Supplemental information

Non-protective immune imprint underlies failure of S. aureus IsdB vaccine

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Figure S1 IsdB immunization is not protective in mice previously infected with *S. aureus*, Related to Figure 1

(A) Serum IsdB-specific IgG levels in mice infected 1-3 times with SA (LAC) and bled at the indicated times.

(B) IsdB vaccination after 1 or 2 SA infections: Kidney SA burden from experiment Figure 1C (*n*=5 per mouse group).

(C) IsdB vaccination after 3 SA infections: Kidney SA burden from experiment Figure 1D (n=10 per mouse group).

(D) Kidney bacterial burden in mice infected subcutaneously (twice 2 weeks apart) with SA (LAC), IsdB immunized two weeks later and then LAC challenged i.p. per Figure 1A (n=11-19 per mouse group).

(E) Kidney bacterial burden in mice infected once i.v. with SA, treated for 5 days with vancomycin and then immunized and LAC challenged i.p. per Figure 1A (n=9 per mouse group).

(F) Serum anti-IsdB lgG titer after 3 weekly SA nasal applications (*n*=9 per mouse group).

(G and H) Tissue bacterial burden in (C57BL/6) mice infected with SA Newman or SA113, then immunized and challenged with the same SA strain as per Figure 1A (n=4-5 per mouse group).

(I and J) Tissue bacterial burden in BALB/c and CBA mice pre-infected with LAC, then immunized and LAC challenged as per Figure 1A (*n*=5 per mouse group).

(K) Tissue bacterial burden in male mice infected with LAC, then immunized and LAC challenged as per Figure 1A (n=9-10 per mouse group).

Each data point represents an individual mouse; bars denote median and dashed lines indicate the limit of detection. n.s., not significant, *P<0.05, **P<0.01, and ***P< 0.001; one way ANOVA (B to E and G to K).



Figure S2 Parameters of IsdB vaccination and vaccine interference, Related to Figure 2

(A) B cells adoptively transferred from SA (LAC) infected mice blunt IsdB vaccine efficacy in the recipient mice. Recipient mice were immunized with IsdB as per Figure 1A, 24h after B cell transfer (n=10 per mouse group).

(B) Effect of extending the time interval between SA infection and IsdB vaccination to 21 days. Infection and immunization were otherwise performed as in Figure 1A (n=5 per mouse group).

(C) Specificity of vaccine suppression. Kidney SA burden from experiment Figure 2B (*n*=10 per mouse group).

(D) Adoptively transferred B cells: Kidney SA burden from experiment Figure 2C (*n*=10 per mouse group).

(E) Adoptively transferred total lgG: Kidney SA burden from experiment Figure 2D (*n*=8-10 per mouse group).

(F) CD4⁺ T cell transfer from IsdB vaccinated SA-naïve mice is not protective (n=5 per mouse group).

Each data point represents an individual mouse; bars denote median and dashed lines indicate the limit of detection (A to F). n.s., not significant, *P<0.05, **P<0.01, and ***P< 0.001; one way ANOVA (A to F).



Figure S3 Characterization of IsdB-specific antibodies from naïve or *S. aureus*-infected mice that have been immunized with IsdB, Related to Figure 3

(A) Titers of IsdB-specific lg subclasses (lgM, lgG1, lgG2a, lgG2b, lgG2c and lgG3) in the sera of naïve or SA-infected mice at 1:1000 dilution.

(B to D) Titers of IsdB-specific IgG1, IgG2b and IgG2c in the sera of mice treated as in Figure 1A.

(E) Binding of purified anti-IsdB antibodies to WT LAC or isogenic spa mutant analyzed by flow cytometry. Grey: stain with FITC-conjugated anti-mouse lgG only.

(F) Ab-dependent complement deposition assay.

(G) in vivo function of adoptively transferred IsdB-specific mAbs: Kidney SA burden from experiment Figure 3J.

(H and I) Binding of IgG to FcgRIIb (G) or FcgRIII (H) analyzed by ELISA.

Data are plotted as mean ± SD (A to D). n.s., not significant, *P<0.05, **P<0.01, and ***P<0.001; One way ANOVA (A to D, F to I).



Figure S4 Binding profile of immune sera to overlapping IsdB peptide array and clonotype sequences and IsdB-specific antibody levels following vaccination of naïve and SA pre-infected mice, Related to Figure 4

(A) Binding profile of sera to overlapping IsdB peptide array. Mouse sera: NT/IsdB: Naïve mice vaccinated with IsdB, LAC/IsdB: LAC-infected mice vaccinated with IsdB; LAC: LAC-infected mice given adjuvant alone (LAC/alum). NEAT1 extends from peptide #24 to #55, and NEAT2 from peptide #76 to #103.

