

## Supplemental Figures and Tables

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**Figure S1. Bone marrow-derived macrophages enrich MM TICs.** (A) 8-10 week old Balb/c mice were intravenously injected with bortezomib (1 mg/kg, bort) or vehicle control (veh). After 24 h, femurs were removed and flushed to obtain bone marrow cells. The indicated bone marrow cell types were identified by CyTOF mass cytometry. Data are presented as bar charts. (B-C) RPMI-8226 cells were cultured for 4 days in the presence of macrophage conditioned medium (CM). Aldehyde dehydrogenase (ALDH) activity (B) and side population assay (C) were performed using flow cytometry. Representative dot plots are shown. (D-F) Peritoneal macrophages were harvested from mice sequentially treated with thioglycollate followed by bortezomib (bort) or vehicle control (veh). The macrophages were co-cultured with RPMI-8226 cells in a 1:1 ratio for 4 days. The percentage of TICs was evaluated phenotypically (D), or by side population assay (E-F). Representative dot plots (E) and their quantification (F) are presented. (G-H) KMS-11 (G) and U266 (H) were cultured for 4 days in the presence of macrophage CM obtained from vehicle control or bortezomib-treated mice. The percentage of TICs and ALDH activity was assessed by flow cytometry. \*,  $p < 0.05$ , \*\*,  $p < 0.01$ , using student's t test.

**Figure S2. IL-1 $\beta$  promotes MM-TIC enrichment.** (A-B) CAG and RPMI-8226 cells were cultured for 4 days in the presence of escalating doses of TREM-1 (A) or IL-16 (B). The percentage of TICs was analyzed by flow cytometry. (C) CAG cells were cultured for 4 days in the presence of escalating doses of IL-1 $\beta$ . The percentage of TICs was analyzed by flow cytometry. (D) mRNA was extracted from CAG, U266 and KMS-11 cells and the level of IL-1 receptor mRNA was assessed by real-time PCR. Values were normalized to  $\beta$ 2MG. (E) IL-1R protein expression was evaluated by Western blot on lysates of CAG and RPMI-8226 cells. Panceau was used as a loading control. (F) Peritoneal macrophages were harvested from wild-type (WT) or IL-1 $\beta$ <sup>-/-</sup> mice sequentially treated with thioglycollate followed by bortezomib (bort) or vehicle control (veh). Macrophages were cultured for 48 h and conditioned medium (CM) was collected. U266 and KMS-11 MM cells were cultured for 4 days with macrophage CM and the percentage of TICs was analyzed by flow cytometry. \*,  $p < 0.05$ , \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$  using student's t test or one way ANOVA when comparing between more than two groups.

**Figure S3. Reduced survival in MM patients with high levels of M1 pro-inflammatory macrophages and TICs.** BM samples were obtained from newly diagnosed MM patients (N=34) immediately before and several months after receiving bortezomib treatment. (A) Fold change in the percentage of

macrophages before and several months after receiving bortezomib therapy was calculated and plotted. Black bars represent deceased MM patients. (B-C) Patients were grouped according to the value of M1 pro-inflammatory macrophages at diagnosis (Dx; B) and post-treatment (P-Tx; C) as shown in the scatter plots. (D) Fold change in the percentage of TICs before and several months after receiving bortezomib therapy was calculated and plotted. Black bars represent deceased MM patients.

**Table S1: Patient characteristics and treatment description**

<b>Characteristic</b>	<b>No.</b>
<b>Age- median (years)</b>	64 (range, 44-79)
<b>Sex</b>	
<b>Male</b>	15 (44%)
<b>Female</b>	19 (56%)
<b>International staging system</b>	
<b>Stage 1</b>	10 (29%)
<b>Stage 2</b>	15 (44%)
<b>Stage 3</b>	7 (21%)
<b>ND</b>	2 (6%)
<b>Type</b>	
<b>IgG</b>	19(56%)
<b>IgA</b>	7 (20.5%)
<b>IgD</b>	1 (3%)
<b>Light chain disease</b>	7 (20.5%)
<b>Renal involvement</b>	11 (32%)
<b>Bone lesions</b>	32 (94%)
<b>Hypercalcemia</b>	8 (23.5%)
<b>Time from diagnosis to BM sample (months)</b>	8 (range, 2-22)
<b>First line therapy</b>	
<b>VCD</b>	26 (76.5%)
<b>VTD</b>	8 (23.5%)
<b>Median number of cycles of VCD/VTD treatment</b>	6 (range, 2-12)
<b>Response to first line</b>	
<b>Any response</b>	32 (94.1%)
<b>Primary refractory</b>	2 (5.9%)
<b>BM result following treatment( the first time point BM was done)</b>	
<b>Normal</b>	23 (67.6%)
<b>Abnormal</b>	11 (32.4%)
<b>Autologous transplant</b>	28 (82.3%)
<b>Total regimens (from dx to follow up)</b>	
<b>1-2</b>	26 (76.5%)
<b>3-4</b>	6 (17.6%)
<b>5</b>	2 (5.9%)

