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# Hair follicle stem cell progeny heal blisters while pausing skin development Yu Fujimura<sup>1</sup>, Mika Watanabe<sup>1,2</sup>, Kota Ohno<sup>3</sup>, Yasuaki Kobayashi<sup>3</sup>, Shota Takashima<sup>1</sup>, Hideki Nakamura<sup>1</sup>, Hideyuki Kosumi<sup>1</sup>, Yunan Wang<sup>1</sup>, Yosuke Mai<sup>1</sup>, Andrea Lauria<sup>2,4</sup>, Valentina Proserpio<sup>2,4</sup>, Hideyuki Ujije<sup>1</sup>, Hiroaki Iwata<sup>1</sup>, Wataru Nishie<sup>1</sup>, Masaharu Nagayama<sup>3,5</sup>, Salvatore Oliviero<sup>2,4</sup>, Giacomo Donati<sup>2</sup>, Hiroshi Shimizu<sup>1†</sup>, Ken Natsuga<sup>1</sup>\* <sup>1</sup>Department of Dermatology, Hokkaido University Graduate School of Medicine, Sapporo, Japan <sup>2</sup>Department of Life Sciences and Systems Biology, Molecular Biotechnology Centre, University of Turin, Turin, Italy <sup>3</sup>Research Institute for Electronic Science, Hokkaido University, Sapporo, Japan <sup>4</sup>Italian Institute for Genomic Medicine, Candiolo (TO), Italy <sup>5</sup>Japan Science and Technology Agency, CREST, Kawaguchi, Japan <sup>†</sup>Deceased in February 2021 **Conflicts of Interest** The authors declare that no conflicts of interest exist.

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# 30 Abstract

31	Injury in adult tissue generally reactivates developmental programs to foster
32	regeneration, but it is not known whether this paradigm applies to growing tissue. Here,
33	by employing blisters, we show that epidermal wounds heal at the expense of skin
34	development. The regenerated epidermis suppresses the expression of tissue
35	morphogenesis genes accompanied by delayed hair follicle (HF) growth. Lineage
36	tracing experiments, cell proliferation dynamics, and mathematical modeling reveal that
37	the progeny of HF junctional zone stem cells, which undergo a morphological
38	transformation, repair the blisters while not promoting HF development. In contrast, the
39	contribution of interfollicular stem cell progeny to blister healing is small. These findings
40	demonstrate that HF development can be sacrificed for the sake of epidermal wound
41	regeneration. Our study elucidates the key cellular mechanism of wound healing in skin
42	blistering diseases.

43

# 44 Keywords

Wnt signaling, epidermal stem cells, epidermolysis bullosa, basement membrane zone
 46

47 Introduction

Tissue responds to injury by transforming its cellular components and extracellular 48 matrix from homeostasis into a regenerative state. Damaged tissue typically reactivates 49 an embryonic gene program in epithelia to accelerate tissue regeneration (Fernandez 50 Vallone et al, 2016; Miao et al, 2019; Nusse et al, 2018; Yui et al, 2018). However, it is 51 unknown whether this phenomenon also applies to injuries in developing tissue, in 52 which the embryonic gene expression program is switched on before damage. 53 The epidermis is a stratified epithelium of the skin and is located on the surface of 54 the body, where it serves as a barrier against external stimuli and microorganisms 55 (Natsuga, 2014). Cellular proliferation and differentiation in the epidermal basal layer, 56 where epidermal stem cells (SCs) are present, are fine-tuned to maintain the integrity of 57 the epidermis (Donati & Watt, 2015). The epidermis attaches to the dermis through 58 proteins in the epidermal basement membrane zone (BMZ) (McMillan et al, 2003). 59 Epidermal BMZ proteins function as a niche for epidermal SCs (Watt & Fujiwara, 2011), 60

and the loss of these proteins, such as  $\alpha 6$  integrin (ITGA6),  $\beta 1$  integrin, and collagen

62 XVII (COL17), leads to transient epidermal proliferation (Brakebusch et al, 2000;

63 Niculescu *et al*, 2011; Watanabe *et al*, 2017).

Skin wounding causes pain and carries a significant risk of bacterial infection. The
sources of skin wound healing have been extensively investigated in experimental
animals (Dekoninck & Blanpain, 2019; Rognoni & Watt, 2018). Hair follicles (HFs),
epidermal appendages, fibroblasts, and immune cells coordinate to heal the wound, and
the contribution of each component can vary depending on the assay (Garcin *et al*,

2016). Wounding in adult skin induces the expression of genes regulating epidermal
 development, including SOX11 and SOX4 (Miao *et al.*, 2019).

Conventional skin wounding assays have employed full-thickness skin wounds, in 71 which all skin components are removed, including the epidermis, epidermal 72 appendages, dermis, and subcutaneous fat tissue. In contrast to conventional full-73 thickness skin wounds, epidermal detachment, as exemplified by subepidermal blisters, 74 is distinctive because it does not affect the structures below the epidermis per se. The 75 epidermis is detached from the dermis in several pathological conditions, such as burns 76 (Chetty et al, 1992), congenital defects in epidermal BMZ proteins (epidermolysis 77 bullosa (EB)) (Fine et al, 2014; Vahidnezhad et al, 2019), autoimmunity to these 78 proteins (pemphigoid diseases) (Schmidt & Zillikens, 2013), and severe drug reactions, 79 such as Stevens-Johnson syndrome/toxic epidermal necrolysis (White et al, 2018). 80 Although the cells that contribute to the repair of full-thickness skin wounds have been 81 identified (Aragona et al, 2017; Dekoninck & Blanpain, 2019; Donati et al, 2017; 82 Gonzales & Fuchs, 2017; Ito et al, 2005; Kang et al, 2020; Page et al, 2013; Park et al, 83 2017; Sada et al, 2016), the cellular dynamics of subepidermal blister healing are 84 completely unknown. In addition, full-thickness skin wounding, when applied to 85 developmental skin, is unsuitable for distinguishing tissue regeneration and 86 development. In contrast, blistering injury allows us to monitor both skin regeneration 87 88 (reepithelization of the epidermis) and morphogenesis (HF development) within the same wound bed. 89

Here, by taking advantage of subepidermal blisters, we explore the effects of injury
 on developmental tissue. Unexpectedly, blistering injury is found to reduce the

- 92 expression of tissue morphogenesis genes in the healed epidermis and to direct HFSCs,
- <sup>93</sup> rather than epidermal SCs, to provide progeny to heal the wound and to suspend HF
- 94 development.
- 95
- 96

## 97 **Results**

#### **Subepidermal blister formation and its healing process**

The suction-blister technique was developed more than a half-century ago to selectively 99 remove the epidermis from the dermis (Kiistala & Mustakallio, 1964, 1967), and it has 100 been utilized to harvest epidermal pieces for transplant to repair human skin defects. 101 102 We reasoned that suction blisters on neonatal mice, in which the epidermis is removed while HFs, the dermis, and subcutaneous fat tissues are maintained in the wounds, 103 enable us to examine the direct relationship between tissue injury and skin development. 104 Therefore, we applied constant negative pressure to the dorsal skin of C57BL/6 wild-105 type (WT) neonates to produce subepidermal blisters (postnatal day 1 (P1), Figure 1A). 106 Histologically, skin separation occurred at the level of the dermoepidermal junction 107 (DEJ) (Figure 1B, Figure EV1A-C). HFs, as shown by alkaline phosphatase (AP)-108 positive dermal papillae, remained on the dermal side of the blisters (Figure 1B, Figure 109 110 **EV1D**). Dermis and subcutaneous tissues were intact after blistering (Figure 1B).  $\alpha 6$ integrin (ITGA6), a hemidesmosome protein, was seen at the blister roof, whereas type 111 IV collagen (COL4), a major component of the epidermal basement membrane, and 112 laminin 332 (L332) were present at the base of the blister (Figure 1C, Figure EV1B). In 113 line with the immunofluorescence data, hemidesmosomes localized on the blister roof 114 and lamina densa (basement membrane) were observed at the blister base by electron 115 microscopy (Figure 1D, Figure EV1C), as seen in human suction blisters (Kiistala & 116 Mustakallio, 1967) and their murine counterparts (Krawczyk, 1971). 117 We then characterized the healing processes of the subepidermal blisters. One to 118

