Supplemental Material

Both TMEM16F-dependent and TMEM16F-independent pathways contribute to phosphatidylserine exposure in platelet apoptosis and platelet activation

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Running title: Role of TMEM16F in platelet phosphatidylserine exposure

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Supplemental Figure 1. Absence of high PS-exposing fraction in Scott syndrome platelets treated with ABT737

(A) Washed platelets from healthy control subjects or a patient with Scott syndrome were stimulated by ABT737 (0.33-10 μM) in the presence of 1 mM CaCl₂. Representative flow cytometry histograms and dot plots of AF647-annexin A5 binding after 1 hour stimulation with ABT737 of control (black) and Scott platelets (grey curves). (B) Fluo-4-loaded platelets were stimulated with ABT737 (1 μM) for 1 hour in the presence of 1 mM CaCl₂. Fluo-4 fluorescence was determined of the M1, M2 and M3 fractions. Mean ± S.E.M. (n=4), * p<0.05.
Supplemental Figure 2. ABT737-induced PS exposure in Scott syndrome platelets is caspase-dependent. Washed platelets from healthy control subjects or a patient with Scott syndrome were stimulated by ABT737 (10 μM) in the presence of 1 mM CaCl₂. (A) Caspase activity after 1 hour of ABT737 treatment (arbitrary fluorescence units/min). (B) Effects of caspase inhibition (20 μM Q-VD-Oph, 10 minutes) on percentage of annexin A5-positive platelets (M2 plus M3 fractions). Mean ± S.E.M. (n=3), * p <0.05.