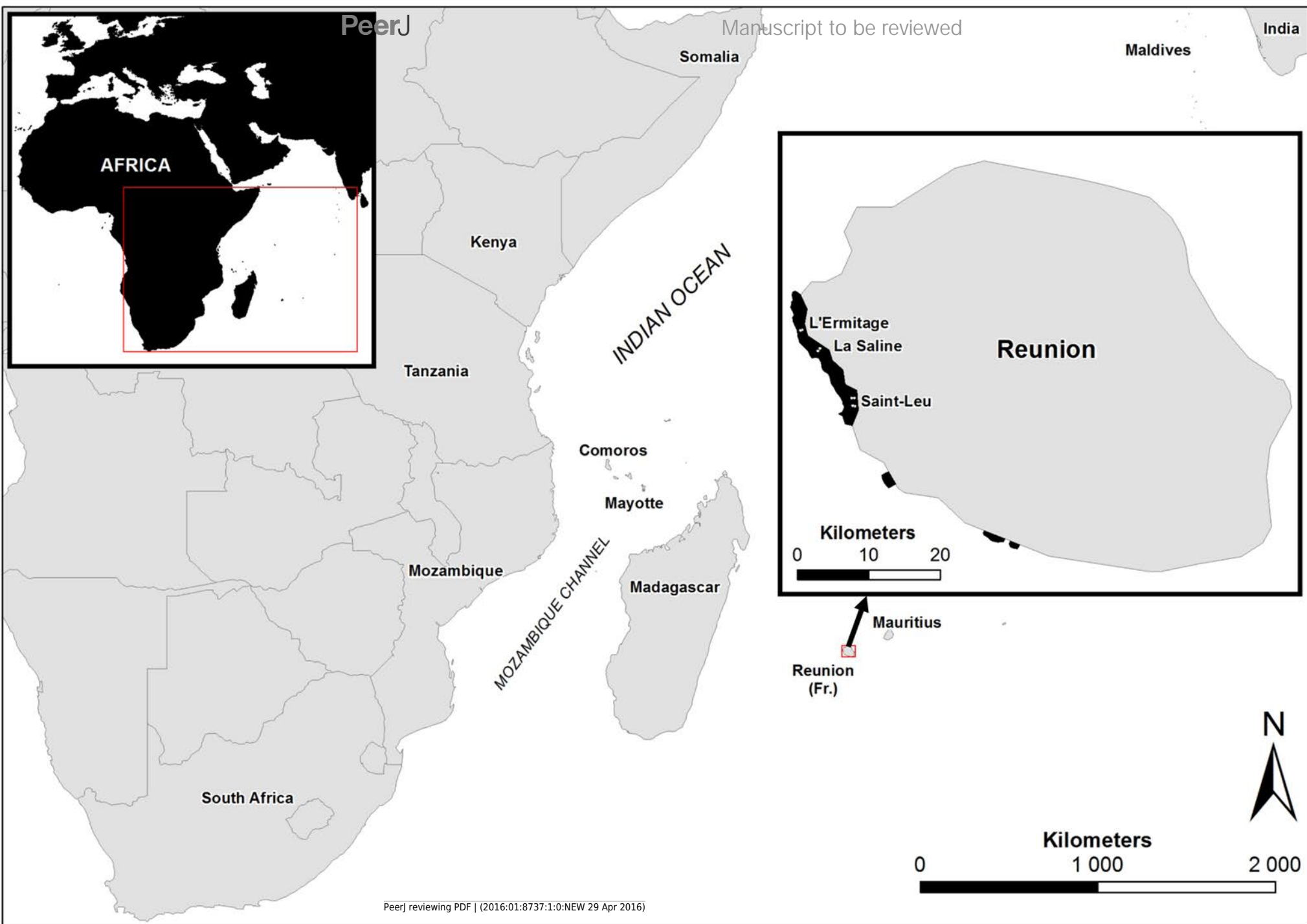


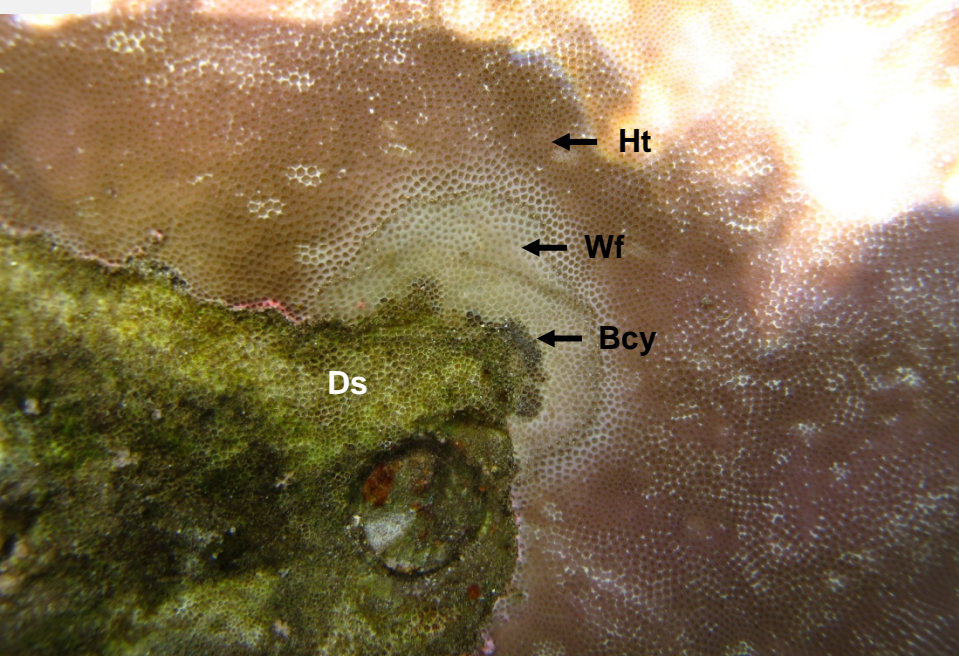
Figure 2 (on next page)

Massive colonies of *Porites lutea* exhibiting signs of *Porites* black band disease (PorBBD) at

A) Ravine des Poux, B) and C) La Corne, and D) Trou d'Eau in Reunion Island. Ds = dead skeleton; Bcy = black cyanobacteria; Wf = white front; Ht = healthy tissue.

