Supplementary Material

## The E3 ubiquitin ligase MARCH2 protects against myocardial ischemiareperfusion injury through inhibiting pyroptosis via negative regulation of PGAM5/MAVS/NLRP3 Axis

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Sample	Sex	Age (years)	Diagnosis
Control 1	М	18	Brain death
Control 2	F	24	Brain death
Control 3	Μ	33	Brain death
Control 4	Μ	29	Brain death
Control 5	F	31	Brain death
Control 6	М	35	Brain death
IHD 1	F	43	ICM
IHD 2	М	51	ICM
IHD 3	М	56	ICM
IHD 4	М	45	ICM
IHD 5	М	64	ICM
IHD 6	М	57	ICM

**Supplementary Table S1. Patient Characteristics** 

IHD, ischemic heart disease; ICM, ischemic cardiomyocytes.



**Supplementary Fig. S1. Differentially expressed genes and MARCH2 level after myocardial I/R injury. a** Heatmaps showing the significantly altered genes after myocardial I/R injury. **b** Western blotting analysis of MARCH2 expression in primary adult mouse cardiomyocytes subjected to hypoxia and reoxygenation for different times.



**Supplementary Fig. S2. The generation of MARCH2 deletion mice (MARCH2 KO) and long-term cardiac function after myocardial I/R injury. a** Generation of MARCH2 deletion mice. **b**, **c** Baseline heart rate (b) and blood pressure (c) of mice was measured by echocardiography and tail-cuff method. **d**, **e**, **f**, **g** Longitudinal assessment

of cardiac structure and function by echocardiography was performed after I/R injury. Left ventricular end systolic diameter (LVESD, d), left ventricular end systolic volume (LVESV, e), ejection fraction (EF, f), and fractional shortening (FS, g). n = 6 mice per group.



**Supplementary Fig. S3 Cell types distribution and percentages of single cells. a** Uniform Manifold Approximation and Projection (UMAP) showing 178274 single cells isolated from WT and MARCH2<sup>-/-</sup> mice after sham or I/R surgery. EC, endothelial cell. MP, macrophage. Cell types were identified based on the expression of known markers. **b, c** Cell types distribution (b) and percentages (c) for different groups were determined by the cluster of cells. **d** Single-cell RNA-seq of NLRP3 inflammasome assembly-related genes between WT-Sham group and WT-IR group in each cell type [cardiomyocytes, fibroblasts, endothelial cells (ECs), Mural cells, macrophages (MPs), neurons, T cells, mesothelial cells, and B cells].



Supplementary Fig. S4. Single-cell RNA-seq of NLRP3 inflammasome assemblyrelated genes in different cell types. a, b, c, d Differentially expressed genes including PGAM5 (a), NLRP3 (b), GSDMD (c), Caspase-1 (d) between MARCH2 KO-IR group and WT-IR group in each cell type [cardiomyocytes, fibroblasts, endothelial cells (ECs), Mural cells, macrophages (MPs), neurons, T cells, mesothelial cells, and B cells]. Statistical differences were determined using Mann–Whitney U test. \* represents P<0.05. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5; NLRP3, NACHT, LRR and PYD domains-containing protein 3; GSDMD, Gasdermin-D.



Supplementary Fig. S5. MARCH2 knockout up-regulated NLRP3 inflammasome assembly and pyroptosis in cardiomyocytes. The NLRP3 inflammasome assembly-related gene sets were quantified in cardiomyocytes. **a** Comparative gene set variation analysis (GSVA) of KEGG pathway between WT-I/R and MARCH2<sup>-/-</sup>-I/R groups. **b** comparative gene set variation analysis (GSVA) of GO between WT-I/R and MARCH2<sup>-/-</sup>-I/R groups. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5; NLRP3, NACHT, LRR and PYD domains-containing protein 3; GSDMD, Gasdermin-D.



Supplementary Fig. S6. The expression levels of NLRP3 inflammasome pathway target genes in WT and MARCH2 KO mice subjected to I/R. a, b, c, d Quantitated analysis of NLRP3, ASC, Cleaved Caspase-1, and N-terminal GSDMD protein levels in WT and MARCH2 KO mice subjected to I/R. Data are shown as the means  $\pm$  SEM. \* P < 0.05, \*\* P < 0.01, \*\*\* P < 0.001. MARCH2, Membrane-associated RING finger protein 2; NLRP3, NACHT, LRR and PYD domains-containing protein 3; ASC, Apoptosis-associated speck-like protein containing a CARD; GSDMD, Gasdermin-D.



