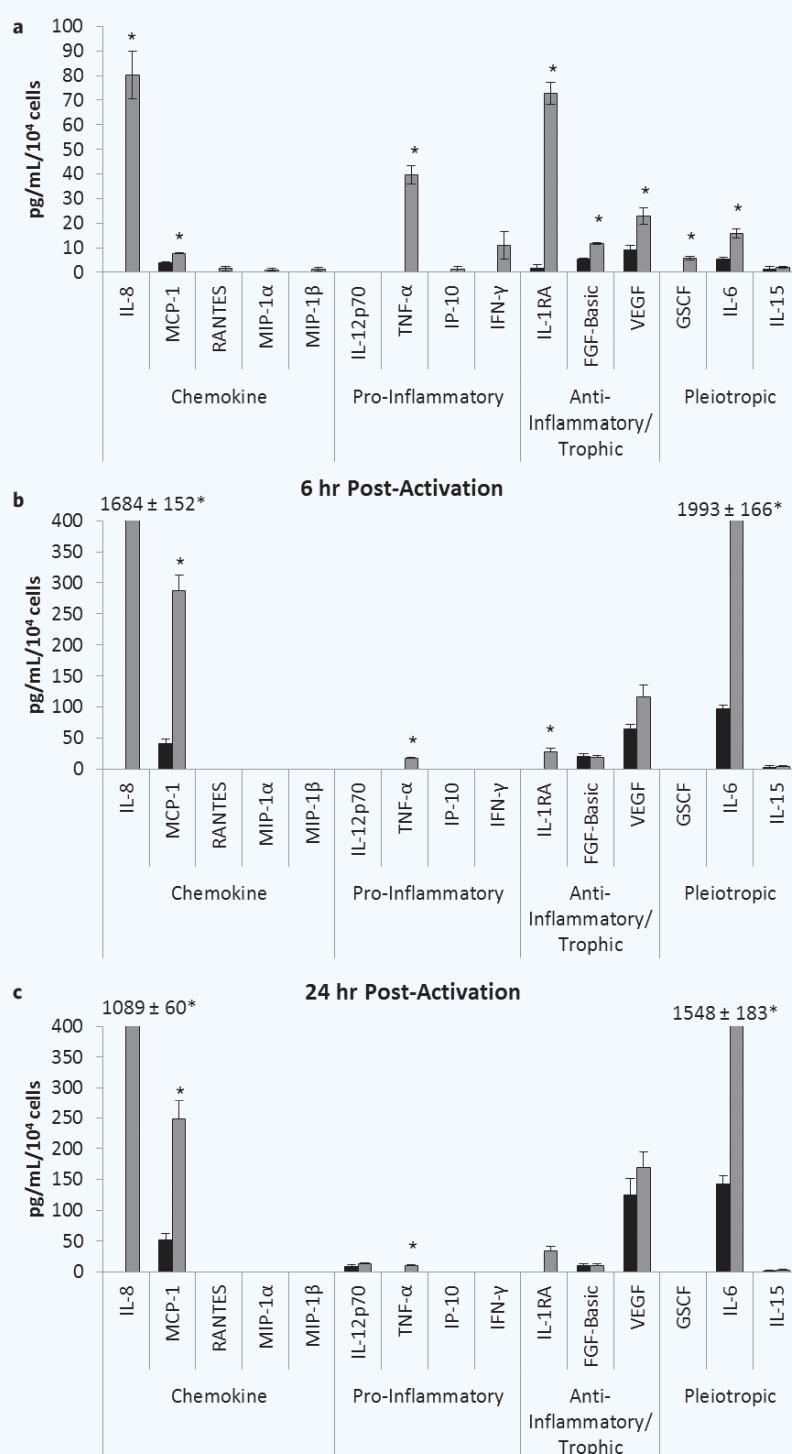


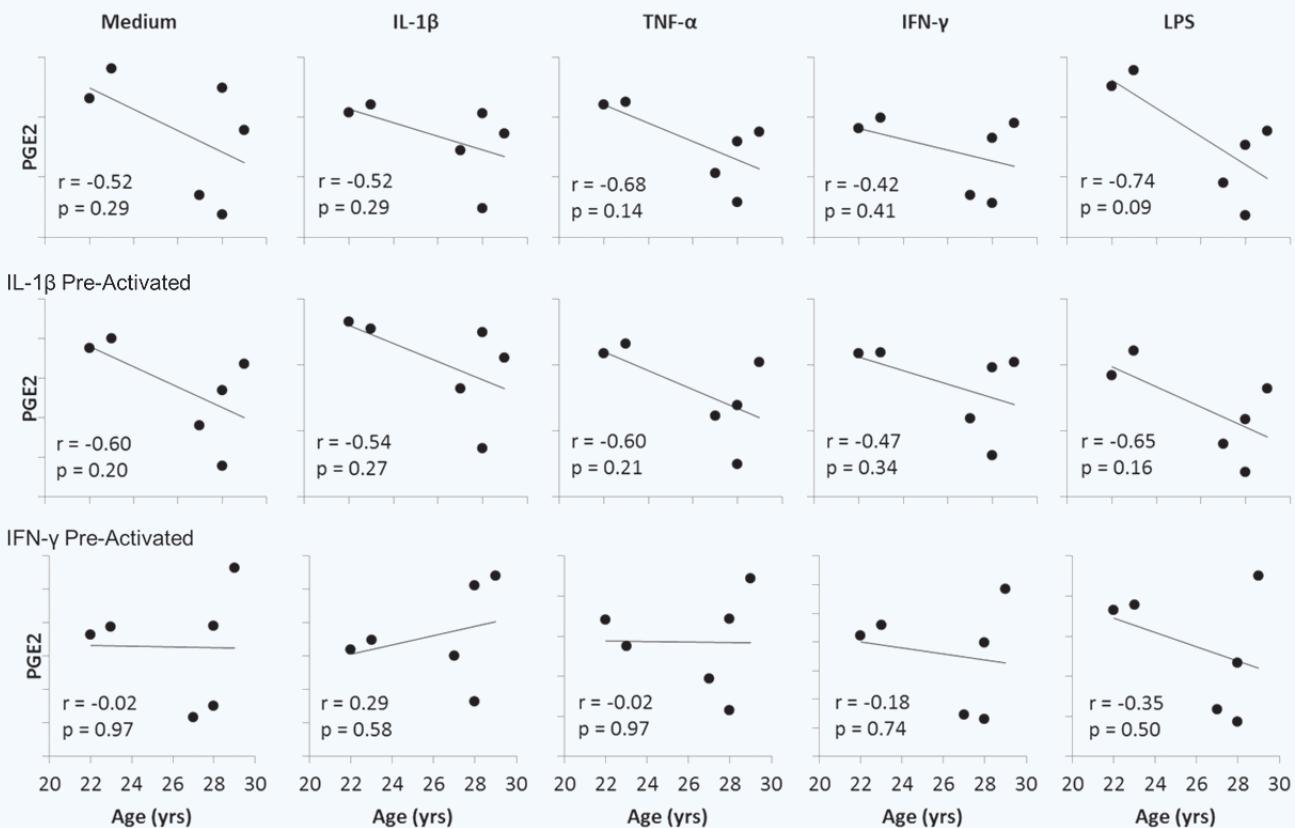
74. Ortiz, L.A. et al. Interleukin 1 receptor antagonist mediates the anti-inflammatory and antifibrotic effect of mesenchymal stem cells during lung injury. *Proc. Natl. Acad. Sci. U.S.A.* **104**(26), 11002–11007 (2007).
75. Cohen, J. Set correlation and contingency—Tables. *Appl. Psychol. Meas.* **12**(4), 425–434 (1988).
76. Wang, X.Y. et al. Donor myocardial infarction impairs the therapeutic potential of bone marrow cells by an interleukin-1-mediated inflammatory response. *Sci. Transl. Med.* **3**(100), 100ra90 (2011).
77. Sanz-Nogues, C. & O'Brien, T. MSCs isolated from patients with ischemic vascular disease have normal angiogenic potential. *Mol. Ther.* **22**(11), 1888–1889 (2014).
78. Bocelli-Tyndall, C. et al. Bone marrow mesenchymal stromal cells (BM-MSCs) from healthy donors and auto-immune disease patients reduce the proliferation of autologous- and allogeneic-stimulated lymphocytes *in vitro*. *Rheumatology* **46**(3), 403–408 (2007).
79. Bacigalupo, A. et al. T-cell suppression mediated by mesenchymal stem cells is deficient in patients with severe aplastic anemia. *Exp. Hematol.* **33**(7), 819–827 (2005).
