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Author manuscript Matrix Biol. Author manuscript; available in PMC 2022 March 01.

Published in final edited form as:

Matrix Biol. 2021 March ; 97: 40–57. doi:10.1016/j.matbio.2021.01.002.

## **The versican-hyaluronan complex provides an essential extracellular matrix niche for Flk1+ hematoendothelial progenitors**

**Sumeda Nandadasa**a, **Anna O'Donnell**a, **Ayako Murao**b, **Yu Yamaguchi**b, **Ronald J. Midura**a, **Lorin Olson**<sup>c</sup> , **Suneel S. Apte**<sup>a</sup>

aDepartment of Biomedical Engineering (ND20), Cleveland Clinic Lerner Research Institute, 9500 Euclid Avenue, Cleveland, OH 44195, United States

<sup>b</sup>Human Genetics Program, Sanford Burnham Prebys Medical Discovery Institute, La Jolla, CA 92037, United States

<sup>c</sup>Cardiovascular Biology Research Program, Oklahoma Medical Research Foundation, Oklahoma City, OK 73104, United States

## **Abstract**

Little is known about extracellular matrix (ECM) contributions to formation of the earliest cell lineages in the embryo. Here, we show that the proteoglycan versican and glycosaminoglycan hyaluronan are associated with emerging Flk1+ hematoendothelial progenitors at gastrulation. The mouse versican mutant *Vcan*<sup>hdf</sup> lacks yolk sac vasculature, with attenuated yolk sac hematopoiesis. CRISPR/Cas9-mediated Vcan inactivation in mouse embryonic stem cells reduced vascular endothelial and hematopoietic differentiation within embryoid bodies, which generated fewer blood colonies, and had an impaired angiogenic response to  $VEGF<sub>165</sub>$ . Hyaluronan was severely depleted in *Vcan*<sup>hdf</sup> embryos, with corresponding upregulation of the hyaluronandepolymerase TMEM2. Conversely, hyaluronan-deficient mouse embryos also had vasculogenic suppression but with increased versican proteolysis.  $VEGF<sub>165</sub>$  and Indian hedgehog, crucial vasculogenic factors, utilized the versican-hyaluronan matrix, specifically versican chondroitin sulfate chains, for binding. Versican-hyaluronan ECM is thus an obligate requirement for vasculogenesis and primitive hematopoiesis, providing a vasculogenic factor-enriching microniche for  $Flk1<sup>+</sup>$  progenitors from their origin at gastrulation.

## **Keywords**

Proteoglycan; Vasculogenesis; Angiogenesis; Endothelium; Hematopoiesis CRISPR-Cas9

**Correspondence to Suneel S. Apte:** Department of Biomedical Engineering (ND20), Cleveland Clinic Lerner Research Institute, 9500 Euclid Avenue, Cleveland, OH 44195, United States. aptes@ccf.org.

Declaration of Competing Interests

The authors declare no competing interests.

Supplementary materials

Supplementary material associated with this article can be found in the online version at doi:10.1016/j.matbio.2021.01.002.

## **Introduction**

The first blood vessels in amniotes form *de novo* in the yolk sac prior to initiation of hemodynamic forces, indicating an in situ differentiation driven by the local environment, which includes extracellular matrix (ECM) [1]. This vasculogenic process is inextricably linked to subsequent primitive hematopoiesis, i.e., formation of the first erythroid and myeloid cells [2], implying a close lineage relationship between the first vascular endothelial and blood cells. The relevant Flk1+ hematoendothelial progenitor cells arise from mesodermal precursors at gastrulation [3], migrate from the primitive streak, and form blood islands in the proximal extra-embryonic yolk sac on the seventh day of gestation (E7) in mouse embryos [4,5]. Several key transcription factors and soluble effectors of vasculogenesis/angiogenesis and hematopoiesis are known [1]. Although ECM and ECMderived proteolytic fragments are recognized as angiogenesis regulators [6] and sulfated glycosaminoglycans can promote endothelial differentiation of mesenchymal stem cells [7], much remains unknown about the influence of ECM on vasculogenesis. Another early cell lineage, primordial germ cells, are accompanied by a protective "traveling niche" of steel factor/stem cell factor-producing cells during migration to the gonads [8]. Whether a cellassociated ECM supports other early lineages such as hematoendothelial progenitors is unknown.

ECM surrounds all mammalian cells, forming a distinct pericellular matrix in some cell types, and the interstitial matrix of tissues. It influences cell behavior by modulating cell adhesion, migration and tissue mechanics, sequesters growth factors and cytokines, and its proteolysis can generate bioactive fragments. Proteoglycans, which are ECM and cellsurface molecules with one or more glycosaminoglycan chains covalently attached to a core protein, participate in all these mechanisms. For example, chondroitin sulfate proteoglycans (CSPGs) such as versican, which are bulky and inherently anti-adhesive, regulate focal adhesions and cell migration [9–11]. Heparan sulfate proteoglycans (HSPGs) sequester growth factors, including angiogenic growth factors such as  $VEGF<sub>165</sub>$  and FGF2 through their HS chains and act as co-receptors in angiogenic signaling [12]. CSPGs can also bind  $VEGF<sub>165</sub>$  and may overlap functionally with HSPGs in VEGF-induced sprouting angiogenesis [13], but physiological in vivo contexts for this regulatory activity remain unidentified.

Versican is a widely distributed CSPG that aggregates with the glycosaminoglycan hyaluronan (HA), through its N-terminal G1 domain [14–17]. Its C-terminal G3 domain binds to ECM components fibronectin, fibrillins and tenascins [18] and was shown to interact with VEGF<sub>165</sub> in biochemical assays [19]. HA is anchored to cell-surface receptors such as CD44 and RHAMM as well as the membrane-localized hyaluronan synthases [20], providing a means by which versican can localize to the pericellular matrix. Pericellular versican was previously shown to modulate smooth muscle cell differentiation via regulation of cell adhesion [9,21,22]. Four versican isoforms (V0, V1–V3) arise from alternative splicing of large exons, numbered 7 and 8, encoding CS-bearing domains GAGα and GAGβ, respectively [16,23]. A versican insertional mutant mouse allele (*Vcan*<sup>hdf</sup>), which lacks all isoforms, demonstrated an essential role for versican in early cardiac development [24,25]. Has2 null embryos, lacking the major HA synthase, also die by 10 days of gestation

with similar cardiac defects as  $Vcan$ <sup>hdf/hdf</sup> [26], consistent with the versican-HA complex being a major constituent of cardiac jelly. Here, upon identification of abnormal vasculature in *Vcan*<sup>hdf/hdf</sup> yolk sac, we investigated its role in vasculogenesis and early hematopoiesis, with investigation of the key findings in embryos with inactivation of hyaluronan synthase (*Has*) genes. An intimate association of versican and HA with  $Flk1<sup>+</sup>$  hematoendothelial progenitor cells from their origin at gastrulation is demonstrated to have profound significance for vasculogenesis and primitive hematopoiesis.

