

## **Supplemental Material to:**

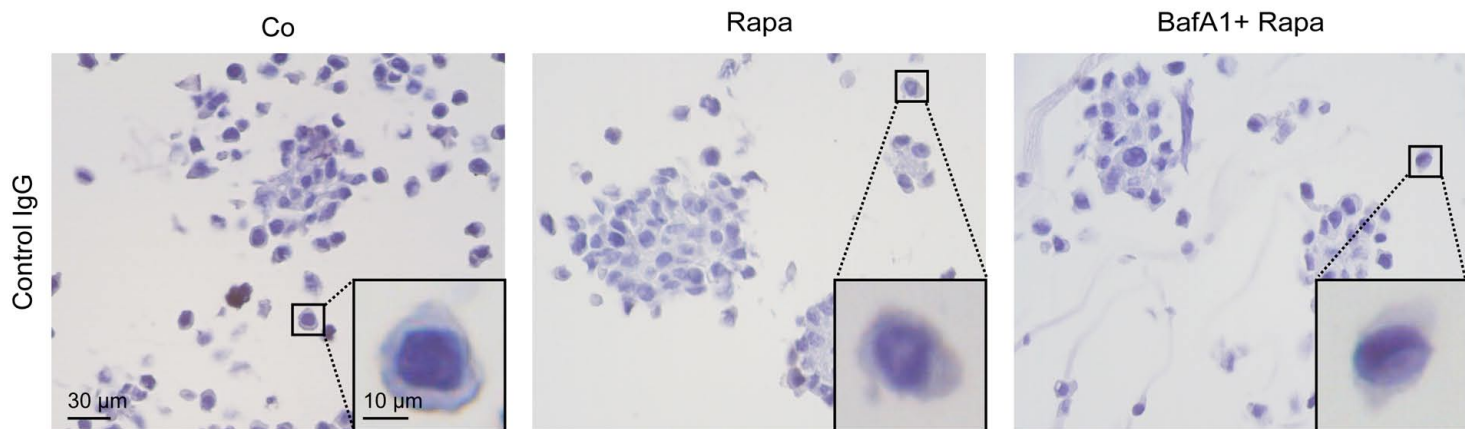
**Sylvain Ladoire, Kariman Chaba, Isabelle Martins,  
Abdul Qader Sukkurwala, Sandy Adjemian,  
Mickaël Michaud, Vichnou Poirier-Colame,  
Felipe Andreiuolo, Lorenzo Galluzzi, Eileen White,  
Mathias Rosenfeldt, Kevin M. Ryan, Laurence Zitvogel  
and Guido Kroemer**

