## **Supplemental Data**

## Activation of rapid estrogen signaling in aggressive human breast cancers

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## **Table of contents**

Figure S1: In Situ PLA detection of ER $\alpha$ /PI3K and ER $\alpha$ /Src interactions upon tamoxifen treatment

Figure S2: Detection of endogenous interactions between ERa/SRC3 and ERa/p300.

Figure S3: In Situ PLA detection of FAK/Src and FAK/ ERa interactions in MCF-7 cells

Figure S4: In situ PLA detection of endogenous ERa/PI3K and ERa/Src interactions in human breast cancer cell lines

Figure S5: Kaplan-Meier estimates of OS by ERa/Src expression groups.

Figure S6: Kaplan-Meier estimates of OS by ERa/PI3K expression groups

Figure S7: Kaplan-Meier estimates of patient's outcome for mERa/ERa expression groups.

Figure S8: Kaplan-Meier estimates of DFS by ERa/Src intensity groups

Table S1: Distribution of ERa/Src, ERa/PI3K and ERa/mERa data

Table S2: Distribution of clinical parameters according to groups of ERa/mERa expression

 Table S3: Sample description: Distribution of clinical parameters.



Figure S1: In Situ PLA detection of ERa/PI3K and ERa/Src interactions upon tamoxifen treatment. A. Estrogen-deprived MCF-7 cells were incubated with  $E_2$  (10<sup>-8</sup>M) or both  $E_2$  plus tamoxifen (5X10<sup>-6</sup>M) for 5 min. After fixation, *in situ* PLA for ERa/PI3K (panel a,b) and ERa/Src dimers (panel c,d) was performed with ERa-, Src-, and PI3K-specific antibodies. The nuclei were counterstained with DAPI (blue). B. Quantification of the number of signals per cell was performed by computer-assisted analysis as reported in the Materials and methods. The mean +/- s.e.m. of four experiments is shown. P-value was determined by Student's t-test.

ERα/SRC3





SRC3

p300

**Figure S2: Detection of endogenous interactions between ERa/SRC3 and ERa/p300.** PLA was performed on MCF-7 cells with two couples of antibodies: ERa/SRC3 (panel a) and ERa/p300 (panel b). Control experiments were performed using only one primary antibody: anti-SRC3 (panel c) or anti-p300 (panel d). The nuclei were counterstained with DAPI (blue).



Fak/Src

Fak/ERα



**Figure S3: In Situ PLA detection of FAK/Src and FAK/ ERa interactions in MCF-7 cells A**. Estrogen-deprived MCF-7 cells were incubated with  $E_2 10^{-8}$ M for 5 min. After fixation, *in situ* PLA for FAK/Src (panel a) and FAK/ERa dimers (panel b) was performed with indicated antibodies. **B.** Quantification of the number of signals was performed as described previously. The mean +/- s.e.m. of four experiments is shown. P-value was determined by Student's t-test.





Figure S4



**Figure S4: In situ PLA detection of endogenous ERα/PI3K and ERα/Src interactions in human breast cancer cell lines. A**. *In situ* PLA of ERα/PI3K and ERα/Src interactions were performed in several human breast tumor cell lines. CLB-SAV (panels a,b); ZR75-1 (panels c,d); Cama-1 (panels e,f); MDA-MB-231 (panels g,h). **B.** Quantification of the number of signals was performed as described previously. The mean +/- s.e.m. of four experiments is shown. P-value was determined by Student's t-test. For PI3K/ERα : \*1 p=0,0006 (CLB-Sav vs MDA-MB-231), p=0,0001 (ZR-75.1 vs MDA-MB-231), \*3 p=1,6.10<sup>-5</sup> (CLB-Sav vs Cama-1), p=0,0005 (ZR-75.1 vs Cama-1). For Src/ERα : \*2 p=0,004 (CLB-Sav vs MDA-MB-231), p=0,0002 (ZR-75.1 vs MDA-MB-231), \*4 p=0,004 (CLB-Sav vs Cama-1), p=0,0002 (ZR-75.1 vs Cama-1) **C.** Lysates of CLB-SAV, MDA-MB-231, ZR75-1 and Cama-1 cells were analyzed by western blot for ERα expression. **D.** Cells lysates were immunoprecipitated with anti-mERα and blotted with anti-ERα.



**Figure S5: Kaplan-Meier estimates of OS by ERa/Src expression groups.** Global population (with a cut off at 4 spots per cell).



**Figure S6: Kaplan-Meier estimates of OS by ERa/PI3K expression groups.** Global population (with a cut off at 7 spots per cell).



**Figure S7: Kaplan-Meier estimates of patient's outcome for mERa/ERa expression groups**. Global population (with a cut off at 3 spots per cell) for DFS (A) and for OS (B).



