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## **Supplemental information**

**FAP promotes metastasis and chemoresistance  
via regulating YAP1 and macrophages in mucinous  
colorectal adenocarcinoma**

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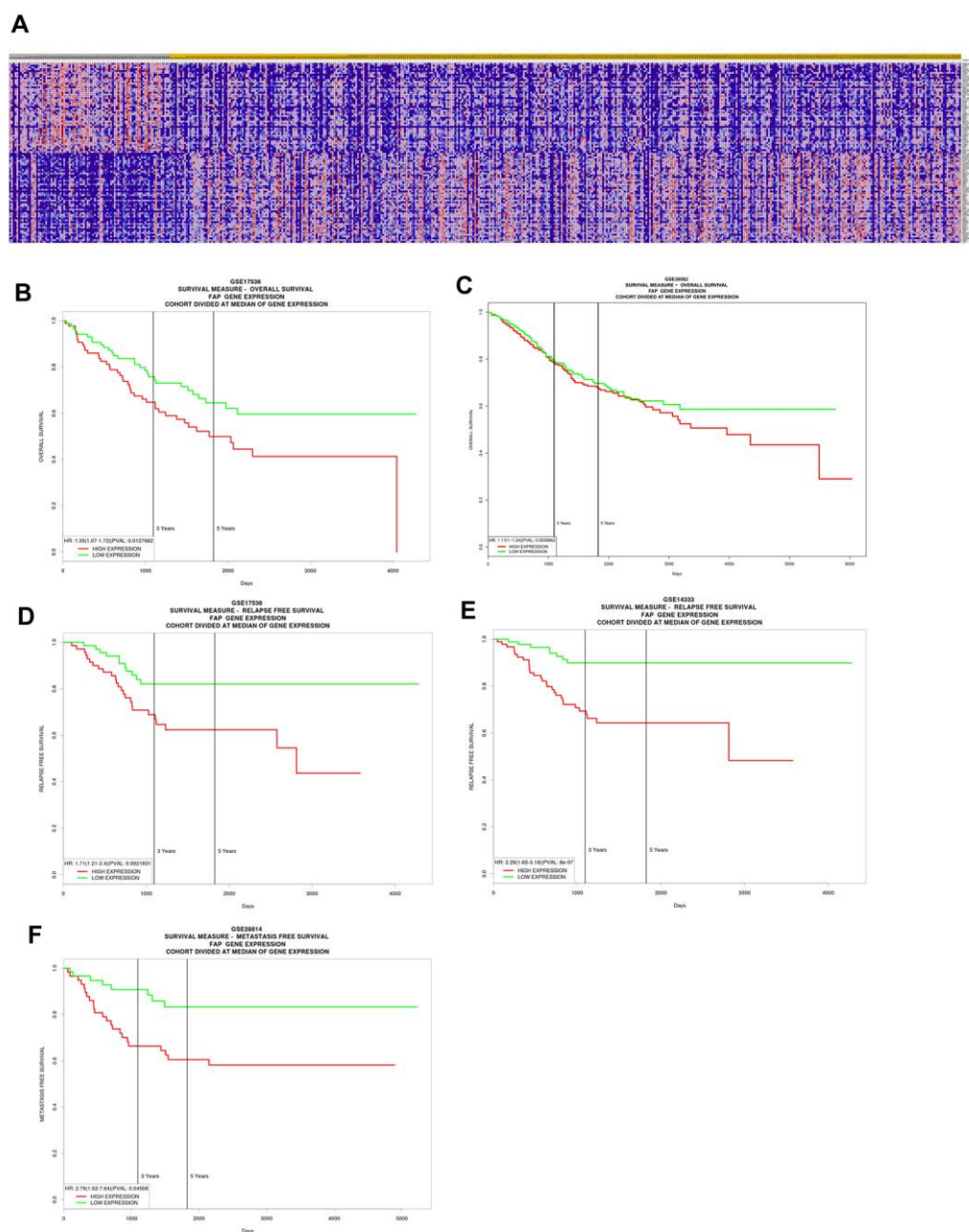
**Supplementary Table 1. Correlation between FAP and clinicopathological parameters in Cohort 1, Related to Figure 1.**

