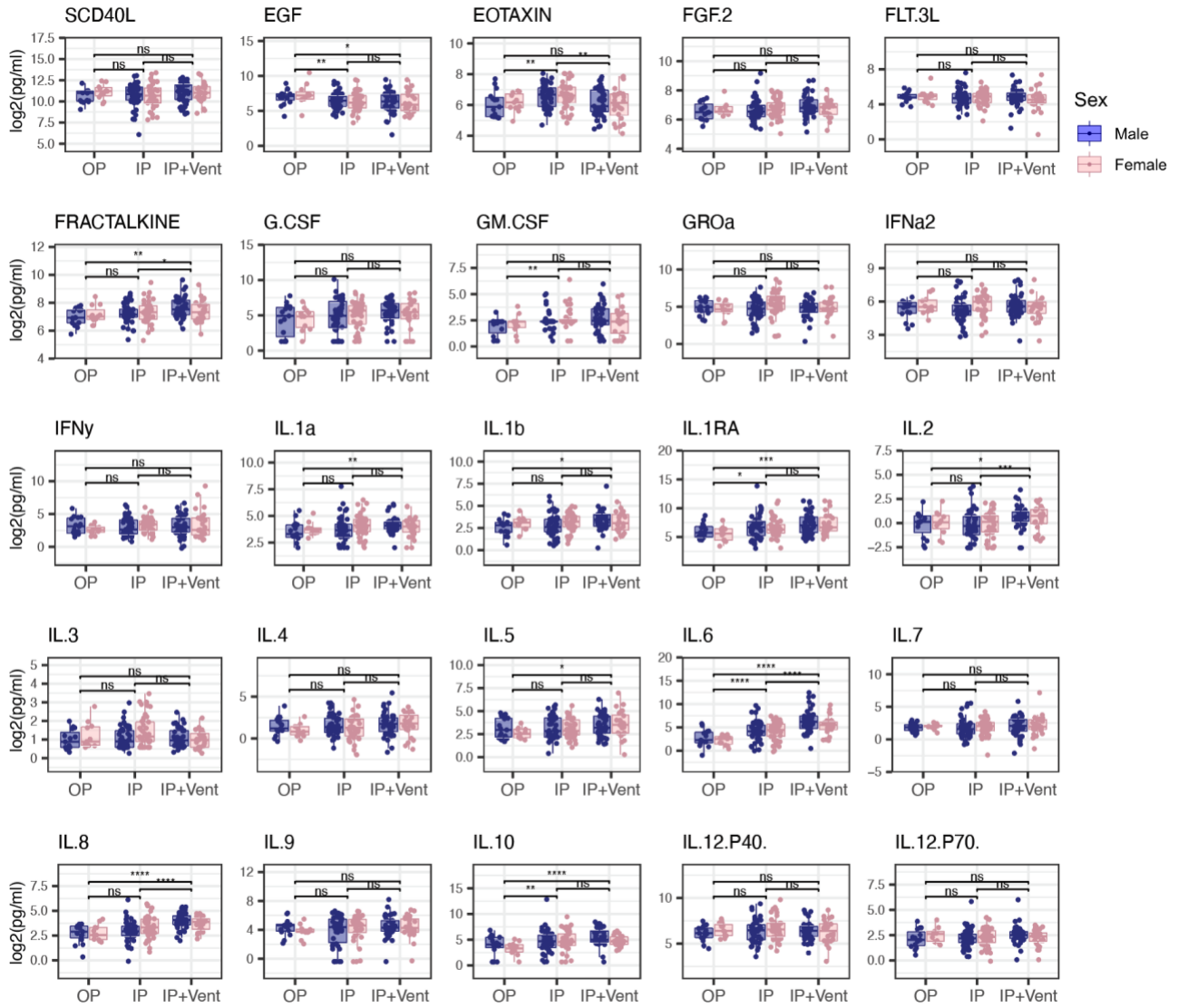
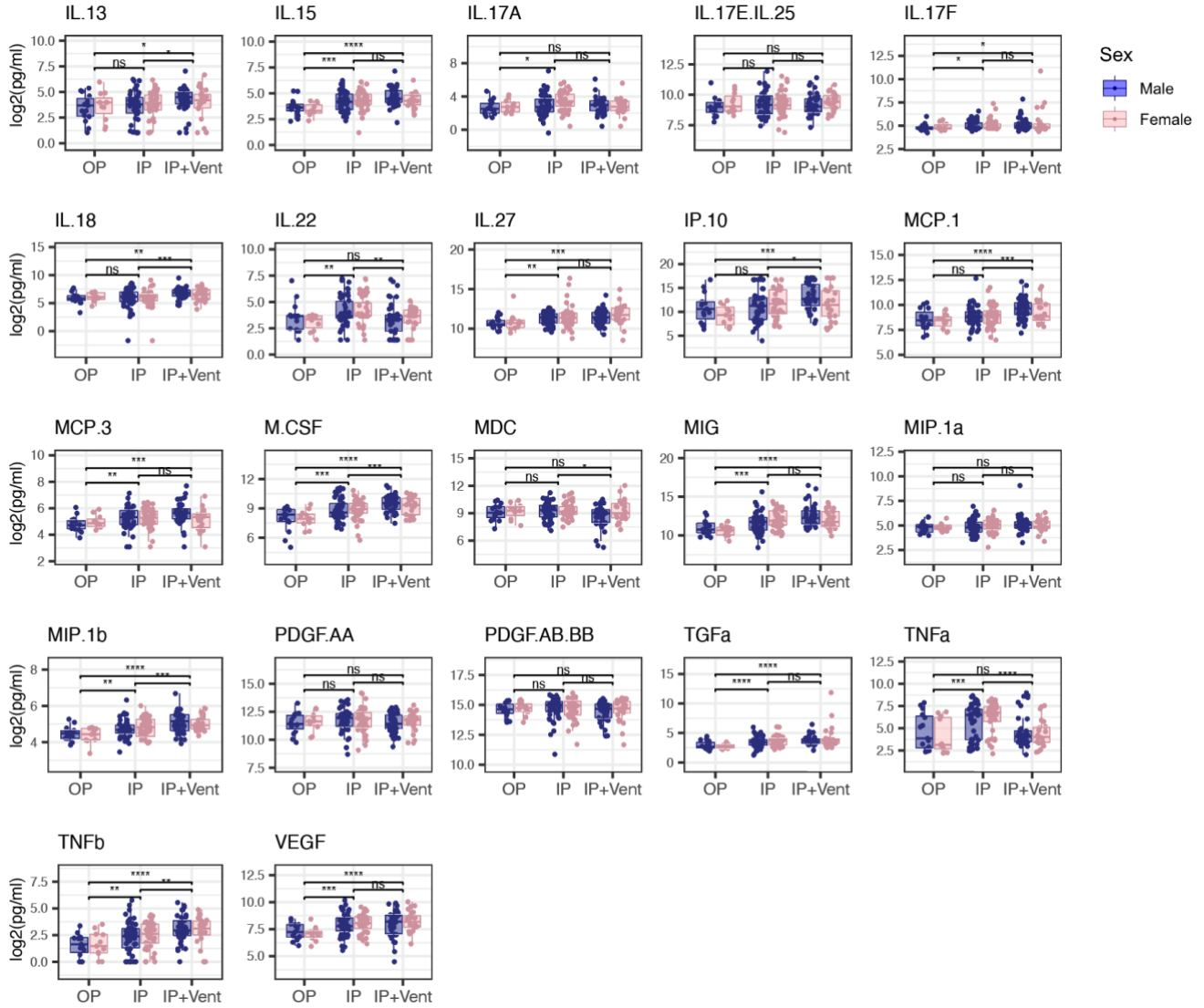


