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Supplementary Data

Inhibition of Double-Stranded RNA-Dependent Protein Kinase Strongly Decreases Cytokine Production and Release in Peripheral Blood Mononuclear Cells from Patients with Alzheimer's Disease

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Table 1
Profile of PBMCs from patients with AD

Populations defined by	% of cell phenotype	Range
$CD3^+$ (T cells)	48.93 ± 10.35	[29.2–70.3]
$CD3^+/CD4^+/CD8^-$ (CD4 T cells)	69.58 ± 10.13	[43.9–88.2]
$CD8^+/CD3^+/CD4^-$ (CD8 T cells)	26.25 ± 8.93	[9.1–47]
$CD19^+$ (B lymphocytes)	5.35 ± 0.48	[4.8–6.8]
$CD14^+$ (monocytes)	14.43 ± 5.86	[3.3–26.8]
$CD3^-/CD56^+$ (NK cells)	15.85 ± 3.19	[10.2–24.8]

Cell surface stainings were performed on freshly isolated total PBMCs (200,000 PBMCs per well for each patient in 96-well plates). The following monoclonal antibodies (mAb) were used, all purchased from BD Biosciences (Le Pont de Claix, France) excepted for CD4: anti-CD3-PerCpCy5.5 (clone SK7), anti-CD4-APC- Alexafluor® 750 (clone RPA-T4) (e.Biosciences, CliniSciences s.a.s distributor, Montrouge, France), anti-CD8-FITC (clone SK1), anti-CD19-PeCy^{TM}7 (cloneSJ25C1), anti-CD14-APC, anti-CD56-PE (clone MY31). Cells were analyzed by flow cytometry (FACSCantoII$^{\mathrm{TM}}$ flow cytometer and FacsDIVA software, BD Biosciences). A minimum of 30 000 viable cells were acquired in gated PBMCs (selected by forward and side scatter parameters). For $CD4^+$ and $CD8^+$, signals were analyzed in gated $CD3^+$ cells. Positive staining for each marker was determined by comparison with appropriate isotype-matched negative controls. Results are expressed by mean ± SEM (percentage of PBMC subpopulations excepted for T CD4 and T CD8 in percentage of $CD3^+$ cells).

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