

## ***In Situ* Activation of Pituitary-Infiltrating T Lymphocytes in Autoimmune Hypophysitis**

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### **Supplementary information**

**Supplementary Table 1. Diagnosis and Main Clinical Data of patients with lymphocytic hypophysitis in this study.**

<b>Patient</b>	<b>Age (yrs)/ gender</b>	<b>Presenting symptoms</b>	<b>Glucocorticoids before surgery</b>	<b>Other autoimmune diseases</b>	<b>Pregnancy</b>
A <sup>1</sup>	33/M	9 years before operation due to sellar inflammatory granuloma, 5 years of chiasma syndrome, 6 months of visual deterioration	Yes (Prednisolone)	no	n.a.
B <sup>1</sup>	33/F	2 months of progredient visual deterioration, diabetes insipidus, headache and vomiting in the last months of pregnancy	no	no	3 <sup>rd</sup> trimester
C <sup>2</sup>	32/M	4 months of headaches and visual disturbances	Yes (Prednisolone)	no	n.a.
D <sup>2</sup>	60/M	Over 2 yrs of bifrontal headaches	no information	no	n.a
E <sup>2</sup>	27/F	Secondary amenorrhea	no	no	no
F <sup>1</sup>	32/M	5 months of diabetes insipidus, impotence and depressions	no	no	n.a.
G <sup>2</sup>	56/F	12 months of headache, loss of secondary hairs, loss of libido, adynamia	no	no	no
H	62/M	7 months of headache, loss of secondary hairs	no	no	no