### **Results**

## **Vcanhdf/hdf yolk sacs lack a vascular plexus**

Vcan<sup>hdf/hdf</sup> embryos did not survive past E10.5, and were recognizable by consistently smaller size and dilated pericardial sac at E9.5 (Fig. 1A, Supplemental Fig. 1). Although major developmental milestones, including axial rotation of the embryo and initiation of cardiac contraction were completed by E9.5, Vcanh<sup>df/hdf</sup> yolk sacs and embryos were avascular (Fig. 1B, C). Whole mount CD31 immunostaining revealed the lack of a vascular network in E9.5 *Vcan*<sup>hdf/hdf</sup> yolk sacs, in place of which scattered CD31+ cells were present instead (Fig. 1C).

In E9.5 wild-type yolk sac, versican localized to the mesoderm, but no staining was present in Vcanh<sup>df/hdf</sup> yolk sacs (Fig. 1D). HA-binding protein (HAbp) staining overlapped with versican in wild-type yolk sac mesoderm but was absent in *Vcan*<sup>hdf/hdf</sup> yolk sacs (Fig. 1D). Fibronectin immunostaining in contrast, showed increased intensity in Vcanhdf/hdf yolk sacs, whereas collagen IV staining was unaffected (Fig. 1D), suggesting that loss of HA did not represent global ECM reduction in *Vcan*<sup>hdf/hdf</sup> yolk sacs. Similar to *Has2, Itga5* and *Fn1*null alleles, which have failed yolk sac vasculogenesis and hematopoiesis [26,27], Vcan hdf/hdf yolk sacs consistently showed mesoderm detachment from visceral endoderm with few evident blood islands (Fig. 1D, Supplemental Fig. 2A–C). Intense F-actin staining was consistently observed in *Vcan*<sup>hdf/hdf</sup> visceral endoderm (Fig. 1 D, Supplemental Fig. 2A), and rounded, rather than spindle-shaped nuclei were observed in the yolk sac mesothelial layer (Supplemental Fig. 2B). Transmission electron microscopy (TEM) undertaken with fixation conditions that preserved cell-matrix interactions [28] showed complete coverage of blood islands by vascular endothelium in wild-type yolk sac but discontinuous vascular endothelial cells with numerous membrane protrusions in Vcanhdf/hdf yolk sacs (Supplemental Fig. 2C). Thus, versican is essential for proper yolk sac morphogenesis.

E8.5 Vcanhdf/hdf embryos had a normal shape, but appeared pale and their yolk sacs lacked a visible vascular network (Fig. 2A). Whole-mount CD31 immunostaining of E8.5 embryos identified severe, widespread attenuation of vasculature (Fig. 2B). *En face* imaging of whole-mount wild-type yolk sac stained with anti-CD31 demonstrated a well-formed vascular plexus which was lacking in  $Vcan$ <sup>hdf/hdf</sup> yolk sacs (Fig. 2C). Immunostaining of versican and CD31, together with HA-staining in E8.5 wild-type yolk sacs revealed versican and HA co-localization in patches corresponding to individual cells on the mesothelial aspect of blood islands (Fig. 2D). mRNA in situ hybridization with Vcan exon 7 (GAGa), or exon 8 (GAGβ)-specific probes revealed that only the exon 8 probe hybridized to E8.5 yolk

sac mesoderm (Fig. 2E), suggesting exclusively versican V1 isoform expression at E8.5. Both *Vcan* probes hybridized strongly to E8.5 wild-type hearts (Fig. 2F) but not *Vcanhdf/hdf* hearts (e.g., exon 8 probe, Fig. 2G), indicative of specificity.

#### **Versican and HA are associated with yolk sac Flk1+ cells**

Flk1, a well characterized hematoendothelial progenitor marker indispensable for both vascular and blood lineage development [29], showed complete overlap with versican and HA on the mesothelial aspect of blood islands in wild-type E8.5 yolk sac (Fig. 3A). Vcan hdf/hdf yolk sacs, in contrast, showed small blood islands with dramatically attenuated HA and Flk1 staining (Fig. 3A). En face confocal microscopy of whole-mount wild-type E8.5 yolk sacs revealed discrete patches of versican throughout the mesoderm (Fig. 3B). CD41, which is expressed upon specific commitment to the blood lineage [30], was detected in blood islands in the mid-mesoderm plane in wild-type yolk sacs (Fig. 3B). Versican did not precisely overlap with CD41+ cells and was restricted to intense patches corresponding to individual endothelial cells in wild-type yolk sacs, evident both in the surface (mesothelial) plane and cross-sections, whereas Vcanhdf/hdf yolk sacs lacked CD41-stained blood islands entirely (Fig. 3B). High magnification images showed a few cells with weak CD41 staining in *Vcan*<sup>hdf/hdf</sup> yolk sac mesoderm (arrowheads in Fig. 3B), contrasting with well-demarcated CD41+ wild-type blood islands. Combined, these results show that versican and HA distribution at E8.5 is specifically associated with uncommitted Flk<sup>+</sup> hemogenic endothelial cells, which are crucial for both blood and vascular development in the mouse embryo. However, versican and HA are not specifically associated with subsequently differentiated blood cells (Fig. 3 B,C).

#### **Versican is required for blood island formation**

RT-qPCR revealed significantly lower  $F$ *lk1* expression in  $V$ *can*<sup>hdf/hdf</sup> yolk sac and embryos (Fig. 3D), in agreement with reduced Flk1 staining observed in the Vcanhalf/hdf mutants (Fig. 3A). Neither expression of Brachyury, a mesoderm marker, nor Has2, encoding the major HA synthase in the embryo, were altered in  $Vcan$ <sup>hdf/hdf</sup> yolk sac or embryos (Fig. 3D). Expression of genes encoding blood lineage commitment markers *Itga2b* (CD41) and *Runx1* were similarly reduced in the *Vcan*<sup>hdf/hdf</sup> yolk sacs and embryos, as well as erythroid and myeloid transcripts Hbb (β-globin), Gata1 and Ptprc (CD45) (Fig. 3D). CD31 (Pecam1) mRNA expression was greatly reduced in the  $Vcan$ <sup>hdf/hdf</sup> yolk sacs and embryos (Fig. 3D), consistent with the observed lack of vasculature (Fig. 2B). Methylcellulose colony formation assays demonstrated fewer colony-forming units (CFUs) in E8.5 Vcanh<sup>df/hdf</sup> embryos and yolk sacs (Fig. 3E), in agreement with fewer CD41-stained blood islands observed in the mutant yolk sacs.

#### **Versican and HA are associated with the earliest Flk1+ cells at gastrulation**

Since  $F[k1^+$  cells arise at gastrulation, we analyzed versican and HA distribution in wildtype E7.5 mouse embryos. Versican and HA co-localized to the extraembryonic mesoderm in the blood island ring (Fig.  $4$  A,B), and colocalized with Flk1<sup>+</sup> cells (Fig.  $4$  C,D). Correspondingly, RNA in situ hybridization of serial sections from several embryos showed consistent overlap between *Vcan-, Has2-* and *Flk1*-expressing cells in the extraembryonic mesoderm (Fig. 4E, Supplemental Fig. 3). *Vcan* exon 7-containing probes gave a weaker

signal than exon 8 probes. In contrast,  $Runx1$ , which identifies blood lineage-committed cells, was expressed by cells in the extraembryonic mesoderm distinct from those expressing Flk1, Vcan and Has2 (Fig. 4E, Supplemental Fig. 3). Thus, versican-HA ECM is intimately associated with the hematoendothelial lineage emerging at gastrulation.

