

Lung injury-induced endothelial cell states persist in aging-associated progressive fibrosis.

Ahmed A. Raslan^{1,2,3}, Tho X. Pham^{1,2}, Jisu Lee¹, Konstantinos Kontodimas^{2,4}, Andrew Tilston-Lune^{2,4}, Jillian Schmottlach¹, Jeongmin Hong^{1,2}, Taha Dinc¹, Andreea M. Bujor¹, Nunzia Caporarello⁵, Aude Thiriot⁶, Ulrich H. von Andrian^{6,7}, Steven K. Huang⁸, Roberto F. Nicosia⁹, Maria Trojanowska^{1,2}, Xaralabos Varelas^{2,4}, Giovanni Ligresti^{1,2}.

Affiliations:

¹Department of Medicine, Boston University Chobanian and Avedisian School of Medicine, Boston University, Boston, MA, USA

²Pulmonary Center, Boston University Chobanian and Avedisian School of Medicine, Boston, MA, USA

³Department of Zoology, Faculty of Science, Assiut University, Assiut, Egypt

⁴Department of Biochemistry and Cell Biology, Boston University Chobanian and Avedisian School of Medicine, Boston, MA, USA

⁵Department of Medicine, Loyola University Chicago, Chicago, IL, USA

⁶Department of Immunology, Harvard Medical School, Boston, MA, USA

⁷The Ragon Institute of MGH, MIT and Harvard, Cambridge, MA, USA

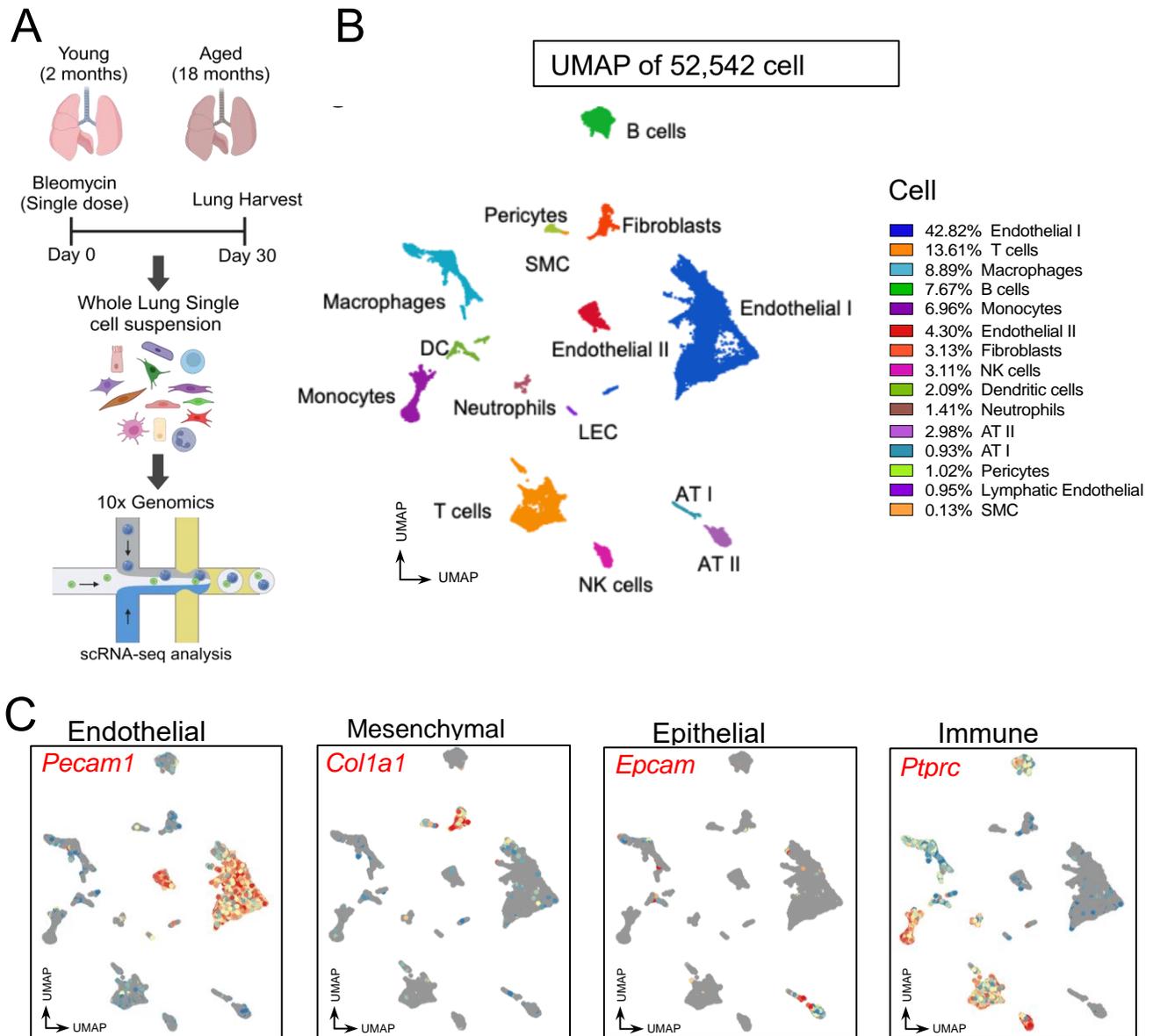
⁸Department of Internal Medicine, University of Michigan Medical School, Ann Arbor, MI, USA

⁹Department of Laboratory Medicine and Pathology, University of Washington, Seattle, WA, USA

Corresponding author:

Giovanni Ligresti, PhD. Department of Medicine, Division of Rheumatology, Arthritis and Autoimmune Diseases Research Center, Boston University Chobanian & Avedisian School of Medicine, Boston, MA, 02118, USA. Phone: 617.358.6786; Email: ligresti@bu.edu.

