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## **Supplemental Information**

### **Human Organ-Specific**

#### **Endothelial Cell Heterogeneity**

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## **Transparent Methods**

*Isolation and culture of organ specific endothelial cells.* All experiments were approved by the Institutional Review Board of the University of Washington (IRB447773EA). Normal human fetal organs were obtained upon informed consent from abortion material (age 16-20 weeks) and the same donor tissues (kidney, lung, liver, and heart) were used to isolate organ specific endothelial cells. Tissues were minced finely in serum-free EBM-2 endothelial growth medium (Lonza) supplemented with 0.2 mg/ml Liberase and 100 U/ml DNase (Roche) and incubated for 30 min at 37 °C in a water bath with shaking. The resulting tissue homogenate was filtered twice through a 40 µm cell strainer to remove tissue debris and large vessels. For the isolation of fresh endothelial cells, EpCAM-positive cells were depleted first from the cell suspension using EpCAM microbeads (Miltenyi Biotec), followed by the depletion of CD45-positive cells using CD45 MicroBeads (Miltenyi Biotec). Then the CD144 positive cells were magnetically separated using CD144 MicroBeads (Miltenyi Biotec) on 2 different columns. For cultured endothelial cells, the cell suspension was plated on gelatin coated T-75 flasks in EBM-2 medium supplemented with antibiotic/antimycotic (Invitrogen), 10% FBS (Invitrogen), 100 µg/ml ECGS (Millipore), 50 µg/ml Heparin (Invitrogen), and 40 ng/ml VEGF (R&D Systems). For kidney and lung samples, epithelial cells were removed from the cell suspension before plating using EpCAM microbeads (Miltenyi Biotec) to prevent epithelial cell overgrowth. Cells were cultured at 5% O<sub>2</sub> until confluent and then endothelial cells as the CD144 positive and CD45 negative population were sorted on BD FACSAria II at the UW SLU Flow Cytometry Facility. After sorting, organ specific endothelial cells were cultured in EBM-2 supplemented with antibiotic/antimycotic, 10% FBS, 100 µg/ml ECGS, 50 µg/ml Heparin, and 20 ng/mL VEGF, on gelatin-coated plates and used for further experiments between passages 1-3.

*Histology.* Human fetal organs (kidney, lung, liver and heart) were embedded in Tissue-Tek O.C.T. compound (Sakura) and kept as frozen blocks at -80 °C. Frozen organ sections were cut to a thickness of 9 µm using a cryostat (Leica CM 1850) and placed on HistoBond adhesive glass slides (Marienfeld). The glass slides were air-dried for 30 min

and fixed in 4% formaldehyde. Fixed tissues were stained with hematoxylin and eosin (H&E).

*Immunofluorescence.* Tissue cryosections and organ specific endothelial cells plated on gelatin-coated glass slides were fixed with 3.7% formaldehyde, permeabilized with 2% BSA and 0.5% Triton x-100 in PBS, blocked with Background Buster (Innovexbio), and incubated overnight at 4 °C with primary antibodies against CD31 (Life Technologists), CD144 (Abcam), PLVAP (Abcam), Caveolin-1 (Abcam), vWF (Abcam), ART4 (Bioss Inc), TBX5 (Santa Cruz Biotechnology), HNF1B (Abnova), and KCNJ16 (LSBio), followed by Alexa-488, -568, or -647 secondary antibodies (Invitrogen) and Hoechst (Life Technologies) staining. Cells were imaged with a Nikon Confocal microscope or Nikon wide field microscope using 20X and 40X objectives. Image analysis was performed using the Image J software (U.S. National Institute of Health, Bethesda, Maryland).

*Flow cytometry analysis.* To characterize single endothelial cell populations within each fetal organ, multiparameter FACS analysis of stained organ suspensions was performed on a BD FACSCanto II and quantitated with FlowJo software (Tree Star). The following antibodies were used: APC-anti-CD144 (eBioscience), FITC-anti-CD31 (BD Biosciences), Pacific Blue-anti-CD45 (BioLegend), FITC-anti-CD34 (BD Biosciences), PE-anti-EphB4 (R&D systems), FITC-anti-gp38 (R&D systems), FITC-anti-Robo1 (R&D system), PE-anti-CD144 (BioLegend), APC-anti-PDGFR $\beta$  (BioLegend), PE-anti-EpCAM(Miltenyi Biotec), PE-anti- $\alpha$ -SMA (R&D systems) and FITC-anti-NG2 (R&D systems). Unstained controls, single stained cellular controls, and single stained BD™ CompBead particles were used for compensation and voltage adjustment. Isotype control antibodies were used to distinguish non-specific background signals from specific signals.

*RNA isolation, RNA sequencing and RT-PCR.* Total RNA from cultured and freshly isolated organ specific endothelial cells was purified using the RNAeasy Mini Kit (Qiagen) and residual DNA was removed by on-column DNase digestion. RNA quality was assessed with the Agilent RNA 6000 Nano Kit using the Agilent 2100 Bioanalyzer

(Agilent Technologies). Only samples with RNA integrity number higher than 8 were kept for further analysis. RNA sequencing was performed on poly-A-enriched samples using Illumina TruSeq. RT-PCR was performed using the Real-time PCR System (Applied Biosystems) with Fast SYBR Green Master Mix (Applied Biosystems). The abundance of each gene was determined relative to an internal control using GAPDH RNA.

