Neutrophil extracellular traps mediates m⁶A modification regulates sepsis-associated acute lung injury via activating ferroptosis of alveolar epithelial cells

Supplementary methods

Cecal ligation and perforation (CLP) mouse model stability

In order to confirm the stability of cecal ligation and perforation mouse model stability. Mortality and serum inflammatory was record in the experiments . Briefly, the mortality of mice within 72 hours after CLP surgery and serum level of IL-6, TNF-a, IL-10 were also tested with ELISA kit according to instructions (Abcam) in the experiments. Ten mice were used in each experiment in both sham or SI-ALI(CLP) group. These experiments were used to verify the stability of the CLP operation and to determine the number of samples needed to detect a series of indicators, [1-4]. After the CLP model is verified stability and been used for future experiment.

Transmission electron microscope(TEM)

We perform Transmission electron microscope(TEM) to detect ferroptosis in sepsis induced lung injury lung epithelial cells(5-6). Briefly, the lung tissues received a 2-h fixation in 0.05 M sodium cacodylate buffer with 2.5% glutaral dehyde at a pH of 7.2 at 25 °C. Next, they were incubated in 0.1 M sodium cacodylate buffer with 2% OsO4 for 2 h and, then, in 1% aqueous uranyl acetate for 18 h. Following sequential ethanol-induced dehydration, the specimens were embedded in Epon 812 and cut into ultrathin sections using copper grids and stained with uranyl acetate and lead citrate before visualization under a Tecnai G2 spirit BioTwin transmission electron microscope (FEI Company, Hillsboro, Oregon).

Quantitative reverse transcription PCR

Quantitative reverse transcription PCR (qRT-PCR) was performed with a bio-RAD 96 instrument with the superreal premix following the manufacturers' instruction. All reactions were done in a 20 μ L reaction volume in triplicate. Primers were obtained from Invitrogen. Following an initial denaturation at 95°C for 15 min, 40 cycles of PCR amplification were performed at 95°C for 10 s and 60°C for 20 s. Standard curves were generated and the fold change of target gene mRNA was normalized to β -actin. Melting

curve analysis was adopted to assess the specificity of amplification. The primer sequence is as below:

Gene	Forward	Reverse
TLR1	CCACGTTCCTAAAGACCTATCCC	CCAAGTGCTTGAGGTTCACAG
TLR2	ATCCTCCAATCAGGCTTCTCT	GGACAGGTCAAGGCTTTTTACA
TLR3	TTGCCTTGTATCTACTTTTGGGG	TCAACACTGTTATGTTTGTGGGT
TLR4	AGACCTGTCCCTGAACCCTAT	CGATGGACTTCTAAACCAGCCA
TLR5	CGATGGACTTCTAAACCAGCCA	GGTGAGGTTGCAGAAACGATAAA
TLR6	TTCTCCGACGGAAATGAATTTGC	CAGCGGTAGGTCTTTTGGAAC
TLR7	TCCTTGGGGCTAGATGGTTTC	TCCACGATCACATGGTTCTTTG
TLR8	ATGTTCCTTCAGTCGTCAATGC	TTGCTGCACTCTGCAATAACT
TLR9	CTGCCTTCCTACCCTGTGAG	GGA TGCGGTTGGAGGACAA
TLR10	AGGTTTGAGTGGGGCAAAAA T	CCATCACGCAAAAGAACCCAG

Gene	Forward primer (5'-3')	Reverse primer (5'-3')
METTL3	CAAGCTGCACTTCAGACGAA-	GCTTGGCGTGTGGTCTTT
METTL14	CTACCCATCCTCACTGTCAGTC	GGATGTTCCTGTTTGACCTGAGG
RBM15	TCCCACCTTGTGAGTTCTCC	GTCAGCGCCAAGTTTTCTCT
WTAP	CTTCCCAAGAAGGTTCGATTGA	TCAGACTCTCTTAGGCCAGTTAC
VIRMA	AATCCTGTGGGAAGATCAGC	ACACGTAAGGCAGTGGTAAG
FTO	CCAGAACCTGAGGAGAGAATGG	CGATGTCTGTGAGGTCAAACGG
ALKBH	CCAGCTATGCTTCAGATCGCCT	GGTTCTCTTCCTTGTCCATCTCC
YTHDF1	CTGAGGACGACATCCACCGC	CTTCATCTCGGCCACCCCAC
YTHDF2	GGCAGCACTGAAGTTGGG	CTATTGGAAGCCACGATGTTA
YTHDF3	CGCCACCCCGATAAAGCAT	GGTGGAGGCAATGGCTGTGT
YTHDC2	CACACTGGAGCCAGAGGCAG	TGGCCTTTGGCCAATCCCAG
GPX4	TCCCAGTGAGGCAAGACCGA	GATGCCCTTGCCCTTGGGTT