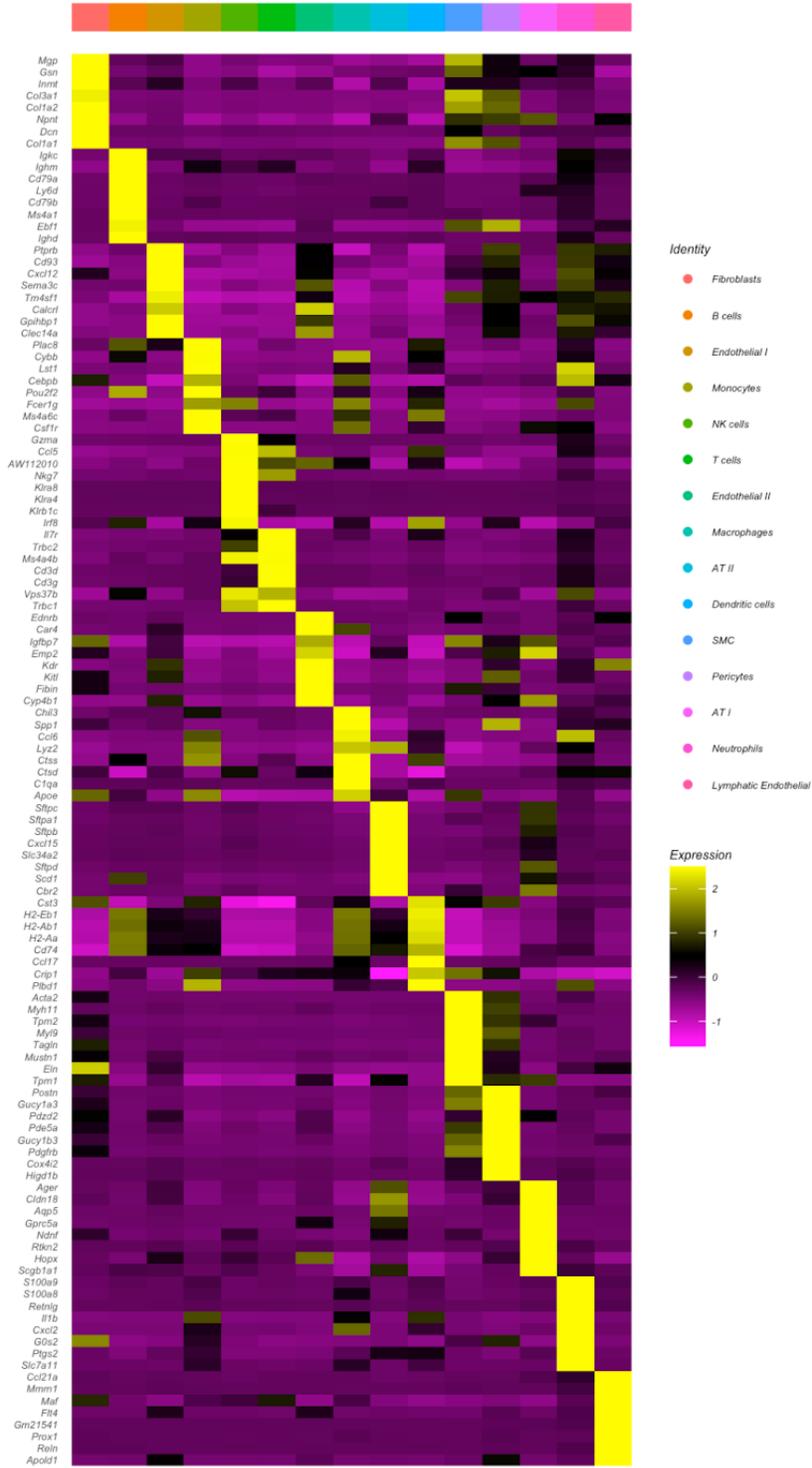
Xaralabos Varelas, PhD. Department of Biochemistry and Cell Biology, Boston University Chobanian & Avedisian School of Medicine, Boston, MA 02118, USA. Phone: 617.358.4575; Email: xvarelas@bu.edu



Supplementary Figure 1. scRNA-seq analysis of young and aged mouse lungs following bleomycin challenge. (A) Young sham ($n = 1$, 11767 cells), aged sham ($n = 2$, 16507 cells), bleomycin-treated young ($n = 1$, 5893 cells), and bleomycin-treated aged ($n = 2$, 18375) lungs were harvested at day 30 post bleomycin delivery and prepared for scRNA-Seq analysis. This schematic was created with BioRender.com. **(B)** UMAP embedded visualization of the cells from