(B) Sequences of clonotypes from LAC, LAC/IsdB and N/IsdB, from experiment Figure 4A.

(C) Serum IsdB-specific IgM level after IsdB vaccination, from experiment Figure 4C (*n*=10 per mouse group).

(D and E) Serum IsdB-specific IgG and IgM levels in IsdB vaccinated WT and IsdB/HarA mutantinfected mice (n=10 per mouse group).

(F) Relative intensity of anti-IsdB lgG ASCs 7 Days after the first IsdB vaccination, from experiment Figure 4D.

Each data point represents an individual mouse; bars denote median (C to E). n.s., not significant, *P<0.05, **P<0.01, and ***P< 0.001; one way ANOVA (C to F).



F

Amino acid sequences of CDR3 of monoclonal antibodies

Amino acid sequencing data of IsdB-specific

	monocional antibodies		
mAb	mouse VH family	CDR3	target
3G1	IGHV1	ARGPITTVVAYSFDC	N2
3H2	IGHV1	ARFGYDQDHFDY	N2
1C1	IGHV1	ARHPPYGNDWYFDV	N2

G

1C1 3G1 3H2 NEAT2 76-103

Figure S5 Competition between non-protective and protective IsdB-specific antibodies determines outcome of staphylococcal infection, Related Figure 5

(A) Anti-SA immunity conferred by protective sera (NT-IsdB) in the presence or absence of non-protective sera (LAC-IsdB): Kidney SA burden from experiment Figure 5A (*n*=8 per mouse group).

(B) Anti-SA immunity conferred by IsdB-specific protective Antibodies (NT-IsdB) in the presence or absence of non-protective specific antibodies (LAC-IsdB): Kidney SA burden from experiment Figure 5B (n=5-8 per mouse group).

(C) Serum IsdB-, NEAT1- and NEAT2- specific IgG levels following IsdB, N2 or N2 immunization of naïve mice respectively.

(D) N2 vaccination confers anti-SA protection in naïve and SA pre-infected mice: Kidney SA burden from experiment Figure 5E (n=10-15 per mouse group).

(E) Anti-SA immunity conferred by anti-N2 mAbs in SA-pre-infected mice: Kidney SA burden from experiment Figure 5G (n=7-10 per mouse group).

(F) Table of amino acid sequence of CDR3 of neutralizing IsdB mAbs from Figure 3I and 3J.

(G) Mapping of IsdB-specific mAb interaction with IsdB NEAT2 domain using peptide array. Peptide index of NEAT2: #76-#103.

Data are plotted as mean \pm SD (C). Each data point represents an individual mouse; bars denote median (A, B, D and E). n.s., not significant, *P<0.05, **P<0.01, and ***P< 0.001; one way ANOVA (A, B, D and E).



Figure S6 Human serum anti-*S. aureus* antibodies blunting of specific protection conferred by anti-IsdB, and interference with FhuD2 and MntC vaccines, Related to Figure 6

(A) Human serum interference with protective anti-IsdB Ab function: Kidney SA burden from experiment Figure 6C (n=4-8 per mouse group, 3 human serum samples).

(B) Purified human anti-IsdB Ab interference with protective anti-IsdB Ab function: Kidney SA burden from experiment Figure 6D. Ratio of protective to non-protective Ab injected IV: 25 μ g to 35 μ g. (human serum, *n*=13).

(C) Data in (B) plotted to show individual human antibody competition with the protective Ab.

(D) Purified human anti-IsdB Ab interference with protective anti-IsdB Ab function: Kidney SA burden from experiment Figure 6E. Ratio of protective to non-protective Ab injected IV: 25 μ g to 2.5 μ g (human serum, *n* =3).

(E) FhuD2 vaccination in naïve or SA infected mice: Kidney SA burden from experiment Figure 6F (n=10 per mouse group).

(F) MntC vaccination in naïve or SA infected mice: Kidney SA burden from experiment Figure 6G. (n=10 per mouse group).

Each data point represents an individual mouse; bars denote median and dashed lines indicate the limit of detection (A to C). n.s., not significant, *P<0.05, **P<0.01, and ***P< 0.001; one way ANOVA (A, B and D to F)