Supplemental Materials

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A simple biological imaging system for viable human circulating tumor cells

Supplemental Video 1

Time-lapse images of H1299 human lung cancer cells were recorded for 48 hours after OBP-401 infection at 10 MOI.

Supplemental Video 2

Time-lapse images of OST human sarcoma cell lines were recorded for 72 hours after OBP-401 infection at 10 MOI.

Supplemental Figure 1

Time-lapse images of human sarcoma cell lines (NDCS-1, OST, and NOS-10) were recorded for 72 hours after OBP-401 infection at 10 MOI.

Supplemental Figure 2

Quantitative assessment of GFP labeling by OBP-401 in a variety of human cancer cell lines.

Supplemental Figure 3

Immunohistochemical staining for cytokeratin in H1299 cells stably expressing GFP.

Supplemental Figure 4

Flowcytometric detection of GFP-positive human tumor cells following *ex vivo* OBP-401 infection.

Supplemental Table 1

Characteristics of patients with gastric cancer and CTC numbers.

Supplemental Table 2

Characteristics of patients with other cancers and CTC numbers.



Supplemental Figure 1

Time-lapse images of human sarcoma cell lines (NDCS-1, OST, and NOS-10) were recorded for 72 hours after OBP-401 infection at 10 MOI. Selected images taken at the indicated time points showing cell morphology by phase-contrast microscopy (top panels) and GFP expression under fluorescence microscopy (bottom panels). Magnification \times 200.





Supplemental Figure 3

Immunohistochemical staining for CK-7/8 and CK-19 in H1299 cells stably expressing GFP. (A) H1299 human lung cancer cells were immunohistochemically stained with rhodamine-labeled anti-CK-7/8 or CK-19 antibody, and also counterstained with DAPI. H1299 cells express CK-7/8, but not CK-19. (B) H1299 cells were transfected with the CMV promoter-driven GFP expression construct and selected with G418 for 56 days. Cells expressing GFP were positive for CK-7/8 by immunohistochemical staining. (C) Blood samples (5 ml) obtained from healthy donors were mixed with 1×10^4 H1299 cells stably expressing GFP, exposed to erythrocyte lysis buffer, and then photographed by fluorescent microscopy. After fixation, the cells were immunohitochemically stained for CK-7/8. The merged image demonstrates that GFP-expressing cells were positive for CK-7/8.



Supplemental Figure 4

Flowcytometric detection of GFP-positive human tumor cells following *ex vivo* OBP-401 infection. (A) Gates were set for GFP-positive cells according to the blood (negative control) and GFP-expressing H1299 cells (positive control). (B) After the lysis of RBC, blood samples (1 ml) spiked with 0, 200, or 2,000 H1299 cells were infected with 10^4 PFU of OBP-401 for 24 hours, and then subjected to flowcytometric analysis. (C) The numbers of GFP-positive cells were identified in three samples in each group, and averaged with SD.

0

0

2

0

0.0

0.0

57.1

0.0

19.0

33.0

68040

80625

70185

56820

Blood 1 ml

+ 2,000

Supplemental Table 1

Case No.	Sex	Age	Tumor status			Store	CTC
			Т	Ν	М	Siage	numbers
1	М	62	3	3	1	IV	6
2	М	69	3	3	1	IV	2
3	М	70	2	1	0	II	2
4	М	60	2	2	0	IIIA	0
5	F	52	2	1	0	II	23
6	F	58	1	0	0	IA	3
7	F	70	1	0	0	IA	0
8	F	70	1	0	0	IA	2
9	М	62	1	1	0	IA	47
10	М	77	2	1	1	IV	16
11	F	46	4	1	1	IV	0
12	М	64	3	1	1	IV	0
13	М	55	2	0	0	IB	0
14	F	66	1	0	0	IA	4
15	М	79	2	1	0	II	25
16	М	77	2	1	0	II	2
17	F	73	1	0	0	IA	0
18	F	61	3	1	0	IIIA	0
19	М	83	2	1	0	II	4
20	М	63	1	0	0	IA	0
21	F	57	1	0	0	IA	5
22	М	63	2	0	0	IB	5
23	М	59	3	0	0	II	2
24	F	78	3	1	1	IV	1
25	М	73	4	2	1	IV	6
26	М	58	2	2	1	IV	11
27	F	72	1	1	0	IB	29
28	М	83	1	0	0	IA	6
29	М	54	3	1	1	IV	0
30	М	67	3	1	0	IIIA	1
31	F	64	1	0	0	IA	8
32	М	80	3	1	1	IV	0
33	М	70	2	2	0	IIIA	0
34	M	60	2	- 1	0 0		5
35	F	60	2	' ∩	n	IR	7
36	۱ ۸ <i>۸</i>	70	2	1	1		1
30 27		10	ა ი	1	1	1V	1
31	F	dC	3	T	1	IV	2

Characteristics of patients with gastric cancer and CTC numbers

Supplemental Table 2

	Sex	Age	Concer type	Stage	CTC
Case No.			Cancer type		numbers
1	F	69	Colon	IV	56
2	М	56	Colon	IV	1
3	М	77	Colon	IIIA	17
4	F	60	Colon	I	18
5	М	51	Colon	IIIB	6
6	М	70	HCC	II	0
7	F	59	HCC	IV	0
8	F	52	Breast	IV	19
9	М	63	Lung	IA	0

Characteristics of patients with other cancers and CTC numbers