

1 **Blood parasite infection causes marginal temporary costs in juvenile birds of prey**

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15 **Abstract**

16 Physiological costs from parasites arise by host colonization and defence activation and can vary
17 according to the interactions of host and parasite traits and states. Parasite-induced costs crucially
18 differ between stages of infection but this is difficult to assess in wild vertebrates. To evaluate the
19 effects of blood parasite infection in juvenile birds, we compared physiological measures of
20 common buzzard nestlings (*Buteo buteo*) between stages of infection with *Leucocytozoon toddi*, a
21 *Plasmodium*-like pathogen. We related proxies of infection damage to experimentally manipulated
22 infection intensity. We expected infection costs to be higher at the onset of infection and during
23 peak parasitemia, compared with hosts with decreasing parasitemia and uninfected ones. We found
24 body condition to be initially negatively related to infection intensity, but this relationship
25 disappeared by the late stages of infection. Furthermore, there was no difference in growth rate
26 and other physiological measures among infection stages. This indicates negligible costs of
27 parasitism and transient virulence of *Leucocytozoon* in the nestling stage of host. To diminish
28 infection-driven mortality, juveniles may evolve to be particularly parasite-tolerant which further
29 enhances parasite transmission in the population. Our results demonstrate the necessity of
30 including infection courses, rather than point estimates in models of fitness costs of infection.

31 *Keywords:* Avian malaria, bird of prey, host-parasite interactions, physiology, infection costs

32

33 **Background**

34 Parasites are defined by exploitation of foreign resources, resulting in negative short- and
35 long-term fitness effects on hosts (1–4). Parasite infections often directly affect host survival and
36 reproduction through diverse lethal and sub-lethal effects on host physiology, behaviour and
37 ecology (5–7). They can also exacerbate indirect effects of the abiotic environment (8,9), intra- or
38 interspecific interactions (10), and other symbionts (11). Such combined detrimental effects may
39 result in high fitness costs in juvenile animals, because the immaturity of juvenile defences can
40 facilitate high intensities of infection (12–15). During early stages of host development, adaptive
41 immunity has not fully matured yet. This may reduce the risk of pervasive autoimmunity but leaves
42 juveniles more susceptible to, and slower at suppressing parasites compared with adults (16–18).
43 Additionally, young hosts often rely on parental care and are less mobile (19), hence are not only
44 susceptible but also particularly accessible for vectors until mobility is achieved. This provides a

45 particularly suitable ecological niche for parasites, whose probabilities of transmission and
46 successful establishment in hosts are enhanced under these conditions. Correspondingly, some
47 infections are particularly common and intense during “childhood” (12,20). Early life host-parasite
48 interactions can therefore have important consequences for host survival and parasite transmission
49 but are still not well understood in the wild. On the other hand, because severe fitness costs to
50 juveniles in pre-reproductive age would lead to the dying out of susceptible host demes, a weaker
51 juvenile immunity combined with high infection probabilities may also force parasites to become
52 less virulent and evolve toward benign forms of symbiosis approaching commensalism.

53 In many endoparasites and infection models, upon host invasion, parasitemia (i.e. the proportion
54 of infected host tissue) usually (1) first increases, (2) reaches a plateau/peak and then (3) decreases
55 rapidly (Fig. 1) (21,22). When the adaptive immunity succeeds to mount a specific response,
56 parasitemia decreases and (4) stabilizes at low chronic levels, usually followed in the long term by
57 relapses or effective clearance (Fig 1) (21–23). Further on, we term these time periods of individual
58 infections progressions “infection stages” (in contrast to tissue-specific parasite developmental
59 stages). Due to tissue damage, parasite-driven resource depletion and inflammation, the
60 physiological costs of infection can be expected to be immediate, i.e. to be highest during the pre-
61 patent and acute stages of infection (i.e. shortly before and during peak parasitemia), rather than
62 during chronic and low parasitemia when gradual recovery ensues (24–26). However, an open
63 question remains whether this results in short-lived immediate costs, delayed costs of recovery, or
64 both.

65 Vertebrate haemosporidian parasites mostly follow the model of infection progression outlined
66 above but are known particularly because of several group members, which are significant disease
67 and mortality agents. Five species of *Plasmodium* cause substantial pathology and mortality in
68 humans, particularly in children. The sister clades *Haemoproteus* and *Leucocytozoon* have been
69 suggested to play similar roles in wildlife (9, 21). Parasitic cells, merozoites released into the blood
70 invade different types of blood cells (21,28) and blood parasitemia increases until reaching peak
71 infection, which can last several days. While it has been shown that these parasites can cause tissue
72 and organ dysfunction in hosts, the frequency and severity of these problems among wild hosts as
73 well as factors which modulate them in nature are still unknown (21,24).

74 In this study, we performed a field experiment to examine the effects of blood parasite infection
75 and used physiological measures as informative proxies of costs of infection in nestlings of wild
76 common buzzards, *Buteo buteo*. In our study population, the prevalence of *Leucocytozoon toddi*
77 before fledging of nestlings surpasses 50% (29,30). We recorded and manipulated the levels of
78 parasitemia at two time points to evaluate how they affect physiological states and development
79 and thus to reveal potential immediate infection- and immunity-related costs to hosts. We predicted
80 immediate parasitic costs in nestlings, i.e. higher infection costs during challenging parasitemia
81 stages (increasing and peak) compared with nestlings with decreasing parasitemia and uninfected
82 ones. Additionally, we expected that, as the number of infected cells increases, the severity of costs
83 will positively correlate with host parasitemia.

