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Bioanalytical and proteomic approaches in the study of pathologic ECs dysfunctionality, oxidative stress and the effects of PFKFB3 modulators

Sarath Babu Nukala

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**Bioanalytical and proteomic approaches in the study of
pathologic ECs dysfunctionality, oxidative stress and the effects of
PFKFB3 modulators**

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Declaration of Originality

I declare that all the work presented in this thesis is my own, and that all else, figures, images, ideas, quotations, data, results, published or unpublished, have been acknowledged and referenced.

This thesis contains some modified material from my PhD progress reports.

Nukala Sarath Babu

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(Nukala Sarath Babu)

Abbreviations

3PO	3-(3-pyridinyl)-1-(4-pyridinyl)-2-propen-1-one
ABC	Ammonium bicarbonate
ACN	Acetonitrile
ACS	Acute coronary syndrome
AGEs	Advanced Glycation End-Products
AMI	Acute myocardial infarction
AOPPs	Advanced Oxidation Protein Products
AST	Aspartate aminotransferase,
BPA	Balloon pulmonary angioplasty
CAD	Coronary artery disease
CKD	Chronic kidney disease
CK-MB	Creatinine kinase-muscle/brain
CTEPH	Chronic thromboembolic pulmonary hypertension
CTPA	Computed tomography angiography
CVD	cardiovascular disease
DCFH-DA	Dichloro-dihydro-fluorescein diacetate
DMEM	Dulbecco's Modified Eagle Medium
DTT	Dithiothreitol
EBM	Endothelial cell basal medium
ECG	Electrocardiogram
ECs	Endothelial cells
EGM	Endothelial cell growth medium
ESI	Electrospray ionization
FA	Formic acid
FBS	Fetal bovine serum
GA-1000	Gentamicin Sulfate-Amphotericin
GSH	Glutathione reduced
GSSG	Glutathione oxidized
HAT	Hypoxanthine-Aminopterin-Thymidine
HCAECS	Human coronary artery endothelial cells
HCD	Higher-energy collisional dissociation
HDL	High-density lipoprotein
hEGF	Human endothelial cell growth factor

HEPES	4-(2-hydroxyethyl)-1-piperazineethanesulfonic acid
hFGF	human fibroblast growth factor
HPAE	Human pulmonary artery endothelial cells
HPLC	High-performance liquid chromatography
HSA	Human serum albumin
HUVEC	Human umbilical vein endothelial cells
IAA	Iodoacetamide
ICA	Internal carotid artery
LDH	Lactate dehydrogenase
LDL	Low-density lipoprotein
MS	Mass spectrometry
Na ₃ VO ₄	Sodium deoxycholate, sodium orthovanadate
NADP	Nicotinamide adenine dinucleotide phosphate
NADPH	Nicotinamide Adenine Dinucleotide Phosphate Hydrogen
NaF	Sodium fluoride
NEM	N-Ethylmaleimide
nLC	Nano-Liquid chromatography
nLC-HRMS	Nanoscale liquid chromatography high resolution mass spectrometry analysis
NP-40	Tergitol-type NP-40
NYHAFC	New York Heart Association functional class
PAH	Pulmonary arterial hypertension
PCOs	Protein carbonyls content
PE	Pulmonary embolism
PEA	Pulmonary endarterectomy
PFKFB3	6-Phosphofructo-2-Kinase/Fructose-2,6-Biphosphatase 3
PH	Pulmonary hypertension
PMA	Phorbol 12-myristate 13-acetate
R3-IGF-1	Long R3 Insulin Like Growth Factor-1
ROS	Reactive oxygen species
RT-PCR	Reverse transcription polymerase chain reaction
SEM	Standard errors of the mean
SMC	Smooth muscle cells
SOD	Superoxide dismutase
TFA	Trifluoroacetic acid
TNF α	Tumor necrosis factor alpha

VEGF Vascular endothelial growth factor
VTE Venous thromboembolism
WHO World health organization

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PART-I

1 Introduction

A. Endothelial dysfunction and oxidative stress:

The vascular endothelium is crucial for maintaining the vascular homeostasis, platelet activity, leukocyte adhesion, thrombosis and regulation of vascular tone. The vascular endothelium is constituted by a thin layer of an endothelial cell (EC) line that interface between the circulatory system and the rest of the vessel wall.

The vascular endothelium is one of the major targets of oxidative stress, playing an important role in the development of vascular-related disorders, such as atherosclerotic disease¹. Oxidative stress increases the formation of reactive species (ROS), such as peroxides and hydroxyl radicals. ROS are signalling molecules and are able to induce leukocyte adhesion and promote the vascular endothelial permeability, that leads to the dysfunction of endothelium-related signal transduction pathways as well as redox-regulated transcription factors². ROS cause reorganization of the actin filament, formation of an intracellular gap and changes in the cell shape. The endothelium contains adherents and tight junctions that are responsible for maintaining the restrictive barrier. Figure A1 shows the subcellular endothelial sites regulated by oxidative stress. In the normal structure of vascular endothelium, the lateral cell border contains occluding protein in association with zonula occludens-1 (ZO-1); VE-cadherin in association with a-, b-, and g-catenins; other proteins such as platelet endothelial cell adhesion molecule 1 (PECAM-1). Cortical actin filaments are directly linked with ZO-1, vinculin and α -actinin, that connect catenin to VE-cadherin in actin filament network. Intercellular adhesion molecule-1 (ICAM-1) expressed on the endothelial luminal surface might also involve in cortical actin filaments. ECs continuously express surface adhesion molecules including vascular cell adhesion molecule-1 (VCAM-1), ICAM-1, ICAM-2 and P-selectin (stored in Weible-Palade bodies). However, oxidative stress causes phosphorylation and reorganization of occludin and PECAM-1, reduces levels of vascular endothelium catenins and actin-binding proteins. In the actin filament network, oxidant stress causes the increased formation of stress fibers and decreased cortical actin band, resulting in disruption of the tight and adherens junctions. ROS promote cell contraction and stress fiber formation due to the increased phosphorylation of myosin light chain (MLC). Additionally, oxidative stress functionally upregulates adhesion molecules.

Moreover, the ROS generated at the sites of vascular injury and inflammation might be involved in the destabilization of plaque rupture. At lower concentrations, ROS can act as

signaling molecules involving in the maintenance of cellular activities including cell growth and cell adaptation responses.

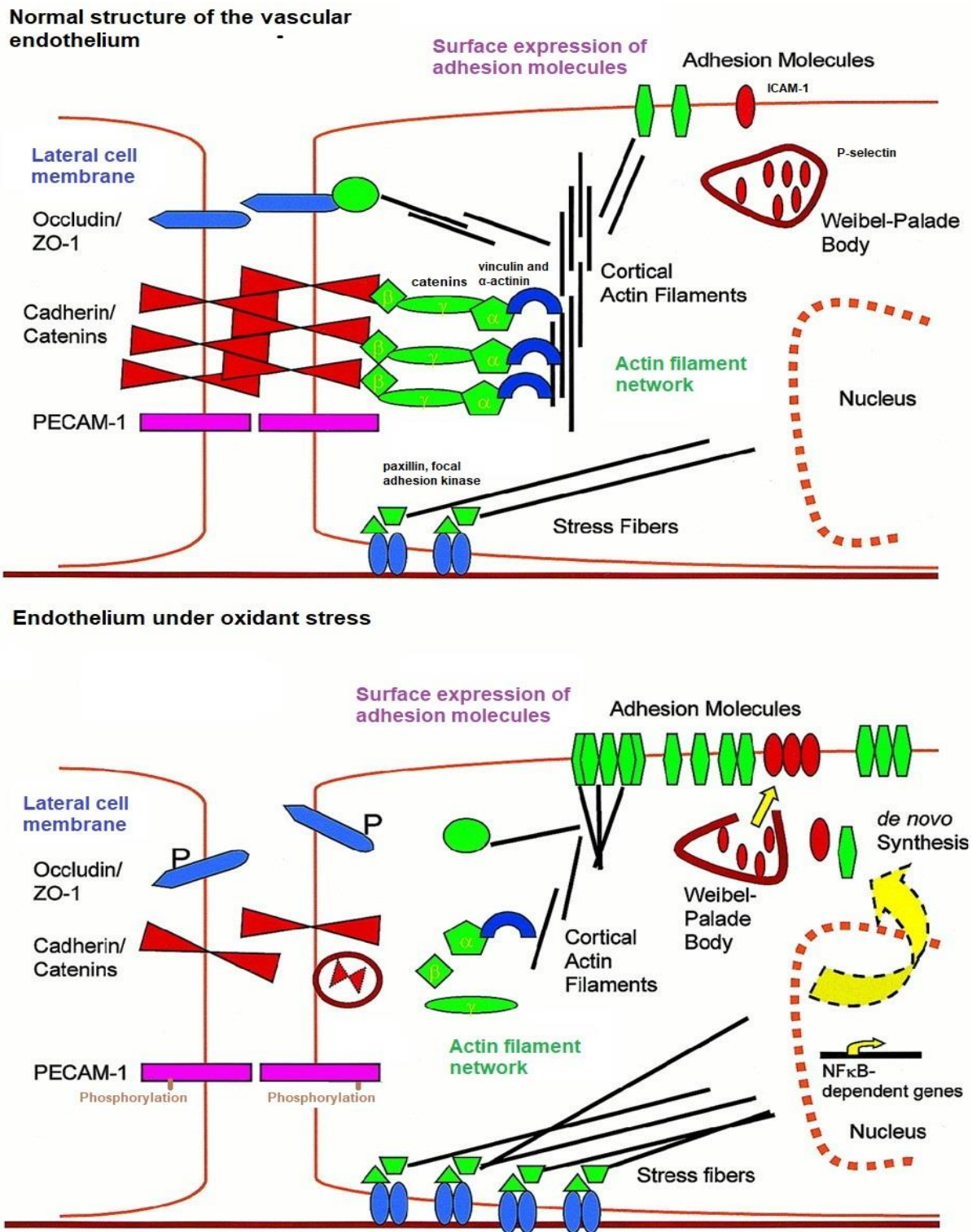


Figure A 1: Subcellular endothelial sites regulated by oxidant stress. (Adapted from Lum et al.² and modified)

The stages involved in the endothelial dysfunction of cardiovascular diseases, such as atherosclerosis, are shown in Figure A2. Diabetes, smoking, hypertension, dyslipidemia, obesity, reduced NO availability and aging are the main risk factors of oxidative stress and endothelial dysfunction, which leads to the formation of leukocyte adhesion, inflammation, lipid deposition, vascular smooth muscle cell proliferation, vasoconstriction, platelet aggregation, and thrombosis.

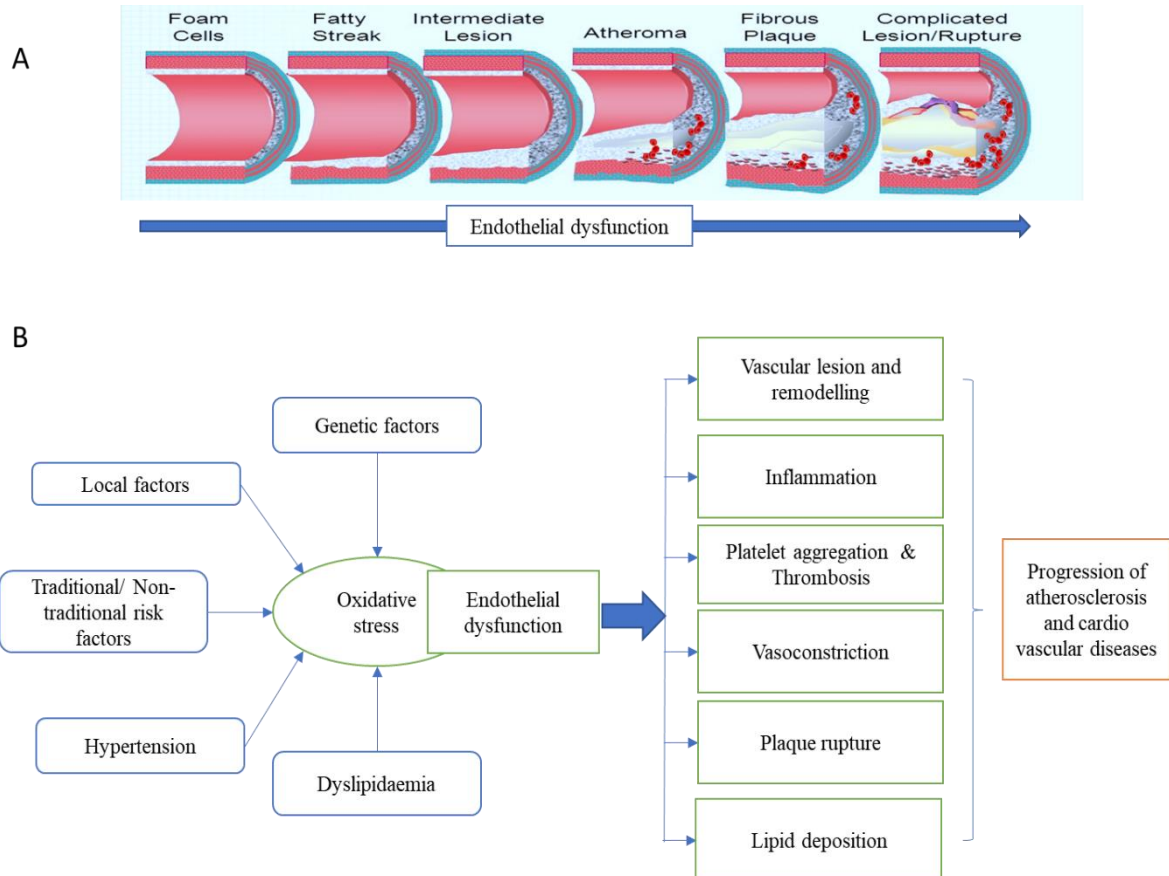


Figure A 2: A) Stages in the development of atherosclerosis. B) Various factors involved in the endothelial dysfunction in atherosclerosis.

The main characteristics of endothelial dysfunction include the reduction of bioavailability of nitric oxide (NO), impairment in the endothelium-derived vasodilators, increase in the production of endothelial-derived contracting factors of proinflammatory, proliferative molecules, and ROS. Endothelial dysfunction is also related to an impaired redox status, and procoagulatory events which are involved in the all stages of atherogenesis³⁻⁵, coronary artery disease, and myocardial ischemia⁶⁻¹⁰.

The endothelial dysfunction and oxidative stress play also an important role in the pathogenesis of acute myocardial infarction (AMI) and chronic thromboembolic pulmonary hypertension

(CTEPH)^{11,12}. However, the underlying mechanisms involved in the endothelial dysfunctionality of AMI and CTEPH diseases remains unknown.

A.1 Acute myocardial infarction (AMI):

AMI generally referred as “heart attack” is one of the subgroups of an acute coronary syndrome (ACS), along with unstable angina. The incidence, distribution, and possible control of AMI have changed significantly over the past decades. Despite major improvements achieved from the past decade in the management of patients with AMI, it remains a leading cause of hospitalization, mortality, and morbidity throughout the world. According to the recent studies, more than 2.4 million, 4 million deaths were reported in the USA; Europe and northern Asian countries, respectively¹³. AMI occurs when the supply of oxygen is reduced due to the blockage of coronary arteries of a portion of the heart and the myocardial necrosis increases (Figure A3)¹⁴. The deficiency of oxygen is intact responsible for the death of myocardial tissue.

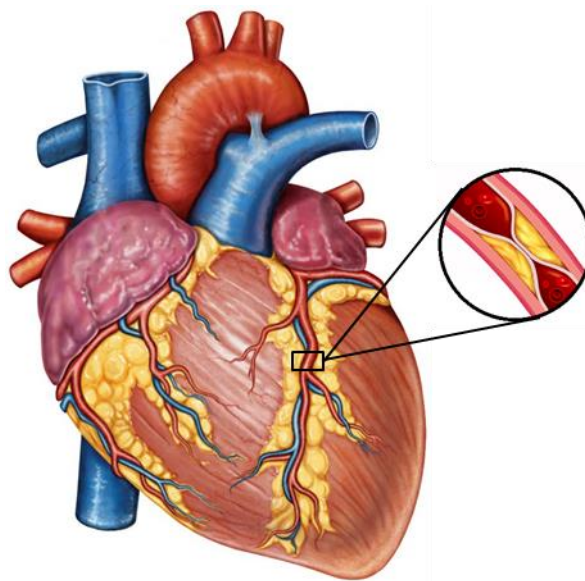


Figure A 3: Plaque formation and myocardial infarction.

Cardiac energy synthesis depends on oxidative metabolism. Occlusion of coronary artery decreases oxygen levels and increases anaerobic-dependent ATP synthesis which results in the energy starvation and cardiac cell necrosis¹⁵. Subsequent events include the reduced pH, increased concentration of cytosolic calcium (Ca^{2+}), loss of cell membrane integrity, and the release of intracellular content to extracellular matrix¹⁶. An acute and beneficial compensatory phase followed by a chronic maladaptive phase are the two important cardiovascular events associated after MI and before reaching to heart failure. The major mechanisms that initiate the

progression of MI to heart failure are: a) hyperactivity of sympathetic nervous system (SNS) followed by advanced desensitization of β -adrenergic receptors, b) hypersensitivity of renin-angiotensin-aldosterone system (RAAS), c) inflammatory reactions involved in the deposition of fibrotic tissue, d) oxidative stress e) dilated hypertrophy and cardiac remodeling, f) alteration in protein expression profiles and cardiac contractile dynamics, g) energetic substrate remodeling¹⁷⁻²¹. The stimulation of β -adrenergic receptors in the heart, activates signaling pathways related to the excitation-contraction coupling mechanism. Hyperactivation of SNS triggers the cardiac cell growth through the stimulation of MAPK (mitogen-activated protein kinases) and calcineurin-NFAT (calcineurin-nuclear factor of activated T cells) signaling pathways. This leads to the development of cardiac hypertrophy and cardiac remodeling. In addition, angiotensin II increases the production of ROS, collagen, inflammatory cytokines which further facilitates the development of cardiac fibrosis and remodeling.

Furthermore, necrosis of heart tissue leads to the infiltration of leukocytes through the activation of chemotactic gradient in ECs by ischemic-derived ROS²²⁻²⁴. The elevated levels of interleukin-1 β , tumor necrosis factor- α (TNF α) and interleukin-6 enhance the production of EC adhesions and integrins which induce the extravasation of inflammatory cells into the necrosis site²⁵⁻²⁸. Studies have shown that increased expression of proteolytic activity of matrix metalloproteinases (MMPs) facilitate the immune cell infiltration²⁴. Mast cells, ECs, and fibroblasts play a key role in the MI related inflammatory reactions²². Studies have shown that ROS and reactive nitric oxide species are involved in the synthesis of collagen through NF-kB activation pathway²⁴. Additionally, NADPH oxidases and inducible nitric oxide synthase (iNOS) and xanthine oxidase are involved in collagen synthesis in post-MI events²⁹.

Emerging studies have shown the qualitative and quantitative changes in the expression of cardiac proteins involved in the MI. The experiments in a rat model showed the reduced expression of SERCA2a (Sarco/endoplasmic reticulum calcium (Ca²⁺) ATPase cardiac isoform) and PMCA (plasma membrane Ca²⁺ ATPase) proteins with a concomitant increase in left ventricular filling pressure after four weeks of MI³⁰. Similar results have been observed in the skinned cardiac fibers of rats at four and eight weeks after MI³¹. The down-regulation of phosphatase enzymes causes the changes in PKA activity inside the dyadic microenvironment which is formed due to the T-tubule of plasma membrane and cistern of sarcoplasmic reticulum³². Serum concentration of atrial and brain natriuretic peptides (atrial natriuretic peptide and brain natriuretic peptide) notably ischemic injury and these are markers for MI and progressive heart failure^{33,34}.

However, the proteomic changes in the AMI endothelial dysfunction and the implication of oxidative stress remain unknown. Therefore, the identification of insights and causes resulting in dysfunctional ECs are crucial to the understanding of the disease and to the development of new therapeutic tools.

A.2 Chronic thromboembolic pulmonary hypertension (CTEPH):

CTEPH is an orphan, potentially progressive and long-term pulmonary vascular disease caused by chronic obstruction of blood vessels in the pulmonary arteries. It is a distinct form of pulmonary hypertension (PH), characterized by an intraluminal thrombus formation and fibrous stenosis or obstructions in the central pulmonary arteries which causes progressive PH and increased pulmonary vascular resistance and consequent right ventricular failure (Figure A.4, adapted from <http://www.phacanada.ca/cteph/>)³⁵⁻³⁷. Few investigations have been proposed that the CTEPH is involving in the abnormal vascular remodeling, angiogenesis, fibrinolysis together with endothelial dysfunction³⁸, autoimmunity³⁹, inflammation⁴⁰, and angiogenesis⁴¹.

In a clinical point of view, the signs and symptoms are non-specific or completely absent in the early stages of the CTEPH. Right heart failure is the sign of an advanced stage of the disease. Exercise intolerance, chest discomfort, haemoptysis (blood in mucus), fatigue, dyspnea (shortness of breath), syncope (fainting), light-headedness and peripheral leg edema (swelling) are the most commonly associated symptoms of CTEPH.

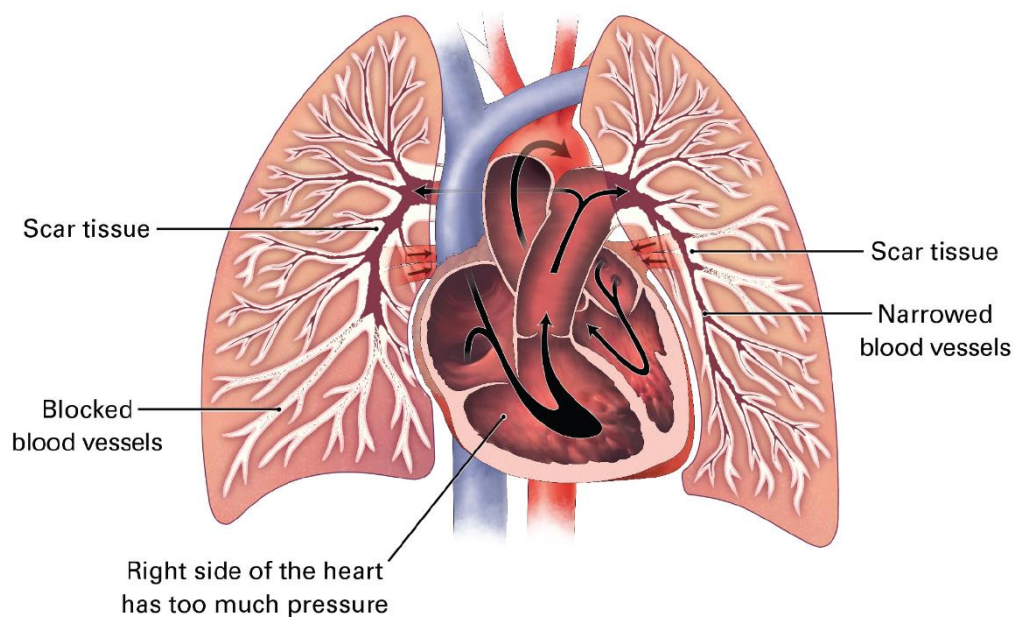


Figure A 4: Chronic thromboembolic pulmonary hypertension

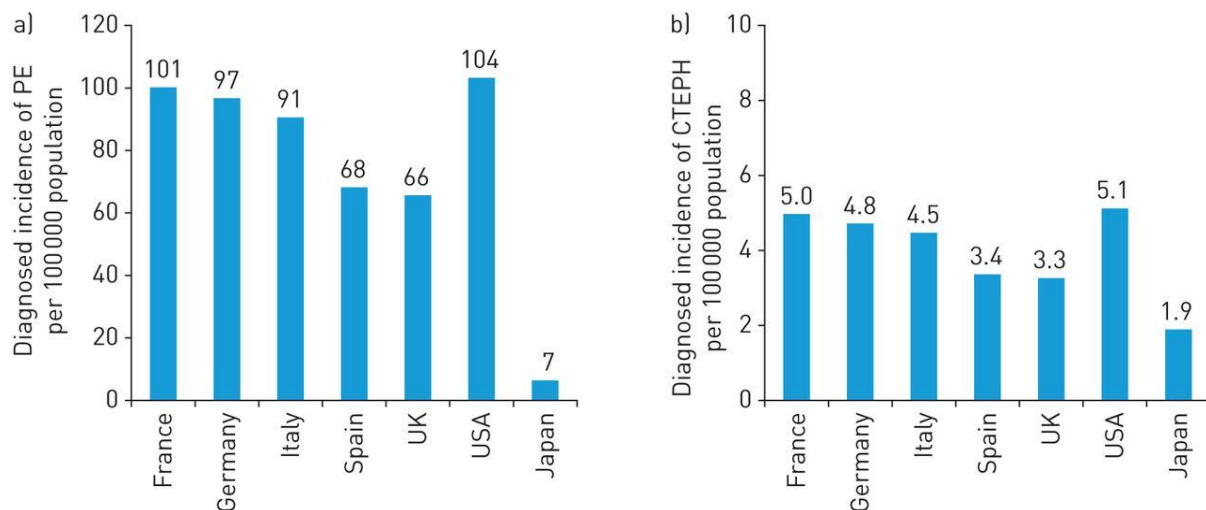


Figure A 5: a) Annual diagnosed incidence of PE, b) annual full incidence of CTEPH per 100000 population in Europe, USA and Japan (crude rates for the year 2015)³⁷.

Here above mentioned the quantitative epidemiological data of CTEPH, based on the recent investigation of Gall, Henning, et al, with 25 publications and 14 databases. 66-104 cases of crude annual incidence of diagnosed PE per 100000 population were reported, whereas in the case of crude annual full (diagnosed and undiagnosed) 3-5 cases of CTEPH per 100000 population were reported in the USA and Europe. On the other hand, the diagnosed incidence of CTEPH per year was 1.9 per 100000 population in Japan (Figure A.5)³⁷.

The overview of the pathophysiology of CTEPH is mentioned in Figure A.6. Endothelial dysfunction plays a fundamental role in facilitating the structural changes in the pulmonary vasculature. The pulmonary vascular wall contains fibroblasts in the external layer, smooth muscle cells in the middle layer and a single layer of ECs in an internal intima, which directly connects with blood circulation⁴². Under pathological conditions, the endothelium loses its homeostatic function that causes the disorganization of the vascular wall which is a crucial step in the development of vascular lesions⁴³. Uncontrolled or disordered EC proliferation with simultaneous neoangiogenesis results in the formation of glomeruloid structures known as the plexiform lesions, which are common pathological features of the pulmonary vessels of patients with pulmonary arterial hypertension⁴⁴. Moreover, abnormal production of multiple endothelial vasoactive mediators including endothelin-1 (ET-1), NO, thromboxane, prostacyclin, and serotonin have been increasingly recognized in patients with PH. Vascular injury in the combination of altered production of various mediators might expose the underlying vascular tissue to diverse blood-borne factors which further increase pathogenesis.

Endothelial dysfunction might also have an effect in pulmonary vascular homeostasis through the altered production of anticoagulant factors.⁴⁴

When endothelium is activated by disease states, the ECs express specific markers and proteins E-selectin, intercellular adhesion molecule (ICAM)-1, tissue factor, and vascular endothelial growth factor (VEGF) receptors^{45,46}. These changes might increase vasoconstriction, proliferation, and coagulability (Figure A.7)⁴⁴. Moreover, several endothelium activation stimuli such as ROS, shear stress and inflammation are known to stimulate the endothelium, causing changes in its proliferation status and production of vasoactive mediators and growth factors⁴⁷. Recent studies have shown the pathogenic role of dysfunctional K_v channels and altered levels of cytosolic Ca^{2+} in the development of pulmonary vascular remodeling in patients with idiopathic pulmonary arterial hypertension (IPAH)⁴⁸.

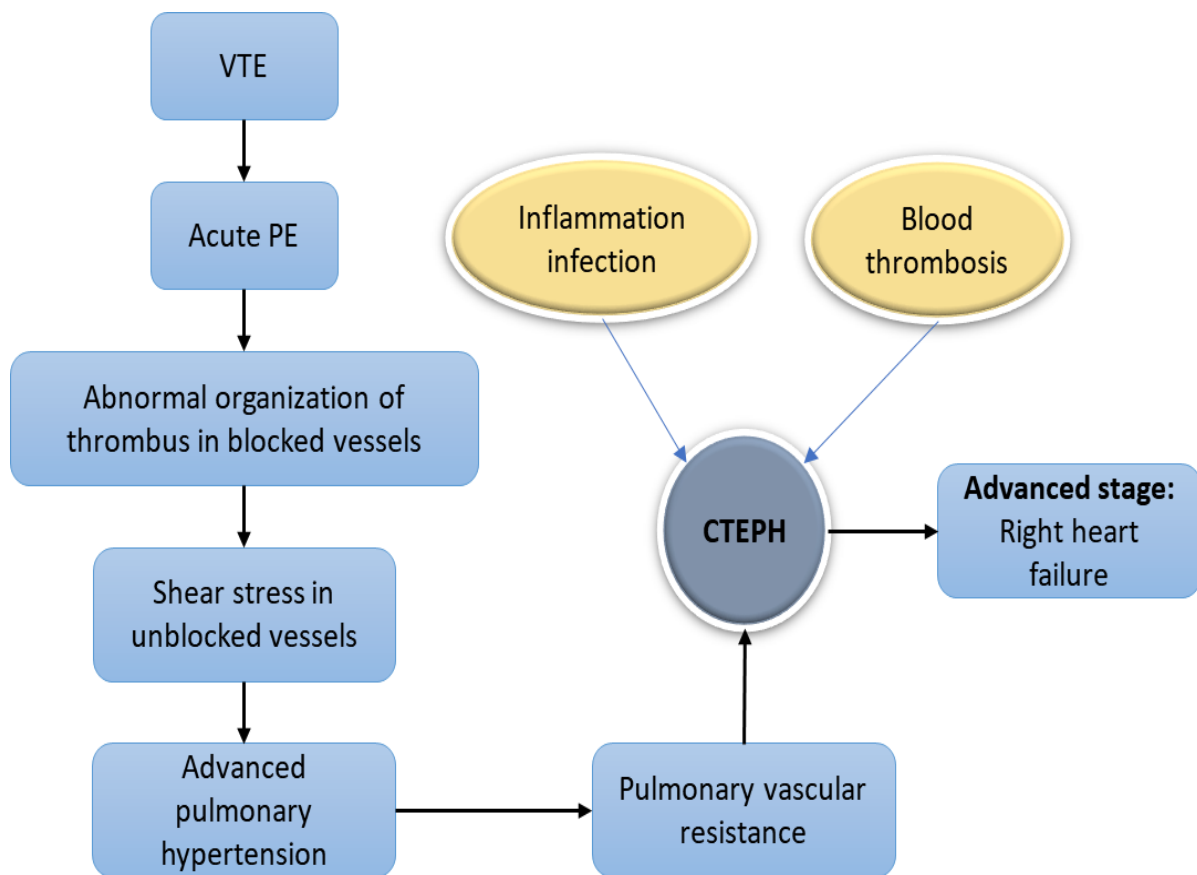


Figure A 6: An overview of the pathophysiology of CTEPH.

Vasoconstriction induced under oxidative stress might be one of the important factors in the early stages of PAH and the decrease of NO bioavailability. Inflammation and oxidative stress are essential in PAH with increased lipid peroxidation and reduced antioxidant defenses⁴⁹.

Multiple studies have been reported that oxidative stress involved in the pulmonary hypertension⁴⁹⁻⁵². However, the comprehensive role of pathological endothelial dysfunctionality during the disease progression mechanism of CTEPH disease remains unclear. Determining the molecular changes and underlying mechanisms that cause the dysfunction of endothelium is currently essential for the identification of early prediction and the development of novel therapeutic strategies.

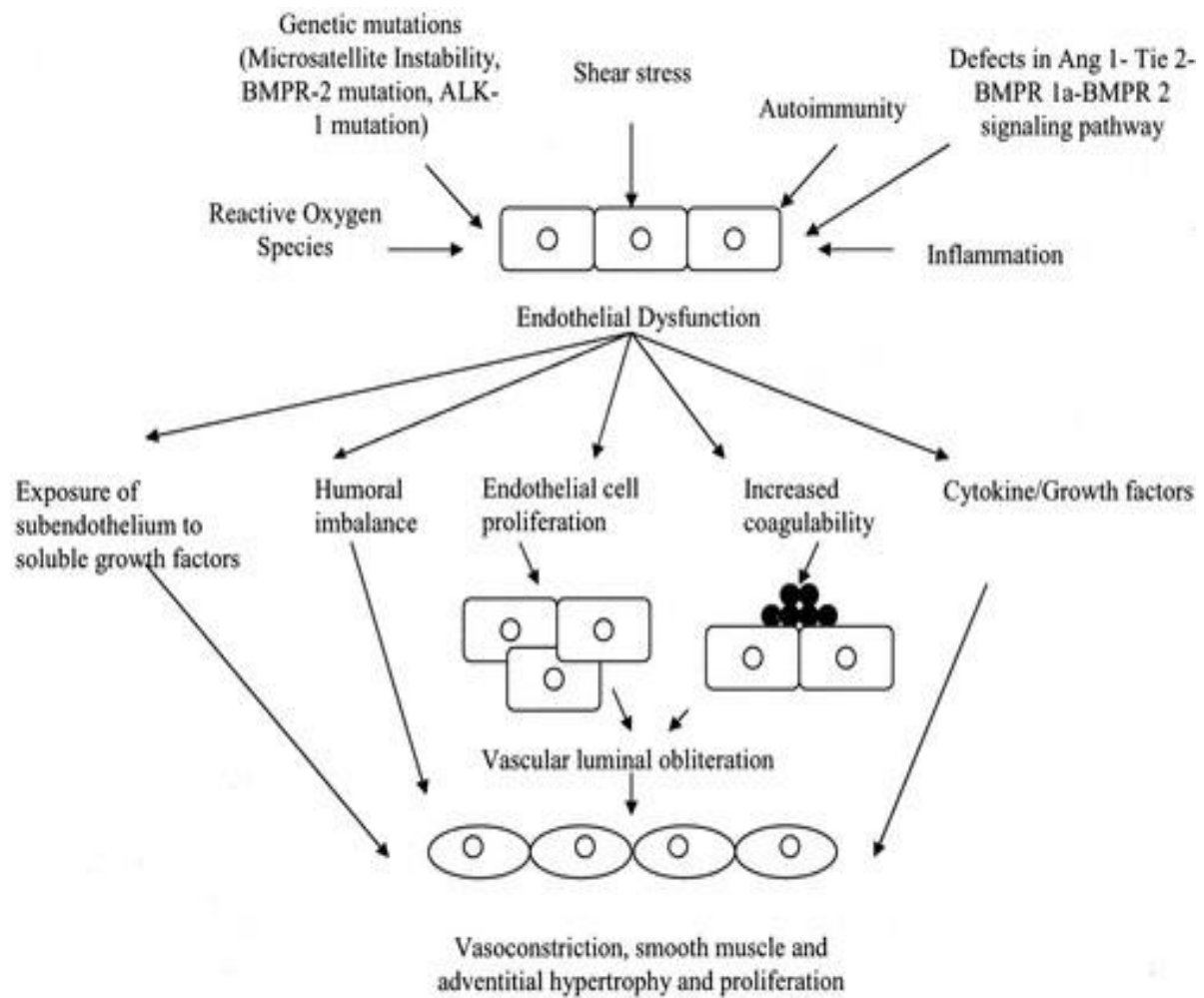


Figure A 7: Mechanistic role of endothelial dysfunction in PH and pulmonary vascular remodeling. Squares indicate endothelial cells; ovals, smooth muscle cells; and closed circles, platelets. Picture adapted from the reference⁴⁴

B. Bioanalytical approach: deep single-run label free proteomics

Quantitative proteomics is one of the most important approaches in the field of omics, used for the early prediction, disease diagnosis, prognosis and to monitor the molecular proceedings in the different stages of the disease development (Figure B.1). Proteomics includes the characterization of proteome, expression, structure, protein-protein interactions, functions, and modification of proteins at various stages^{53,54}. These approaches not only provide a list of identified proteins but also yields a lot of information that allows us to understand physiological changes occurred between two or more states. For instance, disease vs control; treated vs non-treated. From the past decade, many MS-based proteomic approaches have been successfully developed to address the quires related to protein-protein interaction studies, post-translational modifications, and protein expressions or abundances. Labeling quantitative proteomic methods have potential limitations such as long workflow or complex sample preparation, incomplete labeling, very expensive experimental procedures and a limited number of sample analyses.

Therefore, MS-based label-free quantification technique has been developed as a relatively simple, rapid, easy, and inexpensive alternative to other quantitative proteomic approaches. High mass resolution and precision, as well as high peptide identification rates, have been important components in the success of label-free quantification⁵⁵. This approach can be applied to any kind of sample, as well as materials that are not able to be labeled metabolically, for example, several human-based clinical samples. Moreover, this approach requires minimal sample preparation. For instance, primary cells isolated from human specimens, since their growth rate is quite challenging (survive only for the limited number of passages) compared to continuous cancerous cell lines. To understand the high-throughput data and to investigate the underlying mechanisms from omics data network and pathway analysis tools have been developed⁵⁶.

The label-free quantitative approach has been applied to pig heart endothelial cells showing the molecular mechanism of several transcription factors and cell surface markers in endocardial endothelium, which might offer new insights into its role in the regulation of cardiac function⁵⁷. In addition, this approach has been used to study the changes in rat cardiac cells treated with protease inhibitors⁵⁸. This approach revealed the district proteomic profiles in the blood serum of a pair of monozygotic (MZ) twins discordant for ischemic stroke (IS) and demonstrated the upregulation of fibulin 1 protein involved in the underlying disease-causing mechanism

in ischemic stroke at molecular level, suggesting that proteomic profiling could be used as a general approach for improved diagnostic, prognostic and therapeutic strategies⁵⁹.

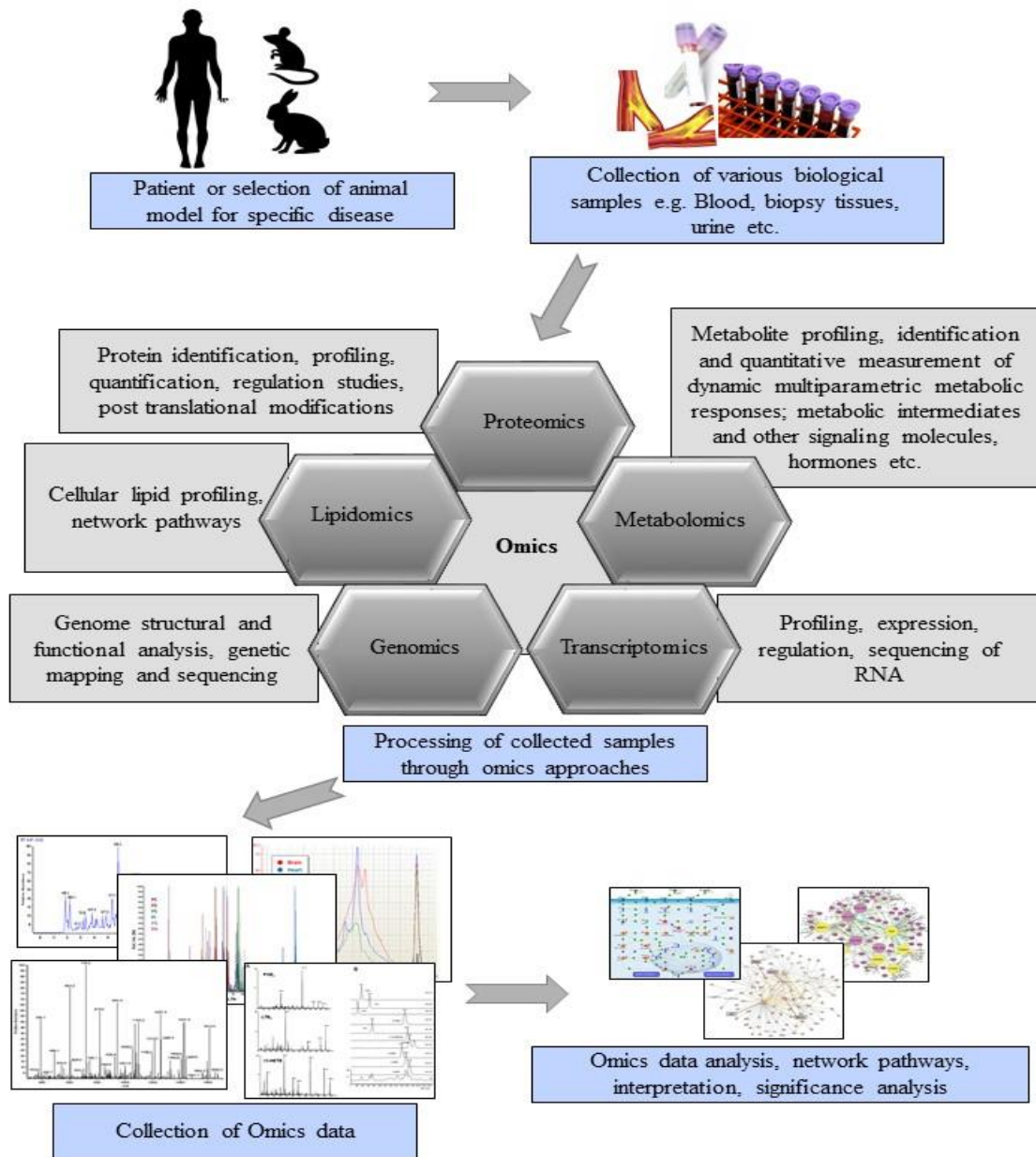


Figure B 1: An overview of omics approach workflow for the cutting-edge research as well as the unbiased discovery of biomarkers.

Quantitative proteomics approach was also applied in the study of endothelial dysfunction induced by advanced glycation end products (AGEs) leading to diabetic cardiovascular complications⁶⁰. Moreover, by using this approach serum protein biomarkers associated with the early phases of formation of carotid atherosclerotic plaques were investigated⁶¹.

Similarly, researchers used this approach to reveal the differences in molecular mechanism of atherosclerosis in the presence or absence of chronic kidney disease (CKD) and demonstrated that proteins involved in inflammation, blood coagulation, oxidative stress, vascular damage, and calcification process exhibited greater alterations in patients with atherosclerosis in the presence of CKD⁶². To determine the effects of chronic ischemia on bladder proteomic profiles and characterization of further downstream signaling pathways, label-free quantitative proteomic analysis was used in bilateral iliac artery atherosclerosis and chronic bladder ischemia diseases in male rats⁶³. In addition, the proteome of circulating microparticles in the vascular system was investigated⁶⁴.

Therefore, as specified above label-free quantitative approaches have provided powerful tools for analyzing protein changes in large-scale proteomics studies. Consequently, in the present PhD thesis, label-free proteomics quantification and bioinformatic approaches were applied to describe our biological questions.

2 Aims of the project

Vascular dysfunction is one of the primary factors in the onset and progression of atherosclerosis and other vascular-related diseases such as AMI and CTEPH. Emerging evidence indicates that pathological blood vessel responses and endothelial dysfunction are associated with metabolic alterations in ECs. The identification of the insights and causes resulting in dysfunctional ECs is crucial for the understanding of the disease and to the development of new therapeutic tools.

Therefore, to study the characteristics of such EC dysfunction in AMI and CTEPH diseases, we aim to determine the quantitative proteomic profile and/or the altered redox status of patient-derived EC lines.

The main aims of the present study were the characterization of AMI and CTEPH patient-derived primary ECs, focusing on:

PART-I

- 1) Network analysis of differentially expressed proteins.
- 2) Study of oxidative stress/redox status.

PART-II

- 3) Study the effects of PFKFB3 modulators.

3 Materials and Methods

Chemicals and Reagents:

The human vascular endothelial cell line EA. hy926 was a kind gift from Dr. Christina Banfi (Centro cardiologico Monzino, Milan, Italy). AOPP assay kit, protein carbonyl fluorometric assay kit and intracellular ROS assay kit was purchased from Cell Biolabs-OxiSelect™ (San Diego, USA). SOD assay kit, (HAT) media supplement, non-essential amino acids, NaF, NP-40, Na₃VO₄, ammonium bicarbonate, phenylmethanesulfonyl fluoride, L-lysine, l-arginine and protease inhibitor cocktail, DTT, ammonium persulfate, ACN, TFA, SDS, IAA, FA, and Bradford reagents were purchased from Sigma Aldrich (St. Louis, USA). GSH/GSSG ratio detection assay kit (Fluorometric - Green), anti-FABP4 polyclonal antibody (15 kDa, Ab66682), was purchased from Abcam (Germany). DMEM high glucose medium, fetal calf serum and fetal bovine serum were purchased from Life technologies (Netherlands). Penicillin-streptomycin, L-glutamine and Trypsin-EDTA were purchased from Lonza (USA). T20 cell counter was purchased from Bio-Rad (USA). EBM™-2, Endothelial Basal Medium-2; EGM™-2 SingleQuots™, Formulates EBM™-2 to EGM™-2; Trypsin/EDTA, HEPES Buffered Saline Solution, Trypsin Neutralizing Solution, HCAECs, HPAEs were purchased from Lonza (Walkersville, USA). Laemmli buffer, 40% acrylamide/Bis solution, TEMED, molecular mass standards and electrophoresis apparatus for one-dimensional electrophoresis, Mini-protein Thx any KD gels and T20 cell counter were supplied by Bio-Rad Laboratories, Inc., Hercules CA. Trypsin Gold, Mass Spectrometry Grade was purchased from Promega (USA). Water and acetonitrile (OPTIMA LC/MS grade) for LC/MS analyses were purchased from Fisher Scientific, UK. Complete protease inhibitor cocktail tablets and sequencing grade trypsin were supplied by Roche Diagnostics (Basel, CH). Anti-VWF monoclonal antibody (250kDa, Sc-21784) was purchased from Santa Cruz, USA. Anti-Actin monoclonal antibody (42kDa, 691001) was purchased from MP Biomedicals.

