Single-cell transcriptional changes associated with drug tolerance and response

to combination therapies in cancer

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Supplementary Figures



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Supplementary Fig. 1. Assignments to tolerant states. a, Growth curve of PC9 cells treated with erlotinib (Erl, 2 µM) during 11 days (D0-D11), and growth curve of PC9 cells without addition of erlotinib during 3 days (D1, D2, and D3). This consecutive measurement experiment was performed in parallel to the plate for cell counting using Hoechst (Fig. 1a). Drug-containing media was renewed at day 3, day 6 and day 9. At indicated timepoints, cells were counted using brightfield microscopy at the same well position during the whole period of drug treatment consecutively. Cell counts from three fields per well were combined; mean values are shown for n = 2 replicate wells. **b**, The frequency of T790M allele in PC9 cells as determined by PCR-assisted sequencing. Allelic frequencies in untreated PC9 cells (D0) and cells treated with 2 µM erlotinib for 11 days (D11) are compared to that of the EGFR-T790M mutant H1975 cells (T790M control). The different dilutions of PC9 with the H1975 control show the level of detection goes to <0.2%, which is the frequency of detecting T790M allele in PC9 cells. c, Distribution of the number of sequenced genes per cell, per sample, in untreated and erlotinib-treated conditions. Shown are the cells with at least 350 detected genes. d, Silhouette widths calculated for each cluster in Fig. 1e and the resulting average silhouette width. The applied resolution was 0.55. e, Heatmap of top cluster markers across clusters and days of treatment. Selected markers, CYP1B1, SERPINE1, NEAT1, MALAT1 and TACSTD2, are labeled. f, Regressing cell cycle genes does not change attribution of DT states. Top markers for S-phase were PCNA, MCMs, CDT1, CCNE2, ORC6, CDC6, for S G2/M-phase were RPA3 and LIG4, and for G2/M-phase were CDK1, CDC25B, CDC25C, CCNA2, CCNB1, CCNB2 and PLK. UMAP representation of data for PC9 cells as Fig. 1e but after regressing cell cycle genes; colors are according to days of treatment (top panel) or clusters (middle panel). The number of cells from each sample is listed for each cluster in the Table below. g, Silhouette widths calculated for each cluster in Supplementary Fig. 1f and the resulting average silhouette width. Cluster numeration is different from that in (f). h, Average enrichment of H3K4me3 across TSS regions. Because the number of detected genes per cell was higher in untreated condition (c), to test whether this is a technical artifact or different transcriptional robustness, we analyzed H3K4me3, the histone modification associated with active transcription. ChIP-seq analysis using anti-H3K4me3 antibodies is presented for D0 and D11 cells compared with corresponding input samples. ChIP-seq showed a global decrease in H3K4me3 at the transcription start site (TSS) regions in treated cells. i, Genes increased in expression level commonly display an increase in H3K4me3 enrichment.

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Genes differentially expressed in D11 versus D0 cells (Log2FoldChange>0.1) as determined by scRNA-seq

were sorted by their enrichment in H3K4me3.



Supplementary Fig. 2. Distribution of top markers of DT states. a, Feature plots projected onto UMAP showing the increased expression of selected top genes across the Seurat clusters. The UMAP is from Fig. 1e. **b**, Monocle analysis shows that expression of the three selected genes increases during erlotinib treatment. **c**, smRNA-FISH for top markers of tolerant states identified in Drop-seq, IncRNAs NEAT1 and MALAT1, and protein-encoding transcripts for TACSTD2, co-stained with DAPI (blue). PC9 cells were treated with erlotinib for 1 day and hybridized with TACSTD2 probes, and for 2 days and hybridized with NEAT1 and MALAT1 probes. images were acquired using the Zeiss microscope, and are representatives of 2 independent experiments. d, Dot plot of transcript expression from smRNA-FISH and Drop-seq data. The number of transcripts from the smRNA-FISH was counted from n = 5 images (>100 cells), and is representative of two experiments. Percentage of cells expressing a transcript is represented by the size of the dot, where large dots correspond to a higher percentage of cells. Scaled average expression across cells is shown by the color of the dot, with brighter red representing a high expression, and light grey representing low expression. e. TACSTD2 protein level is increased in cells treated with erlotinib (for 1 day) as evidenced by immunofluorescence with anti-TACSTD2 antibody. The immunostaining is in green, with DAPI (nuclear) counter stain (blue). f, Immunostaining for top markers SERPINE1 and CYP1B1 shows increased protein expression level in erlotinib-treated cells. PC9 cells were treated with erlotinib for 4 days or 11 days and immunostaining was performed with antibodies to SERPINE1 and CYP1B1, respectively. Quantitation of the immunofluorescence experiments in (e) and (f) is presented on the *right*, mean ± standard deviation (SD) for n = 4 images in control and n = 8 images in Erl for TACSTD2, n = 5 images in control and n = 10 images in Erl for SERPINE1, n = 6 images in both conditions for CYP1B1, and is a representative of three independent experiments. **q**, Gene expression changes in the levels of top markers TACSTD2 and SERPINE1 using bulk RNA samples at early time points of erlotinib treatment. h, Gene expression changes in the levels of markers of early tolerant state. The RT-qPCR values in (g) and (h) were normalized to POLR2B level and presented as Log_2 fold changes relative to DMSO-treated control cells, with mean values for n = 2 biological replicates. i, The results of the GSEA run on the PC9 markers with the pre-ranked list of Spearman Correlation CCLE data. Cluster 4 (N=244): Normalized Enrichment Score (NES)=1.89, FDR q-value=0; Cluster 5 (N=358): NES=2.05, FDR q-value=0.

