Antibody-mediated delivery of VEGFC ameliorates experimental chronic colitis

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Supplementary Figure 1

Supplementary Figure 1 related to Figure 2. F8-VEGFC delivery reduces body weight loss and histological ulceration score

(A) Time course of relative body weight loss of mice treated from day 24 from the beginning of the study by intravenous injections (i.v.) with F8-SIP or F8-VEGFC every other day (n≥8 per group), as indicated by the black arrows. (B) Histopathological ulceration score (n≥8 per group). All data are presented as mean±SD. Statistical significance was determined by two-way ANOVA with Sidak's correction for multiple comparisons or by two-tailed Student's t-test. Asterisks indicate statistical significance with p<0.05 (*).



Supplementary Figure 2

Supplementary Figure 2 related to Figure 3. F8-VEGFC does not change

lymphatic and blood vessel size in colitis

Lymphatic (A) and blood (B) vessel size was quantified by dividing the total positive area occupied by these vessels by the number of vessels and expressed as μ m². All data are presented as mean±SD. Statistical significance was determined by two-tailed Student's t-test.



Supplementary Figure 3

Supplementary Figure 3 related to Figure 4. FACS gating strategy for immune cells

(A) Colons of F8-SIP or F8-VEGFC treated mice were harvested at day 32 after challenge and digested. Stained single cell suspensions were recorded and gated for living single cells. Live single cells were selected for CD45-positivity. CD45+ cells were analyzed with regard to CD11b (B), $\gamma\delta$ TCR (C) and CD4 as well as CD8 (D) expression. Gates were set based on FMO controls (except for CD45).