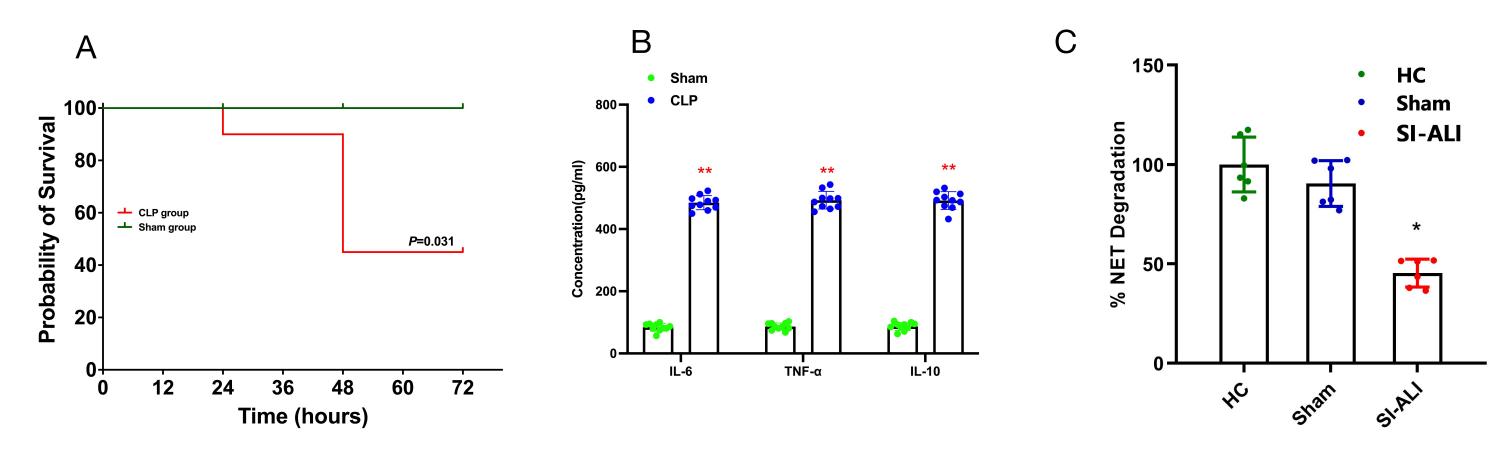
METTL3 mut

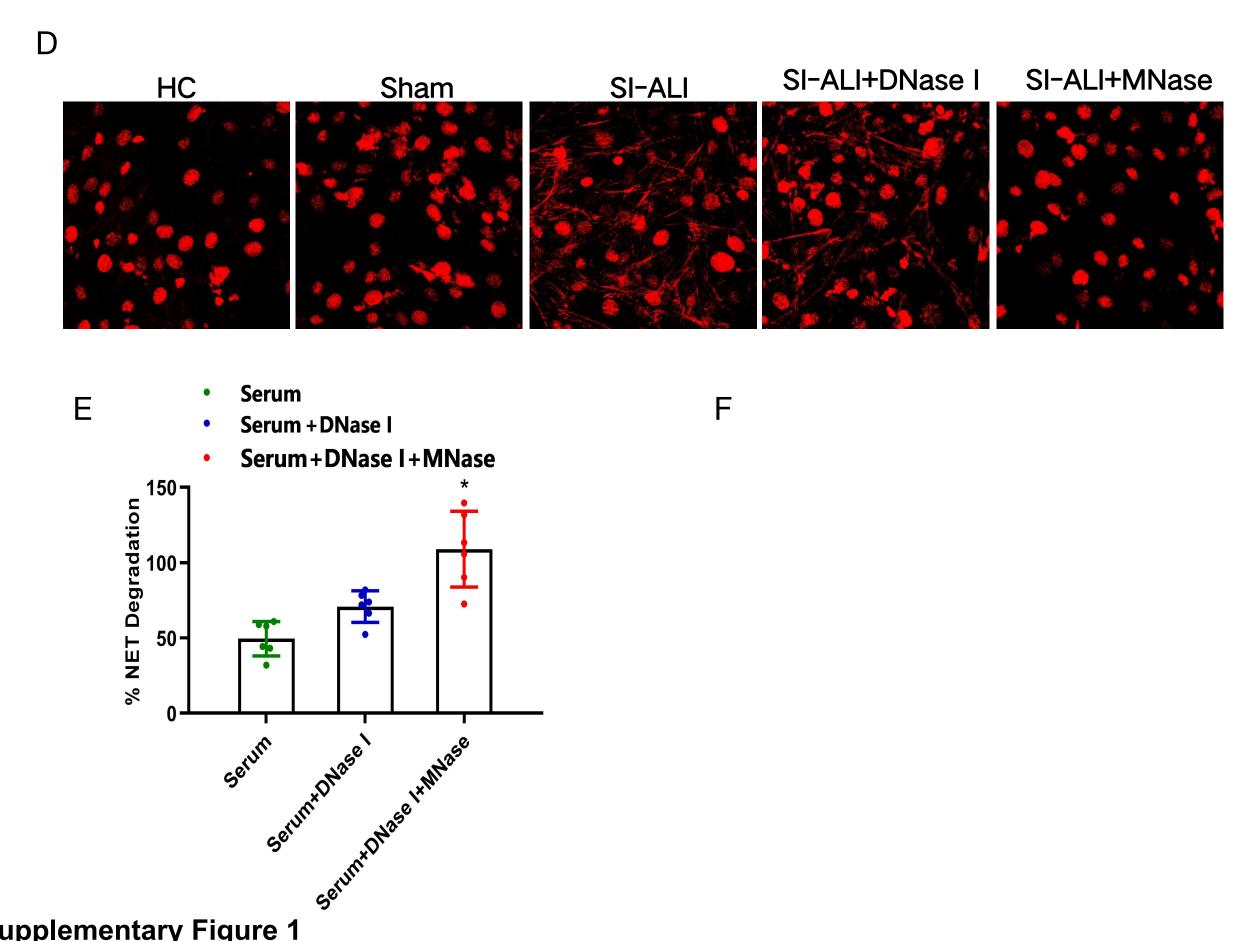
A mutated METTL3(DPPW replaced by APPA) construct with disordered enzymatic activity was constructed to evaluated to the critical role of METTL3 mediated m6A methylation on the mRNA stability of GPX4 [9-11].