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Supplementary Fig. 3. Drop-seq separates different cancer cell lines and identifies cell subpopulations. a, Cell separation setup. Three samples were generated as following: The PC9:U937 sample comprised of PC9 cells mixed with differentiated U937 cells. Two similar samples were subjected to additional magnetic cell

sorting using antibodies for the cell surface markers EpCAM or CD45. Sorting resulted in the creation of EpCAM-positive (EpCAM⁺) and CD45-negative (CD45⁻) cell samples. **b**, Analysis of the mixtures of PC9 and U937 cells by flow cytometry reveals cells of the unrelated cell line after both positive and negative selection. Pie charts show numbers of EpCAM⁺ (red) and EpCAM-negative/CD45-positve (EpCAM⁻/CD45⁺ green) in each sample, representing PC9 and U937 cells, respectively. **c**, t-SNE representation in Seurat distinguishes two distinct cell lines (green for U937 and red for PC9) within a single sample. Cell distribution of EpCAM-positive and CD45-negative samples reveals remaining cells of another cell line. Pie charts show cell number for each cell type counted in Seurat. **d**, Principal component (PC) 1 genes obtained with Seurat on the PC9:U937 sample showing the distribution of top 30 genes (*on the top*). Heatmap shows the relative expression level of the genes (rows) in 100 cells (columns) (*at the bottom*). **e**, A single t-SNE plot represents the eight cell clusters after merging the three samples (as in (c)) in Seurat. Cell clusters are distinguished by color. The plot separates clusters of U937 (Clusters 1-3) and PC9 cells (Clusters 4-8). The dot plot of average cluster gene expression (*on the right*) reflects top canonical markers that are differentially expressed between PC9 and U937 cells.



Supplementary Fig. 4. Top differentially expressed genes across the clusters of mixed PC9 and U937

cells. a, Dot plot of differentially expressed genes across the clusters (see also Supplementary Data 9). Canonical U937 markers are shown in comparison to the PC9 marker characteristic of epithelial cells *EpCAM*. Cell cycle genes are among top differentially expressed genes. Drop-seq also identifies highly expressed genes with differential expression in U937 cells compared to PC9 cells, which were not described previously. **b**, t-SNE depicting canonical hematopoietic (*FCER1G*, *HCST*) and epithelial (*KRT17*, *EPCAM*) markers across the clusters. **c** and **d** U937 cell clusters correspond to macrophages and monocytes. U937 cells were subset and re-clustered, separately from PC9 cells. Dot plot in (c) shows that expression of canonical markers of macrophages and monocytes (see Methods) differ in the identified four clusters. Each cluster was named accordingly: "Macrophages" express *TYROBP* and *GSN*; "Monocytes" express interleukins, chemokines, and *SOD2*; intermediate cells "Macro/Mono" express *LYZ* and *ALOX5AP* and mixed markers; and a population that failed to differentiate ("Undiff.") lacks macrophage or monocyte markers and expresses high levels of cell cycle genes. (d) t-SNE on U937 cells depicts four clusters, each of which can be named according to expression of canonical macrophages and monocyte markers.