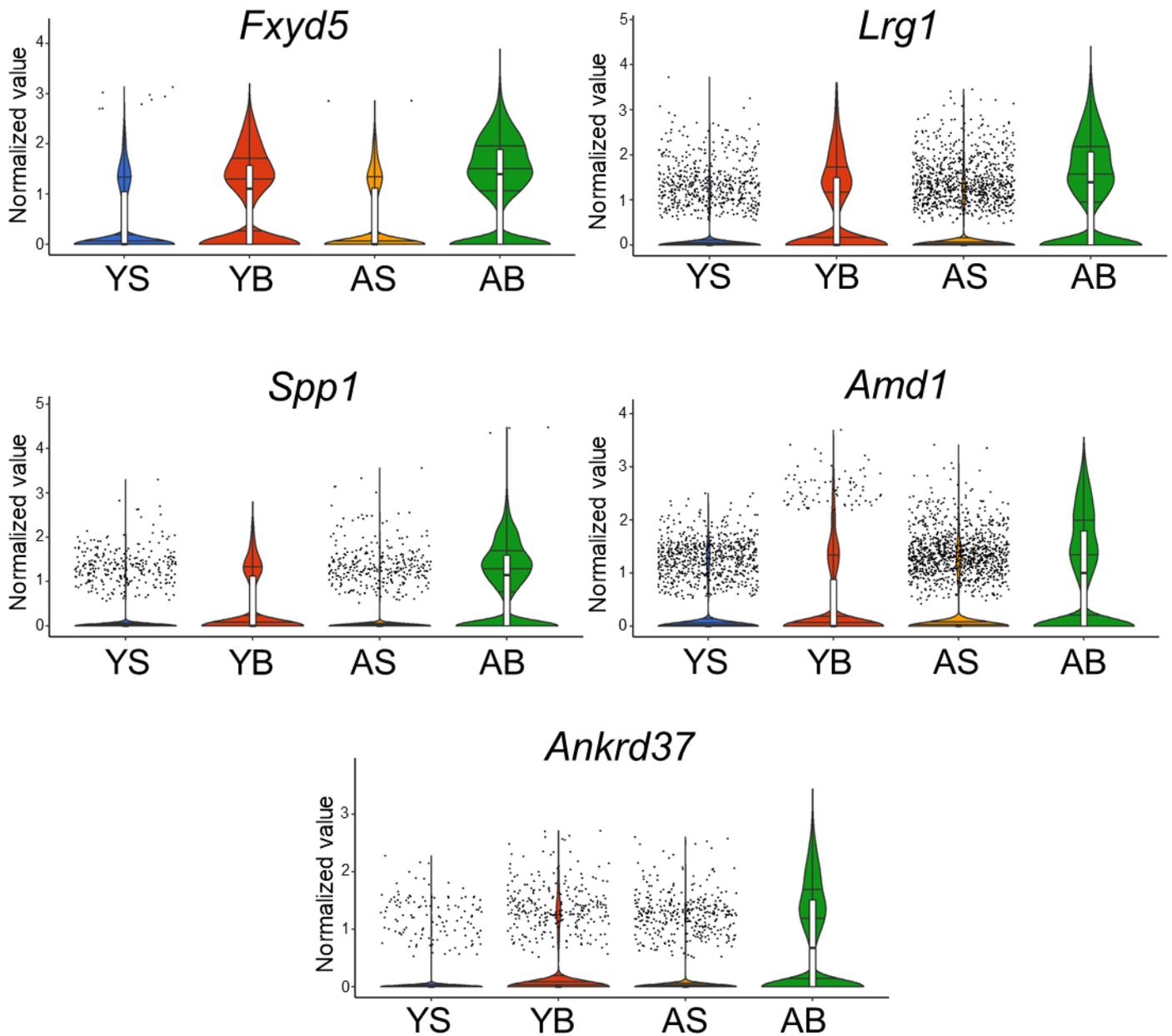
all lung samples shows different cell populations and their composition. **(C)** UMAP plots of single cells showing gene expression for indicated marker genes.

Fibroblasts
 B cells
 Endothelial I
 Monocytes
 NK cells
 T cells
 Endothelial II
 Macrophages
 AT II
 Dendritic cells
 SMC
 Pericytes
 AT I
 Neutrophils
 Lymphatic Endothelial

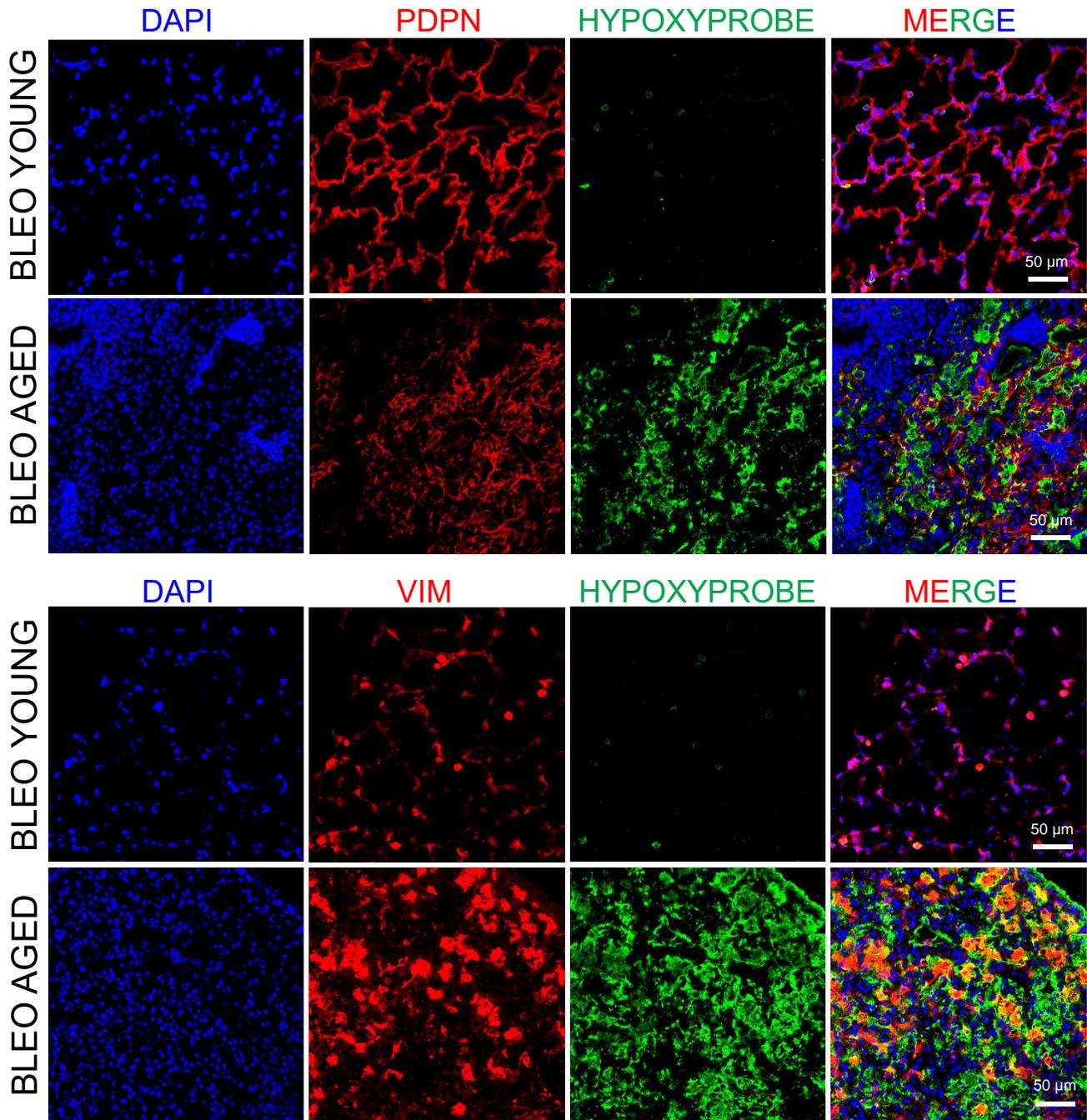


Supplementary Figure 2. Heat map of marker genes for all identified cell types. Each cell type is defined by the top eight most expressed genes. Each column represents the average expression value for each lung sample, hierarchically grouped by cell type.

