

**GLUT1 inhibition blocks growth of RB1-positive Triple  
Negative Breast Cancer**  
Wu et.al

## Supplementary Table

Inhibitors	Target	Glut1 selectivity	Reference
STF31	GLUT1; NAMPT	n.d	1,2
WZB-117	GLUTs	inhibits glucose transport and cancer cell proliferation with IC <sub>50</sub> of 10 μM	3,4
Fasentin	GLUT1/GLUT4; Fas-Sensitizer	preferentially inhibits GLUT4 (IC <sub>50</sub> =68 μM) over GLUT1	5
BAY-876	GLUT1	oral bioavailable GLUT1 inhibitor with IC <sub>50</sub> of 2 nM; displays >100-fold selectivity against GLUT2, GLUT3, and GLUT4	6

**Supplementary Table 1: List of published inhibitors targeting glucose transporters 1.** Chemical probes, their respective target names, selectivity for GLUT1 and the references.

Advantages and disadvantages of 3D patient relevant pre-clinical models			
	Organoids	Explants	Xenografts
Intact tissue architecture	×	✓	✓
tumor heterogeneity	✓	✓	✓
Stromal-epithelial interactions	×	✓	✓
Immune system	×	limited	×
Highthroughput drug screening	✓	×	×
Long term functional assays	✓	×	✓
Quantitive measurements	✓	✓	limited

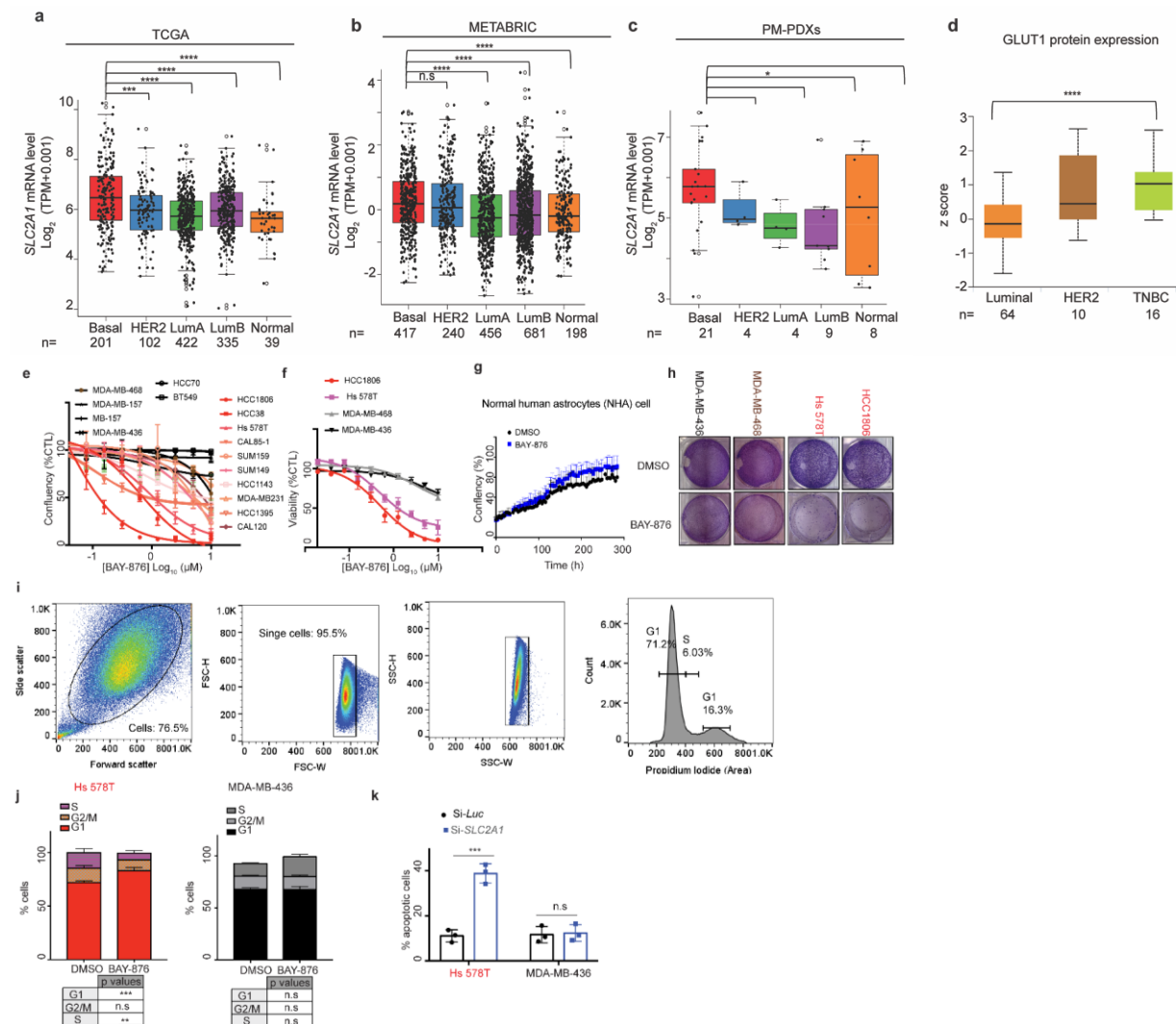
**Supplementary Table 2:** Table of advantages and disadvantages of 3D patient relevant pre-clinical models<sup>7-12</sup>.