Supplementary Fig. 5. Drop-seq reveals biological processes and pathways associated with drug tolerance during drug holiday. **a**, Growth curve of PC9 cells subjected to drug holiday experiment. Cells were treated with Erl for 11 days, after which "D19" samples were withdrawn from erlotinib for 6 days until day 17th and then treated with DMSO and Erl, respectively, for another 2 days, before processing for Drop-seq. Cell counts are based on brightfield microscopy and presented as mean \pm SD for n = 3 replicates. **b**, Top markers distinguishing treated and untreated cells are listed for GO term

REGULATION_of_PROTEIN_SECRETION. The GAS6 gene is indicated by asterisk. **c**, Top markers distinguishing treated and untreated cells are listed for GO term DNA_REPAIR. In (b) and (c), only genes preferentially expressed in treated cells compared to untreated are shown. **d**, Top markers distinguishing treated and untreated cells are listed for GO term AMINO_ACID_METABOLIC_PROCESS.



Supplementary Fig. 6. Cell line- and treatment-specific responses. a, Dose response of HCC827 cells to erlotinib compared to DMSO at day 3 of treatment. **b**, Dose response of PC9 cells to etoposide compared to DMSO at day 3 of treatment using Cell Titer Glow. **c**, Dose response of melanoma M14 cells to vemurafenib compared to DMSO using Cell Titer Glow. Dose response data in (a-c) represents mean \pm SD for n = 4 replicate wells. Representative microscopic images (20x) of cells treated for a Drop-seq experiment were obtained using Zeiss microscope in (a) and Nikon light microscope in (b) and (c). Images were taken of the

cells prepared in parallel to scRNA-seq samples. **d**, Long-term survival assays of M14 cells treated with vemurafenib (1 μ M). 8.1x10⁴ cells were seeded per well and cell counts were performed using a hemocytometer on indicated days. Data is presented as mean ± SD for *n* = 3 replicates, but for Day 6 as a mean value for *n* = 2 replicates. **e**, Common markers associated with EMT. Shown are the markers appearing in at least three out of four samples. **f**, PC9 cell markers of etoposide-tolerant clusters associated with EMT. **g**, Enrichment analysis for gene relations to GO BP terms or KEGG pathways (MSigDB Collections) is shown for top markers of tolerant clusters of tolerant clusters of four different treatments are shown. Clusters of tolerant cells are indicated with a red box. **h**, Enrichment analysis of the top cluster markers for genes with occurrence of transcription factor binding sites in the regions spanning up to 4 kb around their transcription start sites (TFT). TFTs commonly enriched among the markers of DT clusters in four different cell models are shown. In (g) and (h), data represents right tail *P* values, two-sided binomial statistical test, adjusted for multiple testing using Benjamini-Hochberg FDR method.



Supplementary Fig. 7. Drop-seq of consecutive samples reveals biological processes and pathways

associated with drug tolerance. a, Enrichment analysis for gene sets associated with chemical and genetic

perturbations (CGP, MSigDB Collections) reveals that the top cluster markers (P < 0.05) were previously

identified to be upregulated in response to various treatments, including those associated with resistance.

Consistent with changes associated with EGFR TKI resistance, the top signature is

COLDREN_GEFITINIB_RESISTANCE_DN, representing genes upregulated in cell lines highly sensitive to Aissa *et al.* Supplementary Information

gefitinib. **b**, Enrichment analysis for genes in relation to GO BP terms or hallmark gene sets (MSigDB Collections) is shown for top cluster markers. Data is shown for gene sets with enrichment of $P \le 10^{-6}$ distinguishing at least one tolerant state under the condition that all clusters of untreated cells would have $P > 10^{-4}$. The KEGG pathway term "DRUG METABOLISM_CYTOCHROME_P450" and four terms enriched in untreated cells are outside this range but still shown. **c**, Enrichment analysis for additional gene sets associated with chemical and genetic perturbations. Multiple gene sets associated with activation of ErbB receptors were condensed to one. In (a) and (c), gene sets overlapping with at least 9 markers in one tolerant cluster, $P < 10^{-7}$, were included. **d**, Top transcription factors for which binding sites (TFT) are enriched among the DT markers. TFs with *P* values < 10^{-5} at least in one cluster are listed. (a-d), data represents right tail *P* values, two-sided binomial statistical test, adjusted for multiple testing using Benjamini-Hochberg FDR method. **e**, Top markers belonging to hallmarks CHOLESTEROL HOMEOSTASIS and EPITHELIAL MESENCHYMAL TRANSITION (EMT) are shown for each cluster. **f**, Top markers with occurrence of transcription factor binding sites for LEF1 and NFAT from (d). **g**, Dot plot of expression for selected markers.