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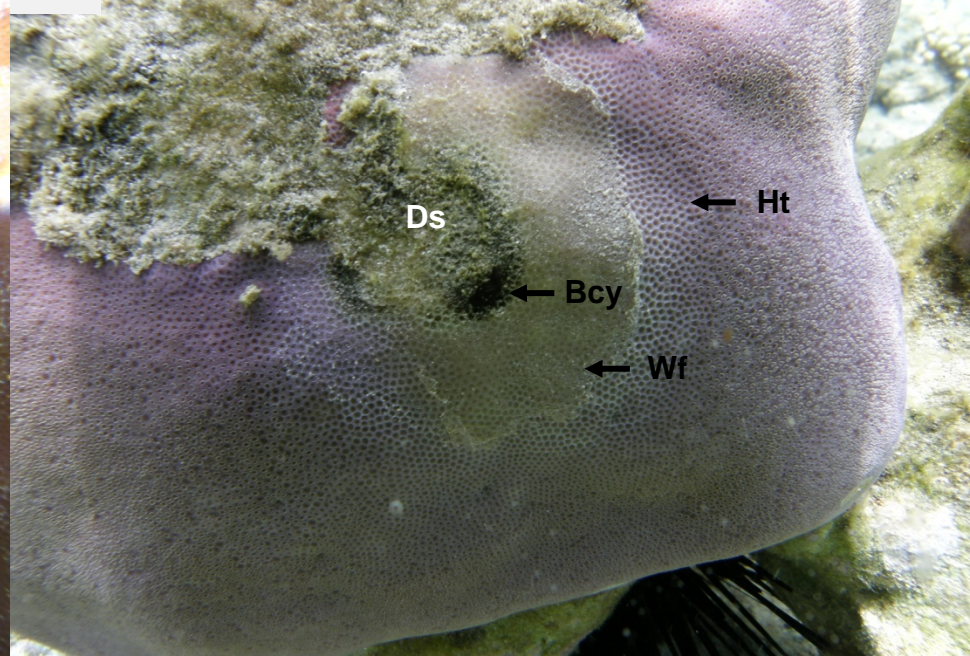
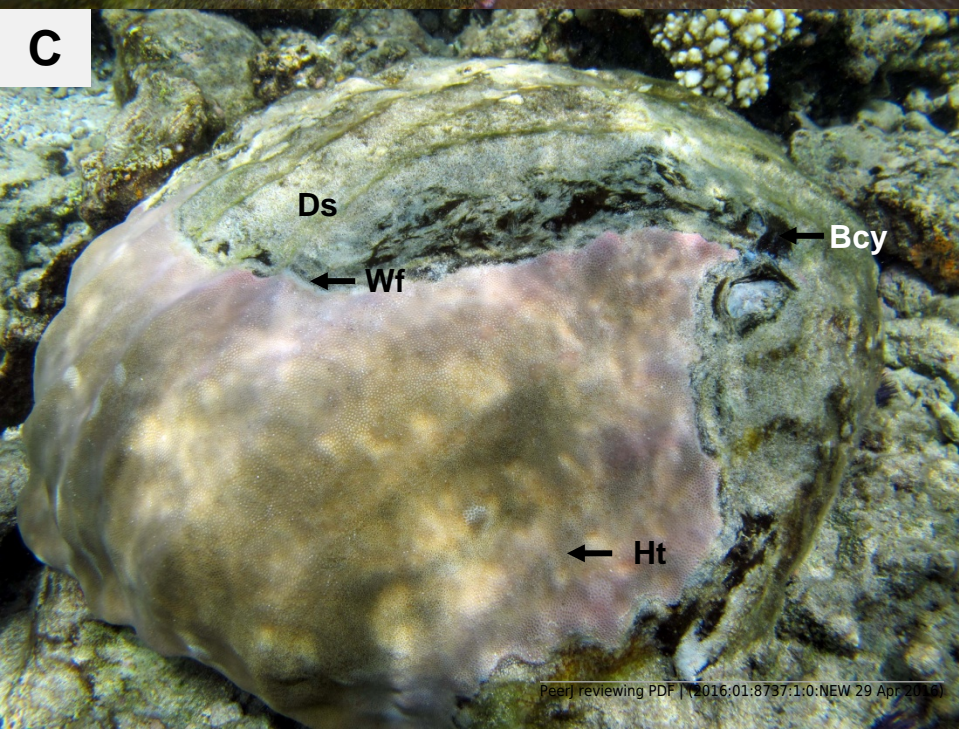
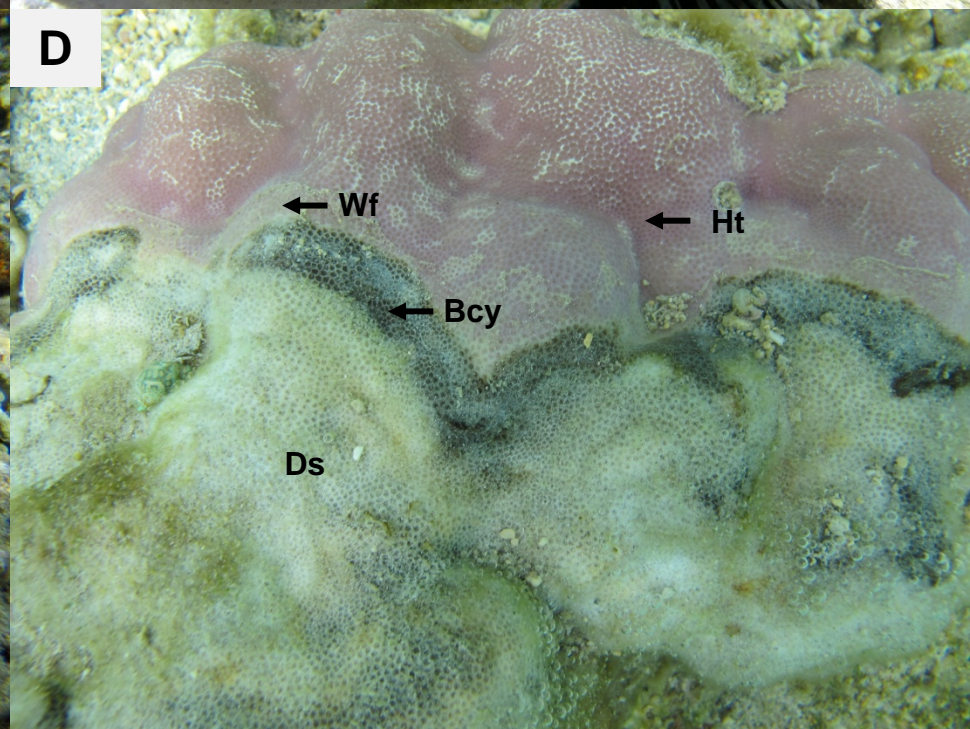
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Figure 3(on next page)

