

Curing autoimmune diabetes in mice with allogeneic islet and hematopoietic cell transplantation after CD117 antibody-based conditioning

Preksha Bhagchandani¹, Stephan A. Ramos¹, Bianca Rodriguez¹, Xueying Gu¹, Shiva Pathak², Yuqi Zhou¹, Yujin Moon¹, Nadia Nourin¹, Charles A. Chang¹, Jessica Poyser², Brenda J. Velasco², Weichen Zhao¹, Hye-Sook Kwon², Richard Rodriguez¹, Diego M. Burgos¹, Mario A. Miranda¹, Everett Meyer^{2,3,4}, Judith A. Shizuru^{2,3,4}, Seung K. Kim^{1,3,4,*}

Supplemental Materials

Supplemental Figure 1. Non-myeloablative conditioning requires JAK inhibition to permit durable allogeneic donor chimerism in a radioresistant NOD model.

Supplemental Figure 2. Functional status of prediabetic mixed chimeras after non-myeloablative conditioning and HCT.

Supplemental Figure 3. Insulinitis is present in conditioned mice but not in mixed chimeras.

Supplemental Figure 4. Functional status of diabetic mixed chimeras after non-myeloablative conditioning, HCT, and islet transplantation.

Supplemental Figure 5. Autoreactive T cells can be tracked using islet autoantigen specific tetramer analysis.

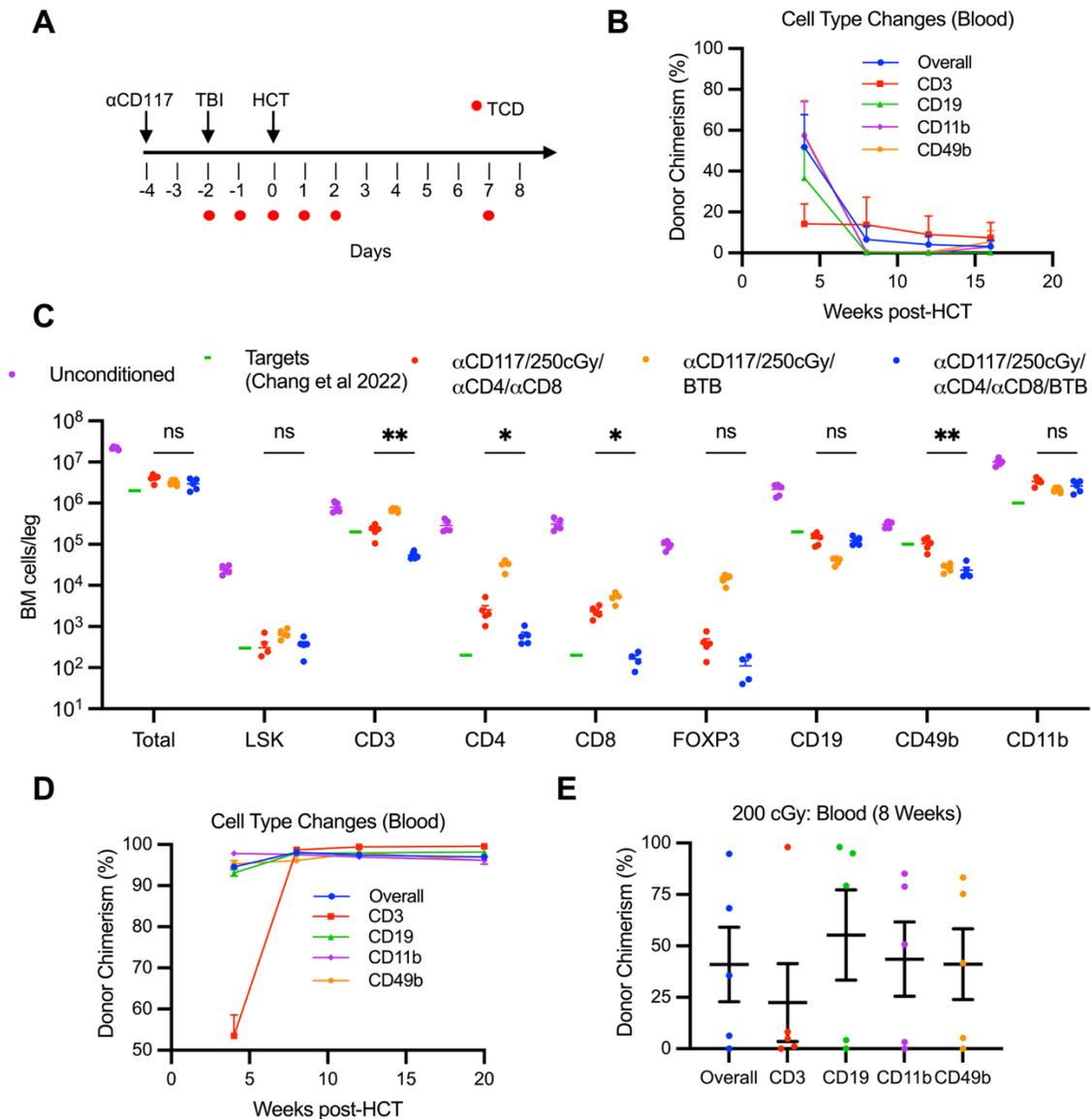
Supplemental Figure 6. Donor antigen presenting cell presence is associated with thymic deletion of host and donor T cells.

Supplemental Figure 7. Peripheral tolerance mechanisms contribute to anergy of peripheral host effector cells.

