

Supporting Information

Systemic delivery of glycosylated-PEG-masked oncolytic virus enhances targeting of antitumor immuno-virotherapy and modulates T and NK cell infiltration

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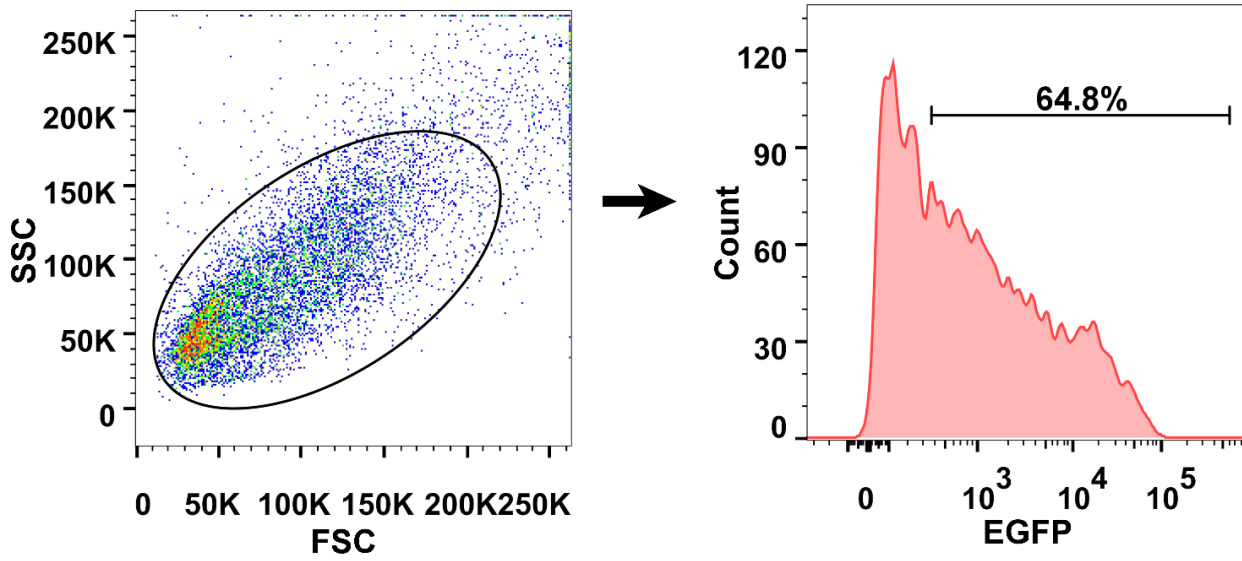


Figure. S1. The gate and EGFP intensity of oHSV-treated Hepa1-6 cells were analyzed by FACS.

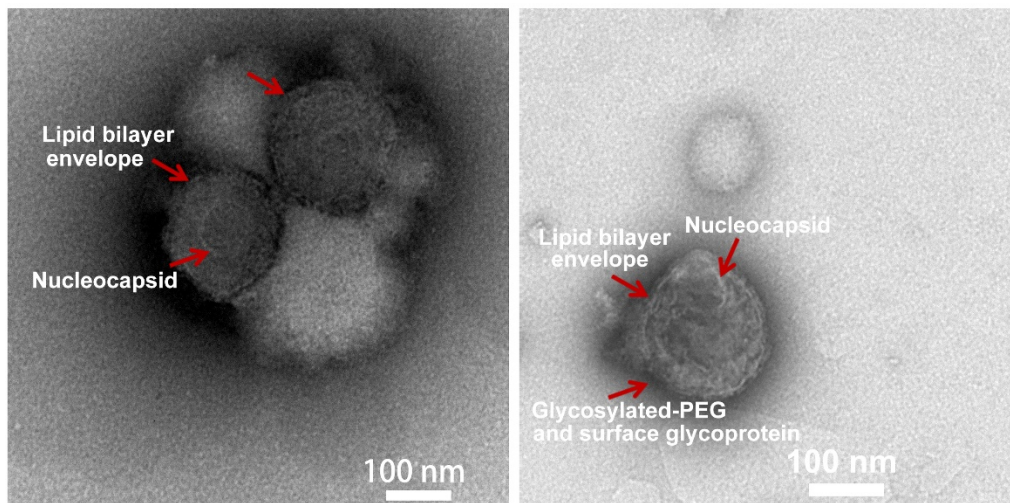


Figure S2. The TEM image of oHSV and glycosylated-PEG-oHSV.