Histological sections of *Porites lutea*:

A) Ravine des Poux, B) and C) La Corne, and D) Trou d'Eau in Reunion Island. Ds = dead skeleton; Bcy = black cyanobacteria; Wf = white front; Ht = healthy tissue.

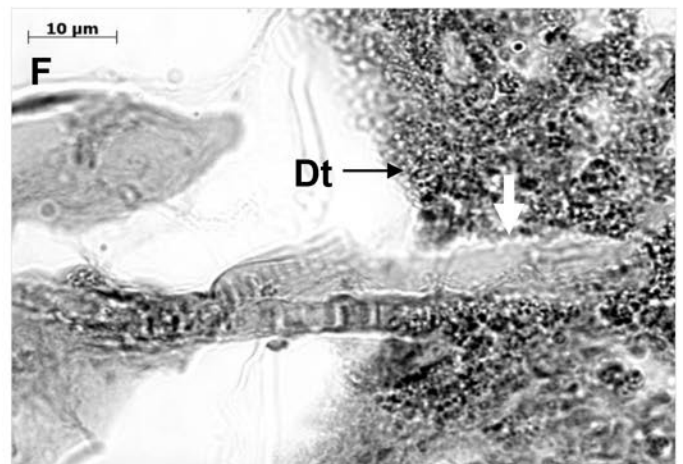
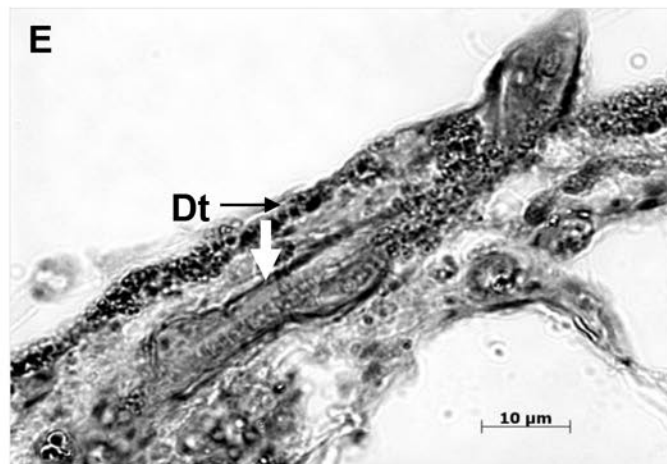
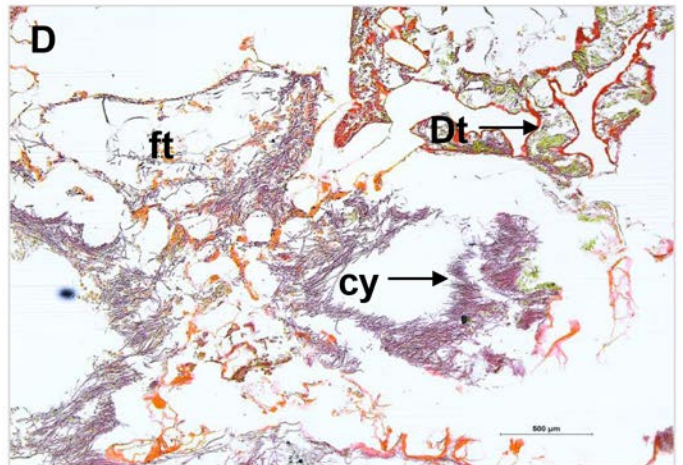
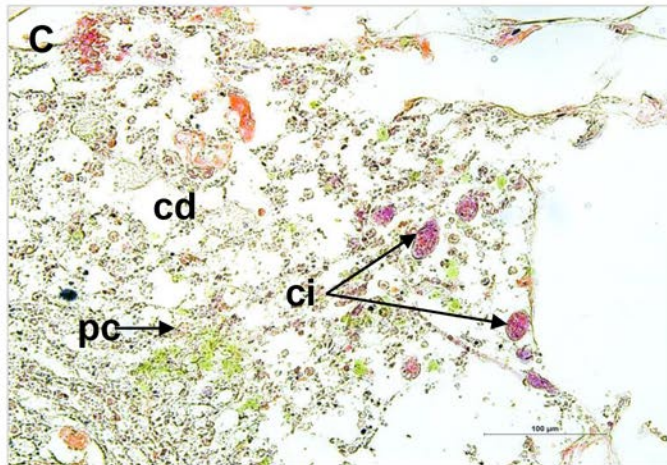
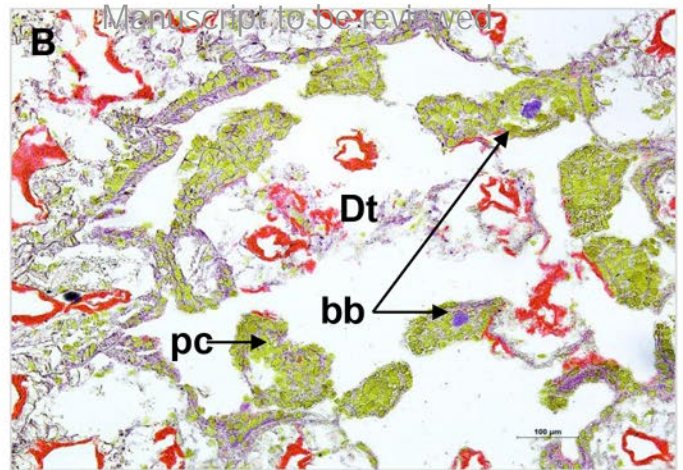
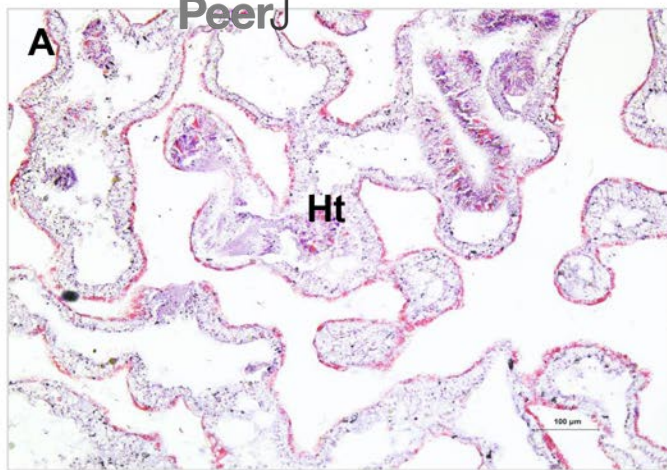