3.1 Control and pathologic endothelial cells of AMI:

Commercially available human coronary artery endothelial cells (HCAEC) were used as controls. Eight individual patient-derived pathological ECs (HCAEC-AMI) were isolated from coronary atherothrombotic specimens in patients undergoing percutaneous coronary intervention with thrombectomy for the treatment of acute ST-segment elevation myocardial infarction (STEMI) at the Royal Infirmary of Edinburgh, Scotland, UK. The study protocol was approved by the Research Ethics Committee and all subjects provided written informed consent. Specimens were washed with phosphate buffered saline (PBS) and manually disaggregated. Tissue explants were seeded into collagen-I coated 6-well plates and maintained under standard cell culture conditions. After 24 hours, tissue explants, non-adherent cells, and debris were aspirated. Medium was changed every other day until the first passage of coronary endothelial outgrowth cells emerged and cells were cultured as previously described^{65,66}.

These cells were received as a part of MoGlyNet project. All the cell lines in passage 4-5 were obtained from Prof. Marta Cascante from University of Barcelona. Standard guidelines were strictly followed while transporting to maintain the integrity of the cell lines. The isolation and characterization experiments were conducted and validated by other ESR (Early Stage Researcher/Ph.D. student) in the MoGlyNet project consortium.

3.2 Control and pathologic endothelial cells of CTEPH:

Commercially available human pulmonary artery endothelial cells (HPAE) were used as controls. Five individual patient-derived pathological ECs corresponding to CTEPH (CTEPH-ECs) were received from Dr. Olga Tura, Research Scientist, Department of Pulmonary Medicine, Hospital Clínic-Institutd'Investigacions Biomèdiques August Pi iSunyer (IDIBAPS), University of Barcelona, Spain.

The specimens containing thromboembolic material with clear thrombus were obtained after pulmonary endarterectomy (PEA) surgery from CTEPH patients at Hospital Clínic-Institutd'Investigacions Biomèdiques August Pi iSunyer (IDIBAPS). Material were washed with PBS and minced into 1-2 mm pieces. Explants were seeded into 0.2% gelatin-coated 6-well plates and maintained under standard cell culture conditions. After 24 hours, tissue explants, non-adherent cells, and debris were aspirated. Medium was changed every other day until the first passage of pulmonary endothelial outgrowth cells emerged and cells were cultured as previously described^{65,66}.

These cells were received as a part of MoGlyNet project. All the cell lines in passage 4-5 were obtained from Dr. Olga Tura from University of Barcelona. Standard guidelines were strictly followed while transporting to maintain the integrity of the cell lines. The isolation and characterization experiments were conducted and validated by other ESR in the MoGlyNet project consortium.

3.3 Growth conditions of control and pathological primary ECs:

All the control ECs and pathological ECs were grown in 0.2% gelatin coated plates with EGM™-2 bulletkit™ medium which contains the EBM™-2 basal medium along with the EGM™-2 singlequots™ kit components (hydrocortisone, hFGF, VEGF, Long R3 Insulin Like Growth Factor-1 (R3-IGF-1), ascorbic acid, hEGF, GA-1000 and heparin), 10% FBS and 1% penicillin-streptomycin antibiotic. Cells were maintained in a 37°C humidified incubator at 5% CO₂. All the experiments were performed using the cells in passage number 6-10. Cell stocks were frozen in liquid nitrogen in growth medium supplemented with 40% FBS and 10% v/v DMSO.

3.4 Human EA.hy926 endothelial cells:

The permanent human EC line EA.hy926 cells were cultured in high glucose DMEM medium containing HAT (100 mM sodium hypoxanthine, 0.4 mM aminopterin, and 16 mM thymidine), 1% glutamine, 10% FBS and 1% penicillin-streptomycin antibiotic and non-essential amino acids, at 37°C in a humidified atmosphere of 5% CO₂. The culture medium was replaced every alternative day. This EC line was particularly selected to study the impact of 3PO and tumor necrosis factor alpha (TNF α) induced inflammation, due to its consistent response and character of constant growth rate when compared to the other primary ECs such as human umbilical vein endothelial cells (HUVEC). Moreover, these cells are very resistant to contamination and do not require more expensive additional growth factors accompanying with the use of primary ECs.

3.5 Protein extraction:

Confluent cells were trypsinized and collected by centrifugation at 1200 rpm for 5 min. Harvested cells were washed two times with cold PBS. The cell pellets were resuspended in the solubilization buffer (8 M urea in 50 mM Tris-HCl, 30 mM NaCl, pH: 8.5 and 1% protease inhibitor) and incubated on ice for 5-10 min. Cell lysates were further homogenized by sonication in an ice bath for three times each for 5sec with 30 sec intervals, using an ultrasonicator. Samples were centrifuged at 14000 rpm for 20 min at 4°C. The protein supernatant

was collected into the new eppendorf tube and pelleted cell debris was discarded. Samples were stored at -80°C until we use it for further experiments. The protein estimation was carried out by using the Bradford assay.

3.6 In-solution trypsin digestion:

10µg of total protein was resuspended in 50 mM ammonium bicarbonate (ABC). Reduction was carried out by incubating 5 mM final concentration of DTT for 30 min at 52°C, followed by an alkylation with 15 mM final concentration of iodoacetamide (IAA) for 20 min in the dark at room temperature. Trypsin digestion was allowed at 37°C overnight, with an enzyme: substrate ratio of 1:10. The resulting peptides were analyzed by nLC-MS/MS.

3.7 nLC-HRMS analysis:

Tryptic peptides were analyzed using a Dionex Ultimate 3000 nano-LC system (Sunnyvale CA, USA) connected to an Orbitrap Fusion™ Tribrid™ Mass Spectrometer (Thermo Scientific, Bremen, Germany) equipped with a nano-electrospray ion source. Peptide mixtures were pre-concentrated onto an Acclaim PepMap 100 – 100 µm x 2 cm C18 and separated on EASY-Spray column, 15 cm x 75 µm ID packed with Thermo Scientific Acclaim PepMap RSLC C18, 3 µm, 100 Å. The temperature was setting to 35 °C and the flow rate was 300 nL min⁻¹. Mobile phases were the following: 0.1% Formic acid (FA) in water (solvent A); 0.1% FA in water/acetonitrile (solvent B) with 2/8 ratio. Peptides were eluted from the column with the following gradient: 4% to 28% of B for 90 min and then 28% to 40% of B in 10 min, and to 95% within the following 6 min to rinse the column. Column was re-equilibrated for 20 min. Total run time was 130 min. One blank was run between triplicates to prevent sample carryover. MS spectra were collected over an m/z range of 375-1500 Da at 120,000 resolutions, operating in the data dependent mode, cycle time 3 sec between master scans. Higher-energy collisional dissociation (HCD) was performed with collision energy set at 35 eV. Each sample was analyzed in technical triplicates.

3.8 Protein identification and quantification:

Data analysis was performed as specified in our publication⁶⁷. Briefly, resulting MS raw files from all the technical and biological replicates were analyzed by using MaxQuant software⁶⁸ (version 1.6.2.3). Andromeda search engine was used to identify proteins by target-decoy approach with less than 1% of FDR. In the present study we used *Uniprot_Homo sapiens* database (20,415 entries). Methionine oxidation and acetylation (N terminus) was used as a variable modification. Carbamidomethylation was used as a fixed modification. The label-free

quantification of proteins was obtained by MaxLFQ algorithm in MaxQuant. Match between the runs option was enabled and remaining default parameters were permitted.

3.9 Statistical analysis:

An open source Perseus software⁶⁹ (version 1.6.1.3; Max Planck Institute of Biochemistry, Germany) was used for the identification of statistically significantly differentially regulated proteins. The resulted data generated from MaxQuant was filtered based on the proteins only identified by site, reverse and potential contaminants. The log 2-fold changes of proteins were estimated by using the comparison of mean LFQ intensities between disease and control groups (HCAEC-AMI vs HCAEC in the case of AMI; whereas in the case of CTEPH, CTEPH-EC vs HPAE). Variabilities of biological replicates were measured with Pearson correlation coefficient values of the LFQ intensities. The differentially regulated proteins with a minimum of two peptides and FDR adjusted p-value < 0.05 were considered as statistically significant.

3.10 Gene ontology, network and pathway analysis:

We used Cytoscape software (version 3.6.0; <http://cytoscape.org/index.php>) to understand the possible network pathways connected with differentially regulated proteins. In particular, we used ClueGo plug-in that generally provides data based on the updated GO terms, BioCarta/Kyoto Encyclopedia of Genes and Genomes (KEGG) pathways⁷⁰. Statistical significance of terms was determined with bid of two-sided enrichment/depletion hypergeometric test and Bonferroni p-value correction. Moreover, we also used the function of GO term fusion for further reduction of redundancy. Remaining default parameters were allowed. IPA (Qiagen) analysis was done based on the manufacturer's instructions.

3.11 RNA isolation and cDNA preparation:

Total RNA extraction and conversion to first-strand cDNA were done using iScript RT-qPCR sample preparation reagent (Bio-Rad) and Maxima First Strand cDNA Synthesis Kit (Thermo Scientific), respectively according to the manufacturer's protocol.

a) Briefly, 1×10^5 control and pathological ECs were seeded in 48 well plates in triplicates. After 24hrs, cells were washed with PBS and added 60 μ l of iScript RT-qPCR sample preparation reagent. After incubation for 1 minute at room temperature, cell lysate was collected without disturbing the cells and stored at -80° C until we use it for making cDNA.

b) Briefly, 1×10^5 cells were seeded in 48 well plates in triplicates. Cells were treated in various conditions 1) 3PO (20 μ M) for 1hr, 2) TNF α (10 ng/ml) for 24 hrs, 3) 1hr pre-incubation of cells with 3PO, wash with PBS followed by 24 hrs incubation with TNF α , 4) 24 hrs pre-

incubation of cells with TNF α , wash with PBS followed by 1 hr incubation with 3PO, 5) untreated cells, 6) cells treated with vehicle (same amount of DMSO that were used for making the 20 μ M concentration of 3PO). After completion of all the treatments, cells were washed with PBS and added 60 μ l of iScript RT-qPCR sample preparation reagent. After incubation for 1 minute at room temperature, cell lysate was collected without disturbing the cells and stored at -80 $^{\circ}$ C until we use it for making cDNA.

3.12 Quantitative real-time PCR analysis:

Quantitative RT-PCR analysis was performed using an ABI PRISM 7000 Sequence detection system cDNA was amplified in triplicate using Maxima SYBR Green/ROX qPCR Master Mix (Thermo Scientific). The thermal cycling programme started at 95 $^{\circ}$ C for 10 minutes for enzyme activation, followed by 40 cycles of amplification at 95 $^{\circ}$ C for 15 seconds, followed by 60 $^{\circ}$ C for 1 minute. Gene expression was normalized to the housekeeping gene RPLP0. Primer sequences used in this project are listed in Table 3.1, 3.2 and 3.3. Relative expression of targeted genes was determined using the $2^{-\Delta\Delta CT}$ method. P-value below 0.05 were considered as statistically significant.

3.13 Western blotting:

Proteins obtained from control and pathological ECs were used to validate the expression pattern by western blot analysis. 30 μ g of total proteins were electrophoresed on 8% and 12% SDS-PAGE and transferred by wet-transfer method. Membrane was blocked for 1h at room temperature using blocking buffer (5% milk in PBS with 0.1% tween 20). Primary and secondary antibody dilutions and incubation times were maintained as per the manufacturer instructions. Immunodetection analysis was employed for Von Willebrand factor (VWF), and Actin (ACT) targets using the anti-VWF monoclonal antibody, and anti-Actin (Fisher Scientific) as primary antibodies and respective anti-mouse and anti-rabbit HRP conjugated secondary antibodies (Abcam). Results were obtained by ECL detection method and expression of all target proteins were investigated against the actin housekeeping protein.

3.14 Advanced oxidative protein product (AOPP) assay:

Advanced oxidation protein product (AOPP) levels were analyzed by using the OxiSelect AOPP kit (STA318, Cell Biolabs, San Diego, CA, USA). The confluent cells were collected, lysed in buffer (150 mM NaCl, 1% NP-40, 0.5% sodium deoxycholate, 0.1% SDS, 50 mM Tris, pH: 8, 5 mM EDTA and protease inhibitors) and centrifuged for 20 min at 14000 rpm. The pellet containing cell debris was discarded; the protein supernatant was collected. The total

protein concentration was determined by using the Bradford assay. Samples containing 50 µg protein were prepared. Constant volumes of control and pathological cell lysates (200 µL) were added to the wells of a microtiter plate and then exposed to 10 µL of chloramine reaction initiator followed by 20 µL of stop solution. Absorbance was recorded at 340 nm by using the spectrophotometric plate reader (PowerWave biotek). 100, 80, 60, 40, 20, 10, 5 and 0 µM chloramine standards was used. Cell lysates used in this assay was prepared from the ECs in passages between 6-9. Experiments were performed with biological and technical replicates.

3.15 Protein carbonyl determination by fluorometric method:

Protein carbonyl content, a general indicator of protein oxidation was measured fluorometrically (480 nm excitation/530 nm emission) using a commercial kit (Cell Biolabs, OxiSelect No. STA-307). Briefly, protein carbonyls were derivatized with the Protein Carbonyl Fluorophore. The Fluorophore binds to the protein carbonyl group in a 1:1 ratio. Proteins are then TCA precipitated and free Fluorophore was removed by washing the protein pellet with acetone. After dissolving the protein pellet in GuHCl, the absorbance of protein-fluorophore product was measured fluorometrically, and the total protein carbonyls were subsequently calculated. Experiments were performed with biological and technical replicates.

3.16 Intracellular ROS assay:

ROS were measured by OxiSelect ROS Assay Kit (Cell Biolabs, STA-342). Briefly, the control and pathological ECs were grown in 96 well plate at a density of 9×10^3 cells and incubated with the dichloro-dihydro-fluorescein diacetate (DCFH-DA) containing medium at 37°C for 60 minutes in the dark. The confluent cells were lysed, and the fluorescence was recorded by using the fluorometric plate reader at 480 nm/530 nm. Total quantity of ROS was determined based on the comparison with the predetermined DCF standard curve. Experiments were performed with biological and technical replicates.

3.17 GSH/GSSG analysis:

GSH/GSSG ratio in control and pathological EC cultures was determined using GSH/GSSG Ratio Detection Assay Kit (Fluorometric-Green) (Abcam Inc. #ab138881) according to the manufacturer's guidelines. The samples were prepared by lysis of total cell protein in 0.5% NP-40 lysis buffer followed by a dilution of 1:50 for GSH analysis. In brief, serial dilution of GSH and GSSG stock standards were prepared along with assay mixtures for detection of GSH and total GSH using 100× Thiol green stock solutions, assay buffer and GSSG probe. A one-step fluorometric reaction of sample with respective assay buffers were incubated for 30 min.

Fluorescence intensity was then monitored at Ex/Em of 490/520 nm. GSSG was determined by subtracting GSH from total GSH. Finally, the ratio of GSH was plotted against GSSG to obtain the GSH activity. Experiments were performed with biological and technical replicates.

3.18 NADP/NADPH assay:

NADPH/NADP ratio in control and pathological ECs was determined by using NADP/NADPH quantification kit (Sigma) as per the manufacturer's protocols. Briefly, 1×10^6 confluent cells were pelleted and washed with cold PBS. Cells were extracted with 800 μ l of NADP/NADPH extraction buffer and allowed to incubation for 10 min on ice. Samples were centrifuged at 10000g for 10 min and supernatant used for determining the ratio of NADP and NADPH. To remove the enzymes that may consume NADPH rapidly were removed by filtering through a 10kDA cut-off spin filter (Millipore, UFC501096). An aliquot of the supernatant was heated at 60°C for 30 min to decompose the NADP⁺, cooled on ice, and spun quickly to remove the precipitate. Another aliquot of the supernatant was not heated. Both aliquots were reacted with NADP⁺ cycling buffer and enzyme mix (containing glucose-6-phosphate dehydrogenase (G6PDH) for 5 min at room temperature to convert NADP⁺ to NADPH. The solutions were then incubated with NADPH developer for 2 h and the absorbance measured at 450 nm. The amount of NADPH (heated sample) and the total NADP⁺ and NADPH (unheated sample) were quantified from an NADPH standard curve. Experiments were performed with biological and technical replicates.

3.19 Determination of SOD assay in cells:

Pelleted cells were homogenized in 100 μ L of ice cold 0.5% NP-40 lysis buffer. SOD activity was determined by a colorimetric method using a commercially available kit (#19160, Sigma-Aldrich, St. Louis, MO, USA). Briefly, 20 μ g of total protein was loaded into 96-well plate in 20 μ l volume. Two blanks were maintained with and without addition of enzyme working solution. 200 μ l of WST ((2-(4-Iodophenyl)-3-(4-nitrophenyl)-5-(2,4-disulfophenyl)-2Htetrazolium, monosodium salt) solution was added to samples and blank wells. 20 μ l of enzyme working solution was added and allowed for incubation at 37°C for 20 minutes. Absorbance measured at 450 nm using microplate reader. SOD activity was expressed as inhibition rate %. Experiments were performed with biological and technical replicates.

3.20 Hoechst assay:

The dosage effect of HM20, HM-21, HM-22 (phosphatase modulators of PFKFB3) and ligand94 (kinase modulator of PFKFB3) compounds synthesized by other ESRs in the

MoglyNet project and commercially available PFKFB3 inhibitor (3PO) were tested *in vitro* on control and pathological ECs of AMI and CTEPH by using Hoechst assay. Cells were incubated with HM20, HM21 and HM22 compounds at 50 μ M – 100 μ M concentration for 72hrs; and 3PO at 5-30 μ M concentration incubation for 72 hrs. After incubation period, cells were washed with 1x PBS and added 100 μ l of 0.01% SDS and frozen at -20°C for the overnight. Next day, cells were thawed at 37°C for 30 min and incubated with 100 μ l of HO33342 stain buffer (1 M NaCl, 1 mM EDTA, 10 mM Tris pH 7.4, 7.12 μ M of HO33342 stain) for 1hr in the dark. Fluorescence readings were measured at ex:337nm and Em:460 nm by using fluorescence plate reader (FLUORstar* optima). Experiments were performed with biological and technical replicates.

3.21 THP1 cells and macrophage differentiation:

To check whether HM-20, HM-21, HM-22 and 3PO inhibiting the activity of PFKFB3, we did a validation experiment using THP1 cells. These cells were grown and maintained in RPMI 1640 medium supplemented with 2 mM L-glutamine, 1.5 g/L sodium bicarbonate, 4.5 g/L glucose, 10 mM HEPES, 1 mM sodium pyruvate with 0.05 mM 2-mercaptoethanol and 10% FBS. Cells were sub cultured when cell concentration reached to 8×10^5 cells/ml. Media changed for every 2 to 3 days. THP1 cells were differentiated into macrophages by growing in RPMI-1640 medium containing 10 nM PMA (phorbol 12-myristate 13-acetate) for 72hrs. The expression PFKFB3 increased by treating the macrophages with 500 ng/ml of LPS (Lipopolysaccharides) for 30 min. Experiments were performed with biological and technical replicates.

3.22 Measurement of cell proliferation with MTT assay:

The cell proliferation inhibitory effect of 3PO was evaluated using MTT reduction assay. Briefly, 5×10^3 EA.hy926 cells were seeded on a 96-well plate for overnight. Various concentrations of 3PO dissolved in DMSO (10,20,30 and 40 μ M) were added to the cells in triplicates and allowed for 24 hrs. 20 μ l of MTT solution (5 mg/ml) was added and incubated at 37°C for 4 hrs. After the removal of medium containing MTT solution, 100 μ l of dimethyl sulfoxide (DMSO) was added to the each well to dissolve purple formazan crystals and the plate was gently shaken for 15 min at room temperature. The optical density was measured at 490 nm using a plate reader (*BioTek's* PowerWave HT, USA). Cells incubated with respective concentration of DMSO (<0.06%) were used as a control for 100% cell proliferation. Statistical analysis was performed in the GraphPad software. Experiments were performed with biological and technical replicates.

3.23 3PO and TNF α treatment:

Three types of experimental setups were planned. a) To understand the underlying mechanisms of 3PO in human ECs, EA.hy926 cells were incubated with 20 μ M concentration of 3PO dissolved in DMSO. In this study, control cells were incubated with media containing only DMSO in the final concentration of 0.06%. b) to understand the impact of TNF α induced inflammation, cells were incubated with 10 ng/mL concentration of TNF α for 24 hrs. Control cells were incubated in media with PBS c) to understand whether 3PO has a capability to reverse the effect of inflammation, cells were treated with 3PO (20 μ M) for 1hr, followed by TNF α (10 ng/mL) incubation for 24hrs. Experiments were performed with biological duplicates and technical triplicates.

3.24 Incubation of 3PO and NEM in human serum:

3PO dissolved in DMSO and NEM dissolved in 0.1 M PBS (Na₂HPO₄, adjusted to pH 7.4 with H₃PO₄) Each compound was tested separately by spiking the final concentration of 1 mM in 300 μ l of serum. Serum without 3PO/NEM were used as a control. All the samples were allowed for 180 min incubation at temperature 37°C. We tested the reactions at 0h, 1h and 3h.

3.25 Extraction of HSA and incubation of NEM and 3PO:

HSA was extracted by using Affi-Gel blue gel (BIO RAD). The column was loaded with 200 μ l of 20 mM phosphate buffer (Na₂HPO₄, adjusted to pH 7.4 with H₃PO₄) and centrifuged at 500 rpm for 1 minute. Serum sample was equilibrated with the same buffer for 15 minutes at room temperature. Equilibrated serum sample was loaded twice in the column and centrifuged for 500 rpm for 1 minute. After washing the column twice with the same buffer, the bounded albumin was eluted by using buffer containing 1.4 M NaCl in 20 mM phosphate buffer pH 7.1.

3PO and NEM was dissolved in methanol and 0.1 M PBS, pH 7.4, respectively. In the first condition, 30 μ M concentration of HSA was incubated with 80 μ M of NEM. In the second condition, 30 μ M concentration of HSA was incubated with 500 μ M of 3PO dissolved in 0.1 M PBS, pH 7.4 (Final concentration of methanol was maintained at 1%). HSA dissolved in 0.1 M PBS was used as a control. All the samples were incubated at 37°C and collected at 0h, 1hr and 3h for the analysis.

3.26 Intact protein analysis:

Intact protein analysis was performed by direct infusion on a triple-quadrupole (TQ) mass spectrometer Finnigan TSQ Quantum Ultra, ThermoQuest, Milan, Italy) equipped with an Electrospray. Finnigan Ion Max source. For MS analyses, samples were desalted by using

Amicon Ultra filter units 0.5 ml, cut-off 10 kDa (Millipore) and washed seven times with water. Samples were then diluted to 1 mg/ml with a final composition of CH₃CN–H₂O–HCOOH (50:50:0.1, v/v/v). Aliquots of 50 µl were injected into the mass spectrometer at a flow rate of 25 µl/min by using a ThermoQuest autosampler. Each sample was analyzed for 5 min under the following instrumental conditions: positive-ion mode; ESI voltage 3.5 kV, capillary temperature 350°C, Q3 scan range 1200–1500 m/z, Q3 power 0.4 amu, scan time 1 s, Q2 gas pressure 1.5 Torr, skimmer offset 10 V, microscan set to 3. Full instrument control and ESI mass spectra acquisitions were carried out by Xcalibur software (version 2.0.7, Thermo Fisher Scientific, Rodano, MI, Italy). Mass spectra deconvolution was performed using MagTran software (version 1.02)⁷¹.

Table 3. 1: List of genes and its forward and reverse primers used for RT-PCR in AMI disease

S. no	Gene	Symbol	Forward primer	Reverse primer
1	Multimerin 1	MMRN1	GGATTGGAGGTGCTGTCCTG	TCAGCCTGGTTGGTGTGTATC
2	Gamma-Glutamyltransferase 5	GGT5	GGGAGCTCATCATCTCTGCTG	GAGAGAAAGCAGGTTACAGGG
3	MACRO Domain Containing 1	MACROD1	GTGTTTGGCTACCCCTGTGA	TCAGTCCCGGTCAGGGTG
4	Malic Enzyme 3	ME3	CTTGGTTTCGCTTTGCCTGG	CAGGTGCTCCCAAAGGGTTA
5	Dipeptidyl Peptidase 7	DPP7	CTGGTGTCTGGACAGGTTCTG	GACTTCCCGTAGTAGCGGTG
6	Collagen Type VIII Alpha 1 Chain	COL8A1	CGAGCTAACCGCACCCCTT	TCACGGGCTCGTTGTTCTTG
7	Signal transducer and activator of transcription 3	STAT3	ATCCTGGTGTCTCCACTGGT	GCTACCTGGGTCAGCTTCAG
8	integrin beta chain beta 3	ITGB3	ACCAGTAACCTGCGGATTGG	CTCATTGAAGCGGGTCACCT
9	ATPase Plasma Membrane Ca ²⁺ Transporting 4	ATP2B4	TGTAGCAGTTGCACCAGTCA	GTGGGTCATGAAGCTGTGGA
10	CD44 antigen	CD44	ATCTTGGCATCCCTCTTGGC	CAGTTCTAGCGAGGTGACTGT
11	Myosin Light Chain 9	MYL9	CGAGGATGTGATTCGCAACG	TGTTTGAGGATGCGGGTGAA
12	Fatty Acid Binding Protein 5	FABP5	TCTTGTACCCTGGGAGAGAAGT	GCTGAACCAATGCACCATCTG
13	Fermitin family homolog 3	FERMT3	CCCAGAGCTCAAGGACCATC	AACATCGGGAACCACCTCAC
14	Ribosomal Protein Lateral Stalk Subunit P0	RPLP0	TCGACAATGGCAGCATCTAC	ATCCGTCTCCACAGACAAGG

Table 3. 2: List of genes and its forward and reverse primers used for RT-PCR in CTEPH disease

S. no	Gene	Symbol	Forward primer	Reverse primer
1	Ribosomal Protein Lateral Stalk Subunit P0	RPLP0	TCGACAATGGCAGCATCTAC	ATCCGTCTCCACAGACAAGG
2	Von Willebrand factor	VWF	TGAGGCCTATGGCTTTGTGG	GGTCAAGGTCCCTTCTTGGG

Table 3. 3: List of genes and its forward and reverse primers used for RT-PCR analysis to check the effect of 3PO in normal and inflamed ECs

S. no	Gene	Symbol	Forward primer	Reverse primer
1	β -actin	ACT	AGTGTGACGTGGACATCCGCA	GCCAGGGCAGTGATCTCCTTCT
2	Interleukin 1 beta	IL1B	ATGCACCTGTACGATCACTG	ACAAGGACATGGAGAACACC
3	Interleukin 8	IL8	ATACTCCAAACCTTTCCACCC	TCTGCACCCAGTTTTCCTTG
4	Intercellular Adhesion Molecule 1	ICAM1	CAGAGGTTGAACCCACAGT	CCTCTGGCTTCGTCAGAATC

4 Chapters

Chapter – 1

1. Differentially expressed proteins in patient-derived primary endothelial cells of AMI

1.1 Abstract:

Endothelial dysfunction is one of the primary factors in the onset and progression of acute myocardial infarction. However, the comprehensive role of pathological endothelial dysfunctionality in the disease progression mechanism remains unclear. An altered protein expression profiling in combination with protein network analysis was employed by using the mass spectrometry-based label-free quantification approach. In the present study, we analysed patient-derived primary endothelial cells which had a less proliferation and migration capacity compared to normal cells. 2246 proteins were identified and quantified. Based on the statistical tests, we identified 335 significantly differentially regulated proteins in HCAEC-AMI ECs compared to the control group. Bioinformatic analysis revealed the alteration of a) metabolism of RNA, b) platelet activation, signaling and aggregation, c) neutrophil degranulation, d) metabolism of amino acids and derivatives, e) cellular responses to stress, and f) response to elevated platelet cytosolic Ca²⁺ pathways. Moreover, the expression pattern of selected genes and proteins was validated at transcriptome and proteome levels, respectively. In conclusion, these results deliver an exclusive representation of the endothelial proteome in AMI, contributing to the understanding of pathophysiology and the starting point for the identification of new drug targets.

1.2 Brief introduction:

Vascular endothelium plays a key role in the maintenance of vascular homeostasis and it also acts as a multifunctional organ for vascular tone regulation. Endothelial dysfunction is more frequently observed in the manifestation of cardiovascular risk factors and significantly contributes to the development of atherogenesis, hypertension, peripheral vascular disease, chronic kidney failure, diabetes, viral infections, coronary artery disease, and myocardial ischemia⁶⁻¹⁰. It is characterized by several features including the association of increased production of ROS, growth factors, adhesive molecules; impaired redox status and fibrinolytic ability; a discrepancy in the functions of endothelium-mediated vasodilation, prothrombic and proinflammatory responses³⁻⁵. However, the occurrence of alterations in endothelial function causes the morphological changes in the atherosclerotic plaques, lesions and also significantly involves in the development of further clinical complications⁷².

AMI is one of the leading causes of morbidity and mortality throughout the world and the appearance of this disease predominantly increasing in most of the developing countries. Approximately 15.9 million cases were reported in 2015⁷³. It is a subgroup of an acute coronary syndrome, usually occurs with a reduction in myocardial perfusion that leads to the cell necrosis due to the formation of thrombus in coronary arteries. The rupture of an atherosclerotic plaque and unstable angina exposes the blood to thrombogenic lipids, which leads to the activation of clotting factors and platelets. Previous studies have shown that circulating microparticles from patients with AMI causes the endothelial dysfunction and it also occurs severely in young acute myocardial infarction patients correlated with the thrombolysis^{74,75}.

Emerging data specifies that new pathological blood vessel responses and endothelial dysfunctionality are associated with metabolic alterations in ECs. However, the underlying mechanisms associated with dysfunctional endothelium may be multidimensional and have not been clarified yet. Therefore, identification of insights and causes resulting in dysfunctional ECs are crucial to the understanding of the disease and development of new therapeutic tools.

1.3 Results

The aim of this study was to identify the differentially regulated proteins associated with the vascular endothelial dysfunctionality of AMI. For this purpose, pathological primary ECs, isolated from the thrombus material of AMI patients, were used. Patient-derived pathological cells provide

an exclusive opportunity to identify the definite molecular proceedings. The mass spectrometry-based label-free quantitation approach was able to understand the complex network and signaling pathways associated with the endothelial dysfunctionality of AMI.

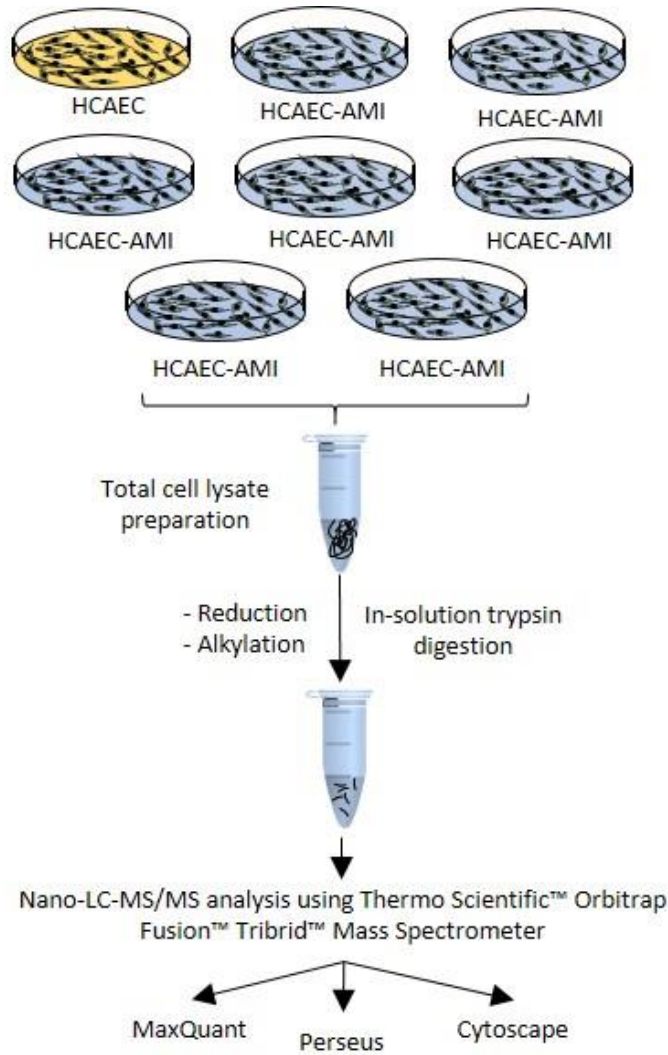


Figure 1.1: Work flow of proteomics approach

The confluent pathological ECs (HCAEC-AMI) and normal human coronary artery endothelial cells (HCAECs) were collected to extract the protein content. Altered protein expression profiling in combination with gene ontology, network and pathway analysis was employed by using the mass spectrometry-based label-free quantification approach to explore the molecular proceedings

(Figure 1.1). Multi scatter plot analysis of peptide intensities resulted in Pearson coefficients higher than 0.98, attesting the high grade of reproducibility of technical and biological replicates.

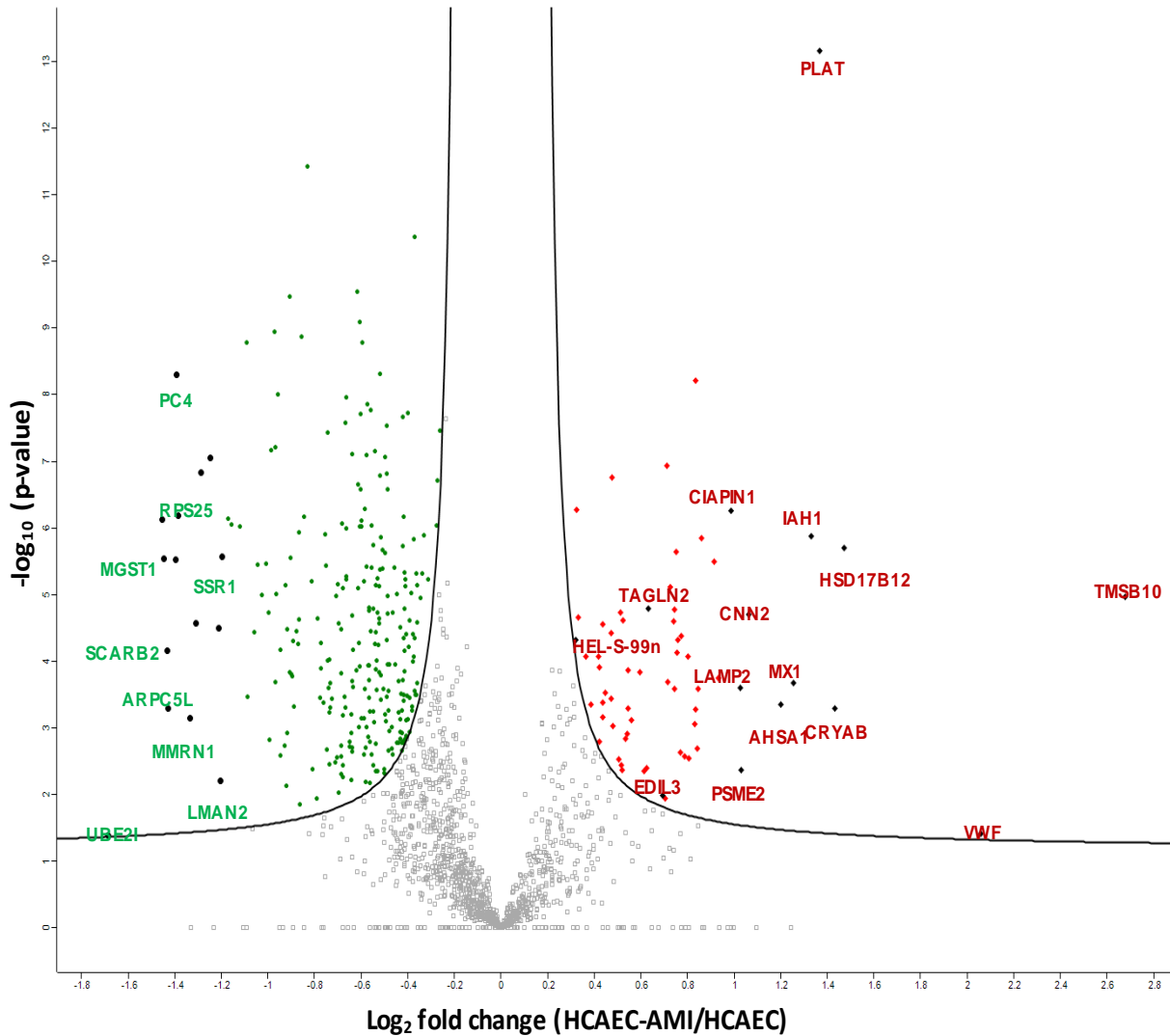


Figure 1.2: Volcano Plot obtained by two-sided t test of the groups: HCAEC-AMI (disease) versus HCAEC (control). The average label-free quantitation (LFQ) intensities of all the technical triplicates and biological replicates of HCAEC-AMI samples compared with the average LFQ intensities of all the technical triplicate and biological replicates of HCAEC samples. Green color indicates the down-regulated proteins, red color represents the upregulated ones.

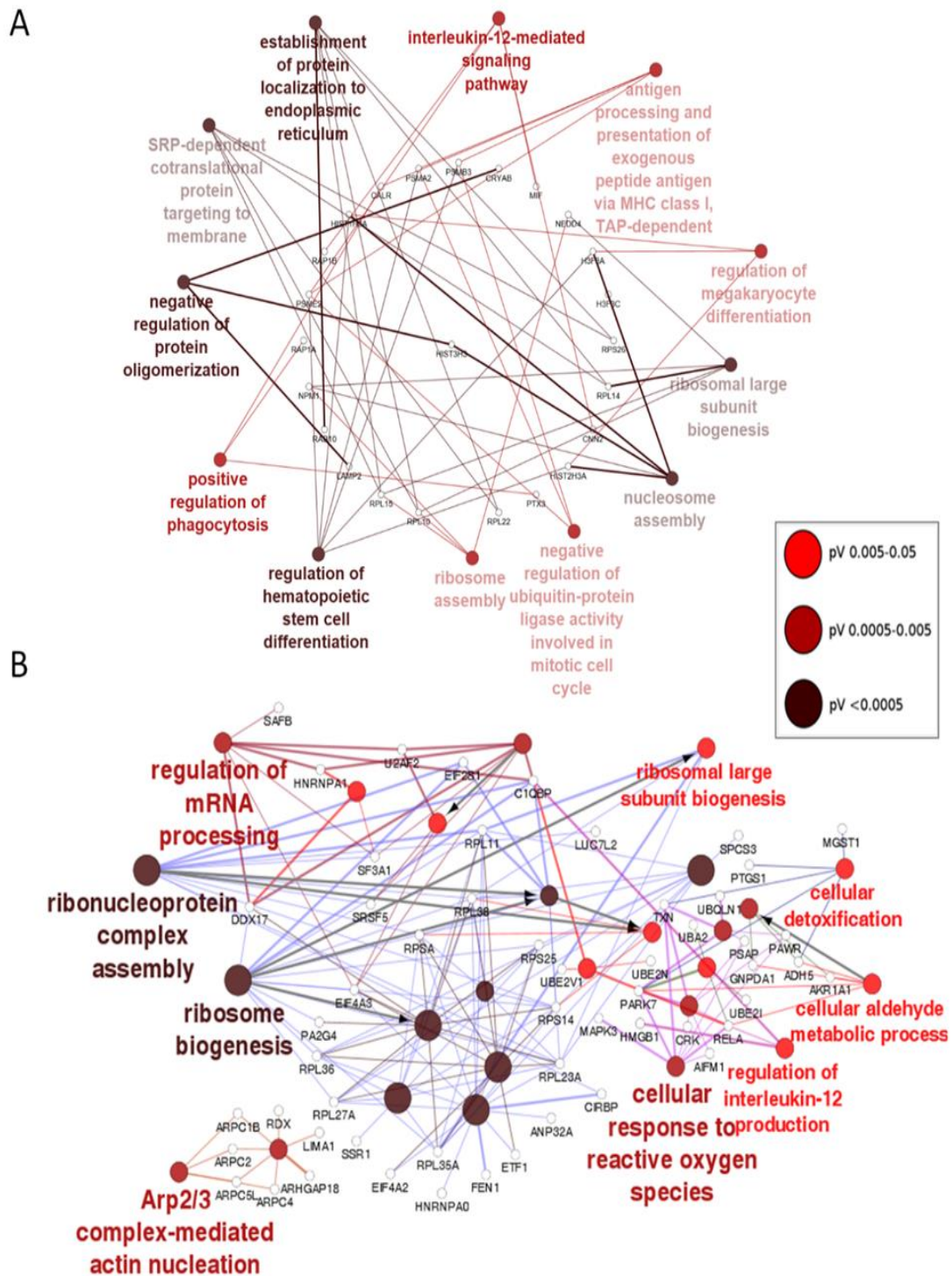


Figure 1.3: Biological process terms associated with up (a) and down (b) regulated proteins found in dysfunctional HCAEC-AMI cells. The significance of the clustering is shown by color code and the size of nodes.

335 proteins were differentially regulated, of which 40 up and 123 down-regulated proteins with a fold change higher than 1.5-in the HCAEC-AMI ECs compared to the control group. (Appendix Table-1 and 2).

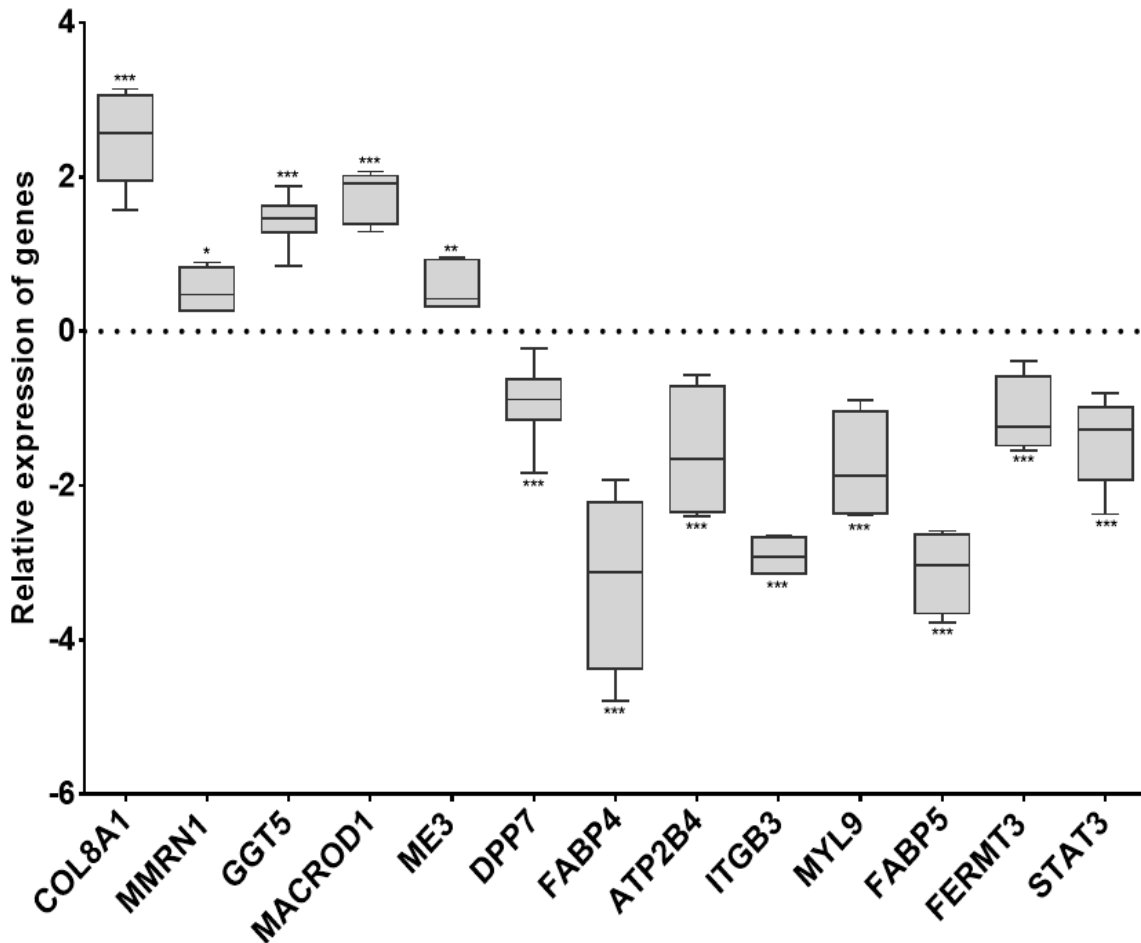


Figure 1.5: Transcript expression levels of selected genes. The expression of selected genes was normalized with RPLP0 housekeeping gene. The boxes display the relative expression of genes in HCAEC-AMI against the HCAEC expression. Data were shown in log2 fold changes of mean \pm SD. Differences were considered significant when $p < 0.05$ (*), $0.001 < p < 0.01$ (**), $p < 0.001$ (***)).

Majority of upregulated proteins in dysfunctional ECs of AMI are originated from proteasome complex, nucleosome, large ribosomal subunit and cytosolic ribosome (Supplementary Table

1.S.1). The actin-binding protein TMSB10 is showed to be high upregulated protein in dysfunctional ECs with a fold change of 6.4. This protein is involved in the actin filament organization biological process that plays an important role in the organization of the cytoskeleton. Similarly, we identified an important adhesion protein VWF as upregulated protein with a fold change of 4.2. VWF is a key protein that involves in the haemostasis, blood coagulation, platelet degranulation, and activation and extracellular matrix organization. Studies have shown that VWF promotes the formation of a molecular bridge between platelet-surface receptor complex GPIb-IX-V and sub-endothelial collagen matrix, which further increases the binding of plates to the site of vascular injury.

The plasminogen activator (PLAT) protein, involved in tissue remodelling and degradation, was found to be upregulated. Along with these proteins, a platelet-expressed protein HSD17B12 might play a primary role in the dysfunction of ECs. It has a 3-ketoacyl-CoA reductase activity, suggesting a role in lipid metabolism and fatty acid biosynthesis. Moreover, statistically significantly clustered biological processes and the involved genes were reported in Figure 1.3a.