**Immunohistochemical detection of cytoplasmic LC3  
puncta in human cancer specimens**

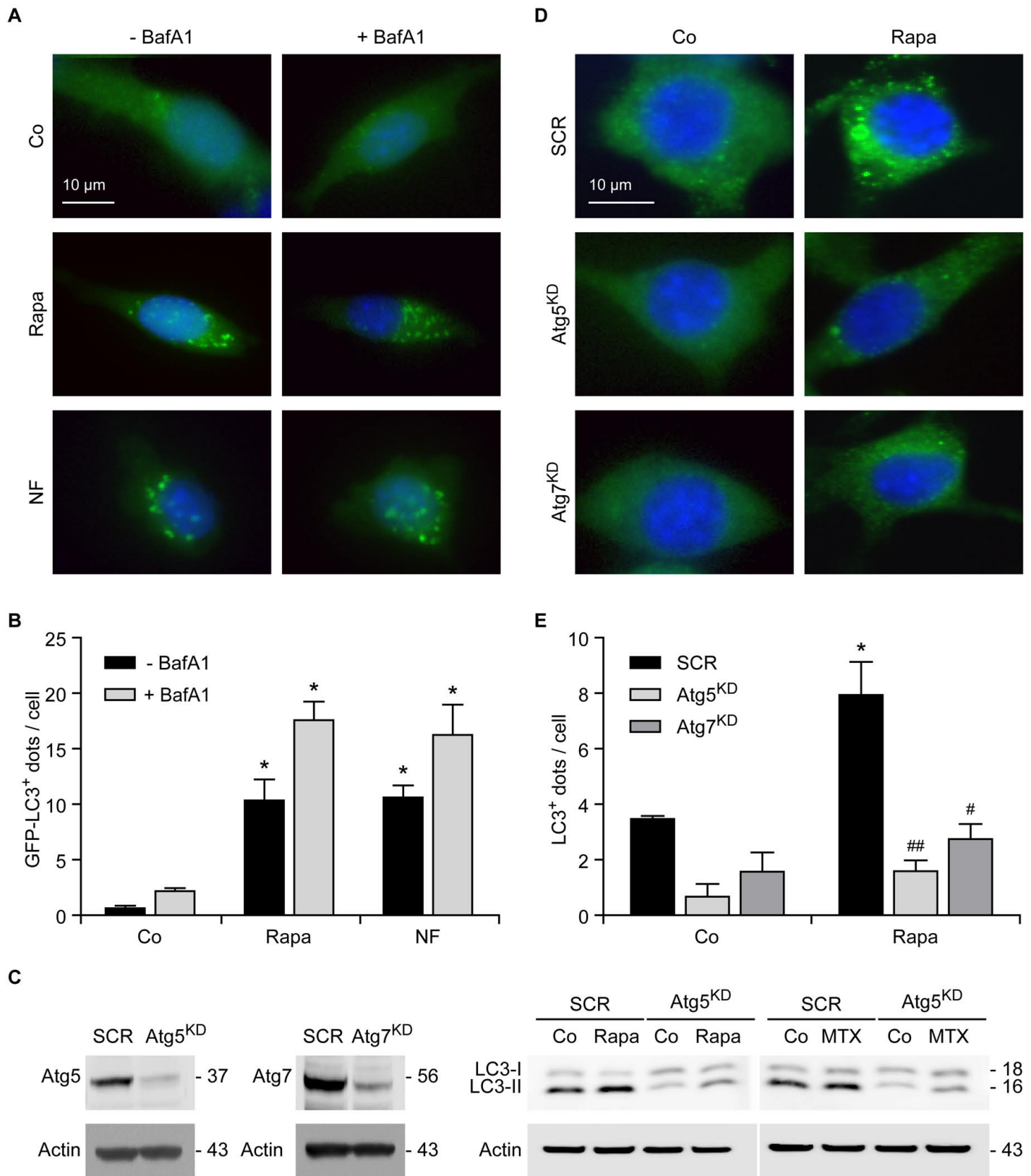
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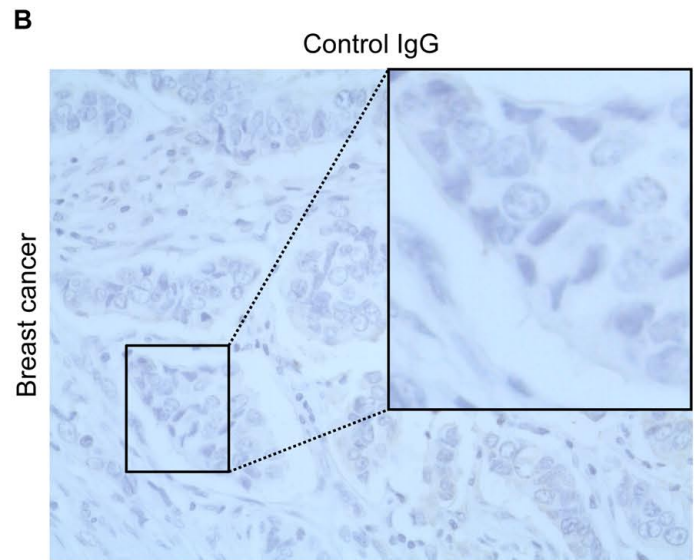
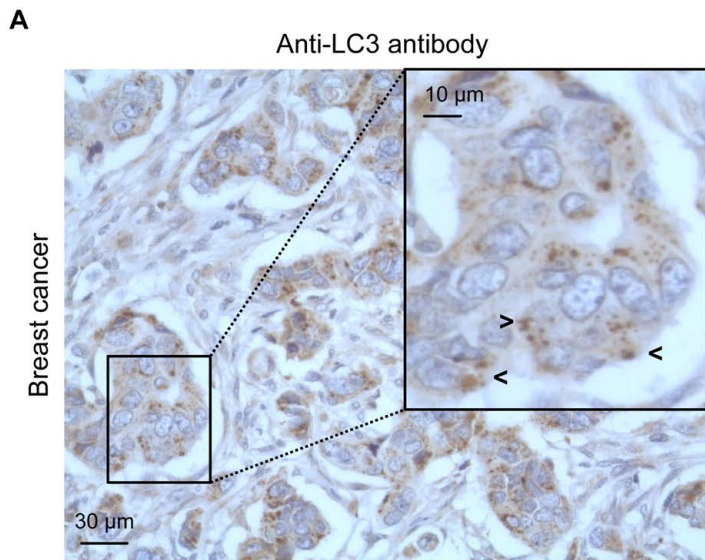
**[www.landesbioscience.com/journals/autophagy/article/20353](http://www.landesbioscience.com/journals/autophagy/article/20353)**



