

# The MAO inhibitor tranylcypromine alters LPS- and A $\beta$ -mediated neuroinflammatory responses in wild-type mice and a mouse model of AD

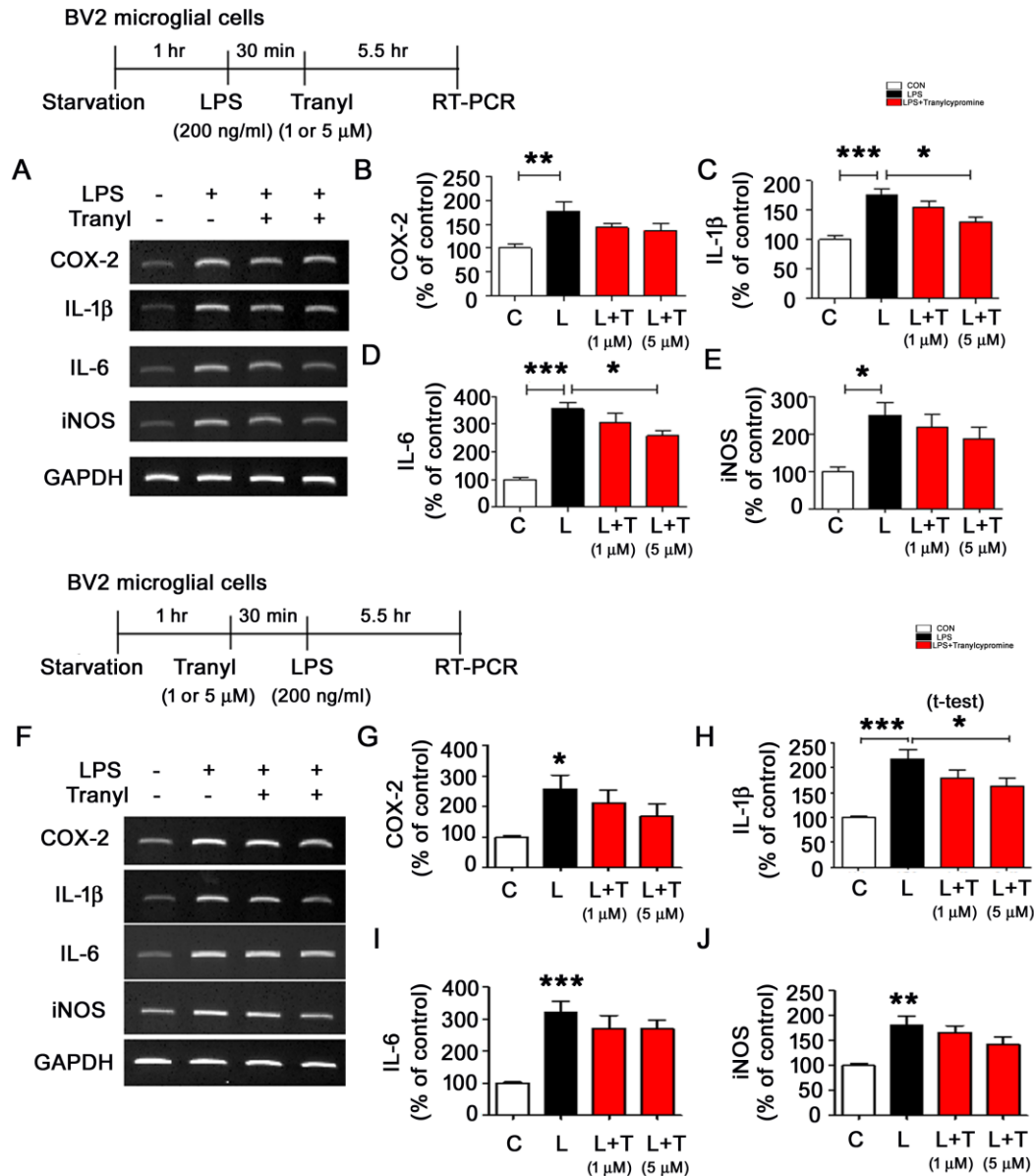
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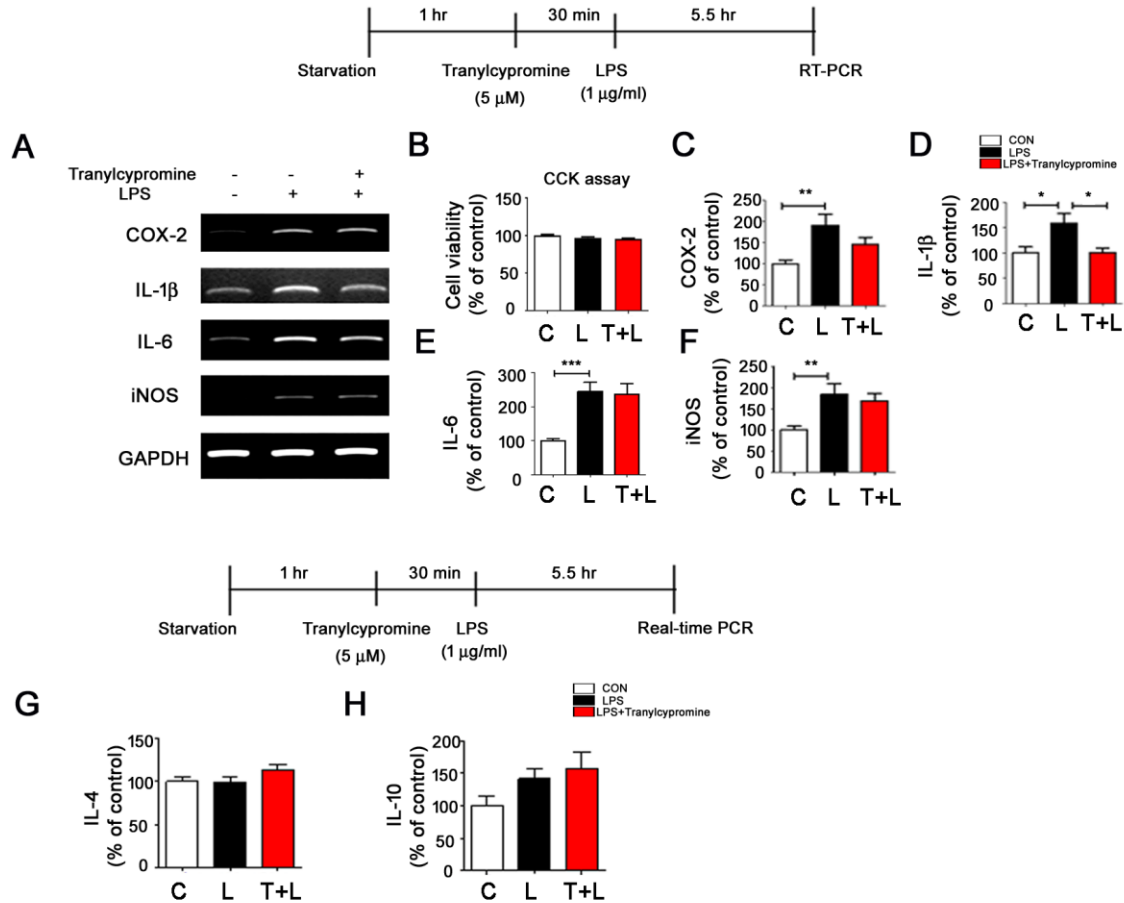
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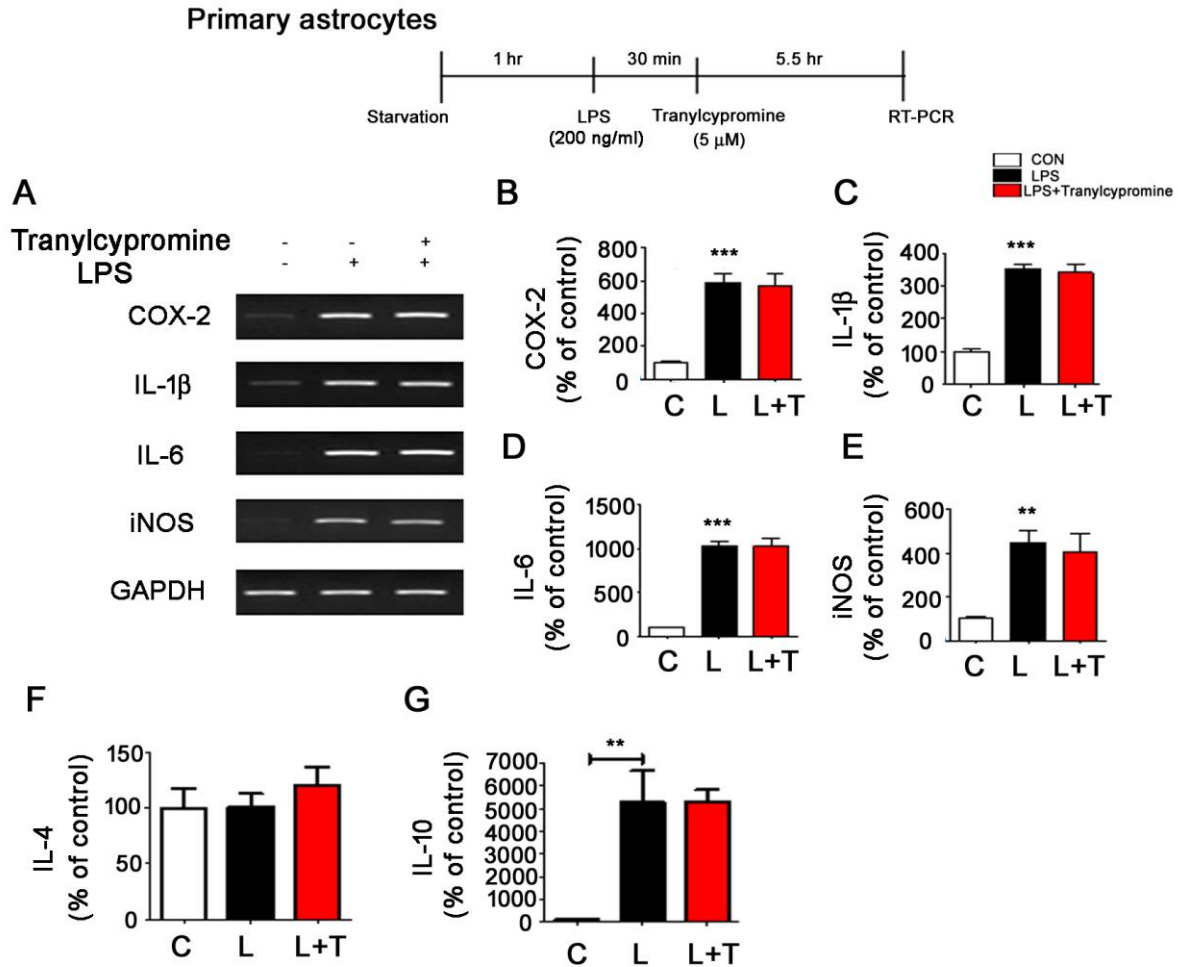


**Supplementary Figure S1.** Post-treatment with 5 μM tranylcypromine significantly decreases LPS-induced proinflammatory cytokine IL-1β and IL-6 levels in BV2 microglial cells. **(A-E)** Proinflammatory cytokine mRNA levels in BV2 microglial cells pretreated with LPS (200 ng/ml) or PBS for 30 min and treated with vehicle (1% DMSO) or 1 μM or 5 μM tranylcypromine