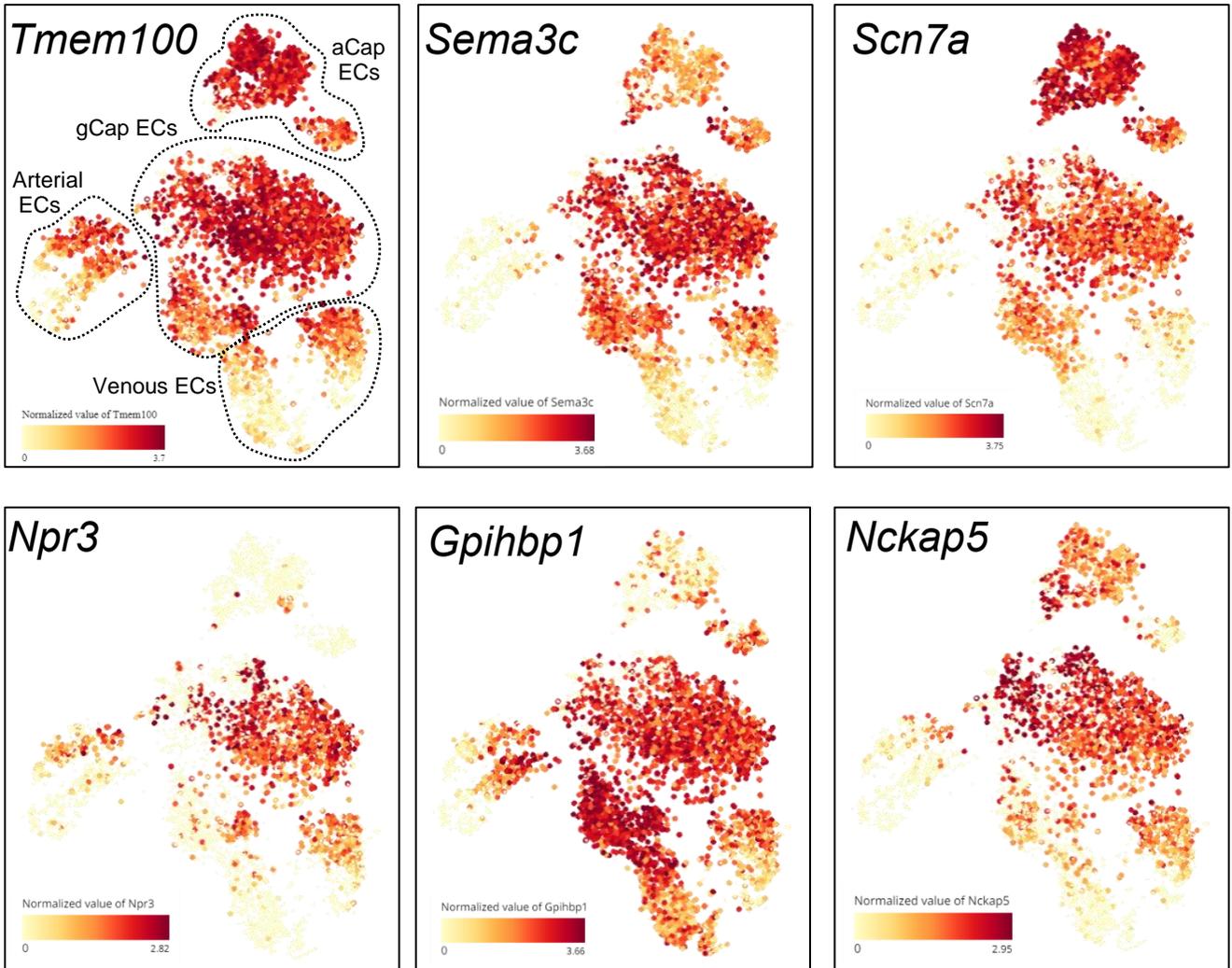
Supplementary Figure 3. Heat map of marker genes for all endothelial cell types. Each EC lineage is defined by the top three most expressed genes. Each column represents the average expression value for each lung sample, hierarchically grouped by EC type. Quiescent (Q), activated (A).



Supplementary Figure 4. Activated EC from aged mouse lung express high level of activation marker genes. Violin plots of the expression of activation marker genes in EC from Young and Aged mouse. Young Sham (YS, $n = 5717$ cells); Young Bleo (YB, $n = 2211$ cells); Aged Sham (AS, $n = 6821$ cells); Aged Bleo (AB, $n = 9462$ cells). Each box plot displays the median value as the center line, the upper and lower box boundaries at the first and third quartiles (25th and 75th percentiles), and the whiskers depict the minimum and maximum values.

