

1 **Supplementary Materials for**

2 **Lipid Raft-disrupting Miltefosine Preferentially Induces the Death of Colorectal Cancer Stem-**
3 **like Cells**

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23 **This PDF file includes:**

24

25 Figures S1-S6

26 Table S1

27 Table S4 to S6

28

29 **Other Supplementary Materials for this manuscript include the following:**

30

31 Table S2 (attached as a separate excel file)

32 Table S3 (attached as a separate excel file)

33 Table S7 (attached as a separate excel file)

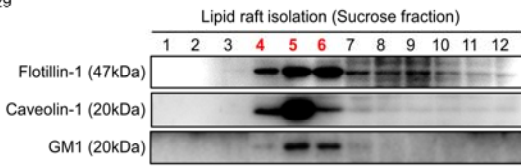
34 **Figure S1.**

35 **A)** Fractions obtained from a sucrose gradient centrifugation were analyzed by SDS-PAGE and
36 immunoblotting to identify Flotillin-1 and Caveolin-1 using corresponding antibodies. GM1, a
37 ganglioside of LR were detected using cholera toxin B subunit conjugated to HRP. **B)** Representative
38 extracted ion chromatograms (XIC) of LR fractions extracted from normal colon cell (FHC) and
39 colorectal cancer cell (HT29). Gangliosides were extracted by Xcalibur software (Thermo Scientific,
40 Bremen, Germany) with a mass tolerance of 5 ppm based on the identification by LipidSearch 4.2
41 (Thermo Scientific, Bremen, Germany). Quantification of each peak was analyzed by area under curve
42 (AUC) and compared between normal and tumor (n=3/group). AUC of identified gangliosides was
43 normalized by total AUC of gangliosides that were commonly detected in each group, and accounted
44 as relative abundance. Statistical significance was determined by Student's t-test. **C)** The elevated levels
45 of LRs in tumor tissues compared to matched normal tissues obtained from CRC patients. H&E staining
46 and immunofluorescence staining for DAPI nuclear staining (blue) and CTxB (green) with respective
47 merged and magnified images. LRs were visualized by using Alexa 488-conjugated CTxB, which binds
48 to ganglioside GM1, an LR component. Samples were examined by fluorescence microscopy (Axio
49 Imager 2, ZEISS, Oberkochen, Germany). **D)** Increased LR levels in adenomatous polyps in intestine
50 of adenomatous polyposis coli (*Apc*^{Min/+}) mice. Normal intestine of wild-type (WT) mice and the
51 adenomatous intestines of *Apc*^{Min/+} were compared. H&E staining and immunofluorescence staining for
52 DAPI nuclear staining (blue) and CTxB (green) with respective merged and magnified images. LRs
53 were visualized by using Alexa 488-conjugated CTxB, which binds to ganglioside GM1, an LR
54 component. Samples were examined by fluorescence microscopy (Axio Imager 2, ZEISS, Oberkochen,
55 Germany). **E)** LR disruption upon miltefosine treatment (48 hours) in dose dependent manner.
56 Quantification of LR level were analyzed by Median Fluoresce Intensity (MFI) ratio of CTxB (Fold to
57 Vehicle) which was normalized by Iso-Ab. (n=3/group) **F)** LR disruption upon 48-hour treatment of
58 LR-disrupting drugs, e.g. miltefosine, MβCD, simvastatin and perifosine was measured using flow
59 cytometry (n=3/group). Bar graph (left) shows the MFI ratio of CTxB (Fold to Vehicle) which was

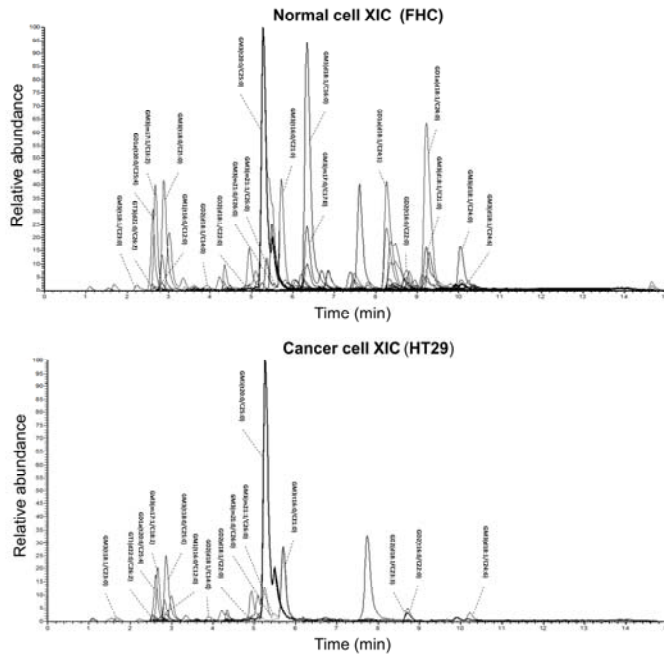
60 normalized by Iso-Ab. Representative combined flow cytometry histogram (right) showing the effect
61 of LR-disrupting treatment. **G)** Cell viability was determined by MTT assay after 48-hour treatment of
62 LR-disrupting drugs, miltefosine, M β CD, simvastatin and perifosine. (n=3/group) **E, F, G)** Statistical
63 values were analyzed by one-way ANOVA with Dunnett's multiple comparison test. **H and I)**
64 Comparison of relative sensitivity to 5-Fluorouracil (E) and oxaliplatin (F) in colorectal cancer cell lines
65 (HT29 and HCT116). Cells were treated with miltefosine (1 μ M) or DMSO (1%) and various
66 concentrations of 5-Fluorouracil or Oxaliplatin. After 48 hours of incubations, cell viability was
67 measured by MTT assay and the absorbance was measured using a microplate spectrophotometer (Bio-
68 Tek Instruments Inc, Winooski, VT, USA). IC₅₀ values based on reductions in cell viability were
69 calculated by nonlinear regression model and statistical difference between two dose-response curves
70 were determined based on extra sum-of-squares F test using GraphPad Prism v7.05 software (GraphPad,
71 La Jolla, CA, USA). *, **, *** indicates $p < 0.05$, $p < 0.01$ and $p < 0.001$, respectively.

Figure S1

A HT29



B



Class	Normal cell (%)	Cancer cell (%)	Fold change (Cancer/Normal)	p-value
GM1	0.06	0.15	2.31	0.019
GM3	25.83	46.84	1.81	0.011
GD1a	3.25	6.34	1.95	0.022
GD2	1.65	2.79	1.69	0.029
GT3	0.24	0.53	2.24	0.022

C

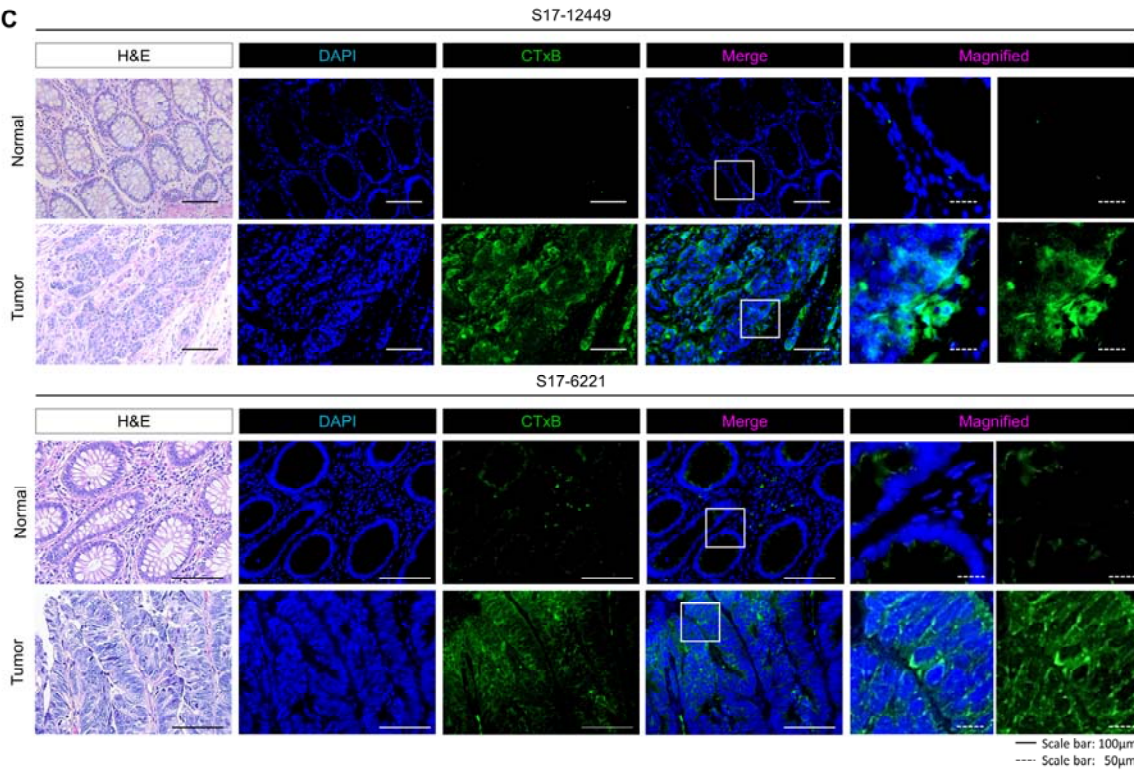
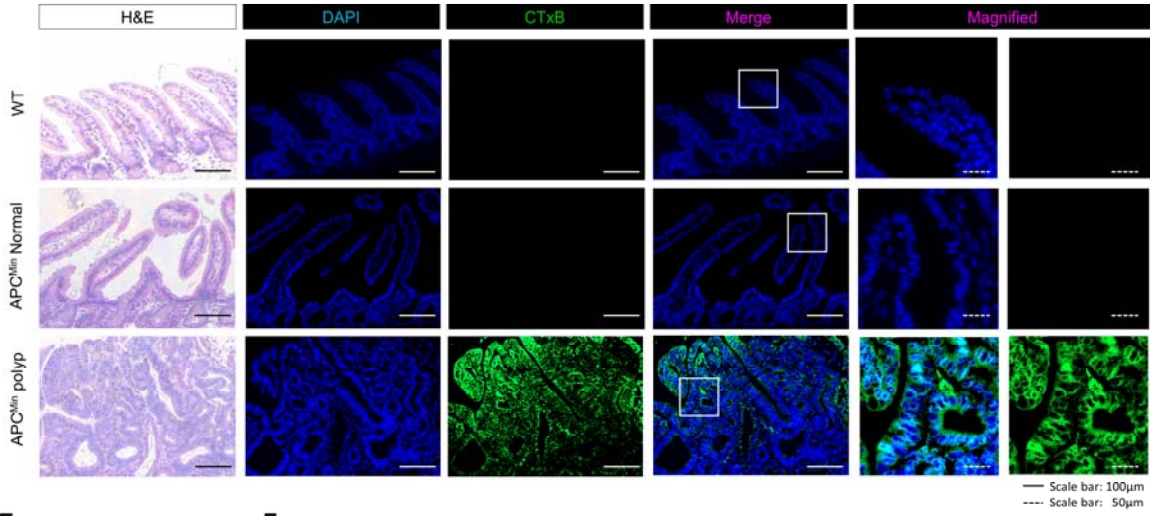
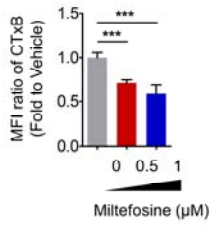


