Supplemental Methods

Detection and quantification of metabolites by high performance liquid chromatography (HPLC)-tandem mass spectrometry*.*

P-cresyl sulfate (PCS), hippuric acid, indole-3-propionic acid (I3P), tryptophan (trp), kynurenine (kyn), indoxyl sulfate (IS), and serotonin. Fifty microliters of plasma and internal standards (n-methyl serotonin and p-toluene sulfonic acid) were prepared as described previously¹ with the following modifications. After extraction with 200 μ L methanol and clarification by centrifugation, the supernatant was dried in a water bath (50°C) under nitrogen gas, resuspended in water:acetonitrile (98:2 volume:volume), and filtered. One microliter of eluent was separated by reverse-phase HPLC on a Zorbax Eclipse XDB-C18 Rapid Resolution High-Throughput, 2.1x50 mm, particle size 1.8 µ column (Agilent Technologies, Santa Clara, CA) with an Eclipse XDB-C8, 2.1 x 12.5 mm, 5 µ guard (Agilent Technologies), and the metabolites of interest were measured by tandem mass spectrometry on a triple quadrupole instrument (Agilent 6410) operating in multiple reaction monitoring mode. For positive ion analysis, solvents were (A) .1% formic acid and (B) acetonitrile at a flow rate on .3 mL/min. The gradient began with 98% solvent A and 2% solvent B and changed to 90% solvent A and 10% solvent B (0 \rightarrow 4 min) followed by 50% solvent A and 50% solvent B (4 \rightarrow 6 min), where it remained until 10 minutes, followed by a 3-minute re-equilibration at 98% A/2% B. For negative ion analysis, 5 mM ammonium acetate was used in place of formic acid, and solvent B was methanol instead of acetonitrile. The gradient began with 88% solvent A and 12% solvent B and changed to 86% solvent A and 14% solvent B $(0 \rightarrow 3 \text{ min})$, followed by 65% solvent A and 35% solvent B (3) \rightarrow 4 min) where it remained until 8 min, followed by a 4-min re-equilibration to 88% A/12% B. The mass-to-charge ratios of the

precursor-to-product ion reactions monitored were $209 \rightarrow 192$ for kyn, $205 \rightarrow 188$ for trp, $190 \rightarrow 130$ for I3P, $180 \rightarrow 105$ for hippuric acid, $177 \rightarrow 160$ for serotonin, $191 \rightarrow 160$ for n-methyl serotonin, $212 \rightarrow 80$ for IS, $187 \rightarrow 107$ for PCS, and $171 \rightarrow 80$ for ptoluenesulfonic acid. Retention times for serotonin, kyn, n-methyl serotonin, trp, hippuric acid, I3P, IS, p-toluenesulfonic acid, and PCS were 3.3, 3.5, 3.8, 5.8, 6.9, 8.2, 2.9, 2.9, and 5.8 min, respectively. The linear range for plasma kyn, trp, I3P, hippuric acid, serotonin, IS, and PCS standard curves were .006 to .60 nmol/L, 1.22 to 122.4 nmol/L, .0017 to .17 nmol/L, .18 to 17.86 mmol/L, .0028 to 11.8 nmol/L, .23 to 23.5 nmol/L, and .025 to 25.3 nmol/L, respectively.