Supplementary Fig. S7. Validation of potential MARCH2-binding protein and cell-cell interactions in mouse heart following myocardial ischemia/reperfusion injury. a Schematic diagram showing the conjoint screening of genes both in necroptosis or NOD-like receptor signaling pathway (KEGG pathways HSA04217, HSA04621) and in mass spectrometry (MS). Validating potential MARCH2-binding protein in MS with immunoprecipitation in HL-1 cardiomyocytes. b Cell-cell interactions in WT-I/R and MARCH2<sup>-/-</sup>-I/R groups were predicted based on ligand-receptor pairs by Cellphone DB. The interactions between macrophages (MPs) and cardiomyocytes were significantly increased in MARCH2<sup>-/-</sup>-I/R group compared with WT-I/R group (red box).



Supplementary Fig. S8. MARCH2 mediated the degradation of PGAM5 protein in NMCMs. a, b The mRNA levels of PGAM5 did not change when either overexpression (a) or knockdown (b) of MARCH2 in NMCMs treated with MCM+H/R (n = 6 for each group). The PGAM5 mRNA levels were analyzed by RT-PCR. c Representative Western blotting analysis of MARCH2 and PGAM5 protein levels. NMCMs were transfected with NC or sh-MARCH2 and then treated with cycloheximide (CHX; 30 µM) for indicated time periods in the setting of MCM+H/R treatment. d NMCMs were transfected with Vector or MARCH2 and were treated with or without MG132 (10 µM) in the setting of MCM+H/R treatment. Data are shown as the means ± SEM. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5; NMCMs, neonatal mouse cardiomyocytes.



Supplementary Fig. S9. MARCH2 E3 ligase promotes the degradation of PGAM5
via K48-linked polyubiquitination. a MARCH2 but not its E3 ligase-inactive mutants
mediates polyubiquitination of PGAM5. HL-1 cardiomyocytes were transfected with
PGAM5-HA, Flag-Ub and MARCH2-myc, or MARCH2-CS-myc and treated with H/R.
b Effects of the K48-only ubiquitin KR (Lys to Arg) mutant on MARCH2-mediated
PGAM5 ubiquitination. HL-1 cardiomyocytes were transfected with the K48 ubiquitin
and K48R mutants under H/R treatment. Immunoprecipitation analysis with anti-HA
antibody and immunoblotting with antibody of anti-His and anti-HA.



**Supplementary Fig. S10. PGAM5 mediates the regulation of MARCH2 on ASC oligomerization.** Neonatal mouse cardiomyocytes were subjected to cross-linking of detergent-insoluble fraction with DSS and the ASC oligomers were detected with ASC antibody.



Supplementary Fig. S11. PGAM5 interacted with MAVS. a Endogenous immunoprecipitation of MAVS and PGAM5 in HL-1 cardiomyocytes. b Immunoprecipitation of HA-PGAM5 and Flag-MAVS in HL-1 cardiomyocytes. c, d Representative Western blotting image (c) and quantitated analysis (d) of MAVS expression in cardiomyocytes infected with vector or PGAM5 under MCM+H/R treatment. PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviralsignaling protein.



Supplementary Fig. S12. MCM+H/R induced a more robust interaction between endogenous PGAM5 and MAVS in cardiomyocytes. a Interaction between PGAM5 and MAVS was examined by IP-Western blot in neonatal mouse cardiomyocytes MCM+H/R (NMCMs) with or without treatment. b Representative immunofluorescence images of MAVS and PGAM5 in NMCMs. c Colocalization analysis of PGAM5-MAVS. Pearson's R value (no threshold) was calculated by ImageJ Fiji software; n=6 images from 3 biological replicates. Data are shown as the means  $\pm$ SEM. \*\*\* P < 0.001. PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviral-signaling protein; H/R, hypoxia and reoxygenation; MCM, macrophageconditioned medium.



**Supplementary Fig. S13. PGAM5-MAVS co-condensates forms in 293T cells under MCM+H/R treatment. a** Time-lapse image of 293T cells expressing PGAM5-mcherry. PGAM5 condensate fission and fusion is presented in the boxes. **b** Fluorescence recovery after photobleaching (FRAP) analysis of PGAM5-mcherry condensate in 293T cells. **c** Quantification of FRAP in the bleached region of PGAM5-mcherry condensate, show as the mean±SD (n=6). **d** Cell-free phase separation assay of PGAM5-mcherry droplet formation at different concentrations. **e** Images of PGAM5-mcherry (25 µmol/L) droplet formation at different salt concentrations. **f** Time-lapse images of 293T cells expressing MAVS-EGFP. MAVS condensate fission

and fusion is presented in the boxes. **g** FRAP analysis of MAVS-EGFP condensate in 293T cells. **h** Quantification of FRAP in the bleached region of MAVS-EGFP condensate, show as the mean $\pm$ SD (n=6). **i** Cell-free phase separation assay of MAVS-EGFP droplet formation at different concentrations. **j** Images of MAVS-EGFP (20  $\mu$ mol/L) droplet formation at different salt concentrations.