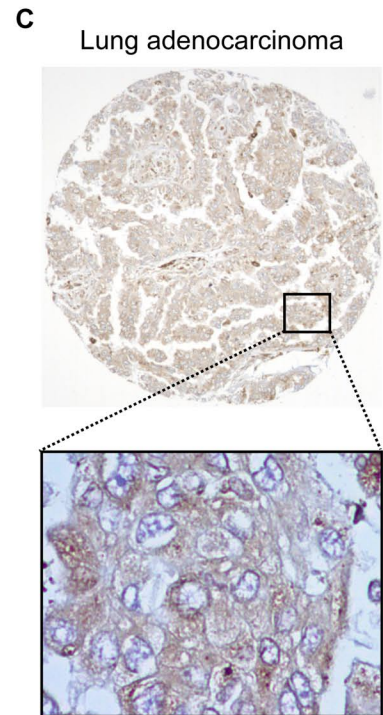
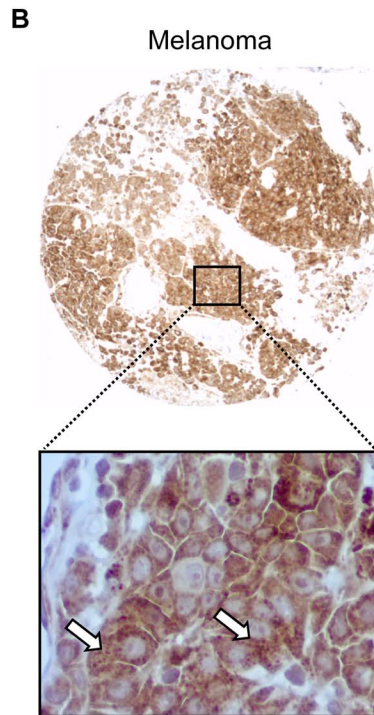
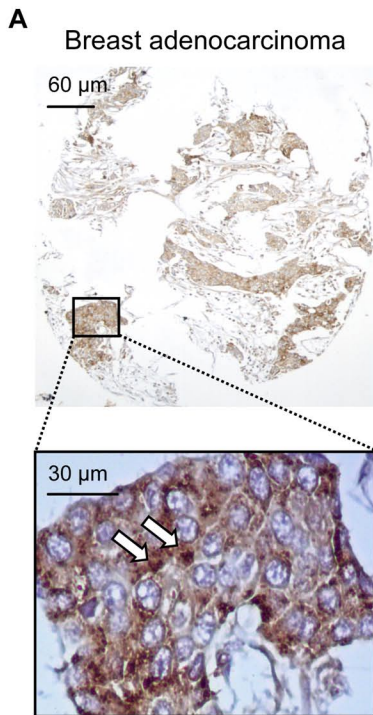
**Suppl. Figure 1**