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Resolution 2.0





Average silhouette width: 0.16



26 clusters C

Average sinduette width : 0.26

Supplementary Fig. 8. Silhouette analysis of clustering performed to distinguish DT cell populations. a, Silhouette widths calculated for each PC9 cell cluster in Fig. 4a and the resulting average silhouette width. The applied resolution was 2. **b** and **c**, Silhouette widths and UMAP representation of two PC9 samples, untreated or treated with erlotinib for 3 days, that were analyzed by 10x Genomics scRNA-seq, colored by clusters using resolution 0.7. The average silhouette width obtained with the resolution 2 is relatively low due to the negative value of silhouette width for Cluster 5, which equals to -0.31. However, low negative values appear for the relevant clusters in the clustering results generated even with the lowest resolutions, such as Cluster 3 (-0.12) for resolution 0.7 in (b). In contrast, other cells appear to form the largest clusters properly at the resolution 2. In (a) and (b), silhouette width results are reported from Cluster 0 as "1:" down.



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Supplementary Fig. 9. Prominent gene expression modules identified by enrichment analysis and Monocle reflect heterogeneity of drug tolerant cells grown in cell culture. a. Enrichment analysis for top cluster markers (P < 0.05) shows overrepresentation of CGPs related to the RB pathway. Two subpopulations of tolerant cells, I and II, are delineated by blue and green boxes, **b**. Additional CGP signatures from the enrichment analysis for top cluster markers in Fig. 4c. c, Enrichment analysis of top cluster markers (P < 0.05) for transcription factor targets (TFTs). Shown are LEF1, TEAD1, SRF, FOXO4, FOXF2, FOXA1, ATF, and E4F1 that had >10³ higher P values in any of the untreated clusters, except for Cluster 21 that had lower quality cells, when compared to the majority of DT clusters. MAZ, AP1, SOX9 ,E2F1, NFY, and YY1 had >10³ higher P values in any of the DT clusters in population II, when compared to the majority of untreated cell clusters or population I clusters. d. Top markers that belong to the enriched terms for hallmarks CHOLESTEROL HOMEOSTASIS and EPITHELIAL MESENCHYMAL TRANSITION (EMT), KEGG pathway DRUG METABOLISM CYTOCHROME P450, which were identified in this study, and expected signatures of CGP KOBAYASHI EGFR SIGNALING 24HR, the hallmark TNFA SIGNALING VIA NFKB, and GO REGULATION OF MAPK SIGNALING. e, Dot plot of expression for selected markers. f, Feature plots projected on UMAPs representing expression of the top two modules that were upregulated in untreated cells and the top three modules distinguishing treated cells. Clustering of untreated and erlotinib-treated for 3 days PC9 cells in a Monocle-based UMAP is shown on the left. q, Heatmap of modules of co-regulated genes, showing their differential expression in clusters of treated and untreated cells. h, Enrichment analysis of three EMT modules in relation to selected hallmark and KEGG gene sets. (a-c and h), data represents right tail P values, two-sided binomial statistical test, adjusted for multiple testing using Benjamini-Hochberg FDR method.



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Supplementary Fig. 10. Inhibiting individual tolerant cell markers fails to eradicate drug tolerance. a,

Immunoblot analysis of cell lysates prepared from PC9 cells that were transduced with indicated shRNAs and sqRNAs. Inhibition of CYP1B1 was not pursued further as transduction with shRNAs and sqRNAs was toxic to untreated cells. Controls: NMC - non-mammalian sequence, EGFP - EGFP sequence, Neg1 and Neg2 - nontargeting sequences. RPA3 is an essential gene. Vinculin served as a loading control. Source data is provided as a Source Data file. The experiment was repeated 2 times, which gave similar results. b, Percentage of mutated allele in cells transduced with sgRNA-encoding lentiviruses. c, Dose response to erlotinib compared to DMSO in cells transduced with either Negative Control 1 sgRNA (sgNeg1), or with CRISPR knockouts of the essential gene RPA3, markers of resistance SERPINE1 and TACSTD2 (1 and 2 are two different sgRNAs for TACSTD2). d. Dose response to erlotinib compared to DMSO in cells transduced with SERPINE1 or TACSTD2 shRNAs. The effect of lentiviral expression of shRNA to green fluorescent protein (shEGFP) or Non-Mammalian Control shRNA (shNMC) is shown as a control. In (c) and (d), treatments with erlotinib and DMSO proceeded for 3 days and Hoechst staining was performed to determine relative numbers of cells. Mean ± SD for n = 4 replicate wells. e, PC9 cells were transduced as in (a) and (b) followed by DMSO for 9 days or erlotinib (1 µM) for 21 days with media/drug changes every 3 days. Surviving cells were stained with crystal violet, photographed using Azure System, and plate colony surface area was quantified using ZEN 2.6.. Data represents mean \pm SD for n = 3 replicate wells. (f and g) Cell survival assays by SYTO83 of the double knockdown in PC9 (f) and HCC827 (g). Mean \pm SD for n = 4 replicate wells. In e-g, two-tailed P values were determined by unpaired t test relative to the control mock via GraphPad Prism 7.





