

# **Low-dose 2-Deoxy Glucose Stabilises Tolerogenic Dendritic Cells and Generates Potent *in vivo* Immunosuppressive Effects**

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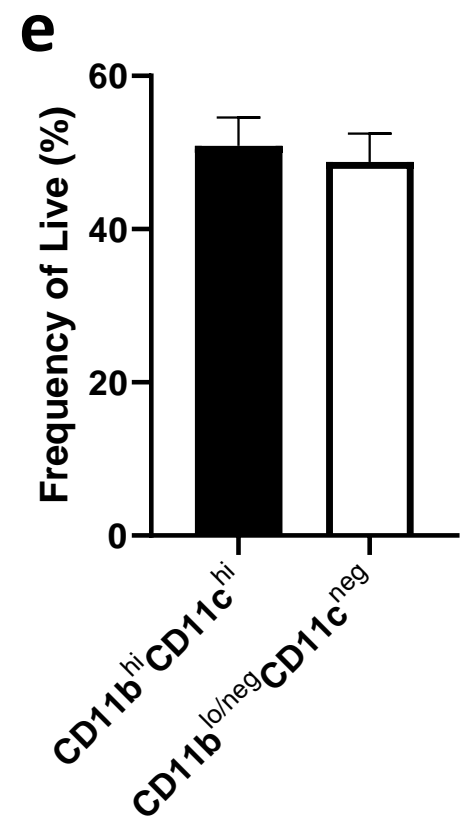
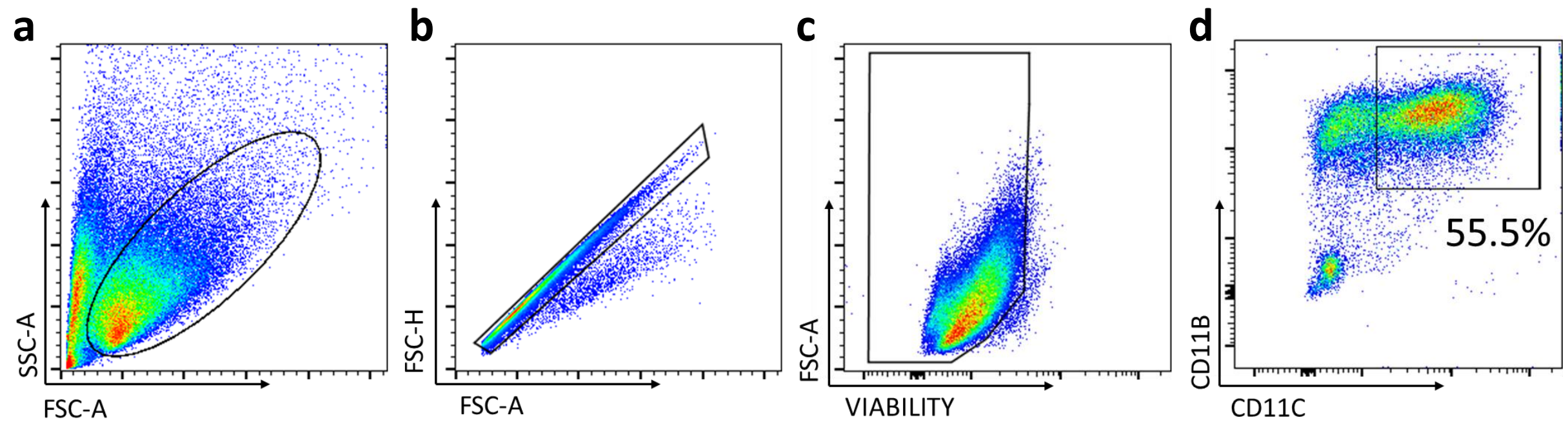