two layers of the regenerated epidermis, marked with pan-cytokeratin, were found one

day after blister formation (P2, Figure 1E, Figure EV1E). The regenerated epidermis 120 restored ITGA6 expression at the DEJ (Figure 1E, Figure EV1E). The shape of the 121 basal keratinocytes in the intact skin was cuboidal or columnar (P2, keratin 14 (K14)-122 positive cells in the nonlesional area, Figure 1F). In contrast, the regenerated 123 keratinocytes in the blistered skin transformed from cuboidal to a wedge/flattened shape 124 (P2, K14-positive cells in the lesional area, Figure 1F) (Krawczyk, 1971). Two days 125 after blistering (P3), the stratified epidermal layers were mostly restored but still lacked 126 loricrin-positive granular layers, a hallmark of proper epidermal differentiation, in the 127 lesional area (Figure 1G). The final step in epidermal differentiation was completed by 128 the formation of loricrin-positive granular layers three days after blister formation (P4, 129 Figure 1H). The immunofluorescence data for subepidermal healing are summarized in 130 Table EV1. These results demonstrate that subepidermal blisters on neonates can 131 serve a model for visualizing wound healing without damaging HFs and other dermal 132 components at the developmental stage. 133

134

#### 135 Epidermal restoration at the expense of skin development

136 To elucidate the effects of the blistering injury on the neonatal skin, we performed RNA-

137 seq profiling of the wounded tissue above the dermis (the regenerated epidermis and

138 <u>the blister roof</u>) one day after blistering (P2, Figure 2A, EV2A). Unexpectedly, the

expression of genes involved in HF morphogenesis, such as Wnt signaling,

melanogenesis, and Hedgehog signaling, was significantly\_downregulated (Figure 2B,

141 **2C, EV2B-D, Dataset EV1**). The HF undergoes morphogenesis in utero and after birth

142 (Figure EV1F) (Paus et al, 1999; <u>Saxena et al, 2019</u>). In murine skin, HF

morphogenesis is classified into nine stages: the accumulation of nuclei in the epidermis 143 without downward growth of HFs (stage 0), HFs with the most proximal part in the 144 dermis (stages 1-5), and HFs with the most proximal part in the subcutaneous tissue 145 (stages 6-8) (Paus *et al.*, 1999). The downregulation of HF morphogenesis genes 146 (Figure 2B, 2C) led us to hypothesize that epidermal wounding tunes down tissue 147 development to accelerate blister healing. In agreement with this hypothesis, the 148 number of hair canals, which are tube-like connections between the epidermal surface 149 and the most distal part of the inner root sheath (IRS) and are present in only developed 150 HFs (HF morphogenesis, stage 6-8) (Paus et al., 1999), was reduced in the 151 regenerated epidermis (Figure 2D, 2E). HF growth under the regenerated epidermis at 152 P4 was delayed at stages 5 and 6 where the IRS is halfway up to the HF or contains the 153 hair shaft up to the level of the hair canal. In contrast, the surrounding intact skin of the 154 blisters or the normal skin of the littermate controls had stage 7 HFs, in which the tip of 155 the hair shaft leaves the IRS and enters the hair canal (Figure 2F). The observation of 156 smaller HFs in the skin lesion when compared to the surrounding intact skin is 157 accompanied by diminished Wnt signalling indicated by the LacZ-positive area in Wnt 158 159 <u>reporter mice (ins-Topgal+) (P2, Figure 2G).</u> The expression of genes involved in cytokine-cytokine receptor interactions and 160

chemokine, TNF, IL-17, and JAK-STAT signaling pathways was increased in the regenerated epidermis (**Figure 2B, 2C, EV2B**), and these pathways are implicated in the recruitment of immune cells. However, the number of neutrophils, lymphocytes, and macrophages was not increased in the lesional dermis (P2, **Figure EV1G**), in which 1-2 layers of the regenerated epidermis covered the wound one day after blistering. There

was no apparent increase of these immune cells either at P4 (**Figure EV1G**), in which the whole epidermis was restored. These results suggest that the immune cells might not play a significant role in blister healing, although the involvement of immune cells or of molecules that they secrete—such as  $\gamma\delta$  T cell-derived Fgf9, which induces HF neogenesis (Gay *et al*, 2013)—cannot be fully excluded or may serve as a confounding factor affecting HF growth.

These data indicate that, in the context of skin morphogenesis where the immune system is not yet fully defined, subepidermal blisters heal at the expense of HF growth.

# Progeny of junctional zone SCs represent the main cellular contribution to blister healing

Wounded lesions require epithelial cell proliferation and migration to restore skin 177 integrity. We then investigated the dynamics of epidermal and HF keratinocytes during 178 blister healing. One day after blister formation (P2), BrdU+ cells were abundant in the 179 HFs and the intact epidermis adjacent to the blisters (**Figure 3A**). Cells positive for  $\alpha 5$ 180 integrin (ITGA5), a marker of migrating keratinocytes (Aragona et al., 2017), were seen 181 in the HFs within the lesional area and in the epidermal boundary between the blister 182 and the nonlesional area (epidermal tongue) (Figure 3B, Figure EV1E). As HF growth 183 was delayed in the regenerated epidermis (Figure 2D-G) and proliferative cells were 184 abundant in HFs of the lesional area (Figure 3A), HF keratinocytes were deduced to 185 participate in epidermal regeneration rather than in HF development. 186 To confirm this hypothesis, we employed a short-term lineage tracing strategy with 187

suction blistering (Figure 3C). K14-lineage labeled cells (K14CreER:R26R-H2B-

189	mCherry or K14CreER:R26R-confetti), mainly progeny of SCs in the interfollicular
190	epidermis (IFE), were sparse in the regenerated epidermis (Figure 3D, 3E, Figure
191	EV3A). In contrast, most of the cells in the regenerated epidermis were Lrig1 (leucine-
192	rich repeat and immunoglobulin-like domain protein 1)-lineage labeled cells
193	(Lrig1CreER:R26R-H2B-mCherry or Lrig1CreER:R26R-confetti), which are the progeny
194	of junctional zone SCs (Figure 3F, 3G, Figure EV3A). In line with this, phospho-
195	Histone H3 (PH3)-positive cells were observed in Lrig1-lineage labeled cells at P2
196	(Figure EV3B, 3C). K14- and Lrig1-lineage labeled cells were increased from P1 (at the
197	time of suction blistering) to P4 (sampling), but the expansion of Lrig1-lineage labeled
198	cells was more evident in the regenerated epidermis (Figure EV3D). The expression of
199	the Lrig1 gene was not upregulated in the regenerated epidermis at P2 in our RNA-seq.
200	These data indicate that the HF junctional zone on the dermal side of the blister is the
201	main pool for the keratinocytes that heal subepidermal blisters while halting HF
202	development, although other hair follicle populations might also be involved in blister
203	healing.
204	
205	HF reduction from the wound bed of the blisters promotes the contribution of

# **IFESC progeny to blister healing**

207 The contribution of junctional zone HFSC progeny to blister healing led us to investigate

how the epidermis regenerates in the absence of HFs at the blister base (dermis). Type

