

# Peripheral blood mononuclear cell populations correlate with outcome in patients with metastatic breast cancer

Anna-Maria Larsson <sup>1</sup>, Olle Nordström <sup>2</sup>, Alexandra Johansson <sup>1</sup>, Lisa Rydén <sup>1,3</sup>, Karin Leandersson <sup>4</sup> and Caroline Bergenfelz <sup>2,\*</sup>

<sup>1</sup> Division of Oncology, Department of Clinical Sciences Lund, Lund University, SE-223 81 Lund, Sweden; anna-maria.larsson@med.lu.se (AML); al0531jo-s@student.lu.se (AJ); lisa.ryden@med.lu.se (LR)

<sup>2</sup> Experimental Infection Medicine, Department of Translational Medicine, Lund University, SE-214 28 Malmö, Sweden; ol7840no-s@student.lu.se (ON); caroline.bergenfelz@med.lu.se (CB)

<sup>3</sup> Department of Surgery, Skåne University Hospital, SE-223 81 Lund, Sweden

<sup>4</sup> Cancer Immunology, Department of Translational Medicine, Lund University, SE-214 28 Malmö, Sweden; karin.leandersson@med.lu.se (KL)

\* Correspondence: caroline.bergenfelz@med.lu.se

## SUPPLEMENTAL TABLES

**Supplemental Table S1. Characteristics of the included patients.** <sup>a</sup> De novo MBC denotes MBC at initial breast cancer diagnosis. <sup>b</sup> Distant recurrent MBC denotes MBC diagnosis after >0 years after the primary diagnosis. <sup>c</sup> Visceral metastasis is defined as involvement of lung, liver, peritoneal and/or pleura. <sup>d</sup> Progression is defined as progressive disease at three months evaluation, using modified RECIST 1.1 criteria. *Abbreviations:* ECOG; Eastern Cooperative Oncology Group, NHG; Nottingham Histological Grade, PT; primary tumor, ER; estrogen receptor, PR; progesterone-receptor, HER2; human epidermal growth factor receptor 2, MET; metastasis.

Variable	Total N=32	%
<b><u>Age</u></b>		
< 65 years	17	53.1
≥65 years	15	46.9
<b><u>Baseline ECOG</u></b>		
0	22	68.8
1	6	18.8
2	4	12.5
Unknown	0	0.0
<b><u>PT Tumor type</u></b>		
Ductal	21	65.5
Lobular	6	18.8
Other	4	12.5
Unknown	1	3.1
<b><u>PT NHG</u></b>		
I	2	6.3
II	13	40.6
III	7	21.9
Unknown	10	31.3
<b><u>PT ER status</u></b>		
ER-negative	8	25.0
ER-positive	20	62.5
ER-unknown	4	12.5
<b><u>PT PR status</u></b>		
PR-negative	12	37.5
PR-positive	15	46.9
PR-unknown	5	15.6
<b><u>PT HER2 status</u></b>		
HER2-negative	16	50.0
HER2-positive	5	15.6
HER2-unknown	11	34.4
<b><u>Type of MBC</u></b>		
De novo <sup>a</sup>	5	15.6
Distant recurrent <sup>b</sup>	27	84.4
<b><u>Metastatic sites, number</u></b>		
< 3 metastatic sites	19	59.4
≥ 3 metastatic sites	13	40.6
<b><u>Metastatic sites, localization</u></b>		
Lymph nodes No / Yes	20 / 12	62.5 / 37.5
Lung No / Yes	20 / 12	62.5 / 37.5

