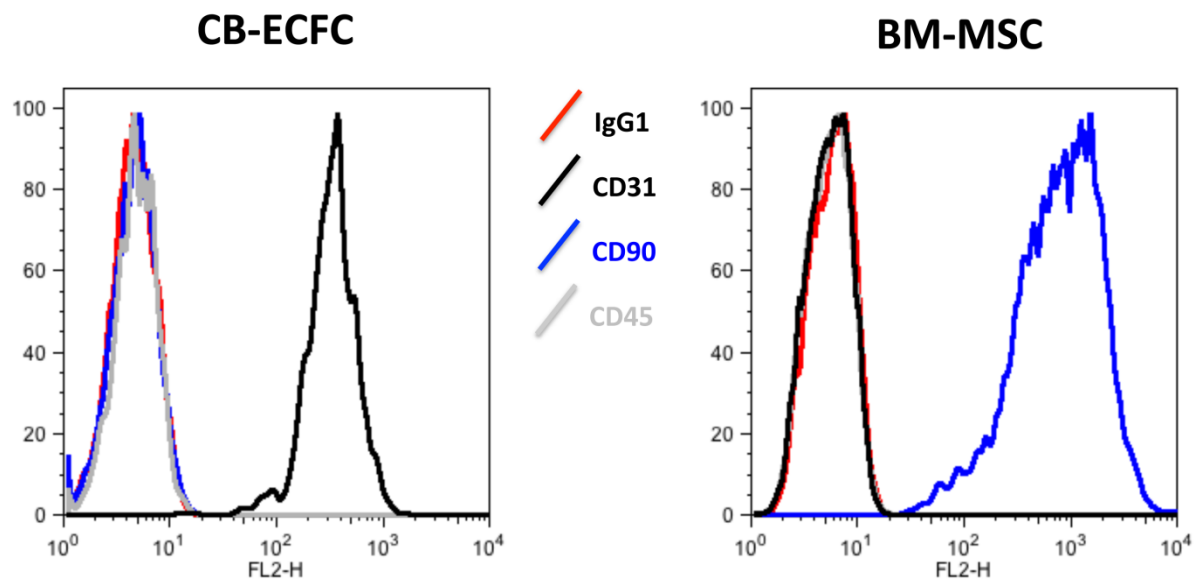
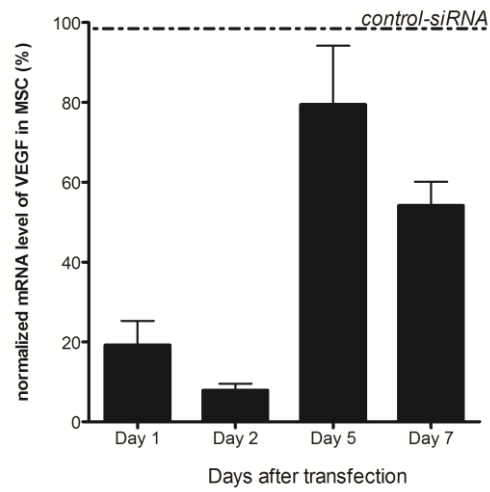


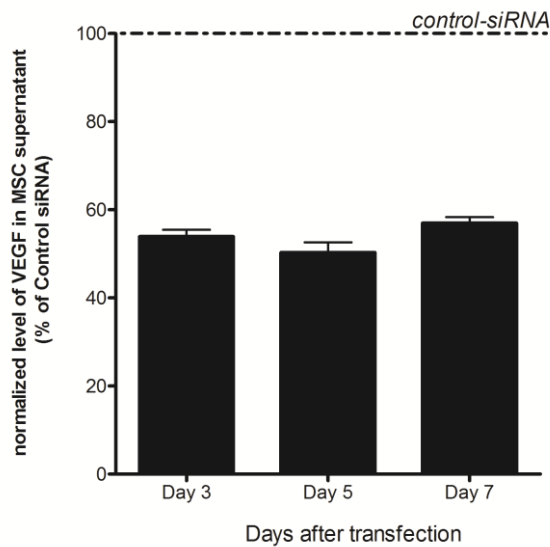
Supplementary Material to Smadja et al. ‘Treprostinil indirectly regulates endothelial colony forming cell angiogenic properties by increasing VEGF-A produced by mesenchymal stem cells’ (Thromb Haemost 2015; 114.4)



Suppl. Figure 1: Expression of endothelial (CD31), mesenchymal (CD90) and leukocytes (CD45) markers in CB-ECFC and BM-MSC. Cytometric analyses were carried out by labeling with phycoerythrin (PE)-conjugated mouse anti-human CD31 (Becton Dickinson), PE- conjugated mouse anti-human CD90 (Chemicon International), PE-conjugated mouse anti-human CD45 (Beckman Coulter). Antibody labeling was carried out for 20 minutes on ice followed by 3 washes with PBS/10% FBS. Flow cytometric analyses were performed using a Becton Dickinson FACScan flow cytometer and FlowJo software (Tree Star Inc., Ashland, OR).