84

85 **Methods**

86 *(a) Host-parasite system*

87 Common buzzards (*Buteo buteo*) are accipitriform birds of prey that breed in temperate
88 Eurasian forests, in tree nests at heights between 10 to 30 m. Common buzzards are long-lived (up
89 to 29 years in the wild) and the most common accipitriform in Europe. They have the highest
90 prevalence of blood parasites of the genus *Leucocytozoon* among sympatric raptor species (30).
91 *Leucocytozoon toddi* (Eukaryota, Protista, Haemosporidia, lineages MILANS04, MILVUS01,
92 BUTBUT03) is by far the most common blood parasite in our study population of common
93 buzzard (Chakarov, unpublished). The vector-borne transmission of *Leucocytozoon* has been
94 suggested to mostly occur in a quasi-vertical direction (31). Black fly vectors (Simuliidae) may
95 first suck blood from infected parents at the nest site and predominantly transmit the same genetic
96 pool of parasites to their offspring (31). Prevalence of infection varies significantly across years,
97 with a minimum of 13.6% in 2014, a maximum of 68.2% in 2020 and a mean of 44.2% from 2005-
98 2020 in our long-term dataset on prevalence.

99 *(b) Data collection*

100 The study was performed in a 300-km² study area in North Rhine-Westphalia, Germany (8°25' E
101 and 52°06' N) as part of a long-term study that started in 1989. From 2016 to 2020, 276 common
102 buzzard nestlings (n = 32, 65, 71, 108 in 2016, 2018, 2019, 2020 respectively) were sampled. All

103 individuals were resampled on average eight days after first sampling (T_0 thereafter, mean \pm s.d. =
104 8.36 ± 4.21 days, Fig. 1). At both sampling points, nestling age was estimated using a sex-specific
105 polynomial regression between age and wing length, based on growth data for buzzards of known
106 age (32). The average estimated age of nestlings at T_0 was 19.47 days (\pm s.d. 5.01) and was 27.84
107 days (\pm s.d. 5.36) at second sampling (T_1 thereafter), an age where most nestlings have already
108 encountered *Leucocytozoon* and hence infections are microscopically visible (31). Blood smears
109 were screened by microscopy for *Leucocytozoon toddi* infection at T_0 and T_1 . Approximately
110 10.000 erythrocytes were scanned in thin blood smears and parasitemia at T_0 and T_1 was
111 categorized as follows: not infected (no detectable parasites), parasitemia 1 (1–10 parasites per
112 10.000 erythrocytes), parasitemia 2 (>10–100 parasites per 10.000 erythrocytes); parasitemia 3
113 (>100–1000 parasites per 10.000 erythrocytes) and parasitemia 4 (>1000 parasites per 10.000
114 erythrocytes). Categorization of parasitemia allowed us to test for potential non-linear relationships
115 between parasitemia and physiological parameters. Among the sampled nestlings, 66% ($N=183$)
116 were infected during at least one of the two time points, whereas 34% ($N=93$) were not infected at
117 both time points; only 23 nestlings naturally displayed decreasing parasitemia between both
118 sampling points. An artificial treatment of decreasing parasitemia was achieved by giving 11mg
119 of antimalarial medicine (MalaroneTM; Atovaquone and Proguanil Hydrochloride,
120 GlaxoSmithKline, UK, range: 7-21 mg/kg) diluted in 0.5mL of distilled water to a random subset
121 of sampled nestlings in 2018 ($n = 14$), 2019 ($n = 41$) and 2020 ($n = 36$). This uniform dose was
122 non-toxic but higher than the usual weight-adjusted dosing, thus a uniform efficiency on parasites
123 was assumed (33,34). Control nestlings represent two groups, nestlings that did not receive
124 antimalarial medicine and nestlings that were orally given 0.5 mL of distilled water. Both groups
125 did not differ in average physiological parameters nor in *Leucocytozoon* intensity, hence these
126 individuals were pooled together in the control group, sampled in 2016 ($n = 32$), 2018 ($n = 51$),
127 2019 ($n = 30$) and 2020 ($n = 72$). Treated and control groups were on average 28.28 days (\pm s.d.
128 4.23) and 27.57 days (\pm s.d. 5.80) old at T_1 , respectively. Similar treatments have been previously
129 shown to substantially reduce the prevalence of *Plasmodium* in bird populations (5,34,35).
130 According to the change in parasitemia between both sampling points, the 276 nestlings were
131 separated into four groups (Fig. 1): (i) uninfected nestlings (no apparent infection at both
132 samplings, $n = 93$), (ii) increasing infection ($n = 92$), (iii) peak infection (i.e., constant parasitemia

133 and >10 parasites per 10.000 erythrocytes at both samplings, n = 24) and (iv) decreasing infection
134 (n = 67).

135 Across the study, 22 nestlings were resampled a third time. A consistent infection trend was
136 observed for 77% of them, a when comparing the infection trend from first with either second or
137 third sampling point (eight remained uninfected, six remained with increasing parasitemia, one
138 remained at peak parasitemia and two remained with decreasing parasitemia), showing that two
139 sampling events produce robust estimates of infection trend of *Leucocytozoon toddi* in more than
140 two thirds of sampled individuals. The remaining five individuals (23%) of these 22 nestlings
141 differed in their infection development between first and either second or third sampling. The stage
142 of two nestlings changed from increasing parasitemia to stable parasitemia, one uninfected nestling
143 changed into increasing parasitemia, another one changed from decreasing to peak parasitemia and
144 one from decreasing parasitemia to stable, low parasitemia.

145 (c) Cost-indicative physiological parameters

146 At T₀ and T₁, we measured the body weight (to the nearest 5 g) with a spring scale, the wing length
147 (to the nearest mm) with a wing ruler and the respiratory rate (duration of 30 breaths in seconds)
148 of each nestling. The cloacal temperature (henceforth body temperature, measured with an
149 electronic thermometer) was recorded in 2019 and 2020. The repeatability of the temperature
150 measures was high: R²= 0.91 (CI = 0.81 – 0.96, P < 0.001), calculated from 27 paired measures
151 taken 30s apart on both adults (> 2 calendar years, with unknown precise age) and nestling
152 common buzzards (age: 20- 30 days, mean: 40.35°C, s.d. ± 0.39°C). To control for an ambient
153 temperature effect, the average daily temperatures of the sampling days were obtained from the
154 NASA POWER Project (36). Growth rate per day was calculated as the weight change between
155 T₀ and T₁ divided by the difference in days separating the two measurements. The body condition
156 index of a nestling was estimated for each sampling event as the residual variance of the sex-
157 specific linear regression between weight and wing length (log-transformed), based on standard
158 growth data of common buzzard nestlings (32). To account for state-dependent development of
159 individual body condition, we used either body condition at T₁ or change in body condition (later
160 ΔBC) between T₁ and T₀ as a proxy of costs in our models.

