

Supplementary Information for

p32 regulates glycometabolism and TCA cycle to inhibit ccRCC progression via copper-induced DLAT lipoylation oligomerization

This file includes:

Figures S1-S3 and legends

- ✓ Figure S1. p32 expression and the relationship between p32, DLAT and clinical parameters in the database.
- ✓ Figure S2. The C-terminal deletion of p32 does not alter the glucose metabolism phenotype of ccRCC.
- ✓ Figure S3. p32 promotes copper-induced oligomerization of lipo-DLAT in ACHN cells.

Supplementary Tables S1-S3

- ✓ Table S1. The sequences of DLAT siRNAs
- ✓ Table S2. The sequence of primer (F: Forward primer; R: Reverse primer)
- ✓ Table S3. The basic situation of selected patients in the TCGA datasets

Supplementary Figures

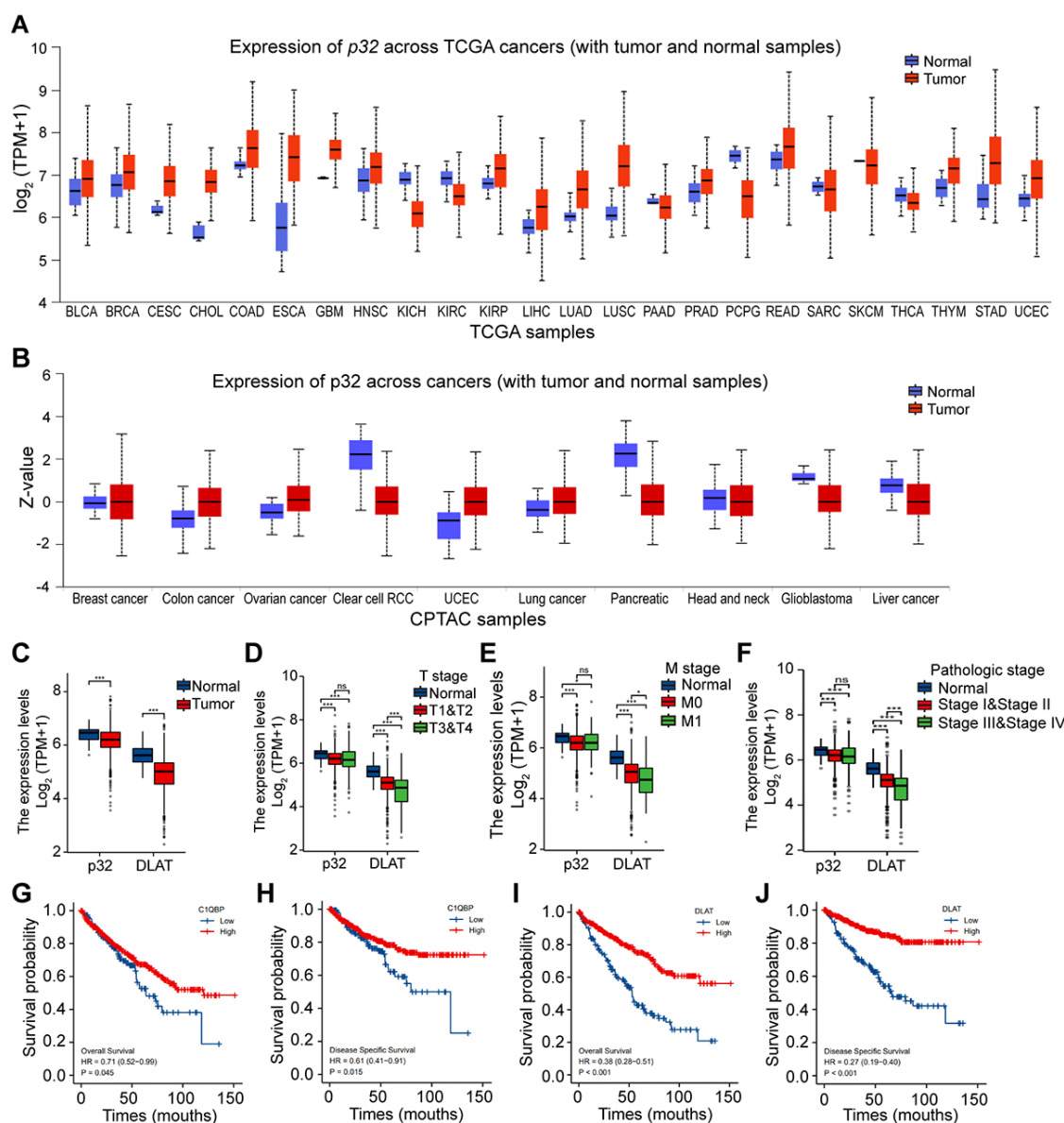


Figure S1. *p32* expression and the relationship between *p32*, *DLAT* and clinical parameters in the database. **(A)** Expression levels of *p32* mRNA in pan-cancer (<http://ualcan.path.uab.edu/>). **(B)** Protein expression levels of *p32* in pan-cancer (<http://ualcan.path.uab.edu/>). The correlation between *p32*, *DLAT* with **(C)** normal and tumor, **(D)** T stage, **(E)** M stage, **(F)** pathologic stage (normal $n=72$, tumor $n=539$). The effects of *p32* expression on **(G)** overall survival (OS) time, **(H)** disease-specific survival (DSS) time in patients with KIRC were analyzed by survival curve ($n=539$, OS $P=0.045$, DSS $P=0.015$). The effects of *DLAT* expression on **(I)** OS time, **(J)** DSS time in patients with KIRC were analyzed by survival curve ($n=539$, OS $P<0.001$, DSS $P<0.001$). Statistically significant differences were indicated: $*P<0.05$, $**P<0.01$, $***P<0.001$. NS: no significant difference.

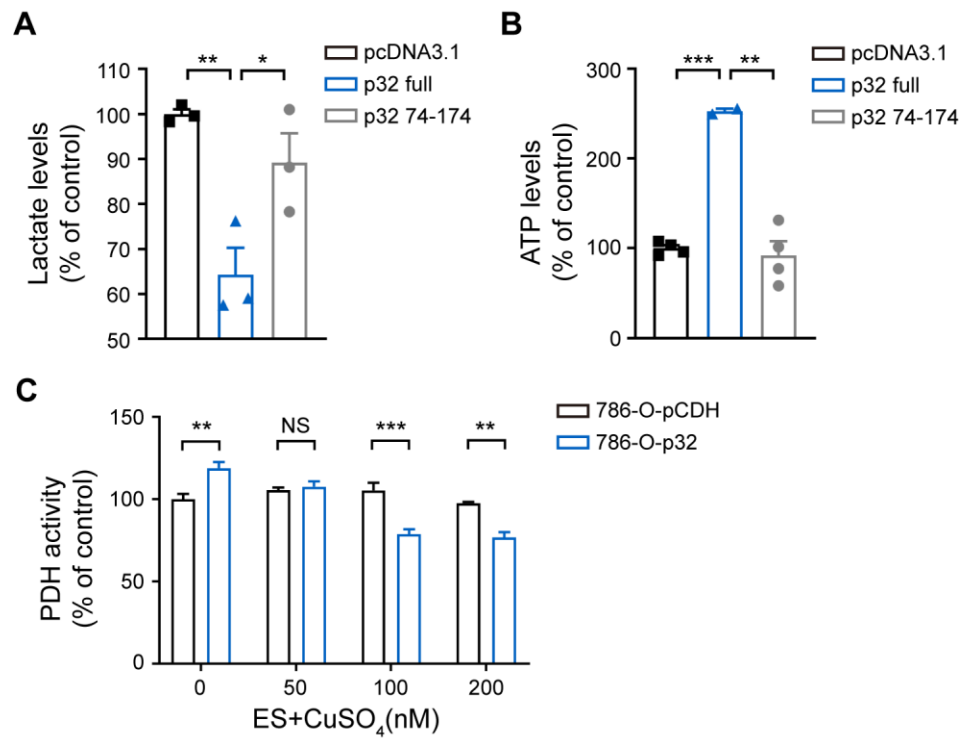


Figure S2. The C-terminal deletion of p32 does not alter the glucose metabolism phenotype of ccRCC. 786-O cells were transfected with p32-full and p32-74-174, **(A)** Lactate levels and **(B)** ATP levels were examined. **(C)** PDH activity were examined in p32 overexpression 786-O cells within gradient copper and elesclomol stimulation.