Reference:

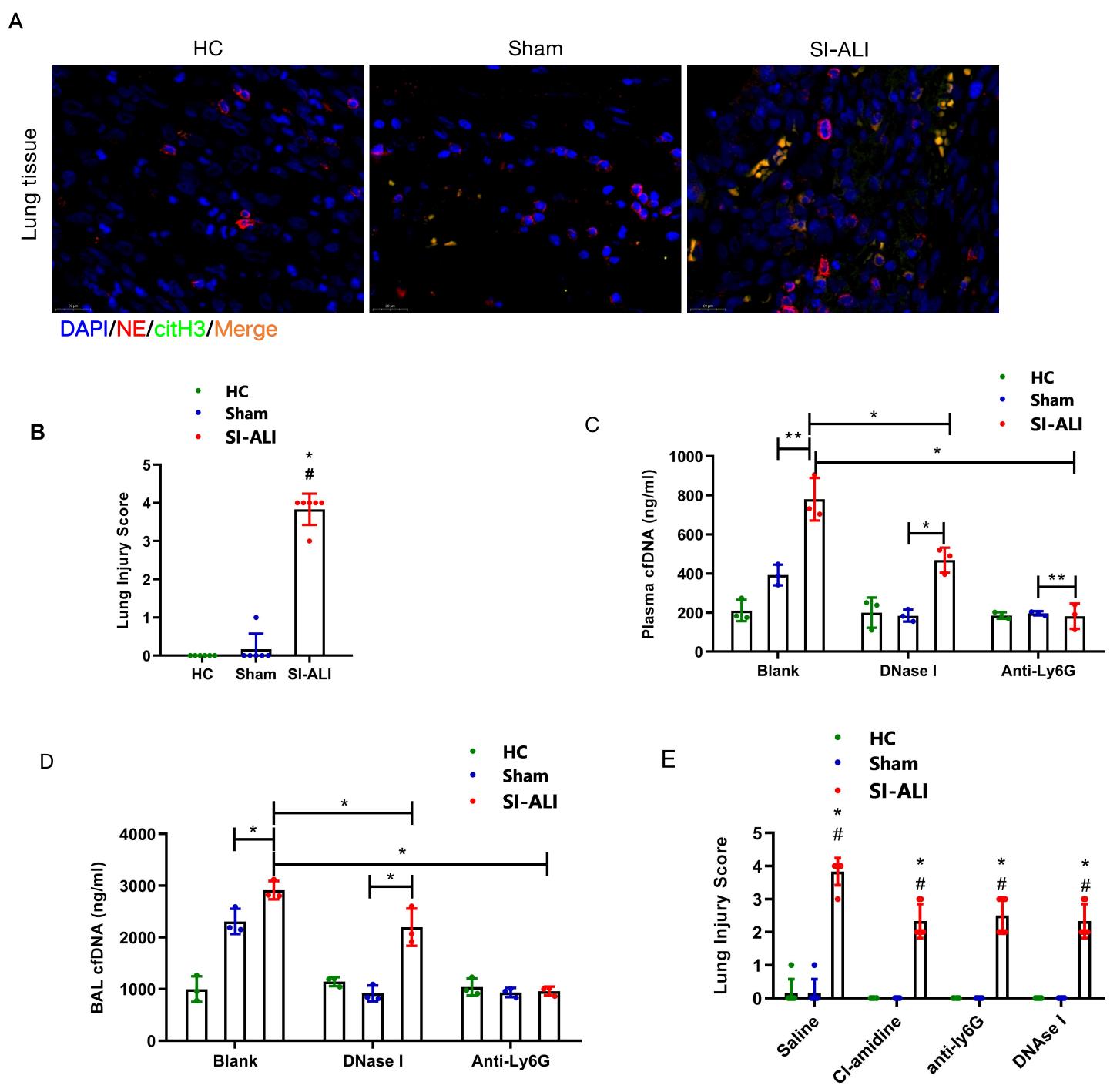