Target	Sequence
Rb1-Fw	TTGGATCACAGCGATACAAACTT
Rb1-Rv	AGCGCACGCCAATAAAGACAT
ATP5D-Fw	TCCCACGCAGGTGTTCTTC
ATP5D-Rv	GGAACCGCTGCTCACAAAGT
SLC25A22-Fw	GCCAGCCAAGCTCATCAATG
SLC25A22-Rv	GAGGCAGTCGGACATGCTC
AIFM1-Fw	CGTGACTATGTGTTAAGTTTCTCGC
AIFM1-Rv	GTAATGTGCGTGTGAAGAGACTG
ATP6V0B-Fw	ATCATCTTCTGTGAGGCTGTGGC
ATP6V0B-Rv	AGACTCCACAGAAGAGGTTAG ACAG
TOMM40-Fw	GAGTTTGAGGCCAGCACAAG

TOMM40-Rv	ACCCACGATCCAGTTGCTAT
PGC1 $\alpha$ -Fw	TGAGAGGGCCAAGCAAAG
PGC1 $\alpha$ -Rv	ATAAATCACACGGCGCTCTT
NDUFA9-Fw	GTCACGTTCTGCCATTACTGC
NDUFA9-Rv	GGTGGTTGACAACATATCGCC
TIMM17A-Fw	GGTGGGGCCTTTACGATGG
NDUFA9-Rv	GCCCTGGTTTTAATAGCTGTCA

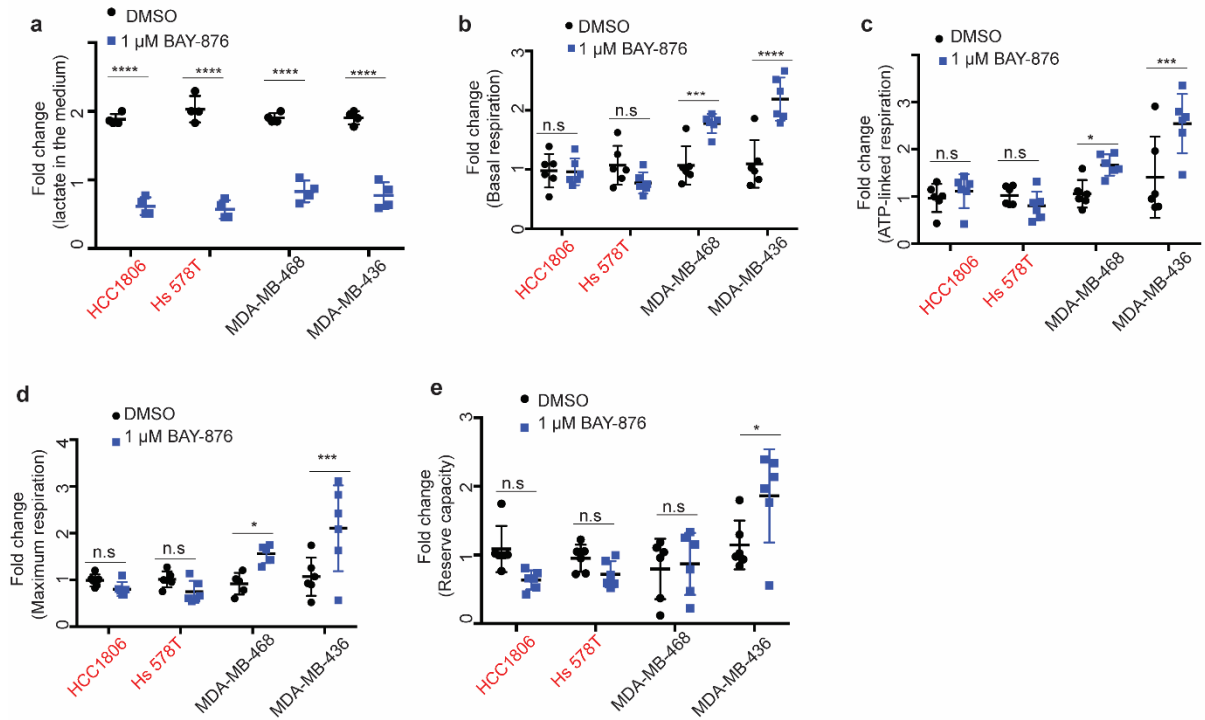
**Supplementary Table 3:** List of primers for qRT-PCR.

