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Supplementary Materials for

Multi-scale Spatial Analysis of the Tumor Microenvironment Reveals Features of Cabozantinib and Nivolumab Efficacy in Hepatocellular Carcinoma

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The PDF files includes:

Technical details of image processing pipelines, spatial analysis, and statistical analysis.

Fig. S1. t-SNE maps for each of the 27-marker panel used for cell lineaging. Cells were visualized as dots and color coded by the normalized expression level of the corresponding marker.

Fig. S2. Voronoi tessellation maps for each tumor region core grouped to responders and non-responders. Polygons were color coded based on associated unique cell types.

Fig. S3. Voronoi tessellation maps for each tumor region core grouped to responders and non-responders. Polygons were color coded based on associated general cell types.

Fig. S4. Protein-protein spatial interaction heatmap describing the z-score between each given pair of proteins in all patients.

Fig. S5. Point patterns describing the relative distance to tumor-immune boundaries and infiltration profiles for all compartmentalized cores (except core 8 and core 22).

Fig. S6. Detailing the compartment analysis.

Fig. S7. Detailing the mixing analysis.

Fig. S8. Detailing the network analysis.

Table. S1. Baseline characteristics of the study participants.

Table. S2. Number of individuals with treatment-related AEs during the neoadjuvant treatment period.

Table. S3. Density statistics for all cell types.

Table. S4. Correlations between different cell types with HCC/hepatocytes.



Fig. S1. t-SNE maps for each of the 27-marker panel used for cell lineaging. Cells were visualized as dots and color coded by the normalized expression level of the corresponding marker.

Responders





Fig. S2. Voronoi tessellation maps for each tumor region core grouped to responders and non-responders. Polygons were color coded based on associated unique cell types.

Responders



Stroma

Non-responders





Fig. S3. Voronoi tessellation maps for each tumor region core grouped to responders and non-responders. Polygons were color coded based on associated general cell types.

Fig. S4. Protein-protein spatial interaction heatmap describing the z-score between each given pair of protein in all patients.



Fig. S5. Point patterns describing the relative distance to tumor-immune boundaries and infiltration profiles for all compartmentalized cores (except core 8 and core 22).



Fig. S6. Detailing the compartment analysis. For each core, two regions exemplifying the staining contexture near and distant to the tumor-immune boundary were selected. For both regions, lineage and functional markers were

simultaneously overlaid. Tumor and immune cell counts at regions close to and far from the boundary were also computed. (**B**) Histograms of LAG-3 and PD-L1 expressions adjacent and distant to the tumor-immune boundary at tumor and immune compartment, grouped by responders and non-responders.



Fig. S7. Detailing the mixing analysis. (**A**) Density plot of normalized Arg1 and CCR6 expressions on CD163⁻ macrophages. Dashed lines indicated cut-off thresholds to define up-regulated group. (**B**) Voronoi tessellations depicting spatial proximity between hazard macrophages to CCR6⁻ expressing cell types for all *mixed* cores. (**C**) Density of *RiskScore* reflected two distinct populations associated with responders and non-responders. (**D**) Dot plot of p-values for the *RiskScore* between responders and non-responders across 20 iterations of individual core

exclusion. Differences between patient groups were modeled with a linear mixed-effects model taking a patient identifier as a random effect and p values were derived using Satterthwaite's degrees of freedom method. (F) CD8⁺ T cells were further discriminated to three groups: low risk (*RiskScore* < 0.3), medium risk ($0.3 \le RiskScore < 0.7$), and high risk ($0.7 \le RiskScore$). (G) Density of Granzyme B expressions for each risk group.



Fig. S8. Detailing the characterization of hazard macrophages and *RiskScore*. (A) Exemplar cellular communities (CCs) depicting each unique CC type, where nodes represent cells and links reflect spatial proximity (Euclidean distance $\leq 20 \ \mu$ m). (B) Distribution of CCs in all tumor region core. Polygon colors indicate the associated CC type; node and edge colors were set to highlight the structure of each CC from others. (C) Multi-channel rendered multiplex image and Voronoi tessellations for visual validation on network analysis. (D) Radar

plot summarizes each CC type quantity in responders versus non-responders. Legend for (B) is provided to interpret the color codes for polygons in (B) and (C). Nodes are colored solely for distinction and without biological meaning.

