	EGFR	+ GFP		control + GFP				
cor	ntrol	CG962	29 RNAi	control		CG9629 RNAi		
	# with # with			# with		# with		
# tested	tumors	# tested	tumors	# tested	tumors	# tested	tumors	
57	0	59	45	60	0	45	0	

Figure S1: ALDH7A1 depletion promotes tumor formation in vivo

Experimental design: To generate adult-specific, and spatially restricted transgene expression, UAS-transgenes were placed under apterous-Gal4 control. Gal4 activity was inhibited during larval and pupal development using the temperature sensitive form of Gal80^{ts}, by rearing animals at the permissive temperature (18°C). Newly emerged adult flies were shifted to 29°C, inactivating the Gal80 inhibitor and allowing the apterous-Gal4 transgene to direct expression of UAS-EGFR, together with a UAS-GFP marker to label the tissue. A UAS-RNAi transgene targeting CG9629 was used to test tumor formation in the context of EGFR overexpression (left half). GFP-expressing tumors were found in 76% of animals expressing EGFR and the CG9629 RNAi transgene alone.

This assay system has been used to identify context-dependent tumor suppressors based on transgene expression during larval stages (Herranz et al., 2012 <u>Genes Dev</u> 26, 1602-1611). Modification for use to screen for tumor formation in the adult will be described elsewhere (Kugler et al., in preparation)





For each cancer type the box plot at left shows mRNA level in normal and tumor tissue, with mean RSEM (RNA-seq Expectation by maximization) and upper and lower quartile. Outliers were excluded for visualization. Two-tailed Mann Whitney test was used to calculate p-values. Right panels show Kaplan-Meier survival curves for patients with lower (blue), middle (black) and upper (red) thirds of ALDH7A1 mRNA expression. Cox proportion hazards regression models were used to calculate p-values between groups. Abbreviations are TCGA designations for cancer types.



(B) Heatmap of the correlation between ALDH7A1 mRNA expression and EGFR RNA and EGFR phosphorylation in all cancer types. Red: positive correlation coefficients, blue: negative correlation. Correlations with significant p-values are indicated. ALDH7A1 expression positively correlates with EGFR phosphorylation status in GBM, LIHC and kidney (KIRP, but not KIRC), and with EGFR mRNA levels in GBM and LIHC. There is weak negative correlation in colon (COAD) and thyroid (THCA) cancer.



log₂ HR +/- Confidence interval

(C) Cox proportional hazard regression analysis of the association between ALDH7A1 mRNA and EGFR levels for liver and kidney cancer. The box and horizontal lines represent the estimated Hazard Ratio (HR) and corresponding confidence interval. In the liver cancer dataset association between ALDH7A1 expression and poor survival outcome is dependent on EGFR status: survival was significantly worse for patients with low ALDH7A1 in a high EGFR expression/phosphorylation group while it was not significant in low EGFR group. This was not the case for the kidney cancer patients: ALDH7A1 expression was significantly associated with poor clinical outcome in both low and high EGFR groups according to EGFR RNA expression and low EGFR group according to EGFR phosphorylation levels.