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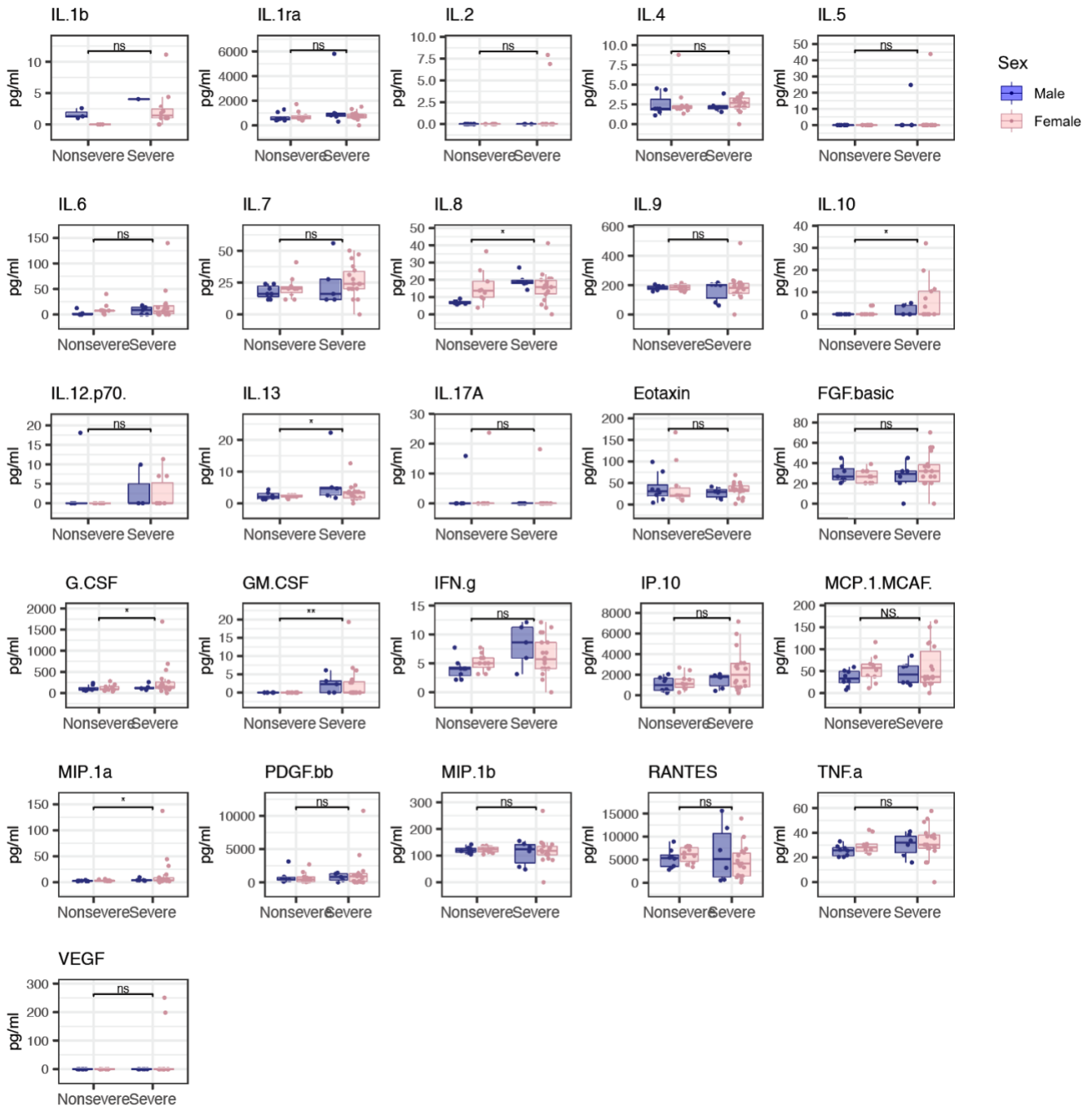


Figure S1. Visualization of cytokines in outpatients and inpatients with COVID-19 and in uninfected controls.