for 5.5 hr (n=5/group) **(F-J)** Proinflammatory cytokine mRNA levels in BV2 microglial cells pretreated with vehicle (1% DMSO) or 1 μM or 5 μM tranylcypromine for 30 min and treated with LPS (200 ng/ml) or PBS for 5.5 h (COX-2, IL-6, and iNOS, n=5/group; IL-1β, n=15/group). \**p* < 0.05, \*\**p* < 0.01, \*\*\**p* < 0.001

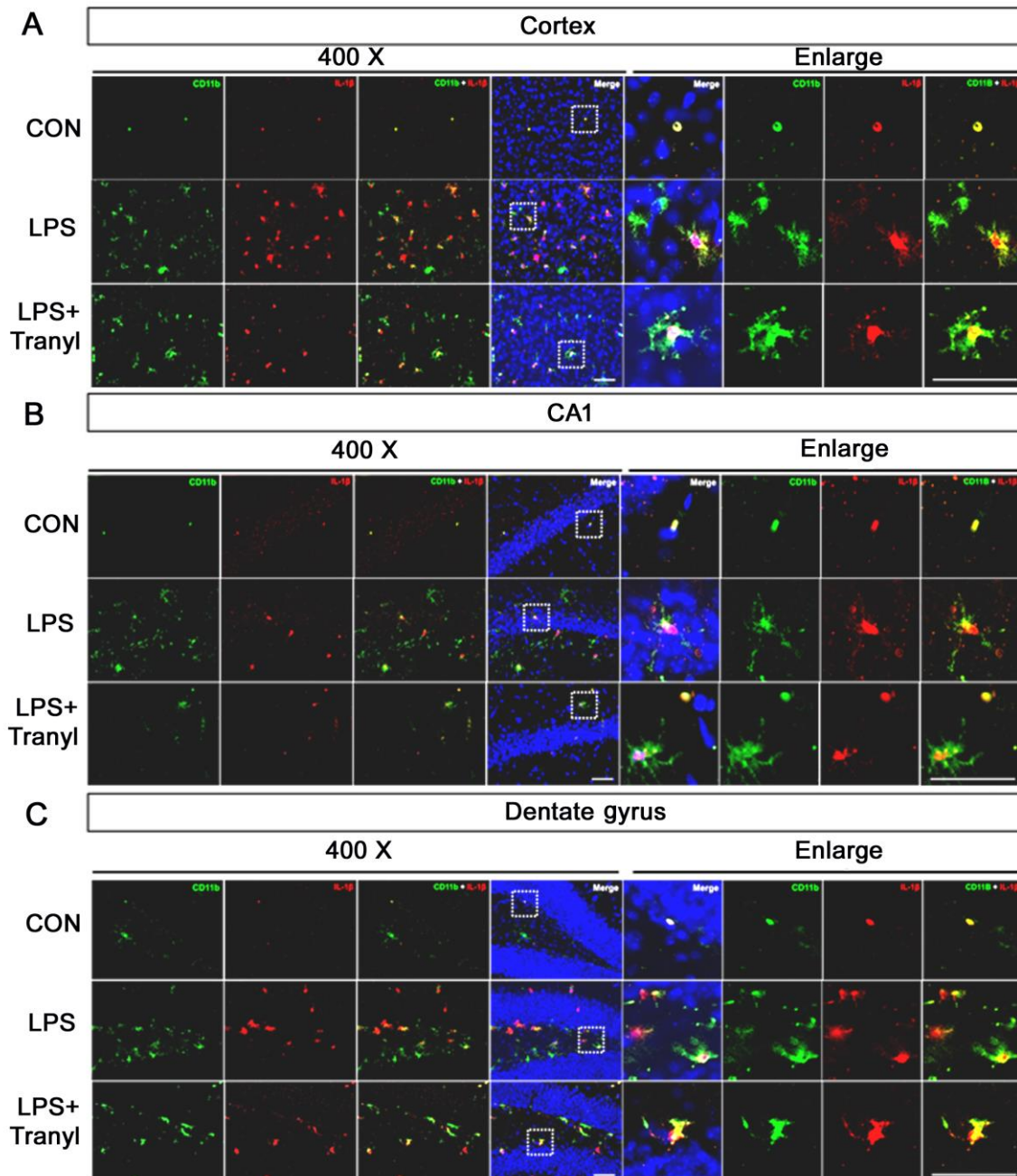
## BV2 microglial cells



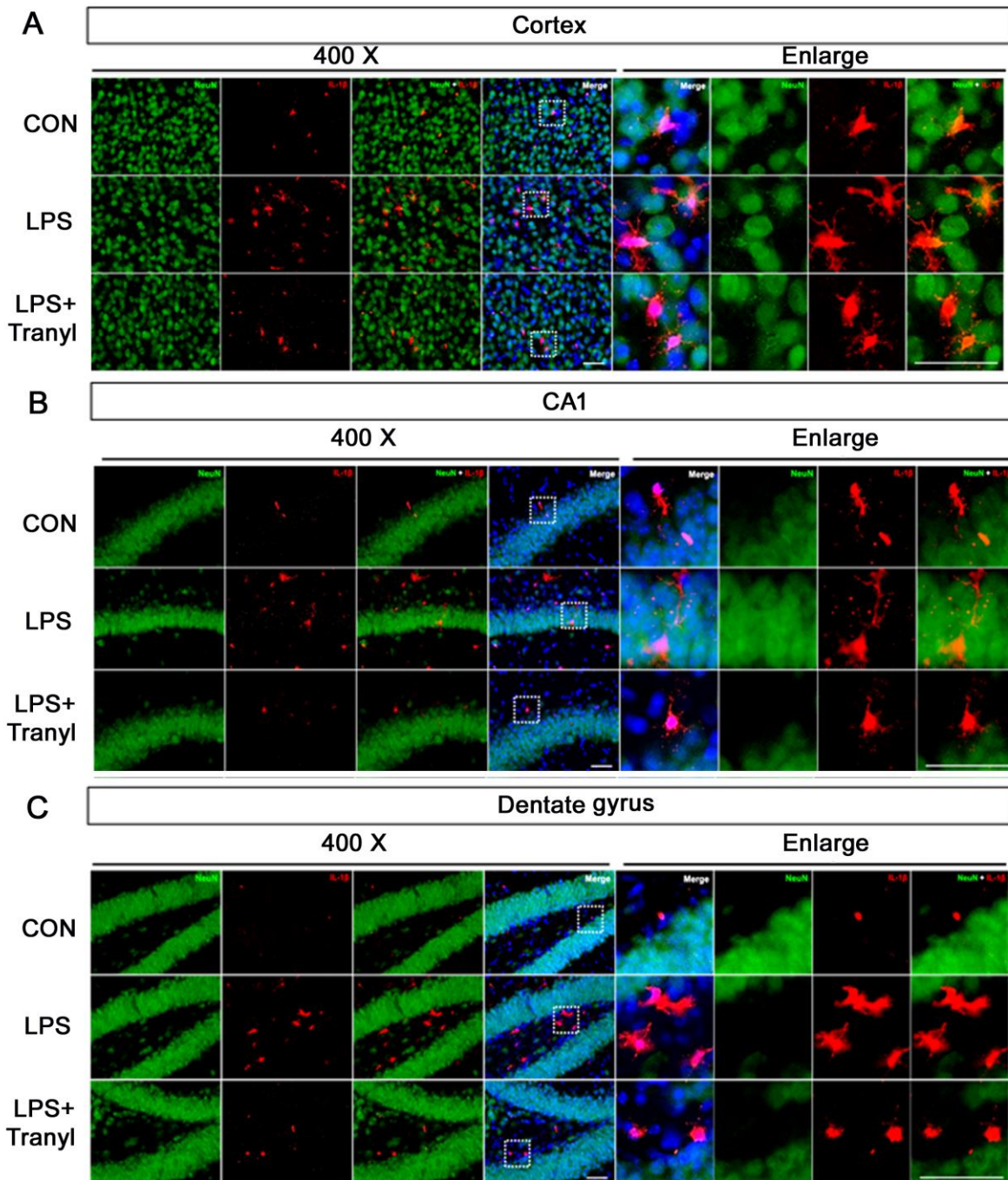
**Supplementary Figure S2.** Pretreatment with 5  $\mu\text{M}$  tranlycypromine only significantly reduces LPS-mediated proinflammatory cytokine IL-1 $\beta$  levels in BV2 microglial cells. (A-B) Cell viability of BV2 microglial cells pretreated with vehicle (1% DMSO) or tranlycypromine (5  $\mu\text{M}$ ) for 30 min and treated with LPS (1  $\mu\text{g}/\text{mL}$ ) or PBS for 5.5 hr (n=24/group). (C-F) Proinflammatory cytokine mRNA levels in BV2 microglial cells pretreated with vehicle (1% DMSO) or tranlycypromine (5  $\mu\text{M}$ ) for 30 min and treated with LPS (1  $\mu\text{g}/\text{mL}$ ) or PBS for 5.5 hr (COX-2, IL-1 $\beta$ , and iNOS; n=11/group. IL-6; n=19/group). (G-H) Anti-inflammatory cytokine mRNA levels in BV2 microglial cells pretreated with vehicle (1% DMSO) or tranlycypromine (5  $\mu\text{M}$ ) for 30 min and treated with LPS (1  $\mu\text{g}/\text{mL}$ ) or PBS for 5.5 hr (n=8/group).



**Supplementary Figure S3.** Post-treatment with 5 μM tranylcypromine does not alter LPS-mediated proinflammatory cytokine levels in primary astrocytes. (A-E) Proinflammatory cytokine mRNA levels in primary astrocytes pretreated with LPS (200 ng/ml) or PBS for 30 min and treated with vehicle (1% DMSO) or tranylcypromine (5 μM) for 5.5 h using RT-PCR (COX-2, IL-1β, IL-6, and iNOS; n=4/group). (F-G) Anti-inflammatory cytokine mRNA levels in primary astrocytes pretreated with LPS (200 ng/ml) or PBS for 30 min and treated with vehicle (1% DMSO) or tranylcypromine (5 μM) for 5.5 hr using real-time PCR (IL-4 and IL-10; n=4/group). \*\* $p < 0.01$ , \*\*\* $p < 0.001$



**Supplementary Figure S4.** The proinflammatory cytokine IL-1 $\beta$  colocalizes with the microglial cell marker CD11b in the cortex and hippocampus in LPS-treated wild-type mice. (A-C) After daily injection with tranylecypromine (3 mg/kg, i.p.) or PBS for 3 days, wild-type mice were injected with LPS (10 mg/kg, i.p.) or PBS. Perfused and fixed mice were then subjected to immunohistochemistry with anti-IL-1 $\beta$  and anti-CD11b antibodies.



**Supplementary Figure S5.** The proinflammatory cytokine IL-1 $\beta$  does not co-localize with the neuronal cell marker NeuN in the cortex and hippocampus in LPS-injected wild-type mice. (A-C) After daily injection with tranylcypromine (3 mg/kg, i.p.) or PBS for 3 days, wild-type mice were injected with LPS (10 mg/kg, i.p.) or PBS. Perfused and fixed mice were then subjected to immunohistochemistry with anti-IL-1 $\beta$  and anti-NeuN antibodies.