*RNA-seq data analysis.* RNA-seq samples were aligned to hg19 using Tophat (Trapnell et al., 2009). Gene-level read counts were quantified using htseq-count (Anders et al., 2015) using Ensembl GRCh37 gene annotations. Genes with total expression above 10 normalized read counts summed across RNA-seq samples were kept for further analysis. princomp function from R was used to for Principal Component Analysis. DESeq (Anders and Huber, 2010) was used for differential gene expression analysis. Genes with fold change >1.5 and FDR<0.05 were considered differentially expressed. topGO R package (Alexa et al., 2006) was used for Gene Ontology enrichment analysis. The gene expression data set has been submitted to the public database in Gene Expression Omnibus.

*Western blot analysis.* Cells and tissues were lysed in RIPA buffer (Sigma) supplemented with protease inhibitor cocktail (Thermo Scientific). 3 µg proteins were electrophoresed on NuPAGE 4-12% Bis-Tris Acrilamide gels (Invitrogen), transferred on PVDF membrane and probed overnight at 4°C with primary antibodies against Von Willebrand Factor (Abcam), caveolin (Abcam), PV1 (Abcam) and GAPDH (Cell Signaling). HRP-conjugated secondary antibodies (Thermo Scientific) were used for detection.

*Endothelial barrier function measurements.* The EC barrier function was evaluated by real-time measurements of electrical impedance with the xCELLigence RTCA SP instrumentation (ACEA Bioscience, Inc.). Organ specific endothelial cells were plated in a 96-well electronic microtiter plates (E-Plate 96, ACEA Bioscience, Inc.), 10,000 cells/well, and allowed to reach cellular confluence, as indicated by plateau values obtained for the electrical impedance (60-68 hours). At plateau, the electrical impedance

readout expressed in arbitrary units as the Cell index parameter, reflects changes in barrier function and permeability of different endothelial cells.

*Spheroid sprouting assay.* Endothelial spheroids containing 1000 cells/spheroid were generated using the “hanging drop” technique in endothelial growth medium with 20% Methocel solution (2% Methyl cellulose (Sigma) in EBM2 growth medium). Spheroids were plated into 24 well plates, 40 spheroids/well, embedded in 2 mg/ml type I collagen and 30% Methocel matrix, overlaid with endothelial growth medium supplemented with 40 ng/ml VEGF. Spheroids were allowed to sprout for 24-48 hours and imaged using a 10x objective. Sprouts number and length were quantified using the Image J software (U.S. National Institute of Health, Bethesda, Maryland).

*Fabrication of vascular networks.* Three-dimensional, perfusable vascular networks were fabricated as described previously (Zheng et al., 2012). Briefly, microvessels were fabricated by seeding organ specific endothelial cells in microfluidic channels embedded in 6.5 mg/ml type I collagen matrix. The networks were cultured with gravity-driven flow of endothelial growth medium for 5 days, fixed and employed for either electron microscopy or confocal microscopy imaging.

*Transmission electron microscopy.* Microfluidic vascular networks were fixed by perfusion in 2.5% glutaraldehyde for 20 min followed by immersion in half-strength Karnovsky’s solution (2% paraformaldehyde/2.5% glutaraldehyde in 0.2M cacodylate buffer) for 4 hr. These samples were rinsed in 0.1M cacodylate buffer then post-fixed using 2% OsO<sub>4</sub> in 0.2M cacodylate buffer followed by another rinse with 0.1M cacodylate buffer. Sample dehydration was performed using immersions in graded solutions of ethanol, then propylene oxide (PO), before 1:1 PO/Epon 812 (vendor) immersion overnight. Fresh Epon 812 was then exchanged for 2 hr after which the blocks were cured for 48 hr at 60°C. Ultrathin sections (70 nm) were cut from blocks using a diamond (vendor) blade on a Leica EMUC6 ultra-microtome and placed onto grids. Grids were stained with uranyl acetate for 2 hr and lead citrate for 5 min. Sections were imaged using a JEOL JEM-1400 Transmission Electron Microscope (JEOL Ltd., Japan) using a

typical acceleration voltage around 100 kV. Images were acquired with a Gatan Ultrascan 1000XP camera (Gatan, Inc., Pleasanton, CA).