80. Murphy, J.M. et al. Reduced chondrogenic and adipogenic activity of mesenchymal stem cells from patients with advanced osteoarthritis. *Arthritis Rheum.* **46**(3), 704–713 (2002).
81. Del Papa, N. et al. Bone marrow endothelial progenitors are defective in systemic sclerosis. *Arthritis Rheum.* **54**(8), 2605–2615 (2006).
82. Kastrinaki, M.C. et al. Functional, molecular and proteomic characterisation of bone marrow mesenchymal stem cells in rheumatoid arthritis. *Ann. Rheum. Dis.* **67**(6), 741–749 (2008).
83. Papadaki, H.A. et al. Normal bone marrow hematopoietic stem cell reserves and normal stromal cell function support the use of autologous stem cell transplantation in patients with multiple sclerosis. *Bone Marrow Transplant.* **36**(12), 1053–1063.
84. Mallam, E. et al. Characterization of *in vitro* expanded bone marrow-derived mesenchymal stem cells from patients with multiple sclerosis. *Mult. Scler. J.* **16**(8), 909–918 (2010).
85. Mazzanti, B. et al. Differences in mesenchymal stem cell cytokine profiles between MS patients and healthy donors: Implication for assessment of disease activity and treatment. *J. Neuroimmunol.* **199**(1–2), 142–150 (2008).