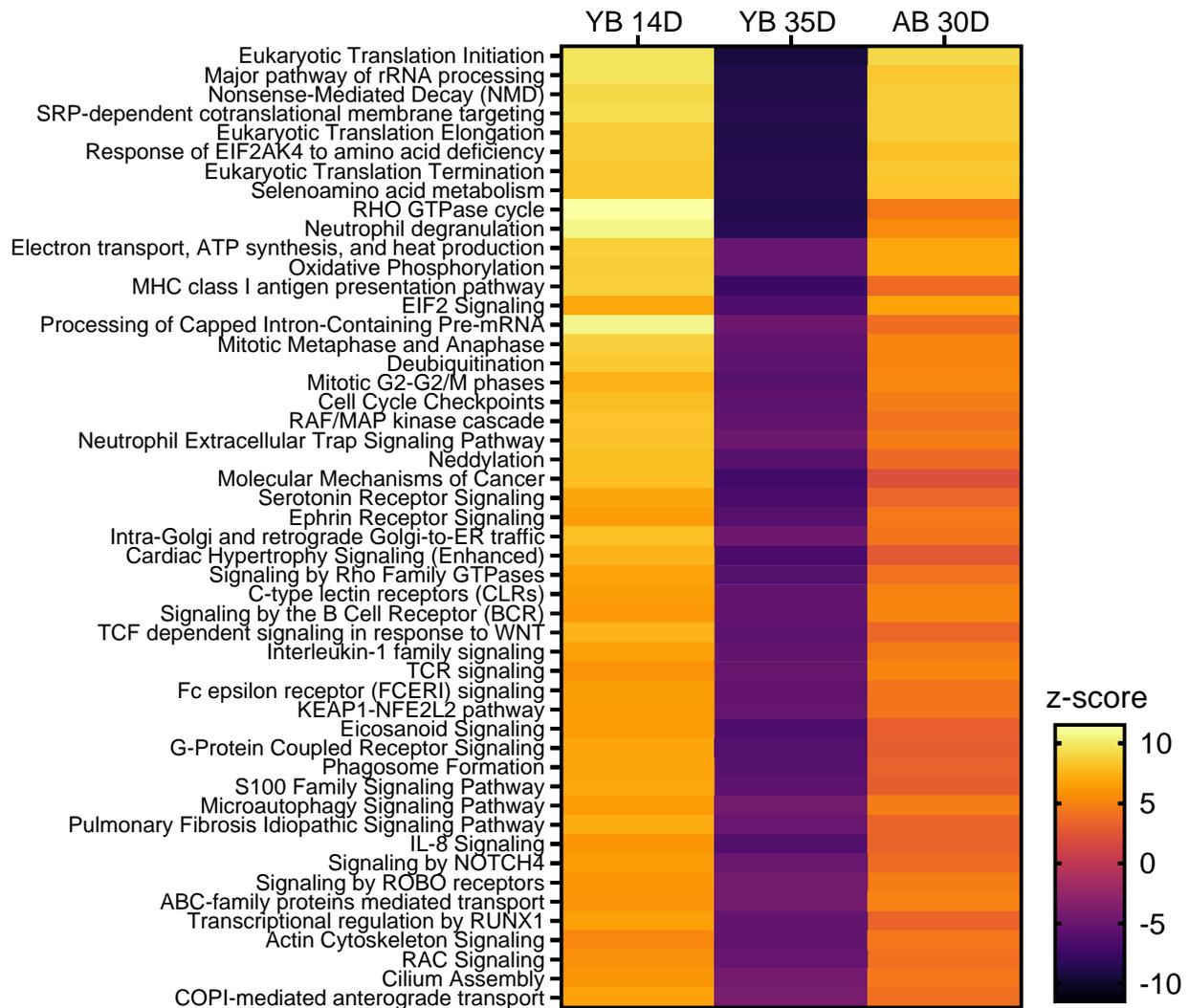


Supplementary Figure 5. Hypoxia in fibrotic aged lungs is detected in cells of epithelial and mesenchymal origin. Immunofluorescence analysis of bleomycin-injured young and aged mouse lungs (60 days post bleomycin) shows that hypoxia, detected by hypoxyprobe, was primarily sensed in PDPN+ AT1 cells and VIM+ mesenchymal cells.

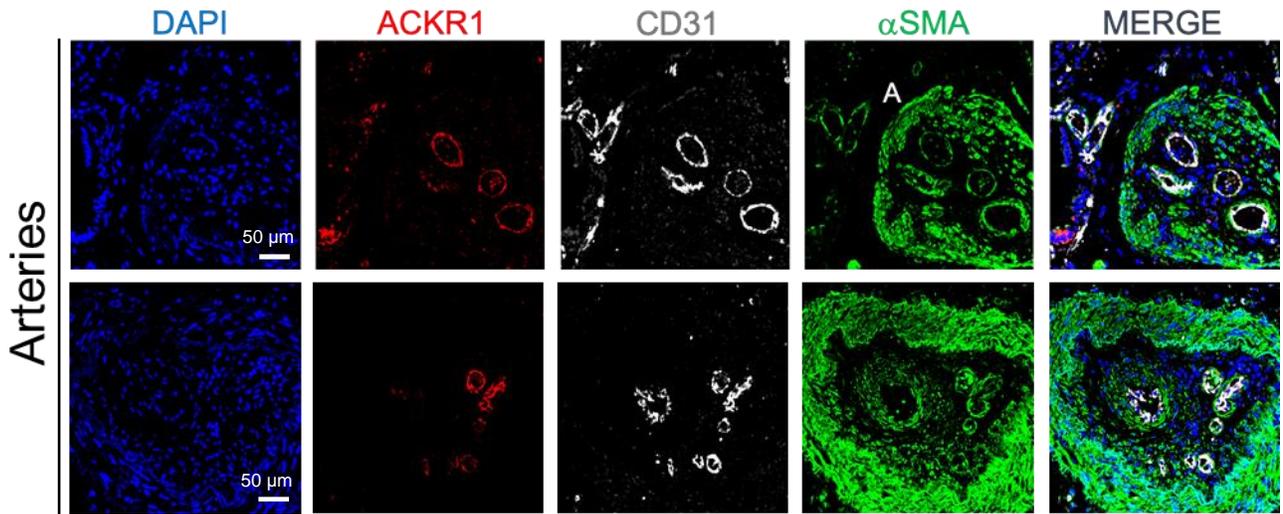


Supplementary Figure 6. GFP+ arterial and venous derived ECs express markers of gCap ECs. t-SNE plots shows the expression of different capillary EC marker genes in GFP+ arterial and venous derived ECs.