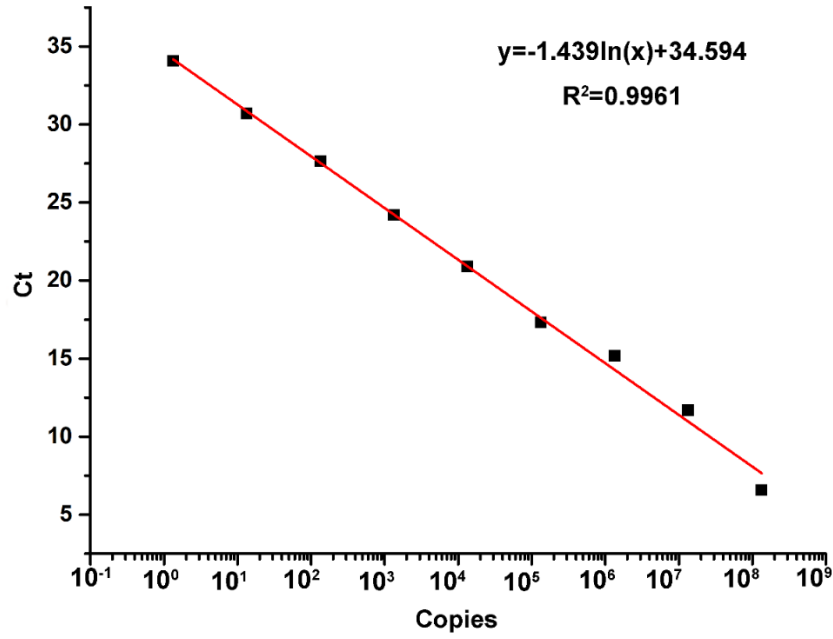


Figure S3. Standard curve for virus copy number determination.

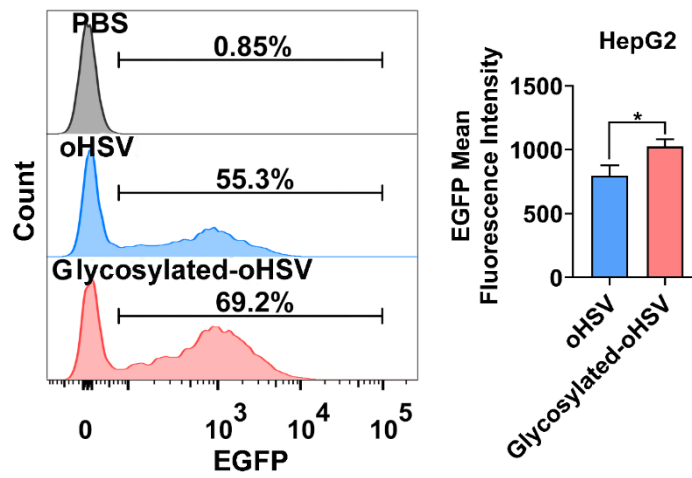


Figure S4. Flow cytometry was performed on HepG2 cells treated with oHSV or glycosylated-PEG-oHSV. Statistical analysis was performed with t-test, $*p < 0.05$, ($n = 3$). Data are presented as mean \pm SD.