## Supplementary Figures:

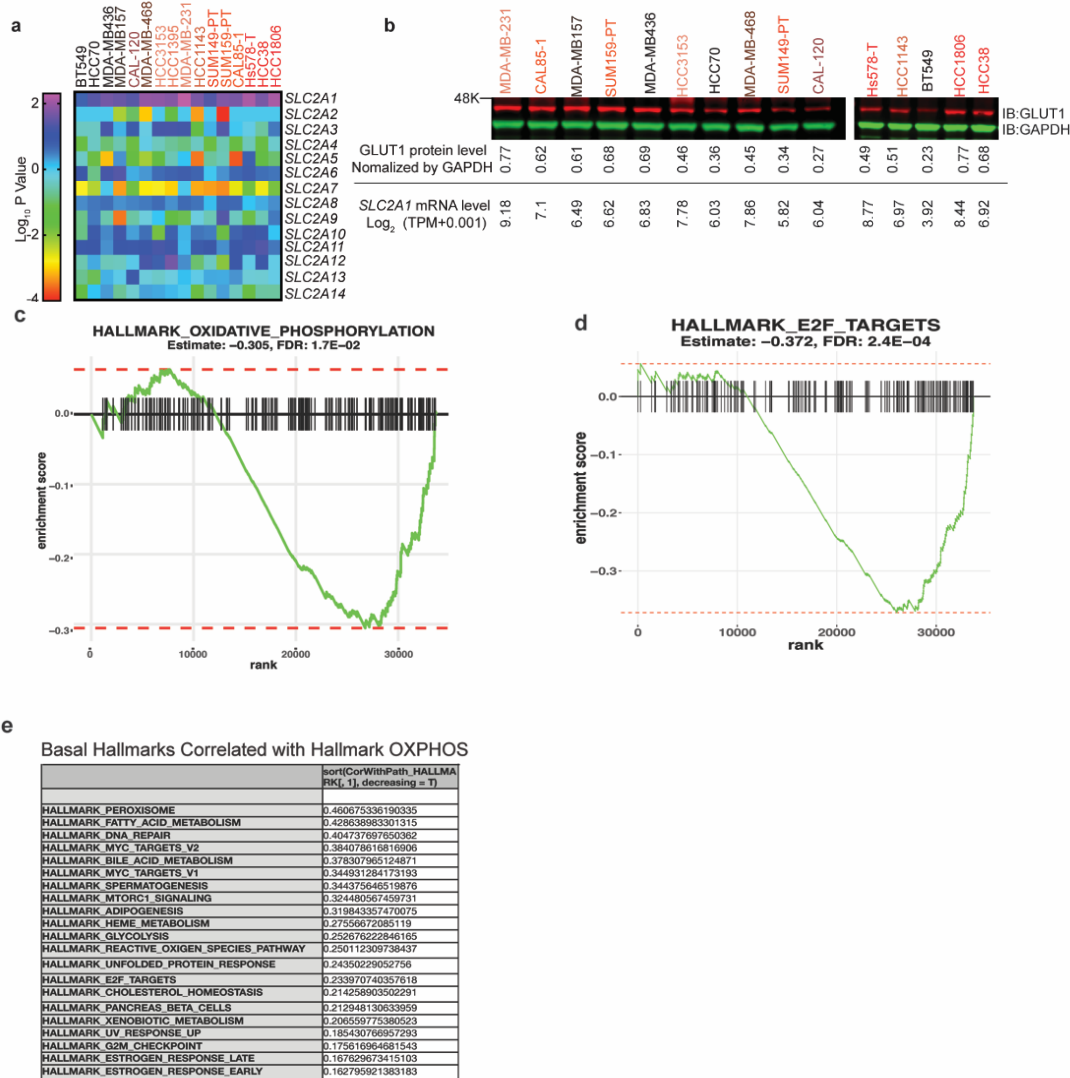


**Supplementary Figure 1:** GLUT1 inhibition suppresses the growth of a subset of TNBC lines. **(a)** *SLC2A1* gene expression in the **(a)** TCGA Breast datasets, **(b)** METABRIC Breast cancer datasets, and **(c)** Princess Margaret Hospital PDXs datasets (PM-PDXs). According to PAM50 classification, the cohorts were designated as basal, HER2, LumA, LumB and normal. Gene expression is reported as  $\text{log}_2$ (TPM+0.001). The number of patients (n) per group is indicated. Wilcoxon rank sum test. \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ . **(d)** GLUT1 protein expression in Clinical Proteomic Tumor Analysis Consortium (CPTAC) Confirmatory/Discovery dataset. Z-values represent standard deviations from the median across samples for the given cancer type.  $\text{Log}_2$  Spectral count ratio values from CPTAC were first normalized within each sample profile, then normalized across samples. \*\*\*\* $p < 0.0001$ . **(e)** Growth curves of 17 breast cancer lines with indicated concentration of BAY-876 treatment for 5 days. **(f)** Cell viability assays five days after administration of DMSO control or the indicated concentrations doses of BAY-876 across four TNBC cell lines.  $n = 4$ ; mean  $\pm$  s.d. **(g)** Growth curves of normal human astrocytes (NHA) cells treated with DMSO or 5  $\mu\text{M}$  BAY-876. **(h)** Long-term colony formation assays of cell lines deemed sensitive (HCC1806 and Hs578T) and insensitive lines (MDA-MB436 and MDA-MB468) in the short-term viability assays. **(i)** Representative plots for gating strategy of cell cycle analysis. **(j)** Flow cytometry cell cycle analysis of indicated cells with GLUT1 knockdown.  $n = 3$ ; mean  $\pm$

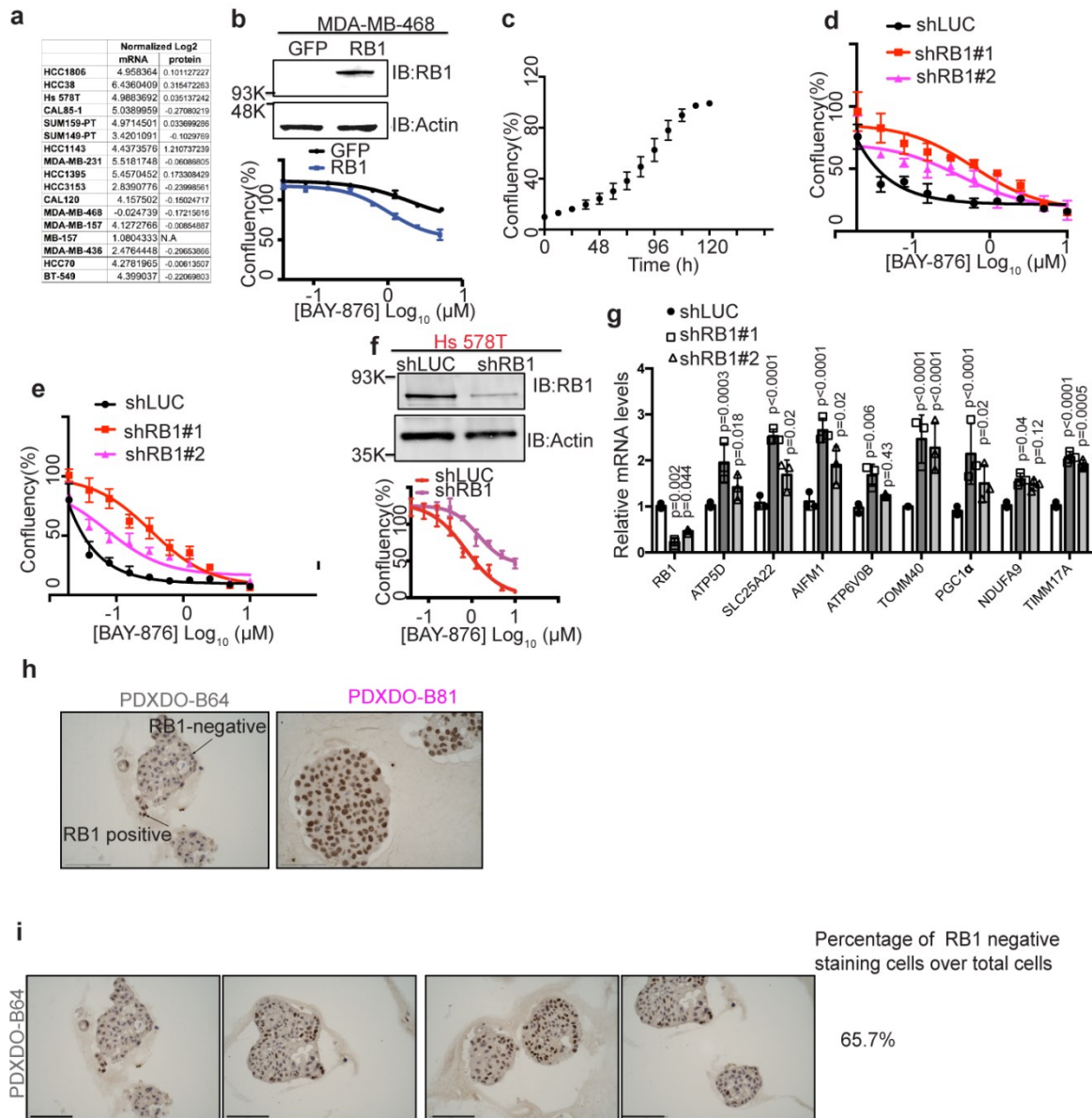
s.d. Two-way ANOVA. \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; n.s means not significant. **(k)** Apoptotic cell counts of GLUT1 knockdown cells or siRNA luciferase control cells by caspase 3/7 staining.  $n = 3$ ; mean  $\pm$  s.d. Two-way ANOVA. \*\*\* $p < 0.001$ ; n.s means not significant. Source data are provided as a Source Data file.