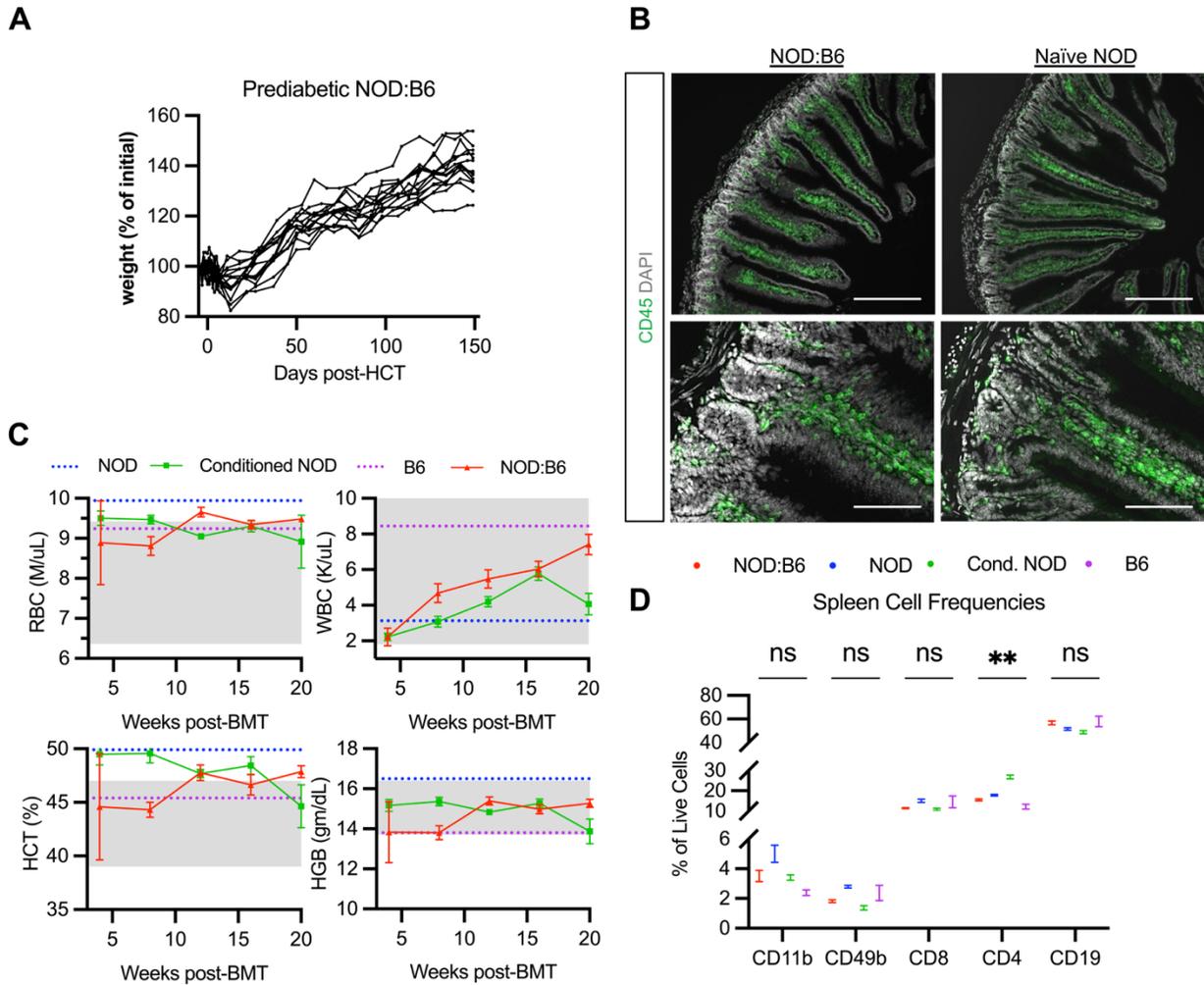
Supplemental Figure 8. Gating strategy for V β subsets.