Data mining of a single cell RNA sequencing (scRNA-seq) atlas of early (6.5 to 8.5 day-old) mouse embryos [31] supported specific *Vcan* expression by  $Flk1<sup>+</sup>$  hematoendothelial progenitors. High *Vcan* expression was first detected in hematoendothelial progenitors emerging at E6.75, as well as in nascent and uncommitted mesoderm (Supplemental Fig. 4A–C). Vcan was expressed in Kdr (encoding Flk1)-expressing cells at E6.75, E7.0 and E7.5, spanning mouse gastrulation (Supplemental Fig.  $4A-C$ ).  $Kdr^+$  cells also expressed Has2 and the gene encoding the HA receptor, CD44 (Supplemental Fig. 4B). These observations suggest a potential cell-autonomous role for versican in  $Flk1^+$  cells, bound to HA and thus potentially localized to their pericellular matrix via CD44 and HAS2. After E7.5 (e.g., at E 8.5), *Vcan* was broadly expressed in mesoderm, the developing brain, allantois and cardiomyocytes (Supplemental Fig. 4C) and Kdr expression extended into endothelial cells, although hematoendothelial progenitors continued to express Vcan and Kdr subsequently (Supplemental Fig. 4C). scRNA-seq data also showed that HA link proteins (Hapln1–4) were not expressed in hematoendothelial progenitors (Supplemental Fig. 5A), and the major versican-binding link protein, HAPLN1, was not detected on immunostaining of E7.5 embryo sections (Supplemental Fig. 5B). Staining for ADAMTScleaved versican (using anti-DPEAAE) revealed no staining in wild-type blood islands, suggesting that versican does not normally undergo proteolysis by ADAMTS proteases at this developmental stage (Supplemental Fig. 5C).

#### **Loss of versican dramatically reduces yolk sac and embryo HA levels**

In addition to reduced HA staining in *Vcan*hdf/hdf yolk sac blood islands, we observed dramatic reduction of HAbp staining throughout *Vcan*hdf/hdf embryos (Fig. 5A). Since *Has2* mRNA expression was unaltered in *Vcan*<sup>hdf/hdf</sup> embryos and yolk sacs (Fig. 3D), reduced HAbp staining may have resulted from increased breakdown in situ, or alternatively, extraction of HA (which is water soluble) from tissue sections during staining. Therefore, fluorophore-assisted carbohydrate electrophoresis (FACE) [32–34] was undertaken on snapfrozen whole embryos to detect and quantify HA content (Fig. 5B). HA-FACE showed reduction of HA compared to wild-type littermates, supporting HA loss intrinsically rather than during sample preparation (Fig. 5B). In addition, FACE analysis demonstrated that versican is a major CSPG in E8.5 embryos, contributing nearly all unsulfated (0S) CS, since both the overall level of CS and its 0S form were dramatically reduced in Vcanhdf/hdf embryos (Fig. 5B). Consistent with the role of versican and HA as an expansile complex, craniofacial mesenchyme and myocardium were severely compacted in *Vcan*hdf/hdf embryos (Fig. 5C). We also asked whether the absence of versican affected fibronectin, a major embryonic ECM component that is essential for angiogenesis and observed a dramatic increase both in fibronectin staining and mRNA in *Vcan*<sup>hdf/hdf</sup> embryos (Fig. 5D, Supplemental Fig. 6A,B), which is presently unexplained. In combination with unaltered Has2 expression, these findings suggested increased HA turnover in  $Vcan$ <sup>hdf/hdf</sup> embryos. TMEM2 was recently identified as a major extracellular hyaluronan-depolymerizing enzyme

[35–37]. RT-qPCR revealed significantly raised *Tmem2* expression in *Vcan*<sup>hdf/hdf</sup> yolk sac and embryos (Fig. 5E), indicating that hyaluronan catabolism was activated in the absence of versican.

#### **HA deficiency impairs vasculogenesis**

Since HA was lost in the absence of versican, we inquired if the converse were true, and whether HA-deficiency indeed led to defective vasculogenesis, as previously suggested by morphology of Has2 germline mutant yolk sac [26]. Has $2^{-/-}$  embryos die by E10 due to heart defects [26] whereas  $HasI^{-/-}$  and  $Has3^{-/-}$  mice are both viable and do not exhibit noticeable embryonic phenotypes [38,39]. To completely deplete HA from developing embryos, we generated triple knockout embryos (TKO) lacking all three Has genes  $(HasI^{-/-}; Has2^{-/-}; Has3^{-/-};$  referred to as  $HasI - 3^{TKO}$ ). We generated HA-deficient mouse embryos by intercrossing  $HasI+3^{-/-}$ ;  $Has2^{+/-}$  mice, as well as by epiblast-specific conditional deletion of  $Has2$  using  $Sox2$ -Cre mice. At E9.5,  $Has1 - 3^{TKO}$  embryos, like Vcanhdf/hdf and Has2-null embryos [26] showed loss of yolk sac vasculature (Fig. 6A). HA staining in the  $Has1-\frac{3}{X}$  yolk sac and embryos was absent and the sections also showed a near-complete lack of versican staining (Fig. 6B,C). In contrast, immunostaining for cleaved versican (anti-DPEAAE) showed robust and widespread versican processing in the absence of HA (Fig. 6 B,D). Epiblast-specific  $Has2$  conditional deletion (Sox2-Cre;  $Has2^{FI/F}$ ) showed a similar loss of yolk sac vasculature and cardiac defects (Supplemental Fig. 7A). RNA *in situ* hybridization showed a low level of *Has2* expression in these embryos and slightly reduced *Vcan* transcript levels (Supplemental Fig. 7B). Phenocopying  $Has1-3^{TKO}$ embryos, the  $Sox-\mathcal{X}$ re;  $Has2^{F\ell/Fl}$  embryos and yolk sacs showed loss of both HA and versican staining and increased ADAMTS-mediated versican cleavage (Supplemental Fig. 7C, E). Taken together, these data suggest that HA may protect versican from ADAMTSmediated degradation.