Figure S1

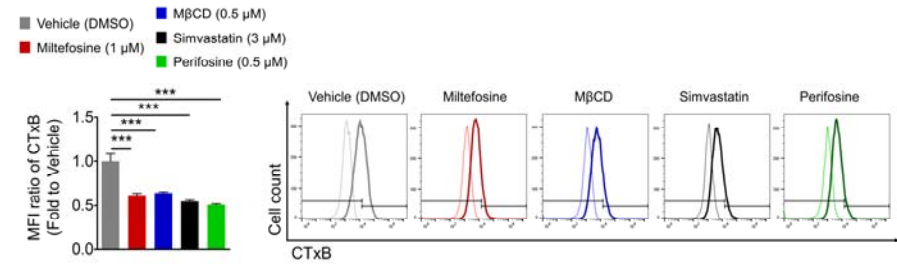
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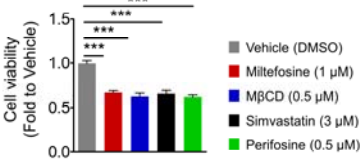
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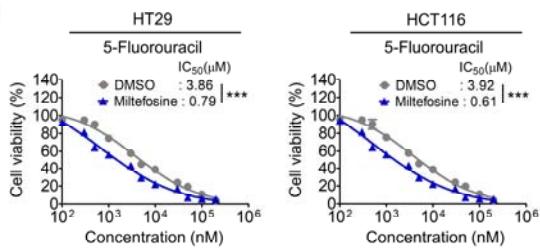
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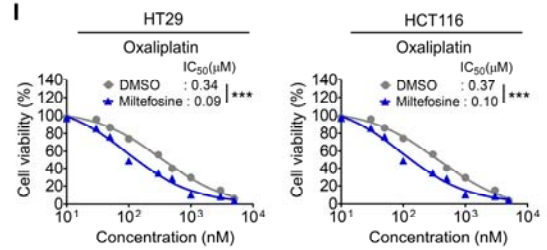
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H



I



74 **Figure S2.**

75 **A)** A solid isolation of CD44^{high} and CD44^{low} was performed using BD FACSAria™ III cell sorter (BD
76 Bioscience, New Jersey, USA) after being cultured in Sphere culture condition. 2D scatter plot of flow
77 cytometry which confirming the enrichment of CD44^{high} population in sphere culture condition
78 compared to monolayer culture condition was analyzed using BD Accuri™ C6 (BD Bioscience) and
79 FlowJo software (TreeStar, Ashland, OR, USA). **B)** Flow cytometry 2D scatter plots showing cells
80 doubly stained with CTxB and anti-CD44 antibody. The gates were established by staining with
81 corresponding isotype antibody. **C)** Comparison of LR levels in CD133^{high} and CD133^{low} populations,
82 or in ALDH1^{high} and ALDH1^{low} populations. Cells were doubly stained with CTxB and anti-CD44/or
83 ALDH1 antibody, and analyzed by FACS. Bar graph shows the MFI ratio of CTxB which was
84 normalized by Iso-Ab within the indicated population (mean ± SEM, n=3/group). Statistical
85 calculations were analyzed by Student's t-test. **D)** Representative combined flow cytometry histograms
86 (top) showing the effect of miltefosine treatment (0.5 μM and 1 μM, 48-hour treatment) on CD44^{high}
87 populations in dose dependent manner. Table (bottom) shows the quantification of CD44^{high} populations
88 upon miltefosine treatment and presented by mean ± SEM (n=3/group). **E)** 2D scatter plot (left) showing
89 the differential effect of miltefosine treatment on CD44^{high} and CD44^{low} cell population. Sorted cells
90 were treated with miltefosine (1 μM) for 48 hours and live/or dead cells were detected by staining with
91 Calcein-AM and PI, and then analyzed by FACS. Observed dead cell populations from each group were
92 quantified and presented in a bar graph (right, mean ± SEM, n=3). Statistical significance was analyzed
93 by one-way ANOVA with Dunnett's multiple comparison. **F)** 2D scatter plot of flow cytometry
94 confirming a solid isolation of CD44^{high} and CD44^{low} populations in hCRC2 cells after being cultured
95 in sphere condition. **G)** 2D scatter plot (left) showing the differential effect of 48-hour miltefosine
96 treatment on CD44^{high} and CD44^{low} cell population in hCRC2 cells. Live/or dead cells detected as
97 described in Figure S2E. Bar graph shows the percentage of dead cells in the population (mean ± SEM
98 (n=3)). Statistical significance was analyzed by one-way ANOVA, with Dunnett's multiple comparison.

99 **H)** Comparison of miltefosine sensitivity in multiple cell populations of HT29 cells; Bulk cancer cells,
100 sorted CD44^{high} cells and sorted CD44^{low} cells. Cells were treated with various concentration of
101 miltefosine and incubated for 48 hours. And then, cell viability was measured by MTT assay and the
102 absorbance values were detected by a microplate spectrophotometer. Based on cell viability, IC₅₀ values
103 were determined via nonlinear regression model calculation. Statistical difference among three dose-
104 response curves was analyzed based on extra sum-of-squares F test using GraphPad Prism. **I)** Level of
105 LR in sphere upon LR-disrupting drug treatment (48hours) e.g., miltefosine, MβCD, simvastatin,
106 perifosine. Representative combined flow cytometry histogram (left) showing the effect of LR-
107 disrupting treatment in CSC while bar graph (right) shows the MFI ratio of CTxB (Fold to Vehicle)
108 which was normalized by Iso-Ab (n=3/group). **J)** Sphere viability was determined by resazurin-based
109 Cell Titer Blue assay on the 7th day of sphere seeding. LR-disrupting drugs were administered every
110 other day throughout the sphere generation. Statistical significance was determined by one-way
111 ANOVA with Dunnett's multiple comparison. **K)** Confirmation of CSC enrichment under sphere
112 culture condition by RT-qPCR. Relative mRNA levels of stemness markers and differentiation markers
113 were examined in monolayer cultured cells and sphere cultured cells (n=3/group). The heatmap
114 represents the value of log₂FC in the range of -5 to +5 with $p < 0.05$ (n=3/group). Statistical calculation
115 was analyzed by Student's t-test. **L)** 2D scatter plot of flow cytometry confirming a solid isolation of
116 CTxB^{high} and CTxB^{low} populations in HT29 cells after being cultured in sphere condition. *, **, ***
117 indicates $p < 0.05$, $p < 0.01$ and $p < 0.001$, respectively.

