

## Supplementary Information for

### **CCR9 axis inhibition enhances hepatic migration of plasmacytoid dendritic cells and protects against liver injury**

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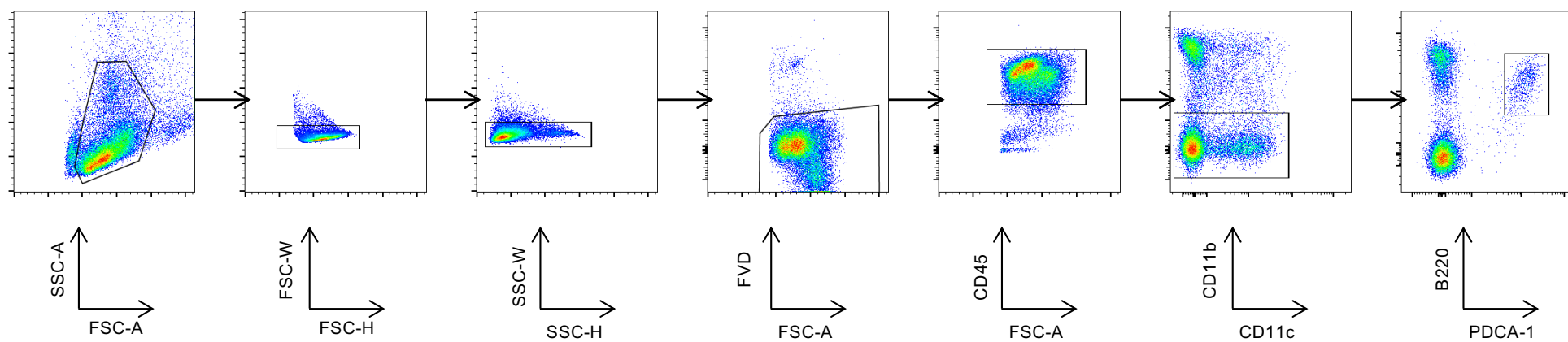