Supplemental Table 1. Histology antibody catalog

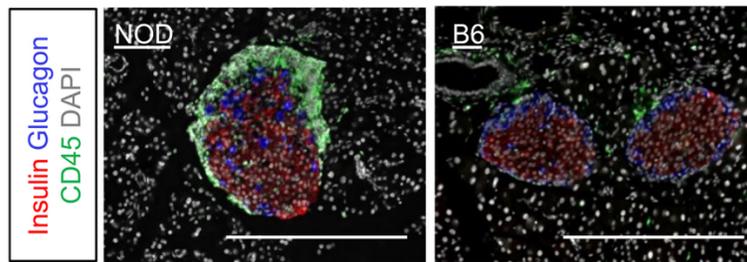
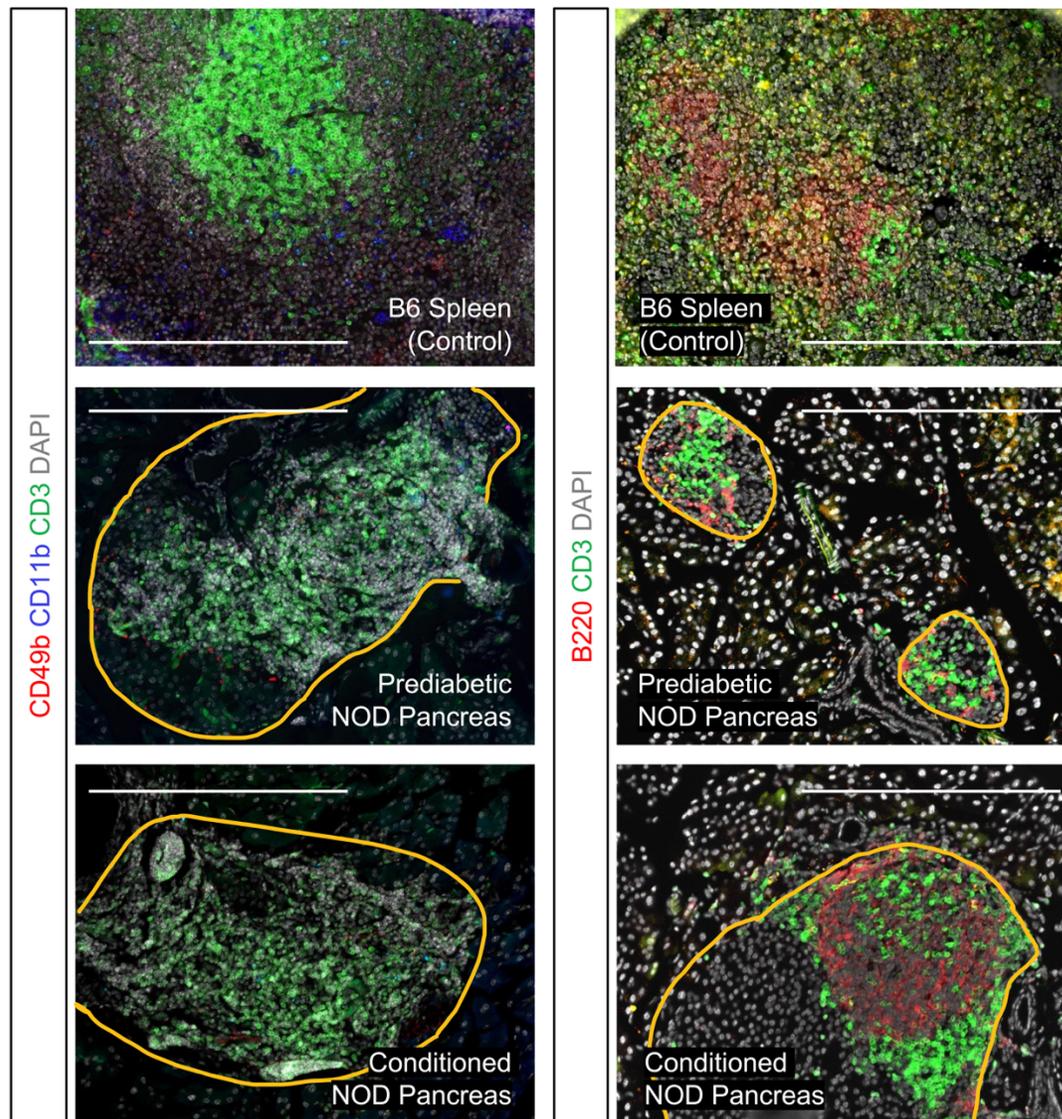
Supplemental Table 2. Flow cytometry antibody catalog



Supplemental Figure 1. Non-myeloablative conditioning requires JAK inhibition to permit durable allogeneic donor chimerism in a radioresistant NOD model. (A) Reduced intensity conditioning regimen without JAK inhibition. 500 μ g α CD117 is administered on day -4, 300cGy TBI on day -2, 600 μ g/300 μ g of α CD4/CD8 on days -2 through +2 and day +7. On day 0, mice are transplanted with 30E6 WBM cells or 1.5E6 HSPCs after TCD treatment. Mixed chimerism is analyzed every 4 weeks afterwards, in peripheral blood. (B) Longitudinal chimerism analysis of peripheral blood after conditioning (without JAK inhibition) and HCT depicting overall, CD3⁺ T cell, CD19⁺ B cell, CD11b⁺ myeloid cell, and CD49b⁺ NK cell donor (CD45.2⁺) chimerism ($n = 5$). (C) Bone marrow (BM) absolute cell count analysis at Day 0 after conditioning regimen containing α CD117, 250 cGy TBI, and α CD4/CD8 with (blue, Figure 1A) or without (red, Supplemental Fig. 1A) JAK inhibitor baricitinib (BTB), as well as α CD117, 250 cGy TBI, and BTB without TCD (orange). Approximate target values for depletion are shown in green from studies in C57BL/6 mice in Chang et al 2022, and unconditioned NOD in purple. (D) Chimerism analysis of peripheral blood over 20 weeks post-HCT with 2.5E6 B6 HSPCs and conditioning with JAK inhibition ($n = 5$). (E) Chimerism analysis of peripheral blood at 8 weeks post-HCT with 30E6 B6 WBM cells and conditioning with JAK inhibition and XRT reduced to 200 cGy ($n = 5$). (B-E) Data are represented with mean \pm SEM. * $P < 0.05$; ** $P < 0.01$; ns = not significant. P values were calculated using Mann-Whitney U tests. TBI = total body irradiation; HCT = hematopoietic cell transplant; TCD = T cell depletion; HSC = hematopoietic stem cell; LSK = Lin⁻ cKit⁺ Sca-1⁺

