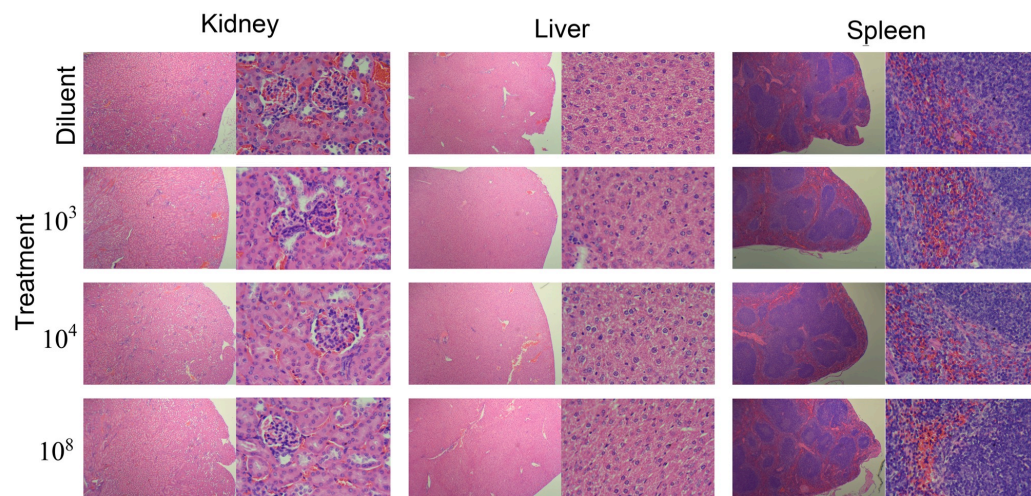
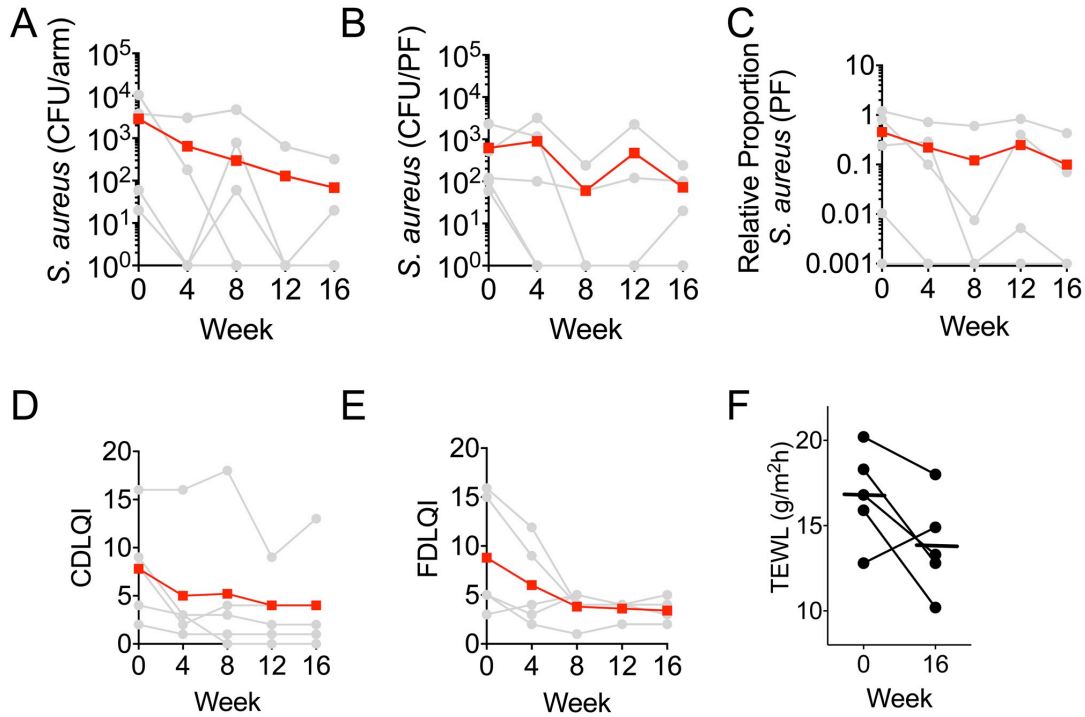


