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## Supplemental information

## Stromal remodeling regulates

## dendritic cell abundance and activity

## in the tumor microenvironment

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5' ATGGTCAAACTCCGGGCTAGTGATGCAGGCGTCTACCGATGTGATGTCATGTATGGGATTGAAGACACTCAGGACACCATGTCACTGGCTGT 3' WT 5' ATGGT……………......................GATGCAGGCGTCTACCGATGTGATGTCATGTATGGGATTGAAGACACTCAGGACACCATGTCACTGGCTGT 3'  $5.5\%$  ATATGGATTGAAGACACTCAGGACACCATGTCACTGGCTGT 3 Vcan1053 -16bp Vcan1058 5' ATG..............<sup>47bp</sup>



**Supplementary Fig. S1 (related to Fig. 1). The VCAN pathway regulates tumor cDC1.** A: Human tonsil immunohistochemical staining for cDC1 lineage markers XCR1 and CLEC9A. See STAR Methods for protocol. Left, composite image after spectral unmixing. XCR1 (brown, DAB), CLEC9A (teal). Right, scoring map: blue, double-negative; red, single-positive XCR1; green, single-positive CLEC9A; yellow, double-positive XCR1/CLEC9A. 23 different areas were imaged, each containing approximately 4173 cells. About 80% of cells had no expression of markers and ~14% had dual staining. B: Schematic depiction of the deletions in the two mutant *Vcan* founders, 1053 (16bp deletion) and 1058 (47bp deletion). Sequence of exon 3 primer used in RT-PCR experiments shown in red. C: DNA amplification using primers flanking the targeted region. Shown are a 128bp WT amplicon and the mutated amplicons in founders *Vcan*1053 and *Vcan*1058. D: Bone marrow-derived macrophage (BMDM) *Vcan* locus RT-PCR using exon 3 primers at baseline or after stimulation with TLR4 agonist, lipopolysaccharide (LPS). *Vcan*1053 demonstrates a more severe defect in *Vcan* message induction/stability than *Vcan*1058. E: Validation of *Vcan* knockdown in LLC<sup>VcanKD</sup> cells. LLC cells were transfected with each of 3 hairpins (shRNA #1, 2 or 3) targeting exon 8 (encoding  $GAG\beta$ domain depicted in red in Fig. 1A). *Vcan* message was assayed using exon 3 primers (left) and exon 15 primers (right). F: Gating strategy to delineate tumor-associated dendritic cells (TADC) per van Ginderachter schema (Laoui et al., 2016). G: cDC subset frequencies in steady-state splenic tissue from WT and *Vcan*-/- mice. H: Total cDC (cDC1 + cDC2) absolute counts per mg tumor mass in LLC: WT, Vcan-depleted (LLC-EV<sup>VcanKD</sup>: Vcan+/-) and versikine-rescue (LLC-Vkine<sup>VcanKD</sup>: Vcan+/-) tumors, using the Collagenase/Hyaluronidase tumor cell dissociation protocol (see STAR Methods). I: Growth rates of WT, Vcan-depleted (LLC-EV VcanKD: Vcan+/-) and versikine-rescue (LLC-Vkine<sup>VcanKD</sup>: Vcan+/-) tumors. In H and I, the colon separates the genotype of implanted tumor cells from genotype of recipient animal.



**Papadas Fig. S2**

**Supplementary Fig. S2 (related to Fig. 2). The VCAN-matrikine, versikine, promotes cDC1 abundance** *in vivo***.** A: Full-length western blot for Fig. 2C. Arrow, versikine band migrating at 75KDa. B: Example of human lung cancer biopsy with stromal plus epithelial DPEAAE staining. 10X objective: scalebar 240mm, 40X objective: scalebar 60mm. C: Examples of negative DPEAAE staining in human lung cancer biopsies. 10X objective: scalebar 240mm, 40X objective: scalebar 60mm. See Supp. Table S1 for summary of staining patterns. D: Membranous localization of HAtagged ectopic versikine in B16 melanoma, a tumor model characterized by absence of cellautonomous *Vcan* expression (Asano et al., 2017). HA-tag, chromogen: BCIP/NBT; counterstain: nuclear fast red. E: Growth rates of subcutaneous LLC-EV and LLC-Vkine tumors. F: Absolute counts (cell count/ mg of tumor) of major intratumoral DC subsets, following optimized cell dissociation protocols (Miltenyi Dissociation Kit, see STAR Methods). G: Flow cytometric analysis of cDC subsets in orthotopically-implanted 4T1 mammary carcinoma tumors engineered to express empty-vector (4T1-EV) or versikine (4T1-Vkine). Representative flow plots (left) and frequencies (right) of cDC subsets are shown. H: Growth rates of orthotopic 4T1-EV and 4T1-Vkine tumors. I: Flow cytometric analysis of cDC subsets from bone marrow following intracardiac injection of VQ myeloma cells, engineered to express empty-vector (VQ-EV) or versikine (VQ-Vkine). Representative flow plots (left) and frequencies (right) of cDC subsets are shown. J: Kaplan-Meier curves depicting time-to-hindlimb paralysis (a clinical sequela of myeloma progression) in recipients of VQ-EV vs. VQ-Vkine myeloma tumors.