Supplementary Fig. 11. The combination of erlotinib with crizotinib and celastrol was effective in blocking proliferation of tolerant cells. **a**, Violin plots of DT state markers, which are predicted to be affected by crizotinib, are shown among PC9 cell clusters from Fig. 1e. The violin plot was generated with the same data as crizotinib UMAP in Fig. 5c. **b**, Dose response of PC9 and HCC827 cells treated for 3 days with erlotinib as a single agent and in combination. **c**, Survival assays of PC9 treated for 3 days with erlotinib as a single agent and in combination. **d**, Survival assays of PC9 treated for 3 days with two concentrations of erlotinib in combination with three other drugs as measured by Cell Titer Glo. **e**, Apoptosis assessment by caspase cleavage assay on drug-treated PC9 and HCC827 cells. In (b) through (e), mean \pm SD for *n* = 4 replicate wells. **f** and **g**, Colony formation assays of PC9 and M14 cells, respectively, treated for indicated number of days with Eto (etoposide) or Vem (vemurafenib) and other drugs. Celastrol was used at 1 μ M concentration. Representative crystal violet stainings are shown. Plate colony surface area is shown as mean \pm SD for *n* = 3 replicate wells. In (c) through (g), two-tailed *p* values were determined by unpaired *t* test relative to the control or targeted drug via GraphPad Prism 7. The drug concentrations are as in Fig. 5f unless noted otherwise.



Supplementary Fig. 12. Independent replicates of drug tolerant cells generate highly reproducible Drop-seq data. a, Distribution of the number of sequenced genes per cell, per sample treated with erlotinib alone, in combination with crizotinib, and untreated. Two biological replicates were performed to exclude potential batch effects. b, UMAP representation of the samples. c, Heatmap of top markers distinguishing the differently treated cells and their subpopulations.



Supplementary Fig. 13. Exploring the combination of erlotinib and crizotinib for targeting distinctive molecular signatures. **a**, Silhouette widths calculated for each cluster in Fig. 6b and the resulting average silhouette width. **b**, Regressing cell cycle genes does not change overall attribution of DT states. UMAP representation of PC9 cells colored by treatment (*left panel*) or clusters (*right panel*) after regressing cell cycle genes from data in Fig. 6b is shown. **c**, Heatmap of the top markers for each Criz-T and Criz-S cluster. **d**, Percentage of cells from each sample mapped by Seurat to each cluster. The distribution shows the percentage of cells with single-agent erlotinib treatment and dual-agent erlotinib and crizotinib treatment in

each tolerant cluster; no control cells were detected in tolerant clusters. **e**, Average expression levels of top cluster markers across the untreated cells (Clusters 1, 2 and 3) and treated cells (Criz-T and Criz-S Clusters from 4 to 12) are presented as dot plots. The color of each dot represents the average expression level from low (grey) to high (red), and the size of each dot represents the percentage of the cells expressing the gene. Markers of interest are highlighted in red. **f**, Violin plots of Criz-T signature in each cluster of the untreated cells and treated cells. **g**, Violin plots of Criz-T signature in each state of PC9 cells treated with erlotinib. The states of PC9 cells are from the set of consecutive samples in Fig. 1. In (f) and (g), the Criz-T signature was generated by combining markers of Criz-T clusters. Next, their overall expression level was calculated for each cell by Seurat and single-cell expression distributions were visualized for each cluster.





Supplementary Fig. 14. Enrichment analysis reflect heterogeneity of drug tolerant cells in xenograft

