Targeting the HIV-infected brain to improve ischemic stroke outcome

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Supplementary Information



<u>Supplementary Figure 1. Post-ischemic stroke brain lesions as evaluated by TTC</u> <u>staining.</u> Representative images for each group and time point presented in Fig 1. Three 1 mm thick sections are shown, infarct area is visible by the absence of red TTC staining.

Supplementary Information



<u>Supplementary Figure 2. Microvessel visualization and quantification of ZO-1, ICAM-1</u> <u>and P-selectin.</u> Related to Figs. 2 and 3. Representative three panel presentation of the triple-stained brain sections for CD31 (green) and ZO-1 (A), ICAM1 (B), and P-Selectin (C) (all on red). Blue represent Hoechst nuclear staining. Left panels represent Mocktreated and right panels represent EcoHIV-infected mice. (A-C) Scale bars 40 µm.



<u>Supplementary Figure 3. Sensorimotor evaluation.</u> Related to Fig 8. Mice were infected, treated with ART-7 and ART-11, and subjected to stroke as in Figs 6 and 7, followed by evaluation for sensorimotor deficit using the corner test at days 1, 4, 7, and 14 post-ischemic stroke; n=9-20 per group, 8 assays per mice per time point, 2 independent experiments. Data presented as mean and SEM. Source data are provided as a Source Data file.*p<0.05 Sham vs EcoHIV. One-way ANOVA, followed by Tukey multiple comparison test.