

A Crucial Role of CXCL14 for Promoting Regulatory T Cells Activation in Stroke

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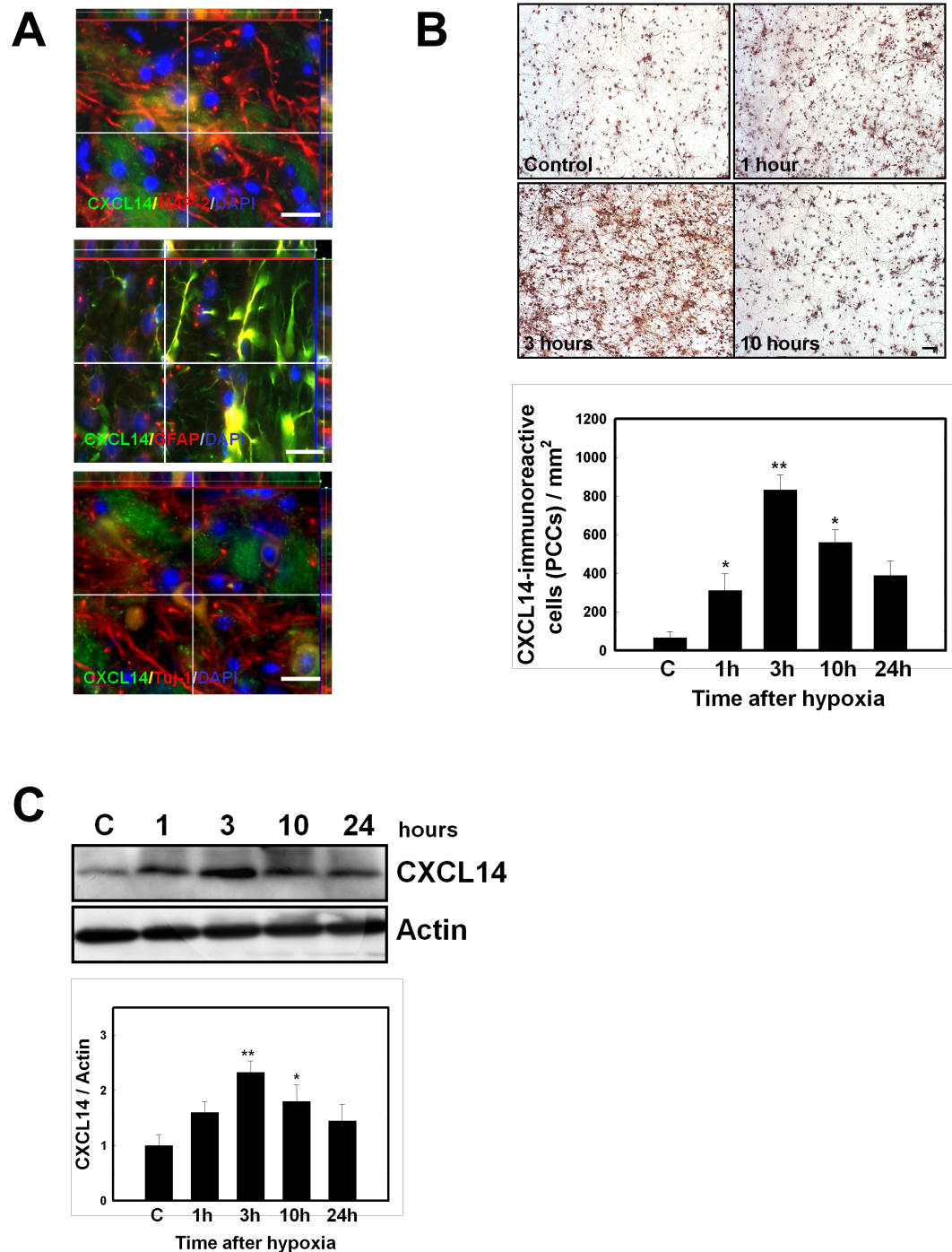
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Supplementary Table S1