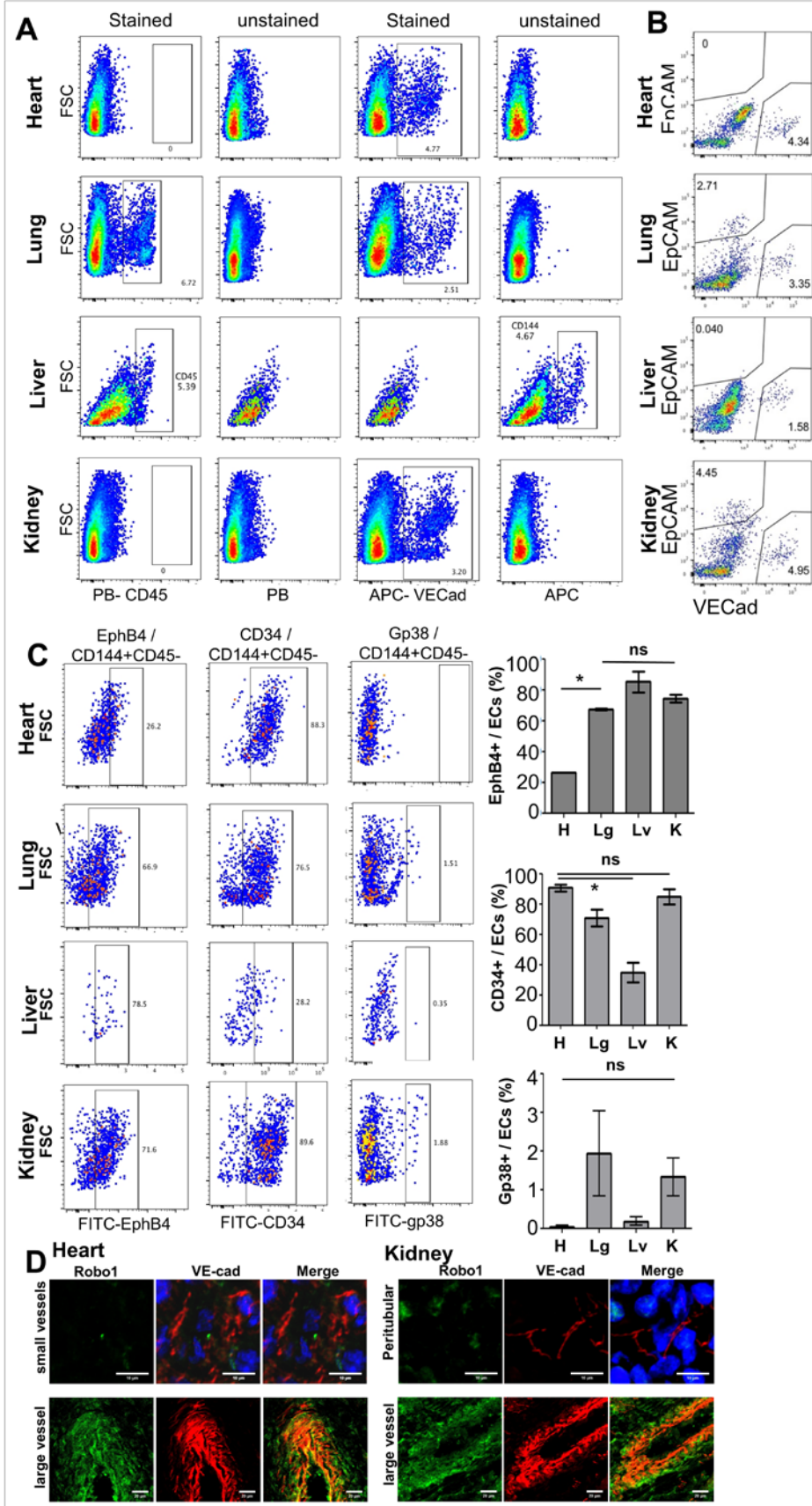
*Metabolism.* Oxygen consumption rate (OCR) and extracellular acidification rate (ECAR) were measured using the XF96 Seahorse Analyzer (Seahorse Bioscience). ECs were plated into 96-well Seahorse assay plates in complete growth medium, 7000 cells/well, 3 days before measurements. OCR and ECAR measurements were performed in XF Assay medium (Seahorse Bioscience), supplemented with 5 mM glucose, 1 mM sodium pyruvate and 10 mM glutamine, at 9 minutes intervals. Time course of OCR and ECAR was performed upon sequential addition of Oligomycin (1  $\mu$ M), CCCP (1  $\mu$ M), and Rotentone/Antimycin (1  $\mu$ M each). At the end of the measurements, the protein content for each well was quantified, and OCR and ECAR values were normalized per microgram of protein for each cell type.

*Hepatocyte isolation, culture, and functional analysis:* Hepatocytes were isolated from 100-140g adult female Lewis rats (Taconic), as described previously.(Dunn et al.) Briefly, the animals were anesthetized using isoflurane, the portal vein was cannulated with an 18G catheter, and the liver was perfused and digested with collagenase type IV (Sigma). Hepatocytes were purified via Percoll centrifugation and seeded at a density of 0.3e06 hepatocytes per well onto 24-well plates coated with 0.17 mg/ml rat tail Collagen-1 (BD Biosciences). The next day, normal human dermal fibroblasts (Lonza, ratio of 1:1) or fetal (isolated) liver, kidney, heart, lung, or human umbilical vein (Lonza) endothelial cells (ratio of 1:0.3) were seeded onto the hepatocytes. Cultures were maintained for eight days in a 1:1 mixture of “hepatocyte medium” [DMEM with high glucose (4.5g/L), 10% (v/v) fetal bovine serum (Biowest), 0.04 ug/ml dexamethasone, 7 ng/ml glucagon, 1% ITS+ culture supplement (Corning), 1.5% 1M HEPES, and 1% penicillin-streptomycin] and “endothelial medium” [EBM-2 supplemented with antibiotic/antimycotic, 10% FBS, 100  $\mu$ g/ml ECGS, 50  $\mu$ g/ml Heparin, and 20 ng/mL VEGF]. Culture media was collected daily from each well before replacement with fresh medium. Rat albumin in collected media was measured via enzyme-linked immunosorbent assay (Bethyl labs). After 7 days, cultures were fixed and hepatocytes were stained against pan cytokeratin (Sigma) and

endothelial cells against VE-Cad and PV-1. The immunofluorescence images were taken in Nikon wide field microscope using 20X and 40X objectives.

