*Chlamydia trachomatis* infection of human endometrial stromal cells induces defective decidualisation and chemokine release.

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### Supplementary figures and tables

#### Supplementary figure and table legends

Supplementary Figure S1: hESC infected with *Ct* at an estimated multiplicity of infection (MOI) 1, 2 and 3. In infected wells, between 0.05% (at an MOI 1) and 20% (at either an MOI of 2 or 3) of ESC contained chlamydial inclusions. No differences were observed in the numbers of inclusions in cells from two different patients. An MOI 2 was used for all subsequent experiments. Scalebars equal 500µm.

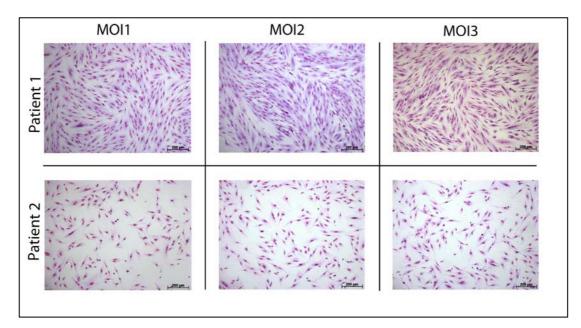
Supplementary Table S2. Proteomic chemokine array results (measured in percentage of positive control of each membrane) and information for the role of each chemokine in decidualisation, early pregnancy/trophoblast invasion, miscarriage and *Ct* infection.

Supplementary Figure S3: Prolactin expression and release remains unaffected by *e*xposure of decidualised ESC to LPS. a. PRL mRNA remains unaffected by exposure of decidualised ESC to either rough LPS (rLPS; derived from *S. minnesota*) or smooth LPS (sLPS; derived from *E. coli*) (n=5, One way ANOVA Friedman's test with Dunn's multiple comparisons test) b. PRL protein levels remain unaffected by exposure to LPS (n=5, One way ANOVA Friedman's test with Dunn's multiple comparisons test).

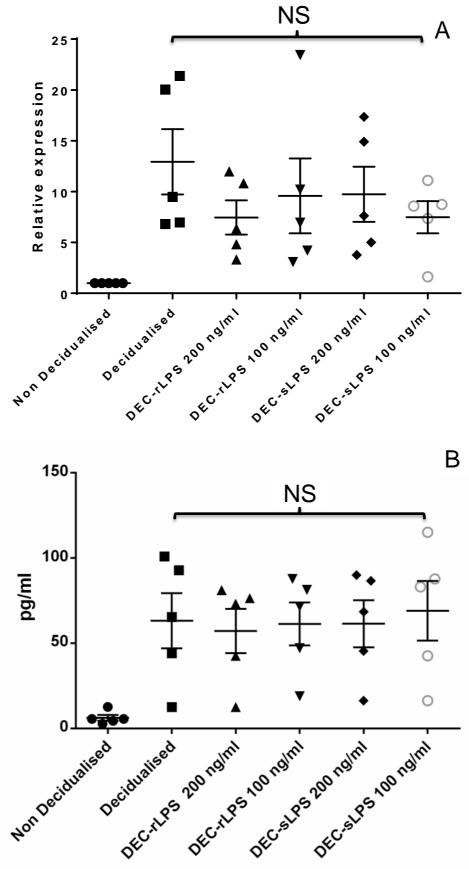
Supplementary Table S4: Decidualisation and infection protocol for human endometrial stromal cells (ESC). Treatments of progesterone (P4) and cyclic-AMP (cAMP) were administered in the cell media on days 1, 3 and 5. On day 6 the cells were infected with *C. trachomatis* or vehicle control and 48 hours later samples were collected.

