Med, Volume 2

### Supplemental information

# Mucosal-associated invariant T cell

#### responses differ by sex in COVID-19

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### Figure S1. Manual Gating Strategy and Immune Profiling of PBMC Subsets in COVID-19,

**Related to Figure 1.** (A-H) Gating strategy of major lymphocyte (A) and myeloid cell (B) subsets in PBMC samples, including CD4 (D) and CD8 (E)  $\alpha\beta$  T cells,  $\gamma\delta$  T cells (A), monocytes (B), B cells (F), plasmablasts (PB, C), NK cells (G) and dendritic cells (DC, H). (I) Frequencies of major PBMC subsets identified in A-H among healthy, exposed, infected and hospitalized groups. Significance was determined by Kruskal-Wallis test (p-values as indicated).



**Figure S2. Sex-Specific Changes of CD8<sup>+</sup> CD161<sup>hi</sup> and Memory T Cells in COVID-19 PBMCs analyzed by Flow Cytometry, Related to Figure 2.** (A) Gating strategy of CD8<sup>+</sup> CD161<sup>hi</sup> and memory T cells (αβ). (B) Representative flow plots of CD8<sup>+</sup> CD161<sup>hi</sup> and memory T cells from female and male individuals with severity rank. (C) Frequencies of naïve CD8 T cells among different severity groups as indicated. Significance was calculated by Kruskal-Wallis.



## Figure S3. Characterization of Immune Subsets in COVID-19 PBMCs by scRNA-seq,

**Related to Figure 3.** (A) High resolution clustering of PBMCs as shown in Figure 3A. (B) Expression of marker genes used to annotate the identifies of individual clusters. N, naïve; EM, effect memory; CM, central memory; DN, double negative; rep, replicating. cl, classical; int, intermediate; nc, non-classical; CD14 MO<sub>A</sub>, activated CD14 monocytes; CD16 MO<sub>A</sub>, activated CD16 monocytes; NK, natural killer; PB, plasmablasts; PLT, platelets; DC, dendritic cells.



**Figure S4. Expression of HBB and CD69 by Circulating MAIT Clusters in COVID-19, Related to Figure 5**. (**A**,**B**) Expression of hemoglobin related genes (*HBB, HBD, HBA2, HBA1*) are shown by PBMC clusbters (A) and MAIT clusters (B). Red dash boxes indicates RBC cells. (C to F) Data are grouped by MAIT clusters (C), sex (D), severity rank (E) as well as clusters and severity (F).



Figure S5. Comparisons of MAIT $\alpha$  and MAIT $\beta$  Features in MAIT Cells from Peripheral Blood and Airway Tissue Samples, Related to Figure 6. (A) Estimation of MAIT $\alpha$  and MAIT $\beta$  features of individual cells from PBMC and BALF dataset based on the expression of MAIT $\alpha$  gene (y-axis) and MAIT $\beta$  gene sets (x-axis). Differentially expressed genes between MAIT $\alpha$  and MAIT $\beta$  were used as two modular features, respectively. (B to D) Expression of IL7

receptor and its co-receptor genes (B), apoptosis-related genes (C), proliferation-related genes by MAIT cells from PBMC and BALF dataset (D).

Table S1. Clinical Metadata of Participants and Samples in this study, Related to Figure1 and Table 1. Clinical data of participants in the 1st sheet 1; sample metadata in the 2ndsheet.

**Table S2. List of DEGs of PBMC Clusters, Related to Figure 3.** The DEGs of each PBMC cluster are listed with details of p-values (p\_val), average log2 fold changes (avg\_logFC), percentages of cells with the detected feature (pct.1 and pct.2), clusters and gene names.

Table S3. List of DEGs of MAIT Subsets, Related to Figure 4. The DEGs of MAIT $\alpha$  and  $\beta$  are listed with details of p-values (p\_val), average log2 fold changes (avg\_logFC), percentages of cells with the detected feature (pct.1 and pct.2), clusters and gene names.

Table S4. List of Enriched Reactome Pathways of MAIT Subsets, Related to Figure 4. Details of the parameters provided by Reactome Pathway enrichment analysis. MAIT $\alpha$  in the 1st sheet 1; MAIT $\beta$ , the 2nd sheet.