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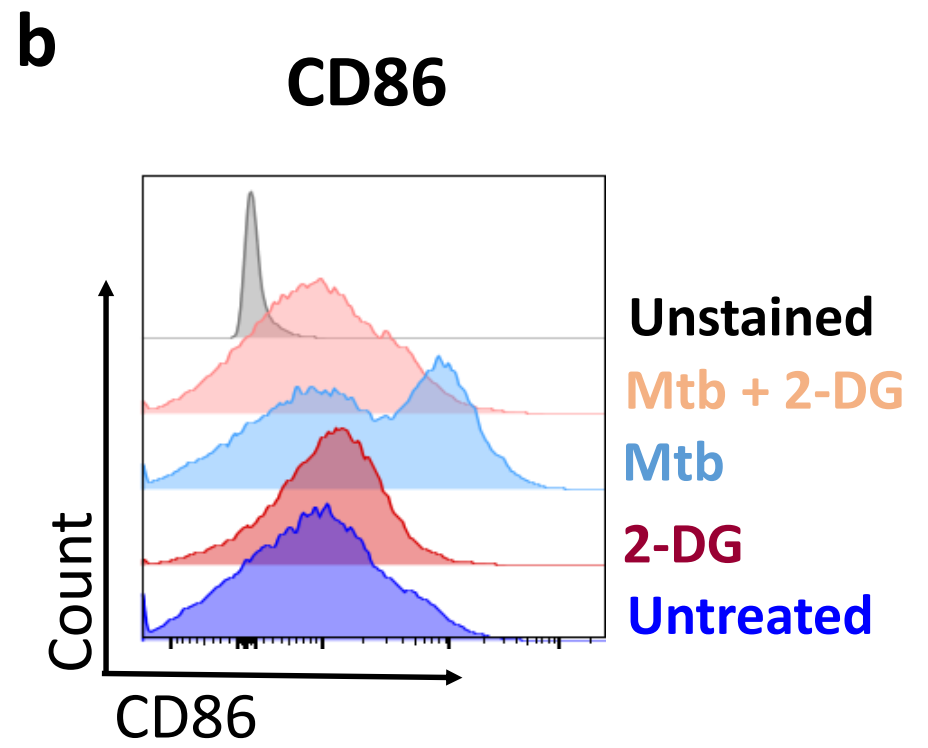
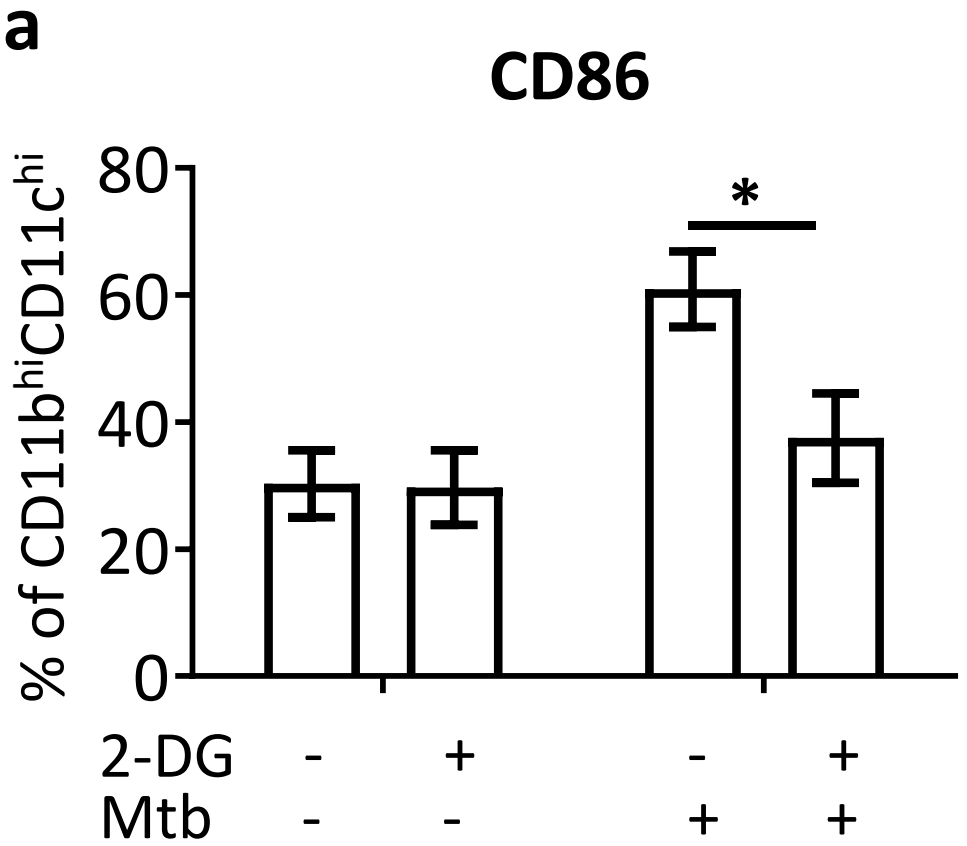
#These authors contributed equally to this manuscript

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**Supplementary Information**

