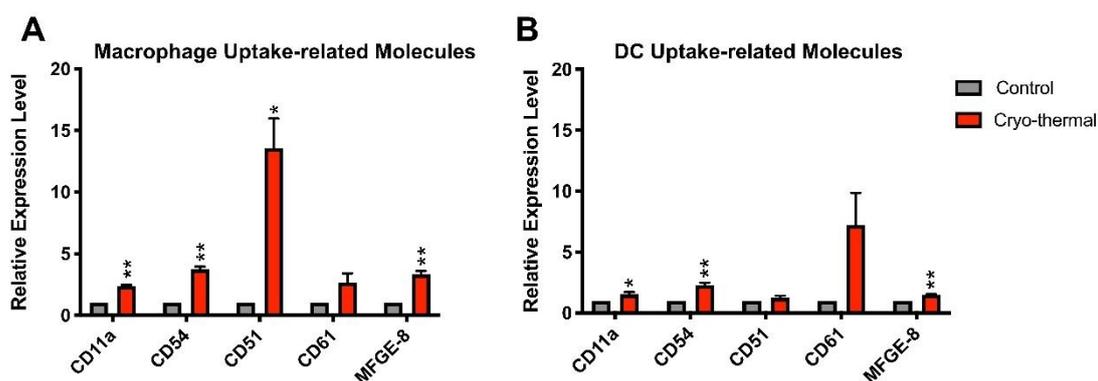
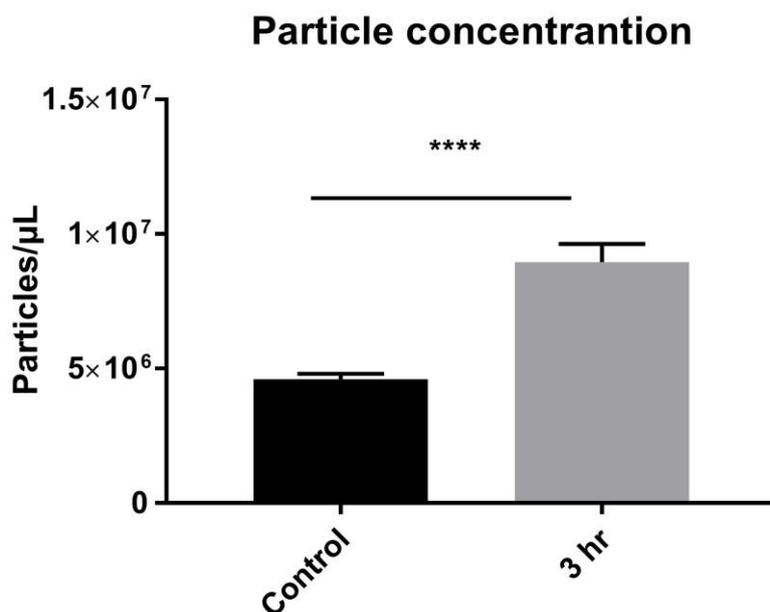


Supplementary Materials: Supplementation with serum-derived extracellular vesicles reinforces antitumor immunity induced by cryo-thermal therapy

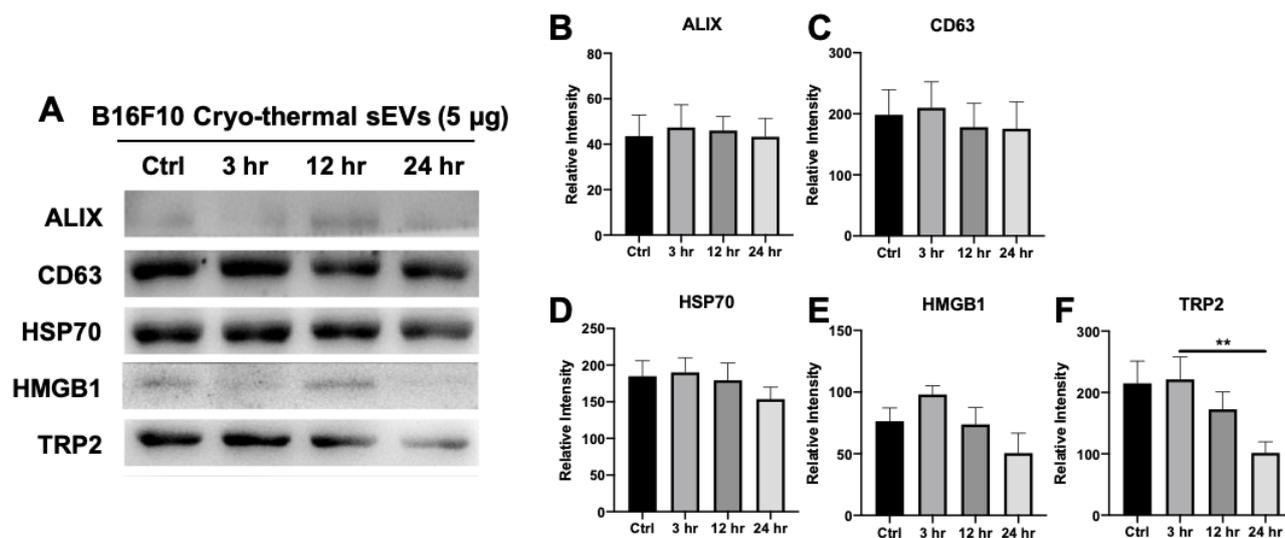
Yinuo Cen ^{1,2}, Yue Lou ^{1,2}, Junjun Wang ^{1,2}, Shicheng Wang ^{1,2}, Peng Peng ^{1,2}, Aili Zhang ^{1,2} and Ping Liu ^{1,2,*}