## References

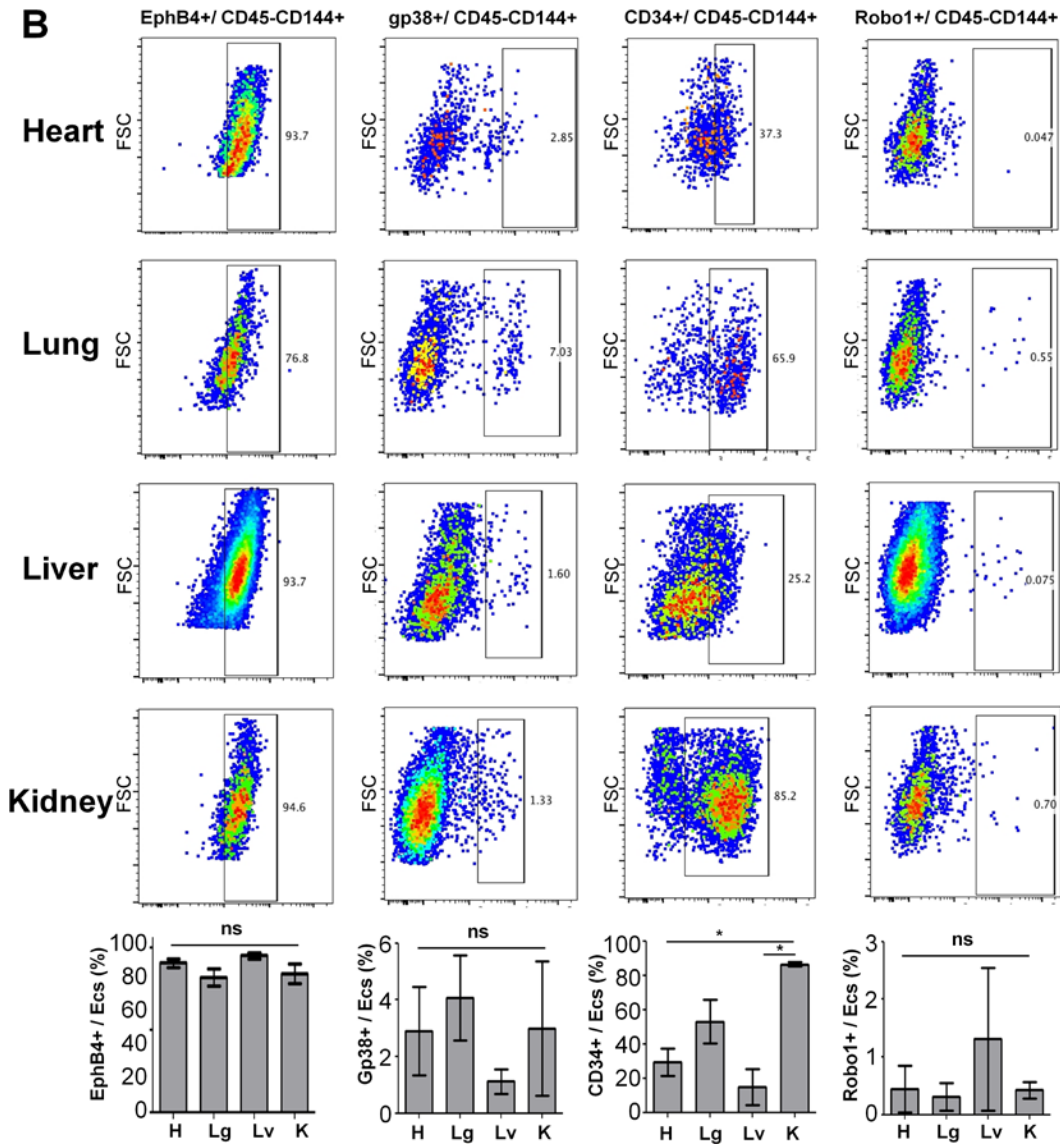
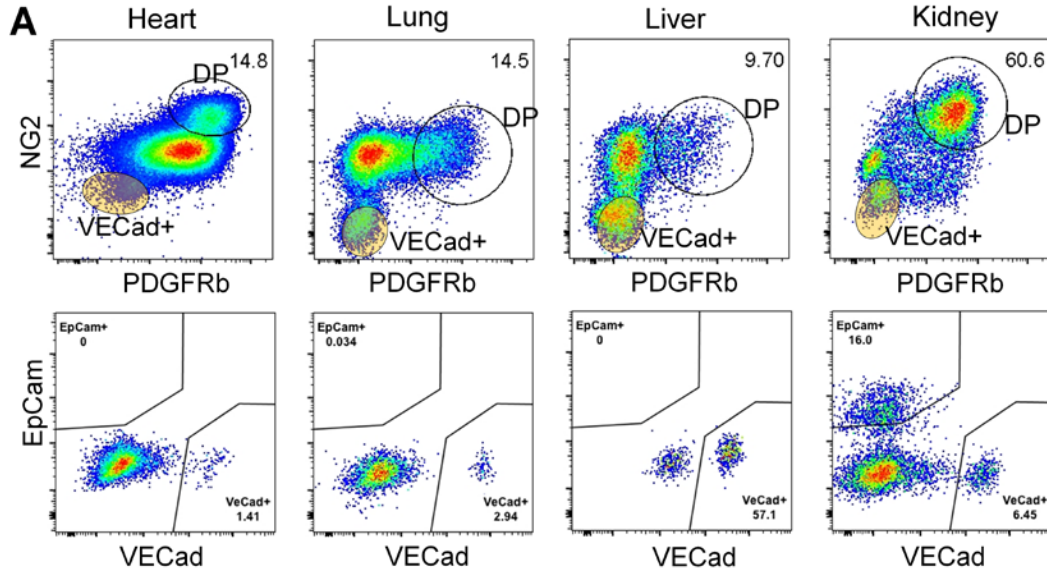