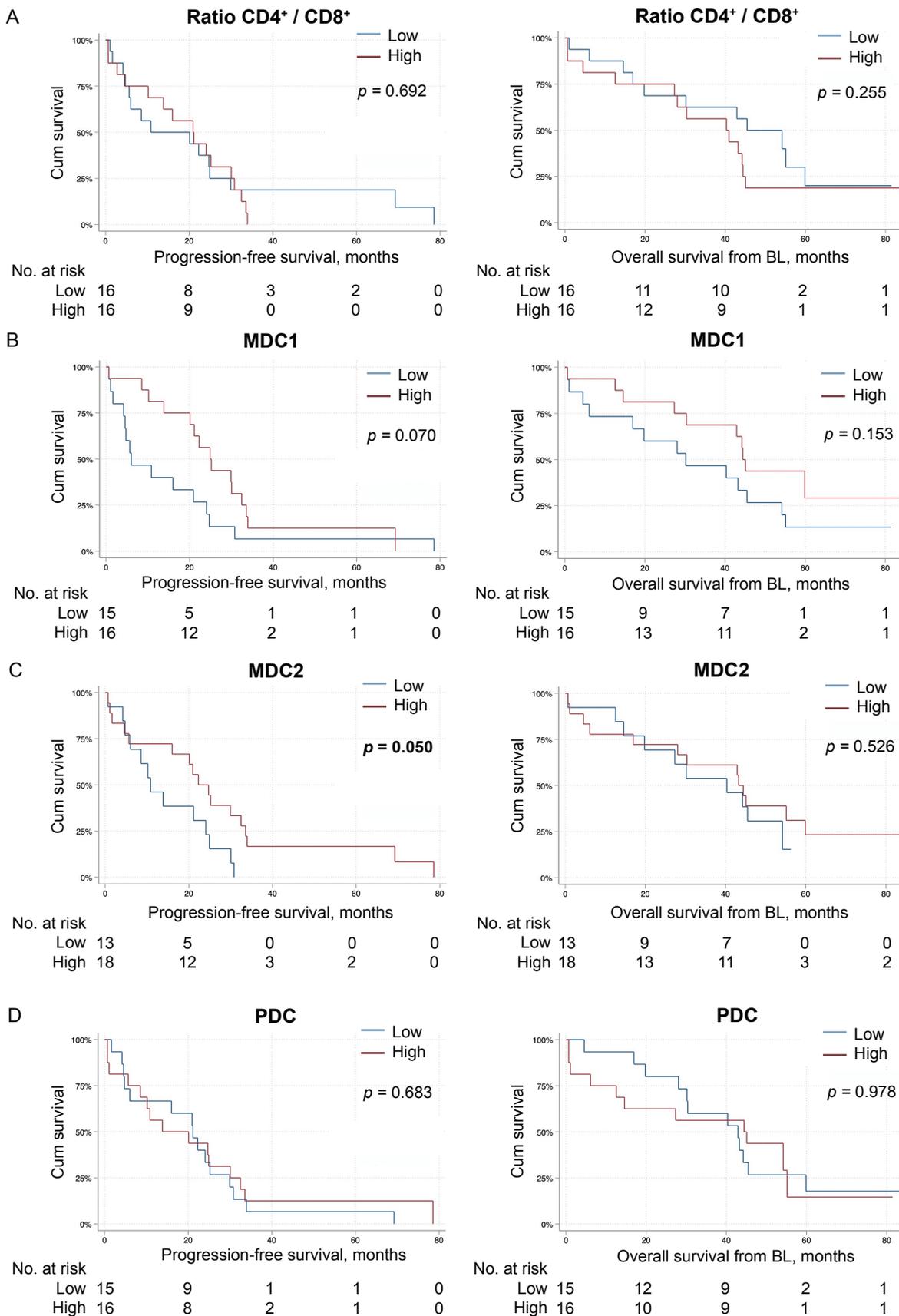
Liver No / Yes	23 / 9	71.9 / 28.1
Bone No / Yes	7 / 25	21.9 / 78.1
Visceral <sup>c</sup> No / Yes	13 / 19	40.6 / 59.4
Bone only No / Yes	23 / 9	71.9 / 28.1
<b><u>MET ER status</u></b>		
ER-negative	1	3.1
ER-positive	27	84.4
ER-unknown	4	12.5
<b><u>MET PR status</u></b>		
PR-negative	16	50.0
PR-positive	11	34.4
PR-unknown	5	15.6
<b><u>MET HER2 status</u></b>		
HER2-negative	23	71.9
HER2-positive	3	9.4
HER2-unknown	6	18.8
<b><u>Progression at 3 mo evaluation<sup>d</sup></u></b>		
Non-progression	25	78.1
Progression	3	9.4
Unknown	4	12.5