Figure S3A: Gene set and pathway analysis comparing low vs high ALDH7A1 tumors

REACTOME	piano	graphite	cepa	gage	esea	REACTOME - continuation	piano	graphite	cepa	gage	esea
abacavir transport and metabolism Activation of ATR in response to replication stress				1	1	Toll Like Receptor 5 (TLR5) Cascade TRAF6 Mediated Induction of proinflammatory cytokines					† †
activation of matrix metalloproteinases		Ť				trans-Golgi Network Vesicle Buting					Ť
Activation of RAS in B cells					t	transport of glucose and other sugars bile salts and organic acids metal ions ar amine compounds	÷ ۲				
Activation of the pre-replicative complex					Ļ	Tristetraprolin (TTP) destabilizes mRNA					Ť
alpha linolenic acid ala metabolism	1		_			U12 Dependent Splicing				_	Ť
Apna-oxidation of phytanate Amino Acid conjugation					1 I	Vinwinding of DNA Xenobiotics					1
assembly of collagen fibrils and other multimeric structures		Ť				Zinc transporters					Ť
Asymmetric localization of PCP proteins AUF1 (hnRNP D0) destabilizes mRNA					Ť						
axon guidance	Ť			1.		KEGG	piano	spia	cepa	gage	esea
Beta oxidation of decanoyl-CoA to octanoyl-CoA-CoA Beta oxidation of hexanoyl-CoA to hutanoyl-CoA					Ļ	Adrenergic signaling in cardiomyocytes Alanine, aspartate and dutamate metabolism			+	1	†
Beta oxidation of lauroyl-CoA to decanoyl-CoA-CoA					1 I	Alcoholism			·	•	Ť
Beta oxidation of octanoyl-CoA to hexanoyl-CoA			_		1	Arginine and proline metabolism	1		1	4	1
biological oxidations	Ļ	•		1 L	1	axon guidance	+	1 T		Ť	
branched-chain amino acid catabolism		Ļ	\$	Ļ	Ļ	beta-Alanine metabolism	Ļ		1	4	1
cell_cycle				t	T	Blater cancer				+	t
cell_cycle_mitotic				Ť		Butanoate metabolism	1		1	4	1
Chromatin modifying enzymes Chromatin organization					Ť	Cell cycle Chemical carcinogenesis	Î			Ť	1
citric_acid_cycle_tca_cycle				1		Cholinergic synapse					
Clathrin derived vesicle but ing collagen degradation		+	_		Ť	Circadian entrainment Citrate cycle (TCA cycle)					Ť
collagen formation		Ť		Ť		complement and coagulation cascades		1	1	•	•
Conjugation of benzoate with glycine Conjugation of carboxylic acide					÷	Cysteine and methionine metabolism					
Conjugation of salicylate with glycine					1 I	Drug metabolism - other enzymes	Ļ			Ļ	Ļ
Cross-presentation of particulate exogenous antigens (phagosomes)	_		_		1	ECM-receptor interaction	_	Ť		Ť	
cytochrome_p450_arranged_by_substrate_type				1	T	Fatty acid degradation	1		1	1	•
Deadenylation-dependent mRNA decay					Ť	Fc gamma R-mediated phagocytosis				1	
DNA Damage-Telomere Stress Induced Senescence		+			†	Folate biosynthesis		Ť		Ť	
dna_replication				Ť		Fructose and mannose metabolism					1
Elongation arrest and recovery ER-Phagosome pathway					Ť	Glycine, serine and threonine metabolism	1		t	÷	1
extracellular matrix organization		1 T		Ť		Glycolysis - Gluconeogenesis	· ·			•	Ļ
factors involved in megakaryocyte development_and_platelet_production fatty acid, triacylolycerol, and katone body metabolism		•		Ť		Glycolysis / Gluconeogenesis Glycoxylate and dicarboxylate metabolism	1			4	1
FCGR activation				•	1	hippo signaling pathway		1 T		•	
Formation of ATP by chemiosmotic cotling formation of fibrin clat (cloting concerts)					Ť	Histidine metabolism	1			1	1
Formation of HIV elongation complex in the absence of HIV Tat		÷		+	Ť	Lysine degradation	Ļ		1		Ļ
Formation of HIV-1 elongation complex containing HIV-1 Tat	_		_		Ť	MAPK signaling pathway	_			Ť	
formation of the beta-catenin-TCF transactivating complex					Ť	maturity onset diabetes of the young	1				+
g_alpha_i_signalling_events				Ť		Melanoma					Ť
Generation of second messenger molecules					Ļ	micromas in cancer	÷	1		+	
Generic Transcription Pathway					Ť	Morphine atiction					Ť
glucose metabolism	1			1		Osteoclast differentiation		+			1
glucuronidation	Ļ			Ļ		Oxidative phosphorylation				1	
glutathione_conjugation glycosaminoglycan_metabolism				Ť		pathways_in_cancer	Ť				
Golgi Associated Vesicle Biogenesis			_		Ť	Pentose and glucuronate interconversions	1			1	1
HATs acetylate histones				1	Ť	Peroxisome Phenylalanine metabolism	+			1	1
HIV Transcription Elongation					Ť	Phenylalanine, tyrosine and tryptophan biosynthesis					1
intrinsic pathway			1	Ļ		Porphyrin and chlorophyll metabolism	Ļ			4	Ļ