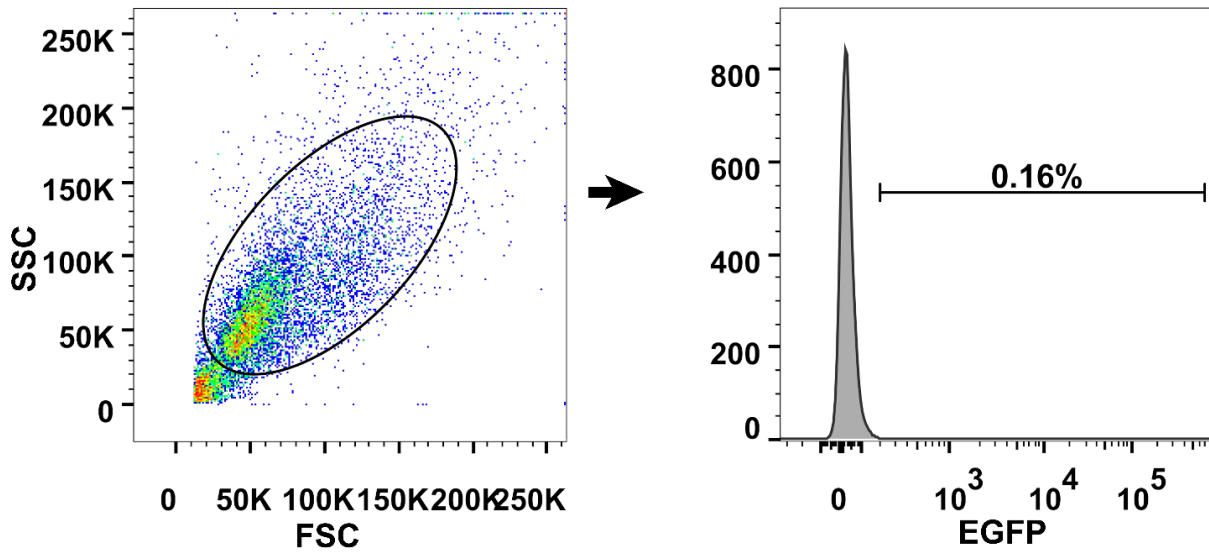


Figure. S5. The gate and EGFP intensity of NIH/3T3 cells treated with oHSV were analyzed by FACS.

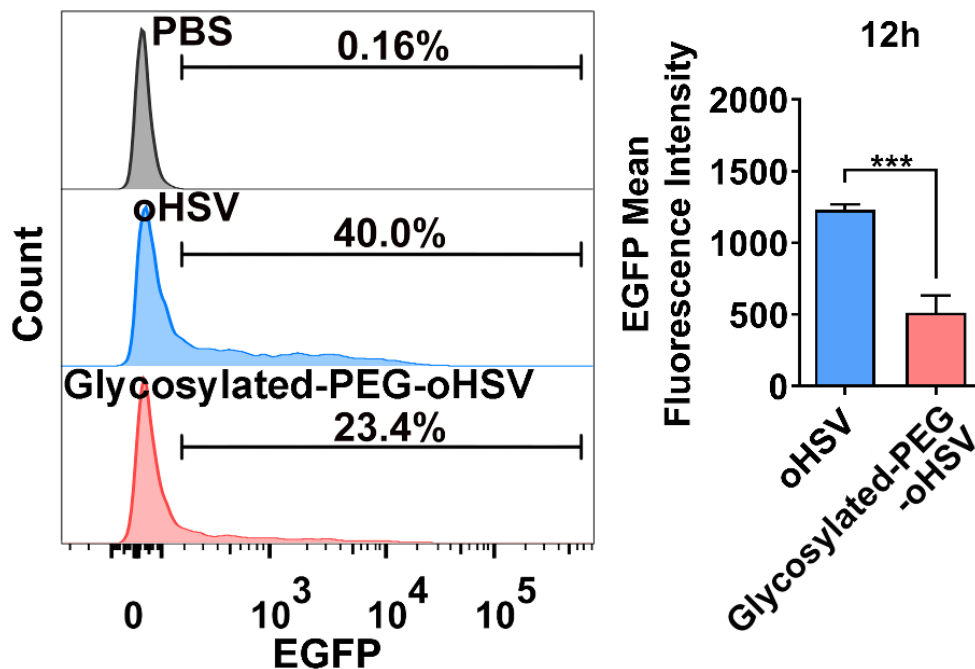


Figure. S6. Flow cytometry analysis and quantification of EGFP expression in NIH/3T3 cells after treatment with oHSV or glycosylated-PEG-oHSV for 12 h. Statistical analysis was performed using a t-test analysis, and significance levels were denoted by * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, and **** $p < 0.0001$. Data are presented as mean \pm standard deviation (SD).