750 Supplemental Figure 1  
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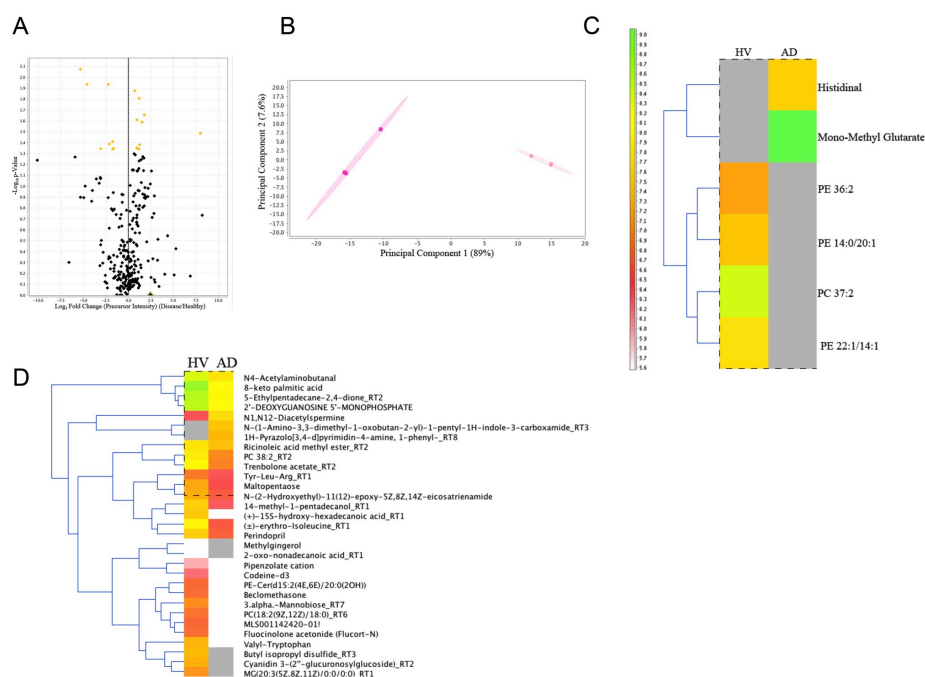


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**Intravenous injection of *R. mucosa* is non-toxic in mice.** Wild type (C57BL/6) mice were injected with diluent or *R. mucosa* IV at  $10^3$ ,  $10^4$ , or  $10^8$  CFU in 100mcL of volume. Weights and activities were monitored daily for 10 days. On day 10 the kidney, liver, and spleen were harvested and compared histologically (N = 5 mice per group). Representative images from one mouse per group at both 4x and 20x magnification are shown. Studies were conducted with the therapeutic *R. mucosa* strains included in the clinical trial as well as ATCC BAA-692.



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769 ***R. mucosa* treatment secondary measurements.** (A-B) *S. aureus* burden for antecubital (A)  
770 and popliteal (PF; B) fossae. (C) Ratio of *S. aureus* to coagulase negative *staphylococci* for the  
771 popliteal fossae during treatment. (D-E) Mean (scarlet) and individual (gray) values for the  
772 Children's (D) and Family (E) Dermatology Quality Life Index (CDLQI and FDLQI) are shown.  
773 (F) Mean (lines) and individual (dots) of trans-epidermal water loss (TEWL) measurements at  
774 enrollment (week 0) and post-treatment (week 16).  
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782 **Metabolic profiles from strains of *R. mucosa* differ in ways consistent with atopic**  
783 **dermatitis pathology.** Bacterial pellets from three strains from healthy volunteers (HV)  
784 and three from patients with atopic dermatitis (AD) were grown to mid-exponential phase, pelleted,  
785 frozen, and sent for metabolomic comparison by RPLC (A-C) or HILIC (D). (A) Volcano plot  
786 of significance vs. fold-change for differentiating metabolites. Yellow dots indicate significant  
787 differences prior to family-wise error rate (FWER) adjustment. (B) Principal component analysis  
788 for the six strains (HV strains dark pink, AD strains light pink). (C) Heat map for log<sub>10</sub>  
789 transformed peak area counts of metabolites statistically significant after FWER adjustment. (D)  
790 As in C, using HILIC prior to FWER adjustment. PE = phosphatidylethanolamine, PC =  
791 phosphatidylcholine. Gray indicates no mass spec signal seen for the indicated metabolite in any  
792 of the three isolates tested. Full dataset uploaded to Metabolomics Workbench.  
793

727 **Table S1: Treatment related and emergent unexpected problems and adverse events**

