

# **Ruxolitinib-based senomorphic therapy mitigates cardiomyocyte senescence in septic cardiomyopathy by inhibiting the JAK2/STAT3 signaling pathway**

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#These authors contribute equally to this work.

**Table S1**

Briefly, Western blot analyses were performed using commercially available antibodies:

Antibodies		
anti-Bcl2	15071S, CST	1:1000
anti-Bax	5023S, CST	1:1000
anti-Cleaved-caspase 3	9661S, CST	1:1000
Anti-P21	A22460, Abclonal	1:1000
Anti-P16	Sc-1661, Santa	1:100
Anti-P53	A21630, Abclonal	1:1000
Anti-OPA1	A9833, Abclonal	1:1000
Anti-Fis1	AF8268, Beyotime	1:1000
Anti-Mfn2	A19678, Abclonal	1:1000
Anti-Cyto-C	A4912, Abclonal	1:1000
Anti-Sirt3	AF5303, Beyotime	1:1000
Anti-GRP78	AF0171, Beyotime	1:1000
Anti-CHOP	AF6684, Beyotime	1:1000
Anti-ATF4	10835-1-AP, Poteintech	1:1000
Anti-p-JAK2	ET1607-34, HUABIO	1:1000
Anti-JAK2	ab108596, Abcam	1:1000
Anti-p-STAT3	ET1603-40, HUABIO	1:5000
Anti-STAT3	Ab68153, Abcam	1:1000
Anti- $\gamma$ -H2AX	ET1602-2, HUABIO	1:1000
Anti-GAPDH	HRP-60004, Proteintech	1:10000
Anti-SOD2	ab68155, Abcam	1:1000
Anti-ac-SOD2	ab137037, Abcam	1:1000
Anti-p-Drp1	3455, CST	1:1000
Anti-t-Drp1	8570, CST	1:1000

**Table S2.** The primer sequences of qRT-PCR.

Primer	Forward	Reverse
Mouse		
<i>P16</i>	CGAACTCTTTCGGTCGTACCC	CGAATCTGAACCGTAGTTGAGC
<i>P21</i>	ATGTCCAATCCTGGTGATGTC	GAAGTCAAAGTTCACCGTTC
<i>P53</i>	TGGAAGGAAATTTGTATCCCGA	GTGGATGGTGGTATACTCAGAG
<i>Il-6</i>	CCGGAGAGGAGACTTCACAG	TCCACGATTTCCCAGAGAAC
<i>Il-1<math>\beta</math></i>	TGCCACCTTTTGACAGTGATG	TGATGTGCTGCTGCGAGATT
<i>TNF-<math>\alpha</math></i>	AGGGTCTGGGCCATAGAACT	CCACCACGCTCTTCTGTCTAC
<i>Cxcl1</i>	ACCCAAACCGAAGTCATAGCC	TTGTCAGAAGCCAGCGTTCA
<i>Cxcl3</i>	ACCCAGACAGAAGTCATAGCCA	CTTCATCATGGTGAGGGGCT
<i>Cxcl10</i>	CAACTGCATCCATATCGATGAC	GATTCCGGATTCAGACATCTCT
<i>Ccl2</i>	CACTCACCTGCTGCTACTCA	GCTTGGTGACAAAACTACAGC
<i>Ccl5</i>	GTATTTCTACACCAGCAGCAAG	TCTTGAACCCACTTCTTCTCTG
<i>Gdf15</i>	CCTCCATCTTCTATCTGAGCCTG	CCATGTCGCTTGTGTCCTTTC
<i>Edn3</i>	CCCTGGTGAGAGGATTGTGTC	CCTTGTCTTGTAAGTGAAGCAC
<i>TGF<math>\beta</math>2</i>	CTCGACATGGATCAGTTTATGC	ATAAACCTCCTTGGCGTAGTAC
<i>Sirt3</i>	ATCCCGACTTCAGATCCCC	CAACATGAAAAAGGGCTTGGG
<i>mt-ND1</i>	CTAATCGCCATAGCCTTCCTAA	GTTGTTAAAGGGCGTATTGGTT
<i>mt-ND2</i>	TTTACCCGCTACTCAACTCTAC	CATCCTATGTGGGCAATTGATG
<i>mt-ND3</i>	CTACTTCCACTACCATGAGCAA	TGTTCAATCATATGCTAGGCCT
<i>mt-ND4</i>	GGATCCACAGCCGTACTATAAT	TGAAGGGGGTAGAGCTAGATTA
<i>mt-ND6</i>	GTTAGTGGGTTTGTGGTTGTT	CCCAAGTCTCTGGATATTCCTC
<i>mt-Cytb</i>	CCACTCATTCAATTGACCTACCT	GCTCCGTTTGCGTGTATATATC