## **Embryoid bodies formed by Vcan-null ES cells have impaired angiogenesis and hematopoiesis**

Since the dramatic loss of vasculature could result from perturbed hemodynamics due to cardiac defects in *Vcan*<sup>hdf/hdf</sup> embryos, we undertook an orthogonal in vitro approach for evaluation of versican in vasculogenesis and hematopoiesis. We used gene editing by CRISPR/Cas9 [40,41] to introduce Vcan-null mutations in R1 mouse embryonic stem cells (mESC) [42]. Vcan exon 2 (containing the start codon) and exon 3 (start of the G1 domain) were targeted independently to obtain mESC clones D8 and F9 respectively, each with defined frameshift mutations that generated null alleles (Fig. 7A). Since exons 2 and 3 are included in all *Vcan* splice isoforms, no versican was produced, as shown by western blot with anti-GAGβ antibody (Fig. 7B). The mutated clones retained normal expression of *Oct4*, Sox2, Nanog and C-myc (Fig. 7C) indicating unaltered pluripotency, validating their suitability for *in vitro* differentiation. *Vcan*-null and wild-type ES cells were allowed to form embryoid bodies (EBs), in which random differentiation into various lineages occurs. RTqPCR analysis of Has2 showed no change in Vcan-null EBs (Supplemental Fig. 8A) while the mesoderm differentiation marker *Brachyury/T* showed a significant decrease in the F9 but not the D8 *Vcan*-null EBs (Supplemental Fig. 8B). Similar to *Vcan*<sup>hdf/hdf</sup> embryos, Vcan-null embryoid bodies showed reduced Kdr expression (Supplemental Fig. 8C), and the

blood lineage commitment markers  $I \frac{g2b}{CD41}$  and  $\frac{Runx1}{Supplementa}$  (Supplemental Fig. 8D), as well as of differentiated blood and vascular endothelial markers (Supplemental Fig. 8 E,F). Since EB differentiation is random and independent of a closed pulsatile circulation, the data from embryoid bodies and the mutant mice together suggests that versican acts directly on  $F$ lk1<sup>+</sup> hematoendothelial progenitors rather than indirectly *via* abnormal cardiac development.

We evaluated the angiogenic and hematopoietic potential of *Vcan*-null ESC using additional approaches. Sprouting angiogenesis was induced by culturing 4-day differentiated EBs in 3 dimensional collagen I gels and treatment with VEGF-A165 for 12 days [43]. Robust sprouts positive for CD31 and smooth muscle α-actin staining were seen in wild-type EBs, but not in the majority of *Vcan*-null EBs (Fig. 7D,E). The few *Vcan*-null EBs with sprouting had fewer sprouts per EB, and these were significantly shorter than wild-type sprouts (Fig. 7F,G). When 10-day old EBs were disaggregated and the cells were plated in a 3 dimensional methylcellulose matrix containing a complete set of blood differentiation cytokines, significantly fewer blood colonies were formed by Vcan null EBs (Fig. 7H).

## **The versican-HA complex sequesters growth factors essential for vasculogenesis and primary hematopoiesis**

These observations raised questions about the underlying mechanisms by which the versican-HA matrix supported Flk1<sup>+</sup> cells. To investigate this, we turned to an  $ADAMTS9$ null RPE1 cell line (D12) which lacks two key versican-degrading proteases, ADAMTS9 and ADAMTS20 [22]. Although RPE1 cells are not relevant to hematoendothelial progenitors, they were chosen for the relevance of their matrix, which demonstrates constitutively strong versican staining as a result of reduced ADAMTS activity, in order to determine how versican may modulate vasculogenesis (Fig. 8A). HAbp staining of these cells demonstrated stronger HA staining than wild type RPE1 cultures, with formation of long HA-stained cables decorated with versican (Fig. 8A, Supplemental Fig. 9A,B). Such cables were previously noted to occur in the presence of 25 mM glucose-containing medium, which was used here [44,45]. RT-qPCR revealed reduced HAS2 & HAS3 expression in RPE-1 D12 cells compared to wild-type (Fig. 8B) with no change in HAS1 expression and drastic reduction of TMEM2 expression was observed (Fig. 8B). Upon siRNA-mediated versican depletion [46,47], RPE1-D12 cells showed dramatically reduced versican and HA staining and absence of HA/versican cables (Fig. 8C, Supplemental Fig. 10A). Conversely, RT-qPCR showed increased TMEM2 expression after VCAN knockdown (Supplemental Fig. 10B), suggesting upregulation of the HA-depolymerase TMEM2 by reduction of versican as a possible mechanism of HA loss.

Next, to test if versican could sequester growth factors known to regulate vasculogenesis, we treated wild-type and RPE1-D12 cells with increasing concentrations of recombinant VEGF<sub>165</sub> and Ihh. Each showed dose-dependent punctate staining in RPE1-D12 monolayers which co-localized with the versican-HA cables, imaged by confocal fluorescent and superresolution microscopy (Fig. 8D, Supplemental Fig. 11A–B, Supplemental Fig. 12A–B). Upon  $VCAN$ mRNA depletion in RPE1-D12 cells, both VEGF<sub>165</sub> and Ihh staining were significantly reduced (Fig. 8D). Enzymatic removal of proteoglycan chondroitin sulfate

chains prior to addition of recombinant  $VEGF<sub>165</sub>$  and Ihh to D12 cultures dramatically reduced  $VEGF<sub>165</sub>$  and Ihh staining intensity without affecting versican core protein staining intensity or distribution (Fig. 8E,F), suggesting that versican CS chains mediated VEGF and Ihh binding.

## **Discussion**

Although versican is widely expressed during organogenesis and in adult tissues [14], the chronology of its expression in early vascular development undertaken here and independently derived from recently published single cell RNA-seq data, shows a specific association with  $F_l k_1^+$  cells from their earliest origin in the gastrulating embryo until establishment of the yolk sac vasculature and primitive hematopoiesis. Analysis of Vcan mutant mice in vivo and Vcan-null embryoid bodies in vitro suggests that versican has an indispensable role in vasculogenesis and primitive hematopoiesis. Taken together, RNA in situ hybridization data, scRNA-seq analysis of  $Flk1^+$  cells and immunostaining of embryos suggests that versican is a product of  $F_l k^+$  cells that associates with them via HA and CD44 to form a crucial, possibly cell-autonomously acting pericellular ECM. Furthermore, in vitro analysis undertaken in RPE-1 D12 cells for their high versican levels, showed dosedependent binding of VEGF and Ihh to the CS-chains of versican.

Two novel, unexpected findings of this study were the substantial loss of embryonic and extraembryonic HA in the absence of versican and reciprocally, of versican in the absence of HA. Also unexpected, and presently unexplained, is the transcriptional effect of versican levels on TMEM2. As in *Vcan*<sup>hdf/hdf</sup> yolk sac, avascularity was previously noted in  $Has2$ null yolk sac [26], although it was not studied further. Has2 and Vcan null cardiac defects are similar, which suggested that an obligate versican-HA complex in cardiac jelly and endocardial cushions was required for cardiac morphogenesis [24–26]. The present work similarly strongly suggests that a versican-HA complex, rather than versican alone, is necessary for vasculogenesis and primitive hematopoiesis (Fig. 9). HA-versican aggregates have a net negative charge, and exert swelling pressure *via* absorption of water (the Gibbs-Donnan effect) [48]. As shown here and previously, embryonic tissues compact in their absence [24,49]. Although versican-deficient yolk sac showed extensive structural disorganization at E9.5, it is clear that the association and effect of versican vis-à-vis Flk1<sup>+</sup> cells occurs much earlier, i.e., shortly after gastrulation. Previous work identified both versican and HA in association with mesoderm formed in vitro in embryoid bodies arising from mouse ES cells [50], as well as expression in human ES cells [51]. Reduced vasculogenesis, angiogenesis and hematopoiesis in Vcan-null embryoid bodies supports a direct, local role of versican on hematoendothelial progenitors rather than a secondary effect of cardiac anomalies on vasculogenesis, or of yolk sac disorganization on blood island formation. We therefore conclude that versican-HA aggregates act directly and as early as E6.75 within the microenvironment of  $Flk1<sup>+</sup>$  cells.