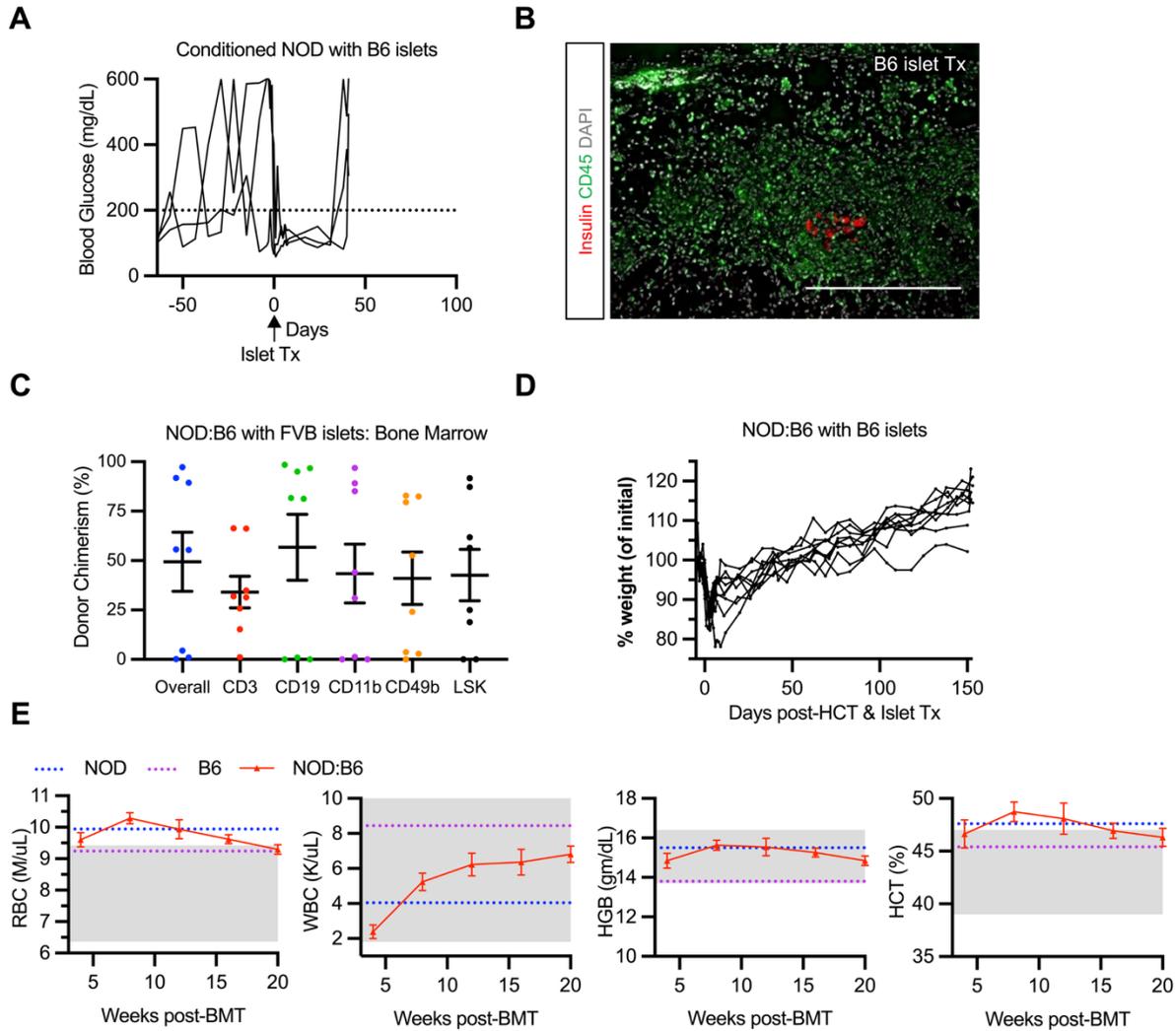


Supplemental Figure 2. Functional status of prediabetic mixed chimeras after non-myeloablative conditioning and HCT. (A) Weight after HCT of prediabetic NOD:B6 as a percentage of initial weight prior to conditioning start ($n = 15$, sum of 3 independent experiments). (B) Representative host duodenal histology of prediabetic NOD:B6 chimeras ($n = 14$) at 20 weeks post-HCT compared to naïve NOD, stained for CD45. Scale bars = $200\mu\text{m}$ (top) or $50\mu\text{m}$ (bottom). (C) Complete blood count values for prediabetic NOD:B6 mice after conditioning and HCT (red; $n = 10$) vs. prediabetic NOD mice after conditioning only (green; $n = 10$). Blue dotted lines show averages from naïve prediabetic NOD mice ($n = 5$) and purple dotted lines show averages from naïve B6 mice ($n = 9$). Gray boxes show reference ranges as provided with hematology analyzer equipment (see Methods). WBC = white blood cell; RBC = red blood cell; HGB = hemoglobin; HCT = hematocrit. (D) Myeloid, NK, CD8^+ T, CD4^+ T, and B cell frequencies in spleens of prediabetic NOD:B6, naïve NOD, conditioned NOD, and naïve B6 mice ($n = 9$ -14). Data are represented with mean \pm SEM. P values were calculated using Mann-Whitney U tests. $**P < 0.01$; ns = not significant