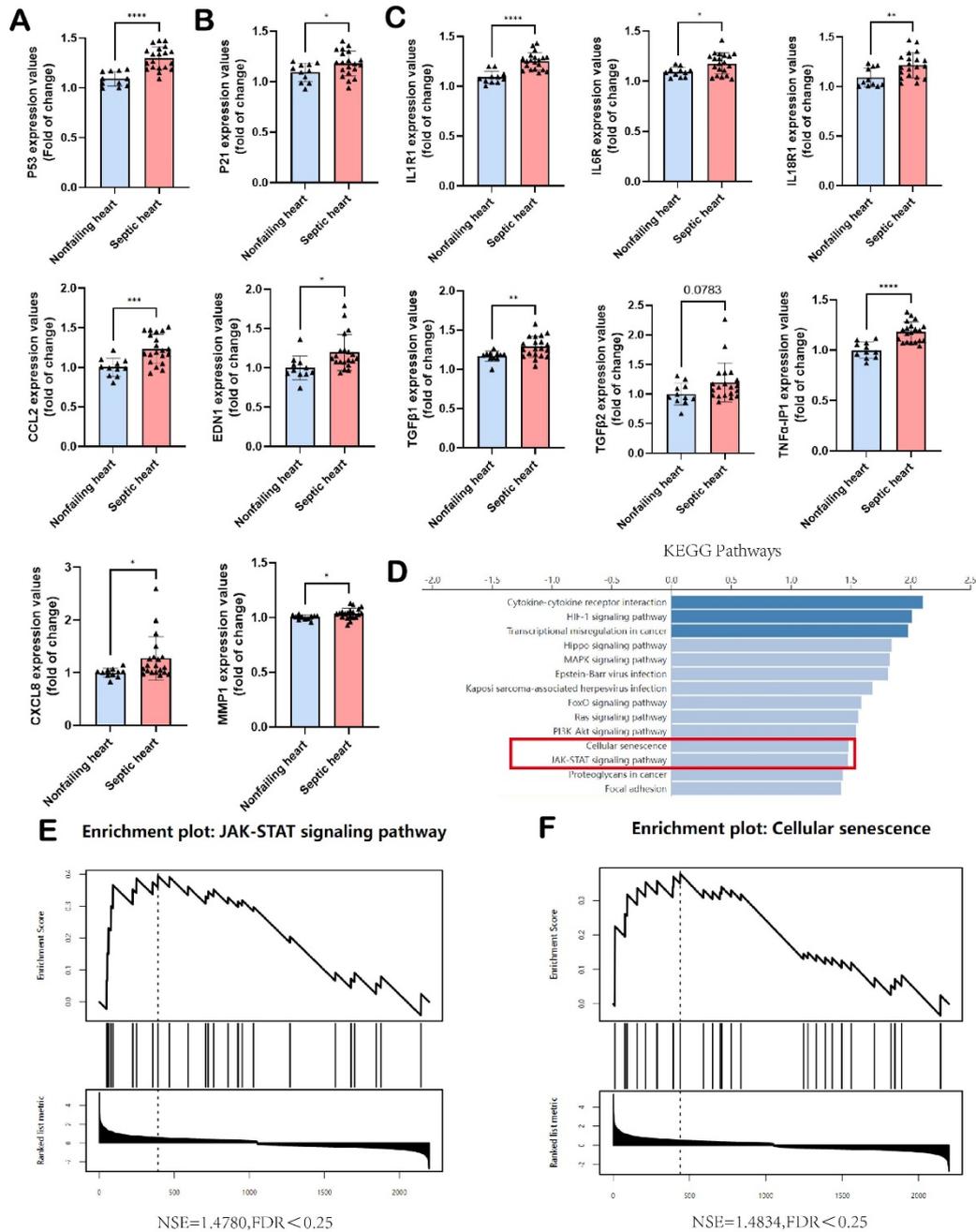
<i>Hprt</i>	GTTGGATACAGGCCAGACTTTGTT	GATTCAACTTGCGCTCATCTTAGGC
<i>18s</i>	ACCGCAGCTAGGAATAATGGA	CAAATGCTTTCGCTCTGGTC
<i>Psmb8</i>	GGACCAGGACTTTACTACGTAG	CAGAATAGTTGTCTCTGTGGGT
<i>Psmb9</i>	CAGGTATATGGAACCATGGGAG	TGCGTCCACATAACCATAAATG
<i>Irf7</i>	AAATAGGGAAGAAGTGAGCCTC	CCCTTGACATGATGGTCACAT
<i>Tap1</i>	GAATCTTCTCCCTGTTGGTTCC	TGTTCCAGTACAGTAATCCAGC
Primer	Forward	Reverse
Rat		
<i>P16</i>	ATCTCCGAGAGGAAGGCGA	TTGCCCATCATCATCACCTGTA
<i>P21</i>	CAGACCAGCCTAACAGATTCT	AGACACACTGAATGAAGGCTAA
<i>P53</i>	GCCATCTACAAGAAGTCACAAC	CCAGATACTCAGCATAACGGATT
<i>Il-6</i>	ACCAGAGGAAATTTTCAATAGGC	TGATGCACTTGCAGAAAACA
<i>Il-1<math>\beta</math></i>	AGGAGAGACAAGCAACGACA	TTGTTTGGGATCCACACTCTCC
<i>TNF-<math>\alpha</math></i>	AGGGTCTGGGCCATAGAACT	CCACCACGCTCTTCTGTCTAC
<i>Cxcl1</i>	TGCACCCAAACCGAAGTCAT	ACTTGGGGACACCCTTTAGC
<i>Cxcl3</i>	CCCAGACAGAAGTCATAGCCAC	AGGTCCTCCATCACCGTACA
<i>Cxcl10</i>	GTCAGAACAACTTACCACCAC	AGGAGTTCCACTTTGTACAGTC
<i>Ccl2</i>	CTGTCTCAGCCAGATGCAGTT	TTCTTTGGGACACCTGCTGC
<i>Ccl5</i>	GCTTCAGGTACCATGAAGATCT	GCTGCTGGTGTA AAAAATACTCC
<i>Gdf15</i>	TACTCAGTCCAGAGGTGCGA	CTGGTGATGTCCCAGGGC
<i>Edn3</i>	GTTTCACAGGGAAATCGTTTGA	TGAGTGTTTACTTTCCGGGAAGA
<i>TGF<math>\beta</math>2</i>	GTAAATGCAGCTAAAGTCCTCG	GATGAATCAAACTCCCTCACG
<i>mt-ND1</i>	CTACATACA ACTACGCAAAGGC	GCTTAGAGCTAGTGTAAGGGAG
<i>mt-ND2</i>	TCCTAAACCCA ACTATCACCAC	TGATTTTTCGTGTTTGGGTCTG