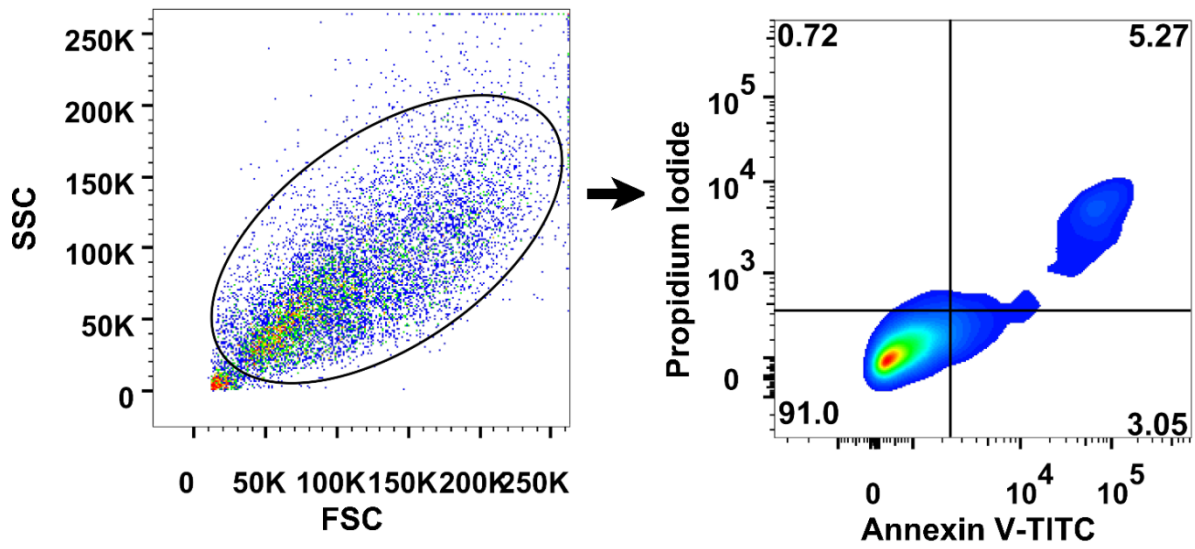


Figure. S7. The cytolytic activity of Hepa1-6 cells treated with oHSV for 24 h was analyzed by FACS using Annexin V-FITC and PI staining.