118

Figure S2

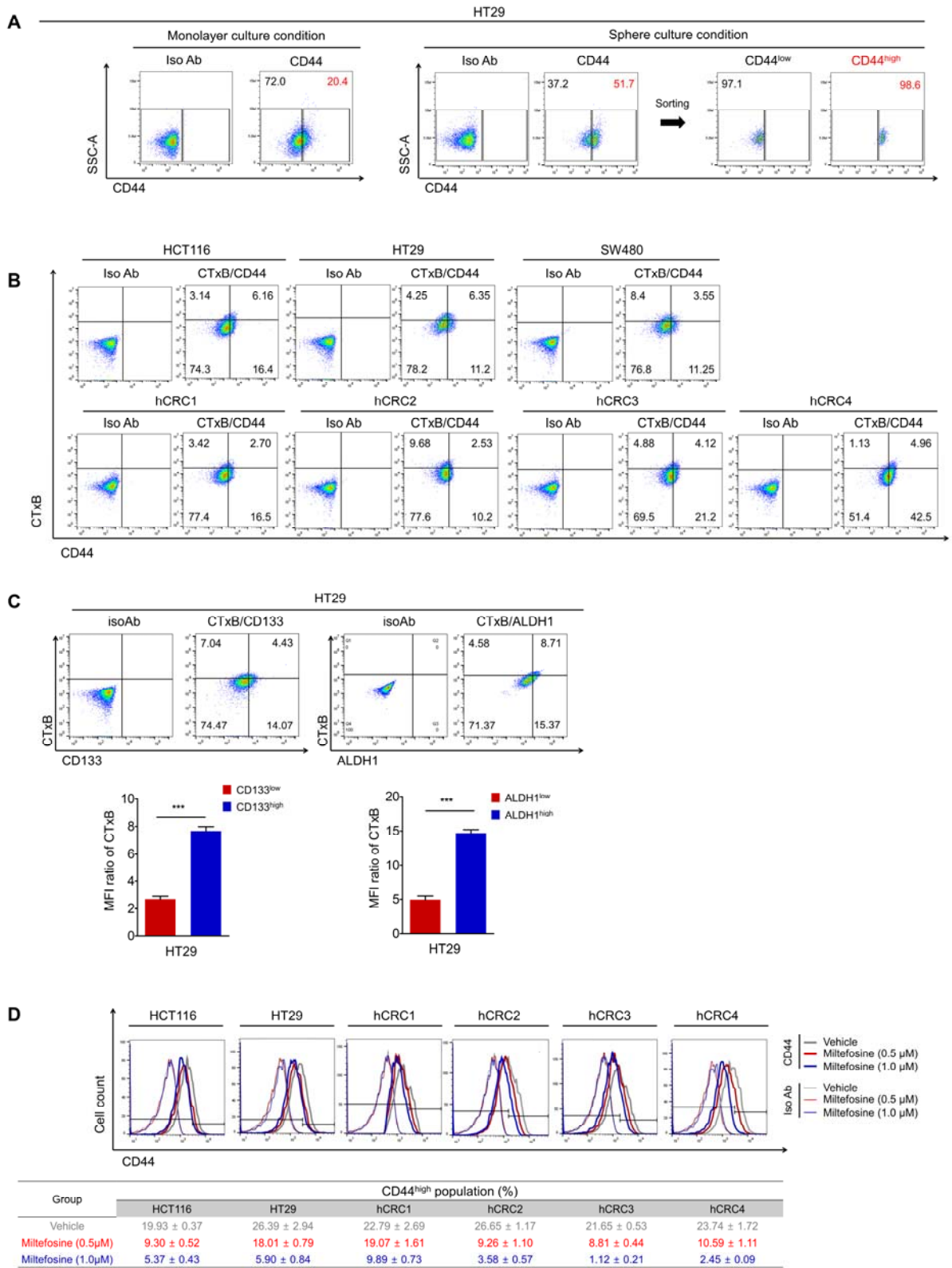
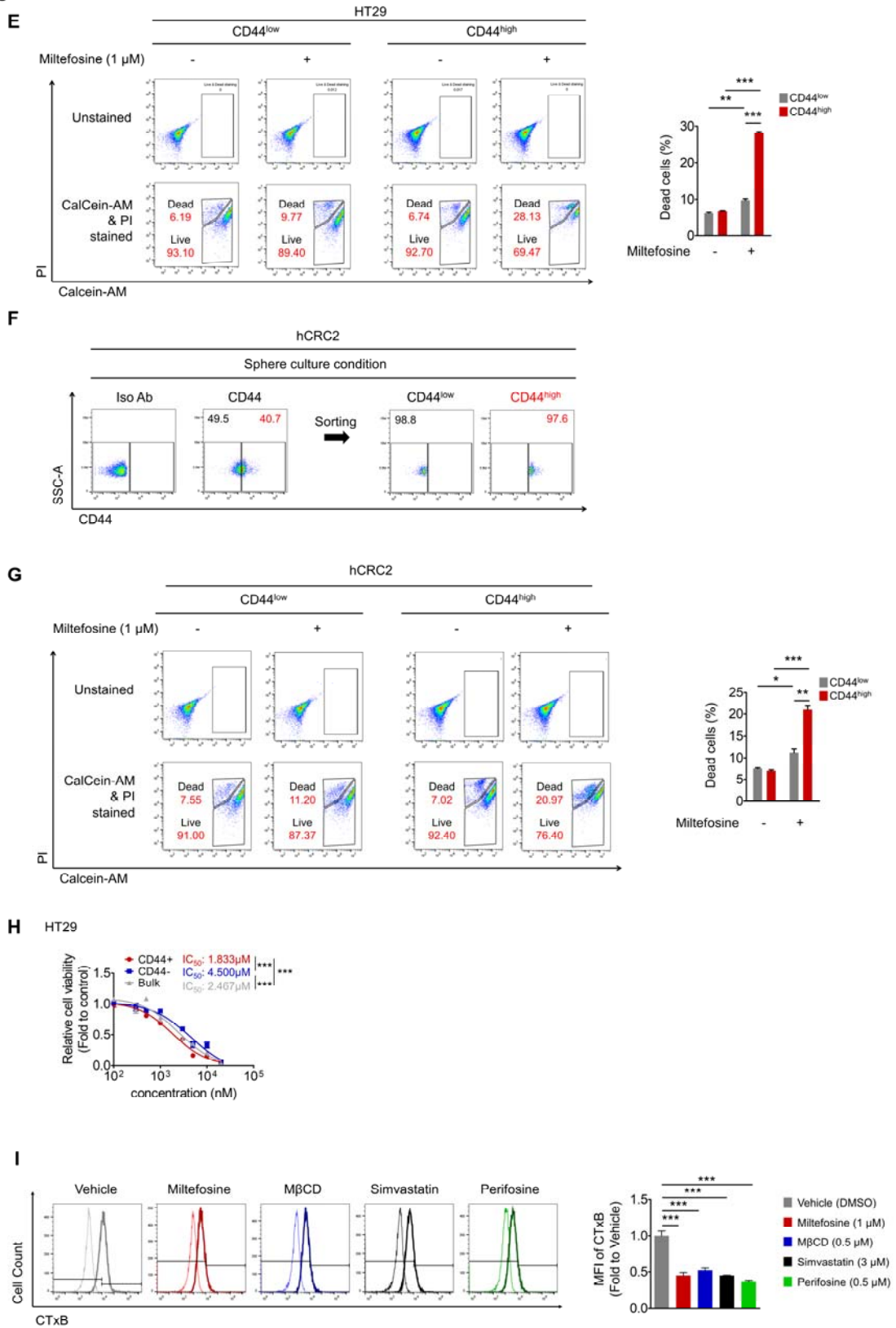
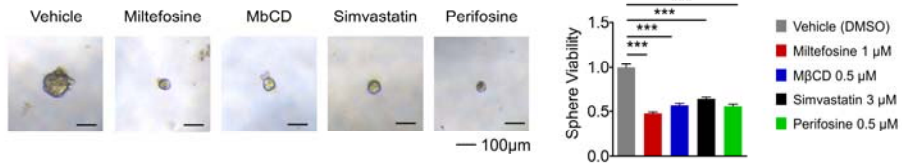
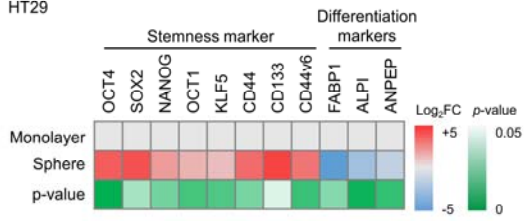
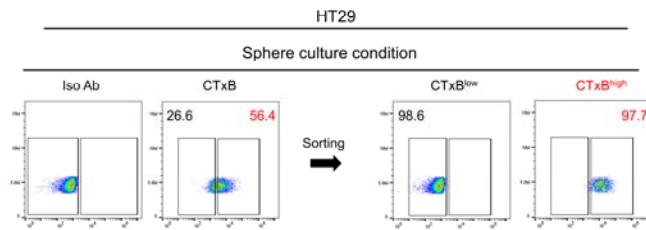


Figure S2



J**K** HT29**L**

122 **Figure S3.**

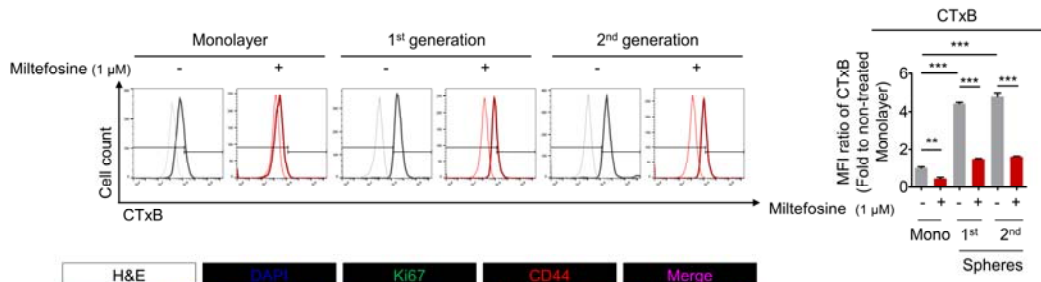
123 **A)** Comparison of LR levels in HT29 cells upon miltefosine treatment under various culture conditions:
124 monolayer, 1st sphere generation and 2nd sphere generation. CTxB levels were compared between
125 DMSO- and miltefosine-treated cells. DMSO and 1 μ M miltefosine were administered every other day
126 throughout the 1st sphere generation and monolayer culture for 7 days. Then, the cells were collected,
127 prepared as single-cell suspensions and replated for the 2nd sphere generation assay without further
128 miltefosine treatment. 2D histograms (left) show cells stained with the CTxB antibody. Quantification
129 of CTxB levels in each condition and treatment are shown as a bar graph (right panel). Bar graphs
130 indicate the MFI ratio of CTxB (fold change compared to the untreated monolayer), \pm SEM (n=3/group).
131 **B)** Representative immunofluorescent images (left) and quantitative analysis (right) of xenografted
132 tumors (1st generation) comparing the control and miltefosine-treated groups (Figure 3C). Relative
133 fluorescent intensity of Ki67 (green) and CD44 (red) was quantified by using Image pro premier 9
134 (Media Cybernetics) with normalization to DAPI intensity. Quantification was performed in three
135 randomly selected fields for each specimen (n=8/group). Statistical calculations were analyzed by
136 Student's t-test. Bar graph shows mean \pm SEM (n=8/group). **C)** Comparison of body weight changes of
137 both control and miltefosine treated groups from Day 0 to Day 21 post treatment. The graph shows
138 mean \pm SEM (n=8/group). Statistical significance between body weight changes of both groups was
139 determined by Two-way repeated-measures ANOVA followed by Bonferroni posttests. **D)** Three
140 representative immunohistochemistry images of liver and kidney of control and miltefosine treated
141 group. **E)** To examine the effect of miltefosine on tumor regrowth potential, tumor cells were isolated
142 from the 1st generation tumors (Figure 3C) and reinjected into NSG mice (12,500, 25,000, 50,000 and
143 100,000 cells/mouse, n=6/group) for *in vivo* LDA. No miltefosine treatment was applied during this *in*
144 *vivo* LDA. The regrowth of tumors (2nd generation) were monitored for 28 days. On 28th day after
145 reinjection, mice were sacrificed and the definite incidence of tumor-bearing mice was determined. The
146 frequency of stem cells per each group and statistical value were analyzed by a webtool
147 (<http://bioinf.wehi.edu.acu/software/elda>). *** indicates $p < 0.001$.

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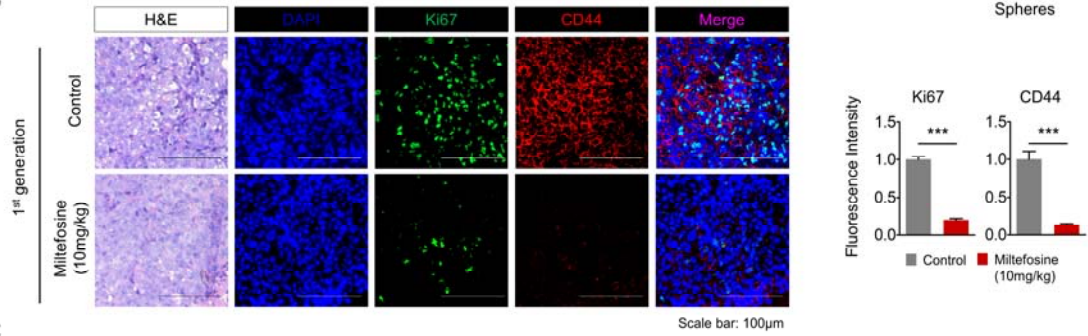
Figure S3