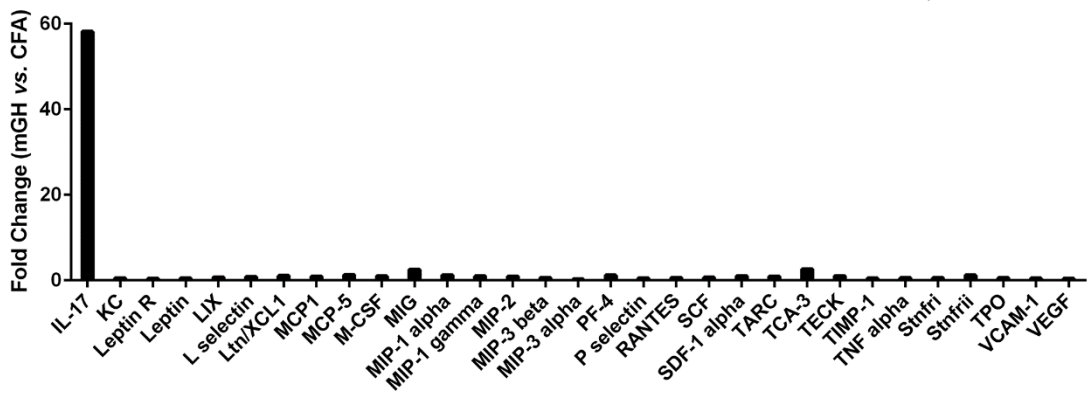
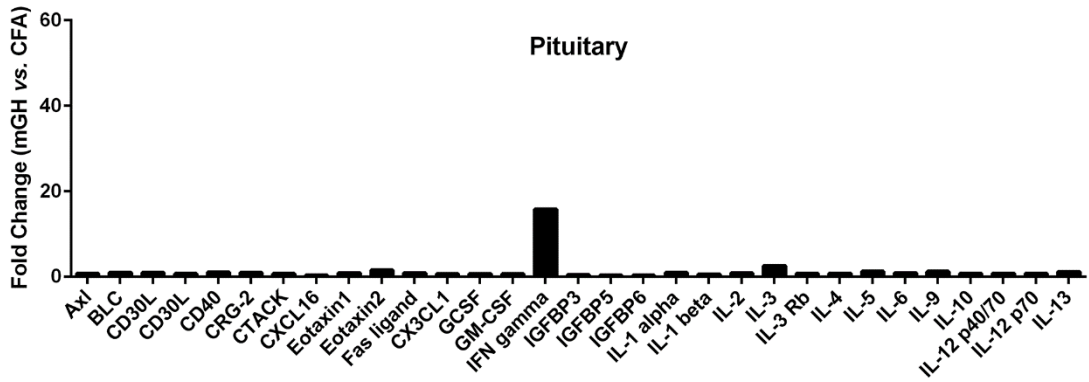
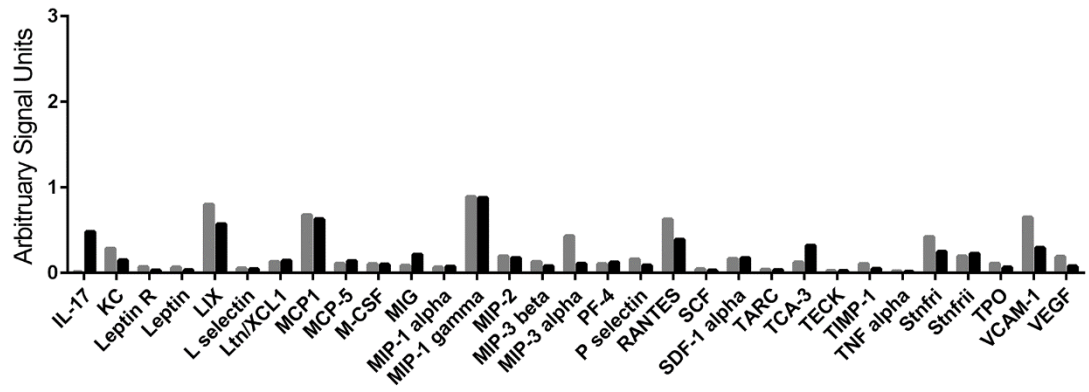
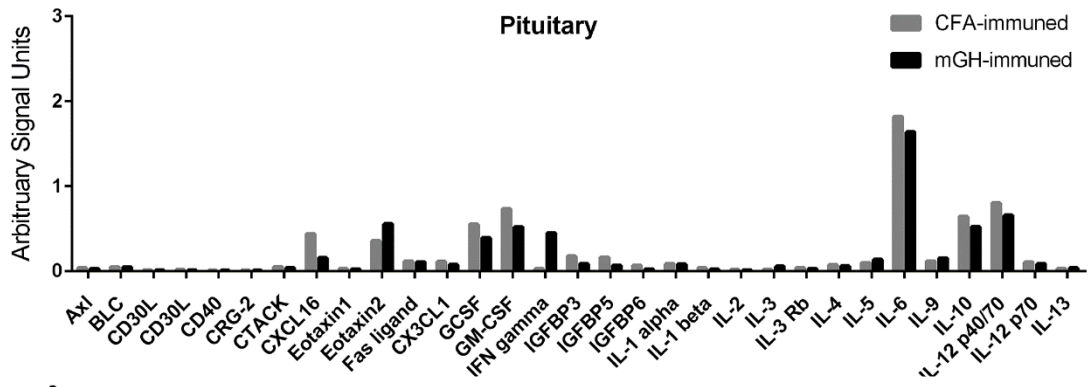
- 1 Gutenberg, A., Buslei, R., Fahlbusch, R., Buchfelder, M. & Bruck, W. Immunopathology of primary hypophysitis: implications for pathogenesis. *Am J Surg Pathol* **29**, 329-338 (2005).
- 2 Gutenberg, A. *et al.* Primary hypophysitis: clinical-pathological correlations. *European journal of endocrinology* **155**, 101-107, doi:10.1530/eje.1.02183 (2006).

**Supplementary Table 2. Percentage of proliferating cells in the mouse pituitary gland that developed autoimmune hypophysitis.**