<i>mt-ND3</i>	CCGAAAAAGCAAACCCATATGA	AGGCGATTCTAGGTCGAATAG
<i>mt-ND4</i>	CCATCATTCTAGACCCCCTAAC	CGTAGGCAGATTGAGCTAGTTA
<i>mt-ND5</i>	CATGACAAAACCACGATACTCC	AGGATTGTAATGAGTAGGGCTG
<i>mt-ND6</i>	AGTGGATGTATTGGGTGCTTAA	ACCAACTCCATAAAAAGCCCTA
<i>mt-Cytb</i>	ATCTGCTATCCCTTACATTGGG	GTGTTAGGGTTGCTTTGTCTAC
<i>Hprt</i>	GCTGAAGATTTGGAAAAGGTGT	ACAGAGGGCCACAATGTGAT
<i>Psmb8</i>	TATCTGCGGAATGGGGAACG	GCTGCCTGTGGAGAACATCT
<i>Psmb9</i>	GCTGCAAACATAGTGAAGAACA	ATTGCAAAGGGCTGTCAATTA
<i>Irf7</i>	ACTTAGCCCGGAGCTTGGAT	GTTTGCAACCCAGCATTTCCT
<i>Tap1</i>	GGAGCCCACGATTCATCTC	ACTCGGGGCTCTCATACAGG