HA, which is extruded directly from HA synthases on the plasma membrane, is decorated with versican, and retained at the cell surface via HA synthases or CD44 and other HA receptors [52]. Cd44 is coordinately expressed with *Vcan* and  $Has2$  by Flk1<sup>+</sup> cells during early embryogenesis. Nevertheless,  $Cd44$  null mice survive and are not known to have

vasculogenesis or primitive erythropoiesis defects [53], suggesting that HAS2 acting as a de facto receptor, may participate in forming a cell-associated versican-HA complex. The versican-HA pericellular matrix has a well-established impact on different cells. We previously found that the amount of versican in the pericellular matrix of fibroblasts and vascular and myometrial smooth muscle cells [9,21,54] was a determinant of phenotype modulation. Versican is anti-adhesive [9,54], which may allow  $Flk1^+$  cells to migrate and proliferate efficiently after their emergence at gastrulation. Another possible role of versican-HA is sequestration of vasculogenic factors such as VEGF-A and Ihh. Versican binding to VEGF-A<sub>165</sub> and Ihh *via* its CS-chains (this study) or G3 domain [19], may generate high concentrations around Flk1<sup>+</sup> cells. Versican is associated with Flk1<sup>+</sup>CD41<sup>-</sup> cells, but not with the Flk1<sup>−</sup>CD41<sup>+</sup> yolk sac cells subsequently, suggesting that the versican-HA-rich pericellular ECM specifically regulates the fate of Flk1+ CD41− cells. We conclude that as the dominant CSPG in the embryo, specifically localized to the vicinity of  $Flk1^+$ cells, versican may sequester essential factors such as VEGF-A and Ihh to provide a high local concentration that sustains the  $Flk1<sup>+</sup>$  population.

Although lack of versican led to higher  $Fn1$  expression,  $Vcan$ <sup>hdf/hdf</sup> defects are unlikely to result from excess fibronectin, because previous work has shown that deficiency, not excess of fibronectin or the fibronectin receptor subunit a5 integrin results in reduced embryo and yolk sac vascularity [27,55]. Since versican binds fibronectin through the G3 domain [19], we conclude that the three major components of the provisional embryonic ECM (versican, HA and fibronectin) are each crucial for establishment of the first blood vessels in the embryo. In the absence of versican, the HA catabolism rate *via* upregulated TMEM2 likely exceeds the HA synthesis rate. It was previously noted that HA deposition was reduced to 85% of normal in fibroblasts taken from a mouse hypomorphic *Vcan* mutant (*Vcan*<sup>3/3</sup>) having 75% reduction of versican [56]. In association with reduced HA deposition, Vcan  $3/3$  fibroblasts had accelerated senescence, suggesting a possible mechanism for the lack of Flk1<sup>+</sup> cells in *Vcan*<sup>hdf/hdf</sup> yolk sac, although this study did not specifically address the fate of Flk1+ cells.

The data suggested stronger association of exon 8-containing Vcan transcripts than exon 7containing transcripts with blood islands at gastrulation, and exon 7 transcripts were absent at E8.5. Autosomal dominant splice site mutations affecting exon 8 (leading to its exclusion) and exon 8 deletions in humans cause Wagner syndrome [57–59], which is characterized by impaired vision and defects of the ocular vitreous and retina, but lacks consistent extraocular manifestations. Exon 7 inactivation in mice led to specific neural anomalies and subtle cardiac anomalies [60,61]. Thus, neither individual exon mutation in mice or humans is associated with embryonic lethality, defective vasculogenesis or impaired hematopoiesis. We conclude that both exon 7 and exon 8-containing transcripts, possibly included in V0, the transcript containing both exons, are required for vasculogenesis and hematopoiesis.

The GAGβ domain encoded by exon 8 has a unique N-terminal sequence, which is cleaved by ADAMTS proteases at the  $E^{441}$ -A<sup>442</sup> peptide bond in several contexts, notably cardiac valve development, interdigital web regression, umbilical cord development, neural tube and palate closure and myometrial activation [9,22,62,63]. The resulting N-terminal versican V1 fragment, G1-DPEAAE441, named versikine, has bioactivity in interdigital web regression

and myeloma growth [64,65]. However, *Vcan* knock-in mouse mutants in which  $E^{441} - A^{442}$ was mutated to render it uncleavable can complete gestation and have normal yolk sac avascularity, suggesting that  $E^{441} - A^{442}$  cleavage is not involved in hematoendothelial development ([66] and Nandadasa et al., manuscript in preparation).

Both phylogenetically and ontogenetically, basement membranes are accepted to be the earliest organized matrices formed, and indeed, basement membrane components such as laminins have a well-established significance for maintenance of stemness and for epiblast organization [67–69]. The versican-HA matrix appears to be a later evolutionary innovation, and our data suggests that it may be representative of a second wave of matrix expansion and utilization for cellular regulation during mammalian evolution. With the roles in vasculogenesis and hematopoiesis elucidated here, and given their established significance for cardiac development, it is not an exaggeration to state that the versican-HA matrix is crucial for development of the entire circulatory system. Indeed, versican-HA matrix may also have a broad role in formation of vasculature by angiogenesis in other physiological and disease settings. Recent work found that syngeneic B16F10 tumors in adult Vcan<sup>hdf/+</sup> mice had significantly impaired angiogenesis and reduced growth [70]. Relevant to the overlap of versican-HA with Flk1 expression, a recent study utilizing syngeneic B16F10 tumors in  $Flk1^{+/-}$  mice also found reduced angiogenesis during tumor growth [71]. Furthermore, VEGF binding of the versican-HA ECM which is quantitatively increased in the presence of high glucose, may be relevant to diabetic retinopathy, a common complication of diabetes where the increased activity of VEGF is well-established and indeed, a current target of treatment [72].