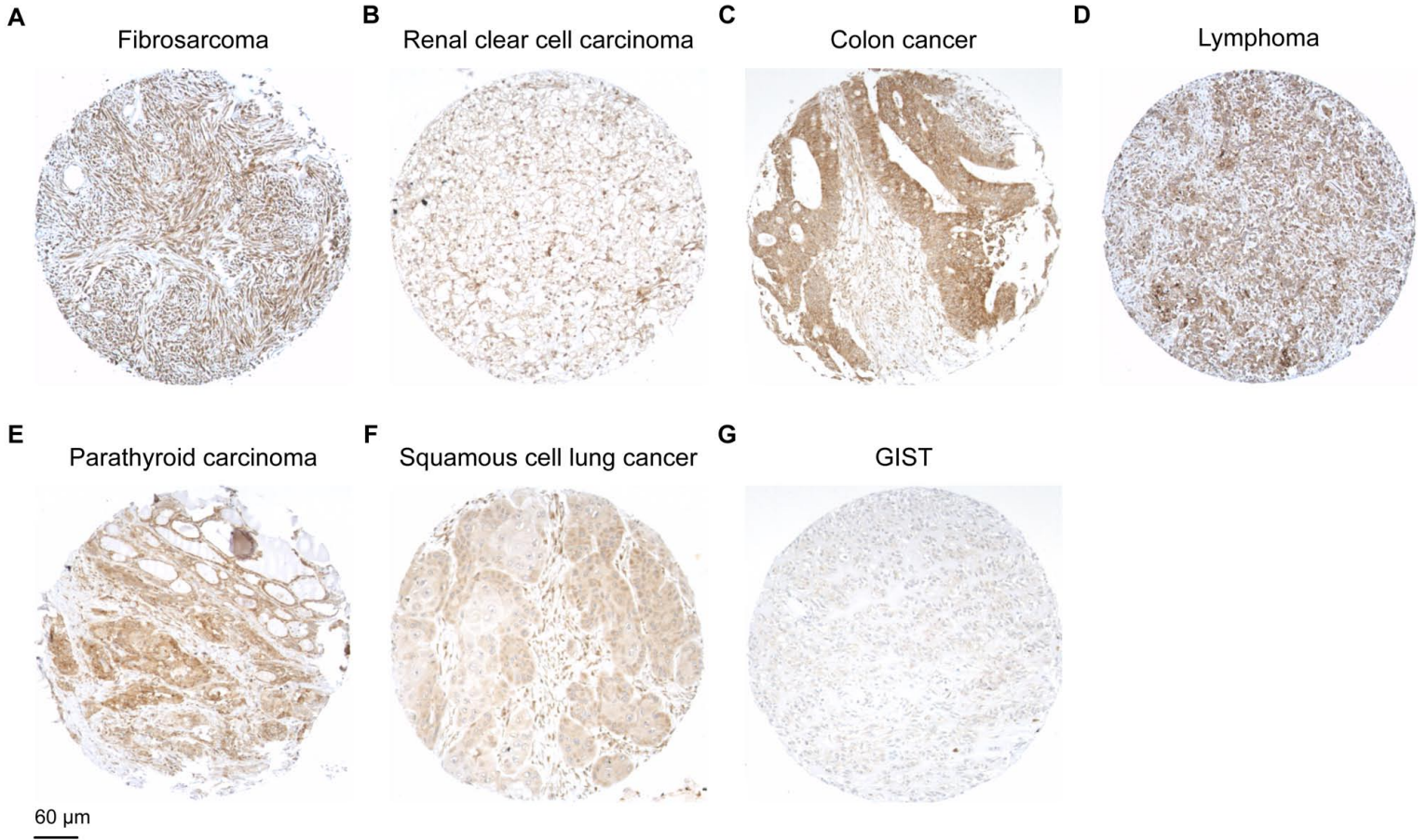
Suppl. Figure 2



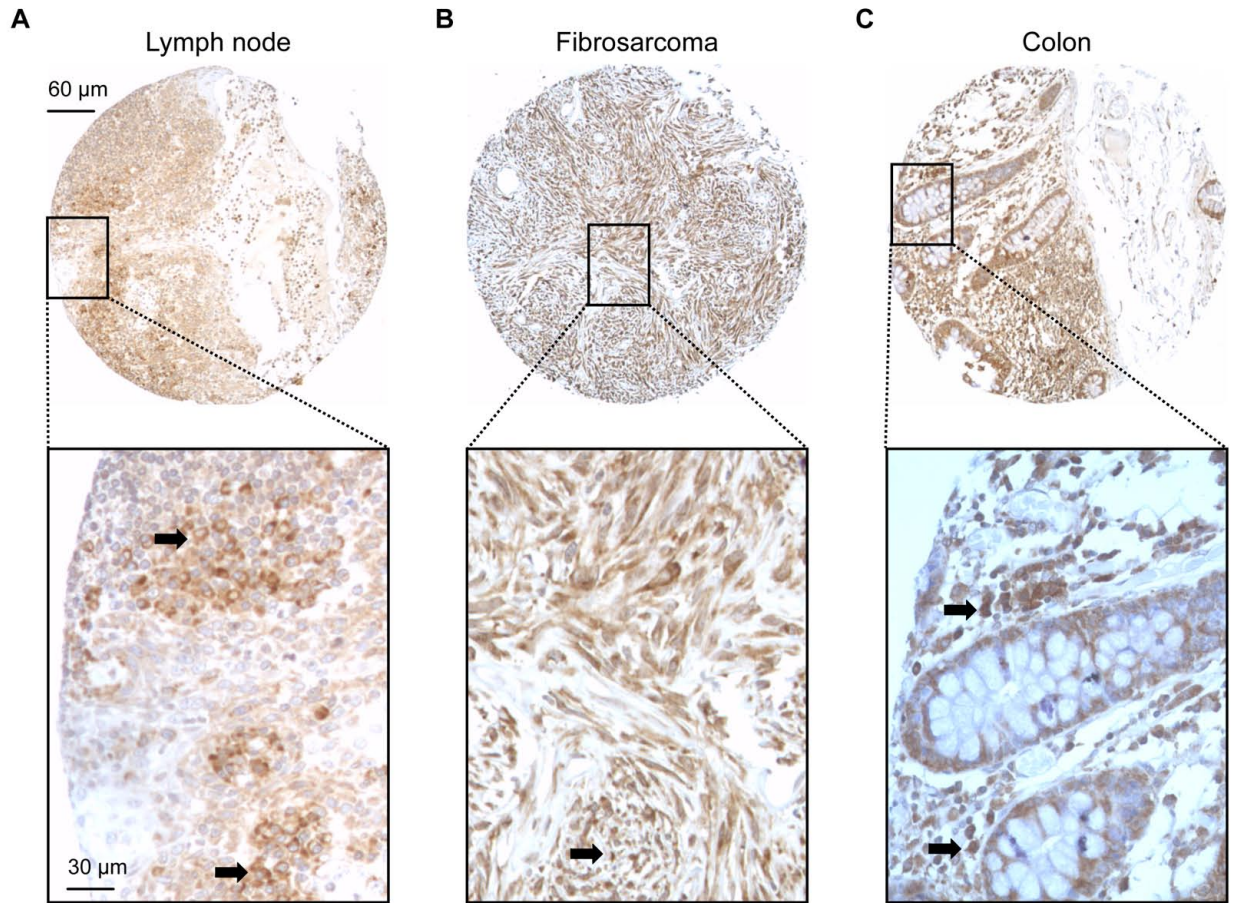
**Suppl. Figure 3**



**Suppl. Figure 4**



**Suppl. Figure 5**



**Suppl. Figure 6**

## Legends to Supplemental Figures

**Supplemental Figure 1. Specificity of LC3 detection by immunohistochemistry in cell pellets.** Mouse colon carcinoma CT26 cells were left untreated (Co) or treated with 10  $\mu$ M rapamycin (Rapa), either in the absence or in the presence of 1  $\mu$ g/mL bafilomycin A1 (BafA1), for 8 h. Thereafter, cells were processed for the immunohistochemical detection of LC3, upon replacement of the LC3-specific antibody with an isotype matched unspecific IgG. Representative images are provided. Scale bars = 10 or 30  $\mu$ m, as indicated.

**Supplemental Figure 2. (Immuno)fluorescence microscopy-assisted detection of LC3 in autophagy-proficient and autophagy-deficient cancer cells. A,B.** Murine colon carcinoma CT26 cells stably expressing a GFP-LC3 fusion protein were left untreated (Co), treated with 10  $\mu$ M rapamycin (Rapa) or maintained in nutrient-free (NF) conditions, in the absence or in the presence of 1  $\mu$ g/mL bafilomycin A1 (BafA1) for the indicated time. Thereafter, cells were fixed and analyzed for the presence of GFP-LC3<sup>+</sup> cytoplasmic dots. **C-E.