## **Supplementary Materials**

### **H<sub>2</sub>O<sub>2</sub>- and D-gal-induced cell models**

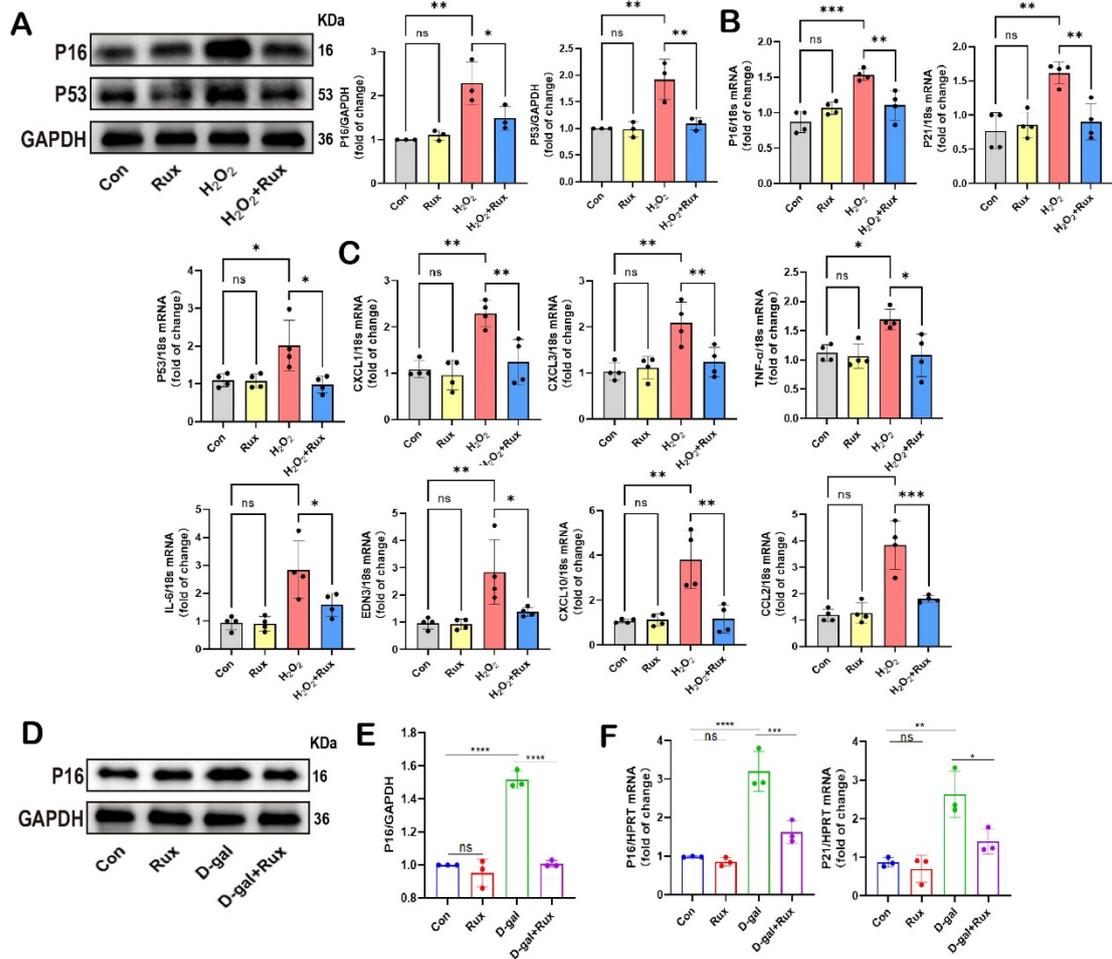
400 $\mu$ M H<sub>2</sub>O<sub>2</sub> was used to stimulate NRCMs for 3 hours to construct a cell model different from that of LPS. The study included a control group of NRCMs, a group of NRCMs treated with 1 $\mu$ M of Rux, a group of H<sub>2</sub>O<sub>2</sub>-induced NRCMs, and a group of H<sub>2</sub>O<sub>2</sub>-induced NRCMs treated with 1 $\mu$ M Rux. The Rux therapy began 3 hours after H<sub>2</sub>O<sub>2</sub> stimulation until 12 hours. D-galactose (D-gal; #G0750, Sigma-Aldrich, USA) was used at a concentration of 10 g/L. The grouping was similar to that described above. The Rux therapy began 6 hours after D-gal until 24 hours.



