## Supplementary Materials for

## Activated cGAS-STING signaling elicits endothelial cell senescence in early diabetic retinopathy

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Supplemental Figure 1 – Elevated VEGF, MCP-1, IL-8, IFN- $\gamma$  and IFN- $\beta$  immunostaining in patients with diabetic retinopathy. VEGF (A); MCP-1 (B); IL-8 (C) and IFN- $\gamma$  (D) in the aqueous humor, VEGF (E); MCP-1 (F); and IL-8 (G) in the vitreous humor of patients without (Ctl) and with DR or PDR. (Ctl, n = 20, DR, n = 23; NPDR, n = 10; PDR, n = 13 for A-D; Ctl, n = 13, PDR, n = 30 for E-G). Immunostaining of eyes with DR showed IFN- $\beta$  expression in cells of the iris anterior epithelial layer/dilator pupillae muscle, patchy staining of the iris anterior border layer (H), pigmented epithelium of the ciliary body pars plicata (I), pars plana, peripheral retinal pigment epithelium in areas of ischemic atrophy and cystoid degeneration (J), and choroidal macrophages and melanocytes (K). H-K: DM, no histological diabetic eye disease. NPDR and PDR eyes had IFN- $\beta$  staining of iris stromal clump cells (L). Macrophages and/or melanophages expressing IFN- $\beta$  were present in the neurosensory retina (M). Data represent mean  $\pm$  SEM. \* p < 0.05, \*\* p < 0.01, \*\*\* p < 0.001, and \*\*\*\* p < 0.0001; Mann-Whitney U test and Kruskal-Wallis test. DM – diabetes mellitus; Ctl – control; NPDR – non-proliferative diabetic retinopathy; PDR – proliferative diabetic retinopathy.



Supplemental Figure 2 – Verification of STING protein loss in KO mice. (A) Representative immunoblots and densitometry graphs demonstrate STING is not detectable in *STING* KO and *STING* <sup>GT</sup> mice compared to the WT group. The sample used here is leukocytes isolated from WT, *STING* KO, and *STING* <sup>GT</sup> mice. Non-diabetic and diabetic samples from the same genotype were pooled together. Data represent mean  $\pm$  SD. Statistical differences were examined by ordinary one-way ANOVA followed by Tukey's multiple comparisons test, \*\*\*\* *p* < 0.0001. KO, knock out.



Supplemental Figure 3 – Targeting STING rescues diabetic-induced upregulation of proinflammatory mediators in the retina. Cytometric bead array (CBA) showing elevated levels of pro-inflammatory cytokines IL-1 $\alpha$  along with reduced levels of anti-inflammatory cytokine IL-10 in retinal lysates from STZ-injected (diabetic; D) WT animals, compared to controls (non-diabetic WT; WT N). These changes were rescued in diabetic (D) *STING* KO and *STING*<sup>GT</sup> retina. Data represent mean  $\pm$  SD. Two-way ANOVA followed by Tukey's multiple comparisons test, \*P<0.05, \*\*P<0.01, \*\*\*P<0.001, \*\*\*P<0.001. n=3.



Supplemental Figure 4 – Genetic ablation of *STING* rescues diabetic-induced release of Senescence-associated secretory phenotype (SASP) mediators from retinal explants *in vitro*. Enzyme-linked immunosorbent assay (ELISA) showing elevated levels of SASP mediators like HMGB1 and IL-1 $\beta$  in the spent medium from HG (high glucose)-exposed WT retinal explants, compared to WT retinal explants, cultured in presence of low glucose (LG). But HG-exposed *STING* KO and *STING*<sup>GT</sup> retinal explants did not show such changes. Data represent mean  $\pm$  SD. Two-way ANOVA followed by Tukey's multiple comparisons test, \*\*P<0.01, \*\*\*P<0.001, \*\*\*\*P<0.001, \*\*\*\*P<0.001. n=3.

Group	Age (years) Average	Male (Number)	Female (Number)	Duration of Diabetes (Years)	HbA1c (%)	Race
ND	$71 \pm 7$	4	2	-	-	Caucasian
DR	$72 \pm 9$	4	2	$10 \pm 5.6$	7.2 + 1.2	Caucasian
Data are expressed as mean $\pm$ SD. $n = 6$ for the non-diabetic and diabetic retinopathy groups. Duration of						
diabetes and HbA1c data is not accessible for one female case in the DR group. ND, Non-diabetic; DR,						
Diabetic retinopathy.						