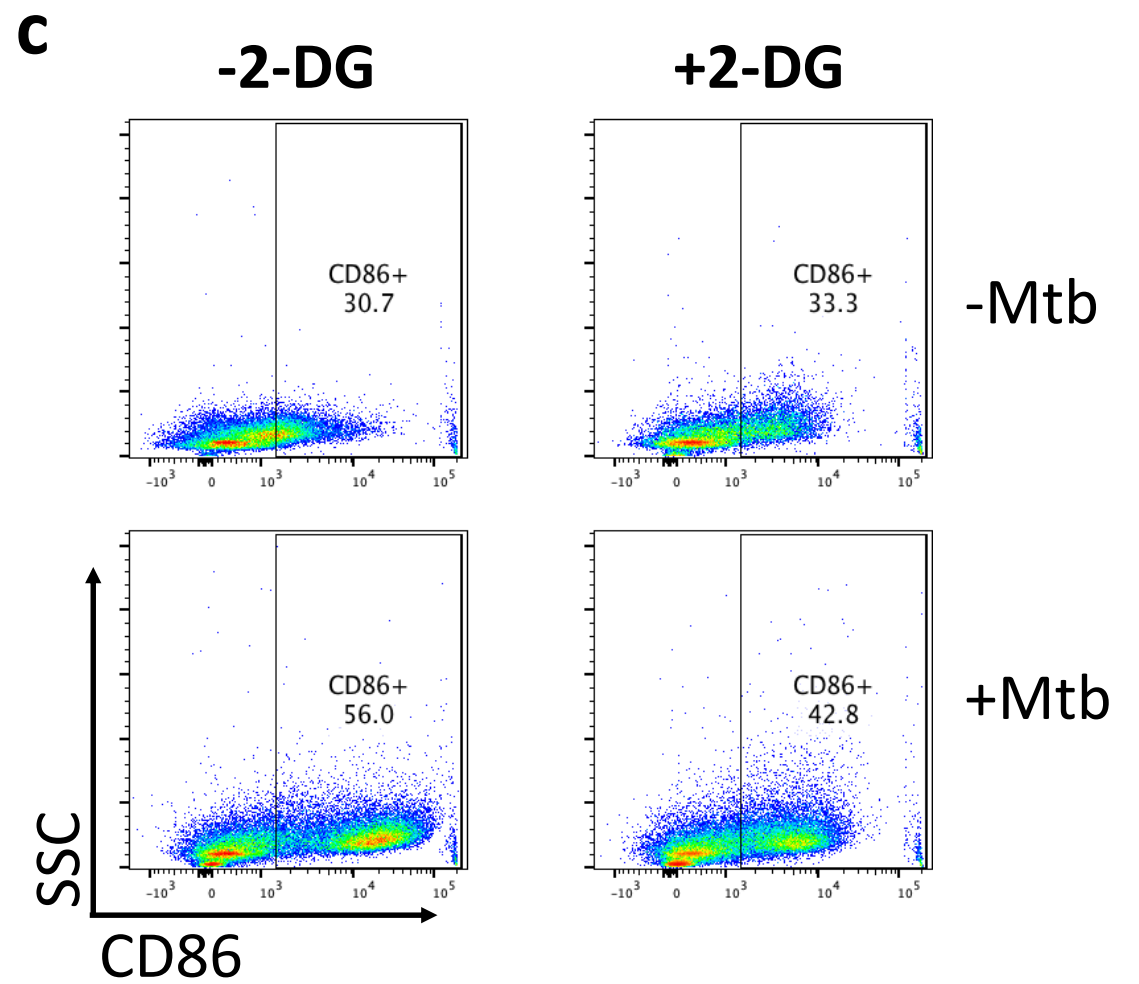


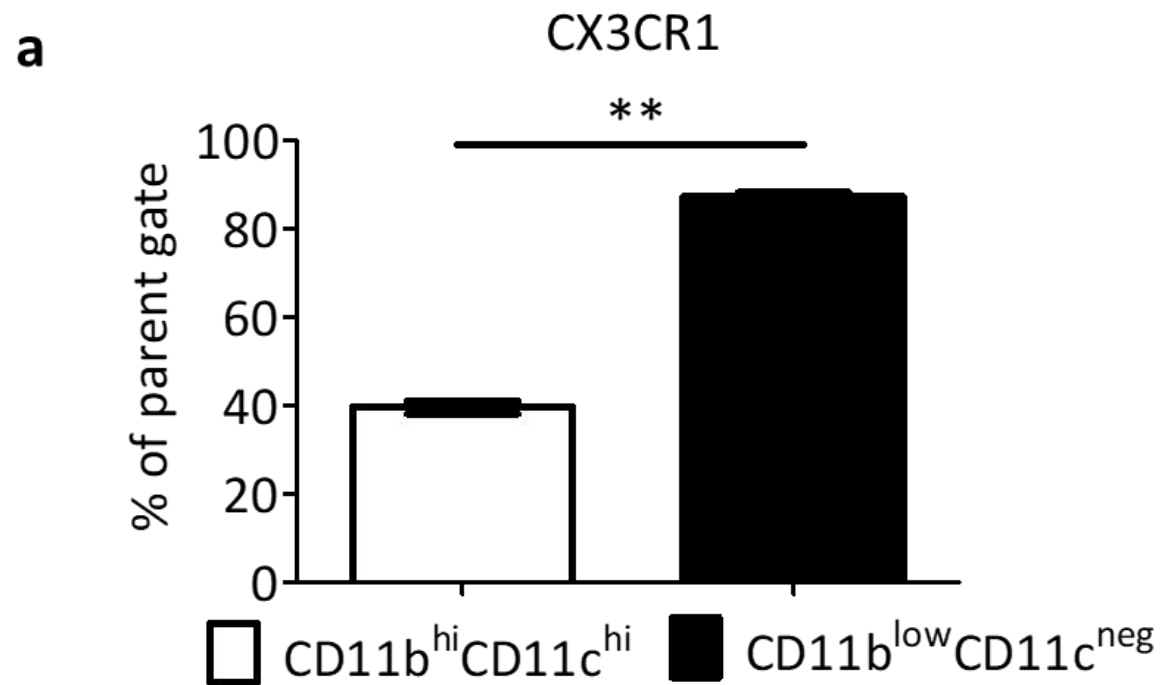
**Supp. Fig. 1** *Gating strategy for GM-CSF BMDC cultured cells.* BMDC were depleted of Lin<sup>+</sup> cells (CD4, CD8, CD45R/B220 and MHC II) and cultured in GM-CSF (10 ng/ml) for 6 days with medium exchange every two days. Loosely adherent cell clusters were harvested, depleted of Gr-1<sup>+</sup> cells and resuspended in complete medium (cRPMI). A sample of 1x10<sup>6</sup> cells was then prepared for flow cytometry (see Methods) and analysed on an LSR II cytometer (1x10<sup>5</sup> events recorded). The gating strategy was as follows: (a) discrimination of leukocytes by forward scatter vs. side scatter; (b) single cells were then selected using a forward scatter height (FSC-H) vs. forward scatter area (FSC-A) pulse geometry gate to discriminate between clumps and single cells; (c) live/dead discrimination was achieved using eFluor 455UV fixable viability dye, which stains dead cells, hence the gated negative population corresponds to live cells; (d) population of interest (CD11b<sup>hi</sup>CD11c<sup>hi</sup>) was identified using CD11b vs. CD11c staining within the live-single cell-leukocyte gate; and (e) bar chart of the frequency of CD11b<sup>hi</sup>CD11c<sup>hi</sup> (black bar) and CD11b<sup>lo/neg</sup>CD11c<sup>neg</sup> (white bar) within the live population