Cytosolic small and large ribosomal subunits and proteasome complex are the main sources for the down-regulated proteins (Supplementary Table 1.S.2). These proteins are involved in ribosome biosynthesis, small and large subunit assembly, regulation of cardiac muscle contraction by calcium ion, regulation of oxidative stress-induced cell death, cellular response to reactive oxygen species and cellular aldehyde metabolic processes (Figure 1.3b). UBE2I (-1.68), SYNE1 (-1.45), and MGST1 (-1.45) showed an extensive down-regulation among all the identified proteins. The MAPEG family (Membrane-Associated Proteins in Eicosanoid and Glutathione metabolism) protein MGST1, involved in the protection of endoplasmic reticulum and outer mitochondrial membrane from oxidative stress. Therefore, the down-regulation of this protein in dysfunctional ECs might indicate the association of increased oxidative stress in endothelial dysfunction of AMI. To better understand the nature of statistically differentially regulated proteins, they were further classified in terms of Reactome pathways. The retrieved data from this analysis showed the association of metabolism of RNA (31 genes, p-value: 4.07E-12); platelet activation, signaling and aggregation (15 genes, p-value: 1.04E-13); neutrophil degranulation (23 genes, p-value: 2.31E-07); metabolism of amino acids and derivatives (22 genes, p-value: 4.04E-12); platelet degranulation (10 genes, p-value: 1.04E-13); cellular responses to stress; and response to elevated

platelet cytosolic Ca²⁺ pathways (10 genes, p-value: 1.04E-13) in endothelial dysfunction of AMI (Figure 1.4).

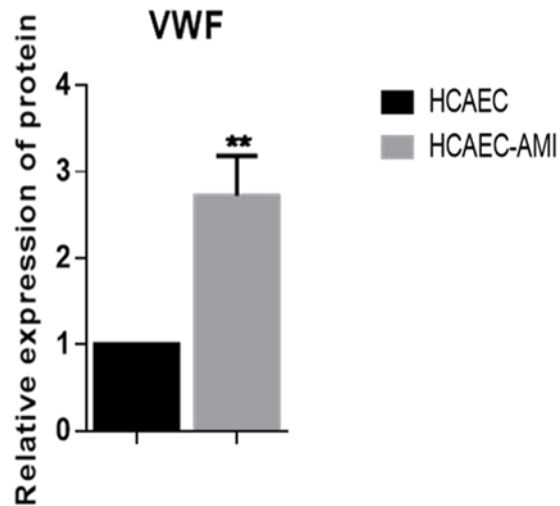
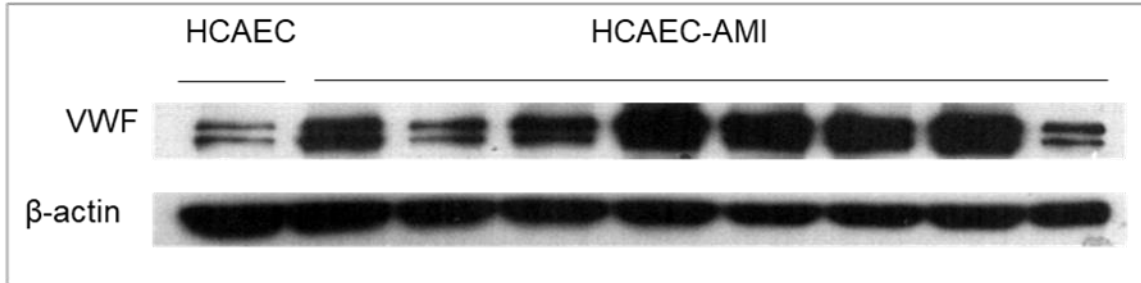


Figure 1.6: Protein expression levels of selected proteins. Bar graph was plotted with mean \pm SEM, the x-axis represents the HCAEC-AMI and HCAEC groups and the y-axis represents the relative expression of a respective protein to control. Differences were considered significant when $p < 0.05$ (*), $0.001 < p < 0.01$ (**), $p < 0.001$ (***)). β -actin was used as a housekeeping protein.

1.3.1 Validation of differentially regulated proteins by RT-PCR analysis:

A total of 13 genes were selected to understand its variation at mRNA level by using quantitative real-time PCR method. The expression of these genes was evaluated using HACEC-AMI cell lines against the HCAECs. The genes such as COL8A1, MMRN1, GGT5, MACROD1, and ME3 were

found to be upregulated and genes including DPP7, FABP4, ATP2B4, ITGB3, MYL9, FABP5, FERMT3 and STAT3 were found to be down-regulated during the endothelial dysfunction of AMI (Figure 1.5).

1.3.2. Validation of differentially regulated proteins with western blot analysis:

The differential expression of VWF was validated by western blot analysis. The peak intensity area of each protein band was calculated using ImageJ software and the data illustrated as histograms after analysing against the ACT as housekeeping protein. As shown in the figure (Figure 1.6), the relative abundance of VWF protein was analogous to the results from label-free quantification study. (2.7-fold change in western blot and 4.2-fold change in proteomics).

1.4 Discussion:

A deep understanding of molecular mechanisms of disease is crucial in the discovery of novel therapeutic strategies and in the early prediction to improve the prognosis. Mass spectrometry-based proteomics is one of the advanced tools to identify early biomarkers in the various biological samples. In the present study, for the first time, the changing of proteome profile of patient-derived HCAEC-AMI cells was analysed.

The endothelium which exists between the circulatory system and surrounding tissues plays an important role in the vascular injury. Based on the stress and tissue needs, ECs can induce prothrombotic or antithrombotic events. Usually, healthy ECs express anticoagulant and antiplatelet agents that can be involved in the prevention of fibrin formation and platelet aggregation. Whereas dysfunctional ECs generate aggregation, fibrin formation along with the platelet adhesion. During the final stage, ECs produce pro-fibrinolytic events to enhance the fibrinolysis for the degradation of the clot. On the other hand, ECs under physiological conditions prevent thrombosis by activating the cascade of anticoagulant and antiplatelet mechanisms. In this study TMSB10 and VWF proteins were highly upregulated. TMSB10 has a role in the organization of the cytoskeleton, while the increased expression of VWF clearly explains an enhanced occurrence of thrombosis. VWF also binds to collagen during the damage occurring to the blood vessels. Collagen plays a key role in the maintenance of integrity and elasticity of normal vessel walls as well as atherosclerotic vessel walls and it stimulates the thrombosis formation and scar formation processes particularly in acute myocardial infarction⁷⁶ VWF and over expressed

RAP1A, RAP1B proteins are involved in the platelet aggregation, in integrin alpha IIb beta3 signaling and in MAP2K and MAPK activation pathways.

MAPKs is implicated in multiple important cellular processes such as apoptosis, proliferation, motility, differentiation, stress response, and survival. In this study, MAPK3 protein were down-regulated, that correlates with lower proliferation capability.

Recent studies showed that interferon-induced GTP-binding protein MX1 involved in MI and suggested to play a role in the pathology of the disease^{77,78}. In this study, MX1 was upregulated with fold change of 2.4, attesting its role in endothelial dysfunction of AMI.

Rap1, which controls the EC function, is one of the critical mediators of FGF-induced ERK activation in human angiogenic process⁷⁹. In this study, upregulation of RAP1a and RAP1b in dysfunctional ECs might explain the strong correlation between endothelial dysfunction, platelet aggregation and angiogenesis in AMI. It might also play a role in the vascular EC protection, based on the results of knockdown studies⁸⁰.

The identified differentially regulated proteins in patient cells, such as VWF⁸¹, CRYAB⁸², MX1⁸³, CNN2^{84,85}, PSME2⁸⁶, CIAPIN1⁸⁷, TAGLN⁸⁸, and EDIL3⁸⁹ have been reported to be implicated in AMI, myocardial infarction (MI) vascular injury, morphogenesis, and angiogenesis.

Furthermore, previous studies have shown the increased synthesis of type VIII collagen in the vascular injury of the development process of atherosclerosis in humans and animal models^{90,91}. The identified over expressed HSD17B12 protein is a reductase involved in collagen binding activity and long fatty acid chain metabolism. However, in the case of dysfunctional ECs of CTEPH disease, HSD17B12 shown the down regulation, suggesting different role in both different diseases.

MMRN1, belonging to EMILIN family⁹², is usually found in platelets, and has an adhesive ligand property in synergy with VWF in platelet adhesion to collagen at the sites of vascular injury^{93,94}. The down regulation of MMRN1 protein, was not confirmed by analysis of its gene expression. This lack of correlation is likely due to the differentially regulation of post translated modified form of the protein.

EC apoptosis has a fundamental role in the angiogenesis process and pathological vascular remodelling and regression⁹⁵⁻⁹⁷. In this study proteins related to apoptosis pathway resulted

differentially regulated. In particular, CYCS, DNMT1L, HMGB1, LMNB1, PSMA4, PSMA7, PSMB5, PSMC5, PSMD13, PSME1, YWHAB, YWHAE showed decreased expression and PSMA2, PSMB3 (1.08-fold change) and PSME2 showed increased expression, attesting their essential role during endothelial reorganization in AMI.

Metabolic alterations and oxidative stress are important influencing factors in the endothelial dysfunctionality of cardiovascular diseases and diabetes^{98–100}. Normal ECs constantly produce endothelial nitric oxide synthase (eNOS). The impairment of eNOS–NO system causes the oxidative stress and endothelial dysfunction that further accelerates the atherogenesis. In this investigation, a reduced expression of eNOS activation pathway, described by the down-regulation of CALM1, CALM2, and CALM3 proteins, and the activation of NF-kappaB in B cells, were found. The down-regulation of PARK7, PAWR, PSAP, TXN and UBQLN1 proteins, involved in the regulation of oxidative stress-induced cell death, and the down-regulation of MGST1 protein, involved in the cell protection against oxidative stress, were found. This confirms the involvement of oxidative stress in endothelial dysfunction. The inhibition of vascular oxidative stress and enhancement of eNO production could be a potential therapeutic strategy along with the treatments of established risk factors.

FABP4 is one of the most abundant proteins in fat cells and lipocytes also known as adipocyte cells and it has a major role in proinflammatory activity in macrophages. Previous studies reported overexpression of endothelial FABP4 in response to angiogenic growth factor VEGFA¹⁰¹; while other studies demonstrated the correlation between down-regulation of FABP4 and decrease of endothelial cell proliferation^{101,102}. According to the gene expression studies, it encourages P38, endothelial nitric-oxide synthase and stem cell factor (SCF)/c-kit pathways¹⁰². Furthermore, knockdown studies of FABP4 increased the oxidative stress¹⁰³. In the present study, the down-regulation of FABP4 at transcriptome level was found, accordingly with less proliferation and migration capacity of AMI cells (Data not shown; however, these results were validated by other ESR in Prof. Marta Cascante's lab as a part of MoGlyNet project consortium).

Ribosome (including RNA and proteins) is an essential component in the machinery of protein synthesis and ribosomal proteins (RPs) plays a critical role in the cell proliferation, differentiation, apoptosis, DNA repair, and other cellular processes¹⁰⁴. Studies have shown that the dysfunction of ribosomal biosynthesis may result in abnormal cell proliferation in metabolic disorders and

cancer^{105,106}. Moreover, various RPs have been reported to be associated with the progression of cardiovascular diseases^{107,108}. However, we observed the down-regulation of several RPs in dysfunctional ECs which are corresponding to the ribosome biogenesis, small and large subunit assembly processes.

In conclusion, the main involved pathways and related proteins have been extensively described by the quantitative and bioinformatic analyses. This can provide new perspectives in drug discovery to treat cardiovascular diseases.

1.5 Novelty and significance of the work:

What is new?

- This is the first ever study performed to explore the proteomic signatures with patient-derived pathological ECs to unveil underlying pathophysiological mechanisms in endothelial dysfunction associated with AMI.

What is Relevant?

- Quantitative proteomic profiling in endothelial dysfunction reveals the differentially regulated proteins that might behave as a biomarker signature of thrombosis, metabolism and oxidative stress.
- The overexpression of VWF strongly associated with thrombus formation, platelet aggregation and angiogenesis that might play a key role endothelial dysfunction of AMI.
- Increased production of oxidants and decreased production of anti-oxidant biomarkers as well as down regulation of protein which had an antioxidant property strongly explained the correlation of the role of oxidative stress in endothelial dysfunction of AMI.

Chapter -2

2 Differentially Expressed Proteins in Pulmonary Endothelial Cells in Chronic Thromboembolic Pulmonary Hypertension.

2.1 Abstract:

Dysfunction of ECs is one of the major factors involved in the development of CTEPH. Therefore, identification of the molecular mechanisms underlying endothelial dysfunction is crucial to the understanding of the disease and to the expansion of novel therapeutic strategies. The aim of this study was to identify the differentially regulated proteins associated with the vascular dysfunctionality of CTEPH. CTEPH-ECs isolated from specimens obtained in PEA from five patients were analysed. In depth one single run label free quantitative mass spectrometry resulted in a description of an altered protein profiling. 3258 proteins were identified and quantified; 676 were statistically significant differentially regulated proteins. Network analysis revealed the differential regulation of pathways related to a) neutrophil and platelet degranulation, b) metabolism of lipids, amino acids and selenoamino acids, c) response to elevated cytosolic Ca²⁺, e) detoxification of reactive oxygen species in the dysfunctional CTEPH-ECs.

2.2 Brief introduction:

CTEPH is a rare, progressive and discrete pulmonary vascular disease that occurs in the late complication of acute PE followed association with VTE^{36,109,110}. The presence of pathological modifications in the pulmonary arteries and their impediments primes to an intensification of pulmonary artery vascular resistance along with the progressive deterioration, which may ultimately lead to the failure of right ventricular. However, according to the recent epidemiological analysis the occurrence of CTEPH will increase in the following decade and it can be considered as life threatening disease with poor prognosis^{111,112}.

Endothelial dysfunction plays a vital role in the vascular remodelling of pulmonary arteries in PH¹¹³. The comprehensive role of pathological endothelial dysfunctionality during the disease progression mechanism of CTEPH disease remains unclear. Determining the molecular changes and underlying mechanisms that causes the dysfunction of endothelium is currently essential for the identification of early prediction and the development of novel therapeutic strategies.

2.3. Results:

To understand the proteomic changes underlying endothelial dysfunctionality associated with CTEPH, we used patient-derived CTEPH-ECs and healthy HPAEs. 3258 proteins and 27678 unique peptides were identified and quantified. 676 proteins were differentially regulated and considering a threshold of ± 1.5 -fold change, 82 proteins were overexpressed, and 227 proteins resulted down-regulated in the CTEPH-ECs compared to the HPAEs group. (Appendix Table 3 and 4). Figure 2.1 shows the distribution of differentially regulated proteins.

Most of the upregulated proteins in dysfunctional ECs of CTEPH were originated from ribosome, large ribosomal subunit and cytosolic ribosome (Supplementary Table 2.S.1). The top three upregulated proteins, PLOD2, TAGLN, TPT1, belong to endoplasmic reticulum, cytoplasm and nucleus, respectively. Network analyses showed the upregulated proteins are involved in various biological processes, such as ribonucleoprotein complex biogenesis, ribosome biogenesis, RNA catabolic process. The enriched biological process terms are described in Figure 2.2.

Vascular endothelium glycoprotein ENG is one of the most important upregulated protein observed in this study. This protein is involved in the positive regulation of angiogenesis, response to hypoxia, positive regulation of collagen biosynthesis and negative regulation of nitric-oxide

(NO) synthase processes. The poly (A) RNA, protein and ATP binding molecular functions were also observed.

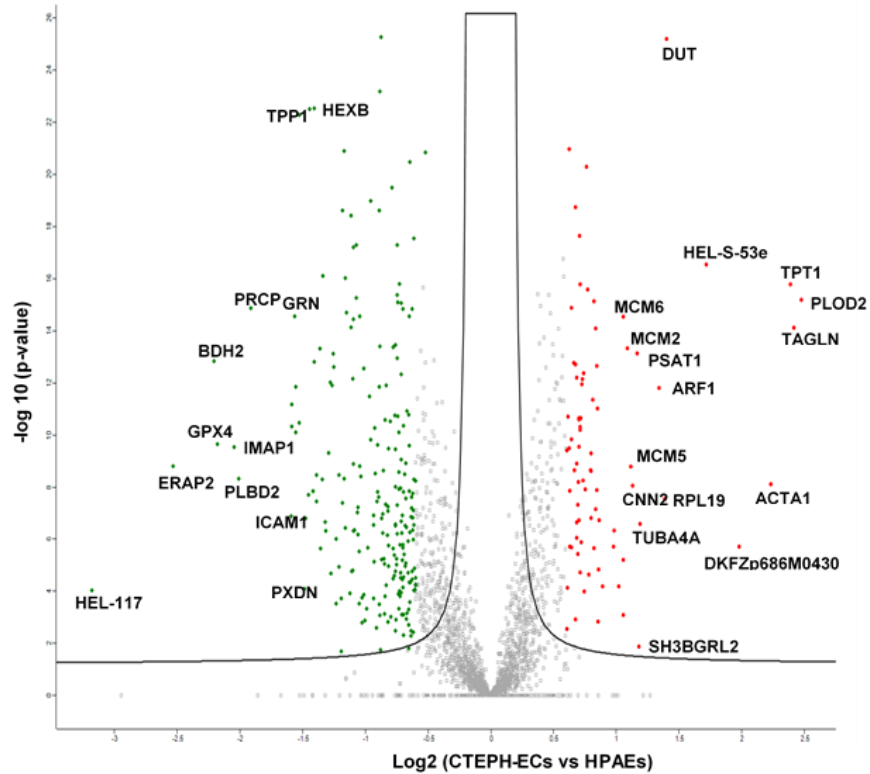


Figure 2.1: Distribution of altered proteins in CTEPH-ECs cells. In the above scatter plot, X-axis represents log2 fold change and y-axis represents -log p-value of significantly differentially regulated proteins. Green colour symbolizes down-regulation, red colour symbolizes upregulation.

The down-regulated proteins belong to the mitochondrion including envelope, matrix, inner membrane, oxidoreductase and respiratory chain; while some are from vacuole and lysosome.

The mitochondrial protein GPX4, cytoplasmic protein BDH2, endoplasmic reticulum proteins ERAP2 and UCHL1 were the main four down-regulated proteins. GPX4 is an essential antioxidant peroxidase that protect cells from oxidative damage by preventing membrane lipid peroxidation.

However, in our study this protein showed a drastic down-regulation (fold-change of 0.2), suggesting the association of oxidative stress/damage in dysfunctional ECs. Network analyses of down regulated proteins showed the enrichment of biological processes, such as generation of precursor metabolites and energy, mitochondrion organization, ribose phosphate metabolic

process, respiratory electron transport chain, nucleotide metabolic process and cellular lipid metabolic process (Figure 2.3). The enriched molecular function GO terms are instead related to coenzyme binding, oxidoreductase, hydrolase and endopeptidase activities.

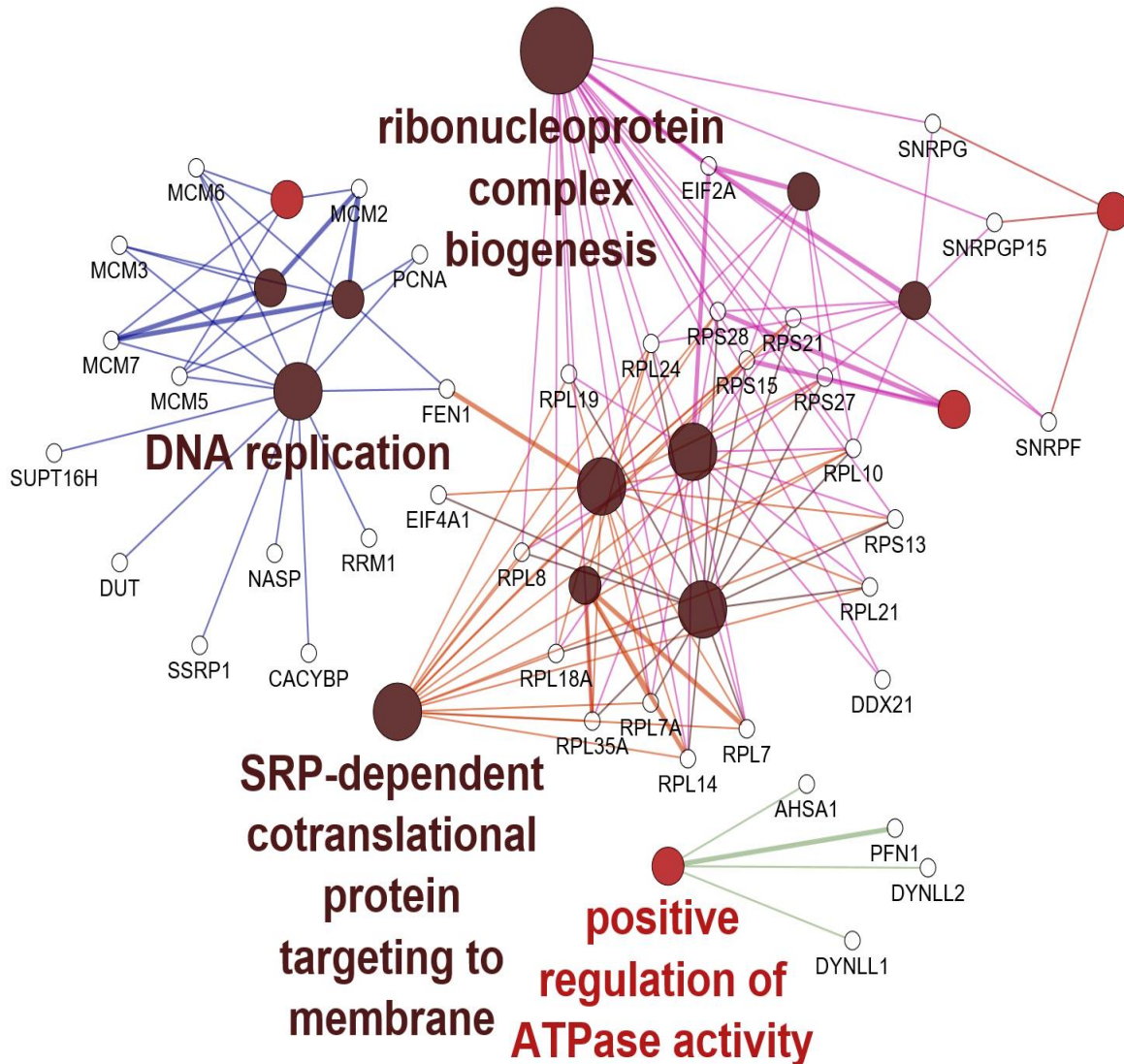


Figure 2.2: Biological process terms associated with up regulated proteins found in dysfunctional CTEPH-ECs. The significance of the clustering is shown by color code and the size of nodes.

Network analyses, based on Reactome terms, resulted in enrichment of pathways, such as metabolism (124 genes, p-value: 6E-08); neutrophil (41 genes, p-value: 1E-08) and platelet degranulation (13 genes, p-value: 1E-05); response to elevated platelet cytosolic Ca²⁺ (13 genes, p-value: 1E-05); metabolism of lipids (37 genes, p-value: 3E-07), and amino acids (28 genes, p-value: 1E-05); detoxification of reactive oxygen species (6 genes, p-value: 2E-05), pathways

(Figure 2.4). In addition, enriched KEGG terms were arginine and proline metabolism (7 genes, p-value: 6E-04); tryptophan metabolism (8 genes, p-value: 6E-04); beta-alanine metabolism (6 genes, p-value: 6E-04); pyruvate metabolism (8 genes, p-value: 6E-04) and glutathione metabolic (7 genes, p-value: 0.0002) pathways.

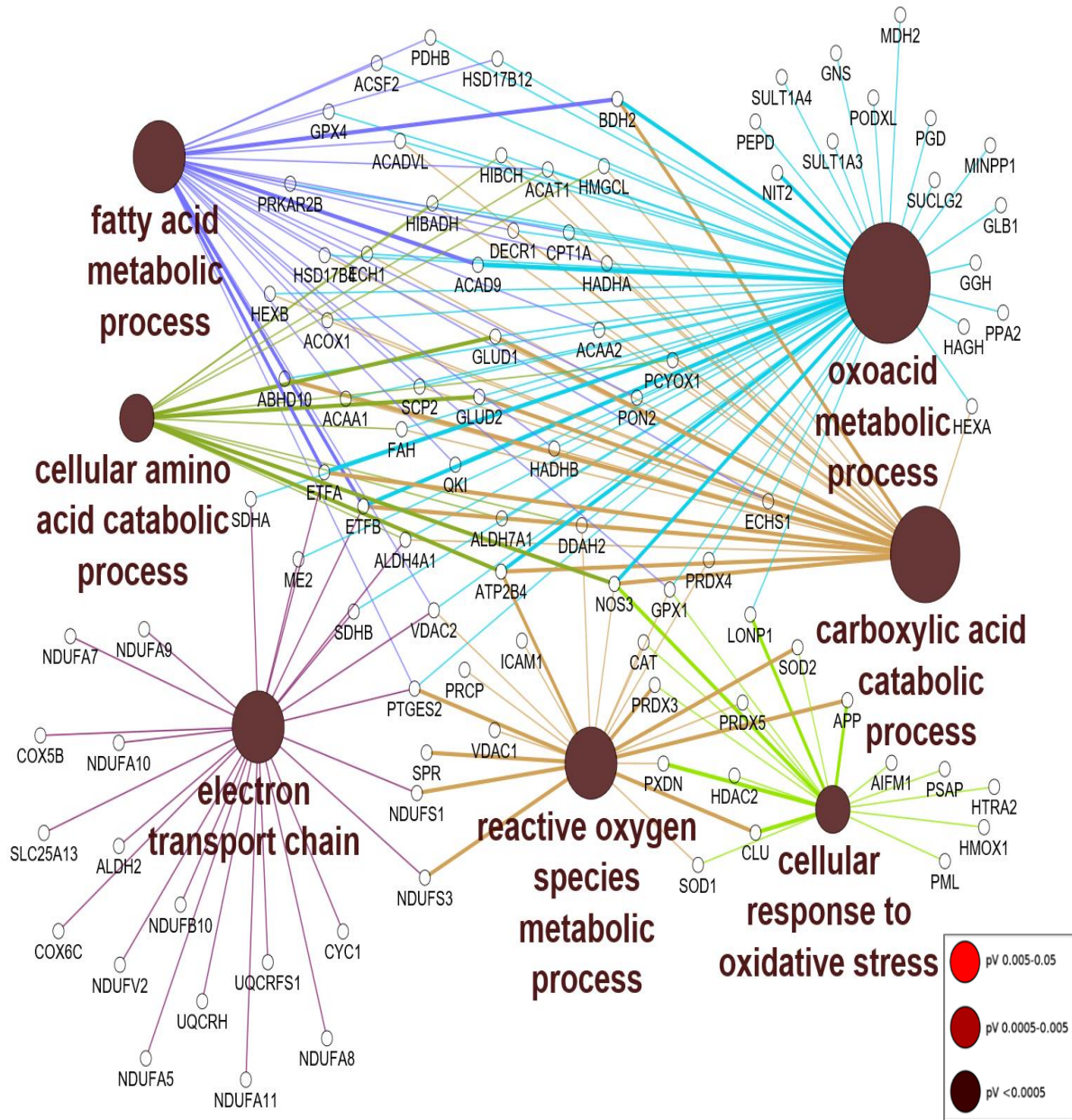


Figure 2.3: Biological process terms associated with down regulated proteins found in dysfunctional CTEPH-ECs. The significance of the clustering is shown by color code and the size of nodes.

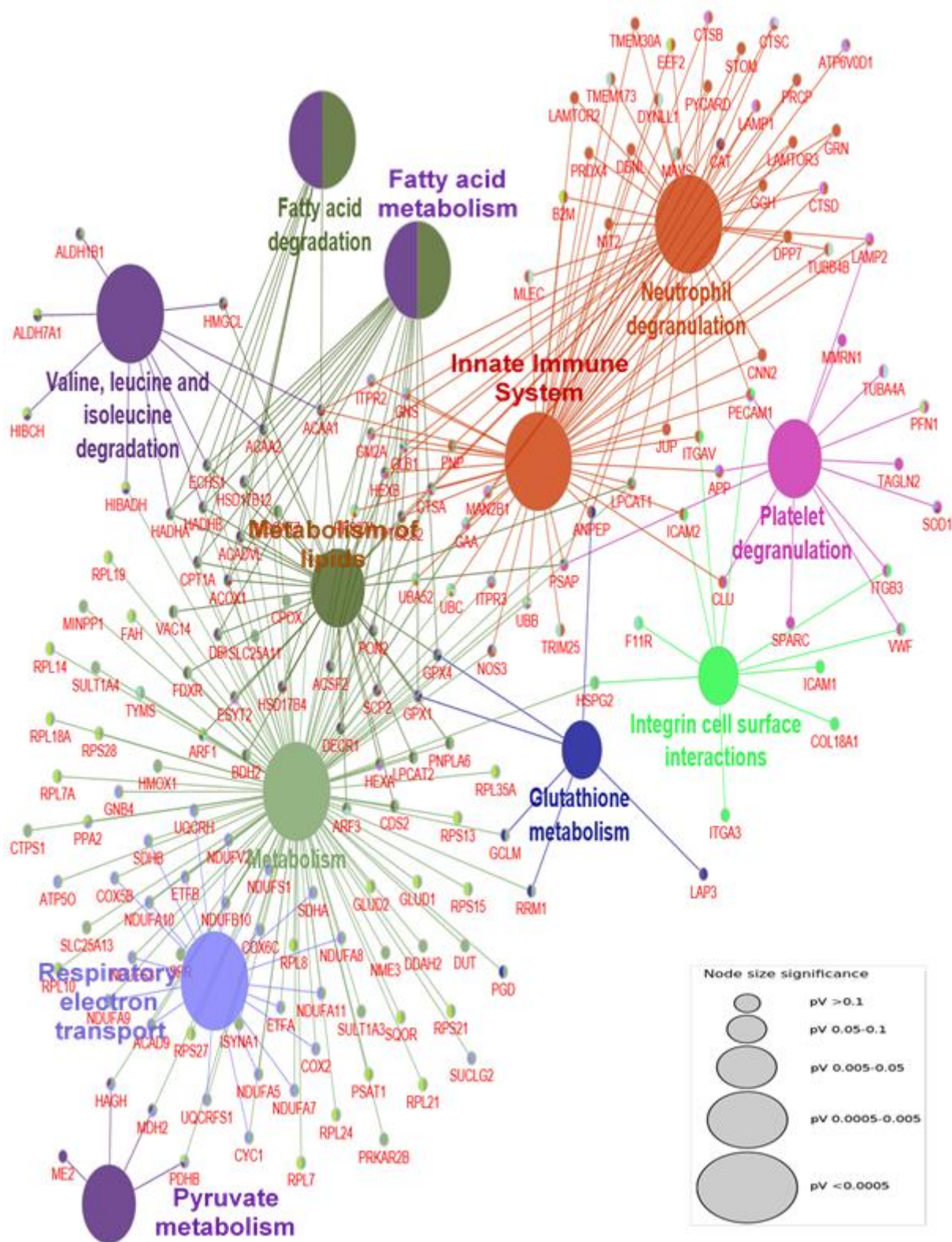


Figure 2.4: Main pathways and respective genes found in dysfunctional CTEPH-ECs.

2.2.1 Validation of VWF protein by RT-PCR analysis:

We also validated the gene expression of VWF, protein which we found as down-regulated in the proteomic analysis. As shown in Figure 2.5, the gene expression of VWF was down-regulated at mRNA level.

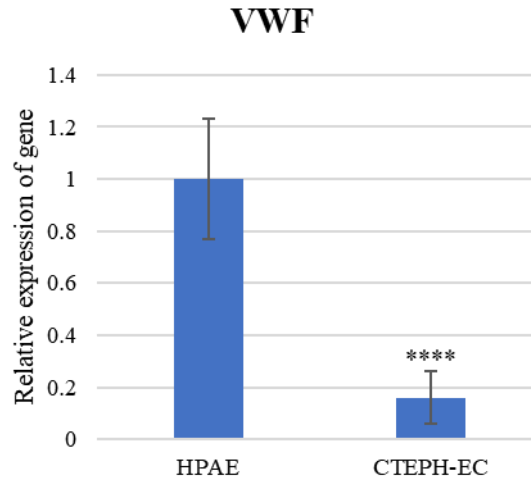


Figure 2.5: Transcript expression levels of VWF gene. The expression of the targeted gene was normalized with RPLP0 housekeeping gene. The boxes display the relative expression of gene in CTEPH-EC against the HPAE expression. Data were shown in mean \pm SEM. Differences were considered significant when $p < 0.05$ (*), $0.001 < p < 0.01$ (**), $p < 0.001$ (***), $p < 0.0001$ (****).

2.3 Discussion:

In our knowledge, this is the first ever study to analyze the proteome profile of patient-derived CTEPH-ECs to understand the underlying mechanisms associated with endothelial dysfunctionality of CTEPH. The quantitative proteomics approach showed PLOD2 as the most upregulated protein attesting its key role in CTEPH, as supported by previous studies in PAH patients¹¹⁴. PLOD2 is an attachment site for carbohydrates and it is involved in the stability collagen fibrils. Collagen plays a key role in the maintenance of integrity and elasticity of normal vessel walls as well as atherosclerotic vessel walls and it stimulates the thrombosis formation and scar formation processes particularly in acute myocardial infarction¹¹⁷. Under the hypoxic conditions, PLOD2 mediate the remodeling of ECM in synergy with collagen prolyl hydroxylases (P4HA1 and P4HA2)¹¹⁵. PLOD2 is involved in collagen deposition¹¹⁵. that induces the reduction of vascular elasticity. The increased expression of PLOD2 promotes fibrosis, which usually occurs

because of the injury. COL8A1, involved in the maintenance of vessel wall integrity and structure in atherogenesis¹¹⁶, was down regulated. On the other hand, TAGLIN showed an extensive upregulation with a fold change of 5.3 in CTEPH-ECs. Recent study has shown that TAGLIN overexpression promoted the proliferation and migration of human pulmonary arterial smooth muscle cells (PASMC), strengthened cytoskeleton; suppression of this protein activated PASMC apoptosis, reducing cell proliferation and migration¹¹⁷. The higher expression of TAGLIN might be related to the hyperproliferative phenotype of CTEPH-ECs and it might have an important role in endothelial dysfunction.

Metabolic alterations in ECs are one of the hall marks of endothelial dysfunction in cardiovascular diseases. Among all the identified metabolic pathways, most of the up-regulated proteins are involved in metabolism of pyrimidine, nucleotides, selenoamino acid; and metabolism of amino acids and derivatives pathways, while down-regulated regulated proteins are involved in, tryptophan metabolism, beta-alanine metabolism, pyruvate metabolism glutathione metabolism, arginine and proline metabolism pathways. Haemolysis is one of the common occurrences in pulmonary hypertension and endothelial dysfunction^{118,119}. Arginine metabolism changes and reduces NO bioavailability during haemolysis. Proline is an amino acid involved in lung fibrosis, smooth muscle cells proliferation and collagen formation. Low arginine/ornithine ratio has been reported to be associated with high mortality. Under conditions of low arginine and tetrahydrobiopterin, eNOS is uncoupled generating reactive oxygen species¹²⁰. Emerging studies demonstrated that oxidative stress is one of the potential influencing factor in endothelial dysfunction^{121,122}. The down regulation of identified GPX4, GPX1, NOS3 proteins attested the increment of oxidative stress. Among these GPX4 found as one of the most down-regulated protein (-4.36-fold change). Under physiological conditions, the antioxidants related to glutathione peroxidase family proteins GPX1 and GPX4 protects the cells from oxidative stress¹²³. GPX4 prevents the cells from ferroptosis, a non-apoptotic cell death as consequence of iron-dependent accumulation of lipid reactive oxygen species (ROS)¹²⁴. Elevated levels of GPX1 protected the cultured HPAE from hydrogen peroxide induced cell death¹²⁵. Reduced expression of GPX1 can also lead to inflammatory activation of ECs, that further increase to a proatherogenic endothelial phenotype¹²⁶. Genetic deletion of GPX1 decreased bioavailability of NO and increased the oxidative stress¹²⁷. Moreover, normal ECs always generate endothelial nitric oxide synthase (eNOS), which is essential for maintain various endothelial functions including the vascular

smooth muscle relaxation, vascular endothelial growth factor (VEGF) induced angiogenesis, suppression of inflammatory cell migration and adhesion, angiogenesis, inhibition of thrombosis and coagulation. The impairment of eNOS causes the endothelial dysfunction and oxidative stress which further increases the atherogenesis. The endothelial NOS3 protein, responsible for the production of NO, was found down regulated and vascular endothelium glycoprotein ENG, involved in the negative regulation of NO production, was found up regulated. . Therefore, the reduction in NO bioavailability, resulting from reduced NO production and/or increased NO degradation by superoxide anion, describes the onset of endothelial dysfunction¹²². Furthermore, a drastic alteration in mitochondrial respiratory chain complexes was described by network analyses. COX5B, COX6C, CYC1, ETFA, ETFB, NDUFA10, NDUFA11, NDUFA5, NDUFA7, NDUFA8, NDUFA9, NDUFB10, NDUFS1, NDUFS3, NDUFV2, SDHA, SDHB, SLC25A13, UQCRCF1 and UQCRCR proteins are the major down-regulated proteins in mitochondrial respiratory chain complex.

In summary the mechanisms underlying endothelial dysfunction implicates metabolic alterations and oxidative stress related event increment.

2.4 Novelty and significance of the study:

What is new?

- This is the first ever study performed to explore the proteomic signatures with patient-derived pathological ECs to unveil underlying pathophysiological mechanisms in endothelial dysfunction associated with CTEPH.

What is Relevant?

- Quantitative proteomic profiling in endothelial dysfunction reveals the differentially regulated proteins that might behave as a biomarker signature of vascular injury, metabolism and oxidative stress.
- The overexpression of PLOD2 and ENG strongly associated with thrombus formation, platelet aggregation and angiogenesis that might play a key role endothelial dysfunction of CTEPH.
- Increased production of oxidants and decreased production of anti-oxidant biomarkers as well as down regulation of protein which had an antioxidant property strongly explained the correlation of the role of oxidative stress in endothelial dysfunction of CTEPH.

Chapter - 3

3 *Oxidative stress/redox status in HCAEC-AMI and CTEPH-ECs:*

3.1 Abstract:

Oxidative stress is one of the major mechanisms involved in the development and progression of several cardiovascular diseases. However, the role of oxidative stress in causing/developing the endothelial dysfunction associated with AMI and CTEPH diseases remains unknown. Therefore, the aim of this study was focused to investigate the oxidants/redox status in pathological ECs of AMI and CTEPH to elucidate the role of oxidative stress in determining EC dysfunctionality. Quantitative proteomics studies indicated the alteration in the expression of several of proteins, responsible for maintaining the balance between oxidants and antioxidants. To further investigate the status of oxidative stress biomarkers in dysfunctional ECs, the levels of total advanced oxidation protein products (AOPPs), total protein carbonyl content (PCOs), intracellular reactive oxygen species (ROS), ratio of GSH to GSSG, ratio of NADPH to NADP and SOD activity in dysfunctional ECs of AMI and CTEPH were analysed. The differences between pathological ECs and control cells of both AMI and CTEPH diseases resulted significant. The production of AOPPs, PCOs, and intracellular ROS in HCAEC-AMI and CTEPH-ECs were increased. Interestingly, the amount GSH/GSSG and NADPH to NADP ratios in dysfunctional ECs were reduced, a clear indication of oxidative stress involvement in the endothelial dysfunction.

3.2 Brief introduction:

Oxidative stress is one of the characteristics of endothelial dysfunction. The oxidative modifications of proteins are an irreversible process, leading to pathological conditions of the vascular system¹²⁸. Hyperglycemia is known to increase oxidative stress¹²⁹. The glycolytic activity is relatively higher in the endothelial cells compared to the other cells. The glycolytic flux in ECs is >200-fold higher than glucose, fatty acid, and glutamine oxidation, resulting in the generation of >85% of the total cellular ATP content¹³⁰. The hyperglycemia promotes the cellular reactive oxygen species (ROS) production through direct glucose auto-oxidation, advanced glycation end product-dependent NADPH activation and mitochondrial superoxide production. Therefore, ROS generated in the atherosclerotic plaque, may be implicated in the disease process and in favouring plaque instability. Oxidative stress occurs due to the imbalance between oxidants and antioxidants that promotes CAD and plaque vulnerability. The cells present in the vascular system such as endothelial cells, adventitial cells, and smooth muscle cells can produce ROS. Due to the increased production of ROS coupled with decreased antioxidant defence, the integrity of the vessel wall is compromised in the patients with vascular diseases. The ROS might activate the signals that further increase endothelial barrier dysfunction, smooth muscle hypercontractility, and vascular remodeling¹³¹. Studies have been reported the contribution of oxidative stress in the pathogenesis of PAH and atherosclerosis^{132–135} and oxidative stress markers increased after MI¹³⁶.

AOPPs are a family of compounds generated by protein oxidation and widely recognized as markers for the progression of several diseases like atherosclerosis^{128,137}, systemic sclerosis¹³⁸, renal complications¹³⁹, diabetes mellitus¹⁴⁰, and HIV-positive patients¹⁴¹.

3.3 Results:

AOPPs, PCOs and intracellular ROS were assessed as oxidative biomarkers. The ratio of GSH/GSSG, ratio of NADPH/NADP and SOD activity were evaluated as antioxidative biomarkers.

AOPPs are produced by the cross-link reaction of plasma proteins with chlorinated oxidants, such as hypochlorous acid and chloramines during oxidative stress. The biological role of AOPPs is similar to AGEs proteins. The levels of AOPPs measured in dysfunctional ECs of AMI and CTEPH resulted significantly higher related to control cells (Figure 3.1a and b). These results

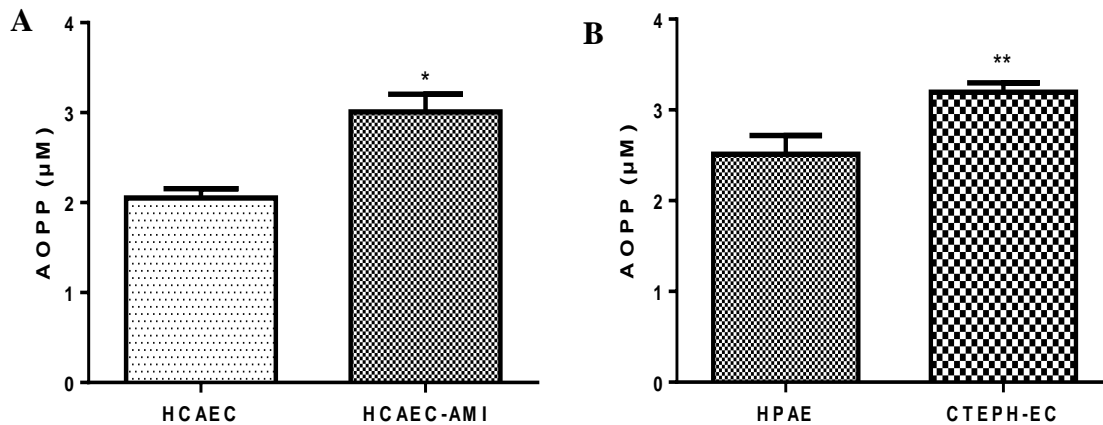


Figure 3.1: Levels of AOPPs in dysfunctional ECs. Patient derived pathological ECs exhibited explicit reactions to oxidative stress. A) Bar graph represents the total quantity AOPPs produced in control and HCAEC-AMI cells (N=12) B) Bar graph represents the total quantity AOPPs produced in control and CTEPH-ECs (N=9). Results were expressed as mean \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

indicated that ECs are more susceptible to protein oxidation. Protein carbonylation is one of the protein modifications, usually occurs due to the oxidation of lysine, arginine, threonine and proline amino acids or interaction with ROS and oxidized lipids.

The total protein carbonyls content (PCOs) was also higher related to controls (Figure 3.2a and b). In addition, the levels of intracellular ROS resulted higher in the dysfunctional ECs of AMI and CTEPH(Figure 3.3a and b).

To study the status of antioxidant levels the GSH (reduced) and GSSG (oxidized) ratio was measured. GSH is a major tissue antioxidant that provides reducing equivalents for the glutathione peroxidase (GPx) catalyzed reduction of lipid hydroperoxides to their corresponding alcohols and hydrogen peroxide to water.

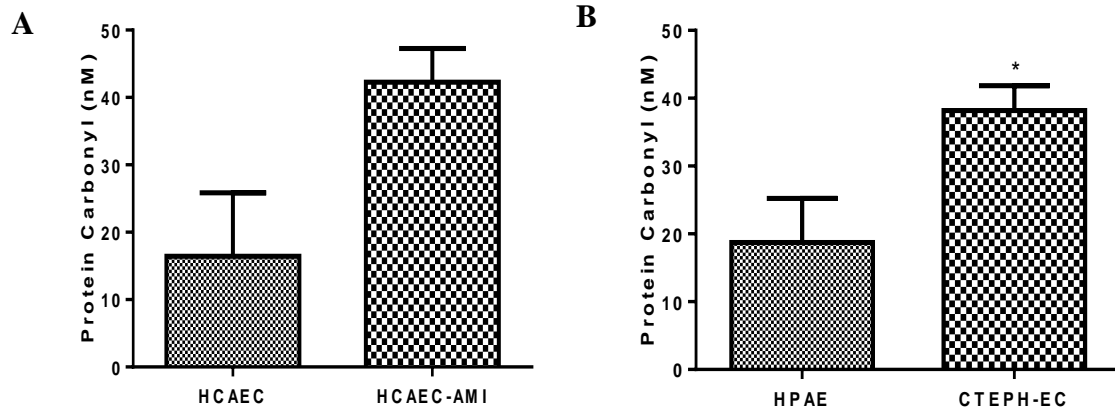


Figure 3.2: Status of PCOs in dysfunctional ECs. A) Bar graph represents the total PCOs produced in control and HCAEC-AMI cells (N=12) B) Bar graph represents the total quantity of PCOs produced in control and CTEPH-ECs (N=6). Results were expressed as means \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

In the GPx catalyzed reaction, the formation of a disulfide bond between two GSH molecules gives rise to oxidized glutathione (GSSG). The enzyme glutathione reductase (GR) recycles GSSG to GSH with the simultaneous oxidation of β -nicotinamide adenine dinucleotide phosphate (β -NADPH₂). The GSH to GSSG ratios were decreased in the pathological endothelial cells of AMI and CTEPH (Figure 3.4a and b), showing an increase of oxidative stress that induce the accumulation of GSSG.

