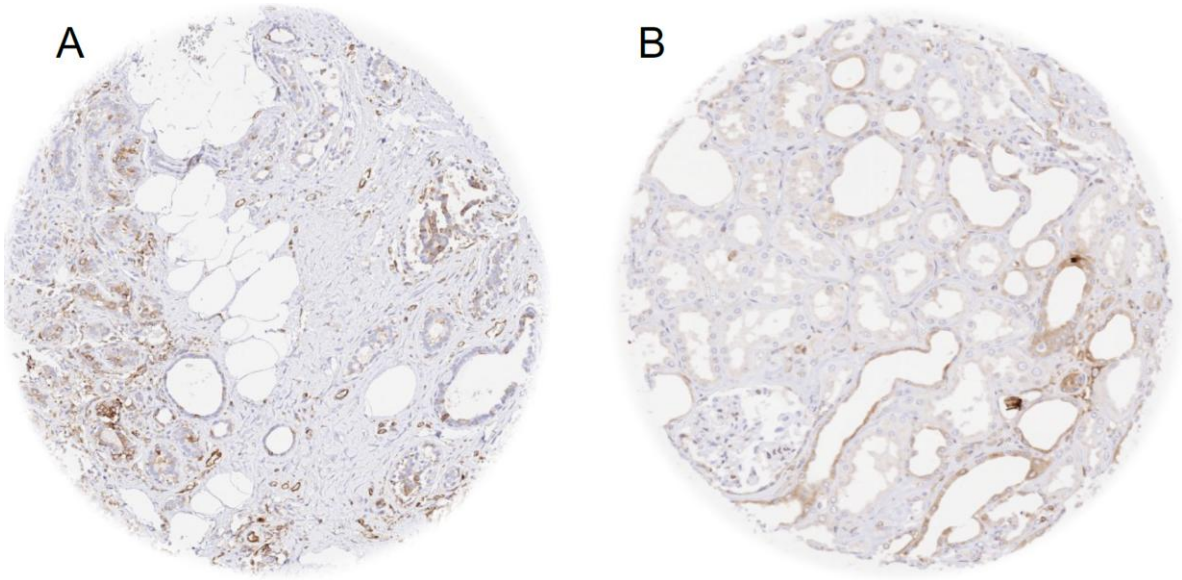


Figure S1. Examples of variability of MX1 staining in normal tissues. (A) Normal breast with mild inflammation and some MX1-positive epithelial cells, (B) normal kidney cortex with occasional MX1 staining in individual tubules.