A) A total of 47 cytokines, chemokines and growth factors were measured from plasma of COVID-19 positive patients (N=152), and cytokines of interest were plotted by sex (blue, Male; pink, Female) and compared between patients with differing severity of illness

5 using a Mann-Whitney U test. (OP, outpatient; IP, inpatient; IP+Vent, ventilated inpatient). B)

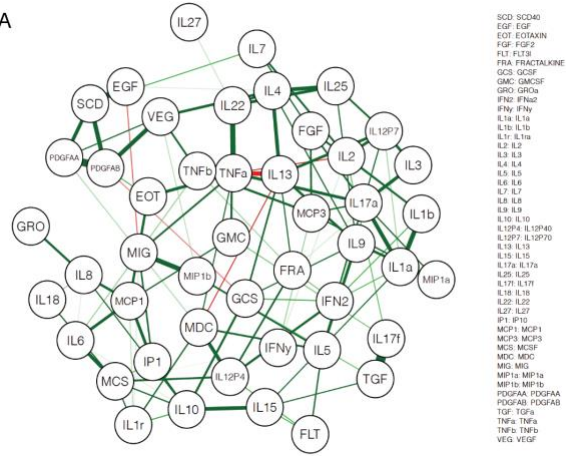
26 cytokines and growth factors were measured in plasma from 19 non-severe and 26 severe (requiring supplemental oxygen) COVID patients from VCU. Nonsevere and severe groups for each cytokine were compared using a Mann-Whitney U test.

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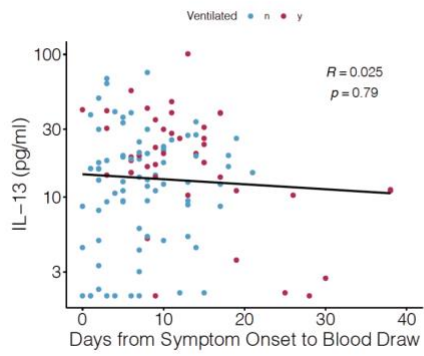
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Figure S2. Network analysis of cytokine genes, and relationship of IL-13 with days from symptom onset in patients with COVID-19.

A) The network analysis captured the structural relationships among cytokine measurements with graphical LASSO. The nodes represented individual cytokines and edges represented their correlations in that highly correlated cytokines

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were connected closer with thick edges. Green line = positive correlation; red line = negative

correlation. B) IL-13 plasma levels and corresponding days from symptom onset to time of blood draw were plotted (N= 125). Linear relationship was evaluated with spearman linear regression.

R-squared and p-values shown. Red = required mechanical ventilation; blue = did not require mechanical ventilation.

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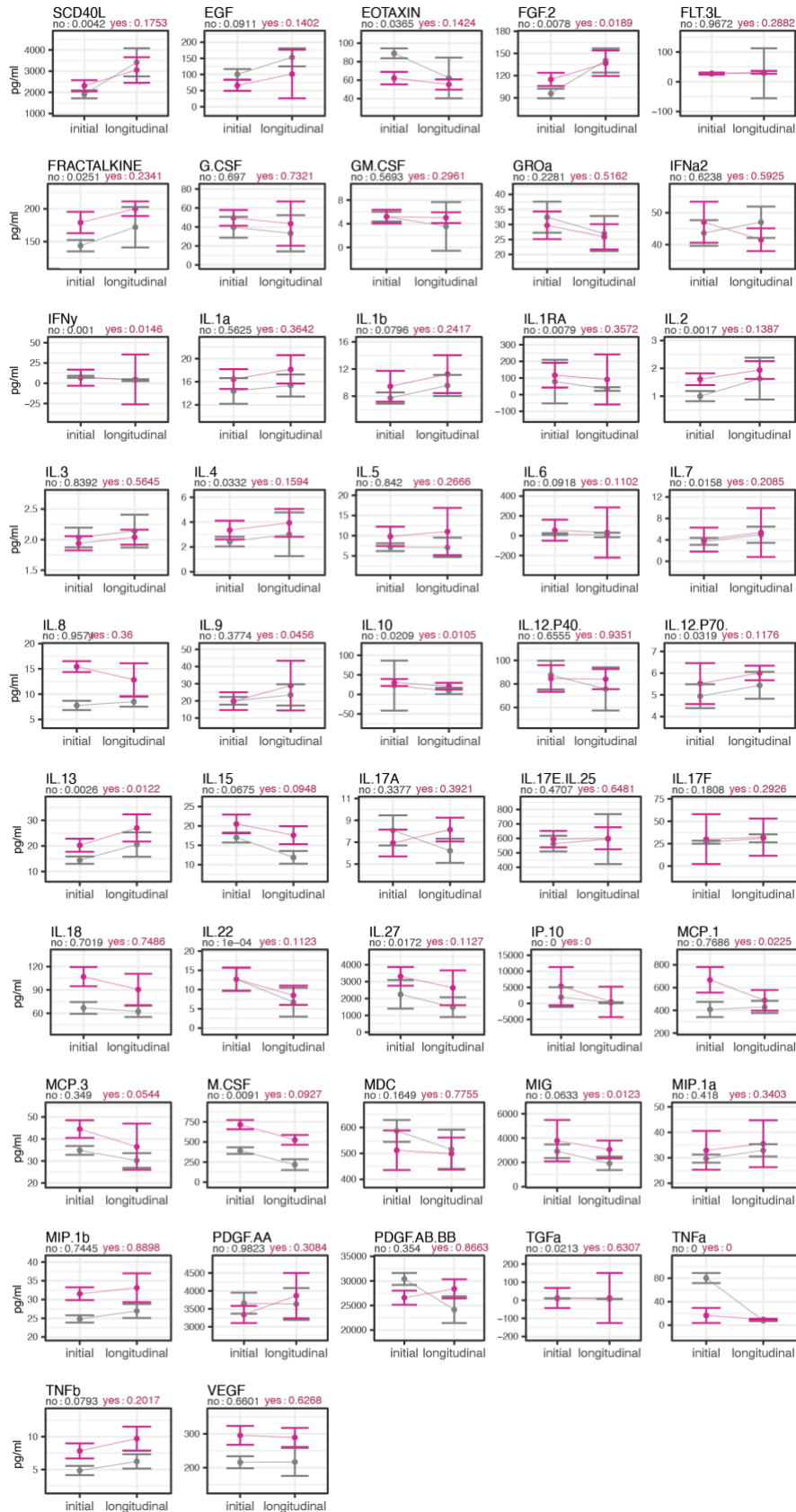