Figure 4(on next page)

Cyanobacteria retrieved from *Porites* black band disease (PorBBD):

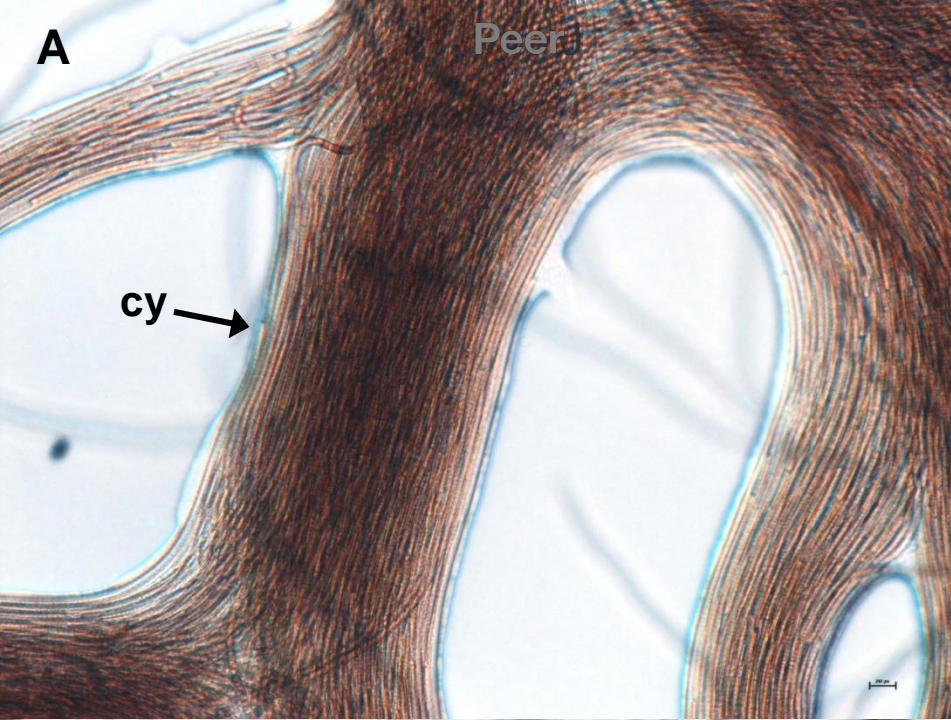
A) Clumps of brown cyanobacterial filaments (cy) growing in a petri dish with Z8 medium.

B) Photomicrograph of the cyanobacterial strain CYPBD1, closely related to the cyanobacterium *Pseudoscillatoria corallii* (FJ210722) and *Roseofilum reptotaenium* (HM048872), isolated from pure cultures. Note the pointed terminal calls called calyptra (cal).

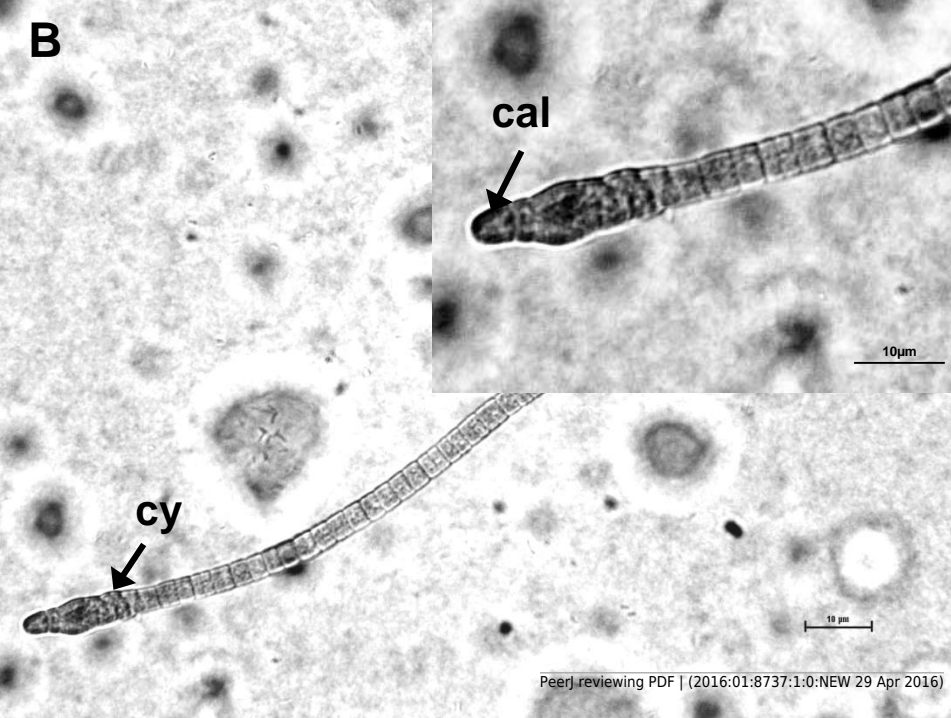
C) Neighbour-joining phylogenetic tree showing the relatedness of the strains CPPORBBD1, CPPORBBD2, CPPORBBD3, and CPPORBBD4 with reference *cyanobacterial* strains. Numbers at each node are bootstraps values (%) obtained after 1000 iterations.