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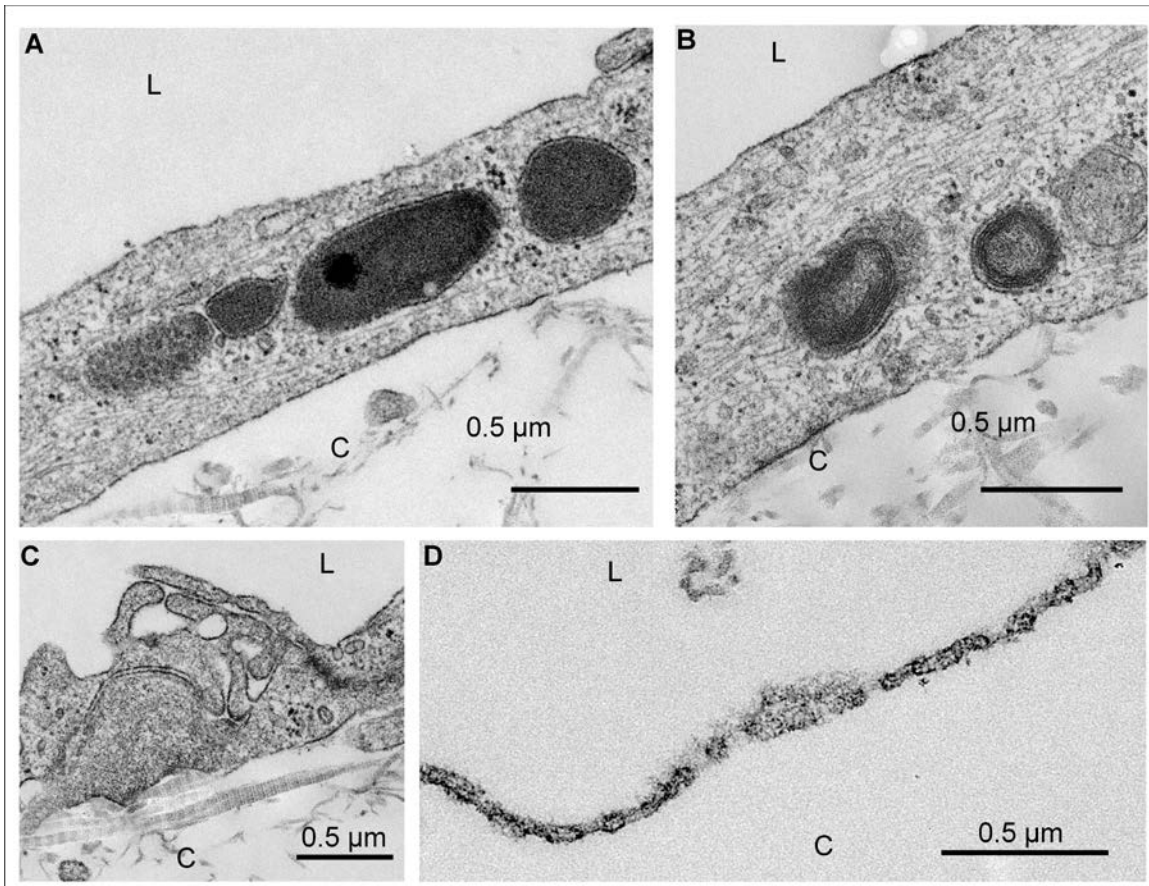