161 (d) *Statistical analyses*

162 We fitted a linear mixed model to estimate the effect of antimalarial treatment on the parasitemia
163 of nestlings, adding year and interval between samplings as covariates and nest ID as a random
164 factor. As suggested by Råberg et al. (2007), the comparison of slopes of a regression between
165 host health and parasite load is a measure of tolerance, e.g. the steeper the slope, the steeper the
166 health proxy decreases per unit of parasite load - the less tolerant the host. We hence estimated, at
167 each infection stage (increasing, peak and decreasing parasitemia), the slope between a fitness-
168 informative trait (ΔBC) and parasitemia. Slopes were compared among infection stages and to zero
169 using the *emmeans* (38) package in R 4.0.2 (39).

170 To examine the relationship of different cost-related physiological parameters to (i) host infection
171 stages and (ii) parasitemia, we used linear mixed models fitted by REML, implemented in lme4
172 (40). We fitted four models with breathing rate and body temperature at T_1 as well as body
173 condition at T_1 and growth rate between T_0 and T_1 as the response variables, respectively. As fixed
174 factors, we specified either (i) the infection stage or (ii) the parasitemia, as well as sampling
175 interval (in days), year of sampling, sex and age. To account for a potential effect of the anti-
176 malarial treatment on the response variables, we included treatment (antimalarial treatment versus
177 control) as fixed factor in all models, although a previous analysis showed no effects of Malarone
178 administration on body condition, growth rate and blood chemistry of the same population of
179 buzzard nestlings (33). Numerical explanatory variables were standardized using a z-
180 transformation (41). Nest ID was fitted as a random factor in all models to consider nestling
181 relatedness. All models are described in detail in Supplementary Table S1.

182

183 **Results**

184 (a) *Efficiency of the antimalarial treatment*

185 The proportion of infected nestlings remained stable in the antimalarial treatment group, while in
186 control nestlings it increased between T_0 and T_1 (Fig. 2a). The antimalarial treatment significantly
187 reduced the parasitemia of treated nestlings (Treatment [Malarone]: est. = -1.77, *s.d.* = 0.28, *df* =
188 177, *t* = -6.45, *P* = 1.03e-9, Fig. 2b). Initial parasitemia in treated nestlings was higher than in
189 control nestlings (permutation two sample t-test, mean \pm *s.d.*: Control = 0.86 ± 1.34 , Malarone =

190 1.58 ± 1.57 , *perm.*: 999, $t = -3.97$, $P = 0.002$, Fig. 2b). This corresponded to an age difference
191 between treated nestlings compared to control nestlings (*mean* = 21.4 days and 18.5 days, resp., t
192 = 5.21, $df = 225.44$, $P = 4.30e-07$). At T₁, the age difference was not significant anymore ($t = 1.31$,
193 $df = 223.28$, $P = 0.191$).

194 *(b) Transient effect of parasitemia on host health throughout infection cycle*

195 Overall, nestling Δ body condition (Δ BC, change between T₀ and T₁) correlated negatively with
196 parasitemia (est. = -7.02, *s.d.* = 3.16, $df = 274$, $t = -2.22$, $P = 0.027$). This correlation changed,
197 however, depending on the stage of infection - it was negative in nestlings with increasing (est. =
198 -24.08, *s.d.* = 5.99, $df = 177$, $t = -4.02$, $P < 0.001$) and peak infections (est. = -41.80, *s.d.* = 23.47,
199 $df = 177$, $t = -1.78$, $P = 0.054$) but did not correlate in nestlings with decreasing parasitemia (Fig.
200 3, Supplementary Table S2). Moreover, the slopes of Δ BC against parasitemia tended to be
201 different between increasing and decreasing infection (Supplementary Table S2).

202 *(c) Unchanged breathing rate across infection stages and intensities*

203 Breathing rate did not correlate with infection stage or parasitemia (Table 1a & 2a respectively,
204 fig. S4a). Heavier nestlings were breathing more slowly, regardless of their infection status and
205 age (est. = -2.62, *CI* = -4.20 – -1.04, $df = 252$, $t = -3.27$, $P = 0.001$). The breathing rate of nestlings
206 correlated negatively with ambient temperature (est. = -2.97, *CI* = -4.15 – -1.79, $df = 126$, $t = -$
207 4.98, $P < 0.001$, Supplementary Table S3a). Breathing rates in 2018 and 2020 were significantly
208 lower than in 2016 (Supplementary Table S3a). There was no significant effect of the antimalarial
209 treatment on the breathing rate (Supplementary Table S3a).

210 *(d) Lower body temperature at highest infection intensity*

211 Body temperature did not differ among infection stages (Table 1a). However, body temperature
212 decreased as parasitemia increased, due to a significantly lower body temperature of nestlings with
213 acute parasitemia (level 4) compared with uninfected nestlings (est. = -0.78, *CI* = -1.34 – -0.23, df
214 = 149, $t = -2.79$, $P = 0.006$, Table 2a, Fig. 4b). Body temperature of nestlings increased with
215 ambient temperature and decreased with increasing time between both samplings. There was no
216 effect of the antimalarial treatment on the body temperature (Supplementary Table S3a).