model. a, Images of representative mice with established PC9 tumors (untreated) and the same mice after 3 days of treatments with osimertinib or osimertinib and crizotinib. b. Tumors resected from mice receiving osimertinib and crizotinib treatments for 3 days compared to vehicle treatment. These tumors were used for Drop-seq experiments. c, Silhouette widths calculated for each cluster in xenografts treated with osimertinib or vehicle in Fig. 7a and the resulting average silhouette width. Besides Cluster 2 (-0.31), which is separated in two distinctive subpopulations in Fig. 7a, all other large clusters give good silhouette width. d, Enrichment analysis shows overrepresentation of CGP gene sets related to the RB pathway. e, Additional CGP signatures from the enrichment analysis for top cluster markers in Fig. 7c. The terms with more than 7 markers per cluster, $P < 10^{-7}$ in at least in one cluster, and > 10^{-3} difference in any of the clusters of another treatment were included. f, Enrichment analysis for TFTs. g, Heatmap of top markers for each cluster. Cluster annotation as in Fig. 7a. h, Dot plot of expression for selected markers. The clusters 1 through 19 are from Fig. 7c. i, Regressing cell cycle genes does not change overall attribution of DT populations. UMAP representation of xenograft tumor cells colored by treatment (*left panel*) or clusters (*right panel*) after regressing cell cycle genes. j, Top markers that belong to the enriched GO BP term ANTIGEN PROCESSING AND PRESENTATION, which are either crizotinib-tolerant (Criz-T) or crizotinib-sensitive (Criz-S). k, Top markers that belong to the enriched KEGG pathway TGF BETA SIGNALING. I, Enrichment analysis for selected CGP gene sets. m. Enrichment analysis for binding sites (TFT) of transcription factors that were previously identified in the PC9 cell culture experiment in Fig. 6f. In (d-f), two subpopulations of tolerant cells, I and II, are delineated by blue and green boxes. In (j-m), Criz-T clusters and Criz-S clusters are shown by green and blue box, respectively. In (d-f), (l) and (m), enrichment analysis was performed using top cluster markers (P < 0.05); data represents right tail P values, two-sided binomial statistical test, adjusted for multiple testing using Benjamini-Hochberg FDR method.



Supplementary Fig. 15. Patient survival and LINCS analysis of EGFR-mutant and KRASG12C patient tumors. a, Kaplan-Meier estimates of survival before death/censored in EGFR-mutant lung adenocarcinomas (as in Fig. 8a) with significantly upregulated markers of individual DT states 6, 7 or 8 compared to patients, where the same markers showed decreased expression or no significant change (P > 0.05). Univariate Cox Aissa et al. Supplementary Information

regression was used to determine Hazard Ratio (HR) and log rank P values. b, UMAP representation of cells from three donors and three NSCLC patients colored by cell types. EGFRex19 – tumor with EGFRex19 mutation; KRASG12C - tumor with KRASG12C mutation; MULTIPLE – multiple oncogenic driver mutations have been identified in this tumor. MaMoDC - macrophages, monocytes and dendritic cells combined: NA failed to be classified; others as indicated. As anticipated, the tissue composition of independently collected samples varied. Despite deficiency in populations in some samples, both donor and patient samples contributed to a majority of cell populations. UMAP positioning of several cell types varied between donors and patients, and between different patients. In particular, fibroblasts and endothelial cells from tumor samples clustered uniquely. c, Heatmap showing the expression of the top markers distinguishing the 25 identified clusters for each donor and patient in (b). d, Violin plot showing expression level of genes targeted by the AKT inhibitor A443654 identified in the LINCS analysis. e, Violin plot showing expression level of genes targeted by the CDK inhibitor AT-7519 identified in the LINCS analysis. f, Violin plot showing expression level of genes targeted by the AKT inhibitor A443654 identified in the LINCS analysis. **g**, Violin plot showing expression level of genes targeted by the CDK inhibitor AT-7519 identified in the LINCS analysis. h, Feature plot showing cells colored by expression level of genes targeted by the AKT inhibitor A443654 identified in the LINCS analysis. i, Feature plot showing cells colored by expression level of genes targeted by the CDK inhibitor AT-7519 identified in the LINCS analysis. The score was calculated by Seurat and was based in (d) and (e) on expression level of markers of EGFRex19 patient cancer cells (Cluster 4 in Fig. 8e and genes Supplementary Data 27), and in (f-i) on expression level of markers of earlier DT states in PC9 cells (Clusters 4 and 5 in Fig. 1 and markers of Clusters 4 and 5 from Supplementary Data 1).