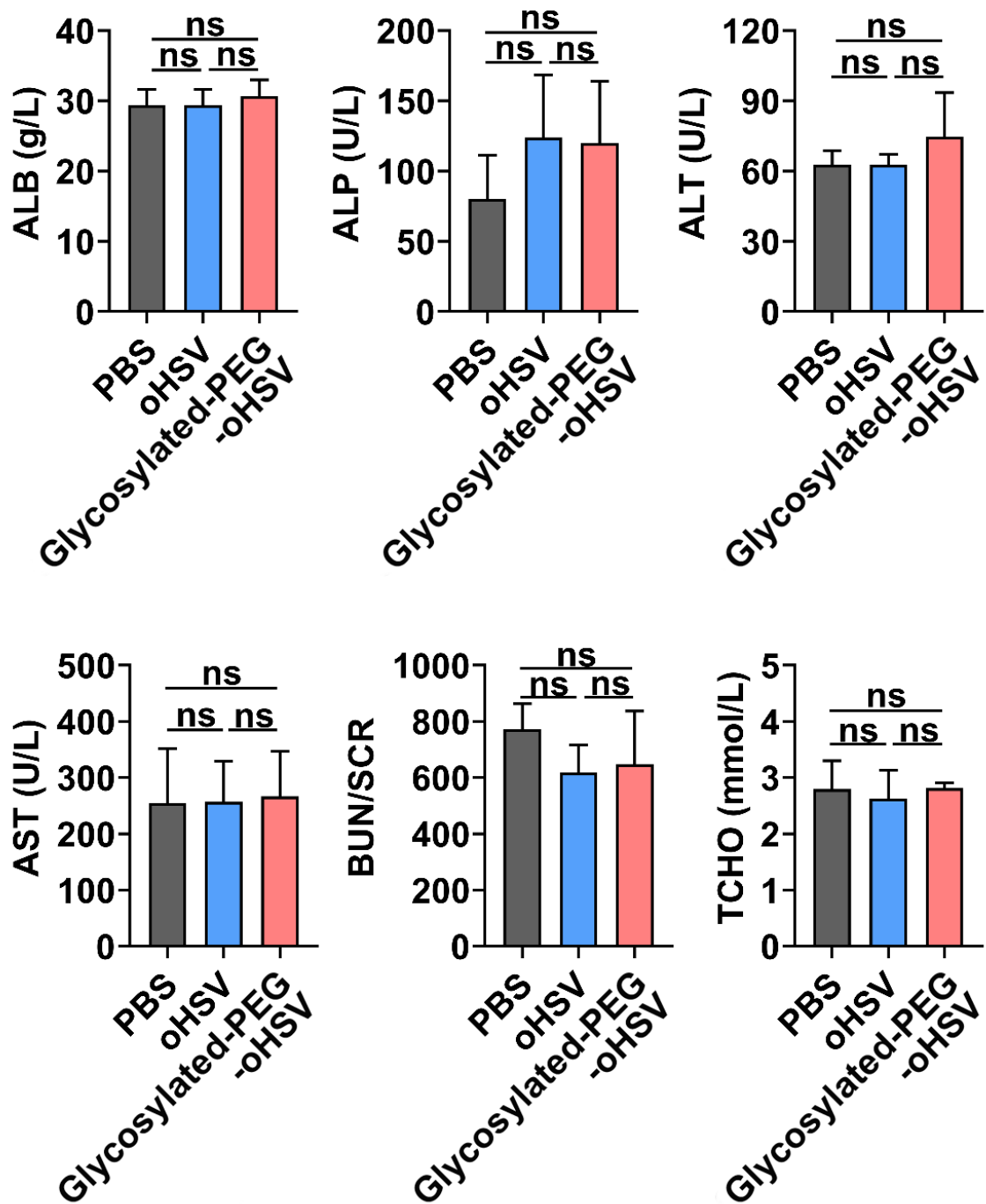


Figure. S8. Biochemical analysis, including albumin, ALB; alkaline phosphatase, ALP; alanine aminotransferase, ALT; aspartate aminotransferase, AST; the blood urea nitrogen to serum creatinine ratio (BUN/SCR); and total cholesterol (TCHO) was performed in mice at the day 24 after intravenous injection of PBS, oHSV, or glycosylated-PEG-oHSV (n=3). Statistical analysis was conducted using ANOVA analysis, with significance levels denoted as $*p<0.05$, $**p<0.01$, $***p<0.001$, and $****p<0.0001$. The data are presented as mean \pm standard deviation (SD).

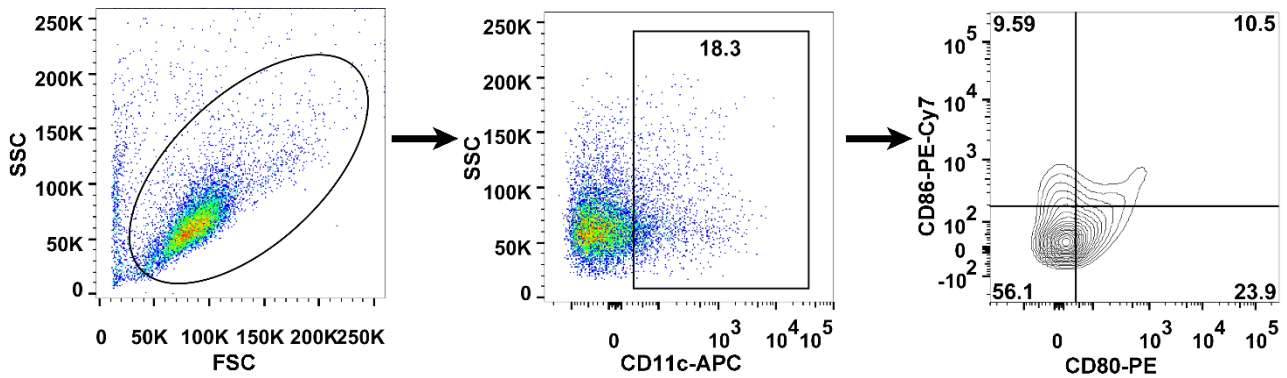


Figure. S9. Identifying the maturation of lymphatic dendritic cells (DCs) from lymph nodes of mice after receiving different treatments by FACS analysis with staining using anti-CD11c-APC, anti-CD80-PE, and anti-CD86-PE-Cy7 antibodies.