Demographic and immunostaining data of brain samples of each patient

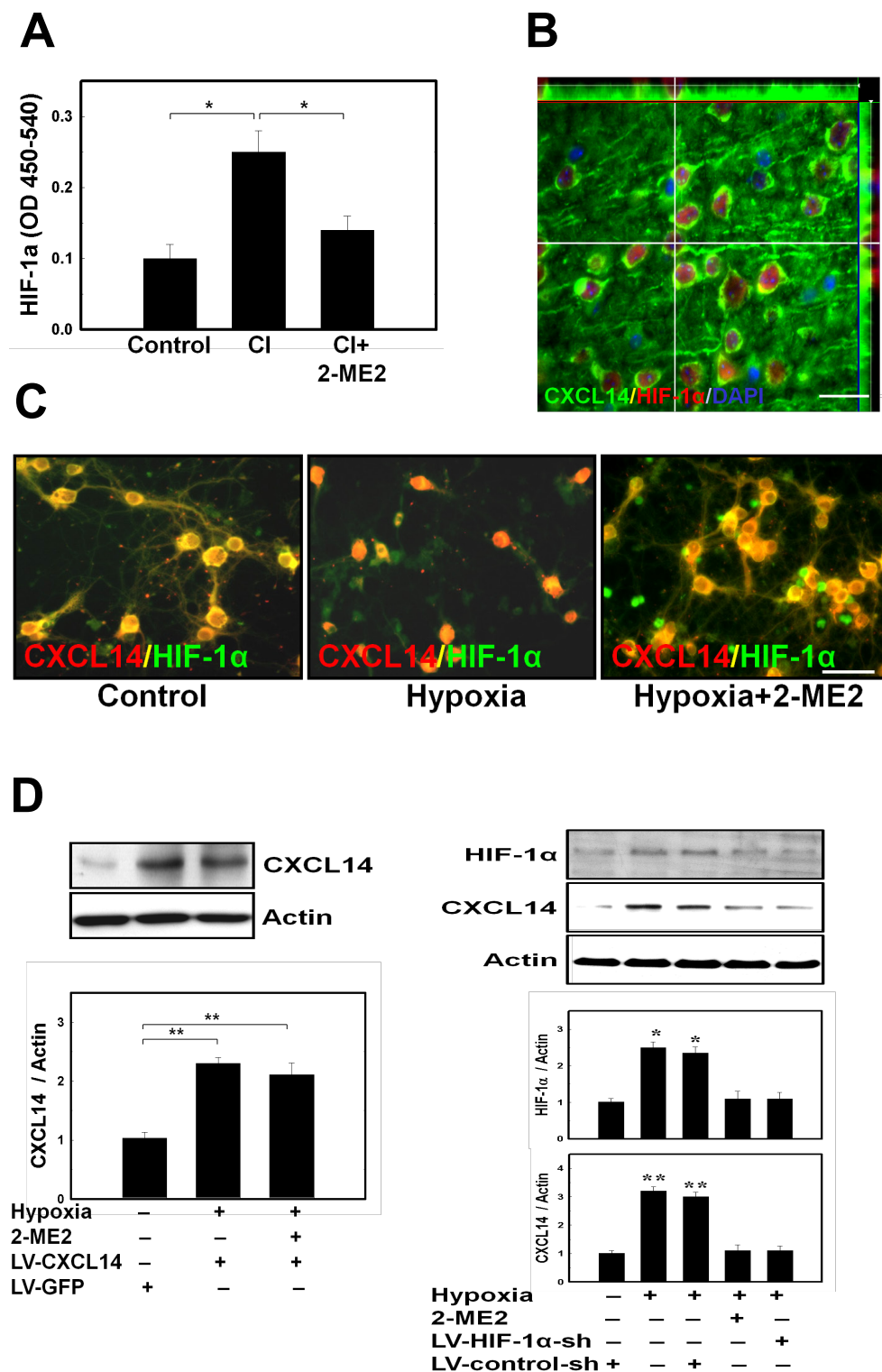
		Gender (female:F, male:M)	Age	Cause of death	CXCL14 Immunoreactivity (No. of CXCL14 ⁺ cells)
Experimental group	1	M	61	fatal cerebral infarction (1day after onset)	3766/mm ²
	2	F	59	fatal cerebral infarction (1day after onset)	3154/ mm ²
	3	M	57	fatal cerebral infarction (3days after onset)	4011/ mm ²
	4	M	54	fatal cerebral infarction (3days after onset)	3416/ mm ²
Control group	1	F	61	Glioblastoma Multiforme with brainstem failure	99/ mm ²
	2	M	63	Glioblastoma Multiforme with brainstem failure	73/ mm ²
	3	M	60	Glioblastoma Multiforme with brainstem failure	44/ mm ²
	4	F	57	Glioblastoma Multiforme with brainstem failure	57/ mm ²