	<b>FAP Low</b>	<b>FAP High</b>	<b>P value</b>
<b>Gender</b>			
Male	53	37	0.639
Female	42	35	
<b>Age</b>			
>65	40	67	0.2549
<65	28	32	
<b>Primay tumor (T) stage</b>			
T1T2	7	2	0.3023
T3T4	88	70	
<b>Lymph node (N) metastasis</b>			
N0	48	34	0.755
N+	47	38	
<b>Distant metastasis (M)</b>			
M0	86	65	1.0
M1	9	7	
<b>TNM stage</b>			
I	6	2	0.912
II	39	32	
III	41	31	
IV	9	7	
<b>Location</b>			
Left colon	42	44	0.0418
Right colon	53	28	

**Supplementary Table 2. Clinical characteristics of colon cancer patients, Related to Figure 1.**

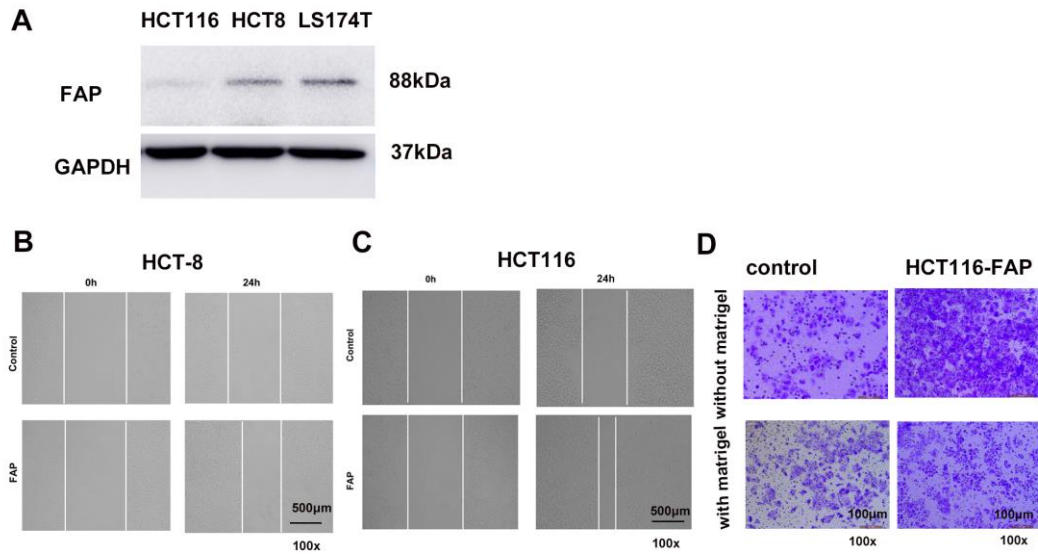
<b>Clinical features</b>	<b>Number</b>
<b>Gender</b>	
<b>Male</b>	<b>103</b>
<b>Female</b>	<b>85</b>
<b>Age</b>	
<b>Mean± SD</b>	<b>59.85 ± 13.79</b>
<b>T stage</b>	
<b>T1</b>	<b>3</b>
<b>T2</b>	<b>8</b>
<b>T3</b>	<b>130</b>
<b>T4</b>	<b>47</b>
<b>N stage</b>	
<b>N0</b>	<b>93</b>
<b>N1</b>	<b>52</b>
<b>N2</b>	<b>43</b>
<b>M stage</b>	
<b>M0</b>	<b>171</b>
<b>M1(liver metastasis)</b>	<b>17</b>
<b>TNM stage</b>	
<b>I</b>	<b>9</b>
<b>II</b>	<b>81</b>
<b>III</b>	<b>81</b>
<b>IV</b>	<b>17</b>

