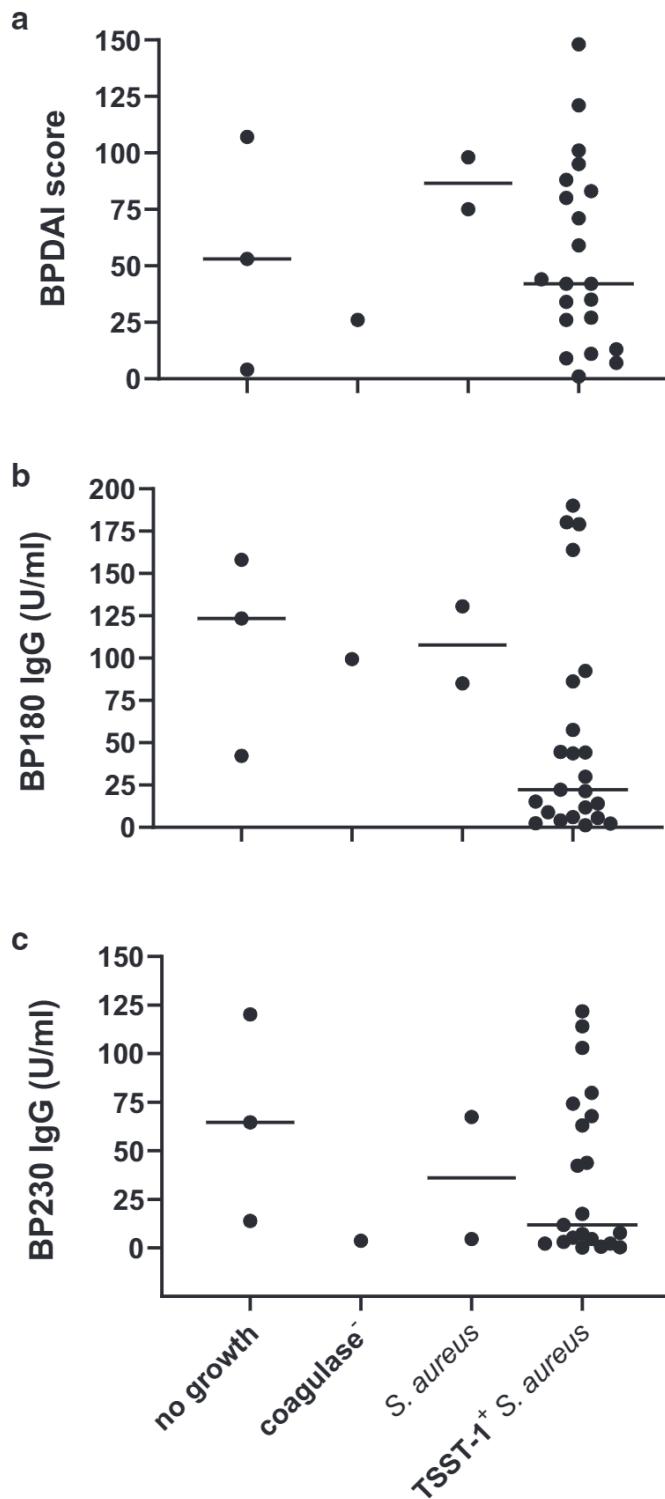


SUPPLEMENTARY MATERIALS AND METHODS**Enrollment of healthy controls for assessment of *Staphylococcus aureus* colonization and staphylococcal toxic shock syndrome toxin-1 IgG titers as a function of age**

Healthy individuals on routine visits to the Department of Dermatology at the University of Iowa Hospitals & Clinics (Iowa City), primarily for skin checks and evaluation of benign lesions not known to affect the skin flora, were offered enrollment (Institutional Review Board number 200701758). Patients with any history of autoimmune disease or treatment with antibiotics or immunosuppressive medications in the 2 months before were excluded. Written informed consent was obtained from 168 individuals aged 40–88 years, peripheral blood was collected, and