VCD; Velcade, cyclophosphamide, dexamethasone; VTD; Velcade, thalidomide, dexamethasone; BM; Bone marrow

**Table S2. Panel of antibodies and isotype conjugates used in CyTOF.**

	<b>Cell Surface marker</b>	<b>Isotope</b>
<b>1</b>	CD45	115Di
<b>2</b>	CD93	139Di
<b>3</b>	GR1	142Di
<b>4</b>	CD86	143Di
<b>5</b>	F4/80	144Di
<b>6</b>	CD4	145Di
<b>7</b>	CD45R	146Di
<b>8</b>	Ly6C	147Di
<b>9</b>	CD138	148Di
<b>10</b>	CD8	149Di
<b>11</b>	Ly6g	150Di
<b>12</b>	CD127	151Di
<b>13</b>	CD90	152Di
<b>14</b>	CD14	153Di
<b>15</b>	CD11c	154Di
<b>16</b>	IgM	155Di
<b>17</b>	CD49b	156Di
<b>18</b>	CD19	157Di
<b>19</b>	CD34	158Di
<b>20</b>	CD27	159Di
<b>21</b>	CD69	160Di
<b>22</b>	TCRb	162Di
<b>23</b>	CCR7	163Di
<b>24</b>	CD28	164Di
<b>25</b>	CD115	165Di
<b>26</b>	CD133	166Di
<b>27</b>	CD205	167Di
<b>28</b>	CD117	168Di
<b>29</b>	CD79b	169Di
<b>30</b>	CD62L	170Di
<b>31</b>	CD44	171Di
<b>32</b>	CD43	172Di
<b>33</b>	Sca-1	173Di
<b>34</b>	Ia-Ie	174Di
<b>35</b>	IgD	175Di
<b>36</b>	CD24	141Di
<b>37</b>	CD11b	176Di
<b>38</b>	Siglech	161Di