HT29

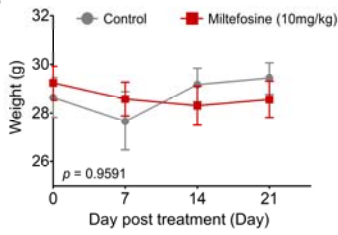
A



B



C



D

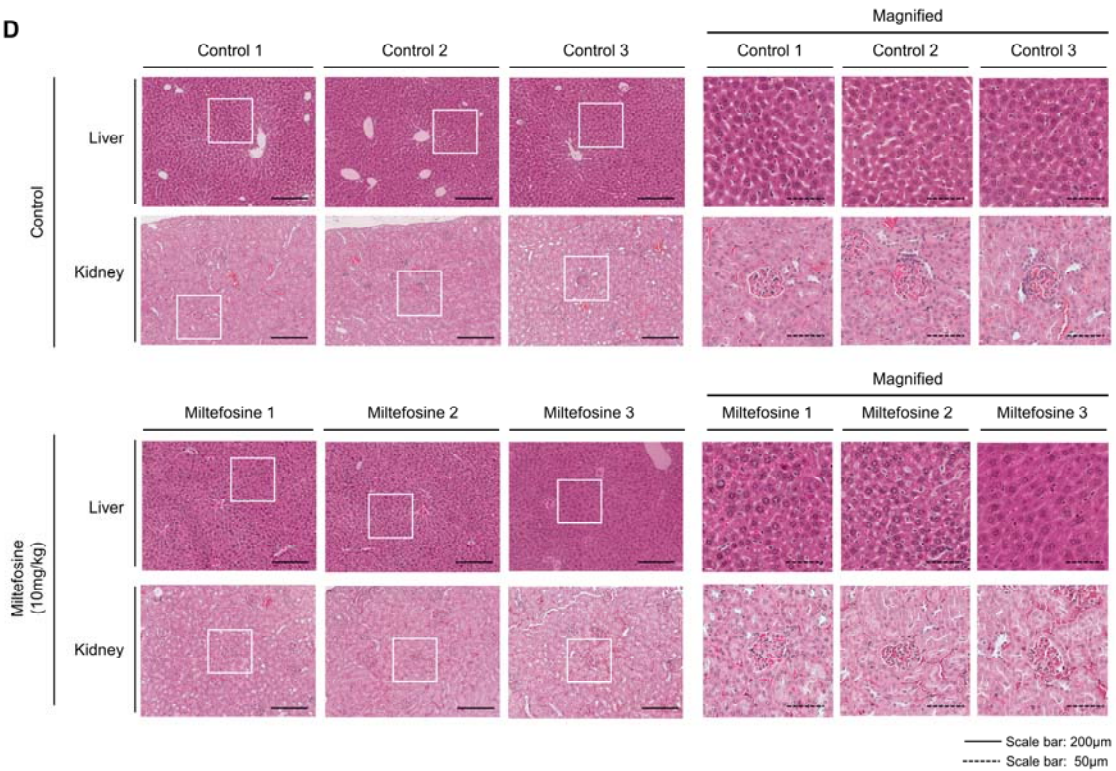


Figure S3

E

Cell no. of inoculation	Frequency of tumor formation								p-values
	10x10 ⁴		5x10 ⁴		2.5x10 ⁴		1.25x10 ⁴		
	Control	Miltefosine (10mg/kg)	Control	Miltefosine (10mg/kg)	Control	Miltefosine (10mg/kg)	Control	Miltefosine (10mg/kg)	
Day4	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	-
Day7	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	-
Day11	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	-
Day14	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	-
Day18	67% (4 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	1.13x10 ⁻²
Day21	67% (4 of 6)	17% (1 of 6)	17% (1 of 6)	0% (0 of 6)	17% (1 of 6)	0% (0 of 6)	0% (0 of 6)	0% (0 of 6)	2.40x10 ⁻²
Day25	83% (5 of 6)	50% (3 of 6)	67% (4 of 6)	17% (1 of 6)	50% (3 of 6)	17% (1 of 6)	0% (0 of 6)	0% (0 of 6)	1.76x10 ⁻²
Day28	100% (6 of 6)	67% (4 of 6)	83% (5 of 6)	17% (1 of 6)	50% (3 of 6)	17% (1 of 6)	50% (3 of 6)	0% (0 of 6)	3.03x10 ⁻⁴

151 **Figure S4.**

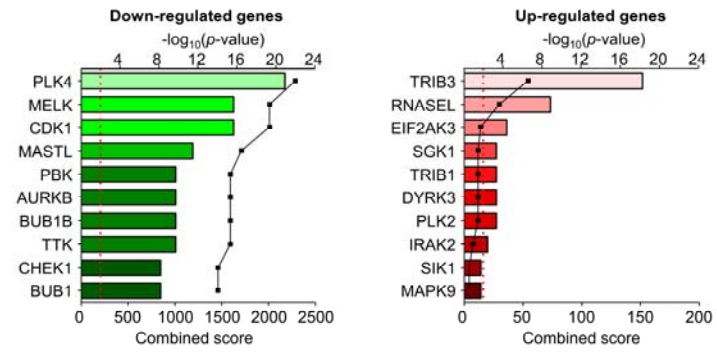
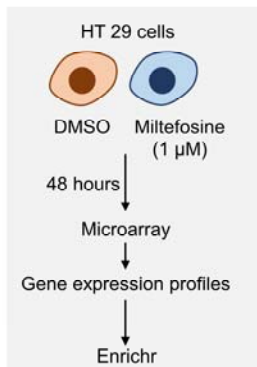
152 **A)** The significantly altered genes upon miltefosine treatment were analyzed by the web-based
153 bioinformatics tool, Enrichr (<http://amp.pharm.mssm.edu/Enrichr/>), to predict significantly altered
154 signaling pathways associated to miltefosine treatment. The results from this analysis showed the
155 potential protein kinases associated with miltefosine together with their p-value and combined score. A
156 combined score multiplies the log of the p-value computed with the Fisher exact test by the z-score
157 computed by assessing the deviation from the expected rank. **B)** Gene set enrichment analysis (GSEA)
158 was performed with microarray data of differential expressing gene comparing DMSO- and miltefosine
159 treated HT29 cells. The entire gene lists were applied for GSEA analysis, which included gene sets from
160 MSigDB pathways and C2: curated gene sets (c2.all.v6.2.symbols.gmt). FDR q-value < 0.05 was set as
161 the significance threshold. **C)** Flow cytometric analysis of CHEK1 and CTxB in HT29 cells. 2D scatter
162 plot (left) shows the cells doubly stained with CTxB and anti-CHEK1 antibody. Comparison of CHEK1
163 expression levels in CTxB^{high} and CTxB^{low} populations. Bar graph shows the MFI ratio of CHEK1
164 within CTxB^{high} or CTxB^{low} cells (mean ± SEM, n=3/group). Statistical values were analyzed by
165 Student's t-test. **D)** Comparison of LR levels and CHEK1 expression levels in HT29 cells upon
166 miltefosine treatment under various culture conditions: monolayer, 1st sphere generation and 2nd sphere
167 generation. CTxB levels and CHEK1 expression levels were compared between DMSO- and
168 miltefosine-treated cells. DMSO and 1 μM miltefosine were administered every other day throughout
169 the 1st sphere generation and monolayer culture for 7 days. After 7 days of 1st sphere generation, cells
170 were collected, prepared as single-cell suspensions and replated for the 2nd sphere generation assay
171 without further miltefosine treatment. 2D scatter plots (left panel) show cells doubly stained with CTxB
172 and the anti-CHEK1 antibody. Quantification of CTxB and CHEK1 expression in the whole cell
173 population and CHEK1 expression in CTxB^{high} cells are shown as bar graphs (right panel). Bar graphs
174 indicate the MFI ratio of parameters (fold change compared to untreated monolayer), ± SEM
175 (n=3/group). Data are shared with Figure S3A which is modified to solely represent the level of CTxB.
176 **E)** Comparison of LR levels and CHEK1 expression levels in HT29 cells upon 48-hour miltefosine

177 treatment. 2D scatter plots (left) show cells doubly stained with CTxB and anti-CHEK1 antibody.
178 Quantification of CTxB level and CHEK1 expression in whole cell population and CHEK1 expression
179 in CTxB^{high} cells were shown as bar graphs. Bar graphs indicate MFI ratio mean \pm SEM (n=3/group).
180 **D-E)** Statistical analysis was performed by one-way ANOVA, with Dunnett's multiple comparison. **F)**
181 Protein expression of CHEK1 in normal and tumor tissues obtained from colorectal cancer patients. β -
182 actin was used as a loading control. Values below each lane indicate the relative band intensity of target
183 protein normalized to β -actin as fold to control lane. **G and H)** Clinical data analyzed obtained from a
184 web-based data mining platform, Oncomine. **(G)** Comparison of CHEK1 mRNA levels between in CRC
185 tissues (n=36) and normal colorectal tissues (n=24) in Skrzypczak colorectal dataset (GSE20916). **(H)**
186 Comparison of CHEK1 mRNA levels between in stage 1 CRC tissues (n=4) and stage 3 CRC tissues
187 (n=27) in GSE35834 dataset. Statistical significance was determined by Student's t-test. **I)** The
188 prognostic value of CHEK1 in patients with CRC using GSE24551 dataset. Patients were divided into
189 two groups according to CHEK1 expression levels. Kaplan-Meier analysis and statistical calculation
190 were conducted by R2: Genomics analysis and visualization platform. **J, K)** Comparison of CHEK1
191 expression levels in CD44^{high} and CD44^{low} populations or in CD133^{high} and CD133^{low} populations.
192 Representative 2D scatter plots show (J) HT29 and (K) HCT116 cells doubly stained with anti-CHEK1
193 and anti-CD44/or CD133 antibody. **L)** Comparison of CHEK1 expression levels in ALDH1^{high} and
194 ALDH1^{low} populations. HT29 and HCT116 cells were double stained with anti-CHEK1 and anti-
195 ALDH1 antibody, and analyzed by FACS. Bar graph (right) shows the MFI ratio of CHEK1 expression
196 within the indicated populations (mean \pm SEM, n=3/group). Statistical significance was determined by
197 Student's t-test. *, **, *** indicates $p < 0.05$, $p < 0.01$ and $p < 0.001$, respectively.