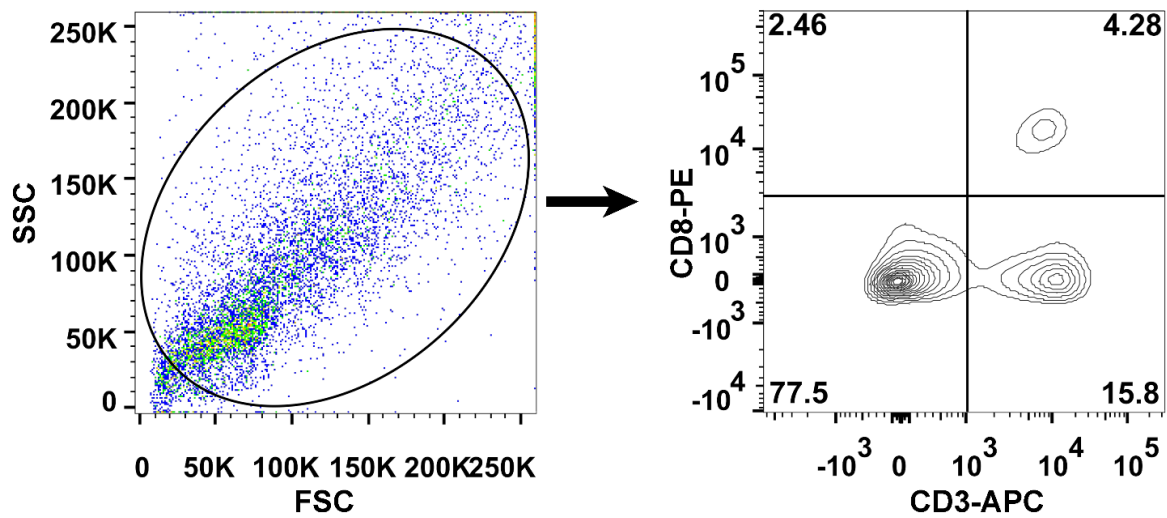


Figure. S10. Identifying the percentage of CD8⁺T cells in spleen after receiving different treatments by FACS analysis with staining using anti-CD3-APC, anti-CD8-PE antibodies.

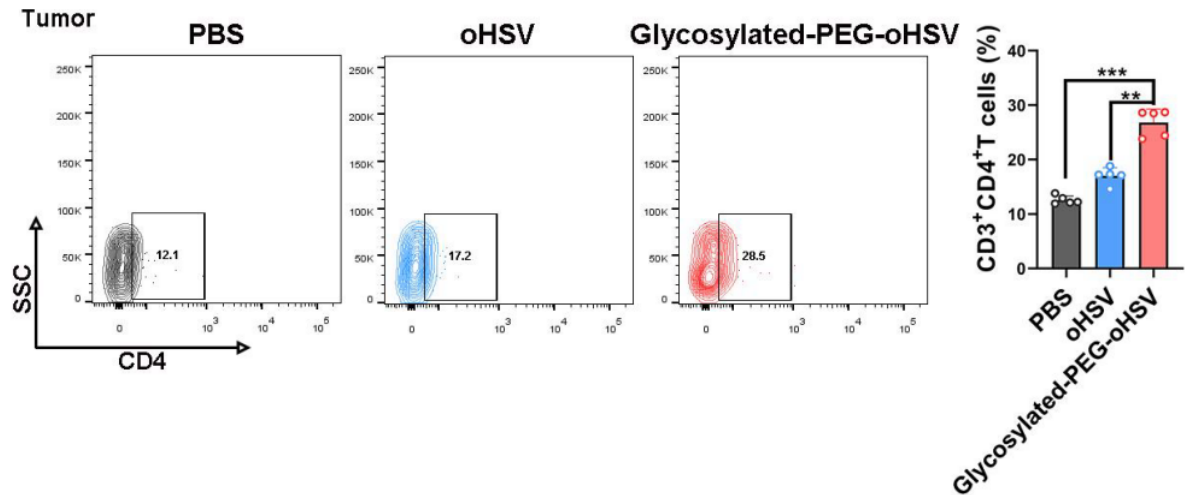


Figure S11. The percentage of CD3⁺CD4⁺T cells in tumors after treatment with PBS, oHSV or glycosylated- PEG-oHSV, respectively (n = 5).