**Supplemental Table S2. Antibodies used for flow cytometry with clone and dilution indicated.**  
 All from BD Biosciences unless otherwise stated. <sup>a</sup> from Miltenyi Blood dendritic cell enumeration kit that also includes CD14 and CD19 to exclude monocytes and B lymphocytes, respectively.

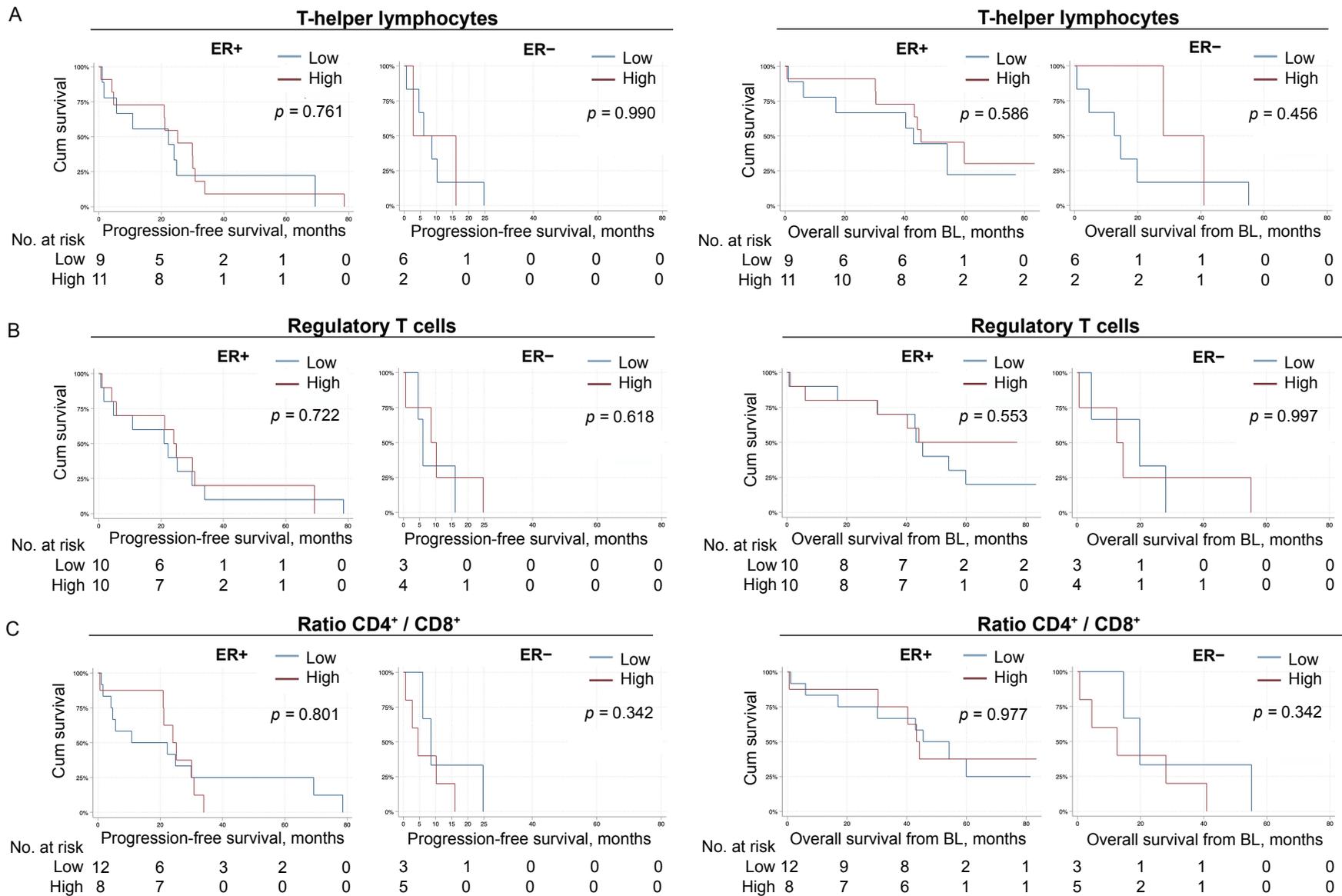
Antibody	Clone	Dilution
CD14-FITC	M5E2	1:10
CD16-PE	3G8	1:20
HLA-DR-APC	G46-6	1:50
CD3-FITC	HIT3a	1:25
CD3-APC	HIT3a	1:20
CD4-PE	RPA-T4	1:25
CD8-PE	HIT8a	1:25
CD25-FITC	2A3	1:10
CD127-biotin / SA-APC	HIL-7R-M21	1:10 / 1:10
CD56-APC	B159	1:10
CD19-FITC	HIB19	1:20
CD33-APC	WM53	1:10
BDCA-1 (CD1c) <sup>a</sup>	NA <sup>a</sup>	1:10
BDCA-2 (CD303) <sup>a</sup>	NA <sup>a</sup>	1:10
BDCA-3 (CD141) <sup>a</sup>	NA <sup>a</sup>	1:10