Supplementary Table S5: qPCR sample using SYBR green

# Supplementary Figure S1



Supplementary Figure S2



## Supplementary Table S3

Gene	Decidua lised Ct infected % of positive control	Decidualised uninfected % of positive control	Δ % of positive control	Role in decidualisation/early pregnancy/miscarriage/association with <i>Ct</i> in humans
6Ckine/ CCL21/ Exodus- 2	14.90	19.43	-4.53	mRNA detected in the endometrium throughout the menstrual cycle and increased in early pregnancy (GCID:GC09M034709). No information on miscarriage and association with <i>Ct</i> infection.
CCL28/ MEC	6.42	7.78	-1.36	Detected by immunohistochemistry in decidualised hESC and first trimester decidua, was shown to induce apoptosis in hESC and its receptors were increased in hESC from miscarriage compared to controls <sup>1</sup> . No information on association with <i>Ct</i> infection.
CXCL16 / SRPSOX	24.59	53.31	-28.72	Human trophoblasts recruited T lymphocytes and monocytes into decidua by secretion of CXCL16 in early pregnancy <sup>2</sup> . CXCL16 also induces invasion and proliferation of first-trimester human trophoblast cells <sup>3</sup> . No information on decidualisation, miscarriage or association with <i>Ct</i> infection.
Chemer in /TIG- 2/ RARRES 2	91.66	99.69	-8.03	Chemerin serum concentration was significantly higher in pregnant women in the 3rd trimester than in non-pregnant and pregnant women in the 1st trimester, whilst no differences were observed during the menstrual cycle <sup>4</sup> . No information on miscarriage or association with <i>Ct</i> infection.
ENA- 78/ CXCL5	10.67	14.48	-3.82	Elevated ENA-78 levels were associated with increased risk of miscarriage <sup>5</sup> . mRNA levels were increased in trachoma patients <sup>6</sup> . No information on decidualisation.
Eotaxin- 3/ CCL2	16.52	23.75	-7.23	IL-33 enhances proliferation and invasiveness of ESC by up-regulation of CCL2 and its receptor CCR2 <sup>7</sup> .

				No association between maternal
				circulation levels during the first trimester
				of CCL2 and miscarriage <sup>8</sup> . No information on association with <i>Ct</i>
				infection.
Fractalk	28.68	30.31	-1.63	Is expressed in maternal decidua and
ine/	20.00	50.51	1.05	promotes human trophoblast invasion <sup>9</sup> .
CX3CL1				No association between maternal
/				circulation levels during the first trimester
, Neurota				of CCL2 and miscarriage <sup>8</sup> .
ctin				No information on association with Ct
				infection.
GROα/	94.17	66.23	27.94	Expressed in early pregnancy decidua
CXCL1				(GCID:GC04P073869).
				Upregulated in women with
				antiphospholipid antibodies inducing a
				placental inflammatory response via the TLR-4/MyD88 pathway, which in turn
				compromises trophoblast survival <sup>10</sup> .
				Associated with asymptomatic <i>Ct</i> infection
				in men <sup>11</sup> .
HCC-1/	10.22	15.23	-5.01	Promotes human trophoblast invasion <sup>9</sup> .
CCL14/				No information on miscarriage or
HCC-3				association with Ct infection.
I-309/	10.82	18.54	-7.72	No information on decidualisation, early
CCL1/				pregnancy, miscarriage or association with
TCA3		100.15		Ct infection.
	98.02	100.15	-2.13	Promotes trophoblast invasion <sup>12</sup> .
8/CXCL 8				Upregulated in women with antiphospholipid antibodies inducing a
0				placental inflammatory response via the
				TLR-4/MyD88 pathway, which in turn
				compromises trophoblast survival <sup>10</sup> .
				No association of serum levels with
				miscarriage (Whitcomb et al., 2007).
				Induced in response to Ct infection <sup>13</sup> .
IL-16/	20.71	36.59	-15.88	Expressed in decidua during the
LCF				implantation window (GCID:GC15P081159).
				Induced in response to <i>Ct</i> infection in cell
10.464				
-	36.13	44.75	-8.62	5
CXCL10				
I-TAC/	8.70	13.58	-4.88	-
-	0.70	10.00		
				miscarriage and compared to diabetics with
				I miscarriage and compared to diabetics with
-	36.13	44.75	-15.88 -8.62 -4.88	implantation window (GCID:GC15P081159 Induced in response to <i>Ct</i> infection in cell lines <sup>14</sup> . No information on miscarriage. Increased in decidua during the implantation window <sup>15</sup> . Also reported to be increased in women with <i>Ct</i> associated infertility <sup>16</sup> . No information on miscarriage. Increased levels in euthyroid women with autoimmune thyroiditis with recurrent

