

## ORIGINAL ARTICLE

# Features of monocyte-derived dendritic cells encompassing a rare subpopulation of cells that are capable of natural internalization of extracellular dsDNA

Anastasia S. Proskurina<sup>1</sup>, Alisa V. Spaselnikova<sup>1,2</sup>, Genrikh S. Ritter<sup>1,2</sup>, Evgenia V. Dolgova<sup>1</sup>, Ekaterina A. Potter<sup>1</sup>, Margarita V. Romanenko<sup>2</sup>, Sergey V. Netesov<sup>2</sup>, Yaroslav R. Efremov<sup>1,2</sup>, Oleg S. Taranov<sup>3</sup>, Nikolay A. Varaksin<sup>4</sup>, Tatiana G. Ryabicheva<sup>4</sup>, Aleksandr A. Ostanin<sup>5</sup>, Elena R. Chernykh<sup>5</sup>, Sergey S. Bogachev<sup>1</sup>

<sup>1</sup> Institute of Cytology and Genetics, Siberian Branch of the Russian Academy of Sciences, 10 Lavrentiev Avenue, Novosibirsk 630090, Russia

<sup>2</sup> Novosibirsk State University, 2 Pirogova Street, Novosibirsk 630090, Russia

<sup>3</sup> The State Research Center of Virology and Biotechnology "Vector", Koltsovo, Novosibirsk Region 630559, Russia

<sup>4</sup> JSC "Vector-best", Koltsovo, Novosibirsk Region 630559, Russia

<sup>5</sup> Research Institute of Fundamental and Clinical Immunology, 14 Yadrintsevskaya Street, Novosibirsk 630099, Russia

**Correspondence:** Anastasia S. Proskurina, Institute of Cytology and Genetics, Siberian Branch of the Russian Academy of Sciences, 10 Lavrentiev Avenue, Novosibirsk 630090, Russia.: A. Proskurina

[asproskurina@gmail.com](mailto:asproskurina@gmail.com)

To cite this article: Proskurina AS, Spaselnikova AV, Ritter GS, Dolgova EV, Potter EA, Romanenko MV, Netesov SV, Efremov YR, Taranov OS, Varaksin NA, Ryabicheva TG, Ostanin AA, Chernykh ER, Bogachev SS. Features of monocyte-derived dendritic cells encompassing a rare subpopulation of cells that are capable of natural internalization of extracellular dsDNA. *Eur. Cytokine Netw.* 2019; 30 (2): 43-58. doi: 10.1684/ecn.2019.0427

**ABSTRACT.** The present study demonstrates that monocyte-derived dendritic cells (moDCs) produced *in vitro* using a GM-CSF and IFN- $\alpha$  differentiation protocol encompass a rare (~5%) subpopulation of cells showing classical dendritic cell morphology and capable of natural internalization of extracellular self-DNA. We established that DEFB, HMGB1, LL-37 and RAGE antigens, which mediate the process of DNA internalization, are expressed on the surface of moDCs similar to plasmacytoid dendritic cells. However, in contrast to the latter subpopulation, these cells do not produce interleukin (IL)-37. Nonetheless, the process of DNA internalization was not in direct relation to the presence of the above antigens on the surface of these cells. Dendritic cells were sorted into total and non-DNA-internalizing populations and cytokine production was analyzed at 24-48 hours post-DNA treatment. We show that massive secretion of cytokines by dendritic cells is associated with the dsDNA-internalizing subpopulation. A total pool of IFN-moDCs secrete pro-inflammatory "first-wave" cytokines (IL-2, IL-6, IL-8, TNF- $\alpha$ ) at both 24 and 48 hours time points. The anti-inflammatory cytokines IL-4 and IL-10 were found to be modestly induced, whereas GM-CSF, G-CSF, and IFN- $\gamma$  production was strongly induced. Treatment of moDCs with dsDNA results in the up-regulated transcription of IFN- $\alpha$ , IFN- $\beta$ , IFN- $\gamma$ , IL-8, IL-10, and VEGF by 6 hours. Combined dsDNA + chloroquine treatment has a synergistic effect on transcription of only one of the genes tested, with the pro-inflammatory cytokine IFN- $\beta$  displaying the strongest fold induction by 24 hours.

**Key words:** cytokines, chloroquine, DNA internalization, receptor, TAMRA, TLR9

## INTRODUCTION

Dendritic cells (DCs) belong to the class of antigen-presenting cells responsible for the development of an adaptive immune response and originate from the bone marrow resident CD34+ hematopoietic stem cells [1-5]. According to the most recently accepted classification based on differentiated expression of key transcription factors, such as interferon-regulating factors 8 and 4 (IRF8 and IRF4), three main types of DCs having different origin, functions, as well as the expression patterns of surface marker molecules and genes, are usually recognized [5]. They are plasmacytoid DC (pDC), conventional myeloid (classical) DC1 (cDC1), and conventional myeloid

(classical) DC2 (cDC2), formerly known as CD141+ and CD1c+ DCs. The recent data, based on the "time of flight" cytometry and single-cell RNA sequencing, allow recognizing the sets of marker molecules that characterize the three indicated types of DC more specifically.

Plasmacytoid DCs are present in the blood as well as in peripheral lymph organs. These cells display low MHC expression, yet following activation they are capable of massive secretion of type I IFN molecules (IFN- $\alpha$ ,  $\beta$ ). These cells become highly activated following viral infection [2, 6-10]. This type of cells does not express the myeloid-specific antigens CD11c, CD33, CD11b, CD13, but demonstrates the expression of CD303 (CLEC4C; BDCA-2), CD304 (neirinophilin; BDCA4),

CD85K (IL3T), CD85g (ILT7), FseR1, BTLA, DR6 (TNFRSF21; CB358), and CD300A [5, 11-15].

Human myeloid cDC1 display high level of CD141 (BDCA-3) expression. They share common marker antigens, such as CD13 and CD33, with cDC2, but differ in low expression of CD14, CD11c, CD11b, or CD172 (SIRPa). The expression of CLEC9A, CADM1 (NECL2), BTLA, and XCR1 antigens is also being specific for this DC subtype [16, 17].

The cDC2 subtype of myeloid DC expresses the CD1c, CB2b, FseR1, SIRPA, CD11b, CD11c, CD13, and CD33 antigens, which along with the loss of cDC1-specific markers features this DC subtype. The data obtained from the analysis of the RNA expression profile (RNAseq) revealed additional specific markers of cDC2, namely CLEC10A (CD301a), VEGFA, FCGR2A (CD32A) [5, 18]. The feature of myeloid DCs is their strong surface expression of MHC molecules as well as participation in the initiation and boosting of the T cell response.

To study the properties of DCs, cells both isolated from the organism and generated *ex vivo* are used. Most of the data characterizing the molecular processes occurring in human DC have been obtained using DC cultures derived from blood monocytes. There are several protocols for generating human DCs. The most commonly used protocol involves the cultivation of blood monocytes in the presence of GM-CSF and IL-4, and is extensively described in the investigation [19]. Another protocol is characterized by the different sets of activating factors. In this case, the adherent fraction of blood monocytes is being cultured in the presence of GM-CSF and IFN- $\alpha$ . IFN-generated, monocyte-derived DCs (IFN-moDCs) were used in our investigation as the cellular model allowing us to analyze the molecular and cellular pathways in DCs. Hence, we summarize and compare the basic features of these cells.

Phenotypic analysis of IFN-moDCs showed the following expression pattern: monocyte marker CD14 – 22.2 ± 3.6%, DC maturation marker CD83 – 34.6 ± 3.7%, activation marker of mature DCs CD25 – 25.1 ± 3.5%. More than half of the generated IFN-moDCs (65.2 ± 4.2%) were positive for CD86. As for the expression of CD1a and CD123, these markers are not universal for IFN-moDCs and are found on 10.4 ± 2.0% and 40.1 ± 3.4% of IFN-moDCs that is in line with other studies. The tested population of DCs was free of CD3 expressing lymphocytes [20].