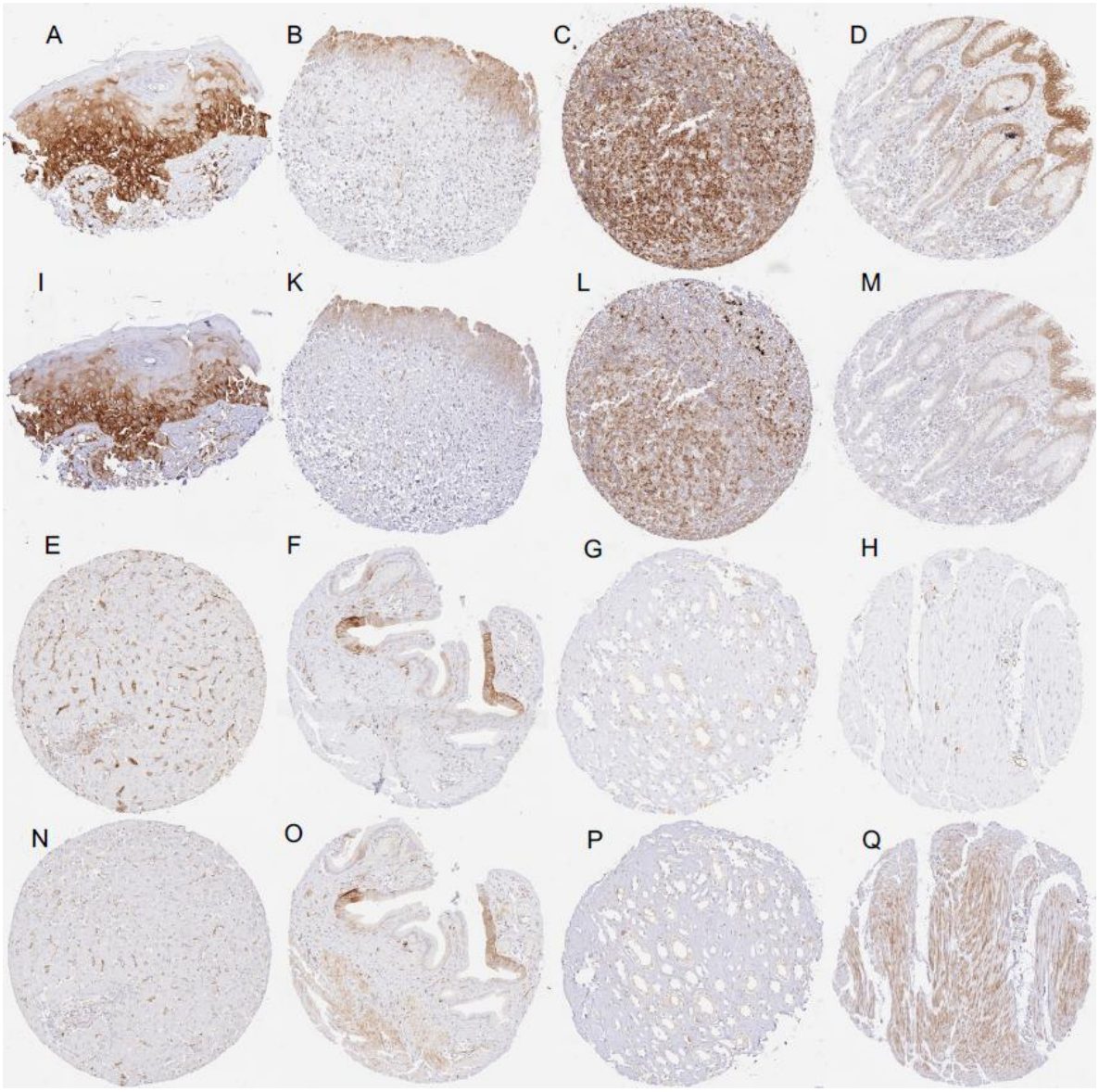


Figure S2. Immunohistochemistry validation by comparison of two antibodies. The panels show a concordance of immunostaining results obtained by two independent MX1 antibodies with respect to both stained cell types and intensity distribution within tissues. Using HMV316, a cytoplasmic staining is seen in squamous epithelium of the skin (A), urothelial cells of the urinary bladder (B), tonsil lymphocytes (C), surface epithelial cells of the stomach (D), sinus cells of the liver (E), some foci of the gallbladder epithelium (F), and a subset of collecting ducts in the renal medulla (G) while staining was absent in smooth muscle (H). Using clone D3W7I, a comparable staining was seen in the skin (I), bladder (K), tonsil (L), stomach (M), liver (N), gallbladder (O), and the kidney (P). In contrast to HMV316, clone D3W7I also showed an diffuse staining of smooth muscle cells (Q). This staining was considered an antibody-specific cross-reactivity of D3W7I. The images A-H and I-Q are from consecutive tissue sections.

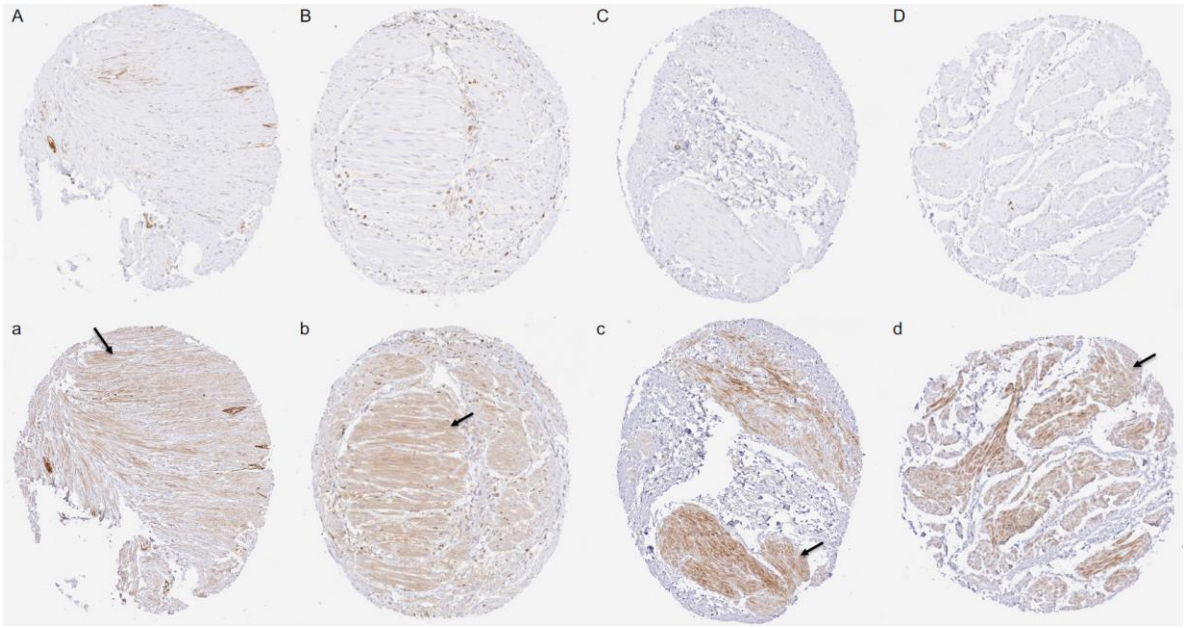


Figure S3. MX1 immunostaining obtained by two independent antibodies. The panels show cross—reactivity of the antibody D3W71 in smooth muscle cells (black arrow) of the uterus (a/b) and the urinary bladder (c/d), which was not observed with the antibody HMV316 (A-D).