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Supplementary Fig. 16. Patient survival analysis of EGFR-mutant NSCLCs and melanoma tumors using markers of subpopulations within drug tolerant cell population. a, Sample level enrichment analysis of DT markers, which were identified in the PC9 xenograft treated with osimertinib, was performed in EGFR-mutant lung adenocarcinomas. Expression level was determined for markers of DT clusters surviving in PC9 xenograft (Clusters 8-13 in Fig. 7a and genes in Supplementary Data 49), for all clusters together (All) and for each individual DT cluster (8, 9, 10, 11, 12 and 13). b, Kaplan-Meier estimates of survival before death/censored in the group of EGFR-mutant lung adenocarcinoma patients with significantly upregulated (Z-score > 1.96, P < 0.05) DT markers that were identified in the PC9 xenograft treated with osimertinib compared to the patient group, where DT markers showed decreased expression or no significant change (P > 0.05). **c**, Sample level enrichment analysis of DT markers, which were identified in the M14 melanoma cells treated with vemurafenib, was performed in BRAF-mutant TCGA melanomas. Expression level was determined for markers of DT clusters (Clusters 5-8 in Fig. 3a and genes in in Supplementary Data 43), for all clusters together (All) and for each individual DT cluster (5,6,7 and 8). d, Kaplan-Meier estimates of survival before death/censored in the group of BRAF-mutant melanoma patients (TCGA) with significantly upregulated (Z-score > 1.96, P < 0.05) DT markers that were identified in the M14 experiment compared to the group of patients, where DT markers showed decreased expression or no significant change (P > 0.05). Survival was calculated based all cluster markers (All) and on the markers of each individual DT cluster (5,6,7 and 8). e and f, Kaplan-Meier estimates of survival as in (d) performed for GSE65904 and GSE53118 data sets, respectively. Survival was calculated based on the markers of each individual DT cluster (5,6,7 and 8). Patients with upregulated genes (DT markers) survive less in (e), although the P-values of survival difference are not significant. The markers were considered to be overexpressed in a patient if the Z-score >1.96 (P < 0.05), they are shown in the colors of red; the rest of the patients show the markers either significantly decreased (P < 0.05) in colors of blue or not significantly changed (grey). Survival information (in days) is shown for each patient. Univariate Cox regression was used to determine Hazard Ratio (HR) and log rank P values.



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PC9D0vsD3Erl ErlCri





Supplementary Fig. 17. Assessing cell quality in single-cell RNA sequencing experiments. a – **k**, For each sample set, the quality was assessed using parameters in the Drop-seq core computational pipeline. See also Supplementary Fig. 1c and 12a.



Supplementary Fig. 18. Gating strategies used for flow cytometry. Gating strategy for detection of EpCAM⁺ (red) and EpCAM-negative/CD45-positve (EpCAM⁻/CD45⁺ green) cells in each sample from the mixtures of PC9 and U937 cells in Supplementary Fig. 3b.

Supplementary Tables

Supplementary Table 1. Number of sequenced cells and genes.

| PC9 11937 Cell Separation | # Genes | # Cells |
|--|---|---|
| | 17002 | 2021 |
| | 16056 | 2031 |
| | 10200 | 049 |
| CD45- | 16174 | 897 |
| | | |
| D0_D1_D2_D4_D9_D11 | # Genes | # Cells |
| D0 | 16211 | 756 |
| D1 | 13047 | 234 |
| D2 | 13896 | 144 |
| D4 | 12762 | 99 |
| D9 | 15575 | 228 |
| D11 | 14686 | 143 |
| | | |
| "Drug holiday" | # Genes | # Cells |
| D11Erl | 14215 | 716 |
| D19Holiday | 15903 | 722 |
| D19Erl | 13263 | 716 |
| | | |
| 10xGenomics PC9D0vsD3 | # Genes | # Cells |
| Untreated | 20911 | 12330 |
| Treated | 20591 | 11085 |
| | | |
| PC9D0vsD3Erl ErlCri | # Genes | # Cells |
| control | 16211 | 756 |
| Frl+Criz replicate 1 | 15742 | 876 |
| Erl+Criz replicate 2 | 15505 | 762 |
| Erl replicate 1 | 16160 | 678 |
| Erl replicate 2 | 16819 | 945 |
| | 10010 | 545 |
| | | |
| HUL 87/DUVSD3 | # Genes | # Cells |
| HCC827D0VSD3 | # Genes | # Cells |
| Untreated | # Genes 14366 | # Cells 2787 2501 |
| Untreated Erlotinib | # Genes 14366 15989 | # Cells 2787 2591 |
| HCC827D0VSD3 Untreated Erlotinib | # Genes 14366 15989 | # Cells 2787 2591 |
| HCC827D0VsD3 Untreated Erlotinib PC9D0vsD3Eto | # Genes 14366 15989 # Genes | # Cells 2787 2591 # Cells |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etapagida | # Genes 14366 15989 # Genes 16506 | # Cells 2787 2591 # Cells 1289 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide | # Genes 14366 15989 # Genes 16506 14555 | # Cells 2787 2591 # Cells 1289 684 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide | # Genes 14366 15989 # Genes 16506 14555 | # Cells 2787 2591 # Cells 1289 684 # Cells |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem | # Genes 14366 15989 # Genes 16506 14555 # Genes | # Cells 2787 2591 # Cells 1289 684 # Cells 2462 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vorgeogeneits | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 |
| HCC827D0VsD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D14_1 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D0_2 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 740 |
| HCC82/D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 |
| HCC82/D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 |
| HCC82/D0VsD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 Patient tumors | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells |
| HCC82/D008D3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KD45.0120 | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 |
| HCC82/D008D3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 |
| HCC827D0VSD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 11154 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 |
| HCC82/D0VsD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 11154 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 |
| HCC82/D0VsD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE Mouse Xenograft | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 11154 # Genes | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 # Cells |
| HCC827D0V8D3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE Mouse Xenograft control | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 11154 # Genes 14136 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 # Cells |
| HCC82/D0VsD3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE Mouse Xenograft control Criz | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 11154 # Genes 14136 14316 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 # Cells 2026 |
| HCC827D0V8D3 Untreated Erlotinib PC9D0vsD3Eto Untreated Etoposide M14D0vsD3Vem Untreated Vemurafenib D0D11 D0_1 D0_2 D11_1 D11_2 Patient tumors EGFR ex19 KRAS G12C MULTIPLE Mouse Xenograft control Criz Osi | # Genes 14366 15989 # Genes 16506 14555 # Genes 16540 15806 # Genes 16211 16871 14206 14215 # Genes 14087 13758 14087 13758 14136 14316 14316 15296 | # Cells 2787 2591 # Cells 1289 684 # Cells 3462 4836 # Cells 756 545 260 716 # Cells 2026 1694 608 # Cells 2026 1694 608 |