Phenotypic heterogeneity is a hallmark of IFN-moDCs, and there is no single unique marker to their identification. Moreover, these cells significantly differ from DCs generated in the presence of GM-CSF and IL-4. IFN-moDCs retained a higher CD14 expression after maturation but down-regulate CD1a to levels lower than those on mature IL-4-moDCs [21]. The IFN-induced differentiation is irreversible and, in contrast to that driven by GM-CSF and IL-4, persists upon the removal of the cytokines [22, 23]. Exposure of monocytes to GM-CSF plus type I IFNs leads, within 3 days, to loss of plastic adherence, and appearance of typical DC morphology [22-24]. These cells maintain CD14 expression, but are not macrophages, because they are presented as floating non-

adherent cells with thin and long dendrites. IFN-moDCs express MHC molecules class I and II, co-stimulatory markers (CD25, CD40, CD80, and CD86), adhesion molecules (CD54, CD58) and cellular factors involved in antigen uptake and processing, CD8+ T cell cross-priming, and in priming of CD4+ T lymphocytes [22-27]. IFN-moDCs exhibit a combined phenotype as they display myeloid and plasmacytoid DC features associated with natural killer cell characteristics [25]. In addition to the expression of CD123, BDCA4, and low levels of CD209/DC-SIGN, these cells also express CD56 as well as cytotoxic effector molecules, like the granzymes B and M, TRAIL, and defensin- $\alpha$ 1, which are important components of the cytotoxic arsenal of natural killer cells. Last, IFN-moDCs also express a large number of TLRs including TLR1, 2, 3, 4, 5, 6, and 8. Notably, in marked contrast to IL-4-moDCs, IFN-moDCs also express high levels of TLR7 [26], which is classically found in plasmacytoid DCs.

Despite their “partially” mature phenotype, IFN-moDCs proved to be fully susceptible to undergo activation/terminal differentiation after stimulation with TLR (*i.e.*, LPS, polyI-C, ssRNA) or CD40 ligands, as revealed by the enhanced expression of accessory molecules as well as by a massive CD83 induction [22, 23]. Upon TLR or CD40 triggering, IFN-moDCs release IL-12p70, IL-23, IL-27, IL-1 $\beta$ , IL-6, and TNF- $\alpha$  and increase the expression of IL-10, IL-15, and IL-18 [22, 26, 27]. Interestingly, it has been recognized that many of the stimuli-promoting DCs maturation, including TLR ligands, monocyte conditioned medium, HSV or imiquimod, also induce the production of large amounts of type I IFNs.

Comparative analysis has revealed that IL-4-DCs and IFN-moDCs did not differ in their key functional characteristics, *i.e.*, in their ability to stimulate proliferation of T-cells in response to alloantigens as well as to induce generation of T-regulatory cells in mixed leukocyte culture. IFN- and IL-4-induced DCs possess similar ability of boosting T-cells to produce Th1/pro-inflammatory (IFN- $\gamma$ , IL-2, IL-1 $\beta$ , TNF- $\alpha$ , IL-12, IL-17) and Th2/anti-inflammatory cytokines (IL-4, IL-6, IL-10, IL-13), growth factors (G-CSF, GM-CSF, IL-7), and chemokines (IL-8, MIP-1 $\beta$ ). Nevertheless, IFN-DCs have a more pronounced stimulatory effect upon the Th1 and Th2 cells, thus manifesting as a significantly higher IFN- $\gamma$ , IL-5, and MIP-1 $\beta$  production. IFN-DCs were characterized by more prominent ability to activate Th1-cells, and by moderate Th2-stimulatory activity, which is absent in IL-4-DCs [28]. A direct comparative analysis of two *ex vivo* generated populations of DC characterizes them precisely as the cultures of DCs and testifies to their functional identity both among themselves and with above-described subtypes of DCs. Such an observation presumes the possibility to extrapolate the results obtained in experiments with the IFN-moDCs population to other types of DCs, both native and *ex vivo* generated.

To exert their antigen-presenting properties, DCs of any origin have to be activated. Major molecular players and pathways involved in DC activation are well-characterized. Such activators are exogenous

infectious ligands (pathogen-associated molecular patterns, PAMPs) and endogenous molecules that are released during host tissue injury/death (damage associated molecular patterns, DAMPs) [29-32].

To generate mature DCs *ex vivo*, standard maturation stimuli such as TNF- $\alpha$  in combination with IL-1 $\beta$  and prostaglandin E2 [33], LPS, polyI-C, ssRNA, CD40 ligands, monocyte conditioned medium, HSV or imiquimod [28] are commonly used.

It is known that double-stranded DNA of various origins, in various forms and independently of the nucleotide sequence, is capable of activating DCs and macrophages [34-39]. Stimulating effect of DNA is being exerted as increased expression of MHC class II antigens and co-stimulatory molecules, as well as the synthesis of immunomodulatory cytokines, which largely determines the direction and severity of immune responses [34, 36-38, 40-42]. Many of the discrepancies between the studies of DNA immunogenicity may originate from the differences in the exact source of the DNA, the way it was delivered to the cells and the very cells that were analyzed. Bacterial DNA is known to be a potent immunostimulant due to its high content of non-methylated CpG dinucleotides, with immune reaction unfolding *via* a cytosolic TLR9 sensor. Similarly, mammalian DNA may also launch an immune response through its non-methylated CpG islands (for instance, those present in the telomeric sequences) interacting with TLR9. Yet, a number of additional cytosolic sensors have also possibly been implicated in immunomodulatory activity of self-DNA [43-45], which may indicate the presence of alternative pathways of DCs activation by the extracellular DNA in double-stranded form. Thus, it has been shown that cytosolic DNA sensor stimulator of interferon genes (STING) – but not classical Toll-like receptor (TLR)-myeloid differentiation primary response gene 88 (MyD88) pathway – is required for type I IFN production. DNA is released from apoptotic cells and taken up by DCs resulting in the activation of STING and the production of type I IFN, which activates DCs for antigen cross-presentation [46].

In order to activate a DC, the extracellular DNA have to get into its internal compartments. For example, bacterial DNA complexed with bacterial wall components (LPS) is delivered to the cell interior *via* TLR4 pathway where its unmethylated CpGs are sensed by TLR9. This leads to the activation of type I IFN production and launching of the immune response [10, 45, 47-53]. Relatively little is known about the molecular mechanisms that underlie the internalization of extracellular dsDNA, either exogenous non-bacterial or self-DNA, into DCs. Until recently, self-dsDNA was believed to become internalized by DCs *via* some form of endocytosis [43, 54-57]. Nonetheless, reports from the past several years argue that free dsDNA found in the blood plasma or interstitial space may become internalized by DCs *via* a receptor-mediated mechanism. Plasmacytoid DCs have been shown to engulf extracellular self-DNA *via* LL37, HMGB1, RAGE, or DEFB, which results in their further maturation [57-67]. And thus, the long-time existing paradigm of tolerance of antigen-presenting DCs to “self-DNA” can now be reconsidered.

The ability of extracellular dsDNA to activate antigen-presenting properties of DCs has long been studied in our group. Throughout our experiments, a standardized dsDNA preparation is used. This preparation referred to as Panagen has been extensively characterized in phase II clinical studies [68] and is a drug substance certified in both Russian and international regulatory agencies. We produced monocyte-derived DCs using a GM-CSF + IFN- $\alpha$  protocol (IFN-moDCs), which results in formation of myeloid-type DCs. It has been reported in multiple studies that adding fragmented dsDNA as a maturation stimulus boosts antigen-presenting properties of IFN-moDCs to the level comparable to that achieved with LPS or TNF- $\alpha$  [69, 70]. Furthermore, our *in vivo* experiments indicate that DCs activated this way displayed pronounced enhancement of antitumor immune response, as suggested by their significant suppression of tumor graft growth [71-73]. We asked whether DCs activation was dsDNA internalization-mediated or not. Our studies as well as literature data suggested that professional properties of DCs were indeed dependent on internalization of dsDNA into DC compartments [45, 49, 51, 70, 74-79].

In the present study, we explored the dynamics and the effects of TAMRA-labeled dsDNA probe internalization by a rare subpopulation of IFN-moDCs that display classical DC morphology. We observed no direct functional (receptor-ligand) connection between DNA internalization into IFN-moDCs and the surface expression of several internalization factors (DEFB, HMGB1, LL-37 and RAGE) that were reported to mediate DNA internalization into plasmacytoid DCs. We next characterized dsDNA-induced expression changes in a panel of cytokines at both the protein (17 Plex, 8 Plex) and the transcript (qPCR) levels. Up-regulated expression and secretion of cytokines in activated DCs are correlated with the presence of the cell subpopulation that internalizes dsDNA.

Finally, we show that co-treatment of DCs with chloroquine and dsDNA results in elevated expression of *IFN- $\beta$*  only, not affecting the mRNA expression of other cytokines activated by chloroquine solely.

## METHODS

### *In vitro generation of IFN-moDCs*

Peripheral blood mononuclear cells (MNCs) were obtained by density gradient centrifugation (Ficoll-Paque, Sigma-Aldrich) of heparinized whole blood samples from 3 healthy volunteers. Informed consent was obtained from all donors. IFN-moDCs were generated by culturing plastic-adherent MNC fraction in RPMI-1640 medium (Sigma-Aldrich) supplemented with 0.3 g/l L-glutamine,  $5 \times 10^{-3}$  M HEPES buffer, 0.1 g/l gentamicin, and 2.5% fetal calf serum (FCS, Sigma-Aldrich) in the presence of rhGM-CSF ( $4 \times 10^{-5}$  g/l, Sigma-Aldrich) and rhIFN- $\alpha$  (Roferon-A,  $10^6$  U/l, Roche, Switzerland) for 4 days at 37 °C and in a 5% CO<sub>2</sub> atmosphere [20]. The viability of obtained IFN-moDCs determined by Trypan blue exclusion

was above 85-95%. The cell yield was an average of  $(0.1 \pm 0.009) \times 10^6$  IFN-moDCs/ $10^6$  MNCs. All the experiments were performed with freshly generated DCs.