Indole, indole-3-aldehyde (I3A), and 3-hydroxyanthranilic acid. Samples were prepared by solid-phase extraction. In brief, 50 µL of plasma sample, methanolic internal standard (bupivacaine) solution and 20% phosphoric acid solution were vortexed and clarified by centrifugation. The sorbent of the wells of a 96-well Strata-X Polymeric Reversed Phase 96-well plate (Phenomenex, Torrance, CA), 2 mg/well, were conditioned sequentially with methanol and formic acid solution under vacuum. The sample was applied to the conditioned sorbent and drawn through gently by vacuum. The sorbent was washed with 1% formic acid solution under vacuum. Samples were then eluted into a 96-well plate by 1% ammonium hydroxide in methanol. Two microliters of the eluent were then analyzed by an API 3000 HPLC–tandem mass spectrometry system (Applied Biosystems, Foster City, CA) equipped with an Agilent 1100 series HPLC system (Agilent Technologies) operating in positive ion mode. Samples were eluted by gradient from a Poroshell 120, EC-C18, 2.1 x 100 mm, 2.7 µ column (Agilent) with a UHPLC EC-C18 2.1 x 5 mm ID, 2.7 µ guard cartridge (Agilent) using a mobile phase consisting of .1% formic acid in water (solvent A) and .1% formic acid in methanol (solvent B) at a flow rate of .20 mL/min. The gradient began with 70% solvent A and 30% solvent B for one-half min before changing to 35% solvent A and 65%

solvent B between 0.5 and 1.3 min and again changing to 20% solvent A and 80% solvent B between 1.3 and 3 min. The mobile phase remained at 20% solvent A and 80% solvent B until it was returned to 70% solvent A and 30% solvent B between 9 and 9.1 min for reequilibration until 15 min. The mass-to-charge ratios of the precursor-to-product ion reactions monitored were $154.2 \rightarrow 135.9$ for 3-hydroxyanthranilic acid, $146.3 \rightarrow 91.2$ for I3A, $118.0 \rightarrow 91.1$ for indole, and $289.3 \rightarrow 140.1$ for the internal standard. The retention times of 3-hydroxyanthranilic acid, I3A, and indole were approximately 2.1, 6.9, and 8.2 min, respectively, while that of the internal standard was approximately 7.4 min. The linear range for plasma 3-hydroxyanthranilic acid, I3A, and indole standard curves were .00017 to .033 nmol/L, .0069 to .69 nmol/L, and .017 to 1.11 nmol/L, respectively.

Supplemental Table I. Compounds under study in current targeted metabolomics screen and known links to atherosclerosis or vascular cell biology

 $\frac{1}{\text{a}}$ The kynurenine/tryptophan ratio is an estimate of the activity of indoleamine 2,3-dioxygenase (IDO1).⁸

IDO1 (indole-2,3-deoxygenase 1); CAD, coronary artery disease; LDL, low density lipoprotein; HDL, high density lipoprotein; ApoE,