intrinsic pathway of fibrin clot formation		1	_			PPAR signaling pathway Briman bits acid biosrathesis	Ļ	1	•	4	
lipid and lipoprotein metabolism		Ļ				Propanoate metabolism	Ļ		¢	Ļ	1
lipid_digestion_mobilization_and_transport				1		Proteoglycans in cancer					Ť
Meiotic synapsis		•		•	Ť	Pyruvate metabolism	Ļ			1	1
metabolism of amino acids and derivatives metabolism of angiotensingeen to angiotensing	Ļ		_	Ļ		Regulation of actin cytoskeleton Renin-angiotensin system				Ť	
metabolism of lipids and lipoproteins	1	Ļ		1		Retinol metabolism	1			÷	1
mitochondrial fatty acid beta oxidation Mitochondrial Fatty Acid Beta-Oxidation	Ļ			1		small cell lung cancer Staphylococcus aureus infection		1			
mitochondrial fatty acid beta-oxidation of unsaturated fatty acids					1 I	Starch and sucrose metabolism	Ļ			Ļ	Ļ
mitotic_m_m_g1_phases mitotic_prometaphase				Ť		Steroid hormone biosynthesis Systemic I1us ervthematosus	1			+	1
MyD88 cascade initiated on plasma membrane					Ť	Tryptophan metabolism	Ļ			1	1
ncam_signaling_for_neunte_out_growth ncam1_interactions				Ť		Tyrosine metabolism Valine, leucine and isoleucine degradation	1		1	1	1
Negative epigenetic regulation of rRNA expression					Ť	Wnt signaling pathway				t	
NORC negatively regulates rKNA expression nuclear_receptor_transcription_pathway				1	Ť	NO	assabile				
o-linked glycosylation		Ť				Beta1 integrin cell surface interactions	graphite	cepa	esea		
o-linked glycosylation of mucins passive_transport_by_aquaporins		Ť		1		Beta2 integrin cell surface interactions			1		
Pausing and recovery of HIV elongation					Ť	hnf3bpathway	1	1	+		
Pacenty and recovery or rat-mediated MIV elongation PD-1 signaling					Ļ	integrins in angiogenesis Regulation of nuclear bets categin signaling and treat and the	1				
peroxisomal lipid metabolism	1			1	Ļ	syndecan-1-mediated signaling events	1				
phase II conjugation	1			1	i	TCR signaling in na <u+00ef>ve CD4+ T cells Urokinase-type plasminggen activator (±A) and ±AP-modiated signaling</u+00ef>			1		
phase1_functionalization_of_compounds				1		erenness the browninger rearries (14) and but increase signaling					
Phosphorylation of CD3 and TCR zeta chains			4		Ļ	BIOCARTA	cepa	gage	esea		
Platelet degranulation					1	reckpathway	1				
PRC2 methylates histones and DNA				1	Ť	the information processing pathway at the ifn beta enhancer		1	Ť		
Pyrimidine catabolism					Ļ	intrinsic prothrombin activation pathway			Ļ		
pyruvate metabolism and citric acid tca cycle				Ļ		basic mechanism of action of ppara pparb(d) and pparg and effects on gene			1		
recycling of bile acids and salts		1		1		expression			1		
Regulation of beta-cell development					Ļ	PANTHERA	graphite	esea			
regulation of gene expression in beta cells respiratory electron transport	Ļ			Ļ	1	Integrin signalling pathway	t				
respiratory electron transport atp synthesis by chemiosmotic coupling and heat				į.		Transcription regulation by bZIP transcription factor		t			
production by uncoupling proteins Response to elevated platelet cytosolic Ca2+					Ļ	General transcription regulation		Ť			
RNA Polymerase II HIV Promoter Escape					t	masminogen activating cascade		↓			
RNA Polymerase II Promoter Escape RNA Polymerase II Transcription Elongation					Ť	HALLMADY CENE CETC 440-DD C-II	place.				
RNA Polymerase II Transcription Initiation					Ť	adipogenesis	piano ↓	gage ↓			
RNA Polymerase II Transcription Initiation And Promoter Clearance RNA Polymerase II Transcription Pre-Initiation And Promoter Opening					† †	allograft_rejection	1	1			
RORA activates circadian gene expression					Ļ	angiogenesis apical_junction		1 1			
scaveriging by class a receptors sema3a pak dependent axon repulsion		† I				bile acid metabolism	1	1			
semaphorin interactions		Ť				epithelial mesenchymal transition	Ť	1 1			
signaling_by_lis				Ť		fatty_acid_metabolism	Ļ	1			
signaling by robo receptor				Ť		heme_metabolism	T	1 1			
synthesis of bile acids and bile salts via 24 hydroxycholesterol			1	1		inflammatory_response		1 1			
synthesis of bile acids and bile salts via 7alpha hydroxycholesterol	Ļ		1	Ļ		oxidative_phosphorylation	Ļ	1			
Tat-mediated elongation of the HIV-1 transcript					†	peroxisome tefa signalion via offeb	1	1			
Tat-mediated HIV elongation arrest and recovery					Ť	xenobiotic_metabolism	Ļ	1			
Toll Like Receptor 10 (TLR10) Cascade					Ť						