### ***Internalization of TAMRA-DNA***

DCs were incubated with Alu-TAMRA-DNA ( $3 \times 10^{-7}$  g/1  $\times 10^6$  cells) for 1 hour at room temperature in the dark as described [80]. Cells were washed, resuspended in PBS, and subjected to microscopy analysis.

### ***Fluorescence microscopy***

Slides were prepared using cytospin and a drop of DABCO antifade supplemented with  $4 \times 10^{-4}$  g/l DAPI was added. Fluorescence microscope Axioskop 2 plus (using AxioVision LE software) was used for imaging and analysis.

### ***Quantification of pGFP plasmid DNA internalization***

0.7 million DCs were incubated with  $6.6 \times 10^{-7}$  g of HindIII-digested pGFP (4733 bp) for 1 hour at room temperature. The cells were washed three times and treated with DNase I (0.05 g/l) at  $37^{\circ}\text{C}$  for 1 hour. The cells were washed three more times and treated with proteinase K (0.2 g/l) at  $58^{\circ}\text{C}$  for 1 hour. After washing, the cells were lysed in 1% SDS, 0.1 M EDTA, and the lysate was subjected to phenol-chloroform extraction and isopropanol precipitation. DNA pellet was dissolved in  $2 \times 10^{-4}$  l water. Each rtPCR reaction used  $5 \times 10^{-6}$  l of DNA template. DNA quantification in the samples of interest was done using a standard curve approach.

### ***Human DNA preparation***

Human DNA preparation was manufactured from placentae of healthy women (negative for HIV, syphilis, hepatitis B and C). Phenol-free method was used to isolate total DNA. DNA was sonicated down to the fragments ranging 200-6000 bp and filtered through the 0.22 mkm filter. This preparation is a pharmacopeial drug (patented under the trademark Panagen) registered as LSR No. 004429/08 of 09.06.2008).

### ***17 plex and 8 plex analysis***

DCs were incubated with  $3 \times 10^{-7}$  g Alu-TAMRA-DNA/million cells in a serum-free medium for 1 hour at room temperature in the dark. Cells were then flow sorted on Cell Sorter SH800 (Sony Biotechnology, USA) into pools of  $2 \times 10^5$  TAMRA – cells (figure 3A) per well. The total pool of untreated by the TAMRA-labeled DNA probe IFN-moDCs, consisting of cells both capable and unable of capturing the TAMRA-DNA probe, were subjected to “sort-mimicking” procedure on the FACS with following sampling by  $2 \times 10^5$  cells per well.

Human DNA was added to the cells to the final concentration of 0.01 g/l, with control cells left

untouched. The cells were incubated for 24 or 48 hours in the dark in  $\text{CO}_2$  incubator, and cell supernatants were then aspirated for cytokine Bioplex analysis. Prolonged incubation of sorted DCs with DNA preparation was required to assure that the cells received enough DNA, which is consistent with the protocols used in our previous studies.

All analyses were performed with a magnetic bead suspension array kit of Bio-Plex Pro Human Cytokine 17 and 8 Plex panels according to the manufacturer's instructions. The results were analyzed using the Luminex LX100/200 platform and Bio-PlexManager 4.0 software (Bio-Rad Laboratories). The 17 Plex included IL-1 $\beta$ , IL-2, IL-4, IL-5, IL-6, IL-7, IL-8, IL-10, IL-12p70, IL-13, IL-17, G-CSF, GM-CSF, IFN- $\gamma$ , MCP1, MIP-1 $\beta$ , and TNF- $\alpha$ . The 8 Plex kit included IL-2, IL-4, IL-6, IL-8, IL-10, GM-CSF, IFN- $\gamma$ , and TNF- $\alpha$ . For statistical purposes, values that were below the lowest limit of detection were assigned the value of the lowest limit of detection.

### ***Immunofluorescent detection of LL37, HMGB1, RAGE, and DEFB***

DCs were obtained from 6 healthy volunteers.  $1.5-2 \times 10^6$  DCs were fixed in a 4% paraformaldehyde in PBS for 1 hour at  $+4^{\circ}\text{C}$ . The cells were spun down for 10 minutes at 400 g, and resuspended in  $10^{-3}$  l PBS supplemented with 10% FCS to block nonspecific binding. Following 10 minutes incubation at room temperature, the cells were centrifuged at 400 g for 10 minutes, resuspended in PBS, and split into  $10^{-4}$  l aliquots. Primary antibodies specific for HMGB1, LL37, DEFB, and RAGE (Sino Biological or Sony Biotechnology) were added to the cells to a final concentration of 0.015 g/l, and incubation proceeded at room temperature for 1 hour. Following two PBS washes, secondary antibodies (FITC Goat anti-mouse or DyLight 488 Donkey anti-rabbit conjugates) were added to the final concentration of 0.01 g/l and incubated for 1 hour at room temperature. Cells were then washed twice with PBS and transferred onto glass slides. 500-2000 cells per slide were routinely scored to establish the percentage of positive cells.

### ***DC treatment for cytokine expression profiling***

DCs were produced from donor monocytes using the GM-CSF + IFN- $\alpha$  protocol. DCs from three donors were used: i) intact DCs (control); ii) DCs + chloroquine ( $10^{-4}$  M); iii) DCs + dsDNA (0.01 g/l); iv) DCs + chloroquine ( $10^{-4}$  M) + dsDNA (0.01 g/l). The cells were incubated for 6 and 24 hours, followed by mRNA isolation and cDNA preparation. The concentration of  $10^{-4}$  M for chloroquine was chosen based on the reported experimental data [81, 82].

### ***cDNA synthesis***

PolyA mRNA was isolated using an appropriate kit (Medigen, Russia). This material was then used for

cDNA synthesis (GoTaq 2-Step RT-qPCR System (Promega, USA)). The RNA and cDNA samples were stored at  $-70^{\circ}\text{C}$ .

### Real-time qPCR

Real-time qPCR was performed using SYBR<sup>®</sup> Green PCR Master Mix and the qPCR machine from Applied Biosystems<sup>®</sup>. Data were internally normalized for the expression of *RPLP0* [83]. The HPLC-purified oligonucleotides used in the qPCR experiment have been purchased from Biosset Ltd and their sequences are shown in *table S1* in the supplementary material. Relative expression values were measured using the  $\Delta\Delta\text{Ct}$  approach. REST 2009 software was used for statistical data processing.

## RESULTS

### Internalization of TAMRA-DNA probe by IFN-moDCs

Previously, we used TAMRA-labeled DNA probe as a tool to dissect the process of DNA internalization by various stem- and stem-like cell populations [80, 84-87]. In the present study, we resorted to the standard and well-characterized technique of dsDNA internalization by IFN-moDCs. We show that 2-5% of cultured monocyte-derived IFN-moDCs become TAMRA-positive and that two modes of internalization exist (*figure 1A, B*). The first mode results in the cytoplasmic localization of the probe as dispersed spots. In the second case, labeled DNA is confined to vacuole-like structures. Judging from the signal intensity, the vacuole-like structures harbor much more of labeled DNA molecules. The fact that exactly the target DNA is being internalized is further supported by our qPCR experiments measuring the uptake of linearized plasmid DNA (pGFP) by DCs (*figure 1C*). We estimate that about  $3 \times 10^4$  plasmid copies were present in each DNA-internalizing cell (which translates into  $\sim 1\%$  of the haploid genome size), given that such cells constitute only 2-5% of the total cell population.

### Surface profiling of IFN-moDCs for the presence of DEFB, HMGB1, RAGE, and LL37 specific factors implicated in internalization of extracellular DNA

Immune tolerance to self-DNA has long remained a paradigm; however, recent evidence suggests that extracellular DNA of non-bacterial origin may well reach the DCs in a specific antigen-mediated fashion thereby stimulating their antigen-presenting properties [58, 61-65]. In the context of plasmacytoid DCs, four proteins responsible for DNA internalization are known. These include anti-inflammatory peptides (LL37, DEFB), HMGB1, and RAGE. We performed immunostaining of monocyte-derived IFN-moDCs (n=6) using antibodies specific for these molecules. All examined antigens are detectable on the surface of IFN-moDCs (*figure 2*).

Next, we asked whether these antigens and TAMRA-DNA probe may colocalize (*table 1*).

