Defective CFTR- β-catenin interaction promotes NF-κB nuclear translocation and intestinal inflammation in cystic fibrosis

Supplementary Materials



Supplementary Figure S1: Fluorescent immunostaining of α -SMA shows significant increase of the thickness of smooth muscle layer in Δ F508 mouse intestine. Green color: α -SMA (anti-alpha smooth muscle actin, 1:100, ab5694, Abcam); blue color: DAPI; scale bar: 50 µm).



Supplementary Figure S2: (A) CFTR is endogenously expressed in Caco-2 cells. upper panel: western blot of CFTR and tubulin in Caco-2 cells; lower panel: RT-PCR results show CFTR mRNA expression in Caco-2 cells. (B) Western blot shows CFTR knock down by transfection of shRNA in Caco-2 cells. Quantification data was resulted from three independent experiments (C) RT-PCR results show increased mRNA levels of IL6, IL8 and IL18 in Caco-2 cells with CFTR knockdown.



Supplementary Figure S3: (A) Upper panel: western blot shows down regulation of β -catenin, active- β -catenin and Axin2 in Caco-2 cells after CFTR knockdown. Lower panel: bar chart shows semi-quantitative analysis of western results of β -catenin, active- β -catenin and Axin2 in CFTR knock down Caco-2 cells. (B) LiCl treatment reverses the increase of NF κ B p65 nucleus translocation in DF508 mouse intestine. WT or DF508 mice are treated with LiCl (200 mg/kg/day) for 9 days. Nucleus fraction of mouse small intestine is extracted. Western blot shows increased NF κ B p65 nucleus translocation in DF508 mouse intestine, which can be reversed by LiCl treatment.



Supplementary Figure S4: (A) Immunofluorescence staining of β-catenin and NF-κB in WT and Δ F508*cftr^{-/-}* mouse small intestine, scale bar = 10 μM (B) β-catenin interacts with NF-κB in WT but not Δ F508*cftr^{-/-}* mouse intestine. Squared area captured at A is enlarged in B. scale bar: 5 μm.



Supplementary Figure S5: The expression of phospho-p65 (Ser 536) in control and CFTR knockdown cells.

Supplementary Table S1: Primer lists

| Name | sequence | product |
|---------|-------------------------------|---------|
| CFTR_F | GTGTGATTCCACCTTCTCCAA | 149 bp |
| CFTR_R | GCCTGGCACCATTAAAGAAA | 149bp |
| COX2_F | CCCTTGGGTGTCAAAGGTAA | 143 bp |
| COX2_R | AACTGATGCGTGAAGTGCTG | 143 bp |
| TNFa_F | TCAGCCTCTTCTCCTTCCTG | 124 bp |
| TNFa_R | GCCAGAGGGCTGATTAGAGA | 124 bp |
| IL6_F | TTCAATGAGGAGACTTGCCTG | 349 bp |
| IL6_R | ACAACAACAATCTGAGGTGCC | 349 bp |
| IL8_F | TCT CTT GGC AGC CTT CCT G | 331 bp |
| IL8_R | GAA GTT TCA CTG GCA TCT TCA C | 331 bp |
| IL18_F | GCT TGA ATC TAA ATT ATC AGT C | 335 bp |
| IL18_R | CAA ATT GCA TCT TAT TAT CAT G | 335 bp |
| GAPDH_F | AGGGTCATCATCTCTGCC | 245 bp |
| GAPDH_R | CCATCACGCCACAGTTTC | 245 bp |
| CFTR_F | AGCTGGACCAGACCAATTTTGAGGAAA | 554 bp |
| CFTR_R | CCACACGAAATGTGCCAATGCAAGTCC | 554 bp |
| GAPDH | TCC CAT CAC CAT CTT CCA G | 515 bp |
| GAPDH | TCC ACC ACT GAC ACG TTG | 515 bp |