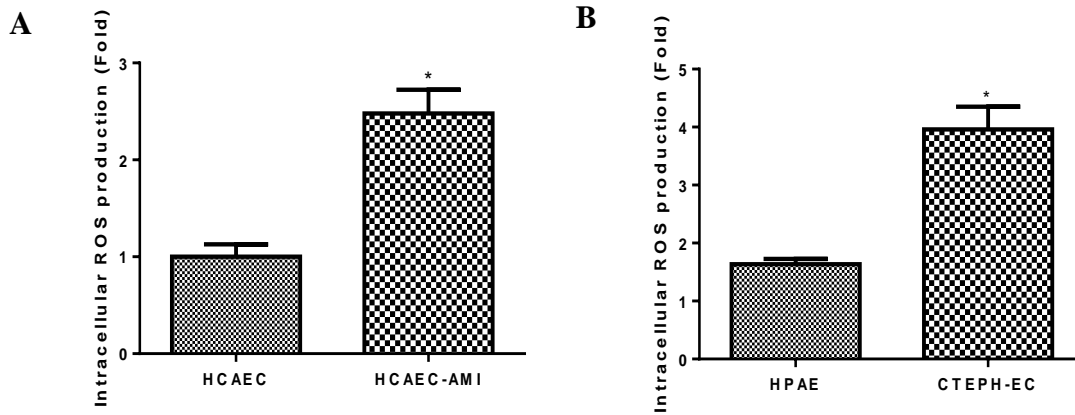


Figure 3.4: Levels of intracellular ROS produced in dysfunctional ECs. A) Bar graph represents the total ROS produced in control and HCAEC-AMI cells (N=21) B) Bar graph represents the total ROS produced in control and CTEPH-ECs (N=15). Results were expressed as means \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

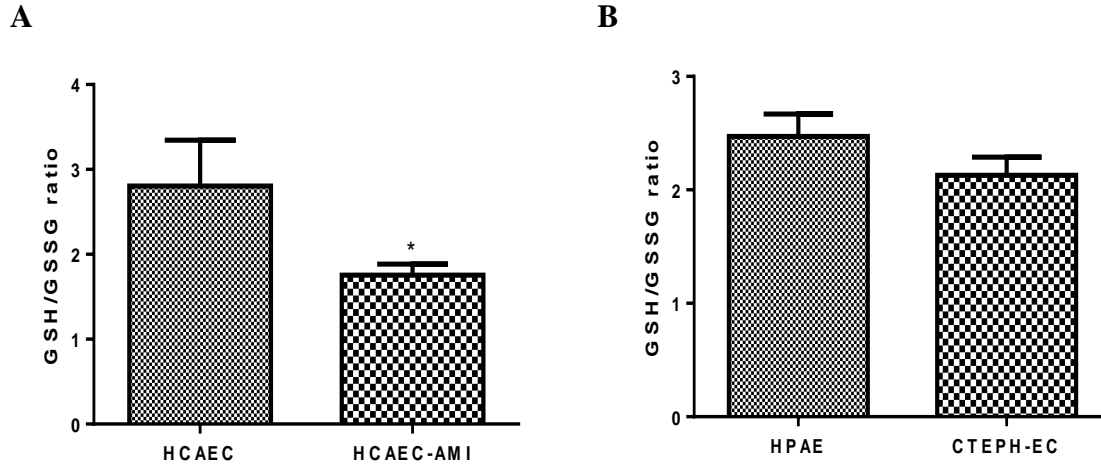


Figure 3.4: Ratio of GSH/GSSG produced in dysfunctional ECs. A) Bar graph represents the ratio of GSH/GSSG in control and HCAEC-AMI cells (N=12) B) Bar graph represents the ratio of GSH/GSSG in control and CTEPH-ECs (N=6). Results were expressed as means \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

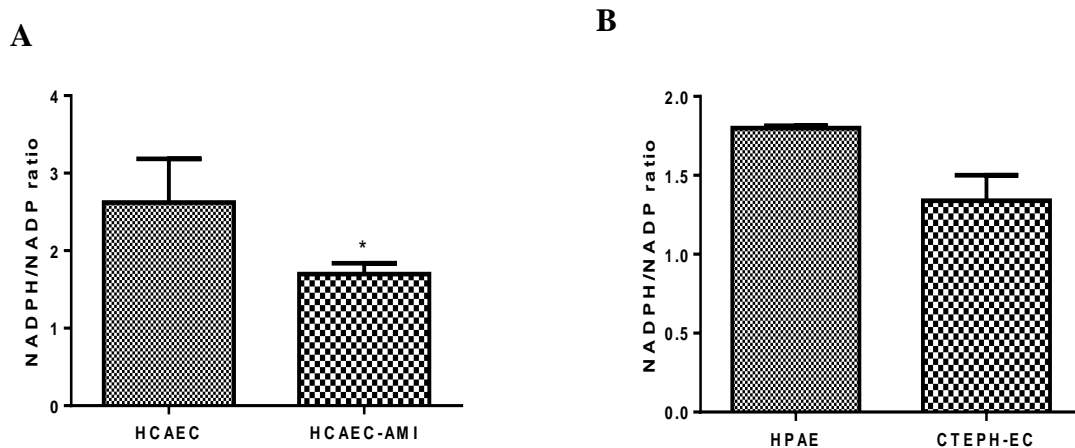


Figure 3.6: Ratio of NADPH/NADP produced in dysfunctional ECs. A) Bar graph represents the ratio of NADPH/NADP in control and HCAEC-AMI cells (N=10) B) Bar graph represents the ratio of NADPH/NADP in control, and CTEPH-ECs (N=10). Results were expressed as means \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

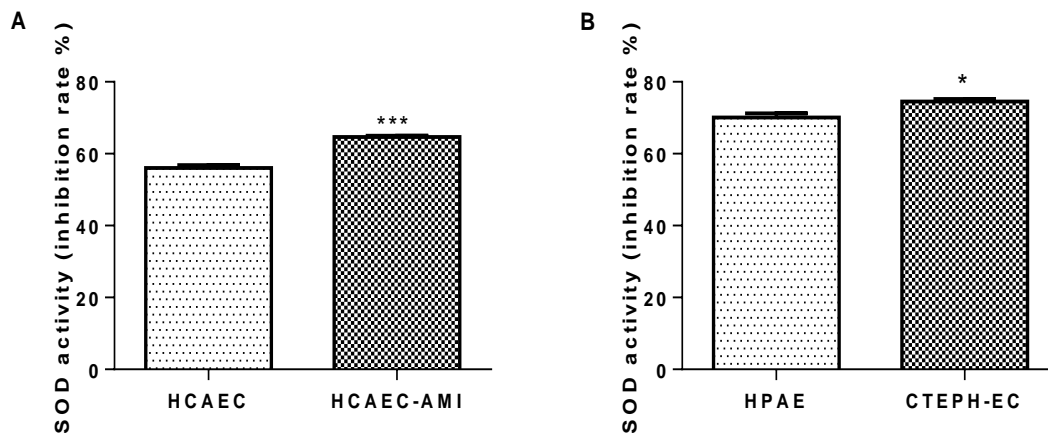


Figure 3.6: SOD activity in dysfunctional Es. A) Bar graph represents the SOD activity in control and HCAEC-AMI cells (N=12) B) Bar graph represents the SOD activity in control and CTEPH-ECs (N=6). SOD activity represented the percentage of the inhibition of water-soluble tetrazolium salt (WST-1). Results were expressed as means \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

The ratio of NADPH to NADP were reduced (Figure 3.5a and b) and the SOD activity slightly increased (Figure 3.6a and b) in both pathological ECs of AMI and CTEPH. Interestingly these findings indicate the potential role of oxidative stress in both dysfunctionality of endothelial system, coronary artery and pulmonary artery ECs.

3.4 Discussion:

In this work, the concentrations of AOPPs and PCOs resulted higher in both AMI and CTEPH diseases. The increased levels of AOPPs might explain the involvement of higher global inflammatory activity in endothelial dysfunction¹⁴². Increased AOPPs production might be involved in the generation of various types of ROS¹⁴³. The accumulation of ROS has been well established in the pathogenesis of several diseases including diabetes¹⁴⁴, atherosclerosis¹⁴⁵, renal ischemia¹⁴⁶, inflammatory diseases¹⁴⁷, and cancer¹⁴⁸. Increased production of ROS in dysfunctional ECs might enhance proinflammatory pathways and affect protein, lipid and enzymatic activity.

When cells are exposed to oxidative stress, the SOD enzyme comes into the action as a cellular defence against oxidative stress caused by free radicals. This enzyme reacts with oxidizing radicals to produce non-radical products. SOD is a copper-containing enzyme, usually occur in cells and tissues such as erythrocytes, liver, and brain. It is a free radical metabolizing enzyme, catalyzing the dismutation of superoxide anion to hydrogen peroxide. It protects the cell membrane from damage caused by highly reactive species. In our analysis, we found a slight increase in the production of SOD in both coronary and pulmonary artery pathological ECs. Low SOD levels have been reported in patients following angina pectoris and myocardial infarction¹⁴⁹. Based on these findings, it is evident that the level of SOD in the blood of patients suffering from AMI is low when compared to the healthy controls. The down regulation of SOD might be considered as the first line of defence against oxidative stress. Further experiments need to be done to confirm this hypothesis.

Glutathione, a major non-protein thiol in living organisms, plays a central role in coordinating the body's antioxidant defence processes¹⁵⁰⁻¹⁵². Perturbation of glutathione status of a biological system has been reported to lead to serious consequences. In the present study, low level of GSH in AMI and CTEPH dysfunctional ECs was observed. Interestingly quantitative proteomics analysis showed a down-regulation of GPX4 and GPX1 proteins that catalyse the formation of

glutathione disulphide in presence of hydrogen peroxide (Appendix Table 4). As described before GPX1 decreased the bioavailability of NO and increased the oxidative stress¹²⁷. Therefore, the underlying mechanisms might be attributed to the unavailability of GSH, the substrate for GPX. The capacity of the glutathione system to cope with free radicals mainly depends upon the activity of peroxidase and glutathione reductase. Glutathione reductase (GR) keeps a high ratio of GSH/GSSG in normal cells. In AMI and CTEPH ECs glutathione reductase might be in lower levels, which in turn is linked to the decreased concentration of GPx and reduced glutathione. Moreover, NADPH oxidase-derived ROS play a role in vascular pathology as well as in the maintenance of normal physiological vascular function¹⁵³. NADPH has been suggested to act as an indirectly operating antioxidant, thus maintaining the antioxidative power of glutathione¹⁵⁴. In the present study, lower level of NADPH was observed in AMI and CTEPH, suggesting the increased oxidative stress in dysfunctional ECs.

PART-II
Chapter - 4

4 *Effects of PFKFB3 modulators in HCAEC-AMI, CTEPH-EC and Ea.hy926 cells*

4.1 Brief introduction:

Endothelium plays an important role in the regulation of vascular tone. Alterations in ECs or endothelial dysfunction are associated with many metabolic abnormalities and vascular diseases such as atherosclerosis, AMI and CTEPH. Recent evidences suggest that ECs in angiogenesis process relied on increased glycolysis activity instead of oxidative phosphorylation to generate energy for maintaining the cellular functions^{155,156}. Additionally, the glycolytic flux in ECs are >200-fold than glucose, fatty acid and glutamine oxidation resulting in the generation of >85% of the total cellular ATP content¹³⁰. Moreover, an inflammatory activation of monocytes/macrophages, via Toll-like receptor ligands or pro-inflammatory cytokines, switches their metabolism from oxidative phosphorylation to aerobic glycolysis, further potentiating the inflammatory process¹⁵⁷. In glycolytic flux, the conversion of fructose-6-phosphate (F-6-P) to fructose-2,6-bisphosphate (F-2,6-P2) is one of the rate-limiting checkpoints modulated by 6-phosphofructo-2-kinase/fructose-2,6-bisphosphatases (PFKFBs), dimeric bifunctional enzymes. Therefore, PFKFBs plays a crucial role in maintain glucose homeostasis and controls the rate of glycolysis in other tissues.

Among four existing PFKFBs isoforms, PFKFB3 is upregulated by inflammatory stimuli. PFKFB3-driven glycolysis is important for angiogenesis and the migration of ECs and PFKFB3-knockdown ECs exhibit defects in the formation of filopodia and lamellipodia^{158,159}. Consequently, the significant role of glycolytic enzyme PFKFB3 in angiogenesis delivers opportunities for therapeutic targeting. Strategies targeting pathological angiogenesis have focused primarily on blocking vascular endothelial growth factor (VEGF), but resistance and insufficient efficacy limit its success, mandating alternative antiangiogenic strategies. As a result, there is a strong high need for additional pharmacological interventions that counteract intra-plaque (IP) neovessel formation to prevent plaque rupture and its cardiovascular complications¹⁶⁰.

PFKFB3 has a K_{ase} to P_{ase} activity ratio higher than the other isoforms of the enzyme, and different studies suggest that it is the causative molecule of the so-called “Warburg effect”¹⁶¹. PFKFB3’s enzymatic activity is finely controlled by the N-terminal autoregulatory domain (AD)

in the Kase region, possessing a β -hairpin structure (L5-V15). Its interaction with a large portion of the Pase-domain (PD, E344-S363) causes a molecular twist in the protein and increasing the Kase/Pase activity ratio. On the other hand, the deletion of the AD by the alternative mRNA splicing leads to an enzyme with a 7-fold higher Pase activity¹⁶². Pase activation leads to the reduction of F-2,6-P2, a decrease of PFK-1 activity, and finally to a reduced glycolysis. The crystal structure of PFKFB3 shown in Figure 4.1¹⁶³.

Based on the reported implications of PFKFB3 in glycolysis/oxidative stress and, consequently, in related pathological angiogenesis, this enzyme may serve as a very effective therapeutic target in the regulation of the glycolytic pathway to control neovessels formation in the atherogenic process.

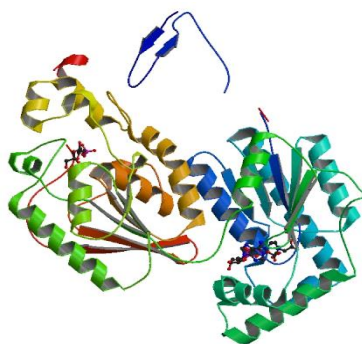
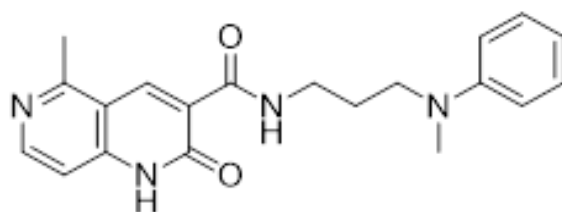


Figure 4.1: Crystal structure of the human inducible form of PFKFB3 from J. Bio. Chem¹⁶³

ECs rely on increased glycolysis activity rather than oxidative phosphorylation to generate energy for maintaining the cellular functions in angiogenesis. The glycolytic activity of ECs is critical for angiogenesis, and it has been demonstrated that reduction of glycolysis by silencing or blocking PFKFB3, results in impairment of EC proliferation, migration, and vascular sprouting *in vitro*^{158,164}. Therefore, PFKFBs play a crucial role in maintaining glucose homeostasis and control the rate of glycolysis in other tissues. Among four existing PFKFBs isoforms, PFKFB3 is upregulated by inflammatory stimuli.

As a part of MOGLYNET project, we received three PFKFB3 phosphatase modulators such as HM-20 (YSGFLT), HM-21 (SFLLR-CONH 2) and HM-22 (wGy) from ESR10; Ligand94 from ESR1 as a kinase modulator of PFKFB3. The name, structure and molecular weight of these compounds were specified in Figure 4.2 and Table 4.1.



Molecular Weight: 350.42

5-methyl-N-(3-(methyl(phenyl)amino)propyl)-2-oxo-1,6-naphthyridine-3-carboxamide

Figure 4.2: Details of PFKFB3 kinase modulator produced in the MoGlyNet consortium

3PO [(3-(3-Pyridinyl)-1-(4-pyridinyl)-2-propen-1-one), PFKFB3 inhibitor] reduces vessel sprouting also *in vivo* (IP injection) in EC spheroids, zebrafish embryos, and the mouse retina by inhibiting EC proliferation and migration^{160,165,166}. Moreover, the compound has been shown to be selectively cytostatic to transformed cells, to suppress the tumorigenic growth of breast adenocarcinoma, leukemia, and lung adenocarcinoma cells *in vivo*^{160,167}. More recently, it has been demonstrated that 3PO significantly represses intra-plaque angiogenesis and hemorrhages in mice, demonstrating its potential to prevent plaque rupture¹⁶⁸.

NAME	SEQUENCE	STRUCTURE	MW
HM-20	YSGFLT		686.75
HM-21	SFLLR-CONH ₂		633.80
HM-22	wGy		424.45

Table 4.1: Details of PFKFB3 phosphatase modulators produced in the MoGlyNet consortium

HM-22 has D-amino acids Trp (W) and Tyr (Y). Other amino acids are all L.

HM-21 and HM-22 have a free acid on C-terminal part, while HM-21 has an amide.

Results:

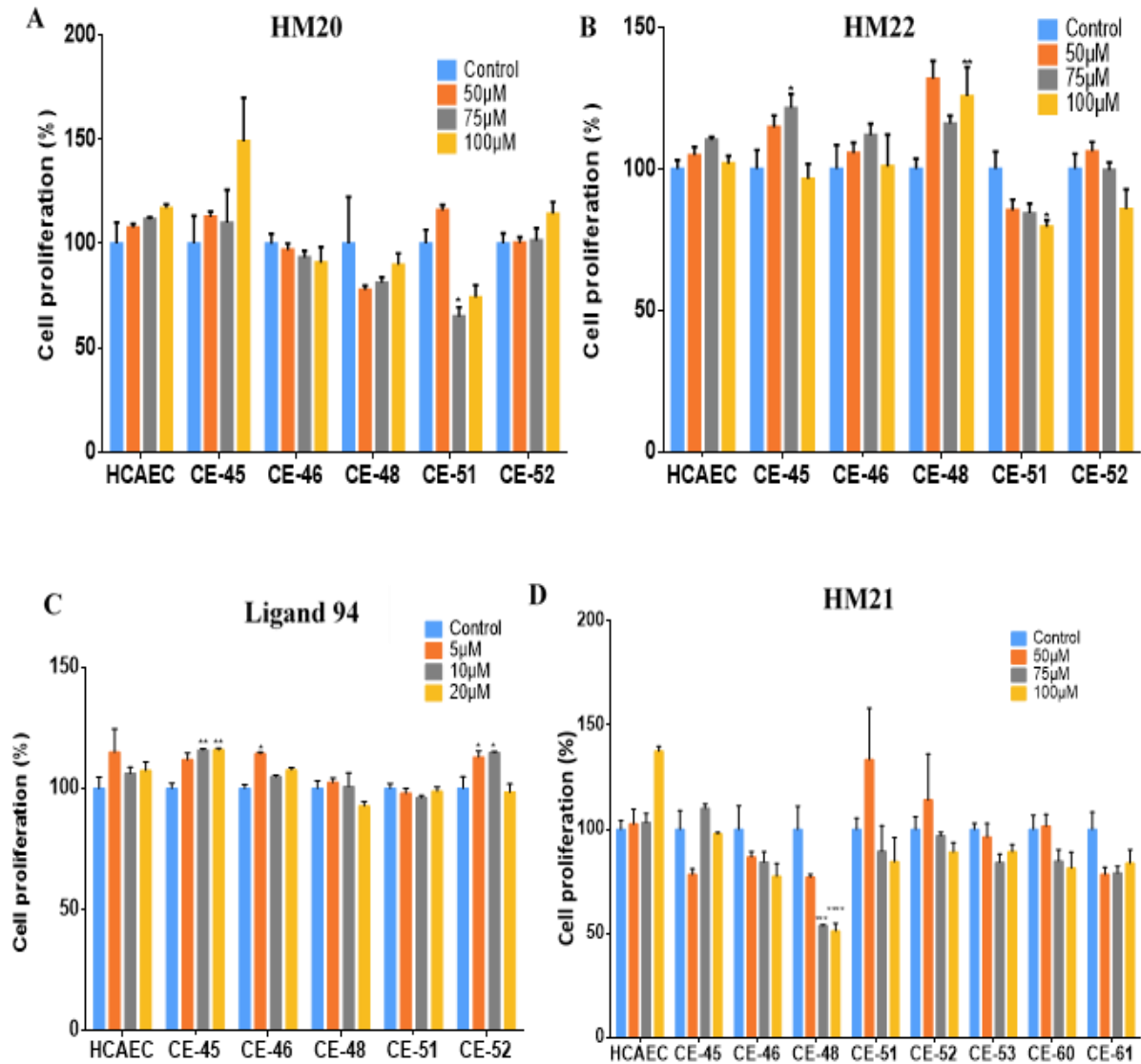


Figure 4.3: Effect of PFKFB3 modulators on HCAEC-AMI cells. CE-45, CE-46, CE-48, CE-51, CE-52, CE-53, CE-60 and CE-61 were corresponding to HACEC-AMI cells. Bar graphs represents the mean \pm SEM. *p-value < 0.05, **< 0.01, ***< 0.001.

4.1.1 Effect of phosphatase and kinase modulators of PFKFB3 on HCAEC-AMI cells:

Hoechst assay was performed to evaluate the cell proliferation upon incubation with three PFKFB3 phosphatase modulators and one kinase modulator of PFKFB3. HCAEC and HACEC-AMI cells were incubated with 50, 75 and 100 μ M of HM-20, HM-21 and HM-22; 5,10 and 20 μ M concentration of ligand 94 for 72hrs.

As shown in Figure - 4.3 A, B and C, HM-20, HM-22 and ligand 94 compounds were not able to reduce the cell proliferation significantly. While, HM-21 (D) showed variable results with pathological ECs.

4.1.2 Effect of phosphatase and kinase modulators of PFKFB3 on CTEPH-ECs:

Likewise, Hoechst assay was performed to evaluate the cell proliferation upon incubation with three PFKFB3 phosphatase modulators and one kinase modulator of PFKFB3. HPAE and CTEPH-ECs were incubated with 50, 75 and 100 μ M of HM-20, HM-21 and HM-22; 5,10 and 20 μ M concentration of ligand 94 for 72 hrs. As shown in Figure 4.4 A, B and C, these compounds were not effective on CTEPH-ECs.

4.1.3 *In vitro* screening test for phosphatase modulators of PFKFB3:

To confirm whether these phosphatase modulators targeting PFKFB3, a screening assay by using the macrophages was performed. PFKFB3 expression was activated in macrophages by incubating the cells with lipopolysaccharide (LPS) and cell proliferation was measured by using the Hoechst assay, after 72hrs incubation of PFKFB3 modulators. In this test, the known PFKFB3 inhibitor 3PO used as a positive control. As shown in Figure 4.5, HM-20 and HM22 was not able to show inhibitory effect on PFKFB3, while HM-21 showed inhibitory effect of PFKFB3 at 75 μ M. However, HM-21 didn't show significant effect, considering the higher dosage. 3PO instead was able to significantly reduce the cell proliferation at lower concentrations. For this reason, 3PO was used as inhibitor of PFKFB3 for all the other experiments.

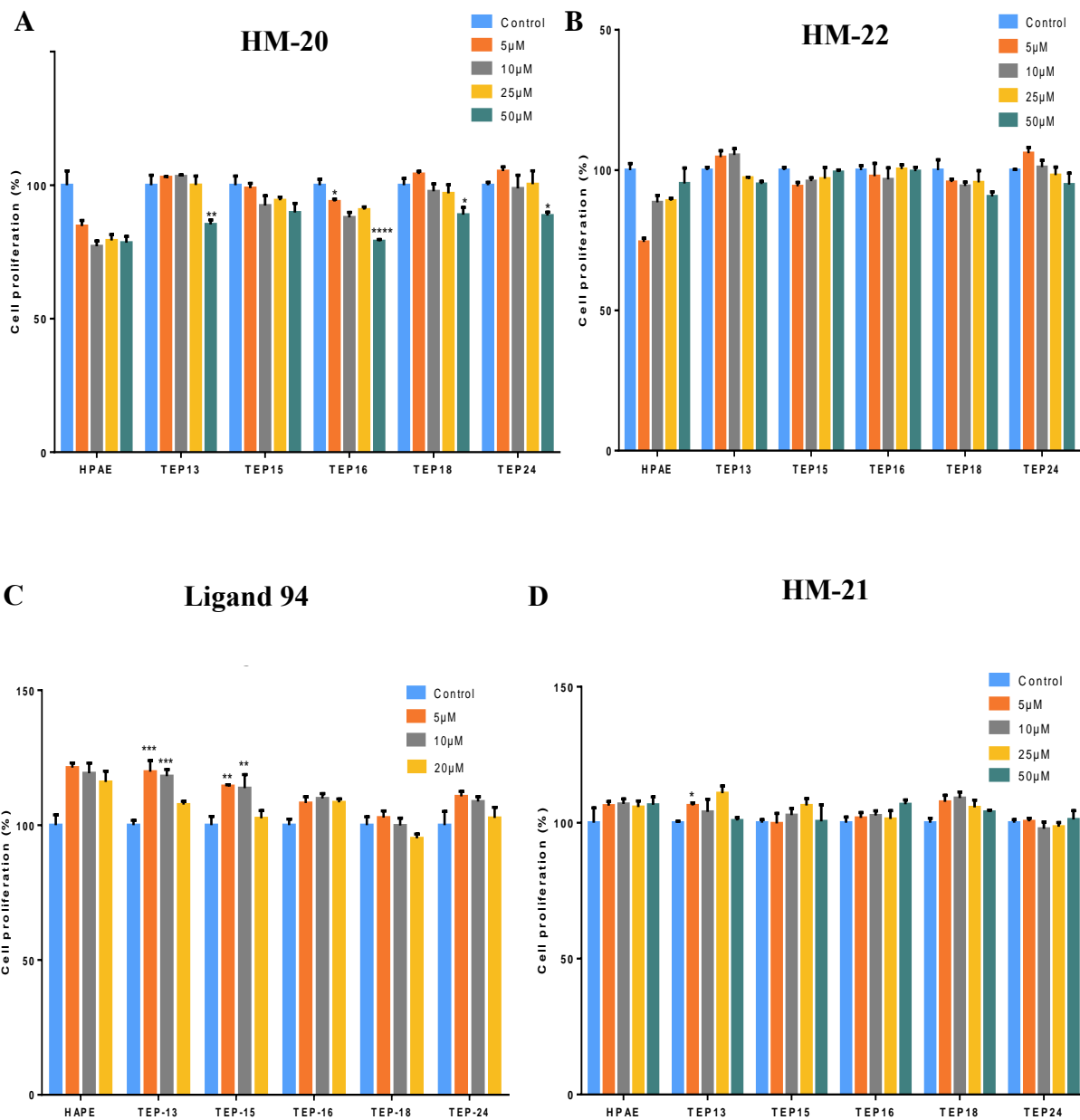


Figure 4.4: Effect of PFKFB3 modulators on CTEPH-ECs. TEP-13, TEP-15, TEP16, TEP-18, TEP-24 were corresponding to CTEPH-ECs. Bar graphs represents the mean \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

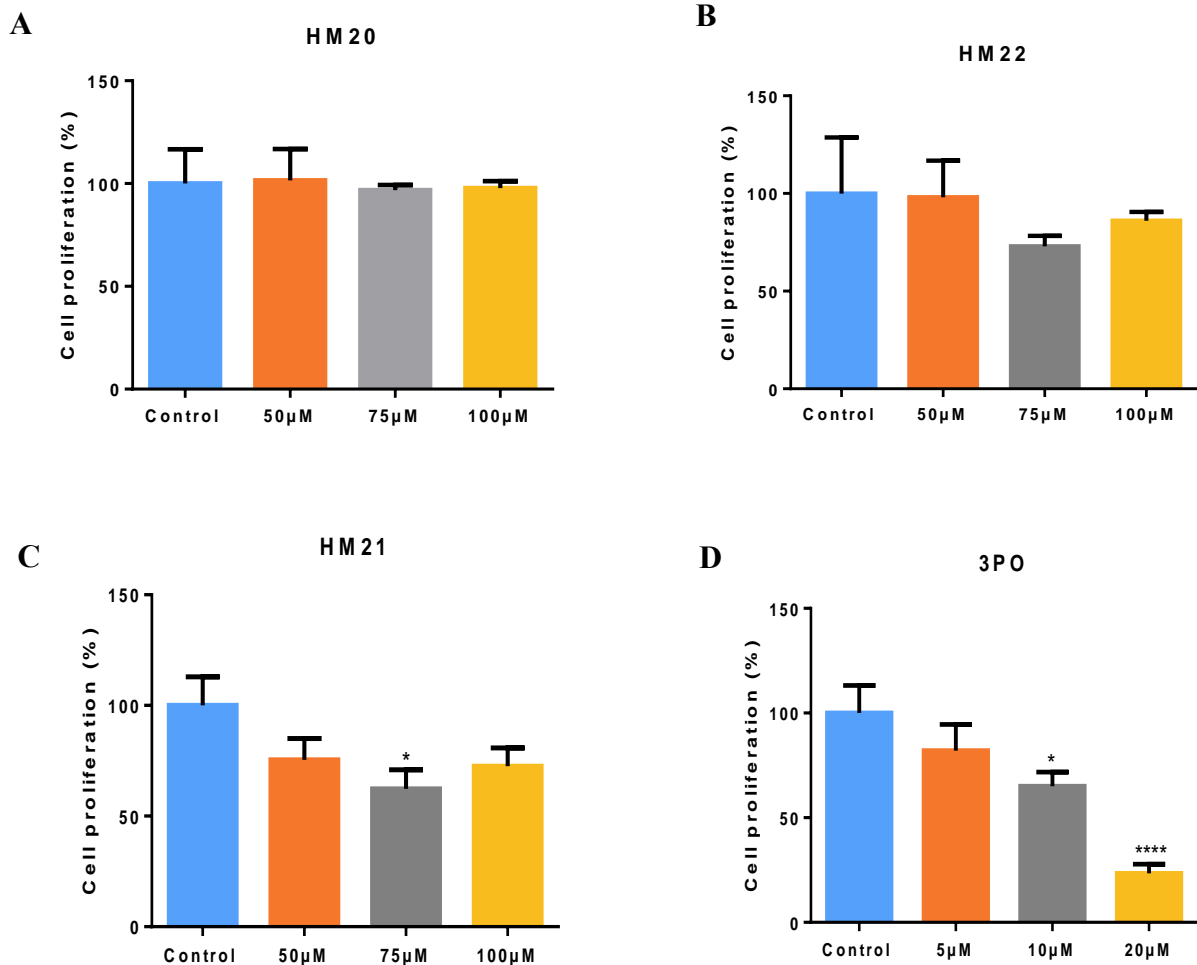


Figure 4.5: *In vitro* screening for phosphatase modulators of PFKFB3 and 3PO. Bar graphs represents the mean \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

4.1.4 Effect of 3PO on HCAEC-AMI and CTEPH-ECs:

To determine the dosage at which 3PO is able to reduce the proliferation of pathological ECs, Hoechst assay was performed by incubating 3PO at 5 μ M-30 μ M concentration in HCAEC-AMI and CTEPH-ECs for 72 hrs. As shown in Figure 4.6a, 5 μ M concentration of 3PO was able to reduce proliferation in HCAEC-AMI. Similarly, 3PO was able to reduce the CTEPH-ECs proliferation at 20 μ M concentration.

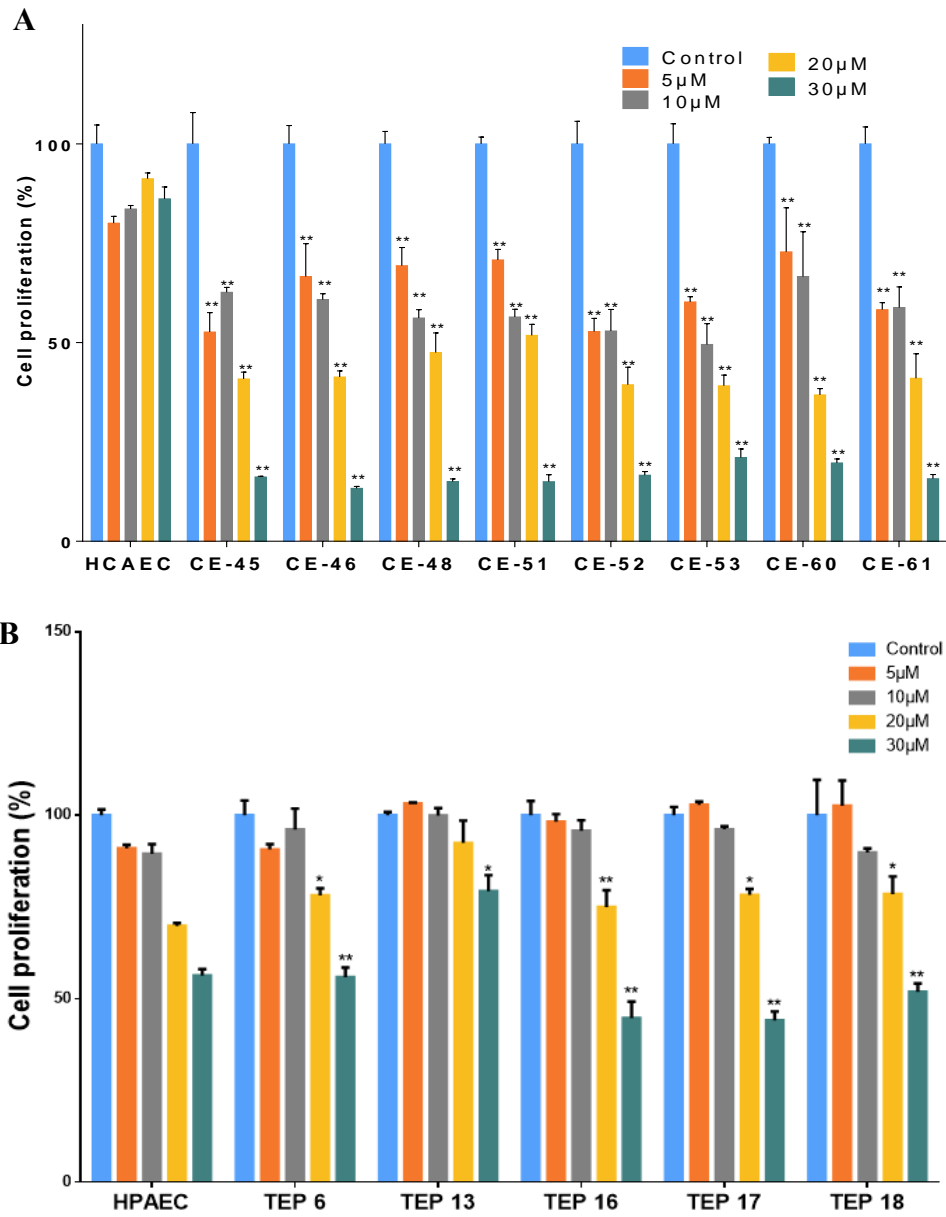


Figure 4.6: Effect of 3PO on A) HCAEC-AMI and B) CTEPH-ECs. Bar graphs represents the mean \pm SEM. *p-value <0.05, **<0.01, ***<0.001.

4.2 Understanding the mode of action of 3PO in normal and TNF α induced inflamed human ECs by using proteomics approach.

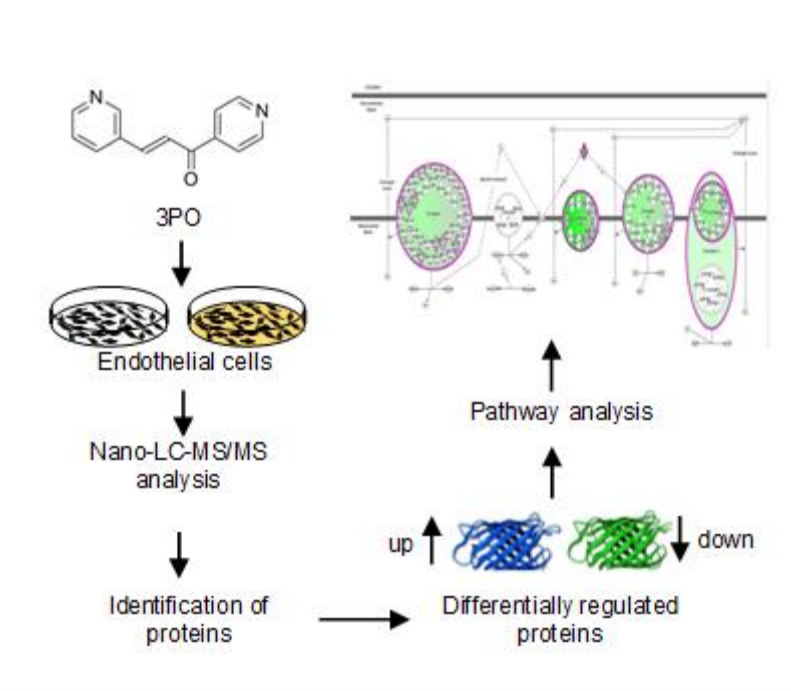


Figure 4.7: Graphical representation of abstract.

4.2.1 Abstract:

The molecular mechanism of action of 3PO at EC level under physiological or inflamed conditions remains to be established. Human ECs have been employed to monitor the protein changes induced by 3PO, a compound able to inhibit the glycolytic flux partially and transiently and to reduce pathological angiogenesis in a variety of disease models. Normal and TNF α induced inflamed ECs were incubated with and without 3PO at a concentration (20 μ M) able to inhibit cell proliferation without cell death. At the end of the incubation period, samples were submitted to the following steps: a) whole protein extraction, reduction, alkylation, digestion by trypsin; b) peptides separation by nano-LC-MS/MS analysis by using a high-resolution mass spectrometer; c) data analysis including protein identification, quantification and statistical analysis. An altered protein expression profiling in combination with protein network analysis was employed by using a mass spectrometry-based label-free quantification approach to explore the underlying mechanisms of 3PO at cellular level.

4.2.2 Brief introduction:

3PO (Figure 4.8a), is a compound able to partially and transiently inhibit glycolysis *in vivo*, to reduce pathological angiogenesis¹⁶⁰, very likely thanks its ability to inhibit the PFKFB3 enzyme¹⁶⁷, an activator of a key glycolytic enzyme, 6-phosphofructo-1-kinase (PFK-1)¹⁶⁰. However, high dose of 3PO (> 30 μ M) may cause tumor vessel disintegration and enhance cell dissemination¹⁶⁹. Hence, identification and characterization of EC proteins whose expression is modulated by the effect of 3PO will expand our understanding of its mode of action. Inflammation, a complex biological response that has a fundamental role in various diseases (autoimmune, neurodegenerative, cardiovascular, cancer and microbial infectious diseases), is now recognized a key factor involved in all the stages of disease progression of atherosclerosis, and novel findings provide an important link among EC dysfunction, angiogenesis, inflammation and EC metabolism in several diseases^{170–173}. Moreover, an inflammatory activation of monocytes/macrophages, via Toll-like receptor ligands or pro-inflammatory cytokines, switches their metabolism from oxidative phosphorylation to aerobic glycolysis, further potentiating the inflammatory process¹⁵⁷. Notwithstanding the plethora of evidence indicating the key role of 3PO in reducing angiogenesis, the molecular mechanism of action of 3PO at EC level under physiological or inflamed conditions remains to be established. Recent findings indicate in fact that 3PO might act through mechanisms that are unrelated to PFKFB3 inhibition¹⁷⁴ and recent studies carried out with recombinant PFKFB3 and

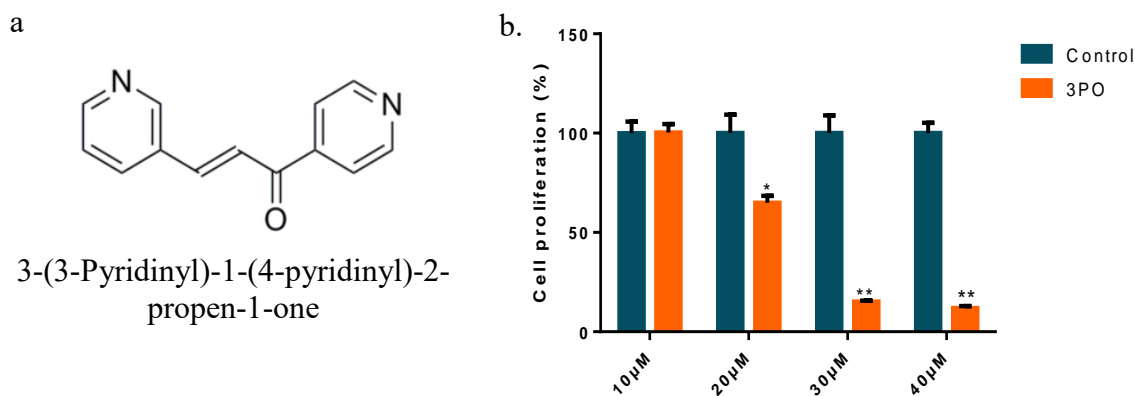


Figure 4.8: a) Structure of 3PO, b) Effect of 3PO on EA.hy926 cells proliferation. ECs were treated with 3PO at various concentrations (10, 20, 30 and 40 μ M) for 24h and percentage of cell proliferation was assessed by using MTT assay. All data represented as mean \pm S.E.M. *P<0.05, **P<0.001 compared with control (N=3).

microscale thermophoresis (to evaluate its interaction with 3PO), did not confirm any binding of the molecule to the enzyme (personal communication).

4.2.3 Results and discussion:

To understand the 3PO molecular mechanism of action in the endothelium, in the presence or in absence of an inflammatory agent, EA.hy926 cells, a permanent human endothelial cell line¹⁷⁵ were used as model and tumor necrosis factor alpha (TNF- α), as an inflammatory agent. To check the concentration at which 3PO inhibited EC proliferation, EA. hy926 cells were treated with different 3PO concentrations (10-40 μ M) for 24 hours, and cell proliferation percentages were determined using MMT assay. As shown in Figure 4.8b, 20 μ M 3PO was able to have a significant cell proliferation inhibitory effect. (Supplementary Figure S.1 shows the cytotoxic effect of 3PO in Ea.hy926 cells). Therefore, this concentration was selected for further analysis. To induce the inflammation of endothelium, the cells with 10ng/ml concentration of TNF α were treated for 24hrs¹⁷⁶.

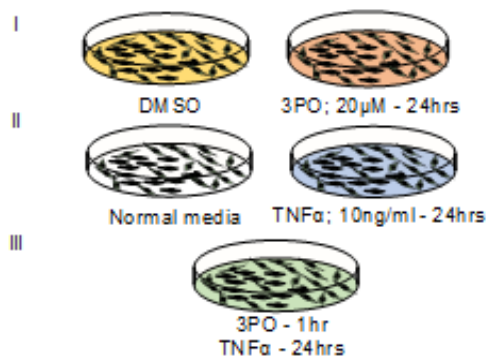


Figure 4.9: Cell treatments for the MS-based label-free quantitative proteomic analysis.

After all the treatments (Figure 4.9), cells were collected and subjected to the following steps: a) protein extraction, reduction, alkylation, in-solution digestion by trypsin; b) peptide separation by nano-LC-MS/MS analysis. The quality and reproducibility of biological replicates were determined by using multi-scatter plot analyses. The average Pearson coefficient was higher than 0.98 among all samples, indicating the high degree of reproducibility (Supplementary Figure S.2).

2214 proteins and 18869 unique peptides were identified and quantified by the Andromeda search engine in MaxQuant using *Uniprot_HomoSapiens* database; search parameters were: 10 ppm tolerance on peptides, 0.8 Da on fragments and less than 1% false discovery rate. A two-sample t-

test was employed using the latest version of Perseus software (v 1.6.1.3), to define the proteins that were differentially regulated in the treated and control groups of samples. 130 and 161 were up and down-regulated proteins in the 3PO treated ECs compared to the control group (Appendix Table 5). The distribution of differentially regulated proteins in ECs upon 3PO treatment is shown in Figure 4.10.