## Supplementary Figure 1.



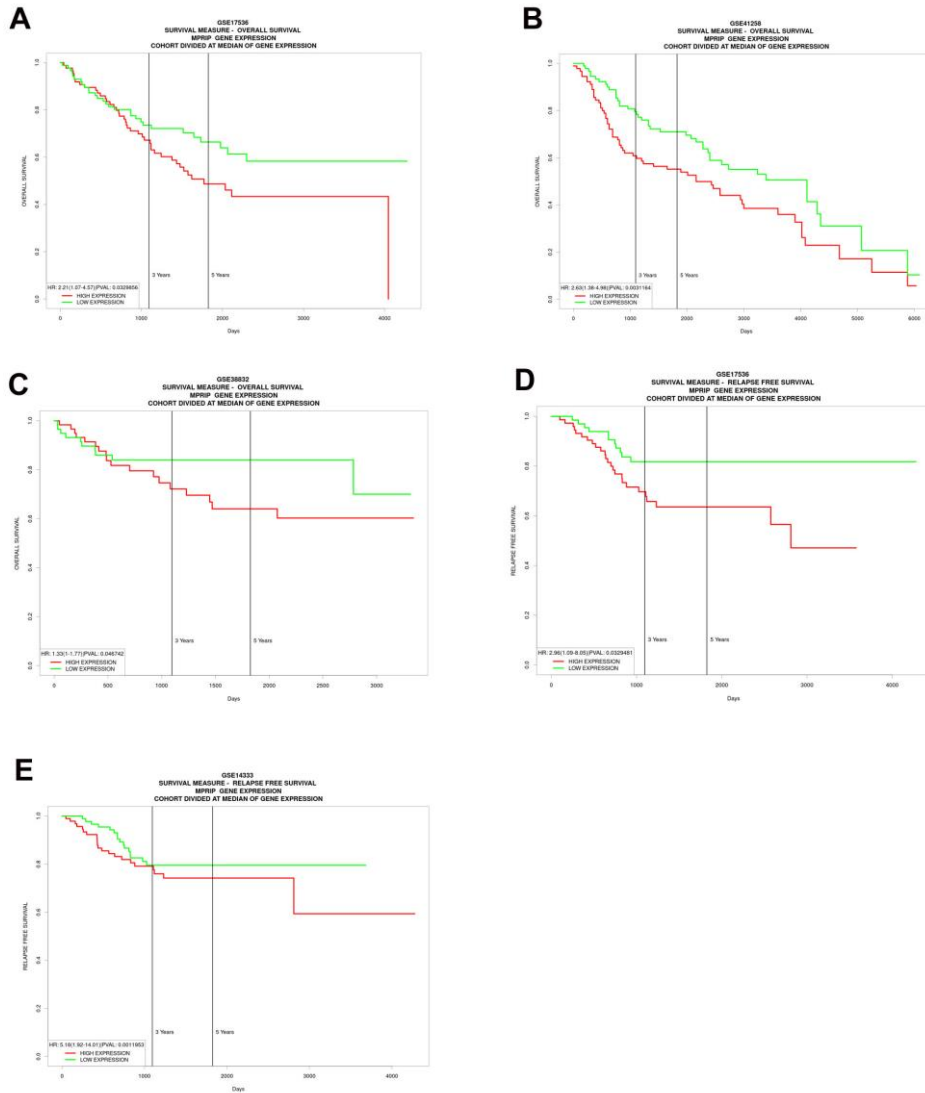
**Supplementary Figure 1. The relationship between the expression of FAP in CRC and prognosis, Related to Figure 1.** (A) Unsupervised clustering highlighting genome-wide changes in gene expression. Colorectal cancer samples were clustered according to the expression of 50 differentially expressed immune genes ( $P < 0.01$ ) between 585 ACs and 89 MCs samples (TCGA dataset). (B-C) Association of expression level of FAP with OS in CRC patients from GSE17536 and GSE39582. (D-E) Association of expression level of FAP with RFS in CRC patients from GSE17536 and GSE14333. (F) Association of expression level of FAP with metastasis-free survival in CRC patients from GSE28814. Log-rank test was utilized to examine significant differences.