apolipoprotein E

Supplemental References

- 1. Wikoff WR, Anfora AT, Liu J, Schultz PG, Lesley SA, Peters EC et al. Metabolomics analysis reveals large effects of gut microflora on mammalian blood metabolites. *Proc Natl Acad Sci U S A.* 2009;106:3698-703.
- 2. Wu D, Nishimura N, Kuo V, Fiehn O, Shahbaz S, Van Winkle L, et al. Activation of aryl hydrocarbon receptor induces vascular inflammation and promotes atherosclerosis in apolipoprotein E-/- mice. *Arterioscler Thromb Vasc Biol.* 2011;31:1260-7.
- 3. Shimada Y, Kinoshita M, Harada K, Mizutani M, Masahata K, Kayama H, et al. Commensal bacteria-dependent indole production enhances epithelial barrier function in the colon. *PLoS One*. 2013 Nov 20;8(11):e80604.
- 4. Lee JH and Lee J. Indole as an intercellular signal in microbial communities. *FEMS Microbiol Rev.* 2010;34:426-44.
- 5. Zuo H, Ueland PM, Ulvik A, Eussen SJ, Vollset SE, Nygard O, et al. Plasma Biomarkers of Inflammation, the Kynurenine Pathway, and Risks of All-Cause, Cancer, and Cardiovascular Disease Mortality: The Hordaland Health Study. *Am J Epidemiol.*2016 183(4): 249-58.
- 6. Wirleitner B, Rudzite V, Neurauter G, Murr C, Kalnins U, Erglis A, et al. Immune activation and degradation of tryptophan in coronary heart disease. *Eur J Clin Invest.* 2003;33:550-4.
- 7. Metghalchi S, Ponnuswamy P, Simon T, Haddad Y, Laurans L, Clement M, et al. Indoleamine 2,3-Dioxygenase Fine-Tunes Immune Homeostasis in Atherosclerosis and Colitis through Repression of Interleukin-10 Production. *Cell Metab*. 2015;22:460-71.
- 8. Stone TW, Darlington LG. Endogenous kynurenines as targets for drug discovery and development. *Nat Rev Drug Discov.* 2002;1:609-20
- 9. El Aidy S, Kunze W, Bienenstock J, Kleerebezem M. The microbiota and the gut-brain axis: insights from the temporal and spatial mucosal alterations during colonisation of the germfree mouse intestine. *Benef Microbes*. 2012;3:251-9.
- 10. Clarke G, Grenham S, Scully P, Fitzgerald P, Moloney RD, Shanahan F, et al. The microbiome-gut-brain axis during early life regulates the hippocampal serotonergic system in a sex-dependent manner. *Mol. Psychiatry*. 2013;18:666-73.
- 11. Pedersen ER, Svingen GF, Schartum-Hansen H, Ueland PM, Ebbing M, Nordrehaug JE, et al. Urinary excretion of kynurenine and tryptophan, cardiovascular events, and mortality after elective coronary angiography. *Eur Heart J.* 2013;34:2689-96.
- 12. Pedersen ER, Tuseth N, Eussen SJ, Ueland PM, Strand E, Svingen GF, et al. Associations of plasma kynurenines with risk of acute myocardial infarction in patients with stable angina pectoris. *Arterioscler Thromb Vasc Biol.* 2015;35:455-62.
- 13. Cole JE, Astola N, Cribbs AP, Goddard ME, Park I, Green P, et al. Indoleamine 2,3-dioxygenase-1 is protective in atherosclerosis and its metabolites provide new opportunities for drug development. *Proc Natl Acad Sci U S A.* 2015;112:13033-8.
- 14. Niinisalo P, Raitala A, Pertovaara M, Oja SS, Lehtimaki T, Kahonen M, et al. Indoleamine 2,3-dioxygenase activity associates with cardiovascular risk factors: the Health 2000 study. *Scand J Clin Lab Invest*. 2008;68:767-70.
- 15. Pertovaara M, Raitala A, Juonala M, Lehtimaki T, Huhtala H, Oja SS, et al. Indoleamine 2,3-dioxygenase enzyme activity correlates with risk factors for atherosclerosis: the Cardiovascular Risk in Young Finns Study. *Clin Exp Immunol.* 2007;148:106-11.
- 16. Niinisalo P, Oksala N, Levula M, Pelto-Huikko M, Jarvinen O, Salenius JP, et al. Activation of indoleamine 2,3-dioxygenaseinduced tryptophan degradation in advanced atherosclerotic plaques: Tampere vascular study. *Ann Med.* 2010;42:55-63.
- 17. Zhang L, Ovchinnikova O, Jonsson A, Lundberg AM, Berg M, Hansson GK et al. The tryptophan metabolite 3hydroxyanthranilic acid lowers plasma lipids and decreases atherosclerosis in hypercholesterolaemic mice. *Eur Heart J.* 2012;33:2025-34.