** Alternatively, CT26 cells expressing a control shRNA (SCR cells) as well as cells expressing Atg5- (Atg5<sup>KD</sup>) or Atg7-specific (Atg7<sup>KD</sup>) shRNAs were kept in control conditions or treated with 10  $\mu$ M rapamycin or 4  $\mu$ M mitoxantrone (MTX) for 8 h. Thereafter, cells were processed for the immunoblotting-assisted detection of Atg5, Atg7 and LC3 (**C**), or for the immunofluorescence-based quantification of the LC3-I $\rightarrow$ LC3-II conversion (**D,E**). Representative images (**A,C,D**) and quantitative data (**B,E**) are shown. Scale bar = 10  $\mu$ m. In **B** and **E**, columns report the number of GFP-LC3<sup>+</sup> or LC3<sup>+</sup> cytoplasmic dots/cell, respectively. Data are presented as means  $\pm$  SEM (n = 3; \* =  $p < 0.05$ , Student's *t* test, compared to WT or SCR cells maintained in control conditions; # =  $p < 0.05$ , ## =  $p < 0.001$ , Student's *t* test, as compared to WT or SCR cells treated with the same autophagic trigger in



the absence of BafA1). In **C**, actin levels were monitored to ensure equal loading of lanes, and molecular weights are reported.