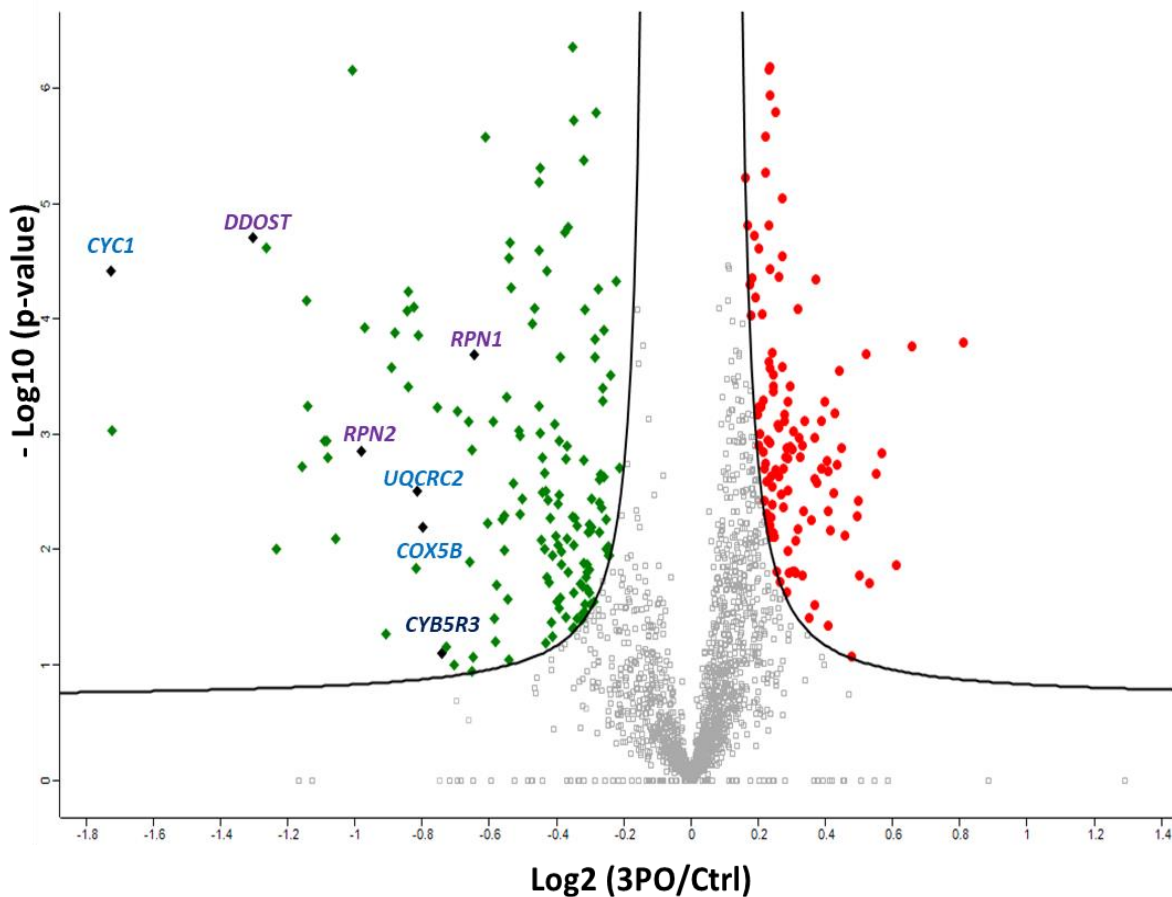


Figure 4.10: Distribution of differentially regulated proteins in ECs after 24h exposure with 3PO. Scatter plots of log₂ fold change on x-axis against -log p-value on y-axis of significantly quantified proteins. Data was obtained from technical triplicates and biological duplicates. Green colour indicates down-regulation, red colour represents upregulation.

To describe the protein network, influenced by the drugs (3PO and 3PO/TNF α) Clue-GO plug-in in the latest version of Cytoscape software (v 3.6.0) and Ingenuity Pathway Analyses (IPA, Qiagen) were used. Figure 4.13a shows examples of differentially regulated pathways. Clearly

3PO targets mitochondria and down-regulated substrates such as cytochrome complex, mitochondrial respiratory chain complexes I, III and IV, oxidoreductase complex, mitochondrial membrane. Most of the down-regulated proteins such as CYC1 and ATP5L belong to mitochondrion inner membrane.

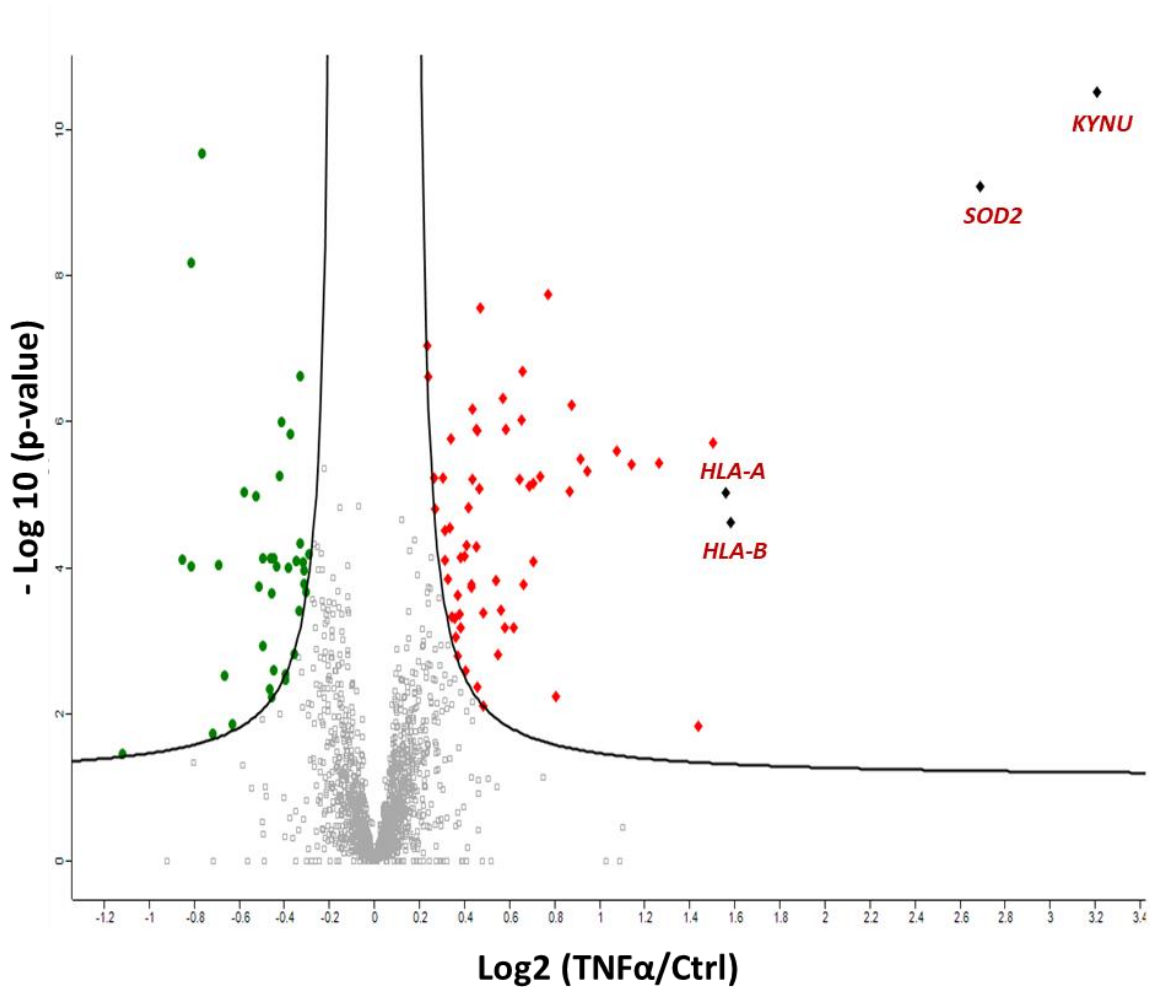


Figure 4.11: Distribution of differentially regulated proteins in ECs after the induction of inflammation with TNF α in the absence of 3PO. Scatter plots of log₂ fold change on x-axis against -log p-value on y-axis of significantly quantified proteins. Data was obtained from technical triplicates and biological duplicates. Green colour indicates down-regulation, red colour represents upregulation.

CYC1 is a heme-containing component of the cytochrome b-c1 complex that shuttles electrons between complex III and complex IV in the respiratory chain. In normal conditions, ATP5L or

ATP synthase subunit g, is a part of complex V that produces ATP from ADP in the presence of the proton gradient generated across the membrane by electron transport complexes of the mitochondrial respiratory chain. However, 3PO might be blocking the proton gradient across the membrane via inhibition of the proteins associated with the multiplex complexes of the electron transport chain which may lead to the reduction of ATP synthesis. Therefore, the energy required for cellular metabolic activities and cell proliferation decreases.

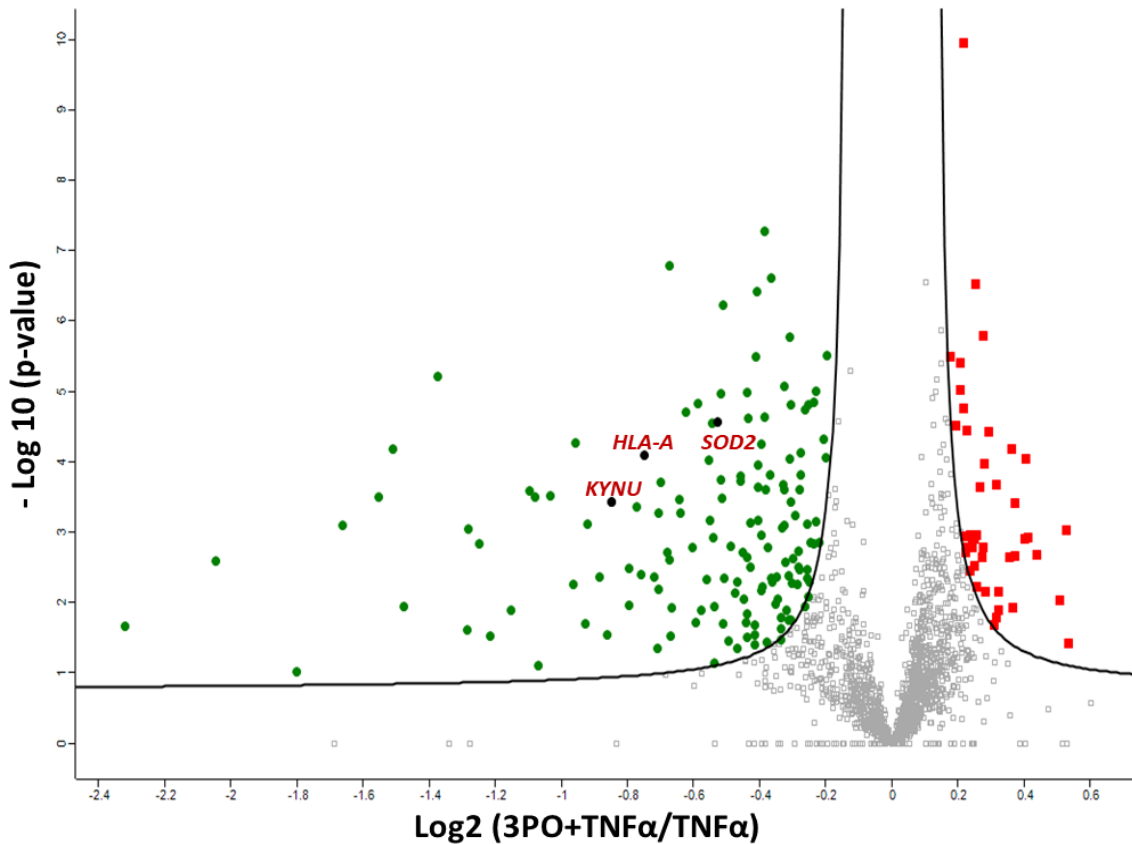


Figure 4.12: Distribution of differentially regulated proteins in ECs after induction of inflammation with TNF α in the presence of 3PO. Scatter plots of log₂ fold change on x-axis against -log p-value on y-axis of significantly quantified proteins. Data was obtained from technical triplicates and biological duplicates. Green colour indicates down-regulation, red colour represents upregulation.

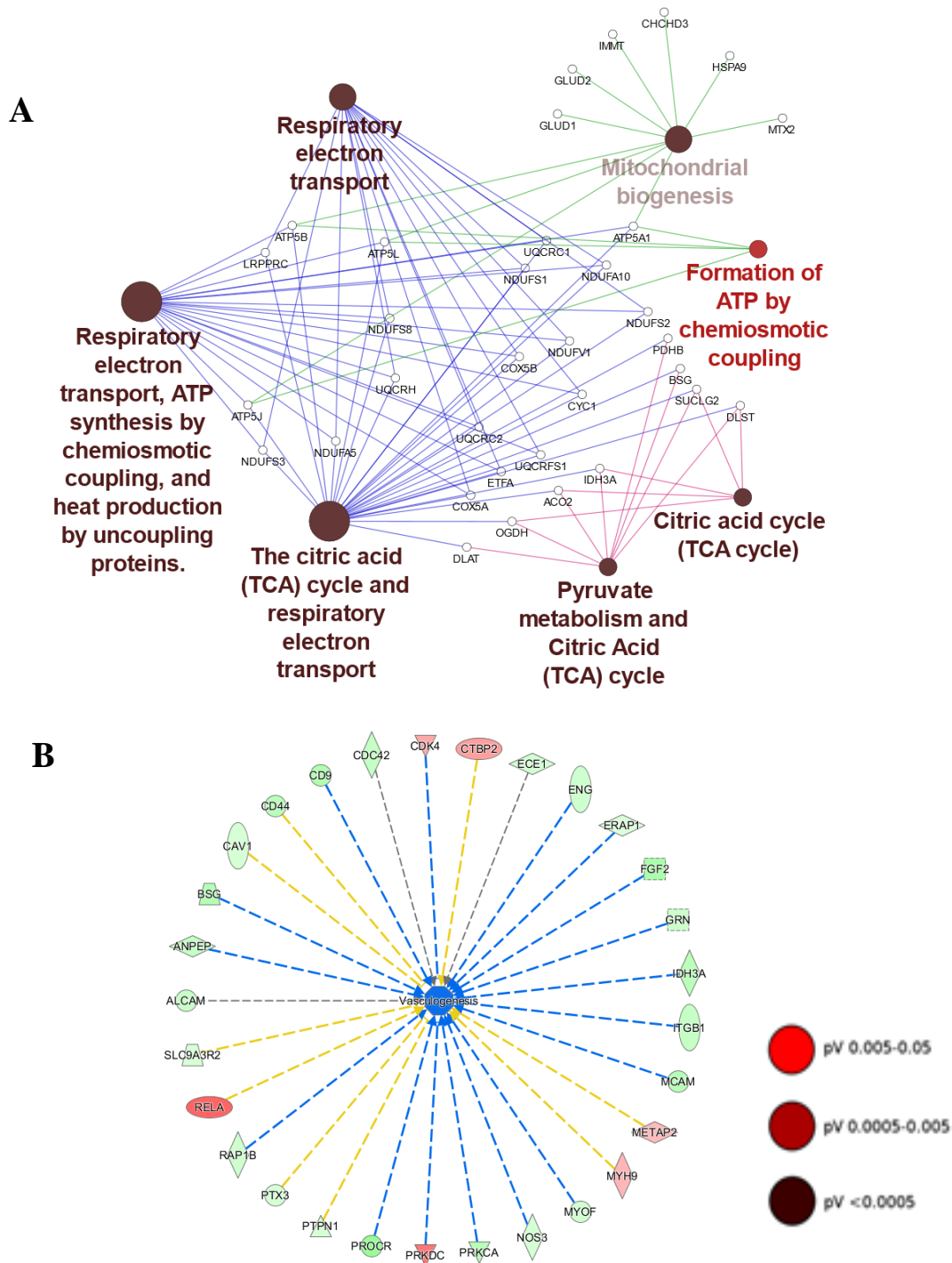


Figure 4.13: Main pathways and respective genes found in different treatments of ECs. ClueGo plugin for Cytoscape software was used for the Reactome network pathway analysis. a) and b) Key pathways of down-regulated proteins in ECs upon 3PO exposure for 24hrs. Significance of the clustering is shown by colour code and the size of nodes. (Figure 4.13b: Green colour indicates down-regulation, red colour represents upregulation of proteins).

Gene ontology enrichment analysis of molecular functions revealed that nucleoside-triphosphatase activity, electron transfer activity, GTPase activity, and coenzyme binding categories were significantly over-represented. In addition, Reactome pathway analysis (Figure 4.13) revealed also the inhibition of the citric acid (TCA) cycle, ATP synthesis by chemiosmotic coupling and pyruvate metabolism pathways. Under physiological conditions, pyruvate generated from glycolysis is converted into acetyl coA that enters into the TCA cycle and the resulting NADH enters into the electron transport chain to produce ATP.

This is essential for cell proliferation and cell metabolic activities. Studies have shown that increased levels of TCA intermediates increase anaerobic pathways and aerobic fatty acid oxidation for ATP production in macrophage-rich atherosclerotic arteries that further potentiate the cell proliferation¹⁷⁷. Moreover, in the angiogenesis process, pathological cells generate more amount of ATP for their cellular activities. Additionally, as shown in Figure 4.13b, we also observed an inhibition of vasculogenesis pathway by 3PO. The tetraspanin family related cell surface glycoprotein such as CD9, which is a crucial protein in the suppression of cancer cell motility, metastasis, differentiation, signal transduction, and cell adhesion¹⁷⁸ showed down-regulation. It also involves in the platelet activation and aggregation.

The down-regulation of FGF2 by 3PO indicates the reduction of cell division, cell differentiation, cell migration, and angiogenesis¹⁷⁹. In addition to this, 3PO reduced the expression of PROCR protein, which is implicated in blood coagulation, venous thromboembolism, myocardial infarction, and cancer¹⁸⁰. Based on these results, we can hypothesize that 3PO might play a vital role in reducing platelet aggregation, blood coagulation, angiogenesis, and tumour formation. On the other hand, we also identified the down-regulation of oxidative phosphorylation, VEGF, cytokine and focal adhesion, and cell movement of endothelial cell signaling pathways by 3PO (Supplementary Figure S.3 to S.7).

In the second step, under the TNF α induced inflamed ECs in the absence of 3PO, 75 up and 48 down-regulated proteins resulted. The distribution of differentially regulated proteins is reported in Figure 4.11, and their log₂ fold change are reported in (Appendix Table 6). As, there was an upregulation of inflammatory and oxidative stress-related proteins such as HLA class I histocompatibility antigen A/B, superoxide dismutase (SOD2) and kynureninase (KYNU) proteins.

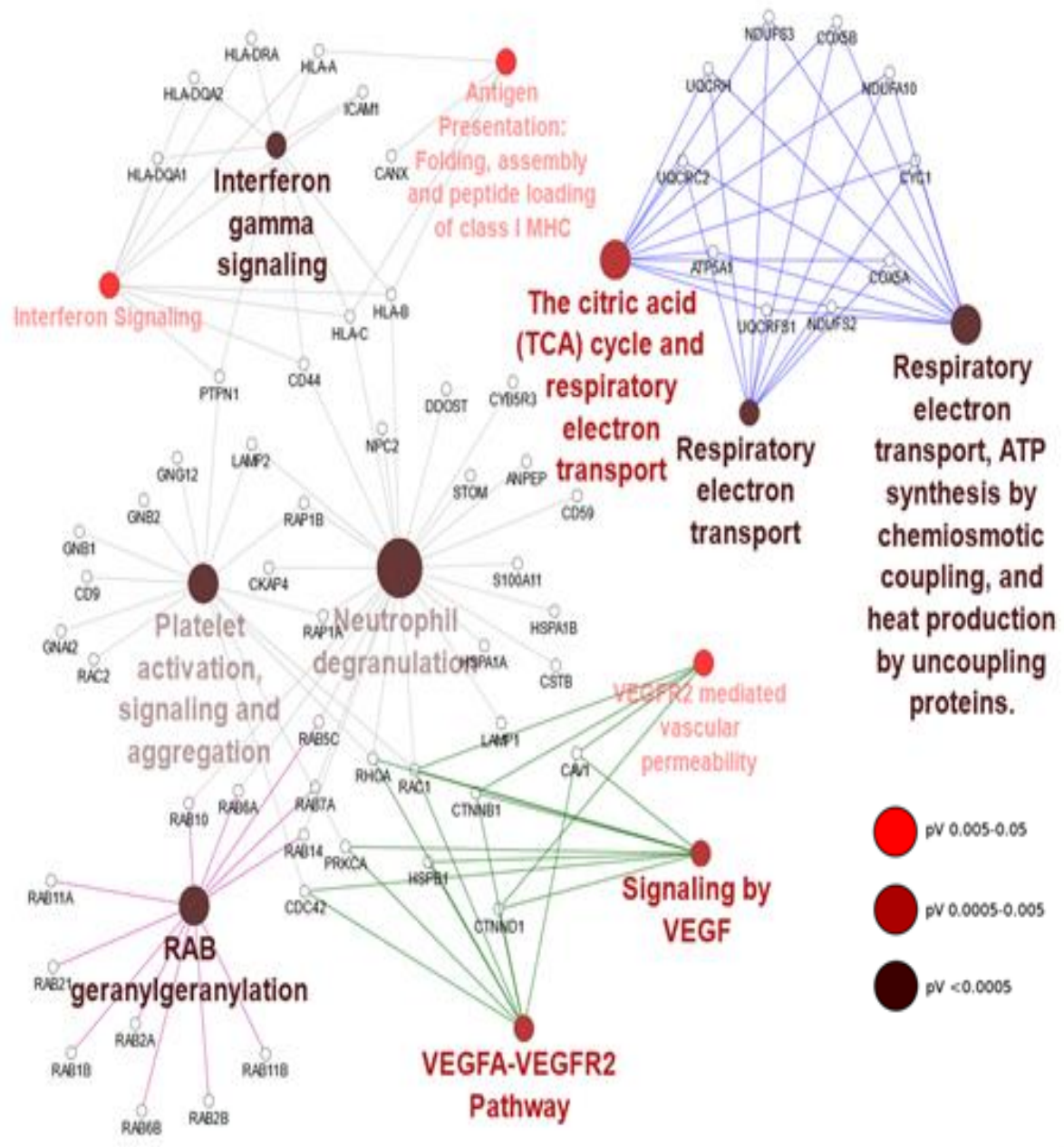


Figure 4.14: Main pathways and respective genes found in different treatments of ECs. ClueGo plugin for Cytoscape software was used for the Reactome network pathway analysis. Major pathways associated with down-regulated genes in inflammatory condition stimulated by using $TNF\alpha$, in the presence of 3PO. Significance of the clustering is shown by colour code and the size of nodes.

Additionally, in gene ontology enrichment analysis, more than 80% of upregulated proteins are involved in the inflammatory-related biological process including response to interferon-gamma (36.36%), type I interferon signaling pathway (36.36%) and negative regulation of type I interferon production (9.09%). On the other hand, more than 88% of cellular components belong to the MHC class I protein complex. Moreover, network analysis of upregulated proteins revealed the upregulation of pathway represented by enriched KEGG terms: interferon signaling, antigen presentation process, activation of NF-kappa B and regulation of Hypoxia-inducible factor by Oxygen. These results significantly explain the successful induction of inflammation in ECs with the use of TNF α .

In the third step, the anti-inflammatory property of 3PO was evaluated. ECs were treated with 20 μ M of 3PO for 1hr, followed by 24hrs incubation with 10ng/ml concentration of TNF α . In this analysis, 40 were up and 140 down-regulated proteins, respectively. The distribution of differentially regulated proteins in the presence of 3PO in TNF α induced inflamed ECs were reported in Figure 4.12, and their precise log2 fold change variations is reported in Appendix Table 7. Interestingly, the inflammatory and oxidative stress-related proteins expression completely reversed (Table 4.2), in the presence of 3PO that minimizes the effect of subsequent TNF-alpha treatment. For example, HLA-A showed a fold change of 2.9 in inflamed cells and 0.6 in inflamed cells previously treated with 3PO (Figure 4.11, and 4.12) and SOD 2 showed a fold change of 6.4 in inflamed cells and 0.7 in inflamed cells previous treated with 3PO (Figure 4.11, and 4.12; Table 4.2). In addition, intercellular adhesion molecule 1 (ICAM 1), a specific marker of inflammation, that was down regulated in the presence of 3PO (fold change of 0.7, Appendix Table 7) was also found. Moreover, TCA cycle and respiratory electron transport chain pathways were inhibited as in the 3PO treated cells in the absence of inflammation. The corresponding down-regulated proteins and their interactions in network pathways are reported in Figure 4.14. Several studies have reported that 3PO reduces angiogenesis by inhibiting the activity of vascular endothelial growth factor (VEGF)^{160,181}. Similarly, in this study 3PO showed an inhibition of VEGFA-VEGFR2 and VEGF signaling pathways (Figure 4.14). Interestingly, in the presence of 3PO in TNF α induced inflammatory ECs, these pathways were inhibited that resembles the anti-inflammatory property of 3PO. The network analyses highlighted other pathways, such as RAB geranyl-geranylation, neutrophil degranulation, and platelet activation, signaling and aggregation pathways due to the down-regulation of corresponding proteins (Figure 4.14).

Protein name	Gene Symbol	Log2 (3PO/Ctrl)	Log2 (TNF- α /Ctrl)	Log2 (3PO+TNF- α /TNF- α)
Thioredoxin reductase 1, cytoplasmic	TXNRD1	-0.35	0.38	-0.39
HLA class I histocompatibility antigen	HLA-A; HLA-B	-0.42	1.56	-0.75
Prolyl 4-hydroxylase subunit alpha-2	P4HA2	-0.43	0.65	-0.56
Serine palmitoyltransferase 2	SPTLC2	-0.43	-0.30	-0.28
Kynureninase	KYNU	-	3.21	-0.85
Superoxide dismutase; Superoxide dismutase [Mn], mitochondrial	SOD2	-	2.69	-0.53
Guanylate binding protein 1, interferon-inducible, 67kD variant	GBP1	-	1.14	-0.32
Calnexin	CANX	-1.26	-	-1.38
Dolichyl-diphosphooligosaccharide--protein glycosyltransferase 48 kDa subunit	DDOST	-1.30	-	-1.66
MICOS complex subunit MIC60	IMMT	-1.72	-	-2.05
Cytochrome c1, heme protein, mitochondrial	CYC1	-1.72	-	-2.32

Table 4.2: Main up and down-regulated proteins in differently treated cells

To further validate the anti-inflammatory effect of 3PO, RT-PCR analysis was performed. As shown in Figure 4.15, the inflammatory marker proteins were upregulated in inflamed ECs.

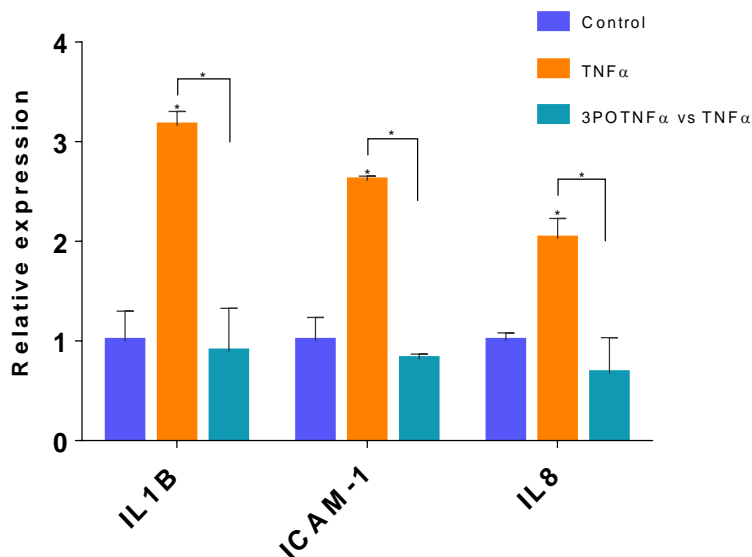


Figure 4.15: Quantitative RT-PCR was performed with inflammatory marker genes such as IL1B, ICAM-1 and IL8 and normalized with β -actin housekeeping gene. TNF α incubated ECs were compared with respective control. Inflamed ECs with 3PO were compared against untreated inflamed ECs (TNF α). The data represented as mean \pm SEM (*P<0.05, N=3).

However, after the 3PO treatment, the expressions of ICAM-1, IL1B, and IL8 were reduced. ICAM-1, which was also down regulated in proteomics approach, is one of the plasma marker proteins for endothelial dysfunction or inflammation associated with myocardial infarction and other cardiovascular diseases^{182,183} Altogether, the obtained results at proteomic and transcriptome levels clearly indicate the accuracy of network description and the inflammatory preventive character of 3PO by mass spectrometry-based proteomics.

In conclusion 3PO has multiple targets in the ECs, targeting mitochondrial inner membrane and it inhibits the important cellular pathways including the TCA cycle, the mitochondrial respiratory chain, and vasculogenesis that may be useful for understanding an inhibitory effect of 3PO on EC proliferation and migration. Therefore, present data suggests a potential application of this molecule as a starting point in designing novel molecules to prevent diseases where inflammatory reactions are involved, such as in atherosclerosis, cancer or neurodegenerative diseases.

4.3 Determination of binding site of 3PO:

After obtaining the significant anti-angiogenic and anti-inflammatory properties of 3PO, we decided to understand the selectivity of 3PO to the specific targets. For this purpose, we challenge the selectivity of 3PO towards human serum and human serum albumin (HSA).

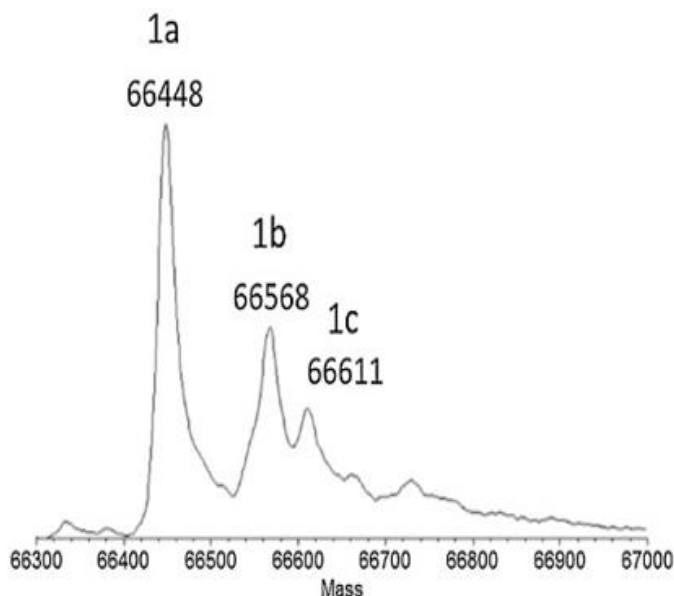


Figure 4.16: Deconvoluted spectrum showing the experimental molecular weight for albumin (1a), cysteinylated albumin (1b) and glycosylated albumin (1c).

Initially we performed an intact protein analysis of human serum incubating with 3PO by using direct infusion on a triple-quadrupole (TQ) MS. Figure 4.16, showed the deconvoluted mass spectrum of albumin contained in a blank sample, which consisted of serum incubated for 3h at 37°C. In detail, the spectrum showing a triplet of signals attributed to albumin, cysteinylated albumin and glycosylated albumin (Figure 4.16, peaks a–c, respectively)¹⁸⁴. Similarly, the shape of the serum spectrum remained same at the beginning of spiking with 1mM 3PO (data not shown).

The HSA spectrum acquired after 15min, 1h and 3h incubation with 3PO. The deconvolution of the mass spectrum acquired allowed the identification of an adduct. This adduct was detected at 66661 Da (Figure 4.17, 1d) that increased in intensity from 15 min to 1h and remained same at 3h. It has a nominal shift of 210 Da, which corresponds to the nominal mass of 3PO. Interestingly, the albumin and its cysteinylated and glycosylated forms were still detectable (Figure 4.17, 1b and 1c, respectively).

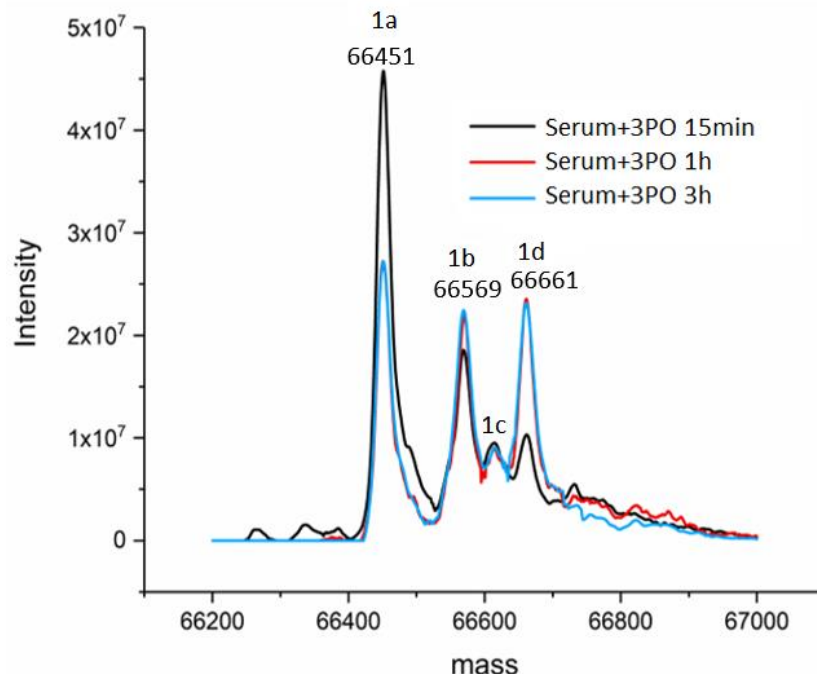


Figure 4.17: Deconvoluted spectrum of albumin in serum spiked with 3PO. Native albumin (1a), cysteinylated albumin (1b), glycosylated albumin (1c) and adduct formed by 3PO (1d).

However, the intensity of native albumin peak was reduced as the intensity of adduct increased with incubation time. Therefore, the spectrum of serum incubated with 3PO showed one new signal at 15 min after the start of incubation. The shape and relative abundances of the peaks corresponding to adduct increased up to 1h and did not change thereafter. We performed these experiments in the complex environment of serum which contains approximately 62% of albumin, 38% of globulin and less than 1% of regulatory proteins. To validate these findings, we extracted albumin from serum and repeated the incubation with 3PO for 1h at 37°C (Experimental protocol specified in F.26 under materials and methods section).

The HSA spectrum acquired after 1h incubation with 3PO by using ion trap MS instrument. The deconvolution of the mass spectrum acquired allowed the identification of an adduct. This adduct was detected at 66649 ± 4 Da (Figure 4.17, 1d). It has a nominal shift of 210 ± 4 Da, which corresponds to the nominal mass of 3PO. As we identified in the case of complex serum, the cysteinylated and glycosylated forms were detectable in the isolated albumin from serum (Figure 4.18, 1b and 1c, respectively). However, the intensity of native albumin peak was reduced as the new peak corresponding to 3PO adduct appeared after 1h incubation time.

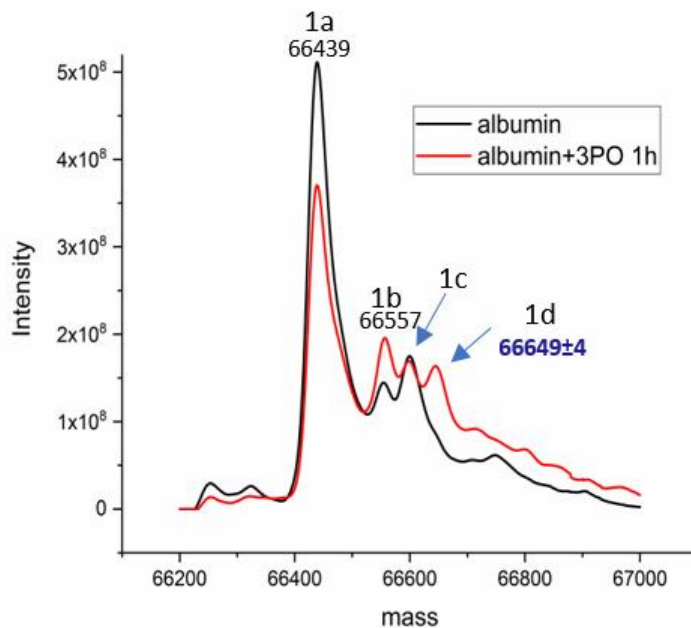


Figure 4.18: Deconvoluted spectrum of albumin isolated from human serum spiked with 3PO. Native albumin (1a), cysteinylated albumin (1b), glycated albumin (1c) and adduct formed by 3PO (1d).

After obtaining these results, we hypothesized that 3PO might be having a binding site on the Cys34 residue of the albumin. In order to confirm our hypothesis, we did indirect validation experiment with N-ethylmaleimide (NEM). NEM is known reagent for the covalent binding of Cys34 residue in proteins^{185–187}. HSA contains 35 cysteine residues of which 34 are involved in intramolecular disulphide bonds thus contributing to overall tertiary structure. One free cysteine residue, Cys34, is the major extracellular source of redox active thiol group (-SH) which accounts for $\approx 80\%$ of thiols in plasma¹⁸⁸.

The HSA spectrum acquired after 1h incubation with NEM. The deconvolution of the mass spectrum acquired allowed the identification of mass shift for the NEM modified albumin peak (Figure 4.19, 1a). This peak was detected at 66562 Da, which is compatible with the expected value for NEM adduct (66564) with an accuracy of -30 ppm. Similarly, we have seen the mass shift in the cysteinylated and glycated forms, and they were still detectable (Figure 4.19, 1b and 1c, respectively). These results demonstrate the blocking of Cys34 residue of albumin after 1h incubation with NEM at 37°C.

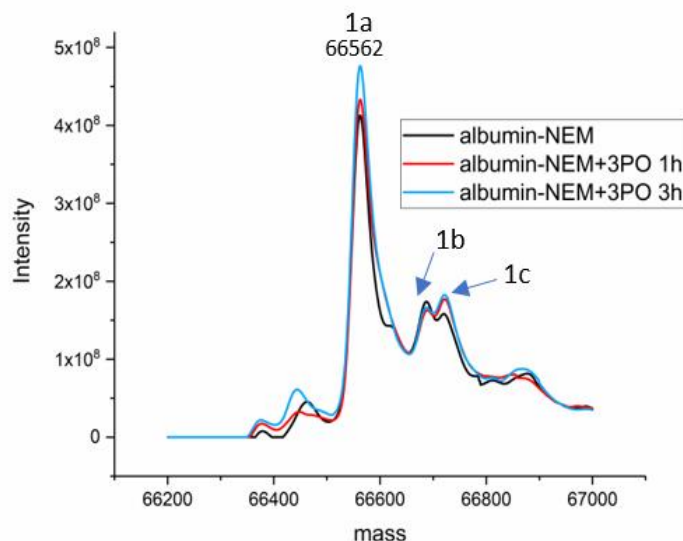


Figure 4.19: Deconvoluted spectrum of albumin extracted serum and spiked with NEM and 3PO. NEM modified albumin (1a), cysteinylated albumin (1b), glycated albumin (1c). No 3PO adduct formation in the sample spiked with NEM.

In the next step, we incubated the Cys34 blocked albumin with 3PO to check whether 3PO is able form the adduct. The hypothesis behind this experiment is that if 3PO has a different target site, other than free Cys34 , we would identify an extra peak even after blocking Cys34 residue with NEM. Notably in this analysis, as shown in Figure 4.19, we did not identify any extra peaks at 1hr and 3hr incubation with 3PO in NEM modified albumin. Therefore, based on the identified results we obtained a partial confirmation that 3PO has a specific target site at Cys34 residue of albumin. Cys blockage might explain the interfering action of 3PO with cell respiration as we identified in the proteomic analysis.

4.4 Future experiments:

In order to get direct evidence of our hypothesis, we designed a new experiment. To clarify which are the modified albumin hotspots for 3PO, we will perform a shotgun digestion of albumin after 1-3h incubation with 3PO, followed by a standard LC-MS/MS analysis. The peptide identifications will be performed by using proteome discover software. 3PO was described as a glycolytic pathway blocker, but this can be exerted to thiol alkylation as for IAA, which is toxic.

5 Industrial secondment

During the industrial secondment at Ingenus Pharmaceuticals, the following competences were acquired related to quality assurance (QA) and quality control (QC):

- Training in multiple SOPs and GMPs
- Data integrity.
- Two stages of filtration, filling, vial washing, capping, lyophilization stages.
- Bacterial infection tests: LAL-Test-Gel clot technique.
- Examination of microbial contamination of the water network and treated water.
- Media fill operations -Visual inspection of the media fill vials.
- Performance qualification protocol summary reports.
- Visible particles in injection
- Statistical control of the visual inspection of the product.
- Visible inspection of product according to cGMPs.
- Analytical method for Paclitaxel injection.
- Analytical method for irinotecan hydrochloride injection.
- Analytical method for docetaxel injection.
- Analytical method for Topotecan injection.
- Analytical method for Hydrochloride injection.
- Stability study control for 1-12 months at 25-40°C.
- Management of reagents and consumables in chemical laboratory.

6 Conclusions and general discussion of the study

The comprehensive role of pathological endothelial dysfunctionality in the onset and progression of atherosclerosis and other vascular related diseases such as acute myocardial infarction (AMI) and chronic thromboembolic pulmonary disease (CTEPH) remains far from being fully understood. Therefore, notwithstanding dysfunction of ECs is one of the major factors involved in the development of vascular diseases, identification of the molecular mechanisms underlying endothelial dysfunction is crucial not only to the understanding of the diseases, but also to development of new targeting drugs aimed to correct endothelial functional imbalance through innovative therapeutic strategies.

For these reasons, in the first part of the project, we have explored, by using different experimental approaches, the redox status and proteomic profiles of pathological EC cells, in an attempt to unveil underlying pathophysiological mechanisms in endothelial dysfunction associated with both AMI and CTEPH diseases.

Oxidative stress parameters and the redox status have been determined in different EC lines and under different experimental conditions with the main aim to elucidate the role of oxidative stress in determining EC dysfunctionality. Such screenings carried out by conventional methodologies (UV and fluorometric assay, immunodetection of oxidatively-modified proteins), indicated an increased production of oxidants (intracellular ROS) and of oxidative stress markers (AOPPs, PCOs) and decreased levels of cellular antioxidants (GSH/GSSH, NADPH/NADP), in both pathological ECs from AMI and CTEPH patients. We observed almost similar results in both pathological cell types, supporting the involvement of oxidative stress in the endothelial dysfunction mechanism of both the diseases.

The network analyses of differentially expressed proteins, quantified by mass spectrometry-based label-free approach, allowed the description of the two endothelial dysfunction diseases. However, in the original Moglynet project other mass spectrometric methods were reported, such as the isobaric tag (iTRAQ) and the stable isotope labeling by amino acids in cell culture (SILAC) methods. These methods, even if they also allow the relative quantitation of proteins, require long workflow or complex sample preparation, very expensive experimental procedures and the labeling reactions can be incomplete. The label free approach instead allows the quantitative correlation of several unlabeled samples, using normalized peak intensities. The major drawback of this strategy is the necessity of a high reproducible liquid chromatographic runs and mass

detection and fragmentation processes between analyses, attested by the statistical correlation between peak intensity of peptides in the biological and technical replicates. In addition, the required normalization between samples implicates the analyses of several replicates.

The network analyses, using the differentially expressed proteins (335 and 676 proteins) in AMI and CTEPH ECs versus controls, reveal the biomarker signature of vascular injury, thrombosis, metabolism and oxidative stress. The expression pattern of selected genes and proteins was also validated at transcriptome and proteome levels, respectively. In particular, the overexpression of VWF in AMI-ECs and of PLOD2 and ENG in CTEPH cells is strongly associated with thrombus formation, platelet aggregation and angiogenesis that might play a key role endothelial dysfunction of both the diseases. Hence, if we compare the molecular mechanisms associated with endothelial dysfunction in both AMI and CTEPH, we clearly identify the association to thrombus formation, collagen deposition, vascular remodeling, platelet aggregation, metabolic alterations and oxidative stress related events. However, the involved proteins and the relative differentially expressed pathways, that might act as markers in these molecular proceedings are different in the two cell types. Therefore, the pathophysiology of endothelial dysfunction in AMI and CTEPH diseases is different.

Furthermore, the down regulation of proteins with antioxidant property in both AMI and CTEPH cell types well correlates to the increased production of oxidants and decreased production of anti-oxidant biomarkers, and strongly confirm the role of oxidative stress in endothelial dysfunction of both AMI and CPTH diseases.

From all these considerations we can conclude that our present results deliver an exclusive representation of the endothelial proteome in both AMI and CTEPH diseases, contributing to the understanding of pathophysiology and building the foundation for the identification of new drug targets.

In the original project, the proteomic approach would also have been applied to the study of new inhibitors of the glycolytic pathway, involved in the processes of angiogenesis responsible for the progressive and unstable vascular disease leading to plaque rupture and subsequent occlusion of the arteries (myocardial infarction or stroke as final events). The project focused on the enzyme PFKFB3 (PFKFB3-driven glycolysis has been shown to be involved in angiogenesis), with the final aim to counteract neovessel formation in order to prevent plaque rupture and its

cardiovascular complications. Unfortunately, the phosphatase and kinase modulators of PFKFB3 synthesized in the MoGlyNet consortium, were shown to be less potent than 3PO, the prototype of PFKFB3 inhibitors involved in the reduction of EC migration and proliferation and able to partially and transiently inhibit glycolysis *in vivo*. Therefore, in this project, we applied the same mass spectrometry-based label free quantitative proteomic approach above described to analyze the effects of 3PO in human ECs. Notwithstanding the plethora of evidence indicating the key role of 3PO in reducing angiogenesis, the molecular mechanism of action and the toxicity of 3PO at EC level under physiological or inflamed conditions remains to be established. In this part of the study, the network analyses, using the differentially expressed proteins, 130 and 161 up and down-regulated proteins in the 3PO- treated ECs compared to the control group, allowed the description of 3PO effect in the cells. In particular 3PO targets mitochondria and down-regulated substrates such as cytochrome complex, mitochondrial respiratory chain complexes I, III and IV, oxidoreductase complex, and protein complex present in the mitochondrial inner membrane. 3PO inhibits the important cellular pathways including the TCA cycle and vasculogenesis that may be useful not only for understanding the inhibitory effect of 3PO on EC proliferation and migration, but also for explaining the toxicity of the compound and why it was important to optimize the toxicological profile of the molecule. Furthermore, emerging studies revealed the strong association among endothelial dysfunction, angiogenesis and inflammation. Therefore, to check whether 3PO has an anti-inflammatory property, we induced inflammation in ECs by using TNF α . As expected, in this analysis, we identified the association of inflammatory related pathways. Interestingly, after treating the inflamed ECs, the expression of inflammatory related proteins completely reversed, suggesting the potential anti-inflammatory property of 3PO. Therefore, our present data confirm a potential application of this molecule as a starting point in designing novel molecules to prevent diseases where inflammatory reactions are involved, such as in atherosclerosis, cancer or neurodegenerative diseases.

In conclusion the network analyses in combination with quantitative proteomics is able to describe the pathological changes occurring in a disease state, and also the impact of a biologically-active molecule at cell level, attesting its powerful application in medicinal chemistry.

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8 Appendices

Appendix Table 1: List of upregulated proteins associated with endothelial dysfunction in AMI.

