Premature CD4+ T Cells Senescence Induced by Chronic Infection in Patients with Acute Coronary Syndrome

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Supplementary Figure 1. Increased percentage of CD3+CD4+CD28null effector T cells and decreased percentage of CD3+CD4+CD25+CD62L+ Treg cells with advancing age in ACS patients. PBMCs were incubated with different antibodies to identify T cell subsets. (A) CD3+CD4+ T cells were gated for further analysis. (B, C and D) The frequencies of CD3+CD4+CD28null effector T cells were examined from gated cells isolated from a young healthy donor (B, 0.3%), an elderly healthy donor (C, 4.1%), and an ACS patient (D, 10.8%), respectively. (E, F and G) The frequencies of CD3+CD4+CD25+CD62L+ Treg cells were determined from gated cells that were isolated from a young healthy donor (E, 7.2%), an elderly healthy donor (F, 5.8%), and an ACS patient (G, 2.1%), respectively.
Supplementary Figure 2. Decreased percentage of CD3+CD4+CD45RA+CD62L+ naïve T cells and compensatory increase of CD3+CD4+CD45RO+ memory T cells with advancing age in ACS patients. (A) CD3+CD4+ T cells were gated and selected for further analysis. (B, C and D) The frequencies of CD3+CD4+CD45RA+CD62L+ naïve T cells were determined from gated T cells that were isolated from a young healthy donor (B, 43.6%), an elderly healthy donor (C, 23.3%), and an ACS patient (D, 17%) , respectively. (E, F and G) The frequencies of of CD3+CD4 +CD45RO+ memory T cells were determined from gated populations that were isolated from a young healthy donor (E, 50.8%), an elderly healthy donor (F, 69.8%), and an ACS patient (G, 78.2%), respectively.