- 209 XVII collagen (COL17) is expressed not only in the IFE but also in the bulge region of
- the HFs (Figure 4A) (Liu *et al*, 2019; Matsumura *et al*, 2016; Natsuga *et al*, 2019;
- Tanimura et al, 2011; Watanabe et al., 2017). COL17 is encoded by the COL17A1 gene,

and its deficiency leads to junctional EB (McGrath et al, 1995). The splitting of neonatal 212 Col17a1<sup>-/-</sup> (Nishie et al, 2007) dorsal skin upon suction blistering was observed between 213 ITGA6 and COL4/L332 (Figure 4B, 4C), as was the case in wild-type neonates (Figure 214 **1C. 1D**). Intriguingly, suction blistering (**Figure 1A**) of *Col17a1<sup>-/-</sup>* dorsal skin detached 215 most, but not all, of the HFs from the dermis (P1, Figure 4D). In agreement with this 216 finding, dermal papilla cells (AP+) were observed on the roof side of the blisters of 217 *Col17a1<sup>-/-</sup>* mice, whereas the blister roofs of control mice did not have these cells (P1, 218 Figure 4E, Figure EV1D). Epidermal regeneration was not apparent in Col17a1<sup>-/-</sup> mice 219 one day after suction blistering (P2), whereas the control mice showed regeneration of 220 the epithelial layers (Figure 4F, Table EV1). Col17a1<sup>-/-</sup> mice had delayed expression of 221 loricrin in the regenerated epidermis three days after blister formation (P4, Figure 4F, 222 **Table EV1**). BrdU+ cells were abundant in the  $Col17a1^{-l}$  mouse epidermis surrounding 223 blisters as was the case for controls (Figure 3A, 4G). Lineage tracing experiments 224 (Figure 3C) revealed that IFESC progeny covered most of the regenerated area 225 (K14CreER:R26R-H2B-mCherry:*Col17a1<sup>-/-</sup>*) at P4 (**Figure 4H, 4I**). The transgenic 226 rescue of *Col17a1<sup>-/-</sup>* by overexpressing human COL17 (hCOL17+;*Col17a1<sup>-/-</sup>*) (Nishie *et* 227 al., 2007) ameliorated blister healing (P4, Appendix Figure S1, Table EV1). These 228 data demonstrate that upon detachment of most HFs from the dermis, the IFE can 229 compensate the lack of junctional and HF SCs and repair defects in the IFE. 230 231 Impaired flattening of regenerated keratinocytes accompanies slower blister 232

233 healing

We further sought to identify other modulators of subepidermal blister healing. We 234 first focused on collagen VII (COL7), encoded by Col7a1. COL7 forms anchoring fibrils 235 and is located at the DEJ (Figure 5A) but just below the basement membrane (Shimizu 236 et al, 1997; Watanabe et al, 2018), and its deficiency leads to dystrophic EB (Christiano 237 et al, 1993; Hilal et al, 1993). As conventional wound healing is delayed in COL7-238 hypomorphic mice (Nystrom et al, 2013), we applied the suction-blister method to 239 Col7a1<sup>-/-</sup> mice (Heinonen et al, 1999) (Figure 5B-H, Appendix Figure S2). In contrast 240 to that in WT and *Col17a1<sup>-/-</sup>* suction blisters (Figure 1C, 1D, 4B, 4C), skin splitting 241 occurred at the level below the basement membrane in Col7a1<sup>-/-</sup> mouse dorsal skin, as 242 shown by the presence of L332 and COL4 on the blister roof epidermis (P1, Figure 5B, 243 **5C**). The epidermal defects were not repaired in  $Col7a1^{-l-}$  mice, whereas the epidermis 244 of the control blistered skin regenerated one day after blistering (P2, Figure 5F, 245 Appendix Figure S2, Table EV1), which is consistent with the delayed healing of full-246 thickness skin wounds in COL7-hypomorphic mice (Nystrom et al., 2013). This finding is 247 contrasted by the fact that COL7-depleted keratinocytes migrate faster than WT 248 keratinocytes in vitro (Chen et al, 2002; Chen et al, 2000). We examined the HFs of 249 *Col7a1<sup>-/-</sup>* mice to explain the slowed epidermal regeneration because HFs are the main 250 contributor to blister healing (Figure 3A-G). However, HFs were present in the Col7a1<sup>-/-</sup> 251 mouse wound bed (blister base) (P1, Figure 5D, 5E) as opposed to that of Col17a1-/-252 mouse (P1, Figure 4D, 4E). Moreover, the number of BrdU+ cells in HFs was 253 comparable between *Col7a1<sup>-/-</sup>* and control mice (P2, **Figure 5G**, **Appendix Figure S2**), 254 suggesting that the proliferation of HF keratinocytes does not account for the delayed 255 blister healing of  $Col7a1^{-/-}$  mice. 256

257	Second, we treated the blistered skin in wild-type mice with extracellular calcium
258	(Figure 5I-K, Appendix Figure S2). Extracellular calcium is a potent inhibitor of
259	proliferation and migration in cultured keratinocytes as well as an inducer of
260	differentiation (Hennings <i>et al</i> , 1980; Magee <i>et al</i> , 1987). Consistent with previous in
261	vitro assays, the intrablister administration of $CaCl_2$ (1.8 mM or 9.0 mM) just after
262	suction blistering delayed epidermal regeneration in vivo (P2, Figure 5I, Table EV1).
263	Premature differentiation, which might hinder wound healing, was not apparent in the
264	CaCl <sub>2</sub> -treated blisters, as K10 labeling was seen only at the blister roof but not in the
265	keratinocytes on the wound bed (P2, <b>Figure 5I</b> ). Similar to that in <i>Col7a1<sup>-/-</sup></i> mouse
266	blisters, the number of BrdU+ cells in HFs was not reduced in CaCl <sub>2</sub> -treated blisters (P2,
267	Figure 5J, Appendix Figure 2).
268	These two examples strongly suggest that there are factors other than HF
269	keratinocyte proliferation that modulate blister healing. During blister healing,
270	keratinocytes reshape into a wedge-shaped morphology (Figure 1F), which is mirrored
271	by the RNA-seq data showing that the expression of genes involved in the regulation of
272	the actin cytoskeleton is decreased in the regenerated epidermis (Figure 2B, 2C).
273	Wedge-shaped/flattened keratinocytes are believed to be superior to cuboidal/columnar
274	keratinocytes for covering epidermal defects. These data led us to wonder if the cell
275	morphology was altered in settings of delayed blister healing. In the intact (nonblistered)
276	skin, the morphology of Col7a1 <sup>-/-</sup> or Ca-treated basal keratinocytes was similar to that of
277	control cells (P2, the nonlesional area in Figure 5F, 5H, 5I, 5K). The regenerated
278	keratinocytes became wedge-shaped/flattened in the control group, as shown in Figure
279	<b>1F</b> . However, the keratinocytes in the regenerated epidermis of <i>Col7a1<sup>-/-</sup></i> or Ca-treated

mice were not as flat as those of control mice but were still rather cuboidal (P2, the
lesional area in Figure 5F, 5H, 5I, 5K), which correlates with the delayed blister healing
in these mice.

283

#### 284 Mathematical modeling reproduces blister healing

These in vivo experiments led us to speculate that HF/IFE cell proliferation during 285 paused HF development and the morphological changes of the regenerated 286 keratinocytes might simply account for the dynamics of subepidermal blister healing. To 287 answer this question, we employed mathematical modeling. We adopted an agent-288 based model (Kobayashi et al, 2016; Kobayashi et al, 2018), where keratinocytes were 289 modeled by spheroids and cell division was described as replication of the spheroids. 290 Such a model allowed us to visualize the dynamics of the epidermal basal layer and to 291 establish the epidermal defects on the basement membrane. We utilized the data on the 292 number of BrdU+ cells among HF vs. IFE keratinocytes (approximately 7:1 per unit of 293 epidermal length; Figure 3A) and on the shape of the regenerated vs. normal 294 keratinocytes (2:1 the length of the major cell axis; Figure 5H, 5K). SC progeny within 295 the epidermal defects (colored in red), simulating HF-derived cells, had a more 296 substantial contribution to wound healing than IFE SCs (colored in yellow; Figure 6A, 297 6B, Movie EV1), as seen in the lineage tracing experiments (Figure 3C-G). The 298 299 absence of SCs within the epidermal defects, simulating <u>HF reduction</u> in the wound bed, showed delayed healing (Figure 6C, 6D, Movie EV2), in agreement with Col17a1-/-300 epidermal regeneration results (Figure 4E-G). A less flattened morphology of the 301 regenerated keratinocytes, simulating Col7a1<sup>-/-</sup> and Ca-treated blister healing 302

(regenerated vs. normal keratinocytes, 1.3-1.6:1 in length; Figure 5H, 5K), slowed 303 epidermal regeneration (Figure 6E, 6F, Movie EV3). By systematically changing the 304 shape of regenerated vs. normal keratinocytes (from 1:1 to 2:1 in length) for different 305 initial SC distributions within epidermal defects (Figure EV4A), we observed the same 306 tendency: Less flattened morphology led to more delayed healing (Figure EV4B, EV4C), 307 which suggests that the morphology affects healing dynamics irrespective of the initial 308 SC distribution. These in silico data demonstrate that the contribution of HFSC progeny 309 and the morphological change in the regenerated keratinocytes are sufficient to 310 recapitulate the in vivo subepidermal blister healing. 311 We finally asked whether this HF contribution to wound healing could be applied to a 312 human setting, in which HFs are larger but much more sparsely distributed than their 313 murine counterparts (**Table EV2**). We examined human subepidermal blister samples 314 and found that epidermal regeneration by HFs was observed in the samples with the re-315 epithelized area (Figure EV5). These findings from human samples are consistent with 316

317 the mice data.