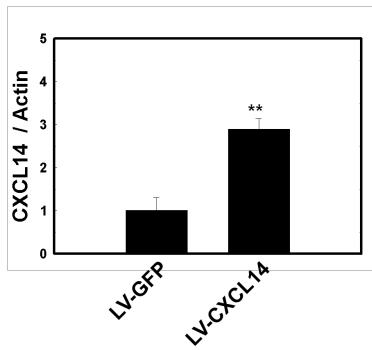
Supplementary Figures



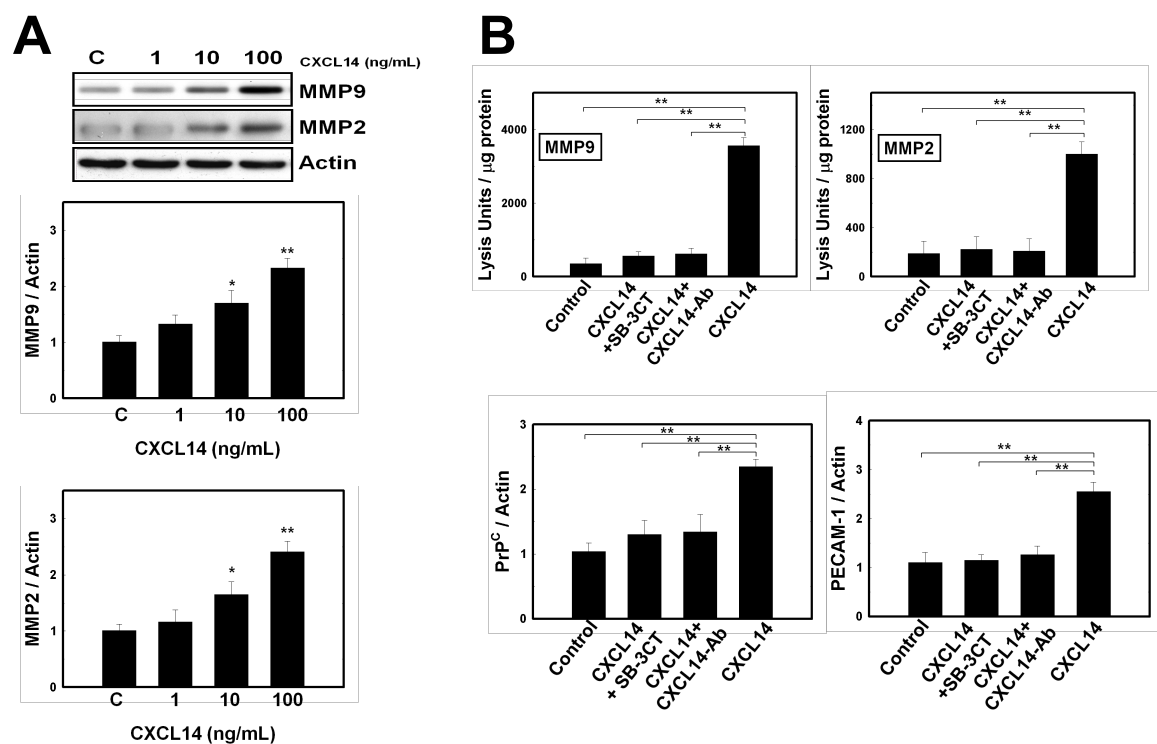
Supplementary Figure S1. HIF-1 α /Ischemia Induced Upregulation of CXCL14 Expression in human Brain and Rat Brains as well as in Primary Cortical Cultures (PCCs). (A) In a double immunofluorescence study of rat brain (3D images), cells that expressed CXCL14 in the penumbra colocalized with the specific markers MAP-2, Tuj-1, and GFAP. (B) Hypoxia in PCCs increased CXCL14⁺ cell density in a time-dependent manner compared with the control. (C) The protein

expression of CXCL14 in PCCs after hypoxia treatment was greater than in the control, and the increase was time-dependent. $n = 8$ per group. The mean \pm SEM is shown. The mean \pm SEM is shown. $*P < 0.05$ and $**P < 0.01$ vs. control. Bar = 50 μm .