(A) For each method and corresponding annotation set, significantly affected pathways and biological processes where selected (p<0.05). Pathways and biological processes that were changed in both LIHC and KIRC patients with low ALDH7A1 are shown. \uparrow - activated; \downarrow - inactivated pathways and biological processes; \updownarrow - direction is not provided.

S3B: Effects of low ALDH7A1 on pathways in KIRC



Figure S4: metabolite profiles on cancer cell lines



(A, D) Principal component analysis shows a clear separation between control and ALDH7A1 depleted cells (Blue dots – control cells, red dots – ALDH7A1 depleted cells). This difference is somewhat smaller in magnitude than in BJ cells.

(B, E) Volcano plot of significance versus log_2 fold change of all intensity points of the spectra above median. The x axis – log_2FC between control and ALDH7A1 depleted cells (threshold log_2FC +/- 0.25). The y axis - significantly increased (red) or decreased (blue) points (p. value >0.05).

(C, F) Average ¹H NMR spectra of control (blue) and ALDH7A1 depleted cells (red). Red - significantly upregulated metabolites; blue - downregulated metabolites; black – no change.

(G) Zoomed in region of spectra (3.23-3.18) where phosphocholine and glycerophosphocholine peaks are located.

In all three cell lines, lactose levels decreased and glucose levels increased. In Huh7 cells we see a reduction in glycerophosphocholine (GPC), phoshocholine and choline levels. We were not able to detected phosphocholine and glycerophosphocholine (GPC) in caki2 cells as it was below the detection level. The effects on amino acids were cell line dependent.

Huh7 and Caki2 ¹H NMR spectra were processed and analyzed as described for BJ cells in the methods section. Briefly spectra were normalized against total intensity of a spectral region (above 1.5). "CluPA" algorithm was used to align peaks. "Rolling ball" algorithm (span – 50) was applied to correct shifting baseline. Baseline correction, data binning (bin=4), normalization and peak alignment was done using R package "ChemoSpec".

Figure S5: assessment of correlation between PPAR activity and ALDH7A! on other

cancers



(A) The "low activity", "intermediate" and "normal like" PPAR signature groups were identified as described for Figure 5.

(B) Survival outcome was compared as described in Figure 5. The HNSC, LUSC, KIRP, BRCA patient groups with low PPAR activity did not exhibit significantly lower overall survival probability compared to "normal-like" PPAR group for these cancers. BLCA showed worse survival for both the low and intermediate PPAR groups compared to the normal-like group.

(C) ALDH7A1 expression was assessed in the three PPAR activity groups, as described in figure 5. There was no correlation between low PPAR activity and low ALDH7A1 levels.



Figure S6: effects of PPAR agonists

(A) Immunoblots showing ALDH7A1 protein in BJ-4F3 cells treated with the PPAR agonists. The PPAR α agonist ciprofibrate (Cipr) was used at 400 and 600 μ M; the PPAR β agonist GW501516 (GW) was used at 60 and 80 μ M; the PPAR γ agonist rosiglitazone (Rosi) was used at 100 μ M and 150 μ M. Sh-1 and sh-2 show the effect of shRNA mediated depletion of ALDH7A1. Control 1 (C-1) indicates cells transduced with the empty vector. Control 2 (C-2) expressed a non-targeting shRNA Anti-actin was used to control for loading.

(B-C) Quantification of wound healing assays after 24h migration. Cells were treated with PPAR β and PPAR γ agonist or DMSO as a control. The migrated distance was measured (μ m), and averages from three independently transduced cell lines were calculated (± SEM)

(D) Quantification of cell invasion through Matrigel over 24h. BJ-4F3 cells were treated with PPAR β agonist or DMSO as a control. The bar plots show the percent of cells that crossed the matrigel barrier (average of 3 independent experiments ± SEM). The two-tailed Mann Whitney test was used to calculate p-values.

(E-F) RT-PCR of PPAR transcriptional targets. Light grey – control cells transduced with the empty vector and non-targeting shRNA, accordingly. Black – ALDH7A1 depleted cells transduced with two independent shRNAs (sh-1 and sh-2). Data represent average \pm standard error of the mean (SEM) from 3 independent experiments normalized to β -actin, kif1 and tbp (in the case of Huh7 cells) and kif1 (Caki2 cells). The twotailed Mann Whitney test with adjustment for False Discovery Rate was used to calculate p-values.