Protein ID	Protein names	Gene names	Log2 (HCAEC-AMI vs HCAEC)	-LOG(P-value)
P63313	Thymosin beta-10	TMSB10	2.68	4.97
P04275	von Willebrand factor;von Willebrand antigen 2	VWF	2.06	1.41
B4DWS6	Very-long-chain 3-oxoacyl-CoA reductase	HSD17B12	1.47	5.70
E9PR44	Alpha-crystallin B chain	CRYAB	1.43	3.29
B4DRD3	Tissue-type plasminogen activator;Tissue-type plasminogen activator chain A;Tissue-type plasminogen activator chain B	PLAT	1.37	13.16
A0A140VJL6	Isoamyl acetate-hydrolyzing esterase 1 homolog	IAH1	1.33	5.87
P20591	Interferon-induced GTP-binding protein Mx1;Interferon-induced GTP-binding protein Mx1, N-terminally processed	MX1	1.25	3.67
O95433	Activator of 90 kDa heat shock protein ATPase homolog 1	AHSA1	1.20	3.35
B4DDF4	Calponin;Calponin-2	CNN2	1.06	4.70
Q86SZ7	Proteasome activator complex subunit 2	PSME2	1.03	2.36
B4E2S7	Lysosome-associated membrane glycoprotein 2	LAMP2	1.03	3.60
Q6FI81	Anamorsin	CIAPIN1	0.99	6.26
A0A0S2Z4G7	Nucleophosmin	NPM1	0.93	3.75
A0A024R6I3	Transmembrane emp24 domain-containing protein 10	TMED10	0.91	5.50
Q6IBN4	Enoyl-CoA delta isomerase 2, mitochondrial	PECI	0.86	5.85
O94874	E3 UFM1-protein ligase 1	UFL1	0.85	3.59
O15511	Actin-related protein 2/3 complex subunit 5	ARPC5	0.84	2.69
A0A024R3C4	KDEL motif-containing protein 2	KDEL2	0.84	3.28
Q5RLJ0	UPF0568 protein C14orf166	C14orf166	0.83	8.21
Q9UPN1	Serine/threonine-protein phosphatase;Serine/threonine-protein phosphatase PP1-gamma catalytic subunit	PPP1CC	0.83	3.05
A0A024RA52	Proteasome subunit alpha type;Proteasome subunit alpha type-2	PSMA2	0.81	2.55
X5D2T3	60S ribosomal protein L10	RPL10	0.80	4.07
P61026	Ras-related protein Rab-10	RAB10	0.79	2.57
B7ZAY2	Ras-related protein Rap-1b;Ras-related protein Rap-1b-like protein;Ras-related protein Rap-1A	RAP1B	0.77	4.39
Q5U0D2	Transgelin	TAGLN	0.77	2.63
Q6IPH7		RPL14	0.76	4.33
O15231	Zinc finger protein 185	ZNF185	0.76	4.13
P51571	Translocon-associated protein subunit delta	SSR4	0.75	5.64
J3KQ32	Obg-like ATPase 1	OLA1	0.74	4.78
A0A024RB14	40S ribosomal protein S26;Putative 40S ribosomal protein S26-like 1	RPS26	0.74	3.59
Q13509	Tubulin beta-3 chain	TUBB3	0.74	4.60

A0A024R7B7	Hsp90 co-chaperone Cdc37;Hsp90 co-chaperone Cdc37, N-terminally processed	CDC37	0.72	5.11
B7Z3K3	Inositol-3-phosphate synthase 1	ISYNA1	0.71	3.68
B3KT06	Tubulin alpha-1B chain	TUBA1B	0.71	6.93
A0A024R1M8	Apolipoprotein L2	APOL2	0.71	1.95
O43854	EGF-like repeat and discoidin I-like domain-containing protein 3	EDIL3	0.69	1.98
P37802	Transgelin-2	TAGLN2	0.63	4.79
P63172	Dynein light chain Tctex-type 1	DYNLT1	0.63	2.39
B4DFL1	Dihydrolipoyl dehydrogenase;Dihydrolipoyl dehydrogenase, mitochondrial	DLD	0.61	2.36
V9HW44	Platelet-activating factor acetylhydrolase IB subunit beta	HEL-S-303	0.60	3.84

Appendix Table 2: List of down-regulated proteins associated with endothelial dysfunctionality in AMI.

Protein ID	Protein names	Gene names	Log2 (HCAEC -AMI vs HCAEC)	-LOG(P-value)
H3BPC4	SUMO-conjugating enzyme UBC9	UBE2I	-1.68	1.38
E7ENN3	Nesprin-1	SYNE1	-1.45	6.12
F5H7F6	Microsomal glutathione S-transferase 1	MGST1	-1.45	5.54
A0A1W2PRF6	Lysosome membrane protein 2	SCARB2	-1.43	4.16
B3KPC7	Actin-related protein 2/3 complex subunit 5;Actin-related protein 2/3 complex subunit 5-like protein	ARPC5L	-1.43	3.29
A8K651	Complement component 1 Q subcomponent-binding protein, mitochondrial	C1QBP	-1.39	5.53
Q9BQQ5	60S ribosomal protein L27a	L27a	-1.39	8.30
P62851	40S ribosomal protein S25	RPS25	-1.38	6.19
Q13201	Multimerin-1;Platelet glycoprotein Ia*;155 kDa platelet multimerin	MMRN1	-1.33	3.14
Q9Y5B9	FACT complex subunit SPT16	SUPT16H	-1.31	4.57
Q96FQ6	Protein S100-A16	S100A16	-1.29	6.83
Q6IBA2	Activated RNA polymerase II transcriptional coactivator p15	PC4	-1.25	7.05
Q13151	Heterogeneous nuclear ribonucleoprotein A0	HNRNPA0	-1.21	4.49
B4DWN1	Vesicular integral-membrane protein VIP36	LMAN2	-1.20	2.20
C9J3L8	Translocon-associated protein subunit alpha	SSR1	-1.20	5.57
Q2TAM5	Transcription factor p65	RELA	-1.17	6.14
P29966	Myristoylated alanine-rich C-kinase substrate	MARCKS	-1.15	6.06
H0YN26	Acidic leucine-rich nuclear phosphoprotein 32 family member A	ANP32A	-1.12	6.03
Q53FJ5	Prosaposin;Saposin-A;Saposin-B-Val;Saposin-B;Saposin-C;Saposin-D	PSAP	-1.09	8.79
Q13404	Ubiquitin-conjugating enzyme E2 variant 1	UBE2V1	-1.09	3.47

A0A140VJK1	Glutaredoxin-3	GLRX3	-1.06	4.43
F8W6I7	Heterogeneous nuclear ribonucleoprotein A1;Heterogeneous nuclear ribonucleoprotein A1, N-terminally processed;Heterogeneous nuclear ribonucleoprotein A1-like 2	HNRNPA1	-1.05	5.46
A0A024R3J7	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit STT3A	hCG_203270 1	-1.03	5.00
Q9Y3U8	60S ribosomal protein L36	RPL36	-1.01	5.47
P51858	Hepatoma-derived growth factor	HDGF	-1.00	4.74
F5GXX5	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit DAD1	DAD1	-0.99	2.82
Q5T7C4	High mobility group protein B1;Putative high mobility group protein B1-like 1	HMGB1	-0.99	7.17
B4DTT0	N-acetylglucosamine-6-sulfatase	DKFZp686E 12166	-0.97	8.94
O14907	Tax1-binding protein 3	TAX1BP3	-0.97	3.69
A0A024R4X0	NADH-cytochrome b5 reductase;NADH-cytochrome b5 reductase 3;NADH-cytochrome b5 reductase 3 membrane-bound form;NADH-cytochrome b5 reductase 3 soluble form	CYB5R3	-0.97	7.22
H9ZYJ2	Thioredoxin	TXN	-0.96	5.01
B5BU25	Splicing factor U2AF 65 kDa subunit	U2AF2	-0.96	8.00
Q86U79	Adenosine kinase	ADK	-0.95	2.58
L7RT18	Adapter molecule crk	CRK	-0.94	4.18
V9HW48	SH3 domain-binding glutamic acid-rich-like protein	HEL-S-115	-0.93	2.73
A0A140VJF4	Biliverdin reductase A	BLVRA	-0.93	5.15
E9PI87	Oxidoreductase HTATIP2	HTATIP2	-0.92	2.13
J3KNF4	Copper chaperone for superoxide dismutase	CCS	-0.92	4.48
Q6FGV9	Phosphomevalonate kinase	PMVK	-0.92	2.92
P20700	Lamin-B1	LMNB1	-0.91	9.48
Q6FGY1	Hippocalcin-like protein 1	HPCAL1	-0.91	3.83
A0A024R258	Ubiquilin-1;Ubiquilin-4	UBQLN1	-0.90	5.55
Q53XX5	Cold-inducible RNA-binding protein	CIRBP	-0.90	3.80
Q59H57	RNA-binding protein FUS	FUS	-0.90	3.77
B4E324	Carboxypeptidase;Lysosomal protective protein;Lysosomal protective protein 32 kDa chain;Lysosomal protective protein 20 kDa chain	CTSA	-0.89	4.30
K7ESE8	Bleomycin hydrolase	BLMH	-0.89	3.32
P46926	Glucosamine-6-phosphate isomerase 1;Glucosamine-6-phosphate isomerase	GNPDA1	-0.88	4.45
B7Z4K8	Basic leucine zipper and W2 domain-containing protein 2	BZW2	-0.87	4.26
B7Z2Z1	Scaffold attachment factor B1	SAFB	-0.87	5.93
Q6IRT1	S-(hydroxymethyl)glutathione dehydrogenase;Alcohol dehydrogenase class-3	ADH5	-0.87	4.62
P15531	Nucleoside diphosphate kinase A	NME1	-0.86	1.85
A2A2D0	Stathmin	STMN1	-0.86	8.87
C9JFR7	Cytochrome c	CYCS	-0.84	6.18
A8K2W3	Serum deprivation-response protein	SDPR	-0.83	11.43

F5GYN4	Ubiquitin thioesterase OTUB1	OTUB1	-0.81	5.20
O75436	Vacuolar protein sorting-associated protein 26A	VPS26A	-0.81	2.38
V9HW74	Ubiquitin carboxyl-terminal hydrolase;Ubiquitin carboxyl-terminal hydrolase isozyme L1	HEL-117	-0.79	1.94
A0A0S2Z410	3-hydroxyacyl-CoA dehydrogenase type-2	HSD17B10	-0.79	4.64
H3BPQ3	Protein NDRG4	NDRG4	-0.78	3.46
Q5T9B9	Endoglin	ENG	-0.77	3.90
A0A087X296	Prostaglandin G/H synthase 1	PTGS1	-0.77	4.28
J3K000	Xaa-Pro dipeptidase	PEPD	-0.76	3.38
A0A024RAV2	ATP-dependent DNA helicase Q1	RECQL	-0.76	5.90
A0A024R3Z6	Basic leucine zipper and W2 domain-containing protein 1	BZW1	-0.75	5.44
P18077	60S ribosomal protein L35a	RPL35A	-0.75	2.68
Q6FH49	Nicotinamide N-methyltransferase	NNMT	-0.74	4.02
V9HWI0	Alcohol dehydrogenase [NADP(+)]	HEL-S-165mP	-0.74	7.43
B3KMZ6	SUMO-activating enzyme subunit 2	UBA2	-0.74	3.60
E9PJ81	UBX domain-containing protein 1	UBXN1	-0.74	2.45
B4DIZ2	Ubiquitin-conjugating enzyme E2 K	UBE2K	-0.74	3.24
A5PLK7	Protein RCC2	RCC2	-0.73	4.02
B0YJ88	Radixin	RDX	-0.73	3.67
A0A024R883	V-type proton ATPase subunit G 1	ATP6V1G1	-0.73	3.30
A0A024R3W7	Elongation factor 1-beta	EEF1B2	-0.73	3.44
Q5IST1	Serine/arginine-rich splicing factor 5	SFRS5	-0.71	2.49
A0A024R8W0	Eukaryotic initiation factor 4A-III;Eukaryotic initiation factor 4A-III, N-terminally processed	DDX48	-0.71	4.98
Q6FHX6	Flap endonuclease 1	FEN1	-0.70	2.56
Q53HS0	Glutamine--tRNA ligase	QARS	-0.70	5.15
O95831	Apoptosis-inducing factor 1, mitochondrial	AIFM1	-0.70	2.02
O15400	Syntaxin-7	STX7	-0.70	4.56
Q5T123	SH3 domain-binding glutamic acid-rich-like protein 3	SH3BGRL3	-0.69	4.48
Q9HDC9	Adipocyte plasma membrane-associated protein	APMAP	-0.69	2.58
Q05BM8	Polypeptide N-acetylgalactosaminyltransferase;Polypeptide N-acetylgalactosaminyltransferase 1;Polypeptide N-acetylgalactosaminyltransferase 1 soluble form	GALNT1	-0.69	3.82
Q9BRL5		CALM3	-0.69	2.73
J3QRT5	Intercellular adhesion molecule 2	ICAM2	-0.69	2.31
F8WCF6	Actin-related protein 2/3 complex subunit 4	ARPC4-TTLL3	-0.68	6.06
I3L2L5	Protein FAM195B	FAM195B	-0.68	3.19
B3KN57	Sorting nexin-2	SNX2	-0.68	5.10
F8VQE1	LIM domain and actin-binding protein 1	LIMA1	-0.68	2.45
D3DP46	Signal peptidase complex subunit 3	SPCS3	-0.68	2.27
A0A024R9D2	Protein LYRIC	MTDH	-0.67	3.46

P35580	Myosin-10	MYH10	-0.67	7.58
K7ES31	Eukaryotic translation initiation factor 3 subunit K	EIF3K	-0.67	3.30
J3KT73	60S ribosomal protein L38	RPL38	-0.66	6.00
P62263	40S ribosomal protein S14	RPS14	-0.66	7.96
P62495	Eukaryotic peptide chain release factor subunit 1	ETF1	-0.66	5.27
Q53XC0	Eukaryotic translation initiation factor 2 subunit 1	EIF2S1	-0.66	5.24
Q96C90	Protein phosphatase 1 regulatory subunit 14B	PPP1R14B	-0.65	2.71
F5H2R5	Rho GDP-dissociation inhibitor 2	ARHGDIB	-0.65	2.80
A4D275	Actin-related protein 2/3 complex subunit 1B	ARPC1B	-0.64	2.92
Q14240	Eukaryotic initiation factor 4A-II;Eukaryotic initiation factor 4A-II, N-terminally processed	EIF4A2	-0.64	3.21
B4E3A8	Leukocyte elastase inhibitor	HEL57	-0.64	2.22
A0A024R1K8	Splicing factor 3A subunit 1	SF3A1	-0.64	2.65
H7BY10	60S ribosomal protein L23a	RPL23A	-0.64	3.71
Q96IZ0	PRKC apoptosis WT1 regulator protein	PAWR	-0.64	4.69
A8K719	Core-binding factor subunit beta	CBFB	-0.64	2.71
A0A024RDB0	Ubiquitin-like modifier-activating enzyme 6	UBE1L2	-0.64	7.12
A0A0A6YYJ8	Putative RNA-binding protein Luc7-like 2	LUC7L2	-0.64	3.62
A0A140VJP5	S-adenosylmethionine synthase isoform type-2;S-adenosylmethionine synthase	MAT2A	-0.64	4.18
Q53R19	Actin-related protein 2/3 complex subunit 2	ARPC2	-0.62	3.86
A0A1X7SBZ2	Probable ATP-dependent RNA helicase DDX17	DDX17	-0.62	9.54
A9UK01	Rho GTPase-activating protein 18	ARHGAP18	-0.61	5.11
A0A024RB85	Proliferation-associated protein 2G4	PA2G4	-0.61	6.66
V9HW41	Ubiquitin-conjugating enzyme E2 N	HEL-S-71	-0.61	3.01
Q5VVDO	60S ribosomal protein L11	RPL11	-0.61	4.27
P51991	Heterogeneous nuclear ribonucleoprotein A3	HNRNPA3	-0.61	9.09
A0A024R5Q7	Adenylosuccinate synthetase isozyme 2	ADSS	-0.61	6.02
Q59GU6	Sorting nexin-1	SNX1	-0.61	3.93
P13010	X-ray repair cross-complementing protein 5	XRCC5	-0.60	6.59
C9J9K3	40S ribosomal protein SA	RPSA	-0.60	7.71
A0A0A0MRM8	Unconventional myosin-VI	MYO6	-0.60	3.14
L7RXH5	Mitogen-activated protein kinase;Mitogen-activated protein kinase 3	MAPK3	-0.60	6.02
V9HWC2	Protein deglycase DJ-1	HEL-S-67p	-0.60	6.11

Appendix Table 3: List of upregulated proteins associated with endothelial dysfunctionality in CTEPH.

Protein ID	Protein names	Gene names	Log 2 (CTEPH- EC/HPAE)	- LOG(P -value)
O00469	Procollagen-lysine,2-oxoglutarate 5-dioxygenase 2	PLOD2	2.47	15.22
Q5U0D2	Transgelin	TAGLN	2.41	14.14
A0A0P1J1R0	Translationally-controlled tumor protein	TPT1	2.38	15.80
P68133	Actin, alpha skeletal muscle;Actin, alpha cardiac muscle 1;Actin, gamma-enteric smooth muscle;Actin, aortic smooth muscle	ACTA1	2.23	8.13
Q5CZB5	Uncharacterized protein DKFZp686M0430	DKFZp686M0430	1.98	5.73
V9HW83	Retinal dehydrogenase 1	HEL-S-53e	1.71	16.57
H0YNW5	Deoxyuridine 5-triphosphate nucleotidohydrolase, mitochondrial	DUT	1.40	25.23
J3QR09	Ribosomal protein L19;60S ribosomal protein L19	RPL19	1.38	7.55
Q5ISS1	ADP-ribosylation factor 1;ADP-ribosylation factor 3	ARF1	1.34	11.81
P68366	Tubulin alpha-4A chain	TUBA4A	1.18	6.60
Q9UJC5	SH3 domain-binding glutamic acid-rich-like protein 2	SH3BGRL2	1.17	1.90
A0A024R222	Phosphoserine aminotransferase	PSAT1	1.16	13.15
B4DDF4	Calponin;Calponin-2	CNN2	1.13	8.08
B1AHB1	DNA helicase;DNA replication licensing factor MCM5	MCM5	1.11	8.80
B3KXZ4	DNA helicase;DNA replication licensing factor MCM2	MCM2	1.08	13.33
Q14566	DNA replication licensing factor MCM6	MCM6	1.05	14.57
Q8WX93	Palladin	PALLD	1.05	5.21
O95433	Activator of 90 kDa heat shock protein ATPase homolog 1	AHSA1	1.05	3.11
K7ELC2	40S ribosomal protein S15	RPS15	1.02	4.20
Q53Y97	Thymidylate synthase	TYMS	0.98	6.36
Q02952	A-kinase anchor protein 12	AKAP12	0.97	5.74
P63279	SUMO-conjugating enzyme UBC9	UBE2I	0.89	4.20
P07108	Acyl-CoA-binding protein	DBI	0.86	6.75
Q49AN9	Small nuclear ribonucleoprotein G;Putative small nuclear ribonucleoprotein G-like protein 15	SNRPG	0.86	4.87
B7Z6Y2	Myc box-dependent-interacting protein 1	BIN1	0.85	2.86
Q6FHX6	Flap endonuclease 1	FEN1	0.84	11.02
Q7Z726	Importin subunit alpha;Importin subunit alpha-1	KPNA2	0.84	7.92
Q9UBB4	Ataxin-10	ATXN10	0.84	12.66
V9HWH6	Purine nucleoside phosphorylase	HEL-S-156an	0.83	14.10

Q6IPH7		RPL14	0.83	7.18
D3DT44	Glutamate--cysteine ligase regulatory subunit	GCLM	0.82	5.69
P07737	Profilin-1	PFN1	0.82	15.14
P62424	60S ribosomal protein L7a	RPL7A	0.81	11.37
Q6IBA2	Activated RNA polymerase II transcriptional coactivator p15	PC4	0.80	6.84
P17812	CTP synthase 1;CTP synthase	CTPS1	0.80	8.65
A4D177	Chromobox protein homolog 3	CBX3	0.79	9.30
P40222	Alpha-taxilin	TXLNA	0.79	8.67
F6WIT2	Serine/threonine-protein phosphatase 2A activator	PPP2R4	0.78	4.67
Q9Y5B9	FACT complex subunit SPT16	SUPT16H	0.77	15.60
A0A024R4Z6	FACT complex subunit SSRP1	SSRP1	0.76	20.30
B4DNN4	Ribonucleoside-diphosphate reductase;Ribonucleoside-diphosphate reductase large subunit	RRM1	0.75	7.94
P61960	Ubiquitin-fold modifier 1	UFM1	0.74	4.00
Q9UNN8	Endothelial protein C receptor	PROCR	0.74	12.38
Q53HJ4	DNA helicase;DNA replication licensing factor MCM3	MCM3	0.73	8.26
A0A0S2Z4A5	DNA replication licensing factor MCM7;DNA helicase	MCM7	0.73	12.17
P37802	Transgelin-2	TAGLN2	0.72	11.98
P18077	60S ribosomal protein L35a	RPL35A	0.72	5.90
M0R117	60S ribosomal protein L18a	RPL18A	0.71	10.66
Q16222	UDP-N-acetylhexosamine pyrophosphorylase;UDP-N-acetylgalactosamine pyrophosphorylase;UDP-N-acetylglucosamine pyrophosphorylase	UAP1	0.71	10.20
P20290	Transcription factor BTF3	BTF3	0.71	4.73
A0A024RDE8	PDZ and LIM domain protein 5	PDLIM5	0.71	10.34
A0A024RDY0	Importin-5	RANBP5	0.71	15.80
P18124	60S ribosomal protein L7	RPL7	0.70	17.65
Q71UA6	Amino acid transporter;Neutral amino acid transporter B(0)	SLC1A5	0.70	10.66
Q9BY44	Eukaryotic translation initiation factor 2A;Eukaryotic translation initiation factor 2A, N-terminally processed	EIF2A	0.70	10.62
Q5ISS7	60S ribosomal protein L10	RPL10	0.70	6.74
Q8IZ29	Tubulin beta-4B chain	TUBB2C	0.70	9.57
P62917	60S ribosomal protein L8	RPL8	0.69	8.20
Q658N3	Protein Dr1	DKFZp666G145	0.69	5.45
C9JXB8	60S ribosomal protein L24	RPL24	0.69	7.33
A0A024R6Y2	Nuclear transport factor 2	NUTF2	0.68	6.07
Q9NR30	Nucleolar RNA helicase 2	DDX21	0.68	12.20
Q8WVC2	40S ribosomal protein S21	RPS21	0.68	8.93

Q9UJU6	Drebrin-like protein	DBNL	0.68	6.66
A8K7F6	Eukaryotic initiation factor 4A-I	EIF4A1	0.67	18.76
A0A024QZ77	EF-hand domain-containing protein D2	EFHD2	0.67	2.95
A8K2X4	Endoglin	ENG	0.67	12.73
Q53H03	Nuclear autoantigenic sperm protein	NASP	0.66	8.66
P62277	40S ribosomal protein S13	RPS13	0.66	12.79
Q6FI35	Proliferating cell nuclear antigen	PCNA	0.64	14.91
A0A024R904	Calcyclin-binding protein	CACYBP	0.64	9.86
A8K6Q8	Transferrin receptor protein 1;Transferrin receptor protein 1, serum form	TFRC	0.64	5.69
B2R4R9	40S ribosomal protein S28	RPS28	0.63	5.72
P42677	40S ribosomal protein S27	RPS27	0.63	7.87
P13639	Elongation factor 2	EEF2	0.62	21.00
O14929	Histone acetyltransferase type B catalytic subunit	HAT1	0.62	9.51
A0A140VK94	Ran-specific GTPase-activating protein	RANBP1	0.61	10.73
A0A024QYX3	RNA-binding protein 3	RBM3	0.61	4.16
P62306	Small nuclear ribonucleoprotein F	SNRPF	0.60	2.57
A0A0S2Z4R1	Tyrosine--tRNA ligase, cytoplasmic;Tyrosine--tRNA ligase, cytoplasmic, N-terminally processed;Tyrosine--tRNA ligase	YARS	0.60	9.43

Appendix Table 4: List of down-regulated proteins associated with endothelial dysfunctionality in CTEPH.

Protein ID	Protein names	Gene names	Log2 (CTEPH-EC/HPAE)	-LOG(P-value)
V9HW74	Ubiquitin carboxyl-terminal hydrolase;Ubiquitin carboxyl-terminal hydrolase isozyme L1	HEL-117	-3.17	4.04
B2R769	Endoplasmic reticulum aminopeptidase 2	ERAP2	-2.53	8.81
A0A024RDG9	3-hydroxybutyrate dehydrogenase type 2	BDH2	-2.21	12.83
K7ERP4	Glutathione peroxidase;Phospholipid hydroperoxide glutathione peroxidase, mitochondrial	GPX4	-2.18	9.66
A0A090N8Z4	GTPase IMAP family member 1	IMAP1	-2.04	9.55
Q8NHP8	Putative phospholipase B-like 2;Putative phospholipase B-like 2 32 kDa form;Putative phospholipase B-like 2 45 kDa form	PLBD2	-2.01	8.33
A0A024R5L0	Lysosomal Pro-X carboxypeptidase	PRCP	-1.91	14.87
Q5NKV8	Intercellular adhesion molecule 1	ICAM1	-1.59	6.89
P30837	Aldehyde dehydrogenase X, mitochondrial	ALDH1B1	-1.58	10.33
Q5TBU5	Adipogenesis regulatory factor	hCG_1773630	-1.58	11.17
B4DJ12	Granulins;Acrogranin;Paragranulin;Granulin-1;Granulin-2;Granulin-3;Granulin-4;Granulin-5;Granulin-6;Granulin-7	GRN	-1.56	14.56

Q96DI8	Heme oxygenase 1	HMOX1	-1.55	10.09
P04040	Catalase	CAT	-1.55	11.85
B4DSE2	Tripeptidyl-peptidase 1	TPP1	-1.53	22.28
Q14165	Malectin	MLEC	-1.52	10.46
Q92626	Peroxidasin homolog	PXDN	-1.48	4.09
Q7Z7M4	Superoxide dismutase;Superoxide dismutase [Mn], mitochondrial	SOD2	-1.47	6.81
A0A090N8H2	GTPase IMAP family member 8	hIAN6	-1.45	7.71
B4DTT0	N-acetylglucosamine-6-sulfatase	DKFZp686E12166	-1.44	22.53
A0A024RA75	3-hydroxyisobutyrate dehydrogenase;3-hydroxyisobutyrate dehydrogenase, mitochondrial	HIBADH	-1.42	7.84
P36551	Oxygen-dependent coproporphyrinogen-III oxidase, mitochondrial	CPOX	-1.41	12.80
Q5URX0	Beta-hexosaminidase;Beta-hexosaminidase subunit beta;Beta-hexosaminidase subunit beta chain B;Beta-hexosaminidase subunit beta chain A	HEXB	-1.41	22.55
A0A090N7X0	GTPase IMAP family member 4	HIMAP4	-1.39	8.48
B3KQQ0	Peptidyl-prolyl cis-trans isomerase FKBP9	FKBP9	-1.39	7.45
A0A024R8Q1	Lysosomal alpha-glucosidase;76 kDa lysosomal alpha-glucosidase;70 kDa lysosomal alpha-glucosidase	GAA	-1.36	13.32
A0A140VJL0	3-hydroxyisobutyryl-CoA hydrolase, mitochondrial	HIBCH	-1.35	5.65
A8K335	Gamma-glutamyl hydrolase	GGH	-1.34	8.29
A0A0C4DFN8	NADPH:adrenodoxin oxidoreductase, mitochondrial	FDXR	-1.34	16.12
Q53H18	Beta-galactosidase	GLB1	-1.32	6.66
Q9NSC5	Homer protein homolog 3	HOMER3	-1.31	6.31
Q6IB89	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 7	NDUFA7	-1.29	9.31
Q9Y2Q5	Ragulator complex protein LAMTOR2	LAMTOR2	-1.28	12.02
P49407	Beta-arrestin-1	ARRB1	-1.27	4.68
P04275	von Willebrand factor;von Willebrand antigen 2	VWF	-1.26	11.90
O75923	Dysferlin	DYSF	-1.25	13.11
Q53FB6	Aldehyde dehydrogenase, mitochondrial	ALDH2	-1.25	12.60
A8K9J6	CD276 antigen	CD276	-1.23	3.52
B4DJQ8	Dipeptidyl peptidase 1;Dipeptidyl peptidase 1 exclusion domain chain;Dipeptidyl peptidase 1 heavy chain;Dipeptidyl peptidase 1 light chain	CTSC	-1.23	6.01
Q9BVJ8	Beta-hexosaminidase;Beta-hexosaminidase subunit alpha	HEXA	-1.21	4.95
P51970	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 8	NDUFA8	-1.21	8.46
Q8TDB4	Protein MGARP	MGARP	-1.19	3.74
Q8IWP6			-1.19	1.70
Q9UHL4	Dipeptidyl peptidase 2	DPP7	-1.18	7.40

P16284	Platelet endothelial cell adhesion molecule	PECAM1	-1.18	18.62
A0A024RAD8	Delta-1-pyrroline-5-carboxylate dehydrogenase, mitochondrial	ALDH4A1	-1.17	8.33
A0A1B0GW44	Cathepsin D;Cathepsin D light chain;Cathepsin D heavy chain	HEL-S-130P	-1.17	20.91
B2R7D2	Multiple inositol polyphosphate phosphatase 1	MINPP1	-1.16	6.44
A0A024RAB6	Basement membrane-specific heparan sulfate proteoglycan core protein;Endorepellin;LG3 peptide	HSPG2	-1.16	16.03
Q9Y4D7	Plexin-D1	PLXND1	-1.15	14.69
Q96CM8	Acyl-CoA synthetase family member 2, mitochondrial	ACSF2	-1.12	3.92
B7Z8A2	Prenylcysteine oxidase 1	PCYOX1	-1.11	14.14
P35580	Myosin-10	MYH10	-1.11	18.41
Q14XT3	Cytochrome c oxidase subunit 2	COX2	-1.11	4.76
Q9NV96	Cell cycle control protein 50A	TMEM30A	-1.10	4.80
B4E324	Carboxypeptidase;Lysosomal protective protein;Lysosomal protective protein 32 kDa chain;Lysosomal protective protein 20 kDa chain	CTSA	-1.10	12.17
Q53FJ5	Prosaposin;Saposin-A;Saposin-B-Val;Saposin-B;Saposin-C;Saposin-D	PSAP	-1.10	14.44
P49006	MARCKS-related protein	MARCKSL1	-1.10	8.90
A0A024R9D7	2,4-dienoyl-CoA reductase, mitochondrial	DECR1	-1.09	17.20
Q6DHz2	cAMP-dependent protein kinase type II-beta regulatory subunit	PRKAR2B	-1.09	6.33
A0A096LPI6	ES1 protein homolog, mitochondrial	C21orf33	-1.09	6.35
P38117	Electron transfer flavoprotein subunit beta	ETFB	-1.07	15.26
A0A024RC61	Aminopeptidase N	ANPEP	-1.07	17.29
Q96DP0			-1.06	7.04
B4DKM6	Serum paraoxonase/arylesterase 2	PON2	-1.06	6.17
Q96N83	Podocalyxin	PODXL	-1.06	7.24
A0A0S2Z5A5	Septin-9		9-Sep -1.05	3.53
B4DEH0	39S ribosomal protein L10, mitochondrial	MRPL10	-1.05	5.53
A0A024R8T3	Acyl-coenzyme A oxidase;Peroxisomal acyl-coenzyme A oxidase 1	ACOX1	-1.04	8.80
B4E2S7	Lysosome-associated membrane glycoprotein 2	LAMP2	-1.04	14.55
Q8WYJ5	Histidine triad nucleotide-binding protein 2, mitochondrial	HINT2	-1.03	8.40
B3KNK4	Phosphatidate cytidyltransferase;Phosphatidate cytidyltransferase 2	CDS2	-1.03	2.80
Q53YE7	Amine oxidase [flavin-containing] A	MAOA	-1.02	3.77
A0A0S2Z3L0	Electron transfer flavoprotein subunit alpha, mitochondrial	ETFA	-1.01	12.57
L7UUZ7	Integrin beta;Integrin beta-3	ITGB3	-1.01	3.87
Q8NG19	Collagen alpha-1(XVIII) chain;Endostatin	COL18A1	-1.00	2.89
B5MDU6	UPF0554 protein C2orf43	LDAH	-0.99	3.34
B7Z3K3	Inositol-3-phosphate synthase 1	ISYNA1	-0.98	5.69

B3KRY3	Lysosome-associated membrane glycoprotein 1	LAMP1	-0.97	11.48
Q14258	E3 ubiquitin/ISG15 ligase TRIM25	TRIM25	-0.96	9.81
P30084	Enoyl-CoA hydratase, mitochondrial	ECHS1	-0.96	19.00
H7C0V9	Amyloid beta A4 protein;N-APP;Soluble APP-alpha;Soluble APP-beta;C99;Beta-amyloid protein 42;Beta-amyloid protein 40;C83;P3(42);P3(40);C80;Gamma-secretase C-terminal fragment 59;Gamma-secretase C-terminal fragment 57;Gamma-secretase C-terminal fragment 50;C31	APP	-0.94	6.91
P17900	Ganglioside GM2 activator;Ganglioside GM2 activator isoform short	GM2A	-0.94	3.73
A0A0B4J2A4	3-ketoacyl-CoA thiolase, mitochondrial	ACAA2	-0.93	6.54
B7Z7Z3	Nitric oxide synthase;Nitric oxide synthase, endothelial	NOS3	-0.93	5.13
P11233	Ras-related protein Ral-A	RALA	-0.93	10.27
A0A1B0GTY9	Alpha-aminoadipic semialdehyde dehydrogenase	ALDH7A1	-0.92	8.53
J3K000	Xaa-Pro dipeptidase	PEPD	-0.91	2.61
B2RAZ4	Apoptosis-associated speck-like protein containing a CARD	PYCARD	-0.91	7.44
A8K6H1	Endoplasmic reticulum aminopeptidase 1	ERAP1	-0.90	9.62
A0A024R5C4	Reticulon;Reticulon-3	RTN3	-0.90	7.81
P21912	Succinate dehydrogenase [ubiquinone] iron-sulfur subunit, mitochondrial	SDHB	-0.89	7.61
Q6FHM4	Cytochrome c oxidase subunit 5B, mitochondrial	COX5B	-0.89	11.86
B2R659	Peroxisomal multifunctional enzyme type 2;(3R)-hydroxyacyl-CoA dehydrogenase;Enoyl-CoA hydratase 2	HSD17B4	-0.89	18.62
P16930	Fumarylacetoacetase	FAH	-0.89	3.50
P55084	Trifunctional enzyme subunit beta, mitochondrial;3-ketoacyl-CoA thiolase	HADHB	-0.88	23.18
P30048	Thioredoxin-dependent peroxide reductase, mitochondrial	PRDX3	-0.88	13.39
Q9H1E3	Nuclear ubiquitous casein and cyclin-dependent kinase substrate 1	NUCKS1	-0.88	3.09
B3KWW5	Galectin;Galectin-9	LGALS9	-0.88	1.76
A0A0A0MR02	Voltage-dependent anion-selective channel protein 2	VDAC2	-0.87	25.28
Q7Z531	GTP:AMP phosphotransferase AK3, mitochondrial	AK3	-0.87	6.81
Q9UF24	NADH dehydrogenase [ubiquinone] iron-sulfur protein 3, mitochondrial	DKFZp586K0821	-0.87	5.21
A0A024R670	Synaptojanin-2-binding protein	SYNJ2BP	-0.86	6.97
Q7Z434	Mitochondrial antiviral-signaling protein	MAVS	-0.86	6.23
L7RXH0	Integrin alpha-V;Integrin alpha-V heavy chain;Integrin alpha-V light chain	ITGAV	-0.86	8.63
Q14571	Inositol 1,4,5-trisphosphate receptor type 2	ITPR2	-0.85	5.26
E9PIN3	Nuclear RNA export factor 1	NXF1	-0.85	5.05
Q59E90	Alpha-mannosidase;Lysosomal alpha-mannosidase;Lysosomal alpha-mannosidase A	MAN2B1	-0.85	3.12

	peptide;Lysosomal alpha-mannosidase B peptide;Lysosomal alpha-mannosidase C peptide;Lysosomal alpha-mannosidase D peptide;Lysosomal alpha-mannosidase E peptide			
Q9Y277	Voltage-dependent anion-selective channel protein 3	VDAC3	-0.84	10.59
Q2TAB3	Sulfotransferase;Sulfotransferase 1A4;Sulfotransferase 1A3	SULT1A4	-0.84	3.81
Q13011	Delta(3,5)-Delta(2,4)-dienoyl-CoA isomerase, mitochondrial	ECH1	-0.84	7.34
B2RAQ8	Carnitine O-palmitoyltransferase 1, liver isoform	CPT1A	-0.83	11.90
Q9UHA4	Ragulator complex protein LAMTOR3	LAMTOR3	-0.83	4.23
A1L0T0	Acetolactate synthase-like protein	ILVBL	-0.82	6.15
K7EQ77	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 11	NDUFA11	-0.82	7.26
B4DMP4	Protein VAC14 homolog	VAC14	-0.82	2.82
Q8IY17	Neuropathy target esterase	PNPLA6	-0.82	7.08
A0A087WUQ6	Glutathione peroxidase;Glutathione peroxidase 1	GPX1	-0.82	5.76
A0A024R9B7	Cytochrome c oxidase subunit 6C	COX6C	-0.82	4.96
V9HW53	N(G),N(G)-dimethylarginine dimethylaminohydrolase 2	HEL-S-277	-0.81	9.48
Q9BTT5	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 9, mitochondrial	NDUFA9	-0.80	10.54
B1AK13	Hydroxymethylglutaryl-CoA lyase, mitochondrial	HMGCL	-0.80	3.02
A0A1L1UHR1	Voltage-dependent anion-selective channel protein 1	VDAC1	-0.79	19.49
Q9UEH5	NADH dehydrogenase [ubiquinone] flavoprotein 2, mitochondrial	NDUFV2	-0.78	13.38
X5CKB3	Antigen peptide transporter 1	TAP1	-0.78	4.50
Q5RKT7	Ubiquitin-40S ribosomal protein S27a;Ubiquitin;40S ribosomal protein S27a;Ubiquitin-60S ribosomal protein L40;Ubiquitin;60S ribosomal protein L40;Polyubiquitin-B;Ubiquitin;Polyubiquitin- C;Ubiquitin	RPS27A	-0.78	5.64
H7BXI1	Extended synaptotagmin-2	ESYT2	-0.77	5.40
H7BYY1		TPM1	-0.77	4.61
A0A024R325	Succinyl-CoA ligase subunit beta;Succinyl- CoA ligase [GDP-forming] subunit beta, mitochondrial	SUCLG2	-0.76	10.74
Q68DH9	Calcium-transporting ATPase;Plasma membrane calcium-transporting ATPase 4	DKFZp686M088	-0.76	6.53
A8K2W3	Serum deprivation-response protein	SDPR	-0.76	6.57
K7EJE8	Lon protease homolog, mitochondrial;Lon protease homolog	LONP1	-0.76	8.01
A0A0A0MS41	Sideroflexin;Sideroflexin-3	SFXN3	-0.76	4.78
P52209	6-phosphogluconate dehydrogenase, decarboxylating	PGD	-0.76	9.45

P10909	Clusterin;Clusterin beta chain;Clusterin alpha chain;Clusterin	CLU	-0.76	2.50
D3DQH8	SPARC	SPARC	-0.76	13.46
B4DP06			-0.75	2.91
Q96PU8	Protein quaking	QKI	-0.75	5.25
Q9UHS8	Sulfide:quinone oxidoreductase, mitochondrial	hCG_2001986	-0.75	5.02
Q53SW4	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 10, mitochondrial	NDUFA10	-0.75	6.21
B3KPA6	Very long-chain specific acyl-CoA dehydrogenase, mitochondrial	ACADVL	-0.75	17.29
A0A1W2PQT3	NAD-dependent malic enzyme, mitochondrial	ME2	-0.75	7.30
Q9NZM1	Myoferlin	MYOF	-0.74	12.95
A0A024QZ30	Succinate dehydrogenase [ubiquinone] flavoprotein subunit, mitochondrial	SDHA	-0.74	15.39
A0A140VJX1	Acetyl-CoA acetyltransferase, mitochondrial	ACAT1	-0.74	15.09
A0A024RAS8	Heme-binding protein 1	HEBP1	-0.74	10.73
Q9BS40	Latexin	LXN	-0.74	3.90
Q9NUJ1	Mycophenolic acid acyl-glucuronide esterase, mitochondrial	ABHD10	-0.73	8.58
P29590	Protein PML	PML	-0.73	7.94
V9HWC9	Superoxide dismutase [Cu-Zn]	HEL-S-44	-0.73	10.11
Q6DKJ4	Nucleoredoxin	NXN	-0.73	3.32
D3DVF0	Junctional adhesion molecule A	F11R	-0.73	4.02
E9KL44	Trifunctional enzyme subunit alpha, mitochondrial;Long-chain enoyl-CoA hydratase;Long chain 3-hydroxyacyl-CoA dehydrogenase	HADHA	-0.73	15.80
Q9UNW9	RNA-binding protein Nova-2	NOVA2	-0.72	5.79
A0A0S2Z487	Junction plakoglobin	JUP	-0.72	3.81
Q13201	Multimerin-1;Platelet glycoprotein Ia*;155 kDa platelet multimerin	MMRN1	-0.72	4.71
A0A024R3J7	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit STT3A	hCG_2032701	-0.72	7.94
Q99584	Protein S100-A13	S100A13	-0.72	4.51
E5KRK5	NADH-ubiquinone oxidoreductase 75 kDa subunit, mitochondrial	NDUFS1	-0.71	15.06
B4DMF5	Glutamate dehydrogenase;Glutamate dehydrogenase 1, mitochondrial;Glutamate dehydrogenase 2, mitochondrial	GLUD1	-0.71	12.33
B2RA03	Keratin, type I cytoskeletal 18	KRT18	-0.71	9.05
Q9H845	Acyl-CoA dehydrogenase family member 9, mitochondrial	ACAD9	-0.71	3.95
Q9Y6C9	Mitochondrial carrier homolog 2	MTCH2	-0.71	6.69
A8K761	NADH dehydrogenase [ubiquinone] 1 beta subcomplex subunit 10	NDUFB10	-0.71	6.24
Q9HAV0	Guanine nucleotide-binding protein subunit beta-4	GNB4	-0.71	3.12
A0A024R745	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 5	NDUFA5	-0.71	4.45
D3DTC2	Lysophosphatidylcholine acyltransferase 1	AYTL2	-0.71	6.93

H3BPK3	Hydroxyacylglutathione hydrolase, mitochondrial	HAGH	-0.70	5.20
V9HW38	Cytosol aminopeptidase	HEL-S-106	-0.70	14.85
Q56VL3	OCIA domain-containing protein 2	OCIAD2	-0.70	5.69
P47985	Cytochrome b-c1 complex subunit Rieske, mitochondrial;Cytochrome b-c1 complex subunit 11	UQCRFS1	-0.70	4.14
A8K734	Hedgehog-interacting protein	HHIP	-0.70	5.80
Q53GX6	Nucleobindin-1	NUCB1	-0.70	10.35
Q567R0	Cytochrome b-c1 complex subunit 6, mitochondrial	UQCRH	-0.70	4.56
O15173	Membrane-associated progesterone receptor component 2	PGRMC2	-0.70	7.83
A0A0S2Z4V6	Wolframin	WFS1	-0.69	2.31
Q7L5N7	Lysophosphatidylcholine acyltransferase 2	LPCAT2	-0.69	3.09
A0A090N7T9	Secernin-1	SCRN1	-0.69	5.43
A0A024R2M6	3-ketoacyl-CoA thiolase, peroxisomal	ACAA1	-0.68	8.49
Q14573	Inositol 1,4,5-trisphosphate receptor type 3	ITPR3	-0.68	6.51
B3KUJ5	Histone deacetylase;Histone deacetylase 2	HDAC2	-0.68	4.98
A0A024R882	Erythrocyte band 7 integral membrane protein	STOM	-0.68	5.08
B4DL49	Cathepsin B;Cathepsin B light chain;Cathepsin B heavy chain	CTSB	-0.68	7.58
B2R761	Non-specific lipid-transfer protein	SCP2	-0.68	8.91
Q9NUF9	Nucleoside diphosphate kinase;Nucleoside diphosphate kinase 3	c371H6.2	-0.67	2.95
O95831	Apoptosis-inducing factor 1, mitochondrial	AIFM1	-0.67	6.45
A0A0C4DG44	Serine protease HTRA2, mitochondrial	HTRA2	-0.67	3.17
I3L1P8	Mitochondrial 2-oxoglutarate/malate carrier protein	SLC25A11	-0.67	10.93
E9PKG6	Nucleobindin-2;Nesfatin-1	NUCB2	-0.66	5.93
Q53FG6	Splicing factor 3B subunit 4	SF3B4	-0.66	4.72
Q9H7Z7	Prostaglandin E synthase 2;Prostaglandin E synthase 2 truncated form	PTGES2	-0.66	3.30
Q0QF37	Malate dehydrogenase;Malate dehydrogenase, mitochondrial	MDH2	-0.65	10.78
Q9H857	5-nucleotidase domain-containing protein 2	NT5DC2	-0.65	2.71
Q86WV6	Stimulator of interferon genes protein	TMEM173	-0.65	4.36
P48047	ATP synthase subunit O, mitochondrial	ATP5O	-0.65	14.55
Q8TBT6	Cytochrome c1, heme protein, mitochondrial	CYC1	-0.65	9.60
V9HW35	Peroxiredoxin-5, mitochondrial	HEL-S-55	-0.65	7.84
F5GXX5	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit DAD1	DAD1	-0.65	6.26
I6L9C8	Zinc finger protein 428	ZNF428	-0.64	3.59
A8K401	Prohibitin	PHB	-0.64	20.47
C9JG87	39S ribosomal protein L39, mitochondrial	MRPL39	-0.64	4.36
B4E0X1	Beta-2-microglobulin;Beta-2-microglobulin form pI 5.3	B2M	-0.64	2.50

Q53GR7	Calcium-binding mitochondrial carrier protein Aralar2	SLC25A13	-0.63	6.87
D3DSR9	Tumor necrosis factor receptor superfamily member 10B	TNFRSF10B	-0.63	2.29
Q8NCF7	Phosphate carrier protein, mitochondrial	SLC25A3	-0.63	7.61
B4E0H8	Integrin alpha-3;Integrin alpha-3 heavy chain;Integrin alpha-3 light chain	ITGA3	-0.63	7.20
J3QRT5	Intercellular adhesion molecule 2	ICAM2	-0.63	4.46
Q9UNM1	10 kDa heat shock protein, mitochondrial	EPFP1	-0.63	14.84
B4DWN1	Vesicular integral-membrane protein VIP36	LMAN2	-0.63	4.77
O15400	Syntaxin-7	STX7	-0.62	6.82
Q53GQ0	Very-long-chain 3-oxoacyl-CoA reductase	HSD17B12	-0.62	6.35
Q9HDC9	Adipocyte plasma membrane-associated protein	APMAP	-0.62	7.78
E5KS95	Elongation factor Ts, mitochondrial	TSFM	-0.62	2.42
Q0PNF2	Stabilin-1	STAB1	-0.62	7.12
B4DDH8	Lysophospholipid acyltransferase 7	MBOAT7	-0.62	5.98
Q9H2U2	Inorganic pyrophosphatase 2, mitochondrial	PPA2	-0.61	6.56
A0A024R3X4	60 kDa heat shock protein, mitochondrial	HSPD1	-0.61	17.54
P35270	Sepiapterin reductase	SPR	-0.61	4.04
P11177	Pyruvate dehydrogenase E1 component subunit beta, mitochondrial	PDHB	-0.61	8.30
Q9Y512	Sorting and assembly machinery component 50 homolog	SAMM50	-0.61	4.88
A0A024R1M8	Apolipoprotein L2	APOL2	-0.60	4.05
F8W031		CNPY2	-0.60	8.25
B2RAW0	Disabled homolog 2	DAB2	-0.60	4.25
Q9Y5J9	Mitochondrial import inner membrane translocase subunit Tim8 B	TIMM8B	-0.60	4.23

Appendix Table 5: List of statistically significantly differentially regulated proteins in normal ECs upon exposure to 3PO for 24hrs.