217 (e) *Body condition decreased with higher infection intensities but not stages*

218 Body condition did not differ among infection stages (Table 1b). Nestlings with acute peak
219 infections (level 4) had a lower body condition compared with uninfected nestlings (Fig. 4c, est. =
220 -43.99, $CI = -82.92 - -5.05$, $df = 258$, $t = -2.22$, $P = 0.027$, Table 2b). Nestlings at T_1 appeared to
221 be leaner (i.e. apparent lower body condition) than at T_0 . Nestlings had a significantly higher body
222 condition in 2018, 2019 and 2020 compared to 2016 (Supplementary Table S3b). Age and the
223 antimalarial treatment showed no effects on ΔBC (Supplementary Table S3b).

224 (f) *Lower growth rate associated with highest infection intensities*

225 Growth rate of nestlings did not differ between different infection stages after accounting for
226 potential confounding factors, despite a non-significant reduction of growth in later infection
227 stages (Table 1b, Supplementary Fig. S1d). Nestlings with highest parasitemia (level 4) tended to
228 have lower growth rates than uninfected nestlings (Table 2b, Fig. 4d). Females had higher growth
229 rates than males. Growth rate decreased with age of the nestlings, as they were approaching adult
230 size. Growth rate tentatively appeared higher during the last year of the study and when the time
231 interval between both samplings was longer (Supplementary Table S3b). Finally, there was no
232 evidence for a difference in growth rate between antimalarial-treated and control nestlings.

233

234 **Discussion**

235 Host responses to parasite infections receive great interest because of their potentially
236 crucial consequences for host fitness (42). However, to understand which responses are effective
237 and adequate, specific measurements for a variety of host-parasite systems beyond the laboratory
238 models are needed. Haemosporidian blood parasites are often considered pathogenic, even though
239 the generality of evidence among hosts groups remains equivocal (43,44). Here, we recorded and
240 experimentally manipulated infections of the main blood parasite in relatively slowly developing
241 young hosts to assess infection-related changes in several physiological and developmental
242 measures. Multiple samplings of the same individuals allowed us to estimate the stage along the
243 course of infection for each of them. Some parasites have been shown to impair host body
244 condition and growth rate, often through costs of defence deployment (11,45,46). In turn, these
245 effects may lead to higher predation, starvation and inferiority of infected hosts in intra- and inter-

246 specific interactions (10). Altogether, consequences of parasite infections can impair the survival
247 probability of infected hosts, but before labelling an ecological interaction as parasitism, costs have
248 to be demonstrable (27,47).

249 Our results suggest that young common buzzards generally do not display parasite-induced costs
250 during the course infection. Only in cases of acute infection (extraordinarily high levels of peak
251 infection), nestlings appeared unable to completely maintain thermoregulation, body condition and
252 growth rate. Substantial damage and population-wide mortality due to exceptionally high
253 *Leucocytozoon* parasitemia have been reported in some populations of mostly non-coadapted hosts
254 (18,21,48,49). However, our results indicate that while possible, costs of parasite exploitation and
255 immune activation occur rarely in young birds of prey. While some species of blood parasites form
256 large tissue stages (megalomeronts) which might be most strongly correlated with tissue damage
257 and infection severity (50), others, including raptor-specific *Leucocytozoon*, typically do not
258 appear to produce such stages (51). The moderate effects of *Leucocytozoon* on raptor nestlings are
259 supported by recent studies showing that these parasites do not induce blood chemistry changes
260 indicative of tissue damage (30). Future research across host-parasite associations is needed to test
261 whether parasitic lineages lacking such tissue stages have a longer coadaptation history and are
262 possibly as a result more benign for the hosts.

263 We found no difference in breathing rate among nestlings in different stages of infection and
264 uninfected nestlings. This suggests that *Leucocytozoon* do not cause substantial anaemia in
265 nestlings, which could reduce the physiological oxygen availability and lead to respiratory
266 complications (26,52). Blood parasite genera differ in their life cycle with potential relevance in
267 this aspect - *Plasmodium* multiply within red blood cells causing them to burst (schizogony)
268 whereas *Leucocytozoon* and *Haemoproteus* only make infected blood cells weaker and/or more
269 susceptible to immune defences (50). Both comparative and experimental studies are needed to
270 discern if breathing rate remains unchanged only in young altricial hosts, which are not challenged
271 through flight and other intense muscle use, or if this also applies to free-ranging hosts during peak
272 infection. However, in certain host groups such as raptors (own observations), the majority of
273 primary infection peaks are concentrated during the immobile nestling phase which may both open
274 opportunities but also restrict the evolutionary paths parasites can take.

275 Thermoregulation failure as a typical inflammatory response is common in hosts infected by blood
276 parasites (25,26). Such responses have been found only in bird-*Plasmodium* systems where fever
277 and hypothermia appeared after parasite inoculation in captive birds (25,26). Indeed, buzzard
278 nestlings with acute infections displayed lower body temperatures by on average 0.8°C, potentially
279 reflecting hypothermia. However, no difference in body temperature was found among infection
280 stages, suggesting that most hosts pass through all stages of infection without their
281 thermoregulation being compromised.

282 As several different organs and tissue types may be targeted during infection with blood parasites,
283 host body condition can be expected to deteriorate while parasites increasingly invade host cells
284 (25,53). Nevertheless, body condition only appeared lower in nestlings experiencing acute
285 infections, while there was no difference between infection stages. Thus, symptomatic costs of
286 infection appear to be paid immediately and are only noticeable over rare and short periods when
287 infections are extraordinarily intense. Nestling body condition predicts juvenile survival in large
288 bird species (16). Consequently, if chicks should not be able to compensate for condition loss
289 before independence, acute infections of nestlings may contribute to delayed increase of juvenile
290 mortality.