**Supplementary Figure 2:** Cell metabolism levels correlate with response to GLUT1 inhibition. **(a)** Lactate uptake analysis using Bioprofile Flex analyzer (Nova Biomedical) were performed in cells following BAY-876 treatment for 5 days. Mean  $\pm$  s.d;  $n = 3$ . A trace of **(b)** basal respiration; **(c)** ATP-linked respiration; **(d)** maximum respiration and **(e)** reserve capacity values from a mitochondrial stress test of cells with or without BAY-876 treatment for 5 days. P values computed using a two-way ANOVA. \* $p < 0.01$ ; \* $p < 0.5$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ ; n.s denotes not significant.



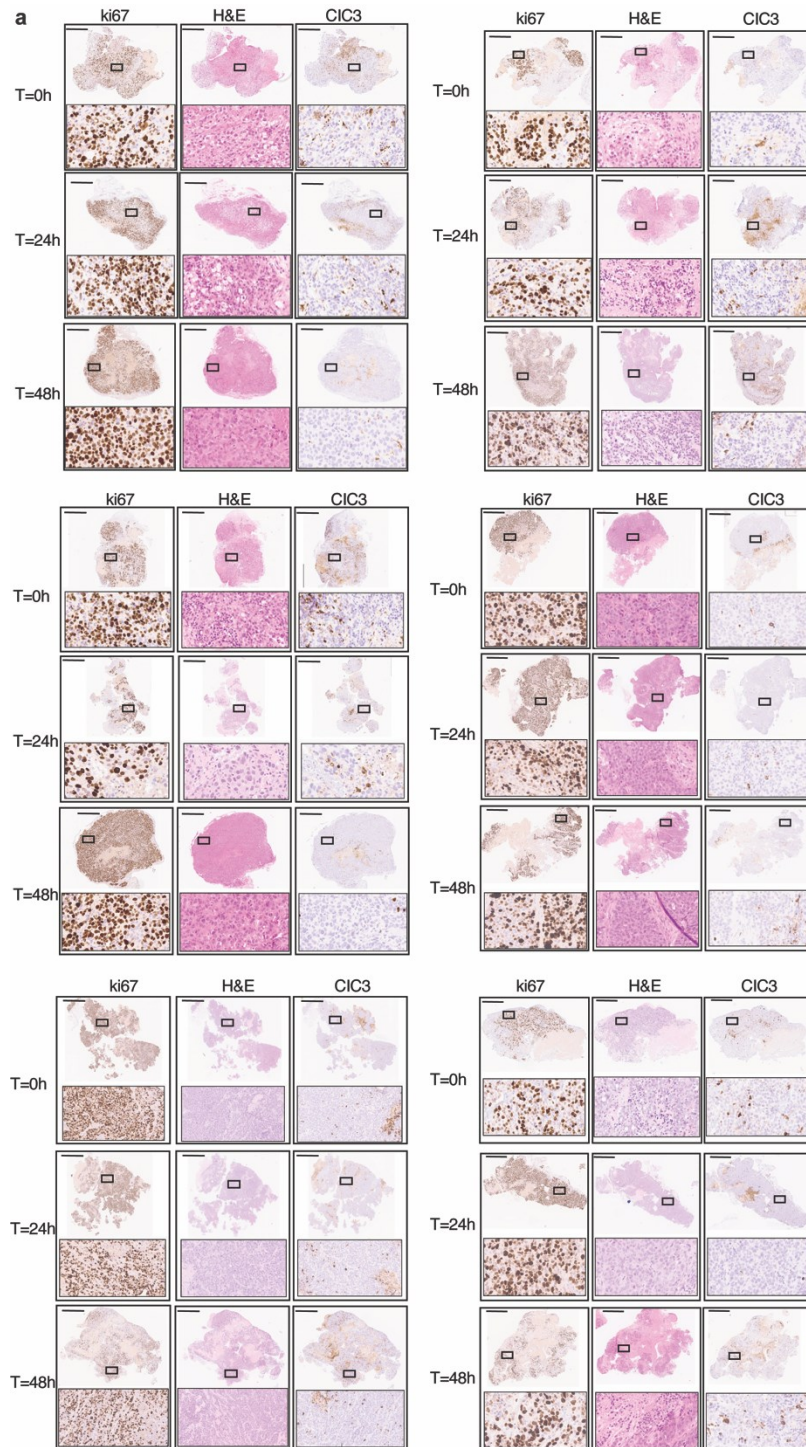
**Supplementary Figure3:** RB1-E2F pathway significantly correlates with BAY-876 sensitivity. **(a)** Correlation heatmap of expression level of 14 glucose transporters and BAY-876 sensitivity. Colour grading of cell lines corresponds to non-responders (black) and responders (red) according to the IC<sub>50</sub> of BAY-876. **(b)** Representative western blot showing the variable GLUT1 expression levels in a panel of 15 TNBC lines. GAPDH was used as a loading control for normalization. Band intensities were quantified using Image J software and the corresponding values were labelled. *SLC2A1* mRNA expression level was labelled as well based on RNA-sequencing data. **(c)** OXPPOS as a significant enriched pathway in non-responders compared to responders based on GSEA on RNA-sequencing data generated. **(d)** E2F Targets as a significant enriched pathway in non-responders compared to responders based on GSEA on RNA-sequencing data generated. **(e)** Top correlated pathways correlated with OXPPOS in TCGA dataset cohort. Source data are provided as a Source Data file.