**Supplementary Fig. S3 (related to Fig. 3). Versikine selectively activates cDC1** *in vivo***.** A: Expression pattern of murine *Irf8, Batf3 and Id2*. Data from BioGPS. See Supp. Table S3 for tissue/ lineage annotations. B: Schematic layout of the pre-DC adoptive transfer experiment. Pre-DC were harvested from the BM of Flt3l-*in vivo* mobilized CD45.2+ mice and adoptively transferred into LLC-EV or LLC-Vkine tumors implanted in CD45.1+ recipients. *In vivo* pre-DC mobilization was achieved through implantation of Flt3l-secreting B16 cells, according to standard protocols (Vremec, 2016). 72 hours post-adoptive transfer, tumors were harvested, processed and cDC subsets were analyzed by flow cytometry. C: Gating strategy for flow sorting pre-DC from BM of Flt3l-*in vivo* mobilized donors, per the schema of van Ginderachter (Laoui et al., 2016). D: Representative flow plots of CD45.1+ endogenous cDC subsets (left) and frequencies (right). E: Representative flow plots of CD45.2+ adoptively-transferred cDC subsets (left) and frequencies (right). F: Summary of CD40 staining intensity (MFI= mean fluorescence intensity) in DC subsets from LLC-EV and LLC-Vkine tumors (independent Experiment 2).

A MutuDC-Vkine vs -EV GO analysis B









 $\blacktriangleright$  IL2



Vkine+LPS





\*\*\*

120

**Papadas Fig. S4** 

**Supplementary Fig. S4 (related to Fig. 4). cDC1 activation by versikine is cell-autonomous.** A: Gene ontology (GO) pathway analysis of differentially expressed genes between MutuDC1940-Vkine vs. -EV. Versikine's proapoptotic program ("positive regulation of programmed cell death/ "positive regulation of apoptotic process") is reminiscent of versikine's proapoptotic activities during development (McCulloch et al., 2009). B: RT-PCR of Cxcl9/10 in MutuDC1940-EV vs. MutuDC1940-Vkine stimulated with TLR4 agonist LPS or vehicle (PBS). C: ELISA detection of secreted Cxcl9 by MutuDC1940-EV- and MutuDC1940-Vkine stimulated with LPS or vehicle (PBS) plotted against time (hours). D: RT-PCR for Il27p28 and Ebi3 message in MutuDC1940-EV-vs. - Vkine stimulated with LPS or vehicle (PBS). E: ELISA detection of secreted Il27p28 by MutuDC1940-EV- and MutuDC1940-Vkine stimulated with LPS or vehicle (PBS) plotted against time (hours). F: RT-PCR for selected versikine-signature genes using RNA from MutuDC1940 cells (unmanipulated) exposed to supernatant from versikine-secreting HEK293 cells (Vkine sup) vs. control supernatant (control sup) at 72 hours. G: Flow cytometry for endogenous IFNy and IL2 of OT-I CD8+ T cells at baseline (left) and PMA-stimulated, prior to addition of DC (right). H: FMO controls shown for IFNy (left) and IL2 (right) under conditions of maximal stimulation (Vkine +LPS, compare to Fig. 4I). I: IFN $\gamma$  by ELISA in supernatants from OT-I+ MutuDC1940: SIINFEKL co-cultures in the antigen presentation assay.