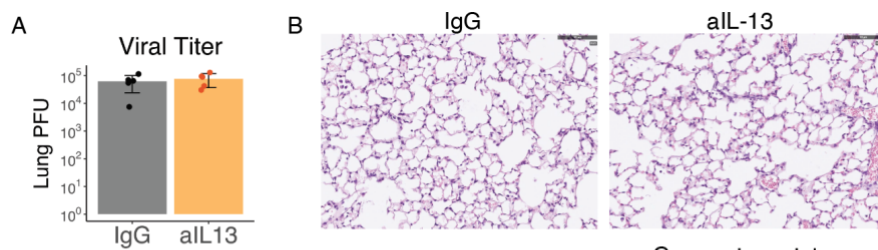
Figure S3. Initial vs longitudinal comparison for cytokines in COVID-19 positive patients.

47 cytokines, chemokines and growth factors measured in plasma samples from COVID-19 positive patients at the UVA Medical center. Mean and SE plotted for patients who were (pink) or were not (grey) ventilated at initial and longitudinal sample collection. Due to incomplete overlap in available samples between initial (N = 183) and longitudinal (N = 70) blood draws, Mann-Whitney U test was performed comparing initial to longitudinal groupings.

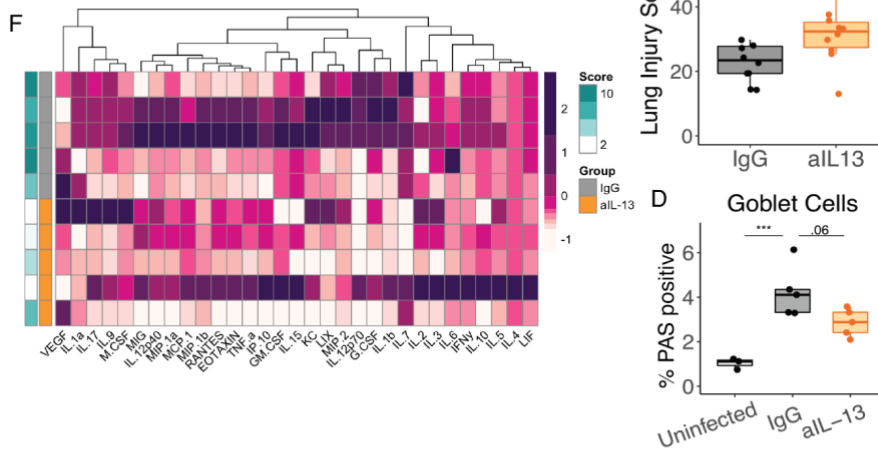
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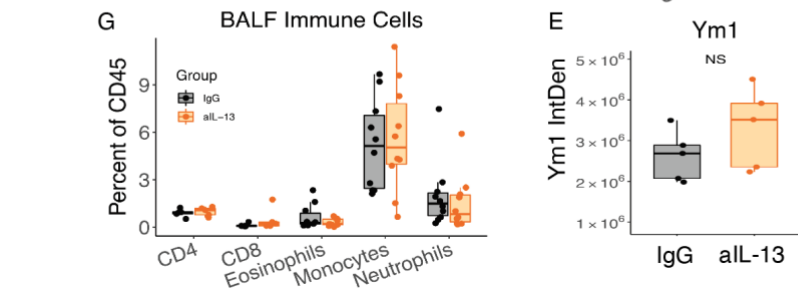
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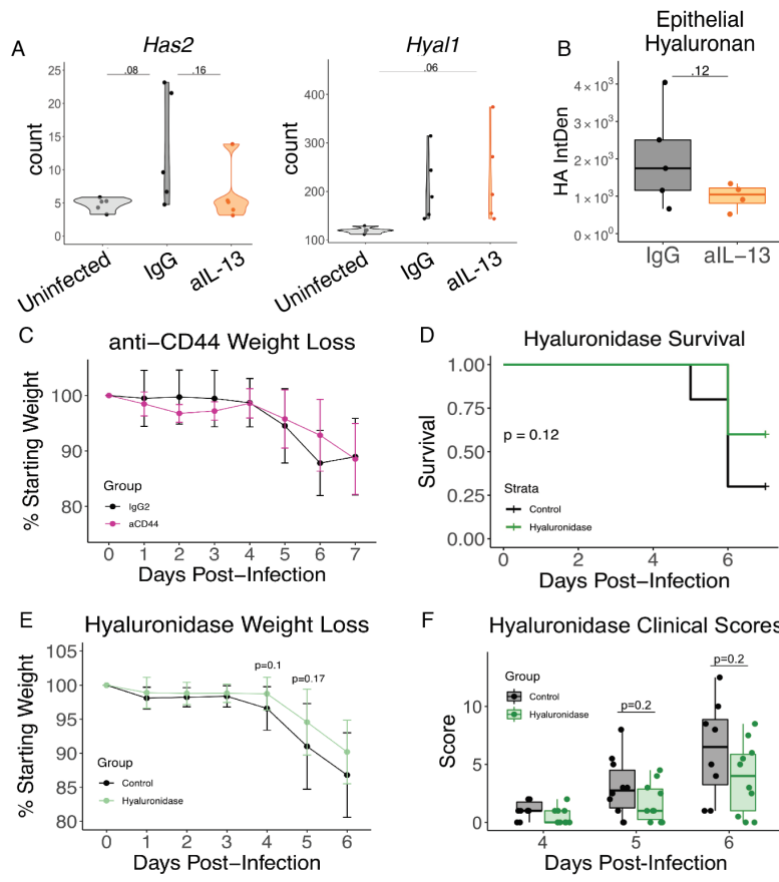
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Figure S4. Impact of anti-IL-13 on lung injury and inflammation in a mouse model of COVID-19. Mice were infected with 5×10^3 PFU of SARS-CoV-2 on day 0 and given 150 μ g of anti-IL-13 or IgG isotype control on days 0, 2, and 4. On day five, mice were euthanized and bronchoalveolar lavage (BAL) fluid collected. For histology, lungs were inflated with formalin before removing and fixing prior to H&E staining. A) Viral burden in lungs on day five pi was measured by plaque forming units (PFU) (N = 5 mice/group; 2 repeats; t-test). B) Hematoxylin and eosin stain of infected mouse lung with or without anti-IL-13 and C) Quantified lung injury score. (N = 10 mice/group; t-test) D) Goblet cells quantified from PAS staining of lung tissue from day five p.i. (N = 5 mice/group; Tukey's HSD) E) Ym1 with or without anti-IL-13. (N = 5 mice/group; mixed effect model) F) Cytokines in BAL were measured by Luminex (plotted with group identity and clinical score) (N = 5 mice/group) and G) immune cells in BAL quantified by flow cytometry. (N = 10 mice/group; t-test). NS= not significant; *** = $p < 0.01$