318 Discussion

Although recent studies have reported that injury causes damaged tissue to shift to an embryonic-like state, there is a poor understanding of how regeneration affects development at the damaged tissues. Here, we applied the blistering injury to neonatal mouse dorsal skin and showed the skewed contribution of HFSC progeny to wound healing rather than HF development.

Previous studies on skin wounding combined with the fate mapping of murine skin 324 delineated the involvement of epithelial, mesenchymal, and immune cells in wound 325 healing, depending on different settings (Dekoninck & Blanpain, 2019; Rognoni & Watt, 326 2018). However, as full-thickness skin wounds, even when they are applied to neonatal 327 skin, remove all skin components, it is challenging to see the effects of development on 328 injury or vice versa. Our blistering injury has an advantage over conventional skin 329 wounding studies in that only the epidermis is removed by constant negative pressure, 330 with the other skin components and basement membrane being retained in the wounds, 331 which allowed us to examine "pure" epidermal wound healing processes during skin 332 development. Our study contrasts with wound-induced embryonic gene expression 333 334 (Miao et al., 2019) and follicular neogenesis upon full-thickness skin wounding in adult (Ito et al, 2007; Osaka et al, 2007) and neonatal mice (Rognoni et al, 2016). So far, our 335 study has not distinguished whether the waning Wnt signaling was the primary cause, 336 337 or the result, of the delayed HF morphogenesis. Further studies are needed to clarify this. 338

Previous studies have suggested the possible involvement of HFs in epidermal regeneration in human suction blisters (Lane *et al*, 1991) and extracellular matrix

alterations in the skin-split area (Hertle et al, 1992; Leivo et al, 2000). We show that the 341 progeny of HF junctional zone SCs mainly repair subepidermal blisters (Figure 3F, 3G, 342 6A, 6B), although the involvement of other HF populations cannot be excluded. 343 However, the IFE can also serve as a reservoir of keratinocytes to repair epidermal 344 defects when most HFs are detached from the dermis (Figure 4H). How the 345 346 contribution of two sources of keratinocytes to blister healing is regulated is unknown, but the significant contribution of HF junctional zone progeny is reasonable because 347 HFs are densely located in the wound bed (blister base). In contrast, the progeny of 348 IFESCs could recover only from the blister edge, as demonstrated by mathematical 349 modeling (Figure 3D-3G, 6A, 6B). The role of HFSCs is also highlighted by delayed HF 350 growth in the regenerated epidermis, as corroborated by the downregulated Wnt 351 signaling (Figure 2A-2G). These findings indicate that there is a coordinated balance 352 between tissue development and wound healing, which has not been well recognized. 353 In addition, the expression of IL-17 signaling pathway genes was increased, although 354 the recruitment of immune cells was not evident one day or three days after blistering 355 (Figure EV1G). Recently, IL-17 signaling has been shown to drive Lrig1-lineage cell 356 recruitment in wound healing and tumorigenesis (Chen et al, 2019). Therefore, IL-17 357 signaling might also help Lrig1-lineage cells translocate from HFs to repair epidermal 358 defects in our study (Figure 3F, 3G). 359

The dynamics of cytoskeletal changes directly affect cellular morphology and migration potential (Tang & Gerlach, 2017). Previous studies have shown that cells undergo a morphological transformation into a wedge/flattened shape at the leading edge of migrating cells (Uroz *et al*, 2019) and in regenerated keratinocytes during

364	wound healing (Krawczyk, 1971; Paladini <i>et al</i> , 1996). Our study has shed further light
365	on the significant impact of the keratinocyte morphological changes on in vivo wound
366	healing through blistering experiments in <i>Col7a1<sup>-/-</sup></i> and Ca-treated mice and
367	mathematical modeling (Figure 5F, 5H, 5I, 5K, 6A, 6E, 6F). However, the
368	morphological changes of keratinocytes might not directly foster blister healing but
369	might be simply correlated with other primary causes that help regenerate the epidermis.
370	The loss of a functional basement membrane in the Col7a1 <sup>-/-</sup> blister bottom might slow
371	blister healing due to the lack of substrates for cell migration. Pressure during blister
372	induction could be a factor that changes the cellular morphology. Additional mechanistic
373	studies are needed to verify the hypothesis we raise in our study.
374	Our in vivo blistering experiments can mimic and replace the in vitro cultured cell
375	wound healing assay (e.g., scratch wounding), which has been used in the field of cell
376	biology for decades because subepidermal blisters are epidermal wounds. In vivo
377	intrablister administration of drugs, as exemplified by extracellular calcium
378	administration (Figure 5I), could be an alternative to in vitro chemical treatment of
379	scratch-wounded cultured cells to develop new therapeutic options for wound healing,
380	especially of subepidermal blisters.
381	Our in vivo suction-blister model recapitulates the human pathological epidermal
382	detachment seen in EB, pemphigoid diseases, burns, and severe drug reactions such
383	as Stevens-Johnson syndrome/toxic epidermal necrolysis. Loss-of-function mutations in
384	COL17A1 (McGrath et al., 1995) and COL7A1 (Christiano et al., 1993; Hilal et al., 1993)
385	lead to junctional and recessive dystrophic EB in humans, respectively. Therefore,
386	<i>Col17a1<sup>-/-</sup></i> and <i>Col7a1<sup>-/-</sup></i> mouse blistering also serves as an EB wound model. The

prominent hair loss in human COL17A1-mutated junctional EB might be reflected by the 387 reduction of HFs from the wound bed in *Col17a1<sup>-/-</sup>* blisters (**Figure 4D, 4E**), whereas the 388 hair loss in recessive dystrophic EB is not as severe as that in the junctional subtype 389 (Tosti et al, 2010), consistent with the maintenance of HFs in the dermis of Col7a1-/-390 mouse dorsal skin upon suction blistering (Figure 5D, 5E). It is plausible that recurrent 391 blistering can exhaust the pool of HFSCs, leading to delayed blister healing and 392 scarring, especially in recessive dystrophic EB. Taken together, the processes of 393 subepidermal blister healing highlight HFs as a target for treating the wounds of EB and 394 other blistering diseases. 395

Our study has some limitations, primarily due to the discrepancies between mice 396 and humans. First, eccrine sweat glands have been reported to contribute to wound 397 healing in human skin (Rittie et al, 2013). As murine back skin does not harbor sweat 398 glands, our study was unable to estimate the contribution of the sweat glands in human 399 settings. Second, although the skin-split level of human recessive dystrophic EB is 400 generally just beneath lamina densa (basement membrane), as was the case for the 401 Col7a1<sup>-/-</sup> blisters in our study, suction blistering on human recessive dystrophic EB 402 induces skin detachment in the lamina lucida, that is, between hemidesmosomes and 403 the lamina densa (Tidman & Eady, 1984). In addition, our study did not look into the 404 contribution of mesenchymal cells to blister healing, which has been described in 405 previous studies on epidermolysis bullosa (Chino et al, 2008; Fujita et al, 2010; linuma 406 et al, 2015; Tamai et al, 2011; Tolar et al, 2009; Webber et al, 2017). Further studies 407 are warranted to elucidate the role of mesenchymal cells in blister healing. 408

In closing, our study has revealed the imbalance between development and wound
regeneration in the skin blisters. Our findings of the healing processes pave the way for
tailored therapeutic interventions for epidermolysis bullosa, pemphigoid diseases and
other blistering diseases.