A

Peer



B



C

Manuscript to be reviewed

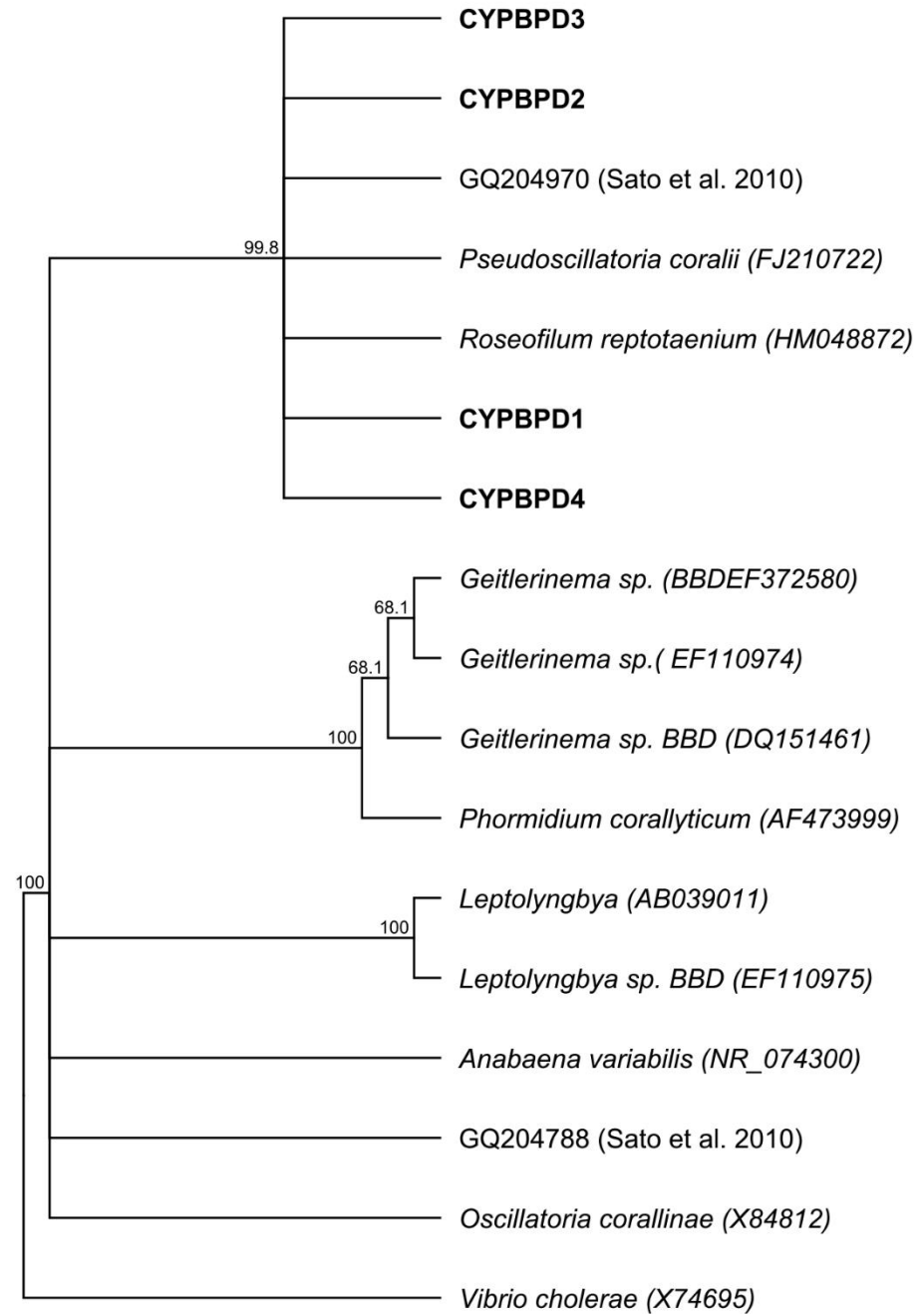


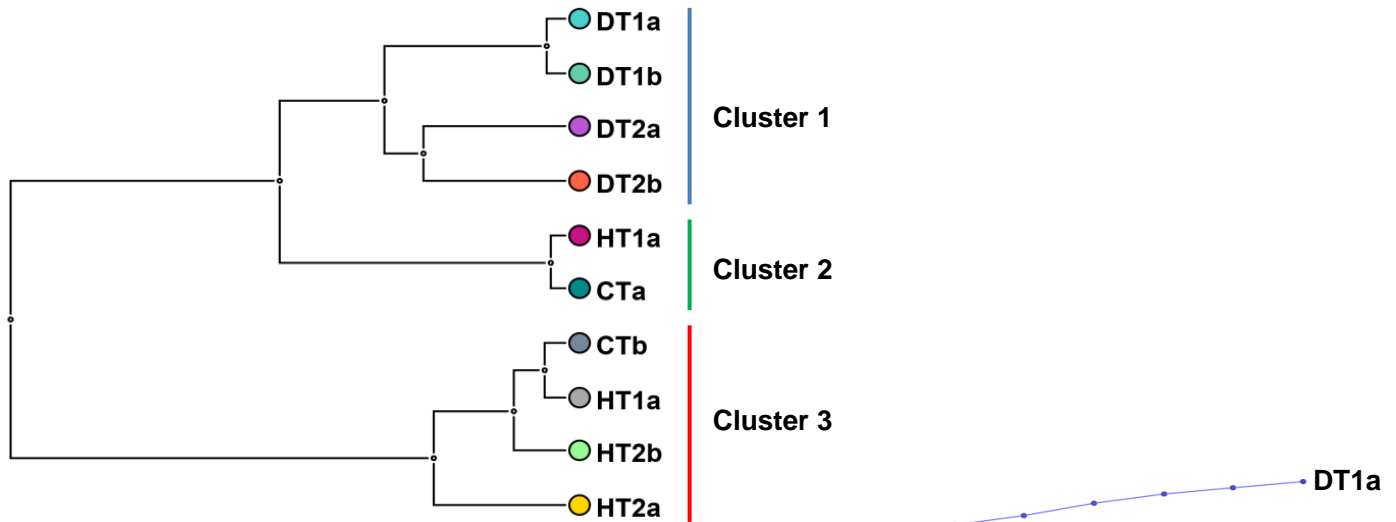
Figure 5(on next page)

Bacterial community structures based on the classification of partial 16S RNA genes obtained from Porites black band disease lesions and healthy colonies of Porites lutea using MEGAN

A) Relative abundance (%) of bacterial classes and B) number of bacterial genera assigned to the diverse classes associated with PorBBD-infected tissues (DT1 and DT2), healthy tissues (HT1 and HT2) and control tissue (CT). Numerals a and b distinguish the duplicate samples.