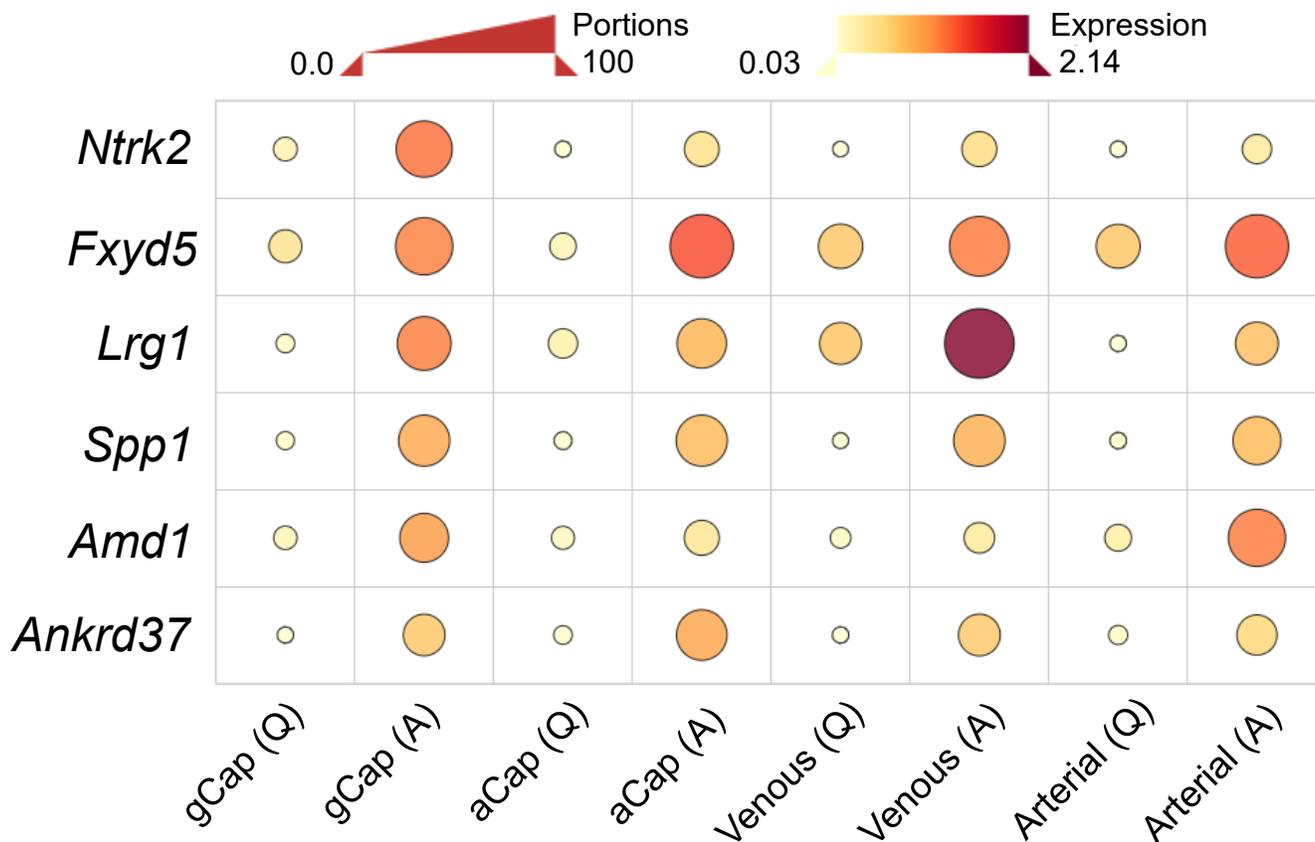
Comparison of Canonical pathways in post-injury ECs



Supplementary Figure 7. Ingenuity pathway analysis shows canonical pathways enriched in lung ECs from young and aged lungs at different timepoints. The same pathway that are deactivated in young lung ECs during the early phase of fibrosis resolution (day 35) post bleomycin challenge remained active in ECs from aged lungs with persistent fibrosis. Activation z-scores for dysregulated genes ($\text{Log}_2 \text{FC} \leq -0.1$ or ≥ 0.1 , P value < 0.05) and comparison analysis were generated in IPA software.



Supplementary Figure 8. Vascular abnormalities involving ACKR1+ venous ECs in IPF lungs. ACKR1+ CD31+ venous ECs were found in the fibrotic intima of numerous arteries (A). Medial thickening and α SMA+ cells within the thickened intima were also observed in these abnormal vessels.