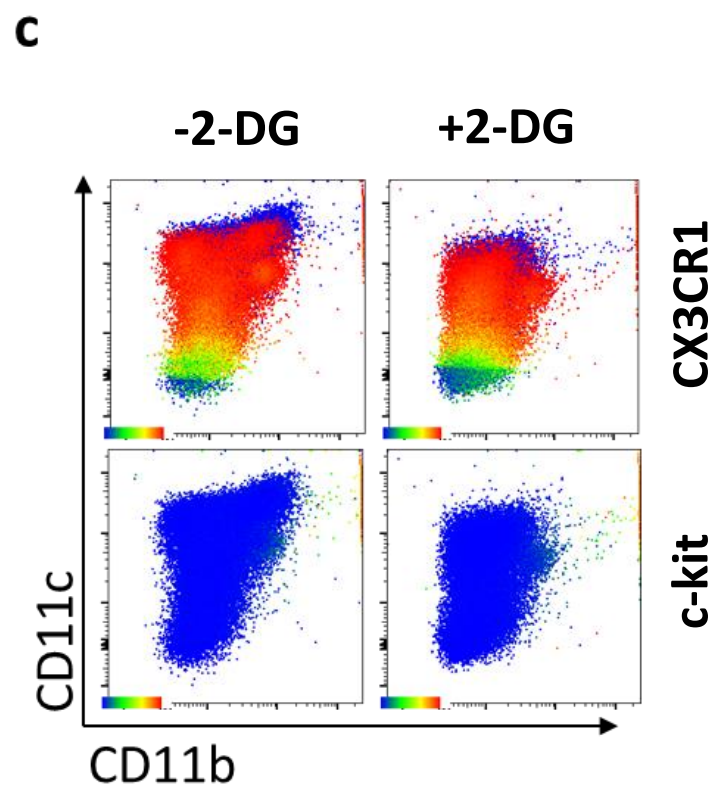
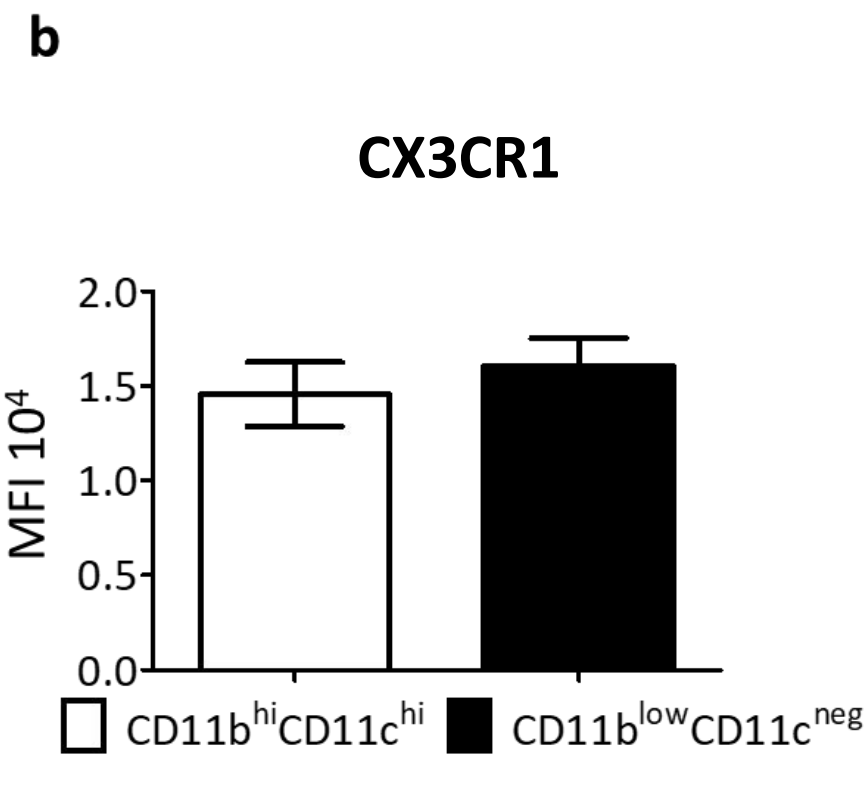
**Supp. Fig. 2** *Tolerogenic DC (tolDC) and 2-DG-treated DC (2-DGtolDC) express low levels of CD86; 2-DGtolDC fail to upregulate CD86 when stimulated with Mtb.*