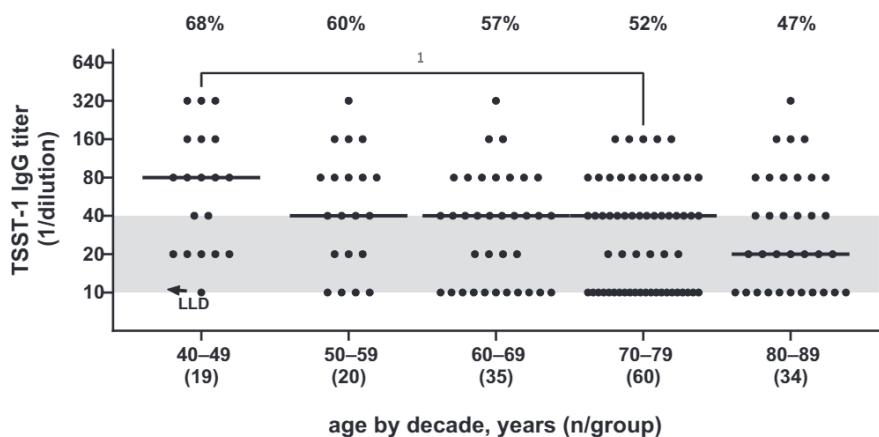
demographic information was recorded. The number of individuals in each age group are as follows (mean age \pm SD, age range, sex): ages 40–49 years, a total of 19 (45.9 ± 3.2 , range = 40.7–49.9, 13 female/6 male); ages 50–59 years, a total of 20 (55.2 ± 3.1 , range = 50.5–59.9, 12 female/8 male); ages 60–69 years, a total of 35 (65.5 ± 3.1 , range = 60.2–69.9, 14 female/21 male); ages 70–79 years, a total of 60 (74.6 ± 2.7 , range = 70.3–79.1, 24 female/36 male); and ages 80–89 years, a total of 33 (83.9 ± 2.8 , range = 80.1–88.4, 17 female/16 male). A Wilcoxon rank-sum test revealed no correlation between toxic shock syndrome toxin-1 IgG titer and sex ($P < 0.05$). Bacterial swabs were also obtained from a subset ($n = 125$, 66 female, 59 male) of these patients.



Supplementary Figure S1. Disease activity and autoantibody levels of patients with BP on the basis of lesional isolate. Staphylococcal colonization of 28 BP lesions was characterized as no growth ($n = 3$) or growth of coagulase-negative staphylococci ($n = 1$), *S. aureus* ($n = 2$), or *TSST-1⁺* *S. aureus* ($n = 22$). Disease activity was scored using the BPDAI, and circulating cutaneous autoantibodies, (b) BP180 and (c) BP230 IgG, were determined by ELISA. Wilcoxon rank-sum test did not reveal any significant differences in BPDAI or BP180/BP230 antibody levels on the basis of the type of bacterial colonization. BP, bullous pemphigoid; BPDAI, Bullous Pemphigoid Disease Area Index; TSST-1, toxic shock syndrome toxin-1.

Supplementary Figure S2. TSST-1 antibody levels decline with age.

TSST-1 IgG titers were evaluated as a function of age in 168 controls aged 40–89 years. When stratified by decades of age (40–49 years, 50–59 years, and others), the frequency of individuals with protective antibody levels, % indicated above group, declined gradually so that 68% (27/40) of subjects aged 40–49 years had titers ≥ 40 , whereas only 47% (16/34) of subjects aged 80–89 years had protective titers (shaded area = nonprotective titers). * $P = 0.0195$ (adjusted) using Kruskal–Wallis test followed by Dunn's multiple comparisons test for the group aged 40–49 years versus the group aged 70–79 years. Each point represents the average of triplicate wells for each individual, and the horizontal line represents the median value for that group. LLD, lower limit of detection; TSST-1, toxic shock syndrome toxin-1.