**Supplemental Table S3. Summary of the analyzed immune cell populations.** Circulating immune cell populations were analyzed by flow cytometry (see Supplementary Figure 1 for gating strategies). Values represent percentage of immune cell population of PBMCs or, where indicated, of all CD4<sup>+</sup> T cells. <sup>a</sup>. Ratio calculated as percentage of CD4<sup>+</sup> cells of all lymphocytes / CD8<sup>+</sup> cells of all lymphocytes. <sup>b</sup>. Ratio calculated as percentage of CD14<sup>+</sup>CD16<sup>+</sup> cells / CD14<sup>+</sup>CD16<sup>-</sup> cells. Median values with SEM and number of patients analyzed shown.

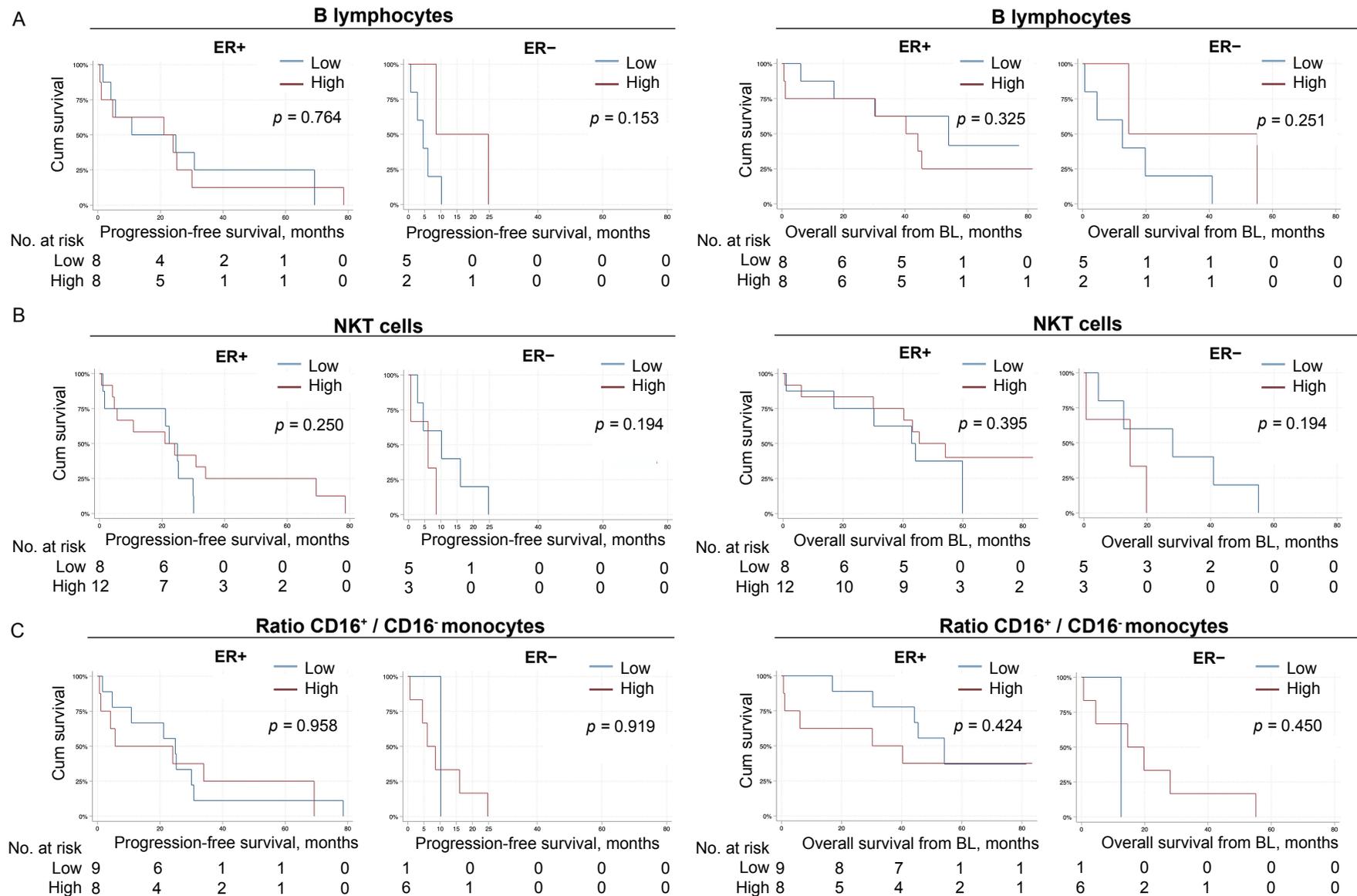
<b>Immune cell population or ratio</b>	<b>N</b>	<b>Median ± SEM</b>
% All T lymphocytes (CD3 <sup>+</sup> cells)	32	23.23 % ± 2.05
% Cytotoxic T lymphocytes (CD8 <sup>+</sup> cells)	32	6.59 % ± 0.96
% T helper cells (CD4 <sup>+</sup> cells)	32	14.63 % ± 1.31
% Tregs (CD4 <sup>+</sup> CD25 <sup>+</sup> CD127 <sup>low/-</sup> cells of all CD4 <sup>+</sup> cells)	31	3.68 % ± 0.42