**Supplemental Figure 3. Specificity of LC3 detection by immunohistochemistry in human tissue sections.** **A,B.** Breast adenocarcinoma tissue sections were subjected to the immunohistochemical detection of LC3, either in standard conditions (**A**) or upon replacement of the LC3-specific antibody with an isotype matched unspecific IgG (**B**). Representative images are provided. Scale bars = 10 or 30  $\mu\text{m}$ , as indicated. Arrowheads depict LC3<sup>+</sup> dots.

**Supplemental Figure 4. Patterns of LC3 expression in human tumors contained in tissue microarrays.** **A-C.** Tissue microarrays encompassing distinct neoplastic tissues were stained for the immunohistochemical detection of LC3, as detailed in Materials and Methods. Representative staining patterns are reported: LC3 puncta (white arrows) in breast adenocarcinoma (**A**) and melanoma (**B**), diffuse cytoplasmic distribution of LC3 in lung adenocarcinoma (**C**). Scale bars = 30 or 60  $\mu\text{m}$ , as indicated.

**Supplemental Figure 5. LC3 staining performed on different tumor types contained in a tissue microarray.** **A**, fibrosarcoma; **B**, renal clear cell carcinoma; **C**, colon cancer; **D**, lymphoma; **E**, parathyroid carcinoma; **F**, squamous cell lung cancer; **G**, gastrointestinal stromal tumor (GIST). Scale bars = 60  $\mu\text{m}$ .

**Supplemental Figure 6 LC3 staining of immune cells.** **A.** Strongly LC3-positive immune cells (black arrows) in a normal lymph node. **B.** Stromal immune cells (black arrow) in the proximity of fibrosarcoma cells. **C.** Immune cells (black arrows) close to non-malignant colon epithelial cells. Scale bars = 30 or 60  $\mu\text{m}$ , as indicated.

**Supplemental Table 1. LC3 staining patterns of 49 different samples included in a tissue microarray.**

<b>Tissue Origin</b>	<b>Diffuse weak cytoplasmic</b>	<b>Diffuse strong cytoplasmic</b>	<b>Diffuse strong cytoplasmic + puncta</b>
<i>Malignant tissues</i>			
Breast adenocarcinoma 1			
Breast adenocarcinoma 2			40%
Breast adenocarcinoma 3			
Colon adenocarcinoma			50%
Fibrosarcoma			80%
GIST			
Glioblastoma 1			
Glioblastoma 2			30%
Glioblastoma 3			50%
Hepatocellular carcinoma			100%
Lung adenocarcinoma 1			
Lung adenocarcinoma 2			50%
Lung adenocarcinoma 3			
Lung squamous cell carcinoma			
Lymphoma			50%
Medulloblastoma 1			100%
Medulloblastoma 2			
Medulloblastoma 3			80%
Melanoma			90%
Meningioma 1			
Meningioma 2			
Meningioma 3			
Oligodendroglioma 1			50%
Oligodendroglioma 2			30%
Oligodendroglioma 3			
Parathyroid carcinoma 1			
Parathyroid carcinoma 2			
Parathyroid carcinoma 3			30%
Prostate adenocarcinoma			
Renal clear cell carcinoma			
Testicular seminoma			

*Normal tissues*

Cerebellum 1		
Cerebellum 2		
Cerebral cortex		30%
Cerebral cortex		30%
Cerebral white matter 1		
Cerebral white matter 2		
Colon		
Hippocampus 1		
Hippocampus 2		50%
Kidney		
Liver 1		
Liver 2		
Liver 3		
Lung		
Lymph node 1		
Lymph node 2		
Placenta		
Skin		
Thyroid		

The % of cells exhibiting LC3<sup>+</sup> cytoplasmic dots is reported.