Supplementary Table S1. Demographic, Clinical, and Laboratory Information for Patients with BP and the Matched Controls
 New-Onset BP

ID No.	Sex	Age	Medications ³ Previous 2 wk (Dose/d)	Staphylococcal Isolate ²				Controls ¹				
				Lesion (TSST-1 µg/ml) ⁴	Unaffected Skin	Nares	TSST-1 IgG ⁵	Age	Skin	Nares	TSST-1 IgG	
722	F	74.2	Vancomycin 3.5 g, IV	None	ND	ND	40	75	None	Coagulase negative	10	
767	F	74.6	Minocycline 200 mg	None	None	TSST-1 ⁺	40	74.5	Coagulase negative	Coagulase negative	10	
723	M	83.4	2 DS sulfamethoxazole/trimethoprim tablets, prednisone taper	None (0.709)	ND	ND	20	81.5	Coagulase negative	Coagulase negative	80	
800	M	78.2	Minocycline 200 mg	Coagulase negative	Coagulase negative	Coagulase negative	20	77.7	<i>S. aureus</i>	<i>S. aureus</i>	40	
773	F	70.8	Vancomycin 2 gm, IV	<i>S. aureus</i>	ND	ND	10	68.4	None	None	160	
751	F	72.0	Minocycline 200 mg	Coagulase negative	Coagulase negative	Coagulase negative	40	72.0	Coagulase negative	Coagulase negative	10	
781	F	61.5	None	<i>S. aureus</i> (4.19)	TSST-1 ⁺	ND	TSST-1 ⁺	160	62.5	TSST-1 ⁺	None	10
829	M	65.7	Doxycycline 200 mg	TSST-1 ⁺	TSST-1 ⁺	TSST-1 ⁺	TSST-1 ⁺	80	68.3	Coagulase negative	Coagulase negative	20
849	F	65.8	None	TSST-1 ⁺	Coagulase negative	<i>S. aureus</i>	<10	69.2	None	TSST-1 ⁺	20	
710	M	66.3	Prednisone 30mg	TSST-1 ⁺	ND	ND	20	60.2	TSST-1 ⁺	Coagulase negative	160	
758	M	67.2	Prednisone 60 mg Mycophenolate 3 g	TSST-1 ⁺ (0.0678)	ND	ND	20	66.1	None	Coagulase negative	<10	
728	M	67.4	None	TSST-1 ⁺ (0.707)	ND	ND	640	68.5	Coagulase negative	Coagulase negative	40	
752 ⁶	M	68	Prednisone taper	TSST-1 ⁺	ND	ND	40	69.1	Coagulase negative	Coagulase negative	20	
820	M	72.6	None	TSST-1 ⁺ (0.163)	ND	TSST-1 ⁺	40	71.6	Coagulase negative	Coagulase negative	40	
568	F	73.0	Prednisone taper	TSST-1 ⁺	ND	TSST-1 ⁺	20	73.0	None	Coagulase negative	160	
807	M	74.3	None	TSST-1 ⁺ (0.066)	Coagulase negative	Coagulase negative	20	73.6	None	Coagulase negative	40	
802	M	74.6	Prednisone 20 mg Mycophenolate 2 g Doxycycline 200 mg	TSST-1 ⁺	ND	Coagulase negative	80	76.0	None	Coagulase negative	160	
811	F	75.3	None	TSST-1 ⁺	Coagulase negative	None	10	75.5	Coagulase negative	Coagulase negative	<10	
712	M	78.7	None	TSST-1 ⁺	ND	ND	20	78.4	None	Coagulase negative	20	
808	M	78.8	None	TSST-1 ⁺	Coagulase negative	Coagulase negative	80	77	None	Coagulase-negative	20	
731	F	81.6	None	TSST-1 ⁺ (0.0075)	ND	ND	20	80.5	Coagulase negative	<i>S. aureus</i>	0	
688	M	84.9	None	TSST-1 ⁺	Coagulase negative	Coagulase negative	40	84.6	Coagulase-	None	320	
864	M	85.6	Prednisone taper	TSST-1 ⁺	TSST-1 ⁺	TSST-1 ⁺	<10	81.1	Coagulase negative	Coagulase negative	320	