#### 413 Material and Methods

#### 414 Animals

C57BL/6 strain mice were purchased from Clea (Tokyo, Japan). Ins-Topgal+ mice 415 were obtained from RIKEN BRC (Tsukuba, Japan) (Moriyama et al, 2007). 416 K14CreER, Lrig1CreER, and R26R-confetti mice were purchased from the 417 Jackson Laboratory (Bar Harbor, Maine, USA). R26R-H2B-mCherry mice were 418 provided by RIKEN (Kobe, Japan). *Col17a1<sup>-/-</sup>* and hCOL17+;*Col17a1<sup>-/-</sup>* mice were 419 generated as previously described (Nishie et al., 2007). Col7a1<sup>-/-</sup> mice were 420 provided by Prof. Jouni Uitto (Heinonen et al., 1999). The institutional review board 421 of the Hokkaido University Graduate School of Medicine approved all animal 422 studies described below. 423

424

#### 425 Suction blisters

Suction blisters were produced on the neonatal murine dorsal skin (P1) using a syringe
and connector tubes. The negative pressure applied to the skin (generally for minutes)
was 523.4±1.3 mmHg (evaluated by an Ex Pocket Pressure Indicator PM-281 (AS ONE,
Osaka, Japan)). The diameter of the syringe attached to the skin was 4 mm. The size of
the typical blister was 3 mm in diameter.

431

#### 432 Histology

433 Mouse dorsal skin specimens were fixed in formalin and embedded in paraffin after

dehydration or were frozen on dry ice in an optimal cutting temperature (OCT)

435 compound. Frozen sections were fixed with 4% paraformaldehyde (PFA) or cold

acetone or were stained without fixation. Antigen retrieval with pH 6.0 (citrate) or pH 9.0 436 (EDTA) buffer was performed on deparaffinized sections. Sections were incubated with 437 primary antibodies overnight at 4°C. After being washed in phosphate-buffered saline 438 (PBS), the sections were incubated with secondary antibodies conjugated to FITC, 439 Alexa 488, Alexa 647 or Alexa 680 for 1 hr at room temperature (RT). The nuclei were 440 stained with propidium iodide (PI) or 4',6-diamidino-2-phenylindole (DAPI). The stained 441 immunofluorescent samples were observed using a confocal laser scanning microscope 442 (FV-1000 (Olympus, Tokyo, Japan) or LSM-710 (Zeiss, Oberkochen, Germany)). 443 For immunohistochemistry, horseradish peroxidase (HRP)-tagged secondary 444 antibodies were used. Sections were blocked with hydrogen peroxide, labeled with 445 antibodies, and counterstained with hematoxylin. For morphological analysis, 446 deparaffinized sections were stained with hematoxylin and eosin (H&E) by conventional 447 methods. Alkaline phosphatase staining was performed using a StemAb Alkaline 448 Phosphatase Staining Kit II (Stemgent, San Diego, California, USA). Images of 449 immunohistochemistry, and H&E- and alkaline phosphatase-stained sections were 450 captured with a BZ-9000 microscope (Keyence, Tokyo, Japan). 451 For whole-mount staining, mouse dorsal skin samples were fixed with 4% PFA and 452 immunolabeled or stained with the Alkaline Phosphatase Staining Kit II. For X-gal 453 staining of ins-Topgal+ mouse skin, a beta-galactosidase staining kit (Takara-bio, Shiga, 454 455 Japan) was used according to the provider's protocol. Briefly, dorsal skin samples were fixed with 4% PFA for 1 hr at 4°C and soaked in staining solution overnight at RT. 456 Tissues were mounted in a Mowiol solution. Images were observed with LSM-710, FV-457 458 1000 or BZ-9000 microscopes.

HF morphological stages were evaluated as previously described (Paus et al., 1999). 459 The length of the major axis of keratinocytes in the intact and regenerated epidermis 460 was measured using ImageJ (NIH, Bethesda, Maryland, USA) on K14-stained sections. 461 The quantification of the cells expressing a particular marker was performed as 462 previously described (Natsuga et al, 2016). 463 464 Antibodies 465 The following antibodies were used: anti-BrdU (Abcam, Cambridge, UK; BU1/75, Dako; 466 M0744), anti-phospho-Histone H3 (Ser10) (Merck Millipore, Billerica, Massachusetts, 467 USA), anti-loricrin (Covance, Princeton, New Jersey, USA), FITC-conjugated anti-CD3e 468 (BioLegend, San Diego, California, USA; 145-2C11), Alexa Fluor 488-conjugated anti-469 F4/80 (Affymetrix, Santa Clara, California, USA; BM8), FITC (fluorescein 470 isothiocyanate)-conjugated anti-Ly-6G (Beckman Coulter, Brea, California, USA; RB6-471 8C5), anti-COL4 (Novus Biologicals, Centennial, Colorado; NB120-6586), anti-COL7 472 (homemade (lwata et al, 2013)), anti- COL17 (Abcam; ab186415), anti-ITGA5 (Abcam; 473 EPR7854), anti-ITGA6 (BD Biosciences Pharmingen, San Diego, California, USA; 474 GoH3), anti-L332 (Abcam; ab14509), anti-laminin  $\beta$ 1 (Abcam; ab44941), anti-pan-475 cytokeratin (PROGEN, Wieblingen, Heidelberg, Germany; PRGN-10550), anti-476 cytokeratin 10 (Biolegend; Poly19054), anti-cytokeratin 14 (ThermoFisher, Waltham, 477 Massachusetts, USA; LL002). 478 479

480 BrdU labeling

- For proliferation analysis, 10 μg of BrdU (BD Biosciences Pharmingen) per head was
   intraperitoneally administered 4 hr before sacrifice.
- 483

#### **484** Transmission electron microscopy

The samples were taken from C57BL/6 mouse dorsal skin (P1) just after suction

486 blistering was performed. The samples were fixed in 5% glutaraldehyde solution,

487 postfixed in 1% OsO<sub>4</sub>, dehydrated, and embedded in Epon 812. The embedded

samples were sectioned at 1 µm thickness for light microscopy and thin-sectioned for

electron microscopy (70 nm thick). The thin sections were stained with uranyl acetate

and lead citrate and examined by transmission electron microscopy (H-7100; Hitachi,

491 Tokyo, Japan).

492

# 493 Lineage tracing

494 K14CreER:R26R-H2B-mCherry, Lrig1CreER:R26R-H2B-mCherry, K14CreER:R26R-

confetti, and Lrig1CreER:R26R-confetti mice were intraperitoneally treated with 0.5 mg
 of tamoxifen (T5648; Sigma-Aldrich, St. Louis, Missouri, USA) at P0. The dorsal skin

<sup>497</sup> samples were harvested four days later (P4).