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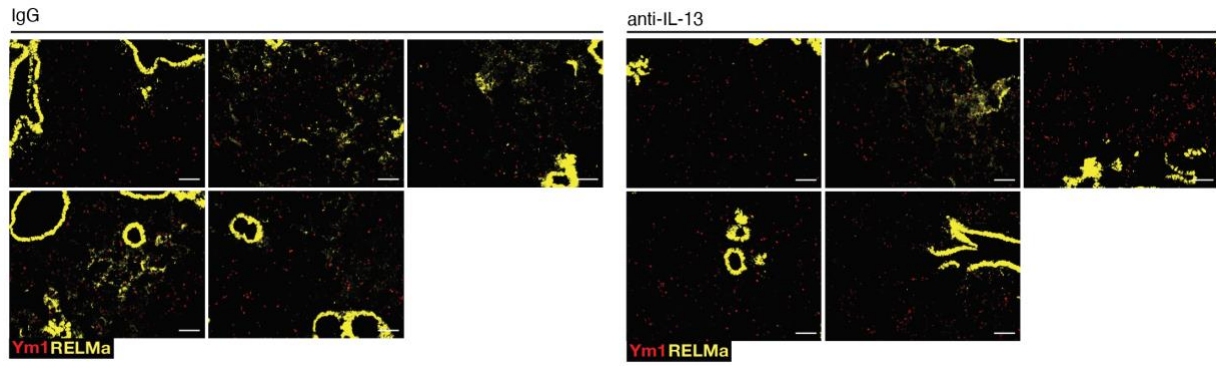
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Figure S5. Hyaluronan and its receptor contribute driving severe COVID-19 in mice. Mice were infected with 5×10^3 PFU of SARS-CoV-2 on day 0 and given 150 μ g of anti-IL-13 or IgG isotype control on days 0, 2, and 4. On day five, mice were euthanized and sections of lung were stored in trizol. RNAseq was done on lung tissue. Read counts of A) hyaluronan synthase 2 (*Has2*) and hyaluronidases 1 (*Hyal1*) were analyzed between anti-IL-13 treated mice and isotype controls. (N = 5 mice/group; Tukey's HSD). B) Quantification of intensity of epithelial hyaluronan from fluorescent staining (log-transformed, mixed-model). Infected mice were administered anti-CD44 antibodies or isotype IgG2 control on days 1,2,3 and 4 pi C) weight loss were quantified; combined two, independent experiments (N = 10 mice/group; t-test). D) Kaplan-Meier survival curve (log rank), E) weight loss and F) clinical scores from mice infected with 5×10^3 PFU of SARS-CoV-2 who were administered hyaluronidase on day five pi; combined, two independent experiments (N = 5 mice/group; E,F: t-test). *= $p < 0.05$; **= $p < 0.005$