**Supplementary Fig. S5 (related to Fig. 5). cDC1 accumulation requires atypical innate lymphoid support.** A: Validation of intratumoral NK (NK1.1+CD49b+) depletion following anti-ASGM1 treatment. B: Flow cytometric analysis of cDC subsets in LLC-EV vs. LLC-Vkine tumors following treatment with NK-depleting antibody (anti-ASGM1) or vehicle (PBS). C: Flow cytometric analysis of intratumoral basophils (defined as CD45intCD49b+FcϵRI+IgE+c-Kit− cells, gating per (Sektioglu et al., 2017)). D: Absolute counts/ mg tumor tissue of intratumoral basophils compared to intratumoral NK1.1+CD3- cells, in LLC-EV vs. LLC-Vkine tumors. E: Absence of intratumoral cDC1 in *Batf3*-/ recipients by multiparametric flow cytometry. F: Flow cytometric analysis of cDC subsets in LLC-EV vs. LLC-Vkine tumors implanted in WT or *Tlr2-/-* recipients. G: Summary of cDC subset frequency by flow cytometric analysis in LLC-EV vs. LLC-Vkine tumors implanted in WT or *Tlr2-/-* recipients. H: Growth rates of LLC-EV and LLC-Vkine tumors in WT vs. *Tlr2*-/- background. I: Flow cytometric analysis of cDC subsets in LLC-EV vs. LLC-Vkine tumors implanted in WT or *Cd44-/-* recipients. J: Summary of cDC subset frequency by flow cytometric analysis in LLC-EV vs. LLC-Vkine tumors implanted in WT or *Cd44-/-* recipients. K: Growth rates of LLC-EV and LLC-Vkine tumors in WT vs. *Cd44*-/- genetic background.



**Supplementary Fig. S6 (related to Fig. 6). Stroma-licensed cDC1 are "poised" and hypersensitive to nucleic acid sensing** *in vivo***.** A: Versikine-DMXAA synergy generates an abscopal effect in 4T1 mammary carcinomas. Growth curves of treatment-side 4T1-EV and 4T1-Vkine tumors challenged with a single sub-therapeutic dose (200 mcg) of IT DMXAA on Day 0 (DMXAA200) or vehicle (NaHCO3). B: Growth curves of contralateral side unmanipulated 4T1 tumors, according to corresponding treatment side configuration (treatment as in Panel S6A). C: Versikine-induced abscopal effect is accompanied by a survival advantage in 4T1 tumors. \*\*=p<0.01 by log-rank test. D: Schematic layout of iCD103 cell adoptive transfer experiments. E: Flow-cytometric validation of the iCD103 cells, generated as described in the protocol by Merad, Sparwasser and colleagues (Mayer et al., 2014), using standard cDC1 markers. F: Growth curves of B16-EV and B16-Vkine tumors challenged with a single subtherapeutic dose (200 mcg) of IT DMXAA on Day 0 (DMXAA200) or vehicle (NaHCO3). G: Kaplan-Meier survival curves for the experiment in panel S6F, \*=p<0.05 by log-rank test. H: Response to DMXAA200 is lost in B16-Vkine tumors implanted in *Batf3*-/ recipients. I: Efficacy of sub-therapeutic DMXAA200 in B16-Vkine tumors implanted in *Batf3*-/ recipients is restored following adoptive transfer of iCD103 cells. A subset of B16-bearing tumors did not "take" iCD103 cells, likely attributable to the pauci-immune environment of B16 tumors.

*In vitro* experiments were performed in technical triplicates. *In vivo* cohort sizes are shown in individual panels. All experiments were reproduced independently at least twice.







A

Favorable Prognosis (≥5 CD8+ TIL/HPF)





B

Stromal DPEAAE staining intensity

D



**Supplementary Fig. S7 (related to Fig. 7). Versikine promotes CD8+ responses and overcomes resistance to anti-PD1 inhibitors** *in vivo***.** A: CD8+ T cell subset frequency in the spleen of mice treated as in the schema depicted in Fig. 7A. Naïve (CD44-CD62L+), central memory [CM, (CD44+CD62L+)], effector/ effector memory [E/EM, (CD44+CD62L-)]. B: Correlation between *in vitro* versikine response signature and corrected CD8+ T cell scores across TCGA lung cancers. CD8+ T cell scores corrected for immune infiltration to remove variation associated with immune state. C: Distribution of DPEAAE stromal staining intensity across lung cancer prognostic subgroups [pauciimmune (poor prognosis) and immune-rich (favorable prognosis) at cutoff 5 CD8+ TIL/HPF]. Low DPEAAE staining intensities are more prevalent in the pauci-immune subgroup than the immune-rich subgroup, p<0.001 by two-tailed Mann-Whitney test. D: Growth response curves of individual tumors in the anti-PD1 experiment depicted in Fig. 7F.