498

#### **RNA sequencing and analysis**

Suction-blistered and control samples were collected at P2 at the same time of day to
exclude the effects of circadian oscillations on epidermal gene expression (Janich *et al*,
2013). The skin samples were treated with 0.25% trypsin EDTA overnight at 4°C. The
blistered and regenerated epidermis was collected by separating it from the dermis,

minced with a scalpel and suspended in 10% FCS DMEM. The cell suspension was 504 filtered through a 70 µm filter, and cell pellets were collected. Library preparation was 505 performed using an Illumina TruSeq RNA prep kit by following the manufacturer's 506 instructions. Briefly, following TRIzol extraction and chemical fragmentation, mRNA was 507 purified with oligo-dT-attached magnetic beads and reverse transcribed into cDNA. 508 509 Following a second strand synthesis step with DNA polymerase I and RNAse H, the resulting cDNA was subjected to end repair, A-tailing, and Illumina compatible adaptor 510 ligation. Following purification and PCR-mediated enrichment, libraries were purified 511 with AMPure XP beads and sequenced on a NextSeq 500 Illumina sequencer. 512 After guality controls were performed, the raw reads were aligned to the NCBIm37 513 mouse reference genome (mm9) using HiSat2 (Kim et al, 2015) (version 2.0.0) using 514 options -N 1 -L 20 -i S, 1, 0.5 -D 25 -R 5 --pen-noncansplice 20 --mp 1, 0 --sp 3, 0 and 515 providing a list of known splice sites. Expression levels were quantified using 516 featureCounts (Liao et al, 2014) with RefSeq gene annotation and normalized as TPM 517 using custom scripts. Differential expression analysis was performed using the edgeR 518 (Robinson et al, 2010) software package. After lowly expressed genes (1 count per 519 million in less than two samples) were filtered out, the treatment and control groups 520 were compared using the exact test method (Robinson et al., 2010). Genes with an 521 absolute log2-fold change greater than 1 and false discovery rate (FDR) less than or 522 523 equal to 0.05 were considered differentially expressed. Hierarchical clustering of gene expression profiles was performed on differentially expressed genes using only 524 Euclidean distances and the complete linkage method. TPM values were normalized as 525 526 Z-scores across samples, and the distances were computed. GO term, KEGG pathway

527	enrichment analysis on differentially expressed genes and GO term network
528	visualization were performed using the clusterProfiler R/Bioconductor package (Yu et al,
529	2012). To validate the enriched pathways, GSEA analysis was performed.
530	
531	Intrablister administration
532	Ten microliters of 1.8 or 9.0 mM CaCl $_2$ in PBS was administered by syringe into the
533	blisters just after the suction blistering procedure was performed.
534	
535	Statistics
536	Statistical analyses were performed using GraphPad Prism (GraphPad Software, La
537	Jolla, California, USA). P-values were determined using Student's t-test or one-way
538	ANOVA followed by Tukey's test. P-values are indicated as *0.01 <p<0.05,< td=""></p<0.05,<>
539	**0.001 <p<0.01, ****p<0.0001.="" ***0.0001<p<0.001,="" and="" as="" shown="" td="" the="" the<="" values="" were=""></p<0.01,>
540	means ± standard errors (SE), violin plots or connected with lines showing individual
541	mice.
542	
543	Mathematical modeling
544	A mathematical model proposed for epidermal cell dynamics (Kobayashi et al., 2016;
545	Kobayashi et al., 2018) was adapted to simulate epidermal wound healing. (For the
546	detailed mathematical formulation, see the Appendix Supplementary Methods and
547	Dataset EV2.) In this model, epidermal basal cells were represented as spherical
548	particles, with the cell diameter set to 10 $\mu m$ . Cells designated as epidermal SCs and
549	their progeny could undergo division on the basement membrane. Cell division was

described as a process of two initially completely overlapping particles gradually 550 separating into two distinct particles. When a newly created cell was not fully 551 surrounded by other cells, it was judged as being in a regeneration process and 552 immediately underwent a transition to an oblate spheroid shape with the long axis 553 increased by a factor of 2 (normal) or 1.5 (simulating *Col7a1<sup>-/-</sup>* and Ca-treated blisters) 554 while its volume was kept constant. The same division rate was assigned to all 555 proliferative cells, with an average division period of 57.6 [arb. unit]. Forces exerted on a 556 cell came from adhesion and excluded-volume interactions with other cells and with the 557 basement membrane. SCs were tightly bound and unable to detach from the basement 558 membrane, while the progeny were weakly bound so that they could detach from the 559 membrane via the ambient pressure: the detached cells were removed from the system. 560 The basement membrane was assumed to be a rigid flat surface, whose shape 561 remained unchanged over time. These interactions were calculated to obtain the time 562 evolution of the whole system by solving equations given in a previous report 563 (Kobayashi et al., 2018). The simulation region was set to 600 µm x 600 µm horizontally 564 with periodic boundary conditions. To prepare the initial conditions for the simulation of 565 subepidermal blister healing, we first ran a simulation with SCs placed on the basement 566 membrane until their progeny covered the whole surface. Then, we set the progeny to 567 be nonproliferative and created epidermal defects by removing the cells that were inside 568 569 a disk domain with a diameter of 480 µm.

570

571 Human samples

572	From the H&E-stained skin of patients with congenital or autoimmune subepidermal
573	blistering diseases (73 EB or 188 bullous pemphigoid (BP) samples, respectively), the
574	samples that met the following histological criteria were selected: (1) subepidermal
575	blisters or a skin split at the dermoepidermal junction; (2) re-epithelization in the area;
576	and (3) presence of HFs on the blister base. Three BP samples fulfilled all the criteria
577	(blisters 1, 2, and 3) and were observed with a Keyence BZ-9000 microscope. The
578	institutional review board of the Hokkaido University Graduate School of Medicine
579	approved all human studies described above (ID: 13-043 and 15-052). The study was
580	conducted according to the Declaration of Helsinki Principles. Participants or their legal
581	guardians provided written informed consent.
582	
583	Data availability
584	The datasets produced in this study are available in the following databases:
585	
586	- RNA-Seq data: Gene Expression Omnibus GSE154871
587	(https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE154871)
588	
589	Author contributions
590	Y. F. designed and performed the experiments, analyzed the data, interpreted the
591	results, and wrote the manuscript. M. W., S. T., H. N., H. K., Y. W., Y. M, A. L., V. P., H.
592	U., H. I., W. N., and S. O. performed the experiments and analyzed the data. K. O., Y.
593	K., and M. N. performed the mathematical modeling and wrote the manuscript. G. D.
594	designed and performed the experiments, analyzed the data and interpreted the results.

595 <u>H. S.</u> interpreted the results and supervised the study. K. N. conceived and designed 596 the experiments, analyzed the data, interpreted the results, wrote the manuscript and 597 supervised the study.

598

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- died while this manuscript was in revision. We dedicate this paper to him.
- 608

# 609 Conflict of interest

610 The authors declare that they have no conflict of interest.

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- 839

## 840 Figure Legends

#### Figure 1. Healing of subepidermal blisters in neonatal mice.

- A Schematic diagram of suction blistering and sample collection. A blister produced on
- <sup>843</sup> C57BL/6 wild-type (WT) mouse dorsal skin at P1. BM: basement membrane.
- **B-D** Blistered samples at P1. (B) Hematoxylin and eosin (H&E, top) and alkaline
- phosphatase (AP, bottom) staining. Hair follicles (HFs) remaining in the dermis
- (indicated by arrows). Scale bar: 500  $\mu$ m. (C)  $\alpha$ 6 Integrin (ITGA6, indicated by
- arrowheads) and type IV collagen (COL4, arrows) labeling (left). Laminin 332 (L332,
- arrows) staining (right). Scale bar: 100 μm. (D) Ultrastructural findings of blistered skin
- 849 (left image: blister roof, right image: blister bottom). Hemidesmosomes (white

arrowheads) and lamina densa (arrows) are indicated. Scale bar:  $1 \mu m$ .

**E** H&E (left), pan-cytokeratin (PCK, middle), and ITGA6 staining (right) at P2. The

<sup>852</sup> regenerated epidermis is indicated by arrowheads. Scale bar: 200 μm.

- **F** Keratin 14 (K14) and keratin 10 (K10) staining of the nonlesional (intact) and lesional
- (blistered) skin at P2 (upper images and inlets: sections, lower images: whole-mount
- imaging). HFs are indicated by arrows in the whole-mount images. Scale bar: 30 μm.

**G** H&E (top) and loricrin (LOR, bottom) staining at P3. Scale bar: 200 μm.

- <sup>857</sup> **H** H&E (left), PCK (middle), and LOR staining (right) at P4. Scale bar: 200 μm.
- <sup>858</sup> Data information: Blisters are indicated by stars. Representative images are shown from
- three or more replicates in each group.