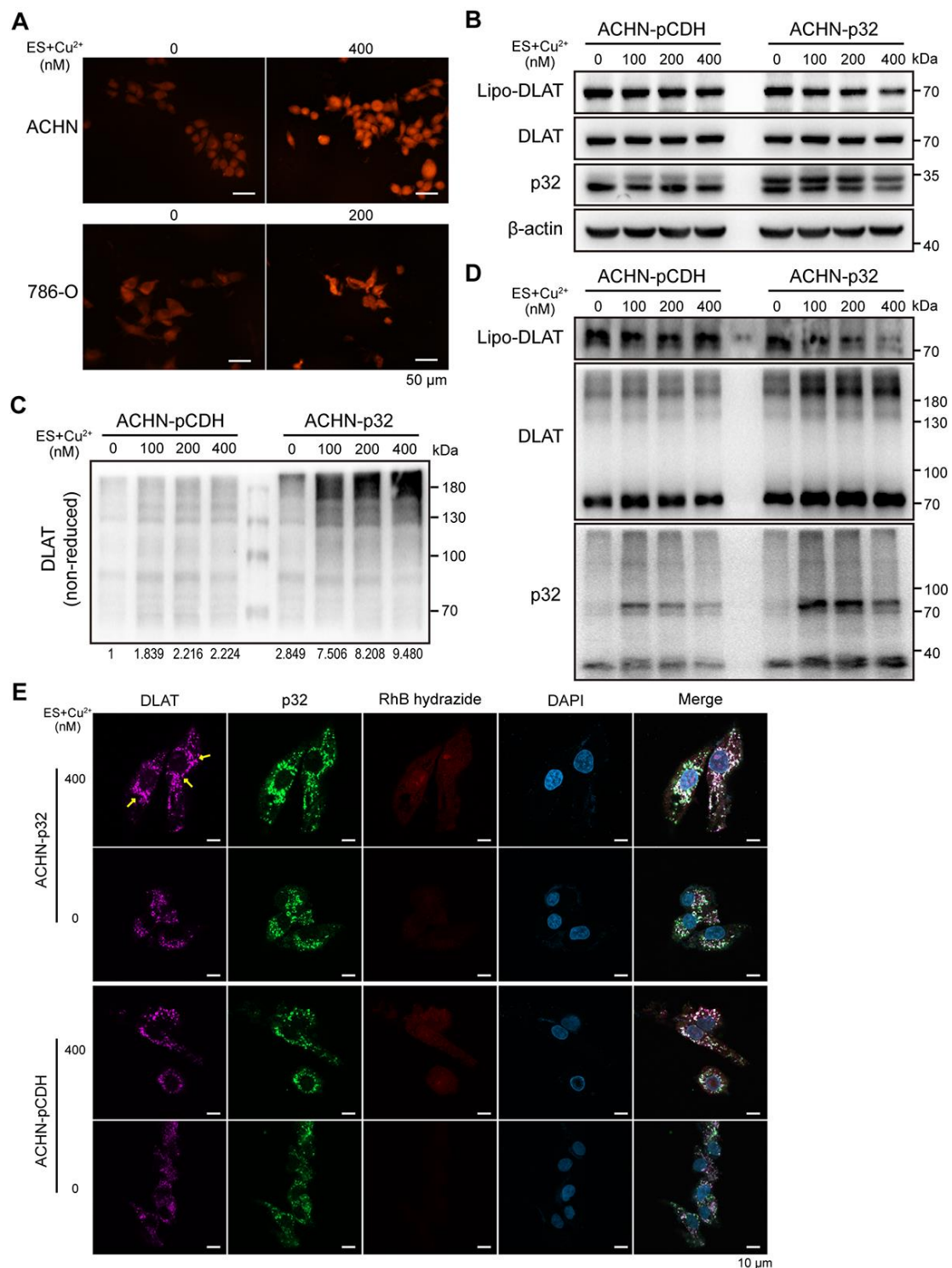


Figure S3. p32 promotes copper-induced oligomerization of lipo-DLAT in ACHN cells. **(A)** ACHN and 786-O cells were treated with or without elesclomol and CuSO₄ at a suitable drug concentration that did not affect cell morphology for 24 h, and then the intracellular copper ion content was observed under a microscope by adding rhodamine B hydrazide probe. ACHN-pCDH and ACHN-p32 cells were treated with concentration gradients of elesclomol and CuSO₄, and the cellular proteins were extracted. **(B)** Western blotting showed the expression of the specified protein

indicators after protein denaturation, **(C)** Non-reducing western blotting showed the expression of DLAT oligomers and **(D)** Western blotting showed the expression of the specified protein indicators after crosslinking protein. The relative quantification of the gray value of the bands was analysed with ImageJ software. **(E)** Immunofluorescence images showing the expression of indicated proteins after treating with or without 400 nM elesclomol and CuSO₄ for 24 h in ACHN-pCDH and ACHN-p32 cells. The yellow arrow points to the DLAT foci.