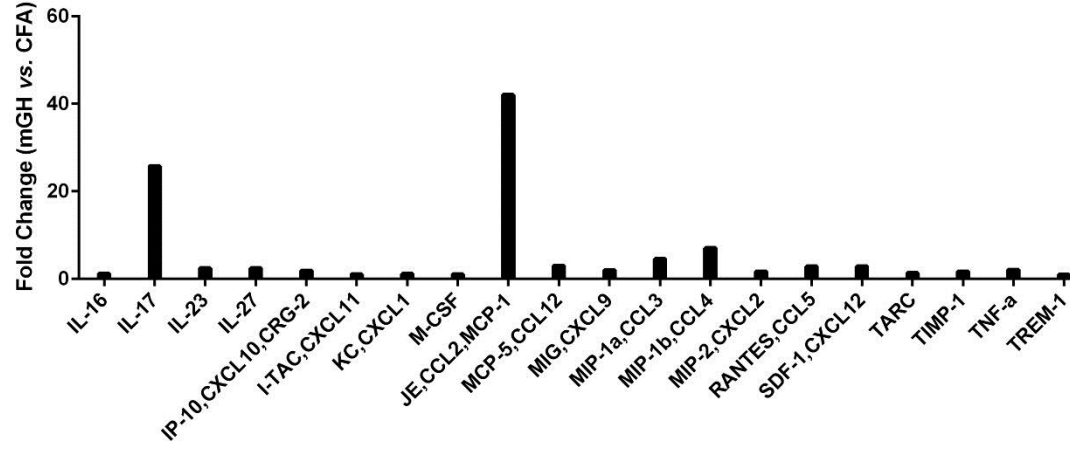
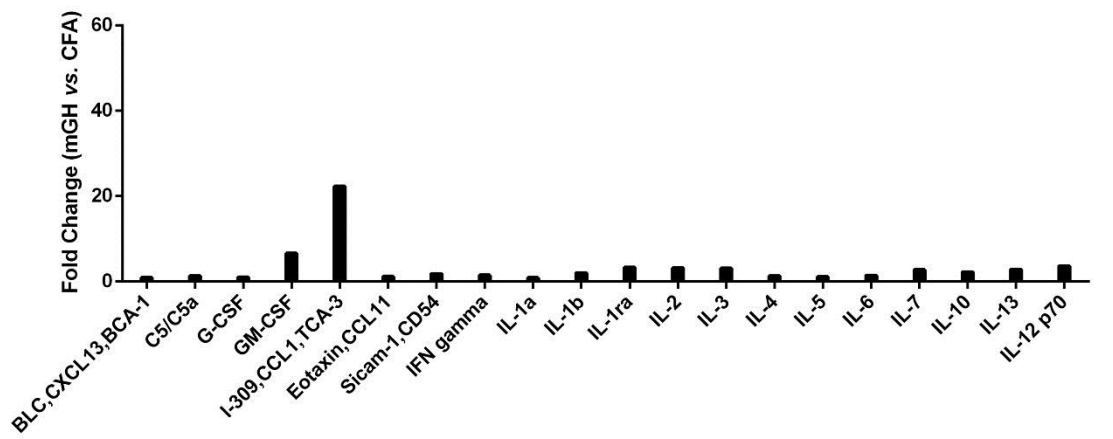
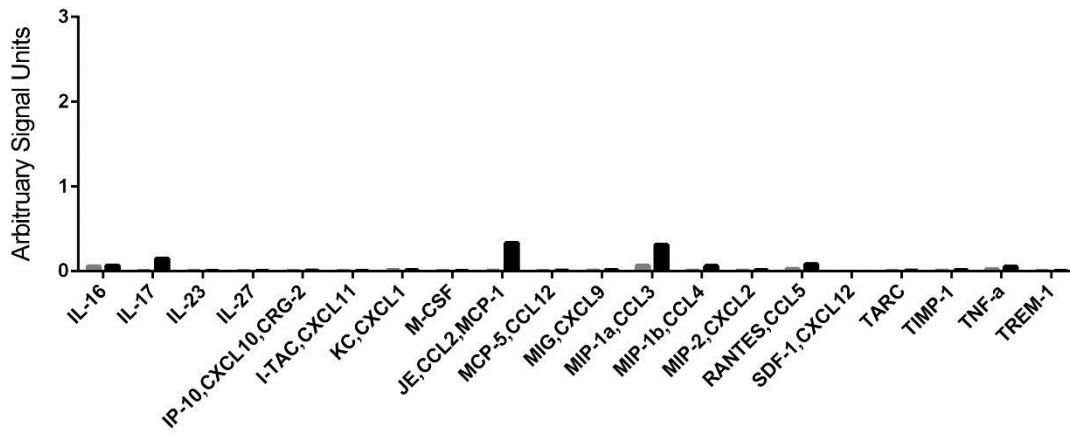
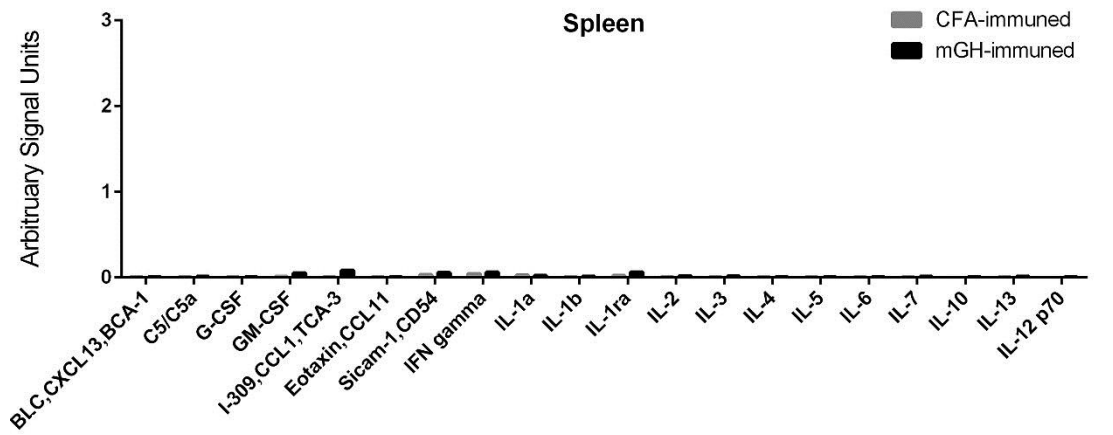
<b>Cell types</b>	<b>% of proliferating cells in the cell type</b>
<b>Nonhematopoietic cells (CD45<sup>-</sup>)</b>	0.6%
<b>Hematopoietic cells (CD45<sup>+</sup>)</b>	8.4%
T cells (CD3 <sup>+</sup> )	11.0%
CD4 <sup>+</sup> T cells	5.7%
CD8 <sup>+</sup> T cells	10.3%
B cells (B220 <sup>+</sup> )	2.9%
Dendritic cells/macrophage	3.2%