Supplementary Fig. S14. PGAM5 mediates the interaction between NLRP3 and MAVS in cardiomyocytes. a Interaction between NLRP3 and MAVS was examined by immunoprecipitation (IP)-Western blot in neonatal mouse cardiomyocytes (NMCMs) in the presence or absence of si-PGAM5 under MCM+H/R treatment. b Immunofluorescence of NLRP3 and MAVS in NMCMs with or without PGAM5 knockdown under MCM+H/R treatment. c colocalization analysis of NLRP3-MAVS. Pearson's R value (no threshold) was calculated by ImageJ Fiji software; n=6 images from 3 biological replicates. Data are shown as the means  $\pm$  SEM. \*\*\* P < 0.001. PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviral-signaling protein; NLRP3, NACHT, LRR and PYD domains-containing protein 3; H/R, hypoxia and reoxygenation; MCM, macrophage-conditioned medium.



Supplementary Fig. S15. PGAM5 promotes MAVS-dependent IL-18 release in cardiomyocytes. a, b Representative Western blotting and quantitated analysis of IL-18 in cardiomyocytes infected with PGAM5 or si-MAVS under MCM+H/R treatment. PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviral-signaling protein; H/R, hypoxia and reoxygenation; MCM, macrophage-conditioned medium.



Supplementary Fig. S16. PGAM5-MAVS form puncta following myocardial I/R injury. a Immunofluorescence of PGAM5 (red) and MAVS (green) in the mouse hearts following sham or myocardial I/R injury. b The number of PGAM5-MAVS puncta in the mouse hearts following sham or myocardial I/R injury. N=18 sections from 6 mice. Data were analyzed by Mann-Whitney test. Data are shown as the means  $\pm$  SEM. \*\*\* P < 0.001. c Pearson Correlation Coefficients between the number of PGAM5-MAVS puncta and PI staining cells in mouse hearts suffering myocardial I/R injury. PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviral-signaling protein.



**Supplementary Fig. S17. The regulation of MARCH2 on PGAM5-MAVS-NLRP3 inflammasome pathway in cardiomyocytes. a** Immunofluorescence images of ASC and Tom20 colocalization in HL-1 cardiomyocytes with MARCH2, PGAM5 or MAVS overexpression following MCM+H/R challenge. **b**, **c** Representative Western blotting and quantitated analysis of IL-18 in cardiomyocytes infected with MARCH2, PGAM5, or MAVS under MCM+H/R treatment. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviralsignaling protein; ASC, Apoptosis-associated speck-like protein containing a CARD.



Supplementary Fig. S18. Overexpression MARCH2 protected heart from myocardial I/R injure and PGAM5 mediates its regulation on NLRP3 assembly in heart. a, b Represent western blot image (a) and quantitative analysis (b) demonstrated the AAV9 efficiency of MARCH2 expression in heart. c, d, e Quantitative analysis of echocardiographic measurements performed in AAV9-cTnT-NC or AAV9-cTnT-MARCH2 mice subjected to I/R (45min/24 hours) injury (n=6 mice per group). Left ventricular end systolic diameter (LVESD, c), left ventricular end diastolic diameter (LVEDD, d), left ventricular end systolic volume (LVESV, e). Data are shown as the means  $\pm$  SEM. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001. MARCH2, Membrane-associated RING finger protein 2.



Supplementary Fig. S19. Cardiomyocyte-specific PGAM5 knockdown in

MARCH2 KO mice lead to alleviation of the myocardial infarction area, myocardial function, and inflammatory response. a Before subjected to I/R, WT and MARCH2 KO mice were injected with AAV9-cTnT-shPGAM5 or AAV9-cTnT-Vector  $(2\times10^{11}$  V.g/mouse) for 3 weeks by tail vein injection. TTC/Evans Blue staining is used to depict infracted area. **b** Ratios of area at risk (AAR) to left ventricular (LV) area; **c** Infarct area normalized to AAR; **d**, **e** Echocardiographic assessment of ejection fraction (EF, d) and FS (fractional shortening, e) in the indicated groups. **f**, **g** LDH release (f) and CK-MB activity (g) in mouse serum with and without myocardial I/R. **h**, **i**, **j** Representative Western blotting image (h) and quantitated analysis of caspase-1 (Procasp1; cleaved caspase-1, i) and GSDMD (Full length; N-terminal, j) in hearts of indicated group mice subjected to I/R (45 minutes/6 hours). **k** The IL-18 release was measured by ELISA in cardiac tissues of the indicated group mice subjected to I/R (45 minutes/9 hours). Data are shown as the means  $\pm$  SEM. \*P < 0.05. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5.



Supplementary Fig. S20. Propidium iodide (PI) stained images of myocardial sections from mice subjected to I/R. Green: PI-positive nuclei; Red: cTnI-stained cardiomyocytes; blue, DAPI-stained nuclei; Scale bar = 20  $\mu$ m. \*\*\* P < 0.001. MARCH2, Membrane-associated RING finger protein 2; PGAM5, phosphoglycerate mutase 5; MAVS, Mitochondrial antiviral-signaling protein; I/R, ischemic and reperfusion.