

Supporting Information

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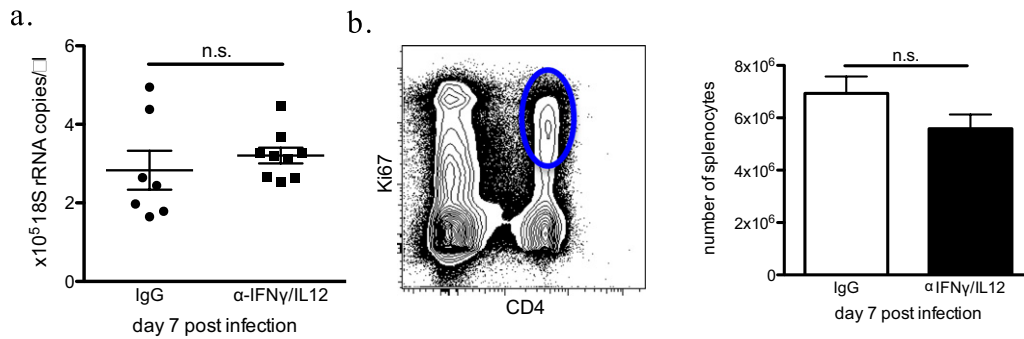


Fig. S1. Parasitemia and CD4 T-cell responses in anti-IFN- γ /IL-12- and control IgG-treated mice. (A) Control IgG- and anti-IFN- γ /IL-12-treated mice had comparable parasitemias as detected by quantitative PCR for *Plasmodium berghei* 18S rRNA copies. $n = 7-9$ animals per group. Data are shown as mean \pm SEM. (B) Proliferation was used as a surrogate for *P. berghei*-responsive CD4 T cells. *P. berghei* ANKA (PbA)-responsive CD4 T cells were identified as Ki67⁺, CD4⁺ cells (Left). The control IgG- and α IFN- γ /IL-12-treated mice had comparable numbers of PbA-responsive CD4 T cells (Right). Data are representative of two independent experiments and are shown as mean \pm SEM. $n = 4-5$ animals per group.

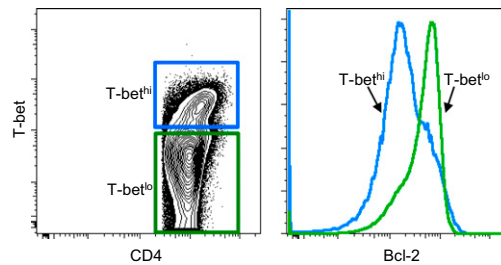


Fig. S2. Bcl-2 expression by CD4 T cells. The level of Bcl-2 was decreased in splenic CD4 T cells that express high versus low levels of T-bet on day 5 post PbA infection, as determined by flow cytometry.