**Figure S1 Bioinformatics analysis based on human heart samples obtained from 11 donors whose hearts did not fail and 20 patients with SCM using GSE79962 dataset**

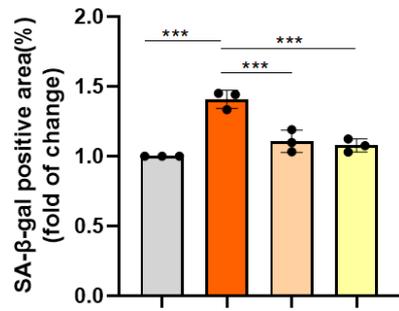
(A, B) Relative expression levels of senescence markers, including P21 and P53, between nonfailing hearts and septic hearts. (C) Relative expression levels of SASP-related genes, including IL-1R1, IL-6R, IL-18R1, TNF $\alpha$ -IP1, CCL2, EDN1, TGF $\beta$ 1, CXCL8, and MMP-1, were compared between nonfailing hearts and septic hearts (D) KEGG analysis revealed that cellular senescence and JAK-STAT signaling pathway were changed between nonfailing hearts and septic hearts (E) GSEA analysis revealed that cellular senescence was induced in septic hearts compared with non-failing

hearts. (F) GSEA analysis revealed that cellular senescence was activated in septic hearts compared with non-failing hearts.



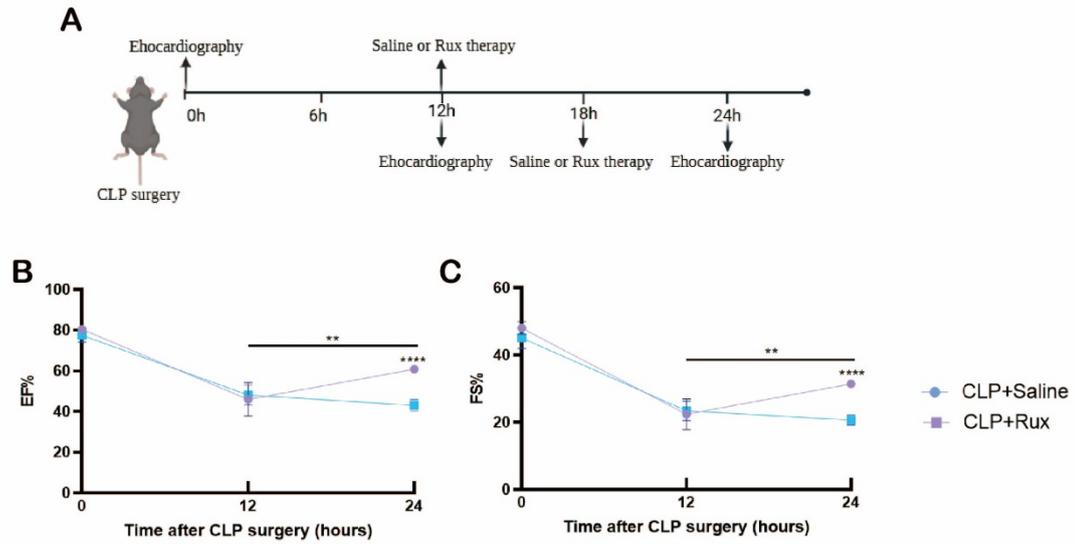
**Figure S2 Rux alleviates cellular senescence in H<sub>2</sub>O<sub>2</sub>- and D-gal induced cell models.**