291 Growth of infected nestlings did not differ compared to uninfected nestlings, even though it
292 appeared to slow down during consecutive stages of parasitic infection, irrespective of age.
293 Nestlings bearing a high parasitemia tended to display lower growth rates than other groups. Thus,
294 our results suggest that parasitic costs are not apparent at every stage of infection (Fig. 3) but only
295 at highest levels of parasitemia (Fig. 4), which occur in only few individuals. Furthermore, body
296 condition, our best proxy for fitness-relevant host health, decreased with parasite load but this
297 relationship turned around in later stages of infection (Fig. 3). This indicates immediate costs for
298 hosts bearing intense infections and symptoms of infection occurring only during poorly controlled
299 parasitemia. Differing slopes of host health to parasitemia (Fig. 3, table S2) between nestlings with
300 increasing and decreasing parasitemia suggests resilience to infection, i.e. condition being regained
301 after onset of adaptive immunity (after peak, already during decreasing parasitemia). Therefore,
302 the overall effects of *Leucocytozoon toddi* infections in buzzards can be considered mild. Thus,
303 the timing of infection in raptors and similar big birds may be adaptive, as parental care provides
304 a buffer against potentially but rarely cost-intense, short periods of peak infection (21,54).

305 The apparent low virulence, together with the mostly absent physiological responses to infection
306 suggest that host and parasite may have defused the co-evolutionary arms-race by reaching
307 widespread transmission to the immunologically naïve and susceptible but tolerant nestling stage
308 and thereby a different equilibrium to parasites of the genus *Plasmodium*. Unlike generalist
309 parasites, parasites similar to raptor-specific *Leucocytozoon* may achieve very high prevalence
310 among their main host species especially because of such relaxed selection pressure (30).

311 Recent research shows that individual survival within the same buzzard population is not explained
312 by *Leucocytozoon* infection status or intensity (manuscript in review). Because survival is
313 explained by body condition during the nestling phase but not by parasitemia directly, acute
314 parasitic infections could decrease the long-term survival prospects of some individuals through
315 lowered body condition of chicks (47). However, other environmental factors such as prey
316 availability and weather conditions appear to be much more influential (55,56).

317 We show that year of sampling explains variation in all four physiological parameters. Body
318 condition and growth rate are tightly linked to food availability, while annual fluctuations in field
319 vole (*Microtus arvalis*) abundance as the main source of energy for common buzzards are known
320 to have strong effects on their demography (55). Fluctuations in vole abundance also explain
321 variation in the breeding success in different parts of the breeding range (57,58). In our study area,
322 the proportion of voles among prey items corresponds to differences in body condition and growth
323 rate of nestlings of the same cohorts (unpublished data). Future research should address
324 specifically host-parasite relationships in the light of the highly dynamic food availability.

325 Overall, our long-term field experiment resulted in finding only few signs of infection costs on
326 nestling physiology, suggesting overall low pathogenicity of specialist blood parasites in raptor
327 nestlings. Potential negative effects were apparent rarely and transiently at highest infection peaks,
328 but disappeared at later stages of the infection course. During most non-extreme infections,
329 juveniles appear to be tolerant and robust hosts that enable parasite transmission without paying
330 substantial fitness costs and avoid direct or indirect parasite-induced mortality. Our study
331 demonstrates the necessity to understand in greater detail “childhood diseases” in the wild. We
332 suggest exploration without prejudice of symbiotic and parabiogenic relationships between
333 microorganisms and the most probable host developmental stages at the time of first contact, as
334 these interactions and their valence are most relevant for the long-term co-evolutionary dynamics.

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348 NC.

349 **Data, code and materials**

350 The manuscript is available as a preprint on EcoevoRxiv under the license CC-BY Attribution-ShareAlike
351 4.0 International (doi: [10.32942/osf.io/4tcqu](https://doi.org/10.32942/osf.io/4tcqu)).

352 Raw data and associated code for analyses are available on this anonymized repository
353 (https://github.com/TonyRinaud/MS_physiology_infection). Supplementary materials are available on
354 this repository (<https://osf.io/4dhuv/>).

355 **Ethics**

356 Sampling and drug application of common buzzards were performed in accordance with the relevant
357 guidelines and regulations. This work followed the ARRIVE guidelines and was approved by the Animal
358 Ethics Committee at Bielefeld University and permitted by the local authority Kreis Gütersloh, permit
359 number: 4.5.2-723-Bussard and by the ethics committee of the Animal Care and Use Committee of the
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362 02.04.2014.A091, 84-02-04.2017.A147.

363 **Competing interests**

364 The authors declare that they have no conflict of interest.

365

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508

509 **Tables**

510 **Table 1:** Results of four linear mixed models described in Supplementary Table S1, testing the effect of infection stages on the cost-
 511 related physiological parameters of Common Buzzard nestlings. a) Breathing rate and body temperature as response variables, b) Body
 512 condition and growth rate as response variables. Full model results are presented in Supplementary Table S3.

<i>a. Predictors</i>	Breathing rate at T₁					Body temperature at T₁				
	<i>Estimates</i>	<i>CI</i>	<i>df</i>	<i>t</i>	<i>p</i>	<i>Estimates</i>	<i>CI</i>	<i>df</i>	<i>t</i>	<i>p</i>
Intercept	36.49	31.35 – 41.64	174	13.99	<0.001	39.78	39.35 – 40.21	131	181.72	<0.001
Increasing parasitemia	-0.54	-3.00 – 1.91	256	-0.44	0.664	-0.13	-0.48 – 0.21	145	-0.78	0.435
Peak parasitemia	-1.08	-4.80 – 2.65	251	-0.57	0.570	-0.13	-0.58 – 0.32	142	-0.58	0.562
Decreasing parasitemia	-1.45	-4.19 – 1.28	256	-1.05	0.295	0.06	-0.28 – 0.41	151	0.35	0.724
...
Random Effects	135 Nests					77 Nests				
Observations	269					178				
Marginal / Conditional R ²	0.180 / 0.397					0.303 / 0.712				