(G) RT-qPCR of PPAR transcriptional targets in cells treated with Ciprofibrate. Light grey – control cells transduced with non-targeting shRNA and ALDH7A1 depleted cells transduced with shRNAs (sh-1). Cells were seeded and allowed to attach overnight and then treated with Ciprofibrate or DMSO. Cells were collected for RNA extraction and RT-qPCR. β -actin was used as normalization control. Friedman rank sum test with pairwise post-hoc test for multiple comparisons with holms adjustment was used to calculate p-values between groups with and without Ciprofibrate treatment. Data represents average ± SEM from 2 independent experiments.



Figure S7: Assays on cancer cell lines

Cell line	Tissue	Migration ¹	PPAR ²	Rescue ³	Source	Mycoplasma tested	validation
HepG2	Liver	Yes on collagen	No	Yes	Hong lab IMCB A*STAR, 2012	Hong Lab	phenotype, behaviour
HepG2	Liver	Yes on collagen	No	Yes	Bisgaard lab, ICMM, KU, 2016	Bisgaard lab	phenotype, behaviour
C3A	Liver	Yes on collagen	No	Yes	ATCC, product CRL-10741, 2017	ATCC	ATCC
HepRC	Liver	No	not done	not done	Bisgaard lab, ICMM, KU, 2016	Bisgaard lab	Bisgaard lab
Нер3В	Liver	not done 4	not done	not done	Hong lab IMCB A*STAR, 2012	Hong Lab	phenotype, behaviour
JHH6	Liver	No	No	not done	JCRB Cell Bank, JCRB1030, 2017	JCRB	JCRB
JHH7	Liver	growth arrest	not done	not done	JCRB Cell Bank, JCRB1031, 2017	JCRB	JCRB
HUH7	Liver	Yes	Yes	Yes	Bisgaard lab, ICMM, KU, 2016	Bisgaard lab	phenotype, behaviour
BFTC-909	Kidney 4	No	No	not done	DMSZ, ACC 367, 2017	DMSZ	DMSZ
Caki2	Kidney	Yes	Yes	Yes	Bisgaard lab, ICMM, KU, 2016	Bisgaard lab	Bisgaard lab
Caki1	Kidney	growth arrest	not done	not done	Bisgaard lab, ICMM, KU, 2016	Bisgaard lab	Bisgaard lab

Notes:

1) Scratch assays were performed as described in Figure 1.

2) "PPAR signature" was examined by qPCR for selected PPAR targets, as in Figure 5. Yes indicates changes in PPAR target expression.

3) "Rescue" indicates suppression of the cellular phenotype by treatment with the PPAR alpha agonist, as in Figure 6.

4) Hep3B cells detach very easily, so the scratch assay cannot be done. All other kidney cell lines we tested do not grow as a monolayer that lends itself to this kind of assay.

LIHC (n:	=120)	KIRC	KIRC (n=149)				
Stage	Nr. of patients	Stage	Nr. of patients				
Ĩ	7	I I	75				
Ш	54	Ш	24				
	56		27				
IV/III-IV	3	11/11/11/	19				
Grade	Nr. of natients	Grade	Nr. of natients				
61	A	61	29				
62/61-62	75	62/61-62	2J /1				
G2/G1-G2 /5		62/61-62	50				
05/02-05	41	G3/G2-G3	20				
2117472	Nr. of patients	04/05-04 STATUS	20 Nr. of patients				
STATUS	NI. OF patients	STATUS	NI. OF patients				
Survivors	54	Survivors	65				
Deceased	00	Deceased	29				
Follow up time	004.447.0	Follow up time	57.4.1.04.4				
Average, SD	29.1+/-17.9	Average, SD	57.4 +/- 24.4				
Median Modia among the	26.5	Median Media among the	68				
weula among the	39	Media anong the	74				
Median among the		Median among the					
deceased	17.5	deceased	34				
ALDH7A1 depletion	_	ALDH7A1 depletion	1				
score	Nr. of patients	score	Nr. of patients				
-4	8	-4	2				
-3	14	-3	5				
-2	23	-2	21				
-1	30	-1	40				
0	37	0	57				
1	6	1	23				
2	2 1						
3	1						
ALDH7A1 score		ALDH7A1 score					
(Normal tissue)	Nr. of patients	(Normal tissue)	Nr. of patients				
4	66	4	72				
3	32	3	60				
2	13	2	14				
1	7	-	2				
0	1	-	-				
ALDH7A1 score		ALDH7A1 score					
(Tumor tissue)	Nr. of patients	(Tumor tissue)	Nr. of patients				
4	27	4	41				
3	24	3	56				
2	24	2	36				
- 1	28	- 1	12				
0	17	0	3				

Figure S8. Clinical characteristics of the patients included in the study