



HP infection sensitized GC cell lines AGS and MKN-45 to 5-FU treatment and induced higher DNA damage and oxidative stress

(A) The colony formation of HP-infected or uninfected GC cell lines after treated with PBS or 20uM 5-FU. (B) Immunofluorescence analysis of ASC in HP-infected or uninfected GC cell lines treated with PBS or 20 μ M 5-FU. (C) The level of p-H2A.X was detected using 5-FU treatment with or without *H. pylori* infection after 6h in AGS and MKN-45 cell lines. (D) The ROS assay showed different ROS density after treatment of HP infection and 5-FU in AGS and MKN-45 cell lines. (E) Kaplan-Meier analysis of overall survival (PFS) in p-stage III gastric cancer patients who received 5-FU chemotherapy (17 vs 17) based on HP infection status. * P<0.05, ** P<0.01, *** P<0.001.



The overexpression of METTL3 sensitized GC cells to 5-FU treatment and induced more DNA damage

(A) The cell profiling of METTL3 by Western Blot. (B)The immunohistochemistry analysis showed expressions of METTL3 in gastric cancerous tissues with or without HP infection. (C) The immunofluorescence staining demonstrated different p-H2A.X expressions after treatment of 5-FU(20 μ M) and METTL3-OE. (D) The colony formation assay of AGS and MKN-45 after 5-FU and METTL3-OE treatment. (E). The ROS assay showed different ROS density after treatment of overexpression and 5-FU. (F) The IF of p-H2A.X showed DNA damage after treatment of overexpression and 5-FU. (G) The IF staining(CK7, Villin and CEA) of gastric cancer organoid culture .* P<0.05, ** P<0.01, *** P<0.001.



The prediction of binding sites between p-P65 and METTL3 promoter and validation of shMETTL3

(A) The NGS-seq pathway analysis showed NF- κ B signaling pathway ranked top between HP-positive/HP-negative gastric cancer tissues. (B) WB showed p-P65 and METTL3 expression after treatment of 5 μ M TNF- α (3h), Bay-11-7082(6h). (C) The potential binding sites of NF- κ B on promoter sequence of METTL3 predicted by Jaspar(blue) and TFbinding(yellow). Red indicated binding sites predicted by both. (D) The WB and qRT-PCR analysis confirmed both shMETTL3 effective in AGS and MKN-45 cell lines. * P<0.05, ** P<0.01, *** P<0.001.



The prediction of the downstream target BRD2 and the knockdown of BRD2 sensitized GC cells to 5-FU treatment

(A) Three overlapping potential targets were predicted by NGS-seq, RMBase and m^6A

seq. (B) Analysis of m⁶A-seq. (C) Analysis of RMBase prediction. (D) Analysis of NGSseq. (E) The WB and qRT-PCR analysis showed negative results of other potential targets. (F) The WB analysis showed BRD2 was regulated by METTL3 after HP infection and shMETTL3-2 treatment. (G)The MeRIP-PCR showed knockdown of METTL3 significantly decrease the m⁶A modification level of BRD2. (H) The expression levels of BRD2 in 30 human GC tissues and 30 human normal tissues. (I) The expression level of BRD2 in 17 HP-positive and 17 HP-negative GC tumor tissues. (J) The IHC showed the expression level of BRD2 was highly expressed in HP-negative GC tissues than HP-positive GC tissues. (K) The IF of ASC after 5-FU and shBRD2 treatment. (L) The qRT-PCR tests on SS1-treated mice showed expression levels of METTL3 and BRD2. (M) The growth analysis of the organoid culture after shBRD2 and 5-FU treatment. (N) The ROS detection after treatment of shBRD2 and 5-FU in AGS and MKN-45. (U) The colony formation assay of AGS and MKN-45 cell lines after 5-FU and shBRD2. * P<0.05, ** P<0.01, *** P<0.001.



The rescue experiments confirmed that METTL3 could regulate apoptosis via BRD2

(A) The flow cytometry showed the apoptosis of AGS and MKN-45 after treatment of shMETTL3, HP infection and 5-FU (20 μ M). (B) The colony formation assay analysis of AGS and MKN-45 after treatment of shMETTL3, HP infection and 5-FU. (C) The flow cytometry showed the apoptosis of AGS and MKN-45 after oeMETTL3, oeBRD2, and 5-FU. (D) The colony formation assay analysis of AGS and MKN-45 after treatment of oeMETTL3, oeBRD2, and 5-FU. * P<0.05, ** P<0.01, *** P<0.001.