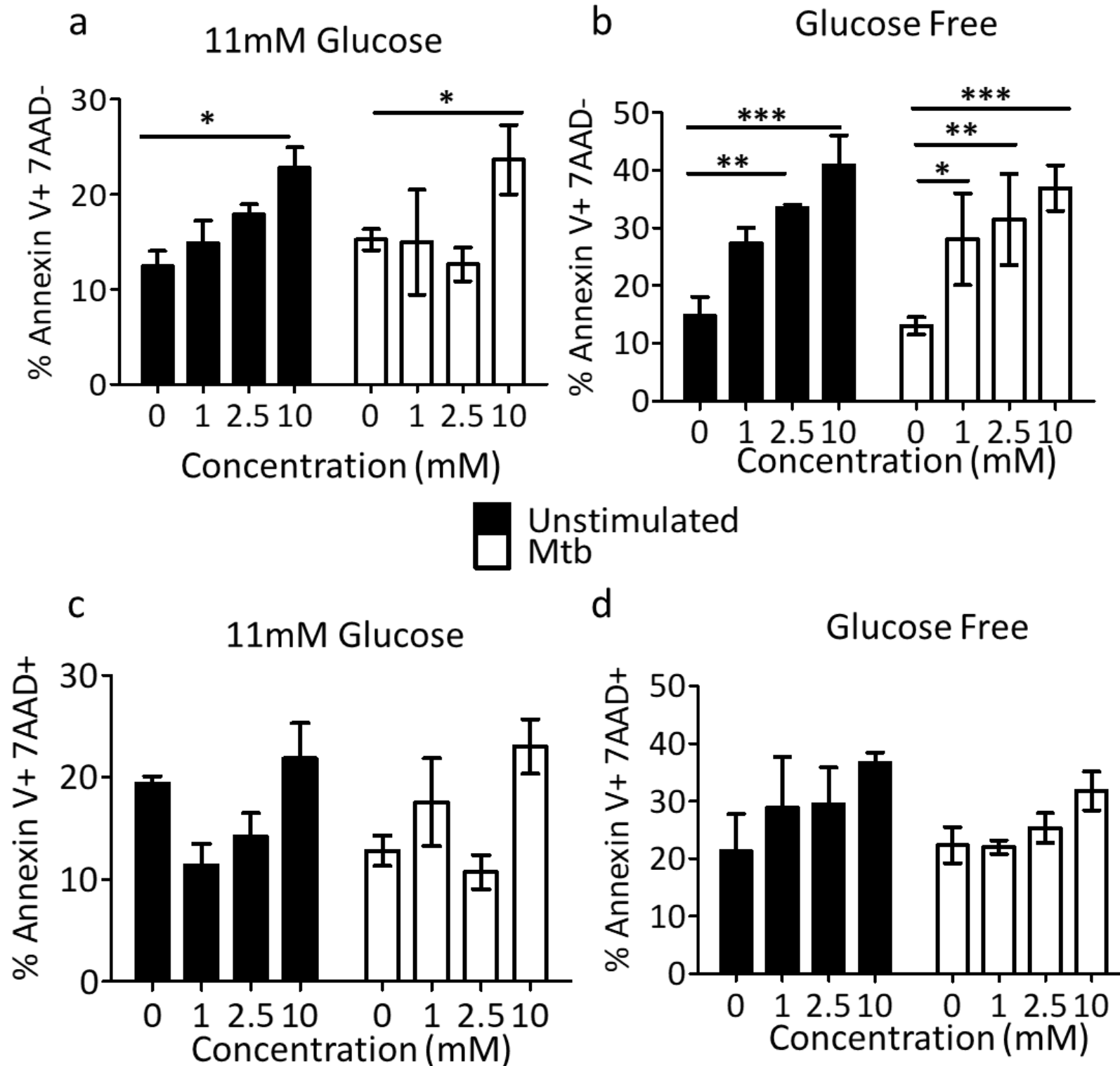
BMDC were prepared as previously described. Flow cytometry was performed to assess CD86 expression on CD11b<sup>hi</sup>CD11c<sup>hi</sup> cells (for gating strategy see Supp. Fig. 1): (a) percent CD86+ cells within the CD11b<sup>hi</sup>CD11c<sup>hi</sup> BMDC population; (b) upper panel: representative histograms showing CD86 expression in CD11b<sup>hi</sup>CD11c<sup>hi</sup> cells treated with or without 2.5 mM 2-DG, and/or stimulated with Mtb; and (c) BMtolDC were cultured as described and treated with 2-DG (2.5 mM) (top panels), and/or stimulated with 15 μg/ml heat inactivated mycobacterial extract, Mtb (bottom panels): representative flow cytometry dot plots of the percentage of CD86+ cells in the CD11b<sup>hi</sup>CD11c<sup>hi</sup> population; error bars denote Standard Error of the Mean (SEM), n=3, p value: \*<0.05