<i>b. Predictors</i>	Body condition at T₁					Growth rate				
	<i>Estimates</i>	<i>CI</i>	<i>df</i>	<i>t</i>	<i>P</i>	<i>Estimates</i>	<i>CI</i>	<i>df</i>	<i>t</i>	<i>P</i>
Intercept	-46.28	-92.83 – -0.27	186	-1.96	0.051	18.73	11.86 – 25.60	190	5.38	<0.001
Increasing parasitemia	1.16	-21.22 – 23.53	263	0.10	0.919	-0.93	-4.36 – 2.51	265	-0.53	0.596
Peak parasitemia	-21.42	-55.19 – 12.34	249	-1.25	0.213	-2.09	-7.32 – 3.14	259	-0.79	0.433
Decreasing parasitemia	-3.81	-28.81 – 21.20	258	-0.30	0.765	-2.79	-6.64 – 1.07	265	-1.42	0.156
...
Random Effects	139 Nests					139 Nests				
Observations	276					276				
Marginal / Conditional R ²	0.230 / 0.530					0.232 / 0.452				

513

514 **Table 2:** Results of four linear mixed models described in Supplementary Table S1, testing the effect of parasitemia at T₁ on cost related
515 physiological parameters in common buzzard nestlings. a) Breathing rate and body temperature as response variables, b) Body condition
516 and growth rate. Full model results are presented in Supplementary Table S4.

<i>a. Predictors</i>	Breathing rate at T ₁					Body temperature at T ₁				
	Estimates	CI	df	t	P	Estimates	CI	df	t	P
Intercept	36.13	31.01 – 41.25	167	13.93	< 0.001	39.88	39.47 – 40.30	129	190.38	< 0.001
Parasitemia 1	0.93	-1.71 – 3.58	251	0.69	0.488	0.03	-0.30 – 0.37	142	0.19	0.851
Parasitemia 2	-0.70	-3.63 – 2.24	250	-0.47	0.640	0.01	-0.32 – 0.34	147	0.06	0.952
Parasitemia 3	-1.22	-3.88 – 1.44	254	-0.90	0.367	-0.16	-0.53 – 0.21	151	-0.85	0.398
Parasitemia 4	0.33	-4.09 – 4.75	253	0.15	0.882	-0.78	-1.34 – -0.23	149	-2.79	0.006
...
Random Effects	135 Nests					77 Nests				
Observations	269					178				
Marginal / Conditional R ²	0.184 / 0.402					0.329 / 0.709				
<i>b. Predictors</i>	Body condition at T ₁					Growth rate				
	Estimates	CI	df	t	P	Estimates	CI	df	t	P
Intercept	-40.16	-86.25 – 28.09	179	-1.72	0.087	18.77	11.97 – 25.57	182	5.45	< 0.001
Parasitemia 1	7.36	-16.29 – 31.01	248	0.61	0.540	0.53	-3.15 – 4.21	259	0.28	0.777
Parasitemia 2	3.87	-22.53 – 30.26	246	0.29	0.773	-1.74	-5.85 – 2.37	258	-0.83	0.405
Parasitemia 3	-8.59	-32.88 – 15.71	263	-0.70	0.497	-2.32	-6.05 – 1.42	263	-1.22	0.223
Parasitemia 4	-43.99	-82.92 – -5.05	258	-2.22	0.027	-5.26	-11.29 – 0.76	263	-1.72	0.087
...
Random Effects	139 Nests					139 Nests				
Observations	276					276				
Marginal / Conditional R ²	0.238 / 0.539					0.241 / 0.458				

517 **Figures**

518 **Figure 1:** Theoretical dynamics of parasitemia in a host. The y-axis is parasitemia score. The x-
519 axis represents time with the different phases of parasitemia. The corresponding infection stages
520 at resampling (1 = uninfected, 2 = increasing, 3 = peak and 4 = decreasing) are shown as vertical
521 colour bands. The top right diagram shows the average interval between first (T_0) and second (T_1)
522 sampling. The red points represent the time points used in models testing for costs of infection on
523 physiological parameters.

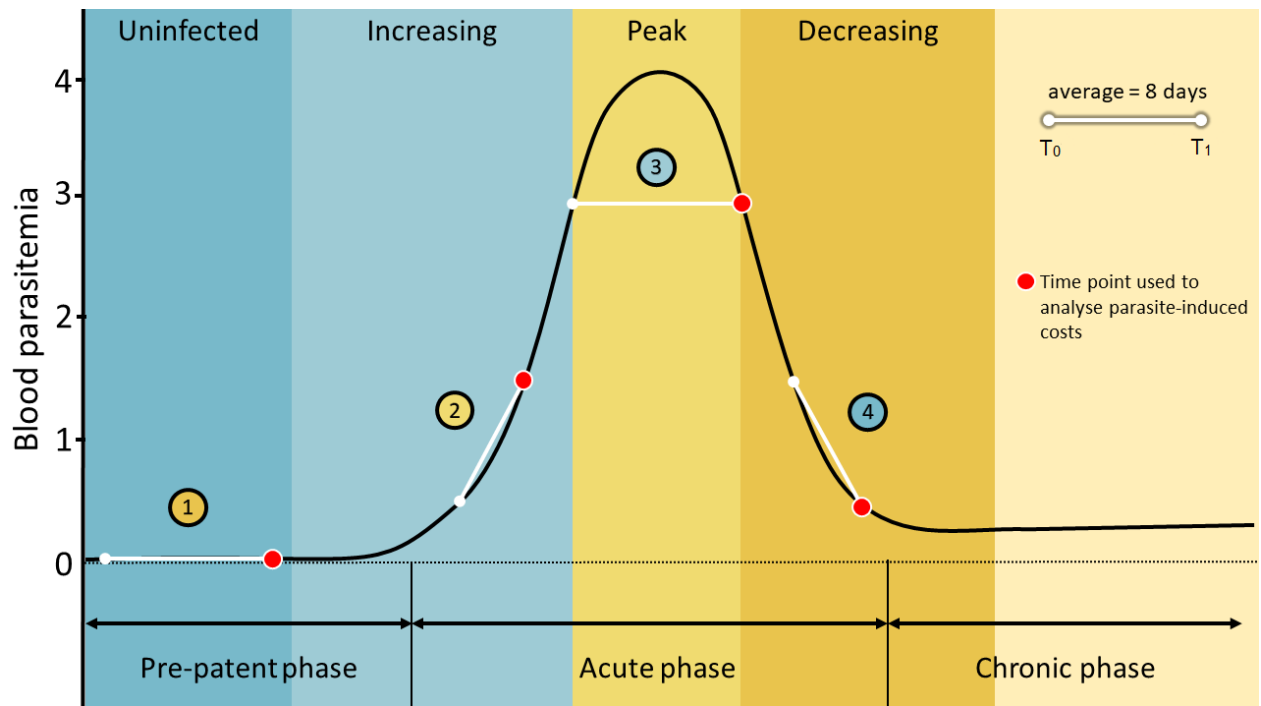
524 **Figure 2:** a) First-to-second sampling count of uninfected and infected nestlings between
525 treatments (control versus antimalarial treatments). b) First-to-second sampling mean parasitemia
526 between control and Malarone-treated nestlings. Error bars represent standard errors.

