

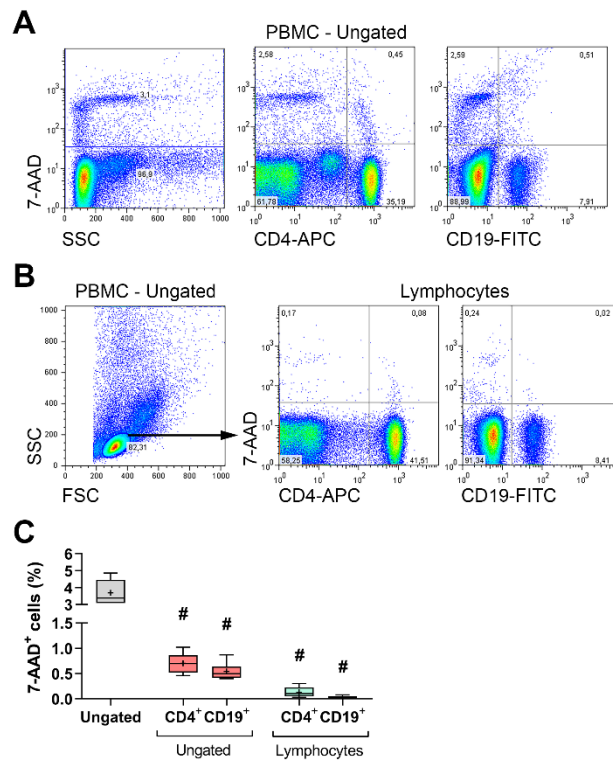
Supplementary Material

The imbalance of circulating follicular T helper cell subsets in primary Sjögren's syndrome associates with serological alterations and abnormal B-cell distribution