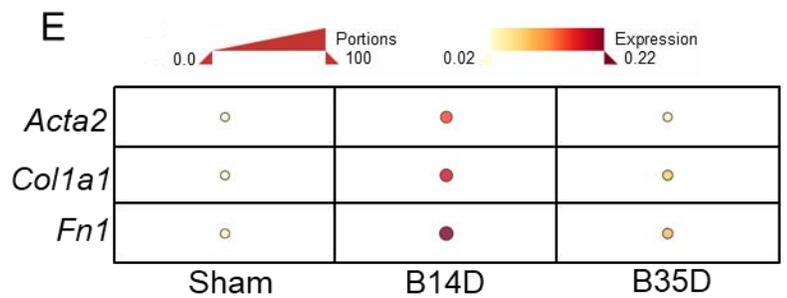
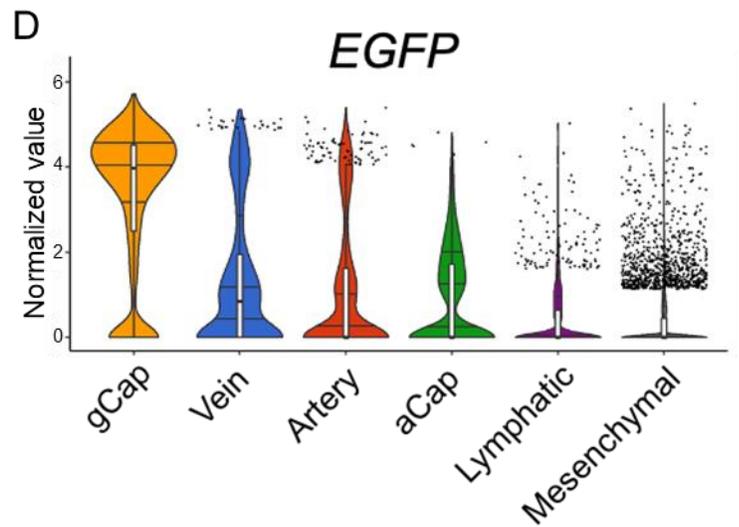
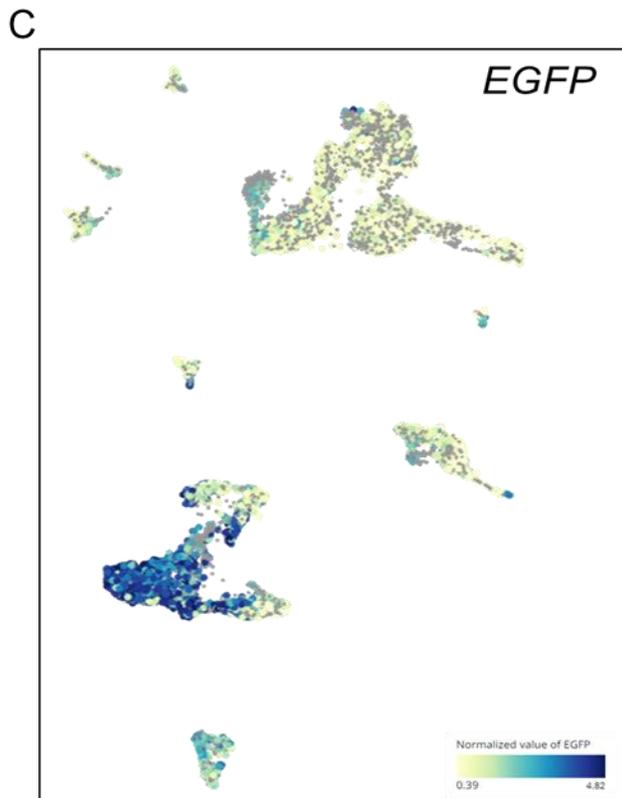
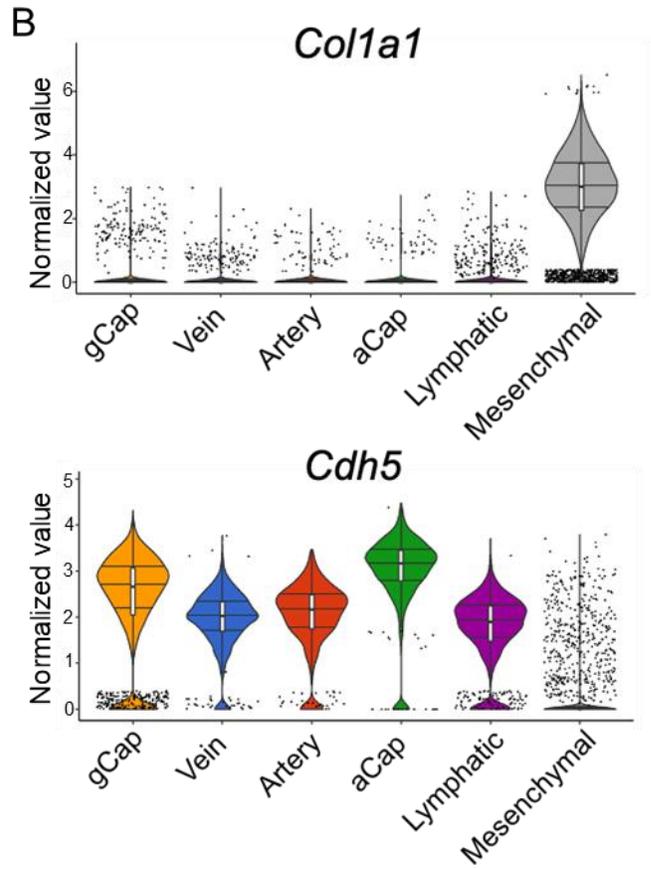
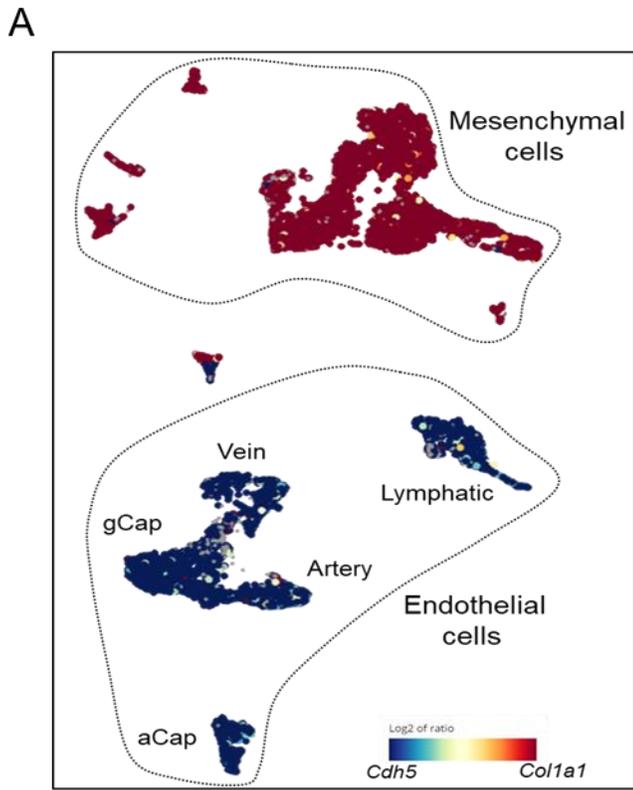


Supplementary Figure 9. *Ntrk2* is mainly expressed in gCap ECs in response to lung injury.