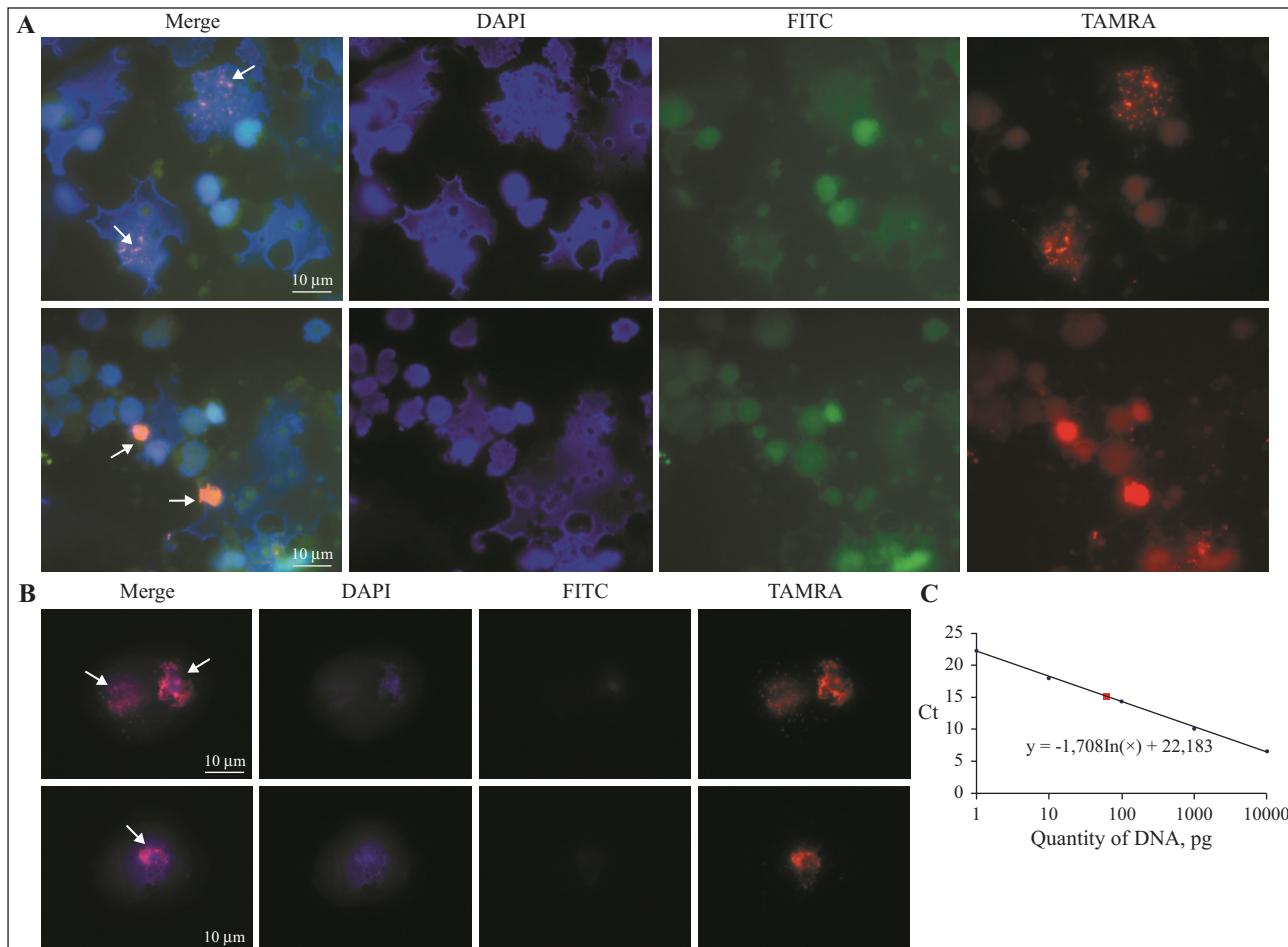
Only the minority of RAGE-, HMGB1-, and DEFB-positive cells are capable of internalizing extracellular DNA both antigen-positive and antigen-negative cells were shown to internalize DNA (*table 1*). In assays on co-detection of RAGE and HMGB1 surface antigens and internalized DNA, both antigen-positive and antigen-negative cells were shown to internalize DNA. In the similar assays on co-detection of DEFB antigen and internalized DNA, only DEFB-positive cells were found to internalize DNA.

### Cytokine secretion is mediated by TAMRA+ IFN-moDCs

One of the salient features of professional DCs is their expression and secretion of a specific set of cytokines. Given that dsDNA internalization can be used as a convenient marker, we sought to compare cytokine production and secretion in IFN-moDCs contained TAMRA+ cells and TAMRA- subpopulations of IFN-moDCs.

In our initial experiments we treated IFN-moDC cultures with TAMRA-DNA with following FACS-sorting. As well as in previous similar experiments [85], it turned out that cells that have captured DNA lose their “cell durability factors”, and thus DCs having a large surface are being destroyed upon centrifugation even at small G values. Consequently, whole DCs were extremely rare on cytological preparations. In this connection, and to standardize the conditions, the FACS-sorting procedure was used both to isolate the TAMRA- cells and to collect the total pool of IFN-moDCs consisting of cells both capable and unable to internalize TAMRA-labeled DNA probe, and that were not subjected to pretreatment by the TAMRA-labeled DNA (*figure 3A*). In this approach, it was important that the cells of both the samples were subjected to “sorting” procedure.

The cells were further incubated with the DNA preparation for different times and the level of cytokines was measured in a Plex assay. Using this approach with the total pool of IFN-moDCs, we estimated the integral response of the culture to activation by the dsDNA preparation. It is quite obvious that DNA-activated DCs of the minor subpopulation through secreted cytokines will affect the DCs unable to internalize the extracellular DNA fragments. Nevertheless, the only question had to be addressed in this work: is naked extracellular DNA able to activate the antigen-presenting properties of DCs without additional internalization factors? The production of cytokines in the population of IFN-moDCs would mean that the DCs had been activated. In the context of this task, it would not matter whether the major population of the DCs was paracrinically activated or not. Since up to now it is believed that DCs can be activated only upon internalization of extracellular DNA, the fact of initial activation can be related only to the minor subpopulation of IFN-moDCs, capable of internalizing extracellular dsDNA fragments by a natural way.



**Figure 1**  
Internalization of TAMRA-labeled AluI PCR probe into DCs and monocytes. **A)** Mature DCs, DNA probe is detectable as either diffuse spots or in vacuole-like cytoplasmic structures; **B)** Immature monocytes. The arrows indicate TAMRA signal. The images were taken using the blue, green, and red filters to show that TAMRA signal is specific; **C)** qPCR analysis of pGFP internalization by DCs. Red square on the calibration plot indicates the qPCR datapoint that was used to calculate the number of plasmid molecules internalized by DCs. As a control, the plasmid DNA isolated both from the incubation medium as well as from DNase-treated wash supernatant was used. Specific PCR products were detected in samples of DNA isolated both from the incubation medium and from the DC. In the sample of DNA isolated from the DNase-treated wash buffer, no specific PCR products were detected (not shown).

On assessing the activation of the TAMRA- cells, it was necessary to take into account the fact that this population of DCs could be partially activated by the earlier activated DCs of the minor population during incubation time with TAMRA-labeled DNA and subsequent sorting procedure, which usually took about 3 hours.

Following the sorting, the cells were incubated for 24 or 48 hours with dsDNA preparation and supernatants were analyzed using 17 Plex or 8 Plex. The experiment was repeated twice using the cells from the same donor, and the data are presented in figure 3. Cytokine levels values (in pg/ml) are in tables S2 and S3 in the supplementary material.