**Fig. S1, related to Fig. 1. Characterization of cell population in human fetal tissue.**

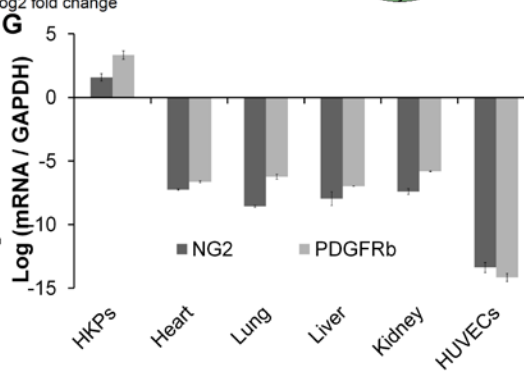
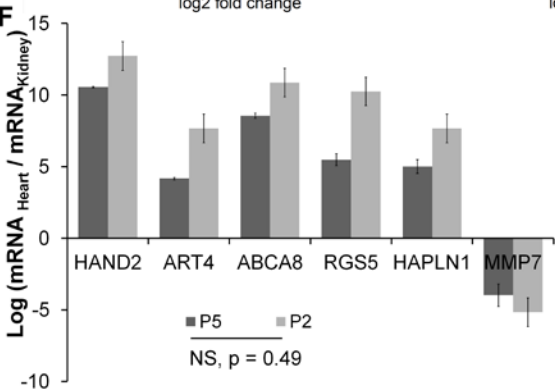
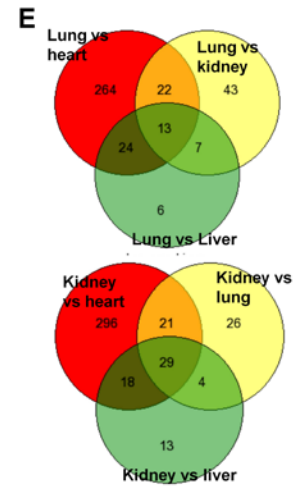
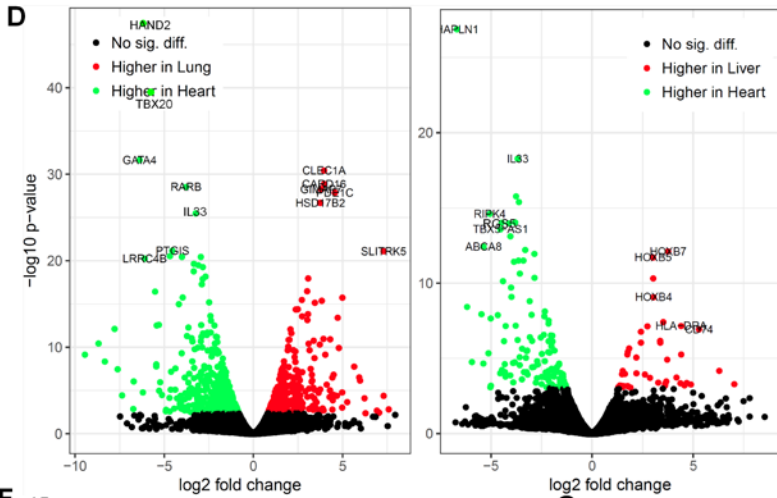
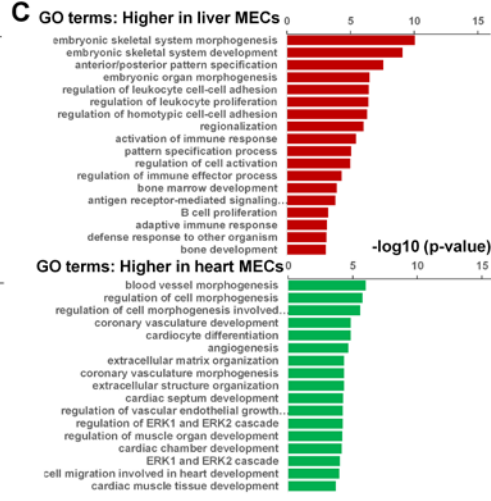
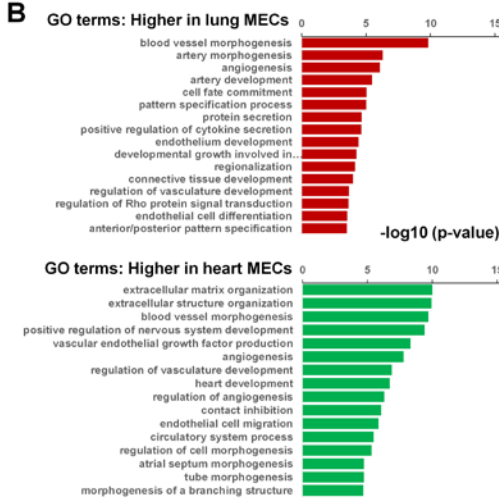
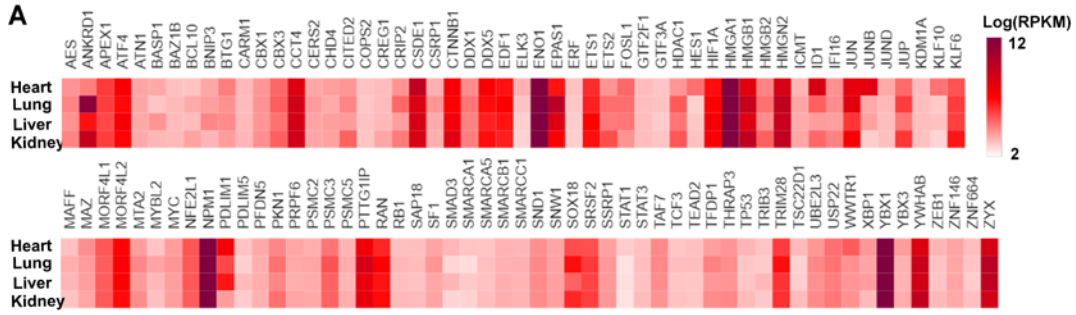
**A-B.** Representative flow cytometry profiles of fresh total cell tissue suspension from fetal human heart, lung, liver and kidney stained with antibodies (A) against CD45 and CD144 (VECad), in comparison with unstained controls, and (B) VECad and EpCam. **C.** Flow cytometry analysis of EC population in fresh fetal tissue for EphB4+, CD34+, and Gp38+ with quantification for three donor sets. **D.** Representative immunofluorescence images of small vessels and large vessels in frozen heart and kidney tissue sections stained with antibodies against Robo1 and VECad.