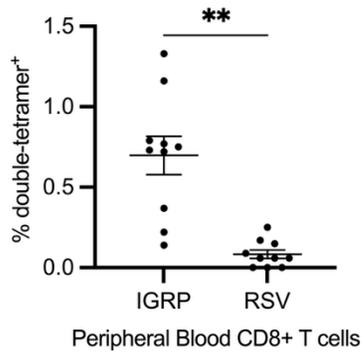
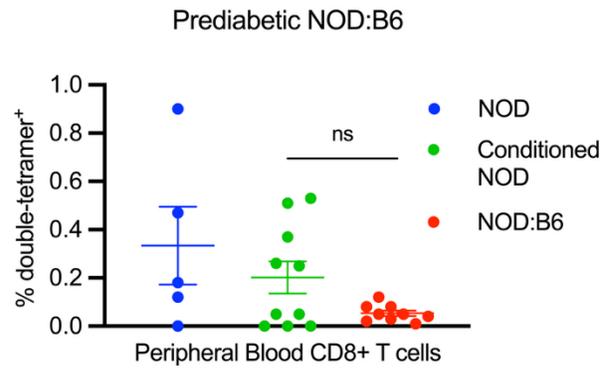
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Supplemental Figure 3. Insulitis is present in conditioned mice but not in mixed chimeras. (A)

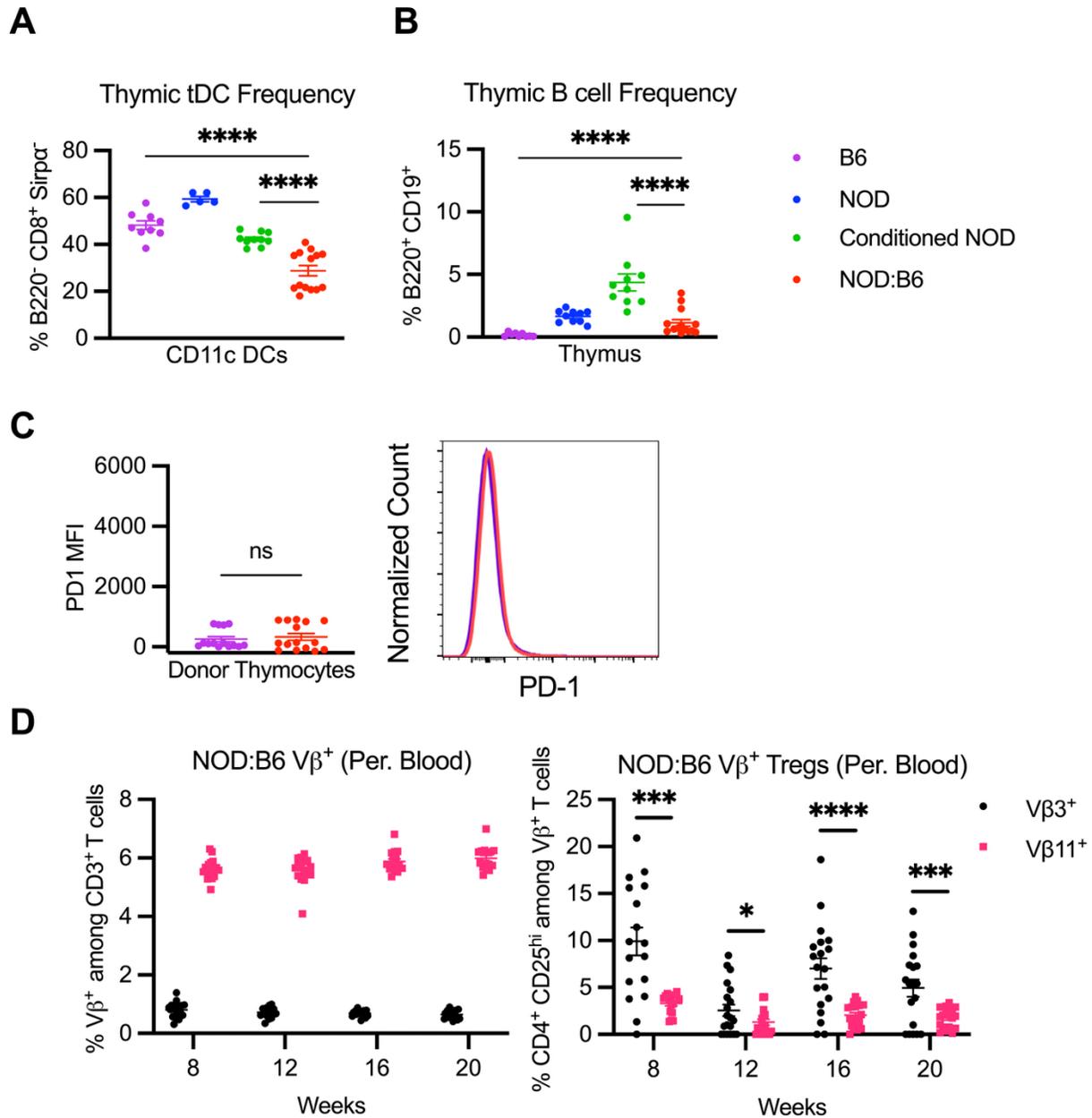
Representative pancreatic histology of prediabetic NOD at 8 weeks compared to naïve B6 after immunostaining for insulin, glucagon, and CD45. ($n = 4-6$; scale bars = $200\mu\text{m}$). **(B)** Representative pancreas histology of naïve prediabetic NOD at 12 weeks, or conditioned prediabetic NOD (20 weeks after conditioning), immunostained as indicated for CD3, CD49b and CD11b, or CD3 and B220 ($n = 3$ each, scale bars = $200\mu\text{m}$, islets circled in yellow). B6 spleen included as a staining control.