**Supp. Fig. 3** Expression of progenitor markers CX3CR1 and c-kit by GM-CSF-cultured bone marrow cells. BMDC were prepared as described in Methods and flow cytometry performed to differentiate CD11b<sup>hi</sup>CD11c<sup>hi</sup> cells from CD11b<sup>lo/neg</sup>CD11c<sup>neg</sup> cells (see legend to Supp. Fig 1): (a) CD11b<sup>hi</sup>CD11c<sup>hi</sup> (presumed DC) expressed moderate levels of CX3CR1 (~40 %) while CD11b<sup>lo/neg</sup>CD11c<sup>neg</sup> express high levels of CX3CR1 (~80 %). (b) CD11b<sup>hi</sup>CD11c<sup>hi</sup> and CD11b<sup>lo/neg</sup>CD11c<sup>neg</sup> CX3CR1 MFI. (c) 2-DG treatment slightly reduced the overall percentage of CD11b<sup>hi</sup>CD11c<sup>hi</sup> in the BMDC population while increasing the percentage of CX3CR1<sup>+</sup> cells as shown in representative flow cytometry plots with heat map analysis of CX3CR1 and c-kit expression on non-2-DG-treated DC and 2-DGtDC. There was minimal c-kit expression with or without 2-DG treatment. Warm colours denote higher relative expression, while cool colours denote lower expression levels