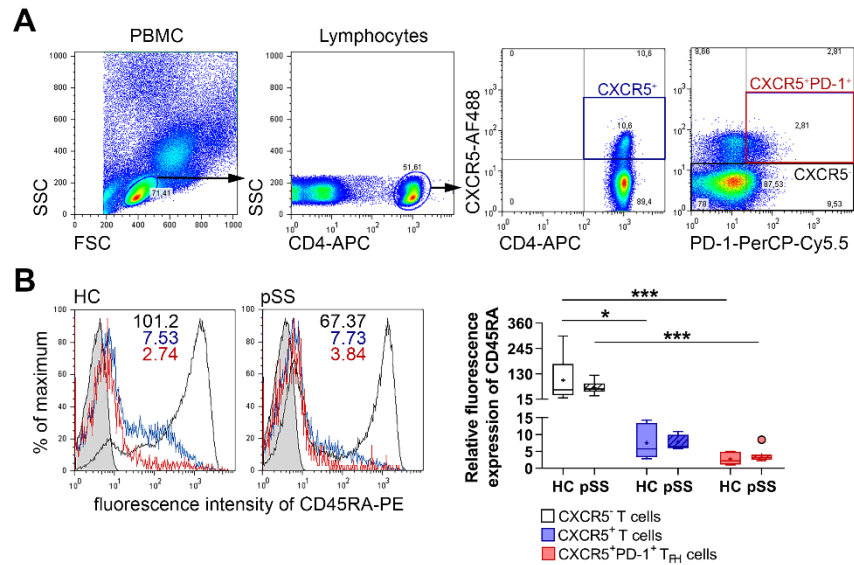
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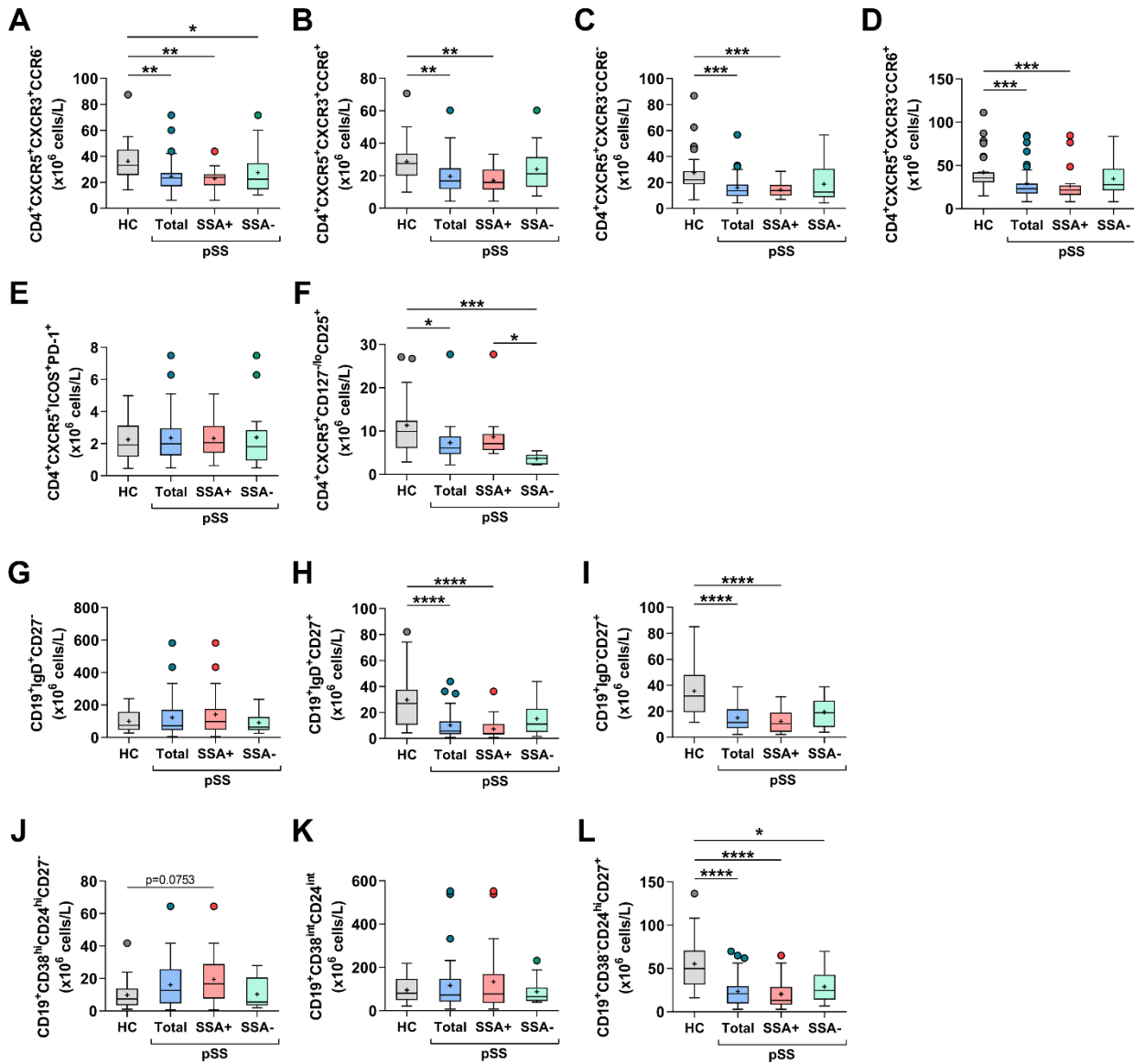
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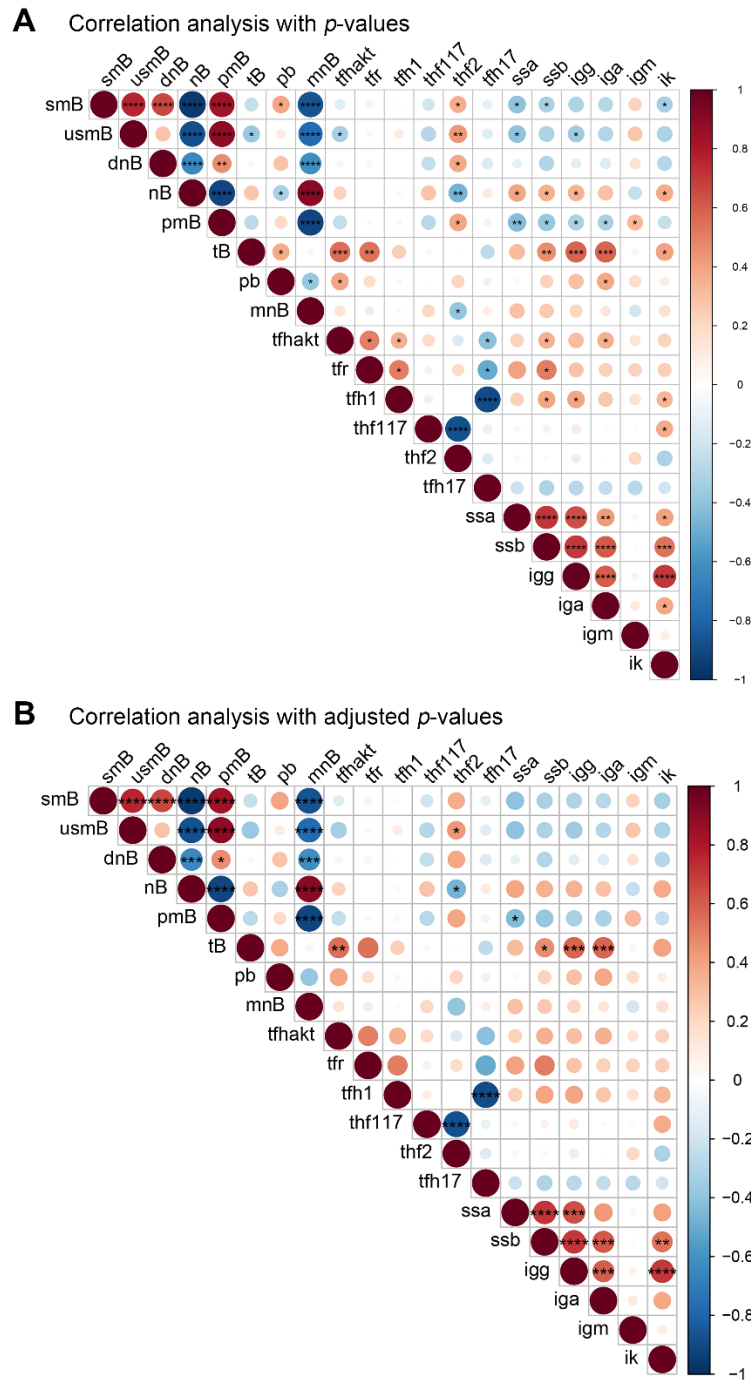
Supplementary Figure 1. Assessment of cell viability using 7-Aminoactinomycin D (7-AAD) staining in fresh PBMC samples. PBMCs were isolated from healthy controls (HC, $n = 6$) then cells were stained with anti-CD4-APC, anti-CD19-FITC fluorochrome-labelled antibodies and 7-AAD viability solution as described previously. Cells were assessed using FACS Calibur flow cytometer and further analyzed with FlowJo software. **(A)** Representative dot plots indicate the gating strategy and determination of viable cells within total PBMCs. **(B)** Representative dot plots indicate the gating strategy and determination of viable cells within lymphocytes. **(C)** Percentages of 7-AAD⁺ cells, CD4⁺7-AAD⁺ cells and lymphocytes, CD19⁺7-AAD⁺ cells and lymphocytes. One-way ANOVA with Tukey's multiple comparisons test was used for data analysis. Box plots represent the interquartile range (IQR) with a line in the middle as median and “+” sign as the mean value. Statistically significant differences are indicated by # $p < 0.0001$.