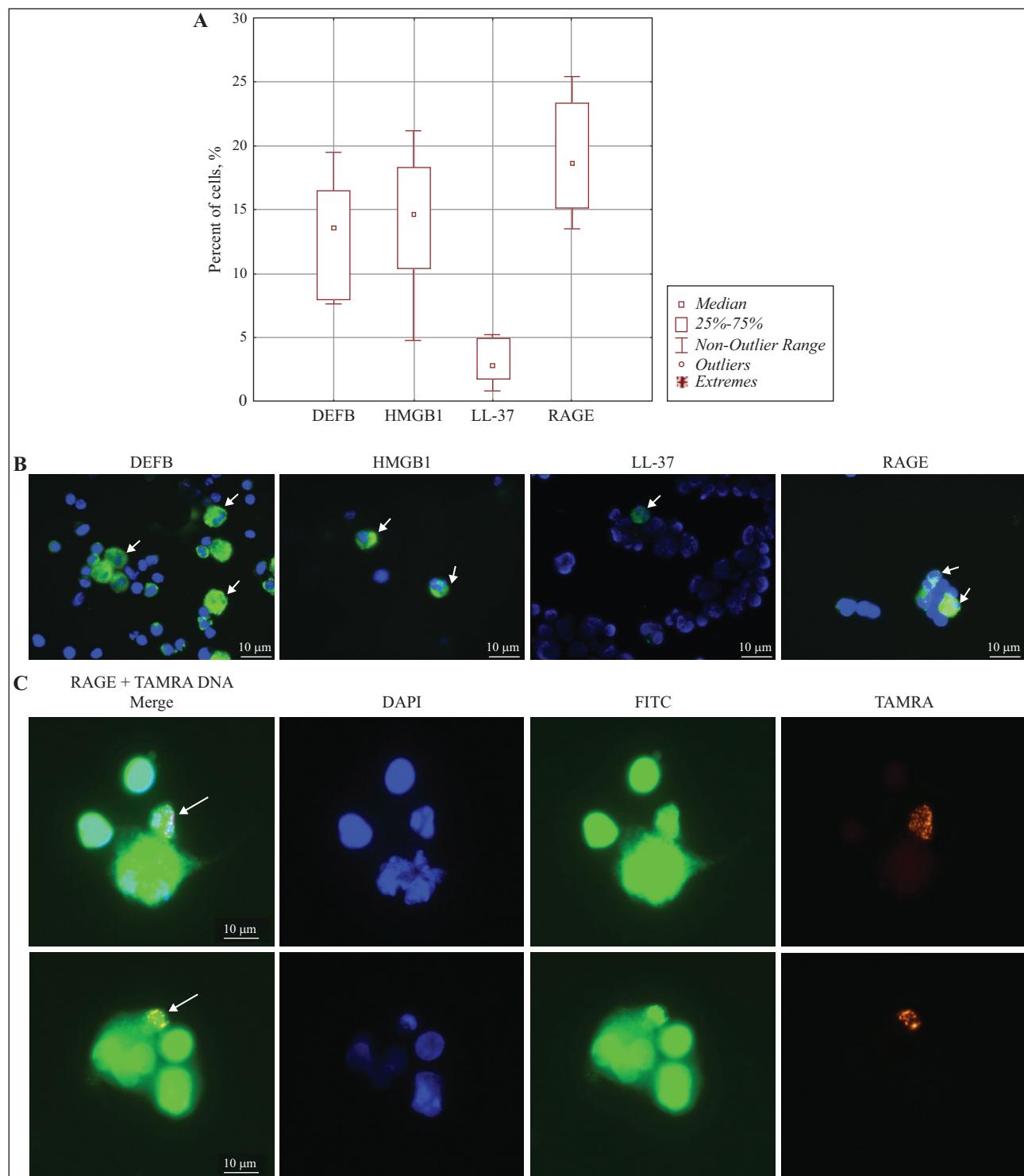
Elevated cytokine secretion was observed in the total pool of IFN-moDC population that contained TAMRA+ cells. Data on cytokine quantification performed on both Plex platforms are consistent and indicate that a total pool of IFN-moDCs secrete pro-inflammatory “first-wave” cytokines (IL-2, IL-6, IL-8, TNF- $\alpha$ ) at both 24 and 48 hours timepoints. Anti-inflammatory cytokines IL-4 and IL-10 were found to be modestly induced, whereas GM-CSF, G-CSF, and IFN- $\gamma$  showed pronounced stimulation.

Our analysis indicates that TAMRA- IFN-moDCs are capable of secreting IL-2, IL-6, IL-8, TNF- $\alpha$ , IL-12 upon induction with dsDNA.

**mRNA expression profiling of cytokine- and CD-encoding genes in human IFN-moDCs pretreated with chloroquine or not, and exposed to dsDNA for 6 and 24 hours**

Having established the correlation between cytokine production and the presence of a rare dsDNA-internalizing DCs subpopulation in the sample, we focused on a more detailed analysis of the ability of IFN-moDCs to produce specific cytokines and CDs upon incubation with extracellular dsDNA. We expected that the dsDNA-activated rare subpopulation of IFN-moDCs would serve as the major contributing factor into cytokine gene expression profile of total pool of IFN-moDCs.

We proceeded to the analysis of mRNA expression changes in selected genes (*IFN- $\alpha$* , *IFN- $\beta$* , *IFN- $\gamma$* , *IL-8*, *IL-10*, *MCPI*, *VEGF*, *CD25*, and *CD83*) in human IFN-moDCs pretreated with chloroquine or not and exposed to dsDNA for 6 and 24 hours in the absence of

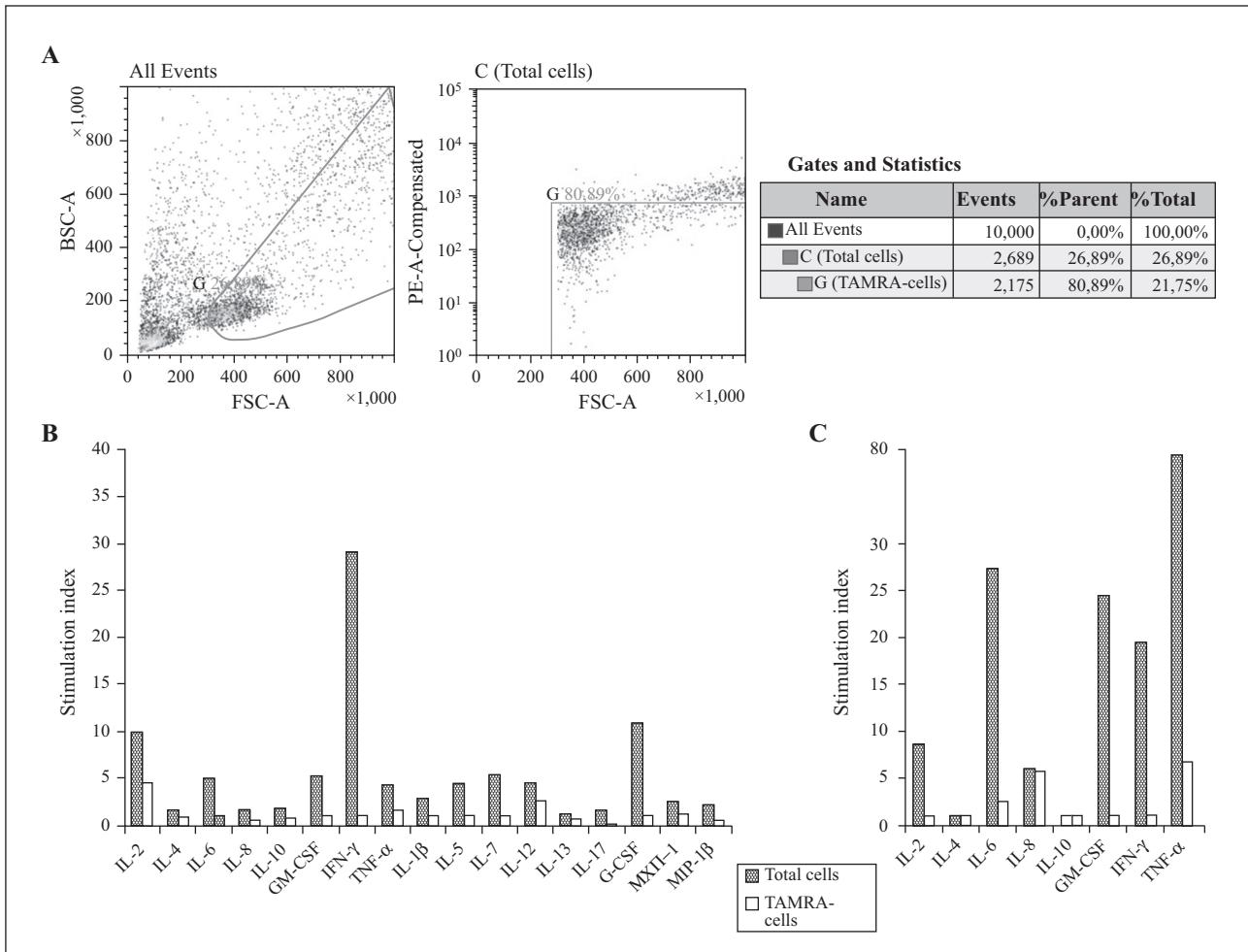
**Figure 2**

Surface profiling of IFN-moDCs for the presence of DEFB, HMGB1, RAGE, and LL37 antigens. **A)** Quantitative determination of the percent of cells carrying antigens. The data are medians and interquartile ranges for six different donors; **B)** colocalization of TAMRA-DNA (red) and RAGE-specific (green) signals in IFN-moDCs.