Supplementary Tables

Table S1. The sequences of DLAT siRNAs

| Name | Target sequence |
|-----------|-----------------------|
| si-DLAT#1 | CCACTCTGTATCATTGTAGAA |
| si-DLAT#2 | GCTGAGTTTAGAAAGTACCTT |
| si-DLAT#3 | CCGCATCAGAAGGTTCCATTA |

Table S2. The sequence of primer (F: Forward primer; R: Reverse primer)

| Genes | Primers sequences (5' to 3') |
|----------------|---|
| <i>GAPDH</i> | F: TGCACCACCAACTGCTTAGC R: GGCATGGACTGTGGTCATGAG |
| <i>p32</i> | F: TTTGATGGTGAGGAGGAACC R: GCCTTCTTGCCATCATCATT |
| <i>DLAT</i> | F: CAGGGTGGCACTTTTACGAT R: GAAGCACCAATTGCCAAAAT |
| <i>LDHA</i> | F: TGTGCCTGTATGGAGTGGAA R: AGCACTCTCAACCACCTGCT |
| <i>PKM2</i> | F: CTATCCTCTGGAGGCTGTGC R: GAGGCTCGCACAAAGTTCTTC |
| <i>TFRC</i> | F: AAAATCCGGTGTAGGCACAG R: CACCAACCGATCCAAAGTCT |
| <i>SLC30A9</i> | F: GTCATGGGATTGCTTCATCC R: ATTCCTTTAGCCCGAGCATT |
| <i>ATP7A</i> | F: CTGGCAAGGCAGAAGTAAGG R: TTCCCCTCACAACAAGTTCC |
| <i>ATP7B</i> | F: AAGTCCCCACAATCAACCAG R: ACCAACACGGAGAGAACACC |

| | |
|----------------|---|
| <i>CP</i> | F: ATCCGTGGGAAGCATGTTAG R: TGAGTCACTTCCAGGTGCTG |
| <i>SLC31A1</i> | F: CAGCATTTCGCTACAATTCCA R: GGTGAGGAAAGCTCAGCATC |
| <i>CS</i> | F: GCAGAAGGAAGTTGGCAAAG R: CGCGGATCAGTCTTCCTTAG |
| <i>IDH2</i> | F: CTCATCAGGTTTGCCCAGAT R: AGGAAGTCCGTGGTGTTCAG |
| <i>OGDH</i> | F: GGAATCAGCACTTCCTCTGC R: CAGGGGTCTCAAACCTTCTGC |
| <i>MDH2</i> | F: GCAGCCACTTTCACCTTCTCC R: GCTGTTCAGGTCCGAGGTAG |
| <i>ACO2</i> | F: GTCACGTCCCCAGAGATTGT R: CCTCCAGCCTGAACTTCTTG |
| <i>SDHB</i> | F: GGAAGGCAAGCAGCAGTATC R: ATTTGTCTCCGTTCCACCAG |

Table S3. The basic situation of selected patients in the TCGA datasets

| Characteristics | Total (N) | Unavailable number (N) |
|------------------------|------------------|-------------------------------|
| Age | 539 | 0 |
| <=60 | 269 | |
| >60 | 270 | |
| Gender | 539 | 0 |
| Female | 186 | |
| Male | 353 | |
| Race | 532 | 7 |
| Asian | 8 | |
| Black or African | 57 | |

| | | |
|-------------------------|------------|------------|
| White | 467 | |
| T stage | 539 | 0 |
| T1 | 278 | |
| T2 | 71 | |
| T3 | 179 | |
| T4 | 11 | |
| N stage | 257 | 282 |
| N0 | 241 | |
| N1 | 16 | |
| M stage | 506 | 33 |
| M0 | 428 | |
| M1 | 78 | |
| Pathologic stage | 536 | 3 |
| Stage I | 272 | |
| Stage II | 59 | |
| Stage III | 123 | |
| Stage IV | 82 | |
| Histologic grade | 531 | 8 |
| G1 | 14 | |
| G2 | 235 | |
| G3 | 207 | |
| G4 | 75 | |