# **Figure 2. Delayed HF growth during subepidermal blister healing.**

- A Heat map (Pearson's correlation) of differentially expressed genes between the
- blistered (regenerated) and control WT dorsal skin epidermis at P2 (n=3).
- **B** GO analysis of differentially expressed genes in the regenerated epidermis.
- 864 **C** Scatter plots of differentially expressed genes in the regenerated epidermis. <u>The red</u>
- adds represent upregulated genes, and the blue dots represent downregulated genes.
- 866 The gray dotted lines indicate |logFC|>1.
- **D** Hair canals in the regenerated (lesional) and nonlesional epidermis at P4 (indicated
- by asterisks). Scale bar:  $300 \ \mu m$ .
- **E** Quantification of hair canals in the lesional, nonlesional, and unaffected littermate
- s70 control epidermis at P4 (n=5 biological replicates). The data are shown as the mean ±
- SE (littermate control) or connected with lines showing individual mice. \*0.01<p<0.05,
- one-way ANOVA test, followed by Tukey's test.
- **F** HF morphogenesis stages at P4 in lesional, nonlesional, and unaffected littermate
- 874 control skin (n=5 <u>biological replicates</u>).
- **G** Whole-mount imaging of the blistered skin of ins-Topgal+ mice at P2. Scale bar:
- 876 **500 μm**.
- <sup>877</sup> Data information: Representative images are shown from three or more replicates in
- each group.

880	Figure 3. Predominant contribution of HF-derived keratinocytes to subepidermal
881	blister healing.

- A (Top) BrdU labeling of blistered samples at P2. Scale bar: 100 μm. BrdU-positive cells
- are indicated by arrows. Blisters are indicated by stars. (Bottom) Quantification of BrdU-
- positive cells in the epidermis (left) and HFs (right) (n=4 <u>biological replicates</u>). The data
- are shown as the mean ± SE. \*0.01<p<0.05, one-way ANOVA test, followed by Tukey's
- test. <u>NS, no significance.</u>
- **B**  $\alpha$ 5 integrin (ITGA5) labeling at P2 (left image: section, right image: whole-mount).
- Scale bar: 100 μm. Blister edges (epidermal tongue) and HFs are indicated by
- arrowheads and arrows, respectively. Blisters are indicated by stars.
- 890 **C** Lineage tracing strategy.
- **D** (Top) Sections of K14CreER:H2B-mCherry mice at P4. Scale bar: 100 μm. (Bottom)
- 892 Quantification of mCherry-positive cells (n=3).. The data from individual mice are
- sonnected by lines. Student's t-test. NS, no significance.
- E Whole-mount imaging of K14CreER:R26R-confetti samples at P4. Scale bar: 200 μm.
- <sup>895</sup> F (Top) Sections of Lrig1CreER:H2B-mCherry mouse skin at P4. Scale bar: 100 μm.
- (Bottom) Quantification of mCherry-positive cells (n=3). The data from individual mice
- are connected by lines. \*0.01<p<0.05, Student's t-test.
- **G** Whole-mount imaging of Lrig1CreER:R26R-confetti mouse samples at P4. Scale bar:
- 899 **200 μm**.
- Data information: Representative images are shown from three or more replicates in
   each group.
- 902

## **Figure 4. Effects of <u>HF reduction</u> on subepidermal blister healing.**

- A Type XVII collagen (COL17, arrowheads indicate the hair bulge) and laminin  $\beta$ 1
- 905 (LAMB1) labeling in WT dorsal skin sections (P1). Scale bar: 100 μm.
- **B, C** Blistered samples of *Col17a1<sup>-/-</sup>* mouse dorsal skin at P1. ITGA6 (indicated by
- arrowheads) and COL4 (arrows) labeling (B). L332 staining (C, arrows). Scale bar:
- 908 **100 μm**.
- **D** H&E staining of blistered skin from *Col17a1<sup>-/-</sup>* mice at P1. HFs detached from the
- dermis in *Col17a1<sup>-/-</sup>* skin are indicated by arrowheads. Scale bar: 500  $\mu$ m.
- **E** Whole-mount AP staining of the blister roof epidermis from *Col17a1<sup>-/-</sup>* mice (right) and
- littermate controls (left) at P1. Scale bar: 500 μm.
- **F** H&E (P2, left), ITGA6 (P2, middle) and LOR staining (P4, right) of *Col17a1<sup>-/-</sup>* mice
- (top) and littermate controls (bottom). The regenerated epidermis is indicated by
- 915 arrowheads. Scale bar: 200 μm.
- 916 **G** (Top) BrdU labeling of *Col17a1<sup>-/-</sup>* skin at P2. Scale bar: 100  $\mu$ m. (Bottom)
- 917 Quantification of BrdU-positive cells in the epidermis surrounding blisters (n= <u>3 (control)</u>
- <sup>918</sup> and 4 (*Col17a1-/-*) biological replicates). The data are shown as the mean ± SE.
- 919 Student's t-test. NS, no significance.
- 920 **H**, I (H) Lineage tracing of K14CreER:R26R-mCherry:*Col17a1*<sup>-/-</sup> at P4. Scale bar:
- $100 \,\mu$ m. (I) Quantification of mCherry-positive cells in the regenerated epidermis (n=3)
- <sup>922</sup> <u>biological replicates</u>). The data from individual mice are connected by lines.
- <sup>923</sup> \*0.01<p<0.05, Student's t-test.
- Data information: Blisters are indicated by stars. Representative images are shown from
- <sup>925</sup> three or more replicates in each group.

926 Figure 5. Involvement of keratinocyte shape transformation in subepidermal

- 927 blister healing.
- A Type VII collagen (COL7) labeling in WT dorsal skin sections (P1). Scale bar: 200 μm.
- **B** ITGA6/COL4 (left, indicated by arrows) and L332 labeling (right, indicated by arrows)
- in the blistered skin of *Col7a1<sup>-/-</sup>* mice at P1. Scale bar: 100  $\mu$ m.
- <sup>931</sup> **C** Schematic diagram of control, *Col17a1<sup>-/-</sup>*, and *Col7a1<sup>-/-</sup>* mouse skin splits. BM:
- basement membrane.
- **D** H&E staining of blistered skin from *Col7a1<sup>-/-</sup>* mice (right) and their littermate controls
- 934 (left) at P1. Scale bar: 200 μm.
- **E** Whole-mount AP staining of the blister roof epidermis from *Col7a1<sup>-/-</sup>* mice (right) and
- their littermate controls (left) at P1. Scale bar: 500  $\mu$ m.
- **F** K10/K14 (low magnification, left) and K14 (high magnification, middle and right)
- <sup>938</sup> labeling of *Col7a1<sup>-/-</sup>* mouse (bottom) and littermate control (top) blistered skin at P2.

939 Scale bar: 30 μm.

- **G** Quantification of BrdU-positive cells per μm HF length (n=55 HFs from three control
- and 143 HFs from four *Col7a1<sup>-/-</sup>* mice). The data are shown as violin plots. Student's t-
- 942 test. <u>NS, no significance.</u>
- 943 **H** Length of the major axis of keratinocytes in the regenerated epidermis (n=244 (control,
- L), and 132 ( $Col7a1^{--}$ , L) cells from four mice, respectively) and in the surrounding intact
- epidermis (basal cells; n=200 (control, NL), 299 (*Col7a1<sup>-/-</sup>*, NL), from four mice,
- respectively). NL: nonlesional area. L: lesional area. The data are shown as violin plots.
- <sup>947</sup> \*\*\*\*p<0.0001, one-way ANOVA test, followed by Tukey's test. <u>NS, no significance.</u>

- I K10/K14 (left) and K14 (high magnification, right) labeling of WT blistered skin treated
  with CaCl<sub>2</sub> (middle and bottom) or PBS (top) at P2. Scale bar: 30 μm.
- J Quantification of BrdU-positive cells per μm HF length (n=83 (PBS), 95 (1.8 mM
- <sup>951</sup> CaCl<sub>2</sub>), and 97 (9.0 mM CaCl<sub>2</sub>) HFs from four mice). <u>One-way ANOVA test, followed by</u>
- 952 <u>Tukey's test. NS, no significance.</u>
- 953 K Length of the major axis of keratinocytes in the regenerated epidermis (n=433 (PBS,
- L), 451 (1.8 mM CaCl<sub>2</sub>, L), and 425 (9.0 mM CaCl<sub>2</sub>, L) cells from four mice) and in the
- surrounding intact epidermis (basal cells; n=311 (PBS, NL), 279 (1.8 mM CaCl<sub>2</sub>, NL),
- <sup>956</sup> 302 (9.0 mM CaCl<sub>2</sub>, NL) cells from four mice). NL: nonlesional area. L: lesional area.
- <sup>957</sup> The data are shown as violin plots. \*\*\*\*p<0.0001, one-way ANOVA test, followed by
- 958 Tukey's test. <u>NS, no significance.</u>
- Data information: Blisters are indicated by stars. Representative images are shown from
- three or more replicates in each group. <u>The dashed and dotted lines in the violin plots</u>
- 961 show the median and quartiles, respectively.