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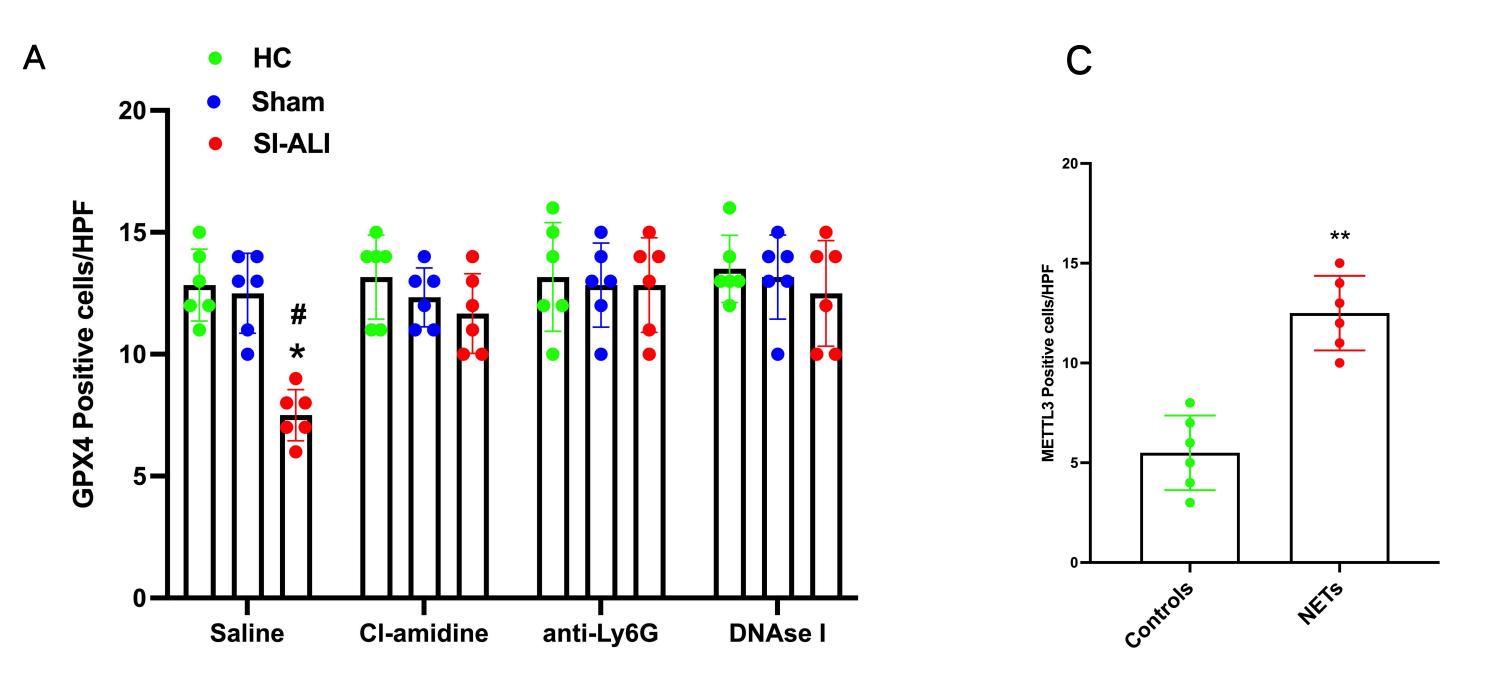