**Figure S1**

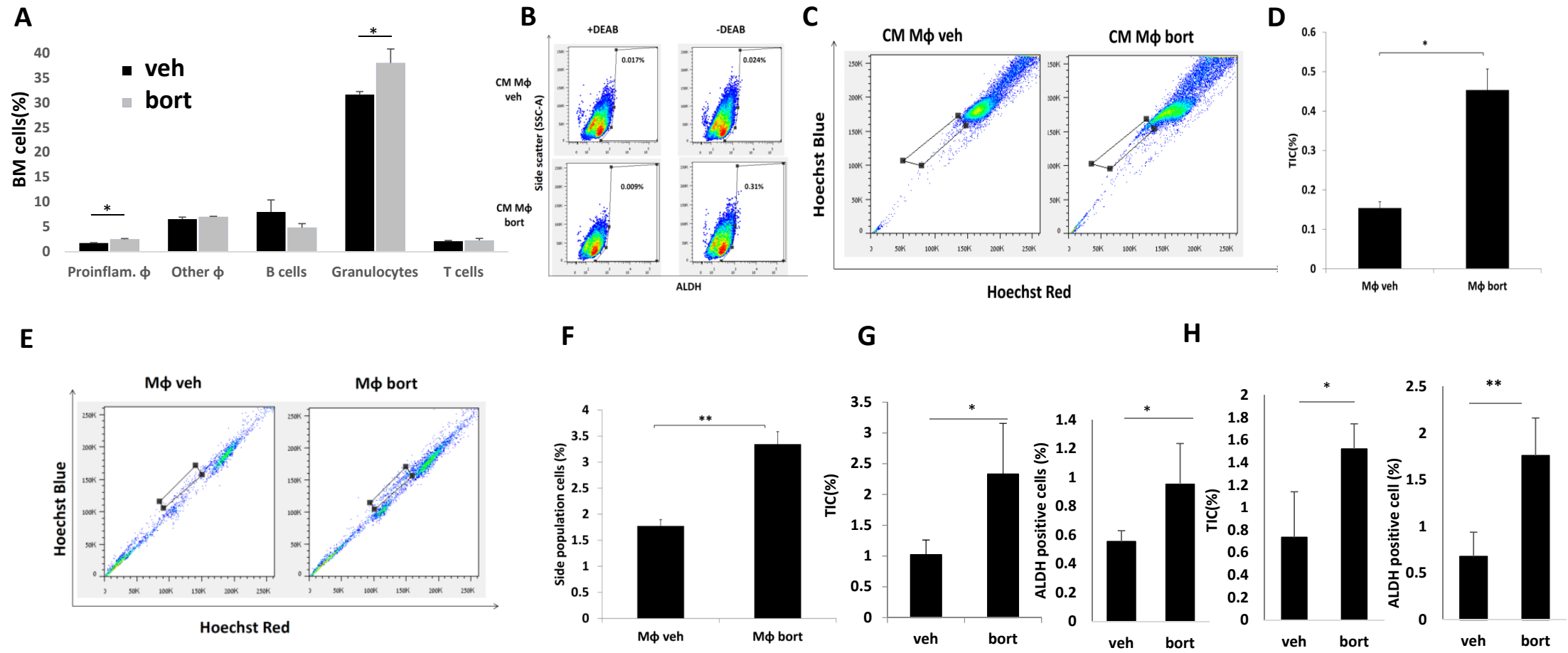
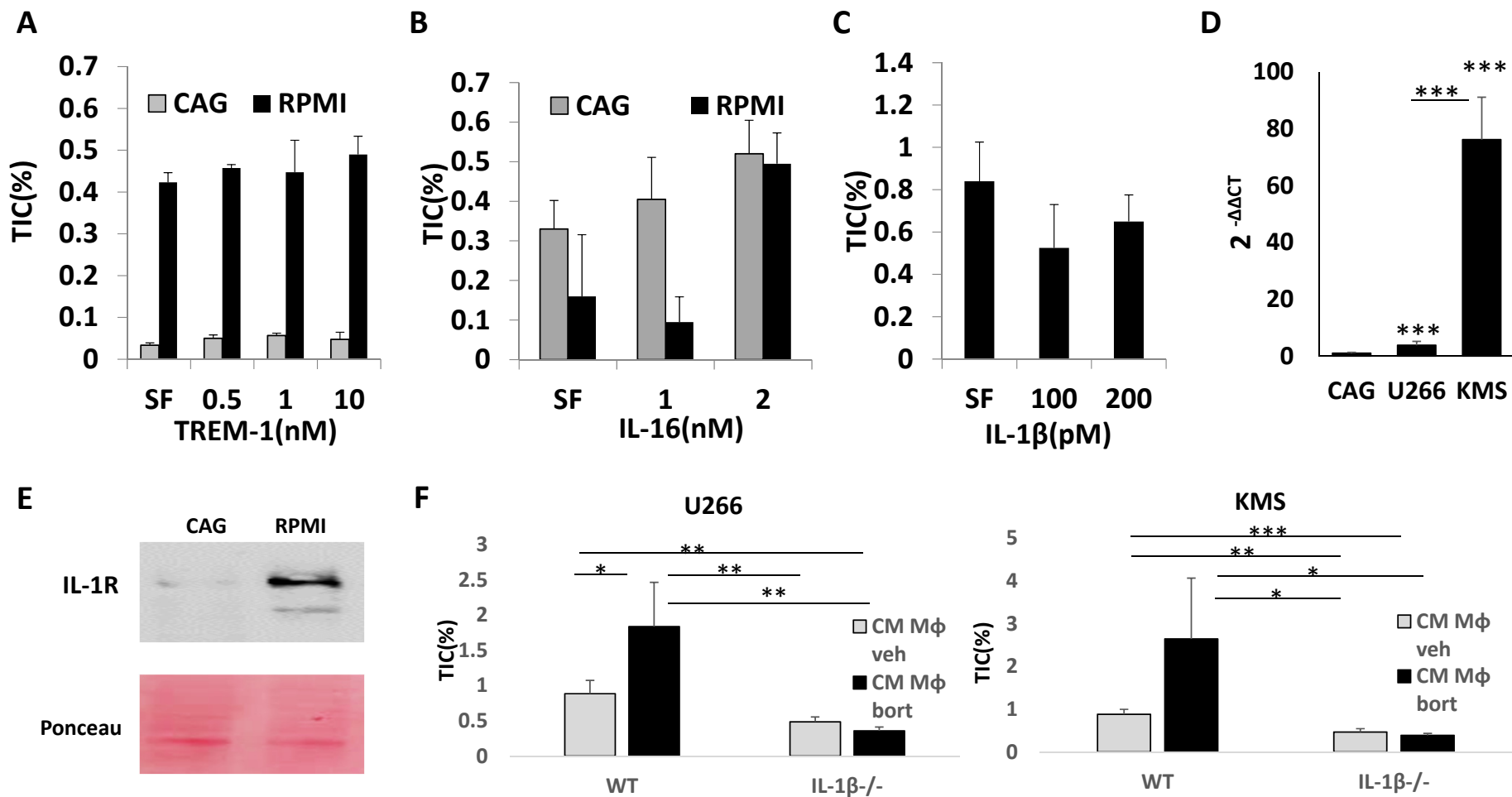


Figure S2



**Figure S3**