**Figure S8: Kaplan-Meier estimates of DFS by ERα/Src intensity groups**. A) Global population (with a cut off at 0 versus 1, 2). B) ERα -positive cases. C) ERα -negative cases.

Duolink counting (dots/cell)	Src/ERa		PI3K/ERα		mERa/ERa	
	N	%	N	%	N	%
0	4	2.3	10	5.7	14	8.0
1	27	15.4	17	9.7	26	14.9
2	9	5.1	4	2.3	16	9.1
3	16	9.1	16	9.1	20	11.4
4	23	13.1	18	10.3	25	14.3
5	22	12.6	26	14.9	26	14.9
6	17	9.7	18	10.3	11	6.3
7	15	8.6	16	9.1	15	8.6
8	18	10.3	12	6.9	10	5.7
9	9	5.1	12	6.9	3	1.7
10	5	2.9	6	3.4	3	1.7
11	5	2.9	8	4.6	2	1.1
12	1	0.6	2	1.1	1	0.6
13	2	1.1	3	1.7	0	
14	0		2	1.1	1	0.6
15	0		1	0.6	0	
16	0		1	0.6	1	0.6
17	0		1	0.6	0	
18	0		1	0.6	1	0.6
19	1	0.6	0		0	
21	1	0.6	0		0	
26	0		1	0.6	0	

**Table S1: Distribution of ERα/Src, ERα/PI3K and ERα/mERα data.** This table shows the distribution of the number of dots/cell cfor each couple in the 175 breast tumors.

Clinical parameters					
	0-3 N=76		>3 N=99		Tost
					TEST
	N	%	N	%	
Age at diagnosis (years)					Chi-2
< 50 and	10	22.7	20	20.4	P = 0.039
< 50  ans		23.7	38	38.4	
	58	70.3	01	01.0	
ND	2		1		P = 0.044
No	20	27.0		<i>4</i> 1 8	F - 0.044
Yes	54	73.0	57	58.2	
Tumour size (mm)	54	73.0	57	50.2	Chi-2
< 20 mm	30	39 5	40	40.4	P = 0.901
>= 20 mm	46	60.5	59	-0 59.6	
Histological grade (SBR)	10	00.5			Chi-2
1	18	23.7	14	14 1	P = 0.030
2	23	30.3	49	49 5	
3	35	46.1	36	36.4	
Lymph node involvement					
NO	29	38.2	47	47.5	P = 0.347
Micro metastasis	9	11.8	7	7.1	
Macro metastasis	38	50.0	45	45.5	
Lympho-vascular invasion					Chi-2
Yes	35	46.1	45	45.5	P = 0.937
No	41	53.9	54	54.5	
Estrogen receptor : %					Chi-2
marked cells					P = 0.022
ND	1		0		
< 10%	24	32.0	17	17.2	
>= 10%	51	68.0	82	82.8	
Progesterone receptor : %					Chi-2
marked cells					P = 0.584
ND	1		0		
< 10%	28	37.3	33	33.3	
>= 10%	47	62.7	66	66.7	
HER2 status					Chi-2
ND	7		3		P = 0.174
0/+/++FISH-	62	89.9	79	82.3	
++FISH+/+++	7	10.1	17	17.7	

Table S2: Distribution of clinical parameters according to groups of ERa/mERa expression. Clinical parameters (age at diagnosis, tumor size, menopausal status, lymph node involvement, SBR grading and hormonal expression) were analyzed for the 175 patients included in the TMA study. Association between clinical characteristics and the level of ERa/mERa interaction was determined using  $\chi^2$  test or Fisher's exact test.

Clinical Parameters	All	
	N=175	
Age at diagnosis (years)		
< 50	56	(32.0%)
>=50	119	(68.0%)
Menopause		
ND	3	
No	61	(35.5%)
Yes	111	(64.5%)
Tumor size (mm)		
< 20 mm	70	(40.0%)
>= 20 mm	105	(60.0%)
Histological grade (SBR)		
1	32	(18.3%)
2	72	(41.1%)
3	71	(40.6%)
Lymph node involvement		
NO	76	(43.4%)
Micro metastasis	16	(9.1%)
Macro metastasis	83	(47.4%)
Lympho-vascular invasion		
Yes	80	(45.7%)
No	95	(54.3%)
Estrogen receptor : % marked cells		
ND	1	
< 10%	41	(23.6%)
>= 10%	133	(76.4%)
Progesterone receptor : % marked cells		(1011)0
ND	1	
< 10%	61	(35.1%)
>= 10%	113	(64.9%)
HER2 status		(2.1070)
ND	10	
0/+/++FISH-	141	(85.5%)
++FISH+/+++	24	(14.5%)

## Table S3: Sample description: Distribution of clinical parameters.

Clinical parameters (age at diagnosis, tumor size, menopausal status, lymph node involvement, SBR grading and hormonal expression) were analyzed for the 175 patients included in the TMA study with a cut off at 3 dots/cell.