The prediction and binding capacity of YTHDF2 to BRD2

(A) The expression levels of both YTHDF1 and YTHDF2 after 3h and 6h of HP infection by qRT-PCR. (B) The RMBase prediction analysis of recognizer protein of BRD2. (C) The TCGA data showed prognosis data of YTHDF1 and YTHDF2. (D) The expression of BRD2 after knockdown of YTHDF1. (E) The expression of BRD2 after knockdown of YTHDF2. (F) The half-life of BRD2 after HP infection and siYTHDF2 treatment. (G) The RIP assay showed the capacity of YTHDF2 binding to BRD2. (H) The predicted binding sites with P1, P2 and P3 of BRD2 and YTHDF2 by Jaspar. (I) The key point mutations (D395A and W398A) of METTL3. (J) The IF of ASC in AGS and MKN-45 cell lines after 5-FU, shBRD2 and METTL3-mut treatment. *, P<0.05, **, P<0.01, ***, P<0.001.

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MA0848.1 FO)	KO4 5.3376	9 0.854179 seq1	1794	1800 +	CTAAA	CA								
MA0848.1 FO)	KO4 5.2210	2 0.851873 seq1	590	596 +	GTACA	TA				· ·	2	3 4	5 6	7
MA0848.1 FO)	KO4 5.1979	4 0.851417 seq1	576	582 +	GTAAT	CA								
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The COIP-MS analysis of BRD2 and prediction of FOX4

(A) The COIP-MS analysis of BRD2 contained FOXO4, the potential transcriptional factor of FLIP. (B) The potential transcription factor FOXO4 was predicted to bind with FLIP by Jaspar. (C) The motif of binding site of FOXO4 and promoter sequence of FLIP.

Primary antibody		
Total Gasdermin D	Abcam	ab209845
Cleaved Gasdermin D	Abcam	ab215203
Total PARP	Cell signaling Technology	9532
Cleaved PARP	Abcam	ab32064
METTL3	Cell signaling Technology	86132
YTHDF1	Cell signaling Technology	86463
YTHDF2	Proteintech	24744-1-AP
P65	Cell signaling Technology	8242
p-P65	Cell signaling Technology	3033
BRD2	Abcam	ab245436
FOXO4	Abcam	EPR5442
FLIP	Abcam	ab8421
Caspase8	Abcam	ab32397
Cleaved Caspase8	Cell signaling Technology	8592
GAPDH	Cell signaling Technology	97166
Secondary antibody		
Anti-rabbit IgG	Cell signaling Technology	7074
Anti-mouse IgG	Cell signaling Technology	7076

Supplementary Table. 1 Antibodies used in this study

Primer sequence	
β-actin	Forward: 5'-ATTGCCGACAGGATGCAGAA-3' Reverse: 5'-GCTGATCCACATCTGCTGGAA-3
METTL3	Forward: 5'-GAAAGACTATCTCCTGGCACTC-3' Reverse: 5'-GTACCTTTGCTTGAACCGTG-3'
BRD2	Forward: 5'-TCGCATGGCCATTCCGGCAG-3' Reverse: 5'-AAGGGGCTGGGCTGGAGGAG-3'
YTHDF1	Forward: 5'-CAAGCACACAACCTCCATCTTCG-3' Reverse: 5'-GTAAGAAACTGGTTCGCCCTCAT-3'
YTHDF2	Forward: 5'-TAGCCAGCTACAAGCACACCAC-3' Reverse: 5'-CAACCGTTGCTGCAGTCTGTGT-3'
FLIP	Forward: 5'-TTACACAGGCAGAGGCAAGA-3' Reverse: 5'-GCTGGACTGGGTGTACTTCT-3'
METTL3-1-CHIP	Forward: 5'-GCATCTCAGTGTCACCTTACCT-3' Reverse: 5'-TTCCCAGATAATTTCCTACAGCAT-3' (Primer1: -1664~-1152 bp)
METTL3-2-CHIP	Forward: 5'-CCCACTGTTCTTATATTTTCAAGGT-3' Reverse: 5'-TGTCTTAAACAAATAGGTTCCCAGA-3' (Primer2: -1147~-1065 bp)
METTL3-3-CHIP	Forward: 5'-GTGTATGTCTTTTTCTCTCTCTAGGG-3' Reverse: 5'-GGCCTCTGCTGAAGGAAGAA-3' (Primer3: -855~-620 bp)
BRD2-1-CHIP	Forward: 5'-GTCTGTCCACCCCCTCTACT-3' Reverse: 5'-GTCTGTCCACCCCCCTCTACT-3'
BRD2-2-CHIP	Forward: 5'- TTAGCGGGTTATGCTGGACC-3' Reverse: 5'- AGCATCTTGACCGCAAGGAA-3'
BRD2-3-CHIP	Forward: 5'-AGGGCCCTGTTTTGAGATTGT-3' Reverse: 5'- CCCCTTCTTCCCTCCCCAT-3'

Supplementary Table. 2 Sequences of primers used in this study