527 **Figure 3:** Relationship between body condition change (proxy of host health) and parasitemia at
528 second sampling (parasitic load as a score from 1 to 4) from the raw dataset. Reaction norms are
529 displayed for each of the infection stages (blue: increasing, yellow: peak and red: decreasing
530 parasitemia). Comparisons of reaction norms among infection stages and in comparison to a null
531 slope are presented in Supplementary Table S2. A ΔBC value of 0 means no change of body
532 condition between T_0 and T_1 . P-values of comparisons of regression slopes to zero are displayed
533 in boxes (see Table S2).

534 **Figure 4:** Comparison of predicted resistance-related physiological parameters among parasitemia
535 (ranging from 0, uninfected, to 4, highest parasitemia) from each of the four linear models. Points
536 are predicted means, coloured boxes the standard errors and 95% CI as the error bars. The black
537 dashed lines represent the predicted mean value across groups of a given parameter. a) comparison

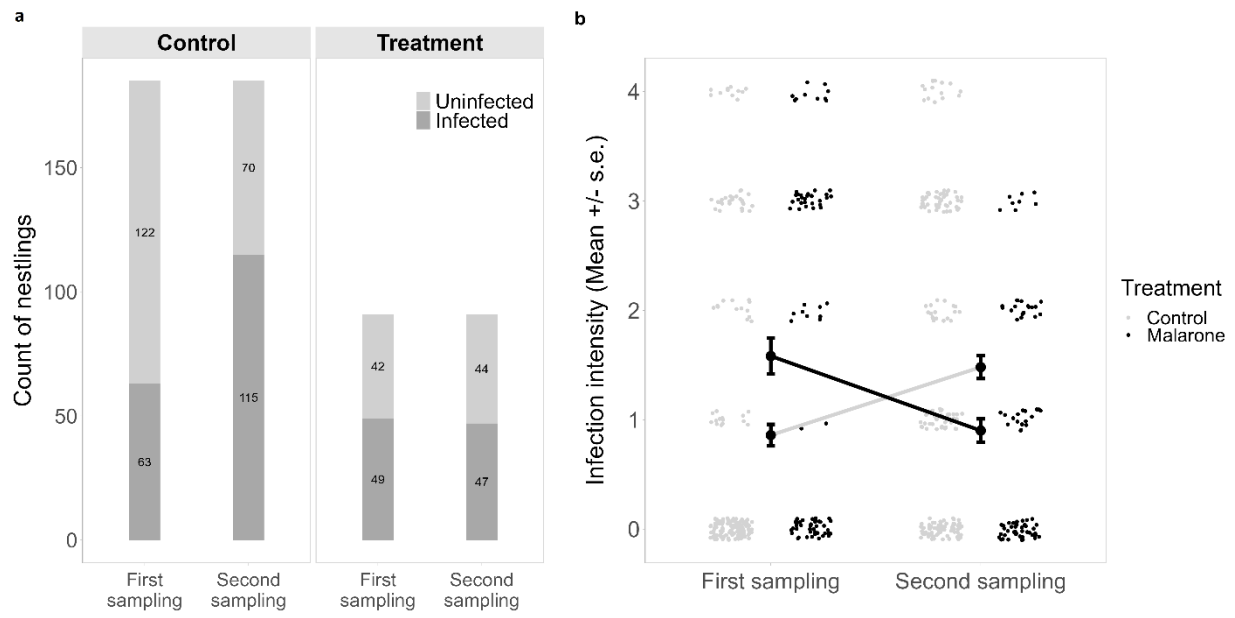
- 538 of breathing rate, b) comparison of body temperature, c) comparison of body condition and d)
- 539 comparison of growth rate among infection intensity groups at T₁.