% CD8 <sup>+</sup> cells of all CD3 <sup>+</sup> T lymphocytes	32	34.34 % ± 2.02
% CD4 <sup>+</sup> cells of all CD3 <sup>+</sup> T lymphocytes	32	64.54 % ± 2.66
Ratio CD4 <sup>+</sup> T cells / CD8 <sup>+</sup> T cells <sup>a</sup>	32	1.86 ± 0.32
% B lymphocytes (CD19 <sup>+</sup> cells)	26	4.34 % ± 0.86
% NK cells (CD56 <sup>+</sup> CD3 <sup>-</sup> cells)	32	2.82 % ± 0.49
% NKT cells (CD56 <sup>+</sup> CD3 <sup>+</sup> cells)	32	0.53 % ± 0.28
% Classical monocytes (CD14 <sup>+</sup> CD16 <sup>-</sup> cells)	27	7.36 % ± 0.91
% Intermediate monocytes (CD14 <sup>+</sup> CD16 <sup>+/++</sup> cells)	27	2.59 % ± 0.46
% Non-classical monocytes (CD14 <sup>+</sup> CD16 <sup>++</sup> cells)	27	0.27 % ± 0.06
Ratio CD16 <sup>+</sup> / CD16 <sup>-</sup> monocytes <sup>b</sup>	27	0.23 ± 0.05
% MDC1 (BDCA-1 <sup>+</sup> cells)	31	0.31 % ± 0.05
% MDC2 (BDCA-3 <sup>+</sup> cells)	31	0.02 % ± 0.01
% PDC (BDCA-2 <sup>+</sup> cells)	31	0.58 % ± 0.12