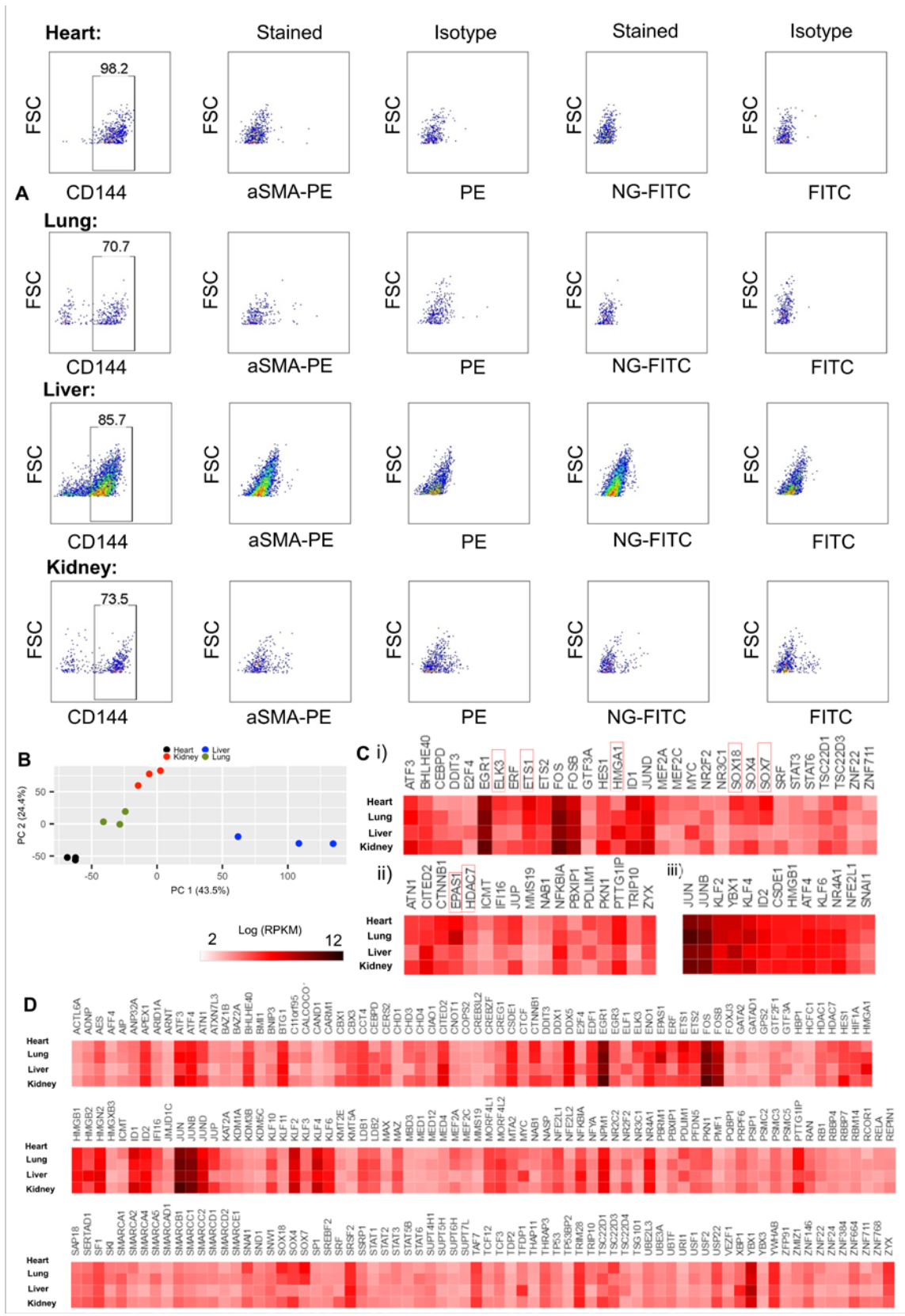
**Fig. S2, related to Fig. 2. Analysis of enriched cell suspension.** A. Representative flow cytometry and sorting profiles of enriched cell suspension from fetal human heart, lung, liver and kidney, stained with antibodies against NG2 and PDGFRb, with VECad+ population from Fig.2A marked as orange circles. B. Flow cytometry analysis of cultured human heart, lung, liver, and kidney EC populations for EphB4+, Gp38+, CD34+ and Robo1+.