**Table 1**

Percentages of IFN-DCs that are positive for the surface markers of interest and internalizing Alu-TAMRA-DNA probe

Surface marker	DEFB	HMGB1	RAGE
%, Alu-TAMRA-DNA-internalizing cells	5.1	4.3	3.3
Of which receptor-positive cells, %	36	33	21
Of which receptor-negative cells, %	64	67	79



**Figure 3**

Comparison of cytokine fold induction in total cells (TAMRA+ and TAMRA- cells) versus TAMRA- cell population. **A)** gating strategy applied to IFN-moDCs incubated with TAMRA-DNA; **B)** 24 hours after incubation with human dsDNA; **C)** 48 hours after incubation with human dsDNA. Stimulation index-fold induction of cytokine levels in DNA-stimulated versus non-stimulated cells. The level of cytokines production (pg/ml) was measured in 17 or 8 Plex analysis.

transfection reagents. The results obtained are summarized in *figure 4*.

First, chloroquine treatment itself was found to up-regulate expression of several cytokine genes: at 6 hours timepoint, two transcripts, *IL-8* and *CD83*, were induced, and by 24 hours all the genes analyzed showed increased expression (*figure 4*).

When treated with dsDNA preparation alone, IFN-moDCs displayed up-regulated expression of *IFN- $\alpha$* , *IFN- $\beta$* , *IFN- $\gamma$* , *IL-8*, *IL-10*, and *VEGF* at 6 hours timepoint, with only two transcripts, *IFN- $\alpha$*  and *IL-8*, remaining up-regulated upon 24 hours (*figure 4*).

Upon joint chloroquine + dsDNA treatment, transcription of only one of the genes tested, with pro-inflammatory cytokines *IFN- $\beta$*  displaying the strongest fold induction by 24 hours (*figure 4*).

## DISCUSSION

### *Internalization of TAMRA-labeled DNA by IFN-moDCs*

The focus of the present study was on understanding whether fragmented dsDNA may be internalized into monocyte-derived DCs and activating them directly, in

the absence of transfection. We for the first time demonstrate that the monocyte-derived DCs encompass a rare (<5%) subpopulation of DCs that are indeed capable of naturally internalizing dsDNA. TAMRA-DNA is detected in such cells either in vacuoles or appears as spots unrelated to any subcellular organelles.

In our early works, it has been multiply demonstrated that it is the extracellular fragments of DNA, but not the TAMRA precursor that fall into the internal compartments of the cell. It has been proved that the radioactive label found in the nucleus refers to that incorporated into the internalized DNA and is not an artifact of S phase-related synthesis [87]. It has also been established that the internalized linear DNA undergoes partial boundary hydrolysis followed by a ligation into the ring [84].

In this study, the standardized internalization protocol we have previously developed, and which includes exhaustive DNase treatment, was used. A series of experiments on internalization was carried out. To control the internalization of TAMRA-labeled DNA probe into the DCs, the RT PCR analysis was performed, where the synthesis of a specific PCR product in the culture medium, in the last washing

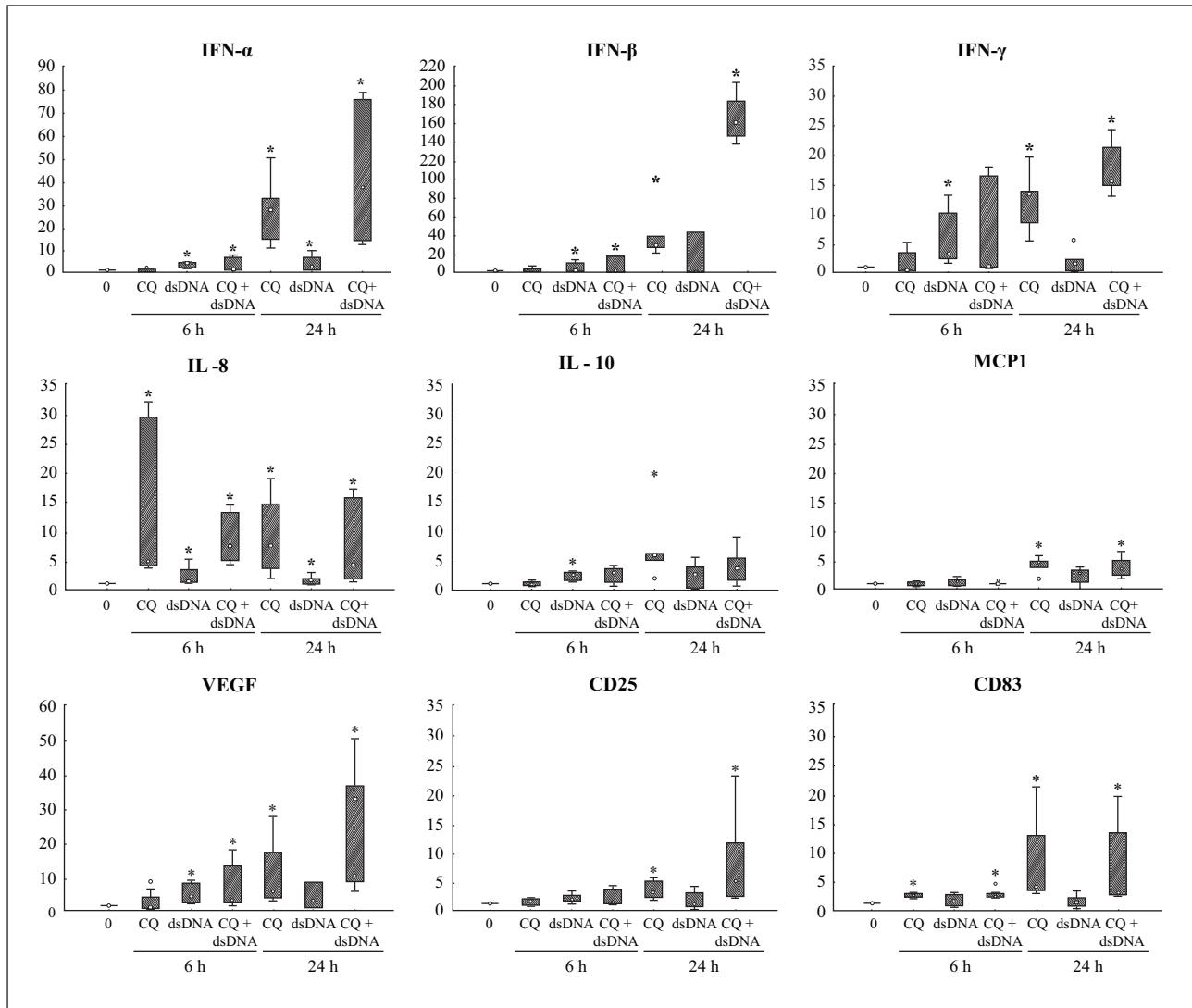


Figure 4

Changes in mRNA expression of cytokine- and CD-encoding genes in human IFN-moDCs treated with an appropriate preparation for 6 or 24 hours normalized to the basal expression of the corresponding genes in intact DCs, detected in Real-time PCR experiments. 0: intact DCs (control); CQ: chloroquine-pretreated cells; dsDNA: cells incubated with dsDNA; CQ+dsDNA: chloroquine-pretreated cells incubated with dsDNA. Data have been normalized to the control datapoint. Data are shown in accordance with the results of Real-time PCR performed as triple tests for each of three donors. Quartile range (25-75%) and median values for each datapoint are shown. \*  $P < 0.05$ , significant differences relatively to the control, Mann-Whitney U-test.

supernatant, and directly in DNA isolated from the DCs, was monitored. The detectable specific TAMRA signal as well as the accumulation of a specific PCR product indicate the presence of extracellular DNA in the internal compartments of IFN-moDCs.

There is a paradigm concerning the immunological tolerance of DCs to extracellular self-DNA. It is known that to activate DCs, extracellular DNA must be internalized into the cell. Under normal conditions, the amount of DNA in plasma is controlled by specific DNases and does not exceed the quantitative threshold that is supposed to destroy this tolerance [65]. Nevertheless, DCs are always being activated upon large-scale destruction of tissues. At this, it is almost impossible to determine the cause of activation of the DCs: does it relate to the excess of DNA that resulted from the necrotic destruction of cells in sterile injury, or is it the consequence of the presence of pathogens, the appearance of which always accompanies the destruction of tissues.

Recently, a number of works that testify to the existence of both a mechanism and factors for delivery of fragments of extracellular self-dsDNA into DCs of both plasmacytoid and myeloid types have appeared [88].

In the context of plasmacytoid DCs, four factors have been reported to mediate internalization of extracellular DNA [58, 61-65]. Two mechanisms of internalization have been described. In the first case, it is the capture by immune cells of complexes of DNA with antimicrobial peptides or HMGB1 that were formed in the extracellular space. Upon inflammation, antimicrobial peptides are in mass being produced and secreted by neutrophils as well as by many other types of cells including macrophages, NK cells (LL37), skin epithelial cells (LL37, DEFB) leukocytes, etc. [62, 89-92]. HMGB1 is released both upon cells destruction and under inflammation [58]. In the second case, DNA internalization is mediated by the transmembrane RAGE receptor capable of

binding both the DNA-HMGB1 complex and pure DNA itself [65].