- 18. Sugiura T, Dohi Y, Yamashita S, Hirowatari Y, Fujii S and Ohte N. Serotonin in peripheral blood reflects oxidative stress and plays a crucial role in atherosclerosis: Novel insights toward holistic anti-atherothrombotic strategy. *Atherosclerosis*. 2016;246:157-60.
- 19. Dou L, Jourde-Chiche N, Faure V, Cerini C, Berland Y, Dignat-George F et al. The uremic solute indoxyl sulfate induces oxidative stress in endothelial cells. *J Thromb Haemost.* 2007;5:1302-8.
- 20. Dou L, Bertrand E, Cerini C, Faure V, Sampol J, Vanholder R, et al. The uremic solutes p-cresol and indoxyl sulfate inhibit endothelial proliferation and wound repair. *Kidney Int.* 2004;65:442-51.
- 21. Yamamoto T and Katayama I. Vascular changes in bleomycin-induced scleroderma. *Int J Rheumatol.* 2011;2011:270938.
- 22. Yang K, Du C, Wang X, Li F, Xu Y, Wang S, et al. Indoxyl sulfate induces platelet hyperactivity and contributes to chronic kidney disease-associated thrombosis in mice. *Blood*. 2017;129(19):2667-2679.
- 23. Ito S, Osaka M, Higuchi Y, Nishijima F, Ishii H and Yoshida M. Indoxyl sulfate induces leukocyte-endothelial interactions through up-regulation of E-selectin. *J Biol Chem.* 2010;285:38869-75.
- 24. Hsu CC, Lu YC, Chiu CA, Yu TH, Hung WC, Wang CP, et al. Levels of indoxyl sulfate are associated with severity of coronary atherosclerosis. *Clin Invest Med.* 2013;36:E42-9.
- 25. Adijiang A, Goto S, Uramoto S, Nishijima F and Niwa T. Indoxyl sulphate promotes aortic calcification with expression of osteoblast-specific proteins in hypertensive rats. *Nephrol Dial Transplant*. 2008;23:1892-901.
- 26. Zhang F, Jia Z, Gao P, Kong H, Li X, Chen J, et al. Metabonomics study of atherosclerosis rats by ultra fast liquid chromatography coupled with ion trap-time of flight mass spectrometry. *Talanta*. 2009;79:836-44.
- 27. Liabeuf S, Barreto DV, Barreto FC, Meert N, Glorieux G, Schepers E, et al. Free p-cresylsulphate is a predictor of mortality in patients at different stages of chronic kidney disease. *Nephrol Dial Transplant.* 2010;25:1183-91.
- 28. Han H, Chen Y, Zhu Z, Su X, Ni J, Du R, et al. p-Cresyl sulfate promotes the formation of atherosclerotic lesions and induces plaque instability by targeting vascular smooth muscle cells. *Front Med.* 2016;10:320-9.
- 29. Jing YJ, Ni JW, Ding FH, Fang YH, Wang XQ, Wang HB, et al. p-Cresyl sulfate is associated with carotid arteriosclerosis in hemodialysis patients and promotes atherogenesis in apoE-/- mice. *Kidney Int.* 2016;89:439-49.
- 30. Schepers E, Meert N, Glorieux G, Goeman J, Van der Eycken J and Vanholder R. P-cresylsulphate, the main in vivo metabolite of p-cresol, activates leucocyte free radical production. *Nephrol Dial Transplant.* 2007;22:592-6.
- 31. Meijers BK, Bammens B, De Moor B, Verbeke K, Vanrenterghem Y and Evenepoel P. Free p-cresol is associated with cardiovascular disease in hemodialysis patients. *Kidney Int*. 2008;73:1174-80.

Supplemental Table IIA. Baseline characteristics of control cohort and severe carotid stenosis subgroup.

All values shown are median (interquartile range) or n (%). MI indicates myocardial infarction. CHF, congestive heart failure. ABI,

ankle-brachial index. LDL, low density lipoprotein. HDL, high density lipoprotein. eGFR, estimated glomerular filtration rate. hs-

CRP, high-sensitivity C-reactive protein. CEA, carotid endarterectomy.

Supplemental Table IIB. Odds ratios for carotid stenosis obtained from logistic models, each involving individual metabolites separately, adjusted for diabetes mellitus, hypertension, smoking, and HDL cholesterol.

Supplemental Table III. Plasma concentrations of certain metabolites stratify by procedure type in the advanced atherosclerosis cohort.

Supplemental Table IV. Spearman correlation coefficients between metabolites using ln-transformed values.

Indole and indole derivatives

Phenyl derivatives

CRP, C-reactive protein