540 **Figure 1**



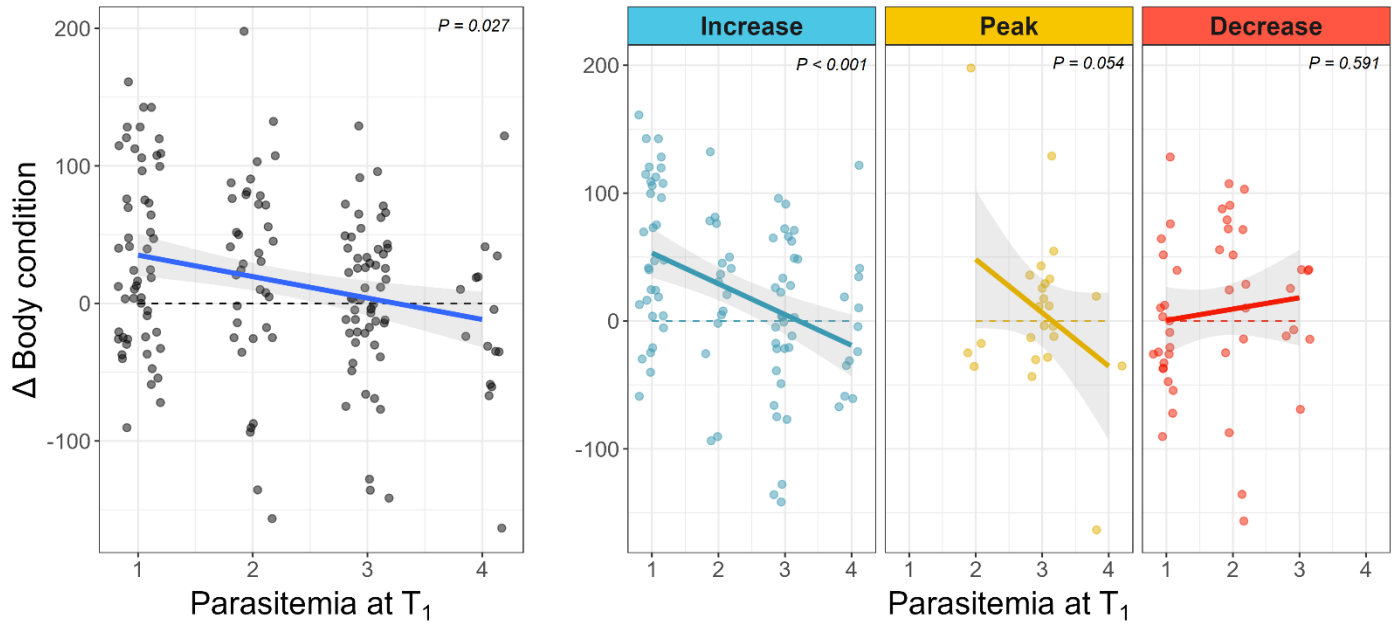
541

542 **Figure 2**



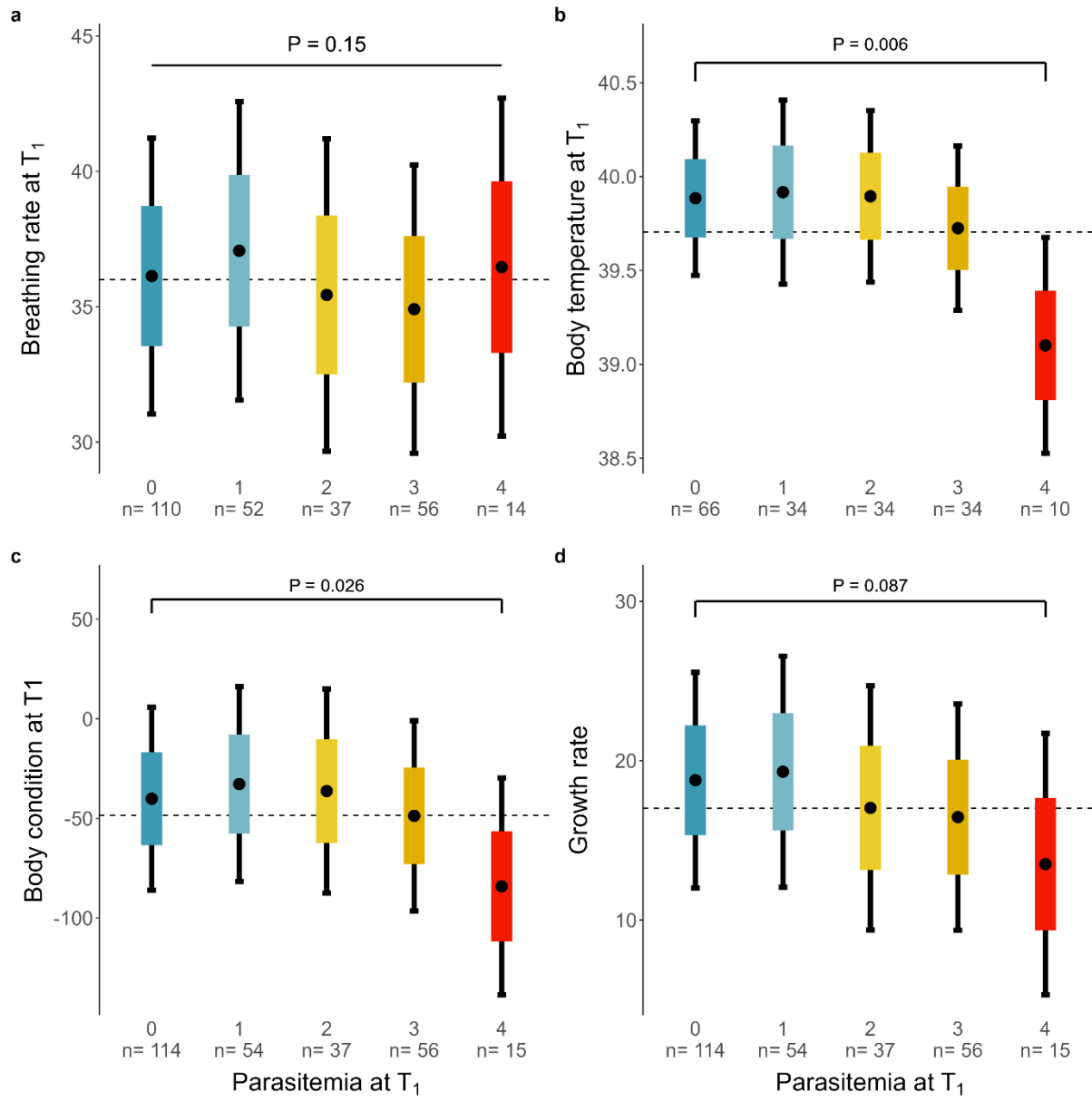
543

544 **Figure 3**



5.

546 **Figure 4**



547