It was suggested that IFN-moDCs could internalize extracellular dsDNA using the described factors. We performed immunostaining of IFN-moDCs with antibodies specific to these antigens, and found DEFB, HMGB1, LL-37 and RAGE present on the surface of IFN-moDCs (figure 2A, B). The percentage of cells carrying the corresponding antigens was for DEFB: 7-20%, for the protein HMGB1: 5-21%, for LL-37: 1-5%, and for RAGE: 13-25%.

From the co-detection of the surface antigens and internalized DNA, we draw the following conclusions. First, only the minority of RAGE-, HMGB1-, and DEFB-positive cells are able to internalize extracellular DNA. Second, both antigen-positive and antigen-negative cells were shown to internalize DNA. If DNA internalization were mediated by RAGE, HMGB1 and DEFB, all the cells positive for these antigens would be TAMRA+. All the mentioned above presumes no direct functional relations, which can be described in terms of receptor-ligand interaction, between the tested markers (antigen-DNA).

This makes us speculate that some DNA material may be delivered to the interior of DCs *via* yet undescribed internalization mechanism that is not directly related to the presence of the dsDNA-internalizing factors described for plasmacytoid DCs.

#### **Activation of IFN-moDCs by dsDNA preparation**

The goal of this study was to explore the induction of professional activity of monocyte-derived dendritic cells by extracellular DNA, and we performed protein secretion measurements as well as RNA expression profiling for a panel of cytokines.

So, initially, we asked whether increased cytokine production would be in any way related to the presence of the rare dsDNA-internalizing subpopulation of IFN-moDCs. To address this question, we compared cytokine secretion by the total DCs population composed of TAMRA+ and TAMRA- cells and by the TAMRA- cells performing 17 and 8 Plex assays at 24 hours and 48 hours timepoints, respectively. Fold induction was expressed as the ratio of the cytokine concentration in the samples incubated with dsDNA *versus* control untreated samples (figure 3, tables S2, S3 in the supplementary material). Our data reveal the association between induced cytokine production by IFN-moDCs and the presence of dsDNA-internalizing cells (TAMRA+). Some stimulated secretion is also observed in TAMRA- cell subpopulation. It is demonstrative that after 24 hours of incubation the most actively secreted cytokine turned out to be IFN- $\gamma$ . It is known that gene network activated by IFN- $\gamma$  is extremely broad and, in turn, induces multiple immunity-related factors [93, 94].

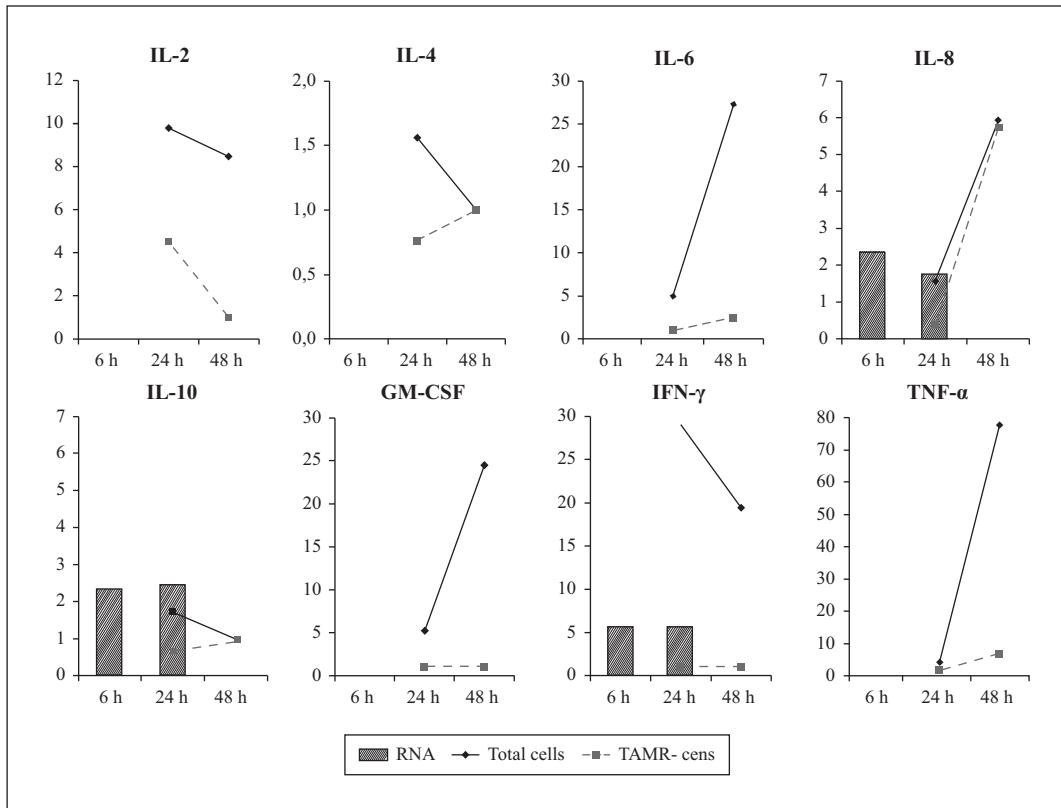
Early expression of IFN- $\gamma$  is considered to trigger the very onset of immunostimulatory reaction. We suggest that self-DNA in our experiments drives transcription of IFN- $\gamma$  followed by protein expression and secretion. Next, this induces autocrine or paracrine activation coupled with the activation of other immunity-related genes in the same or neighboring cells.

The confirmation of such a scenario is the characteristic profile of cytokine production after 48 hours of incubation of IFN-moDCs with DNA. A total pool of IFN-moDCs secrete pro-inflammatory “first-wave” cytokines (IL-2, IL-6, IL-8, TNF- $\alpha$ ). GM-CSF, G-CSF also showed pronounced stimulation.

Also, in the present study, the mRNA synthesis of various factors produced by DCs and indicating to their mature state has been estimated. Under a DNA-only regimen and in the absence of transfecting agents, we observed strong induction of the “first-wave” cytokines. Three interferon genes, IFN- $\alpha/\beta/\gamma$ , as well as chemokine IL-8 are actively expressed, particularly upon 24 hours. Both IFN- $\alpha$  and IL-8 function as the main inducers of innate immune responses by launching the differentiation, maturation, and migration of DCs to the damaged tissues or sites of inflammation [95]. LPS, bacterial DNA, and CpG demonstrate exactly the similar effect on DCs, which may testify to that molecular pathways activating the cytokine genes are exactly the same both for conventional ligands and for self-DNA [45, 49, 51, 78, 79, 96]. The data obtained are in agreement with the results of the Plex analysis of secreted cytokines in the supernatant of IFN-moDCs activated by dsDNA. Of note the dsDNA-stimulated expression of IFN- $\gamma$  mRNA during the first 6 hours is correlated with the kinetics of mature cytokine production, the peak of which is being observed after 24 hours of incubation of IFN-moDCs with the dsDNA preparation. Very similar observations were made by Huang *et al.* [97], who showed that response to DNA (present in HKBA heat-killed *Brucella abortus*) reaches its maximum in treated animals at 6-8 hours post-induction.

Summarizing the results of the analysis of the expression of cytokine genes and their products, it is necessary to emphasize once again that the DNA preparation mainly affects the synthesis of mediators of inflammation of the first-wave. It must be noted that the “first-wave” mediators (IFN- $\alpha/\beta$ , TNF- $\alpha$ , IL-6, IL-8) are known to directly induce innate immunity reactions (TNF- $\alpha$ , IFN- $\alpha/\beta$ ), to recruit neutrophils into the sites of damage/inflammation (IL-8), as well as to induce expression of acute-phase proteins in hepatocytes (IL-6). IFN- $\alpha$  is also one of the key inducers of adaptive Th1-type immune response. IFN- $\alpha$  was shown to protect T-cells from apoptosis, whereas IL-6 can inhibit the activity of CD4+ CD25+ T-reg. Importantly, IFN- $\alpha$  and IL-6 also boost the differentiation and maturation of DCs from hematopoietic progenitors [98], thereby providing the replenishment of antigen-presenting cells in the sites of damage or inflammation.

Finally, we included chloroquine, a nonspecific TLR9 inhibitor, as a pretreatment to modulate the possible effects of dsDNA on IFN-moDCs. Our experiments indicate that dsDNA + chloroquine combination synergistically affected the IFN- $\beta$  gene transcription only. Chloroquine is broadly known as an antimalarial drug [99]. It is a small lipophilic weak base that can freely diffuse across the cell membrane in a deprotonated form [99]. Once in the cytoplasm, it reaches acidic cellular compartments – endosome and lysosomes, where it becomes protonated and accumulated. This is

**Figure 5**

Comparisons of protein and transcript fold induction levels for total (TAMRA+ and TAMRA- cells) *versus* TAMRA- cells, 24 and 48 hours post-incubation with human dsDNA. The y-axis shows fold induction (ratio of the cytokine concentration (dots) or average cytokine transcript levels (columns) in treated *versus* untreated samples); incubation time is shown on the x-axis.

accompanied by increase in pH and so prevents endosomal acidification [100].