Tumor

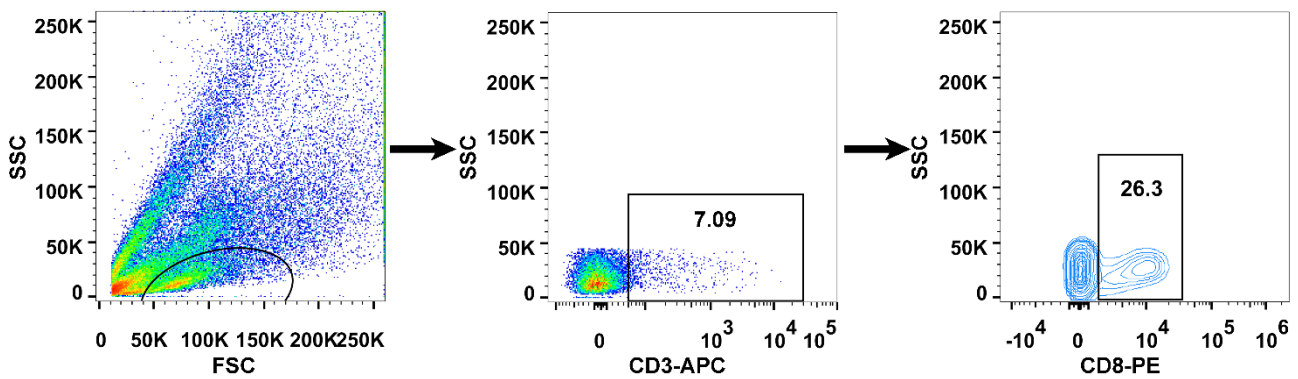


Figure. S12. Identifying the percentage of CD8⁺T cells in tumors after receiving different treatments by FACS analysis with staining using anti-CD3-APC, anti-CD8-PE antibodies.

Tumor

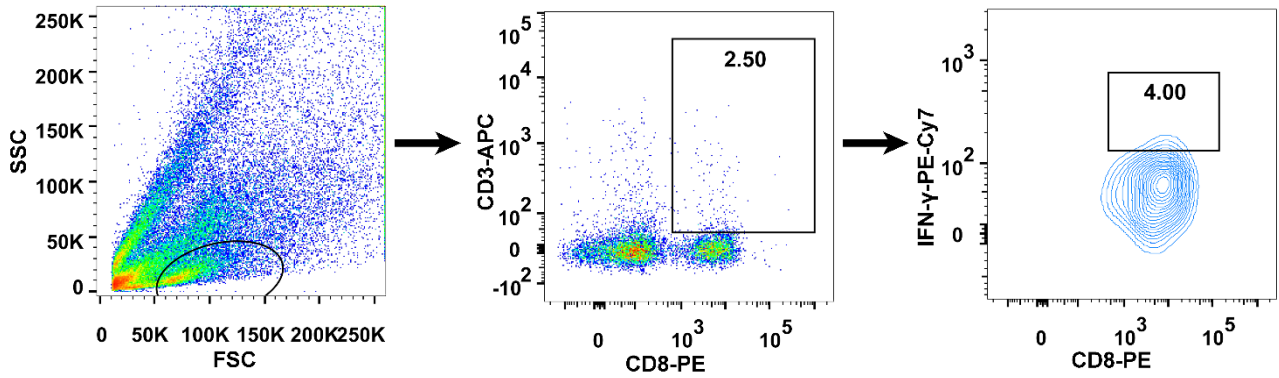


Figure. S13. Identifying IFN- γ^+ CD8 $^+$ CD3 $^+$ T cells in tumors after receiving different treatments by FACS analysis with staining using anti-CD3-APC, anti-CD8-PE, IFN- γ -PE-Cy7 antibodies.

Tumor

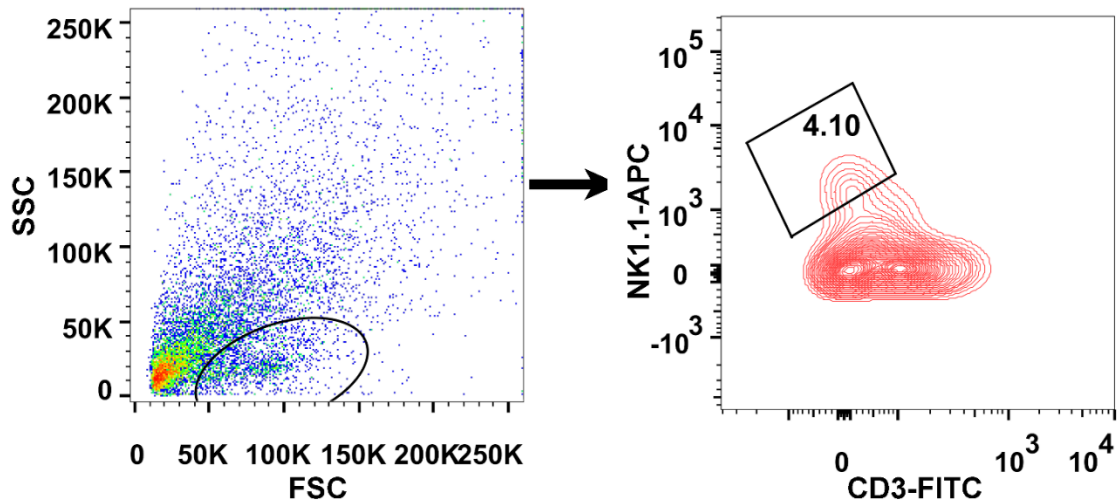


Figure. S14. Identifying NK cells in tumors after receiving different treatments by FACS analysis with staining using anti-CD3-FITC and anti-NK1.1-APC antibodies.