198

Figure S4

A



B

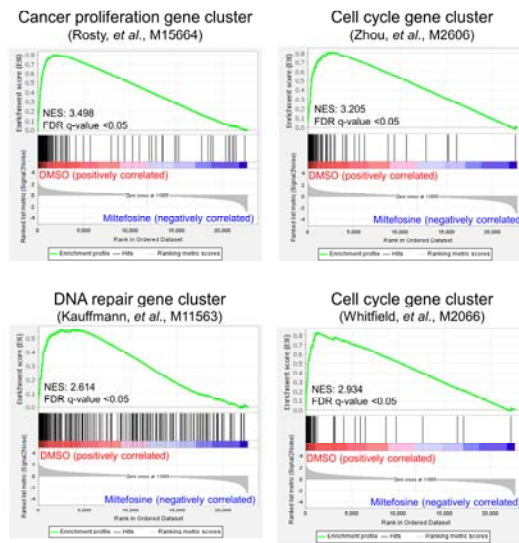
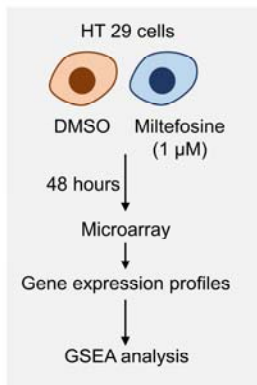


Figure S4

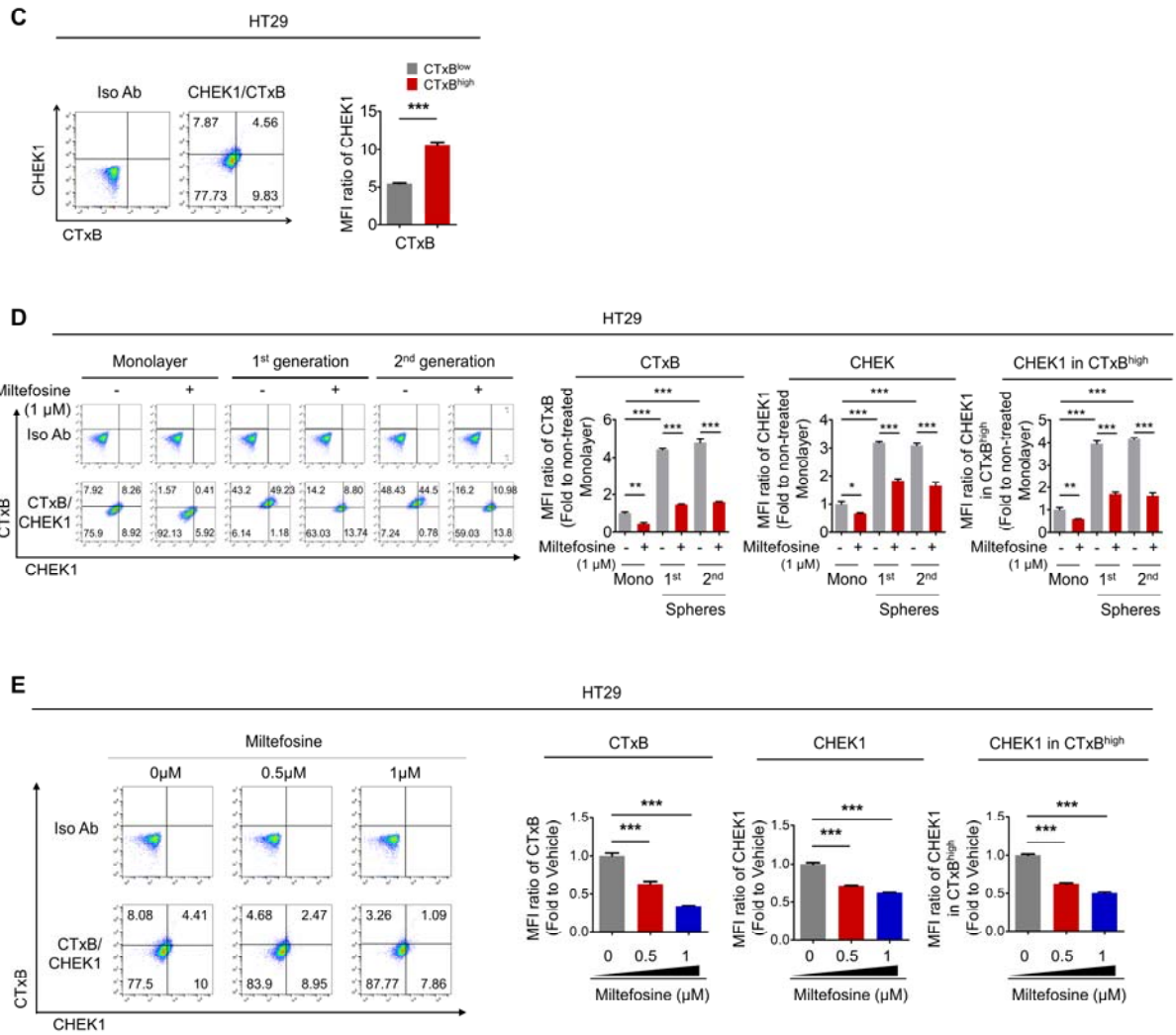
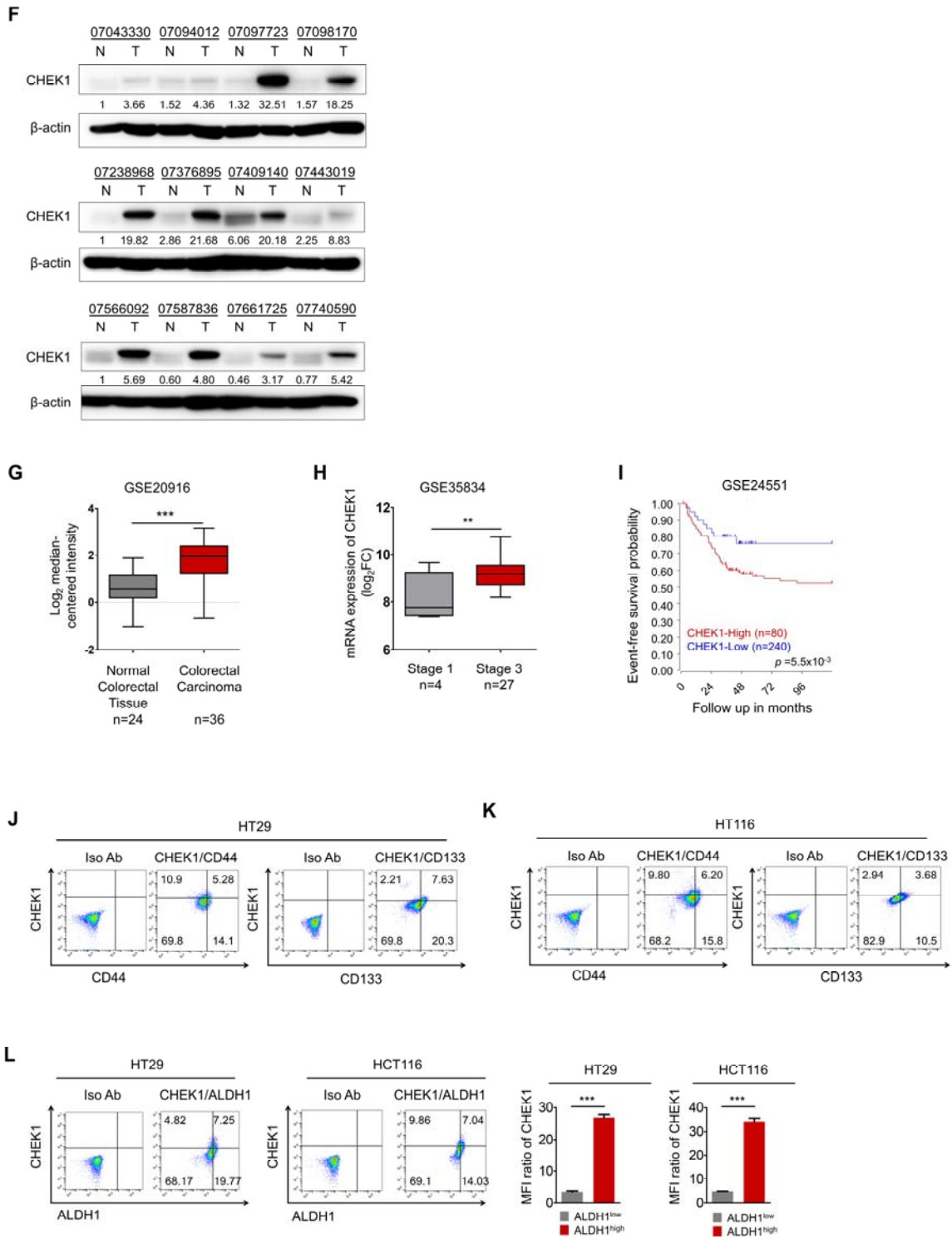


Figure S4



202 **Figure S5.**

203 **A-B)** Confirmation of knockdown efficiency of three different siCHEK1 in HT29 cells. **A)** Relative
204 mRNA expression of CHEK1 in siCHEK1-transfected cells were determined by RT-qPCR after 48
205 hours of siCHEK1 transfection. Bar graph shows the mean \pm SEM (n=3/group). Statistical values were
206 examined by one-way ANOVA with Dunnett's multiple comparison test. **B)** Protein expression of
207 CHEK1 in siCHEK1-transfected cells (two most efficient CHEK1 knockdown cells confirmed by
208 relative mRNA expressional comparison) was compared to siCTRL-transfected cells after 48 hours of
209 siRNA transfection. Values below each lane indicate the relative band intensity of target protein
210 normalized to β -actin as fold to control lane. **C)** Persistence of maximum efficacy of siCHEK1 was
211 examined at different time points after transfection, from 24 hours to 96 hours. Relative mRNA
212 expression (left) and protein expression (right) of CHEK1 upon siRNA transfection were measured and
213 compared at different time points. Bar graphs indicates mean \pm SEM (n=3/group) and statistical values
214 were examined by Student's t-test. **D)** Flow cytometric histogram of cell cycle analysis at 48 hours after
215 siCHEK1 transfection. **E)** Reduction of CTxB^{high} populations at 48 hours after siCHEK1 transfection.
216 Bar graph (right) indicates the relative amount of CTxB^{high} population in each group by mean \pm SEM
217 (n=3/group). Statistical significance was determined by one-way ANOVA with Dunnett's multiple
218 comparison test. **F)** Altered gene expressions of stem-related markers in HT29 cells at 48 hours after
219 siCHEK1 transfection. Gene expression levels were determined by RT-qPCR and the heatmap shows
220 the relative mRNA levels of indicate genes. The colors of the heatmap represent the value of log₂FC
221 ranged from -5 to 0 with $p < 0.05$. Statistical analysis was performed by Student's t-test per each
222 indicated gene. **G)** Confirmation of overexpression of CHEK1 in HT29 cell line. Protein expression of
223 CHEK1 (left) and relative mRNA expression of CHEK1 (right) were compared to EV-transfected cells.
224 Bar graphs shows mean \pm SEM (n=3/group) and statistic value was determined by one-way ANOVA
225 with Dunnett's multiple comparison test. Values below each lane indicate the relative band intensity of
226 target protein normalized to β -actin as fold to control lane. **H)** Comparison of miltefosine sensitivity
227 between EV-transfected cells and CHEK1-overexpressing cells in HT29. Cells were treated with