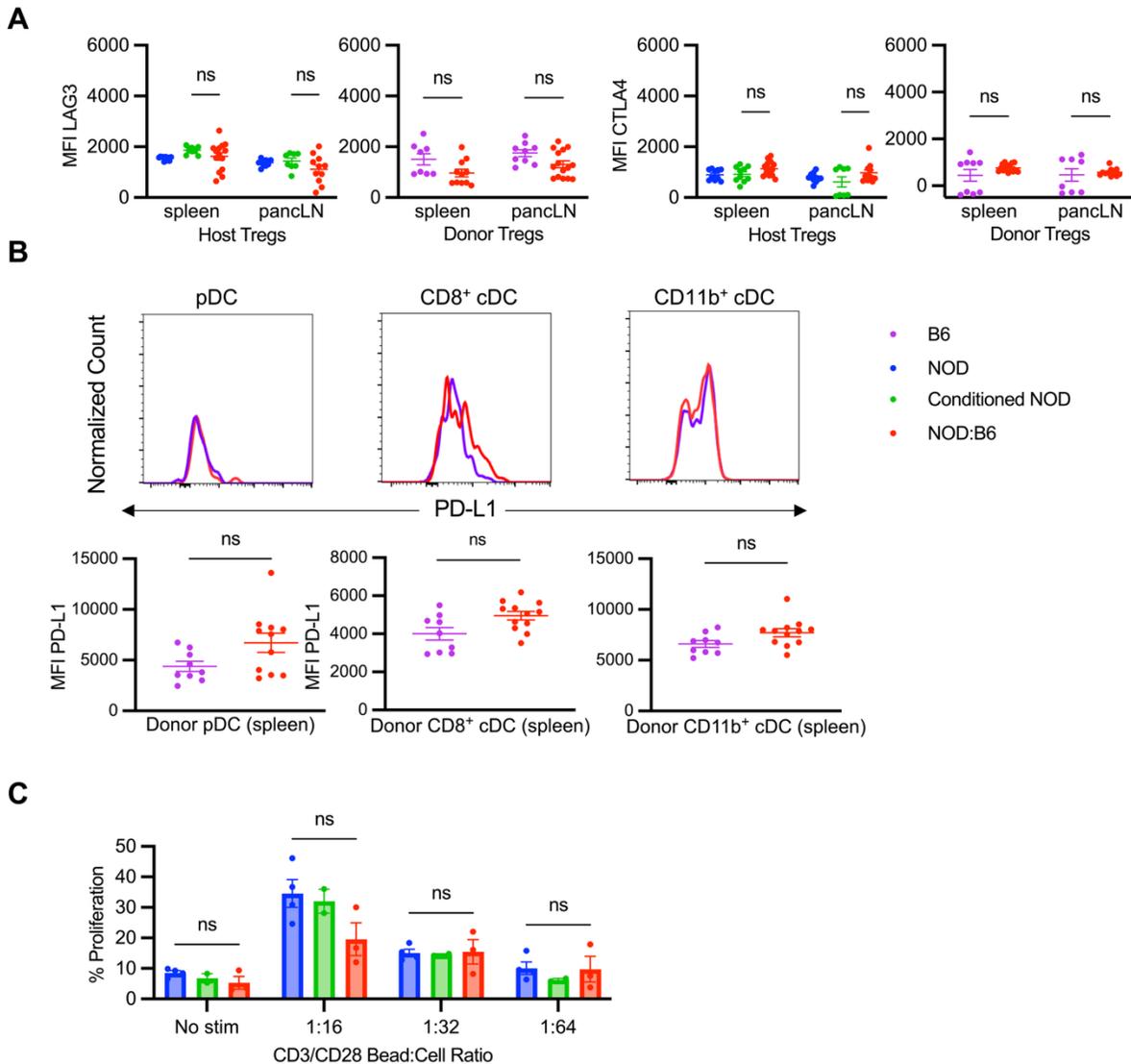
Supplemental Figure 4. Functional status of diabetic mixed chimeras after non-myeloablative conditioning, HCT, and islet transplantation. (A) Non-fasting blood glucose of conditioned diabetic NOD mice without HCT that received B6 islets ($n = 3$). Dotted line (200 mg/dL) indicates normoglycemia threshold. (B) B6 islet graft 5 weeks after transplantation in conditioned diabetic NOD, stained for insulin and CD45 ($n = 3$). Scale bar = 200 μ m (C) Bone marrow chimerism at endpoint (islet rejection) in diabetic NOD:B6 mice that received FVB islets, including Lin⁻ cKit⁺ Sca-1⁺ (LSK) HSC chimerism ($n = 8$, sum of 3 independent experiments). (D) Weight after HCT and B6 islet transplantation of diabetic NOD:B6 as a percentage of initial weight prior to conditioning start ($n = 11$, sum of 3 independent experiments). (E) Complete blood count values for diabetic NOD:B6 mice after conditioning, HCT, and B6 islet transplantation (red, $n = 9$). Blue dotted lines show averages from naïve diabetic NOD mice ($n = 5$) and purple dotted lines show averages from naïve B6 mice ($n = 9$). Gray boxes show reference ranges as provided with hematology analyzer equipment (see Methods). WBC = white blood cell; RBC = red blood cell; HGB = hemoglobin; HCT = hematocrit. Data are represented with mean \pm SEM.