963 Figure 6. Mathematical modeling of subepidermal blister healing.

A A particle-based model of subepidermal blister healing at the basal layer. Epidermal

basal cells (colored in blue), which do not divide, are placed on the basement

966 membrane (gray). Stem cells (SCs, green) give rise to progeny (simulating HF-derived

- cells; red) within epidermal defects or in the surrounding epidermis (IFE-derived cells;
- yellow). t: arbitrary time. See Movie EV1.
- **B** Contribution of each progeny cell within the epidermal defect or of surrounding
- 970 epidermis to subepidermal blister healing, measured as the ratio of the area occupied
- <sup>971</sup> by each progeny to the area of the initial epidermal defect.
- 972 **C** A model of subepidermal blister healing without SCs within epidermal defects. See

973 Movie EV2.

D Time course of subepidermal blister healing in control (A) and SC-depleted epidermal
 defects (C).

**E** Effects of the impaired flattening of keratinocytes upon epidermal regeneration. The

diameter of basal keratinocytes (long axis of the spheroid) in the regenerated vs.

surrounding epidermis was calculated as 1.5:1 (in contrast to 2:1 in Figure 6A). See

979 **Movie EV3**.

F Time course of wound healing for control (A) and less flattened keratinocytes in the
 regenerated epidermis (E).

982

# 983 Expanded View Figure Legends

# 984 Figure EV1. Healing processes of subepidermal blisters.

- A H&E (left) and PCK labeling (right) of blistered skin at P1 (WT). Scale bar: 100 μm.
- 986 **B** ITGA6 (arrowheads in the blister roof) and COL4 (arrows in the blister bottom)
- 987 labeling at P1 (WT). HFs that express ITGA6 on the dermal side are indicated by
- hashtags. Scale bar: 100  $\mu$ m (left) and 50  $\mu$ m (right).
- 989 C Electron microscopy of blistered skin at P1 (WT). Hemidesmosomes (white
- arrowheads) and the lamina densa (arrows) are indicated. Scale bar: 10  $\mu$ m (left) and 1
- 991 μ**m (right)**.
- <sup>992</sup> **D** AP staining of WT (left) and *Col17a1<sup>-/-</sup>* (right) blistered skin at P1. Scale bar: 100  $\mu$ m.
- **E** H&E (left), ITGA6 (middle), and ITGA5 (right) staining at P2 (WT). The regenerated
- 994 epidermis is indicated by arrowheads. ITGA5+ cells at the tip of the HFs are indicated
- by arrows. Blisters are indicated by stars. Scale bar: 100 μm.
- 996 **F** Schematic of the suction blister experiments and HF development/cycles.
- 997 **G** Quantification of immune cells (CD3, F4-80, and Ly6G) in the dermis of blistered WT
- and unaffected littermate control skin at P2 (n=4 biological replicates) and P4 (n=3
- <sup>999</sup> <u>biological replicates</u>). The data are shown as the mean ± SE. \*0.01<p<0.05, Student's t-
- 1000 test. NS, no significance.
- Data information: Blisters are indicated by stars. Representative images are shown from three or more replicates in each group.

1003

1004

## **Figure EV2. RNA-seq data on subepidermal blister healing.**

- **A** Volcano plot showing differentially expressed genes (DEG) between the blistered
- 1008 (regenerated) and control skin epidermis at P2. Significantly (|LogFC|>1; FDR<0.05) up-
- regulated and down-regulated DEG are shown in red and blue, respectively.
- 1010 **B** Bar plot summarizing GSEA enrichment results for selected up-regulated and down-
- regulated KEGG pathways. The normalized enrichment score (NES), p-value and FDR
   are shown.
- 1013 **C** GSEA enrichment plots of "Wnt signaling pathway", "Hedgehog signaling pathway"
- and "Melanogenesis" KEGG gene sets.
- **D** Network visualization of the top ten down-regulated and up-regulated (FDR<0.05) GO
- term clusters for different GO categories (Biological process, Molecular Function and
- 1017 Cellular Component). Node size reports the number of enriched genes in each GO term
- 1018 (gene numbers in bottom panels). Nodes are colored as a pie chart depicting the
- proportion of down-regulated (blue) and up-regulated (red) genes in each GO term.
- 1020 Edge thickness depicts the number of shared genes between GO terms.

- **Figure EV3. Lineage tracing of subepidermal blister healing.**
- **A** Blistered area of K14CreER:R26R-confetti (left) and Lrig1CreER:R26R-confetti (right)
- 1024 mouse skin samples at P4. Scale bar: 100  $\mu$ m.
- <sup>1025</sup> **B** Phospho-Histone H3 (PH3) staining of blistered skin at P2 (WT). Scale bar: 100 μm.
- 1026 **C** PH3 staining (arrowhead) of blistered skin at P2 (Lrig1CreER:R26R-H2BmCherry).
- 1027 Scale bar: 100 μm.
- 1028 D Quantification of mCherry-positive cells during lineage tracing (n=3 biological
- 1029 <u>replicates</u>). The data are shown as the mean ± SE.
- 1030 Data information: Blisters are indicated by stars. Representative images are shown from
- three or more replicates in each group.

# **Figure EV4. Dependence of subepidermal blister healing on flattening ratio and**

# **SC arrangement.**

- A Arrangements of the SCs within epidermal defects (dispersed, 2 cells grouped, 4 cells
- 1036 grouped, and 8 cells grouped) at t = 0.
- **B** Time course of subepidermal blister healing for different keratinocyte flattening ratios
- 1038 (1.0-2.0), each with four SC arrangements.
- **C** Time to full recovery (100% healing rate) for different keratinocyte flattening ratios,
- averaged over four SC arrangements. The data are shown as the mean ± SD.

# **Figure EV5. Subepidermal blister healing in humans.**

- 1043 H&E staining of human subepidermal blister samples with re-epithelized areas (blisters
- 1044 1, 2, and 3). Blisters are indicated by stars. The regenerated epidermis from HFs is
- indicated by arrows. Scale bar: 300 μm.



# Figure 2. Delayed HF development during subepidermal blister healing



Figure 3. Predominant contribution of HF-derived keratinocytes to subepidermal blister healing





Col17a1-/-





# Figure 6. Mathematical modeling of subepidermal blister healing



Figure EV1. Healing processes of subepidermal blisters



# Figure EV2. RNA-seq on blister healing



## В С А Lrig1CreER: R26R-H2B-mCherry K14CreER: Lrig1CreER: R26R-confetti R26R-confetti P4 Ρ4 P2 WT PH3 DAPI P2 PH3 mCherry DAP GFP RFP CFP YFP DAPI D 200mCherry+ cells/mm2 K14CreER 150 Lrig1CreER 100-50-Days after 0-2 3 blistering 1 0 ▲ P1 P2 P4

Figure EV3. Lineage tracing of subepidermal blister healing

# Figure EV4. Dependence of subepidermal blister healing on flattening ratio and SC arrangement



# Figure EV5. Subepidermal blister healing in humans