228 various concentration of miltefosine. After 48 hours of treatment, cell viability was measured by
229 staining with MTT and the absorbance was measured using a microplate spectrophotometer. IC₅₀ values
230 based on reductions in cell viability were calculated by nonlinear regression model and statistical
231 significance between two dose-response curves were determined based on extra sum-of-square F test
232 using GraphPad Prism. **I)** Restoring effect of CHEK1 overexpression on the miltefosine-induced
233 decrease in sphere-forming ability of CRC cells. EV-transfected cells and CHEK1-overexpressing cells
234 were treated with DMSO or 1μM miltefosine every other day for 7 days. And the sphere-forming
235 efficiency was calculated as follow: number of formed sphere/number of plated cells. Statistical
236 significance was determined by one-way ANOVA with Dunnett's multiple comparison test. **J)**
237 Restoring effect of CHEK1 overexpression the miltefosine-induced decreases in mRNA expressions of
238 stem-related markers (CD44, CD133, OCT4, SOX2). EV-transfected cells and CHEK1-
239 overexpressing cells were treated with DMSO or 1μM miltefosine for 48 hours. **K)** Confirmation of
240 p53 status in CRC cell lines, HT29, P53 WT HCT116 and P53 KO HCT116 cell lines. Protein
241 expression of P53 was confirmed in both low and short exposure condition. Values below each lane
242 indicate the relative band intensity of target protein normalized to β-actin as fold to control lane. **L)**
243 Effect of AZD7762 on cell viability was performed in HT29, P53 WT HCT116 and P53 KO HCT116
244 cells. Cells were treated with various concentration of AZD7762 for 48 hours. After the incubation, cell
245 viability was measured by MTT assay to IC₅₀ values using nonlinear regression models. **M)** Flow
246 cytometry analysis of apoptotic cells after 48-hour of AZD7762 treatment. Apoptotic cells were
247 indicated by Annexin V⁺. Bar graph (right) indicated the quantification of Annexin V⁺ populations upon
248 AZD7762 treatment (mean ± SEM, n=3/group). Statistical significance was determined by one-way
249 ANOVA with Dunnett's multiple comparison test. **N)** Reduction of CD44^{high} population after AZD7762
250 treatment in various CRC cells. Cells were treated with DMSO, 0.1 or 0.3μM AZD7762 for 48 hours.
251 Combined flow cytometric histograms (top) show the reduction of CD44^{high} population upon AZD7762
252 treatment in various p53 status cell lines (HT29, P53 WT HCT116 and P53 KO HCT116). Table (bottom)

253 represents the quantification of CD44^{high} populations (mean \pm SEM, n=3/group). *, **, *** indicates p
254 < 0.05 , $p < 0.01$ and $p < 0.001$, respectively.

Figure S5

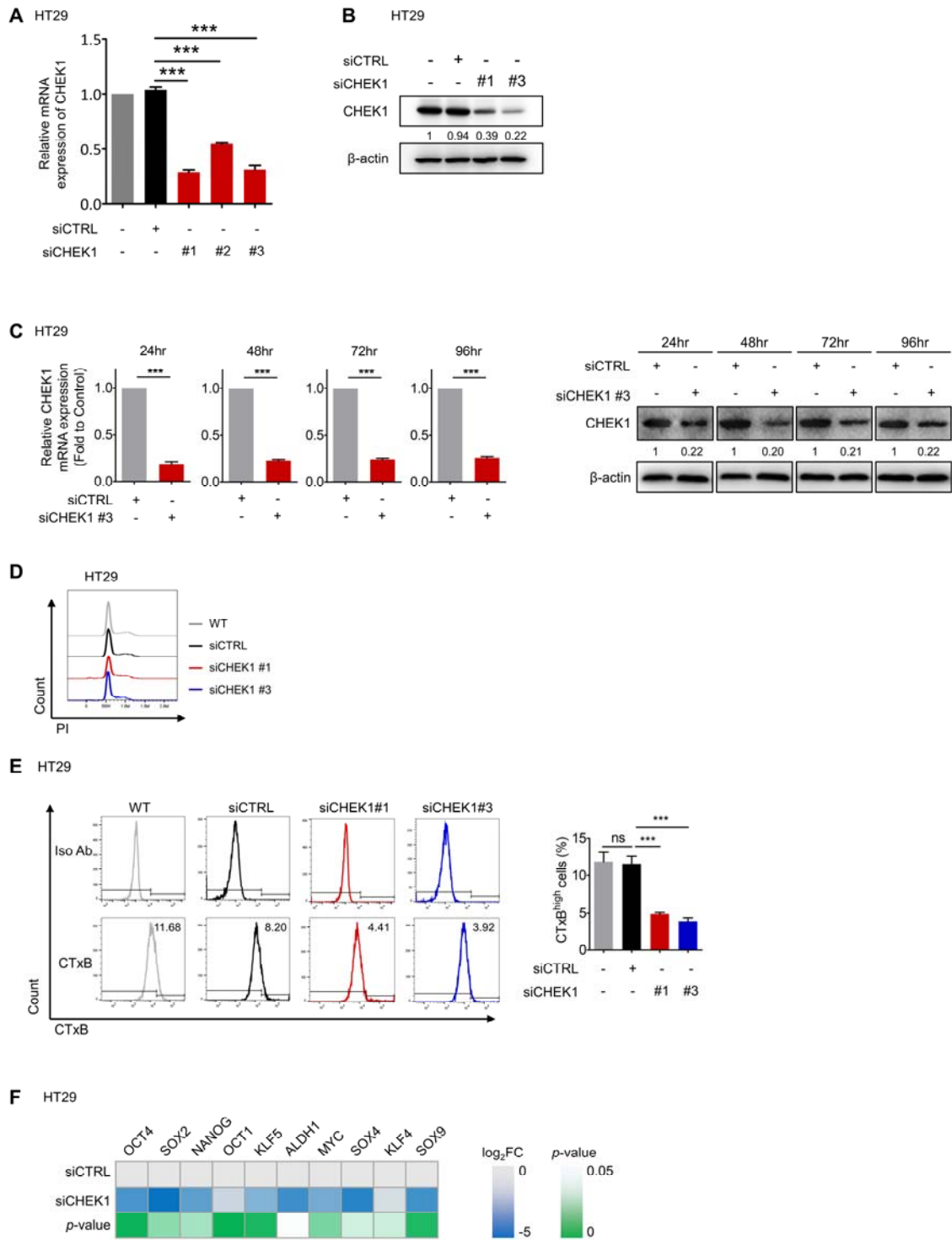
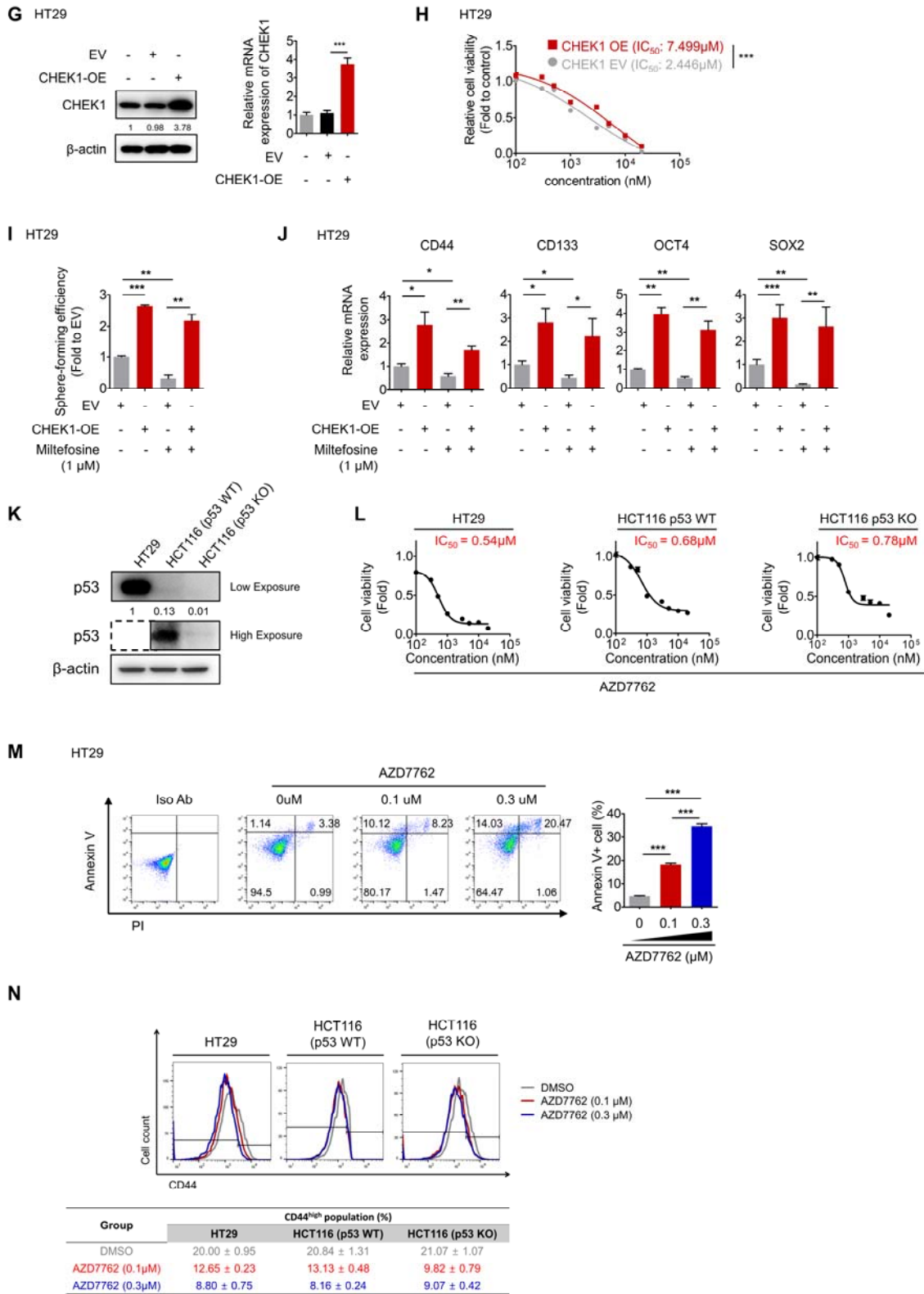