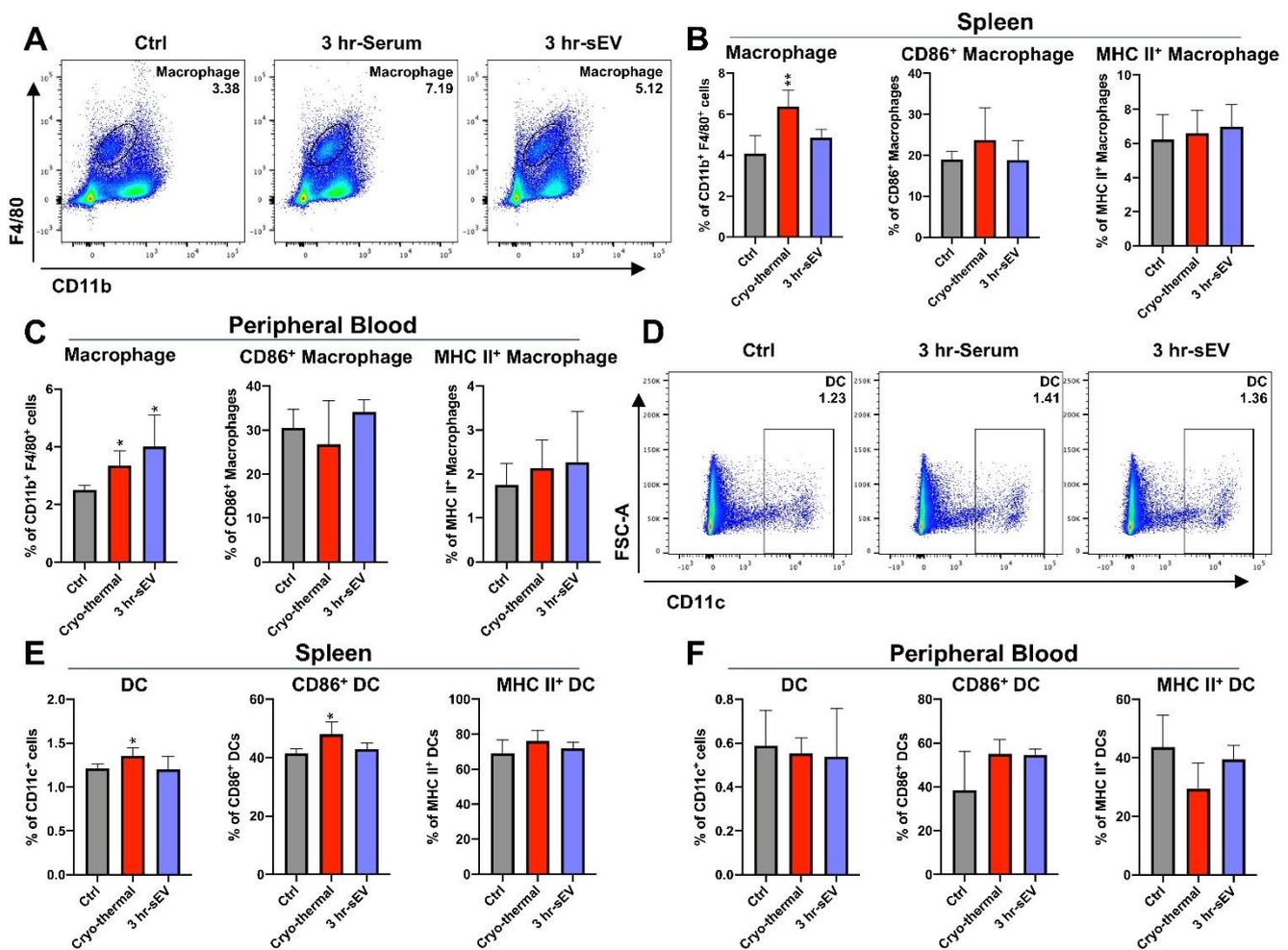
Supplementary Figure S1 The up-regulated expression of EV uptake-related genes in spleen macrophages and DCs on day 3 after cryo-thermal therapy in 4T1 subcutaneous tumor model. Total RNA of spleen macrophages and DCs were isolated on day 3 after treatment. RT-qPCR was used to detect mRNA levels of EV phagocytosis-related protein of macrophages (A) and DCs (B) on day 3 after treatment. Data were shown as mean \pm SD, and the student's t-test was used for statistical analysis. $n = 4$, * $p < 0.05$, ** $p < 0.01$ compared with the control group.