Supplementary Table 2. Seurat parameters used in scRNA-seq.

| Dataset | nFeature_RNA_min | nFeature_RNA_max | FindVariableFeatures | PCAs used | Resolution | Related to |
|--|--|------------------|---|-----------|------------|----------------------------|
| | | | Seurat 2.3.4 (x.low.cutoff = 0.0125, x.high.cutoff = 3, y.cutoff = 0.5, + | | | |
| PC9_U937 Cell Separation | >200 | <7500 | Default | 1:8 | 0.5 | Supplementary Fig. 3 and 4 |
| D0_D1_D2_D4_D9_D11 | >800 | <7500 | nfeatures = 1000 | 1:10 | 0.55 | Fig. 1 |
| "Drug holiday" | >800 | <7500 | nfeatures = 2000 | 1:8 | 0.55 | Fig. 2 |
| 10xGenomics PC9D0vsD3 | >800 | <7500 | nfeatures = 2000 | 1:20 | 2 | Fig. 4 |
| PC9D0vsD3Erl_ErlCri | >800 | <7500 | nfeatures = 2000 | 1:12 | 1.1 | Fig. 6 |
| PC9D0vsD3 | >800 | <7500 | nfeatures = 2000 | 1:10 | 0.6 | Fig. 3 |
| HCC827D0vsD3 | >200 | <7500 | nfeatures = 2000 | 1:9 | 0.6 | Fig. 3 |
| PC9D0vsD3Eto | >300 | <7500 | nfeatures = 2000, mean.cutoff = $c(0.1,$ Inf), dispersion.cutoff = $c(0.5, Inf)$ | 1:8 | 0.5 | Fig. 3 |
| M14D0vsD3Vem | >200 | <7500 | nfeatures = 2000 | 1:7 | 0.65 | Fig. 3 |
| D0D11 | >800 | <7500 | nfeatures = 2000 | 1:10 | 0.55 | Fig. 1 |
| Patient tumors (whole population) | >200 | <5000 | SCTransform, vars.to.regress = c("nFeature_RNA", "nCount_RNA") | 1:20 | 0.7 | Fig. 8 |
| Patients tumors (Epithelial) | >200 | <5000 | SCTransform, vars.to.regress = c("nFeature_RNA", "nCount_RNA") | 1:25 | 0.7 | Fig. 8 |
| Mouse Xenograft Control,Osi | >300 | <4000 | nfeatures = 2000 | 1:10 | 1.2 | Fig. 7a |
| Mouse Xenograft Control, Criz, Osi, Osi+Criz | >300 | <4000 | nfeatures = 2000 | 1:11 | 1.8 | Fig. 7b |
| | | | | | | - |
| nFeature_RNA_min | the minimum number of genes per cell for inclusion this cell in analysis | | | | | |
| Feature_RNA_max the maximum number of genes per cell for inclusion this cell in analysis | | | | | | |