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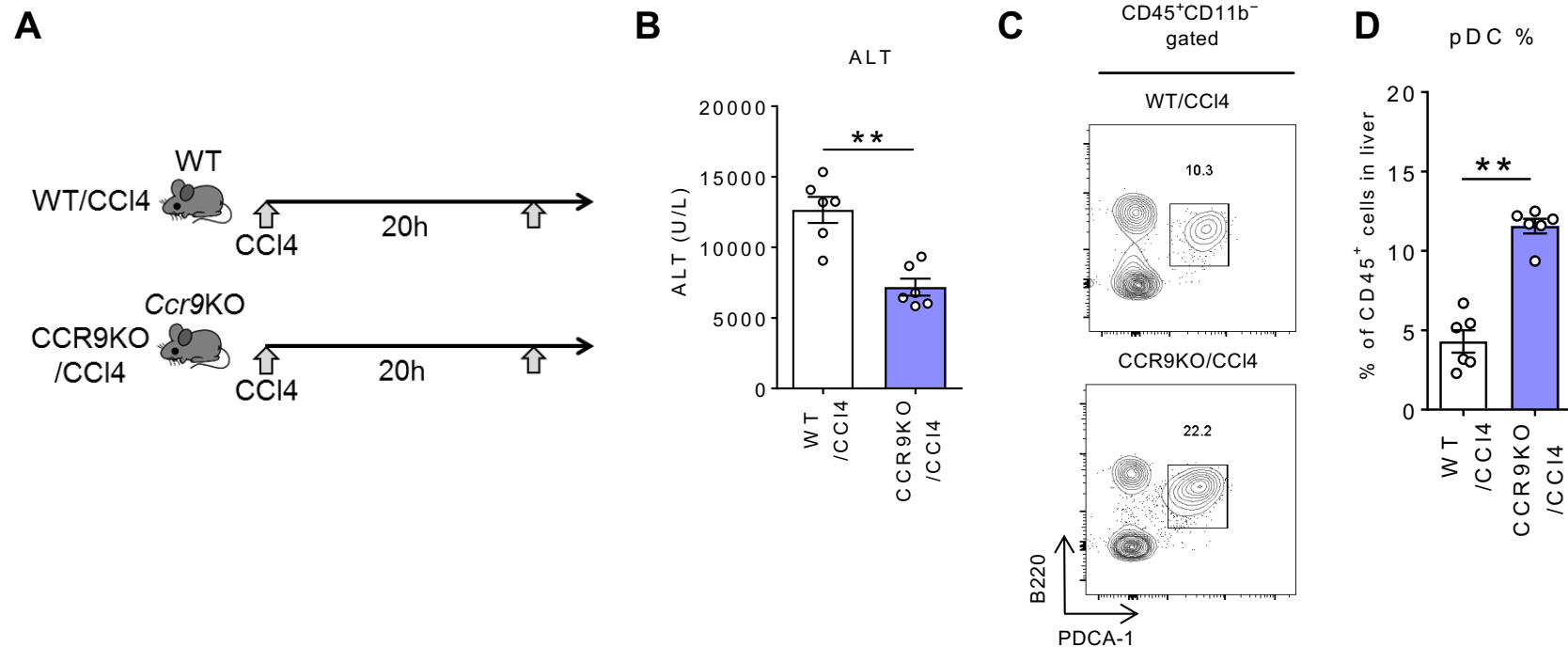
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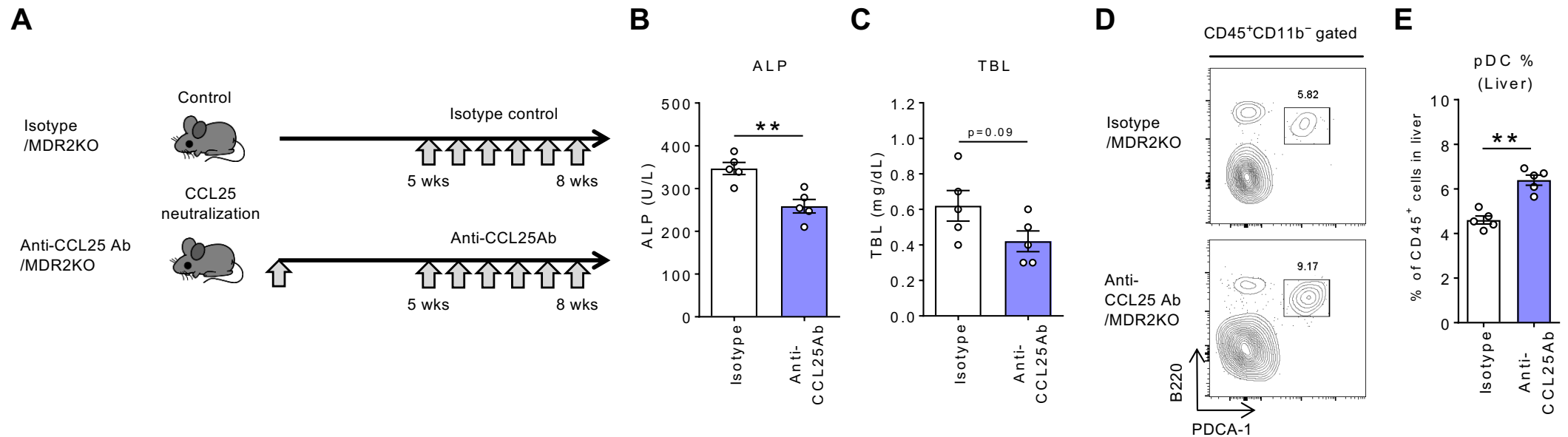