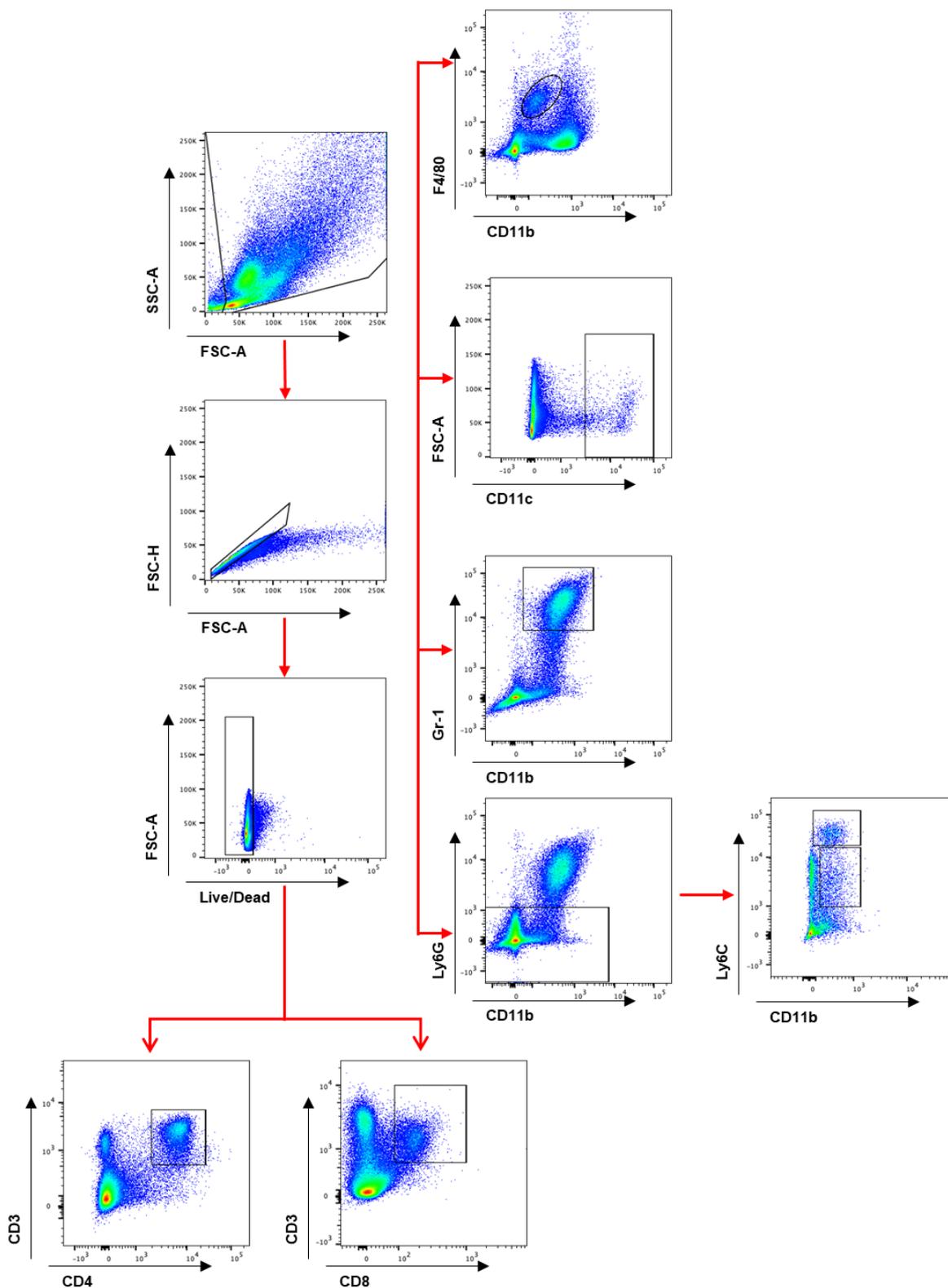
Supplementary Figure S2 Cryo-thermal therapy induced the release of sEVs. sEVs concentration (standardized by serum volume) 3hr after cryo-thermal therapy were measured by Nanoparticle Tracking Analysis (NTA). Data were shown as mean±SD, and the student's t-test was used for statistical analysis. n = 5, **** p < 0.0001 compared with the control group.