	Adult cohort (n=10)	Pediatric cohort (n=5)
Treatment-related unexpected problems*, n (%)		
Application site pruritus	0	1 (20)
Treatment-related adverse events§, n		
Application site pruritus	0	0
Application site pain	0	0
Fever	0	0
Discoloration	0	0
Worsening pruritus	0	0
Worsening SCORAD	0	0
Infection, skin	0	0
Infection, other	0	0
Injury	0	0
Headache	0	0
Cough	0	0
Lab abnormalities (see methods)	0	0
Treatment-emergent adverse events#, n	0	0

728 \*Problems related to therapy by timing; self-limited and did not interfere with patient's daily  
 729 activities or treatment compliance.

730 §Problems related to therapy by timing; persistent and/or interfering with patient's daily  
 731 activities or treatment compliance.

732 #Problems related to therapy by timing; requiring any medical intervention.

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Demographics Adult Cohort				Intake SCORAD		PMHx	Home AD Regimen	Antecubital SCORAD			Pruritus			FHx
Patient	Sex	Age	Race	Pre	Post			Pre	Post	Change	Pre	Post	Change	
1	F	43	W	27.9		AR	E, CS	11	9	-18%	8	6	-25%	Y
2	F	31	H	27.4		AR	E, CS	10	1	-90%	5	0	-100%	N
3	F	34	A	33.6		FA	E, CS, AH	17	6	-65%	10	4	-60%	N
4	F	40	W	21.2		--	E, CS	5	0	-100%	8	0	-100%	N
5	F	65	W	11.9		Dyslipid.	E	5	0	-100%	4	0	-100%	Y
6	F	70	W	16.2		CD, DA	E, CS, AH, Ω3	4	0	-100%	2	0	-100%	N
7	M	19	H	58.9		AS	E, CS	15	4	-73%	5	1	-80%	N
8	F	43	W	40.1		--	E, CS	13	12	-8%	5	4	-20%	Y
9	F	19	A	17.2		--	E, CS	4	4	0%	2	0	-100%	U
10	F	55	W	40.5		FA	E, CS, CI	9	5	-44%	3	0	-100%	N
<i>Mean</i>				29.5		--	--	9.3	4.1**	-59.8%***	5.1	1.6**	-78.5%	--

Demographics Pediatric Cohort				IgE		PMHx	Home AD Regimen	SCORAD			Pruritus			FHx
Patient	Sex	Age	Race	Pre	Post			Pre	Post	Change	Pre	Post	Change	
P1	F	9	W	26.2	16.8	AR	E, CS, AH	12.8	7.9	-38.3%	3.5	1	-71.4%	Y
P2	M	14	W	381	360	FA	E, CS, AH	34.3	16.1	-53.1%	8	3	-62.5%	N
P3	F	10	W	1163	1256	AS, FA, AR	E, CS, AH	37.7	0	-100%	7.5	0	-100%	N
P4	F	10	H	4.5	3.9	AS, AR	E, CS	23.3	0	-100%	7.5	0	-100%	N
P5	F	9	W	6920	4855	AS, FA, AR	E, CS, AH	48.1	19.1	-60.3%	5	2	-60%	N
<i>Mean</i>				8495	6492	--	--	31.2	8.62*	-70.3%	6.3	1.2**	-78.8%	--

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736 **Table S2: Patient demographics and treatment response.** Demographic, past medical history  
737 (PMHx), home regimen, pre and post-treatment antecubital SCORAD values, subjective pruritus  
738 scores, presence of family history of AD persisting into adulthood (FHx) are shown for all  
739 participants. A = asthma, FA = food allergy, AR = allergic rhinitis, CD = contact dermatitis, DA  
740 = drug allergy, Dislipid = dyslipidemia. E = emollients, CS = corticosteroids, AH =  
741 antihistamine, Ω3 = omega-3 fatty acid, and CI = calcineurin inhibitors. W = white/Caucasian, H  
742 = Hispanic, and A = Asian or Asian Pacific Islander. F = female, M = male, Y = yes, N = no, U  
743 = unknown. Note, pruritus scores indicate reported score for total body while antecubital  
744 SCORAD represents objective intensity plus pruritus score for antecubital region only.  
745 Statistical significance in pre- versus post-treatment values determined by two-tailed Student t  
746 test and non-parametric Wilcoxon matched-pairs. \* = p value <0.05, \*\* = p value <0.01, \*\*\* = p  
747 < 0.001.

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