Figure S5



256

257

258 **Figure S6.**

259 **A)** Combined flow cytometric histogram showing increase of γ H2AX⁺ population upon miltefosine
260 treatment (left). The percent of γ H2AX⁺ population in bulk HT29 cells and isolated CD44^{high}
261 populations were compared upon miltefosine treatment (1 μ M, 48 hours). Thin lines indicate Iso Ab-
262 stained control samples while thick lines indicate γ H2AX-stained samples. The percent of γ H2AX⁺
263 population were presented as a bar graph (right, mean \pm SEM, n=3). Statistical analysis was conducted
264 by one-way ANOVA with Dunnett's multiple comparison test. **B)** Neutral comet assay confirming the
265 accumulation of DNA damage upon RT exposure in both isolated CD44^{high} and CD44^{low} populations.
266 Accumulation of DNA damage contents were compared by olive tail moments upon RT exposure
267 between CD44^{high} and CD44^{low} populations. Bar graph (left) indicates mean values of olive tail moment
268 score \pm SEM (50 cells per treatment). Statistic values were determined by one-way ANOVA with
269 Dunnett's multiple comparison test. **C)** Quantitative analysis of mitotic γ H2AX⁺ cells and mitotic
270 catastrophe among the p-HisH3⁺ mitotic cells upon a combination treatment of oxaliplatin, miltefosine,
271 and AZD-7762 in the sorted CD44^{high} population of HT29 cells. Cells were treated for 48 hours. The
272 quantifications were performed in three randomly selected fields for each specimen from a total of six
273 independent experiments. Bar graph indicates Bar graph shows mean \pm SEM (n=6/group). Statistical
274 analysis was performed by one-way ANOVA with Dunnett's multiple comparison. **D)** Quantification of
275 Western blot detecting protein level of CHEK1, T-CDC25c, p-CDC25c, T-CDK1, p-CDK1, γ H2AX,
276 Caspase 3 and C-Caspase3 upon combination treatment of RT, miltefosine and AZD7762. All quantified
277 values indicate the relative band intensity of target protein normalized to β -actin as fold to control lane.
278 Bar graphs indicates mean \pm SEM (n=3/group). Statistical significances were determined by one-way
279 ANOVA with Dunnett's multiple comparison test. **E)** Protein expression of p-Akt (Thr308 and Ser473)
280 and Pan-Akt upon miltefosine treatment (0, 0.5 and 1 μ M, 48 hours) in both HT29 and HCT116 cell
281 lines. Values below each lane indicate the relative band intensity of target protein normalized to β -actin
282 as fold to control lane. **F)** Comparison of p-Akt (Ser473) levels between in CD44^{high} and CD44^{low}
283 populations. Representative 2D scatter plots (left) shows cells doubly stained with anti-p-Akt and anti-

284 CD44 antibodies. Bar graph (right) indicates the percent of p-Akt^{high} cells within CD44^{high} or CD44^{low}
285 cells (mean ± SEM, n=3/group). Statistical significance was evaluated by Student's t-test. **G)** Protein
286 expression of p-Akt (Thr308 and Ser473), Pan-Akt and CHEK1 upon various concentration of MK2206,
287 Akt inhibitor (0, 0.5, 1, 3, 5 μM) in HT29 cells. Cells were treated for 48 hours. Values below each lane
288 indicate the relative band intensity of target protein normalized to β-actin as fold to control lane. **H)** The
289 promoter activity of CHEK1 upon 48-hour MK2206 treatment in sphere cultured condition for 3 days.
290 Bar graph represents mean ± SEM (n=3/group). Statistical significance was evaluated by one-way
291 ANOVA with Dunnett's multiple comparison test. **I)** Investigation on possible molecular mechanism
292 between Akt and transcription of CHEK1 and mediators were performed using Ingenuity Pathway
293 Analysis (IPA) software (Qiagen). Downstream molecules of Akt signaling and upstream molecules of
294 CHEK1, especially transcription factors, were suggested. By leveraging the ingenuity knowledge base,
295 11 downstream molecule candidates of Akt signaling were suggested to activate 4 transcriptional factor
296 candidates to regulate the expression of CHEK1. Directly linked transcriptional factor *, **, ***
297 indicates $p < 0.05$, $p < 0.01$ and $p < 0.001$, respectively.

298

Figure S6

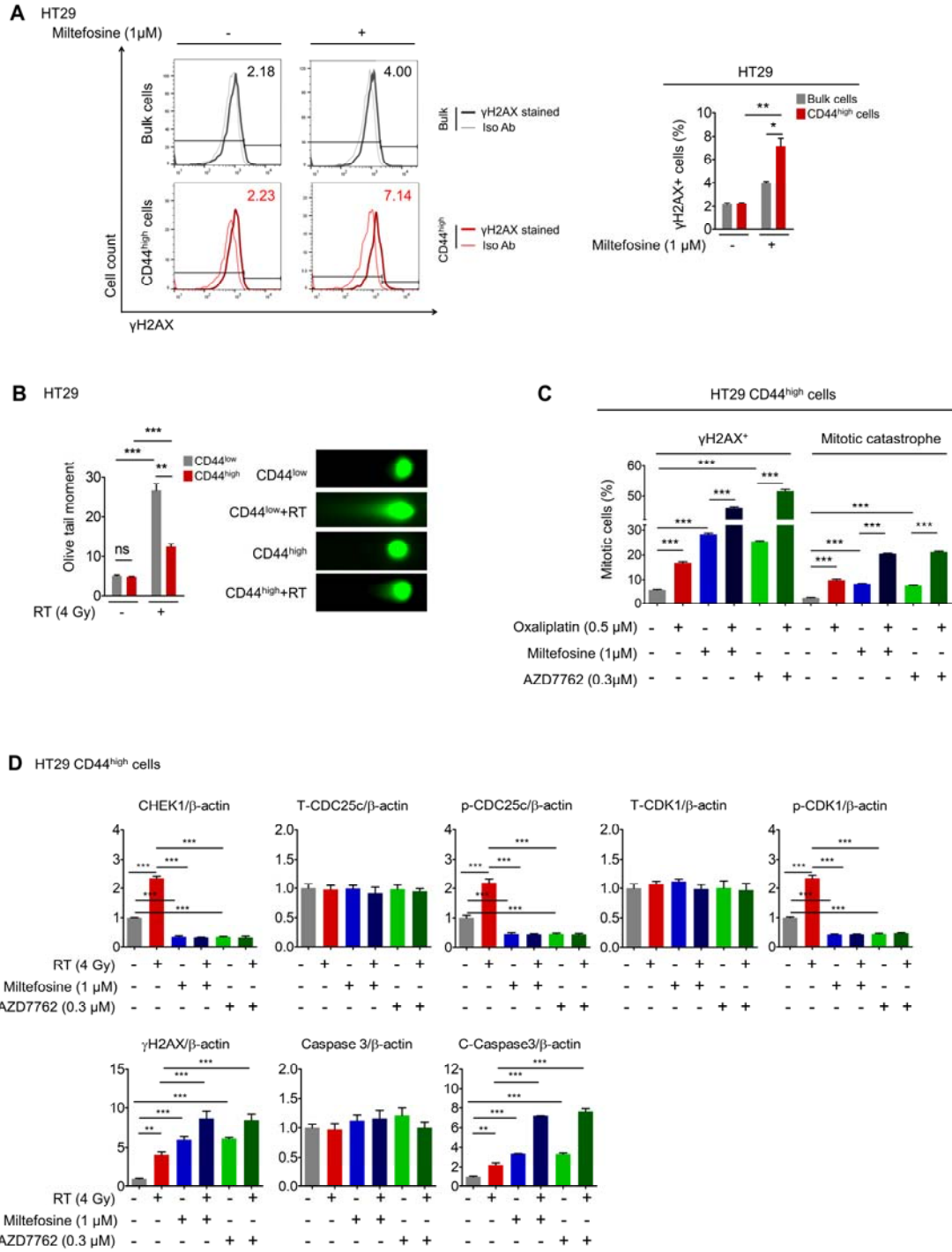
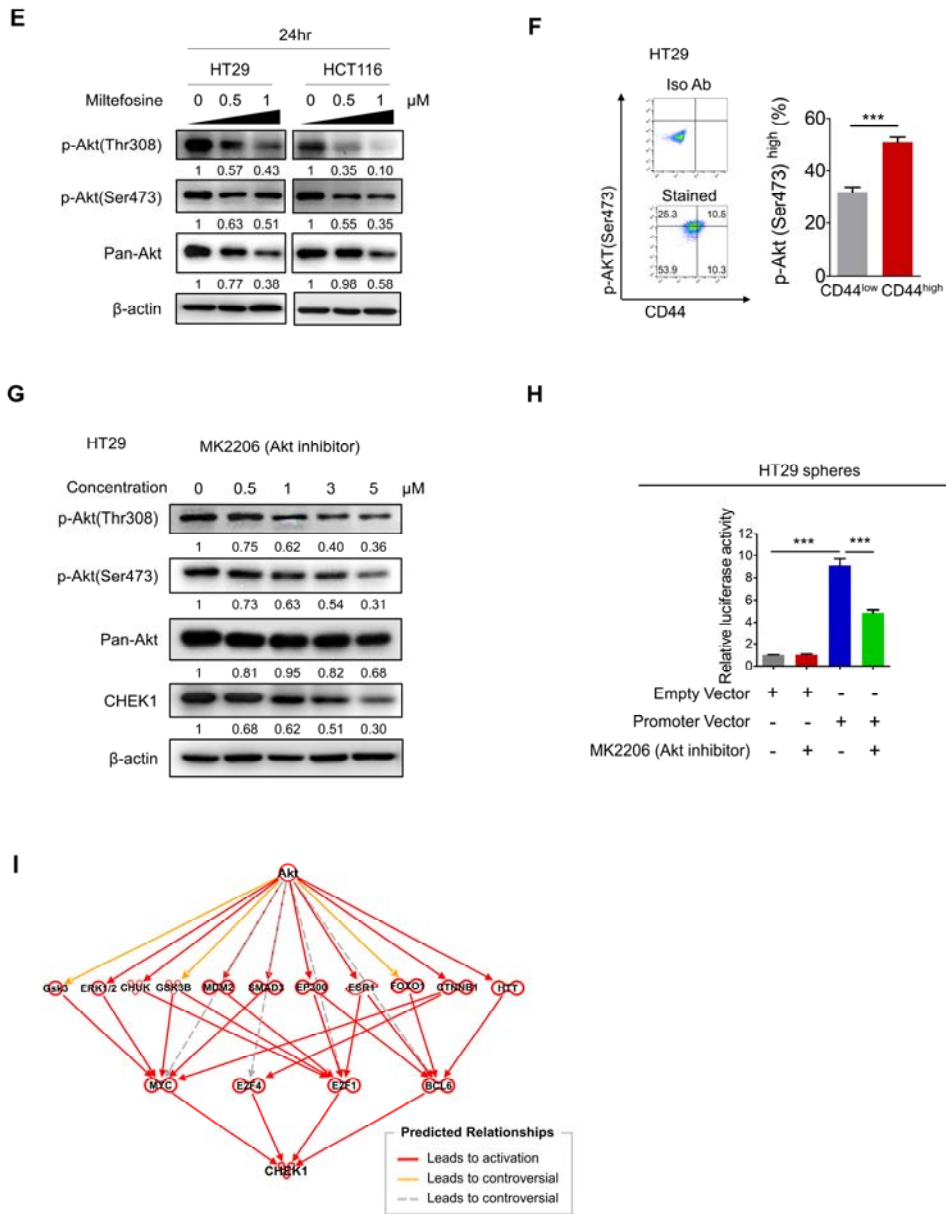
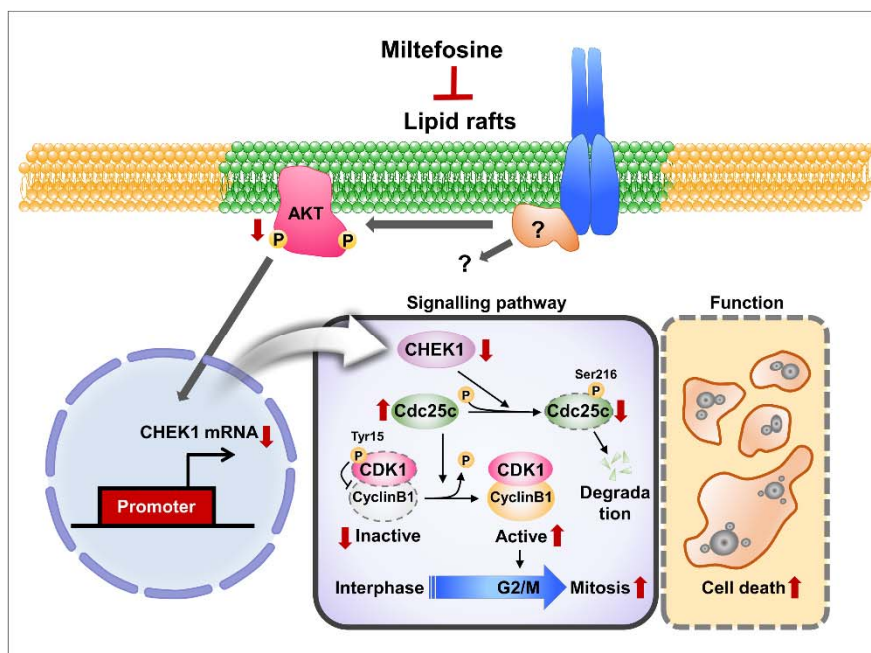