SUPPLEMENTARY INFORMATION

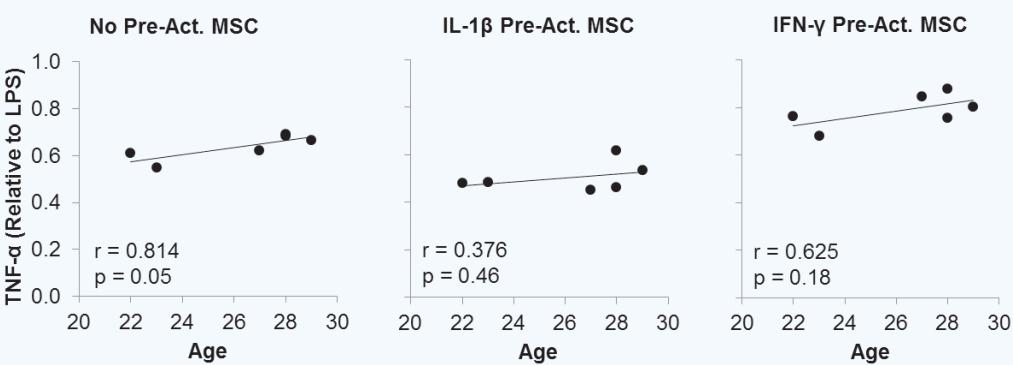


Supplementary Figure 1 MSC secretome changes at the end of the activation period and over time post-activation. (a) MSCs were cultured without (black bars) or with IL-1 β (grey bars) for 1 hour. Out of 27 secreted factors quantified, 15 were detected in supernatants using a bead-based multiplex immunoassay. (b) Pre-activated cell culture supernatants were replaced by fresh medium for (b) 6 or (c) 24 hours. Secreted factors in supernatants were quantified using a bead-based multiplex immunoassay. Data are the mean \pm SEM for secreted level normalized to cell number for $n = 3$ replicates. * $p < 0.05$ compared to medium by Student's t test.