				Secreted by progesterone primed primary
				endocervical epithelial cells infected with <i>Ct</i>
				No information on decidualisation or early
				pregnancy.
Lympho	46.07	23.09	22.98	Upregulated during implantation window
tactin/ XCL1/				•
Lptn/				No information on miscarriage or association with <i>Ct</i> infection.
ATAC/				
SCM-1α				
MCP-1/	101.83	99.08	2.75	Localised in glandular epithelium and
CCL2/				endothelial cells, not secreted by blastocyst
MCAF				during early implantation winodow (GCID:
				GC17P034255).
				Upregulated in women with
				antiphospholipid antibodies inducing a
				placental inflammatory response via the TLR-4/MyD88 pathway, which in turn
				compromises trophoblast survival <sup>10</sup> .
				Elevated mRNA due to <i>Ct</i> infection $^{20}$ .
MCP-3/	38.34	61.95	-23.61	Detected in plasma of women during 1 <sup>st</sup>
CCL7				trimester of pregnancy but no difference
				between miscarriage cases and controls <sup>8</sup> .
				Does not induce trophoblast migration <sup>9</sup> .
				Not detected in sera of infertile women
	21.05	46.00	14.00	with past <i>Ct</i> infection <sup>21</sup> .
MDC/ CCL22/	31.95	46.88	-14.93	Detected on maternal stromal cells and increased in placentae from miscarriage
STCP-1/				cases <sup>22</sup> .
ABCD-1				No information on association with Ct
				infection.
MDK/M	76.92	97.66	-20.75	No information on decidualisation, early
К/				pregnancy, miscarriage or association with
Midkine				Ct infection.
MIG/	10.27	17.56	-7.29	Increased levels in euthyroid women with
CXCL9				autoimmune thyroiditis with recurrent miscarriage compared to diabetics with
				successful pregnancies <sup>17</sup> .
				Associated with asymptomatic <i>Ct</i> infection
				in men <sup>11</sup> .
				No information on decidualisation or early
				pregnancy.
MIP-	10.44	18.14	-7.70	Shown to be secreted by endometrial
1α/β/				stromal cells in response to hCG <sup>23</sup> .
CCL3/				Promotes trophoblast migration <sup>9</sup> .
CCL4				No association of serum levels with
				miscarriage <sup>5</sup> . Levels were not affected by <i>Ct</i> infection <sup>24</sup> .
				Levels were not anected by Climection

MIP-1δ/ CCL15/ Leukota ctin 1/ MIP-5/ HCC-2	10.74	16.56	-5.82	No information on decidualisation, early pregnancy, miscarriage or association with <i>Ct</i> infection.
MIP- 3α/ CCL20/ LARC/ Exodus- 1	14.12	14.36	-0.24	Was shown to be increased due to <i>Ct</i> infection <sup>25</sup> . No information on decidualisation, early pregnancy or miscarriage.
MIP-3β/ CCL19/ ELC/ Exodus- 3	36.15	37.03	-0.88	No information on decidualisation, early pregnancy, miscarriage or association with <i>Ct</i> infection.
NAP-2/ CXCL7/ CTAP III	78.93	18.09	60.84	No information on decidualisation, early pregnancy, miscarriage or association with <i>Ct</i> infection.
PARC/ CCL18/ MIP-4/ AMAC-1	15.85	25.42	-9.57	Increased in trachoma patients in response to II-17 <sup>6</sup> . No information on decidualisation, early pregnancy or miscarriage.
PF4/ CXCL4	19.27	31.85	-12.57	No information on decidualisation, early pregnancy, miscarriage or association with <i>Ct</i> infection.
RANTES / CCL5/ SISd	34.42	25.36	9.07	Localised in endometrial stromal and endothelial cells during the implantation window and is not produced by the trophoblast (GCID:GC17M035871). No association of serum levels with miscarriage <sup>5</sup> .
SDF-1/ CXCL12 / PBSF	15.12	94.86	-79.75	Associated with trophoblast invasion and implantation in primary stromal cells <sup>26,27</sup> . There is also a study showing inhibition of CXCL12 due to cytomegalovirus infection that resulted in impaired migration and invasion of human extravillous cytotrophoblasts <sup>28</sup> . Levels not altered in semen of men with asymptomatic <i>Ct</i> infection <sup>11</sup> . No information on association with miscarriage.
TARC/ CCL17	17.75	30.25	-12.50	Induces trophoblast migration <sup>29</sup> . No information on decidualisation, miscarriage or association with <i>Ct</i> infection.
VCC-1/ CXCL17 / DMC	6.77	10.00	-3.23	No information on decidualisation, early pregnancy, miscarriage or association with <i>Ct</i> infection.

# Supplementary Table S4

	Day 1	Day 3	Day 5	Day 6	Day 8
1° ESC/	P4/cAMP	P4/cAMP	P4/cAMP	Ct/mock	Sample
SHT290	treatment	treatment	treatment	infection	collection

## Supplementary Table S5

Stock	Final concentration	Volume per 10µl
2x Brilliant III SYBR Mix	1X	5µl
Primer pair	10μΜ	0.5µl
Diluted Reference Dye		0.15 µl
Nuclease Free H <sub>2</sub> O		3.35 µl
cDNA	2.5ng	1µl

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