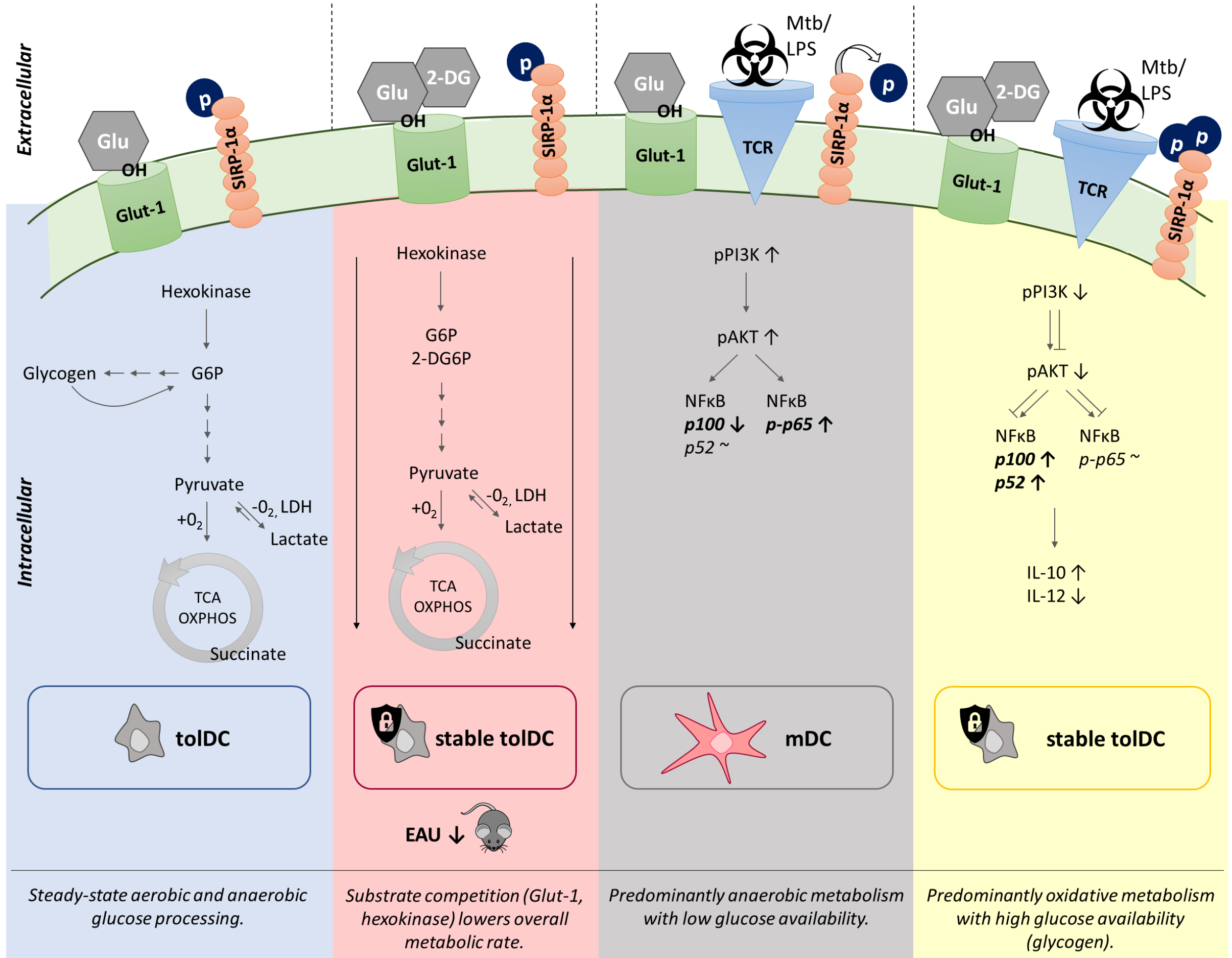




**Supp. Fig. 4** BMDC cultured with 2.5 mM 2-DG in the presence of glucose do not undergo apoptosis.

BMDC were prepared as described in Methods and on d6 were re-plated in glucose-rich (11 mM) cRPMI media with 2-DG at various concentrations (1, 2.5 or 10 mM 2-DG). Cells were harvested and assessed for apoptosis by flow cytometry using Annexin V staining (see Methods): (a) early apoptosis (Annexin V<sup>+</sup> 7AAD<sup>-</sup> cells) in 2-DG-treated cells, either stimulated with Mtb extract (15 μg/ml) (white bars), or unstimulated (black bars). In glucose rich media there was no evidence of 2-DG-induced cell death up to a concentration of 2.5 mM. At 10 mM, apoptosis levels increased significantly ( $p < 0.05$ ); Mtb stimulation had no additional effect; (b) early apoptosis in glucose-free medium; significant levels of cell death were observed particularly when challenged with Mtb antigen; (c) and (d) levels of late apoptosis in BMDC (Annexin V<sup>+</sup> 7AAD<sup>+</sup> cells) were unchanged in the presence of 2-DG both in glucose-rich (11 mM) and glucose-free media with and without Mtb stimulation. Error bars denote Standard Error of the Mean (SEM);  $n=3$ ,  $p$  values: \* $<0.05$ , \*\* $<0.01$ , \*\*\* $<0.001$

Supp. Fig. 5 Summary of findings (refer to next page for caption).



**Supp. Fig. 5 Summary of findings.**

*Blue panel:* Untreated CD11b<sup>+</sup> CD11c<sup>+</sup> Zbtb46<sup>+</sup> MHCII<sup>-</sup> tolerogenic DC (tolDC) undergo baseline aerobic and anaerobic glucose metabolism at a steady-state (“resting”) rate. In the presence of glucose Glut-1 allows for glucose uptake as is required to meet metabolic demand. SIRP-1 $\alpha$  is constitutively activated, i.e. phosphorylated. Untreated tolerogenic DC are unable to halt spontaneous experimental autoimmune uveitis (EAU) in an induced animal model