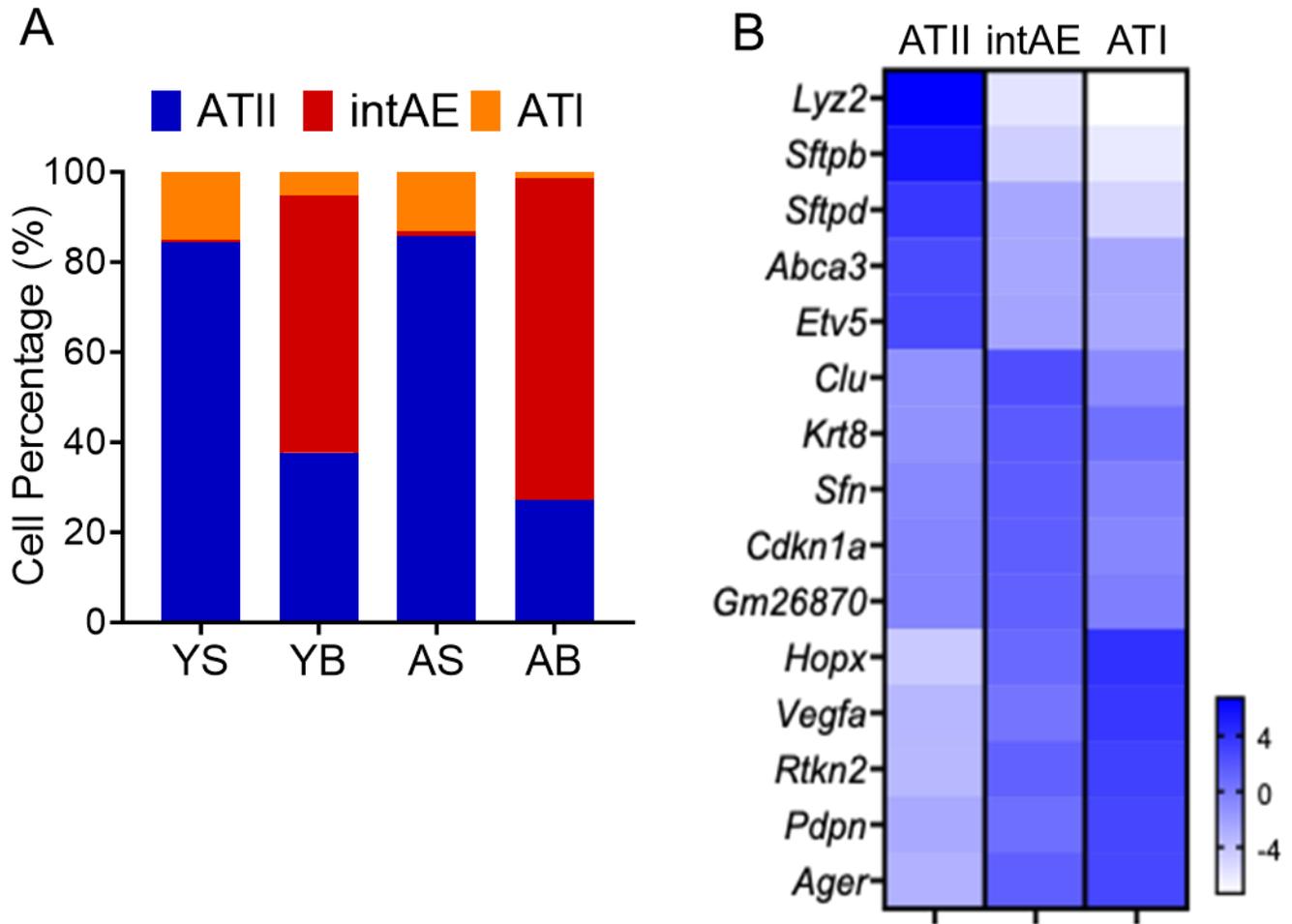
Dot plot showing differentially expressed activation marker genes in different EC subpopulations.

Dot size indicates the proportion of expressing cells, colored by standardized expression levels.

Quiescent (Q), activated (A). aCap (Q, $n = 1283$ cells), aCap (A, $n = 876$ cells), gCap (Q, $n = 10,256$ cells), gCap (A, $n = 8545$ cells), arterial (Q, $n = 331$ cells), arterial (A, $n = 231$ cells), venous (Q, $n = 959$ cells) and venous (A, $n = 1002$ cells).



Supplementary Figure 10. Capillary ECs do not acquire mesenchymal features during the progression of lung fibrosis. (A, B) UMAP and violins plot show the expression of *Col1a1* and *cdh5* in mesenchymal cells ($n = 10294$ cells) and ECs ($n = 8057$ cells) populations. (C,D) UMAP and violin plots shows the expression of *EGFP* in mesenchymal cells and ECs populations. (E) Dot plot showing the expression of *Acta2*, *Col1a1* and *Fn1* in gCap ECs in sham and injured lungs after 14 days (B14D), and 35 days (B35D) post bleomycin-induced lung injury. Dot size indicates the proportion of expressing cells, colored by standardized expression levels. Each box plot displays the median value as the center line, the upper and lower box boundaries at the first and third quartiles (25th and 75th percentiles), and the whiskers depict the minimum and maximum values.



Supplementary Figure 11. Composition and gene marker features of alveolar epithelial cells. (A) Percentage of alveolar epithelial subsets grouped by age and injury. **(B)** Heatmap showing the average expression level of marker genes across different alveolar epithelial cell clusters. Source data are provided as a Source Data file.

Supplementary Table 1. Human primer sequences for qPCR analysis.

Gene	Direction	Sequence (5'-3')
KIT	Forward	CGTTCTGCTCCTACTGCTTCG
	Reverse	CCCACGCGGACTATTAAGTCT
NTRK2	Forward	TCGTGGCATTTCGAGATTGG
	Reverse	TCGTCAGTTTGTTTCGGGTAAA
PLVAP	Forward	GCTGCTGGTATTACCTGCG
	Reverse	GCCATAGACCATGAAGAGCAC
TEK	Forward	TTAGCCAGCTTAGTTCTCTGTGG
	Reverse	AGCATCAGATACAAGAGGTAGGG
RPLP0	Forward	AGCCCAGAACACTGGTCTC
	Reverse	ACTCAGGATTTCAATGGTGCC