Figure S6



302 **Figure S7.** Schematic illustration of molecular mechanism of miltefosine.



303

304 Miltefosine exhibits preferential cytotoxicity against colorectal CSCs. Mechanistically,
 305 inhibition of LR/CHEK1 axis by miltefosine releases cell cycle checkpoints and drives the
 306 inappropriate mitotic entry in the presence of unresolved DNA damage accumulation, thereby
 307 inducing catastrophic mitotic cell death in CSCs. Our findings underscore the therapeutic
 308 potential of LR-targeting APLs for CRC treatment that overcomes the therapy-resistant
 309 phenotype of CSCs.

310 **Table S1. Clinical information for CRC patient samples used in this study**

311

312 *MS, Microsatellite; MSS, Microsatellite Stable; Low, Low Level of Microsatellite Instability; MSI,*

313 *Microsatellite Instable; pT, pathologic T stage; pN, pathologic N stage; LN, Lymph node metastasis;*

314 *diff., differentiated*

315

Primary tumor cells from CRC patient tissues

Patient ID	Sex	Age	Diagnosis	Surgical Pathological diagnosis				
				staging (Stage)	K-ras	EGFR	p53	MS
hCRC1 (P#6441493)	M	58	Upper rectal cancer with lung metastasis	T4N2M1	Mutation	Mutation	Negative	MSS
hCRC2 (p#21257113)	M	84	Proximal a-colon cancer with liver metastasis	T3N1M1	Wild-type	Mutation	Positive	MSS
hCRC3 (P#31784993)	M	67	Rectal cancer	T3N0M0	Wild-type	Mutation	Positive	MSS
hCRC4 (P#14005083)	M	45	Perforated S colon cancer with liver and lung metastasis	T4aN2bM1	Wild-type	Mutation	Positive	MSS

For Immunohistological analysis

Patient ID	Sex	Age	Tumor site	Histologic diagnosis	Histologic grade	Lymphovascular invasion	Perineural invasion	Tumor budding	Resection margin	pT	pN	Positive LNs	Total LNs
S17-12449	M	66	Sigmoid colon	Adenocarcinoma	Moderately diff.	Yes	Yes	Yes	No	pT3	pN1b	3	22
S17-7318	F	72	Sigmoid colon	Adenocarcinoma	Moderately diff.	No	Yes	No	No	pT3	pN2a	4	15

S17- 6870	F	69	Sigmoi d colon	Adenocar cinoma	Moderate ly diff.	No	Yes	Yes	No	pT 3	pN1 b	2	17
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316

317 **Table S4. Antibodies for FACs, immunofluorescence imaging and Western blotting**

318

Antibody List				
Name	Origin	Conjugation	Corporation	Cat#
CTxB	Polyclonal Rabbit	FITC	ThermoFisher	PA1-73188
PARP	Monoclonal Rabbit	Unconjugated	Cell Signaling Technology	9532S
Caspase3	Polyclonal Rabbit	Unconjugated	Cell Signaling Technology	9662S
β -actin	Monoclonal Mouse	Unconjugated	Sigma	A5316
CD44	Monoclonal Mouse	APC-conjugated	BD Pharmingen™	559942
CD133	Monoclonal Mouse	PE-conjugated	MACS	130-080-801
CHEK1	Monoclonal Rabbit	Unconjugated	Abcam	ab40866
Flotillin-1	Polyclonal Mouse	Unconjugated	Cell Signaling Technology	3253S
Caveolin-1	Polyclonal Mouse	Unconjugated	Cell Signaling Technology	3238S
CTxB-	Polyclonal Rabbit	Peroxidase-conjugated	Invitrogen	C34780
Alexa Fluor™ 488 goat anti-mouse IgG (H+L)			Invitrogen	A11001
Alexa Fluor™ 488 goat anti-rabbit IgG (H+L)			Invitrogen	A11008
Alexa Fluor™ 555 donkey anti-mouse IgG (H+L)			Invitrogen	A31570
Alexa Fluor™ 555 donkey anti-rabbit IgG (H+L)			Invitrogen	A31572
HRP Goat anti-Mouse Ig	Polyclonal Goat	Peroxidase-conjugated	BD Pharmingen™	554002
HRP Goat Anti-Rabbit Ig	Polyclonal Goat	Peroxidase-conjugated	BD Pharmingen™	554021
rH2AX	Polyclonal Rabbit	Unconjugated	Abcam	ab11174
p-HisH3+	Polyclonal Rabbit	Unconjugated	AbwizBio	2064
T-CDC25c	Monoclonal Rabbit	Unconjugated	Cell Signaling Technology	4688S
p-CDC25c(Ser216)	Polyclonal Rabbit	Unconjugated	Cell Signaling Technology	9528S
T-CDK1	Monoclonal Mouse	Unconjugated	Abcam	ab18
p-CDK1(Y15)	Polyclonal Rabbit	Unconjugated	Abcam	ab47594
Ki67	Monoclonal Mouse	APC-conjugated	Invitrogen	17-5699-42
Ki67	Monoclonal Rabbit	Unconjugated	Invitrogen	MA5-14520

GM1	Polyclonal Rabbit	Alexa Fluor™ 488-conjugated	Invitrogen	53-6507-80
p-Akt (Thr308)	Monoclonal Rabbit	Unconjugated	Cell Signaling Technology	13038S
p-Akt(Ser473)	Monoclonal Rabbit	Unconjugated	Cell Signaling Technology	4060S
Pan-Akt	Monoclonal Rabbit	Unconjugated	Cell Signaling Technology	4685S
ALDH1A1	Monoclonal Rabbit	PE-conjugated	Cell Signaling Technology	65583S

319

320 **Table S5. Small interfering RNA (siRNA) sequences**

321

	Sense	Antisense
Human CHEK1		
#1	GUGGAUUUUCUAAGCACAU(dTdT)	AUGUGCUUAGAAAAUCCAC(dTdT)
#2	GUCAAAAGAAUGACACGAU(dTdT)	AUCGUGUCAUUCUUUUGAC(dTdT)
#3	GACACGAUUCUUUACCAAA(dTdT)	UUUGGUAAGAAUCGUGUC(dTdT)

322

323 **Table S6. List of primers used for RT-qPCR**

324

Primer List		
	Forward	Reverse
PPIA	TGCCATCGCCAAGGAGTAG	TGCACAGACGGTCACTCAAA
CHEK1	CAATGTTGGCTGGAGAATTGCCGT	ATGTCTGGGATGGTGATCCTTGCT
CDC7	GCTTCATAAAGCTTCTCAATATCTTTT	TTTTTCTCCCCAGCGTGAC
EIF2AK	GCGCGGAAAGTTTGCTCAAT	GAGCTCCCAAGAAGGCAAGG
DDIT3	TGATCCAACCTGCAGAGATGGC	CAGGGTCAAGAGTGGTGAAGA
CXCL8	TGATGATATAAAAAGCCACCGGA	AATCAGGAAGGCTGCCAAGAG
HES1	CTGGTGCTGATAACAGCGGA	TTTTGGAGTTCTTCACGAAAAAGA
OCT4	GGGCTCTCCCATGCATTCAAAC	CACCTTCCCTCCAACCAGTTGC
SOX2	TCGGCAGACTGATTCAAATA	CCATGCAGGTTGACACCGTT
NANOG	TGGGATTTACAGGCGTGAGCCAC	AAGCAAAGCCTCCCAATCCCAAAC
OCT1	CCCTGTCTCAGCCCATACAGA	GCTGCAAATTGGTGGTTGGAT
KLF5	CCCTTGCACATACACAATGC	GGATGGAGGTGGGGTTAAAT
CD44	GGAGCAGCACTTCAGGAGGTT	GGAATGTGTCTTGGTCTCTGGTAGC
CD133	CAGAGTACAACGCCAAACCA	AAATCACGATGAGGGTCAGC
CD44v6	GGCAACTCCTAGTAGTACAACG	GTCTTCTTTGGGTGTTTGGC
FABP1	GGAAGGACATCAAGGGGG	TCACCTTCCAGCTTGACGAC
ALPI	CCAGGACATCGCCACTCAG	TCAGTGCGGTTCCACACATA
ANPEP	CCACCTTGACCAAAGTAAAGC	TCTCAGCGTCACCCGGTAGGA

325

326

327 **Supplementary Table S2. Ganglioside analysis of normal vs tumor cell lines.**

328

329 Attached as a separate Excel file

330 **Supplementary Table S3. Differentially expressed gene (DEG) list for miltefosine treated HT29**

331 **cell lines**

332

333 Attached as a separate Excel file.

334 **Supplementary Table S7. Top10 signaling kinases associated with DEG upon miltefosine**
335 **treatment**

336

337 Attached as a separate Excel file.