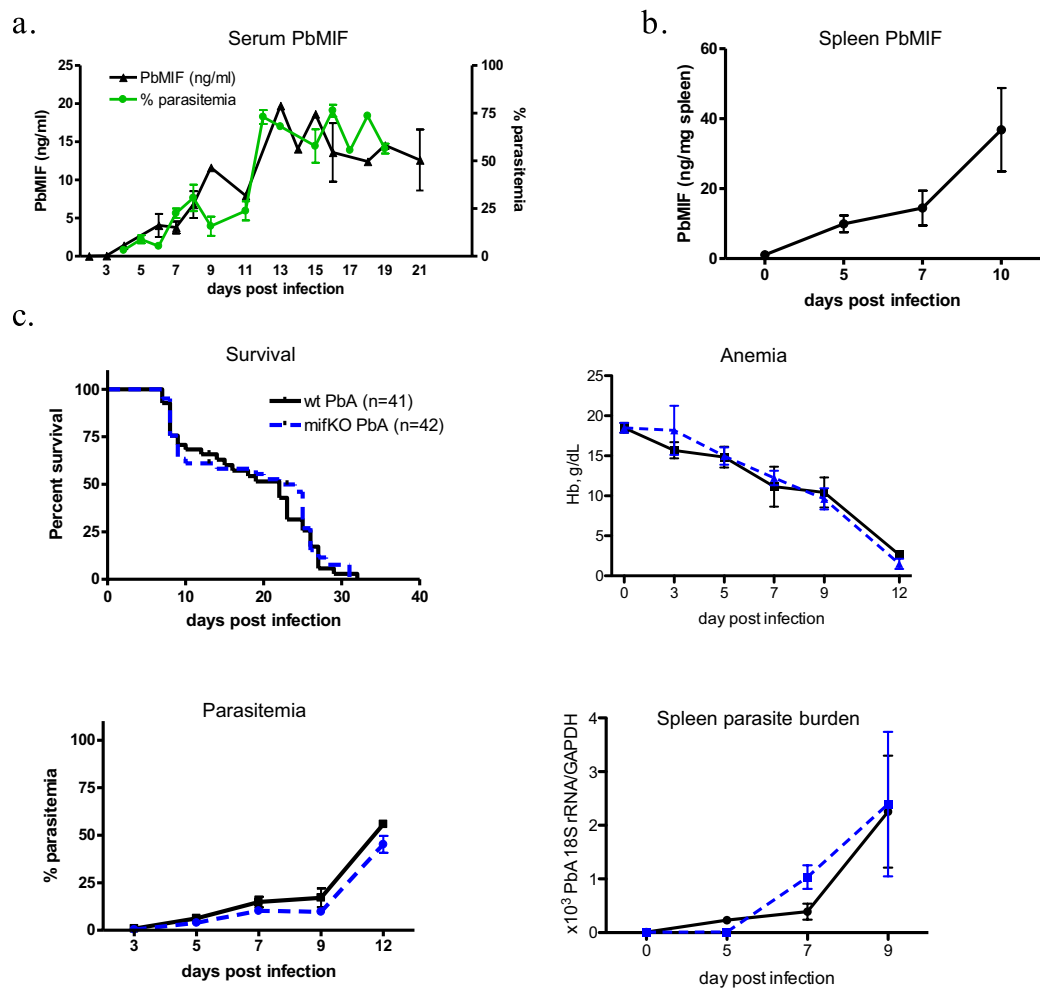


Fig. S3. Detection of *Plasmodium*-encoded macrophage migration inhibitory factor (PMIF) and clinical course of WT PbA and PbA with a genetic deletion in *P. berghei* macrophage migration inhibitory factor (*mif*KO PbA) infection. (A) Serum levels of PbMIF were measured by ELISA (black) and plotted with parasitemia (green), which was determined by counting at least 400 red blood cells (RBCs) on a thin blood smear. $n = 4$ mice per group. (B) PbMIF also was detected in spleen lysates by ELISA. $n = 4$ mice per group. (C) (Upper Left) Survival of BALB/c mice after i.p. injection of 10^6 WT PbA- or *mif*KO PbA-infected RBCs, $n = 41$ or 42 mice. (Upper Right) Anemia was assessed by measuring hemoglobin levels of mice infected with blood-stage WT PbA or *mif*KO PbA. At the indicated days post infection, 5 μ L tail vein blood was collected and diluted in Drabkin's solution, and optical density was determined. Data are representative of three independent experiments. $n = 4$ mice per group. (Lower Left) Peripheral blood parasitemia was measured by counting at least 400 RBCs on a thin blood smear to determine numbers of infected RBCs relative to total RBCs. (Lower Right) Spleen parasite burden was determined by real-time PCR analysis of the expression of PbA 18S rRNA relative to mouse GAPDH in spleen homogenates at indicated days post infection. Data are shown as mean \pm SEM and are representative of three independent experiments for anemia and blood and spleen parasitemia measurements. $n = 4$ mice per group.