#### **Methods**

#### **Mice**

 $Vcan^{\text{Tg(Hoxal)1Chm}}$  (*Vcan*<sup>hdf</sup>) mice [25] (Supplemental Fig. 1) were obtained under a material transfer agreement from Roche. Generation of  $HasI^{-/-}$ ;  $Has3^{-/-}$  double knockout mice was described previously [73]. A *Has2*-null allele (*Has2*<sup>-</sup>) was created from a *Has2<sup>flox</sup>* allele [74] by crossing  $Has2^{flox/flox}$  mice with the germline deleter Meox2-Cre mice [75]. All of these mouse lines were backcrossed to C57BL/6J for more than 10 generations.  $HasI^{-/-}$ ;  $Has2^{+/-}$ ;  $Has3^{-/-}$  mice were bred from these mutant mice. Triple Has knockout (TKO) embryos were generated by crossing  $HasI^{-/-}$ ;  $Has2^{+/-}$ ;  $Has3^{-/-}$  female and male mice. In a second approach to generate HA-deficient mouse embryos,  $Has2^{F\mid F \mid}$ ; Sox2Cre<sup>tg</sup> mice were generated by crossing  $Has2^{F/FI}$  males with  $Has2^{+/FI}$ ;  $Sox2Cre^{tg}$  females. Mouse experiments were conducted with IACUC approval (Cleveland clinic protocols 2015:1530 and 2018:2045). Mice were maintained in a fixed light-dark cycle with food and water ad libitum. For genotyping E8.5 embryos with intact yolk sacs, the allantois was dissected out and lysed in 10 μl DirectPCR (Tail) digest reagent (Qiagen, catalog no. 102-T) supplemented with 1 ml of proteinase K overnight at 55°C. Tails were used to genotype E9.5 embryos. *Vcan<sup>hdf</sup>* and wild-types were identified with a specific genotyping strategy based on the genetic interruption (Supplemental Fig. 1). Details of the Has1–3 mutant mouse genotyping is provided in the Supplemental Methods. *Vcan<sup>hdf/hdf</sup>* embryos were compared to wild-type littermates in all experiments.

## **Mouse embryonic stem cell (mESC) culture**

R1 mESC [42] (Case Transgenic and Targeting Facility) were cultured on 0.3% type B gelatin (Sigma-Aldrich, catalog no. G9382) coated 60 mm cell culture plates in Iscove's Modified Dulbecco's Medium (IMDM) containing 4mM L-glutamine and 1mM sodium pyruvate, supplemented with 20% fetal bovine serum (Hyclone, catalog no. SH30071), 0.1 mM cell culture grade 2-mercaptoethanol (Gibco, Life Technologies, catalog no. 21985), 0.1mM nonessential amino acids (Gibco, Life Technologies, catalog no. 11140–050), 50 μg/mL penicillin/streptomycin and  $1 \times 10^6$  units/mL leukemia inhibitory factor (LIF; ESGRO, EMD Millipore, catalog no. ESG1106) in a humidified 5%  $CO<sub>2</sub>$ , 37°C environment. mESC were maintained at 60–80% confluence, with daily medium change and passaged every other day in a 1:5 split.

#### **CRISPR/Cas9 targeting of mESC Vcan**

2.5 μg of CRISPR/Cas9 plasmids in the U6gRNA-Cas9–2A-GFP vector, targeting Vcan exon 2 or exon 3 (Sigma-Aldrich, target IDs MM0000080027 and MM0000080028) were transfected into R1 mESCs at 60–80% confluence in 6-well plates coated with 0.3% gelatin, using FuGene 6 (Promega, catalog no. E2691). 24 hrs post-transfection, individual GFP+ mESCs were sorted into 96-well plates coated with 0.3% gelatin using a FACSAria-II cell sorter (BD Biosciences). Fast-growing wells (containing >1000 cells/well) were trypsinized and expanded to 24-well cell culture plates after 7–10 days. Culture medium was replaced daily. Genomic DNA from clones was isolated using DirectPCR (Tail) reagent (Viagen, catalog no. 102-T) and Vcan exon 2 and exon 3 were amplified using Phusion Taq (NEB, catalog no. F530L) (see SI). Amplicons were excised from 2% agarose gels, purified using the QIAquick Gel Extraction kit (QIAGEN, catalog no. 28704) and cloned into pCR-Blunt II-TOPO vector using the Zero blunt PCR cloning kit (Life Technologies, Invitrogen, catalog no. K2800–40). Plasmid DNA was harvested from bacterial colonies for Sanger-sequencing to determine the precise mutations. Two independent *Vcan*-null mESC clones, D8 and F9, were established. Western blotting and immunostaining of 10-day old embryoid bodies from these lines (see below) confirmed *Vcan* inactivation. Embryoid body formation and induction of vascular sprouts is described in the Supplemental Methods.

#### **Immunostaining and fluorescence microscopy**

Immunostaining of E 9.5 and E 8.5 yolk sac was carried out on 30 μm thick vibratome sections [22] or paraffin-embedded 7 μm sections. Immunostaining of collagen-embedded embryoid bodies were carried out in 4-chamber cell culture slides (Fisher Scientific, catalog no. 354114). Confocal microscopy images of whole-mount mouse embryos and sections were acquired using a Leica TCS SP5 II multiphoton confocal microscope equipped with a 25X water immersion objective (Leica Microsystems, Wetzlar, Germany). For 3D-projection of whole-mount Z-stacks, the Volocity 3D imaging software was used (version 6.3, PerkinElmer, Inc., Waltham, MA) in maximum intensity projection method.

#### **Methylcellulose colony formation assay**

Single cell suspensions of E8.5 embryos, yolk sacs or day-10 embryoid bodies were generated by incubation with trypsin for 10 minutes followed by disaggregation by pipetting

with a 200 μL pipette tip until complete. 50,000 cells from each experimental group were transferred to a single 35 mm culture dish containing 1 mL of MethoCult GF M3434 culture medium (Methylcellulose medium with recombinant cytokines for mouse cells, Stem Cell Technologies, Vancouver, CA, catalog no. 03434) using a 3 mL syringe and 16-gauge needle, following the manufacturer's protocol. Triplicate cultures from each genotype were incubated for 14 days in a humidified, 5%  $CO<sub>2</sub>$ , 37°C cell culture incubator. Blood colonies were counted using an inverted microscope. Aggregates with >50 cells were considered a colony-forming unit (CFU).

Additional details of reagents and procedures including primary antibodies used, RNAscope in situ hybridization, western blotting, transmission electron microscopy, and fluorophoreassisted carbohydrate electrophoresis (FACE) are described in the Supplemental Methods

## **Supplementary Material**

Refer to Web version on PubMed Central for supplementary material.

## **Acknowledgments**

This work was supported by the NIH-NHLBI Program of Excellence in Glycosciences award HL107147 (to S.S.A., R.J.M.,), by the Allen Distinguished Investigator Program, through support made by The Paul G. Allen Frontiers Group and the American Heart Association (award 17DIA33820024 to S.S.A), NIH RF1AG057579 (to Y.Y.) and the David and Lindsay Morgenthaler Postdoctoral Fellowship and the Mark Lauer Pediatric Research grant (to S.N.). Purchase of the Leica SP8 confocal microscope was supported by NIH SIG grant 1S10RR026820-01. We thank Dr. David LePage and Dr. Ron Conlon at the Case Transgenic and Targeting Facility for R1 mES cells, Eric Schultz and Joseph Gerow of the LRI Flow Cytometry Core for mES cell sorting, Valbona Cali for FACE assays, Dr. Judy Drazba and Mei Yin of the LRI Imaging Core for guidance with confocal and electron microscopy and the Apte laboratory members for valuable discussions.