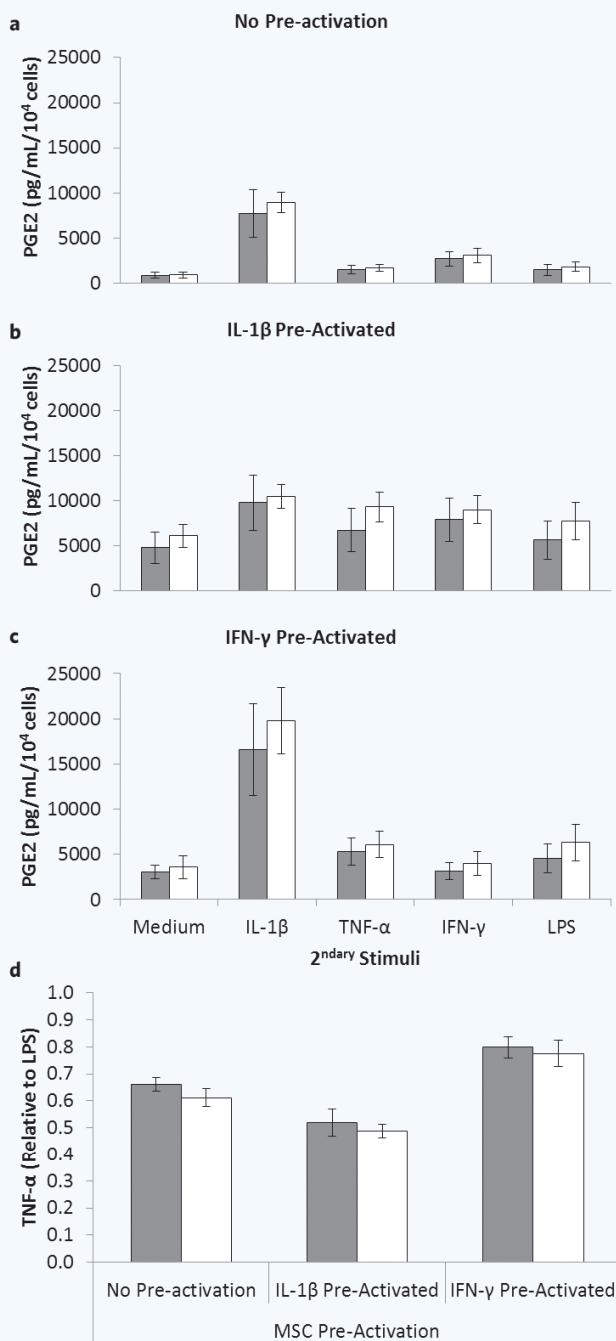
No Pre-Activation



Supplementary Figure 2 Correlation of donor age and PGE2 secretion in response to pro-inflammatory stimuli after pre-activation. PGE2 levels (black circles) were plotted against the age of the corresponding donor with a linear regression line (black line). Pearson's correlation coefficients (r) were calculated and their statistical significances (p) were determined using Student's t test. Each data point represents the average PGE2 secretion for a single donor.



Supplementary Figure 3 Correlation of donor age and relative TNF- α level in MSC/macrophage co-cultures. Relative TNF- α levels (black circles) were plotted against the age of the corresponding donor with a linear regression line (black line). Pearson's correlation coefficients (r) were calculated and their statistical significances (p) were determined using Student's t test. Each data point represents the average TNF- α level for a single donor.



Supplementary Figure 4 Comparison of PGE2 secretion in response to pro-inflammatory stimuli between male and female MSC donors (grey bars and white bars, respectively) after (a) no pre-activation, (b) IL-1 β pre-activation, or (c) IFN- γ pre-activation. (d) Comparison of relative TNF- α level in MSC/macrophage co-cultures between male and female MSC donors (grey bars and white bars, respectively). Data are the mean \pm SEM for PGE2 normalized to cell number or relative TNF- α level for equal numbers of male and female biological replicates ($n = 3$ each).

Supplementary Table 1 Power analysis for PGE2 secretion in response to secondary stimuli after pre-activation with IL-1 β for 6 biological replicates (MSC donors).

Efect	Mean of difference	St. dev. of difference	Efect size	Power (1- β)
TNF- α -induced PGE2 levels	6471	2880	2.247	0.9903
IFN- γ -induced PGE2 levels	5615	2003	2.803	0.9996
LPS-induced PGE2 levels	5071	2546	1.992	0.9695

Supplementary Table 2 Power analysis for the relative TNF- α level in macrophage co-cultures with MSCs for 6 biological replicates (MSC donors).

Efect	Mean 1	Mean 2	St. dev. 1	St. dev. 2	Correlation	Efect size	Power (1- β)
No pre-activation vs. IL-1 β pre-activation	0.636	0.504	0.054	0.063	0.435	2.107	0.9814

Supplementary Table 3 Power analysis for the PGE2 level in macrophage co-cultures with MSCs for 6 biological replicates (MSC donors).

Efect	Mean of difference	St. dev. of difference	Efect size	Power (1- β)
No pre-activation vs. IL-1 β pre-activation	38780	28440	1.364	0.7606