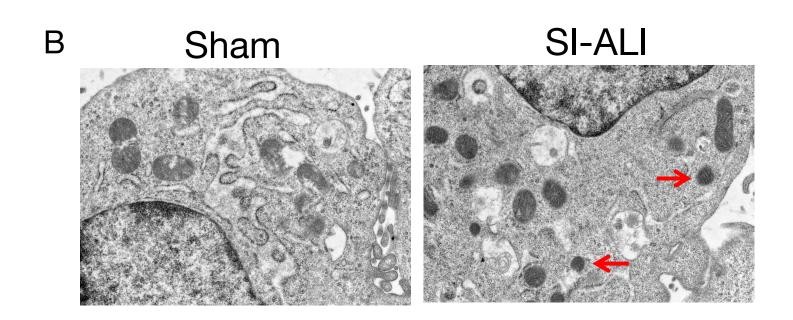


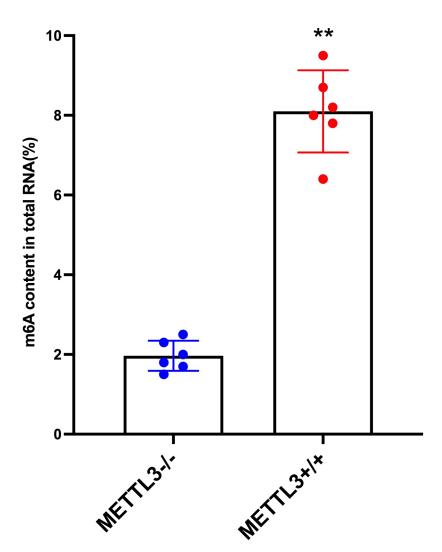
Supplementary Figure 1

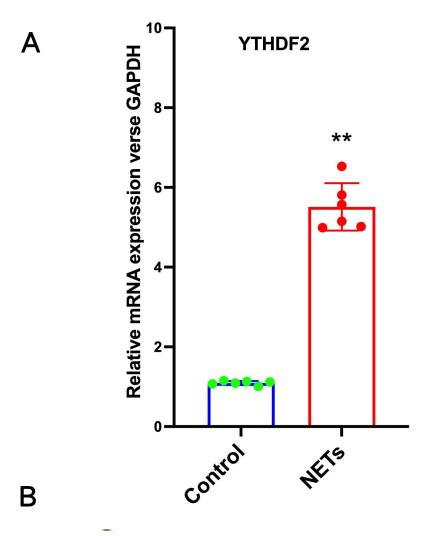


Supplementary Figure 2

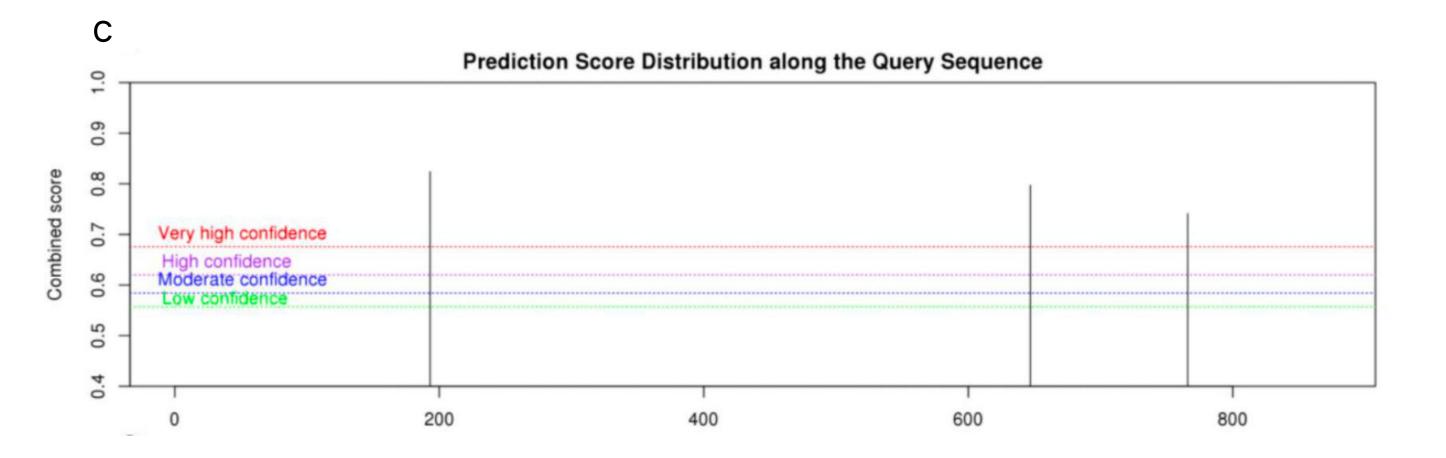


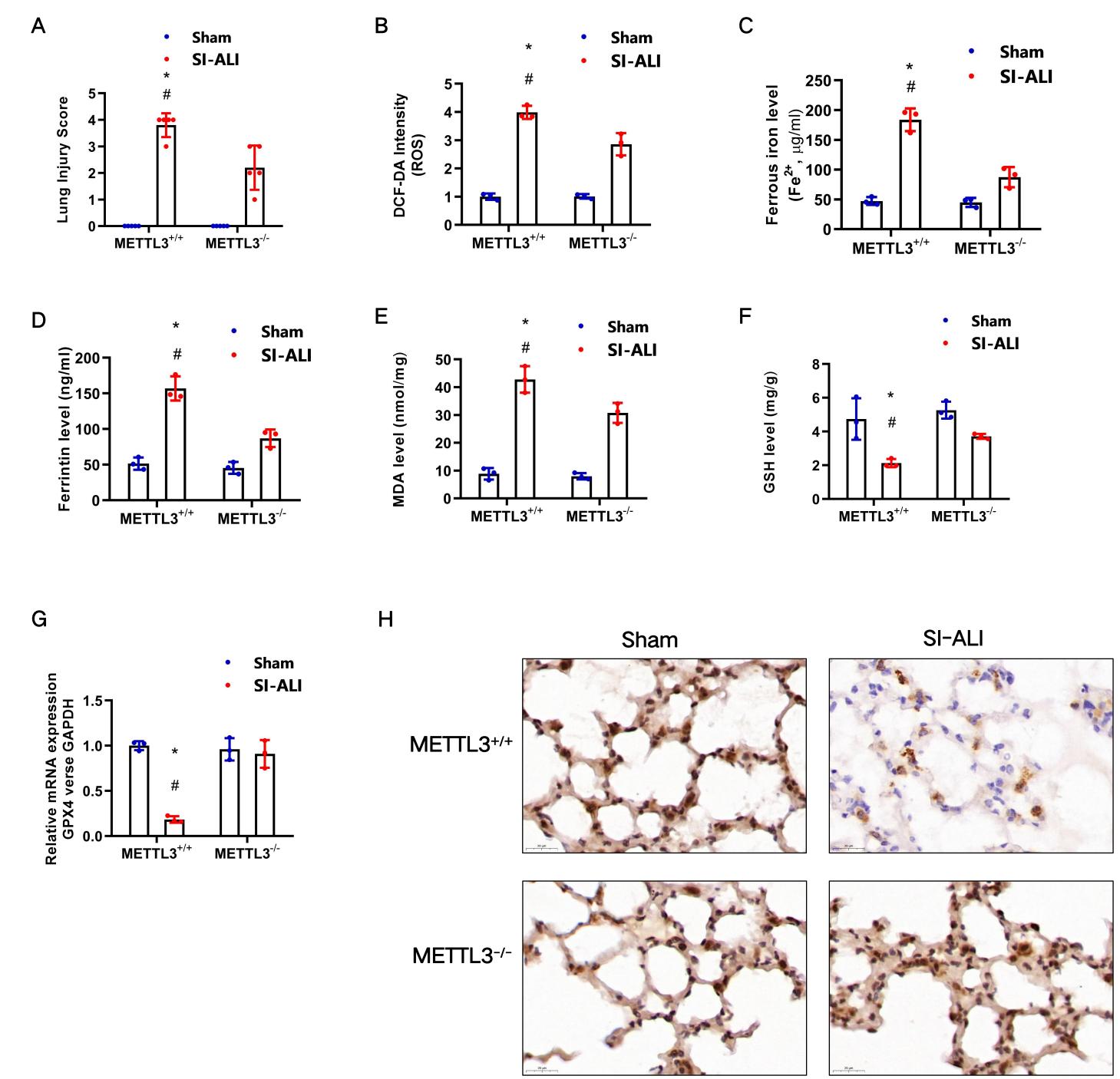