A**B**

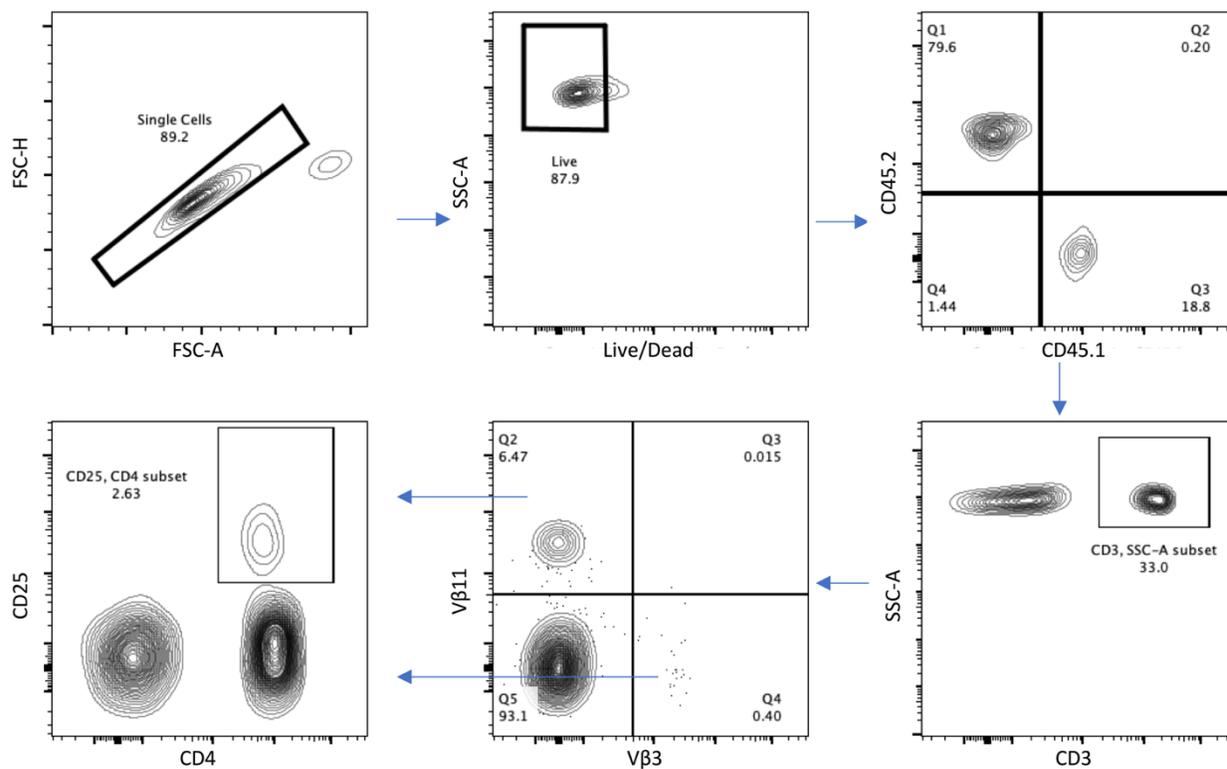
Supplemental Figure 5. Autoreactive T cells can be tracked using islet autoantigen specific tetramer analysis. (A) Islet autoantigen IGRP-double-tetramer⁺ frequency compared to irrelevant RSV-double-tetramer⁺ frequency among peripheral blood CD8⁺ T cells in diabetic NOD ($n = 10$). (B) Frequency of IGRP-double-tetramer⁺ autoreactive cells among CD3⁺ CD8⁺ T cells in peripheral blood of prediabetic NOD and prediabetic NOD:B6 at 20 weeks post-conditioning and HCT ($n = 5-10$). Data are represented with mean \pm SEM. P values were calculated using Wilcoxon matched-pairs signed rank test (A) or Mann-Whitney U tests with Holm-Šidák correction for multiple comparisons (B). ** $P < 0.01$; ns = not significant



Supplemental Figure 6. Donor antigen presenting cell presence is associated with thymic deletion of host and donor T cells. (A) Frequency of thymus-resident DCs (tDC; B220⁻ CD8⁺ Sirp α) among CD11c⁺ DCs in naïve B6 controls, naïve prediabetic NOD, conditioned prediabetic NOD controls at 20 weeks post-conditioning, and prediabetic NOD:B6 at 20 weeks post-conditioning and HCT ($n = 9-14$). (B) Frequency of B cells among thymocytes in naïve B6 controls, naïve prediabetic NOD, conditioned prediabetic NOD controls at 20 weeks post-conditioning, and prediabetic NOD:B6 at 20 weeks post-conditioning and HCT ($n = 9-14$). (C) Representative histogram and mean \pm SEM of median fluorescence intensity (MFI) of PD-1 expressed by CD45.2⁺ donor thymocytes in prediabetic NOD:B6 compared to B6 controls ($n = 9-14$). (D) Frequency of $V\beta^+$ and $V\beta^{11+}$ T cells among CD3⁺ T cells in peripheral blood of prediabetic NOD:B6 from 8 to 20 weeks post-HCT (left). Frequency of CD4⁺ CD25^{hi} Tregs among $V\beta^+$ or $V\beta^{11+}$ T cells in peripheral blood of prediabetic NOD:B6 from 8 to 20 weeks post-HCT (right) ($n = 14$). Data are represented with mean \pm SEM. P values were calculated using Mann-Whitney U tests with Holm-Šídák correction for multiple comparisons (A-C) or Wilcoxon matched-pairs signed rank test (D). * $P < 0.05$, ** $P < 0.01$, *** $P < 0.001$, **** $P < 0.0001$. DC = dendritic cell