Protein ID	Protein names	Gene names	log2 (3PO/Cont rol)	- LOG(P -value)
Q5TDE9	Cancer-related nucleoside-triphosphatase	C1orf57;NTPCR	0.81	3.81
Q59E89	DnaJ homolog subfamily B member 4	DNAJB4	0.65	3.76
A0A158RFU3	Parathyrosin	PTMS	0.61	1.87
Q59GN2	Putative 60S ribosomal protein L39-like 5;60S ribosomal protein L39	RPL39P5;RPL39	0.57	2.85
A0A140VK41	Ribose-phosphate pyrophosphokinase 2	PRPS2	0.55	2.66
Q2TSD2	Nucleolysin TIAR	TIAL1	0.53	1.71
Q92522	Histone H1x	H1FX	0.52	3.70
Q8WUW1	Protein BRICK1	BRK1	0.50	1.78
Q2TAM5	Transcription factor p65	RELA	0.50	2.43

A8MZF9	Developmentally-regulated GTP-binding protein 2	DRG2	0.49	2.29
H3BUG4	Anamorsin	CIAPIN1	0.48	1.08
Q5QPM7	Proteasome inhibitor PI31 subunit	PSMF1	0.46	2.13
Q92621	Nuclear pore complex protein Nup205	NUP205	0.45	2.88
P78527	DNA-dependent protein kinase catalytic subunit	PRKDC	0.44	3.56
Q05D78	Double-strand break repair protein MRE11A	MRE11A	0.43	2.74
A0A024R964	Serine/threonine-protein kinase Nek7	NEK7	0.43	3.18
F5H5V4	26S proteasome non-ATPase regulatory subunit 9	PSMD9	0.42	2.50
B4E043	KH domain-containing, RNA-binding, signal transduction-associated protein 1;KH domain-containing, RNA-binding, signal transduction-associated protein 3;KH domain-containing, RNA-binding, signal transduction-associated protein 2	KHDRBS1;KHDRBS3;KHDRBS2	0.41	2.17
Q6FGB3	Pterin-4-alpha-carbinolamine dehydratase	PCBD;PCBD1	0.41	2.68
P08579	U2 small nuclear ribonucleoprotein B	SNRPB2	0.41	2.34
Q6FGM6	Peptidyl-prolyl cis-trans isomerase D	PPID	0.41	1.34
Q15645	Pachytene checkpoint protein 2 homolog	TRIP13	0.40	2.77
B2RAH5	Protein phosphatase 1 regulatory subunit;Protein phosphatase 1 regulatory subunit 12A	PPP1R12A	0.40	3.29
B4DXG8	Exosome complex component RRP45	EXOSC9	0.39	3.12
B7ZLC9	Gem-associated protein 5	GEMIN5	0.39	2.71
I3L3P7	40S ribosomal protein S15a	RPS15A;hCG_1994130	0.37	2.58
P62277	40S ribosomal protein S13	RPS13	0.37	4.35
O94906	Pre-mRNA-processing factor 6	PRPF6	0.37	2.62
B4DLP1	IST1 homolog	IST1	0.37	1.53
E9PD53	Structural maintenance of chromosomes protein;Structural maintenance of chromosomes protein 4	SMC4	0.37	2.98
Q9BZK7	F-box-like/WD repeat-containing protein TBL1XR1;F-box-like/WD repeat-containing protein TBL1X	TBL1XR1;TBL1X	0.36	2.26
B3KMP2	Anaphase-promoting complex subunit 7	ANAPC7	0.35	1.42
B3KY03	Condensin complex subunit 1	NCAPD2	0.35	1.26
V9HWI1	Flavin reductase (NADPH)	HEL-S-10;BLVRB	0.34	3.12
Q53G42	m7GpppX diphosphatase	DCPS	0.33	2.34
P62851	40S ribosomal protein S25	RPS25	0.33	1.78
P62906	60S ribosomal protein L10a;Ribosomal protein	RPL10A	0.33	2.91
B7ZLZ7	Structural maintenance of chromosomes protein;Structural maintenance of chromosomes protein 2	SMC2;SMC2L1	0.32	2.81
E5RHG8	Transcription elongation factor B polypeptide 1	TCEB1	0.32	2.98
Q63HR1	Plasminogen activator inhibitor 1 RNA-binding protein	DKFZp686P17171;SERBP1	0.32	2.18
A0A024R0H7	Methylosome protein 50	WDR77	0.32	4.09
Q5SQP8	C-terminal-binding protein 2	CTBP2	0.31	1.80

B2R928	Mitogen-activated protein kinase kinase kinase kinase;Mitogen-activated protein kinase kinase kinase 5	MAP4K5	0.31	2.09
A0A024QZ77	EF-hand domain-containing protein D2	EFHD2	0.31	1.81
B4DPV7	Cysteine--tRNA ligase, cytoplasmic	CARS	0.30	3.03
J3QLE5	Small nuclear ribonucleoprotein-associated protein;Small nuclear ribonucleoprotein-associated protein N;Small nuclear ribonucleoprotein-associated proteins B and B	SNRPN;SNRPB	0.30	2.87
A0A024R5S5	Eukaryotic translation initiation factor 3 subunit J	EIF3S1;EIF3J	0.30	1.81
Q51FJ8	26S proteasome non-ATPase regulatory subunit 5	PSMD5	0.29	3.42
Q9Y3Z3	Deoxynucleoside triphosphate triphosphohydrolase SAMHD1	SAMHD1	0.29	2.89
A0A023T787	RNA-binding protein 8A	RBM8;RBM8A	0.29	1.81
B7Z3M6	Phosphomannomutase;Phosphomannomutase 2	PMM2	0.29	1.99
Q1W6G4	Putative RNA-binding protein Luc7-like 1	LUC7L	0.29	3.29
O14776	Transcription elongation regulator 1	TCERG1	0.29	2.52
P63279	SUMO-conjugating enzyme UBC9	UBE2I	0.29	2.79
P17096	High mobility group protein HMG-I/HMG-Y	HMGA1	0.28	1.64
B4DNR3	Alpha/beta hydrolase domain-containing protein 14B	ABHD14B;HEL-S-299	0.28	2.89
Q59GU6	Sorting nexin-1	SNX1	0.28	2.81
Q53H22	Amidophosphoribosyltransferase	PPAT	0.28	1.59
F8VYH9	Cyclin-dependent kinase 4	CDK4	0.28	3.12
A0A024R4M0	40S ribosomal protein S9	RPS9	0.28	3.18
Q96EM0	Trans-3-hydroxy-L-proline dehydratase	L3HYPDH	0.27	2.71
A0A1U9X9D5	Valine--tRNA ligase	VAR5	0.27	2.37
Q13242	Serine/arginine-rich splicing factor 9	SRSF9	0.27	4.55
F8VPD4	CAD protein;Glutamine-dependent carbamoyl-phosphate synthase;Aspartate carbamoyltransferase;Dihydroorotase	CAD	0.27	5.05
Q9NYG1	Caldesmon	CALD1	0.27	3.59
Q32Q12	Nucleoside diphosphate kinase;Nucleoside diphosphate kinase B	NME1-NME2;NME2;NME1	0.27	2.49
E9PJ81	UBX domain-containing protein 1	UBXN1;LOC51035	0.27	1.56
B5LY71	Uridine 5-monophosphate synthase;Orotate phosphoribosyltransferase;Orotidine 5-phosphate decarboxylase;Orotidine 5-phosphate decarboxylase	UMPS	0.26	1.73
P49006	MARCKS-related protein	MARCKSL1	0.26	2.64
Q53F35	Acidic leucine-rich nuclear phosphoprotein 32 family member B	ANP32B	0.26	3.07
A0A024R3V0	SPATS2-like protein	DNAPTP6;SPATS2L	0.26	4.37
P19623	Spermidine synthase	SRM	0.26	3.09
B4DHG4	Exocyst complex component 5	EXOC5	0.25	1.81

A8K9K6	Nucleolar protein 56	NOP56	0.25	2.70
A0A024R652	C-1-tetrahydrofolate synthase, cytoplasmic;Methylenetetrahydrofolate dehydrogenase;Methenyltetrahydrofolate cyclohydrolase;Formyltetrahydrofolate synthetase;C-1-tetrahydrofolate synthase, cytoplasmic, N-terminally processed	MTHFD1	0.25	5.80
E9PID8	Cleavage stimulation factor subunit 2	CSTF2	0.25	2.12
V9HW92	PDZ and LIM domain protein 1	HEL-S-112;PDLIM1	0.25	3.52
A0A0A6YYJ8	Putative RNA-binding protein Luc7-like 2	LUC7L2	0.24	3.38
O15042	U2 snRNP-associated SURP motif-containing protein	U2SURP	0.24	2.15
A0A024R222	Phosphoserine aminotransferase	PSAT1	0.24	3.42
A0A140VK39	Protein phosphatase methylesterase 1	PPME1	0.24	2.39
Q9Y266	Nuclear migration protein nudC	NUDC;NPD011	0.24	2.55
B7Z1N6	Fructose-bisphosphate aldolase;Fructose-bisphosphate aldolase C	ALDOC	0.24	2.12
J3KP15	Serine/arginine-rich splicing factor 2	SRSF2;SFBS2	0.24	3.72
Q4ZG72	ATP-dependent RNA helicase DDX18	DDX18	0.24	2.64
P60866	40S ribosomal protein S20	RPS20	0.24	2.28
Q10567	AP-1 complex subunit beta-1	AP1B1	0.24	2.93
A0A0S2Z4G7	Nucleophosmin	NPM1	0.23	3.58
Q53FW2	Ribose-phosphate pyrophosphokinase 1	PRPS1	0.23	6.19
Q9NRN7	L-aminoadipate-semialdehyde dehydrogenase-phosphopantetheinyl transferase	AASDHPPT	0.23	2.16
A0A024R1N1	Myosin-9	MYH9	0.23	5.94
Q9H1E3	Nuclear ubiquitous casein and cyclin-dependent kinase substrate 1	NUCKS1;NUCKS	0.23	2.21
Q12792	Twinfilin-1	TWF1	0.23	4.44
A0A024RDL8	Argininosuccinate lyase	ASL	0.23	2.27
P12268	Inosine-5-monophosphate dehydrogenase 2	IMPDH2	0.23	4.82
J3QRS9	BUB3-interacting and GLEBS motif-containing protein ZNF207	ZNF207;DKFZp761N202	0.23	3.63
P50991	T-complex protein 1 subunit delta	CCT4	0.23	6.17
B4DDM5	Peroxisomal multifunctional enzyme type 2;(3R)-hydroxyacyl-CoA dehydrogenase;Enoyl-CoA hydratase 2	HSD17B4	0.23	2.96
B3KUJ5	Histone deacetylase;Histone deacetylase 2	HDAC2	0.22	2.31
H7BYY1	Tropomyosin 1 (Alpha), isoform CRA_m	TPM1	0.22	2.60
A0A140VJE3	Methionine aminopeptidase 2;Methionine aminopeptidase	METAP2	0.22	2.75
Q15056	Eukaryotic translation initiation factor 4H	EIF4H;WBSCR1	0.22	2.07
P38159	RNA-binding motif protein, X chromosome;RNA-binding motif protein, X chromosome, N-terminally processed;RNA binding motif protein, X-linked-like-1	RBMX;RBMXL1	0.22	5.28
Q8TBK5	60S ribosomal protein L6	RPL6	0.22	5.59

Q6FHM6	NHP2-like protein 1;NHP2-like protein 1, N-terminally processed	NHP2L1	0.22	2.43
F1T0I1	Protein transport protein Sec16A	SEC16A	0.22	2.71
Q5JSH3	WD repeat-containing protein 44	WDR44;DKFZp761M142	0.22	2.24
A0A024R8W0	Eukaryotic initiation factor 4A-III;Eukaryotic initiation factor 4A-III, N-terminally processed	DDX48;EIF4A3	0.21	3.30
A8KAQ5	U1 small nuclear ribonucleoprotein 70 kDa	SNRNP70;SNRNP70	0.21	2.85
A0A024QZC0	Ataxin-2-like protein	ATXN2L	0.21	4.05
Q8IX12	Cell division cycle and apoptosis regulator protein 1	CCAR1	0.21	2.38
Q59ET3	T-complex protein 1 subunit zeta	CCT6A	0.21	3.25
D3DWL9	Cleavage and polyadenylation specificity factor subunit 1	CPSF1	0.20	3.01
B2R6U8	Cleavage and polyadenylation specificity factor subunit 5	NUDT21	0.20	4.61
P37108	Signal recognition particle 14 kDa protein	SRP14	0.20	2.59
Q9NR30	Nucleolar RNA helicase 2	DDX21	0.20	3.25
A0A0S2Z4I9	Vasodilator-stimulated phosphoprotein	VASP	0.20	2.91
P23526	Adenosylhomocysteinase	AHCY	0.20	3.18
B4E266	Leucine--tRNA ligase, cytoplasmic	LARS	0.19	4.19
B2RBA6	DNA helicase;DNA replication licensing factor MCM7	MCM7	0.19	2.91
Q96BS4	rRNA 2-O-methyltransferase fibrillar	FBL	0.19	2.90
P28074	Proteasome subunit beta type-5	PSMB5	0.19	2.97
Q13151	Heterogeneous nuclear ribonucleoprotein A0	HNRNPA0	0.19	4.73
A0A087WY71	AP-2 complex subunit mu	AP2M1	0.19	3.16
B5MDF5	GTP-binding nuclear protein Ran	RAN	0.18	4.36
Q6NXR8	40S ribosomal protein S3a	RPS3A	0.18	3.38
P62424	60S ribosomal protein L7a	RPL7A;RP-L7a	0.18	4.04
J3KTA4	Probable ATP-dependent RNA helicase DDX5	DDX5;DKFZp686J01190	0.17	4.31
A0A140VK49	Staphylococcal nuclease domain-containing protein 1	SND1	0.17	4.82
Q14566	DNA replication licensing factor MCM6	MCM6	0.16	5.23
Q5JR08	Rho-related GTP-binding protein RhoC;Transforming protein RhoA	RHOC;hCG_2043376;RHOA	-0.21	2.71
V9HW43	Heat shock protein beta-1	HEL-S-102;HSPB1	-0.22	4.32
B7Z766	Hypoxia up-regulated protein 1	HYOU1	-0.24	3.51
O75937	DnaJ homolog subfamily C member 8	DNAJC8	-0.24	1.95
Q6I9U3	Cation-dependent mannose-6-phosphate receptor	M6PR	-0.24	1.95
Q14376	UDP-glucose 4-epimerase	GALE	-0.24	2.02
B4DS43	Acetyltransferase component of pyruvate dehydrogenase complex;Dihydrolipoyllysine-residue acetyltransferase component of pyruvate dehydrogenase complex, mitochondrial	DLAT	-0.25	2.26
V9HW35	Peroxisoredoxin-5, mitochondrial	HEL-S-55;PRDX5	-0.25	2.01

Q5VSQ6	Prolyl 4-hydroxylase subunit alpha-1	P4HA1	-0.26	2.62
V9HWH9	Protein S100;Protein S100-A11;Protein S100-A11, N-terminally processed	HEL-S-43;S100A11	-0.26	3.90
G3XAI2	Laminin subunit beta-1	LAMB1	-0.26	3.40
Q6FHM2	Guanine nucleotide-binding protein G(I)/G(S)/G(T) subunit beta-2	GNB2	-0.26	3.29
Q5T6L4	Argininosuccinate synthase	ASS;ASS1	-0.26	1.72
Q9H3N1	Thioredoxin-related transmembrane protein 1	TMX1	-0.26	1.63
Q9BY42	Protein RTF2 homolog	RTFDC1	-0.27	2.36
C9JTN7	Nucleolysin TIA-1 isoform p40	TIA1	-0.27	2.65
Q5T8U5	Surfeit locus protein 4	SURF4	-0.27	2.15
A0A0A7E7X3	Endoplasmic reticulum aminopeptidase 1	ERAP1;ARTS-1	-0.27	2.40
H3BS70	Enoyl-CoA delta isomerase 1, mitochondrial	ECI1;DCI	-0.27	2.61
A8K6Q8	Transferrin receptor protein 1;Transferrin receptor protein 1, serum form	TFRC	-0.28	4.26
A8K5I0	Heat shock 70 kDa protein 1B;Heat shock 70 kDa protein 1A	HEL-S-103;HSPA1B;HSPA1A	-0.28	5.79
A0A158RFU6	Ras-related protein Rab-7a	RAB7A	-0.28	3.83
Q6FHJ5	Secretory carrier-associated membrane protein 3	SCAMP3	-0.29	3.67
Q15843	NEDD8	NEDD8;NEDD8-MDP1	-0.29	1.55
Q6NTG0	Na(+)/H(+) exchange regulatory cofactor NHERF2	SLC9A3R2	-0.30	1.47
J3KMY5	Epididymal secretory protein E1	NPC2	-0.30	2.44
Q8IXB1	DnaJ homolog subfamily C member 10	DNAJC10	-0.30	2.20
Q6PKB3	28S ribosomal protein S27, mitochondrial	MRPS27	-0.30	1.53
A0A0R4J2G3	Neutral cholesterol ester hydrolase 1	NCEH1	-0.30	1.42
B2RCZ7	Persulfide dioxygenase ETHE1, mitochondrial	ETHE1	-0.30	2.16
A0A140VJX1	Acetyl-CoA acetyltransferase, mitochondrial	ACAT1	-0.30	1.82
A0A024RBX6	Pirin	PIR	-0.30	2.22
E9PDF2	2-oxoglutarate dehydrogenase, mitochondrial	OGDH	-0.30	1.63
P31947	14-3-3 protein sigma	SFN	-0.31	2.15
J3QQR8	Intercellular adhesion molecule 2	ICAM2	-0.31	1.80
D6RDG7	Sideroflexin-1	SFXN1	-0.31	1.87
A0A024R325	Succinyl-CoA ligase subunit beta;Succinyl-CoA ligase [GDP-forming] subunit beta, mitochondrial	SUCLG2	-0.31	1.66
A0A087WTB8	Ubiquitin carboxyl-terminal hydrolase;Ubiquitin carboxyl-terminal hydrolase isozyme L3	UCHL3	-0.31	1.76
A0A087WUN7	SRA stem-loop-interacting RNA-binding protein, mitochondrial	SLIRP	-0.31	1.35
D6RAN4	60S ribosomal protein L9	RPL9	-0.31	1.46
P26022	Pentraxin-related protein PTX3	PTX3	-0.31	1.52
Q2TNI1	Caveolin;Caveolin-1	CAV1	-0.32	4.08
B7Z4V2	Stress-70 protein, mitochondrial	HEL-S-124m;HSPA9	-0.32	1.39

B2R6K4	Guanine nucleotide-binding protein G(I)/G(S)/G(T) subunit beta-1	GNB1	-0.32	5.38
B7Z7Z3	Nitric oxide synthase;Nitric oxide synthase, endothelial	NOS3	-0.32	2.77
A8K3M3	Tyrosine-protein phosphatase non-receptor type;Tyrosine-protein phosphatase non-receptor type 1	PTPN1	-0.32	1.89
P49411	Elongation factor Tu, mitochondrial	TUFM	-0.32	1.44
B2RDJ6	Probable cytosolic iron-sulfur protein assembly protein CIAO1	CIAO1	-0.32	1.68
A0A087WVM4	Monofunctional C1-tetrahydrofolate synthase, mitochondrial	MTHFD1L	-0.33	1.39
Q69YG1	Myotrophin	DKFZp761E1322; MTPN	-0.33	1.70
A0A024QYX3	RNA-binding protein 3	RBM3	-0.34	1.31
A0A024R745	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 5	NDUFA5	-0.34	2.21
Q567R0	Cytochrome b-c1 complex subunit 6, mitochondrial	UQCRH	-0.34	1.25
V9HW26	ATP synthase subunit alpha;ATP synthase subunit alpha, mitochondrial	HEL-S-123m;ATP5A1	-0.34	1.40
B4DKB2	Endothelin-converting enzyme 1	ECE1	-0.35	2.27
Q6FGE5	Protein S100-A10	S100A10	-0.35	1.62
Q6NZ59	ATP synthase-coupling factor 6, mitochondrial	ATP5J	-0.35	1.32
B2R5P6	Thioredoxin reductase 1, cytoplasmic	TXNRD1	-0.35	5.72
A0A140VJQ4	Ornithine aminotransferase, mitochondrial;Ornithine aminotransferase, hepatic form;Ornithine aminotransferase, renal form	OAT	-0.35	2.04
B7Z2Z1	Scaffold attachment factor B1	SAFB	-0.35	2.28
P11177	Pyruvate dehydrogenase E1 component subunit beta, mitochondrial	PDHB	-0.35	1.31
Q9NZM1	Myoferlin	MYOF	-0.35	6.35
P04899	Guanine nucleotide-binding protein G(i) subunit alpha-2	GNAI2;WUGSC:H_LUCA16.1	-0.36	4.80
E5KNY5	Leucine-rich PPR motif-containing protein, mitochondrial	LRPPRC	-0.37	1.80
Q53FM7	NADH dehydrogenase [ubiquinone] iron-sulfur protein 3, mitochondrial	NDUFS3;DKFZp586K0821	-0.37	2.90
Q9BRX8	Redox-regulatory protein FAM213A	FAM213A	-0.37	2.09
A0A024RB87	Ras-related protein Rap-1b;Ras-related protein Rap-1A;Ras-related protein Rap-1b-like protein	RAP1B;RAP1A	-0.37	1.41
B4DZ08	Aconitate hydratase, mitochondrial	ACO2;ACON	-0.37	2.78
P80217	Interferon-induced 35 kDa protein	IFI35	-0.37	1.18
Q5T9B9	Endoglin	ENG	-0.37	4.75
Q96AG4	Leucine-rich repeat-containing protein 59	LRRC59	-0.38	1.15
B4DMF5	Glutamate dehydrogenase;Glutamate dehydrogenase 1, mitochondrial;Glutamate dehydrogenase 2, mitochondrial	GLUD1;GLUD2	-0.38	1.99
Q6IB91	Phosphoenolpyruvate carboxykinase [GTP], mitochondrial	PCK2	-0.39	1.88
Q460N5	Poly [ADP-ribose] polymerase 14	PARP14	-0.39	1.58

B4DJ12	Granulins;Acrogranin;Paragranulin;Granulin-1;Granulin-2;Granulin-3;Granulin-4;Granulin-5;Granulin-6;Granulin-7	GRN	-0.39	3.67
G3V0I5	NADH dehydrogenase [ubiquinone] flavoprotein 1, mitochondrial	NDUFV1	-0.39	2.47
B3KPA6	Very long-chain specific acyl-CoA dehydrogenase, mitochondrial	ACADVL	-0.39	2.94
B3KM58	cDNA FLJ10358 fis, clone NT2RM2001238, highly similar to Glutaminase kidney isoform, mitochondrial	DKFZp686O15119	-0.39	1.49
B4E2V5	Erythrocyte band 7 integral membrane protein	STOM	-0.40	2.39
A0A024R3X4	60 kDa heat shock protein, mitochondrial	HSPD1	-0.40	2.03
B7Z792	NADH dehydrogenase [ubiquinone] iron-sulfur protein 2, mitochondrial	NDUFS2	-0.40	1.55
A0A0G2JP90	Nodal modulator 1;Nodal modulator 3;Nodal modulator 2	NOMO1;NOMO3;NOMO2	-0.40	2.11
A0A024R9D7	2,4-dienoyl-CoA reductase, mitochondrial	DECR1;DECR	-0.40	3.09
Q30118	HLA class II histocompatibility antigen, DR alpha chain;HLA class II histocompatibility antigen, DQ alpha 2 chain	HLA-DRA;HLA-DRA1;HLA-DQA1;HLA-DQA1/DRA;HLA-DQA2	-0.41	1.25
E9KL44	Trifunctional enzyme subunit alpha, mitochondrial;Long-chain enoyl-CoA hydratase;Long chain 3-hydroxyacyl-CoA dehydrogenase	HADHA	-0.41	1.95
P55084	Trifunctional enzyme subunit beta, mitochondrial;3-ketoacyl-CoA thiolase	HADHB	-0.41	1.37
Q9H7V3	Non-specific protein-tyrosine kinase;Proto-oncogene tyrosine-protein kinase Src;Tyrosine-protein kinase Fyn;Tyrosine-protein kinase Yes;Tyrosine-protein kinase Lck	YES1;SRC;FYN;LCK	-0.42	2.27
M4RCG9	HLA class I histocompatibility antigen, A-30 alpha chain;HLA class I histocompatibility antigen, A-24 alpha chain;HLA class I histocompatibility antigen, A-69 alpha chain;HLA class I histocompatibility antigen, A-2 alpha chain;HLA class I histocompatibility antigen, A-68 alpha chain;HLA class I histocompatibility antigen, A-23 alpha chain;HLA class I histocompatibility antigen, A-11 alpha chain;HLA class I histocompatibility antigen, A-3 alpha chain;HLA class I histocompatibility antigen, A-36 alpha chain;HLA class I histocompatibility antigen, A-1 alpha chain;HLA class I histocompatibility antigen, Cw-5 alpha chain;HLA class I histocompatibility antigen, Cw-8 alpha chain	HLA-A;HLA;HLA-B;HLA-A24AK;MHC class I HLA-A;HLA-A*0226;HLA-A*02;HLA-C;HLA-Cw;HLA A	-0.42	1.72
Q05DA4	Prolyl 4-hydroxylase subunit alpha-2	P4HA2;DKFZp686M0919	-0.43	2.43
Q13011	Delta(3,5)-Delta(2,4)-dienoyl-CoA isomerase, mitochondrial	ECH1	-0.43	1.76
F5GXJ9	CD166 antigen	ALCAM	-0.43	4.42

Q6IBS5	Dihydrolipoyllysine-residue succinyltransferase component of 2-oxoglutarate dehydrogenase complex, mitochondrial	DLST	-0.43	1.19
E9KL42	Acyl-coenzyme A thioesterase 1;Acyl-coenzyme A thioesterase 2, mitochondrial	ACOT1;ACOT2	-0.43	2.50
A4D1N4	MICOS complex subunit MIC19	CHCHD3	-0.43	2.67
A0A024R6H1	Serine palmitoyltransferase 2	SPTLC2	-0.43	2.01
Q9UJZ1	Stomatin-like protein 2, mitochondrial	STOML2	-0.44	2.80
C9JNK6	Metaxin-2	MTX2	-0.44	2.49
V9HW31	ATP synthase subunit beta;ATP synthase subunit beta, mitochondrial	HEL-S-271;ATP5B	-0.44	2.08
P05556	Integrin beta-1	ITGB1	-0.45	5.31
B4E0H8	Integrin alpha-3;Integrin alpha-3 heavy chain;Integrin alpha-3 light chain	ITGA3	-0.45	3.01
A0A024RAE4	Cell division control protein 42 homolog	CDC42;hCG_39634	-0.45	5.19
A0A1W2PPX5	Lysosome membrane protein 2	SCARB2	-0.45	3.25
A0A024RC61	Aminopeptidase N	ANPEP	-0.45	4.59
E9PNW4	CD59 glycoprotein	CD59	-0.46	4.09
Q9Y305	Acyl-coenzyme A thioesterase 9, mitochondrial	ACOT9	-0.47	3.95
P54709	Sodium/potassium-transporting ATPase subunit beta-3	ATP1B3	-0.50	2.44
Q9BYN0	Sulfiredoxin-1	SRXN1	-0.51	2.31
A0A0A0MS41	Sideroflexin;Sideroflexin-3	SFXN3	-0.51	2.99
B4DJB4	Isocitrate dehydrogenase [NAD] subunit, mitochondrial;Isocitrate dehydrogenase [NAD] subunit alpha, mitochondrial	IDH3A	-0.53	2.58
H0YD13	CD44 antigen	CD44	-0.53	4.27
Q96N83	Podocalyxin	PODXL	-0.54	4.66
P05023	Sodium/potassium-transporting ATPase subunit alpha-1	ATP1A1	-0.54	4.53
Q58FF8	Putative heat shock protein HSP 90-beta 2	HSP90AB2P	-0.54	1.05
B3KRJ9	Splicing regulatory glutamine/lysine-rich protein 1	SREK1;DKFZp667P103	-0.54	1.57
B3KRY3	Lysosome-associated membrane glycoprotein 1	LAMP1	-0.55	3.32
A0A024R6S1	DnaJ homolog subfamily A member 2	DNAJA2	-0.55	2.29
B3KXZ9	Cell surface glycoprotein MUC18	MCAM	-0.56	2.00
Q2TSD3	Protein kinase C;Protein kinase C alpha type	PRKCA	-0.56	2.26
H0YLU7	Electron transfer flavoprotein subunit alpha, mitochondrial	ETF A	-0.58	1.69
E9PKH6	NADH dehydrogenase [ubiquinone] iron-sulfur protein 8, mitochondrial	NDUFS8	-0.58	1.20
A0A087WUV8	Basigin	BSG;hEMMPRIN	-0.58	1.40
K7EJE8	Lon protease homolog, mitochondrial;Lon protease homolog	LONP1	-0.59	3.12
Q9UM02	Prolyl endopeptidase	PREP	-0.60	2.23
B4DPP0	Tetraspanin;CD9 antigen	CD9;BTCC-1	-0.61	5.58
Q96HX3	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit 1	RPN1	-0.64	3.70

Q9HDC9	Adipocyte plasma membrane-associated protein	APMAP	-0.65	1.07
D9ZGF5	Fibroblast growth factor;Fibroblast growth factor 2	FGF2	-0.65	0.95
B4DJ81	NADH-ubiquinone oxidoreductase 75 kDa subunit, mitochondrial	NDUFS1	-0.65	2.86
Q8TCS8	Polyribonucleotide nucleotidyltransferase 1, mitochondrial	PNPT1	-0.66	1.89
Q53SW4	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 10, mitochondrial	NDUFA10	-0.66	3.11
A8K132	Glutaminase kidney isoform, mitochondrial	GLS	-0.70	3.20
A0A024R7H5	Bone marrow stromal antigen 2	BST2	-0.70	1.00
Q9H8H0	Nucleolar protein 11	NOL11	-0.73	1.15
A0A024R4X0	NADH-cytochrome b5 reductase;NADH-cytochrome b5 reductase 3;NADH-cytochrome b5 reductase 3 membrane-bound form;NADH-cytochrome b5 reductase 3 soluble form	CYB5R3	-0.74	1.10
Q9Y277	Voltage-dependent anion-selective channel protein 3	VDAC3	-0.76	3.24
P10606	Cytochrome c oxidase subunit 5B, mitochondrial	COX5B	-0.80	2.20
Q9UNN8	Endothelial protein C receptor	PROCR	-0.81	3.86
H3BRG4	Cytochrome b-c1 complex subunit 2, mitochondrial	UQCRC2	-0.81	2.50
H3BNX8	Cytochrome c oxidase subunit 5A, mitochondrial	COX5A	-0.82	1.84
Q6NZX3	5-nucleotidase	NT5E	-0.82	4.10
Q53FB6	Aldehyde dehydrogenase, mitochondrial	ALDH2	-0.84	3.41
B4E2Z3	4F2 cell-surface antigen heavy chain	SLC3A2	-0.84	4.24
A0A024RBH2	Cytoskeleton-associated protein 4	CKAP4	-0.84	4.07
P47985	Cytochrome b-c1 complex subunit Rieske, mitochondrial;Cytochrome b-c1 complex subunit 11	UQCRC1	-0.88	3.88
P31930	Cytochrome b-c1 complex subunit 1, mitochondrial	UQCRC1	-0.89	3.58
E9PN17	ATP synthase subunit g, mitochondrial	ATP5L	-0.91	1.27
A0A024QZT0	Voltage-dependent anion-selective channel protein 2	VDAC2	-0.97	3.92
B2RE46	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit 2	RPN2	-0.98	2.85
P05141	ADP/ATP translocase 2;ADP/ATP translocase 2, N-terminally processed	SLC25A5	-1.01	6.16
B2R4R0	Histone H4	HIST1H4H;HIST1H4A	-1.06	2.09
B4DND4	Gamma-glutamyltransferase 5;Gamma-glutamyltransferase 5 heavy chain;Gamma-glutamyltransferase 5 light chain	GGT5	-1.08	2.80
P68431	Histone H3.1	HIST1H3A	-1.08	2.95
F8VVM2	Phosphate carrier protein, mitochondrial	SLC25A3	-1.09	2.94
A0A1L1UHR1	Voltage-dependent anion-selective channel protein 1	VDAC1	-1.14	3.25

Q6I9V5	ADP/ATP translocase 3;ADP/ATP translocase 3, N-terminally processed;ADP/ATP translocase 1	SLC25A6;SLC25A4	-1.14	4.16
Q5TEC6	Histone H3	HIST2H3PS2	-1.16	2.72
Q9UHS8	Sulfide:quinone oxidoreductase, mitochondrial	hCG_2001986;SQRDL	-1.23	2.00
P27824	Calnexin	CANX	-1.26	4.62
A0A0C4DGS1	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase 48 kDa subunit	DDOST	-1.30	4.71
Q16891	MICOS complex subunit MIC60	IMMT	-1.72	3.03
Q8TBT6	Cytochrome c1, heme protein, mitochondrial	CYC1	-1.72	4.42

Appendix Table 6: List of statistically significantly differentially regulated proteins in TNF α induced inflamed ECs in the absence of 3PO.

Protein ID	Protein names	Gene symbol	log ₂ (TNF α /Control)	-LOG ₁₀ (P-value)
Q16719	Kynureninase	KYNU	3.21	10.50
Q7Z7M4	Superoxide dismutase;Superoxide dismutase [Mn], mitochondrial	SOD2	2.69	9.22
M4RCG9	HLA class I histocompatibility antigen, A-30 alpha chain;HLA class I histocompatibility antigen, A-24 alpha chain;HLA class I histocompatibility antigen, A-69 alpha chain;HLA class I histocompatibility antigen, A-2 alpha chain;HLA class I histocompatibility antigen, A-68 alpha chain;HLA class I histocompatibility antigen, A-23 alpha chain;HLA class I histocompatibility antigen, A-11 alpha chain;HLA class I histocompatibility antigen, A-3 alpha chain;HLA class I histocompatibility antigen, A-36 alpha chain;HLA class I histocompatibility antigen, A-1 alpha chain;HLA class I histocompatibility antigen, Cw-5 alpha chain;HLA class I histocompatibility antigen, Cw-8 alpha chain	HLA-A;HLA;HLA-B;HLA-A24AK;MHC class I HLA-A;HLA-A*0226;HLA-A*02;HLA-C;HLA-Cw;HLA A	1.56	5.02
P09914	Interferon-induced protein with tetratricopeptide repeats 1	IFIT1	1.50	5.71
K7EM56	40S ribosomal protein S15	RPS15	1.44	1.84
Q460N5	Poly [ADP-ribose] polymerase 14	PARP14	1.26	5.43
Q5D1D5	Guanylate binding protein 1	N/A	1.14	5.43
Q96AZ6	Interferon-stimulated gene 20 kDa protein	ISG20	1.08	5.60
Q8TDB6	E3 ubiquitin-protein ligase DTX3L	DTX3L	0.94	5.33
A0A024QYT5	Plasminogen activator inhibitor 1	SERPINE1	0.91	5.49
P26022	Pentraxin-related protein PTX3	PTX3	0.88	6.24
Q5ISL3	Catenin beta-1	CTNNB1	0.87	5.06

B4E0X1	Beta-2-microglobulin;Beta-2-microglobulin;Beta-2-microglobulin form pI 5.3	B2M	0.80	2.23
Q86SZ7	Proteasome activator complex subunit 2	PSME2	0.77	7.74
P19474	E3 ubiquitin-protein ligase TRIM21	TRIM21	0.73	5.25
B2R6L0	Tubulin beta-2A chain	TUBB2A;TUBB2B; DKFZp566F223	0.71	5.16
P80723	Brain acid soluble protein 1	BASP1	0.71	4.09
A2ACR1	Proteasome subunit beta type;Proteasome subunit beta type-9	PSMB9	0.69	5.11
A0A096LNZ9	Ubiquitin-like protein ISG15	ISG15	0.66	3.78
Q9H444	Charged multivesicular body protein 4b	CHMP4B	0.66	6.69
Q05DA4	Prolyl 4-hydroxylase subunit alpha-2	P4HA2;DKFZp686 M0919	0.65	6.02
P80217	Interferon-induced 35 kDa protein	IFI35	0.64	5.22
O14933	Ubiquitin/ISG15-conjugating enzyme E2 L6	UBE2L6	0.62	3.18
A0A024R7A8	Aldose reductase	AKR1B1	0.58	5.90
Q59F45	Mothers against decapentaplegic homolog;Mothers against decapentaplegic homolog 3;Mothers against decapentaplegic homolog 2;Mothers against decapentaplegic homolog 9	SMAD3;SMAD2;S MAD9	0.58	3.19
P20591	Interferon-induced GTP-binding protein Mx1;Interferon-induced GTP-binding protein Mx1, N-terminally processed	MX1	0.57	6.33
Q13287	N-myc-interactor	NMI	0.56	3.43
A0A024R7H5	Bone marrow stromal antigen 2	BST2	0.55	2.81
A8ASI8	BH3-interacting domain death agonist;BH3-interacting domain death agonist p15;BH3-interacting domain death agonist p13;BH3-interacting domain death agonist p11	BID	0.54	3.83
P07305	Histone H1.0;Histone H1.0, N-terminally processed	H1F0	0.48	3.39
A8KA84	2-5-oligoadenylate synthase 3	OAS3	0.48	2.11
V9HWB7	Aconitate hydratase;Cytoplasmic aconitate hydratase	HEL60;ACO1;IRP1	0.47	7.56
A0A0K0K1L8	Proteasome activator complex subunit 1	PSME1	0.46	5.09
E9PK52	Band 4.1-like protein 2	EPB41L2	0.46	2.38
A0A024R972	Laminin subunit gamma-1	LAMC1	0.46	5.87
Q9UKY7	Protein CDV3 homolog	CDV3	0.45	5.89
C9JBL0	Nuclear autoantigen Sp-100	SP100	0.45	5.89
P49407	Beta-arrestin-1	ARRB1	0.45	4.29
C9J0H3	Phospholipid scramblase 1	PLSCR1	0.44	1.92
P17900	Ganglioside GM2 activator;Ganglioside GM2 activator isoform short	GM2A	0.43	2.17
P29966	Myristoylated alanine-rich C-kinase substrate	MARCKS	0.43	6.18
A0A024R542	182 kDa tankyrase-1-binding protein	TNKS1BP1	0.43	5.22
B3KMR5	RRP12-like protein	RRP12	0.43	3.77
Q92522	Histone H1x	H1FX	0.43	3.75

P42224	Signal transducer and activator of transcription 1-alpha/beta;Signal transducer and activator of transcription	STAT1	0.42	4.83
B2R6X6	Peptidyl-prolyl cis-trans isomerase;Peptidyl-prolyl cis-trans isomerase F, mitochondrial	PPIF	0.41	2.04
A8K5I0	Heat shock 70 kDa protein 1B;Heat shock 70 kDa protein 1A	HEL-S-103;HSPA1B;HSPA1A	0.41	4.31
P16401	Histone H1.5	HIST1H1B	0.40	2.60
A0A024R442	Aspartyl aminopeptidase	DNPEP	0.40	4.16
A0A087X0V5	2-5-oligoadenylate synthase 2	OAS2	0.38	2.31
B2R5P6	Thioredoxin reductase 1, cytoplasmic	TXNRD1	0.38	4.14
D3DUZ3	Gamma-interferon-inducible protein 16	IFI16	0.38	3.18
Q53GM9	Fos-related antigen 1	FOSL1	0.38	3.36
Q59E90	Alpha-mannosidase;Lysosomal alpha-mannosidase;Lysosomal alpha-mannosidase A peptide;Lysosomal alpha-mannosidase B peptide;Lysosomal alpha-mannosidase C peptide;Lysosomal alpha-mannosidase D peptide;Lysosomal alpha-mannosidase E peptide	MAN2B1	0.37	3.63
A0A140VJU5	Endophilin-B1	SH3GLB1	0.37	2.79
P16403	Histone H1.2	HIST1H1C	0.36	3.05
P49662	Caspase-4;Caspase-4 subunit 1;Caspase-4 subunit 2;Caspase;Caspase-5;Caspase-5 subunit p20;Caspase-5 subunit p10	CASP4;CASP5	0.36	2.49
A0A024R4X1	Protein kinase C and casein kinase substrate in neurons protein 2	PACSN2	0.36	3.31
Q58FF8	Putative heat shock protein HSP 90-beta 2	HSP90AB2P	0.34	3.32
B2R5U3	EH domain-containing protein 1	EHD1	0.34	5.77
B4DL66	Ubiquitin-conjugating enzyme E2 Z	UBE2Z	0.34	2.44
A0A0A7E7X3	Endoplasmic reticulum aminopeptidase 1	ERAP1;ARTS-1	0.33	4.56
B3KYB7	Phosphatidylinositol transfer protein beta isoform	PITPNB	0.33	2.95
B2RDE8	Hepatoma-derived growth factor	HDGF	0.33	3.84
Q6IPH7	RPL14 protein	RPL14	0.31	2.54
Q14258	E3 ubiquitin/ISG15 ligase TRIM25	TRIM25	0.31	4.11
B4DJI2	Granulins;Acrogranin;Paragranulin;Granulin-1;Granulin-2;Granulin-3;Granulin-4;Granulin-5;Granulin-6;Granulin-7	GRN	0.31	4.50
Q14019	Coactosin-like protein	COTL1	0.30	5.24
A0A140VK56	Transaldolase	TALDO1	0.29	2.95
P46087	Probable 28S rRNA (cytosine(4447)-C(5))-methyltransferase	NOP2	0.29	3.59
P08243	Asparagine synthetase [glutamine-hydrolyzing]	ASNS	0.27	4.81
F5H6E2	Unconventional myosin-Ic	MYO1C	0.26	5.23
P62906	60S ribosomal protein L10a;Ribosomal protein	RPL10A	0.25	4.14
A4QPB0	Ras GTPase-activating-like protein IQGAP1	IQGAP1;hCG_1991735	0.24	6.61
V9HWC0	Moesin	HEL70;MSN	0.24	7.05

Q86U42	Polyadenylate-binding protein 2	PABPN1	-0.22	5.36
Q13813	Spectrin alpha chain, non-erythrocytic 1	SPTAN1	-0.24	4.20
A0A1C7CYX9	Dihydropyrimidinase-related protein 2	DPYSL2	-0.25	3.98
Q6IAW5	Calumenin	CALU	-0.25	4.29
B1AJY7	26S proteasome non-ATPase regulatory subunit 10	PSMD10	-0.27	3.51
V9HWB9	L-lactate dehydrogenase;L-lactate dehydrogenase A chain	HEL-S-133P;LDHA	-0.27	4.33
V9HWG0	Chromobox protein homolog 5	HEL25;CBX5	-0.28	3.57
P11216	Glycogen phosphorylase, brain form;Alpha-1,4 glucan phosphorylase	PYGB	-0.29	4.20
A0A024R6H1	Serine palmitoyltransferase 2	SPTLC2	-0.30	3.68
Q68DQ4	cAMP-dependent protein kinase type I-alpha regulatory subunit;cAMP-dependent protein kinase type I-alpha regulatory subunit, N-terminally processed	DKFZp779L0468;P RKAR1A	-0.31	3.79
Q14315	Filamin-C	FLNC	-0.31	3.98
V9HW83	Retinal dehydrogenase 1	HEL-S-53e;HEL- 9;ALDH1A1	-0.32	4.08
A0A024R4U3	Tubulin--tyrosine ligase-like protein 12	TTLL12	-0.32	2.58
O15231	Zinc finger protein 185	ZNF185;DKFZp686 B22130	-0.33	4.34
Q5TZZ9	Annexin;Annexin A1	ANXA1	-0.33	6.63
A0A140VK39	Protein phosphatase methylesterase 1	PPME1	-0.34	3.42
Q6FHL9	Astrocytic phosphoprotein PEA-15	PEA15	-0.34	2.77
P12429	Annexin A3;Annexin	ANXA3	-0.35	4.11
D6RG39	OCIA domain-containing protein 1	OCIAD1	-0.36	2.83
Q5TB52	Bifunctional 3-phosphoadenosine 5-phosphosulfate synthase 2;Sulfate adenylyltransferase;Adenylyl-sulfate kinase	PAPSS2 DKFZp686M1669;	-0.38	5.84
Q68E10	Hexokinase;Hexokinase-2	HK2	-0.38	4.02
Q96J85	La-related protein 4	LARP4	-0.40	2.48
A0A024QZN8	Probable E3 ubiquitin-protein ligase HERC4	HERC4	-0.40	2.55
A9UK01	Rho GTPase-activating protein 18	ARHGAP18	-0.41	6.00
H7BYY1	Tropomyosin 1 (Alpha), isoform CRA_m	TPM1	-0.42	2.00
Q8IVF2	Protein AHNAK2	AHNAK2	-0.42	5.27
Q6I9R8	Four and a half LIM domains protein 2	FHL2;AAG11	-0.44	4.03
B3KY03	Condensin complex subunit 1	NCAPD2	-0.45	2.61
B4E3H8	Multimerin-2	MMRN2	-0.45	4.14
A0A024RAM4	Microtubule-associated protein 1B;MAP1B heavy chain;MAP1 light chain LC1	MAP1B;DKFZp686 F1345	-0.46	2.25
B7Z653	Band 4.1-like protein 1	EPB41L1	-0.46	3.66
Q59GN2	Putative 60S ribosomal protein L39-like 5;60S ribosomal protein L39	RPL39P5;RPL39	-0.46	4.15
P46939	Utrophin	UTRN	-0.47	2.35
A7MD96	Synaptopodin	SYNPO	-0.50	1.93
Q9HD26	Golgi-associated PDZ and coiled-coil motif-containing protein	GOPC	-0.50	4.15

Q15654	Thyroid receptor-interacting protein 6	TRIP6;TRIP6i4;DK FZp686J22257;TRI P6i1	-0.50	2.95
A8CDT9	Unconventional myosin-Va	MYO5A	-0.52	3.75
B2RA03	Keratin, type I cytoskeletal 18	KRT18	-0.53	4.98
E9PMS6	LIM domain only protein 7	LMO7	-0.58	5.04
Q5T9B9	Endoglin	ENG	-0.63	1.87
A0A0U1RQV3	EGF-containing fibulin-like extracellular matrix protein 1	EFEMP1	-0.67	2.54
A0A0S2Z4U0	Ras and Rab interactor 1	RIN1	-0.70	4.05
J3QQR8	Intercellular adhesion molecule 2	ICAM2	-0.72	1.74
Q6IBN4	Enoyl-CoA delta isomerase 2, mitochondrial	PECI;ECI2	-0.77	9.67
P13073	Cytochrome c oxidase subunit 4 isoform 1, mitochondrial	COX4I1	-0.80	1.35
A0A024R670	Synaptojanin-2-binding protein	SYNJ2BP;SYNJ2B P-COX16	-0.81	4.03
A0A024R964	Serine/threonine-protein kinase Nek7	NEK7	-0.82	8.19
B7Z7Z3	Nitric oxide synthase;Nitric oxide synthase, endothelial	NOS3	-0.85	4.13
B4E290	Calcium-binding mitochondrial carrier protein SCaMC-1	SLC25A24	-1.12	1.47

Appendix Table 7: List of statistically significantly differentially regulated proteins in TNF α induced inflamed ECs in the presence of 3PO.