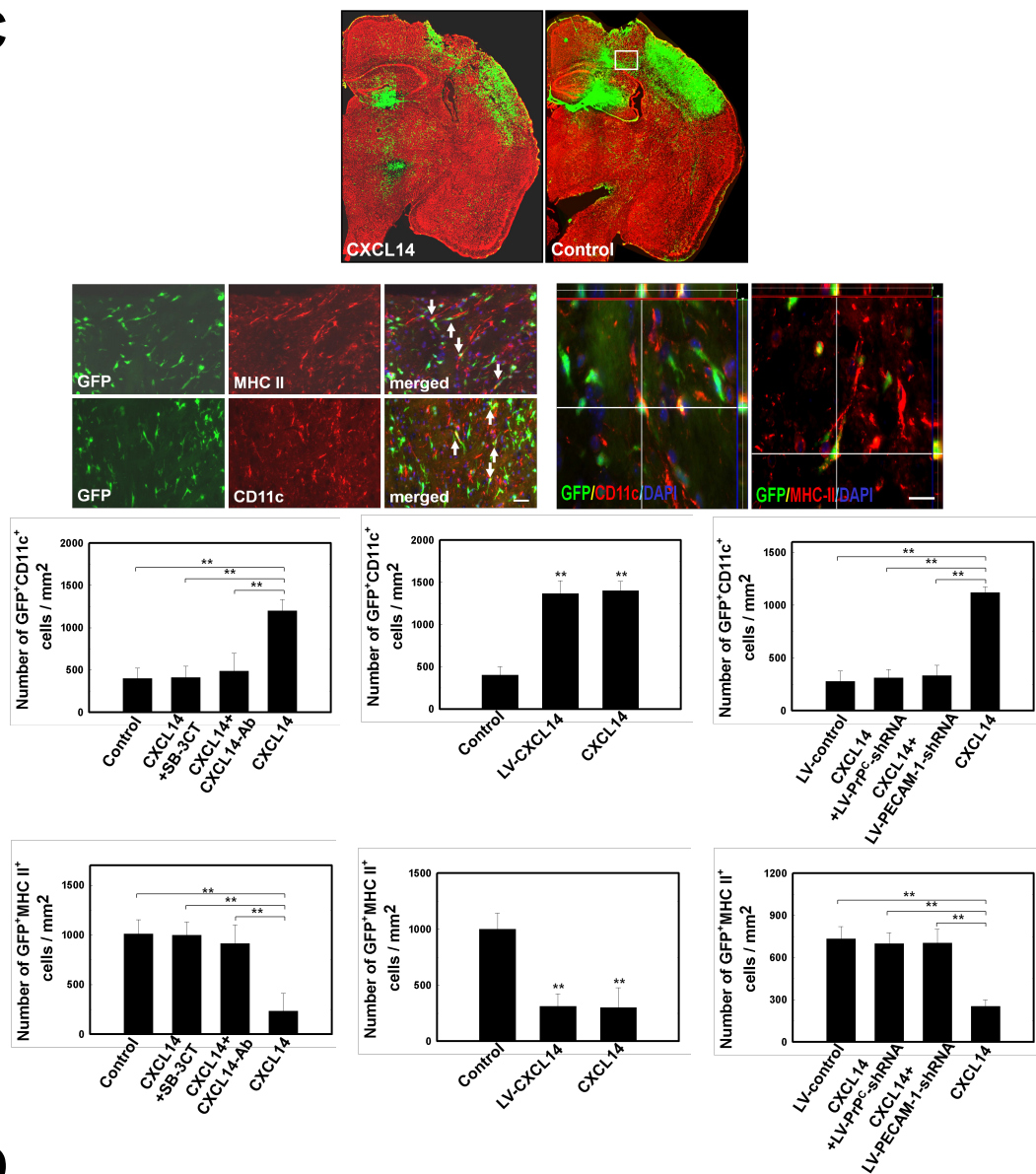




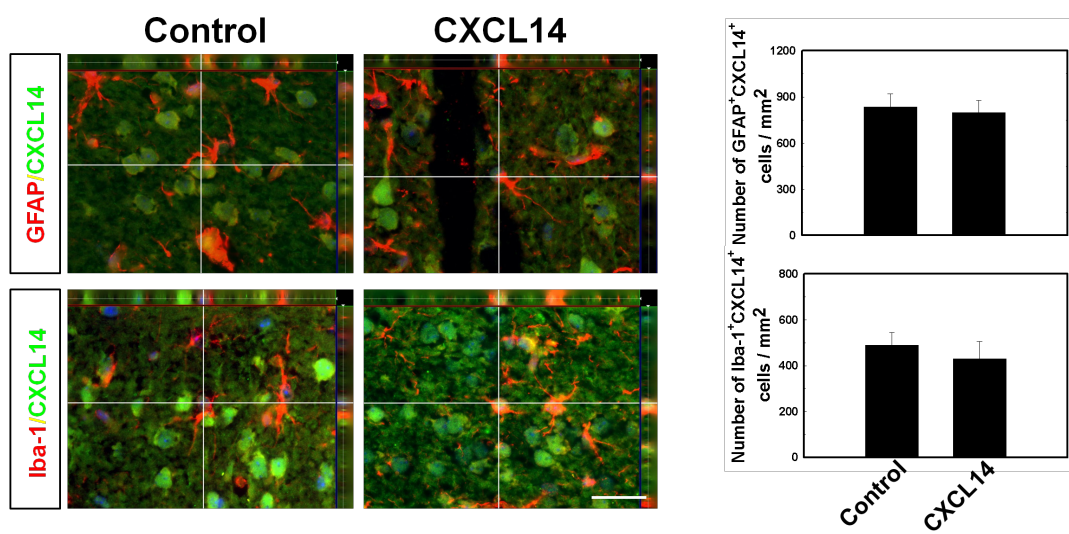
Supplementary Figure S2. Upregulation of CXCL14 After Cerebral Ischemia (CI) and Hypoxia Through Induction of HIF-1 α *In Vivo* and *In Vitro*. (A) Nuclear HIF-1 α activity increased in rat brains after cerebral ischemia, which was blocked by 2-ME2 (100 mg/kg). (B) CXCL14⁺ cells co-expressed with the HIF-1 α ⁺ cells in the ischemic penumbral area. (C) HIF-1 α colocalized with CXCL14 and was translocated mainly into the nuclei or to perinuclear areas (arrow) of PCCs after hypoxia treatment. Pretreating PCCs with 2-ME2 (10 μ M) resulted in the HIF-1 α protein being distributed to the cytosol and neurite (arrow-head), as well as the nucleus after hypoxia treatment. (D) 2-ME2 inhibited HIF-1 α -induced CXCL14 expression specifically, but not in lentiviral (LV-CXCL14) infection-induced CXCL14 expression (left panel). Both HIF-1 α and CXCL14 expression were downregulated by the administration of 2-ME2 and LV-HIF-1 α -shRNA (right panel). LV-CXCL14 transduction induced significant increased expression of CXCL14 in PCC (lower panel). The mean \pm SEM is shown. * P < 0.05 and ** P < 0.01 vs. control. Bar = 50 μ m.