Supplemental Figure 7. Peripheral tolerance mechanisms contribute to anergy of peripheral host effector cells. (A) Median fluorescence intensity (MFI) of LAG3 and CTLA4 expressed by CD45.1⁺ host Tregs in prediabetic NOD:B6 spleen and pancLN compared to NOD and conditioned NOD controls ($n = 9-14$). MFI of LAG3 and CTLA4 expressed by CD45.2⁺ donor Tregs in NOD:B6 spleen and pancLN compared to B6 controls ($n = 9-14$). (B) Representative histogram and mean \pm SEM of median fluorescence intensity (MFI) of PD-L1 expressed by CD45.2⁺ donor plasmacytoid DCs (pDCs), CD8⁺ conventional DCs (cDCs), and CD11b⁺ cDCs in prediabetic NOD:B6 spleen compared to B6 controls ($n = 9-10$). (C) Proliferation of host CD4⁺ splenic T cells from prediabetic NOD:B6 compared to NOD and conditioned NOD controls after isolation and incubation in vitro with CD3/CD28 stimulation beads at decreasing dilutions (1:16 to 1:64) compared to unstimulated. Data are represented with mean \pm SEM. P values were calculated using Mann-Whitney U tests with Holm-Šidák correction for multiple comparisons. ns = not significant. DC = dendritic cell



Supplemental Figure 8. Gating strategy for V β subsets. Lymphocytes were gated on FSC-A vs. SSC-A (not shown), then subset to single cell live donor (CD45.2⁺) or host (CD45.1⁺) CD3⁺ T cells. These were further subset into V β 3⁺ and V β 11⁺ T cells. CD4⁺ CD25⁺ Tregs were gated on both V β 3⁺ and V β 11⁺ T cell subsets.

Supplemental Table 1

Primary Antibody	Dilution	Company	Catalog
Rat α -Mouse CD3	1:200	Biologend	100202
Rat α -Mouse CD45	1:200	Biologend	103102
Guinea pig α -insulin	1:500	Dako	A0564
Rabbit α -glucagon	1:200	ThermoFisher Scientific	PA5-88091
Secondary Antibody	Dilution	Company	Catalog
AF647 Goat α -Guinea Pig	1:100	ThermoFisher Scientific	A-21450
AF555 Donkey α -Rabbit	1:100	ThermoFisher Scientific	A-31572
AF594 mouse α -Rat	1:200	Biologend	408207
AF488 Mouse α -Rat	1:200	Biologend	408211
AF594 Donkey α -Guinea Pig	1:1000	Millipore Sigma	SAB4600096
AF488 Donkey α -Guinea Pig	1:1000	Millipore Sigma	SAB4600033
Conjugated Antibody	Dilution	Company	Catalog
AF594 Rat α -Mouse CD45.2	1:100	Biologend	109850
AF488 Rat α -Mouse CD45.1	1:100	Biologend	110717

Supplemental Table 2

Antibody	Clone	Color	Catalog	Company
CD45.1	A20	PerCP-Cy-5.5	110728	Biolegend
CD45.1	A20	BV685	110743	Biolegend
CD45.2	104	Pacific Blue	109820	Biolegend
CD3	17A2	AF488	100210	Biolegend
CD3	17A2	AF700	100216	Biolegend
CD3	17A2	PE-Cy7	100220	Biolegend
CD3	17A2	FITC	100204	Biolegend
CD4	RM4-4	PE	116006	Biolegend
CD4	RM4-4	BV421	100563	Biolegend
CD8	53-6.7	BV510	100752	Biolegend
CD8	53-6.7	FITC	100705	Biolegend
CD11b	M1/70	BV605	101257	Biolegend
CD11b	M1/70	FITC	101206	Biolegend
CD25	PC61.5	PE-Cy5	102010	Biolegend
CD19	6D5	PE-Cy7	115520	Biolegend
CD49b	DX5	APC	108910	Biolegend
Gr-1	R B6-8C5	FITC	108406	Biolegend
TER-119	TER-119	FITC	116206	Biolegend
CD11c	N418	BV421	117329	Biolegend

CD172a (SIRPa)	P84	APC	144013	Biolegend
CD317 (PDCA-1)	927	PE	127009	Biolegend
MHCII (I-A/I-E)	M5/114.15.2	PE-Cy7	107629	Biolegend
CD274 (PDL1)	10F.9G2	PE/Dazzle 594	124323	Biolegend
B220	RA3-6B2	FITC	103206	Biolegend
CD62L	MEL-14	PE-Cy5	104410	Biolegend
CD44	IM7	BV605	103047	Biolegend
CD304 (Nrpl)	3E12	PE	145203	Biolegend
CD73	TY/11.8	PE/Dazzle 594	127234	Biolegend
FR4	12A5	PE-Cy7	125012	Biolegend
Helios	22F6	AF488	137213	Biolegend
FOXP3	150D	AF647	320013	Biolegend
CD39	Duha59	PE/Fire 640	143818	Biolegend
CD19	6D5	AF700	115528	Biolegend
TCR-beta	H57-597	AF700	109224	Biolegend
ICOS (CD278)	C398.4A	BV650	313549	Biolegend
LAG3 (CD223)	C9B7W	BV711	125243	Biolegend
CTLA4 (CD152)	UC10-4B9	BV421	106311	Biolegend
PD1	29F.1A12	BV750	135263	Biolegend
CD25	3C7	PE-Cy7	101915	Biolegend
CD4	GK1.5	AF700	100429	Biolegend
CD4	GK1.5	Pacific Blue	116008	Biolegend
CD117	2B8	APC	17-1171-82	ThermoFisher Scientific

Sca-1	D7	PE-Cy7	25-5981-81	ThermoFisher Scientific
TCR Vβ11	RR3-15	PE	139004	Biolegend
TCR Vβ3	REA646	APC	130-109-895	Miltenyi Biotec