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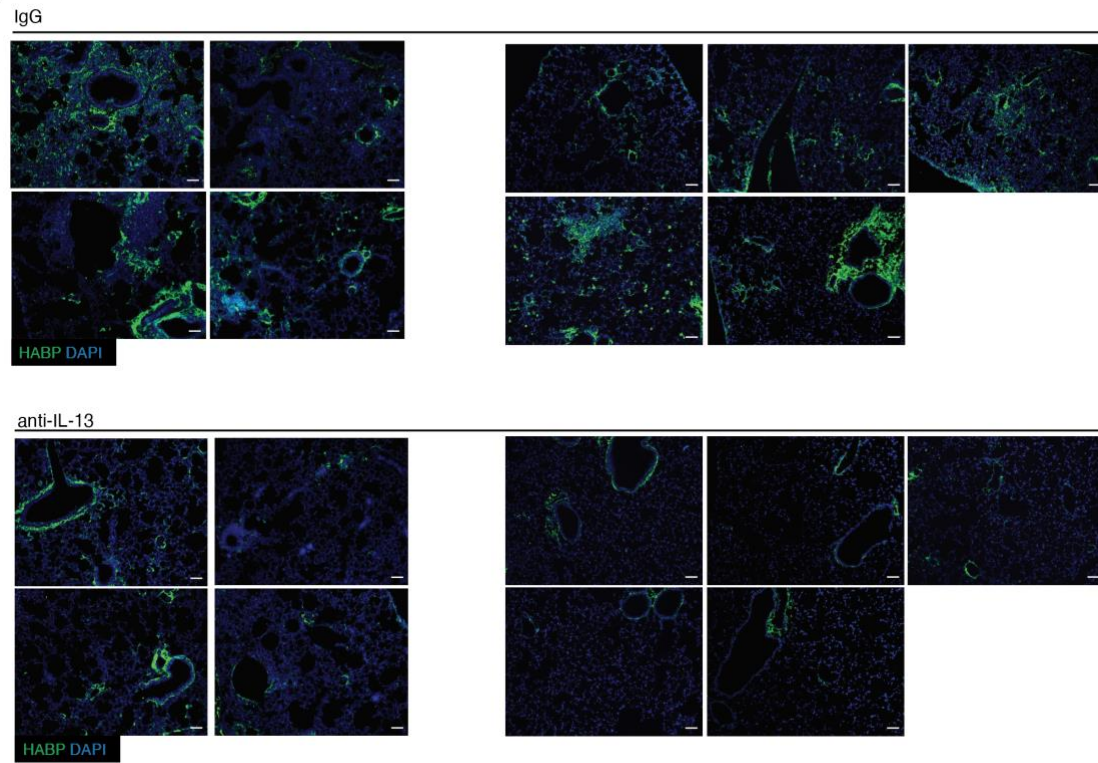


Figure S6. Staining of Ym1, RELM α and HA for all experimental mice. (Related to Figure 3 and 4). Mice received i.p. injections of anti-IL-13 on days 0 and 2 pi, were euthanized on day 5.

A) Lung sections stained with Ym1 (red) and RELM α (yellow) for SARS-CoV-2 infected mice treated with IgG or anti-IL-13. Each image is representative of an individual mouse, scale bar =

5 70 μ m. B) Lung sections stained with hyaluronan binding protein (HABP, green) and DAPI nuclei stain (blue) for SARS-CoV-2 infected mice treated with IgG or anti-IL-13. Each image is representative of an individual mouse, scale bar = 70 μ m

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Table S1. Age, sex and clinical status of UVA patients.

| | Outpatient (n = 26) | Inpatient (n = 152) |
|---|----------------------------|----------------------------|
| Age | 42.4 (15.1) | 59.2 (16.7) |
| Sex | | |
| • Male | 11 (42.3%) | 66 (43.3%) |
| • Female | 15 (57.7%) | 86 (56.6%) |
| Race | | |
| • Caucasian | 5 (19.2%) | 60 (39.5%) |
| • African-American | 7 (26.9%) | 34 (22.4%) |
| • Asian | 2 (7.7%) | 3 (2.0%) |
| • Other | 12 (46.1%) | 55 (36.2%) |
| Ethnicity | | |
| • Hispanic | 13 (50.0%) | 61 (40.1%) |
| • Non-Hispanic | 12 (50.0%) | 91 (59.9%) |
| Timing of blood draw from day of symptom onset (mean, SD) | 4.40 (2.95) | 11.3 (11.2) |
| Missing/unknown | 6 (23.1%) | 40 (26.3%) |
| Respiratory Status at time of blood draw | | |
| • No oxygen requirement | 25 (96.2%) | 45 (29.6%) |
| • Supplemental oxygen only | 1 (3.8%) | 57 (37.5%) |
| • Mechanical ventilation | 0 | 50 (32.9%) |
| At any time during illness | | |
| • No oxygen requirement | 25 (96.2%) | 28 (18.4%) |
| • Supplemental oxygen only | 1 (3.8%) | 59 (38.8%) |
| • Mechanical ventilation | 0 | 65 (42.8%) |
| Ct Value (mean, SD) | 28.2 (9.22) | 27.1 (6.15) |
| Missing/Unknown | 11 (42.3%) | 113 (74.3%) |
| Comorbidity* | 7 (26.9%) | 101 (66.4%) |
| • Diabetes | 5 (19.2%) | 66 (43.4%) |
| • Cancer | 1 (3.8%) | 14 (9.2%) |
| • Immunosuppression | 0 | 11 (7.2%) |
| • Kidney Disease | 0 | 30 (19.7%) |
| • Heart Disease | 1 (3.8%) | 28 (18.4%) |
| • Lung Disease | 1 (3.8%) | 22 (14.5%) |
| • Liver Disease | 0 | 2 (1.3%) |
| • Stroke | 1 (3.8%) | 13 (8.6%) |
| <p>*Presence of any one of these pre-existing illnesses; diabetes, cancer, kidney, heart, lung, or liver disease, stroke, organ transplant, other immunosuppression. (William, E.J. et al, OpenSAFELY: factors associated with COVID-19 death in 17 million patients. Nature https://doi.org/10.1038/s41586-020-2521-4)</p> | | |

Table S2. Contributors to Component 1 in PCA plot. Principal component analysis was performed using the Proc Factor in SAS. For principal component one, those cytokines with a loading score of 0.5 or above were retained.