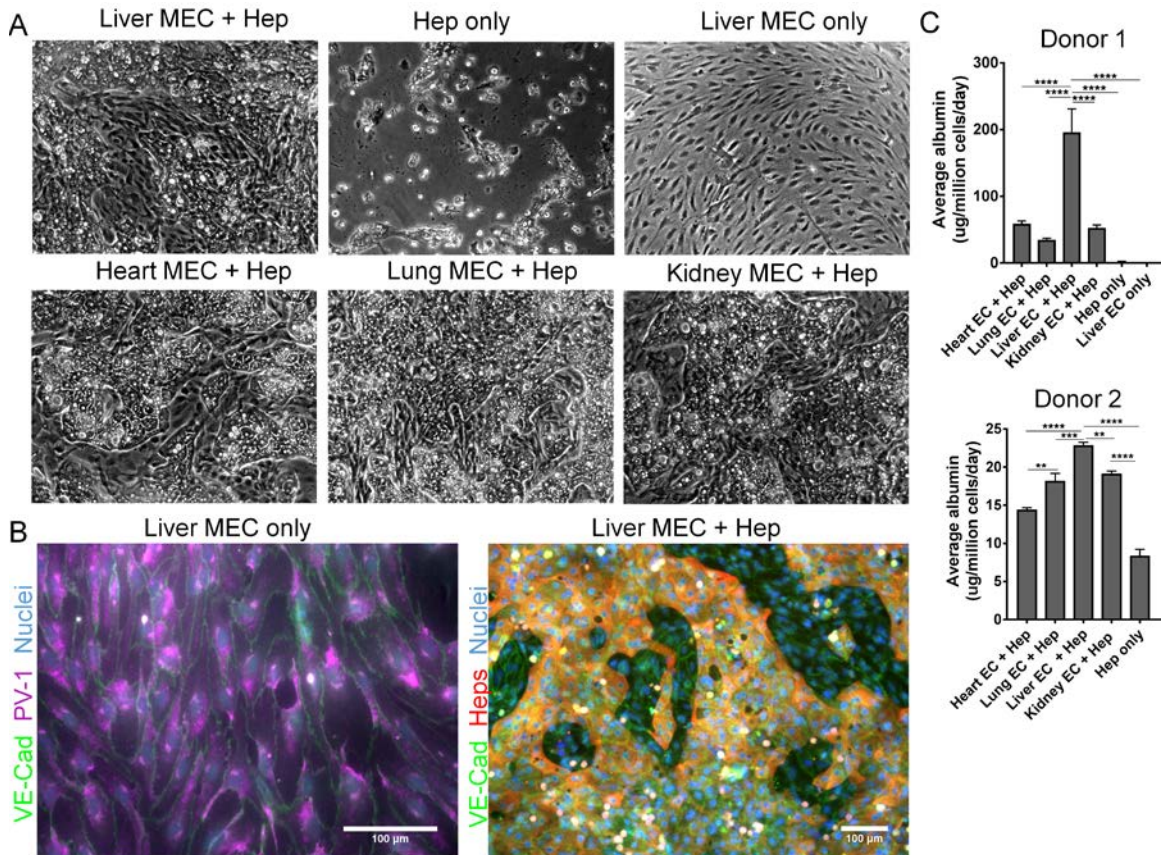
**Fig. S3, related to Fig. 3. Ultrastructural images of human fetal liver ECs.** A-B. Ultrastructural images of multivascular bodies, lysosomes, and other intracellular features in liver ECs. C-D. Sinusoidal and fenestrated features on liver EC membranes.



**Fig. S4, related to Fig. 4. Global RNA sequencing analysis for four types of human fetal ECs and gene validation.** **A.** Top expressed transcripts (107 TFs) for organ-specific ECs. Colormap: log(RPKM). **B-C.** Gene Ontology terminology analysis for lung vs. heart (B) and liver vs. heart (C) differentially expressed EC genes. **D.** Volcano plots of  $-\log_{10}$  p-value vs.  $\log_2$  fold change for lung vs. heart (left), and liver vs. heart (right) differentially expressed EC genes. **E.** Venn diagram showing organ-specific, differentially expressed genes for the lung and kidney ECs. **F.** Log fold changes of selected gene expression comparing heart vs. kidney ECs at passage 2 and 5, showing no significant difference. **G.** mRNA expression of NG2 and PDGFRb comparing four isolated and cultured fetal ECs with HUVECs and human kidney pericytes (HKPs), the isolated NG2+PDGFRb+ population shown in Supplementary Fig. 2.



**Fig. S5, related to Fig. 5. Characterization of freshly isolated ECs.** **A.** Representative flow cytometry analysis of freshly isolated ECs via MACS column purification from fetal human heart, lung, liver and kidney stained with antibodies against CD144 (VECad),  $\alpha$ -SMA and NG2, in comparison with isotype controls. **B.** 2D principal component analysis of RNA sequencing data shows organ-specific clusters. **C.** Heat map of differentially expressed transcription factors (TFs) (i) and co-factors (ii), and other top expressed TFs (iii) in top 20% expressed transcripts in freshly isolated ECs. **C.** Heat map of the top 20% expressed TFs and co-factors in freshly isolated heart, lung, liver and kidney ECs. Colormap:  $\log(\text{RPKM})$ .



**Fig. S6, related to Fig. 6. Human fetal liver ECs superiorly support hepatocytes function.** A. Bright field images of 2-D culture after 7 days for EC co-cultured with hepatocytes, hepatocytes alone, or liver ECs alone. B. Immunofluorescence image of liver ECs alone and them co-cultured with hepatocytes after 7 days. Hepatocytes were stained with anti-cytokeratin. C. ELISA measurement of albumin production from rat hepatocytes when cultured alone and co-cultured with heart, lung, liver and kidney ECs after 7 days for two donor sets with four replicates in each donor.

Data information: data is presented as mean  $\pm$  SEM. \* $p \leq 0.05$ , \*\*  $p \leq 0.01$ , \*\*\* $p \leq 0.001$ , \*\*\*\* $p \leq 0.0001$ .