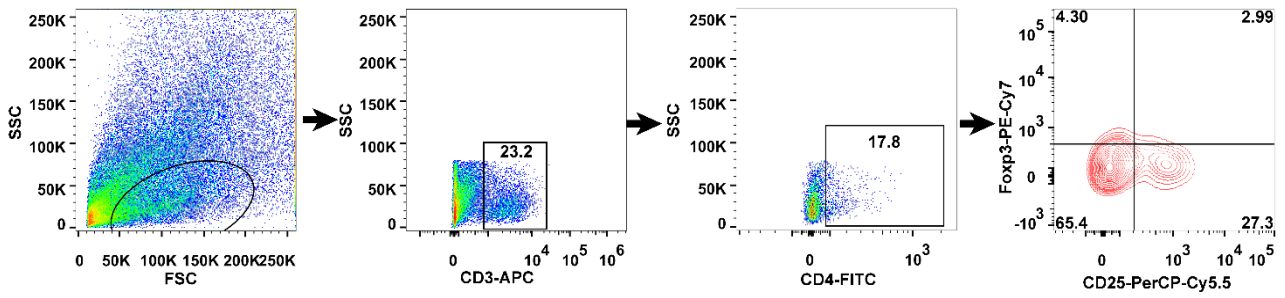


Figure. S15. Detection of Foxp3⁺CD25⁺CD4⁺T cells in tumors following different treatments by FACS analysis with staining using anti-CD3-APC, anti-CD4-FITC, anti-CD25-PerCP-Cy5.5, and anti-Foxp3-PE-Cy7 antibodies.

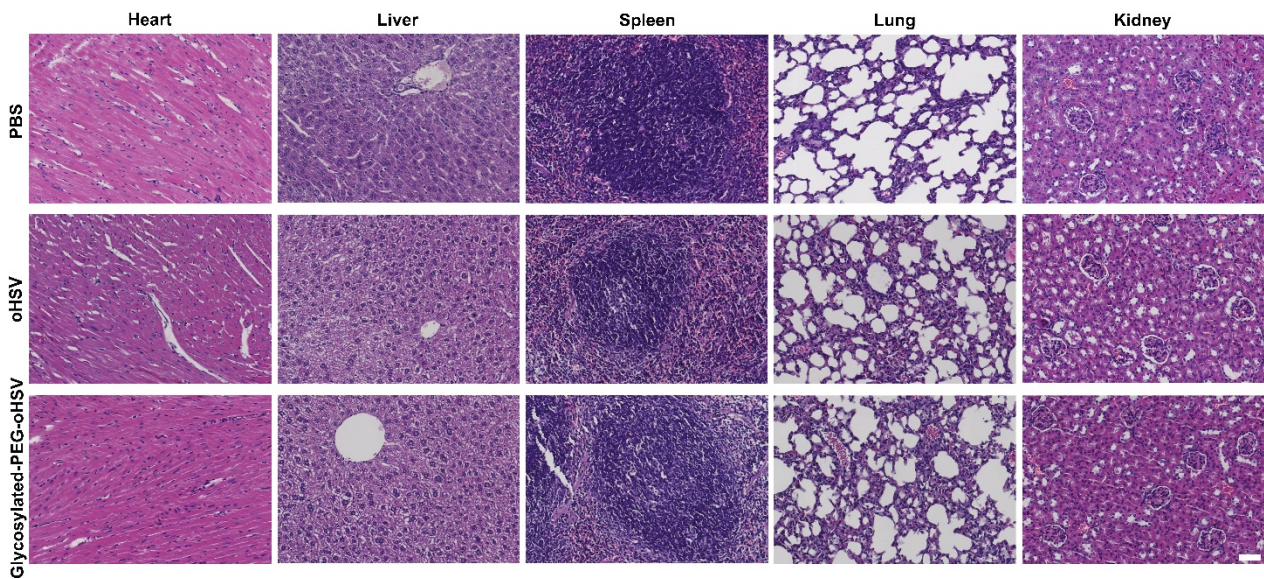


Figure. S16. Hematoxylin and eosin (H&E) imaging was performed on major organs including the heart, liver, spleen, lung, and kidney, obtained from mice at the day 24 after intravenous injection of PBS, oHSV, or glycosylated-PEG-oHSV. Scale bar, 100 μ m.