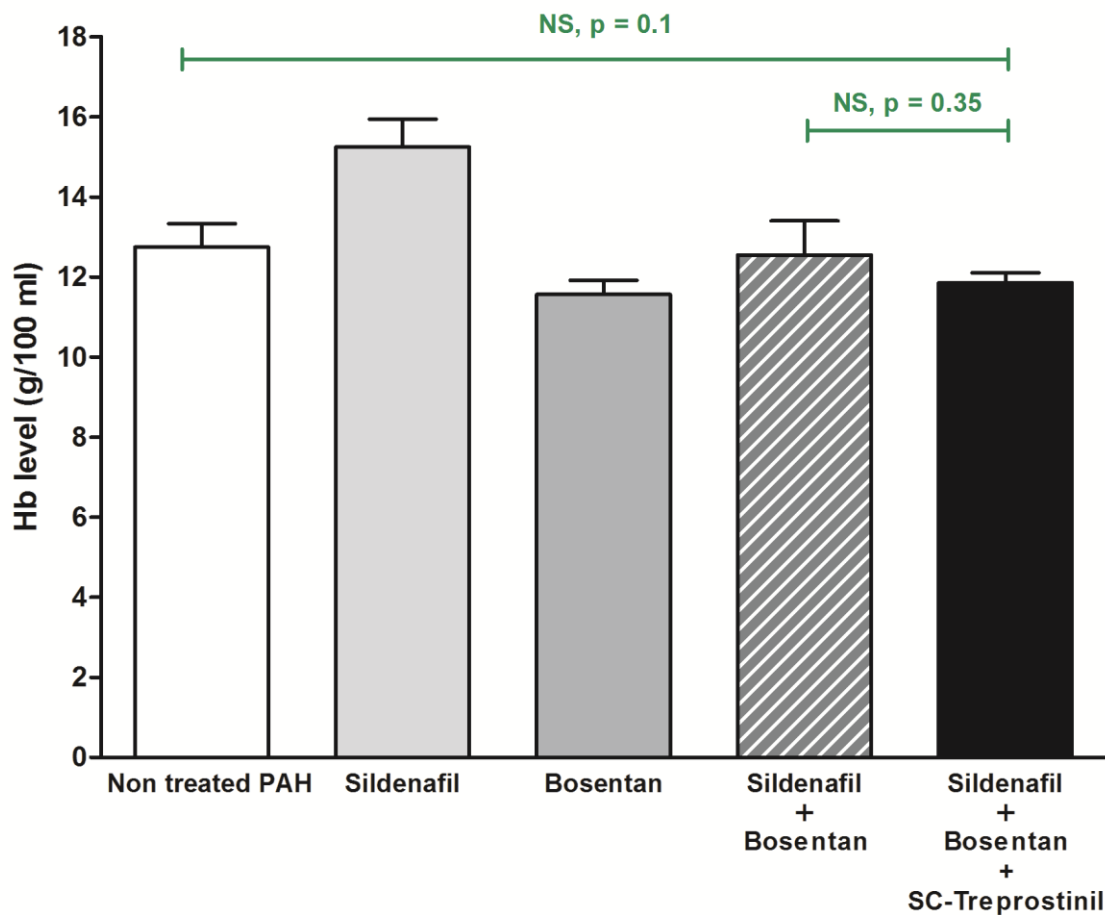


A



B

Suppl. Figure 2: Validation of *VEGF* gene silencing in siRNA-transfected-MSC. **A)** RT-qPCR: *VEGF*-siRNA-transfected MSC shows a 80 and 90% inhibition of *VEGF* mRNA expression level, compared to control-siRNA-transfected MSC at day 2. *VEGF*-siRNA-transfected MSC shows an increase of *VEGF* mRNA expression level, compared to control-siRNA-transfected MSC with a % of inhibition around 60 at day 5 and 7. **B)** *VEGF* quantification in MSC supernatant after transfection. *VEGF*-siRNA-transfected MSC shows a 50% inhibition of *VEGF* in supernatant from day 3 to 7.



Suppl. Figure 3: Hemoglobin levels in Treprostinil treated patients are not different from non-treated PAH or patient with oral treatment (sildenafil and/or bosentan). Compared to untreated PAH patients, no differences were observed in Hb level after subcutaneous treprostinil treatment (respectively with a $p=0.1$ vs none treated PAH patients and $p=0.35$ vs oral sildenafil and bosentan treated patients).