0.1

A



B

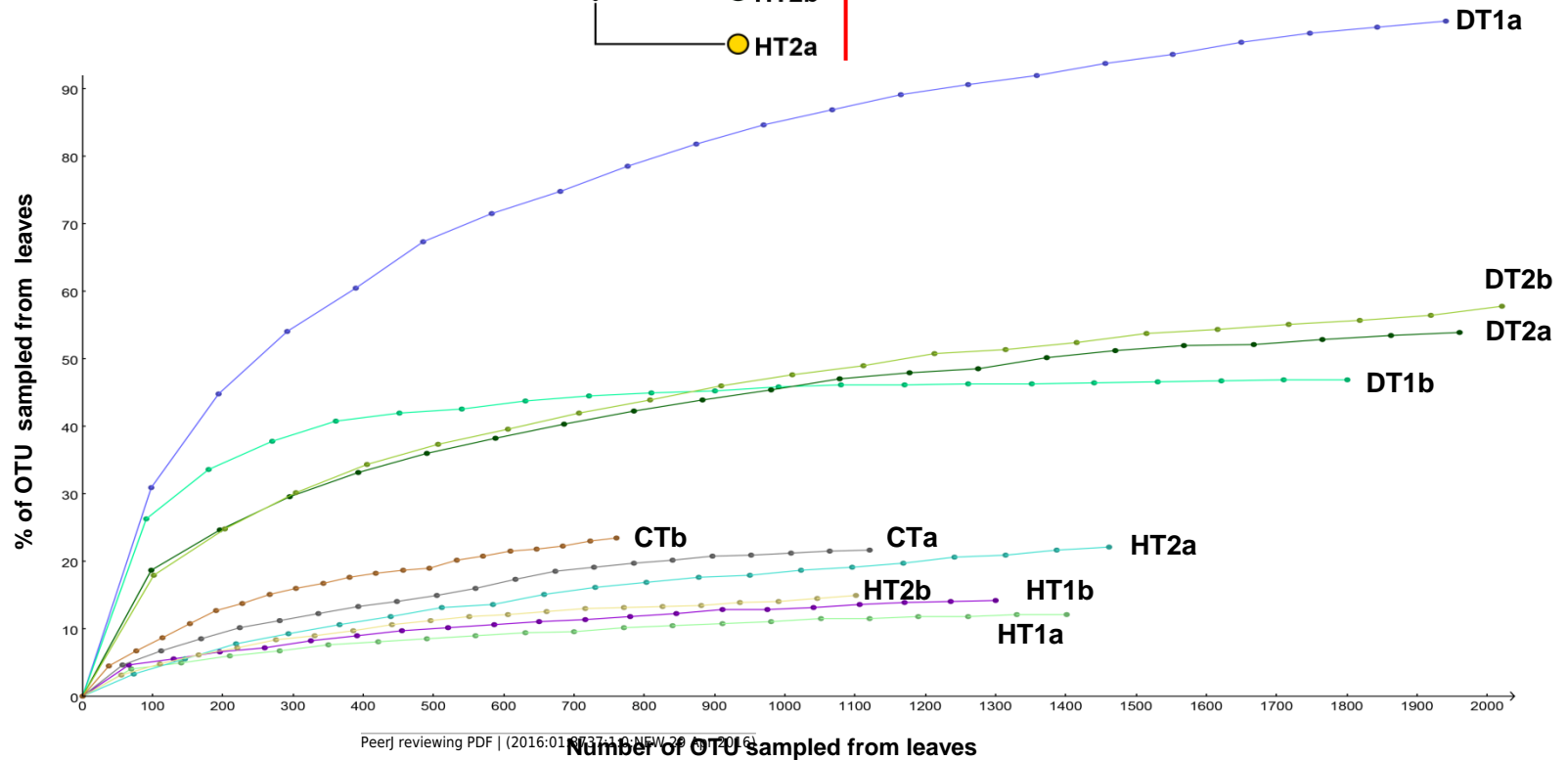
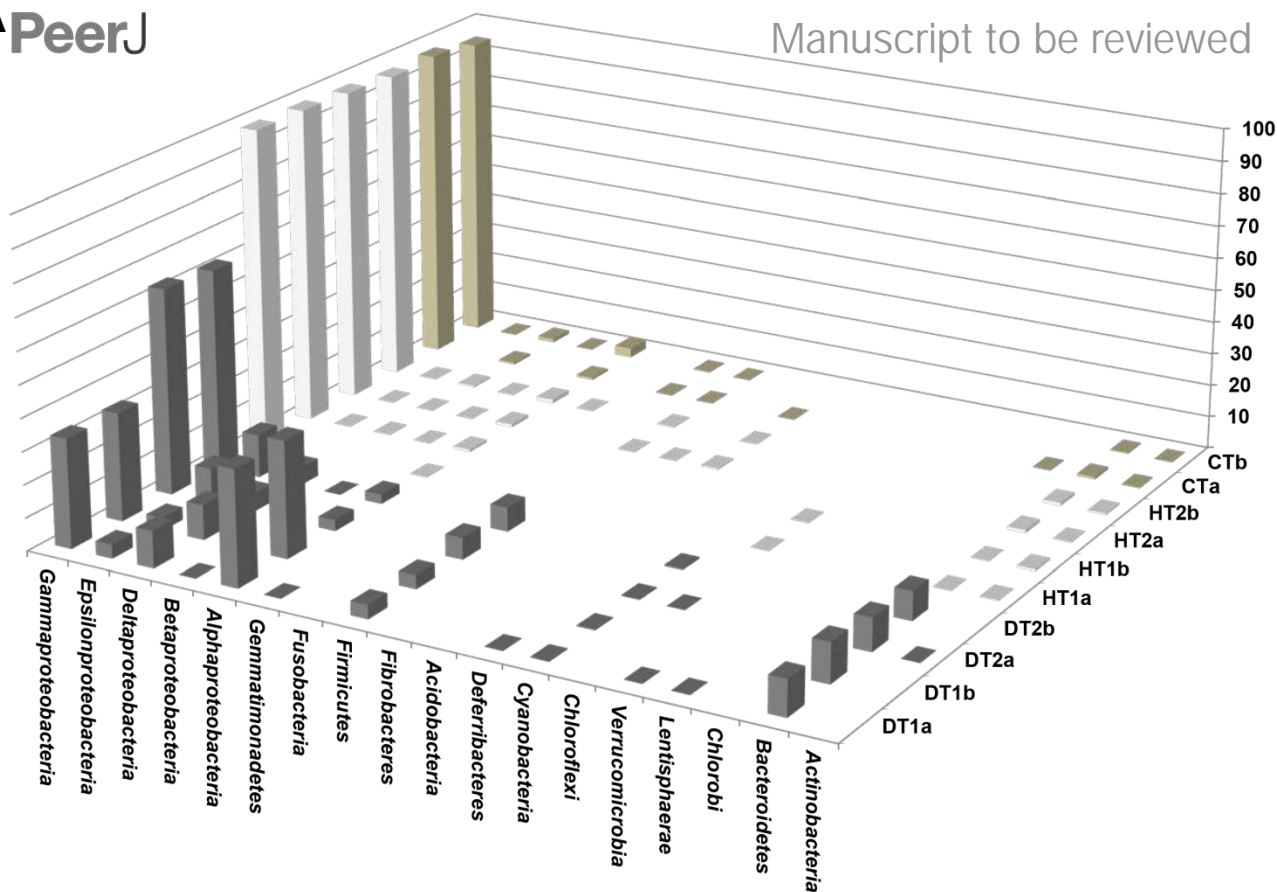