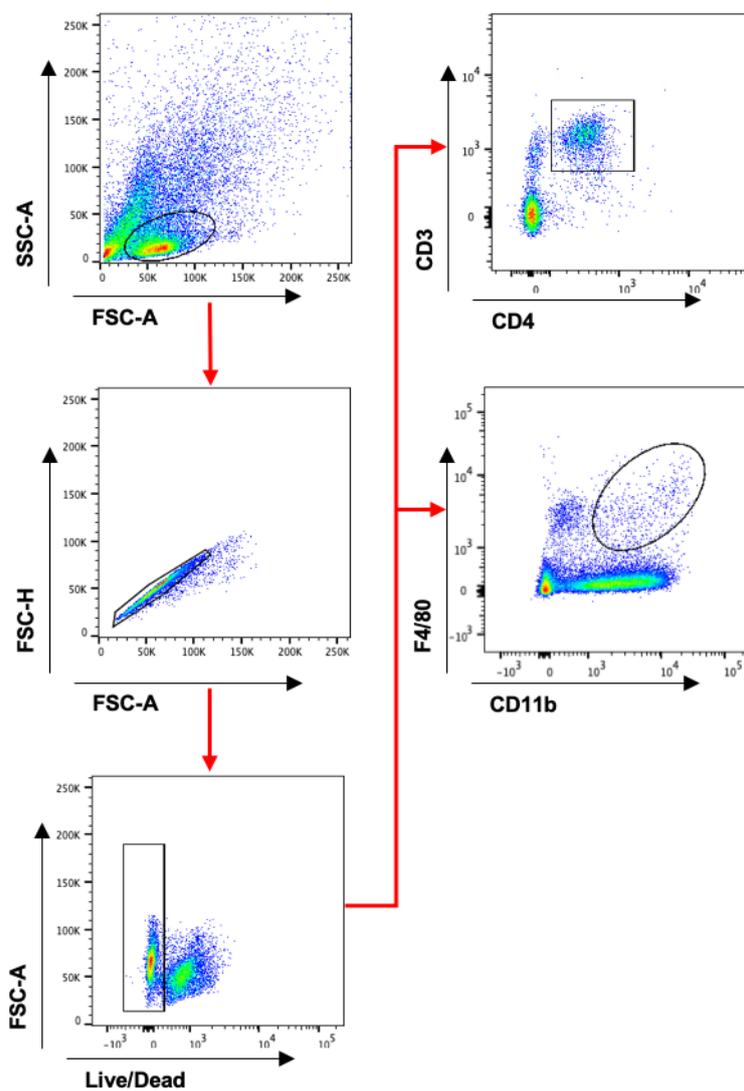
Supplementary Figure S3 Western blotting of sEVs (5 μ g) from the serum in B16F10 model at 3, 12, and 24 hr after cryo-thermal therapy with individual densitometry analysis. ALIX, CD63: Exosomal protein markers; HSP70, HMGB1: danger signal; TRP2: known B16 tumor antigen. Data were shown as mean \pm SD, and the student's t-test was used for statistical analysis. $n = 3$, ** $p < 0.01$.



Supplementary Figure S4 Supplement of sEVs after cryo-thermal therapy upregulated the proportion of macrophages and DCs. (A) Flow cytometry gating strategy for the determination of CD11b⁺ F4/80⁺ macrophages. (B-C) Proportions of macrophages, CD86⁺ macrophages, and MHC II⁺ macrophages in spleen (B) and peripheral blood (C) were determined by using flow cytometry (n = 4 per group). (D) Flow cytometry gating strategy for the determination of CD11c⁺ DCs. (E-F) Proportions of DCs, CD86⁺ DCs, and MHC II⁺ DCs in spleen (E) and peripheral blood (F) were determined by using flow cytometry (n = 4 per group). Data were shown as mean ± SD, and the student's t-test was used for statistical analysis. * $p < 0.05$, ** $p < 0.01$ compared with the control group.



Supplementary Figure S5 Flow cytometry gating strategy for the determination of CD11b⁺ F4/80⁺ macrophages, CD11c⁺ DCs, CD11b⁺ Gr1⁺ MDSCs, CD11b⁺ Ly6G⁻ Ly6C⁺ Monocytes, CD3⁺ CD4⁺ T cells and CD3⁺ CD8⁺ T cells in vivo analyses.



Supplementary Figure S6 Flow cytometry gating strategy for the determination of CD11b⁺ F4/80⁺ macrophages and CD3⁺ CD4⁺ T cells in in vitro analyses.