Charcteristics	N = 15
Age in years, median (range)	64 (41 - 78)
Sex, N (%)	
Male	10 (67%)
Female	5 (33%)
Race/Ethnicity N (%)	
White, non-Hispanic	8 (53%)
Hispanic	1 (7%)
Black	5 (33%)
Asian	1 (7)
Etiology, N (%)	
Hepatitis B	3 (20%)
Hepatitis C	4 (27%)
Non-Viral	8 (53%)
NASH-/NAFLD	4 (27%)
Alcohol	1 (7%)
Other or Unknown	3 (20%)
AFP (ng/mL), N (%)	
<400	20 (44%)
≥400	25 (54%)
≥20000	1 (2%)
Child-Pugh Score, N (%)	
A5	13 (87%)
A6	2 (13%)
MELD Score, median (range)	7 (6- 10)
Diameter of large lesion (cm), N (%)	
<5	1 (7%)
5- 10	8 (53%)
>10	6 (40%)
Tumor features, N (%)	
Multinodular	6 (40%)
Portal vein invasion	4 (27%)
Infiltrate	9 (60%)
Adenopathy	1 (7)

Table. S1. Baseline characteristics of the study participants.

Toxicity	Grade 1/2	Grade 3/4	Total (N = 15)
Any	14	2	14
Cardio-renal			
Fatigue	2	0	2 (13.3%)
Creatine, elevated	1	0	1 (6.7%)
Constitutional			
Fatigue	8 (53%)	0	8 (53.3%)
Weight loss	1 (7%)	0	1 (6.7%)
Dermatologic			
Palmar-plantar erythrodysesthesia syndrome	2	0	2 (13.3%)
Rash	2	0	2 (13.3%)
Skin hypopigmentation	1	0	1 (6.7%)
Ears/Nose/Throat			
Hoarseness	2	0	2 (13.3%)
Gastrointestinal			
Abdominal pain	1	0	1 (6.7%)
Anorexia	2	0	2 (13.3%)
Bloating	1	0	1 6.7%)
Diarrhea	2	0	2 (13.3%)
Dry mouth	1	0	1 6.7%)
Dysgeusia	1	0	1 6.7%)
Nausea	5	0	5 (33.3%)
Oral dysesthesia	1	0	1 6.7%)
Mucositis	1	0	1 6.7%)
Vomiting	3	0	3 (20.0%)
ALT, elevated	1	0	1 6.7%)
Autoimmune Hepatitis	0	1	1 (6.7%)
Musculoskeletal	7 (6- 10)		
Myositis			
Neurological and psychiatric			
Insomnia	1	0	1 (6.7%)
Myasthenia gravis	0	1	1 (6.7%)

Table. S2. Number of individuals with treatment related adverse events (AEs) during the neoadjuvant treatment preriod. AEs are listed as the most severe treatment-related AE reached for each individual patient from the start of the therapy up to 100 after the last dose of the treatment.

	Observed density in specimen (cells/mm ²)					
Cell type	Overall (mean ± SD, range)	Responders (mean ± SD, range)	Non-responders (mean \pm SD, range)			
Stroma	$\frac{104.04 \pm 147.99}{(1.99 - 586.88)}$	$\frac{160.22 \pm 189.02}{(3.98 - 586.88)}$	65.74 ± 99.66 (1.99 – 379.98)			
LYMPHOID						
CD4 ⁺ T cell	$78.90 \pm 117.13 (1.99 - 511.29)$	$127.32 \pm 111.61 \\ (1.99 - 376.00)$	$46.61 \pm 111.76 (1.99 - 511.29)$			
CD8 ⁺ T cell	$\frac{128,94 \pm 153.95}{(9.95 - 668.45)}$	$222.68 \pm 195.90 (9.95 - 668.45)$	65.02 ± 66.96 (9.95 - 232.76)			
CD4 ⁺ CD8 ⁺ T cell	35.88 ± 61.39 (1.99 - 236.74)	$48.41 \pm 73.63 (1.99 - 230.77)$	29.95 ± 55.93 (1.99 - 236.74)			
Tregs	67.14 ± 64.80 (1.99 - 173.08)	$76.45 \pm 63.95 (9.95 - 173.08)$	$1.99 \pm NA$ (1.99 – 1.99)			
B cell	$58.9 \pm 131.0 (1.99 - 602.80)$	$78.67 \pm 175.96 (1.99 - 602.80)$	37.20 ± 52.19 (1.99 - 157.17)			
MYELOID						
СD163 ⁻ Мф	355.57 ± 262.21 (49.74 – 1197.64)	505.45 ± 352.52 (99.47 - 1197.64)	$\frac{153.55 \pm 60.87}{(49.74 - 449.61)}$			
Ki67 ⁺ PDL1 ⁻ HLA ^{hi} M2- Мф	$23.81 \pm 38.84 (1.99 - 192.98)$	30.17 ± 29.36 (3.98 - 95.49)	$19.56 \pm 44.37 (1.99 - 192.98)$			
Arg1 ⁺ PDL1 ⁻ HLA ^{hi} M2- Mφ	80.24 ± 68.20 (5.97 - 306.37)	$\begin{array}{c} 44.48 \pm 46.04 \\ (5.97 - 151.20) \end{array}$	$\frac{103.00 \pm 71.03}{(11.94 - 306.37)}$			
PDL1 ⁻ HLA ^{hi} M2- Мф	361.00 ± 529.70 (45.76 - 2240.11)	$\begin{array}{c} 665.27 \pm 741.02 \\ (45.76 - 2240.11) \end{array}$	$\frac{153.55 \pm 60.87}{(71.62 - 268.57)}$			
PDL1 ⁺ HLA ^{hi} M2- Мф	40.23 ± 33.98 (1.99 - 131.30)	$49.74 \pm 27.99 (11.94 - 107.43)$	33.44 ± 36.82 (1.99 - 131.30)			
Neutrophil	$58.47 \pm 115.90 (3.98 - 664.47)$	$106.86 \pm 175.48 (3.98 - 664.47)$	27.67 ± 27.78 (3.99 - 83.56)			
НСС						
Generic HCC/hepatocytes	$\frac{1489.55 \pm 1322.71}{(25.86 - 4261.37)}$	$743.25 \pm 997.10 (25.86 - 2994.10)$	$1998.39 \pm 1291.27 (95.49 - 4261.37)$			