Supplemental Table 1 – Cohort characteristics for human retina tissue western-blot profile

## Supplemental Table 2 – Cohort characteristics for aqueous humor soluble factor profile

Category/parameter	Control	DR	NDR	PDR		
Average Age	67.25±2.08	60.39±1.98**	60.40±2.27*	60.38±2.06*		
(years)						
Gender Ratio	12/8	20/3	9/1	11/2		
(M/F)						
× /						
Visual acuity	0.66±0.14	0.71±0.18	$0.45 \pm 0.08$	0.91±0.22		
(Log Mar)						
Random blood	127.35±10.76	210.88±17.64***	171.75±17.20*	232±21.08***		
sugar						
Data are expressed as mean $\pm$ SEM. $n = 14$ for the control group, $n = 23$ for the diabetic retinopathy group, $n = 14$						
10 for the non-proliferative diabetic retinopathy group, $n = 13$ for proliferative diabetic retinopathy group. DR,						
Diabetic retinopathy; NDR, non-proliferative diabetic retinopathy; PDR, proliferative diabetic retinopathy; M,						
male; F, female. * $p < 0.05$ , *** $p < 0.001$ compared with control. Mann-Whitney U test.						

## Supplemental Table 3 – Cohort characteristics for vitreous humor soluble factor and DNA concentrations profile

Category/parameter	Soluble factors study		DNA concentrations		
	Control	DR	Control	DR	
Average Age (years)	62.07±2.60	60.39±1.98	62.91±3.01	54.59±2.79*	
Gender Ratio (M/F)	7/7	21/9	5/7	12/5	
Visual acuity (Log Mar)	0.75±0.16	1.45±0.13**	0.88±0.16	1.38±0.19	
Random blood sugar 101.94±6.13 149.72±10.61* 102.07±7.07 1		154.27±15.66			
Data are expressed as mean $\pm$ SEM. $n = 14$ for the control group, and $n = 30$ for diabetic retinopathy group in					
soluble factors study; $n = 12$ for the control group, and $n = 17$ for diabetic retinopathy group in DNA					
concentrations study. DR, Diabetic retinopathy; M, male; F, female. * $p < 0.05$ , ** $p < 0.01$ , *** $p < 0.001$					
compared with appropriate control. Mann-Whitney $\cup$ test.					

Clinical data of non-diabetic (N) and diabetic mice (D) in long-term and short-term studies					
	Group	Body weight	HbA <sub>1c</sub>		
		(g)	%	mmol/mol	
Short-term studies	WT-N	$33 \pm 3$	$3.1 \pm 0.1$	$10 \pm 1.0$	
(2-3 months duration)	WT-D	$25 \pm 2*$	$8.3\pm0.2\texttt{*}$	$68 \pm 1.7$ *	
	<i>STING</i> KO - N	$32 \pm 2$	$3.1 \pm 0.1$	$10\pm0.8$	
	STING KO - D	26± 2*	$8.1 \pm 0.3$ *	$65 \pm 3.6$ *	
	<i>STING</i> <sup>Gt</sup> - N	$33 \pm 2$	$3.1 \pm 0.1$	$10 \pm 0.9$	
	<i>STING</i> <sup>Gt</sup> - D	$26 \pm 2*$	$8.3\pm0.3\texttt{*}$	$67 \pm 2.7$ *	
Long-term studies	WT-N	$43 \pm 5$	$3.1 \pm 0.1$	$10 \pm 0.9$	
(8 months duration)	WT-D	$33 \pm 1*$	$8.2 \pm 0.3$ *	$66 \pm 2.9*$	
	STING KO -N	$46 \pm 4$	$3.0 \pm 0.1$	$9.4 \pm 0.5$	
	STING KO - D	$30 \pm 2*$	$8.1\pm0.1\texttt{*}$	$65 \pm 1.0*$	
	<i>STING</i> <sup>Gt</sup> - N	$41 \pm 4$	$3.1 \pm 0.1$	$9.6\pm0.7$	
	<i>STING</i> <sup>Gt</sup> - D	$30 \pm 3*$	$8.2 \pm 0.3$ *	$66 \pm 2.5*$	
Data are expressed as mean $\pm$ SD. $n = 6-10$ animals in each group for long term studies, $n = 33-40$					
animals in each group for short term studies. $*p < 0.0001$ compared with appropriate N from each					
group, ordinary one-way ANOVA - Tukey's multiple comparisons test, Non-diabetic (N), Diabetic (D)					

Supplemental Table 4 – Clinical data of non-diabetic (N) and diabetic mice (D) in longterm and short-term studies.

group, ordinary one-way ANOVA - Tukey's multiple comparisons test. Non-diabetic (N), Diabetic (D), Wildtype (WT).