**Supplementary Figure 4: RB1 levels dictates BAY876 sensitivity in TNBC. (a)** RB1 mRNA and protein level for indicated cell lines. **(b)** Upper panel: Representative western blot showing MDA-MB468 cells expressing RB1 or GFP control proteins.  $\beta$ -actin was used as a loading control. Bottom panel: Growth curves of MDA-MB-468 cells expressing RB1 or GFP control in the presence of indicated concentrations BAY876 treatment for 5 days. mean  $\pm$  s.d.; n = 4. **(c)** Growth curves of HCC1806 cells with DMSO for indicated time culture. mean  $\pm$  s.d.; n = 4. **(d)** Growth curves of HCC1806 cells with control knockdown or RB1 knockdown in the presence of indicated concentrations BAY-876 treatment for 48h. mean  $\pm$  s.d.; n = 4. **(e)** Growth curves of HCC1806 cells with control knockdown or RB1 knockdown in the presence of indicated concentrations BAY-876 treatment for 72h. mean  $\pm$  s.d.; n = 4. **(f)** Upper panel: Representative western blot showing Hs 578 T cells transfected with shRNA targeting RB1 or control luciferase.  $\beta$ -actin as a loading control. Bottom panel: Growth curves of Hs 578T cells with control knockdown or RB1 knockdown in the presence of indicated concentrations BAY-876 treatment for 5 days. mean  $\pm$  s.d.; n = 4. **(g)** Relative mRNA levels of mitochondrial genes in HCC1806-shRB1 cells compared to control measured by qRT-PCR. Mean  $\pm$  s.e.m., n = 3, two-tailed t-test. **(h)** Representative images



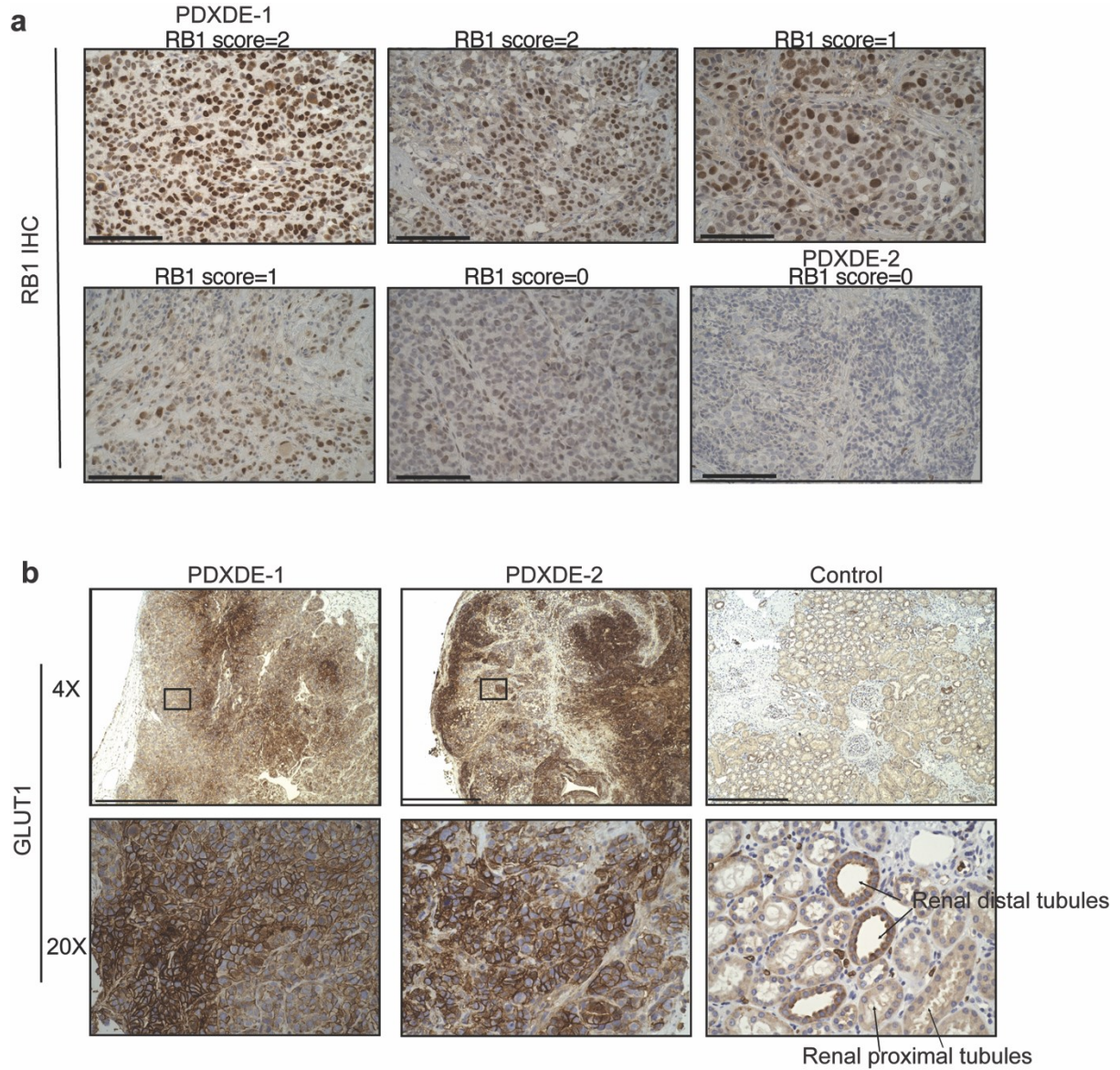
of RB1 IHC staining for PDXDOs. Arrows indicate different cells showing distinct staining intensity. Scale bars represent 100  $\mu\text{m}$ . **(i)** Images of RB1 IHC staining for RB1 negative PDXDOB 64. Scale bars represent 100  $\mu\text{m}$ . Percentage of RB1 negative staining cells were calculated. Source data are provided as a Source Data file.