**Supplementary Figure 2.**



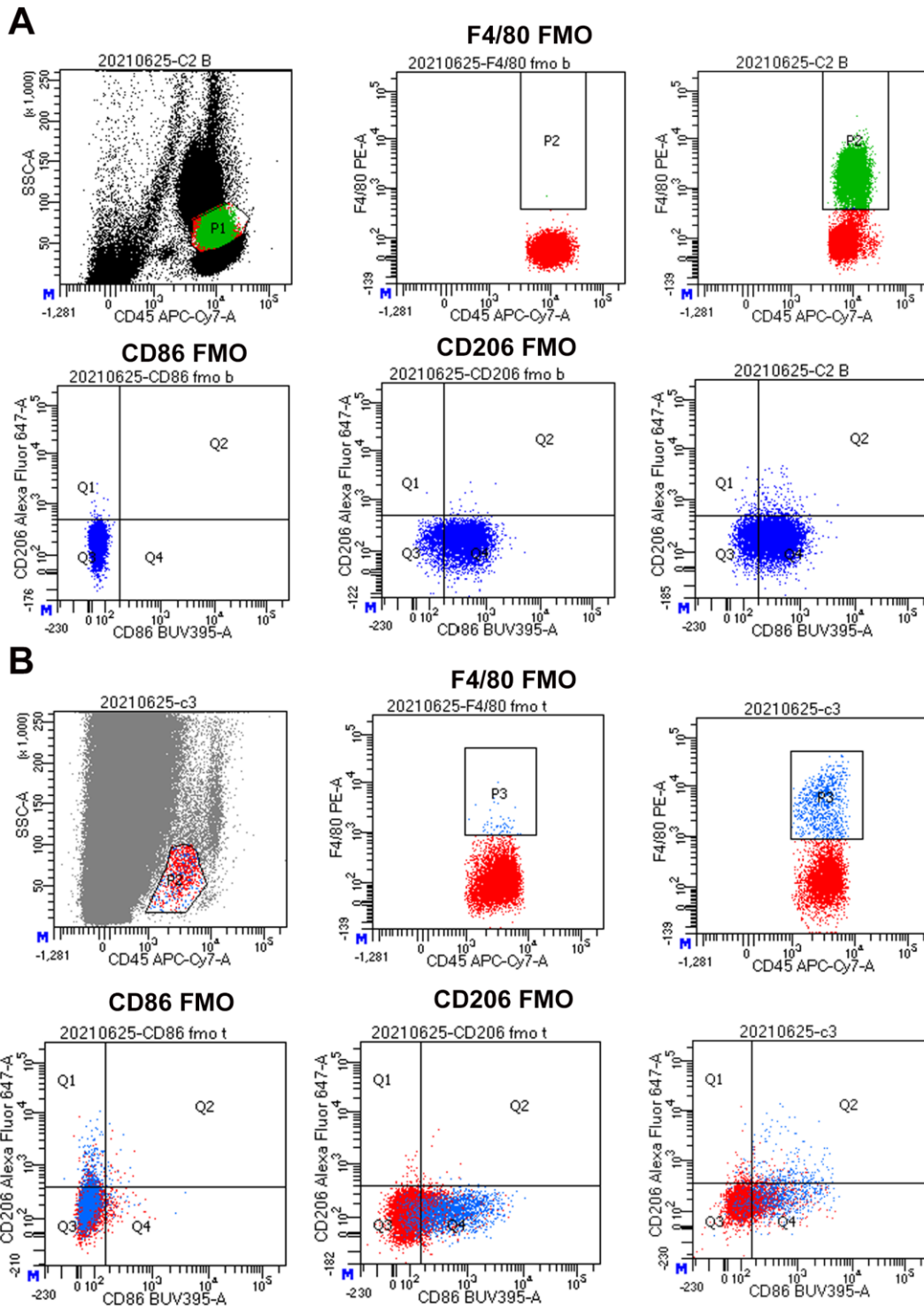
**Supplementary Figure 2. Effect of FAP on invasion and migration of colon adenocarcinoma cells, Related to Figure 2 and Figure 3.** (A) The expression levels of FAP in HCT116, HCT8 and LS174T cells were assayed by Western blotting. (B-C) The effect of FAP on the motility of HCT8 and HCT116 cells by wound-healing assay. The length of scale bar is 500 µm. (D) The Boyden chamber assay was performed with and without matrigel. The length of scale bar is 100 µm.

**Supplementary Figure 3.**



**Supplementary Figure 3. The relationship between the expression of MPRIP in CRC and prognosis, Related to Figure 5. (A-C) Association of expression level of MPRIP with OS in CRC patients from GSE17536, GSE41258 and GSE38832. (D) Association of expression level of MPRIP with RFS in CRC patients from GSE17536 and GSE14333. Log-rank test was utilized to examine significant differences.**

**Supplementary Figure 4.**



**Supplementary Figure 4. Flow cytometry gating for analysis of circulating monocytes(A) and TAM(B), Related to Figure 6.** TILs were isolated as described in Material and Methods. Stained cells were first gated on lymphocytes based on the SSC-A and CD45, then F4/80, CD206 and CD86. Numbers indicate percentage of positive cells.