Figure 6(on next page)

Comparative analysis of bacterial communities associated with three tissue categories of *Porites lutea*.

A) Cluster diagram and B) rarefaction curves of bacterial communities associated with HT1-2 = healthy tissue, CT = control tissue and DT 1-2 = diseased tissue of *Porites lutea*, created using MEGAN software version 5.0.78 beta. Numerals a and b distinguish the duplicate samples.



B

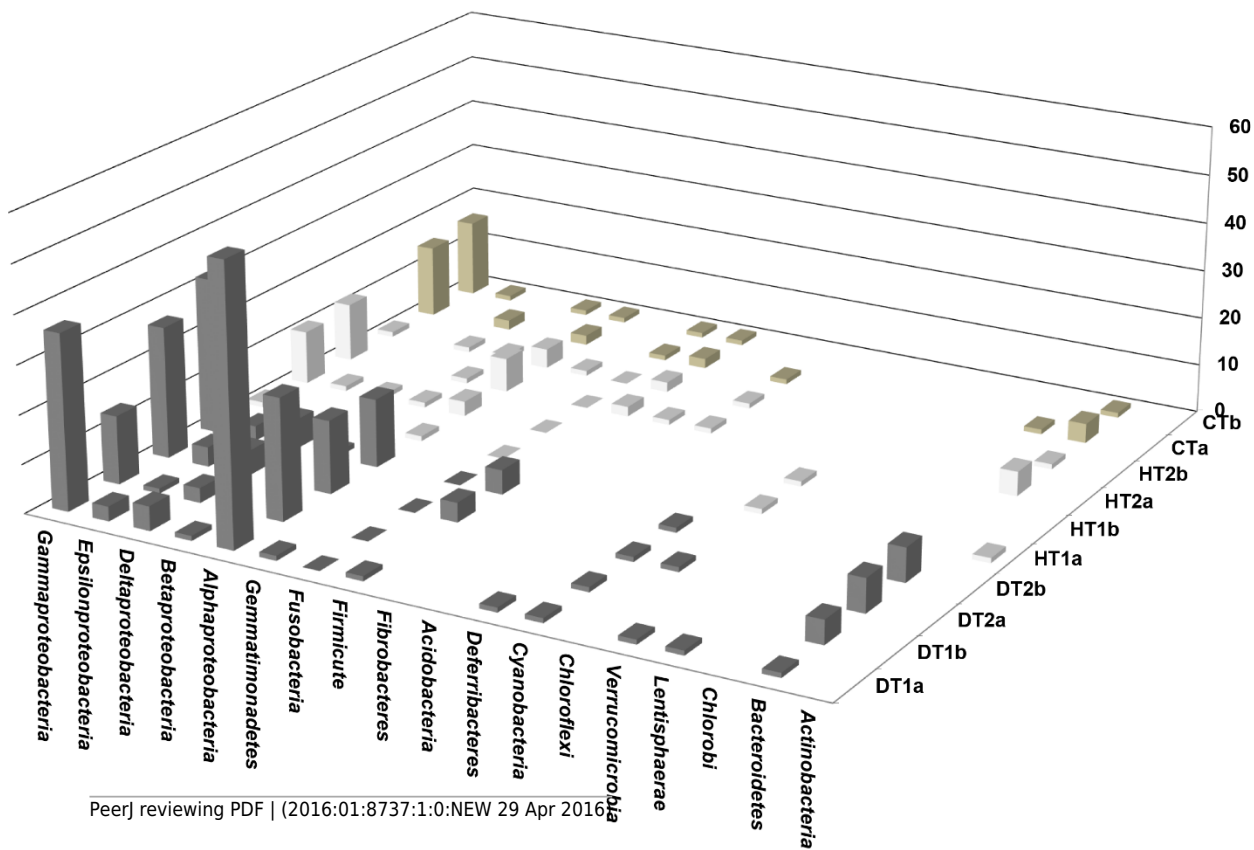


Figure 7(on next page)

Venn diagram of bacterial genera showing their distributions in:

PorBBD-infected tissues (DT), healthy tissues (HT) and control tissue (CT). * indicates potentially pathogenic bacterial genera as identified in a literature survey of coral diseases.