| Order | Cytokine | PC1 Loading |
|--------------|-----------------|--------------------|
| 1 | IL-1a | 0.86636 |
| 2 | MCP-3 | 0.82474 |
| 3 | IL-1b | 0.79245 |
| 4 | Il-12p70 | 0.79093 |
| 5 | MIP-1a | 0.78886 |
| 6 | IL-13 | 0.77694 |
| 7 | IL-2 | 0.76816 |
| 8 | IL-9 | 0.75838 |
| 9 | FGF2 | 0.75743 |
| 10 | IL-17a | 0.73832 |
| 11 | Fractalkine | 0.72882 |
| 12 | IFNa2 | 0.71946 |
| 13 | IL-25 | 0.71022 |
| 14 | TNF-b | 0.70035 |
| 15 | IL-15 | 0.67703 |

Table S3. Age, sex and clinical status of VCU patients.

| | Non-severe (n = 22) | Severe (n = 25) |
|---|----------------------------|------------------------|
| Age | 48.3 (17.0) | 30.2 (9.3) |
| Sex | | |
| • Male | 10 (45.5%) | 18 (72.0%) |
| • Female | 12 (54.5%) | 7 (28.0%) |
| Race | | |
| • Caucasian | 1 (4.5%) | 5 (20.0%) |
| • African-American | 17 (77.3%) | 19 (76.0%) |
| • Asian | 1 (4.5%) | 0 (0.0%) |
| • Other | 3 (13.6%) | 1 (4.0%) |
| Ethnicity | | |
| • Hispanic | 3 (13.6%) | 1 (4.0%) |
| • Non-Hispanic | 19 (86.4%) | 24 (96.0%) |
| Timing of blood draw from day of symptom onset (if known) (mean, SD) | 6.95 (3.43) | 10.1 (12.3) |
| Respiratory Status at time of blood draw | | |
| • No oxygen requirement | 15 (68.2%) | 2 (8.0%) |
| • Supplemental oxygen only | 7 (31.8%) | 20 (80.0%) |
| • Mechanical ventilation | 0 (0.0%) | 3 (12.0%) |
| At any time during illness | | |
| • No oxygen requirement | 15 (68.2%) | 2 (8.0%) |
| • Supplemental oxygen only | 7 (31.8%) | 15 (60.0%) |
| • Mechanical ventilation | 0 (0.0%) | 8 (32.0%) |
| Comorbidity* | 15 (68.2%) | 21 (84%) |
| • Diabetes | 9 (40.9%) | 10 (40.0%) |
| • Cancer | 3 (13.6%) | 6 (24.0%) |
| • Immunosuppression | 4 (18.2%) | 2 (8.0%) |
| • Kidney Disease | 4 (18.2%) | 5 (20.0%) |
| • Heart Disease | 6 (27.3%) | 6 (24.0%) |
| • Lung Disease | 6 (27.3%) | 6 (24.0%) |
| • Liver Disease | 2 (9.1%) | 4 (16.0%) |
| • Stroke | 1 (4.5%) | 2 (8.0%) |
| <p>*Presence of any one of these pre-existing illnesses; diabetes, cancer, kidney, heart, lung, or liver disease, stroke, organ transplant, other immunosuppression. (William, E.J. et al, OpenSAFELY: factors associated with COVID-19 death in 17 million patients. Nature https://doi.org/10.1038/s41586-020-2521-4)</p> | | |

Table S4. Enriched pathways in differentially regulated genes in murine COVID-19

infection. Enrichment analysis was applied to the total gene counts using the CAMERA

algorithm. Pathways are arranged by descending number of entities found.

| Pathway Name | Entities Found | Entities Total | Entities Ratio | Entities Pval | Entities FDR | Rxns Found | Rx ns Total | Rxns Ratio | RNA seq |
|---|----------------|----------------|----------------|-----------------|-----------------|------------|-------------|--------------|---------|
| Signaling by Interleukins | 581 | 647 | 0.044 | 1.54E-03 | 2.91E-02 | 489 | 493 | 0.038 | ▲ |
| Deubiquitination | 259 | 288 | 0.02 | 1.25E-03 | 2.43E-02 | 77 | 77 | 0.006 | ▲ |
| Interleukin-4 and Interleukin-13 signaling | 187 | 216 | 0.015 | 1.68E-03 | 3.12E-02 | 46 | 47 | 0.004 | ▲ |
| Antiviral mechanism by IFN-stimulated genes | 81 | 94 | 0.006 | 1.29E-03 | 2.5E-02 | 27 | 31 | 0.002 | ▲ |
| FCGR3A-mediated IL10 synthesis | 45 | 141 | 0.01 | 1.38E-03 | 2.66E-02 | 20 | 20 | 0.002 | ▼ |
| Aquaporin-mediated transport | 44 | 68 | 0.005 | 1.72E-03 | 3.18E-02 | 24 | 25 | 0.002 | ▼ |
| Antimicrobial peptides | 40 | 123 | 0.008 | 1.61E-03 | 3.02E-02 | 39 | 58 | 0.004 | ▲ |
| Glucagon signaling in metabolic regulation | 32 | 40 | 0.003 | 1.81E-03 | 3.29E-02 | 6 | 6 | 0 | ▼ |
| Interaction between L1 and Ankyrins | 28 | 33 | 0.002 | 1.14E-03 | 2.25E-02 | 4 | 4 | 0 | ▼ |
| Dissolution of Fibrin Clot | 12 | 14 | 0.001 | 1.79E-03 | 3.27E-02 | 19 | 19 | 0.001 | ▲ |
| Defective HLCS causes multiple carboxylase deficiency | 6 | 10 | 0.001 | 1.48E-03 | 2.81E-02 | 4 | 4 | 0 | ▼ |

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Table S5. Patient characteristics for the full cohort with and without usage of Dupilumab.