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#### **Fig. 1.**

Vcan<sup>hdf/hdf</sup> yolk sacs are avascular and lack hyaluronan. (A) E9.5 wild type and Vcanhdf/hdf embryos. The red arrowhead shows the dilated pericardial sac in the mutant. (B) E9.5 yolk sacs imaged in situ demonstrate the absence of vasculature in the E9.5 Vcanhalf/hdf yolk sac. (C) Three-dimensional (3D) maximum-intensity projections of whole-mount yolk sacs stained with anti-CD31 (red) showing absence of the vascular network in E9.5 Vcanhalfhalf yolk sacs (n=3 yolk sacs of each genotype). (D) Versican GAGβ staining (green) is present throughout the mesoderm (Me) of E9.5 wild type yolk sacs and absent in the  $Vcan^{hdf/hdf}$ yolk sac. F-actin (red) staining highlights visceral endoderm (VE) detached from mesoderm in *Vcanhdfhdf* yolk sacs. HA and fibronectin (green) were similarly distributed as versican in wild type yolk sac, but HA staining was absent in *Vcanhdf/hdf* yolk sac and fibronectin staining was more intense. Collagen IV staining intensity was similar in wild type and

Vcan<sup>hdf/hdf</sup> yolk sacs (n=3 yolk sacs of each genotype). Scale bar in A, B=1mm, C= 100 $\mu$ m, D= 50μm.



#### **Fig. 2.**

Impaired vasculogenesis in the *Vcan<sup>hdf/hdf</sup>* embryo and yolk sac. (A) E8.5 *Vcanhdf/hdf* yolk sacs are avascular yet embryos dissected out of the yolk sac appear morphologically similar to wild type. (B) Maximum intensity projections of whole mount E8.5 wild type and Vcan<sup>hdf/hdf</sup> embryos stained with anti-CD31 (red) and DAPI (blue). Boxed areas are shown at higher magnification with the red channel only in the lower panels. Residual wild-type yolk sac is marked by a white dotted line (n=3 embryos from each genotype). (C) Threedimensional (3D) maximum intensity projections of yolk sacs stained *en face* with anti-CD31 (red) show a well-formed vascular plexus in wild type yolk sac and disorganized CD31+ cells in *Vcanhdf/hdf* yolk sac (n=3 yolk sacs from each genotype). (D) Cross section of E8.5 wild type yolk sac blood islands co-stained with versican (green), HAbp (red) and CD31 (white). Versican and HA co-localize with CD31+ cells on the mesothelial aspect of blood islands (arrowheads). The blood island imaged on the left is enlarged in the bottom

right-hand panel (n=3 wild type yolk sacs). VE, visceral endoderm, Bi, blood island, (E) RNAscope in situ hybridization of E8.5 wild-type yolk sac shows expression of Vcan isoforms containing exon 8 (V0,V1), but not exon 7 (V0, V2) in mesoderm adjacent to blood islands (Bi), VE, visceral endoderm. (F) Vcan exon 7 and exon 8 probes both hybridize to myocardium (Mc) of E8.5 wild-type embryos. En, Endocardium. (G) Vcan probes (exon 8 shown) do not hybridize to *Vcan<sup>hdf/hdf* heart. Scale bar in D=10μm, E= 25μm, 50μm in F–G.</sup>



#### **Fig. 3.**

Versican and HA localize to Flk1+ cells and are essential for yolk sac blood island formation. (A) E8.5 wild type and *Vcan<sup>hdf/hdf</sup>* yolk sac cross-sections co-stained with versican (magenta), HAbp (red) and Flk1 (green). In wild type yolk sac, versican-HA staining colocalizes with Flk1. In *Vcanhdf/hdf* yolk sac, blood islands (Bi) are smaller and both HAbp staining and Flk1 staining are weak. Arrowhead: versican-HA-Flk1 co-stained patches, asterisks: cell shown at higher magnification in the right-hand panels (n=4 yolk sacs from each genotype). VE, visceral endoderm. (B) En face confocal imaging of E8.5 yolk sac versican (red) and CD41 (green) staining with the mesothelial aspect facing the objective (bottom). Surface optical sections show versican-rich foci throughout wild type yolk sac that are absent in *Vcanhdf/hdf* yolk sac. The mid-optical image shows versican and CD41 costained cells in blood islands. Versican is associated with wild-type blood islands but does not overlap with CD41. No CD41+ cells were observed in *Vcanhdf/hdf* yolk sac. The higher

magnification image shows the distinct cell populations marked by versican and CD41. Arrowheads mark weak CD41 staining in *Vcanhdfhdf* images (n=3 yolk sacs from each genotype). (C) Cross-section of an E8.5 wild type blood showing no overlap of HA (red) and CD41 (green) (n=3 yolk sacs). (D) qRT-PCR analysis of wild type and  $Vcan<sup>hdf/hdf</sup>$  yolk sacs and embryos shows significantly lower Flk1 expression but not Has2 or Brachyury expression in *Vcanhdf/hdf* mutants. CD41 (*Itga2b*) and *Runx1* expression were significantly lower in *Vcanhdf/hdf* yolk sac and embryos. Blood markers  $\beta$ -globin, *Gata1* and CD45 (*Ptprc*) and the vascular endothelial marker CD31 (*Pecam1*), were reduced in  $Vcan^{hdf/hdf}$ yolk sacs and embryos (n=3 yolk sacs and embryos from each genotype, error bars= S.E.M., \*, p<0.05; \*\*, p<0.01; \*\*\*, p<0.001). (E) Methylcellulose assay shows significantly fewer blood colony-forming units (CFUs) in *Vcanhdf/hdf* yolk sacs and embryos (n=3 yolk sacs and three embryos from each genotype, error bars=  $S.D., *, p<0.05; **, p<0.001$ . Scale bars=25μm in A, 100μm and 20μm in B.



#### **Fig. 4.**

Versican and HA co-localize with Flk1+ cells from their origin at gastrulation. (A) Maximum intensity projection image of an E7.5 embryo shows strong versican staining (green) in the putative blood island (BI) ring (white brackets) in the proximal extraembryonic (Exe) region. Emb, embryo. (B-E) Serial sections of E7.5 wild type embryos analyzed by immunostaining (B–D), or by RNAscope in situ hybridization (E). (B–C) Versican (green) and HAbp (red) colocalize in extraembryonic mesoderm corresponding to the blood island ring (white brackets and arrowheads). The blood islands on the left are shown at high magnification in (C–D). Arrowheads show colocalization of versican, HAbp and Flk1 in extraembryonic mesoderm (N=4 embryos). Epc, ectoplacental cavity; Ch, chorion; Exc, exocelomic cavity; Am, amnion; Ac, amnion cavity; Ne, neural ectoderm; Me, mesoderm; Ve, visceral endoderm. (E) In situ hybridization for Vcan exon 7, Vcan exon 8, Has2, Flk1 and Runx1. Vcan exon 8, Has2 and Flk1 mRNAs have near-identical expression patterns (red) corresponding to primitive streak cells migrating toward extra-embryonic mesoderm. *Vcan* exon 7 (GAGa) shows weaker overlapping expression. *Runx1* marks committed blood cells (n=4 embryos). Scale bars in B,E= 100μm.