Supplementary Figure 2. Evaluation of the relative fluorescence expression of CD45RA on circulating CXCR5⁻ T cells, CD4⁺CXCR5⁺ and CD4⁺CXCR5⁺PD-1⁺ T cells. PBMCs were isolated from patients with pSS (n = 7) and healthy controls (HC, n = 6) then cells were stained with anti-CXCR5-AF488, anti-CD45RA-PE, anti-PD-1-PerCP-Cy5.5 and anti-CD4-APC fluorochrome-labelled monoclonal antibodies as described previously. Cells were analyzed using FACS Calibur flow cytometer and further examined with FlowJo software. **(A)** Representative dot plots show the gating strategy of T cell subsets. **(B)** Representative histograms display the expression of CD45RA in CXCR5⁻ T cells (black), CD4⁺CXCR5⁺ (blue) and CD4⁺CXCR5⁺PD-1⁺ (red) T cells. Relative fluorescence expression of CD45RA. Kruskal-Wallis test with Dunn's multiple comparisons test was used for statistical analysis. Box plots represent the interquartile range (IQR) with a line in the middle as median and “+” sign as the mean value. Statistically significant differences are indicated by * $p < 0.05$; *** $p < 0.001$.



Supplementary Figure 3. Abnormal distribution of the absolute numbers of cT_{FH} subsets, cT_{FR} cells and different B cell subsets. The absolute numbers of (A) cT_{FH}1, (B) cT_{FH}1/17, (C) cT_{FH}2, (D) cT_{FH}17, (E) activated cT_{FH}, (F) cT_{FR}, (G) IgD⁺CD27⁻ naive B cells, (H) IgD⁺CD27⁺ non-switched memory B cells, (I) IgD⁺CD27⁺ switched memory B cells, (J) CD38^{hi}CD24^{hi}CD27⁻ transitional B cells, (K) CD38⁺CD24⁺ mature-naive B cells, (L) CD38⁺CD24^{hi}CD27⁺ primarily memory B cells in pSS patients (n = 38), pSS without anti-SSA(-) (n = 14) and pSS with anti-SSA(+) (n = 24) and healthy controls (HC; n=29). Data analysis were performed using one-way ANOVA with Tukey's multiple comparisons test or Kruskal-Wallis test with Dunn's multiple comparisons test. Correlation analysis was carried out with Spearman's test. Box plots represent the interquartile range (IQR) with a line in the middle as median and "+" sign as the mean value. Statistically significant differences are indicated by **p* < 0.05; ***p* < 0.01; ****p* < 0.001; *****p* < 0.0001.



Supplementary Figure 4. Correlation analysis of the percentages of T_{FH} cell subsets, T_{FR} cells, B cell subsets and serological parameters in patients with pSS. Statistics and visualization of the correlation matrices were done with the R software, using the Hmisc and Corrplot packages. Spearman's correlation analysis were used for the correlations between the percentages of cell subsets and serological parameters and R-values were obtained using Corrplot function. **(A)** Correlation analysis with p -values and **(B)** adjusted p -values.