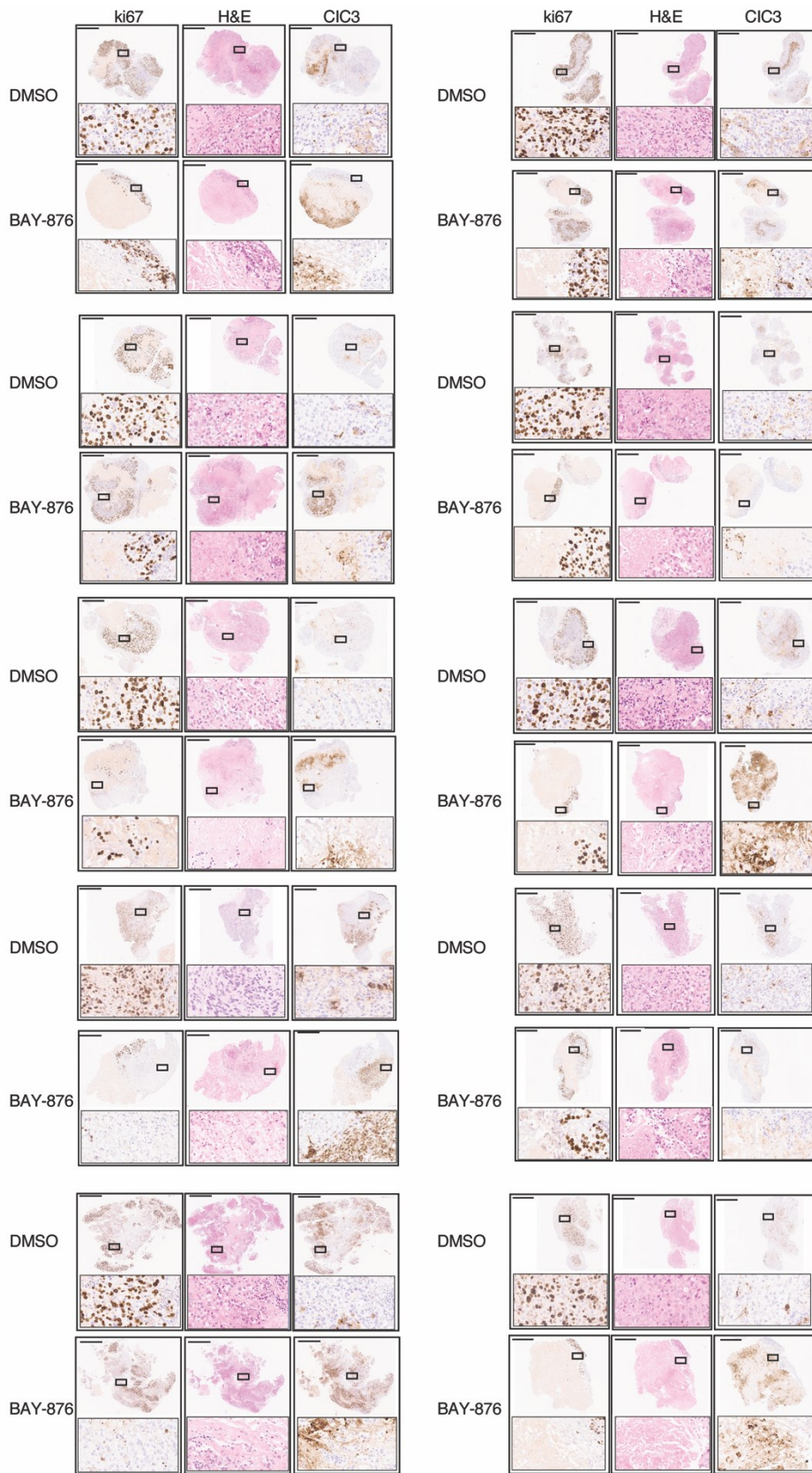
**Supplementary Figure 5:** Viability of explants during *ex vivo* culture time range. **(a)** Viability of explants during *ex vivo* culture time range assessed by proliferative index ki67 staining, H&E



staining and cleaved caspase 3 (CIC3) staining. Scale bars represent 500  $\mu\text{m}$ . Indicated area is zoomed in 5X at the bottom.