(A) Representative Western blot bands and quantitative analysis of P16 and P53 in NRCMs treated with Rux or not post H<sub>2</sub>O<sub>2</sub> stimulation compared with the control group. N = 3. (B) The mRNA levels of P16, P21 and P53 in NRCMs treated with Rux or not post H<sub>2</sub>O<sub>2</sub> stimulation compared with the control group. N = 4. (C) The mRNA levels of SASP-related genes were detected using qRT-PCR in NRCMs treated with Rux or not post H<sub>2</sub>O<sub>2</sub> stimulation, including IL-6, TNF-α, CXCL1, CXCL3, CXCL10, CCL2, and EDN3. N = 4. (D, E) Representative Western blot bands and quantitative analysis of P16 in NRCMs treated with Rux or not post D-gal stimulation compared with the control group. N = 3. (F) The mRNA levels of P16 and P21 in NRCMs treated with Rux or not post D-gal stimulation compared with the control group. N = 3. Data are presented as mean ± SD. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001. Con, control; Rux, ruxolitinib; D-gal, D-galactose.



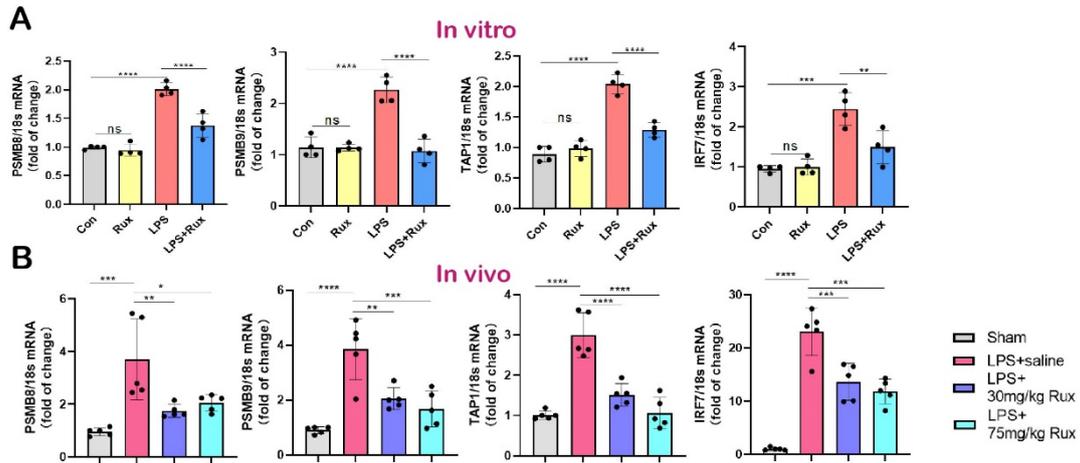
**Figure S3**

Quantitative analysis of SA-β-gal staining in mouse hearts treated with 30 mg/kg and 75 mg/kg of Rux or saline post CLP-surgery compared with the Sham group. Scale bar = 20 μm. Data are presented as mean ± SD. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001. SA-β-gal, senescence-associated β-galactosidase.



