



Supplementary information, Figure S10. RT promotes anti-tumor immunity and LN removal weakens the therapeutic effect of RT in a model of metastatic lung cancer. a–b, Representative flow cytometry plots of $CD8^+$ Ki67⁺ T cells as percentages of overall $CD8^+$ T cells (a), and $CD4^+$ Foxp3⁺ T cells as percentages of overall $CD4^+$ T cells (b) in CLNs from mice with LLC tumors with or without RT (left) and quantification (right) in CLNs on day 14 after inoculation (n = 8). c, Ratios of $CD8^+$ Ki67⁺ T cells to $CD4^+$ Foxp3⁺ T cells in CLNs from mice with LLC tumors with or without RT (n = 8). d–e, Representative flow cytometry plots and quantification of $CD8^+$ T cells (d), and $CD4^+$ T cells (e) in CLNs from mice with LLC tumors with or

without RT in CLNs as percentages of overall CD45⁺ cells on day 14 after inoculation (n = 8). f, Schematic of the mouse LLC tumor model with RT. g, Survival of mice with striatal LLC tumor injection, without treatment (CTR, n = 16), treated with RT alone (RT, n = 24), or treated with RT plus LN removal (RT+LN removal, n = 15). h, Representative T2-weighted single brain slices from the CTR, RT, and RT+LN removal groups (triangles indicate tumors). i, Tumor volume in the CTR, RT, and RT+LN removal groups (n = 8). Data are presented as means \pm SEM. *P<0.05, **P<0.01, ***P<0.001; Student's t test (a–e); log-rank (Mantel–Cox) test (g); one-way ANOVA (I). Data are from at least three (a–e, g) or two (h, i) independent experiments.