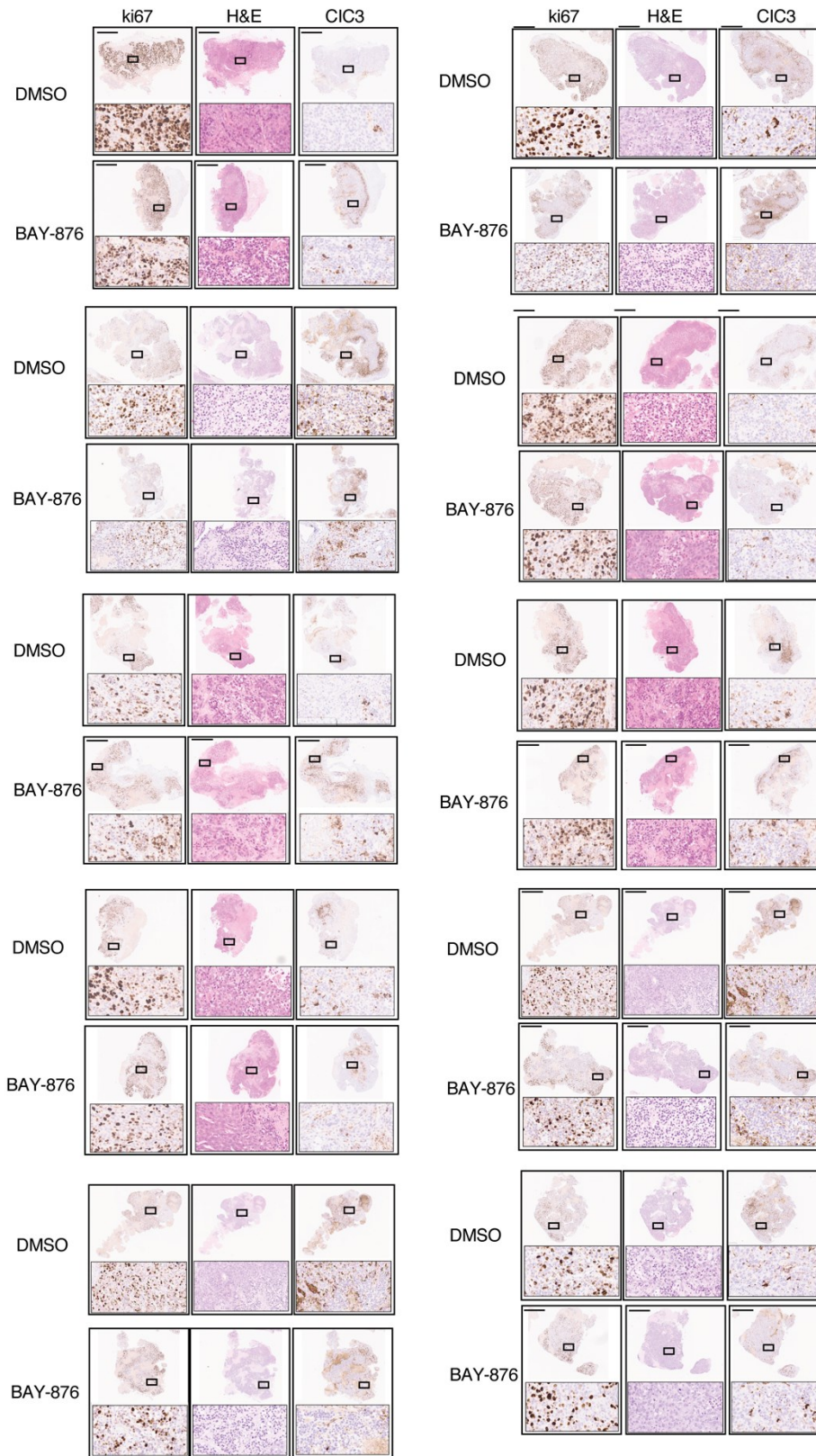


**Supplementary Figure6:** On-target effect of BAY-876 in PDXDEs. **(a)** Representative immunohistochemistry staining images of six PDXDEs from different TNBC patients. Scale bars represent 100  $\mu\text{m}$ . RB1 IHC scores as indicated. **(b)** Representative GLUT1 IHC staining images of PDXDE-1, PDXDE-2. GLUT1 staining of human kidney tissue as negative control and positive control. Renal proximal tubules cells lacking GLUT1 expression as negative control, while renal distal tubules cells as positive control<sup>13</sup>. Scale bars represent 500  $\mu\text{m}$ . Indicated area is zoomed in 5X at the bottom.