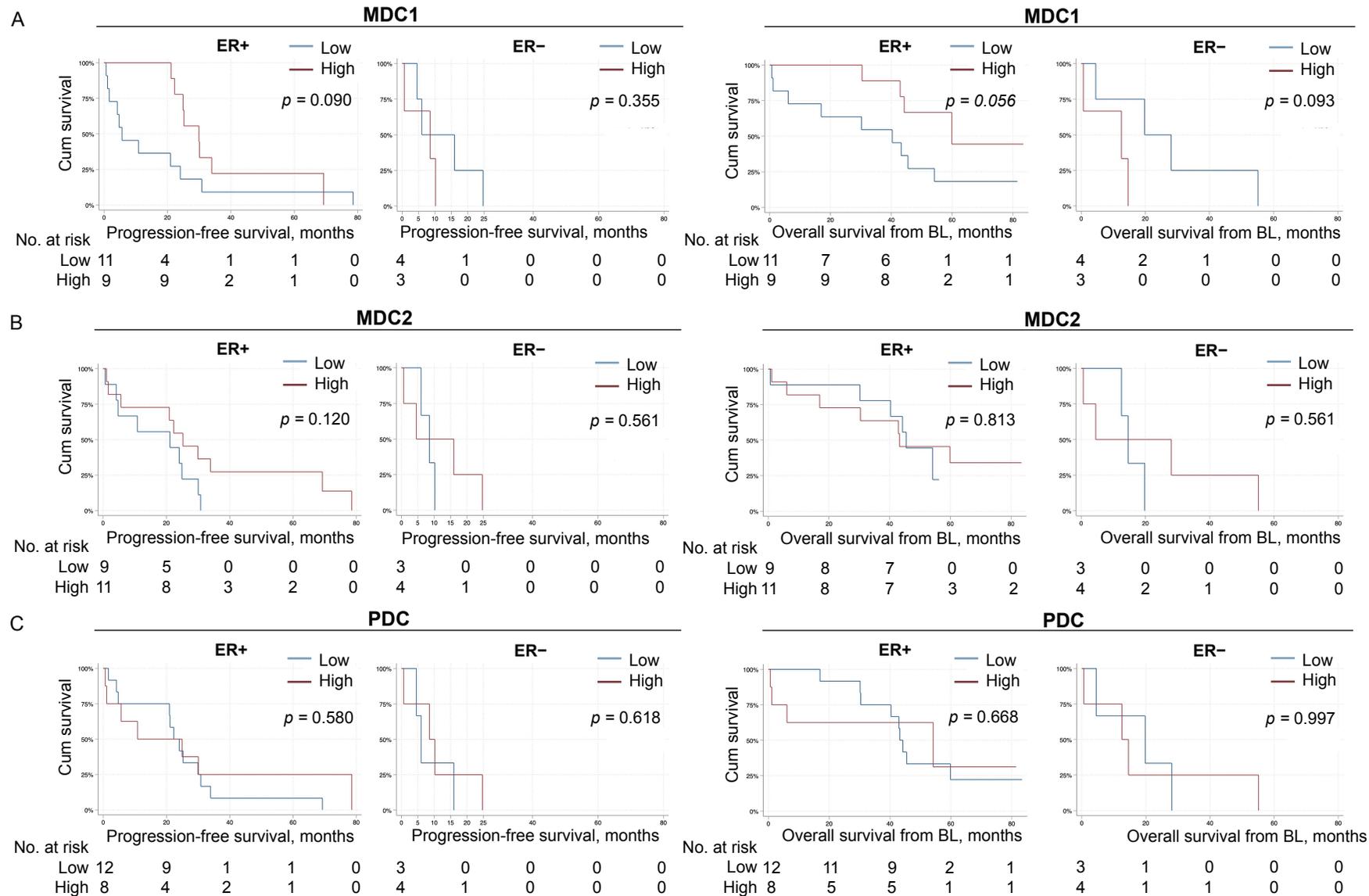
**Supplemental Figure S1. High levels of systemic MDC1 associate with improved progression-free survival.** Kaplan-Meier curves of progression-free survival (PFS; left panels) and overall survival (OS) from baseline (right panels) according to the levels (percentages) of indicated immune cell population in MBC patients. **A**, Ratio of % CD4<sup>+</sup> T-helper cells / % CD8<sup>+</sup> CTLs. **B**, BDCA-1<sup>+</sup> MDC1. **C**, BDCA-3<sup>+</sup> MDC2. **D**, BDCA-2<sup>+</sup> PDC. *N*=31 for all populations except for CD4<sup>+</sup>/CD8<sup>+</sup> ratio (*N*=32). Statistics by Log-rank test, *p*-values < 0.05 highlighted in bold.