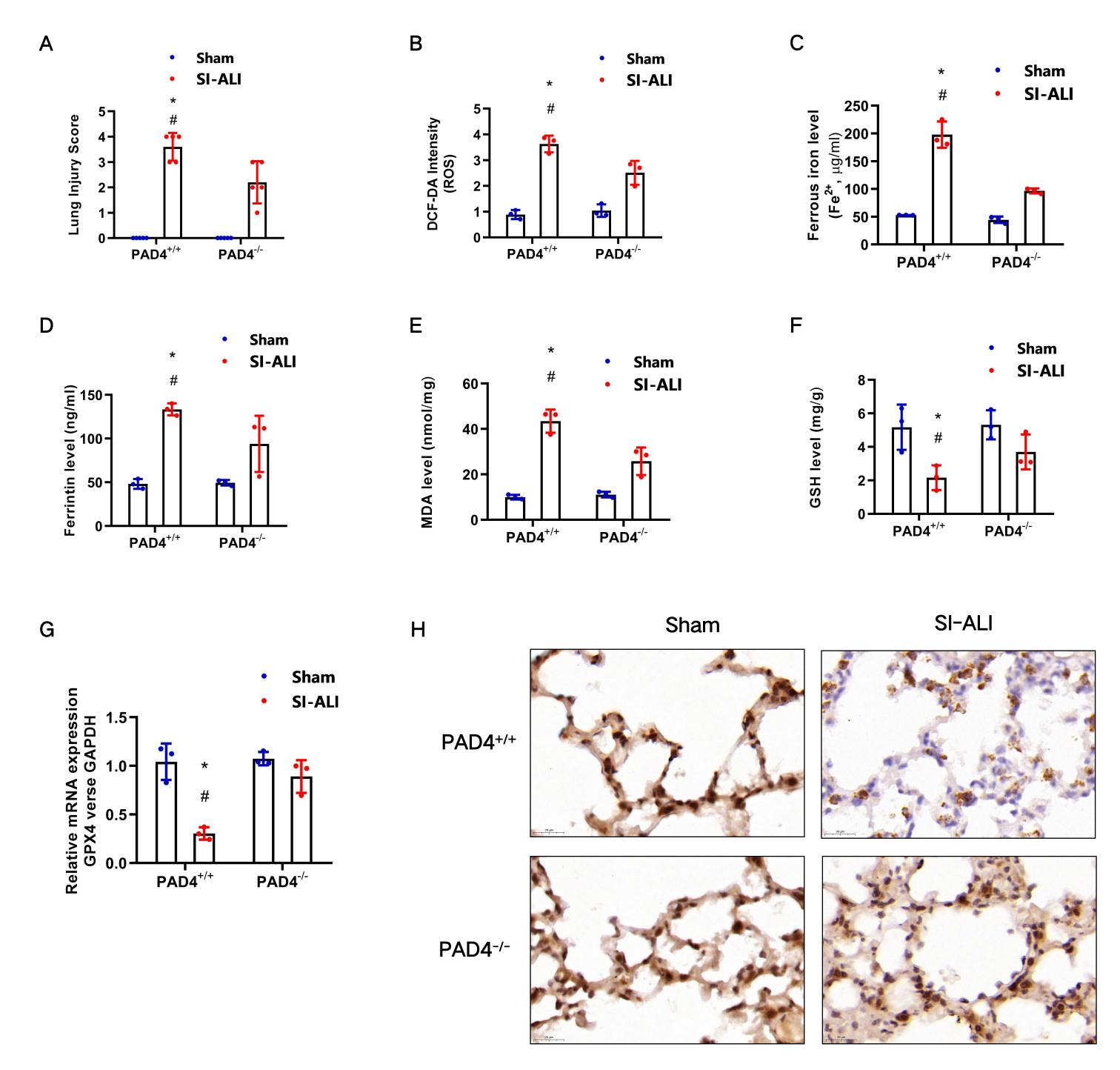


	W STATE			Position					
#	Position	Sequence context	Structural context	Local structure visualization	Score(binary)	Score(knn)	Score(spectrum)	Score(combined)	Decision
1	193	AUGCA CGAGU UUUCC GCCAA GGACA UCGAC GGGCA CAUGG UUAAC	N/A	N/A	0.846	0.708	0.808	0.824	m ⁶ A site (Very high confidence)
2	647	GAGCC CCUGG UGAUA GAGAA GGACC UGCCC CACUA UUUCU AGCUC	N/A	N/A	0.808	0.474	0.822	0.797	m ⁶ A site (Very high confidence)
3	766	UGCAA ACCUG CUGGU GGGGC AGACC CGAAA AUCCA GCGUG CACCC	N/A	N/A	0.752	0.240	0.789	0.741	m ⁶ A site (Very high confidence)