Chloroquine inhibits many molecules in the cell, related to reduction of lysosomal acidification, including TLR9.

This inactivation results in the failure of pro-inflammatory cytokine gene network to become activated in response to internalization of bacterial DNA enriched with non-methylated CpGs [101]. This property of chloroquine is frequently used in experiments when the TLR9 signaling pathway needs to be turned off [10, 95, 97, 102, 103]. Chloroquine displays yet another striking property. It was demonstrated that at 100-fold lower concentrations, chloroquine also abrogates TLR9-dependent signaling, and this occurs under unperturbed pH in the endosomes. In this case, chloroquine directly interacts with foreign internalized dsDNA thereby outcompeting TLR9 [104, 105]. In our assay, we found that chloroquine exposure directly stimulated expression of *IFN-α/β*, *IFN-γ*, *IL-10*, *VEGF*, *IL-8*, *MCPI*, as well as of the marker of mature DCs *CD83*, which was particularly pronounced upon 24-h long incubation. We speculate that chloroquine acts in this case *via* ROS-mediated mechanism (by activating NOX and ultimately NFkB) and so it induces a broad range of interferons, cytokines, and chemokines [106-108].

The observed synergistic effect of chloroquine and dsDNA preparation only on the *IFN-β* gene transcription could be due to two facts. First, chloroquine abrogates the activation of pro-inflammatory cytokines by destroying acidified cytoplasmic compartments.

Second, the internalized DNA, *via* the cytoplasmic sensors, activates the transcription of *IFN-β* [77, 109].

We established the correlation between the dynamics of cytokine transcripts and protein levels. In our assays, the induction of three cytokines (IL-8, IL-10, IFN-γ) was measured at both RNA and protein levels (figure 5), and expectedly the changes in the transcript levels were consistent with and preceded those of the protein products.

## CONCLUSIONS

At present, much attention is paid to the issues of the ontological relationships between the multitude of subpopulations within the mononuclear phagocyte system and especially the DCs. The use of modern ontogenetic, transcriptional, and proteomic research approaches has led to the identification of numerous new subpopulations of mature DCs and their bone marrow precursors with inevitable subsequent erosion of clearly established ontogenetic and functional differences between conventional DCs types either obtained from *in vivo* or generated *ex vivo* [4, 5, 110]. The data obtained in this study suggest that in the mononuclear phagocyte system there may additionally be a small population of trigger DCs capable of being activated by the extracellular dsDNA fragments to lead to the expansion and increasing of the activating signal for various DCs populations.

Further, to fully characterize the newly identified DCs population, it is necessary to perform its molecular

typing, and comparative analysis with already known and characterized ones.

**Disclosure.** Authors declare that there is no conflict of interest. **Acknowledgments:** This study was funded by the

Russian state project [0324-2019-0042] and grant from the Russian Fund for Basic Research [16-34-00007].

## SUPPLEMENTARY DATA

Supplementary data (tables S1, S2 and S3) associated with this article can be found, in the online version, at doi:10.1684/ecn.2019.0427.

### Supplementary data

**Table S1**  
Sequences of oligonucleotides used in the qPCR experiment.

Gene name	Primer name	Length, b	Sequence	Optimal annealing temperature, °C	PCR product size, bp
			5'- 3'		
<i>IFN-α</i>	for	23	CAGAGTCACCCATCTCAGCAAGC	60	118
	rev	22	CAGCCCAGAGAGCAGCTTGA		
<i>IFN-β</i>	for	21	CCTTGCTCTGGCACACAGG	58	189
	rev	23	CATTCAATTGCCACAGGAGCTT		
<i>IFN-γ</i>	for	23	GACTTGAATGTCCAACGCAAAGC	58	140
	rev	23	CAGGACAACCATTACTGGGATGC		
<i>IL-8</i>	for	22	GCCAAGGGCCAAGAGAATATCC	58-60	177
	rev	22	GGCTAGCAGACTAGGGTTGCCA		
<i>IL-10</i>	for	23	ACGAAACTGAGACATCAGGGTGG	60	165
	rev	22	AATGGGGGTTGAGGTATCAGAGG		
<i>MCP1</i>	for	23	GCAGATGGTGGAGCTGAATATGC	60	174
	rev	23	GCTAAGCCACAGTTGCACTCATG		
<i>VEGF</i>	for	22	GAAGGAGCCTCCCTCAGGGTT	60	161
	rev	23	GCGCAGAGTCTCCTCTCCTTCA		
<i>CD-25</i>	for	23	GAATTCTTGGTAAGAAGCCGGG	58	116
	rev	20	CTTCCAAAACGCAGGCAAGC		
<i>CD-83</i>	for	22	AAGGGGCAAAATGGTTTTTCG	60	96
	rev	19	GCACCTGTATGTCCCCGAG		
<i>RPLP0</i>	for	23	AGGCCTTCTGGCTGATCCATCT	58-60	135
	rev	22	TATCCTCGTCCGACTCCTCCGA		

**Table S2**

Induced cytokine production by total (TAMRA+ and TAMRA- cells) *versus* TAMRA- cells 24 hours after incubation with dsDNA relatively to control untreated cells.

	IL-2	IL-4	IL-6	IL-8	IL-10	GM-CSF	IFN-γ	TNF-α	IL-1β	IL-5	IL-7	IL-12	IL-13	IL-17	G-CSF	MCP-1	MIP-1β	
Total cells	+DNA	36.3	26.6	33.8	8186	10.1	20.8	900.4	16.8	5.2	7.5	23.2	21.3	32.1	27.1	75.7	188	3428
	0	<3.7	17.1	<6.8	5209	5.9	<4.0	<31.0	<4.0	<1.9	<1.7	<4.4	4.8	28.5	17.6	<7.0	<78	1697
	Fold induction	9.8	1.6	5.0	1.6	1.7	5.2	29.0	4.2	2.7	4.4	5.3	4.4	1.1	1.5	10.8	2.4	2.0
TAMRA- cells	+DNA	16.7	7.0	<6.8	5090	2.5	<4.0	<31.0	6.4	<1.9	<1.7	<4.4	13.2	7.1	12.0	<7.0	92	1320
	0	<3.7	9.3	<6.8	13135	3.6	<4.0	<31.0	<4.0	<1.9	<1.7	<4.4	5.2	11.8	152.7	<7.0	<78	3101
	Fold induction	4.5	0.8	1.0	0.4	0.7	1.0	1.0	1.6	1.0	1.0	1.0	2.5	0.6	0.1	1.0	1.2	0.4

Note: Values are given in pg/ml after 17 Plex analysis. +DNA – human dsDNA preparation was added to the cells grown in serum-free medium to the final concentration of 10 mkg/ml. 0 – control cells (no dsDNA added). < indicates that the cytokine level was below the minimum detection level (indicated). Fold induction is a ratio between the cytokine levels found in the treated sample to those observed in the control. Whenever the cytokine levels measured were below the minimum detection level, the latter value was used to calculate fold induction.

**Table S3**

Induced cytokine production by total (TAMRA+ and TAMRA- cells) *versus* TAMRA- cells 48 hours after incubation with dsDNA relatively to control untreated cells.

		IL-2	IL-4	IL-6	IL-8	IL-10	GM-CSF	IFN- $\gamma$	TNF- $\alpha$
Total cells	+DNA	34	<5	327	7343	<15	611	971	310
	0	<4	<5	<12	1238	<15	<25	<50	<4
Fold induction		<b>8.5</b>	<b>1.0</b>	<b>27.3</b>	<b>5.9</b>	<b>1.0</b>	<b>24.4</b>	<b>19.4</b>	<b>77.5</b>
TAMRA- cells	+DNA	<4	<5	30	723	<15	<25	<50	27
	0	<4	<5	<12	126	<15	<25	<50	<4
Fold induction		<b>1.0</b>	<b>1.0</b>	<b>2.5</b>	<b>5.7</b>	<b>1.0</b>	<b>1.0</b>	<b>1.0</b>	<b>6.8</b>

Note: Values are given in pg/ml after 8plex analysis. +DNA – human dsDNA preparation was added to the cells grown in serum-free medium to the final concentration of 10 mkg/ml. 0 – control cells (no dsDNA added). < indicates that the cytokine level was below the minimum detection level (indicated). Fold induction is a ratio between the cytokine levels found in the treated sample to those observed in the control. Whenever the cytokine levels measured were below the minimum detection level, the latter value was used to calculate fold induction.

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