Supporting Information

Image-Guided Radiotherapy Targets Macromolecules through Altering the Tumor Microenvironment

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Supplementary Figure 1. Radiation and perivascular apoptosis. Immunohistochemistry of tissue sections of MCF7^{GFP-IBD} xenograft tumors excised 3 days after irradiation to detect cleaved caspase 3 (brown) displays no marked increase in apoptosis. Scale bar = $200 \mu m$.



Supplementary Figure 2. VEGFR-2 antibody depletes the tumor endothelium to the detriment of the radiation-enhanced delivery effect. (A) Immunohistochemistry of $MCF7^{GFP-IBD}$ xenograft tumors depicting the decrease in endothelium (CD31, brown), pericytes (α -SMA, brown), and basal lamina (Collagen IV, brown) following treatment with VEGFR-2 antibody. Purple = hematoxylin, nuclei. Scale bar = 200 µm. (**B**)

Relative quantification of IHC staining in MCF7^{GFP-IBD} tumor sections. % area denotes the area of an image stained calculated using an ImageJ macro (details in methods). * $p \le 0.05$ relative to no treatment control, # $p \le 0.05$ relative to 5 Gy only, ^ $p \le 0.05$ relative to VEGFR-2 antibody only, n = 3. (C) MCF7^{GFP-IBD} tumor retention of AngioSense, measured using IVIS fluorescence quantification, appears limited by the stromal changes apparent following VEGFR-2 treatment. AngioSense was administered 3 days after IR. * $p \le 0.05$ relative to no treatment control at the same time point, n = 3.



Supplementary Figure 3. Imatinib mesylate treatment leads to depletion of pericytes but does not act synergistically with IR to improve radiation-enhanced accumulation. (A) Immunohistochemistry of MCF7^{GFP-IBD} xenograft tumors depicting the decrease in endothelium (CD31, brown), pericytes (α -SMA, brown), and basal lamina (Collagen IV, brown) following imatinib mesylate treatment. Purple = hematoxylin, nuclei. Scale bar

= 200 µm. (**B**) Relative quantification of IHC staining in MCF7^{GFP-IBD} tumor sections. % area denotes the area of an image stained calculated using an ImageJ macro (details in methods). * $p \le 0.05$ relative to no treatment control, # $p \le 0.05$ relative to 5 Gy only, n = 3. (**C**) MCF7^{GFP-IBD} tumor retention of AngioSense, measured using IVIS fluorescence quantification, is increased following treatment with imatinib mesylate alone, but not in conjunction with 5 Gy IR. AngioSense was administered 3 days after IR. * $p \le 0.05$ relative to no treatment control, # $p \le 0.05$ relative to 5 Gy only, ^ $p \le 0.05$ relative to imatinib mesylate only, at the same time point, n = 5.



Supplementary Figure 4. Preferential retention of Doxil in irradiated areas of tumors compared to other tissues. (A) MCF7^{GFP-IBD} tumors (prior to Doxil injection, left panel), half irradiated in order to use the unirradiated half as a control, were administered Doxil (10mg/kg) with radiation-enhanced delivery leading to greater drug distribution in the 15 Gy-treated half (right panel). (B) Tissue retention of Doxil 26 days after i.v. administration in BALB/c female mice with TUBO hindlimb tumors. Doxil (10 mg/kg) was administered three days following tumor irradiation. n = 2 for each data set.