*Red panel:* 2-deoxy glucose (2-DG) and glucose compete for uptake through Glut-1 and for intracellular phosphorylation by hexokinase to allow for downstream aerobic/anaerobic substrate processing. This results in an overall reduced metabolic rate. 2-DG stabilises DC in a tolerogenic state, enabling them to prevent EAU progression *in vivo*

*Grey panel:* Extracellular noxae such as mycobacterium toxin (Mtb) or lipopolysaccharide (LPS) in the presence of glucose induce a metabolic stress response, pushing glucose metabolism towards fermentation (*i.e.* lactate production along with high glucose flux resulting in low substrate availability). This leads to DC activation/maturation (mDC) with increased MHC II surface expression and loss of SIRP-1 $\alpha$  phosphorylation. Signalling through NF $\kappa$ B p65 with downstream pro-inflammatory cytokine production aggravates the pro-inflammatory state

*Yellow panel:* In the presence of both 2-DG and glucose, extracellular Mtb or LPS are unable to activate tolDC. 2-DG exerts a stabilising effect on tolDC, reflected by increased SIRP-1 $\alpha$  phosphorylation and signalling through NF $\kappa$ B p100, resulting in an anti-inflammatory state with decreased IL-12 and increased IL-10 expression. These stable tolDC show a high metabolic rate (predominantly aerobic/OXPHOS) with high glucose availability and ample glycogen storage

*Abbreviations:*

*Glu*, glucose

*2-DG*, 2-deoxy glucose

*Glut-1*, glucose transporter 1

*G6P/2-DG6P*, glucose-6-phosphate/2-deoxy glucose-6-phosphate

*TCR*, T cell receptor

*LDH*, lactate dehydrogenase

*LPS*, bacterial lipopolysaccharide

*Mtb*, heat inactivated mycobacterial toxin

*OXPHOS*, oxidative phosphorylation

*TCA*, tricarboxylic acid cycle (Krebs cycle)

*tolDC/mDC*, tolerogenic dendritic cells/mature dendritic cells

*EAU*, induced experimental autoimmune uveoretinitis