CCR6 ⁻ Arg1 ⁻ HCC/hepatocytes	139.41 ± 376.24 (1.99 - 1710.92)	$\frac{19.65 \pm 17.06}{(1.99 - 47.75)}$	$192.64 \pm 445.31 (1.99 - 1710.92)$
HCC/hepatocytes Proliferative	$\frac{125.39 \pm 139.84}{(3.98 - 431.71)}$	$96.20 \pm 140.44 \\ (3.98 - 431.71)$	$143.96 \pm 139.47 (15.92 - 395.90)$
Apoptotic HCC/hepatocytes	$\begin{array}{c} 88.96 \pm 163.63 \\ (1.99 - 499.35) \end{array}$	$17.90 \pm 19.69 \\ (3.98 - 31.83)$	$\frac{100.80 \pm 174.75}{(1.99 - 499.35)}$
CCR6 ⁻ Arg1 ⁻ Apoptotic HCC/hepatocytes	$206.00 \pm 478.45 (1.99 - 1617.41)$	51.53 ± 78.81 (1.99 - 240.72)	$334.72 \pm 626.23 (1.99 - 1617.41)$

Table. S3. Density statistics for all cell types.

Core	Response	CD4+ T	CD8+ T	Treg	B cell	CD163 [.] macrophage	CD163 ⁺ macrophage
6	NR	0.1714	0.2353	0.9538	0.2583	0.8875	9.8358e ⁻⁶
7	NR	0.4364	0.4804	0.1611	0.2583	0.2583	0.3233
8	NR	0.0191	0.0071	0.5083	0.0013	0.0256	0.2583
9	NR	0.0006	0.0426	0.3518	0.1721	0.0426	0.2353
22	R	2.9845e ⁻⁷	1.0015e ⁻⁸	0.8294	0.0071	0.2232	0.0426
23	R	0.1763	0.0318	0.1454	0.6658	0.1763	0.0714
27	NR	0.6347	0.0834	0.9721	0.6852	0.8311	0.0834
28	NR	0.1763	0.4265	0.0318	0.0834	0.0834	0.0098

Table. S4. Correlations between different cell types with HCC/hepatocytes. Color code: black (not significant); red (significant with positive correlation); blue (significant with negative correlation). Here, HCC/hepatocytes evaluated represents a collection of all HCC/hepatocytes (cell type 13, 14, 15, 16, 17). Double positive T cells (CD4⁺CD8⁺) was absent from evaluable cores; neutrophils only reside in core 6, therefore they were removed from correlation analysis. Macrophage subpopulations were merged to binary phenotypes (CD163⁺ vs. CD163⁻) to increase sample sizes. Correlation tests were performed using Wilcoxon rank-sum test with adjustment for multiple comparisons (FDR).