| Characteristics | With Dupilumab | Without Dupilumab |
|---|-----------------------|--------------------------|
| Age | | |
| Age at index event (yrs \pm 1 σ std dev) | 44.3 \pm 17.7 | 43.3 \pm 20.9 |
| Sex | | |
| Female | 68% | 55% |
| Male | 32% | 45% |
| Ethnicity | | |
| Race: White | 59% | 53% |
| Race: Black | 24% | 15% |
| ICD 10 R00-R99 ("Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified") | 91% | 59% |
| Vitals | | |
| Respiratory rate [breaths/min] | 16.6 \pm 6.5 | 17.0 \pm 29.8 |
| Heart rate [beats/min] | 81.3 \pm 12.1 | 81.6 \pm 17.8 |
| Oxygen saturation [%] | 88.4 \pm 21.1 | 85.6 \pm 23.1 |
| BMI [kg/m ²] | 33 \pm 8.4 | 29.5 \pm 8.4 |
| Blood pressure [mm Hg] | 128 / 77 | 127 / 76 |
| Procedures performed | | |
| Medicine Services and Procedures | 70% | 41% |
| Evaluation and Management Services | 75% | 51% |
| Medical and Surgical Procedures | 21% | 17% |
| Anesthesia | 19% | 8% |
| Medications (co-medications taken) | | |
| Dermatological agents | 96% | 50% |
| Musculoskeletal medications | 65% | 39% |
| Otics agents (infections of the ear) | 23% | 13% |
| Hormones | 95% | 44% |
| Respiratory agents | 89% | 44% |
| CNS-acting agents | 86% | 53% |
| Antimicrobials | 86% | 47% |
| Ophthalmic agents | 84% | 47% |
| Gastrointestinal medications | 81% | 42% |
| Cardiovascular medications | 75% | 39% |
| Genitourinary medications | 70% | 34% |
| Lab-measured properties | | |
| Metabolic panel | | |
| Sodium [mmol/L] | 139 \pm 2.44 | 139 \pm 3.16 |
| Potassium [mmol/L] | 4.07 \pm 0.38 | 4.13 \pm 0.54 |
| Chloride [mmol/L] | 103 \pm 3.66 | 103 \pm 4.14 |
| Bicarbonate [mmol/L] | 24.6 \pm 2.58 | 25.4 \pm 3.18 |

| | | |
|-----------------------------|---------------|--------------|
| Urea nitrogen [mg/dL] | 13.5 ± 6.65 | 15.6 ± 10.2 |
| Creatinine [mg/dL] | 0.834 ± 0.226 | 1.01 ± 2.07 |
| Glucose [mg/dL] | 124 ± 63.5 | 114 ± 54.9 |
| Calcium [mmol/L] | 9.3 ± 0.527 | 9.26 ± 0.582 |
| Magnesium [mmol/L] | 1.98 ± 0.3 | 2 ± 0.426 |
| Phosphate [mmol/L] | 3.3 ± 0.604 | 3.49 ± 1.08 |
| Complete Blood count | | |
| Erythrocytes [Mill/μL] | 4.6 ± 0.521 | 4.5 ± 0.669 |
| Leukocytes [1000/μL] | 8.64 ± 2.66 | 8.33 ± 4.36 |
| Hemoglobin [g/dL] | 13.3 ± 1.8 | 13.2 ± 2.01 |
| Hematocrit [%] | 39.3 ± 8.39 | 39.4 ± 6.80 |
| Liver function | | |
| ALT [U/l] | 25.6 ± 17.9 | 29 ± 48.8 |
| AST [U/l] | 25.2 ± 16.0 | 28.1 ± 71.8 |
| Coagulation | | |
| INR | 1.02 ± 0.38 | 1.17 ± 0.74 |
| Lipid panel | | |
| Cholesterol in LDL [mg/dL] | 102 ± 30.6 | 101 ± 35.8 |
| Cholesterol in HDL [mg/dL] | 54.1 ± 14.0 | 51 ± 16.2 |
| Triglycerides [mg/dL] | 127 ± 71.3 | 131 ± 109 |

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Table S6. N3C Dupilumab COVID severity outcomes. A total of 785 patients with a record of dupilumab prescription were in the N3C Data Enclave on November 16, 2020. Of these, 31 Dupilumab patients had a COVID+ test within 61 days after a dupilumab dose, resulting in a test positivity rate of 3.9% (95% CI: 2.8, 5.6). A total of 247,391 COVID+ patients with no record of Dupilumab were available for selection of matched controls. Five matches could be found for each patient. In the matched analytic dataset of COVID+ patients, no differences were seen in the hospitalization (OR=0.64, p=0.57) or death rates (p>0.99); though <20 deaths were seen in the entire dataset. In hospitalized patients, no differences were observed in the rates of ECMO (p>0.99) or IMV (p>0.99).

| | With concurrent Dupilumab | Matched controls without Dupilumab | Odds ratio | P-value |
|---------------------|----------------------------------|---|-------------------|----------------|
| Patients | 31 | 155 | | |
| Hospitalized | <20 | <20 | 0.64 | .57 |
| Ventilated | 0 | <20 | n/a | >.99 |
| Deceased | 0 | <20 | n/a | >.99 |

Table S7. Immunohistochemistry reagents.

| Antigen | Antibody Clone | Dilution | Source |
|-----------------------------------|--------------------------------|-----------------|--------------------------|
| Ym1 | Goat polyclonal – Biotinylated | 1:100 | R&D – BAF2446 |
| Relmα | Rabbit polyclonal | 1:100 | Peprotech – 500-P214 |
| Hyaluronan binding protein | Biotinylated | 1:100 | Merck Millipore - 385911 |
| - | Streptavidin 557 | 1:800 | R&D – NL999 |
| - | Donkey anti-rabbit IgG 637 | 1:200 | R&D – NL005 |

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