(continued)

Supplementary Table S1. Continued
 New-Onset BP

ID No.	Sex	Age	Staphylococcal Isolate ²						Controls ¹		
			Medications ³		Lesion (TSST-1 µg/ml) ⁴	Unaffected Skin	Nares	TSST-1 IgG ⁵	Age	Skin	Nares
810	M	86.3	None	TSST-1 ⁺ (0.053)	None	<i>S. aureus</i>	80	87.2	None	Coagulase negative	10
866	F	86.5	None	TSST-1 ⁺	ND	TSST-1 ⁺	40	87.7	Coagulase negative	Coagulase negative	20
703	F	87.1	None	TSST-1 ⁺ (19.4)	ND	ND	160	85.6	Coagulase negative	Coagulase negative	40
774	M	90.8	None	TSST-1 ⁺	ND	ND	160	88.8	Coagulase negative	Coagulase negative	160
726	M	91.1	None	TSST-1 ⁺	ND	Coagulase negative	40	90.3	None	Coagulase negative	80

Abbreviations: DS, double strength; F, female; ID, identification; IV, intravenous; M, male; ND, not done; No., number; TSST-1, toxic shock syndrome toxin-1.

¹Individual controls were matched to patients with BP by sex and age (± 1 year); 16 of 28 (57%) of the controls, and 13 of 28 (46%) had type II diabetes mellitus.

²Staphylococcal isolates were identified by growth on blood agar, and catalase and coagulase tests were used to confirm *S. aureus*, coagulase-negative staphylococci (shaded orange) or no staphylococcal growth (none).

³Medications (duration in weeks/drug or mg/day prednisone) prescribed by a referring physician in the 2 weeks preceding enrollment. Cells shaded in gray indicate antibiotics with staphylococcal coverage.

⁴*S. aureus* was categorized as TSST-1⁺ (shaded blue) or non-TSST-1 (shaded green) by immunoblot, and TSST-1 was quantitated in blister fluids of adequate volume using a standard curve consisting of 10-fold dilutions (10–0.001 µg/ml) of purified TSST-1.

⁵TSST-1 IgG antibody titers were determined by ELISA (lower limit of detection < 10). Titers ≥ 40 are considered protective.

⁶Subject was of Asian descent. All other subjects were Caucasian.

Supplementary Table S2. BP Lesions Are Highly Colonized with TSST-1⁺ *Staphylococcus aureus*

Sample Type	<i>S. aureus</i> ¹ (% TSST-1 ⁺)	Coagulase-Negative Staphylococci	No Growth
BP²			
Lesion, n = 28	24, 85.7% ³ (22, 92%) ⁴	1, 3.6%	3, 10.7%
Unaffected skin, n = 11	3, 27.3% (3, 100%)	6, 54.5%	2, 18.2%
Nares, n = 17	10, 58.8% (7, 70%)	6, 35.3%	1, 5.9%
Control			
Skin n = 28	3, 10.7% (1, 33%)	14, 50%	11, 39.3%
Nares n = 28	3, 10.7% (1, 33%)	22, 78.6%	3, 10.7%

Abbreviations: BP, bullous pemphigoid; TSST-1, toxic shock syndrome toxin-1.

¹Growth of gram-positive cocci on blood agar was confirmed as catalase-positive staphylococci and then categorized as coagulase-positive *S. aureus* or coagulase-negative staphylococci.

²Swabs were obtained from patients with new-onset BP and sex- and age-matched controls.

³Data are expressed as the number and percentage of total samples obtained at each location.

⁴TSST-1 was detected by immunoblot of isolated colonies, and the numbers in parenthesis indicate the number and percentage of TSST-1⁺ of the total number of samples that grew *S. aureus*.