C



D



Supplementary Figure S3. CXCL14 Stimulated the Recruitment of iDC and Activation of Tregs. (A) Western blot showed that CXCL14 treatment upregulated the protein expression of MMP9 and MMP2. (B) The activity of MMP9 and MMP2, as well as the protein expression of PrP^C and PECAM-1, were increased by intravenous injection of CXCL14 (100 ng/kg) into the ischemic brain. (C) In the representative GFP-chimeric mice, 3 days following cerebral ischemia (green color, GFP; red color, propidium iodide stain) (right upper panel), a larger amount of GFP⁺CD11c⁺ iDC cells were found distributed over the right striatum, hippocampus, and the penumbral area in recombinant CXCL14 or LV-CXCL14-treated mice than in control mice (middle panel). This phenomenon was inhibited by the administration of the MMP inhibitor (SB-3CT) and CXCL14-Ab, or stereotaxic injection of LV-PrP^C-shRNA or LV-PECAM-1-shRNA. However, recruitment of GFP⁺MHC-II⁺ cells into the ischemic brain was reduced by recombinant CXCL14 or LV-CXCL14 injection. (D) CXCL14 treatment did not induce significant change numbers of GFAP⁺CXCL14⁺ or Iba-1⁺CXCL14⁺ cells. The mean \pm SEM is shown. * $P < 0.05$ and ** $P < 0.01$ vs. control. Bar = 50 μ m.