**Supplementary Figure 1. Cytokine production by pituitary-infiltrating cells and splenocytes in mouse autoimmune hypophysitis.** Single-cell suspensions from the pituitaries (**a**) or from the spleens (**b**) of CFA-immunized mice and mGH-immunized mice were stimulated by mGH. Cytokine production after stimulation was detected by cytokine array membranes. Signal intensity, expressed as Arbitrary Signal Units, was measured and plotted for two groups of mice. Differences in the cytokine level, expressed as Fold Change (mGH vs. CFA), were derived by dividing the signal intensity of mGH group by the signal intensity of the CFA group.

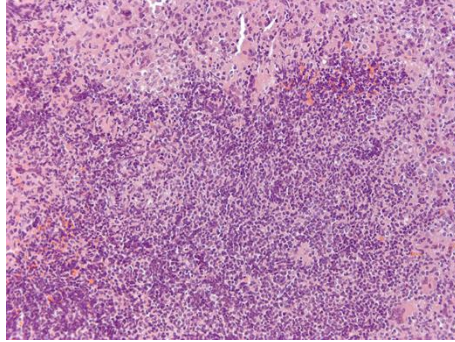
**a**



**b**



**Supplementary Figure 2. Lymphocytic infiltration in the pituitary gland of mouse autoimmune hypophysitis in a mid-late stage (day 56).** Chronic lymphocytic infiltration developed in the pituitary after immunization with mouse growth hormone. Note the dense aggregated lymphocytic infiltration in the pituitary section.



**Supplementary Figure 3. Proliferation of multinucleated giant cells in the pituitary gland of mouse autoimmune hypophysitis.** Multinucleated giant cells (arrow) in the pituitary sections of mice that develop autoimmune hypophysitis on day 56 were stained by PCNA (in red) but not CD3 (in blue).