#### **Fig. 5.**

Vcan inactivation results in loss of hyaluronan. (A) Versican (green) and HAbp (red) staining of E8.5 wild type and *Vcanhdfhdf* embryos showing severely reduced HAbp staining in Vcan<sup>hdf/hdf</sup> embryos. Arrowheads indicate versican and HAbp-stained yolk sac blood islands (n=3 embryos each genotype). (B) (Top) Fluorophore-assisted carbohydrate electrophoresis (FACE) analysis for chondroitin sulfate (CS-FACE) and hyaluronan (HA-FACE) in E8.5 littermate embryos. Versican is the major CS-proteoglycan in E8.5 embryos. HA content is significantly reduced in *Vcanhdf/hdf* embryos. (*Bottom*) Quantification of CS and HA FACE, normalized to DNA (n=4 embryos from each genotype, error bars= S.E.M.,\*\*, p<0.01; \*\*\*, p<0.001; \*\*\*\*, p<0.0001). (C) 1 μm thick, toluidine blue-stained Eponate 12 sections from E8.5 wild type and  $Vcan<sup>hdf/hdf</sup>$  embryos showing compaction of craniofacial mesenchymal cells (Me) and loss of cardiac jelly (CJ) between the myocardium (Mc) and endocardium (En). The red line indicates the boundary of neural epithelium (NE)

with mesenchyme (n=3 embryos each genotype). (D) E8.5 wild  $Vcan^{hdfhdf}$  embryo sections stained with F-actin (red) and fibronectin (green) showing stronger fibronectin staining (n=3 embryos each genotype). (E) RT-qPCR shows increased *Tmem2* mRNA in Vcanhdfhdf embryos and yolk sacs (n=3 embryos and yolk sacs from each genotype, error bars= S.E.M., \*\*\*, p<0.001; \*\*\*\*, p<0.0001). Scale bar in A= 200μm, 50μm, 20μm in C D=25 μm.



#### **Fig. 6.**

Versican content is severely reduced in  $Has1+2+3$  null embryos. (A) E9.5  $Has1+3$  null embryos (control) and  $Has1+2+3$  null embryos showing the dilated pericardial sac in the latter (arrowhead) similar to *Vcan<sup>hdf/hdf* (n=3 embryos each genotype). (B)  $\text{Has1+3}$  null yolk</sup> sac (control) and  $Has1+2+3$  null yolk sac co-stained with HAbp (green) and versican or cleaved versican (DPEAAE) (red) show loss of both HA and versican, although cleaved versican (DPEAAE, red, bottom) is present in  $\text{Has1+2+3}$  null yolk sac (n=3 yolk sacs each genotype). (C-D) Has1 3 null (control) and Has1+2+3 null embryos co-stained with HAbp and versican (C) or cleaved versican (DPEAAE) (D), show loss of HA and versican staining and weaker DPEAAE staining in the  $Has1+2+3$  null embryos (n=3 embryos each genotype). Scale bars  $= 2200 \mu m$  in C,D.



#### **Fig. 7.**

Embryoid bodies (EBs) from Vcan-null mouse embryonic stem cells (mESCs) are poorly responsive to VEGF and form few blood colonies. (A) Vcan locus showing targeting by independent guide RNAs (gRNAs) targeting exons 2 and 3. Scissors indicate the Cas9 cleavage site 3 bp from the protospacer adjacent motif (PAM, orange lettering). An exon 2 mutant mESC clone (D8) had a homozygous 1 bp insertion (bold red letters) and an exon 3 mutant clone (F9) had heterozygous targeting: deletion of T/A in one allele and a 19-bp deletion in the other, each resulting in frame-shifts. (B) Western blot of 10-day differentiated EBs shows no versican in EBs derived from clones D8 and F9 (n=10 pooled embryoid bodies each group). (C) RT-qPCR analysis showing unaffected expression of pluripotency markers *Oct4, Sox2, Nanog* and *C-myc* in D8 and F9 (n=3 independent batches of EBs from each genotype, error bars= S.E.). (D) 4-day-old *Vcan*-null embryoid bodies embedded in collagen I and treated with  $VEGF<sub>165</sub>$  for 12 days have reduced vascular sprouting identified

by CD31 (green) or a-SMA (red) immunostaining (n=3 independent batches of EBs from each genotype). (E) D8 and F9 EBs show significantly fewer vascular sprouts (n=3 independent batches of EBs from each genotype, error bars= S.E. \*\*, p<0.01; \*\*\*, p<0.001). (F) Fewer sprouts/EB were seen in D8 and F9 EBs. (n=3 independent batches of EBs from each genotype, error bars= S.D., \*\*\*, p<0.001; \*\*\*\*, p<0.0001). (G) Significantly shorter sprouts in *Vcan* null lines (n=3 independent batches of EBs from each genotype, error bars= S.D., \*\*\*\*, p<0.0001). (H) Methylcellulose colony assay using dissociated 10-day old EBs shows significantly fewer colonies in *Vcan* null EBs. (n=3 independent batches of EBs from each genotype, error bars= S.D., \*\*, p<0.01). Scale bar in D is 200 μm.



#### **Fig. 8.**

Versican regulates HA abundance and cable formation and sequesters VEGF and Ihh via chondroitin sulfate (CS) chains in a cell culture model. (A) Increased versican (red) and HAbp staining (green) in ADAMTS9-deficient (D12) RPE-1 cells. Versican and HA costained cables are formed in D12 cells. (B) RT-qPCR showing reduced *HAS2* and *HAS3* mRNA but not HAS1 or CD44 and dramatically reduced TMEM2 expression in D12 cells. (n=3 independent RNA extractions, error bars= S.E.M., \*, p<0.05; \*\*\*\*, p<0.0001). (C) VCAN knockdown reduces both versican (red) and HA staining in D12 cells. (D) Recombinant VEGF<sub>165</sub> or Ihh (green) co-staining with versican (red) in control siRNAtransfected D12 cells is lost in VCAN siRNA-transfected D12 cells. (E) The schematic illustrates chondroitinase ABC removal of versican GAG chains and the experimental timeline used. (F) Fluorescence microscope of VEGF and Ihh with versican, with or without chondroitinase ABC treatment prior to addition of recombinant  $VEGF<sub>165</sub>$  or Ihh (green)

shows reduced binding of both growth factors after CS-chain removal, which does not affect versican core protein staining (red). Scale bars in A are 50μm and 10μm, 20μm in D and F and 50μm in C.



#### **Fig. 9.**

HA-versican pericellular matrix functions as an essential niche for Flk1+ cells. Model depicting the chronology of versican and HA expression and proposed functions in murine extraembryonic mesoderm during vasculogenesis and hematopoiesis. The present work localizes HA-versican to the pericellular matrix of Flk1+ cells, but not the downstream CD41+ committed progenitors or to other CD31 vascular endothelial cells. The inset box proposes that the negatively charged HA-versican pericellular matrix sequesters provasculogenic factors such as VEGF and Ihh.