**Supplemental Figure S2. The levels of T-helper or  $T_{regs}$  do not associate with survival in patients with ER-positive or ER-negative primary tumors.** Kaplan-Meier curves of progression-free survival (PFS; left panels) and overall survival (OS, right panels) according to the levels of indicated immune cell populations in patients with MBC stratified for primary tumor ER status. **A**,  $CD4^+$  T-helper cells. **B**,  $CD4^+CD25^+CD127^{low/-}$  cells of  $CD4^+$  cells. **C**, ratio of %  $CD4^+$  T-helper cells / %  $CD8^+$  CTLs.  $N=20$  ER-positive and  $N=8$  ER-negative for all populations except for  $T_{regs}$  ( $N=20$  and  $N=7$ , respectively). Statistics by Log-rank test,  $p$ -values  $< 0.05$  highlighted in bold.



**Supplemental Figure S3. The levels of B lymphocytes or NKT cells do not associate with survival in patients with ER-positive or ER-negative primary tumors.** Kaplan Meier curves of progression-free survival (PFS; left panels) or overall survival (OS) from baseline (right panels) according to the levels of indicated immune cell populations in patients with MBC stratified for primary tumor ER status. **A**, CD19<sup>+</sup> B lymphocytes,  $N=16$  ER-positive and  $N=7$  ER-negative. **B**, CD56<sup>+</sup>CD3<sup>+</sup> NKT cells,  $N=20$  ER-positive and  $N=8$  ER-negative. **C**, ratio of % CD16<sup>+</sup> monocytes / % CD16<sup>-</sup> monocytes,  $N=17$  ER-positive and  $N=7$  ER-negative. Statistics by Log-rank test, with  $p$ -values indicated.



**Supplemental Figure S4. The levels of MDC1 tend to associate with survival.** Kaplan Meier curves of progression-free survival (PFS; left panels) or overall survival (OS) from baseline (right panels) according to the levels of indicated blood DC population in patients with MBC stratified for primary tumor ER status. **A**, BDCA-1<sup>+</sup> MDC1. **B**, BDCA-3<sup>+</sup> MDC2. **C**, BDCA-2<sup>+</sup> PDC.  $N=20$  ER-positive and  $N=7$  ER-negative for all populations. Statistics by Log-rank test, with  $p$ -values indicated.