**Supplemental Figure 1. The gating strategy of FACS analysis.**  
Isolated mononuclear cells from various organs were analyzed.

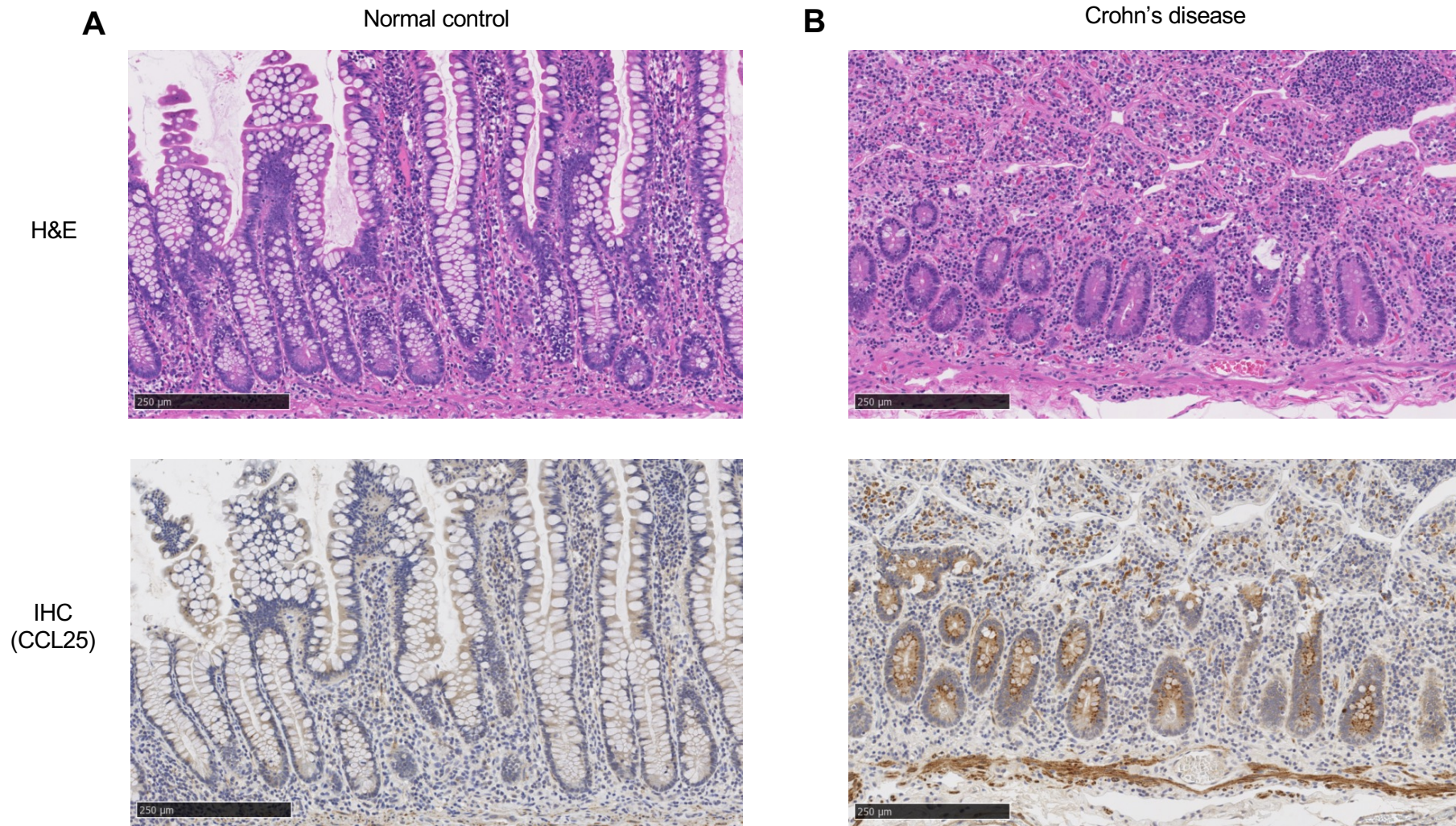


**Supplemental Figure 2. CCR9 deficiency induces accumulation of pDCs in the liver under CCl4-induced inflammation.**

(A) Study design. WT or *Ccr9*<sup>-/-</sup> mice were intraperitoneally injected with CCl4 (1 ml/kg) in corn oil or corn oil. All mice were sacrificed and analyzed 20 h following CCl4 injection. (B) Serum ALT levels. (C) Representative B220 and PDCA-1 staining of CD45<sup>+</sup>CD11b<sup>-</sup>-gated liver MNCs. (D) Mean percentages of pDCs in the liver during CCl4-induced hepatitis. Data represent the mean  $\pm$  SEM (n = 6 per group). \*\*p < 0.01, Student's t-test. Data are combined from two independent experiments.



**Supplemental Figure 3. CCL25 neutralization induces accumulation of pDCs in the liver under MDR2 deficiency-induced cholestasis.** (A) Study design. Mdr2<sup>-/-</sup> mice (FVB background) were intravenously injected with anti-CCL25 antibody (100 µg/mouse, R&D, clone 89818) or isotype control (100 µg/mouse, BioXCell, clone LTF-2) in PBS twice per week. All mice were sacrificed and analyzed 3 weeks after the first injection of the antibody at 5 weeks of age. (B) Serum ALP levels. (C) Serum total bilirubin levels. (D) Representative B220 and PDCA-1 staining of CD45<sup>+</sup>CD11b<sup>-</sup> gated liver MNCs. (E) Mean percentages of pDCs in the liver. Data represent the mean  $\pm$  SEM (n = 5 per group). \*\*p < 0.01, Student's t-test. Data are combined from two independent experiments.



**Supplemental Figure 4. CCL25 is expressed in the small intestinal epithelium of healthy controls and patients with Crohn's disease.**

Representative photomicrographs of H&E-stained (upper) and anti-CCL25 Ab-stained (lower) IHC sections of the small intestine. (A) The normal control derived from the colon cancer patient. (B) The patient with Crohn's disease. Scale bars: 250 μm.