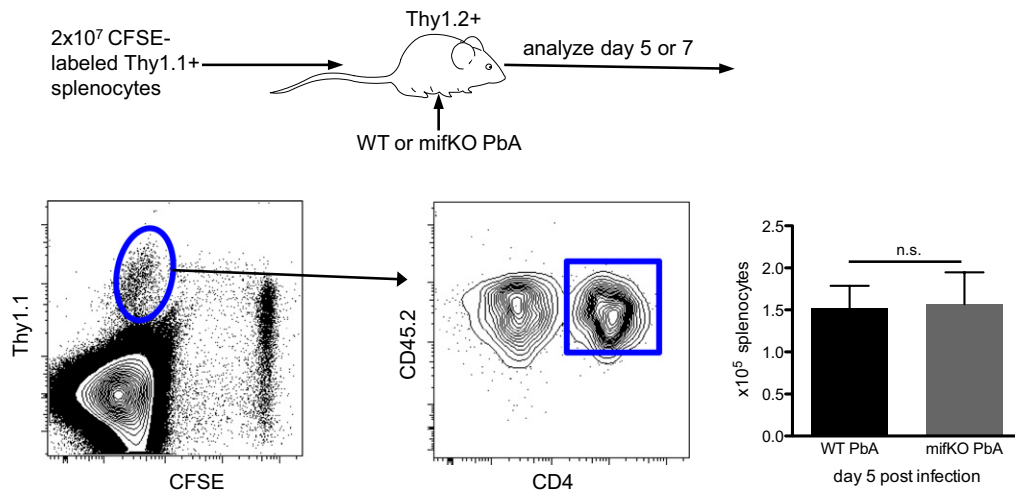


Fig. 54. Detecting PbA-responsive CD4 T cells during WT PbA or miKO PbA infection. Thy1.1⁺ BALB/c splenocytes (2×10^7) were labeled with 5 μ M carboxyfluorescein succinimidyl ester (CFSE) and transferred i.v. on the day of infection. PbA-responsive CD4 T cells were identified as CFSE^{lo}, Thy1.1⁺, CD4⁺ cells in intracellular cytokine-staining experiments during which splenocytes were cocultured ex vivo with antigen-presenting cells (APCs) and infected RBC lysates. The PbA-responsive CD4 T cells from the infected host were further identified as CD45.2⁺ (Left). At day 5 post infection, WT PbA- and mifKO PbA-infected mice had similar numbers of PbA-responsive CD4 T cells, identified here as CFSE^{lo}, Thy1.1⁺, CD4⁺ splenocytes (Right). Data are shown as mean \pm SEM and are representative of six independent experiments. $n = 3-5$ mice per group.

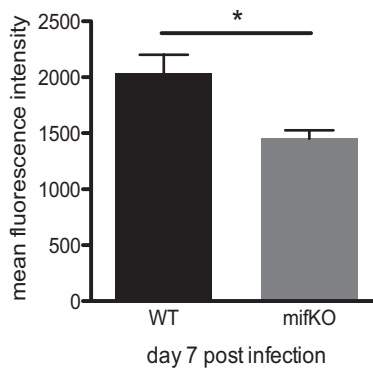


Fig. 55. Production of IFN- γ by CD4 T cells is increased in the presence of PMIF. IFN- γ production by malaria-responding CD4 T cells (CFSE^{lo}, Thy1.1⁺, CD4⁺) was increased at day 7 post infection in WT PbA- compared with mifKO PbA-infected mice, shown as mean fluorescence intensity. Data are representative of three independent experiments. $n = 4$ mice per group. * $P < 0.05$ by two-tailed t test.

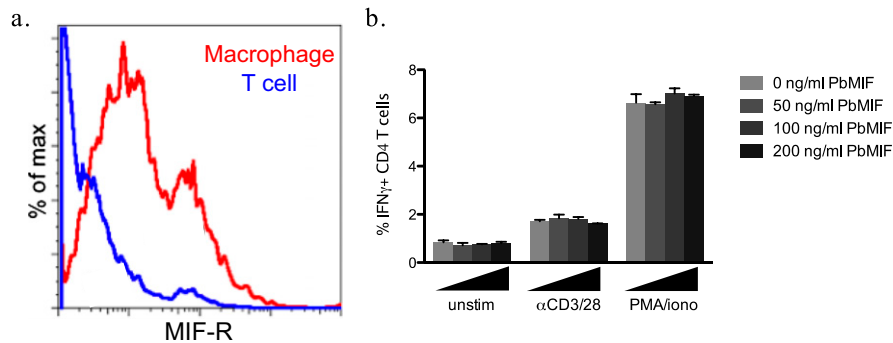


Fig. 56. PMIF signals through the host macrophage migration inhibitory factor receptor (MIF-R) on activated antigen presenting cells (APCs). (A) Expression of the MIF-R (also known as "CD74") on macrophages (F4/80⁺) compared with CD4⁺ T cells isolated from the spleen of naive BALB/c mice. (B) CD4 T cells from naive BALB/c mice were isolated by magnetic separation, and 10^6 CD4 T cells were cultured with increasing concentrations of PbMIF and no other stimulation (unstim), with a 1:1 ratio of anti-CD3/28 beads for 18 h (α CD3/28), or with 50 ng/mL phorbol 12-myristate 13-acetate and 1 μ g/mL ionomycin (PMA/iono) for 5 h. Brefeldin A (1 μ g/mL) was added to all conditions for the last 3 h, and IFN- γ production was detected by intracellular cytokine staining. Data are shown as mean \pm SEM.

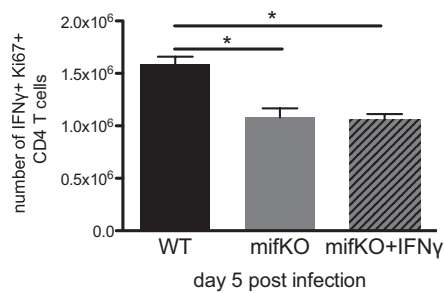


Fig. S9. Administration of IFN- γ does not alter IFN- γ production by responding CD4 T cells. Ten micrograms IFN- γ or PBS were injected i.p. on days 0, 2, and 4 post infection. Mice were killed on day 5 post infection, and intracellular cytokine staining for IFN- γ was performed after 3 h of ex vivo stimulation with PMA and ionomycin in the presence of Brefeldin A. Numbers of IFN- γ -producing Ki67⁺ CD4⁺ (PbA-responsive) splenocytes were determined. Data are shown as mean \pm SEM and are representative of two independent experiments. * $P < 0.05$ by two-tailed t test. $n = 4$ animals per group.