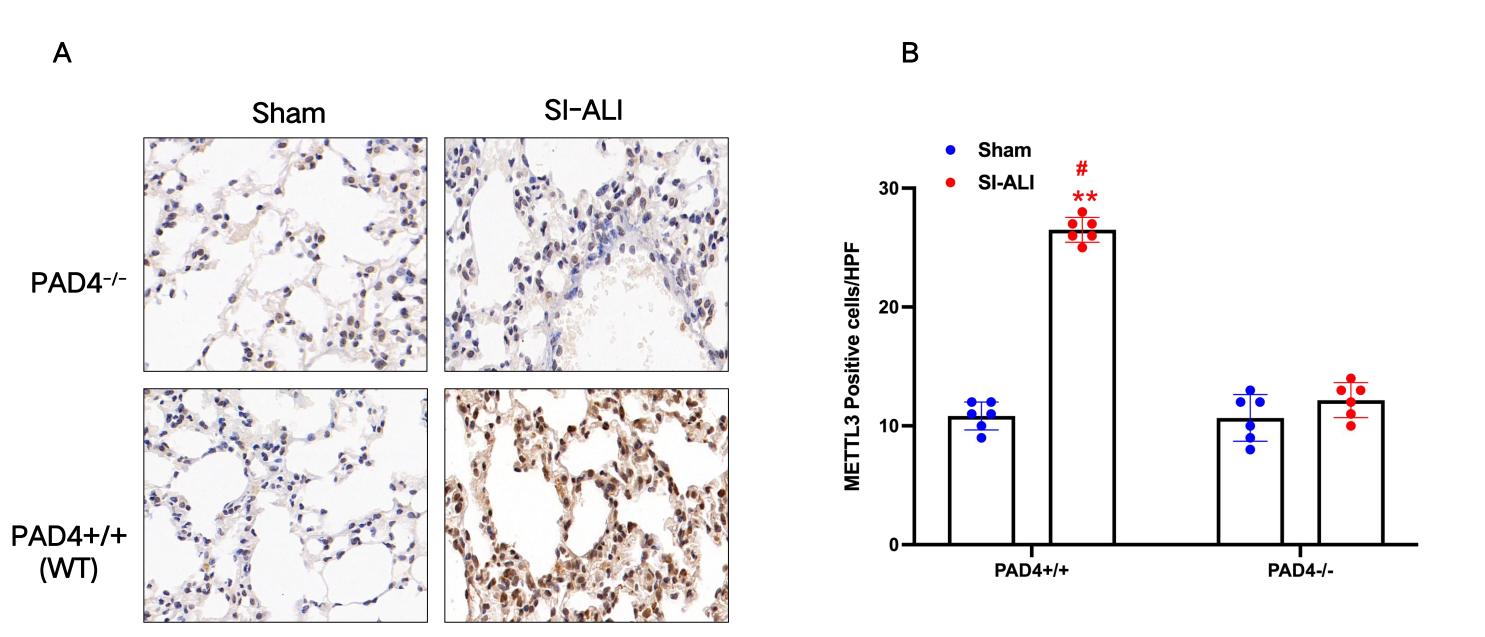




Supplementary Figure 6



Supplementary Figure 7



Supplementary Table. 1 Baseline of characteristics of healthy and patients enrolled in the group

	Healthy Control	Sepsis	Sepsis ARDS
	(N=20)	(N=24)	(N=22)
Gender (male, %)	12(60%)	12(50%)	11(50%)
Ages (years), mean±SD	44.3±13.6	44.4±12.8	45.8±13.2
BMI (kg/m²), mean±SD	27.6 ± 6.3	27.4 ± 6.4	27.3 ± 6.3
Neutrophils (10 ⁹ /L)	3.2 ± 1.8	5.0±1.4*	6.8±3.2**
Monocytes (10 ⁹ /L)	0.7 ± 0.2	0.7 ± 0.3	0.8 ± 0.2
Lymphocytes (10 ⁹ /L)	1.9 ± 0.3	1.8 ± 0.5	1.7 ± 0.4
Platelets (10 ⁹ /L)	232.9±38.4	343.7±105.4*	392.5±176.4*#
Hemoglobin (g/L)	143.2±12.5	122.3±27.5*	103.6±22.1**
ESR (mm/h)	8.1±2.1	28.3±3.4*	48.7±21.5**
CRP (mg/L)	4.3±0.5	75.1±30.2*	128.3±43.2**
Albumin(g/L)	46.2±2.5	36.2±6.1*	31.5±6.8**
PT(s)	11.1±1.0	10.5 ± 1.4	10.8 ± 1.5
APTT(s)	32.4 ± 3.2	33.4±5.4	35.4 ± 4.3
D-dimer(ng/ml)	90±67.4	195.4±93.5*	328.5±106.2*#
Fibrinogen(g/L)	2.8 ± 0.4	4.6±1.0*	7.2±1.1**
PaO2/FiO2	410±26	330±30*	260±25**
Diagnosis			
Intestinal obstruction	NA	12(50%)	11(50%)
Trauma Injury	NA	12(50%)	11(50%)
Surgery Type			
Intestinal resection(%)	NA	12(50%)	11(50%)
Hepatectomy(%)	NA	12(50%)	11(50%)
Mechanically Ventilation(%)	NA	6(25%)	22(100%)#
SOFA score(IQR)	NA	8(6,9)	11(8,13)#

Abbreviations: BMI: Body Mass Index, ESR: Erythrocyte Sedimentation Rate, IQR: Interquartile range, CRP: C reactive protein,SOFA:Sequential Organ Failure Assessment

Data are expressed by percentage or median (interquartile range [IQR]), mean \pm standard deviation [SD], *P < 0.01 versus controls; *P < 0.01 versus sepsis patients