Protein ID	Protein names	Gene names	log ₂ (3PO+TN Fa vs TNF α)	- LOG(P -value)
B4DLP1	IST1 homolog	IST1	0.53	1.43
Q9HD26	Golgi-associated PDZ and coiled-coil motif-containing protein	GOPC	0.53	3.04
E9PJ81	UBX domain-containing protein 1	UBXN1;LOC51035	0.50	2.03
Q5TDE9	Cancer-related nucleoside-triphosphatase	C1orf57;NTPCR	0.44	2.69
Q8IZ83	Aldehyde dehydrogenase family 16 member A1	ALDH16A1	0.41	2.93
Q96P70	Importin-9	IPO9	0.40	4.05
B2ZGL7	Monoglyceride lipase	MGLL	0.40	2.92
Q5T765	Interferon-induced protein with tetratricopeptide repeats 3	IFIT3	0.37	2.66
P43246	DNA mismatch repair protein Msh2	MSH2	0.37	3.42
Q15654	Thyroid receptor-interacting protein 6	TRIP6;TRIP6i4;DK FZp686J22257;TRI P6i1	0.37	1.93
A0A024R0H7	Methylosome protein 50	WDR77	0.36	4.18
Q05BU6	Serine/arginine-rich splicing factor 11	SFRS11;SRSF11	0.36	2.64
E7EQG2	Eukaryotic initiation factor 4A-II;Eukaryotic initiation factor 4A-II, N-terminally processed	EIF4A2	0.32	1.90

B2R7C2	Centromere/kinetochore protein zw10 homolog	ZW10	0.32	2.16
Q3ZCM7	Tubulin beta-8 chain	TUBB8	0.32	1.79
P78527	DNA-dependent protein kinase catalytic subunit	PRKDC	0.31	3.68
B4DEI4	Golgi reassembly-stacking protein 2	GORASP2	0.29	4.43
Q6NUR1	Condensin complex subunit 3	NCAPG	0.28	2.17
A0A1U9X9D5	Valine--tRNA ligase	VAR5	0.28	3.98
A0A087X283	Ubiquitin-conjugating enzyme E2 E1;Ubiquitin-conjugating enzyme E2 E2;Ubiquitin-conjugating enzyme E2 E3	UBE2E2;UBE2E1;UBE2E3	0.28	2.79
Q53Y97	Thymidylate synthase	TYMS	0.27	5.80
Q5T6H7	Xaa-Pro aminopeptidase 1	XPNPEP1	0.27	2.65
Q9NR30	Nucleolar RNA helicase 2	DDX21	0.27	3.64
Q96J85	La-related protein 4	LARP4	0.26	2.23
Q9NX58	Cell growth-regulating nucleolar protein	LYAR	0.26	2.96
Q32Q12	Nucleoside diphosphate kinase;Nucleoside diphosphate kinase B	NME1-NME2;NME2;NME1	0.25	6.54
H0YBP1	Focal adhesion kinase 1	PTK2;FAK;DKFZp666O0110	0.25	2.52
E9PD53	Structural maintenance of chromosomes protein;Structural maintenance of chromosomes protein 4	SMC4	0.25	2.90
J3QLE5	Small nuclear ribonucleoprotein-associated protein;Small nuclear ribonucleoprotein-associated protein N;Small nuclear ribonucleoprotein-associated proteins B and B	SNRPN;SNRPB	0.24	2.86
A0A024R3V0	SPATS2-like protein	DNAPTP6;SPATS2L	0.24	2.80
B3KQ25	Proteasome activator complex subunit 3	PSME3;HEL-S-283	0.23	2.96
A8K9T9	Phosphoribosylformylglycinamide synthase	PFAS	0.23	4.45
A0A0S2Z4G7	Nucleophosmin	NPM1	0.22	2.78
Q9Y3U8	60S ribosomal protein L36	RPL36	0.22	2.94
A0A024R1N1	Myosin-9	MYH9	0.22	9.95
E5RI99	60S ribosomal protein L30	RPL30	0.22	4.77
P62277	40S ribosomal protein S13	RPS13	0.21	5.42
A8K492	Methionine--tRNA ligase, cytoplasmic	MARS	0.21	5.03
A0A024R652	C-1-tetrahydrofolate synthase, cytoplasmic;Methylenetetrahydrofolate dehydrogenase;Methenyltetrahydrofolate cyclohydrolase;Formyltetrahydrofolate synthetase;C-1-tetrahydrofolate synthase, cytoplasmic, N-terminally processed	MTHFD1	0.19	4.52
P53621	Coatomer subunit alpha;Xenin;Proxenin	COPA	0.18	5.50
P26232	Catenin alpha-2	CTNNA2	-0.20	5.52
C9JZR2	Catenin delta-1	CTNND1;DKFZp781O2021	-0.20	4.07
O00469	Procollagen-lysine,2-oxoglutarate 5-dioxygenase 2	PLOD2	-0.21	4.32

A0A024QZT4	Serpin B9	SERPIN9	-0.22	2.87
P52209	6-phosphogluconate dehydrogenase, decarboxylating	PGD	-0.23	5.01
V9HW43	Heat shock protein beta-1	HEL-S-102;HSPB1	-0.23	3.15
P83111	Serine beta-lactamase-like protein LACTB, mitochondrial	LACTB	-0.24	2.83
Q9H0U4	Ras-related protein Rab-1B	RAB1B;rab1b	-0.24	4.86
V9HWH9	Protein S100;Protein S100-A11;Protein S100-A11, N-terminally processed	HEL-S-43;S100A11	-0.25	2.87
C9JNK6	Metaxin-2	MTX2	-0.25	2.31
Q6FGE5	Protein S100-A10	S100A10	-0.26	4.81
V9HW59	Annexin;Annexin A4	HEL-S-274;ANXA4	-0.26	3.12
Q8IXB1	DnaJ homolog subfamily C member 10	DNAJC10	-0.26	2.48
A0A087WVR3	E3 ubiquitin-protein ligase UHRF1	UHRF1	-0.26	2.35
Q6FHM2	Guanine nucleotide-binding protein G(I)/G(S)/G(T) subunit beta-2	GNB2	-0.26	4.76
B2R6K4	Guanine nucleotide-binding protein G(I)/G(S)/G(T) subunit beta-1	GNB1	-0.28	4.13
Q6NTG0	Na(+)/H(+) exchange regulatory cofactor NHE-RF2	SLC9A3R2	-0.28	3.82
A0A024R6H1	Serine palmitoyltransferase 2	SPTLC2	-0.28	2.48
Q53GP1	N-sulphoglucosamine sulphohydrolase	SGSH	-0.28	3.61
A0A024R663	Kinectin	KTN1	-0.28	2.74
B3KY56	Extended synaptotagmin-1	FAM62A;ESYT1	-0.29	2.52
Q96CP5	Mitochondrial-processing peptidase subunit beta	PMPCB;DKFZp586I1223	-0.29	2.27
V9HW90	Glutathione reductase, mitochondrial	HEL-75;GSR	-0.29	3.24
Q7Z531	GTP:AMP phosphotransferase AK3, mitochondrial	AK3	-0.30	2.63
H3BS70	Enoyl-CoA delta isomerase 1, mitochondrial	ECI1;DCI	-0.30	2.27
A0A024R845	Ras-related protein Rab-14	RAB14	-0.31	3.43
A4D2P1	Ras-related C3 botulinum toxin substrate 1;Ras-related C3 botulinum toxin substrate 3;Ras-related C3 botulinum toxin substrate 2	RAC1;hCG_20693;RAC3;RAC2	-0.31	4.82
A0A1W2PR68	NAD-dependent malic enzyme, mitochondrial	ME2	-0.31	1.75
Q9BYN0	Sulfiredoxin-1	SRXN1	-0.31	4.05
J3KMY5	Epididymal secretory protein E1	NPC2	-0.31	5.77
Q76LA1	Cystatin-B	CSTB	-0.31	1.75
Q6FGX3	Ras-related protein Rab-6A;Ras-related protein Rab-6B	RAB6A;RAB6B	-0.31	2.39
B4E3H8	Multimerin-2	MMRN2	-0.32	1.90
Q5D1D5	Guanylate binding protein 1	N/A	-0.32	2.58
A0A024R7V6	Ras-related protein Rab-2A;Ras-related protein Rab-2B	RAB2;RAB2A;DKFZp313C1541;RAB2B	-0.33	3.10
B4DPJ2	Annexin;Annexin A11	ANXA11	-0.33	3.62
Q15907	Ras-related protein Rab-11B;Ras-related protein Rab-11A	RAB11B;RAB11A	-0.33	5.09

A0A024RBA9	Ras-related protein Rab-21	RAB21	-0.33	3.68
Q08257	Quinone oxidoreductase	CRYZ	-0.33	3.06
Q567R0	Cytochrome b-c1 complex subunit 6, mitochondrial	UQCRH	-0.34	1.79
Q13011	Delta(3,5)-Delta(2,4)-dienoyl-CoA isomerase, mitochondrial	ECH1	-0.34	1.64
P36551	Oxygen-dependent coproporphyrinogen-III oxidase, mitochondrial	CPOX	-0.35	2.06
O75396	Vesicle-trafficking protein SEC22b	SEC22B	-0.35	2.37
A0A024RBX6	Pirin	PIR	-0.35	1.98
A0A0G2JP90	Nodal modulator 1;Nodal modulator 3;Nodal modulator 2	NOMO1;NOMO3;NOMO2	-0.36	2.30
A4D1N4	MICOS complex subunit MIC19	CHCHD3	-0.37	2.35
A0A0S2Z2Z6	Annexin A6;Annexin	ANXA6	-0.37	6.62
Q6I9U3	Cation-dependent mannose-6-phosphate receptor	M6PR	-0.37	3.82
P04899	Guanine nucleotide-binding protein G(i) subunit alpha-2	GNAI2;WUGSC:H_LUCA16.1	-0.38	2.78
Q53FM7	NADH dehydrogenase [ubiquinone] iron-sulfur protein 3, mitochondrial	NDUFS3;DKFZp586K0821	-0.38	1.45
A0A024R1U4	Ras-related protein Rab-5C	RAB5C	-0.38	3.61
B2R5P6	Thioredoxin reductase 1, cytoplasmic	TXNRD1	-0.39	4.65
A0A024R972	Laminin subunit gamma-1	LAMC1	-0.39	7.28
Q9UBI6	Guanine nucleotide-binding protein G(I)/G(S)/G(O) subunit gamma-12;Guanine nucleotide-binding protein subunit gamma	GNG12	-0.39	2.22
A8K5I0	Heat shock 70 kDa protein 1B;Heat shock 70 kDa protein 1A	HEL-S-103;HSPA1B;HSPA1A	-0.40	4.26
B7Z792	NADH dehydrogenase [ubiquinone] iron-sulfur protein 2, mitochondrial	NDUFS2	-0.40	2.18
Q15843	NEDD8	NEDD8;NEDD8-MDP1	-0.40	2.97
B7Z8A2	Prenylcysteine oxidase 1	PCYOX1	-0.41	3.96
A0A0R4J2G3	Neutral cholesterol ester hydrolase 1	NCEH1	-0.41	3.17
A0A024R4X1	Protein kinase C and casein kinase substrate in neurons protein 2	PACSIN2	-0.41	3.64
B4E2S7	Lysosome-associated membrane glycoprotein 2	LAMP2	-0.41	6.42
Q5JR08	Rho-related GTP-binding protein RhoC;Transforming protein RhoA	RHOC;hCG_2043376;RHOA	-0.41	5.50
A8K132	Glutaminase kidney isoform, mitochondrial	GLS	-0.42	1.55
V9HW26	ATP synthase subunit alpha;ATP synthase subunit alpha, mitochondrial	HEL-S-123m;ATP5A1	-0.42	1.41
A0A024R9D7	2,4-dienoyl-CoA reductase, mitochondrial	DECR1;DECR	-0.42	1.69
Q6FHJ5	Secretory carrier-associated membrane protein 3	SCAMP3	-0.43	3.15
B4DPP0	Tetraspanin;CD9 antigen	CD9;BTCC-1	-0.43	2.50
G3XAI2	Laminin subunit beta-1	LAMB1	-0.44	4.63
Q5VSQ6	Prolyl 4-hydroxylase subunit alpha-1	P4HA1	-0.44	2.65

P55084	Trifunctional enzyme subunit beta, mitochondrial;3-ketoacyl-CoA thiolase	HADHB	-0.44	1.52
A0A024RC61	Aminopeptidase N	ANPEP	-0.44	4.99
A8K5W7	Isoleucine--tRNA ligase, mitochondrial	IARS2	-0.44	1.85
P48507	Glutamate--cysteine ligase regulatory subunit	GCLM	-0.44	1.72
D3DP46	Signal peptidase complex subunit 3	SPCS3	-0.45	2.06
A0A024RB87	Ras-related protein Rap-1b;Ras-related protein Rap-1A;Ras-related protein Rap-1b-like protein	RAP1B;RAP1A	-0.45	2.72
A0A024RAE4	Cell division control protein 42 homolog	CDC42;hCG_39634	-0.46	3.81
B3KRY3	Lysosome-associated membrane glycoprotein 1	LAMP1	-0.46	3.73
P62070	Ras-related protein R-Ras2;Ras-related protein R-Ras	RRAS2;RRAS	-0.47	1.35
Q5NKV8	Intercellular adhesion molecule 1	ICAM1	-0.47	2.30
Q567R6	Single-stranded DNA-binding protein;Single-stranded DNA-binding protein, mitochondrial	SSBP1	-0.48	2.14
Q2TNI1	Caveolin;Caveolin-1	CAV1	-0.49	2.81
Q53SW4	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 10, mitochondrial	NDUFA10	-0.50	1.46
B4DKB2	Endothelin-converting enzyme 1	ECE1	-0.51	2.35
Q9UES0	Synaptobrevin homolog YKT6	YKT6	-0.51	1.71
A0A158RFU6	Ras-related protein Rab-7a	RAB7A	-0.51	6.23
A8K6Q8	Transferrin receptor protein 1;Transferrin receptor protein 1, serum form	TFRC	-0.51	3.48
A0A087WTB8	Ubiquitin carboxyl-terminal hydrolase;Ubiquitin carboxyl-terminal hydrolase isozyme L3	UCHL3	-0.52	3.74
P61026	Ras-related protein Rab-10	RAB10	-0.52	4.98
Q7Z7M4	Superoxide dismutase;Superoxide dismutase [Mn], mitochondrial	SOD2	-0.53	4.57
K7EJE8	Lon protease homolog, mitochondrial;Lon protease homolog	LONP1	-0.54	1.94
Q9NZM1	Myoferlin	MYOF	-0.54	2.92
E5RHW4	Erlin-2	ERLIN2	-0.54	4.55
Q2TSD3	Protein kinase C;Protein kinase C alpha type	PRKCA	-0.55	3.17
Q05DA4	Prolyl 4-hydroxylase subunit alpha-2	P4HA2;DKFZp686M0919	-0.56	4.03
Q30118	HLA class II histocompatibility antigen, DR alpha chain;HLA class II histocompatibility antigen, DQ alpha 2 chain	HLA-DRA;HLA-DRA1;HLA-DQA1;HLA-DQA1/DRA;HLA-DQA2	-0.56	2.33
F5GXJ9	CD166 antigen	ALCAM	-0.58	1.90
E9PNW4	CD59 glycoprotein	CD59	-0.59	4.83
Q53FB6	Aldehyde dehydrogenase, mitochondrial	ALDH2	-0.59	1.72
B4E2V5	Erythrocyte band 7 integral membrane protein	STOM	-0.60	2.79
Q5ISL3	Catenin beta-1	CTNNB1	-0.63	4.72
Q6NZX3	5-nucleotidase	NT5E	-0.64	3.28
P05556	Integrin beta-1	ITGB1	-0.64	3.47

A8K3M3	Tyrosine-protein phosphatase non-receptor type;Tyrosine-protein phosphatase non-receptor type 1	PTPN1	-0.67	1.93
P68431	Histone H3.1	HIST1H3A	-0.67	1.53
A0A0A0MS41	Sideroflexin;Sideroflexin-3	SFXN3	-0.67	2.62
A0A1W2PPX5	Lysosome membrane protein 2	SCARB2	-0.68	6.80
H0YD13	CD44 antigen	CD44	-0.68	2.72
P05023	Sodium/potassium-transporting ATPase subunit alpha-1	ATP1A1	-0.70	3.72
A0A024RB01	Integrin alpha-5;Integrin alpha-5 heavy chain;Integrin alpha-5 light chain	ITGA5	-0.71	2.19
Q9UNN8	Endothelial protein C receptor	PROCR	-0.71	3.29
Q5TEC6	Histone H3	HIST2H3PS2	-0.71	1.35
Q96AG4	Leucine-rich repeat-containing protein 59	LRRC59	-0.72	2.38
M4RCG9	HLA class I histocompatibility antigen, A-30 alpha chain;HLA class I histocompatibility antigen, A-24 alpha chain;HLA class I histocompatibility antigen, A-69 alpha chain;HLA class I histocompatibility antigen, A-2 alpha chain;HLA class I histocompatibility antigen, A-68 alpha chain;HLA class I histocompatibility antigen, A-23 alpha chain;HLA class I histocompatibility antigen, A-11 alpha chain;HLA class I histocompatibility antigen, A-3 alpha chain;HLA class I histocompatibility antigen, A-36 alpha chain;HLA class I histocompatibility antigen, A-1 alpha chain;HLA class I histocompatibility antigen, Cw-5 alpha chain;HLA class I histocompatibility antigen, Cw-8 alpha chain	HLA-A;HLA;HLA-B;HLA-A24AK;MHC class I HLA-A;HLA-A*0226;HLA-A*02;HLA-C;HLA-Cw;HLA A	-0.75	4.11
Q9H3N1	Thioredoxin-related transmembrane protein 1	TMX1	-0.76	2.40
Q96N83	Podocalyxin	PODXL	-0.77	3.37
H3BNX8	Cytochrome c oxidase subunit 5A, mitochondrial	COX5A	-0.80	1.96
B7Z5P4	Ran-binding protein 3	RANBP3	-0.80	2.49
Q16719	Kynureninase	KYNU	-0.85	3.44
P10606	Cytochrome c oxidase subunit 5B, mitochondrial	COX5B	-0.86	1.55
B4E2Z3	4F2 cell-surface antigen heavy chain	SLC3A2	-0.89	2.38
P54709	Sodium/potassium-transporting ATPase subunit beta-3	ATP1B3	-0.92	3.13
P47985	Cytochrome b-c1 complex subunit Rieske, mitochondrial;Cytochrome b-c1 complex subunit 11	UQCRC1	-0.93	1.70
Q96HX3	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit 1	RPN1	-0.96	4.27
H3BRG4	Cytochrome b-c1 complex subunit 2, mitochondrial	UQCRC2	-0.97	2.26
A0A024RBH2	Cytoskeleton-associated protein 4	CKAP4	-1.04	3.53

Q6I9V5	ADP/ATP translocase 3;ADP/ATP translocase 3, N-terminally processed;ADP/ATP translocase 1	SLC25A6;SLC25A4	-1.07	1.11
Q8TCS8	Polyribonucleotide nucleotidyltransferase 1, mitochondrial	PNPT1	-1.08	3.50
A0A024R4X0	NADH-cytochrome b5 reductase;NADH-cytochrome b5 reductase 3;NADH-cytochrome b5 reductase 3 membrane-bound form;NADH-cytochrome b5 reductase 3 soluble form	CYB5R3	-1.10	3.59
B4DND4	Gamma-glutamyltransferase 5;Gamma-glutamyltransferase 5 heavy chain;Gamma-glutamyltransferase 5 light chain	GGT5	-1.15	1.90
B2RE46	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase subunit 2	RPN2	-1.22	1.53
Q9HDC9	Adipocyte plasma membrane-associated protein	APMAP	-1.25	2.85
P05141	ADP/ATP translocase 2;ADP/ATP translocase 2, N-terminally processed	SLC25A5	-1.28	3.06
F8VVM2	Phosphate carrier protein, mitochondrial	SLC25A3	-1.29	1.62
P27824	Calnexin	CANX	-1.38	5.22
Q9UHS8	Sulfide:quinone oxidoreductase, mitochondrial	hCG_2001986;SQRD	-1.48	1.96
A0A024QZT0	Voltage-dependent anion-selective channel protein 2	VDAC2	-1.51	4.19
A0A1L1UHR1	Voltage-dependent anion-selective channel protein 1	VDAC1	-1.55	3.51
A0A0C4DGS1	Dolichyl-diphosphooligosaccharide--protein glycosyltransferase 48 kDa subunit	DDOST	-1.66	3.11
Q71DI3	Histone H3.2	HIST2H3A	-1.80	1.02
Q16891	MICOS complex subunit MIC60	IMMT	-2.05	2.59
Q8TBT6	Cytochrome c1, heme protein, mitochondrial	CYC1	-2.32	1.67

9 Supplementary Information

Table 1.S. 1: Cellular components associated with upregulated proteins found in dysfunctional ECs of AMI.

GOID	GOTerm	Ontology Source	Group PValue	Associated Genes Found
GO:0022626	cytosolic ribosome	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.78E-13	[RPL10, RPL14, RPL15, RPL22, RPS26, RPS26P11]
GO:0022626	cytosolic ribosome	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	1.41E-09	[RPL10, RPL14, RPL15, RPL22, RPS26, RPS26P11]
GO:0000786	nucleosome	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.78E-13	[H3F3A, H3F3C, HIST1H3A, HIST2H3A, HIST3H3]
GO:0015934	large ribosomal subunit	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.78E-13	[NPM1, RPL10, RPL14, RPL15, RPL22]
GO:0015934	large ribosomal subunit	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	1.41E-09	[NPM1, RPL10, RPL14, RPL15, RPL22]
GO:0000786	nucleosome	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.95E-09	[H3F3A, H3F3C, HIST1H3A, HIST2H3A, HIST3H3]
GO:0000502	proteasome complex	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.78E-13	[PSMA2, PSMB3, PSME2]
GO:0000788	nuclear nucleosome	GO_CellularComponent -EBI-QuickGO- GOA_20.11.2017_00h0 0	4.95E-09	[H3F3A, HIST1H3A, HIST3H3]

Table 1.S. 2: Cellular components associated with down-regulated proteins found in dysfunctional ECs of AMI.

GOID	GOTerm	Ontology Source	Group PValue	Associated Genes Found
GO:0044391	ribosomal subunit	GO_CellularComponen t-EBI-QuickGO- GOA_20.11.2017_00h0 0	7.84E-11	[EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA]
GO:0044445	cytosolic part	GO_CellularComponen t-EBI-QuickGO- GOA_20.11.2017_00h0 0	7.84E-11	[CYB5R3, EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA, UBQLN4]

GO:0022626	cytosolic ribosome	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	7.84E-11	[EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA]
GO:0022627	cytosolic small ribosomal subunit	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	7.84E-11	[EIF2S1, RPS14, RPS25, RPSA]
GO:0044391	ribosomal subunit	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	2.20E-10	[EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA]
GO:0044445	cytosolic part	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	2.20E-10	[CYB5R3, EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA, UBQLN4]
GO:0022626	cytosolic ribosome	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	2.20E-10	[EIF2S1, RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38, RPS14, RPS25, RPSA]
GO:0022625	cytosolic large ribosomal subunit	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	2.20E-10	[RPL11, RPL23A, RPL27A, RPL35A, RPL36, RPL38]
GO:0022627	cytosolic small ribosomal subunit	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	2.20E-10	[EIF2S1, RPS14, RPS25, RPSA]
GO:0071004	U2-type prespliceosome	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	1.59E-04	[LUC7L2, SF3A1, U2AF2]
GO:0000502	proteasome complex	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	3.93E-04	[UBQLN1, UBQLN4, UBXN1]
GO:0032154	cleavage furrow	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	4.98E-04	[ICAM2, LIMA1, MYH10, RDX]

Table 2.S 1: Cellular components associated with upregulated proteins found in dysfunctional ECs of CTEPH.

GOID	GO Term	Ontology Source	Group P Value	Associated Genes Found
GO:0005840	ribosome	GO_CellularComponent-EBI-QuickGO-GOA_20.11.2017_00h00	1.07E-14	[EEF2, EIF2A, RBM3, RPL10, RPL14, RPL18A, RPL19, RPL21, RPL24, RPL35A, RPL7, RPL7A, RPL8, RPS13, RPS15, RPS21, RPS27, RPS28]
GO:0015934	large ribosomal subunit	GO_CellularComponent-EBI-QuickGO-	1.07E-14	[RBM3, RPL10, RPL14, RPL18A, RPL19, RPL21,

		GOA_20.11.2017_00h00		RPL24, RPL35A, RPL7, RPL7A, RPL8]
		GO_CellularComponent		[EIF2A, RPL10, RPL14,
		-EBI-QuickGO-		RPL18A, RPL19, RPL21,
GO:0022626	cytosolic ribosome	GOA_20.11.2017_00h00	1.07E-14	RPL24, RPL35A, RPL7, RPL7A, RPL8, RPS13, RPS15, RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[EIF2A, RPS13, RPS15,
GO:0022627	cytosolic small ribosomal subunit	GOA_20.11.2017_00h00	1.07E-14	RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[EIF2A, RPS13, RPS15,
GO:0022627	cytosolic small ribosomal subunit	GOA_20.11.2017_00h00	8.89E-14	RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[SNRPF, SNRPG, SNRPGP15]
GO:0005685	U1 snRNP	GOA_20.11.2017_00h00	8.89E-14	
		GO_CellularComponent		
		-EBI-QuickGO-		[SNRPF, SNRPG, SNRPGP15]
GO:0005687	U4 snRNP	GOA_20.11.2017_00h00	8.89E-14	
		GO_CellularComponent		[EEF2, EIF2A, RBM3, RPL10,
		-EBI-QuickGO-		RPL14, RPL18A, RPL19,
GO:0005840	ribosome	GOA_20.11.2017_00h00	5.19E-13	RPL21, RPL24, RPL35A, RPL7, RPL7A, RPL8, RPS13, RPS15, RPS21, RPS27, RPS28]
		GO_CellularComponent		[EIF2A, RPL10, RPL14,
		-EBI-QuickGO-		RPL18A, RPL19, RPL21,
GO:0022626	cytosolic ribosome	GOA_20.11.2017_00h00	5.19E-13	RPL24, RPL35A, RPL7, RPL7A, RPL8, RPS13, RPS15, RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[EIF2A, RPS13, RPS15,
GO:0022627	cytosolic small ribosomal subunit	GOA_20.11.2017_00h00	5.19E-13	RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[EIF2A, RPS13, RPS15,
GO:0022627	cytosolic small ribosomal subunit	GOA_20.11.2017_00h00	9.83E-12	RPS21, RPS27, RPS28]
		GO_CellularComponent		
		-EBI-QuickGO-		[CBX3, FEN1, HAT1, MCM2,
GO:0000784	nuclear chromosome, telomeric region	GOA_20.11.2017_00h00	1.53E-09	MCM3, MCM5, MCM6, MCM7, PCNA]

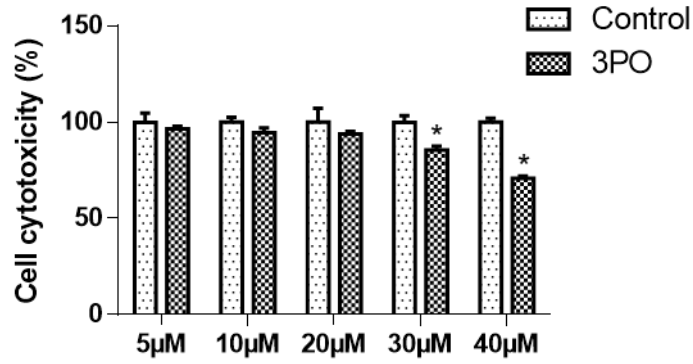


Figure S 1: Cytotoxic effect of 3PO on Ea.hy926 cells

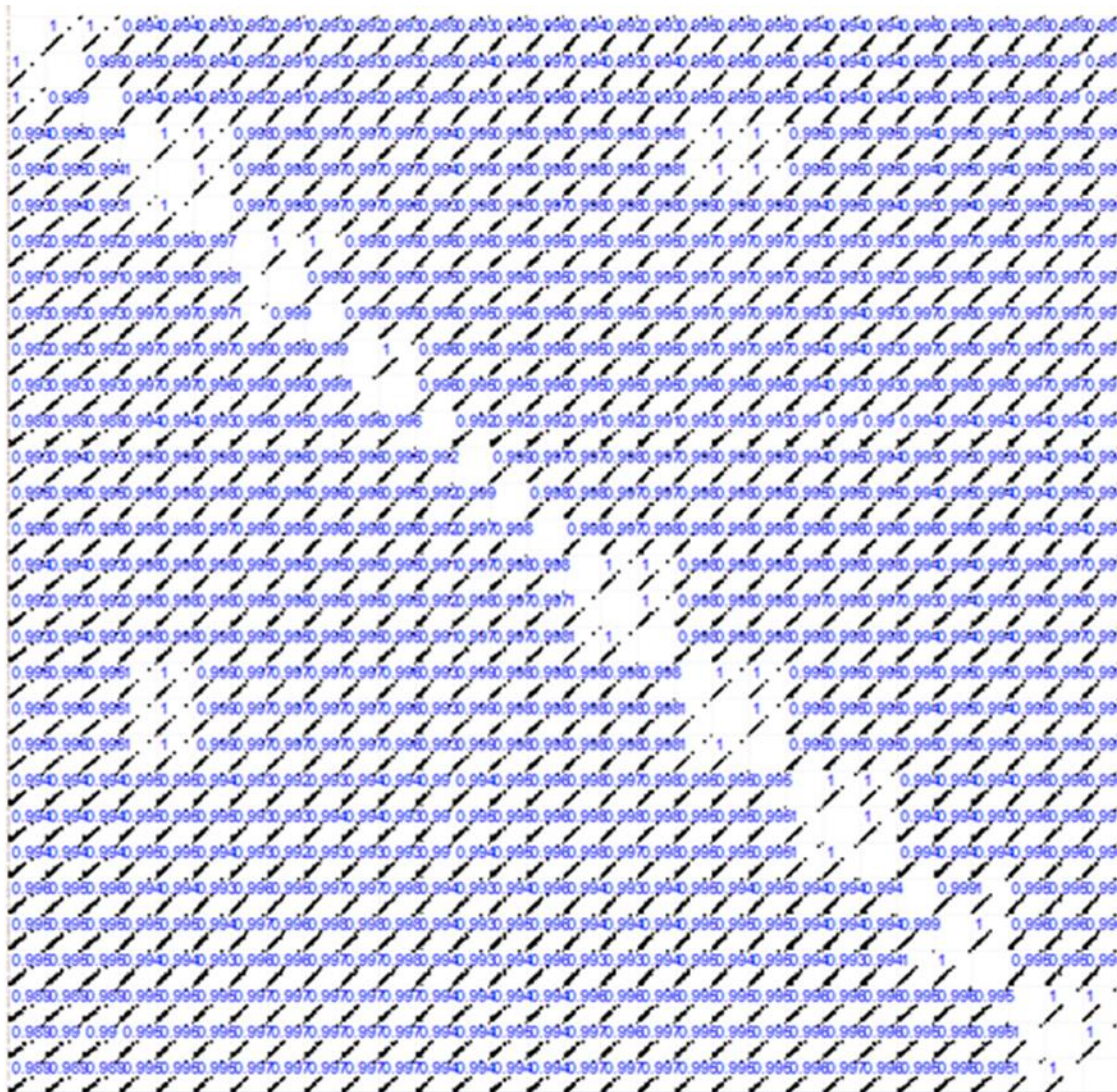


Figure S 2: The Pearson correlation among the samples.

B

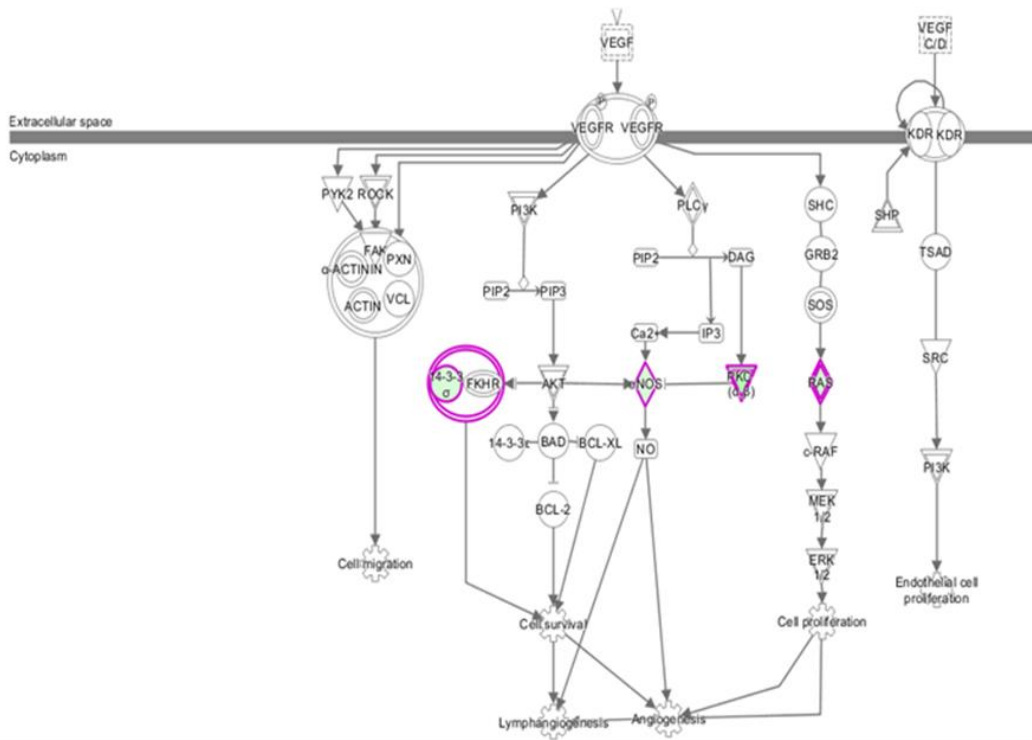


Figure S 3: Down regulation of VEGF signalling in 3PO treated cells by IPA software

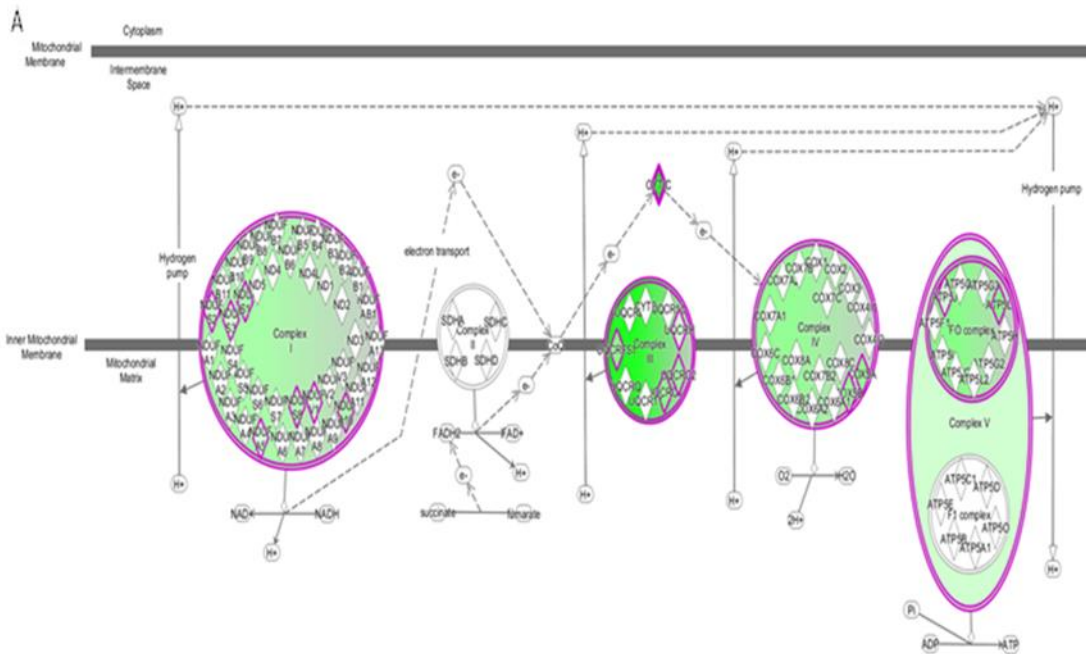


Figure S 4: Down regulation of oxidative phosphorylation in 3PO treated cells by IPA software

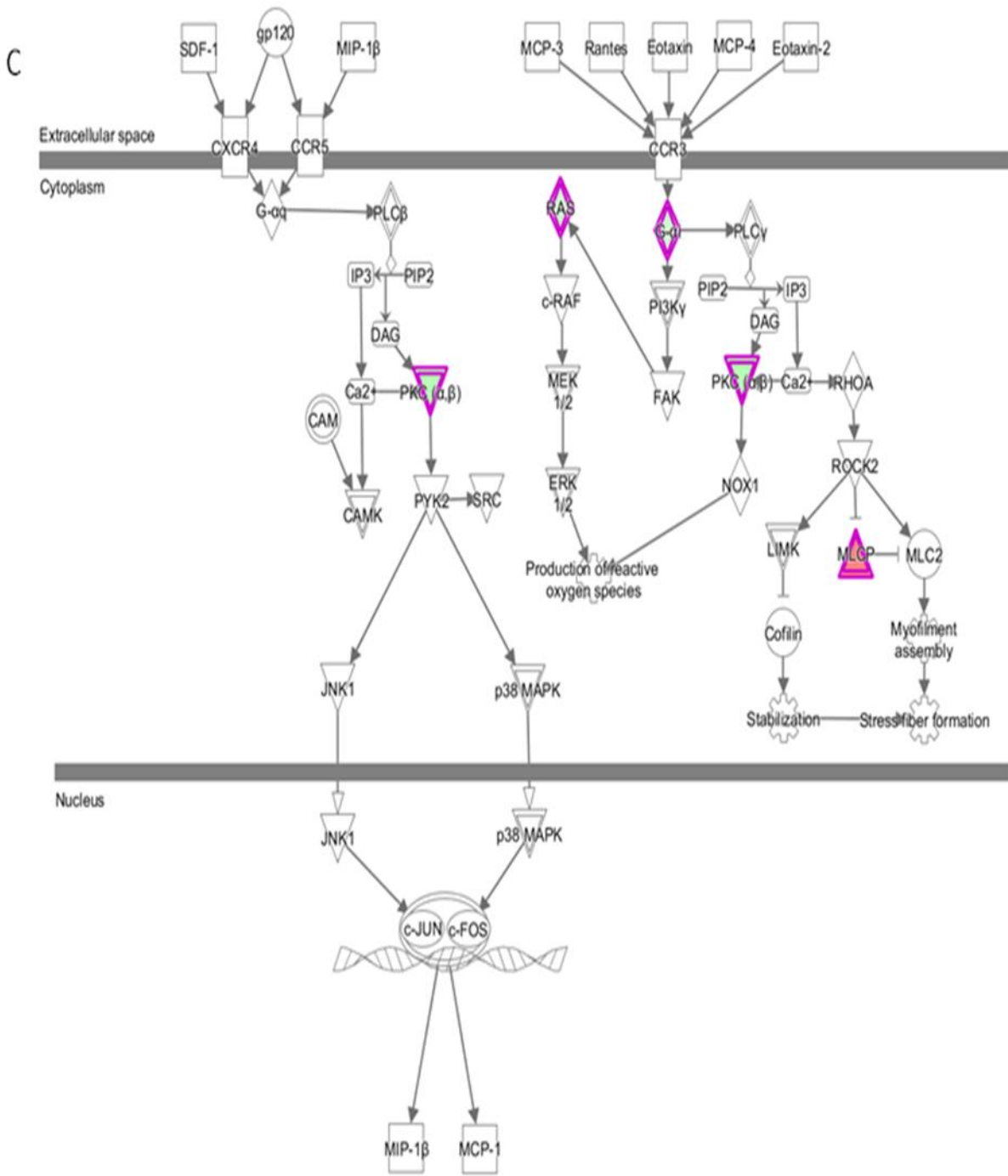


Figure S 5: Down regulation of cytokine in 3PO treated cells signaling by IPA software

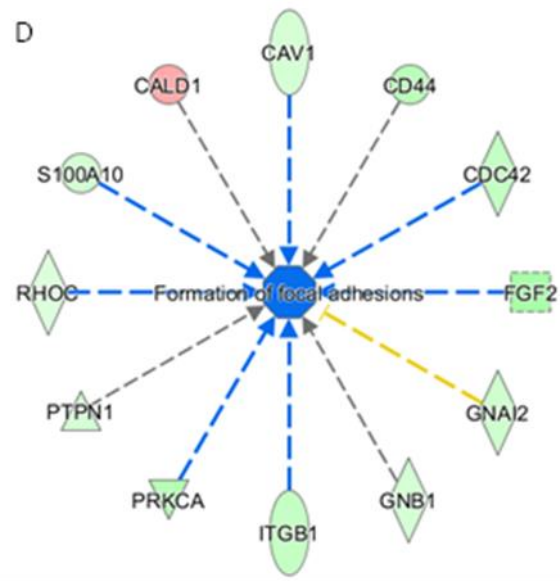


Figure S 6: Down regulation of formation of focal adhesions in 3PO treated cells signaling by IPA software

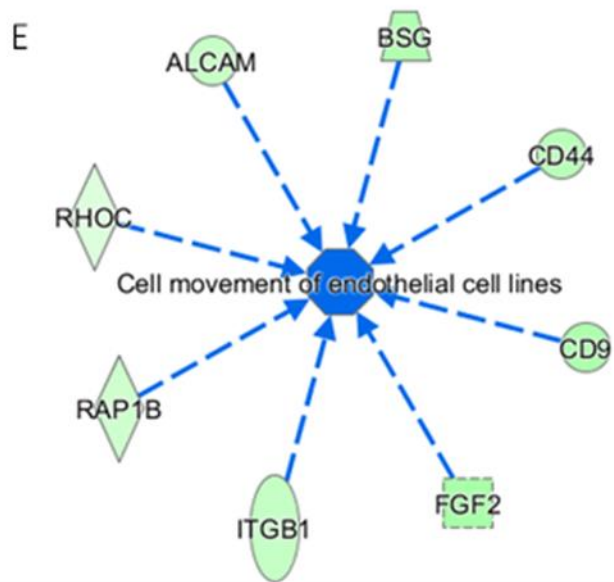


Figure S 7: Down regulation of cell movement of endothelial cell lines in 3PO treated cells signaling by IPA software