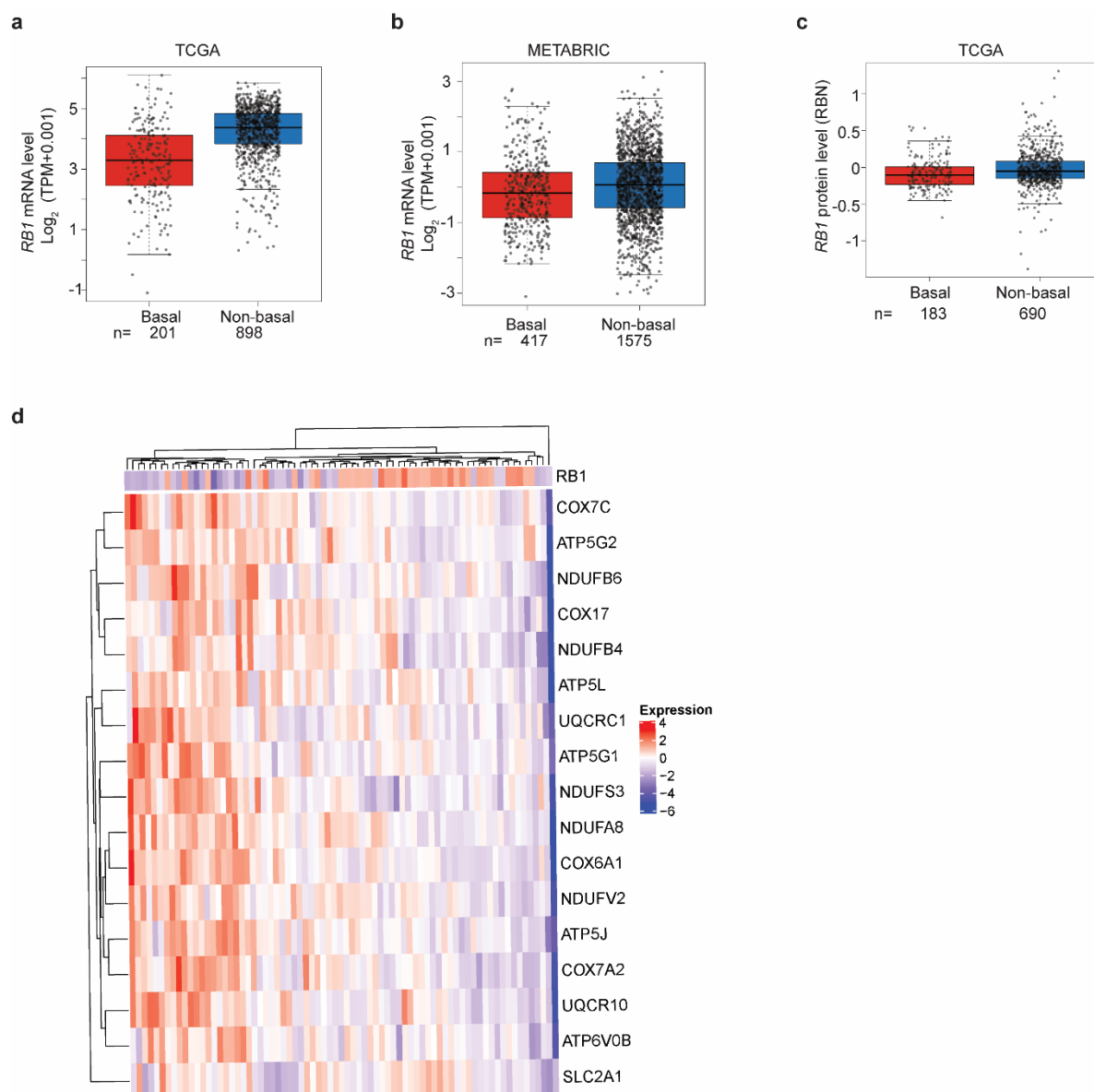


**Supplementary Figure7.** IHC staining images of PDXDE-1. Scale bar represents 500  $\mu\text{m}$ . Indicated area is zoomed in 5X at the bottom.





**Supplementary Figure8.** IHC staining images of PDXDE-2. Scale bar represents 500  $\mu\text{m}$ . Indicated area is zoomed in 5X at the bottom.



**Supplementary Figure9:** *RB1* gene expression in the **(a)** TCGA Breast cancer datasets, **(b)** METABRIC Breast cancer datasets. Gene expression is reported as  $\log_2(\text{TPM}+0.001)$ . The number of patients (n) per group is indicated. *P* values were determined using a Wilcoxon rank sum test. \*  $p < 0.05$ ; \*\*\*\* $p < 0.0001$ . RBN indicates replicates-based normalization. **(c)** *RB1* protein level in TCGA Breast cancer datasets. The number of patients (n) per group is indicated. **(d)** Heatmap showing *RB1* expression is negatively correlated with OXPHOS genes expression for each patient with TNBC tumors (TCGA provisional dataset).

### Supplementary References

1. Chan, D. A. *et al.* Targeting GLUT1 and the Warburg effect in renal cell carcinoma by chemical synthetic lethality. *Sci. Transl. Med.* **3**, 94ra70 (2011).
2. Adams, D. J. *et al.* NAMPT is the cellular target of STF-31-like small-molecule probes. *ACS Chem. Biol.* **9**, 2247–2254 (2014).

3. Liu, Y. *et al.* A small-molecule inhibitor of glucose transporter 1 downregulates glycolysis, induces cell-cycle arrest, and inhibits cancer cell growth in vitro and in vivo. *Mol. Cancer Ther.* **11**, 1672–1682 (2012).
4. Ojelabi, O. A., Lloyd, K. P., Simon, A. H. & De Zutter, J. K. WZB117 inhibits GLUT1-mediated sugar transport by binding reversibly at the exofacial sugar binding site. *Journal of Biological* (2016).
5. Ocaña, M. *et al.* Fasentin, a glucose uptake inhibitor, is also able to inhibit angiogenesis. (2017).
6. Siebeneicher, H. *et al.* Identification and Optimization of the First Highly Selective GLUT1 Inhibitor BAY-876. *ChemMedChem* **11**, 2261–2271 (2016).
7. Lee, J.-K. *et al.* Pharmacogenomic landscape of patient-derived tumor cells informs precision oncology therapy. *Nat. Genet.* **50**, 1399–1411 (2018).
8. Collins, A. *et al.* Patient-derived explants, xenografts and organoids: 3-dimensional patient-relevant pre-clinical models in endometrial cancer. *Gynecol. Oncol.* **156**, 251–259 (2020).
9. Centenera, M. M. *et al.* A patient-derived explant (PDE) model of hormone-dependent cancer. *Mol. Oncol.* **12**, 1608–1622 (2018).
10. Bruna, A. *et al.* A Biobank of Breast Cancer Explants with Preserved Intra-tumor Heterogeneity to Screen Anticancer Compounds. *Cell* **167**, 260–274.e22 (2016).
11. Powley, I. R. *et al.* Patient-derived explants (PDEs) as a powerful preclinical platform for anti-cancer drug and biomarker discovery. *Br. J. Cancer* (2020) doi:10.1038/s41416-019-0672-6.
12. Louandre, C. *et al.* Personalization of the medical treatment of solid tumours using patient-derived tumour explants (Review). *International Journal of Oncology* vol. 48 895–899 (2016).
13. Ozcan, A., Shen, S. S., Zhai, Q. J. & Truong, L. D. Expression of GLUT1 in primary renal tumors: morphologic and biologic implications. *Am. J. Clin. Pathol.* **128**, 245–254 (2007).