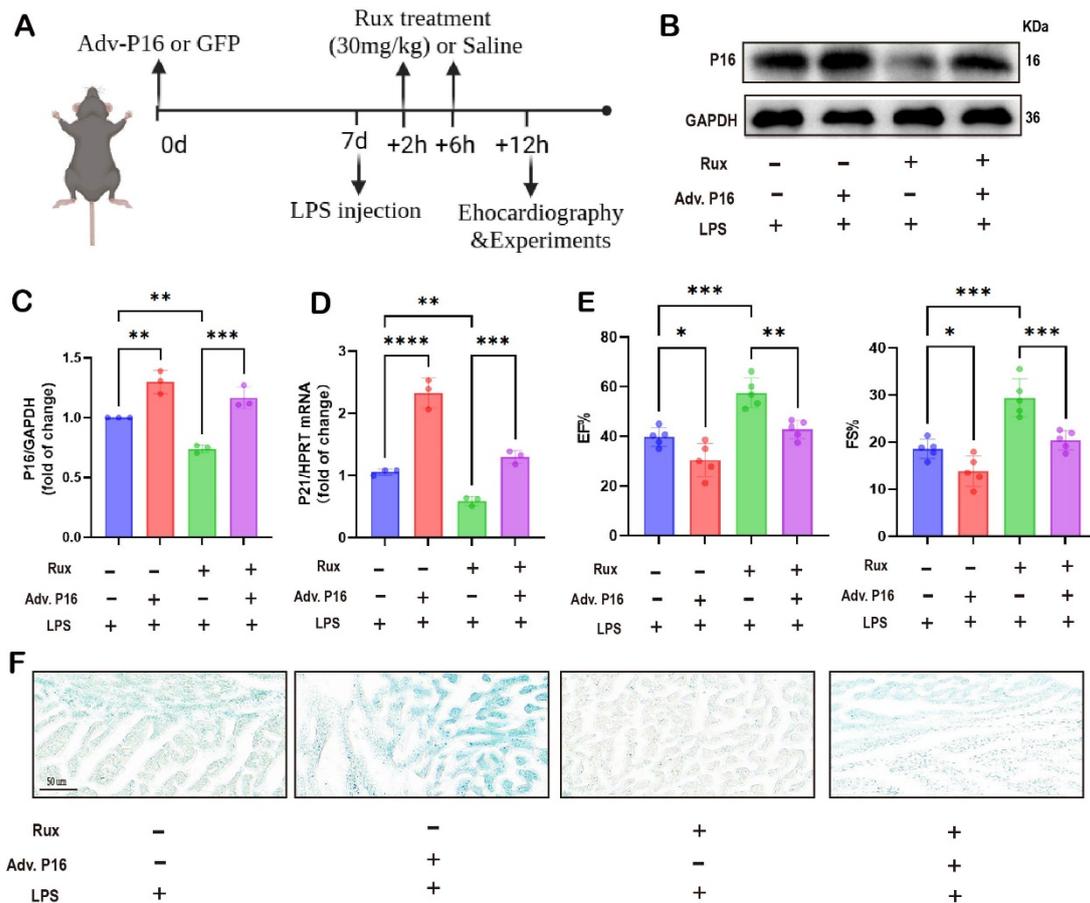
**Figure S4 Rux treatment restores cardiac function in the text of SCM.**

(A) Schematic diagram of the experiments. (B, C) Cardiac function indices were measured by echocardiography in mice treated with 30 mg/kg Rux or saline post LPS injection compared with the Sham group. N = 5. Data are presented as mean  $\pm$  SD. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001. CLP, cecal ligation and puncture; EF%, ejection fraction; FS%, fractional shortening.



**Figure S5 Verification of the downstream genes of the JAK2/STAT3 pathway.**

(A) The mRNA levels of PSMB8, PSMB9, TAP1 and IRF7 were detected using qRT-PCR in NRCMs treated with Rux or not post LPS stimulation compared with the control group. N = 4. (B) The mRNA levels of PSMB8, PSMB9, TAP1 and IRF7 were detected using qRT-PCR in mouse hearts treated with 30 mg/kg and 75 mg/kg of Rux or saline post LPS injection compared with the Sham group. N = 5. Data are presented as mean  $\pm$  SD. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001.



**Figure S6 Rux improves cardiac function in septic heart disease partly through cellular senescence.** (A) Schematic diagram of the experiments. (B, C) Representative Western blot bands and quantitative analysis of P16 in mouse hearts transfected with adenovirus P16 or GFP treated with Rux or not post LPS injection. N = 3. (D) The mRNA levels of P21 in mouse hearts transfected with adenovirus P16 or GFP treated with Rux or not post LPS injection. N = 3. (E) Cardiac function indices were measured by echocardiography in mouse hearts transfected with adenovirus P16 or GFP treated with Rux or not post LPS injection. N = 5. (F) Representative images of SA- $\beta$ -gal staining in mouse hearts transfected with adenovirus P16 or GFP treated with Rux or not post LPS injection. Scale bar = 50  $\mu$ m. Data are presented as mean  $\pm$  SD. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001. Adv, adenovirus; LPS, Lipopolysaccharide; Rux, ruxolitinib.

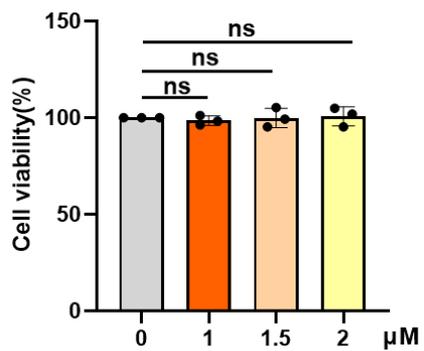


Figure S7 Cell viability assay