**Disease tissue
(DT)**

**Control tissue
(CT)**

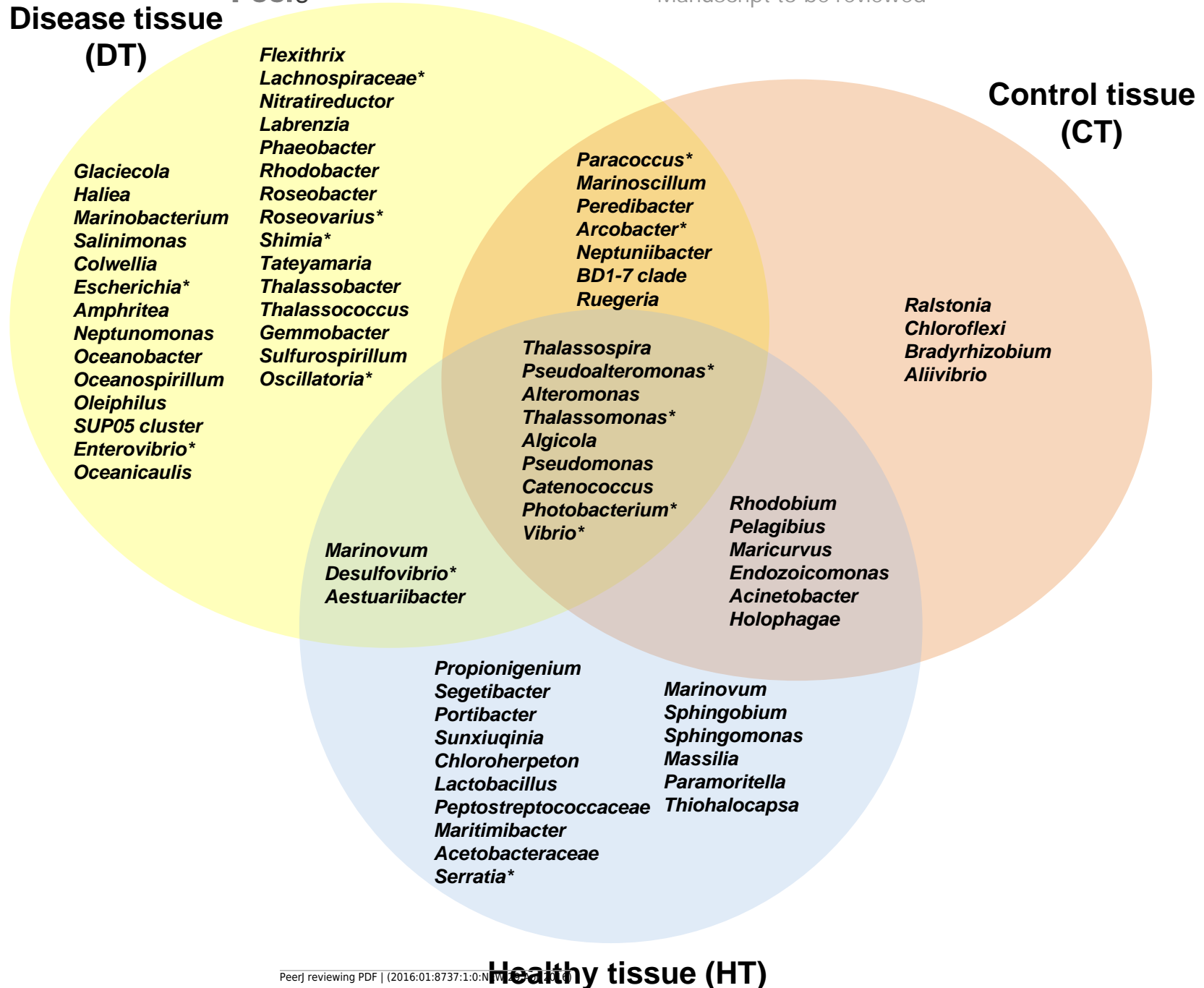


Table 1 (on next page)

Location and depth of the reef sites and stations selected for this study.

Table 1: Location and depth of the reef sites and stations selected for this study.

Sites	Stations	Habitat	Reef depth (m)	Latitude/ longitude
L'Ermitage	3-Chameaux	Reef flat	0.5-1.0	-21.080351° ; 55.219576°
La Saline	Trou d'Eau	Reef flat	0.5-1.0	-21.103312° ; 55.242294°
Saint-Leu	La Corne	Reef flat	0.5-1.0	-21.165960° ; 55.285080°
Saint-Leu	Ravine des Poux	Reef flat	0.5-1.0	-21.176397° ; 55.285985°
L'Ermitage	3-Chameaux	Reef slope	10.0-12.0	-21.081281° ; 55.217590°
La Saline	Trou d'Eau	Reef slope	10.0-12.0	-21.106160° ; 55.239540°
Saint-Leu	La Corne	Reef slope	10.0-12.0	-21.165940° ; 55.281930°
Saint-Leu	Ravine des Poux	Reef slope	10.0-12.0	-21.175490° ; 55.283460°

5

6

7

Table 2 (on next page)

Total sequences read before and after sequence trimming, number of bacterial classes and genera and diversity indices for each sample and subsample of PorBBD (DT1a-DT1b and DT2a-DT2b), apparently healthy tissue (HT1a-HT1b and HT2a-HT2b) and control tissue

Table 2: Total sequences read before and after sequence trimming, number of bacterial classes and genera and diversity indices for each sample and subsample of PorBBD (DT1a-DT1b and DT2a-DT2b), apparently healthy tissue (HT1a-HT1b and HT2a-HT2b) and control tissue (CTa and CTb).

	DT1a	DT1b	DT2a	DT2b	HT1a	HT1b	HT2a	HT2b	CTa	CTb
Σ raw sequences	11 320	12 703	14 848	13 386	15 660	14 646	19 008	15 221	12 563	8746
Σ OTU	2560	2569	2338	2363	1417	1334	1484	1149	1160	801
Σ bacterial Phylum	14	8	12	10	6	8	13	12	14	11
Σ genera	118	48	63	69	15	19	29	22	29	32
Shannon index	4.689	4.586	4.477	4.509	3.333	3.398	3.204	3.191	3.563	3.666
Simpson reciprocal index	13.642	13.334	13.458	13.650	9.090	9.294	8.336	8.326	9.949	10.215